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ABSTRACT

A drug abuse prevention curriculum for middle school students in grades five through eight is presented in this document, one of a series that is designed to provide educators with the curricular tools necessary to challenge students to take personal responsibility for their health. Each of the 11 lessons includes information of the lesson objective, class time required, a brief overview of the topic, instructional strategies, teacher materials and preparation, procedures, homework, evaluation materials, and concluding activity. This guide arms middle school students with up-to-the-minute facts on drugs, and engages them in activities that encourage healthy, drug-free choices. Particular consideration is given to tobacco, alcohol and marijuana, including health hazards and societal impacts of their use. The 11-lesson curriculum unit develops students' understanding of the dangers of drug use and encourages the development of decision-making and refusal skills through role playing, cooperative learning groups, oral presentation and research assignments. Students are challenged to identify personal and social factors that influence drug use and non-use. Guidelines are provided for educators to enhance the classroom comfort level when teaching about the prevention of alcohol and other drug use. A glossary of drug terms and a bibliography are included. A separately bound student workbook contains identical exercises and activities for students as those found in the teacher's guide. (ARL)

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Dale W. Evans, HSD and Susan Giarratano, EdD

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CONTEMPORARY HEALTH SERIES



CG022007

INTO ADOLESCENCE: **Avoiding Drugs**

INTO ADOLESCENCE:

Avoiding Drugs

A Curriculum for Grades 5-8

Dale Evans, HSD and Susan Giarratano, EdD

Contemporary Health Series
Kathleen Middleton, MS, Series Editor

Network Publications, a division of ETR Associates
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Network Publications' Contemporary Health Series

Into Adolescence (for grades 5-8)

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Understanding Reproduction, Birth and Contraception
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EDITOR'S PREFACE

Contemporary Health Series

Health educators and practitioners know that prevention of health problems is far more desirable than treatment. The earlier the knowledge and skill to make healthful decisions are instilled, the greater the chance a healthful lifestyle will be adopted. School is the logical place in our society to provide children, adolescents and young adults the learning opportunities essential to developing the knowledge and skills to choose a healthful life course.

The **Contemporary Health Series** has been designed to provide educators with the curricular tools necessary to challenge students to take personal responsibility for their health. The long range goals for the **Contemporary Health Series** are as follows:

Cognitive. Students will recognize the function of the existing body of knowledge pertaining to health and family life education.

Affective. Students will experience personal growth in the development of a positive self-concept and the ability to interact with others.

Practice. Students will gain skill in acting on personal decisions about health-related life choices.

Within the **Contemporary Health Series** there are two curricular divisions: *Into Adolescence* for middle school teachers and *Entering Adulthood* for high school teachers. The *Into Adolescence* modules focus on several different health and family life topics. Modules addressing puberty, AIDS, the family, self-esteem, reproduction and birth, and sexual abstinence have been developed by skilled author/educators. *Entering Adulthood* includes reproduction, birth

and contraception; health behavior, communication and self-esteem; AIDS and other STDs; relationships; and sexual abstinence.

All the authors are, or have been, classroom teachers with particular expertise in each of the topic areas. They bring a unique combination of theory, content and practice resulting in curricula which weave educational learning theory into lessons appropriate for the developmental age of the student. The module format was chosen to facilitate flexibility as the modules are compatible with each other but may stand alone. Finally, ease of use by the classroom teacher has driven the design. The lessons are comprehensive, key components are clearly identified and masters for all student and teacher materials are provided.

The Contemporary Health Series is intended to help teachers address critical health issues in their classrooms. The beneficiaries are their students, our children, and the next generation.

**Kathleen Middleton, MS, CHES
Series Editor**

INTRODUCTION

Drug use appears to be a continuing and expanding problem in our society. Every day, newspapers and T.V. newscasts highlight drug-related crime, inner-city drug problems and the frustration of law enforcement efforts to control drugs. Numerous research studies and surveys confirm that drug use is not limited to adults but also involves our youth. While recent studies suggest that drug use is declining, the number of Americans who have used drugs is startling. It is estimated that about 37 percent of the population age 12 or over have tried an illegal drug at least once. Drug use may begin as early as elementary school, and by the time they reach middle school, students may be making important decisions about drug use. Schools have both an obligation and an opportunity to contribute to society's efforts to minimize drug use.

The Role of the School in Drug Education

Over the past 30 years, education has been challenged to help cure broad societal ills such as racism, teen pregnancy and drug abuse. Some have looked to the schools for deliverance from these problems, ignoring individual responsibility. Schools can play an important role in the fight against drug use, yet it is unfair to place the total burden for this task upon teachers. A unified community approach to controlling drug use seems to be our only hope.

Education about drugs is most effective as part of a comprehensive school health education program. Effective drug education requires a coordinated effort, beginning with the very young, with a major emphasis at the upper elementary and middle school levels. This sensitive subject area requires strong commitment and cooperation from parents, teachers and administrators. The most successful prevention programs are the result of a coalition of parents, educators,

students and community leaders, including professionals and those involved in law enforcement. Many schools have implemented a triad approach to this issue: education, intervention and referral. While each factor is important, education has the greatest potential for controlling drug use. Even though parents are a child's most important teacher, professional educators also play a significant role in our children's lives and futures!

Teacher Responsibilities

The best drug education teacher is likely to be the best classroom teacher, regardless of subject expertise. While teachers of science, health, social studies and physical education are most often called upon to teach drug education, any teacher can be successful in teaching the prevention of drug use. Educators with the best communication skills and an interest in the subject should be among the first choices.

Before beginning this series of lessons, the teacher should review school district and state requirements for drug education, investigate school district policies regarding drug use and be aware of local law enforcement statutes. Blending the instructional materials presented here with the realities of a local community focus will increase the chances of success.

By its very nature, an investigation into the area of drugs is complex. The lessons in this module provide the teacher with extensive content information. The instructional strategies offered here bridge the gap between content and its application to preventing drug use among students. While several strategies focus on process, such as decision-making and refusal skills, most teachers will want to expand these areas by incorporating additional educational materials.

Editor note: While the authors feel strongly that decision-making and refusal skills are essential to any effective drug use prevention program, lengthy descriptions of these processes have not been provided here, as they are fully developed in other Network Publications and found in many other prevention curricula. The lessons in this module about decision-making and refusal skills are designed to provide the appropriate place for teachers to expand and integrate other program materials according to time and availability.

Specifically, Network Publications offers an entire refusal skills and decision-making program entitled *Saying No*. The program includes three curricula: *Saying No to Tobacco*, *Saying No to Alcohol* and *Saying No to Marijuana*. Additional student books are available, including three books about the content of tobacco, alcohol and marijuana. They are: *Alcohol: The Real Story*; *Tobacco: The Real Story*; and *Marijuana: The Real Story*. Three other interactive fictional books show the consequences of decisions about using tobacco, alcohol and marijuana made by teenage characters. These books, entitled: *Danny's Dilemma*, *Serena's Secret* and *Christy's Chance*, are also available from Network Publications.

Setting Classroom Atmosphere

The classroom climate established by the teacher is probably the single most critical factor in the successful implementation of a prevention program. Students should share what they know or what they think they know; and although teachers may not have all the answers, they should respond to every question. If teachers don't have an answer, they should say so and tell students what process will be used to find the correct answer. Although a few students may be too shy to ask questions, the teacher can generally expect most students to actively participate. In an effective classroom, students will learn from one another.

Each student's opinions are of value and should be valued, even if they are different from another student's. Teachers should clarify guidelines for sharing information, and class discussions should be structured so that students feel as comfortable as possible. Both teachers and students have the option to pass when they have been asked a question they don't want to answer.

Groundrules

The following groundrules can be used to assist teachers in establishing a comfortable, open and effective learning environment. Teachers are encouraged to customize the following list to best meet their own teaching style and student needs.

For teachers:

- Be a healthy role model; after all, you are one for students!
- Use healthy role models for positive examples.
- Don't sensationalize drug use.
- Use of outside speakers, particularly recovering addicts and alcoholics, can be educationally risky and often not worth the value.
- Restrict the use of fear as a motivating force in prevention. The impact of fear has limited, short-term value.
- Be prepared to refer students to school and community agencies.

For students:

- Respect the feelings and thoughts of others—no put-downs. Keep in mind that there are no dumb questions.
- Respect the right of others to pass on a question.
- Use scientific terms rather than slang or street terms.
- Avoid sharing personal stories about others.

Objectives

- Lesson 1** *What Is a Drug?* ■ Students will be able to explain ways that drug use impacts society.
- Lesson 2** *To Use or Not to Use Drugs* ■ Students will be able to identify reasons teenagers use drugs.
- Students will be able to list reasons for not using drugs as well as alternatives to drug use.
- Lesson 3** *Ads May Not Be a Plus* ■ Students will be able to analyze common advertising techniques used with health and drug products.
- Lesson 4** *Tobacco Use: The Leading Cause of Preventable Death* ■ Students will be able to identify the major effects of tobacco on the body.
- Students will be able to support the statement "Tobacco use is the leading cause of preventable deaths in the United States" by explaining the impact of tobacco use on society.
- Lesson 5** *Alcohol: A Sobering Concern* ■ Students will be able to identify the major effects of alcohol on the body.
- Students will be able to analyze ways alcohol use impacts society.
- Lesson 6** *Marijuana Use: A Smoke Screen* ■ Students will be able to identify health hazards of marijuana use by young people.
- Students will be able to identify personal reasons not to use marijuana.
- Lesson 7** *A Drug for Every Problem?* ■ Students will be able to describe the appropriate role of over-the-counter and prescription drugs.

Lesson 8 *More Drugs with Potential for Abuse*

- Students will be able to identify the medical uses and the potential hazards of selected drugs.
- Students will be able to describe the dangers involved in using cocaine, inhalants and steroids.

Lesson 9 *It's Your Decision!*

- Students will be able to demonstrate useful steps in responsible decision making.
- Students will be able to identify sources of help for common problems and critical situations.

Lesson 10 *Saying No!*

- Students will be able to identify assertive steps to saying no.
- Students will be able to demonstrate "no" responses in given situations.

Lesson 11 *Avoiding Drugs in Your Future*

- Students will be able to summarize the impact of drug use upon their future.
- Students will be able to summarize the impact of drug use on society.
- Students will be able to identify their personal contributions to a drug-free life.

Instructional Strategies

Different teaching and learning styles require that a variety of instructional strategies be employed in the classroom. While some of the strategies that have been identified are traditional, such as class discussion and teacher lecture, most of the strategies promote an interactive approach. Select those strategies that best meet the needs of your students. Specific strategies used in each lesson are listed directly below that lesson's overview. Use of the Glossary will encourage integration with language arts. This section contains a list with descriptions, in alphabetical order, of the instructional strategies used.

Brainstorming
Class Discussion
Cooperative Learning Groups
Creative Expression
Letter Writing

Oral Presentations
Overhead Transparencies
Roleplays
Teacher Lecture
Worksheets

A section titled **One More Step** provides at least one additional strategy or worksheet that supports the lesson objectives. The teacher can use this section as an alternative to other strategies or for more advanced students.

Brainstorming

Brainstorming is used to open a discussion on an issue, topic or controversy. Students are asked to give their ideas and opinions without comments or judgments from the teacher or other students. Ideas can be listed on the board or on a transparency. Brainstorming should continue until all ideas have been exhausted or a predetermined time limit has been reached.

Class Discussion

A class discussion led by the teacher can be used to initiate, amplify or summarize a lesson. Nearly all lessons in this module include some form of class discussion.

Cooperative Learning Groups

Cooperative learning groups are one of the most common and effective strategies used throughout this module. Small groups of three to five students are used to disseminate information, analyze ideas or solve problems. Group structure will have an effect on the success of the lessons. Groups can be formed by student choice, random selection or a more formal, teacher-influenced process. Groups seem to function best when they represent the variety and balance found in the classroom. Groups also work best when each person has a task (recorder, observer, reader, timer, etc.). At the conclusion of the group process, some closure should occur.

Creative Expression

Asking students to write short stories or to write about their reactions to drug use encourages the integration of language arts into the lesson. This technique can be used as follow-up to most lessons.

Letter Writing

Letter writing, as suggested in the final chapter, encourages the student to summarize information about drug use and to make a personal commitment toward a drug-free life.

Oral Presentations

These can be individual or group presentations to the class. Students enjoy hearing and learning from one another. This strategy fosters effective communication skills.

Overhead Transparencies

These offer an effective, highly visible way to present information and graphic examples. Every lesson provides teacher resources that can be made into transparencies.

Roleplays

During a roleplay, students simulate real-life situations by acting out different roles. Given basic information about a situation, students develop roles, make decisions about issues and suggest alternatives. Following the roleplay, both participants and observers should reflect upon the situation, suggest other ideas, correct any misconceptions and summarize their ideas. Some experts in educational psychology recommend that students *never* portray a very negative role, such as an addict.

Teacher Lecture

This is a traditional format in which information is disseminated directly from the teacher to students. Accurate information about drugs is important, and most lessons provide a teacher resource titled **Fast Facts**. This method is but one small part of the total instructional process.

Worksheets

Most lessons provide worksheets. Students are often asked to complete the worksheets individually, with a partner or a parent. Worksheets can be used as an anticipatory set or as a closure activity. For each student worksheet, a corresponding teacher key with suggested answers or responses is provided.

Evaluative Methods

Each lesson offers a variety of instructional strategies that provide different methods of evaluation. The methods are listed following the Procedures section in each lesson. Worksheets, cooperative learning groups and roleplaying all provide an opportunity to evaluate student learning. Instructional strategies and specific evaluation techniques also provide a measure of teacher effectiveness and the appropriateness of teaching methods.

LESSON
1

WHAT IS A DRUG?

Objective

Students will be able to explain ways that drug use impacts society.

Time

Two 50-minute class periods.

Overview

Drug use in society and more specifically, among middle school youth, appears to be an immediate and expanding problem. Some people limit the definition of drugs to illegal and/or dangerous substances. However, a drug is more accurately defined as any substance that causes a physical or mental change in the body. This includes over-the-counter medications and prescription drugs in addition to caffeine, the nicotine in tobacco, alcohol and other drugs such as cocaine.

In this lesson students discuss various aspects of drug use and categorize substances based on the major effects on the body. They complete a questionnaire that they discuss in pairs and as a

class. Then cooperative learning groups discuss and decide which drugs have the most impact on society. Students also discuss as a class the meaning of various drug-related terms.

Instructional Strategies

Class discussion, cooperative learning groups, oral presentations, worksheets.

Teacher Materials and Preparation

COPY:

- ✓ Drug Questionnaire for each student.
- ✓ Impact of Drugs worksheet for each student.

REVIEW:

- ✓ Drug Questionnaire Key.
- ✓ Impact of Drugs Key.
- ✓ Teacher Background Information.

Procedure

■ Distribute the Drug Questionnaire to students, and ask them to complete the worksheet individually. Depending on the general level of students, consider reading each question aloud and having students respond with agree or disagree. When students are finished, have them turn to another student and discuss the five items that were most difficult to answer and the reasons these items were difficult.

Survey the class to determine which items were most difficult to answer. Ask volunteers to explain why these items were difficult. Explain that some of the reasons for difficulty include lack of knowledge, misinformation and misconceptions. Tell students that many of their sources of information about drugs (friends, T.V., etc.) may not be accurate.

Using the Drug Questionnaire Key as a reference, discuss each item. After the discussion, summarize the definition of a drug. Point out the difference between drugs that are illegal and/or harmful for children, including tobacco, alcohol, marijuana and cocaine, and

appropriately used medications, such as prescription drugs and certain over-the-counter products.

■ Distribute the **Impact of Drugs** worksheet to students. Divide the class into groups of five students each; allow approximately five minutes for groups to identify the two drugs that cause the greatest number of deaths per year. Encourage students to arrive at a group consensus, if possible. Tell students that this activity does not allow any form of voting or counting to determine a group answer—only discussion.

Ask a spokesperson from each group to briefly explain the group's answer. Record the results on an overhead transparency. Use the **Impact of Drugs Key** to explain that the two drugs that cause the greatest number of deaths per year are tobacco and alcohol. Tell students that although it is very difficult to determine the exact number of deaths caused by each drug, the two drugs—which are legal for adults—cause the majority of all drug-related deaths. Estimates are that more than half a million people die each year from conditions related to tobacco and alcohol use. Emphasize, however, that while death may be the most severe result of drug use, there are a number of other reasons not to use drugs (e.g., they're illegal, they lead to dependence, they harm the body, etc.).

■ Using the Glossary as a reference, discuss the definitions for the following:

Depressant
Stimulant
Hallucinogen
Inhalant

Over-the-Counter Medication
Prescription Drug
Dependence
Withdrawal

Optional: As appropriate to the level and interest of students, use **Teacher Background Information** on commonly abused drugs to discuss and categorize each substance according to its physical effects on the body. Additional drugs named by students could form the basis for an additional lesson. Prescription drugs and over-the-counter medications named by students should be placed on a separate list if they are not usually misused.

Homework

Have students ask a parent or other adult to name the two drugs that cause the most deaths. Students can then discuss the correct response with that person. Ask several students to report back to the class.

Evaluation

Observe student participation in cooperative learning groups when discussing the ways drugs impact on society.

Collect the **Drug Questionnaire** and compile the responses. Use these questions as the basis for a unit summary.

One More Step

Use the incorrect responses from the **Drug Questionnaire** as a needs assessment in planning future lessons on drugs.

Teacher Background Information Common Drugs of Abuse

Drug	Effects	Dangers	Examples
<i>Depressants</i>	Slow down body function.	Overdose; in some cases withdrawal may be life-threatening.	Alcohol Barbiturates Heroin Tranquillizers Morphine
<i>Hallucinogens</i>	Most important effect is on the mind.	Alteration of reality, anxiety and potential of flashback.	PCP LSD Peyote Mescaline
<i>Inhalants</i>	Inhaled fumes cause symptoms of depression and disorientation.	Impaired judgment, brain hemorrhage, unconsciousness.	Aerosols Nitrous Oxide Gasoline Paint Thinner Glues
<i>Marijuana</i>	Produces mixed effects, including increase in heart rate, increase in appetite, dry throat and feelings of disorientation.	Loss of interest and motivation; may impair short-term memory and coordination; respiratory damage.	Marijuana Hashish
<i>Stimulants</i>	Increase body functions.	Sleeplessness, anxiety, irregular heart-beat, heart failure.	Cocaine Caffeine Amphetamines Crack Nicotine

Drug Questionnaire

Directions: Agree (A) or Disagree (D) with each of the following statements.

- A** **D** 1. A drug is a substance that affects the mind or body.
- A** **D** 2. Drugs are bad.
- A** **D** 3. Aspirin and acetaminophen are safe drugs.
- A** **D** 4. Caffeine is a drug.
- A** **D** 5. Alcohol and tobacco are drugs.
- A** **D** 6. Almost everyone in the world is a drug user.
- A** **D** 7. Most harmful drugs are made in countries other than the United States.
- A** **D** 8. It is safe to combine drugs.
- A** **D** 9. Middle school is the time when kids usually decide to try drugs.
- A** **D** 10. Drugs seem to be easier to get today than in the past.
- A** **D** 11. Middle school students ignore what parents say and use drugs to imitate their friends.
- A** **D** 12. Most middle school students use drugs.
- A** **D** 13. Some drug users can become infected with HIV, the virus that causes AIDS.
- A** **D** 14. The best way to handle the drug problem is to put everyone who uses drugs in jail.
- A** **D** 15. By the year 2000, fewer students will be using drugs.

Drug Questionnaire

Key

Directions: *Agree* (A) or *Disagree* (D) with each of the following statements.

1. A drug is a substance that affects the mind or body.

Agree. A drug is a substance that when taken into the body causes a change in physical and/or mental activity. Medications and substances such as tobacco and alcohol—which are legal for adult use—as well as illegal substances such as marijuana and cocaine are all drugs.

2. Drugs are bad.

Disagree. Drugs play an important role in preventing and treating illness for many people. For other people, however, the use of drugs interferes with a healthy and happy life. Most drugs are neither good nor bad; how they are used is the most important issue.

3. Aspirin and acetaminophen are safe drugs.

Disagree. There is no such thing as a safe drug. Aspirin has been linked with Reye's syndrome (a serious illness) in children and teens. Acetaminophen can cause kidney damage. Any drug can be dangerous.

4. Caffeine is a drug.

Agree. Caffeine is a stimulant found in coffee, tea and many cola drinks.

