SPORT
Prevention Plus Wellness

High School Adolescents: Substance Use Prevention Program Promoting Wellness

Prevention Plus Wellness, LLC
904-472-5022
http://preventionpluswellness.com/
©All Rights Reserved, 2019 2.0
SPORT Prevention Plus Wellness

HIGH SCHOOL ADOLESCENTS: SUBSTANCE USE PREVENTION PROGRAM PROMOTING WELLNESS

Table of Contents

Section 1: Introduction
Section 2: Directions for Implementation
Section 3: Individual Youth Program Script with Screen & Goal Plan
Section 4: Optional Group Program Script
Section 5: Evaluation Materials
Section 6: Optional Follow-Up Parent Flyers & Youth Wellness Resources

NOTE: Reproduction and use of copyright protected materials in this program is expressly limited to one instructor and cannot be copied for others to use or implement.
SPORT PPW

Section 1:
Introduction
Welcome to SPORT Prevention Plus Wellness (PPW)!

SPORT PPW is a quick and easy to use screening and brief intervention for professionals, peer leaders and parents who want to prevent substance abuse and promote protective wellness lifestyles and identities among youth.

SPORT PPW has undergone rigorous research evaluating its effectiveness for preventing youth substance use and increasing healthy habits. It is listed as an evidence-based program on the National Registry of Evidence-based Programs and Practices (NREPP), Blueprints for Healthy Youth Development and other evidence-based registries.

SPORT PPW is the country’s only single-session substance abuse prevention program designed to increase wellness-enhancing behaviors including physical activity, sports participation, healthy eating, getting adequate sleep, and practicing stress control. It can be implemented in any setting where youth are found.

SPORT PPW is founded on a marketing-related model that targets naturally motivating positive peer and desired future images to increase multiple health behavior goal setting.

SPORT PPW is highly flexible and can be used as a stand-alone program, or as an add-on component to other prevention, health, sports, fitness, recreation, education or intervention programs.

The SPORT PPW program was designed to help youth look and feel more active, fit and healthy by having them:

1. Identify wellness enhancing behaviors, along with drug use habits that interfere with reaching wellness behavior goals and positive self-images;
2. Become aware of positive images of youth engaged in wellness promoting behaviors, and desired images of themselves in the future; and
3. Make a commitment to set and monitor multiple goals to increase wellness promoting behaviors, while avoiding wellness harming substance use.

Your SPORT PPW manual and program contain the following materials:

- Step-by-step implementation directions;
- Brief self-administered youth health and fitness behavior screening survey;
- Scripts for providing an individual one-on-one or optional group lesson that use positive image content linking wellness and substance use behaviors;
• Set of colorful slides with illustrations of youth modeling wellness habits;
• Goal plan and contract for motivating multiple behavior change;
• Optional group exercise to increase classroom interaction during the group lesson;
• Scannable youth screening addenda and feedback surveys to evaluate program implementation fidelity and effectiveness;
• Instructor’s survey to assess the quality of the lesson presentation;
• Fidelity checklist to increase implementation reliability;
• Letter introducing optional follow-up parent flyers in English and Spanish;
• Set of four parent flyers in English and Spanish;
• Phone protocol to ensure reception and use of parent flyers;
• Optional youth wellness resources addressing increasing physical activity, eating healthy, getting adequate sleep, managing stress, and avoiding alcohol, tobacco, e-cigarettes, marijuana and illicit drug use;
• Digital download of reproducible materials and customizable PowerPoint slides;
• Phone and email program support; and
• Separate onsite and online certified training workshops to learn how to provide the SPORT PPW program, or train others to implement it, with fidelity and maximum effectiveness.

SPORT PPW takes less than 50 minutes to implement. It is available in three versions for: 1) High school adolescents ages 14-18, 2) Middle school adolescents ages 10-14, and 3) Elementary school children ages 8-10.

