

The Human Dignity Curriculum: Experiences of program success internationally

The Human Dignity Curriculum(HDC) is a curriculum program developed by the World Youth Alliance. The curriculum aims to teach young people, from ages 4-18 (grades Kindergarten to 12) values of the human person, human dignity, human freedom and human excellence. The curriculum has been developed through pilot programs in multiple countries, and is now available for adoption and use for grades K-8. Grades 9-12 are still being developed and evaluated.

The HDC is a unique program that aims to give children a foundational education about the nature and reality of themselves. The program helps children probe answers to the question ‘who am I?’, aiming to develop a rich framework of personal identity. This approach builds on educational research indicating that long-term behavior and attitude changes, leading to the adoption of healthy lifestyle values and choices, is rooted in the development of a strong personal identity.¹ This requires a deepening of concepts and commitments beyond abstinence programs as well as character education programs.² The HDC tries to help children answer the question “why” in the pursuit of virtues and self-control, which are necessary to achieving character and specific life goal accomplishment.

A lock and key module for sexual education is provided through the teenFEMM and teenMEN program. This program begins at age 11 (grade 6) and is an optional link in module that parents and schools can add, as developmental and other needs arise. The teenFEMM/teenMEN approach links to the HDC human formation, in order to address questions of human sexual development and relationship. Physiological development, hormonal activity, and emotional and physical changes are all addressed within a framework of the dignity of the person, as well as by understanding the inter-relationships of physical, emotional, and intellectual/spiritual needs.

Taken together, the HDC is an innovative program that cultivates the essential human characteristics necessary to lives of human excellence. By deepening the anthropological framework of the child, and exploring fundamental questions, within appropriate developmental stages, the HDC is able to help children articulate the unique dignity and value that they have, while striving to achieve human excellence – even in the face of setbacks and failures. In many ways, the HDC aims to inspire the moral imagination of

¹ Christian Smith, from correspondence regarding this curriculum which he noted “would be a game changer” if we could integrate elements of personal identity formation and human anthropology at a young age. See also his *What is a Person?*, University of Chicago Press, 2010, and his sociological study of adolescence *Souls in Transition*, Oxford University Press, 2009.

² Thomas Lickona, *Eleven Principles of Effective Character Education*, 25 J. Moral Educ.93 (1996); Thomas Lickona, *Character Matters: How to help our children develop good judgment, integrity and other essential virtues*, 93 (2004). Additional conversation held with Thomas Lickona, Stan Weed, Kevin Ryan and Paul Kleine. These four evaluators served in an advisory capacity to our Saint Lucia project, and continued to provide guidance and input beyond that time. We are grateful for their expertise and contribution to this project.

the child, inspiring children to reach, and attempt, human greatness. The HDC emphasizes that human greatness is a work of our daily choices, which lead to the development of the person we are and become. One ten-year old girl captured this goal of the HDC by asking if the curriculum was “about becoming excellent”. She was thrilled to think that “adults thought she could be excellent” and that she had knowledge and tools to pursue this great goal in her own life.³

The HDC and teenFEMM/teenMEN program also provides a new approach to sexual education. Focusing first on the development of the person, and then on understanding the link between the human person and a human sexuality, HDC/FEMM offers a unique and exciting option for formation in human sexuality. The HDC/FEMM program meets international norms for sexual education, and meets most national and local requirements for sexual education as well.

Pilot programs have demonstrated the universality of the HDC ideas, as well as their application in multiple language, religious, and socio-economic settings. While cultural modifications can and should be made for content delivery, multiple pilots suggest that the structure and thematic approach of the HDC function well in a great diversity of settings. These settings and results are explored in greater detail below.

