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Памірський М.С. Памірська Л.Ю.

Психолого-педагогічна література англійською МОВОЮ

Інструктивно-методичні матеріали

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П 15

Памірський М.С., Памірська Л.Ю.

Психолого-педагогічна література англійською мовою:
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Навчальний посібник включає комплекс завдань для вдосконалення умінь усного та письмового мовлення. Створений на базі автентичних текстів для читання, укладених відповідно до тематики діючих програм з англійської мови для університетів з метою розвитку лінгвістичної, культурної, соціокультурної та професійно-педагогічної компетенції. Посібник максимально поєднує вивчення англійської мови та набуття спеціальних знань студентами соціально-психологічного та педагогічного факультетів.

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Передмова

Цей посібник створений працівниками кафедри іноземних мов Житомирського державного університету імені Івана Франка. Він призначений для студентів III курсів соціально-психологічного факультету та факультетів підготовки вчителів початкових класів.

Метою посібника є вдосконалення комунікативних умінь усного та писемного мовлення за допомогою автентичних текстів для читання, укладених відповідно до тематики спецкурсів «Психологічна література іноземною мовою» та «Професійна література іноземною мовою» на соціально-психологічному факультеті та факультеті підготовки вчителів початкових класів.

Посібник побудований з урахуванням сучасних концепцій методики викладання іноземних мов: комунікативної індивідуалізації навчання іноземної мови та іншомовної освіти у вищих навчальних закладах.

Посібник містить завдання для розвитку комунікативної, лінгвістичної, соціокультурної та професійно-педагогічної компетенції майбутніх практичних психологів, соціальних педагогів та вчителів початкових класів.

Посібник складається з 10 розділів. Основою кожного розділу є автентичний текст. Послідовність завдань визначена з урахуванням психологічних механізмів розвитку комунікативних умінь та етапів роботи з текстом.

Автори посібника пропонують завдання, розроблені з використанням новітніх технологій навчання іноземних мов у вищих навчальних закладах.

Співпраця соціально-психологічного факультету із зарубіжними психологами та психологічними організаціями показала, що наші викладачі та студенти мають не гіршу, а в теоретичному плані – кращу підготовку, ніж наші закордонні колеги. Єдине, що заважає нам повноцінно влитися у європейську психологічну сім'ю – це погане знання іноземних мов. З цієї причини на соціально-психологічному факультеті значно збільшено кількість годин на вивчення іноземної мови за рахунок введення курсу „Психологічна література іноземними мовами”. Як видно з назви

курсу він будується на оригінальних психологічних текстах англійською мовою. Робота студентів з цими текстами дозволить їм використовувати досягнення зарубіжних дослідників при написанні курсових і дипломних робіт. Автори курсу не обмежились завданням навчити студентів читанню і перекладу. В основу його розробки покладено принцип комунікативної індивідуалізації навчання, який спрямовує мовленнєву підготовку студентів на живе професійне спілкування. Кілька зустрічей з іноземцями, які відбулись на факультеті останнім часом, показали, що комплекс неповноцінності, який був викликаний незнанням іноземних мов, нам вдалося подолати. На далі ми плануємо розширювати психологічну наукову бібліотеку іноземними мовами, публікації наукових праць, у тому числі і студентських, у зарубіжних виданнях. Сподіваємося, що ця книга стане першою в цілій серії подібних видань, які допоможуть студентам соціально-психологічного факультету відчувати себе частиною європейського студентства.

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LIVING WITH ATTENTION DEFICIT HYPERACTIVITY DISORDER

I. Pre-reading Activities.

1. In groups of four, discuss the following questions:

1. What do you know about attention problems of all school-age children?
2. What factors cause attention problems?
3. Do you think it is difficult to organize children in the junior forms?

2. Do you agree or disagree with the following statements? Give your reasons.

1. It is difficult to organize children in junior forms.
2. Six year old children differ from seven year old children.
3. Nowadays, the majority of children are hyperactive.

3. These words below are found in this chapter. Give your own definition for these words:

inattentiveness, impulsive, hyperactivity, environment, disorder, mental, glucose, diet, symptoms, deficit, control, planning, specialist, channel, fluorescent.

4. Read the following word combinations and check off those which, in your opinion, can characterize a child with attention deficit and hyperactivity disorder:

1. to show poor planning and judgement,
2. to shift from risky behavior to delinquency,
3. to be reserved and calm,
4. to filter out important information,
5. to focus on the topic,
6. to be constantly fidgeting.

5. Before reading the text, think about its title.

II. Active Reading Activities.

1. Scan the text for answers to the following questions:

1. What does CAL suffer from?
2. What causes ADHD?
3. Is ADHD just a childhood condition?
4. What problems does ADHD pose?

"SIT STILL AND PAY ATTENTION!"

"All along, Jim had said that CAL was just spoiled and that if we – meaning me – cracked down on him, he'd shape up. Now here was this doctor telling us that it wasn't me, it wasn't us, it wasn't CAL's teachers; something really was wrong with our little boy."

CAL suffers from Attention Deficit Hyperactivity Disorder (ADHD). A condition characterized by inattentiveness, impulsive behavior and hyperactivity. The disorder is estimated to affect from 3 to 5 percent of all school-age children. "Their minds are like TV sets with faulty channel selectors", says learning specialist Priscilla L. Vail. "One thought leads to another, with no structure or discipline".

Let us briefly consider three major symptoms of ADHD.

Inattentiveness: The child with ADHD cannot filter out unimportant details and focus on one topic. Thus, he is easily distracted by extraneous sights, sounds and smells. He is paying attention, but no single feature in his environment stands out. He cannot determine which one deserves his primary concentration.

Impulsive behavior: The ADHD child acts before he thinks, without considering the consequences. He shows poor planning and judgement, and at times his actions are dangerous. "He rushes into the street, onto the ledge, up the tree," writes Dr. Paul Wender. "As a result, he receives more than his share of cuts, bruises, abrasions, and trips to the doctor".

Hyperactivity: Hyperactive children are constantly fidgeting. They cannot sit still. "Even when they are older," Dr. Gordon Serfontein writes in his book *The Hidden Handicap*, "careful observation will reveal some form of continuous movement involving the legs, feet, arms, hands, lips or tongue".

Yet, some children who are inattentive and impulsive are not hyperactive. Their disorder is sometimes referred to simply as Attention Deficit Disorder.

Over the years, attention problems have been blamed on everything from bad parents to fluorescent lighting. It is now thought that ADHD is associated with disturbances in certain brain functions. In 1990 the National Institute of Mental Health tested 25 adults with ADHD symptoms and found that they metabolized glucose slower in the very areas of the brain that control movement and attention. In about 40 percent of ADHD cases, the individual's genetic makeup seems to play a role. According to *The Hyperactive Child Book*, other factors that may be associated with ADHD are the use of alcohol or drugs by the mother during pregnancy, lead poisoning, and, in isolated cases, diet.

In recent years doctors have found that ADHD is not just a childhood condition. "Typically," says Dr. Larry Silver, "a parent will bring in a child for treatment and say, 'I was the same when I was a kid.' Then they admit they still have problems waiting in line, sitting through meetings, getting things done". It is now believed that about half of all children with ADHD carry at least some of their symptoms into adolescence and adulthood.

During adolescence, those with ADHD may shift from risky behavior to delinquency. "I used to worry that he wouldn't get into college," says the mother of an ADHD adolescent. "Now I just pray that he stays out of jail".

For an adult, ADHD poses a unique set of problems. Dr. Edna Copeland says: "The hyperactive boy may turn into an adult who changes jobs frequently, gets fired a lot, fiddles all day and is restless." "You have to ask if the symptoms have always been there", says Dr. George Dorry. For example, he notes that if a man has been forgetful only since he lost his job or since his wife gave birth, that's not a disorder.

Furthermore, if one truly has ADHD, the symptoms are pervasive – that is, they affect almost every aspect of the person's life. Such was the case with 38-year-old Gary, an intelligent, energetic man who could not seem to complete a single task without being distracted. He has already held more than 120 jobs. "I had just accepted the fact that I couldn't succeed at all," he said. But Gary and many others – children, adolescents, and adults – have been helped to cope with ADHD.

2. True or false. Correct the wrong ones.

1. The child with ADHD can filter out unimportant details.

2. The ADHD child acts before he thinks.
3. The ADHD child shows good planning and judgement.
4. The child with ADHD can focus on one topic.
5. Some children who are inattentive and impulsive are not hyperactive.
6. In about 10 percent of ADHD cases, the individual's genetic makeup plays a role.
7. In recent years, doctors have found that ADHD is just a childhood condition.
8. For an adult, ADHD poses a unique set of problems.
9. During adolescence, those with ADHD may shift from risky behavior to delinquency.

3. Complete the following sentences:

1. CAL suffers from ADHD, a condition characterized by ...
2. The disorder is estimated from 3 to 5 percent of ...
3. The child with ADHD can not filter out ...
4. He shows poor planning and judgement, and ...
5. Yet, some children, who are inattentive and impulsive are ...
6. It is now thought that ADHD is associated with ...
7. According to the Hyperactive child book, other factors that may be associated with ADHD are ...
8. It is now believed that about half of all children with ADHD carry ...
9. During adolescence, those with ADHD may shift from risky behavior to ...
10. The hyperactive boy may turn into an adult who ...

4. Fill in the missing word from the box below:

suffers, hyperactivity, filter out, the consequences, planning, judgement, condition, delinquency, adulthood, traits, to cope, adolescents.

1. CAL ... from ADHD, a condition characterized by in attentiveness, impulsive behavior and ...
2. The child with ADHD cannot ... unimportant details and focus on the topic.
3. The ADHD child acts before he thinks without considering ...
4. He shows poor ... and ..., and at times his actions are dangerous.
5. In recent years, doctors have found that ADHD is not a childhood ...
6. During adolescence, those with ADHD may shift from risky behavior to ...

7. It is now believed that about half of all children with ADHD carry at least some of their symptoms into adolescence and ...
8. Of course, these ... are common to many people.
9. Gary and many others – children, ..., and adults – have been helped ... with ADHD.

5. Find pairs!

1. Cal suffers from	a) TV sets with faulty channel selectors;
2. The disorder is estimated	b) Attention Deficit Hyperactivity Disorder;
3. Their minds are like	c) to affect from 3 to 5 percent of all school-age children;
4. The child with ADHD cannot	d) without considering the consequences;
5. The ADHD child acts before he thinks	e) and at times his actions are dangerous;
6. Yet, some children who are inattentive and impulsive	f) filter out unimportant details;
7. The ADHD child shows poor planning and judgement	g) are not hyperactive

III. Post-reading Activities.

1. Discuss the following questions in groups of four:

1. What major symptoms characterize ADHD?
2. Are these traits common for many people?
3. Does ADHD pose a unique set of problems for an adult?

