

positive habits

Learning Objective: Each student will understand how the brain creates habits, patterns, and addictions. Students will self-identify personal habits, patterns, and/or addictions in their lives, and learn how to create new, healthier habits and patterns in their lives.

Quiz Reflection:

Video Reflection:

Podcast Reflection:

Goals:

1.
What? _____
Why? _____
How? _____

2.
What? _____
Why? _____
How? _____

3.
What? _____
Why? _____
How? _____

Make sure your goals are:

- 1. Obvious
- 2. Attractive
- 3. Easy
- 4. Satisfying

Final Thoughts:



Access your Online Dashboard

Login at my.schoolpulse.org

Not signed up?
Text DHHS to 78573

positive habits quiz

This quiz is for your personal awareness. Your answers will be kept completely anonymous.

1. Do you use any addictive substances or content? (Marijuana, alcohol, nicotine, illegal drugs, painkillers, stimulants, video games, pornography, social media, etc.)

- Never Rarely Sometimes
 Often Very often

2. Do you find your self thinking about an addictive behavior when your focus should be elsewhere?

- Never Rarely Sometimes
 Often Very often

3. Do you get irritable, anxious, or angry when you don't participate in an addictive behavior?

- Never Rarely Sometimes
 Often Very often

4. Do your thoughts revolve around the next time you will participate in an addictive behavior?

- Never Rarely Sometimes
 Often Very often

5. Do you take dangerous or impulsive risks to participate in an addictive behavior?

- Never Rarely Sometimes
 Often Very often

6. Do you lower or disregard your morals to participate in an addictive behavior?

- Never Rarely Sometimes
 Often Very often

7. Do you participate in an addictive behavior in secret?

- Never Rarely Sometimes
 Often Very often

9. After not participating in an addictive behavior for a long period of time, do you experience difficulty sleeping?

- Never Rarely Sometimes
 Often Very often

10. Do you engage in an addictive behavior to help you cope, relax, or feel happy?

- Never Rarely Sometimes
 Often Very often

11. Do you no longer participate in activities or relationships that you used to enjoy?

- Never Rarely Sometimes
 Often Very often

12. Do you feel lonely?

- Never Rarely Sometimes
 Often Very often

13. Do you have to regularly increase or intensify an addictive behavior to receive the same satisfaction that you used to experience?

- Never Rarely Sometimes
 Often Very often

14. Has an addictive behavior caused health problems or financial struggle in your life?

- Never Rarely Sometimes
 Often Very often

15. Do you feel at a loss of control or enslaved if/when you are participating in an addictive behavior?

- Never Rarely Sometimes
 Often Very often



quiz results

Use your quiz answers to add up your points.

Never = 1 point
Rarely = 2 points
Sometimes = 3 points
Often = 4 points
Very Often = 5 points

Total Points: _____

15-30 - little to no indication of an addiction	31-45 - mild indication of an addiction	46-60 - moderate indication of an addiction	61-75 - strong indication of an addiction
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These results are not a diagnosis, if you have questions text us at SchoolPulse.

confidentiality agreement

This class should be a safe place for participants. Participants are expected to keep anything said during this class by other class members confidential. This is not meant to encourage secret-keeping, but rather to protect everyone's privacy and ensure that this class is a safe place to share feelings. Class members are expected to treat one another with respect.

Confidentiality within this class is based on mutual trust. Legal exceptions to confidentiality include a clear or present danger to harm yourself or another, knowledge or suspicion of the abuse or neglect of a minor or incapacitated adult, or any other information legally required to be reported to social services.

I _____, agree to not disclose to anyone outside this class any information that may help to identify another class member. This includes, but is not limited to, names, physical descriptions, biological information, and other specifics about interactions with other group members.

Student Signature

Date