An important and interesting finding from every evaluation site was that it is the HDC content that was critical in influencing behavior and attitude outcomes, including sexual outcomes. These behavior changes, in other words, took place before the introduction of the FEMM sexual education modules. This helps to articulate the power of the HDC and anticipates avenues for further research, particularly in evaluating programs that address sexual activity and education. It suggests that it is the anthropology that influences behaviors and attitudes; or, in other words, that it is the understanding of the human person, and the child’s own conception of their dignity, value and worth, that is the best predictor and driver of positive behavior change and long-term choices. Building on this, we have worked to further develop the element of personal identity development that HDC encourages, particularly in the early grade levels, well before sexual debut and attitudes are addressed in the later grades.⁴

The idea that a strong conception of the human person influences specific behaviors and attitudes was demonstrated in the experience of the World Youth Alliance through its “Track A” program. “Track A” is a program of original source content readings that explore ideas of human dignity, freedom, and solidarity, and expressions of these ideas through culture and policy. The program is highly sophisticated, and engages young

³ HDC evaluations have indicated that success in the program is not necessarily correlated to academic success. Students who are willing to engage with deep and profound ideas, and apply these to themselves and their actions do well. In surprising instances, it is often those students struggling academically who excel at HDC. A moving example of this was experienced with a highly autistic child in a Mexico street children pilot. By the fifth class teachers had tears pouring down their eyes as he engaged the concepts and other children in normal, healthy ways. This behavior only took place during the HDC program.

⁴ This finding affirms the feedback we received from numerous teachers in multiple country sites. While we initially planned to begin program development around age 13, teachers begged us to develop this program starting at age 8 at the latest, indicating that this was the age at which high risk behaviors began. They also noted that they did not have other programs to address this at that age, and that ideally we must start in kindergarten. This program is a tribute to their hard-earned advice, and we hope that the early education components assist them in their important work.

people at the pre-College and College levels. We noted that while there were great variations in participant understanding, and that ability to articulate complex philosophical terms varied, almost all those who completed this course had a transformative experience, even when they could not articulate why.

Building on this insight, the HDC is our attempt to offer big ideas to little people. Engaging their imagination, these ideas transform the ideals they embrace and strive for in their own lives. When linked to the FEMM program, the HDC offers a new way of engaging difficult debates about human sexuality and sexual education. HDC is built upon the conviction that first we have to engage the imagination of children and young people to know how they want to live (based on the question ‘who am I’), after which FEMM helps to provide concrete information and support needed to live in an authentically human way.

Overview of Themes from the HDC Program

The HDC is a thematic curriculum that develops content grade by grade in age-appropriate ways. Material customized for each grade-level encourages students to understand their dignity and worth as humans, understand human freedom as linked to their dignity, see themselves as subjects and not objects, and to develop good habits freeing them to pursue human excellence, long-term goals, and authentic happiness. Actions are evaluated based on whether they affirm or violate human dignity (their own, and that of others) thus providing the unifying paradigm for the program and materials.

Each grade level begins by studying the concept of human dignity, how humans interact with the world through their senses, and the unique human ability to think and choose. The curriculum then shifts to a series of lessons that are more explicitly aimed at the development of personal identity. Beginning with a discussion of freedom as the hallmark of human actions, students are introduced to the various components of human acts. In grade 6, optional age-appropriate lessons relating to sexual education are also introduced. With the human person as the starting point for these discussions, students are given the opportunity to fully appreciate and assess sexual behavior in a meaningful and forward-looking manner. This section of the curriculum was developed in response to a growing demand for new models of education that address sexual education in the context of integrated human development.

Each HDC lesson is 30 minutes long and includes a detailed lesson plan with student worksheets. The HDC provides seven hours of content per grade level, with additional three-hour modules for sexual education integration beginning at the Grade 6 level (age 10).

Pilot and implementation history

The HDC was first tested as a pilot program with the Government schools of Saint Lucia

for grades 4 through 6. From 2011-2013 World Youth Alliance worked with 32 teachers selected by the Government for implementation of the program in schools throughout the country. 1200 students participated in the program pilot. Concurrent with the Saint Lucia pilot a small pilot was conducted with a Catholic School in Harlem, NY.

Similar successes were identified, including the enthusiasm of teachers, parents and students for the material and overall course content, while a need to tighten up and improve the content, making student activities more interactive and personally relevant was also identified. A seven week, one-hour per week program was identified as ideal for content assimilation and retention, as well as school programming possibilities. Following the conclusion of the pilot in Saint Lucia, teachers have continued to use the content provided at that time, stating that “teaching these concepts in such a beautiful way is why I became a teacher in the first place”.