2. Make up a dialogue using a model as a beginning:

- Hello, Oksana!
- Hello, Lena! I haven't seen you for a long time. Where have you been?
- This week I've been at school №34. It was my pedagogic-psychological practice.
- Oh! That's interesting. What are your impressions?

- I liked my practice. But, most of all, I liked the teacher of junior forms Olena Sergiyivna. She was kind and patient. You know, Oksana, children of junior forms are very active; some of them are inattentive and it is difficult to organize them.

-You are right. Not long ago I read the article about ADHD ...

3. Imagine you are school teachers. Consider possible psychological games with inattentive and hyperactive children to avoid these characteristics.

4. Comment on the following situation:

Imagine you are school teachers:

1. There are some pupils with ADHD in your class. Characterize them.
2. You should talk to the parents of the child with ADHD. Tell parents what problems their child may have in adolescence and adulthood.

MEETING THE CHALLENGE

I. Pre-reading Activities

1. In groups of four discuss the following questions:

1. What treatments do you know for ADHD?
2. Can these treatments also be pursued by adults with ADHD?
3. Does the child with ADHD need to set realistic goals?

2. Do you agree or disagree with the following statements. Give your reasons:

1. Low self-esteem is a killer.
2. In the family where there is an ADHD child, there is almost a third higher instance of marital discord and breakdown than in the normal population.

3. These words below are found in this chapter. Give your own definition for these words:

food additives, nutritional solutions, medication, behaviour modification, cognitive training, stimulant, solid structure, consistent, reward, penalty, strict routine, schedule, license, legitimate, ugly, stupid, good-hearted, killer, adequate, cooperate, tremendous.

4. Read the title of the text and on the basis of new words try to guess what it is about.

II. Active Reading Activities

1. Scan the text for the answers to the following questions:

1. What methods of treating ADHD are discussed in this article?
2. Does medication take the place of learning?
3. Does a child's ADHD absolve parents from the obligation to discipline?
4. What does cognitive training include?

Meeting the Challenge: Providing Support

Over the years, several treatments have been proposed for ADHD. Some of these have focused on diet. However, some studies suggest that food additives do not usually cause hyperactivity and that nutritional solutions are

often ineffective. Other methods of treating ADHD are medication, behavior modification, and cognitive training.

Since ADHD apparently involves a brain malfunction, medication for restoring the proper chemical balance has proved helpful to many. However, medication does not take the place of learning. It merely helps the child focus his attention, giving him a foundation upon which to learn new skills.

Many adults with ADHD have likewise been aided by medication. However, caution is in order — with youths and adults — since some stimulant medication used to treat ADHD can be addictive.

Behavior modification. A child's ADHD does not absolve parents from the obligation to discipline. In her book *Your Hyperactive Child*, Barbara Ingersoll notes: "The parent who simply gives up and lets his hyperactive child 'run wild' does the child no favor. Just like any other child, the hyperactive child needs consistent discipline coupled with respect for child as a person. This means clear limits and appropriate "rewards and penalties."

It is therefore important that parents provide solid structure. Furthermore, there should be a strict routine in daily activities. Parents may wish to give child some latitude in making up this schedule, including a time for homework, study, bath, and so forth. Then be consistent in following through. Make sure that the daily routine is adhered to. Phi Delta Kappan notes:

"Physicians, psychologists, school officials, and teachers have an obligation to the child and the child's parents to explain that the classification of ADD or ADHD is not a license to get away with anything, but rather an explanation that may lead to legitimate help for the child in question."

Cognitive training. This includes helping the child to change his view of himself and his disorder. "People with attention deficit disorder feel 'ugly, stupid, and even if they are attractive, intelligent, and good-hearted,'" observes Dr. Ronald Goldberg. Therefore, the child with ADD or ADHD needs to have a proper view of his worth, and he needs to know that his attention difficulties can be managed. This is especially important during adolescence. By the time a person with ADHD reaches the teenage years, he may have experienced much criticism from peers, teachers, siblings, and perhaps even from parents. He now needs to set realistic goals and to judge himself fairly rather than harshly.

The above approaches to treatment can also be pursued by adults with ADHD. "Modifications are necessary based on age," writes Dr. Goldberg, "but the underpinnings of treatment—medication where appropriate, behavior modification, and cognitive (training)—remain valid approaches throughout the

life cycles." John, the father of an adolescent with ADHD, says to parents in a similar circumstance: "Learn all you can about the problem. Make informed decisions. Above all, love your child, build him up. Low self-esteem is a killer."

For the child with ADHD to have adequate support, both parents must cooperate. Dr. Gordon Serfontein writes that a child with ADHD needs "to know that he is loved within the home and that the love comes from the love that exists between the parents. "Unfortunately, such love is not always demonstrated. Dr. Serfontien continues: "It has been well established that in the family where there is (an ADHD child), there is almost a third higher instance of marital discord and breakdown than in the normal population."

Close friends, although not part of the family can be of tremendous support. How? "Be kind," says John, quoted earlier. "Look deeper than your eyes can see. Get to know the child. Speak with the parents too. How are they doing? What do they contend with from day to day?"

2. True or false. Correct the wrong ones.

1. Some studies suggest that food additives usually cause hyperactivity.
2. Nutritional solutions are often effective.
3. Medication does not take the place of learning.
4. A child's ADHD doesn't absolve parents from the obligation to discipline.
5. The hyperactive child doesn't need consistent discipline.
6. It is important that parents provide solid structure.
7. Cognitive training includes helping the child to change his view of himself and his disorder.
8. The child with ADHD needs to know that his attention difficulties can be managed.
9. A person with ADHD doesn't need to set realistic goals.

3. Complete the following sentences:

1. Medication merely helps the child...
2. The hyperactive child needs...
3. It is important that parents ...
4. The parent who simply gives up and...
5. Cognitive training includes...
6. By the time a person with ADHD reaches the teenage years, he may...
7. A person with ADHD needs to set...
8. For the child with ADHD to have adequate support, both parents...

9. Close friends, although not part of the family can...

4. Fill in the missing word from the box below:

diet, hyperactivity, ineffective, medication, limits, rewards, penalties, routine, ugly, stupid, attractive, intelligent, good-hearted, realistic, killer

1. Some of the treatments have focused on_____.
2. Food additives do not usually cause_____.
3. Nutritional solutions are often_____.
4. _____doesn't take place of learning.
5. Consistent discipline means clear _____and appropriate_____ and_____.
6. There should be a strict _____in daily activities.
7. People with attention deficit disorder feel_____, _____, and even if they are _____, _____, and_____.
8. A person with ADHD needs to set _____goods.
9. Low self-esteem is a_____for a child with ADHD.

5. Find pairs!

1. Some methods of treating ADHD are	a) focus his attention giving him a foundation upon which to learn new skills behavior;
2. Medication merely helps the child	b) modification, medication and cognitive training;
3. The hyperactive child needs	c) have an obligation to the child
4. Physicians, psychologists, school officials and teachers	d) consistent discipline;
5. The child with ADHD needs	e) necessary based on age;
6. Modifications are	f) to have a proper view of his worth;
7. For the child with ADHD to have adequate support	g) both parents must cooperate

III. Post-reading Activities.

1. Discuss the following questions in groups of four:

1. Why does the child with ADHD need to have a proper view of his worth especially during adolescence?
2. Is it necessary for the child with ADHD to have parental support?

2. Comment on the following situations:

Imagine you are school psychologists:

1. You need to talk to teachers where there are children with ADHD. Give as much advice as possible to them.
2. You need to talk to the parents of the child with ADHD. Provide support.

3. Write an article entitled “A Word of Caution to Parents” to a magazine.

Use this model as a beginning:

“Virtually all children are at times inattentive, impulsive and overactive. The presence of these traits doesn’t always indicate ADHD. Even if a diagnosis is made, parents would do well to weigh the pros and cons of medication...”

LIVING WITH A LEARNING DISABILITY

I. Pre-reading Activities.

1. In groups of four discuss the following questions:

1. What pupils do we call lazy and slow-witted?
2. Is it inevitable that some pupils will have learning problems?
3. Should children with learning problems neglect discipline?

2. These words below are found in this chapter. Give your own definition for these words:

Math, number, disposition, intelligence, extreme, dysgraphia, basic, dyscalculia, affect, challenge, oriented, method, effort, manner, analogy, tone, motivation, focus, aspect, paradox, presence, self-image, arithmetic, advocate, competency, panic, immobilized, extra, discipline, standards, illustrate, expert, special

3. Before reading the text, think about its title. Find articles (information) about learning problems in Ukraine. Be ready to present these stories in class.

II. Active Reading Activities.

1. Scan the text for the answers to the following questions:

1. What do we call dysgraphia?
2. What do we call dyscalculia?
3. Is there a difference between simple learning problems and disabilities?

Living With a Learning Disability

Six-year-old David's favorite part of the day is story time. He loves it when Mom reads to him, and he has no trouble remembering what he hears. But David has a problem. He cannot read for himself. In fact, any task that requires visual skill frustrates him.

Sarah is in her third year of school, yet her writing is unusually sloppy. Her letters are poorly formed, and some of them are written backward. Adding to her parents' concern is the fact that Sarah has trouble even writing her own name.

Josh, a young teen, does well in every subject at school except math. The concept of numerical values completely baffles him. Just looking at numbers makes Josh angry, and when he sits down to do his math homework, his disposition rapidly deteriorates.

WHAT is wrong with David, Sarah, and Josh? Are they simply lazy, stubborn, perhaps slow-witted? Not at all. Each of these children is of normal to above-average intelligence. Yet, each one is also hampered by a learning disability. David suffers from *dyslexia*, a term that is applied to a number of reading problems. Sarah's extreme difficulty with writing is called *dysgraphia*. And Josh's inability to grasp the basic concepts of math is known as *dyscalculia*. These are just three learning disabilities. There are many more, and some experts estimate that altogether they affect at least 10 percent of the children in the United States.

Granted, at times most youths find learning to be a challenge. Usually, though, this does not indicate a learning disability. Instead, it simply demonstrates that all children have learning strengths and weaknesses. Some have strong hearing skills; they can absorb information quite well by listening. Others are more visually oriented; they learn better by reading. In school, however, students are clustered into a classroom and all are expected to learn regardless of the teaching method used. Hence, it is inevitable that some will have learning problems.

According to some authorities, however, there is a difference *learning problems* and *learning disabilities*. It is explained that learning problems can be overcome with patience and effort. In contrast, learning disabilities are said to be more deep-rooted. "The learning disabled child's brain seems to perceive, process, or remember certain kinds of mental tasks in a faulty manner," write Drs. Paul and Esther Wender.

Still, a learning disability does not necessarily mean that a child is mentally handicapped. To explain this, the Wenders draw an analogy with tone-deaf people, who cannot distinguish differences in musical pitch. "Tone deaf people are not brain-damaged and there is nothing wrong with their hearing," Wenders writes. "Nobody would suggest that tone deafness is due

to laziness, poor teaching, or poor motivation." It is the same, they say, with those who are learning disabled. Often, the difficulty focuses on one particular aspect of learning.

