**Influences on a sense of self**

**Influences on me**

1. What five things significantly influence you?

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| **5 things that influence me** |
| 1.  |
| 2.  |
| 3. |
| 4. |
| 5. |

1. How does the degree of influence change in different situations for each?

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1. What factors had the greatest influence on you when you were in Year 4/5? Why?

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1. What factors do you think will have the greatest influence on you when you are in Year 10? Why?

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1. Explain how the factors that influence you may change as you become older.

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**What can and can’t I control?**

1. Explore the ways in which each of the factors below influence a person’s sense of self by completing the tables.

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| **Factors I can control** | **How can they influence a person’s sense of self?** |
| 1. Diet  |  |
| 2. Physical activity |  |
| 3. Leisure/recreation |  |
| 4. School/work |  |
| 5. Peers |  |
| 6. Stress |  |

If you feel like you do not have control of some of these factors, describe strategies that you could put in place to take control of these.

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| **Factors beyond my control** | **How can they influence a person’s sense of self?** |
| 1. Family |  |
| 2. Environment |  |
| 3. Heredity |  |
| 4. Age |  |
| 5. Gender |  |