Following this early evaluation, the curriculum was redone to integrate feedback and input from teachers, students and parents. The seven week, one-hour per week framework was piloted successfully in new schools in NY, Mexico City, and Malta. Content modifications and improvements were well-received, and additional input was generated and integrated.

A third pilot was developed with five Catholic schools in Bridgeport, Connecticut, in conjunction with educational evaluation support from the School of Education at Fairfield University. Implementation, feedback, and assessment of materials and content took place from September 2014 through March 2015. Further evaluation and development of materials followed with the input and guidance of the School of Education. A further round of edits and modifications took place to integrate feedback and comments from all partners.⁵

From 2016-2017, World Youth Alliance Regional Offices spearheaded national implementations of the HDC in Croatia and the Philippines. These pilot implementations were successful, leading to Government approvals in both countries. In Croatia, the program has been approved by the Ministry of Education, for human rights and values curricular content, and in the Philippines by the Department of Education for civics and values education. The Malta Catholic Bishops have approved the program for implementation in all Catholic Schools, and US Catholic Bishops are now reviewing the program in multiple dioceses. The Government of Saint Lucia has reached out to discuss implementation of the revised program as a nationally approved Health and Family Life Education curriculum.

Student and teacher response

Through each iteration of curriculum testing, the response of students has been a beautiful and encouraging element of this program. Students have often touched on the

⁵ Evaluation and lesson plan format modifications were facilitated by the Graduate School of Education at Fairfield University. Bob Hannafin, Dean, assembled a group of Professors who assisted in the review and evaluation throughout that pilot and beyond.

deep elements that the program aims to develop in them, demonstrating the capacity of young children to understand and integrate complex ideas into their lives. Third grade street children in Mexico (age 8) noted that “Plants grow because they can, animals feel and we should treat them well, but humans can be excellent.” Another noted that, “Everything has its price, like plants and animals, but us humans are worth the infinite.”

Fifth graders (age 10) in New York and Mexico reflected that the HDC would change the way they act towards themselves and others. “Thanks to the course I understand that I’m important and so are the rest of my peers. Even when I’m angry I have to think about how I act so whatever I do does not affect my friends or family.” Another understood the implications of human excellence: “I liked learning about the steps to human excellence...they teach me how to help myself, my family members, and others.” A third student noted that, “I liked learning about the virtues and vices because they show you what you need to do in order to be a better person.”

Seventh grade (age 12) students in NY identified concrete ways the HDC inspired them to change. One student said “I now know things about myself that I need to work on. This class gave me hope to overcome laziness!” Another shared, “I want to be the best I can be and I will try to practice the virtues that are good habits.” A third told us that, “Human Dignity is the reason why I can be the best I can be.”

Students in NY were also asked to reflect on how the HDC was similar or different to their other classes. They responded: “In religion we learn about God and Jesus, free will and conscience, but in HDC class we learn about what it means to be human; we talk about the rational and sensitive powers, and the fact that we are subjects and not objects.” Another student noted: “In science we study to understand volcanoes and earthquakes, but in HDC class we learn about ourselves.” Students appreciated the personal nature of the HDC class: “In other classes we just learn definitions, but in HDC we learn about big ideas. HDC teaches us that nobody can give or take away human dignity.” Another student commented in this vein: “In other classes we just talk and work and half the time we don’t understand the stuff we are doing. In this class we understand who we are and the values we can use in life.” Finally another student integrated many of the themes of the HDC in his answer: “HDC is similar to our other classes because we read, write, and talk, but HDC is a more unique program; you get to express your own opinions and say what you have in your mind. This is good because you get to experience your own opinions and it’s like an open world. What you say may or may not be correct but the most important part is that you learn about your dignity - that no one can take it away. You don’t have to feel self-conscious when you share your ideas because they are yours and you are sharing from your own experiences and imagination.”