This explains why many children with learning disabilities have average to above average intelligence; indeed, some are extremely bright. It is this paradox that often alerts doctors to the possible presence of a learning disability. The book *Why Is My Child Having Trouble at School?* explains: "A child with a learning disability is functioning two or more years below the expected level for his age and his assessed IQ." In other words, the problem is not simply that the child has trouble keeping up with his peers. Rather, his performance is not on par with *his own* potential.

The emotional effects of a learning disability often compound the problem. When children who are learning disabled do poorly in school, they may be seen as failures by their teachers and peers, perhaps even by their own family. Sadly, many such children develop a negative self-image that can persist as they grow. This is valid concern, since learning disabilities generally do not go away. "Learning disabilities are life disabilities," writes Dr. Larry B. Silver. "The same disabilities that interfere with reading, writing, and arithmetic also will interfere with sports and other activities, family life, and getting along with friends."

It is essential, therefore, that children with learning disabilities receive parental support. "Children who know that their parents are strong advocates for them have a basis for developing a sense of competency and self-esteem," says the book *Parenting a Child With a Learning Disability*.

But to be advocates, parents must first examine their own feelings of guilt, as if they were somehow to blame for their child's condition and feeling overwhelmed by the challenges set before them. Both of these reactions are not helpful. They keep the parents immobilized and prevent the child from getting the help he needs.

So if a skilled specialist determines that your child has a learning disability, do not despair. Remember that children with learning disabilities just need extra support in a specific learning skill. Take the time to become familiar with any programs that may be available in your area for children who are learning disabled. Many schools are better equipped to deal with such situations than they were years ago.

Experts emphasize that you should praise your child for any accomplishments, no matter how small. Be generous with commendation. At the same time, do not neglect discipline. Children need structure, and this is

all the more true of those who are learning disabled. Let your child know what you expect, and hold to the standards you set.

Finally, learn to view your situation realistically. The book *Parenting a Child With Learning Disability* illustrates it this way: "Imagine going to your favorite restaurant and ordering veal scaloppini. When the waiter puts the plate in front of you, you discover rack of lamb. They're both delicious dishes, but you were prepared for the veal. Many parents need to make a mental shift in their thinking. You might not have been prepared for the lamb, but you find it's wonderful. So it is when you raise children with special needs."

2. True or false. Correct the wrong ones.

1. David suffers from dysgraphia, a term that is applied to a number of reading problems.
2. Sarah's extreme difficulty with writing is called dyscalculia.
3. There is a difference between simple learning problems and learning disabilities.
4. A learning disability means that a child is mentally handicapped.
5. Many children with learning disabilities have average to above average intelligence.
6. Children with learning disabilities should receive parental support.
7. Children with learning disabilities need extra support in a specific learning skill.
8. Parents should be generous with commendations.
9. Parents should let the child know what they expect and hold to the standards they set.

3. Complete the following sentences:

1. David suffers from dyslexia, a term that is applied to...
2. Sarah's extreme difficulty with writing is called...
3. Josh's inability to grasp the basic concepts of math is known as...
4. According to some authorities there is a difference between...
5. Learning disabilities are...
6. But to be advocates, parents must first ...
7. Remember that children with learning disabilities just need ...
8. Experts emphasize that you should praise your child for ...
9. Let your child know what your expect and ...

4. Fill in the missing word from the box below:

skill, concept, disposition, dyslexia, dyscalculia, disabilities, teaching method, patience, effort, average.

1. Any task that requires visual ___ frustrates David.
2. The ___ of numerical values completely baffles Josh.
3. When Josh sits down to do his math homework, his ___ rapidly deteriorates.
4. David suffers from ___, a term that is applied to a number of reading problems.
5. Josh's inability to grasp the basic concept of math is known as ____.
6. These are just three learning _____.
7. All students are expected to learn regardless of the ___ used.
8. It is explained that learning problems can be overcome with _____ and _____.
9. This explains why many children with learning disabilities have average to above ___ intelligence.

5. Find pairs!

1. David cannot read for himself	a) yet her writing is unusually sloppy
2. Sarah is in her third year of school	b) so any task that requires visual skill frustrates him
3. Looking at numbers	c) these three learning disabilities affect at least 10 percent of the children in the United States
4. Some experts estimate that	d) makes Josh angry
5. It simply demonstrates that	e) one particular aspect of learning
6. Often, the difficulty focuses on	f) all children have learning strengths and weaknesses
7. In school all students are expected	g) to learn regardless of the teaching method used

6. Match the terms with their equivalents:

Dyslexia	difficulty with writing
Dysgraphia	inability to grasp the basic concepts of math
Dyscalculia	difficulty with reading

III. Post-reading Activities

1. Discuss the following questions in groups of four.

1. Does it necessary mean that a child with learning disability is mentally handicapped?
2. Are learning disabilities life disabilities?

3. Do children with learning disabilities need extra support in a learning skill?
4. Should teachers be generous with commendations?

2. Make up a dialogue using a model as a beginning.

—Hello, Katya!

—Hello, Ira! I've just read an article on Pedagogics. Some experts estimate that learning disabilities affect at least 10 percent of the children in the United States. I know that your mother is a teacher of junior forms. Have you ever heard such terms as dyslexia, dyscalculia, dysgraphia?

—...

3. Comment on the following situations:

1. Imagine you are school teachers of junior forms:
 - a) There are some pupils with three learning disabilities in your form. Tell your group-mates how you are going to help such children to develop a positive self-image.
 - b) Some parents of the children with these three learning disabilities blame themselves for their child's condition. Please talk to the parents and give them some advice.

OVERCOMING THE FRUSTRATION OF DYSLEXIA

I. Pre-reading Activities

1. In groups of four, discuss the following questions:

1. What learning difficulties do school-age children have?
2. How can we recognize these difficulties in children?
3. How can you “as a teacher” help these children?

2. These words below are found in this chapter. Give your own definition for these words:

dyslexia, label, frustration, perception, posture, intellect, nerve, defect, genetic, chromosomal, image to copy, memory, term, order, human, visual, signal, uncharacteristic, display, process

3. Do you agree or disagree with the following statements. Give your reasons.

- Researchers accept that children who by the age of seven or eight display uncharacteristic difficulty in learning to read, write and spell may be dyslexic.
- Dyslexia even involves problems with placing things in their right order.

4. Before reading the text, think about its title. Find articles about learning problems in Ukraine. Be ready to present these stories in class.

II. Active Reading Activities

1. Scan the text for the answers to the following questions:

- 1) What is dyslexia?
- 2) What are the different kinds of dyslexia?
- 3) What problems does dyslexia involve?

OVERCOMING THE FRUSTRATION OF DYSLEXIA

WHAT is your telephone number?" asks Julie. The caller replies. But the figures Julie jots down bear little relation to the number given.

'My teacher tore up the picture I painted,' laments Vanessa, adding, 'I could

never remember what she was saying.'

David, in his 70's, struggles to read simple words that he mastered more than six decades earlier.

Julie, Vanessa, and David have a learning difficulty - a frustrating one. It is dyslexia. What causes this condition? How can dyslexics overcome the frustration it provokes?

What Is Dyslexia?

One dictionary defines dyslexia as "a disturbance of the ability to read." Though often viewed as a reading disorder, dyslexia can involve much more.

The English word's roots come from the Greek word *dys*, meaning "difficulty with," and *lexis*, "word." Dyslexia includes difficulties with words or language. It even involves problems with placing things in the right order, like the days of the week and the letters in a word. Dyslexia, according to Dr. H. T. Chesty of Britain's Dyslexia Institute, "is an organizing disability which impairs short term memory, perception and hand skills." Little wonder that those who have dyslexia find it frustrating!

Take the case of David. How did this formerly avid and fluent reader come to need his wife's help to learn to read all over again? A stroke damaged an area of David's brain linked to the use of language, and this made his progress in reading agonizingly slow. Yet, longer words gave him less of a problem than shorter ones. Despite his acquired dyslexia, David's conversational ability and his sharp intellect never suffered. So complex is the human brain that researchers have yet to comprehend all that is involved in processing the sounds and visual signals it receives.

Julie and Vanessa, on the other hand, had developmental dyslexia, which became apparent as they grew up. Researchers generally accept that children who by the age of seven or eight exhibit normal intelligence but display uncharacteristic difficulty in learning to read, write, and spell may be dyslexic. Often, dyslexic youngsters write a mirror image of the letter they are trying to copy. Imagine the frustration Julie and Vanessa felt when schoolteachers mistakenly labeled them stupid, slow, and lazy!

In Britain, 1 person in 10 suffers from dyslexia. Failure on the part of others to recognize the problems they face simply adds to their frustration.

2. True or false. Correct the wrong ones.

1. One dictionary defines dyslexia as “a disturbance of the ability to write”.
2. Dyslexia, according to Dr. H. T. Cherty of Britain’s Dyslexia Institute is an organizing disability which impairs short term memory, perception and hand skills.
3. Shorter words gave David less of a problem than longer ones.
4. Despite his acquired dyslexia, David’s conversational ability and his sharp intellect never suffered.
5. Julie and Vanessa had developmental dyslexia, which became apparent as they grew up.
6. Researchers generally accept that children who by the age of 6 exhibit normal intelligence but display uncharacteristic difficulty in learning to read, write and spell may be dyslexic.
7. Dyslexic youngsters write a mirror image of the letter they are trying to copy.
8. In Britain, 2 persons in 10 suffer from dyslexia.
9. Dyslexia includes difficulties with words or language.

3. Complete the following sentences:

1. Julie, Vanessa and David have a learning difficulty - ...
2. One dictionary defines dyslexia as ...
3. Dyslexia includes difficulties with ...
4. Often, dyslexic youngsters write a ...
5. Longer words gave David less of a problem than ...
6. When doing calculations, they need the help of blocks, fingers or marks on paper ...
7. They make unusual spelling ...
8. They still find multiplication tables difficult ...
9. They have a poor sense of direction, confusing ...
10. They lack self-confidence and have ...

4. Fill in the missing word from the box below:

disturbance, language, less, acquired, developmental dyslexia, exhibit, display

- 1) One dictionary defines dyslexia as “a_____ of the ability to read”.
- 2) Dyslexia includes difficulties with words or_____.

- 3) Longer words gave him _____ of a problem than shorter ones.
- 4) Despite his _____ dyslexia, David's conversational ability and his sharp intellect never suffered.
- 5) Julie and Vanessa, on the other hand, had _____ dyslexia, which became apparent as they grew.
- 6) In Britain, 1 person in 10 suffers from _____.
- 7) Researchers generally accept that children who by the age of seven or eight _____ normal intelligence, but _____ uncharacteristic difficulty in learning to read, write and spell may be dyslexic.

