



Health Rocks!®

4-H ■ HEALTHY LIFE SERIES



REVIEWED & RECOMMENDED
National 4-H Curriculum

INTERMEDIATE LEVEL

REVISED

ACKNOWLEDGEMENTS

2013 REVISION

UNIVERSITY OF NEBRASKA-LINCOLN

2008 CURRICULUM DEVELOPMENT TEAM UNIVERSITY OF NEBRASKA-LINCOLN EXTENSION

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SECTION 1: ALL ABOUT ME

CHAPTER 1: KEEPING HEALTHY

Activity 1A: Did You Know?

- Youth will learn actual numbers of peers (youth statistics) who are using drugs illegally, learn about the health and cosmetic effects of using drugs, and describe specific health risks associated with using.
- Life Skills: healthy life choices, analyzing information, teamwork
- National Health Education Standard: 1
- 30-45 minutes

Activity 1B: The Cycle of Addiction

- Youth will better understand about addictions and experience how addictions might feel.
- Life Skills: healthy life choices, analyzing information, self-responsibility
- National Health Education Standard: 1
- 30 minutes

Activity 1C: Is It Worth the Risk?

- Youth will learn about the health and cosmetic effects of using drugs, describe specific health risks associated with using tobacco, alcohol, or other drugs, and experience how smoking affects lung capacity.
- Life Skills: healthy life choices, consequences of actions, using scientific methods
- National Health Education Standard: 1
- 30-45 minutes

Activity 1D: What About the Other Risks?

- Youth will describe risks other than health associated with using tobacco, alcohol, or other drugs and describe benefits other than health associated with not using tobacco, alcohol, or other drugs.
- Life Skills: healthy life choices, decision making, personal safety
- National Health Education Standard: 1
- 30-45 minutes

SECTION 1: ALL ABOUT ME

CHAPTER 2: SELF-AWARENESS: ME AND MY STRESS

Activity 2A: I Can DO It!

- Youth will better understand self-efficacy and how it affects choices regarding healthy behaviors, understand the effect that self-efficacy has on attitudes and motivation, and gain and use skills that build and maintain self-efficacy.
- Life Skills: healthy life choices, self-responsibility, self-motivation
- National Health Education Standard: 1
- 30-45 minutes

Activity 2B: Be My Hero

- Youth will better understand self-efficacy and how it affects choices regarding healthy behaviors, and gain and use skills that build and maintain self-efficacy.
- Life Skills: healthy life choices, self-esteem, self-efficacy
- National Health Education Standard: 1
- 30-45 minutes

Activity 2C: All Stressed Out!

- Youth will identify sources of stress and learn ways to manage stress positively.
- Life Skills: healthy life choices, self-responsibility, stress management
- National Health Education Standard: 2
- 30-45 minutes

Activity 2D: Be a Stress Buster

- Youth will learn ways to manage stress positively and implement options for relieving stress.
- Life Skills: healthy life choices, self-responsibility, stress management
- National Health Education Standard: 2
- 30-45 minutes



SECTION 1: ALL ABOUT ME

CHAPTER 3: IT'S MY CHOICE!

Activity 3A: Who's Making the Decision?

- Youth will learn the decision-making steps and identify options when a decision needs to be made.
- Life Skills: decision making, problem solving
- National Health Education Standard: 5
- 30-45 minutes

Activity 3B: Making Informed Decisions

- Youth will learn the decision-making steps, identify options when a decision needs to be made, and use decision-making skills.
- Life Skills: decision making, problem solving, information gathering
- National Health Education Standard: 5
- 30-45 minutes

Activity 3C: Decisions, Decisions, Decisions

- Youth will identify options when a decision needs to be made, predict consequences of each option, choose the healthy option when making a decision, and use decision-making skills.
- Life Skills: decision making, problem solving
- National Health Education Standard: 5
- 30-45 minutes

Activity 3D: Will It Make A Difference?

- Youth will choose the healthy option when making a decision and use decision-making skills.
- Life Skills: decision making, problem solving, goal setting
- National Health Education Standard: 5
- 30-45 minutes

SECTION 2: WHAT INFLUENCES ME

CHAPTER 4: WHO SAYS IT'S NORMAL?

