

BETHUNE 2016/2017

CLUBS & SPECIAL EVENTS	LEADERSHIP & PERFORMANCE GROUPS	ATHLETICS, INTRA-MURALS, COMPETITION
<p>American Sign Language - H. Webster <i>Friday's Lunch T102</i></p> <p>Anime - Mr. Chard <i>Fri's Lunch T107</i></p> <p>Art - Ms. Rappos <i>Wed's After School T101</i></p> <p>Bethune Journal - Mr. Small <i>Thurs's Lunch A114</i></p> <p>Breakfast Club - Tuzi, Kaskens, Pagnotta Cedona Ho, Emily Ma, Adnan Mohammedi</p> <p>Chinese Association - Ms. Yeung Pres: Nicky Huang; Vice-Pres: Ambrose Chen; Secretary: Hanwei Xue; PR: Fan Xi Lian, Drama: Quiana Xing <i>Friday's After school B207</i></p> <p>Christian Fellowship - Mr. Ishiguro <i>Wednesday's After School B108</i></p> <p>Club3 - Rubrik's Cube Puzzle (+ Chess) Mr. Dyal, Ms. Soni, Jason Dai, Johnny Huang, Simon Liu, Ted Liu, Alan Zhu, Jason Zhu, Evan Cui <i>Thurs after school A106, A108</i></p> <p>Dance Troupe - Ms. Selvam Leader: Anusha Humayan <i>Mon/Tues after school T102</i></p> <p>GSA - Mr. Oortwyn <i>Fri's Lunch C100</i></p> <p>Knitting Club - Ms. Kaskens Adrienna Tan <i>Thurs/Fri's Lunch T103</i></p> <p>Latin - Mr. Adam <i>Mon/Wed. Lunch A110</i></p> <p>Library Helpers - Ms. Katrivanos <i>Before School/Lunch/After school Lib.</i></p> <p>Math Club - Mr. Tam, Co-Presidents: Richard Zhang, Andy Yang. Vice-Pres: Peggy Zhang, Rachel Du, Jack Zuo, Jade Huang <i>Wed's after school B208</i></p> <p>Outdoor Gentlemen's Club - Mr. Mueller Leaders: Joshua Wang, Andy Xu <i>Monday's After school T110</i></p> <p>Plants of Bethune (Garden Club) - Mr. K. Lee, Ms. Tutchener, Ruiying Jia <i>*Wednesday's After School A201</i></p> <p>Prom Committee - Ms. Chow, Razan Mohamed, Joyce Dao, Shirley Wu <i>*Friday's Lunch B110</i></p> <p>Red Wiggler - Ms. Tutchener Jacky Duong <i>2-3 times/week during lunch</i></p> <p>Science Club - Mr. K. Lee, Ms. Pitt, Ms. Kim, Ms. Tutchener, Mr. Parmer, Ms. Chow <i>Wed's After School B103</i></p> <p>Spanish Club - Ms. Tibbet, Ms. Barrs, Ms. Barrile <i>Monday's Lunch A107</i></p> <p>White Pine Book Club - Ms. Katrivanos <i>Lunch time - Tues, Wed, Thurs (varies) Lib.</i></p> <p>Young Women on the Move - Ms. Barrile Leaders: Serena Ha, Anna Wang, Selina Lam, Annie Wang <i>Wed's Lunch A109</i></p> <p>SPECIAL EVENTS</p> <p>Run for the Cure - Ms. Aziz</p> <p>Terry Fox - Ms. Aziz, Ms. Villamin-Arenas</p> <p>30 Hour Famine - Ms. Lac</p> <p>TDSB 5KM Run - Ms. Aziz</p> <p>TEDx Bethune - Ms. Pitt, Ms. Aziz</p>	<p>LEADERSHIP</p> <p>SAC (Student Activity Council) - Mr. Malisani, Mr. K. Lee President: Matthew Ma Vice-President: Wenson Gan Secretary: Anna Wang Treasurer: Richard Shi Spirit Coordinators: Jocelyn Ye, Sally Lam Advertising Consultants: David Ye, Philo Ataala, Theepika Anandadevan, Mathusha Sivakumar Grade 12 REPS: Vazhin Fadhil, Christen Wong Grade 11 REPS: Arish Sivaruban, Ivy Yu Grade 10 REPS: Amethyst Cheung, Chris Liang Grade 9 REPS: TBA Student REPS: Ying Zhang, Sally Lam <i>Meets Monday's @ Lunch in SAC Office</i></p> <p>REPS (Ambassadors) - Mr. Ishiguro Execs: Joyce Dao, Annie Wang, Daniel Loveson, Karen Tan, Sherman Lin</p> <p>BEM (ESL Mentors) - Ms. Du, Ms. Wright, Ms. Soni Pres: Crystal Cao Vice-Pres: Clover Qi Secretary: Colleen Shi; PR: Vivian Liao, Teresa Wang</p> <p>PSR (Personal and Social Responsibility) - TBA Execs: Jocelyn Ye, Shirley Wu, Anna Wang, Trisha Yau</p> <p>Healthy Schools - Ms. Daniels, Ms. Villamin-Arenas Co-Presidents: Tiffany Lin, Emily Ma Secretary: Ivy Yu Advertising Consultant: Selina Lam Event Coordinator: Annie Hu <i>Execs meet Wed @ lunch; Members meet Thurs @ lunch B205</i></p> <p>B.E.A.T. (Environmental Action Team) - Ms. Tutchener, Ms. Lac, Ms. Goldberg, Ms. Carr Leaders: Coco Liang, Yuki Yeung, Crystal Cao, Tina Huang, Jacky Duong, Clover