5. Alcohol and tobacco are drugs.

Agree. Alcohol and tobacco are drugs, even though they are legal for adult use.

6. Almost everyone in the world is a drug user.

Agree. Most people around the world use some form of drug. Many people use over-the-counter medications and prescription drugs regularly. In some parts of the world, plants are used to treat infections and disease. In many countries the use of tobacco is very high.

7. Most harmful drugs are made in countries other than the United States.

Disagree. Most of the commonly abused drugs are produced legally in the United States. Examples are alcohol, barbiturates, narcotics and amphetamines. Other drugs like cocaine, heroin, hallucinogens and marijuana are illegally produced both within the United States and in other countries.

8. It is safe to combine drugs.

Disagree. Many negative reactions and deaths are the result of combining drugs. Labels on over-the-counter medications and prescription drugs often warn the user not to combine drugs.

9. Middle school is the time when kids usually decide to try drugs.

Agree. Adolescence is a critical time. Researchers have found that the decision about using drugs is often made in middle school, but may be made as early as elementary school. Choosing a drug-free life is an important decision.

10. Drugs seem to be easier to get today than in the past.

Agree. Drugs can be found everywhere in society. The distribution of drugs is an expanding problem because there is so much money to be made by drug dealers.

11. Middle school students ignore what parents say and use drugs to imitate their friends.

Disagree. Parents play an important role in influencing children. They provide behavior role models. Researchers tell us that in families where parents do not use drugs and state their disapproval of drug use, there is less drug use by children.

12. Most middle school students use drugs.

Disagree. Contrary to what some students and parents believe, relatively few middle school students regularly use drugs. Experimentation may begin now for some, although most middle school students are formulating ideas about drug use.

13. Some drug users can become infected with HIV, the virus that causes AIDS.

Agree. HIV can be transmitted through the use of contaminated needles. Drug users who inject drugs are at great risk for HIV infection.

14. The best way to handle the drug problem is to put everyone who uses drugs in jail.

Disagree. While drug abuse may be a legal issue, jails have rarely solved the problem. Drug users need medical treatment and counseling.

15. By the year 2000, fewer students will be using drugs.

Agree. If current trends continue, daily use of dangerous drugs will continue to go down. For most dangerous drugs, daily use among high school seniors has declined each year since 1976. It seems clear that far fewer students will be using tobacco. The movement toward a life free from dangerous drugs seems to be gaining momentum.

(This information was compiled from resources listed in the Bibliography.)

Impact of Drugs

Directions: Discuss the different drugs on this worksheet in your group. Come to a group agreement on the two drugs on this list that cause the greatest number of deaths in our country.

Alcohol

Heroin

Amphetamines

Marijuana

Barbiturates

Tobacco

Cocaine

Tranquilizers

#

1

#

2

Impact of Drugs

Key

Directions: Discuss the different drugs on this worksheet in your group. Come to a group agreement on the two drugs on this list that cause the greatest number of deaths in our country.

Alcohol

Heroin

Amphetamines

Marijuana

Barbiturates

Tobacco

Cocaine

Tranquilizers



1 **TOBACCO**

Tobacco use is the leading cause of preventable deaths in our country. Approximately 1,000 tobacco users die each day. More than 360,000 deaths a year are attributed to tobacco use. Lung cancer, other diseases of the lungs and heart attack are among the most common health problems associated with tobacco use.



2 **ALCOHOL**

Deaths related to alcohol use are the second leading cause of mortality resulting from drug use in the United States. Alcohol use is a contributing factor in approximately 100,000 to 125,000 deaths a year. It is estimated that half (approximately 20,000 a year) of all motor vehicle fatalities can be attributed to alcohol use. Alcohol is also a contributing factor in violent crimes, and as many as 30 percent of suicides may be related to alcohol use.

LESSON

2

TO USE OR NOT TO USE DRUGS

Objectives

Students will be able to identify reasons teenagers use drugs.

Students will be able to list reasons for not using drugs as well as alternatives to drug use.

Time

One 50-minute class period.

Overview

Although most adolescents choose not to use illegal and dangerous substances, drug use often begins in middle school. This lesson focuses on the perceived reasons for drug use that have been identified in teenage drug users. Each student will have the opportunity to identify personal alternatives to drug use.

In this lesson students anonymously describe teenage drug users and offer reasons that teens don't use drugs. Then as a class, students identify reasons that teens do use drugs and brainstorm

alternatives to drug use. A tally of the anonymous responses is used to summarize student ideas about drug use.

Instructional Strategies

Class discussion, brainstorming.

Teacher Materials and Preparation

HAVE:

- ✓ 3 x 5 index cards or slips of paper, one for each student.
- ✓ Overhead projector and pens.

MAKE:

- ✓ Transparency of *Why Do Kids Put Beans In Their Ears?*
- ✓ Transparency of *Why Kids Use Drugs.*

REVIEW:

- ✓ *Why Kids Use Drugs.*

Procedure

- Distribute one index card or slip of paper to each student. Read the following statement to the class:

Do not put your name on the card. There are no right or wrong answers, since your responses are your own opinions. A number of thoughts may come to mind when you think about teenage drug users. On one side of the card, list three words that you think describe a teenage drug user. On the other side of the card, write three reasons that you believe teenagers give for *not* using drugs.

Collect the cards and have a student volunteer tally the responses, noting the five most frequently listed words and the five most frequently given reasons for not using drugs. This tally will be used later in the lesson.

- Display the *Why Do Kids Put Beans In Their Ears?* transparency. Use brainstorming to generate a list of responses from the class. Note the opportunity for humorous responses. After a few minutes of fun, ask students if the answers would have been

different if the question had been *Why do kids use drugs?* You should realize that other than responses specific to beans (e.g., to see if they will grow), the possible responses to both questions are surprisingly the same.

■ Using the **Why Kids Use Drugs** transparency, have students brainstorm at least two alternatives to using drugs for each of the reasons listed.

■ Have the student volunteer who tallied the responses from the first activity report the top five reasons teens don't use drugs. These reasons will be related to the alternatives to using drugs.

List on the board or on an overhead transparency the five words most frequently used to describe a teenage drug user. Ask students to write a brief summary of the responses or to draw a conclusion about them. Begin with the statement: "According to this class, a teenage drug user...." Ask for volunteers to share their summaries with the class. Using the same introductory statement, you should prepare a conclusion of your own to be shared with the class.

Homework

Ask students to talk to their parents about alternatives to drug use and other options for dealing with problems.

Evaluation

Have students identify reasons teens use or don't use drugs. They should include alternatives to drug use, as well. This activity can be written, oral or presented in some sort of visual, artistic way.

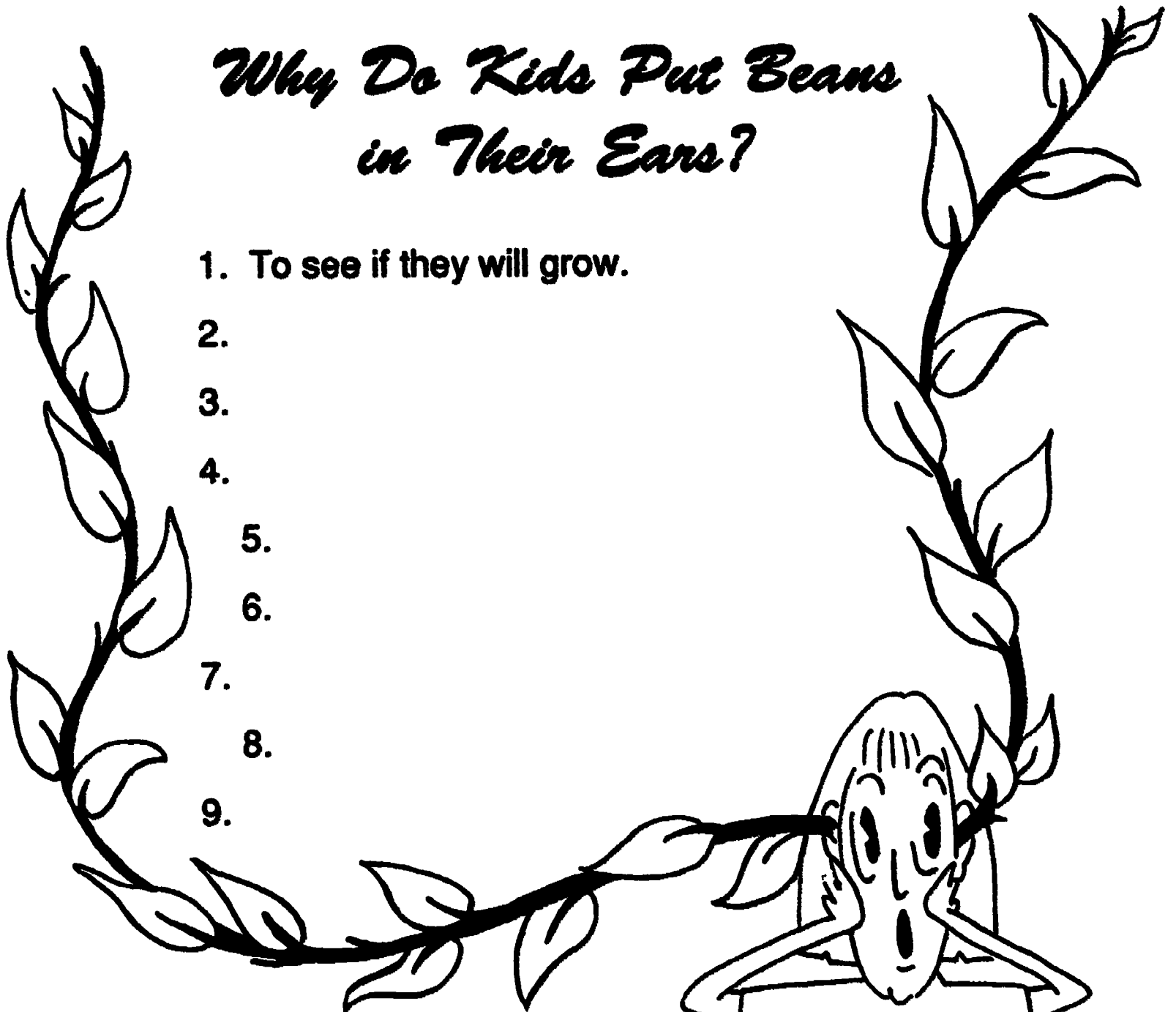
One More Step

Ask students to read magazines, newspapers and books to research drug use by famous people such as:

John Belushi
Len Bias
Kitty Dukakis
Betty Ford
Sigmund Freud

Steve Howe
Ben Johnson
Janis Joplin
Edgar Allen Poe
Richard Pryor

Why Do Kids Put Beans in Their Ears?



1. To see if they will grow.

2.

3.

4.

5.

6.

7.

8.

9.

10.

11.

12.

13.

14.

15.

ILLUSTRATION BY PAUL TOMMAMAN

Why Kids Use Drugs

- ◆ Curiosity
- ◆ Feel accepted by friends
- ◆ Don't know how to say no
- ◆ Escape pressures
- ◆ Feel important
- ◆ Get high
- ◆ Relax
- ◆ Relieve depression
- ◆ Take a risk

LESSON

3

ADS MAY NOT BE A PLUS

Objective

Students will be able to analyze common advertising techniques used with health and drug products.

Time

One 50-minute class period.

Overview

A number of individuals and groups attempt to influence public knowledge of drugs and often try to persuade people to buy or use a certain health-related product. While certain sources of information may be reliable, other sources may be biased, "stretch the truth" or even be fraudulent.

In this lesson students use worksheets to analyze different advertising techniques in newspapers and magazines. They discuss these techniques in cooperative learning groups and again in the full group.

Instructional Strategies

Class discussion, cooperative learning groups, brainstorming, creative expression, oral presentations, worksheets.

Teacher Materials and Preparation

HAVE:

- ✓ Overhead projector.
- ✓ A variety of newspapers and magazines, some of which focus on adolescents.
- ✓ Several pairs of scissors, glue, tape.
- ✓ Poster board or butcher paper—one piece for each five students.

COPY:

- ✓ Drug Advertisements worksheet for each student.
- ✓ It Sells! worksheet for each student.

MAKE:

- ✓ Transparency of Advertising Techniques.
-

Procedure

- Distribute the **Drug Advertisements** worksheet to each student, and divide the class into groups of five. Give each group two or three newspapers or magazines. Ask each group to find at least one advertisement for each of the products listed.

Have groups identify the messages in each advertisement in addition to the message to buy the product. List the following questions on the board, and have groups discuss and answer them:

- Who is the ad designed to attract?
- How is the product displayed?
- Are there any warnings, cautions or limitations listed?
- Is this ad effective for middle school students?

Provide each group with scissors, poster board or butcher paper, and glue or tape. Ask groups to make a collage of advertisements. Each group should select a representative to make a brief presentation to the class about the collage and the group's answers to the questions.

■ Tell students that advertisements tend to make health and drug products look exciting, glamorous and perhaps, more effective than they really are. Using the **Advertising Techniques** transparency, discuss specific advertising methods. Use a brainstorming session to identify at least one specific health-related advertisement using each technique and note it on the transparency. Ask students if they believe that the advertisements really are effective. Have students defend their answers to this question.

Evaluation

Observe students' participation in class and group discussions to assess their ability to analyze common advertising techniques. Have students pick one technique and prepare an anti-drug slogan.

One More Step

Use the worksheet **It Sells!** as the basis for a discussion identifying slogans used for specific health-related products. Students may need to consult an adult for some product names. Ask students to identify other famous advertising slogans, themes or songs. Conclude by asking students to analyze the effectiveness of such advertising techniques in making the general public aware of the product and in actually selling the product.

Drug Advertisements

Directions: Using newspapers and magazines, find one advertisement for each of these products. Identify the advertising message.

Product	Brand Name	Advertising message
Example: Acetaminophen	Tylenol	Safer than aspirin
Acne Medication		
Beer		
Cigarettes		
Cold Medication		
Smokeless Tobacco		
Vitamins		
Whiskey		
Wine Cooler		

Advertising Techniques

- Bandwagon** — Everyone is doing it. You may be the only person not using the product!
- Comparison** — Our product is better, faster, or safer than...
- Having Fun** — You'll have more fun if you use this product.
- Rewards** — Coupons, sale, 2-for-1.
- Scientific** — Research has found...; advertisement uses graphs or statistics.
- Sex Appeal** — You will be more appealing and attractive to others if you use....
- Symbols** — A symbol attached to a product may trigger emotions to buy.
- Testimony** — A person, often famous, implies that since he or she uses the product, it must be good.

It Sells!

Product identification is very important. Advertisers hope that slogans and themes will make you think of their brand name. For each of the slogans listed, name the product that the maker hopes you or your parents will buy. Ask your parents to help you. Can you identify any other famous advertising slogans?

Slogan

Brand Name

Tastes Great! Less Filling!

The Real Thing

How Do You Spell Relief?

The King of Beers

Mountain Grown

_____ Generation

You've Come A Long Way, Baby!

Spuds Mackenzie

Overnight Relief

The Pain Reliever Doctors Would
Select if Stranded on an Island

**LESSON
4**

TOBACCO USE: THE LEADING CAUSE OF PREVENTABLE DEATH

Objectives

Students will be able to identify the major effects of tobacco on the body.

Students will be able to support the statement "Tobacco use is the leading cause of preventable deaths in the United States" by explaining the impact of tobacco use on society.

Time

One 50-minute class period, and one 50-minute class period after homework assignment has been completed.

Overview

Since the first Surgeon General's report in 1964, evidence has continued to mount about the hazards of tobacco use. The U.S. government and many health agencies, medical professionals and consumer groups have joined together to reduce tobacco use. Despite mounting anti-tobacco efforts, thousands of teens begin smoking each day, and in some parts of the country, the use of smokeless tobacco flourishes.

In this lesson students take and discuss a quiz on factual information about the effects of tobacco on the body. They also discuss the purpose of warnings on tobacco products and design a warning themselves. As an optional homework assignment, students survey tobacco users and analyze the responses. A teacher demonstration of a smoking machine provides additional information about tobacco's harmful effects.

Instructional Strategies

Class discussion, cooperative learning groups, teacher lecture, worksheets.

Teacher Materials and Preparation

HAVE:

- ✓ Overhead projector.
- ✓ Supplies for smoking machine (see **Tobacco Demonstration** teacher resource).
- ✓ *Danny's Dilemma* (optional), an interactive book available from ETR Associates/Network Publications, for each student.

COPY:

- ✓ **Tobacco Quiz** for each student.
- ✓ **Tobacco Survey** (optional) for each student.

MAKE:

- ✓ **Transparency of Fast Facts—Health Risks of Tobacco Smoke.**
- ✓ **Transparency of Fast Facts—Smokeless Tobacco.**
- ✓ **Transparency of Tobacco Warnings.**

REVIEW:

- ✓ **Tobacco Quiz Key.**

Procedure

- Give each student a copy of the **Tobacco Quiz**. Allow about five minutes for students to answer the true-false quiz. Use the **Tobacco Quiz Key** as you discuss correct responses. Depending upon the knowledge level of your students, this discussion could last ten to twenty minutes.

Based on this discussion, the teacher should be able to determine what factual information about tobacco needs additional emphasis. Using the **Fast Facts—Health Risks of Tobacco Smoke** and **Fast Facts—Smokeless Tobacco** transparencies, discuss the ingredients of tobacco and the effects of tobacco upon the body.

■ Using the **Tobacco Warnings** transparency, have the class brainstorm answers to the following questions:

- Why are there warnings on tobacco products?
- How have the warnings on cigarette packages changed since 1964?
- Describe the major differences between the warnings on cigarette packages and the warnings on smokeless tobacco products.
- Are these warnings effective? Do the warnings have a greater impact on teens or adults?

Divide students into groups, and ask each group to develop an improved warning for tobacco products. Allow a maximum of ten minutes for this activity. Ask a representative of each group to write the group's new warning on the board (or transparency). Review each warning with the class.

■ (Optional) Distribute a copy of the **Tobacco Survey** to each student. Ask each student to survey three to five tobacco users and to bring the completed survey worksheet to the next class. Emphasize that the survey is anonymous and that the identity of those surveyed will not be revealed.

When worksheets are returned, divide students into groups of five. Allow ten minutes for members of each group to discuss their findings and to make conclusions about their major findings. Each of the headings on the worksheet could provide the basis for a conclusion:

Gender vs. Type Used
Gender vs. Years Used
Gender vs. Experience
Quitting

Type Used vs. Years Used
Type Used vs. Experience
Quitting
Years Used vs. Experience
Quitting

The most interesting insights will probably be provided by the adult responses to "Advice for Teens." Ask groups to summarize what advice adults would give teens regarding tobacco use. (Most adult tobacco users will probably recommend not to ever start.)

■ Using the **Tobacco Demonstration** teacher resource, demonstrate a smoking machine. When the demonstration is finished, ask students to describe the cotton balls. Ask them what conclusions can be made from this demonstration. You could also use this demonstration to compare different brands or different types of cigarettes (e.g., filter vs. nonfilter, light vs. regular).

Evaluation

Ask each student to write a one-page report supporting the statement "Tobacco use is the leading cause of preventable deaths in the United States." Review the responses for accuracy and quality of persuasion.

One More Step

Distribute the interactive book *Danny's Dilemma* to students, and ask them to read the book as homework. Tell students that the story will give them a chance to practice making decisions about using tobacco. Explain that the book has many plots based on decisions made by the reader. As students read the story, they will come to points where Danny has to make decisions about using tobacco. Students will decide at each point what choice Danny makes and then turn to a new page to continue the story. The book tells students what pages to turn to for each choice. The story proceeds according to the choices students make, and students will see the consequences of their decisions. Ask students to read the story more than once, making different choices each time.

When students have completed the reading, discuss the story and the decision-making process with the class. (*Tobacco: The Real Story*, the nonfiction companion to *Danny's Dilemma*, could also be used to augment this lesson.)

Tobacco Quiz

Directions: Circle the letter that represents your answer, True or False.