Activity 4A: Which Way Do I Go?

- Youth will understand the way family, peers, and culture influence their decisions.
- Life Skills: self-responsibility, healthy life choices
- National Health Education Standard: 2
- 30-45 minutes

Activity 4B: Circles of Influence

- Youth will understand the way family, peers, and culture influence their decisions.
- Life Skills: self-responsibility, healthy life choices
- National Health Education Standard: 2
- 30-45 minutes

Activity 4C: What Do I Believe?

- Youth will understand how values and beliefs influence choices.
- Life Skills: self-responsibility, healthy life choices, character
- National Health Education Standard: 2
- 25-30 minutes



SECTION 2: WHAT INFLUENCES ME

CHAPTER 5: LEARNING THE SKILLS

Activity 5A: That's How I Feel

- Youth will increase awareness of why people use tobacco, alcohol, and other drugs; identify and describe how family and peers influence choices; and identify how emotions affect decision making.
- Life Skills: decision making, managing feelings, resistance
- National Health Education Standard: 5
- 30-45 minutes

Activity 5B: Learning to Say "NO!"

- Youth will demonstrate verbal and non-verbal refusal skills to avoid tobacco, alcohol, and other drugs.
- Life Skills: communication, resistance, self-discipline
- National Health Education Standard: 4
- 30-45 minutes

Activity 5C: Let's Do It Again!

- Youth will demonstrate verbal and non-verbal refusal skills to avoid tobacco, alcohol, and other drugs.
- Life Skills: communication, resistance, self-discipline
- National Health Education Standard: 4
- 30-45 minutes

SECTION 2: WHAT INFLUENCES ME

CHAPTER 6: MEDIA & TECHNOLOGY MESSAGES

Activity 6A: Who's In Control?

- Youth will identify and share ways that media influences healthy behaviors and how media and technology influence thoughts, feelings, and healthy choices.
- Life Skills: critical thinking, managing feelings, resistance
- National Health Education Standard: 2
- 45-60 minutes

Activity 6B: Don't Be Influenced

- Youth will identify and share ways that media influences healthy behaviors and how media and technology influence thoughts, feelings, and healthy choices.
- Life Skills: critical thinking, managing feelings, resistance
- National Health Education Standard: 2
- 25-30 minutes

Activity 6C: It's More Than Just the Advertising

- Youth will identify and share ways that media influences healthy behaviors and how media and technology influence thoughts, feelings, and healthy choices.
- Life Skills: critical thinking, managing feelings, resistance
- National Health Education Standard: 2
- 45-60 minutes

Activity 6D: You Be the Advertiser

- Youth will demonstrate and practice skills leading to media literacy.
- Life Skills: communication, planning/organizing, teamwork
- National Health Education Standard: 2
- 45-60 minutes

**SECTION 3: TAKING IT BEYOND ME**

**CHAPTER 7:
STEPPING UP TO HELP****Activity 7A: Watch for the Signs**

- Youth will recognize the signs and symptoms of tobacco, alcohol, or other drug use.
- Life Skills: concern for others, communication
- National Health Education Standard: 4
- 45-60 minutes

Activity 7B: What Do I Do?

- Youth will practice skills necessary to help someone who might be using tobacco, alcohol, or other drugs.
- Life Skills: concern for others, communication
- National Health Education Standard: 4
- 45-60 minutes

SECTION 3: TAKING IT BEYOND ME

**CHAPTER 8:
COMMUNICATING
HEALTHY MESSAGES****Activity 8A: Sharing What I Know**

- Youth will promote healthy choices related to tobacco, alcohol, and other drugs; encourage others to adopt healthy behaviors related to tobacco, alcohol, and other drugs; and demonstrate how to influence others with a positive message about tobacco, alcohol, and other drugs.
- Life Skills: community service/volunteering, responsible citizenship, planning/organizing
- National Health Education Standard: 8
- 45-60 minutes