Qi, Anna Wang, Oriana Wong, Steven Xu, Cedona Ho, Emily Ma <i>Execs meet 1st Mon of month; members meet Mon's after school A201</i></p> <p>ABC (Athletic Council) - Ms. Aziz, Mr. Watson President: Nicole Zhu Vice-President: Madeline Koo Leaders: Ying Zhang, Chin Na Tu, Gracie Ouyang <i>Meets Monday's After school G101</i></p> <p>BMC (Music Council) - Mr. Sylvester President: Katherine Lan Secretary: Emily Yip Treasurer: Thomas Cheng Public Relations Officer: David Ye Coordinator of Fundraising: Oriana Wang Coordinator of Planning: Ivy Yu Feeder School Liaison: Cindy Li</p> <p>Year Book - Ms. Blom Editors: Shirley Wu, Jessica Jayanthiran <i>Meets Friday's after school A212</i></p> <p>BLAZE - Mr. Dyal Co-Presidents: Joyce Cheung, Joyce Dao Technical Support Lead: Christine Tsui Sound Support Lead: Arish Sivaruban Lighting Support Lead: Ayush Gupta</p> <p>PERFORMANCE GROUPS</p> <p>Wind Ensemble (Grade 10-12) - Mr. Sylvester, Ms. Kilbride <i>Thurs/Fri. 7:30 a.m. (sectionals), Tuesday's after school</i></p> <p>Concert Band (Grade 9) - Ms. Kilbride, Mr. Sylvester <i>Monday's 7:30 a.m. (sectionals), Wednesday's after school</i></p> <p>Stage Band - Mr. Sylvester <i>Wednesday's 7:30 a.m., Monday's after school</i></p> <p>Festival Singers - Ms. Willoughby <i>Thursday's after school</i></p> <p>Junior Choir - Ms. Willoughby</p> <p>Jazz Choir - Ms. Blom <i>Wednesday's after school</i></p>	<p>ATHLETICS - FALL</p> <p>Cross-Country - Mr. Till, Mr. Scriven, Ms. Fisher</p> <p>Field Hockey, Girls - Ms. Aziz</p> <p>Golf, Girls - Ms. Ceccol</p> <p>Rugby 7's Boys - Mr. J Lee, Mr. Watson</p> <p>Basketball, Girls - Ms. Tharani</p> <p>Volleyball Jr. Boys - Mr. Wojcik</p> <p>Volleyball Sr. Boys - Mr. Luong</p> <p>ATHLETICS - WINTER</p> <p>Basketball, Boys - Mr. Humphrey</p> <p>Floor Ball - Mr. Watson, Mr. Chard</p> <p>Volleyball, Jr. Girls - Mr. Wojcik</p> <p>Volleyball, Sr. Girls - Ms. Fisher</p> <p>Wrestling - Mr. Villote, Mr. Laufer, Mr. Eisenberg</p> <p>Curling - Mr. K. Lee, Ms. Anderson</p> <p>Archery - TBD</p> <p>ATHLETICS - SPRING</p> <p>Badminton - Ms. Villamin-Arenas, Ms. Aziz</p> <p>Baseball - Mr. Dyal, Ms. Tharani</p> <p>Rugby - Mr. J. Lee, T. Watson</p> <p>Soccer, Girls - Ms. Aziz</p> <p>Soccer, Boys - Mr. Williams, Mr. Cullum, Mr. Laufer</p> <p>Slo-pitch Softball, Girls - Ms. Ceccol, Mr. Watson, Ms. Fisher</p> <p>Track - Mr. Wojcik, Mr. Till, Ms. Fisher, Ms. Russell</p> <p>Frisbee - Mr. K Lee, Mr. Scriven</p> <p>INTRAMURALS</p> <p>Frisbee, Basketball, Dodgeball</p> <p>Volleyball, Floorball</p> <p>COMPETITION CLUBS</p> <p>Cheer Team - Ms. Chow Leader: Fabiana Chow</p> <p>Chess - Ms. Soni, Mr. Dyal (+ Club3) Leader: Andy Yang <i>Thursday's after school A106</i></p> <p>Debate - Ms. Yeung, Mr. Tam <i>Wednesday's after school B107</i></p> <p>DECA - Ms. Yeung Co-Presidents: Jessica Chan Oriana Wang VP's of Competition: Kelly Tang, Annie Wang, David Ye VP's of Fundraising: Serena Ha, Katherine Lan Treasurer: Jing Zhong; Public Relation Officers: Joyce Dao, Arish Sivaruban; Secretaries: Thomas Cheng, Joyce Cheung <i>Thursday's afterschool B202, 206, 207</i></p> <p>Design @ Bethune Team - Mr. Mueller <i>Tuesday's after school - T110</i></p> <p>Electronics Skills Competitions - Mr. Pham <i>Thursday's after school T104</i> <i>Club meets Wed's after school T104</i></p> <p>HOSA - Ms. Pitt, Ms. Kim President: Tiffany Lin; VP of Planning: Razan Mohamed; PR Officer: Stephanie Liang Fundraising Coordinator: Carmen Lam Secretary: Claire Guan; Treasurer: Eden Lo Event Coordinator: Karen Jiang <i>*Tuesday's lunch B Wing</i></p> <p>Reach - Ms. Pitt, Mr. Oortwyn <i>Tuesday's & Thursday's, lunch time B103</i></p> <p>Robotics - Mr. Ishiguro <i>Monday's & Friday's after school T104</i></p>