- T F** 1. The main drug in tobacco is nicotine.
- T F** 2. Smoking is the main cause of lung cancer.
- T F** 3. Smoking is a main factor in coronary heart disease.
- T F** 4. Pregnant women who smoke will often have a smaller baby.
- T F** 5. Sidestream smoke is dangerous to children.
- T F** 6. Smokeless tobacco is safer than cigarettes.
- T F** 7. Only about one-fourth of all adults smoke cigarettes.
- T F** 8. Most teenagers smoke cigarettes.
- T F** 9. More teenage girls than teenage boys smoke.
- T F** 10. Half of all teens who have ever smoked had their first cigarette by eighth grade.
- T F** 11. Quitting smoking is almost impossible.
- T F** 12. Most advertisements for tobacco products are not directed at teens.
- T F** 13. Cigarette smoking is responsible for more than one of every six deaths in the United States.
- T F** 14. Today there are many places where smoking is not allowed.

Tobacco Quiz

Key

Directions: Circle the letter that represents your answer, True or False.

1. The main drug in tobacco is nicotine.

True. Nicotine, a drug that is a poison, is found in tobacco. Nicotine is a stimulant that speeds up the heart and raises blood pressure. Tobacco also contains chemicals such as tar, and tobacco smoke contains gases such as carbon monoxide.

2. Smoking is the main cause of lung cancer.

True. As much as 90 percent of all lung cancers will occur in cigarette smokers. All tobacco smoke contains tar, the principal cause of lung cancer. A recent study suggests that low tar cigarettes do not reduce the chances of lung cancer.

3. Smoking is a main factor in coronary heart disease.

True. It is estimated that 30 percent of the deaths from coronary heart disease in a year are due to cigarette smoking.

4. Pregnant women who smoke will often have a smaller baby.

True. Smoking during pregnancy has a negative effect on the fetus and may result in lower birth-weight babies.

5. Sidestream smoke is dangerous to children.

True. Sidestream smoke, sometimes called secondhand smoke, is dangerous to everyone. Children of smoking parents have an increased frequency of bronchitis and pneumonia early in life. Several research studies have shown increased health problems in adults living with people who smoke.

6. Smokeless tobacco is safer than cigarettes.

False. Tobacco is not safe in any form. Smokeless tobacco users have increased cancers of the mouth and increased dental disease.

7. Only about one-fourth of all adults smoke cigarettes.

True. Current estimates suggest that approximately 27 percent of adults smoke cigarettes. Cigarette smoking by adults has declined for several years.

8. Most teenagers smoke cigarettes.

False. The most recent research indicates that as few as 12 percent of teenagers smoke cigarettes regularly. Approximately 20 percent of teens are regular smokers by the time they are high school seniors.

9. More teenage girls than teenage boys smoke.

True. Since 1977, daily smoking has been higher among high school girls than high school boys.

10. Half of all teens who have ever smoked had their first cigarette by eighth grade.

True. For many, the decision to smoke cigarettes begins by the end of middle school. Adults rarely begin smoking cigarettes. Eighty percent of all smokers started smoking before age 21.

11. Quitting smoking is almost impossible.

False. More than 30 million people have quit smoking cigarettes. However, since nicotine is a highly addictive drug, quitting smoking can be quite difficult for many people. Most who do quit try several times before they are successful.

12. Most advertisements for tobacco products are not directed at teens.

False. Although advertisers say that tobacco advertisements are not directed at teens, many others disagree. Messages found in tobacco ads, such as popularity, fun, success and sexuality, are important to teens.

13. Cigarette smoking is responsible for more than one of every six deaths in the United States.

True. The 1989 Surgeon General's Report lists smoking as the single most important preventable cause of death in our society. Approximately 1,000 deaths each day are attributable to tobacco.

14. Today there are many places where smoking is not allowed.

True. Many communities and states restrict smoking in public places. Smoking is restricted on planes, in many schools, restaurants, hospitals and in the military. Many people consider smoking to be socially unacceptable as well as dangerous.

(This information was compiled from resources listed in the Bibliography.)

FAST FACTS

Health Risks of Tobacco Smoke

Substances Found in Tobacco Smoke

Nicotine	Addicting poison Stimulates heart; raises blood pressure
Tar	Particulate matter Irritates respiratory system Carcinogen
Gases	Carbon monoxide Others: formaldehyde, ammonia, hydrogen cyanide

Related Disease

Cancer	Lung, larynx, pharynx, esophagus, oral cavity, kidney, pancreas, bladder
Cardiovascular disease	Heart attack, stroke, high blood pressure
Respiratory disease	Chronic bronchitis, emphysema

Effect on Unborn

**Smaller babies
Premature babies
Prenatal deaths**

Sidestream Smoke (Secondhand Smoke)

Increased respiratory illness in people living with or around a smoker

FAST FACTS

Smokeless Tobacco

Substances Found In Smokeless Tobacco

Nicotine **Addicting poison**
Stimulates heart; raises blood pressure

Carcinogens **Cancer-causing chemicals**

Oral Disease

Leukoplakia **White, wrinkled thickening between lip and gum**

Mouth cancer **Abnormal growth, ulceration of lips and tongue**

Gum disease **Recession and lowering of gum line, tooth staining, decay, abrasion, wear**

Tobacco Warnings

Warnings on Cigarette Packages

1966 - 1970

Caution: Cigarette Smoking May Be
Hazardous to Your Health

1970 - 1983

Warning: The Surgeon General Has Determined That
Cigarette Smoking Is Dangerous to Your Health

1983 - Present

Surgeon General's Warning: Smoking Causes Lung
Cancer, Heart Disease and Emphysema

Surgeon General's Warning: Quitting Smoking Now
Greatly Reduces Serious Health Risks

Surgeon General's Warning: Smoking by Pregnant
Women May Result in Fetal Injury and Premature Birth

Surgeon General's Warning: Cigarette Smoke
Contains Carbon Monoxide

Warnings on Smokeless Tobacco Packages

1986 - Present

This Product Is Not a Safe Alternative to Cigarettes

This Product May Cause Gum Disease and Tooth Loss

This Product May Cause Mouth Cancer

Tobacco Survey

Directions: Survey three to five tobacco users and complete this chart.

<i>Person/Gender/Age (M/F)</i>	<i>Type Used</i>	<i>Years Used</i>	<i>Experience Quitting</i>	<i>Advice for Teens</i>
A				
B				
C				
D				
E				

TOBACCO DEMONSTRATION

Supplies: Plastic 2-liter cola bottle or detergent bottle

6" plastic or rubber tubing, available from hardware store

Clay to seal hole in cap

Cotton balls (approximately 10)

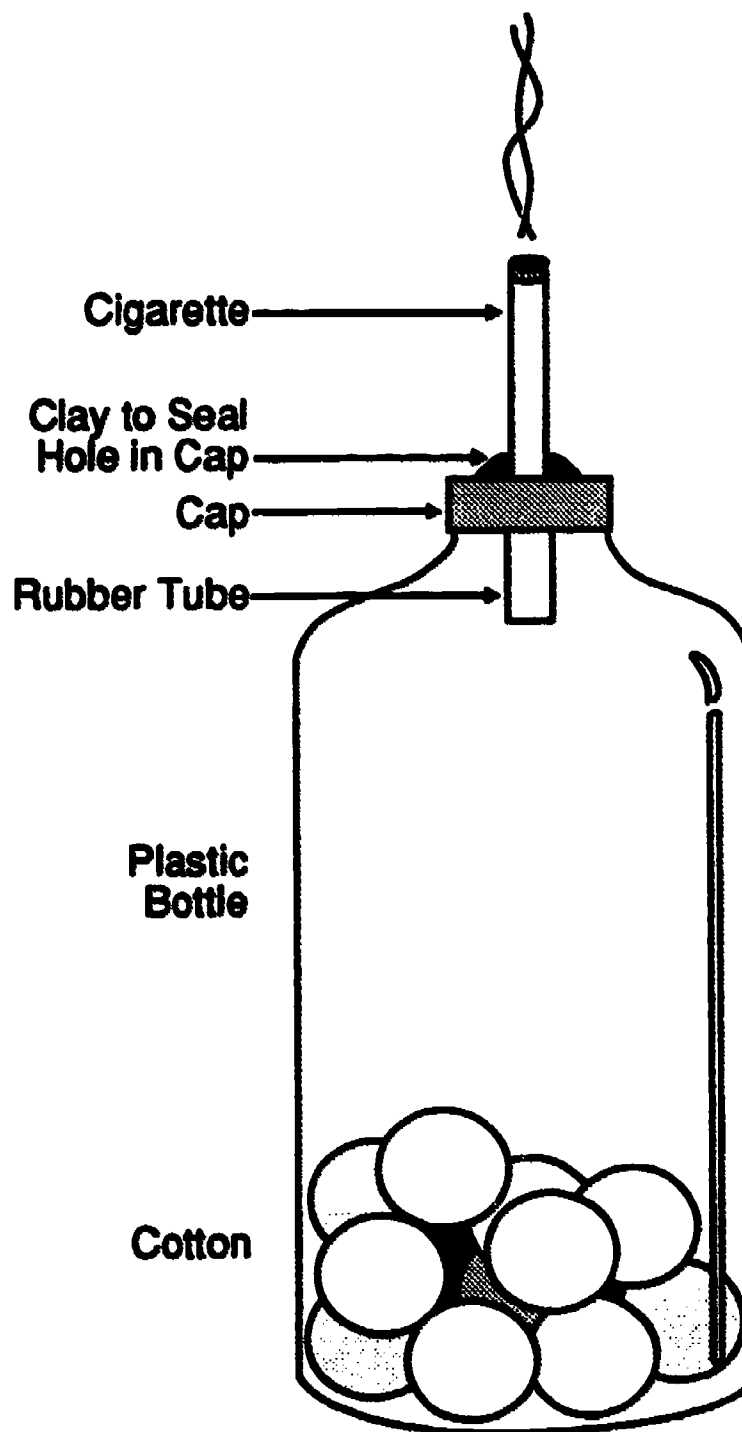
Procedures:

Making the Smoking Machine

- Carefully cut a hole in the bottle cap the size of the tubing.
- Push the tubing through the hole.
- Seal the sides of the hole with clay.
- Place cotton balls in the bottle.
- Screw the cap on the bottle.

Using the Smoking Machine

- Press the bottle to force out air.
- Place an unlit cigarette in the tubing.
- Carefully light the cigarette.
- Begin slowly pumping the bottle.
- When pushing the air out of the bottle, it may be necessary to unscrew the cap.
- When the cigarette has been completely smoked, extinguish it and empty the cotton balls onto a clean white piece of paper.



**LESSON
5**

ALCOHOL: A SOBERING CONCERN

Objectives

Students will be able to identify the major effects of alcohol on the body.

Students will be able to analyze ways alcohol use impacts society.

Time

One 50-minute class period.

Overview

Alcohol use affects all aspects of society. Most adults who consume alcohol do so in moderation. Some, however, drink excessively, while others may become dependent upon the drug. Middle school students may view alcohol use as a sign of maturity.

This lesson allows students to identify the major effects of alcohol on the body as well as on the community. Worksheets and class discussions are used to identify myths and misconceptions about drinking alcohol. A student debate and a worksheet allow students to explore personal values about alcohol use.

Instructional Strategies

Class discussion, cooperative learning groups, worksheets.

Teacher Materials and Preparation

HAVE:

- ✓ Overhead projector.
- ✓ *Serena's Secret* (optional), an interactive book available from ETR Associates/Network Publications, for each student.

COPY:

- ✓ **Alcohol Myths and Misconceptions** worksheet for each student.
- ✓ **My Values About Alcohol** worksheet for each student.

MAKE:

- ✓ **Transparency of Fast Facts—Alcohol.**

REVIEW:

- ✓ **Alcohol Myths and Misconceptions Key.**
 - ✓ **Teacher Background Information.**
-

Procedure

■ Distribute the **Alcohol Myths and Misconceptions** worksheet to students. Allow about five minutes for students to respond individually. Divide the class into groups of three to five students, and ask each group to determine the correct answer for each item and a brief justification for each answer. Allow about ten minutes for group discussion.

Using the **Alcohol Myths and Misconceptions Key**, explain each answer and ask students to write any additional questions they want answered on a piece of paper.

■ Using the **Fast Facts—Alcohol** transparency, lead a discussion about the effects of alcohol on the body and on the community. Ask students to write any additional questions they want answered on the same piece of paper they used before.

Collect all student questions. Enlist the help of a few students to quickly sort questions into the following categories: effects on

body, effects on community, drinking patterns, other. You may choose to read and answer each question, respond only to issues not previously addressed or randomly return the questions to the groups for discussion. Each group could discuss the question(s); however, questions that can't be answered should be returned to you for clarification.

■ With students still in their groups, divide the class in half so that the same number of groups are in each half. Tell students they are going to participate in a debate, and assign each group a position. Half the groups will support the following statement, while the remaining groups will oppose it.

"Social drinking is the first step toward alcoholism."

Allow about five minutes for pre-debate group discussion. Alternate the debate, beginning with the supporting side allowed one minute and then the opposition one minute, etc. At the end of the debate, ask students why they think there is controversy about the statement. (Almost every word of the statement has several interpretations.) Conclude with a brief description of alcoholism.

■ Give each student a copy of the **My Values About Alcohol** worksheet. Ask students to complete the worksheet privately. Depending upon the comfort level of you and your students, a discussion could focus on the various factors that influence decisions about alcohol use, such as family, friends, media. An alternative discussion could focus on the steps students would take if a friend or relative had a drinking problem. You should be prepared to identify specific resources found in your community, such as Alcoholics Anonymous, Al-Anon or Alateen.

Evaluation

Review all student questions. These questions are in one sense a form of needs assessment. Specific questions or general areas of concern can be the basis for additional discussion.

Use Teacher Background Information on the impact of alcohol as the basis for additional studies. Individual items could provide topics for discussion, or a lesson could focus on why middle school students use alcohol.

One More Step

Distribute the interactive book *Serena's Secret* to students, and ask them to read the book as homework. Tell students the story will give them a chance to practice making decisions about using alcohol. Explain that the book has many plots based on decisions made by the reader. As students read the story, they will come to points where Serena has to make decisions about using alcohol. Students will decide at each point what choice Serena makes and then turn to a new page to continue the story. The book tells students what pages to turn to for each choice. The story proceeds according to the choices students make, and students will see the consequences of their decisions. Ask students to read the story more than once, making different choices each time.

When students have completed the reading, discuss the story and the decision-making process with the class. (*Alcohol: The Real Story*, the nonfiction companion to *Serena's Secret*, could also be used to augment this lesson.)

Teacher Background Information

The Impact of Alcohol

- Alcohol use by youth is considered by some as a gateway behavior; that is, young drinkers are more likely to develop other problem behaviors such as other drug use, loss of interest in school, risk taking and pregnancy.
- Over four million teens experienced serious alcohol-related problems in the past year.
- The largest increase in drinking occurs between sixth and seventh grade, from 10 percent to 22 percent.
- Approximately 30 percent of 13-year-old boys and 22 percent of 13-year-old girls are current drinkers.
- The average age for first alcohol use is younger than 13 years.
- More than three-fourths of eighth-grade students report having tried an alcoholic beverage.
- About one-third of eighth-grade students report having had an alcoholic beverage in the past month.
- About one-fourth of eighth-grade students report having had five or more drinks on one occasion within the past two weeks.
- Of high school seniors:
 - 55 percent first used alcohol in ninth grade or earlier.
 - 22 percent first used alcohol before seventh or eighth grade.
 - 8 percent first used alcohol before sixth grade.

(This information was compiled from resources listed in the Bibliography.)

Alcohol Myths and Misconceptions

Directions: Following is a list of statements about alcohol that may be true or may be myths or misconceptions. Your answers can range from *Agree (A)* to *Not Sure (?)* to *Disagree (D)*. Circle your answers.

- A ? D 1. Alcohol is a drug.**
- A ? D 2. As a food, alcohol provides mostly calories.**
- A ? D 3. The body treats alcohol like most foods.**
- A ? D 4. Each person's body reacts the same way to the same amount of alcohol.**
- A ? D 5. Too much alcohol can result in death.**
- A ? D 6. A can of beer (12 ounces) has more alcohol than a glass of wine (4 ounces).**
- A ? D 7. Most adults drink each week.**
- A ? D 8. People drive better after a few drinks.**
- A ? D 9. Being drunk and alcoholism are the same.**
- A ? D 10. Adults and young people with drinking problems can be helped.**

Alcohol Myths and Misconceptions

Key

Directions: Following is a list of statements about alcohol that may be true or may be myths or misconceptions. Your answers can range from *Agree (A)* to *Not Sure (?)* to *Disagree (D)*. Circle your answers.

1. Alcohol is a drug.

Agree. Alcohol is a drug, legal for adult consumption. It acts on several body systems. Its most important effect is the depressant effect on the brain and nervous system.

2. As a food, alcohol provides mostly calories.

Agree. Alcohol is high in calories, with few other nutrients. Some heavy drinkers are poorly nourished because they get many calories, but few of the nutrients needed by the body.

3. The body treats alcohol like most foods.

Disagree. Alcohol does not have to be digested in the stomach and intestines like food does. Alcohol is immediately absorbed into the blood stream. Once in the blood, it is quickly transported to the brain. This is why alcohol may affect a person so quickly.

4. Each person's body reacts the same way to the same amount of alcohol.

Disagree. While there are some similarities in how alcohol affects each person, alcohol affects most people in unique ways. Reactions depend upon a variety of factors, including how fast the alcohol was consumed, body weight, past drinking experience and current mood.

5. Too much alcohol can result in death.

Agree. If alcohol is consumed faster than it can be oxidized (used up by the body), it builds up in the blood stream and in the brain, causing intoxication. Gulping a large amount of alcohol, such as a pint of hard liquor, may cause brain function to be so depressed that breathing stops and the person dies.

6. A can of beer (12 ounces) has more alcohol than a glass of wine (4 ounces).

Disagree. While the total volume of liquid is different, the amount of alcohol in each drink is the same (approximately 1/2 ounce). A distilled beverage drink, such as a gin and tonic, has approximately the same amount of alcohol as a can of beer or a glass of wine.

7. Most adults drink each week.

Disagree. About 30 percent of all adults choose not to drink alcohol at all. When this group is combined with those adults who drink alcohol less than once a month, a substantial number of American adults are not regular drinkers.

8. People drive better after a few drinks.

Disagree. After consumption of only one or two drinks, alcohol begins to affect coordination and reaction time. About half (20,000) of all motor vehicle deaths each year are related to alcohol use.

9. Being drunk and alcoholism are the same.

Disagree. Drunkenness is a temporary condition, due to drinking alcohol faster than it can be oxidized. In this condition one loses control of behaviors and many normal body functions. Alcoholism is a chronic (long-term) disease in which a person becomes dependent on alcohol. In this condition, alcohol use affects one's ability to work, to play and to be a productive, contributing member of society.

10. Adults and young people with drinking problems can be helped.

Agree. A variety of individuals, groups and health organizations provide help. Many are located within the community and perhaps within the school. Most communities have Alcoholics Anonymous groups. Usually the first step in dealing with a drinking problem is admitting that there is a problem. (A teenager who is concerned about someone who has a drinking problem can find help in Alateen.)

FAST FACTS

Alcohol

? *What is alcohol made from?*

It is made from fruits and grains.

? *How is it made?*

Fermentation—Chemical process in which yeast cells act on sugar in the fruit or grain and convert sugar to carbon dioxide and alcohol.

Distillation—Fermented mixtures are heated and vapors collected and condensed into a liquid.

? *What problems can occur from alcohol consumption?*

Drinking and driving is very dangerous. Alcohol use is related to half of all motor vehicle deaths.

Alcoholism is a chronic disease in which a person is dependent on the continued use of alcohol. It may involve one of ten drinkers.

Alcohol is a contributing factor in a number of illnesses, for example, liver disease.

Family relationships often are affected by the use of alcohol.

? How does alcohol act in the body?

It is quickly absorbed.