5. Find pairs!

1. David in his 70's, struggles to read simple words	a) that he mastered more than six decades earlier;
2. One dictionary defines dyslexia as	b) difficulties with words or language;
3. Dyslexia includes	c) "a disturbance of the ability to read;"
4. So complex is the human brain that	d) they are trying to copy;
5. Often, dyslexia youngsters write a mirror image of the letter	e) researchers have yet to comprehend all that is involved in processing the sounds and visual signals it receives;
6. Imagine the frustration Julie and Vanessa felt	f) when school teachers mistakenly labeled them stupid, slow and lazy;
7. Despite his acquired dyslexia,	g) David's conversational ability and his sharp intellect never suffered

III. Post-reading Activities

1. Discuss the following questions in groups of four:

1. What causes acquired dyslexia?
2. What causes developmental dyslexia?
3. How to recognize dyslexia in children?

2. Comment on the following situations:

1. Imagine you are school teachers:
 - a) There are some dyslexic pupils in your class. Give some ideas how to help them.

b) You should talk to the parents of the dyslexic child. What will you tell them?

3. Imagine you are school teachers of junior forms, in whose class there are many children, who are dyslexic:

- a). Consider possible logical games with such children.
- b). Make up a psychological test for children ages 8 or less and for children ages 8 to 12 in order to recognize dyslexia. Use this model as a beginning. If you answer "yes" to 3 or 4 of the questions below for each age group, it is possible that the children concerned are dyslexic to some extent.

<p><u>Children ages 8 or less:</u></p> <ul style="list-style-type: none"> - Were they late in learning to speak? - Do they still have particular difficulty with reading or spelling? - ... 	<p><u>Children ages 8 to 12:</u></p> <ul style="list-style-type: none"> - Do they make unusual spelling errors? - Do they sometimes omit letters from words or put them in the wrong order? - ...
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HELP FROM PARENTS, TEACHERS AND SELF-HELP.

I. Pre-reading Activities.

1. In groups of four, discuss the following questions:

1. Can parents of a dyslexic child help him?
2. Is it easy for teachers to teach a dyslexic child?

2. Think and say in what way a dyslexic child can help himself?

3. These words below are found in this chapter. Give your own definition for these words:

dispel, defect, role, sympathetic, defeatist, effort, progress, result, regular, portable, manipulate, practice, interview, specific, processor.

4. Before reading the text, think about its title. Try to guess what the text is about.

II. Active Reading Activities.

1. Scan the text for the answers to the following questions:

1. What should parents do first to help their dyslexic child?
2. What should teachers say to a dyslexic pupil when they note some progress?
3. What do researchers note about self-help of a dyslexic child?

HELP FROM PARENTS, TEACHERS AND SELF-HELP.

Help From Parents. Some who are parents of a dyslexic child feel guilty and blame themselves for their offspring's plight. If you feel this way, dispel the gloom by recognizing that none of us are perfect and we are all different. Start by recognizing that just as a color-blind child needs help to live with his defect, so does your dyslexic child. You as a parent have a definite role to play in the education of your child.

Although dyslexia cannot presently be prevented or cured, it can be alleviated. How? Professor T. R. Miles, author of *Understanding Dyslexia*, advises parents to discover first of all exactly what the dyslexic child finds

difficult. Then they will be able to make a realistic appraisal of their child's limitations and what can be expected. "The child should be asked to do as well as he is able," *advises Reading and the Dyslexic Child*, "but not better than that." By being sympathetic and encouraging, and in particular by arranging for suitable teaching, parents can minimize the effects of dyslexia and, at the same time, lessen the strain the dyslexic child feels.

Help From Teachers. Remember, dyslexia is a *learning* difficulty. So teachers need to spend time with the dyslexic children in their classes and make an effort to help them. Limit the children's frustration by being realistic in what you expect of them. After all, a dyslexic child may well grow into an adult who still finds reading out loud a problem.

Do not become a defeatist. Instead, commend the children for any progress they make—and certainly for all their effort. Then, too, avoid indiscriminate praise. Professor Miles recommends that when teachers note some progress, they say to a dyslexic pupil: "Yes, I agree you have made some mistakes. But I still say you have done well; it is an improvement on last week and, in view of your disability, it is a satisfactory result." But when there is no improvement, he advises saying: "Yes, such-and-such still seems to be causing you difficulty; let us see if we can explore some different ways of helping you."

Beware of making disparaging remarks about the dyslexic child's reading. Strive to make books and reading enjoyable for him. How? Both parents and teachers can suggest that the child hold a marker, perhaps a small ruler, under the line he is reading, as a very slow reader often allows his attention to slip. If the problem surfaces in reading the letters of the word in the wrong order, kindly ask, "Which is the first letter?"

Imagine how discouraging it is for the dyslexic child to be frequently told by his math teacher that his answers are wrong. How much better to give him slightly easier problems so that the frustration failure brings is replaced by the satisfaction of solving them correctly.

"The key for dyslexics is," according to one specialist teacher, "learning through all the senses." Combine sight, hearing, and touch to help the child read and spell words correctly. "The pupil needs to *look* carefully, to *listen* carefully, to pay attention to his hand movements as he *writes*, and to pay attention to his mouth movements as he *speaks*," Professor Miles explains. By doing this, the dyslexic child will equate the written form of a letter with both its sound and the hand movements he makes to write it. To help the child distinguish between letters that confuse him, teach him to begin

writing each of the letters at a different point on the letter. "Ideally," recommends *Reading and the Dyslexic Child*, "each [dyslexic] child ought to have an hour a day of tutoring on a one-teacher-to-one-pupil basis." Sadly, circumstances rarely permit this. Nevertheless, dyslexics can help themselves.

Self-Help. If you are dyslexic, aim to do the bulk of your reading when you are at your freshest. Researchers have noted that dyslexic students achieve good results if they continue reading for about an hour and a half but that thereafter their work deteriorates. "Regular but limited amounts of study each day are likely to be more beneficial than occasional days of intense effort," notes *Dyslexia at College*. True, it is going to take you longer to read and spell well, but persevere.

Make use of a portable typewriter or, better still, a word processor with a program that helps you check the spelling of what you enter. Couple this with learning how to organize and manipulate

The difficulties dyslexia causes are not easily remedied. But the brain, being the marvelous organ that it is, compensates for the problem. Permanent unhappiness is therefore unlikely. Julie, Vanessa, and David have all worked hard at overcoming their frustration. You can do the same. Recognize that your specific difficulty need not stop you from learning. Persevere in trying to read, write, and spell properly. Doing so will help you to overcome the frustration of dyslexia.

2. True or false. Correct the wrong ones.

1. Dyslexia cannot be alleviated.
2. Limit the children's frustration by being realistic in what you expect of them.
3. A dyslexic child may well grow into an adult who still finds reading out loud a problem.
4. The key for dyslexics is learning through all the senses.
5. "Ideally," recommends *Reading and the Dyslexic Child*, "each (dyslexic) child ought to have three hours a day of tutoring on a one-teacher-to-one-pupil basis".
6. Researchers have noted that dyslexic students achieve good results if they continue reading for about an hour and a half.
7. The difficulties dyslexia causes are easily remedied.

3. Complete the following sentences:

1. Professor T. R. Miles, author of Understanding Dyslexia, advises parents to discover ...
2. Limit the children's frustrations by being realistic in ...
3. Do not become a ...
4. Both parents and teacher can suggest that ...
5. If the problem surfaces in reading the letters of the word in the wrong order, kindly ask ...
6. Combine sight, hearing and touch to help the child ...
7. Researchers have noted that dyslexic students achieve good results if they...
8. The difficulties dyslexia causes are not ...
9. Make use of portable typewriter or a word processor with a program that ...

4. Fill in the missing word from the box below:

offspring's plight, definite, minimize, frustration, defeatist, learning, overcoming, limited, intense, one-teacher-to-one-pupil.

1. Some parents of a dyslexic child feel guilty and blame themselves for their _____.
2. You as a parent have a _____ role to play in the education of your child.
3. Parents can _____ the effects of dyslexia and, at the same time, lessen the strain the dyslexic child feels.
4. Limit the children's _____ by being realistic in what you expect of them.
5. Do not become a _____.
6. The key for dyslexics is _____ through all senses.
7. Julie, Vanessa and David have all worked hard at _____ their frustration.
8. Regular but _____ amounts of study each day are likely to be more beneficial than occasional days of _____ effort.
9. Each dyslexic child ought to have an hour a day of tutoring on a _____ basis.

5. Find pairs!

1. Parents have a definite role	a) lessen the strain the dyslexic child feels;
2. Parents can minimize the effects of dyslexia and	b) to play in the education of their child;
3. Teachers need to spend time with	c) the dyslexic child's reading;
4. Beware of making disparaging remarks about	d) the dyslexic children in their classes;
5. Both parent and teachers can suggest	e) learning through all senses;
6. The key for dyslexics is	f) that the child hold a small ruler under the line he is reading;
7. The difficulties dyslexia causes are	g) not easily remedied

III. Post-reading Activities.

1. Comment on the following situations:

Imagine you are school psychologists:

- a) Give your own ideas on how to help a dyslexic child.
- b) Some parents of a dyslexic child feel guilty and blame themselves for their child's condition. Talk to the parents. Explain what role they play in the education of their child.

2. Make up a dialogue using a model as a beginning:

- Hello, Tanya! I know that you study at the Psychological Department of the Pedagogical University and I think you can help me.
- Well, Lena, what's the matter?
- My younger brother Oleg is a pupil of the first form. He is a very slow reader. Besides, he reads the letters of the word in the wrong order. How can we help him?
-

TOLERANCE

From One Extreme to the Other

I. Pre-reading Activities:

1. In groups of four, discuss the following questions:

- 1) What do you think it means to be tolerant?
- 2) Do you always share your partner's opinion?
- 3) What is the opposite of tolerance?

2. These words below are found in this chapter. Give your definition for these words:

intolerance, scenic, philosopher, separatist, prejudice, potential, paradise, belief, display, intensity, enthusiasm, meditative, cautious, adventurous, irritation, bigotry, factor, morality, atheism, agnosticism, materialism, greed, nihilism, advertisement.

3. Do you agree or disagree:

- a) With the proverb "Many men many minds"?
- b) With the statement: more intense than prejudice is bigotry.

4. Read the title of the text and on the basis of new words try to guess what it is about.

II. Active Reading Activities.

1. Scan the text for answers to the following questions:

- 1) What happened to the Vale of Kashmir within the last five years?
- 2) What does it mean to be tolerant?
- 3) What is a factor in the conflicts in Bosnia, Rwanda and the Middle East?
- 4) What is the true enemy of morality?

From One Extreme to the Other

The scenic beauty of the Vale of Kashmir moved a 16th-century philosopher to exclaim: "If there is paradise anywhere, it is here!" Clearly, he

had no idea of what would later happen in that part of the world. Within the last five years, at least 20,000 people have been killed there in fighting between separatists and the Indian Army. The German newspaper *Suddeutsche Zeitung* now describes the region as a "valley of tears." The Vale of Kashmir offers a simple yet valuable lesson: Intolerance can ruin a potential paradise.