CONCUSSION TOOL

For Coaches, Teachers, Parents, Students and Athletic Therapists

What is a concussion?

A concussion is a brain injury that cannot be seen on routine x-rays, CT scans, or MRIs. It affects the way a person may think and remember things and can cause a variety of symptoms and signs. You do NOT need to lose consciousness to have a concussion.

What causes a concussion?

Any blow to the head, face or neck, or a blow to the body that transmits a force to the head may cause a concussion, e.g., a ball to the head in soccer, being checked into the boards in hockey.

What are the symptoms and signs of a concussion?

Any one or more of the following symptoms and signs may suggest a concussion:

	Symptoms Reported:		Signs Observed:	
Physical	<ul style="list-style-type: none"> • Headache • Neck pain • Stomach ache • Blurred vision 	<ul style="list-style-type: none"> • Pressure in head • Dizziness • Nausea • Sensitivity to light/noise 	<ul style="list-style-type: none"> • Loss of consciousness • Nausea/vomiting • Seizure/convulsion • Poor coordination/balance 	<ul style="list-style-type: none"> • Amnesia • Slowed reaction time • Slurred speech
Cognitive	<ul style="list-style-type: none"> • Feeling in a fog • Difficulty concentrating 	<ul style="list-style-type: none"> • Difficulty remembering 	<ul style="list-style-type: none"> • Difficulty concentrating • Difficulty remembering 	<ul style="list-style-type: none"> • Confusion • Slowed reaction time
Behavioural	<ul style="list-style-type: none"> • Irritability • Sad/emotional 	<ul style="list-style-type: none"> • Nervous/anxious • Depressed 	<ul style="list-style-type: none"> • Inappropriate emotions • Depression 	
Sleep	<ul style="list-style-type: none"> • Drowsiness 	<ul style="list-style-type: none"> • Difficulty falling asleep 	<ul style="list-style-type: none"> • Drowsiness 	

Note: It may be more difficult for students under the age of 10, those with special needs or students for whom English or French is not their first language, to communicate how they are feeling. The signs of a concussion for younger students may not be as obvious.