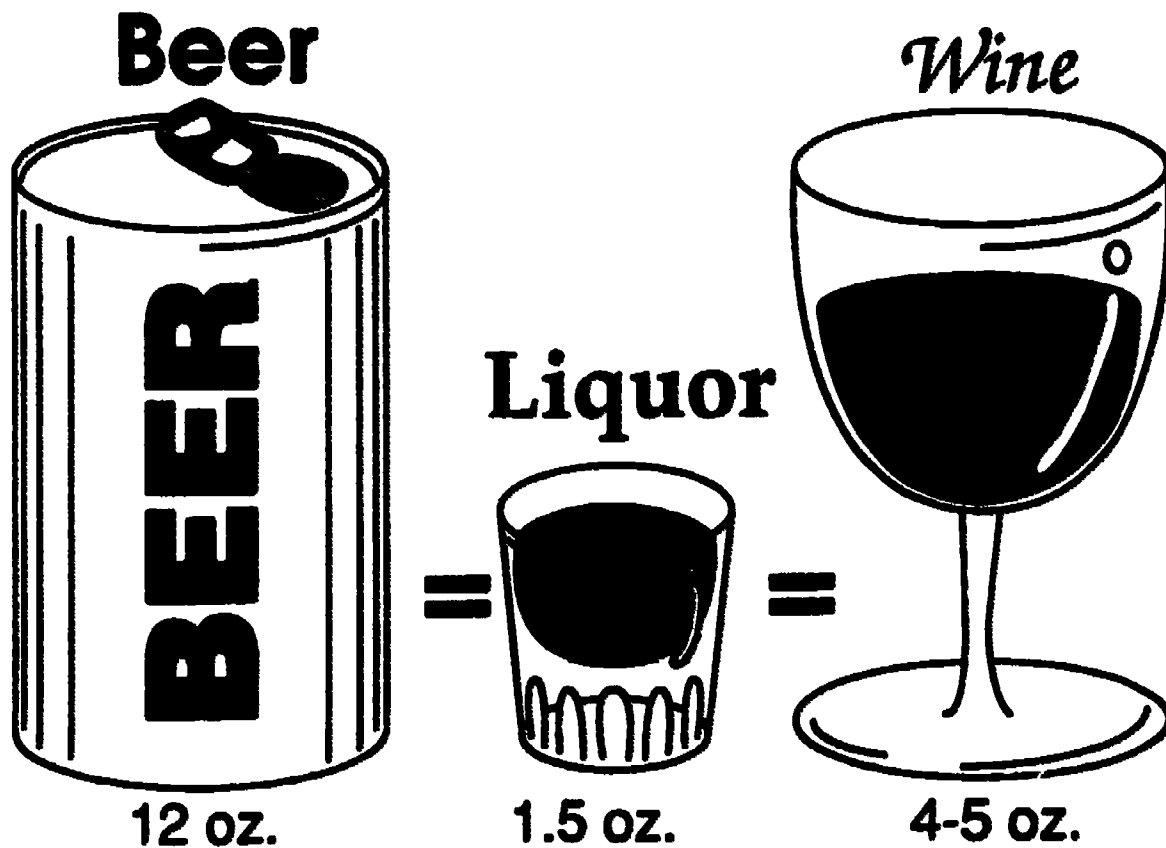
It is oxidized (processed) by the liver at a constant rate.

It is a depressant that acts on the function of the brain. First it slows thinking and inhibitions, then coordination, then involuntary body functions, such as breathing.

? What are other important facts?

Proof—A measure of the alcohol content of distilled beverages. It is twice the percentage of alcohol by volume. (A bottle of 86-proof whiskey is actually 43 percent alcohol.)

Equivalence—A typical serving of alcohol—12 ounces of beer or 4-5 ounces of wine or a 1.5 ounce shot of whiskey.



My Values About Alcohol

- 1. One good thing about alcohol is:**

- 2. One bad thing about alcohol is:**

- 3. In my home, alcohol is:**

- 4. When I become an adult, I intend:**
____ not to drink alcohol
____ to drink alcohol
because:

- 5. If I had a friend my age who was drinking alcohol after school, I would:**

- 6. If I had a parent who had a drinking problem, I could:**
 - a.**
 - b.**
 - c.****The best choice would be:**

LESSON
6

MARIJUANA USE: A SMOKE SCREEN

Objectives

Students will be able to identify health hazards of marijuana use by young people.

Students will be able to identify personal reasons not to use marijuana.

Time

One 50-minute class period.

Overview

Some controversy continues about the use of marijuana. While evidence about the potentially harmful effects of marijuana seems to be increasing, some people doubt that this drug is dangerous for healthy adults, and the medicinal use of marijuana appears to be expanding. However, it is widely accepted that marijuana use by America's youth is a particular concern. Growing and developing bodies need not be exposed to *any* drugs.

While the daily use of marijuana by high school seniors has declined over the past ten years, reports suggest that about 15 percent of eighth-grade students have tried marijuana. Middle school students often make important decisions about drugs that may affect their future.

In this lesson students identify current factual information about marijuana. They begin by writing anonymous statements about marijuana to which other students will respond. Finally, on a worksheet, students identify reasons not to use marijuana.

Instructional Strategies

Class discussion, brainstorming, worksheets.

Teacher Materials and Preparation

HAVE:

- ✓ Overhead projector.
- ✓ 3 x 5 cards or slips of paper, one for each student.
- ✓ *Christy's Chance* (optional), an interactive book available from ETR Associates/Network Publications, for each student.

COPY:

- ✓ **Much To-Do About Marijuana** worksheet for each student.

MAKE:

- ✓ Transparency of **Fast Facts—Marijuana**.
- ✓ Transparency of **The Big Ten Facts About Marijuana**.

REVIEW:

- ✓ **Fast Facts—Marijuana**.
- ✓ **The Big Ten Facts About Marijuana**.
- ✓ **Much To-Do About Marijuana Key**.

Procedures

- Give one 3 x 5 card or slip of paper to each student. Tell students that their responses will be anonymous—they are not to identify themselves on the card. Ask each student to write one fact about marijuana on the card. When students finish writing, have them

turn the cards over. Collect the cards and quickly shuffle them.

Tell students they each will be receiving a card; the card probably won't be their own, but if it is, they shouldn't say anything. Tell them not to make any statements aloud or try to determine who wrote on the card. Randomly distribute the cards to the class. Give students these directions:

- Step 1** After the statement on the card, write *agree* or *disagree* or *true* or *false*.
- Step 2** If you disagree or believe the statement is false, write a very brief response.
- Step 3** Categorize each statement into one of three general areas—physical effects (*P*), mental/emotional effects (*M*) and other (*O*). Write the statement category (*P*, *M*, *O*) in the upper righthand corner of the card.

Tell students to turn the cards over; then collect the cards. Select one or two students to quickly sort the cards into the categories—*P*, *M* or *O*. Put the cards aside to use later in the lesson.

■ **Using the Fast Facts—Marijuana and The Big Ten Facts About Marijuana** transparencies, lead a discussion about the known effects of marijuana, focusing on factual evidence. Ask students to use this evidence to write a paragraph opposing marijuana use by young people.

■ **Give each student a copy of the Much To-Do About Marijuana worksheet.** Allow about five minutes for students to complete the worksheet. Although the worksheet calls for opinions, most of the statements have correct answers. Lead a discussion about each question, and summarize students' statements on the board.

■ **Write on the board, "Daily use of marijuana by high school seniors has decreased since 1977."** Ask students to brainstorm the possible reasons for the reduction in daily marijuana use. Compare and contrast students' ideas with the list previously written on the board. Many responses on the two lists will be similar. Conclude that there are many more reasons not to use marijuana than to use it.

Evaluation

Use the statements from the first activity to have students summarize the facts about marijuana. Refer to the **Fast Facts—Marijuana** transparency to determine whether students' responses are accurate. Begin with the statements dealing with the physical effects, move to mental/emotional effects and conclude with the other category. If there is any doubt about correct statements, you may wish to assign research into these statements as homework. As an alternate activity, read each statement aloud, and ask the class to vote on each statement, using thumbs up or thumbs down.

Have students write about the reasons they personally would choose not to use marijuana.

One More Step

Distribute the interactive book *Christy's Chance* to students, and ask them to read the book as homework. Tell students the story will give them a chance to practice making decisions about using marijuana.

Explain that the book has many plots based on decisions made by the reader. As students read the story, they will come to points where Christy has to make decisions about using marijuana. Students will decide at each point what choice Christy makes and then turn to a new page to continue the story. The book tells students what pages to turn to for each choice. The story proceeds according to the choices students make, and students will see the consequences of their decisions. Ask students to read the story more than once, making different choices each time.

When students have completed the reading, discuss the story and the decision-making process with the class. (*Marijuana: The Real Story*, the nonfiction companion to *Christy's Chance*, could also be used to augment this lesson.)

~~F~~AST ~~F~~ACTS

Marijuana

Names marijuana, hashish

Street Names pot, grass, weed, joint, reefer, hash

Methods of Use most often smoked; can also be swallowed

Active Ingredient THC (tetrahydrocannabinol)

Short-Term Actions increased heart rate
reddening of eyes
motor coordination impaired
tracking (following a moving stimulus)
diminished
changes in perceptions
short-term memory impaired
loss of interest and motivation
euphoria, mellow relaxation
increased appetite

Long-Term Hazards damage to lungs
psychological dependence
interferes with motivation
possible damage to heart, immune system
and reproductive system

Medical Uses reduces pressure within the eye caused by
glaucoma
reduces nausea in cancer patients being treated
with chemotherapy

THE BIG TEN FACTS ABOUT MARIJUANA

- 1. Marijuana can result in psychological (mental) dependence.**
- 2. Marijuana contains more than 400 chemicals, many of which are harmful.**
- 3. Marijuana smoke inflames the lungs; users who inhale deeply increase the potential for harm to the respiratory system.**
- 4. Marijuana today probably has a greater concentration of THC than in the past.**
- 5. THC can remain in the body for up to a month.**
- 6. Marijuana affects coordination and slows down thinking.**
- 7. Marijuana affects memory and comprehension.**
- 8. Marijuana users often lose interest in school and other activities.**
- 9. Marijuana use by teens may be especially dangerous because teenagers' bodies are growing and developing.**
- 10. Some experts believe that marijuana may be a gateway drug leading to other drug experimentation.**

Much To-Do About Marijuana

Directions: Agree (A) or Disagree (D) with each of the first five statements. Then write a response to the next two statements.

- A** **D** 1. Marijuana is a safe drug.
- A** **D** 2. Marijuana is a harmful drug.
- A** **D** 3. Marijuana use is common among middle school students.
- A** **D** 4. Most teens smoke marijuana.
- A** **D** 5. The publicity about marijuana is bigger than the problem itself.

6. Marijuana can be harmful in the following situations:

7. The three best reasons not to use marijuana are:

a.

b.

c.

Much To-Do About Marijuana

Key

Directions: Agree (A) or Disagree (D) with each of the first five statements. Then write a response to the next two statements.

1. Marijuana is a safe drug.

Disagree. Research has shown it is not safe.

2. Marijuana is a harmful drug.

Agree. There is particular concern about harm to growing bodies.

3. Marijuana use is common among middle school students.

Disagree/Agree. Few middle school students use marijuana regularly; however, as many as 15 percent of 8th grade students have tried it. Although it may seem like everyone is using it, most students choose not to.

4. Most teens smoke marijuana.

Disagree. Daily marijuana use by high school seniors has declined over the past ten years. While many teens have tried marijuana, only a small portion continue daily use.

5. The publicity about marijuana is bigger than the problem itself.

Agree/Disagree. It seems as if a day doesn't go by without a new research report about marijuana or the arrest of someone, often famous, for possession or sale of the drug. Publicity keeps this drug in our view, so that to some it may appear so common that we all should get on the bandwagon and be users. However, many people who have struggled with a dependency on other drugs, such as heroin or cocaine, feel that marijuana was the gateway drug to other drug problems.

6. Marijuana can be harmful in the following situations:

Probable Answers: Driving, using power tools and equipment, for a pilot or surgeon, when pregnant, when using other drugs.

7. The three best reasons not to use marijuana are:

Student opinion, but likely responses might include the following:

It is illegal.

It's harmful to a growing body.

It will interfere with school.

It would make my parents very unhappy.

I'd rather do something better.

**LESSON
7**

A DRUG FOR EVERY PROBLEM?

Objective

Students will be able to describe the appropriate role of over-the-counter and prescription drugs.

Time

One 50-minute class period.

Overview

Medications play an important role in treating disease symptoms and may at times, actually cure certain health problems. The demand for both prescription and over-the-counter (OTC) drugs reflects people's need to take something for an instant cure. The wise consumer will select OTC drug products with care and will use all medications cautiously.

In this lesson students investigate some common OTC and prescription drugs and analyze labels for information about products. As appropriate, students complete a field research project about OTC drugs.

Instructional Strategies

Cooperative learning groups, class discussion, worksheets, brainstorming.

Teacher Materials and Preparation

HAVE:

- ✓ Overhead projector.
- ✓ OTC drug labels, one for each student. Ask students to bring labels to class before the lesson, or collect them yourself.

COPY:

- ✓ Aches, Pains and the Common Cold worksheet for each student.
- ✓ The OTC Label worksheet for each student.

MAKE:

- ✓ Transparency of Aches, Pains and the Common Cold worksheet.
- ✓ Transparency of OTC Analgesics.

REVIEW:

- ✓ Teacher Background Information.
- ✓ Aches, Pains and the Common Cold Key.

Procedure

- Give each student a copy of the **Aches, Pains and the Common Cold** worksheet and have students complete it as best they can. If necessary, and as time permits, allow students to work in pairs or cooperative learning groups.

Using the **Aches, Pains and the Common Cold Key** and a transparency of the student worksheet, lead a discussion about the common cold and other aches and pains that are often treated with OTC drugs. Ask students to brainstorm reasons there are so many myths about the common cold. Also ask students to identify any special home remedies for treating colds.

Tell students there are more than 300,000 over-the-counter (OTC) drug products. OTC drugs rarely cure an illness or disease. Most OTC medications only relieve symptoms of illness. This is certainly

true with OTC cold medications. Only the minor symptoms of a cold can be relieved.

Many health professionals believe that if people eat nutritious foods, they will get enough vitamins naturally. Therefore, they believe OTC products such as vitamins are unnecessary.

Other OTC products such as sun screens that contain PABA are beneficial. Research has shown that skin cancer is more common among those who were exposed to the sun at a young age, and using a sunscreen with a protection factor of at least 15 is thought to be very helpful in preventing skin cancer.

Ask students to speculate as to the reasons Americans spend more than \$8 billion each year on OTC products.

■ Give each student a copy of **The OTC Label** worksheet along with one of the labels you or your students collected. (If you ask students to bring OTC labels to class, do not have them bring the actual drugs.) Allow about ten minutes for students to analyze the labels and record the information from the labels on the worksheet.

Depending on the time you wish to devote to this activity, have students work in pairs or cooperative learning groups to compare labels, noting examples of side effects, cautions and warnings found on the labels. Have students look for specific directions or warnings for students their age. Emphasize to students that no drug—not even an OTC drug—can be considered completely safe.

Discuss the following rules about OTC drugs with the class:

- Children and teens should use OTC drugs only under the supervision of parents or other adults.
- Read the label before using.
- Follow directions exactly.
- Never use on a regular basis.
- Store in a cool, dry place.
- If side effects occur or you do not improve within the time listed on the label, tell your parents immediately.

■ Use the **Teacher Background Information** as a reference for a discussion of prescription drugs.

Explain to students that prescription drugs are more powerful than OTC drugs and must be prescribed and used under the direction of a physician. Note that while there are approximately 2,500 different prescribed drugs, 200 drugs make up the bulk of all prescriptions. Point out to students that the most commonly prescribed drugs are prescribed for health conditions related to lifestyle, e.g., tension, high blood pressure and anxiety. Many such conditions can be prevented or minimized by appropriate health behaviors.

Tell students that Americans spend more than \$20 billion on prescription drugs each year. One way to reduce the cost of prescription drugs is to substitute generic drugs. A generic drug is chemically equivalent to a brand-name drug, but almost always less expensive. All states now have provisions allowing the use of generic drugs. Pharmacists should be consulted about the use of generic drugs.

Evaluation

Collect and review student responses on the **Aches, Pains and the Common Cold** worksheet. Ask students to write a brief paragraph on the safe and appropriate use of medications.

One More Step

Using the **OTC Analgesics** transparency, discuss the commonly used OTC pain reducers. Conclude by asking students which of the three OTC drugs (aspirin, ibuprofen, acetaminophen) would medical professionals recommend as most appropriate in the following situations:

Infant or child with a fever	(acetaminophen)
Adult with pain in the joints	(aspirin)
Male who has had one heart attack	(aspirin)
Middle school student with a headache	(acetaminophen)
Child with aches and pains following chicken pox	(acetaminophen)
Young woman with menstrual cramps	(ibuprofen)

Teacher Background Information The Most Frequently Dispensed Prescription Drugs

<i>Brand Name</i>	<i>Most Often Used to Treat</i>
1. Amoxil	infections
2. Lanoxin	arrhythmia (irregular heart beat)/congestive heart failure
3. Xanax	anxiety/tension
4. Zantac	ulcers
5. Premarin	menopause
6. Dyazide	hypertension (high blood pressure)
7. Tagamet	ulcers
8. Tenormin	hypertension/angina (heart pain)
9. Naprosyn	pain/arthritis (pain in joints)
10. Cardizem	angina

Aches, Pains and the Common Cold

Directions: Use the following words to complete the sentences below. Note that some words may be used more than once.

<i>safe</i>	<i>aspirin</i>	<i>weather</i>	<i>rain</i>	<i>nose</i>
<i>humidifier</i>	<i>300</i>	<i>viruses</i>	<i>14</i>	<i>caffeine</i>
<i>Reye's syndrome</i>	<i>cold</i>	<i>analgesic</i>	<i>acetaminophen</i>	<i>25</i>
<i>ibuprofen</i>	<i>hands</i>	<i>fever</i>	<i>aches & pains</i>	<i>treatment</i>
<i>anti-inflammatory</i>	<i>adult</i>	<i>alcohol</i>	<i>heat</i>	<i>two</i>
<i>antipyretic</i>	<i>emotions</i>	<i>vitamins</i>		

About half of all Americans will develop a _____ each year. Although some people think colds are caused by _____ or _____, colds are caused by _____. Colds are most frequently transmitted by the _____. When the climate is dry or during the winter heating season, many health care professionals suggest the use of a _____ to help keep the upper respiratory passages moist.

There are over _____ OTC products for treating the cold. Even without _____, most colds will go away. It has been said that if you treat a cold with an OTC product, the cold will go away within _____ days, and if you do nothing, it will probably go away in _____ weeks.

Two common signs of a cold are _____ and _____. OTC drugs with _____ action can help to reduce a temperature, and OTC _____ drugs can help to reduce minor aches and pains. Some OTC products contain substances such as _____ or _____, which are ineffective in treating the common cold.

An analgesic helps to reduce _____. The three most common OTC analgesic products are _____, _____ and _____. These three products also have an antipyretic action, that is, reduction of _____. One additional action found in two of these products is _____. This action is not present in _____. Because of a concern about _____, it is recommended that children not use _____.

None of these drugs can be considered completely _____! These products should be used only under _____ supervision!

Aches, Pains and the Common Cold

Key

Directions: Use the following words to complete the sentences below. Note that some words may be used more than once.

<i>safe</i>	<i>aspirin</i>	<i>weather</i>	<i>rain</i>	<i>nose</i>
<i>humidifier</i>	<i>300</i>	<i>viruses</i>	<i>14</i>	<i>caffeine</i>
<i>Reye's syndrome</i>	<i>cold</i>	<i>analgesic</i>	<i>acetaminophen</i>	<i>25</i>
<i>ibuprofen</i>	<i>hands</i>	<i>fever</i>	<i>aches & pains</i>	<i>treatment</i>
<i>anti-inflammatory</i>	<i>adult</i>	<i>alcohol</i>	<i>heat</i>	<i>two</i>
<i>antipyretic</i>	<i>emotions</i>	<i>vitamins</i>		

About half of all Americans will develop a cold each year. Although some people think colds are caused by weather or rain, colds are caused by viruses. Colds are most frequently transmitted by the hands. When the climate is dry or during the winter heating season, many health care professionals suggest the use of a humidifier to help keep the upper respiratory passages moist.

There are over 300 OTC products for treating the cold. Even without treatment, most colds will go away. It has been said that if you treat a cold with an OTC product, the cold will go away within 14 days, and if you do nothing, it will probably go away in two weeks.

Two common signs of a cold are fever and aches & pains. OTC drugs with antipyretic action can help to reduce a temperature, and OTC analgesic drugs can help to reduce minor aches and pains. Some OTC products contain substances such as alcohol or caffeine, which are ineffective in treating the common cold.

An analgesic helps to reduce aches & pains. The three most common OTC analgesic products are aspirin, ibuprofen and acetaminophen. These three products also have an antipyretic action, that is, reduction of fever. One additional action found in two of these products is anti-inflammatory. This action is not present in acetaminophen. Because of a concern about Reye's syndrome, it is recommended that children not use aspirin.

