

Lakota Circles of Hope Facilitator Fidelity Self-Assessment Form

Lesson 2: My Winter Count of Gratitude (Week 1)

Date: _____ Grade: 4th Number of Students: _____ Boys _____ Girls _____
 Start Time: _____ End Time: _____ Estimated Time on Task: _____
 School: _____ Facilitator/Educator: _____

Please check off activities that were completed.

Activity	Completed	Facilitator	✓	Youth Outcome
1. Review last lesson 2. Talking Circle & Smudge	<input type="checkbox"/>	Highlight last lesson “Hocoka Ohomni Wacinyekiyapi (Gathering into a circle with hope)” and last week value respect-yuonihan (yu-o-ni-han)	<input type="checkbox"/>	Students will be able to differentiate between the do’s and don’ts of respectful behavior. All students will be able to actively participate, and take ownership inside the Medicine Wheel Circle.
	<input type="checkbox"/>	Have students form Medicine Wheel Circle and smudge, Talk about circle protocol. Introduce today’s value generosity- wacantognaka (wa-can-to-gnaka).		
3. Discuss “Role-Models” and the “Winter Count”	<input type="checkbox"/>	Discuss and write down traits of a role model. Discuss the purpose of the “Winter Count” in Lakota History.	<input type="checkbox"/>	Students will understand value of generosity.
	<input type="checkbox"/>		<input type="checkbox"/>	Students will explain the purpose of a winter count and why this was important to the Lakota people.
4. Do circle activity, “Making a Winter Count”	<input type="checkbox"/>	Pass out workbooks and handouts.	<input type="checkbox"/>	The students will practice the Lakota value of generosity, and will understand the importance of active listening skills and assess facts about others.
	<input type="checkbox"/>	Explain to students the significance of a winter count.		
	<input type="checkbox"/>	Show examples of winter count images.	<input type="checkbox"/>	Students will complete a Winter Count that describes the positive qualities and events in their lives.
	<input type="checkbox"/>	Have students start drawing. Can take pictures of them to add to winter count.		
	<input type="checkbox"/>	Closing: Put all materials away.		

1) Were there any challenges with any of the activities? ___ Yes ___ No

Why? _____

2) Did you skip any activities? ___ Yes ___ No

Why? (e.g., group too large, had mandatory fire drill, etc.) _____

3) Which activity or activities went especially well for you?

4) Did you make any changes in this session? ___ Yes ___ No

Why? _____

5) If you made any changes how would you rate the changes?

___ **Green (Spontaneous or Minor)**

___ **Yellow**

___ **Red (Major)**

___ **Does not apply**