Action plan: What to do if you suspect a student has a concussion

If the student is **unconscious**:

- Initiate the Emergency Action Plan and call 911.
- Assume a possible neck injury and, only if trained, immobilize the student before EMS arrives.
- Do not move the student or remove athletic equipment; wait for EMS to arrive.
- Do not leave the student alone.
- Contact the student's parent/guardian.

If the student is **conscious**:

- Stop the activity immediately.
- When the student can be safely moved, remove from activity.
- Conduct an initial concussion assessment – review Symptoms and Signs, perform Memory Testing and Balance Testing (optional).
 - i. Following the initial assessment, if a **concussion is suspected**:
 - Do not allow the student to return to activity.
 - Contact the student's parent/guardian to pick up student.
 - Stay with the student until parent/guardian arrives.
 - If any signs or symptoms worsen, call 911.
 - Inform the parent/guardian that the student needs to be examined by a medical doctor or nurse practitioner as soon as possible and provide them with a copy of this tool.
 - ii. Following the initial assessment, if a **concussion is not suspected**:
 - The student may return to activity.
 - Contact the student's parent/guardian to inform them of the incident.
 - Provide the parent/guardian with a copy of this tool and inform them that the student should be monitored for 24-48 hours since signs and symptoms may take hours or days to emerge.

Memory Testing

Failure to answer any one of these questions correctly may suggest a concussion.

- What activity/sport are we playing right now?
- What field/facility are we at today?
- What part of the day is it?
- What is the name of your teacher/coach?
- What school do you go to?

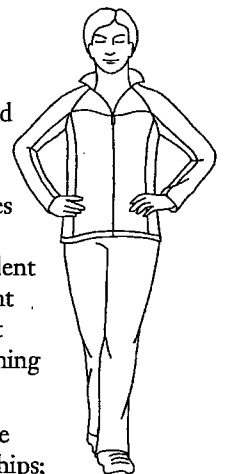
Note: Questions should be geared to student's age and activity.

Balance Testing (OPTIONAL)

Instructions for tandem stance

Ask the student to stand heel-to-toe with non-dominant foot in back. Weight should be evenly distributed across both feet. Student should try to maintain stability for 20 seconds with hands on hips and eyes closed. Count the number of times the student moves out of this position. If student stumbles out of this position, have student open his/her eyes and return to the start position and continue balancing. Start timing when student is set and has eyes closed.

Observe the student for 20 seconds. If the student makes errors (e.g. lifts hands off hips; opens eyes; lifts forefoot or heel; steps, stumbles, or falls; or remains out of the start position for more than 5 seconds), this may suggest a concussion. *SCAT 2 2009*



GUIDELINES FOR STUDENTS RECOVERING FROM A CONCUSSION

It is important for students to be active and play sports. However, a student with a diagnosed concussion needs to follow a medically supervised, individualized Return to Learn/Return to Physical Activity Plan.

Return to Learn and Return to Physical Activity

Step 1 for a student with a diagnosed concussion is the same for Return to Learn and Return to Physical Activity.

Step 1: Rest, with limited cognitive and physical activity. This means limited TV, computer, texting, video games, or reading. The student does not attend school during Step 1. Step 1 continues for a minimum of 24 hours and until the student's symptoms/signs begin to improve or the student is symptom/sign-free.



Return to Learn*

The Return to Learn process is individualized and gradual to meet the particular needs of the student. There is no preset formula for developing strategies to assist a student with a concussion to return to his/her learning activities.

Step 2A: (symptoms improving)

During this step, the student requires individualized classroom strategies and/or approaches to return to full learning activities – these will need to be adjusted as recovery occurs.

At this step, the student's cognitive activity should be increased slowly (both at school and at home) because the concussion may affect his/her academic performance.

Note: Cognitive activities can cause a student's concussion symptoms to reappear or worsen.

Step 2B: (symptom-free)

Student begins regular learning activities without any individualized classroom strategies and/or approaches. Even when students are symptom-free, they should continue to be closely monitored to see if symptoms/signs return and/or there is a deterioration of work habits or performance.

Note: This step occurs at the same time as Step 2 – Return to Physical Activity. Some students may progress from Step 1 directly to Step 2B if they are symptom-free.

Return to Physical Activity

Step 2:

Individual, light aerobic physical activity only such as walking or stationary cycling.

Step 3:

Individual activity related to specific sports, e.g., skating in hockey, running in soccer. No body contact.