None of these drugs can be considered completely safe! These products should be used only under adult supervision!

The OTC Label

Directions: Following is a list of information that must be found on every OTC label. Analyze the label that you or your teacher has brought to class. Record the information in the second column.

1. Name or statement of identity
(What is it?)
2. Listing of active ingredients
(What chemicals make it work?)
3. Net quantity of active ingredients
(How much of each chemical does it contain?)
4. Name and address of manufacturer,
packer or distributor
(Who makes it? Where?)
5. Indications for use
(What is it used for?)
6. Directions and dosage indications
(How is it used?)
7. Cautions/warnings
(What might you need to worry about?)
8. Side effects
(What other things might happen?)
9. Drug interaction precautions
(What might happen if this drug is taken
with other drugs?)
10. Expiration date
(When do you throw it away?)

OTC ANALGESICS

	Aspirin	Ibuprofen	Acetaminophen
Brand Name	Bayer St. Joseph's	Advil Nuprin	Panadol Tylenol
Analgesic	Reduce pain	Reduce pain	Reduce pain
Antipyretic	Reduce fever	Reduce fever	Reduce fever
Anti-Inflammatory	Reduce inflammation	Reduce inflammation	None
Cautions	Nausea, stomach irritation, allergic reactions, Reye's syndrome	Similar to aspirin, rash, sensitivity to sunlight	Nausea, stomach irritation, liver and kidney damage
Advantages	Treat arthritis; prevent heart attacks	Fewer side effects than aspirin; effective for menstrual cramps	Fewer side effects than aspirin; effective for people with ulcers or allergies to aspirin

**LESSON
8**

MORE DRUGS WITH POTENTIAL FOR ABUSE

Objectives

Students will be able to identify the medical uses and the potential hazards of selected drugs.

Students will be able to describe the dangers involved in using cocaine, inhalants and steroids.

Time

One 50-minute class period.

Overview

Through medical research, a number of drugs have been developed to treat a variety of diseases, illnesses and emotional conditions. Some of these drugs have the potential for dependence, while others have serious side effects. The illegal use of legally produced drugs is a major problem. Other substances that act like drugs and some drugs with limited medicinal value also contribute to America's drug problem.

This lesson provides an overview of major drugs and substances not previously considered. Through discussions and worksheets, students develop a basic understanding of both the medical uses and the potential hazards of these drugs.

Instructional Strategies

Class discussion, worksheets.

Teacher Materials and Preparation

HAVE:

- ✓ Overhead projector.
- ✓ Classroom set of *Drug Facts* pamphlet (optional), available from ETR Associates/Network Publications.

MAKE:

- ✓ Transparency of **Fast Facts—Selected Drugs**.

COPY:

- ✓ **Other Drugs** worksheet for each student.
- ✓ **Check Your Facts** worksheet for each student.

REVIEW:

- ✓ **Other Drugs Key**.
- ✓ **Fast Facts—Selected Drugs**.
- ✓ **Check Your Facts Key**.

Procedures

■ Give each student a copy of the **Other Drugs** worksheet. Tell students to answer as many questions as they can. The completed vertical row of letters should help. Allow about ten minutes for completion. As appropriate, allow students to work on the worksheet in pairs or small groups. Tell students to save the worksheet for review after the class discussion.

■ Use the **Fast Facts—Selected Drugs** transparency (and, if you choose to use it, the *Drug Facts* pamphlet) to discuss each of the eight categories of drugs. For five groups of drugs—**AM-PHETAMINES, BARBITURATES, HALLUCINOGENS, NARCOT-**

ICS and TRANQUILIZERS—the goal should be a broad understanding of both the medical uses and the potential hazards of each type of drug. Greater emphasis should be placed on the remaining drugs (**COCAINE, INHALANTS and STEROIDS**).

■ When discussing **COCAINE**, tell students that although South American natives have used the leaves of the coca plant as a mild stimulant for many years, it wasn't until relatively recently that cocaine use became a problem. Illegal producers of cocaine found that when the drug was processed into a white, powderlike form, it could be inhaled through the nose, producing dramatic stimulation. Because illegal cocaine was very expensive, few people used it. Early research mistakenly suggested that dependence on cocaine did not develop. How wrong this research was!

The most dramatic increase in cocaine occurred when an inexpensive process resulted in a smokable form called **CRACK**. Crack is one of the most addictive drugs and extremely dangerous. Use of crack as a stimulant is known to be related to cardiac arrest. Users exhibit extreme depression during withdrawal and then often seek more crack to avoid the unpleasant effects of withdrawal.

■ **INHALANTS** may be among the most dangerous of misused substances. This group of drugs includes many chemicals and volatile substances found in and around the home, such as gasoline, hairspray, cleaning fluids, glue and nail polish remover.

Some research suggests that among students, the use of inhalants may peak in middle school. One reason for the use of inhalants in this age group is their availability. Although other drugs may result in dependence or even death, they tend not to cause damage to body organs. Inhalants, on the other hand, can cause permanent liver, nerve or brain damage, as well as drunkenness and possible respiratory failure.

■ **ANABOLIC STEROIDS** are synthetic forms of the male hormone testosterone. Legitimate uses for this prescribed drug include treating certain forms of anemia and some breast cancers. Some athletes have used steroids to increase muscle mass, but the use of steroids is very dangerous.

The health consequences may include liver disease, heart disease and sexual dysfunction. There is also a chance for mood swings and possible increase in aggressive or depressive behavior. Ath-

letes should strive to be the best they can be naturally. The use of steroids while the body is growing and changing is a risk not worth taking.

■ After the discussion, review and correct the **Other Drugs** worksheets.

Evaluation

Give each student a copy of the **Check Your Facts** worksheet. Allow students about ten minutes to complete the worksheet; then collect the completed worksheets. Using the **Check Your Facts Key**, discuss the correct answers and offer brief explanations. Review the worksheets for an evaluation of students' understanding. Based on this review, decide whether more time is needed in a future class period to complete this lesson.

Have students answer the following question orally or in writing: Why can the use of cocaine, inhalants or steroids be dangerous?

One More Step

A variety of individuals in your school district and the local community have special interests in athletic performance. Invite a health professional, physician, athletic trainer or expert in sports medicine to discuss with the class the use of drugs by athletes.

Other Drugs

Directions: Match the statements to the drugs listed. Then fill in the drug name on the puzzle below. The first one has been done for you.

Statements

1. Cough suppressant
2. Drug often prescribed to control seizures
3. Gasoline, paint thinner, some glues
4. Extracted from the coca plant
5. One of the most addicting drugs
6. An example would be morphine
7. Used by some unsuspecting athletes
8. May result in flashbacks
9. A narcotic with no medical use
10. Primary action is mind-altering
11. May be prescribed for depression

Drugs

- CODEINE
- NARCOTICS
- HALLUCINOGEN
- STEROIDS
- HEROIN
- BARBITURATE
- CRACK
- AMPHETAMINES
- INHALANTS
- COCAINE
- LSD

(1)		<u>C</u>	<u>O</u>	<u>D</u>	<u>E</u>	<u>I</u>	<u>N</u>	<u>E</u>
(2)				<u>A</u>	_____	_____	_____	_____
(3)	_____	_____	_____	<u>N</u>	_____	_____	_____	_____
				<u>G</u>	_____	_____	_____	_____
(4)	_____	_____	_____	<u>E</u>	_____	_____	_____	_____
(5)				<u>R</u>	_____	_____	_____	_____
(6)	_____	_____	_____	<u>O</u>	_____	_____	_____	_____
				<u>U</u>	_____	_____	_____	_____
(7)	_____	_____	_____	<u>S</u>	_____	_____	_____	_____
(8)				<u>D</u>	_____	_____	_____	_____
(9)				<u>R</u>	_____	_____	_____	_____
				<u>U</u>	_____	_____	_____	_____
(10)	_____	_____	_____	<u>G</u>	_____	_____	_____	_____
(11)	_____	_____	_____	<u>S</u>	_____	_____	_____	_____

Other Drugs

Key

Directions: Match the statements to the drugs listed. Then fill in the drug name on the puzzle below. The first one has been done for you.

Statements

1. Cough suppressant
2. Drug often prescribed to control seizures
3. Gasoline, paint thinner, some glues
4. Extracted from the coca plant
5. One of the most addicting drugs
6. An example would be morphine
7. Used by some unsuspecting athletes
8. May result in flashbacks
9. A narcotic with no medical use
10. Primary action is mind-altering
11. May be prescribed for depression

Drugs

- CODEINE
- NARCOTICS
- HALLUCINOGEN
- STEROIDS
- HEROIN
- BARBITURATE
- CRACK
- AMPHETAMINES
- INHALANTS
- COCAINE
- LSD

- (1) C O D E I N E
- (2) B A R B I T U R A T E
- (3) I N H A L A N T S
- G
- (4) C O C A I N E
- (5) C R A C K
- (6) N A R C O T I C S
- U
- (7) S T E R O I D S
- (8) L S D
- (9) H E R O I N
- U
- (10) H A L L U C I N O G E N S
- (11) A M P H E T A M I N E S

~~F~~AST ~~F~~ACTS

Selected Drugs

Amphetamines

Names	Dexedrine, methamphetamine
Action	stimulation
Medical use	improve mood, treat depression, suppress appetite, treat narcolepsy (episodes of sleep)
Hazards	agitation, increased heart rate, insomnia, cardiac arrhythmia, high blood pressure, possible death

Barbiturates

Names	Seconal, phenobarbital
Action	depression
Medical use	sedation, induce sleep, control seizures
Hazards	lack of concentration, drowsiness, sleep, dependence, disorientation, possible death

Cocaine

Names	cocaine hydrochloride, crack
Action	stimulation
Medical use	topical anesthetic on mucous membranes for eye surgery
Hazards	excitability, increased heart rate, irritability, dependence, cardiac arrest, diseases associated with use of needles (HIV infection), possible death

Hallucinogens

Names	LSD, PCP, mescaline, psilocybin
Action	mind-altering
Medical use	none today; have been used in the past with those having mental-emotional problems
Hazards	hallucinations, increased heart rate, confusion, anxiety, paranoia, flashbacks

Inhalants

Names solvents, aerosols, glue, paint thinners
Action depression, minor altering
Medical use none
Hazards slurred speech, lack of inhibitions, nausea, possible liver and brain damage, respiratory failure, possible death

Narcotics

Names opium, codeine, morphine, heroin, methadone
Action depression
Medical use cough suppression, painkiller, no medical use for heroin
Hazards euphoria, slowed heart, drowsiness, constipation, dependence, respiratory failure, diseases associated with use of needles (HIV infection), possible death

Steroids

Names anabolic steroids
Action similar to male hormone (testosterone)
Medical use stimulate growth, increase muscle mass
Hazards acne, rash, heart disease, liver disease, sterility

Tranquillizers

Names Valium, Librium, Xanax
Action depression
Medical use treat anxiety and tension
Hazards slowed function, drowsiness, hallucinations, dependence, coma, possible death

Check Your Facts

Directions: Match the drugs listed at the top of the page with the statements listed at the bottom of the page. Write the letters of the correct answers in the blanks before the statement. Note that there may be several answers for a statement and that the drugs may apply to more than one statement.

A. amphetamines

B. barbiturates

C. cocaine

D. hallucinogens

E. inhalants

F. narcotics

G. steroids

H. tranquilizers

- _____ 1. stimulate the body
- _____ 2. depress body functions
- _____ 3. "non-drug" drugs
- _____ 4. danger of HIV infection
- _____ 5. have actions similar to that of alcohol
- _____ 6. group that includes methadone
- _____ 7. extremely dangerous to use with alcohol
- _____ 8. may result in dependence
- _____ 9. no legal medical uses at this time
- _____ 10. potentially hazardous to your health

Check Your Facts

Key

Directions: Match the drugs listed at the top of the page with the statements listed at the bottom of the page. Write the letters of the correct answers in the blanks before the statement. Note that there may be several answers for a statement and that the drugs may apply to more than one statement.

A. amphetamines

E. inhalants

B. barbiturates

F. narcotics

C. cocaine

G. steroids

D. hallucinogens

H. tranquilizers

A C _____

1. stimulate the body

These two groups stimulate the body. Other drugs may stimulate certain organs or systems, or there may appear to be stimulation due to release of inhibitions.

B E F H _____

2. depress body functions

These drugs act as depressants. Other drugs, such as cocaine, may result in depression during withdrawal.

E _____

3. "non-drug" drugs

Inhalants are dangerous substances that act like drugs.

C F _____

4. danger of HIV infection

Of the drugs listed, cocaine and narcotics are most likely to be injected through needles. All drug use involving needles increases the risk of exposure to HIV, the virus that causes AIDS.

B E F H _____

5. have actions similar to that of alcohol

The depressant drugs and inhalants produce similar effects.

F _____

6. group that includes methadone

Methadone is a synthetic narcotic used to treat heroin addicts.

B E F H _____

7. extremely dangerous to use with alcohol

While each may be dangerous when used with alcohol, depressant drugs in combination with alcohol may produce exaggerated effects.

A B C D E F G H _____

8. may result in dependence

All may result in psychological dependence, and some may result in physical dependence.

D E _____

9. no legal medical uses at this time

These drugs have no legal medical use at this time. Even though others have a medical use, they are still dangerous.

A B C D E F G H _____

10. potentially hazardous to your health

All of these substances are potentially hazardous to your health.

LESSON
9

IT'S YOUR DECISION!

Objectives

Students will be able to demonstrate useful steps in responsible decision making.

Students will be able to identify sources of help for common problems and critical situations.

Time

One 50-minute class period.

Overview

Decision making is a complex process that must be learned. People are not born with the skills to make appropriate decisions. The decisions students make about some things, such as which flavor of ice cream to eat, are safe and usually have few negative consequences. As students become more independent, they may be exposed to situations where the decisions they make could have serious impacts on their health and future. A number of individuals and groups are ready to assist young people in critical situations.

In this lesson students identify forces that influence their decisions. Students review a decision-making plan and apply the plan to certain situations. Finally, students identify specific sources of help from within the school, family and community.

Instructional Strategies

Class discussion, brainstorming, cooperative learning groups, oral presentation or roleplay, worksheets.

Teacher Materials and Preparation

HAVE:

- ✓ Overhead projector.

MAKE:

- ✓ Transparency of Decision-Making Considerations worksheet.

COPY:

- ✓ Influences on Your Decisions worksheet for each student.
- ✓ Decision-Making Considerations worksheet for each student.
- ✓ Never a Dull Moment worksheet for each student.
- ✓ You're Not Alone worksheet for each student.
- ✓ What Would You Do? worksheet for each student.

REVIEW:

- ✓ You're Not Alone worksheet. Identify specific local resources such as Alcoholics Anonymous, Al-Anon, Alateen, community health clinics and hot lines.

Procedures

■ Give each student a copy of the **Influences on Your Decisions** worksheet. Tell students that many forces influence our behaviors and the decisions we make. Ask each student to focus only on the first influence, *parents*. Use a brainstorming session to generate examples of how parents might influence common decisions students make. Accept all answers and do not evaluate or critique the responses. Potential responses might include the following:

- Clothes I can pick my own clothes if I am paying.

**We pick out my clothes together.
My parents won't let me get anything too wild.**

- **Movies** My parents will not let me go to an R-rated movie. They will only let me see PG-13 movies.
- **Food** They let me eat anything I want. I must clean my plate.
- **Tobacco** I am not allowed to use tobacco. They say I can decide when I'm an adult.
- **Alcohol** I am not allowed to use alcohol. I am not allowed to ride with anyone who's been drinking alcohol.

Allow students time to complete the remaining part of the worksheet. Point out that there are two places at the bottom of the page to add other influences. When students have finished, discuss selected influences. Be sure to include friends, advertising and values. Ask the class to suggest reasons that family, friends or advertisers might try to influence young people's decisions. Responses could include the following:

- Parents are trying to protect me.
- Advertisers want me to buy their product.
- Some people don't want to do something alone.
- Friends want me to be like them.

Tell students that many people and groups of people have a variety of reasons for trying to influence the decisions of others. At times, such people and groups may not have your best interests in mind.

■ Give each student a copy of the **Decision-Making Considerations** worksheet and use the overhead projector to display the transparency of the worksheet. Lead a discussion of the steps in the plan, asking students for examples. *Note:* There are a variety of decision-making plans for young people. Use the plan that works best for you. The one included in this lesson is fairly comprehensive. A simpler version may be more appropriate for some students.

■ Divide the class into five groups, and give each group a different situation from the **Never a Dull Moment** worksheet. Briefly, have

groups apply several of the considerations to their assigned situations. Ask each group to appoint a spokesperson to explain the considerations used in making decisions. If time allows, hold a class discussion about each situation. As an alternative, ask students to roleplay each situation.

■ When students have returned to the full group, give each student a copy of the **You're Not Alone** worksheet. Allow about five minutes for students to complete the worksheet anonymously. Discuss each of the situations and identify people and groups to whom students could turn for help. Be prepared to identify specific resources within the school and local community that focus on drugs and related problems. Point out to students that even in the darkest, bleakest times of their lives, they are not alone.

Evaluation

Observe and assess student participation in groups during the decision-making process. Also observe and assess student participation in discussion about the **You're Not Alone** worksheet.

Homework

Ask each student to take the **You're Not Alone** worksheet home and discuss with their parents alternatives to specific situations.

One More Step

Give each student a copy of the **What Would You Do?** worksheet. Ask students to read the scenario and the questions. Discuss some of the feelings and emotions involved and some alternative solutions to the dilemma. Have students share the recommendations they would make to Chris. (Please note that this activity requires sensitivity to your students' personal situations and feelings.)

Influences on Your Decisions

Directions: Some of the people and groups that influence your decisions are listed below. What kinds of decisions are influenced by parents, friends and school? Make a mark in each column where your decisions are influenced by the group listed.

Influence	Decisions About...				
	Clothes	Movies	Food	Tobacco	Alcohol
<i>Parents</i>	✓	✓	✓	✓	✓
<i>Friends</i>					
<i>Religion</i>					
<i>Health Information</i>					
<i>Advertising</i>					
<i>Cost</i>					
<i>My Values</i>					

Decision-Making Considerations*

(1) Recognize the problem.

(2) Identify whose problem it is.

(3) List possible solutions and people who can help.

(4) Predict outcomes for each solution.

(5) Select best solution and try it out.

(6) Evaluate/revise the solution.

* There is no right or wrong way to go about decision making. These are considerations that have been found useful by others when making wise decisions.

Never a Dull Moment

Directions: Use the steps described in the **Decision-Making Considerations** to decide what to do in the situation your teacher assigns to your group.

Situation #1

Graduation Party

Middle school graduation is in a few weeks. The most popular kids, known as The Group, are planning a big party. Everyone has been talking about the party—it sounds great! Most of your friends have received an invitation. Crystal and Deron keep asking you if you got an invitation. You haven't. What should you do?

Situation #2

The Wedding Toast

Pilar and Jim are close family friends. At their wedding reception, Mr. Ramos, Pilar's grandfather, proposes a toast to the newlyweds. Everyone is given a glass of champagne. What would you do?

Situation #3

The Middle School Trip

The annual middle school trip to Washington, D.C., is scheduled for the spring. You have saved enough money for half the costs. Your mom has agreed to pay the rest. Your high school friends say that it is a tradition for all the kids to drink alcohol on the trip. You really don't want to drink. What should you do?

Situation #4

Your Sister Smokes What?

One evening when your parents are at school for parent-teacher conferences, you smell smoke coming from your older sister's room. You discover your sister Audrey is smoking marijuana. You are shocked, since you never suspected that Audrey used drugs. Audrey says that this is the first time she has tried it and she'll never try it again. She promises to stop and asks you not to tell your mom and dad. What would you do?

Situation #5

Good News-Bad News

The good news is that you are going to spend five days with your favorite friend who lives in another city. The bad news is that your friend's 16-year-old brother always seems to be showing off by smoking and drinking beer. The last time you spent the night, the brother kept insisting that you also drink some beer. You said no, but it was a little scary. What should you do?

You're Not Alone

Directions: Mark the column of the person or people you would go to for help in these situations. (You may mark more than one column for each situation.)