CITATIONS FOR INTRODUCTION

- ¹ Centers for Disease Control. (2012). Youth risk behavior surveillance—United States, 2011. *Morbidity and Mortality Weekly Report*, 61(SS-4).
- ² Junge, S. (2005). *Teens as volunteer leaders: Recruiting and training teens to work with younger youth in after-school programs*. Chevy Chase, MD: National 4-H Council.
- ³ Junge, S. (2005). *Teens as volunteer leaders – Recruiting and training teens to work with younger youth in after-school programs*. Chevy Chase, MD: National 4-H Council.
- ⁴ Junge, S. (2005). *Teens as volunteer leaders: Recruiting and training teens to work with younger youth in after-school programs*. Chevy Chase, MD: National 4-H Council.
- ⁵ Pfeiffer, J.W., & Jones, J.E. (1983). *Reference guide to handbooks and annuals*. ©1983 John Wiley & Sons, Inc. Reprinted with permission of John Wiley & Sons, Inc.
- ⁶ Kress, C.A. & National 4-H Impact Design Implementation Team. (2004). *The essential elements of 4-H youth development*. National 4-H Headquarters, CSREES, USDA.
- ⁷ Joint Committee on National Health Education Standards. (2007). *National health education standard (2nd ed.)*.
- ⁸ Hawkins, J.D., Catalano, R.F., & Arthur, M. (2002). Promoting science-based prevention in communities. *Addictive Behaviors*, 27(6), 951-76.

SECTION

1



SECTION 1: **ALL ABOUT ME**

1

**CHAPTER 1:
KEEPING HEALTHY**

2

**CHAPTER 2:
SELF-AWARENESS: ME AND MY STRESS**

3

**CHAPTER 3:
IT'S MY CHOICE**



SECTION 1: ALL ABOUT ME



CHAPTER



CHAPTER 1: KEEPING HEALTHY

OVERVIEW: TOBACCO, ALCOHOL AND DRUG USE STATISTICS

ACTIVITY 1A: DID YOU KNOW?

30-45 minutes - Youth will learn actual numbers of peers (youth statistics) who are using drugs illegally, learn about the health and cosmetic effects of using drugs and describe specific health risks associated with using.

ACTIVITY 1B: THE CYCLE OF ADDICTION

30 minutes - Youth will better understand about addictions and experience how addictions might feel.

ACTIVITY 1C: IS IT WORTH THE RISK?

30-45 minutes - Youth will learn about the health and cosmetic effects of using drugs, describe specific health risks associated with using tobacco, alcohol, or other drugs, and experience how smoking affects lung capacity.

ACTIVITY 1D: WHAT ABOUT THE OTHER RISKS?

30-45 minutes - Youth will describe risks other than health associated with using tobacco, alcohol, or other drugs and describe benefits other than health associated with not using tobacco, alcohol, or other drugs.

SECTION

1

CHAPTER

1

OVERVIEW: TOBACCO, ALCOHOL, AND OTHER DRUG USE

Recent statistics confirm what parents, teachers, and other concerned adults suspect. Although the percentage of youth who use tobacco, alcohol, and other drugs continues to decline, youth continue to use these substances in significant numbers. In fact, 14 percent of 8th graders in the last 12 months prior to the survey reported having used some form of tobacco, alcohol, or other drug during her or his lifetime.⁹ Knowing this, the importance of helping youth make more responsible decisions about healthy life choices seems even more critical.

DRUGS - Reference to other drugs includes those drugs not permitted by law (illegal) and lawful drugs (prescription or over-the-counter) which are obtained or used illegally unless otherwise specified.

The following information is designed to provide the facts needed to successfully carry out the activities in this section. Having a basic understanding of the circumstances currently surrounding youth tobacco, alcohol, and other drug use is instrumental in portraying the true importance of the message to youth going through this program.

KEY HEALTH MESSAGE:

Alcohol is typically the substance of choice among youth. The average age when youth consume their first drink is 13.1 years.