Step 4:

Activities where there is no body contact, such as progressive resistance training, non-contact practice and progression to more complex training drills, e.g., passing drills in football and ice hockey.

Note: Clearance by a medical doctor or nurse practitioner is required before Step 5.

Step 5:

Full participation in regular physical activity in non-contact sports following medical clearance. Full training/practice for contact sports.

Step 6:

Full participation in contact sports.

Note: Steps are not days. Each step must take a minimum of 24 hours and the length of time needed to complete each step will vary based on the severity of the concussion and the child/youth.

If at any time concussion signs and/or symptoms return and/or deterioration of work habits or performance occurs, the student needs to be examined by a medical doctor or nurse practitioner.

For more information on concussions visit:

Concussions Ontario: www.concussionsontario.org

Ophea: safety.ophea.net

Parachute: www.parachutecanada.org/active-and-safe

Ontario Government: www.ontario.ca/concussions

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Developed based on tools in the literature including the International Consensus Statement on Concussion in Sport (2013) and the ThinkFirst concussion tool.

This tool has been reviewed by the Parachute/ThinkFirst Canada Concussion Education and Awareness Committee and the Recognition and Awareness Working Group, part of the mTBI/Concussion Strategy, of the Ontario Neurotrauma Foundation who funded the development of this tool.

脑震荡工具

供教练、老师、家长、学生和运动治疗师使用

什么是脑震荡？

脑震荡是无法在常规X光、CT扫描或MRI上看到的脑损伤。它影响到一个人的思维和记忆方式，可引起多种症状和体征。患脑震荡不一定会丧失意识。

是什么引起脑震荡？

头部、脸部或颈部受外力打击，或身体受到外力打击，力量传导至头部，均可引起脑震荡，比如踢足球时足球击中头部，打冰球时被撞到板上。

脑震荡的症状和体征是什么？

出现以下一个或多个症状和体征，可能表明患有脑震荡：

	报告的症状:	观察到的体征:
身体	<ul style="list-style-type: none"> ● 头痛 ● 颈痛 ● 胃痛 ● 视力模糊 	<ul style="list-style-type: none"> ● 头部压迫感 ● 晕眩 ● 恶心 ● 对光/声音敏感
认知	<ul style="list-style-type: none"> ● 意识模糊 ● 注意力不集中 	<ul style="list-style-type: none"> ● 记忆困难
行为	<ul style="list-style-type: none"> ● 易怒 ● 悲伤/情绪化 	<ul style="list-style-type: none"> ● 紧张/焦虑 ● 忧郁
睡眠	<ul style="list-style-type: none"> ● 嗜睡 	<ul style="list-style-type: none"> ● 失眠

备注：年龄在10岁以下的学生、有特殊需要的学生或母语不是英语或法语的学生表达自己的感受可能更困难。较年幼的学生，脑震荡体征可能不太明显。

行动计划：如果您怀疑学生患脑震荡该怎么办

如果学生不省人事：

- 启动应急行动计划，致电911。
- 假定可能是颈部受伤，除非受过相关培训，否则，在紧急医疗服务人员抵达前，将学生固定不动。
- 不要移动学生或脱下运动装备；要等待紧急医疗服务人员到来。
- 不要丢下学生独自一人。
- 联络学生的家长/监护人。

如果学生意识清醒：

- 立即停止活动。
- 在可以安全移动学生的情况下，离开活动现场。
- 进行脑震荡初步评估 - 检视症状和体征，做记忆测试和平衡测试（任选）。
 - 初步评估结束后，如果怀疑患脑震荡：
 - 不许学生恢复活动。
 - 联络学生家长/监护人接走学生。
 - 在家长/监护人到来前，陪在学生身边。
 - 如有任何体征或症状恶化，致电911。
 - 告知家长/监护人，必需尽快让学生接受医生或护士的检查，并向家长/监护人提供一份“脑震荡工具”。
 - 初步评估结束后，如果没有怀疑患脑震荡：
 - 学生可以恢复活动。
 - 联络学生的家长/监护人，向他们告知此事。
 - 向家长/监护人提供本工具，告诉他们应观察24-48小时，因为体征和症状可能会在数小时或数日后才出现。