SITUATION	WHERE WOULD YOU GO FOR HELP?				
	Parent	Friend	Teacher	Counselor	Others
1. You saw a classmate cheat on a test.					
2. You feel pressured by your parents.					
3. You have a sore throat that won't go away.					
4. A friend talks to you about suicide.					
5. A friend thinks she is pregnant.					
6. You see some high school friends sniffing something.					
7. You see a friend take some money from another person's locker.					
8. You know a friend is using drugs.					

What Would You Do?

Directions: Read the story about Chris and think about his questions. Then help him find someone to talk to.

Until recently, Chris had never seen his dad drink too much alcohol. But, something has changed! Chris's dad started to drink more and more, even in the mornings. Last week when school was out early, Chris went home to find that his dad had not gone to work and that he was drunk. The house was a mess, and Chris's dad smelled terrible. His dad wanted to talk, but Chris felt very uncomfortable. Just before Chris's mom came home, Chris's dad got sick all over the kitchen.

- ◆ Can Chris help his dad?
- ◆ Should Chris talk to his mom about it?
- ◆ What should Chris do about his friend who wants to come over to play Chris's new video game? What if Chris's friend sees Chris's dad drinking?
- ◆ What should Chris do when his dad starts drinking?

REMEMBER: There are people in Chris's life who can help. Consider the people Chris might use as resources for some of these questions. Whom would you recommend Chris talk to? In the space below, identify two different people or groups you would recommend. Explain how each person could help.

**LESSON
10**

SAYING NO!

Objectives

Students will be able to identify assertive steps to saying no.

Students will be able to demonstrate "no" responses in given situations.

Time

One 50-minute class period.

Overview

Middle school students may be placed in situations that have potential for harm, illegal behavior or unwise choices. Often, a friend might encourage another student to try a risky behavior. At other times, a situation might just not feel right to the student. Assertive behavior can allow students to avoid potentially negative situations.

This lesson presents an overview of the process of saying no. Through worksheets, with a partner and in a roleplay, students practice and demonstrate assertive ways to say no.

Instructional Strategies

Class discussion, brainstorming, cooperative learning groups, roleplays.

Teacher Materials and Preparation

HAVE:

- ✓ Overhead projector.

MAKE:

- ✓ Transparency of **Saying No! Example**.
- ✓ Transparency of **Saying No!** worksheet.
- ✓ Transparency of **Practice Saying No** worksheet.

COPY:

- ✓ **Saying No!** worksheet for each student.
 - ✓ **Practice Saying No**, one for each pair of students. (Collect and use again.)
 - ✓ **Roleplay Situations**, one for each student and ten additional copies.
-

Procedures

■ Ask students, "Have you ever been in a situation you didn't like, but didn't know what to say? Has someone ever tried to pressure you to do something you didn't want to do?" Ask students to give examples of these situations. Then ask students what they learned from those situations. Probable responses might include the following:

- to avoid that person or situation in the future;
- to think about possible answers before that kind of exposure.

Tell students that we are all sometimes placed in situations in which we are uncomfortable or that may be wrong or potentially harmful. One important way to deal with such situations is to think about what you would say or do in a given situation before it occurs. Using the **Saying No! Example** transparency, discuss the steps involved in saying no. Ask students if the responses presented are realistic for them. Ask for additional ideas.

■ Using the transparency of the **Saying No!** worksheet, select one of the situations offered by a student during the earlier discussion. A common and noncontroversial situation should be

used. Ask students to brainstorm specific responses for each step, and list the responses on the transparency.

■ Ask students to pair off. If space is available, ask each pair of students to move to a quiet place. Give each student a copy of the **Saying No!** worksheet. Hand out the **Practice Saying No** worksheet and show the first situation on the **Practice Saying No** transparency. Ask each student to play a role. As necessary, allow students a few minutes to think, and then tell them to use the steps from the **Saying No!** worksheet to respond to their partners. Then show the second situation and ask students to exchange roles, practicing saying no.

■ Ask the pairs of students to join other pairs to form groups of four or six students. Give each group a situation from the **Roleplay Situations** worksheet. Allow each group approximately ten minutes to consider possible alternatives and responses and to prepare a brief roleplay using the steps for saying no. Have groups present roleplays to the class. If time permits, allow students to suggest alternative responses for each situation.

Evaluation

Have students take home the **Roleplay Situations** worksheet and discuss with a parent or other adult one of the situations their group didn't use. Then ask students to write a brief response to that situation using the "Saying No" steps. Review responses for completeness and appropriateness.

One More Step

Select three of the roleplay responses that demonstrate good assertive behaviors in saying no. Have students present the roleplays to upper elementary students in a nearby school.



Saying No!

Example

Identify the problem, tactfully delay.

- 1. *What will happen...?***
- 2. *What do you really want...?***

Identify the problem as trouble.

- 1. *Drinking, that's trouble, no!***
- 2. *Sneaking back into school, that's trouble, no!***

Look the person in the eye and say,

- 1. *"No."***
- 2. *"No, thanks."***

Identify consequences.

- 1. *We might get caught.***
- 2. *The teacher could....***
- 3. *My mom would ground me for ten years.***

Suggest alternatives.

- 1. *I'd rather have a cola.***
- 2. *Why don't we...?***
- 3. *Let's go to....***

Closure.

- 1. *Say, "That's not a good idea, but if you change your mind...."***
- 2. *Say, "I'm not interested, but if you decide not to...."***
- 3. *Walk away.***

Saying No!

Identify the problem, tactfully delay.

1. _____
2. _____

Identify the problem as trouble.

1. _____
2. _____

Look the person in the eye and say,

1. _____
2. _____

Identify consequences.

1. _____
2. _____
3. _____

Suggest alternatives.

1. _____
2. _____
3. _____

Closure.

1. _____
2. _____
3. _____

Practice Saying No

But I Need It to Pass!

Your best friend is in a health class that you took last semester. Your friend wants your class report. You worked hard on the report and you were the only person to get an A.

Friend: Have you taken the health class?

You: Yes, I had Mr. Zook last semester.

Friend: I'm taking it now. I've got a terrible grade so far.

You: Don't worry. You can do better on the last test. If you do a good report, you will get a pretty good grade.

Friend: Well, that's really the problem. The report is due in three days. I haven't started yet. I know that you can help me.

You: Sure.

Friend: How did you do on the class report?

You: Great, my only A on a report in eighth grade!

Friend: You're my best friend. I'd like to use your report.

You:

Movie Adventures

With permission from your mom and dad, you go to a movie with three friends. Your parents drop you and your friends off at the movie. Your friend's dad is going to pick up the group right after the movie. The movie will be over about 4:00 p.m. Your parents won't get home until 6:30 p.m. Toward the end of the movie, the friend whose dad is to pick up the group announces that his dad isn't going to pick you up until 6:00 p.m.

Friend: The movie is about over; my dad isn't going to be here for two hours.

You: My parents think I'll be home soon.

Friend: You told me that they won't be home until 6:30 p.m.

You: Yes, but they expect me to be at home.

Friend: Don't worry, they will never know.

You: My mom always finds out about everything!

Friend: Let's sneak into another theater and watch another movie. It will be our first R-rated movie!

You:

Roleplay Situations

Situation #1—*A Little Drink Never Hurt Anyone*

Your best friend, Shelly, has asked you to go to the beach with her and her older sister. Her sister Shawnda was your sitter when you were very young. Shawnda's boyfriend, Scot, will be driving. Normally your parents would not let you go to the beach without them. Although they are cautious, they approve this time, since they have known Shawnda for eight years. At the beach, Shelly pours beer into cups for each of you; after all, "A little beer never hurt anyone."

Situation #2—*Your Parents Say It Is Okay*

At a celebration party for your grandparents' fiftieth wedding anniversary, many adults are drinking alcoholic beverages. Some underage people also seem to be drinking. While sitting at a table with your 14-year-old cousin, Uncle Bill approaches. He has several glasses of wine, and he is giving a glass to each person he meets. He hands a glass of wine to both you and your cousin. His only comment is, "It's okay, I've already asked your moms—be happy!"

Situation #3—*Beware of Gifts*

You meet Lucinda and Julie at the mall. After shopping, the group decides to stop for a yogurt cone. After finishing the cone, Lucinda opens her purse and pulls out a package of cigarettes. She lights up and offers a cigarette to Julie, who also lights up. Lucinda reaches toward you with a cigarette in her hand. Without saying anything, she looks at you, waiting for you to take the cigarette.

Situation #4—*Here Comes the Joint*

You're at a party at Kirk's house on Saturday. His parents are home, but are basically staying away from the party. It's your first boy-girl party, and you are really nervous. During the party, Kirk's parents leave to pick up pizza. While they are gone, Tom lights up a marijuana joint. Tom passes the joint to Clay, who takes a drag and passes it on to Carol. It looks like everyone is smoking the joint. The joint is moving toward you. Five friends are standing between you and the joint!

**LESSON
11**

AVOIDING DRUGS IN YOUR FUTURE

Objectives

Students will be able to summarize the impact of drug use upon their future.

Students will be able to summarize the impact of drug use on society.

Students will be able to identify their personal contributions to a drug-free life.

Time

One 50-minute class period.

Overview

Drugs have played an important role in medicine for many years. Today, over-the-counter health products flourish. Drug use has a major negative impact on society. Young people often make important decisions about using drugs as early as middle school. Clearly, the use of drugs can have devastating effects upon our youth.

This lesson provides closure to the study of the impact of drug use on society and students. Students demonstrate knowledge about common drugs and anonymously express their opinions about drugs. Finally, students select a formal strategy to express their opposition to the use of drugs.

Instructional Strategies

Class discussion, letter writing.

Teacher Materials and Preparation

HAVE:

- ✓ 3 x 5 index cards.
- ✓ Large paper clips.

MAKE:

- ✓ 3 x 5 "drug cards," using **Drugs on Back**.
- ✓ Four signs: *Completely Agree, Usually Agree, Usually Disagree, Completely Disagree.*

COPY:

- ✓ **Secret Voting** worksheet for each student.
- ✓ **Student Letter** worksheet for each student.

REVIEW:

- ✓ **Drugs on Back.**
- ✓ **Secret Voting Questions.**

Procedures

■ Begin by reminding students that for several years drugs have played an important role in medicine. Today there are about 2,500 prescription drugs and over 300,000 over-the-counter drug products. Tell students that we all need a basic understanding of the common drugs used to cure disease and treat illnesses as well as illegal drugs.

Shuffle the drug cards from **Drugs on Back** and randomly distribute the cards, being careful not to let students see the drug listed on their cards. Give each student one card and a large paper clip.

Tell students not to look at the card but to have a partner clip the drug card to their back with the drug name showing. Tell students they are to figure out the name of the drug without looking at the card, by asking other students questions that can only be answered "Yes" or "No." Students should circulate among their classmates, accumulating information and attempting to identify the drugs.

After a student has asked and answered one question, he or she must move on to another person. Caution students that they may not return to any person they have talked to until they have spoken to every other person in the class. When students have identified their drug, tell them to continue to answer questions.

Before students begin, quickly roleplay potential yes-no questions. Is it legal? Is it usually injected? Is it smoked?

Allow about ten minutes. Then tell students to ask someone to carefully remove the card, bending the paper clip, if necessary. Collect all the drug cards and quickly review each drug as necessary and as time permits.

■ Place the four signs—*Completely Agree*, *Usually Agree*, *Usually Disagree* and *Completely Disagree*—in four different parts of the room.

Allow at least fifteen minutes for this activity. Give each student a copy of the *Secret Voting* worksheet. Tell students not to put their names or any other identifying information on the worksheet. Tell students that you are going to read several statements about drugs. Ask them to respond to each statement by circling the answer that best represents their opinions, with no verbal comments. After all statements have been read, collect the worksheets. Randomly redistribute the worksheets throughout the class, and remind students that there should be no talking.

Read the first of the *Secret Voting Questions*, and ask students to stand under the sign that matches the response on the worksheet they now have. You may choose to summarize the opinions expressed by saying, "It appears that almost 75 percent of the class..." or "While most disagree with..., ___ percent agree." Or you can discuss and explain each item. Items 1-11 were discussed in Lesson 1. Note that the last few statements may be sensitive and that there is room for you to add two additional statements.

■ Tell students that we each have a responsibility to live healthy lives and to contribute to the welfare of the community. Select one of the following situations and ask students to write a brief answer to the question.

Lottery Winner

You have just won your state's Million-Dollar Lottery. Part of the lottery requirement is that you contribute half to a community project. You have decided to establish a model drug education and prevention program in your middle school. What would you do to prevent drug abuse in your school and community?

Model Behavior

You have been asked to write a brief report for upper elementary school students on the importance of a drug-free life. What would you tell these students about drugs?

■ Summarize by asking students to share their ideas about both self and community responsibility. What ideas do they have to prevent drug abuse? Submit selected responses to the school or community newspaper.

Evaluation

Give each student a copy of the Student Letter worksheet. Ask students to compose a letter to a parent or guardian or any other important adult in their life. After the letters are written, you might ask students to share their ideas, or you could provide envelopes for mailing the letters. Conclude by asking students to share ideas about the value of communicating with important adults in their life.



DRUGS ON BACK

Using the drugs listed below, or others you believe are more appropriate, prepare one 3 x 5 drug card for each student. Cut and paste these labels onto the cards or print your own cards—one drug to a card.

alcohol	gasoline	beer	crack
marijuana	wine cooler	heroin	Murine
Valium	barbiturate	Amoxil	Anacin
No-Doz	caffeine	cocaine	cigar
Listerine	ibuprofen	speed	hashish
aspirin	penicillin	LSD	Rolaids
Tylenol	Skoal	glue	Geritol
whiskey	Advil	Contac	
Bufferin	codeine	Nuprin	

Secret Voting

Directions: Do not put your name or any other identifying marks on this page. Circle the answer that best represents your opinion about each of the statements the teacher reads.

	Completely Agree	Usually Agree	Usually Disagree	Completely Disagree
1.	.....CA	.....UA	.....UD	.....CD
2.	.....CA	.....UA	.....UD	.....CD
3.	.....CA	.....UA	.....UD	.....CD
4.	.....CA	.....UA	.....UD	.....CD
5.	.....CA	.....UA	.....UD	.....CD
6.	.....CA	.....UA	.....UD	.....CD
7.	.....CA	.....UA	.....UD	.....CD
8.	.....CA	.....UA	.....UD	.....CD
9.	.....CA	.....UA	.....UD	.....CD
10.	.....CA	.....UA	.....UD	.....CD
11.	.....CA	.....UA	.....UD	.....CD
12.	.....CA	.....UA	.....UD	.....CD
13.	.....CA	.....UA	.....UD	.....CD
14.	.....CA	.....UA	.....UD	.....CD
15.	.....CA	.....UA	.....UD	.....CD
16.	.....CA	.....UA	.....UD	.....CD
17.	.....CA	.....UA	.....UD	.....CD
18.	.....CA	.....UA	.....UD	.....CD
19.	.....CA	.....UA	.....UD	.....CD
20.	.....CA	.....UA	.....UD	.....CD



SECRET VOTING QUESTIONS

1. A drug is a substance that affects the mind or body.
2. Drugs are bad.
3. Some people consider alcohol and nicotine to be drugs.
4. Almost everyone in the world is a drug user.
5. Some drug users increase their risk of infection with HIV, the virus that causes AIDS.
6. Most harmful drugs are produced in other countries.
7. The decision to use drugs is often made in middle school.
8. Middle school students imitate their friends' use of drugs and ignore what their parents say.
9. Most middle school students use illegal drugs.
10. The best way to handle our drug problem is to put all those who misuse drugs in jail.
11. By the year 2000, fewer students will be misusing drugs.
12. Each person should have the right to decide whether to drink, smoke or use other drugs.
13. I know a student my age who has smoked tobacco.
14. I know a student my age who drinks alcohol.
15. I know someone who has smoked marijuana.
16. When I become an adult, I will not use cocaine.
17. When I become an adult, I will not smoke marijuana.
18. I will not let drugs interfere with my future.
19. _____
20. _____

Student Letter

Date _____

Dear _____:

Drug misuse and abuse in our country is a major problem. Some students make important decisions about drug use as early as middle school. We have just completed a unit on drugs in _____ class. The three most important things I learned were

a.

b.

c.

Drug use can have a major negative impact on my future. Because of that, I pledge the following:

It is important that people who care talk to each other about the drug problem. I would like to talk to you. Please let me know when we can talk.

Sincerely,

(signature)

GLOSSARY

Addiction

Compulsion to continue using a drug, often includes increasing dosage and tolerance. Can refer to physical or psychological dependence.

Alcohol

Ethyl alcohol, a legal drug for adults, formed by fermenting of carbohydrates in fruits and grains with yeast. Depresses the central nervous system, affecting coordination and concentration.

Alcoholic

A person dependent upon the continued use of alcohol. May involve more than 10 million Americans. Exact cause not known.

Amphetamine

A drug that temporarily increases mental alertness and energetic feelings. Available by prescription for medical uses.

Analgesic

A drug that relieves pain, such as morphine, acetaminophen, aspirin.

Barbiturate

A depressant, slows down body functions. Available by prescription for medical uses.

Caffeine

A mild stimulant found in some cola drinks, coffee, tea, chocolate and certain over-the-counter drugs.

Cannabis Sativa

A plant more commonly known as marijuana. Active ingredient is THC.

Cocaine

An illegal stimulant produced from the leaves of the coca plant. High doses may interfere with heart function.

Crack

An intense form of cocaine, usually smoked, considered by some to be among the most addicting drugs.

Dependence

State in which use of a drug is necessary for either psychological or physical functioning. User may need increased dosages of the drug to prevent withdrawal.

Depressant

A drug that depresses the central nervous system, produces a calming effect.

Drug

A chemical substance that when taken into the body causes changes.

Drug Abuse

Illegal use of drugs for other than the intended purposes.

Drug Misuse

Unwise use of legal drugs, may place the consumer at risk.

Flashback

Recurrence of an hallucination without retaking the drug.

Hallucinogens

Group of drugs whose primary action is on the mind and perceptions; an example is LSD.

Hashish

Resin from cannabis with a higher concentration of THC.

Heroin

An illegal narcotic, highly addictive.

Inhalants

Chemicals that give off fumes that produce a depressant effect or mind-altering state. Includes gasoline, airplane glue, aerosols such as hair spray.

LSD

A strong, illegal hallucinogen.

Marijuana

Common name for cannabis sativa with THC as the active ingredient. Usually smoked, produces effects similar to alcohol.

Methadone

Synthetic narcotic, may be used to treat heroin addicts.

Morphine

A prescription narcotic derived from opium.

Narcotics

Group of drugs, regulated by federal laws, that require a prescription. Opiates; relieve pain and produce sleep.

Nicotine

Stimulant found in tobacco. A poisonous chemical, often used as an insecticide.

Opiates

Group of drugs derived from opium, includes morphine and codeine. Addictive, relieve pain and produce sleep.

Over-the-Counter Medication

Variety of 300,000 medications that can be purchased without a prescription.

Physical Dependence

Physical state of the body that requires continuing drug use for normal functioning. If drug use stops, the body has withdrawal symptoms.

Prescription Drug

Controlled drug that must be used under the direction of a physician.

Psychoactive Drug

Substance that alters functions of the mind and results in behavior change.

Psychological Dependence

Compulsion to use a drug for perceived pleasurable effects.

Side Effect

A drug action other than the primary intended effect of that drug.

Steroids

Drugs that mimic testosterone, a male hormone, and increase muscle mass. Many effects on the body, including liver disease and sterility.

Stimulants

Group of drugs that stimulate the central nervous system, producing increased activity and alertness.

Tolerance

Need for continued increasing dosage of a drug to produce pleasurable effects.

THC

Active ingredient in marijuana, tetrahydrocannabinol.

Tranquillizers

Depressants, prescription drugs that slow body function and reduce anxiety.

Withdrawal

Series of body reactions to discontinuing an addictive drug.