In the Philippines, a teacher told us that “WYA Asia Pacific was able to successfully connect to each kid during the implementation. The kids will never forget [how] you made them feel. If (the kids) are formed by the principles and values of WYA and the HDC at a very young age, then just imagine how these can inspire and encourage them to grow (up) with integrity.” And one of the students in this program confirmed: “I learned how to give importance to another person’s dignity, and how to choose what is right.”

teenFEMM and teenMEN

While the HDC offers an important and necessary human formation, the teenFEMM and teenMEN components are critical for teaching appropriate information about human physiology and sexuality as students grow and mature. teenFEMM/teenMEN are lock and key modules to the HDC, which begin as of grade 6 (age 11). Each module is three hours long, and is intended to be taught to boys and girls separately, even in co-ed educational settings. An early pilot attempted to teach biological elements that are common to both sexes together, and found that the program was stronger when boys and girls are separated for this entire segment. When separated by sex, both sexes felt more free to ask questions about themselves, which was an important finding, given the difficulties and awkwardness that are inherently present at this age and with this topic.

When we piloted the separation of boys and girls for this class, the boys came back glowing, reporting to their teacher that “we learned about ourselves today!”. This knowledge of self, and of their own specific changing body and physiological patterns is an important element to highlight and to nurture.

Girls also need the separation of the sexes in order to understand their changing bodies and the additional complexity of understanding and managing their menstrual cycles as this arrives. The girls appreciated understanding how the physiology linked with other experiences, “we learned about emotions and how we express them,” one student said, and another noted “It’s good to talk about our bodies because they affect our sensitive and rational powers.”

Starting these conversations in grade 6 and 7 was important, as we found that girls and boys were eager to learn and more open to understanding physical changes since these changes were new to them and to some just beginning. By grade 8, conversations were more difficult, for both boys and girls, and their struggle to understand and manage their changing adolescent bodies made discussion harder. Nevertheless girls were able to link the content of teenFEMM to their experiences, as well as the broader physiological focus of teenFEMM, which highlights the importance of ovulation as a sign of health. Understanding changes in hormones enables girls to understand ovulation and their period as signs of hormonal shifts in their body which is healthy and normal. “Having your period is important but it’s not all about having your period -it’s about your hormone levels and understanding all that’s happening” one girl told us.

Finally, as with all intimate conversations, teachers and facilitators must be prepared to support students who reveal difficulties that need to be supported through additional professional help. One girl in grade 7 in New York was touched by the story of Maria Goretti and told us she identified with her: “Her story inspires me to forgive, even when the most awful things are done to me.”

The teenFEMM/teenMEN program introduces girls and boys, separately, to their changing physiology and hormones, and how this influences emotional and intellectual

changes at this important time. teenFEMM/teenMEN also emphasizes the importance of healthy hormones and their link to brain and body figure development, along with healthy bone and overall health formation. Given the relationship between healthy brain and healthy hormone development, the program emphasizes the related importance, particularly in adolescence, of sleep, diet, and exercise. It also addresses the physiological, emotional and social costs of drinking, drugs and sex, and the benefits of adopting healthy habits. Linking teenFEMM/teenMEN to the broader HDC themes emphasizes choosing excellence for oneself and others, particularly those to whom we have an attraction and desire for intimacy and exclusiveness. Evaluating our choices and actions to ensure that we are treating ourselves and the other as a subject, and never as an object, is critical to respecting human dignity and striving for human excellence.

In addition to providing health information to both boys and girls, teenFEMM provides information to girls to understand their cycle. FEMM is an organization committed to changing the paradigm in women's health, by investing in research, education and clinical care⁶. FEMM recognizes that hormones (endocrinology) play a critical role in understanding and managing women's health, and that advances in this area must be communicated to women through educational programs, as well as to medical providers. teenFEMM is an educational program designed to provide this education to adolescents.

FEMM teaches women to understand the relationship between their physiology, endocrinology (hormones) and their observations. Important observations allow women to understand the pattern of their hormones, how this impacts their physiology (uterine lining development, ovulation, and uterine lining shedding) and how these observations align with emotional and other physical symptoms.