记忆测试

未能正确回答以下任何一个问题可能表示患有脑震荡。

- 我们现在正在进行什么活动/运动？
- 我们今天在什么场所/设施？
- 现在是一天当中的什么时候？
- 你的老师/教练叫什么名字？
- 你上哪所学校？

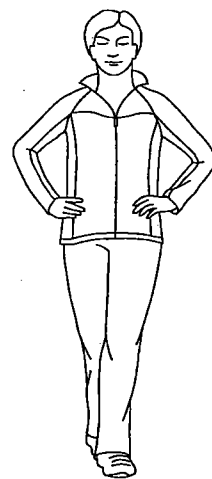
备注：问题应该与学生的年龄和活动相符。

平衡测试（任选）

双脚前后站立姿势说明

要求学生脚趾对脚跟站立，非惯用脚在后。体重应均匀分布于双脚。学生应尽量保持稳定20秒，双手叉腰，闭上双目。计算学生失去平衡的次数。如果学生晃动失去平衡，让学生睁开眼睛，回到开始的姿势，继续平衡。从学生摆好姿势并闭上眼睛时开始计时。

观察学生20秒钟。如果学生犯错（例如手离开髋部，睁开眼睛，抬起脚前掌或脚跟，跨步、摇晃或摔倒，或无法保持开始姿势5秒以上），可能表示患有脑震荡。SCAT 2 2009



学生脑震荡恢复指引

学生锻炼身体、参加体育运动很重要。但是，被确诊脑震荡的学生需在医疗监督下，遵循针对个人的恢复学习/恢复体能活动计划。

恢复学习和恢复体能活动

被确诊患有脑震荡的学生，恢复学习的第1步与恢复体能活动的第1步相同。

第1步：休息，限制认知和体能活动。这意味着限制看电视、用计算机、发短信、玩电玩游戏或看书。在第1步中，学生不上学。第1步至少持续24小时，直至学生的症状/体征开始改善或消失。



恢复学习*

恢复学习的过程因人而异，循序渐进，以便满足学生的特定需求。在制定帮助脑震荡学生恢复学习活动的策略时，没有预定的模式。

第2A步：（症状在改善）

在这一步，学生需要通过个人化的课堂策略和/或方法恢复全面的学习活动，这些策略/方法必需随着复原的进展加以调整。

在这一步，应缓慢增加学生的认知活动（在学校和在家里），因为脑震荡可能会影响学生的学业表现。

备注：认知活动可能造成学生的脑震荡症状复发或恶化。

第2B步：（无症状）

学生开始正常的学习活动，而不采取个人化课堂策略和/或方法。即便学生没有症状，也应继续密切观察，看是否重新出现症状/体征，和/或工作习惯或表现是否恶化。

备注：这一步与恢复体能活动第2步同时进行。一些没有症状的学生可以从第1步直接进入第2B步。

恢复体能活动

第2步：

仅限于个人化轻微有氧体能活动，比如散步或健身车运动。

第3步：

与特定运动相关的个人活动，比如冰球运动中的滑冰，足球运动中的跑步。不要发生身体接触。

第4步：

没有身体接触的活动，比如渐进式阻力训练、非接触式练习，并逐渐过渡到更为复杂的训练练习，比如橄榄球和冰球运动的传球练习。

备注：进行第5步前，必须得到医生或护师的同意。

第5步：

得到医护人员同意后，全面参与非接触式运动的正常体能活动。接触式运动的全面训练/练习。

第6步：

全面参与接触式运动。

备注：恢复的步数并非天数。每一步必须至少持续24小时，完成每一步所需的时间长度因脑震荡的严重程度及受伤儿童/青少年的情况而不同。

如果在任何时候脑震荡体征和/或症状复发，并且/或者工作习惯或表现恶化，则学生需接受医生或护师的检查。

如需有关脑震荡的更多信息，请浏览

安省脑震荡组织：www.concussionsontario.org

Ophea：safety.ophea.net

Parachute：www.parachutecanada.org/active-and-safe

安省政府：www.ontario.ca/concussions

* 经Ophea允许翻印，安省体育教育安全指引（每年更新）

依据文献中的相关工具编写，包括International Consensus Statement on Concussion in Sport (2013)和ThinkFirst脑震荡工具。

本工具经由Parachute/ThinkFirst Canada脑震荡教育与认知委员会(Concussion Education and Awareness Committee)和为本工具的编写提供资助的安省神经创伤基金会(Ontario Neurotrauma Foundation) mTBI/ 脑震荡策略下属的认识与认知工作组(Recognition and Awareness Working Group)审核。