BIBLIOGRAPHY

- Botvin, G. J. 1986. Substance abuse prevention research: Recent developments and future directions. *Journal of School Health* 56 (9) 369-374.
- Carroll, C. R. 1989 (2nd ed.). *Drugs in modern society*. Dubuque: Wm. C. Brown Publishers.
- Giarratano, S. C. and Evans, D. 1990. *Entering adulthood: Examining drugs and risks*. Santa Cruz, CA: Network Publications.
- Hawkins, J. D., Lishner, D. M. and Catalano, R. F. 1985. Childhood predictors and the prevention of adolescent substance abuse, in C. L. Jones and R. J. Battles (eds.) *Etiology of drug abuse: Implications for prevention*. Washington, D.C.: National Institute on Drug Abuse, ADM85-1385.
- Health Education*. 1989. National Adolescent Student Health Survey: American School Health Association, Association for the Advancement of Health Education, Society for Public Health Education. *Health Education* August/September: 4-8.
- National School Boards Association. 1987. *No Smoking: A board member's guide to nonsmoking policies for the schools*. Alexandria, VA: National School Boards Association.
- Perry, C. L. and Jessor, R. 1983. Doing the cube: Preventing drug abuse through adolescent health promotion, in T. J. Glynn, C. G. Leukefeld and J. P. Ludford (eds.) *Preventing*

adolescent drug abuse: Intervention strategies NIDA Research 47, Monograph Series. Washington, D.C.: United States Department of Health and Human Services, Public Health Service (DHHS publication #(ADM)83-1280, 51-75.

Texas Education Agency. 1989. *Education for self-responsibility II: Prevention of drug use.* Austin, TX: Texas Education Agency.

U.S. Department of Education. 1986. *What works: Schools without drugs.* Washington, D.C.: U.S. Government Printing Office.

U.S. Department of Education. 1988. *Drug prevention curricula: A guide to selection and implementation.* Washington, D.C.: U.S. Government Printing Office.

U.S. Department of Health and Human Services. 1988. *Illicit drug use, smoking, and drinking by America's high school students, college students, and young adults.* Washington, D.C.: U.S. Government Printing Office.

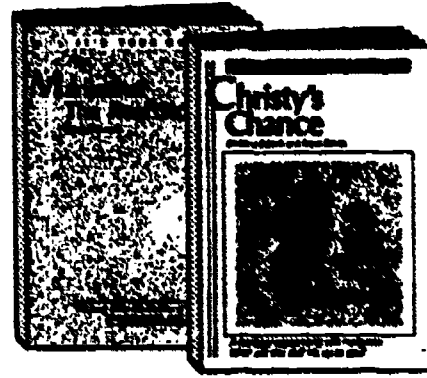
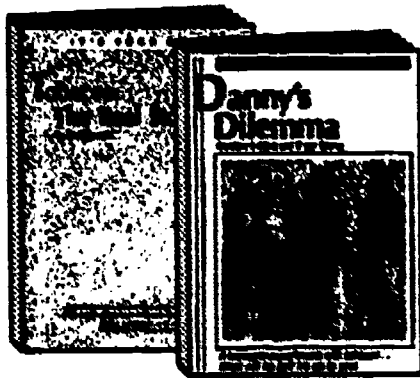
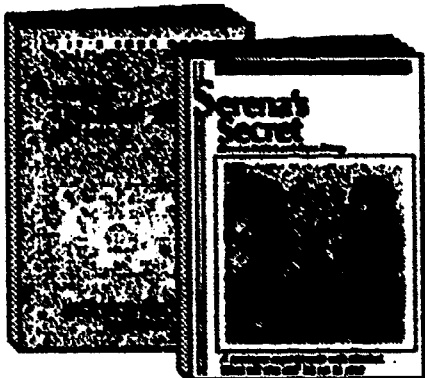
U.S. Department of Health and Human Services. 1989. *Promoting health/preventing disease: Year 2000 objectives for the nation (draft).* Washington, D.C.: U.S. Government Printing Office.

Western Center for Drug-Free Schools and Communities. 1988. *Planning for drug-free schools and communities.* Portland: Northwest Regional Educational Laboratory.

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About the Authors

Dale W. Evans, HSD, CHES, has been an educator for over 25 years. His teaching experience ranges from the elementary school setting through the preparation of health professionals in doctoral studies. He is currently a professor in the Health Science Department at California State University, Long Beach. Dr. Evans has published widely and has made over one hundred national and international presentations on effective classroom strategies in health and drug education.

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ABOUT THE BOOK: *Into Adolescence: Avoiding Drugs* arms middle school students with up-to-the-minute facts on drugs, and engages them in activities that encourage healthy, drug-free choices. Particular consideration is given to tobacco, alcohol and marijuana—including the health hazards and societal impacts of their use. This 11-lesson curriculum unit develops students' understanding of the dangers of drug use and encourages the development of decision-making and refusal skills through roleplaying, cooperative learning groups, oral presentations and research assignments. Students are challenged to identify personal and social factors that influence drug use and non-use. Guidelines are provided for educators to enhance the classroom comfort level when teaching about the prevention of alcohol and other drug use.

Into Adolescence: Avoiding Drugs

- ◆ describes the mental and physical effects of drugs commonly used in early adolescence
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To the Teacher

Introduction

Health educators know that a well-designed curriculum, tailored to meet students' developmental needs and desires, greatly increases the likelihood of positive classroom experiences. And when these experiences are provided early in life and often, students can begin to build a comfortable sense of self and a sense of personal responsibility for their own health behaviors.

The **Contemporary Health Series** was created to help teachers provide the most sensitive, individually responsive skills and cognitive training possible in a comprehensive health environment. Health topics are addressed in a collection of modules, allowing the teacher to choose one module for in-depth study or mix-and-match according to broader health program needs. Activities challenge students to acquire and use knowledge, encourage the development of personal integrity and build decision-making skills. All lessons are structured to promote teacher-student communication and focus on personal growth as well as academic learning.

Contemporary health teachers need resources that affirm the learning partnership that exists between student and teacher. We believe this series promotes both a partnership and a bridge to encourage healthful decisions by young people.

About the Workbook

This workbook has been designed for students participating in the curriculum *Into Adolescence: Avoiding Drugs*. All student pages and most transparency masters from the curriculum are included. Teacher Background Information and answer keys have not been provided in the workbook.

Specific pages from *Into Adolescence: Avoiding Drugs* that are not found in this workbook are:

- **Tobacco Demonstration** in Lesson 4.
- **Drugs on Back** in Lesson 11.
- **Secret Voting Questions** in Lesson 11. (These items deal with attitudes, and teachers may wish to modify items based on their knowledge of their students.)

Drug Questionnaire

Directions: Agree (A) or Disagree (D) with each of the following statements.

- A** **D** 1. A drug is a substance that affects the mind or body.
- A** **D** 2. Drugs are bad.
- A** **D** 3. Aspirin and acetaminophen are safe drugs.
- A** **D** 4. Caffeine is a drug.
- A** **D** 5. Alcohol and tobacco are drugs.
- A** **D** 6. Almost everyone in the world is a drug user.
- A** **D** 7. Most harmful drugs are made in countries other than the United States.
- A** **D** 8. It is safe to combine drugs.
- A** **D** 9. Middle school is the time when kids usually decide to try drugs.
- A** **D** 10. Drugs seem to be easier to get today than in the past.
- A** **D** 11. Middle school students ignore what parents say and use drugs to imitate their friends.
- A** **D** 12. Most middle school students use drugs.
- A** **D** 13. Some drug users can become infected with HIV, the virus that causes AIDS.
- A** **D** 14. The best way to handle the drug problem is to put everyone who uses drugs in jail.
- A** **D** 15. By the year 2000, fewer students will be using drugs.

Impact of Drugs

Directions: Discuss the different drugs on this worksheet in your group. Come to a group agreement on the two drugs on this list that cause the greatest number of deaths in our country.

Alcohol

Heroin

Amphetamines

Marijuana

Barbiturates

Tobacco

Cocaine

Tranquilizers

#

1

#

2

Why Do Kids Put Beans in Their Ears?

1. To see if they will grow.

2.

3.

4.

5.

6.

7.

8.

9.

10.

11.

12.

13.

14.

15.

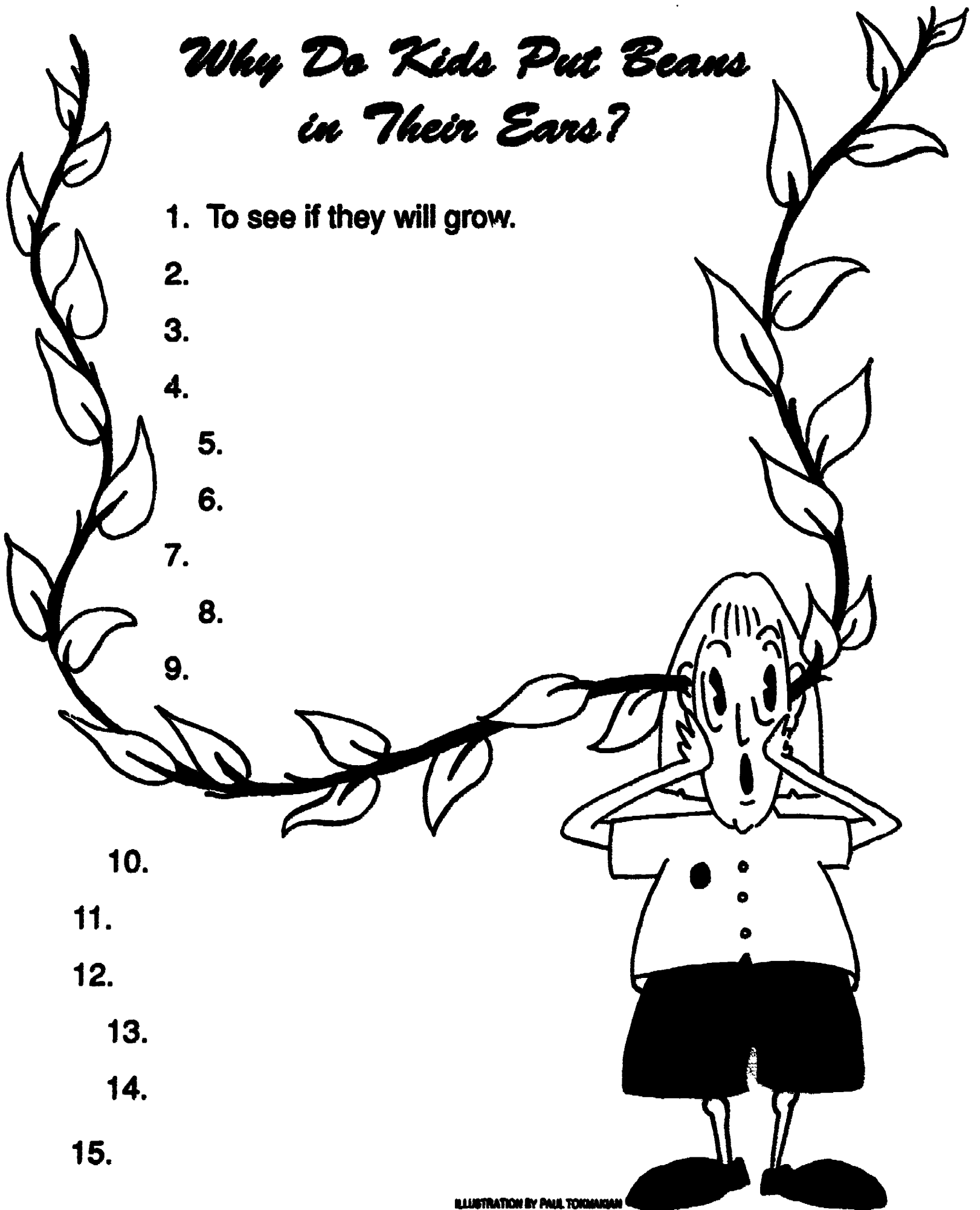


ILLUSTRATION BY PAUL TOMMASEN

Why Kids Use Drugs

- ◆ **Curiosity**
- ◆ **Feel accepted by friends**
- ◆ **Don't know how to say no**
- ◆ **Escape pressures**
- ◆ **Feel important**
- ◆ **Get high**
- ◆ **Relax**
- ◆ **Relieve depression**
- ◆ **Take a risk**

Drug Advertisements

Directions: Using newspapers and magazines, find one advertisement for each of these products. Identify the advertising message.

Product	Brand Name	Advertising message
Example: Acetaminophen	Tylenol	<i>Safer than aspirin</i>
Acne Medication		
Beer		
Cigarettes		
Cold Medication		
Smokeless Tobacco		
Vitamins		
Whiskey		
Wine Cooler		

Advertising Techniques

- Bandwagon** — Everyone is doing it. You may be the only person not using the product!
- Comparison** — Our product is better, faster, or safer than...
- Having Fun** — You'll have more fun if you use this product.
- Rewards** — Coupons, sale, 2-for-1.
- Scientific** — Research has found...; advertisement uses graphs or statistics.
- Sex Appeal** — You will be more appealing and attractive to others if you use....
- Symbols** — A symbol attached to a product may trigger emotions to buy.
- Testimony** — A person, often famous, implies that since he or she uses the product, it must be good.

It Sells!

Product identification is very important. Advertisers hope that slogans and themes will make you think of their brand name. For each of the slogans listed, name the product that the maker hopes you or your parents will buy. Ask your parents to help you. Can you identify any other famous advertising slogans?

Slogan

Brand Name

Tastes Great! Less Filling!

The Real Thing

How Do You Spell Relief?

The King of Beers

Mountain Grown

_____ Generation

You've Come A Long Way, Baby!

Spuds Mackenzie

Overnight Relief

The Pain Reliever Doctors Would
Select if Stranded on an Island

Tobacco Quiz

Directions: Circle the letter that represents your answer, True or False.

- T F 1. The main drug in tobacco is nicotine.**
- T F 2. Smoking is the main cause of lung cancer.**
- T F 3. Smoking is a main factor in coronary heart disease.**
- T F 4. Pregnant women who smoke will often have a smaller baby.**
- T F 5. Sidestream smoke is dangerous to children.**
- T F 6. Smokeless tobacco is safer than cigarettes.**
- T F 7. Only about one-fourth of all adults smoke cigarettes.**
- T F 8. Most teenagers smoke cigarettes.**
- T F 9. More teenage girls than teenage boys smoke.**
- T F 10. Half of all teens who have ever smoked had their first cigarette by eighth grade.**
- T F 11. Quitting smoking is almost impossible.**
- T F 12. Most advertisements for tobacco products are not directed at teens.**
- T F 13. Cigarette smoking is responsible for more than one of every six deaths in the United States.**
- T F 14. Today there are many places where smoking is not allowed.**

~~FAST~~ ~~FACTS~~

Health Risks of Tobacco Smoke

Substances Found in Tobacco Smoke

Nicotine	Addicting poison Stimulates heart; raises blood pressure
Tar	Particulate matter Irritates respiratory system Carcinogen
Gases	Carbon monoxide Others: formaldehyde, ammonia, hydrogen cyanide

Related Disease

Cancer	Lung, larynx, pharynx, esophagus, oral cavity, kidney, pancreas, bladder
Cardiovascular disease	Heart attack, stroke, high blood pressure
Respiratory disease	Chronic bronchitis, emphysema

Effect on Unborn

**Smaller babies
Premature babies
Prenatal deaths**

Sidestream Smoke (Secondhand Smoke)

Increased respiratory illness in people living with or around a smoker

~~F~~AST ~~F~~ACTS

Smokeless Tobacco

Substances Found In Smokeless Tobacco

Nicotine **Addicting poison**
Stimulates heart; raises blood pressure

Carcinogens **Cancer-causing chemicals**

Oral Disease

Leukoplakia **White, wrinkled thickening between lip and gum**

Mouth cancer **Abnormal growth, ulceration of lips and tongue**

Gum disease **Recession and lowering of gum line, tooth staining, decay, abrasion, wear**

Tobacco Warnings

Warnings on Cigarette Packages

1966 - 1970

**Caution: Cigarette Smoking May Be
Hazardous to Your Health**

1970 - 1983

**Warning: The Surgeon General Has Determined That
Cigarette Smoking Is Dangerous to Your Health**

1983 - Present

**Surgeon General's Warning: Smoking Causes Lung
Cancer, Heart Disease and Emphysema**

**Surgeon General's Warning: Quitting Smoking Now
Greatly Reduces Serious Health Risks**

**Surgeon General's Warning: Smoking by Pregnant
Women May Result in Fetal Injury and Premature Birth**

**Surgeon General's Warning: Cigarette Smoke
Contains Carbon Monoxide**

Warnings on Smokeless Tobacco Packages

1986 - Present

This Product Is Not a Safe Alternative to Cigarettes

This Product May Cause Gum Disease and Tooth Loss

This Product May Cause Mouth Cancer

Tobacco Survey

Directions: Survey three to five tobacco users and complete this chart.

Person/Gender/Age (M/F)	Type Used	Years Used	Experience Quitting	Advice for Teens
A				
B				
C				
D				
E				

Alcohol Myths and Misconceptions

Directions: Following is a list of statements about alcohol that may be true or may be myths or misconceptions. Your answers can range from *Agree* (A) to *Not Sure* (?) to *Disagree* (D). Circle your answers.

- A ? D 1. Alcohol is a drug.
- A ? D 2. As a food, alcohol provides mostly calories.
- A ? D 3. The body treats alcohol like most foods.
- A ? D 4. Each person's body reacts the same way to the same amount of alcohol.
- A ? D 5. Too much alcohol can result in death.
- A ? D 6. A can of beer (12 ounces) has more alcohol than a glass of wine (4 ounces).
- A ? D 7. Most adults drink each week.
- A ? D 8. People drive better after a few drinks.
- A ? D 9. Being drunk and alcoholism are the same.
- A ? D 10. Adults and young people with drinking problems can be helped.

~~F~~AST ~~F~~ACTS

Alcohol

? *What is alcohol made from?*

It is made from fruits and grains.

? *How is it made?*

Fermentation—Chemical process in which yeast cells act on sugar in the fruit or grain and convert sugar to carbon dioxide and alcohol.

Distillation—Fermented mixtures are heated and vapors collected and condensed into a liquid.

? *What problems can occur from alcohol consumption?*

Drinking and driving is very dangerous. Alcohol use is related to half of all motor vehicle deaths.

Alcoholism is a chronic disease in which a person is dependent on the continued use of alcohol. It may involve one of ten drinkers.

Alcohol is a contributing factor in a number of illnesses, for example, liver disease.

Family relationships often are affected by the use of alcohol.

? How does alcohol act in the body?

It is quickly absorbed.

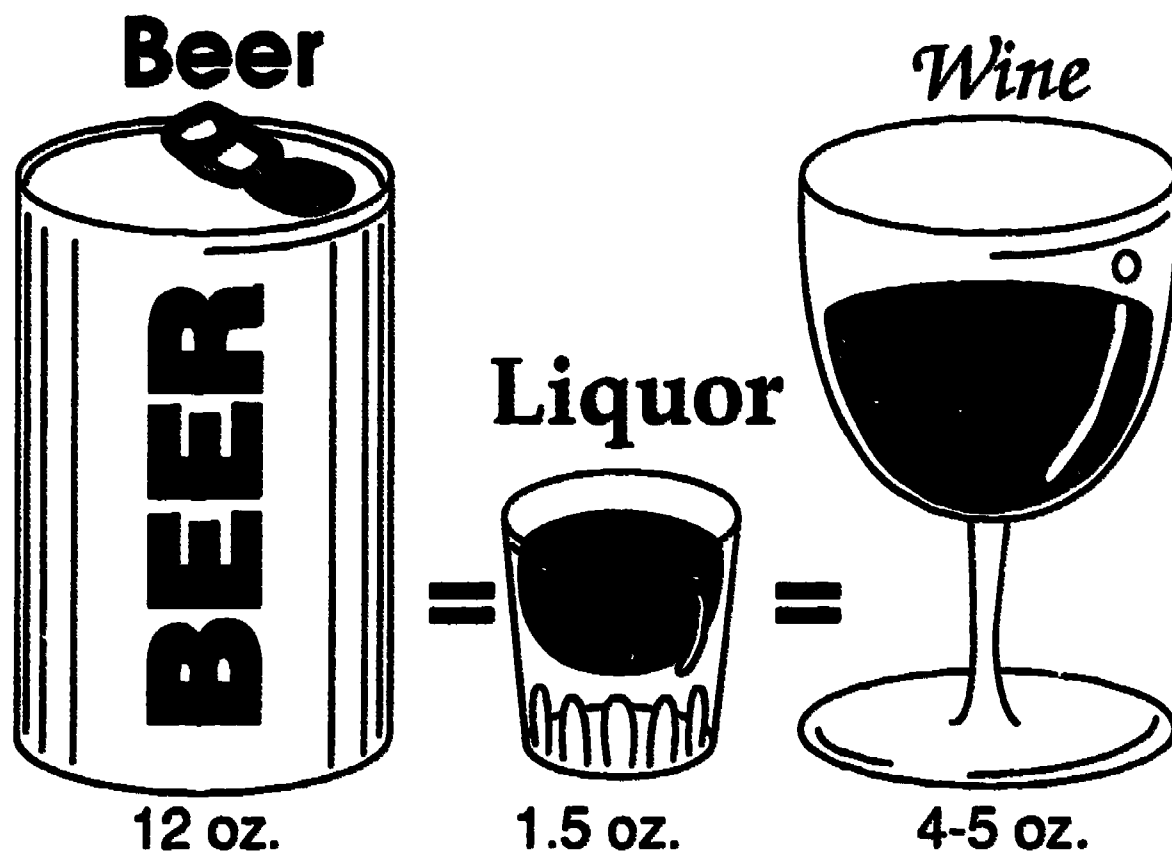
It is oxidized (processed) by the liver at a constant rate.