Most importantly, FEMM teaches women to understand that ovulation is a sign of health, while learning how to monitor and observe this sign in their own bodies. Ovulation is a sign of health because for it to occur over a dozen hormones must align in her body at the right time and at the right level. When ovulation occurs, it is also a sign that many of the major systems in a woman's body are operating as they should. While ovulation is a sign of fertility, it is more fundamentally a sign of health. This is true in adolescents, even as their cycles are developing.⁷

Effects of ovulation in an adolescent girl will enable appropriate brain development, and the establishment of neural pathways that solidify at the close of adolescence. Ovulation is critical to the formation of strong bones and the development of bone density. An ovulating adolescent will develop a healthy and feminine body shape, which normalizing hormone levels post adolescence cannot change. Signs of ovulatory dysfunction can be more immediately troubling to her and can include: acne, (extreme) mood swings or depression, weight gain, pain, irregular bleeding (too much or too little), and extreme

⁶ www.femmhealth.org provides information about the organization and the science and educational programs it offers.

⁷ The Reproductive Health Research Institute, associated to FEMM, looks for ovulatory cycles to begin in girls months after their first menses. While an adult ovulatory cycle will not happen for some time, a first bleed should lead to an ovulatory pattern (and not stagnate with irregularity or other pain and symptoms). For this reason, teaching adolescent girls to chart their cycles and understand ovulation as a sign of health is an important educational tool that can assist them in managing and understanding their own health.

PMS (pre-menstrual syndrome). Fatigue and migraines, along with increasing food intolerances, can also be signs of hormonal imbalances which should be investigated.⁸ These signs are indications of hormonal imbalances, which can and should be corrected.

Teaching adolescent girls to understand their cycles, and the signs of health (ovulation) as well as abnormalities as they arise, empowers young women and assists them in understanding and respecting their bodies. Women who understand and respect themselves make better and healthier relationship and dating choices, both in adolescence and throughout their lives. Girls in particular love the information teenFEMM provides, and feel excited and empowered by the information they receive. “Women deserve to know the science of their bodies,” one teenFEMM participant said, “especially in today’s world, and teenFEMM gives them the answers to the questions they don’t know they have”.

Other participants noted simply, “teenFEMM taught me a lot about myself” and “teenFEMM made me realize the correct path to being healthy”. Another noted that “teenFEMM showed me the importance of my cycle in my life and how to love it and be responsible with it.” One girl told us that “teenFEMM has opened my eyes to the importance of charting and understanding my cycle!”, while another girl stated that “teenFEMM is the most incredible thing that can happen to you!”.

Understanding ovulation as a sign of health truly does transform health and related decisions, for women. Young girls deserve the chance to understand what is happening as their bodies change and mature, and to receive the tools and support to manage their health as needed. For young women who want to maintain healthy ovulation as a health goal throughout life, access to FEMM education and medical providers is essential. These medical providers will work with them to correct and restore hormonal imbalances as they arise, rather than suppress their hormones to manage symptoms. Hormone suppression takes place whenever contraception is used to manage symptoms arising from hormonal irregularities, such as acne, weight gain, depression, pain and bleeding, as mentioned above. FEMM doctors are trained to work with women to diagnose and treat the underlying hormonal disturbance, in order to work with them to restore health.

When women understand that ovulation is a sign of health, and are provided with support networks to manage their health when difficulties emerge, the use of contraception as a health tool ceases. As such, contraception ceases to be a medication managing health symptoms, and becomes a moral choice related to lifestyle decisions. This clarification of roles in the management and understanding of their health is critical in assisting young girls to make informed decisions, and to engage their full decision making power about their complete health (brain, bone, endocrine, shape and health). teenFEMM is a powerful tool to assist them as they begin to engage this process, and to support them as their lifestyle, needs and reproductive phases change.

An important addition to the implementation of the teenFEMM module is the broader

⁸ P. Vigil, Ovulation a sign of health, Reproductive Health Research Institute, Chile, 2017

support that FEMM is able to provide. FEMM offers a growing network of health educators and medical providers around the world, who are able to work with children and families to provide person-centered health care from puberty onwards. In addition, teenFEMM links into the FEMM health app, a free support that provides daily feedback and information to users about their health, symptoms, and normal or abnormal character of the cycle types that they are observing.⁹

Overview of Recurrent Themes

Taking into consideration the global pilot experiences of the HDC in multiple sites and countries, a number of themes highlighting best practices for implementation have emerged.