DRUGS DECLINING IN USE

It is positive to know that tobacco, alcohol and other drug use has decreased among youth. But even though the total number of youth using tobacco, alcohol, and other drugs has decreased, there is still a great deal of work to do if we want to continue the downward trend. According to the 2011 *Monitoring the Future* (MTF) survey, about 20 percent of 8th graders report having ever taken or used any tobacco, alcohol, or other drug. This number is down since the peak in the mid-1990s.¹⁰ The drugs declining in use include marijuana, stimulants including amphetamines, Ritalin, methamphetamine, and crystal methamphetamine.

The use of alcohol by youth has also declined. Alcoholic beverages have typically been the substance of choice among youth. The average age when youth consume their first drink is 13.1 years. By the 8th grade, 33 percent have used alcohol at least once in their lifetime. Almost 15 percent of 8th graders report having been drunk at least once in their life. About 4.5 percent report having been drunk at least once in the prior month.¹¹

Many youth, teens, parents, and communities believe underage drinking is an inevitable ‘rite of passage’ from which adolescents can easily recover, because their bodies are more resilient. However, the opposite is true. The brain goes through dynamic change during adolescence, and alcohol can seriously damage long-term and short-term growth processes. Damage from alcohol at this time can be long term and irreversible. In addition, occasional or moderate drinking impairs learning and memory.¹²

Several drugs have shown signs of decreased use. This decrease has occurred in the use of inhalants, cocaine powder, crack cocaine, and over-the-counter cough and cold medicines.¹³

DRUGS SHOWING NO CHANGE

Several drugs showed no change in use. These substances include LSD, heroin, salvia, Oxycontin, amphetamines and some of the “club drugs” such as ecstasy, ketamine, Rohypnol, and GHB. Anabolic steroid use also held steady.¹⁴ While this is better than these substances increasing in use, their use should continue to be addressed.

DRUGS CREATING AREAS FOR CONCERN

Marijuana has been labeled as the most widely used illegal drug among youth. Marijuana use by youth gradually increased during the 60’s and early 70’s. For the past five years the perceived risk of using marijuana has decreased. The *2011 Monitoring the Future* survey shows that daily use has increased significantly. Daily use is 1.3 percent, 3.6 percent and 6.6 percent for grades 8, 10, and 12.¹⁵ What makes it more dangerous than during earlier decades is that the strength of marijuana today is as much as 10 times stronger than that used in the early 1970’s.¹⁶ Among Americans aged 12 and over, 11.5 percent have abused marijuana within the past year (2010) which is a significant increase over rates reported each year from 2002-2008. This trend is still increasing.¹⁷

Other drugs that fall into the area for concern are those that are either new drugs or older drugs that are making a comeback because they have been rediscovered by youth. This rediscovery is a result of what is called “generational forgetting.” Generational forgetting occurs as the knowledge of the adverse effects of a drug has faded. When this occurs, the drugs make a comeback.¹⁸

KEY HEALTH MESSAGE:

Marijuana is the most widely used illegal drug among youth.

KEY HEALTH MESSAGE:

Inhalants are the first most common substances used illegally by 8th graders.

KEY HEALTH MESSAGE:

Perceived risk by youth is often a leading indicator of changes in actual use. If youth are indicating less of a perceived risk, then there could be an increase in use.

KEY HEALTH MESSAGE:

Each day in the United States, about 3,900 young people between the ages of 12 and 17 start smoking.

Drugs that are currently showing some effects of generational forgetting include LSD, inhalants, and ecstasy. Also of concern are the newly emerging drugs that are frequently introduced. In the 2000's, dextromethorphan, salvia, and synthetic marijuana emerged. Most recently, "bath salts" hit the drug scene.¹⁹

The survey also highlighted some additional areas for concern. The perceived risk for using Ecstasy (MDMA) once, twice, or even occasionally continues to drop. The same was true for disapproval of using Ecstasy. In addition, 8th graders who perceived risk of harm from using LSD, or even disapproval of using it dropped also. Perceived risk by youth is often a leading indicator of changes in actual use. If youth are indicating less of a perceived risk, then there could be an increase in use. This is where education needs to take place.²⁰

Over-the-counter (OTC) medications being used inappropriately include cold and cough medicines that contain dextromethorphan (DXM), which is a cough suppressant, plus diet pills, sleep aids, and motion sickness medication. One in every twenty-five 8th graders are using these medicines to get high.²¹ Youth do not understand that when these medicines are taken for non-medical purposes, it can be very dangerous.