What does it mean to be tolerant? According to the Collins Cobuild English Language Dictionary, "if you are tolerant, you allow other people to have their own attitudes or beliefs, or to behave in a particular way, even if you do not agree or approve." What a fine quality to display! Surely we feel at ease with people who respect our beliefs and attitudes, even when these differ from their own.

From Tolerance to Bigotry. The opposite of tolerance is intolerance, which has several shades of intensity. Intolerance may start with narrow-minded disapproval of someone else's behavior or way of doing things. Narrow-mindedness chokes the enjoyment out of life and closes one's mind to new ideas.

For instance, a straitlaced person may recoil from the bouncing enthusiasm of a child. A young person may yawn at the meditative ways of someone older than himself. Ask a cautious person to work side by side with someone who is adventurous, and they could both get irritable. Why the recoil, the yawn, and the irritation? Because, in each case, one finds it hard to tolerate the attitudes or behavior of the other.

Where intolerance breeds, narrow-mindedness can escalate into prejudice, which is an aversion to a group, race, or religion. More intense than prejudice is bigotry, which can manifest itself in violent hatred. The result is misery and bloodshed. Think of what intolerance led to during the Crusades! Even today, intolerance is a factor in the conflicts in Bosnia, Rwanda, and the Middle East.

Tolerance requires balance, and maintaining proper balance is not easy. We are like the pendulum of a clock, swinging from one side to the other. At times, we show too little tolerance; at times, too much.

From Tolerance to Immorality. Is it possible to be overly tolerant? U.S. Senator Dan Coats, speaking in 1993, described "a battle over the meaning and practice of tolerance." What did he mean? The senator lamented that in the name of tolerance, some "abandon a belief in moral truth—in good and evil, in right and wrong." Such people feel that society has no right to judge what is good behavior and what is bad.

In 1990, British politician Lord Hailsham wrote that "the most deadly enemy of morality is not atheism, agnosticism, materialism, greed nor any other of the accepted causes. The true enemy of morality is nihilism, belief in, quite literally, nothing." Obviously, if we believe in nothing, we have no standards of proper behavior and everything can be tolerated. But is it proper to tolerate every form of conduct?

A Danish high school principal thought not. He wrote a newspaper article in the early 1970's, complaining about advertisements in the press for pornographic shows portraying sexual intercourse between animals and humans. These advertisements were allowed because of Denmark's "tolerance".

Clearly, problems arise from showing too little tolerance but also from showing too much. Why is it hard to avoid extremes and stay in proper balance?

2. True or false. Correct the wrong ones.

1. The German newspaper "Suddeutsche Zeitung" now describes the region as a "valley of pearls".
2. The Vale of Kashmir offers a simple yet valuable lesson: Intolerance can ruin a potential paradise.
3. If you are tolerant, you allow other people to have their own attitudes or beliefs.
4. The opposite of tolerance is narrow-mindedness.
5. Narrow-mindedness can escalate into prejudice.
6. More intense than prejudice is bigotry.
7. The true enemy of morality is atheism.
8. If we believe in nothing, we have no standards of proper behavior.
9. Tolerating everything that children do will prepare them for the responsibilities of life.

3. Complete the following sentences:

1. The scenic beauty of the Vale of Kashmir moved a 16th-century philosopher to exclaim...
2. We feel at ease with people who respect our beliefs and attitudes, even when these...
3. Ask a cautious person to work side by side with someone who is adventurous, and they ...
4. Where intolerance breeds, narrow-mindedness can escalate into...
5. More intense than prejudice is bigotry, which...
6. Tolerance requires...
7. U.S. Senator Dan Coats lamented that in the name of tolerance, some...
8. If we believe in nothing, we have no standards of proper behavior and...

4. Fill the missing word from the box below:

Valuable, potential, tolerant, approve, intolerance, narrow-mindedness, bigotry, requires, to judge, responsibilities

1. The Vale of Kashmir offers a simple yet _____ lesson: intolerance can ruin a _____ paradise.
2. If you are _____, you allow other people to have their own attitudes or beliefs.
3. If you are tolerant, you allow other people to behave in a particular way , even if you do not agree or _____.
4. The opposite of tolerance is _____.
5. _____ chokes the enjoyment out of life and closes one's mind to new ideas.
6. More intense than prejudice is _____.
7. Tolerance _____ balance, and maintaining proper balance is not easy.
8. Some people feel that society has no right _____ what is good behavior and what is bad.
9. Tolerating everything that children do will prepare them for the _____ of life.

5. Find pairs!

1) If you are tolerant,	a) which has several shades of intensity;
2) The opposite of tolerance is intolerance,	b) you allow other people to have their own beliefs;
3) Narrow-mindedness can escalate into prejudice,	c) which can manifest itself in violent hatred;
4) More intense than prejudice is	d) which is an aversion to a bigotry, group, race or religion;
5) We are like the pendulum of a clock,	e) belief in nothing;
6) The true enemy of morality is nihilism,	f) swinging from one side to the other;
7) Problems arise from showing too little tolerance	g) but also from showing too much.

III. Post-reading Activities

1. Discuss the following questions in groups of four.

1. Do you find it hard to tolerate the attitudes or behavior of others?
2. Do you tolerate everything that your friends do?
3. Can overreacting to the mistakes of children be damaging to them?

2. Comment on the following situations:

1. Imagine you are school teachers:
 - a) Some pupils of your form are always late for their lessons. What will you do?
 - b) Some pupils of your form look scruffy. Give some advice to them.

3. Write down a short story about a tolerant person you know.

PROPER BALANCE CAN SWEETEN YOUR LIFE

I. Pre-reading Activities.

1. In groups of four, discuss the following questions:

1. What kind of people do we call conformists?
2. In conversation, do you normally want the last word?
3. When working with a group, do you expect them to follow your way of thinking?

2. These words below are found in this chapter. Give your own definition for these words:

selfish, dogmatic, evident, pollution, global, challenge, skeptic, apathy, backbone, open-minded, empty-headed, anxiety, identity, narrow-minded, unreasonable, host, victimized, ozone.

3. Think about the following points and explain if you agree or disagree with these statements.

1. People are often miserly with tolerance.
2. Most people are unreasonable, or dogmatic to a degree.

4. Read the following word combinations and check off those, which, in your opinion, can characterize a tolerant person.

1. to be generous;
2. to impose one's own standards of conduct on everybody;
3. to be stubborn and dogmatic;
4. to have deep feeling of uncertainty;
5. to accept different standards of behavior;
6. to be skeptic.

5. Before reading the text, think about its title. Try to predict what this article is about.

II. Active Reading Activities

1. Scan the text for answers to the following questions:

1. What kind of people do we call "life-style busybodies"?

2. What did ethnologist discover about mankind's past?
3. Is such "a deep feeling of uncertainty" widespread today?
4. What world leader made intolerance a government policy?
5. Is a couldn't-care-less attitude the same as tolerance?

Proper Balance Can Sweeten Your Life

Tolerance is like sugar in a cup of coffee. The right measure can add a touch of sweetness to life. But while we may be generous with sugar, we are often miserly with tolerance. Why?

"Human beings do not want to be tolerant," wrote Arthur M. Melzer, an associate professor at Michigan State University. "What comes naturally is ... prejudice." So intolerance is not simply a character flaw that affects only a minority; being narrow-minded comes naturally to all of us because all mankind are imperfect – Compare Romans 5:12

In 1991, Time magazine reported on the growing narrow-mindedness in the United States. The article described "life-style busybodies," people who try to impose their own standards of conduct on everyone. Nonconformists have been victimized. For instance, a woman in Boston was removed from her job because she refused to wear makeup. A man in Los Angeles was fired because he was overweight. Why the zeal to make others conform?

Narrow-minded people are unreasonable, selfish, stubborn, and dogmatic. But are not most people unreasonable, selfish, stubborn, or dogmatic to a degree? If these traits find a firm foothold in our personality, we will be narrow-minded.

What about you? Do you shake your head at someone else's taste in food? In conversation, do you normally want the last word? When working with a group, do you expect them to follow your way of thinking? If so, it might do some good to add a little sugar to your coffee!

"A Deep Feeling of Uncertainty". Ethnologists have looked into mankind's past to discover when and where racial prejudice has been evident. They found that this sort of intolerance does not surface all the time, nor is it manifest in every land to the same degree. The German natural science magazine GEO reports that racial friction surface in times of crisis when "people have a deep feeling of uncertainty and sense that their identity is threatened."

Is such "a deep feeling of uncertainty" widespread today? Definitely. As never before, mankind is beset by one crisis after another. Unemployment,

the spiraling cost of living, overpopulation, depletion of the ozone layer, crime in the cities, pollution of drinking water, global warming—a nagging fear of any of these increases anxiety. Crises breed anxiety, and undue anxiety opens the door to intolerance.

Such intolerance finds an outlet, for instance, where different ethnic and cultural groups become intermingled, as in some European lands. According to a report by *National Geographic* in 1993, Western European countries were then host to more than 22 million immigrants. Many Europeans "felt overwhelmed by the influx of newcomers" of a different language, culture, or religion. There has been a rise in anti-foreign sentiment in Austria, Belgium, Britain, France, Germany, Italy, Spain, and Sweden.

What about world leaders? During the 1930's and 1940's, Hitler made intolerance a government policy. Sadly, some political and religious leaders today use intolerance to gain their own ends. This has been the case in such places as Austria, France, Ireland, Russia, Rwanda, and the United States.

Avoid the Trap of Apathy. Too little sugar in our coffee and we sense that something is missing; too much sugar and we have a sickeningly sweet taste in our mouth. It is the same with tolerance. Consider the experience of a man who teaches in a college in the United States,

Some years ago, David R. Carlin, Jr., found a simple yet effective way of stimulating class discussion. He would make a statement designed to challenge the views of his students, knowing that they would protest. The result was a spirited discussion. In 1989, however, Carlin wrote that the same method no longer worked well. Why not? While students still did not agree with what he said, they no longer bothered to argue. Carlin explained that they had adopted the "easy tolerance of the skeptic"—a carefree, couldn't-care-less attitude.

Is a couldn't-care-less attitude the same as tolerance? If nobody cares what anybody thinks or does, there are no standards at all. The absence of standards is apathy—a complete lack of interest. How can such a state of affairs come about?

According to Professor Melzer, apathy can spread in a society that accepts many different standards of behavior. People come to believe that all manner of conduct is acceptable and that everything is simply a matter of personal choice. Instead of learning to think and to question what is acceptable and what is not, people "often learn not to think at all." They lack the moral backbone that moves a person to stand up to the intolerance of others.

Tolerate too much, and a family or society will reap anguish, since no

one knows or cares what is right or wrong. U. S. Senator Dan Coats warned about "the trap of tolerance as apathy." Tolerance can lead to being open-minded; too much tolerance—apathy—to being empty-headed.