It is a depressant that acts on the function of the brain. First it slows thinking and inhibitions, then coordination, then involuntary body functions, such as breathing.

? What are other important facts?

Proof—A measure of the alcohol content of distilled beverages. It is twice the percentage of alcohol by volume. (A bottle of 86-proof whiskey is actually 43 percent alcohol.)

Equivalence—A typical serving of alcohol—12 ounces of beer or 4-5 ounces of wine or a 1.5 ounce shot of whiskey.



My Values About Alcohol

1. One good thing about alcohol is:

2. One bad thing about alcohol is:

3. In my home, alcohol is:

4. When I become an adult, I intend:

_____ not to drink alcohol

_____ to drink alcohol

because:

5. If I had a friend my age who was drinking alcohol after school, I would:

6. If I had a parent who had a drinking problem, I could:

a.

b.

c.

The best choice would be:

~~F~~AST ~~F~~ACTS

Marijuana

Names marijuana, hashish

Street Names pot, grass, weed, joint, reefer, hash

Methods of Use most often smoked; can also be swallowed

Active Ingredient THC (tetrahydrocannabinol)

Short-Term Actions increased heart rate
reddening of eyes
motor coordination impaired
tracking (following a moving stimulus)
diminished
changes in perceptions
short-term memory impaired
loss of interest and motivation
euphoria, mellow relaxation
increased appetite

Long-Term Hazards damage to lungs
psychological dependence
interferes with motivation
possible damage to heart, immune system
and reproductive system

Medical Uses reduces pressure within the eye caused by
glaucoma
reduces nausea in cancer patients being treated
with chemotherapy

THE BIG TEN FACTS ABOUT MARIJUANA

- 1. Marijuana can result in psychological (mental) dependence.**
- 2. Marijuana contains more than 400 chemicals, many of which are harmful.**
- 3. Marijuana smoke inflames the lungs; users who inhale deeply increase the potential for harm to the respiratory system.**
- 4. Marijuana today probably has a greater concentration of THC than in the past.**
- 5. THC can remain in the body for up to a month.**
- 6. Marijuana affects coordination and slows down thinking.**
- 7. Marijuana affects memory and comprehension.**
- 8. Marijuana users often lose interest in school and other activities.**
- 9. Marijuana use by teens may be especially dangerous because teenagers' bodies are growing and developing.**
- 10. Some experts believe that marijuana may be a gateway drug leading to other drug experimentation.**

Much To-Do About Marijuana

Directions: Agree (A) or Disagree (D) with each of the first five statements. Then write a response to the next two statements.

- A D 1. Marijuana is a safe drug.
- A D 2. Marijuana is a harmful drug.
- A D 3. Marijuana use is common among middle school students.
- A D 4. Most teens smoke marijuana.
- A D 5. The publicity about marijuana is bigger than the problem itself.

6. Marijuana can be harmful in the following situations:

7. The three best reasons not to use marijuana are:

a.

b.

c.

Aches, Pains and the Common Cold

Directions: Use the following words to complete the sentences below. Note that some words may be used more than once.

<i>safe</i>	<i>aspirin</i>	<i>weather</i>	<i>rain</i>	<i>nose</i>
<i>humidifier</i>	<i>300</i>	<i>viruses</i>	<i>14</i>	<i>caffeine</i>
<i>Reye's syndrome</i>	<i>cold</i>	<i>analgesic</i>	<i>acetaminophen</i>	<i>25</i>
<i>ibuprofen</i>	<i>hands</i>	<i>fever</i>	<i>aches & pains</i>	<i>treatment</i>
<i>anti-inflammatory</i>	<i>adult</i>	<i>alcohol</i>	<i>heat</i>	<i>two</i>
<i>antipyretic</i>	<i>emotions</i>	<i>vitamins</i>		

About half of all Americans will develop a _____ each year. Although some people think colds are caused by _____ or _____, colds are caused by _____. Colds are most frequently transmitted by the _____. When the climate is dry or during the winter heating season, many health care professionals suggest the use of a _____ to help keep the upper respiratory passages moist.

There are over _____ OTC products for treating the cold. Even without _____, most colds will go away. It has been said that if you treat a cold with an OTC product, the cold will go away within _____ days, and if you do nothing, it will probably go away in _____ weeks.

Two common signs of a cold are _____ and _____. OTC drugs with _____ action can help to reduce a temperature, and OTC _____ drugs can help to reduce minor aches and pains. Some OTC products contain substances such as _____ or _____, which are ineffective in treating the common cold.

An analgesic helps to reduce _____. The three most common OTC analgesic products are _____, _____ and _____. These three products also have an antipyretic action, that is, reduction of _____. One additional action found in two of these products is _____. This action is not present in _____. Because of a concern about _____, it is recommended that children not use _____.

None of these drugs can be considered completely _____! These products should be used only under _____ supervision!

The OTC Label

Directions: Following is a list of information that must be found on every OTC label. Analyze the label that you or your teacher has brought to class. Record the information in the second column.

1. Name or statement of identity
(What is it?)
2. Listing of active ingredients
(What chemicals make it work?)
3. Net quantity of active ingredients
(How much of each chemical does it contain?)
4. Name and address of manufacturer,
packer or distributor
(Who makes it? Where?)
5. Indications for use
(What is it used for?)
6. Directions and dosage indications
(How is it used?)
7. Cautions/warnings
(What might you need to worry about?)
8. Side effects
(What other things might happen?)
9. Drug interaction precautions
(What might happen if this drug is taken
with other drugs?)
10. Expiration date
(When do you throw it away?)

OTC ANALGESICS

	Aspirin	Ibuprofen	Acetaminophen
Brand Name	Bayer St. Joseph's	Advil Nuprin	Panadol Tylenol
Analgesic	Reduce pain	Reduce pain	Reduce pain
Antipyretic	Reduce fever	Reduce fever	Reduce fever
Anti-inflammatory	Reduce inflammation	Reduce inflammation	None
Cautions	Nausea, stomach irritation, allergic reactions, Reye's syndrome	Similar to aspirin, rash, sensitivity to sunlight	Nausea, stomach irritation, liver and kidney damage
Advantages	Treat arthritis; prevent heart attacks	Fewer side effects than aspirin; effective for menstrual cramps	Fewer side effects than aspirin; effective for people with ulcers or allergies to aspirin

Other Drugs

Directions: Match the statements to the drugs listed. Then fill in the drug name on the puzzle below. The first one has been done for you.

Statements

1. Cough suppressant
2. Drug often prescribed to control seizures
3. Gasoline, paint thinner, some glues
4. Extracted from the coca plant
5. One of the most addicting drugs
6. An example would be morphine
7. Used by some unsuspecting athletes
8. May result in flashbacks
9. A narcotic with no medical use
10. Primary action is mind-altering
11. May be prescribed for depression

Drugs

- CODEINE
- NARCOTICS
- HALLUCINOGEN
- STEROIDS
- HEROIN
- BARBITURATE
- CRACK
- AMPHETAMINES
- INHALANTS
- COCAINE
- LSD

(1)		<u>C</u> <u>O</u> <u>D</u> <u>E</u> <u>I</u> <u>N</u> <u>E</u>
(2)		___ A _____
(3)	_____	___ N ___
		___ G
(4)	_____	___ E
(5)		___ R _____
(6)	_____	___ O _____
		___ U
(7)	_____	___ S
(8)		___ D
(9)		___ R _____
		___ U
(10)	_____	___ G _____
(11)	_____	___ S

~~F~~AST ~~F~~ACTS

Selected Drugs

Amphetamines

Names Dexedrine, methamphetamine
Action stimulation
Medical use improve mood, treat depression, suppress appetite, treat narcolepsy (episodes of sleep)
Hazards agitation, increased heart rate, insomnia, cardiac arrhythmia, high blood pressure, possible death

Barbiturates

Names Seconal, phenobarbital
Action depression
Medical use sedation, induce sleep, control seizures
Hazards lack of concentration, drowsiness, sleep, dependence, disorientation, possible death

Cocaine

Names cocaine hydrochloride, crack
Action stimulation
Medical use topical anesthetic on mucous membranes for eye surgery
Hazards excitability, increased heart rate, irritability, dependence, cardiac arrest, diseases associated with use of needles (HIV infection), possible death

Hallucinogens

Names LSD, PCP, mescaline, psilocybin
Action mind-altering
Medical use none today; have been used in the past with those having mental-emotional problems
Hazards hallucinations, increased heart rate, confusion, anxiety, paranoia, flashbacks

Inhalants

Names solvents, aerosols, glue, paint thinners
Action depression, mind-altering
Medical use none
Hazards slurred speech, lack of inhibitions, nausea, possible liver and brain damage, respiratory failure, possible death

Narcotics

Names opium, codeine, morphine, heroin, methadone
Action depression
Medical use cough suppression, painkiller, no medical use for heroin
Hazards euphoria, slowed heart, drowsiness, constipation, dependence, respiratory failure, diseases associated with use of needles (HIV infection), possible death

Steroids

Names anabolic steroids
Action similar to male hormone (testosterone)
Medical use stimulate growth, increase muscle mass
Hazards acne, rash, heart disease, liver disease, sterility

Tranquillizers

Names Valium, Librium, Xanax
Action depression
Medical use treat anxiety and tension
Hazards slowed function, drowsiness, hallucinations, dependence, coma, possible death

Check Your Facts

Directions: Match the drugs listed at the top of the page with the statements listed at the bottom of the page. Write the letters of the correct answers in the blanks before the statement. Note that there may be several answers for a statement and that the drugs may apply to more than one statement.

A. amphetamines

E. inhalants

B. barbiturates

F. narcotics

C. cocaine

G. steroids

D. hallucinogens

H. tranquilizers

- _____ 1. stimulate the body
- _____ 2. depress body functions
- _____ 3. "non-drug" drugs
- _____ 4. danger of HIV infection
- _____ 5. have actions similar to that of alcohol
- _____ 6. group that includes methadone
- _____ 7. extremely dangerous to use with alcohol
- _____ 8. may result in dependence
- _____ 9. no legal medical uses at this time
- _____ 10. potentially hazardous to your health

Influences on Your Decisions

Directions: Some of the people and groups that influence your decisions are listed below. What kinds of decisions are influenced by parents, friends and school? Make a mark in each column where your decisions are influenced by the group listed.

Influence	Decisions About...				
	Clothes	Movies	Food	Tobacco	Alcohol
<i>Parents</i>	✓	✓	✓	✓	✓
<i>Friends</i>					
<i>Religion</i>					
<i>Health Information</i>					
<i>Advertising</i>					
<i>Cost</i>					
<i>My Values</i>					

Decision-Making Considerations*

(1) Recognize the problem.

(2) Identify whose problem it is.

(3) List possible solutions and people who can help.

(4) Predict outcomes for each solution.

(5) Select best solution and try it out.

(6) Evaluate/revise the solution.

*** There is no right or wrong way to go about decision making. These are considerations that have been found useful by others when making wise decisions.**

Never a Dull Moment

Directions: Use the steps described in the **Decision-Making Considerations** to decide what to do in the situation your teacher assigns to your group.

Situation #1

Graduation Party

Middle school graduation is in a few weeks. The most popular kids, known as The Group, are planning a big party. Everyone has been talking about the party—it sounds great! Most of your friends have received an invitation. Crystal and Deron keep asking you if you got an invitation. You haven't. What should you do?

Situation #2

The Wedding Toast

Pilar and Jim are close family friends. At their wedding reception, Mr. Ramos, Pilar's grandfather, proposes a toast to the newlyweds. Everyone is given a glass of champagne. What would you do?

Situation #3

The Middle School Trip

The annual middle school trip to Washington, D.C., is scheduled for the spring. You have saved enough money for half the costs. Your mom has agreed to pay the rest. Your high school friends say that it is a tradition for all the kids to drink alcohol on the trip. You really don't want to drink. What should you do?

Situation #4

Your Sister Smokes What?

One evening when your parents are at school for parent-teacher conferences, you smell smoke coming from your older sister's room. You discover your sister Audrey is smoking marijuana. You are shocked, since you never suspected that Audrey used drugs. Audrey says that this is the first time she has tried it and she'll never try it again. She promises to stop and asks you not to tell your mom and dad. What would you do?

Situation #5

Good News-Bad News

The good news is that you are going to spend five days with your favorite friend who lives in another city. The bad news is that your friend's 16-year-old brother always seems to be showing off by smoking and drinking beer. The last time you spent the night, the brother kept insisting that you also drink some beer. You said no, but it was a little scary. What should you do?

You're Not Alone

Directions: Mark the column of the person or people you would go to for help in these situations. (You may mark more than one column for each situation.)

SITUATION	WHERE WOULD YOU GO FOR HELP?				
	Parent	Friend	Teacher	Counselor	Others
1. You saw a classmate cheat on a test.					
2. You feel pressured by your parents.					
3. You have a sore throat that won't go away.					
4. A friend talks to you about suicide.					
5. A friend thinks she is pregnant.					
6. You see some high school friends sniffing something.					
7. You see a friend take some money from another person's locker.					
8. You know a friend is using drugs.					

What Would You Do?

Directions: Read the story about Chris and think about his questions. Then help him find someone to talk to.

Until recently, Chris had never seen his dad drink too much alcohol. But, something has changed! Chris's dad started to drink more and more, even in the mornings. Last week when school was out early, Chris went home to find that his dad had not gone to work and that he was drunk. The house was a mess, and Chris's dad smelled terrible. His dad wanted to talk, but Chris felt very uncomfortable. Just before Chris's mom came home, Chris's dad got sick all over the kitchen.

- ◆ Can Chris help his dad?
- ◆ Should Chris talk to his mom about it?
- ◆ What should Chris do about his friend who wants to come over to play Chris's new video game? What if Chris's friend sees Chris's dad drinking?
- ◆ What should Chris do when his dad starts drinking?

REMEMBER: There are people in Chris's life who can help. Consider the people Chris might use as resources for some of these questions. Whom would you recommend Chris talk to? In the space below, identify two different people or groups you would recommend. Explain how each person could help.

Saying No!

Example

Identify the problem, tactfully delay.

- 1. *What will happen...?***
- 2. *What do you really want...?***

Identify the problem as trouble.

- 1. *Drinking, that's trouble, no!***
- 2. *Sneaking back into school, that's trouble, no!***

Look the person in the eye and say,

- 1. *"No."***
- 2. *"No, thanks."***

Identify consequences.

- 1. *We might get caught.***
- 2. *The teacher could....***
- 3. *My mom would ground me for ten years.***

Suggest alternatives.

- 1. *I'd rather have a cola.***
- 2. *Why don't we...?***
- 3. *Let's go to....***

Closure.

- 1. *Say, "That's not a good idea, but if you change your mind...."***
- 2. *Say, "I'm not interested, but if you decide not to...."***
- 3. *Walk away.***

Saying No!

Identify the problem, tactfully delay.

1. _____
2. _____

Identify the problem as trouble.

1. _____
2. _____

Look the person in the eye and say,

1. _____
2. _____

Identify consequences.

1. _____
2. _____
3. _____

Suggest alternatives.

1. _____
2. _____
3. _____

Closure.

1. _____
2. _____
3. _____

Practice Saying No

But I Need It to Pass!

Your best friend is in a health class that you took last semester. Your friend wants your class report. You worked hard on the report and you were the only person to get an A.

Friend: Have you taken the health class?

You: Yes, I had Mr. Zook last semester.

Friend: I'm taking it now. I've got a terrible grade so far.

You: Don't worry. You can do better on the last test. If you do a good report, you will get a pretty good grade.

Friend: Well, that's really the problem. The report is due in three days. I haven't started yet. I know that you can help me.

You: Sure.

Friend: How did you do on the class report?

You: Great, my only A on a report in eighth grade!

Friend: You're my best friend. I'd like to use your report.

You:

Movie Adventures

With permission from your mom and dad, you go to a movie with three friends. Your parents drop you and your friends off at the movie. Your friend's dad is going to pick up the group right after the movie. The movie will be over about 4:00 p.m. Your parents won't get home until 6:30 p.m. Toward the end of the movie, the friend whose dad is to pick up the group announces that his dad isn't going to pick you up until 6:00 p.m.

Friend: The movie is about over; my dad isn't going to be here for two hours.

You: My parents think I'll be home soon.

Friend: You told me that they won't be home until 6:30 p.m.

You: Yes, but they expect me to be at home.

Friend: Don't worry, they will never know.

You: My mom always finds out about everything!

Friend: Let's sneak into another theater and watch another movie. It will be our first R-rated movie!

You:

Roleplay Situations

Situation #1—*A Little Drink Never Hurt Anyone*

Your best friend, Shelly, has asked you to go to the beach with her and her older sister. Her sister Shawnda was your sitter when you were very young. Shawnda's boyfriend, Scot, will be driving. Normally your parents would not let you go to the beach without them. Although they are cautious, they approve this time, since they have known Shawnda for eight years. At the beach, Shelly pours beer into cups for each of you; after all, "A little beer never hurt anyone."

Situation #2—*Your Parents Say It Is Okay*

At a celebration party for your grandparents' fiftieth wedding anniversary, many adults are drinking alcoholic beverages. Some underage people also seem to be drinking. While sitting at a table with your 14-year-old cousin, Uncle Bill approaches. He has several glasses of wine, and he is giving a glass to each person he meets. He hands a glass of wine to both you and your cousin. His only comment is, "It's okay, I've already asked your moms—be happy!"

Situation #3—*Beware of Gifts*

You meet Lucinda and Julie at the mall. After shopping, the group decides to stop for a yogurt cone. After finishing the cone, Lucinda opens her purse and pulls out a package of cigarettes. She lights up and offers a cigarette to Julie, who also lights up. Lucinda reaches toward you with a cigarette in her hand. Without saying anything, she looks at you, waiting for you to take the cigarette.

Situation #4—*Here Comes the Joint*

You're at a party at Kirk's house on Saturday. His parents are home, but are basically staying away from the party. It's your first boy-girl party, and you are really nervous. During the party, Kirk's parents leave to pick up pizza. While they are gone, Tom lights up a marijuana joint. Tom passes the joint to Clay, who takes a drag and passes it on to Carol. It looks like everyone is smoking the joint. The joint is moving toward you. Five friends are standing between you and the joint!

Secret Voting

Directions: Do not put your name or any other identifying marks on this page. Circle the answer that best represents your opinion about each of the statements the teacher reads.

	Completely Agree	Usually Agree	Usually Disagree	Completely Disagree
1.	CA	UA	UD	CD
2.	CA	UA	UD	CD
3.	CA	UA	UD	CD
4.	CA	UA	UD	CD
5.	CA	UA	UD	CD
6.	CA	UA	UD	CD
7.	CA	UA	UD	CD
8.	CA	UA	UD	CD
9.	CA	UA	UD	CD
10.	CA	UA	UD	CD
11.	CA	UA	UD	CD
12.	CA	UA	UD	CD
13.	CA	UA	UD	CD
14.	CA	UA	UD	CD
15.	CA	UA	UD	CD
16.	CA	UA	UD	CD
17.	CA	UA	UD	CD
18.	CA	UA	UD	CD
19.	CA	UA	UD	CD
20.	CA	UA	UD	CD

Student Letter

Date _____

Dear _____:

Drug misuse and abuse in our country is a major problem. Some students make important decisions about drug use as early as middle school. We have just completed a unit on drugs in _____ class. The three most important things I learned were

- a.
- b.
- c.

Drug use can have a major negative impact on my future. Because of that, I pledge the following:

It is important that people who care talk to each other about the drug problem. I would like to talk to you. Please let me know when we can talk.

Sincerely,

(signature)