TOBACCO USE

Each day in the United States, about 3,900 young people between the ages of 12 and 17 start smoking.²³

Following a decade of significant improvement, daily smoking among early and middle teens has stopped declining, according to the 2011 MTF survey. No significant increase has been seen and the perceived risk is the highest it has ever been. The survey also found close to half of American youth have tried cigarettes by their senior year in high school. Current estimates are that 3 percent of middle school youth smoke daily.²³

Like cigarettes, smokeless tobacco use peaked in the mid-1990's, but started declining after that. This form of tobacco has gone from being a product used mostly by older men to one used predominantly by young men and boys. A 2002 study found that "snuff use may be a gateway form of nicotine dosing among males in the United States that may lead to subsequent cigarette smoking."²⁴ The 2011 MTF survey reports that almost 10 percent of 8th graders have tried smokeless tobacco at least in their lifetime, with 3.5 percent using it at least once in the 30 days prior to the survey.²⁵

Snuff and chew are the two traditional forms of smokeless tobacco. Snuff, usually sold in tins, is finely ground tobacco. It comes either loose or in packets and is held in the mouth between the lip or cheek and the gums.

Chew is sold in pouches and is a leafy form of tobacco. It can be chewed or held in the mouth. The nicotine from the tobacco is absorbed into the mucus membranes of the mouth. New variations of smokeless tobacco are dissolvable tobacco products. “Snus” (rhymes with goose) along with other dissolvable tobacco products appear to be gaining in popularity.²⁶

According to the 2011 MTF survey, the 2011 levels of perceived risk are the highest ever observed. Generally, perceived risk has been an important indicator of changes in future use of a drug, so this is not a favorable development. This is good news that disapproval of cigarette smoking is rising and is at very high levels among teens, largely due to educational programming.²⁷

Despite the strong trend of disapproval, this means we are still raising youth who will continue to use cigarettes, cigars, and other tobacco products. Why? Nearly 9 out of 10 smokers begin smoking by age 18. According to a report from the National Institute on Drug Abuse, more than 6 million of those smokers under 18 years of age will die prematurely from a tobacco-related disease.²⁸

Tobacco is often seen as a ‘gateway drug,’ one used first by youth who then move on to alcohol, marijuana, or other drugs. Studies show that illegal drug use is almost nonexistent among people who have never used tobacco. Tobacco use, then, becomes the ‘gateway’ to other experimentation and use.²⁹

GOAL

- ☐ Participants will comprehend how drugs affect behaviors and the health consequences of drug use.

OBJECTIVES

Participants will:

- ☐ Learn actual numbers of peers (youth statistics) who are using drugs illegally.
- ☐ Learn about the health and cosmetic effects of using drugs.
- ☐ Understand better about addictions.
- ☐ Experience how addictions might feel.
- ☐ Experience how smoking affects lung capacity.
- ☐ Describe specific health risks associated with using tobacco, alcohol, or other drugs.
- ☐ Describe risks other than health associated with using tobacco, alcohol, or other drugs.
- ☐ Describe benefits other than health associated with not using tobacco, alcohol, or other drugs.

NOTE: Refer to the **Glossary** (Appendix C) for definitions of unfamiliar words or terms.

KEY HEALTH MESSAGE:

Nearly 9 out of 10 smokers begin smoking in childhood or teenage years.

SECTION



CHAPTER



ACTIVITY



ACTIVITY 1A: DID YOU KNOW?

Objectives:

Participants will:

- ☐ Learn actual numbers of peers (youth statistics) who are using drugs illegally.
- ☐ Learn about the health and cosmetic effects of using drugs.
- ☐ Describe specific health risks associated with using tobacco, alcohol, and other drugs.