2. True or false. Correct the wrong ones.

2. Tolerance is like sugar in a cup of coffee.
3. "Human beings want to be tolerant", wrote Arthur M. Melzer, an associate professor at Michigan State University.
4. Narrow-minded people are unreasonable, selfish, stubborn and dogmatic.
5. Unemployment, the spiraling cost of living, overpopulation, crime in the cities, pollution of drinking water, global warming – a nagging fear of any of these increases anxiety.
6. "A deep feeling of uncertainty" is not widespread today.
7. According to a report by National Geographic in 1993, Western European countries were then host to more than 22 million immigrants.
8. During the 1930's and 1940's Hitler made tolerance a government policy.
9. The absence of standards is apathy—a complete lack of interest
10. Tolerance can lead to being empty-headed.

3. Complete the following sentences:

1. Tolerance is like sugar in.....
2. The article described "life-style busybodies", people who try to impose ...
3. Narrow-minded people are unreasonable, ...
4. Crises breed anxiety, and undue anxiety opens...
5. Sadly, some political and religious leaders today use...
6. If nobody cares what anybody thinks or does, there are...
7. People come to believe that all manner of conduct is acceptable and that...
8. Tolerance can lead to being...
9. Too much tolerance or apathy leads to being...

4. Fill in the missing word from the box below:

Measure, tolerant, narrow-mindedness, dogmatic, pollution, anxiety, intolerance, skeptic, apathy, moral.

1. The right _____ can add a touch of sweetness to life.

2. "Human beings do not want to be _____", wrote Arthur M. Melzer, an associate professor at Michigan State University.
3. Time magazine reported on the growing _____ in the United States.
4. Narrow-minded people are unreasonable, selfish, stubborn and _____.
5. Unemployment, overpopulation, crime in the cities, _____ of drinking water, global warming increase _____.
6. During the 1930's and 1940's, Hitler made _____ a government policy.
7. Carlin explained that students had adopted the "easy tolerance of the _____", a carefree, couldn't-care-less attitude.
8. The absence of standards is _____ a complete lack of interest.
9. People lack the _____ backbone that moves a person to stand up to the intolerance of others.

5. Find pairs!

1. Being narrow-minded comes naturally to all of us	a) because she refused to wear makeup;
2. A woman in Boston was removed from her job	b) because all mankind are imperfect ;
3. As never before, mankind is beset by	c) a nagging fear of any of these increases anxiety;
4. The spiraling cost of living, overpopulation, depletion of the ozone layer,	d) one crisis after another;
5. Some years ago David R. Carlin, found a simple yet effective way	e) of a different language, culture, or religion;
6. Many Europeans "felt overwhelmed by the influx of newcomers"	f) of stimulating class discussion;
7. According to Professor Melzer, apathy can spread in a society	g) that accepts many different standards of behavior;

III. Post-reading Activities

1. Discuss the following questions in groups of four.

1. Are not most people unreasonable, selfish, stubborn or dogmatic to a degree?
2. When working in a group, do you expect the group-mates to follow your way of thinking?
3. What is apathy mean to you?
4. Should the teachers be tolerant?

2. Comment on the following situations:

Imagine you are school psychologists. What would you do if:

- a) Some pupils of your school refuse to wear the school uniform?
- b) Teenagers tease their school-mate, because he is overweight.

3. Make up a test to determine if a person is tolerant using these questions as a beginning:

- Do you occasionally catch yourself adopting a couldn't-care-less attitude?
- Do you laugh at jokes that are lewd or racist?
- Do you allow your younger brother or sister to view videos that advocate greed or immorality?
- Do you feel it is OK for your friends to play violent computer games?

4. Write a short composition explaining what it means to be a conformist or to be a nonconformist.

5. Comment on the proverb "Many men, many minds".

FREEDOM OF SPEECH IN THE HOME.

I. Pre-reading Activities

- 1. In groups of four, discuss the following questions:**
 2. What is “freedom” for you?
 3. What is your attitude to the scenes of violence, murder and horror on TV?
 4. Do your parents allow you to watch all you want?
-
- 2. Do you agree or disagree with these statements. Give your reasons.**
 1. Homes should be havens for children.
 2. Those children, who watch the most violent television programs grow into aggressive adults.
-
- 3. These words below are found in this chapter. Give your definition for these words:**
- falsely, carte blanche, unlimited freedom, accident, to defend, consequences, rapper, to protect, a bill of rights, purveyor, cartoon, fist – flying superheroes, bland fare, argue, movie violence, horror movies, turtle, guarantee, to settle, satisfaction, haven, tranquil, mood, similar, heath agenda, helmet, immunization, nutrition, privacy.
-
- 4. Before reading the text, think about its title. Try to guess what it is about.**

II. Active Reading Activities.

- 1. Scan the text for the answers to the following questions:**
1. What did university psychologists reveal about cartoons of “fist – flying superheroes”?
2. What did the study of a California advocacy group show?
3. What parents can do?

Freedom of Speech in the Home. Is It a Ticking Time Bomb?

When one falsely shouts; "Fire!" in a crowded theater and some are trampled to death in the wild stampede to get out, must not the shouter bear the responsibility for the resulting deaths and accidents? When someone says, "I do not agree with what you say, but I will defend your right to say it;" are you given carte blanche, unlimited freedom, to say publicly whatever you wish, regardless of the consequences? There are those who think so.

In France, for example, when rappers advocated the killing of police and police were killed by some who heard the music, should the rappers have been held accountable for their inciting to violence? Or should they be protected under a bill of rights? When radio and television broadcasters and computer networks make graphic scenes of violence and pornography available to children, some of whom act out these scenes to the harm of themselves and others, should the purveyors of such material share the responsibility?

A study by the American Psychological Association "figures that the typical child, watching 27 hours of TV a week, will view 8,000 murders and 100,000 acts of violence from age 3 to age 12," reported *U.S. News & World Report* magazine. Can parents rightly pass this off as having little influence on their children? Or may it involve a "clear and present danger"? Is this where a line must be drawn or a limit placed on free speech?

One study conducted by university psychologists revealed that when cartoons of "fist-flying superheroes" were regularly shown to one group of four year olds and "bland fare" to another group, those who saw the action heroes were more likely to hit and throw things afterward. Nor do the effects of TV violence fade after childhood. Another university study, after tracking 650 children from 1960 to 1995 and looking at their viewing habits and behavior, found that those who watched the most violent television as youngsters grew up to engage in the most aggressive behavior as adults, including spouse abuse and drunk driving.

While some children may not admit the effects television and movies have on them, others will. In 1995, Children Now, a California advocacy group, polled 750 children, aged 10 to 16. Six out of ten, the study showed, said that sex on TV sways kids to have sex at too young an age

Some may argue that television and movie violence may not be taken

literally by children and that all those horror movies are having no effect on them. "In that case," commented a British newspaper, "why did a school authority in America's mid-west have to tell thousands of children that there were no Teenage Mutant Ninja Turtles in the local storm drains? The tiny Turtle fans had been crawling into the drains to look for them, that's why."

Today a heated debate is raging over what some consider a fine line between free speech and the violence caused by antiabortion talk in many places in the United States. Antiabortionists cry out publicly that doctors and clinic staff who perform abortions are murderers and have no right to live themselves. A few zealous ones call for the killing of these doctors and their aides. Spies are planted to get the automobile license-plate numbers of such ones, and their names and addresses are handed out. As a result, doctors and clinic staff members have been gunned down and killed.

"This is not a free speech issue," cried the president of the Planned Parenthood Federation of America. "This is tantamount to shouting, 'Fire!' in a crowded theater. We have a crowded theater; just look at the spate of murders at clinics in the last few years." Those who advocate this violence argue that they are only exercising their right as guaranteed in America's First Amendment—freedom of speech. And so it goes. The battles over this right will continue to be fought in the public forum, and courts will have to settle the issue, not to the satisfaction of all, unfortunately.

What Parents Can Do? Homes should be havens for children, not a place where they can become easy prey to those who would exploit and abuse them or where tranquil personalities can be induced to display violent mood swings. "You may feel assured that your child will never become violent despite a steady diet of TV mayhem," said a U.S. university professor addressing parents. "But you cannot be assured that your child won't be murdered or maimed by someone else's child, reared on a similar diet." Then he urged: "Limiting children's exposure to TV violence should become part of the public health agenda, along with safety seats, bicycle helmets, immunizations and good nutrition."

If you would not allow a stranger to come into your home and use abusive language and talk obscenely to your child about sex and violence, then do not allow radio and television to be that stranger. Know when to turn it off or to change the channel. Know what your child is watching, both on television and on the computer, even in the privacy of his room. If he knows his way around the computer and the networks available to him, you may be shocked to learn what his nightly diet comprises. If you do not approve of

what your child is watching, just say no and explain why. He will not die if he is restricted.

2. True or false. Correct the wrong ones.

1. A study by the American Psychological Association figures that the typical child, watching 27 hours of TV a week, will view 2,000 murders and 3,000 acts of violence from age 3 to age 12.
2. Another university study, after tracking 650 children from 1960 to 1995 found that those who watched the most violent television as youngsters grew up to engage in the most aggressive behavior as adults.
3. Two out of ten, the study showed, said that sex on TV sways kids to have sex at too young an age.
4. Homes should be havens for children.
5. "Limiting children's exposure to TV violence should not become part of the public health agenda." said a U.S. university professor addressing parents.
6. You should know what your child is watching, both on television and on the computer, even in the privacy of his room.
7. If you do not approve of what your child is watching, just say no and explain why.

3. Complete the following sentences:

1. A study by the American Psychological Association "figures that the typical child, watching 27 hours of TV a week, will view..."
2. Another university study found that those who watched the most violent television...
3. Some may argue that television and movie violence may not...
4. Homes should be...
5. You may feel assured that your child will never...
6. Limiting children's exposure to TV violence should...
7. You should know when to turn off or...
8. You should know what your child is...
9. If you do not approve of what your child is...

4. Fill in the missing words from the box below:

typical, likely, violent, aggressive, effects, movies, publicly, clinic staff, havens, assured, steady, agenda, approve.

1. The _____ child, watching 27 hours of TV a week, will view 8,000 murders and 100,000 acts of violence from age 3 to age 12.
2. Those who saw the action heroes were more _____ to hit and throw things afterward.
3. Those who watched the most _____ television as youngsters grew up to engage in the most _____ behavior as adults.
4. While some children may not admit the _____ television and _____ have on them, others will.
5. Antiabortionists cry out _____ that doctors and _____ who perform abortions are murderers and have no right to live themselves .
6. Homes should be _____ for children.
7. You may feel _____ that your child will never become violent despite a _____ diet of TV mayhem.
8. Limiting children's exposure to TV violence should become part of the public health _____.
9. If you do not _____ of what your child is watching, just say no and explain why.