Preparation:

1. **School Commitment:** The school or partner institution must be committed and involved in assuring that there will be highly conducive learning conditions for the students and teachers during the HDC. This is a huge factor since scheduling, learning more about the educational and personal background of the students, (or determining which students would be best suited to receive the HDC program), are questions only the partner institution can answer. Without partner commitment, HDC classes can be bumped or changed for other events (sporting, holidays). In the most successful pilots, HDC was not only implemented as a classroom activity once or twice per week, but school expansion of the program led to providing training and exposure for HDC ideas and ideals throughout the school/program, thus integrating these ideas as part of the daily culture for students. For high risk students, or students in poverty stricken areas, institutional commitment is even more necessary, as these ideas are often at the root of struggles that students, parents and teachers are seeking to manage each day. A broader cultural commitment to HDC can have powerful results in such a setting, which we experienced in collaborations with partners in the Philippines, as well as a pilot aimed at serving street children in Mexico. In New York, in the Bronx, broader school training to integrate HDC into the culture of the school, including training for secretaries, janitors and all employees, is underway. We are eager to monitor the results of this commitment over time.
2. **Teacher Training:** Training resident teachers is essential to the effectiveness and sustainability of the HDC program in a school or community. New York's experience with closely coordinated resident teacher collaboration allowed for lesson by lesson modification during implementation based on student and teacher feedback. Meanwhile, the Philippines and Croatian pilots also demonstrated the success of training WYA members to teach the HDC in collaboration with classroom teachers. Aside from building from a familiar and trusting relationship between resident teacher and student, this also assures that the program will be continued after WYA participation concludes.

⁹ More information about FEMM can be found on its website: www.femmhealth.org, including a white paper with information, links to educators and doctors, and research information and updates. In addition, the FEMM health app is available for free at the iPhone store and soon to be on Android as well.

3. **Structured after-school programs:** After-school programs can work well but require appropriate planning and communication to students. After-school programs have been very well received in Croatia and the Philippines, where the program was presented as a special opportunity which the children enjoyed and anticipated. After-school programming will not succeed if it is placed into otherwise free ‘playtime’ or if the children perceive it as extra school.

Implementation Proper:

1. Content: All experiences confirm that younger age levels (Kindergarten – Grade 2) generally had a positive response to the activities and materials used. 3-4th Graders also appreciated the content but the challenge mostly arose in retaining their focus and concentration. Classroom management and scheduling to ensure appropriate physical activity and breaks is important to assist in program success at this age. Grades 5-8 content has been expanded to ensure material is more integrated and related to their current life experiences.
2. Teaching methods and Creativity: All experiences saw that visuals in activities (coloring and crafts) as well as in the presentations (videos, interactive stories, and photographs) were most effective in explaining unfamiliar words and concepts for all grades. Meanwhile, the older age range of Grades 6-8 appreciated reflecting on true stories.
3. Language: The Mexico pilot recommended that the Spanish worksheets still needed work while the Philippines pilot saw that English and Filipino translations were more effective. However, the latter also pointed out that just because terms or concepts were translated did not ensure that the children would easily understand them. Language translations as well as cultural modifications per setting are crucial to program success.
4. Relationship building: Building relationships with the children by coming before or after the HDC lesson was only highlighted by the Philippines pilots as essential since two out of three pilots were held outside academic institutions. In all pilots, however, engagement and trust with the students was identified as a key variable in program success. In most settings, this relationship of trust is provided by the regular classroom teacher, who is invaluable to program success. Teacher commitment to the program and ability to model HDC principles in their own life is essential to successful program delivery.