Life Skills Learned:

- ☐ Healthy Life Choices
- ☐ Analyzing Information
- ☐ Teamwork

National Health Education Standard 1:

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Time Needed:

30-45 minutes

Materials Needed:

- ☐ Computer with PowerPoint program and LCD projector if available
- ☐ **DID YOU KNOW? Drug Challenge PowerPoint** (on CD) *OR*
- ☐ **DID YOU KNOW? Drug Challenge Paper Version** (Print from CD)
- ☐ Chalkboard/Chalk or Flipchart/Marker
- ☐ **KNOW YOUR DRUGS Reference** (Print from CD)

EASE OF TEACHING TIP:

If using a PowerPoint is not an option, the **DID YOU KNOW? Drug Challenge** is available in paper version.

CONNECTING TO TOBACCO, ALCOHOL, AND OTHER DRUGS

As they transition into middle school, youth are moving into a whole different world. They're at a much higher risk for experimenting with tobacco, alcohol, or other drugs. They may have a new set of peers from which they may need to select their friends. To help them be better prepared to face this new world, they need to learn about drugs, terms associated with drugs, and how drugs might affect them. Some drugs and substances youth are currently abusing are legal, but are being used in ways

that are illegal and very dangerous. Youth are also experimenting with illegal drugs, which can be deadly.

DRUGS - Reference to other drugs includes those drugs not permitted by law (illegal) and lawful drugs (prescription or over-the-counter) which are obtained or used illegally unless otherwise specified.

EXPERIENCE THE ACTIVITY

STEP 1.

Explain there are many things everyone should know about tobacco, alcohol, and other drugs. The group is going to do an activity to learn some new facts in a fun way. Divide the youth into 2 or 3 smaller groups, depending on the size of the group. Use the PowerPoint: **DID YOU KNOW? Drug Challenge.**

STEP 2.

Have the first player in the first group select a category and point amount. The first player will answer the question selected. If she or he answers correctly, the group gets that number of points. If she or he answers incorrectly, no points are awarded. Have someone keep track of the score for each group on a chalkboard or flipchart.

STEP 3.

Play will continue with the next group and proceed as described in Step 2. Continue until all players in each group have had one question or all the questions have been answered.

STEP 4.

The group with the most points can be given a special privilege (such as going first – if there is a snack) or a small prize (such as a pencil, etc.).

STEP 5.

Share:

- ☐ What was the purpose of playing this game?
- ☐ What did you learn?

Process:

- ☐ How does knowing more about different drugs make you feel about them?
- ☐ Why do you think it's important to be informed about different drugs, their effects, etc.?
- ☐ What was something that really surprised you?

EASE OF TEACHING TIP:

Use the **KNOW YOUR DRUG Reference** as a supplement to give the youth more information about the different drugs. As a drug is revealed in a question or answer, be prepared to share additional information.

EASE OF TEACHING TIP:

Before starting, decide which group will go first/second/etc., and how youth will select who goes first within their group. This will cause less disruption.

SECTION**CHAPTER****ACTIVITY****Generalize and Apply:**

You have a friend who tells you that it's okay to try a beer or take a whiff of something.

- ☐ What did you learn that will make it easier to refuse the offer?
- ☐ What did you learn that can help you make future decisions?
- ☐ How did this game change your way of thinking about using drugs?

STEP 6.**Reflection:**

- ☐ Which drugs are youth most likely to use?
- ☐ How can these drugs be dangerous?
- ☐ What is one new thing you learned?

STEP 7.

Discuss the "Family Corner" and "Community Corner" with participants. Encourage them to do one or both. If they choose to do something as a group, help them follow through.

- ☐ **Family Corner:** Share some things you learned from the **DID YOU KNOW? Drug Challenge** with your parents. Were they aware of all this information?
- ☐ **Community Corner:** Have each participant do research on a drug. To research, they can use the public library, the Internet (government sites are good), or other sources such as pamphlets, etc. Youth will make a "Did You Know" poster that includes 10 or more new or unusual facts about the drug. The finished posters can be displayed somewhere in the community or at school.