5. Find pairs!

1. Viewing acts of violence	a) more likely to hit and throw things afterward;
2. Those, who saw the action heroes were	b) may involve a "clear and present danger";
3. A school authority in America's mid-west have to tell thousands of children	c) be induced to display violent mood swings;
4. Homes should not be a place where tranquil personalities can	d) that there were no Teenage mutant Ninja Turtles in the local storm drains;
5. Your child will not die	e) if he is restricted;
6. Those who watched the most violent television as youngsters	f) are having no effect on children;
7. Some argue that all those horror movies	g) grew up to engage in the most aggressive behavior as adult

III. Post-reading Activities.

1. Discuss the following questions in groups of four:

1. Do you always say publicly whatever you wish?
2. What influence do your parents have on you?
3. Do your parents know what you are watching, both on television and on the computer?
4. Do your friends always agree with what you say?

2. Comment on the following situation:

Remember the situation when someone says: "I do not agree with what you say, but I will defend your right to say it." What were the consequences?

3. Agree or disagree with the following statements:

1. Television and movie violence are not taken literally by children and all horror movies are having no effect on children.
2. Limiting children's exposure to TV violence should become part of the public health agenda.

4. Write a composition on the theme "Homes should be havens for children".

POST-TRAUMATIC STRESS: WHAT IS IT?

I. Pre-reading Activities

1. In groups of four discuss the following questions:

1. Have you ever heard stories of people, who were attacked or robbed by somebody?
2. How did those people feel?
3. What consequences may follow these types of incidents?
4. What can be done for such persons?

2. Do you agree or disagree with the following statement:

If you have survived a trauma, it is important to consult with a competent health professional.

3. These words below are found in this chapter. Give your own definition for these words:

stranger, grab, minivan, stream, attacker, tremble, accurate, suspect, clearheaded, loneliness, depression, miserable, symptoms, post-traumatic stress disorder, to be diagnosed, hormone level, remain, elevated, survive, survivor, rape, war victims, sexual assault, witness, suffer, sufferer, re-experience, nightmare, relief, rejection, self-destructive behavior, uncontrolled anger, overcontrolled eating, workaholism.

4. Before reading the text, find articles (information) about post-traumatic stress problems in Ukraine. Be ready to present these stories in class.

II. Active Reading Activities

1. Scan the text for the answers to the following questions:

1. What happened to 17-year old Jane?
2. What is post-traumatic stress disorder?
3. What is important to realize if you have survived a trauma?
4. What can be done?

Post-traumatic Stress: What is It?

"I've got a knife! Shut up, or I'll kill you!"

It WAS a lovely summer afternoon and 17-year-old Jane, had been roller-skating in a public park in Virginia, U.S.A. Suddenly the park seemed deserted, and she decided to leave. As she sat near her family's minivan removing her skates, a stranger approached her. With the chilling words above, he demanded sex, grabbed Jane, and tried to shove her inside the minivan. She screamed as loud as she could, but that did not stop the attack.

"I felt so utterly helpless," Jane recalled later. "Like a bug versus a giant. But I kept screaming and struggling." Finally, that seemed to startle the attacker, who suddenly released her and fled the scene.

As the would-be rapist got into his car, Jane locked herself in her van, trembling. Grabbing the cell phone, she forced herself to be calm. She called the police and gave an accurate description of the suspect's car and its license number, which led to his arrest within minutes.

Yes, but not immediately. Jane's ordeal had only begun. Although the police and newspapers praised her quick thinking and clearheaded response to the attack, after the initial shock wore off, Jane felt anything but clearheaded. "After a few weeks, I began to fall apart," she recounts. "My body was in a continual state of panic, which kept me from sleeping. After several weeks of this, I was unable to study or to focus mentally. I also had panic attacks. At school a classmate who looked a little like my attacker tapped me on the shoulder to ask the time, and I almost went to pieces."

She says: "I was so miserable. I lost contact with my friends, and the loneliness only added to the depression. I blamed myself for allowing the attack, and I grieved for the happy, trusting person I had been before it happened. I felt as if that person had died."

Jane was experiencing some of the classic symptoms of post-traumatic stress disorder (PTSD). What is PTSD, and what can be done to help those who suffer from its devastating symptoms?

Years ago, post-traumatic stress disorder (PTSD) was usually called shell shock or combat fatigue and was studied primarily in connection with military veterans. Today much has changed. You don't have to be a soldier to be diagnosed with PTSD. You only have to be a *survivor* of some traumatic event.

The event could be anything from a war to a rape attempt to a car accident. A fact sheet from the National Center for PTSD, in the United

States, puts it this way: "To be diagnosed with PTSD, an individual must have been exposed to a traumatic event." And this event "must involve some type of actual or threatened PHYSICAL injury or assault."

Jane, mentioned in the preceding article, relates: "I have learned that sudden terror causes certain hormones to surge, and these hormones cause the senses to become hyperalert to danger. Ordinarily hormone levels fall back down to normal after the danger has passed, but in the case of PTSD sufferers, they remain elevated." The event was in the past, but the terror of those moments seemed to be trying to take up permanent residence in Jane's mind, like an unwelcome tenant who ignores an eviction notice

If you have survived a trauma and are experiencing similar aftereffects, it is important to realize that you are not alone. In a book she wrote on rape, author Linda E. Ledray explains that PTSD "is a normal reaction seen in normal people who have been through a terrifying situation in which they could not control what was happening."

Yet, calling PTSD normal doesn't mean that every survivor of a trauma will develop it. Ledray notes: "A 1992 study found that, one week after a rape, 94 percent of the survivors evaluated met the criteria for PTSD and at twelve weeks 47 percent continued to do so. Fifty percent of the women seen at the Sexual Assault Resource Service in Minneapolis in 1993 met the criteria for PTSD one year after rape."

Such statistics reveal that PTSD is common, far more common than most people realize. And all sorts of people are sufferers, following many types of incidents. Authors Alexander C. McFarlane and Lars Weisaeth observe: "Recent studies have shown that traumatic events frequently happen to civilians during peacetime, as well as to soldiers and war victims, and that many survivors of such frequent events develop PTSD." Even medical procedures or heart attacks have triggered PTSD in some individuals.

"PTSD has turned out to be a very common disorder," explain the above-quoted authors. They further say: "A random survey of 1,245 American adolescents showed that 23% had been the victims of physical or sexual assaults, as well as witnesses of violence against others. One out of five of the exposed adolescents developed PTSD. This suggests that approximately 1.7 million U.S. teenagers currently suffer from PTSD."

If the statistic is accurate, that means there are a lot of teenage sufferers in just one country! What can be done for such persons, as well as for the many millions of other sufferers worldwide.

What Can Be Done? If you believe that you or someone you know may

suffer from PTSD, the following are some suggestions.

Don't hold back from encouraging the sufferer. If you have a loved one dealing with the horrible memory of some traumatic event, understand that he or she is not overreacting or deliberately being difficult. Because of emotional numbness, anxiety, or anger, he or she may not be able to respond as you would wish to the efforts you are making to be supportive.

The sufferer needs to recognize and avoid unwise coping strategies that cause further harm. These include use of illicit drugs and overindulgence in alcoholic beverages. Although alcohol and drugs may give promise of temporary relief, they soon make matters worse. They usually contribute to social isolation, rejection of the people who want to help, workaholism, uncontrolled anger, uncontrolled or overcontrolled eating, or other self-destructive behavior.

Consult with a competent health professional. It may turn out that the sufferer doesn't have PTSD, but if he or she does, effective therapies exist. If you are receiving professional help, be honest with that person and ask for help to overcome any of the above behaviors.

Remember: Physical wounds are often the first to heal, but people suffering from PTSD can be wounded in many ways in body, mind, and spirit.

2. True or false. Correct the wrong ones.

1. As Jane sat near her family's minivan removing her skates, a former schoolmate approached her.
2. Jane didn't call the police because she couldn't give an accurate description of the suspect's car and its license number.
3. To be diagnosed with PTSD an individual must have been exposed to a traumatic event.
4. Ordinarily hormone levels fall back down to normal after the danger has passed, but in the case of PTSD sufferers, they remain elevated.
5. Calling PTSD normal means that every survivor of a trauma will develop it.
6. All sorts of people are sufferers, following many types of incidents.
7. Medical procedures or heart attacks haven't triggered PTSD in some individuals.
8. Approximately 1.7 million US teenagers currently suffer from PTSD.
9. The sufferer needs to recognize and avoid unwise coping strategies that cause further harm.

3. Complete the following sentences.

1. It was a lovely summer afternoon and...
2. She screamed as loud as she could, but...
3. I blamed myself for...
4. Jane was experiencing some of...
5. PTSD was usually called...
6. Ledray notes: "A 1992 study found that..."
7. Authors Alexander C. McFarlane and Lars Weisaeth observe: "Recent studies have shown that..."
8. PTSD has turned out to be...
9. Although alcohol and drugs may give...
10. If you are receiving professional help, be honest with...

4. Fill in the missing word from the box below

grabbed, minivan, attacker, fled, panic, loneliness, depression, diagnosed, survivor, hormones, trauma, sexual assaults, witnesses of violence, social isolation, workaholism, self-destructive behavior.

1. With the chilling words above, he demanded sex, _____ Jane, and tried to shove her inside the _____.
2. That seemed to startle the _____, who suddenly released her and _____ the scene.
3. "My body was in continual state of _____, which kept me from sleeping", Jane recounts.
4. I lost contact with my friends, and the _____ only added to the _____.
5. You don't have to be a soldier to be _____ with PTSD. You only have to be a _____ of some traumatic event.
6. Jane relates "I have learned that sudden terror causes certain _____ to surge, and these _____ cause the senses to become hyperalert to danger".
7. Yet, calling PTSD normal doesn't mean that every survivor of a _____ will develop it.
8. A random survey of 1,245 American adolescents showed that 23% had been the victims of physical or _____, as well as _____ against others.

9. Alcohol and drugs usually contribute to _____, rejection of the people who want to help, _____, uncontrolled anger, uncontrolled or over-controlled eating, or other _____.

5. Find pairs!

1. Jane called the police and	a) which kept me from sleeping;
2. My body was in continual state of panic,	b) gave an accurate description of the suspect's car and its license number;
3. Years ago, PTSD was usually called shell shock or	c) to be diagnosed with PTSD;
4. You don't have to be a soldier	d) combat fatigue and was studied primarily in connection with military veterans;
5. If you have survived a trauma and are experiencing similar aftereffects	e) to soldiers and war victims, and that many survivors of such frequent events develop PTSD;
6. Recent studies have shown that traumatic events frequently happen to civilians during peacetime, as well as	f) it is important to realize that you are not alone;
7. Physical wounds are often the first to heal, but people suffering from PTSD	g) can be wounded in many ways in body, mind and spirit

III. Post-reading Activities

1. Discuss the following questions in groups of four:

- What are some of the classic symptoms of post-traumatic stress disorder?
- Can survivors control re-experiencing the trauma in their mind?
- In what ways can wounded people be suffering from PTSD?