Evaluation:

1. Teacher feedback: All experiences indicated that resident teachers expressed their satisfaction with the curriculum’s focus on virtues and values. This was seen in the practical application of discussing internal and external powers. Partner communities in the Philippines and Mexico also related how children from abusive and poverty-stricken backgrounds came to know about their own self-worth (usually for the first time) through the HDC.
2. Classroom Management: All participant teachers agreed that keeping the class sizes and/or including small group discussions with each lesson allowed students to engage with the material at a more personal level.
3. Parent Involvement: All pilots found it difficult to generate parent involvement

- since most parents were busy and thus were unable to attend school events. WYA is currently working with the Bronx program on an innovative parental engagement strategy to train the parents in FEMM (for adults) prior to implementing teenFEMM in the classrooms.
4. Time: All pilots indicated that more short sessions (30-35 minutes) were most effective in retaining the focus of the students and retention of content over time.
 5. Measuring Student Comprehension: The NY and Mexico pilots measured student comprehension through interviews and taking note of clarifying questions that came from the students themselves. The Philippines pilots measured comprehension through short quizzes in the middle and after HDC implementation. Both approaches allowed for a qualitative determination of comprehension and effective topic area understanding.
 6. Curriculum sustainability: All pilot locations agree strongly that while HDC is able to initiate behavioral change, long-term change and retention requires an ongoing commitment to these concepts and ideas throughout the school and community. To this end, the Bronx program is now preparing to train all staff members across the school in order to adopt a full HDC school culture. This will be an exciting pilot and program element to monitor.

General Response per Lesson

Below is an outline of the general response of the students and teachers from the 2016-2017 pilot sites to the lessons. Revisions to address these elements are being completed.

I. Human Dignity	Teachers found that the idea that human dignity is equal in all people and cannot be taken away or lost must always be reinforced throughout the discussions in every lesson.
II. Powers of All Living Beings	Differentiation between plants, animals, and humans were easily understood by the students.
III. Powers of Animals & Humans	Younger age range sometimes encounter confusion whether or not animals have the kind of dignity similar to human beings.
IV. Human Powers (To Think & To Choose)	Teachers found it important to put emphasis on the idea that virtue is a personal journey that lasts a lifetime.
V. Making Choices (Heroes)	The concept of being a hero seemed more appealing to a younger age group. The older age groups are discouraged due to how "hard" it is to become one. Emphasis on L5 (heroes) and L6A-B (Choosing for my Body and My Self) may be needed to help explain that hardships may be necessary but worthwhile.
VI. Making Choices (Choosing for	The idea of freedom for excellence got a

My Body & Choosing for Myself)	positive response from the students.
VII. Growing in Excellence (Me & Others: The Encounter)	Students easily understood this lesson through relatable stories and examples.
VIII. Me & Others (Giving & Receiving; Choices in Friendship & School)	
IX. The Hero's Charter	This encouraged the students to reflect on how they would pursue deeper happiness in their lives.

Conclusion

This curriculum is a creative and systematic approach to helping students respect themselves and others. Students are encouraged to recognize their capacity to be caring, loving, principled, and courageous individuals – subjects and not objects, human beings with inviolable dignity. The lessons provide vocabulary and framework for students to speak about concepts that they already know to be true, because they are so integral to the human condition.

As stated by the principal of the school in Mexico, “this program is important because it is 100% human development. Complex philosophical ideas are articulated with a clarity that children can understand.” The opportunity to pilot this program globally is unique. Throughout these initial pilot years, World Youth Alliance has had the opportunity to work with outstanding teachers and partners around the globe. We are grateful for their collaboration, and commitment to bringing these powerful ideas to young children. With their help, the HDC has improved each year. It is now a rich, vibrant, effective and global curriculum that helps teachers and students to understand both the universal and personal nature of the dignity of every human person – including their own.¹⁰

¹⁰ World Youth Alliance would like to thank all who have assisted in the development of this program. From our staff and interns, to our regional members and HDC teachers, to the teachers and partners who have believed in this program and worked tirelessly to assist us in its practical development and implementation: thank you. Particular thanks to Alexis Kende and Anne Mille Guzman for assistance in the writing of this report. Thanks to those who have helped in the content development, classroom testing, and evaluation. Their names are too numerous to mention here but we are grateful for the support and contribution of each and every one of them.