2. Many trauma survivors find themselves re-experiencing the trauma in their mind. Survivors usually can't control this or stop it from occurring. Check off those consequences, which to your mind may include:

<ul style="list-style-type: none"> • A pounding heart or trouble breathing • A feeling of upset when reminded of the trauma by something seen, heard, felt, smelled, or tasted • Anxiety or fear—the feeling of being in danger again • Trouble controlling emotions because reminders lead to sudden anxiety, anger, or upset • Difficulty concentrating or thinking clearly • Difficulty falling or staying asleep • Agitation and a constant state of being on the lookout for danger • Loss of interest in things that were previously enjoyable • Trouble remembering important parts of what happened during the trauma. 	<ul style="list-style-type: none"> • Difficulty reading aloud • Trouble remembering phone numbers • Bad dreams and nightmares, tendency to be very startled by loud noises or by someone unexpectedly coming up to them from behind • A shaky feeling and sweatiness • An emotional shutdown or emotional numbness • Trouble having feelings of love or feeling any strong emotions • The feeling that surroundings are strange or unreal • A feeling of being disconnected from the world around them and the things happening to them • Flashbacks – feelings that the trauma is happening again
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3. Make up a psychological test to know if a person suffers from PTSD. To begin with, use the following questions:

Do you:

- often sleep badly?
- get headaches a lot?
- find it difficult to relax?
- need alcohol or cigarettes to calm your nerves?
- usually hide your feelings?
-

4. Comment on the situation:

1. Imagine that you are school psychologists. Once, a 14-year-old boy told you about a gang of kids at your school who are making his life hell. They asked him for money. He said NO, but then they pushed him and hit him. He

gave them his bus fare, but that was only the start of it. Every day after that they asked for more. The boy is so frightened. He can't talk to anyone else about this problem. Give some suggestions to him.

5. Comment on the English proverb: "It's better to be safe than sorry". Do you have similar proverbs in your language?

THRILL SEEKERS WHY DO THEY DO IT?

I. Pre-reading Activities.

1. In groups of four discuss the following questions:

1. What are the most extreme sports that you know of?
2. Are those people flirting with death?
3. Why do they do it?

2. Do you agree or disagree with these statements?

Courage doesn't mean doing stupid things (adventure tours).

3. The words below are found in this chapter. Give your own definition for these words:

passion, flirt, stuntmen, injury, equipment, bungee jumping, parachuting out of airplanes, fingerholds, toeholds, headache remedies, predict, spectator, extensive, research, thrill seeking, unnatural, high-level, fatal, suffer, life-threatening injuries, rehabilitation center, death-defying pursuit, indicate, limb, prevent, lethal risk.

4. Read the title of the text and on the basis of new words try to guess what it is about.

II. Active Reading Activities.

1. Scan the text for the answers to the following questions:

1. What extreme sports do many thrill seekers take part in?
2. What sport is known as BASE jumping?
3. What does a psychologist predict?
4. What do psychologists say about a type T personality?

Thrill Seekers: Why Do They Do It?

In our time the world *has* entered a new millennium. But it is apparent that very little has dampened the passions of the many people who are captivated by living-on-the-edge sports, especially those that are death defying.

There are those who have a passion for flirting with death. There are motorcycle stuntmen who defy death and serious injury by jumping over 50 cars parked side by side or over a number of huge passenger buses or over a wide canyon.

Many thrill seekers take part in extreme sports, including death-defying stunts such as climbing the sides of city skyscrapers without safety equipment, snow-boarding down steep 6,000-meter mountains, bungee jumping off high towers and bridges, parachuting out of airplanes while strapped to another jumper's back, or climbing sheer ice-covered cliffs with nothing but a pair of small pickaxes in their hands.

Even the most extreme of extreme sports are booming," wrote *U.S. News & World Report* magazine. "Sky surfing, in which expert parachutists perform circus-worthy twists and turns on graphite boards while free falling from [4,000 meters], didn't exist in 1990; now it attracts thousands of devotees. And a sport known as BASE jumping (for Buildings, Antennas, Spans, and Earth), officially established in 1980, now lures hundreds, who parachute—often illegally and at night—off fixed objects such as radio towers or bridges." This sport has already taken dozens of lives. "There aren't many injuries in BASE jumping," said one seasoned jumper. "You either live or you die."

Rock climbing up the sheer sides of mountains with nothing but tiny finger-holds and toeholds is attracting thousands. Even television and magazine commercials advertising everything from trucks to headache remedies show climbers hanging precariously from steep mountain precipices hundreds of meters in the air, secured only by a thin rope. It is reported that in 1989 some 50,000 people in the United States dared to take part of this sport; more recently an estimated half-million are drawn by its fatal attraction. Worldwide the numbers are increasing.

In the United States, "a growing number of typical' boys and girls are being killed or maimed playing bizarre new dangerous games," reported *Family Circle* magazine. "Car surfing"—climbing through the window of a speeding car onto the top and standing while the car speeds along—or standing on top of a moving elevator or on top of a speeding subway train have taken youthful lives.

The number and kinds of death-defying pursuits that are becoming common throughout the world are limited only by the imagination of those willing to create new ones. A psychologist predicts that extreme sports, in which participants live for a while on the edge between life and death, "will become the major spectator and participant sports of the 21st century."

Why Do They Do It? Many sports extremists defend their participation in death-defying stunts as an escape from boredom. Bored by routine jobs, some have left their work and have pursued a new career in the world of extreme sports. "I started to use bungee jumping as a drug, as a way to clean my slate," said one. "I would jump and I'd be like, 'Problems? What problems?'" "He is a veteran of 456 jumps, including leaps from Yosemite's El Capitan, the San Francisco Bay Bridge, and the world's highest tram in France," a magazine reported.

Declared another extreme sports participant: "Time stands still. You couldn't care less about what's going on in the world." Another said: "What we do for kicks [which for many includes a monetary reward], most people wouldn't do if you held a gun to their heads." *Newsweek* magazine commented: "All of them are hellbent for thrills."

Some psychologists have done extensive research into thrill seeking. One categorizes thrill seekers as a type T personality. The *T* stands for "thrills"—risk taking, stimulation seeking, excitement seeking, and arousal seeking. He says: "There are some people who hold on to the handrails of life—the rules, the traditions. The Type T let go of the handrails. They create their own life." He claims that studies have found that type T personalities have twice as many highway accidents as others. "Accidents are the leading cause of death among teenagers, often because they put themselves in a dangerous position from a need for thrills." Scientists and psychologists admit that it unnatural for anyone to seek out sports that have a high-level fatal risk factor. The fact that many have suffered serious, life-threatening injuries, only to recover after long stays in hospitals and rehabilitation centers and then continue in their death-defying pursuit, indicates that all is not well with their thinking ability. Yet, often these may be highly intelligent people.

Experts are not sure what draws the thrill seekers to risk life and limb. The answers, they suggest, may lie in the brain "You are not going to stop that thrill-seeking," they say, "but you try to prevent them from taking lethal risks. At the very least, you want them to avoid putting other people at risk."

2. True or false. Correct the wrong ones.

1. There are motorcycle stuntmen who defy death and serious injury by jumping over 30 cars parked side by side.
2. Many thrill seekers take part in extreme sports, including death-defying stunts such as climbing the sides of city skyscrapers with safety equipment.

3. "Even the most extreme of extreme sports are booming" wrote U. S. News and World Report magazine.
4. A sport known as BASE jumping was officially established in 1990.
5. It is reported that in 1989 some 50,000 people in the United States dared to take part in bungee jumbling off high towers and bridges.
6. In the United States, "a growing number 'of typical' boys and girls are being killed or maimed playing bizarre new dangerous games," reported Family Circle magazine.
7. A psychologist predicts that extreme sports, in which participants live for a while on the edge between life and death, will become the major spectator and participant sports of the 21st century.
8. Many sports extremists defend their participation in death-defying stunts as an escape from television and radio.
9. Psychologists claim that studies have found that type T personalities have twice as many highway accidents as others.
10. Experts are not sure what draws the thrill seekers to risk life and limb.

3. Complete the following sentences:

1. Many thrill seekers take part in extreme sports, including...
2. "There aren't many injuries in BASE jumping", said one seasoned jumper. "You either..."
3. "Car surfing" – climbing through...
4. A psychologist predicts that...
5. The type T stands for...
6. Accidents are the heading cause of death among teenagers, often because...
7. Scientists and psychologists admit that it is unnatural for...
8. Yet, often thrills seekers may be...
9. Experts are not sure what...

4. Fill in the missing word from the box below:

motorcycle, canyon, climbing, equipment, snowboarding, bungee jumping, parachuting, booming, injuries, killed, maimed, death-defying, imagination, routine, extreme, handrails, thrills.

1. There are _____ stuntmen who defy death and serious injury by jumping over 50 cars parked side by side or over a number of huge passenger buses or over a wide _____ .

2. Many thrill seekers take part in extreme sports, including death-defying stunts such as _____ the sides of city skyscrapers without safety _____, _____ down steep 6,000-meter mountains, _____ off high towers and bridges _____ out of airplanes while strapped to another jumper's back.
3. Even the most extreme sports are _____.
4. There aren't many _____ in BASE jumping.
5. In the United States "a growing number of 'typical' boys and girls are being _____ or _____ playing bizarre new dangerous games".
6. The number and kinds of _____ pursuits that are becoming common throughout the world are limited only by the _____ of those willing to create new ones.
7. Bored by _____ jobs, some have left their work and have pursued a new career in the world of _____ sports.
8. There are some people who hold on to the _____ of life – the rules, the traditions.
9. The T stands for "_____ " – risk taking, stimulation seeking, excitement seeking, and arousal seeking.

5. Find pairs!

1. It is apparent that very little has dampened the passions of the many people	a) such as parachuting out of airplanes while strapped to another jumper's back;
2. There are motorcycle stuntmen	b) who are captivated by living – on – the edge sports;
3. Many thrill seekers take part in extreme sports,	c) who defy death and serious injury by jumping over a wide canyon;
4. Rock climbing up the sheer sides of mountains with nothing but tiny finger holds and toeholds	d) and standing while the car speeds along;
5. "Car surfing" – climbing through the window of a speeding car onto the top	e) is attracting thousands
6. A psychologist predicts that extreme sports	f) it is unnatural for anyone to seek out sports that have a high-level fatal risk factor;
7. Scientists and psychologists admit that	g) will become the major spectator and participant sports of the 21 st century.

III. Post-reading Activities

1. Discuss the following questions in groups of four.

1. What kind of extreme sports would you like to try?
2. What kind of extreme sports wouldn't you go through with?
3. Is it unnatural for anyone to seek out sports that have a high-level fatal risk factor?

2. Make up a psychological test to know if a person is a “thrill seeker” using questions below as a beginning:

- Do you like extreme sports?
- Have you ever watched extreme sports on TV?
- Do you think you'll ever take up a dangerous sport?
- ...

3. Comment on the proverb: “Serious sport is war minus the shooting”.

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