Thank you for choosing SPORT Prevention Plus Wellness. We know you will find SPORT PPW an easy, enjoyable and effective way to promote fit, healthy and substance abuse-free lifestyles among your youth.
SPORT PPW

Section 2:
Directions for Implementation
Steps for Implementing & Evaluating Your PPW Program

Welcome Prevention Plus Wellness Program Implementer! This information was created to help you successfully provide your Prevention Plus Wellness (PPW) Program.

If you have not already done so, we strongly encourage you to take one of our convenient onsite or online training workshops to become a Certified PPW Program Implementer or Training of Trainer. Both workshops come with 3-year certification and are designed to ensure you learn how to implement your PPW Program with fidelity and maximum effectiveness.

Listed below are the steps and tools for implementing and evaluating your PPW Program.

Steps for Implementing & Evaluating the PPW Program

1. Prior to implementing your Prevention Plus Wellness (PPW) Program to youth or young adults, practice both the individual (one-on-one) and group scripts three times, using the program’s PowerPoint slides, goal plan, youth feedback survey and instructor’s survey.
2. Before providing a lesson, make copies of the screening survey, goal plan and feedback survey for all participants from the digital downloads provided.
3. In a private or semi-private setting, implement the program using the selected script while showing the PowerPoint slides.
4. When done, read the goal plan with the participant(s), and help them complete it, sign it and take it home for daily monitoring.
5. Administer the feedback survey and then collect it along with the screening survey and keep them together for each participant.
6. Complete an instructor survey to assess the quality of your program implementation.
7. Scan your completed participant screening and feedback surveys using an all-in-one scanner/printer.
8. Email the scanned surveys to Prevention Plus Wellness, LLC to receive program feedback on implementation fidelity, ways to improve your program, and positive outcomes you can communicate to key stakeholders to promote your program: info@preventionpluswellness.com (call for assistance: 904-472-5022).
9. Promote your program and make improvements based on the program feedback and instructor survey evaluation data results.
10. Use the Prevention Plus Wellness Program Fidelity Checklist to ensure you are implementing your PPW program with fidelity.
11. Follow up with participants by reminding them to monitor the achievement of their goals each day, and revise goals each week to ensure success.
12. Maintain your certification and get the latest best practices knowledge and skills by attending a PPW Program Implementer’s or Training of Trainer Workshop every three-years.

**PPW Program Resources**

The following PPW Program resources are found on the Prevention Plus Wellness website ([http://preventionpluswellness.com](http://preventionpluswellness.com)) and are invaluable for ensuring you are providing your program with fidelity and getting the very best outcomes.

- Healthy Lifestyle Guidelines for Youth and Young Adult Goal Setting
- Promoting Your Program
- Program Evaluation Support
- Program Tailoring Services
SPORT PPW

Section 3:
Individual Youth Program Script with Screen & Goal Plan
Introduction
(Show slide).

Hi, ______________________ (youth’s name). My name is ____________________. I'll be your instructor during this brief fitness and health talk. I'm going to talk to you about habits that can make you look better, feel better, and improve your performance in physical activities, school, and relationships.

Screening Survey

Now, please take out your copy of the SPORT Prevention Plus Wellness Health and Fitness Survey. The purpose of this survey is to determine what you are doing about your health. Your answers are private. DO NOT PLACE YOUR NAME ON THE SURVEY. We want your answers to be a secret. Please answer all questions honestly. Thank you. (Wait until the survey is completed. See copy below.).
SPORT© Prevention Plus Wellness
High School Adolescent Version
Health and Fitness Survey

Directions: The purpose of this survey is to determine what you are doing about your health. Your answers will be confidential. **DO NOT PLACE YOUR NAME ON THIS FORM.** Answer all questions honestly.

1. What sports or physical activities did you play in the last year? (Check all that apply)
   a.  □ Baseball or softball
   b.  □ Basketball
   c.  □ Riding a bicycle
   d.  □ Dance/Cheerleading/Gymnastics
   e.  □ Football
   f.  □ Golfing
   g.  □ Horseback riding
   h.  □ Running or walking
   i.  □ Rollerblading
   j.  □ Skateboarding
   k.  □ Soccer
   l.  □ Surfing
   m.  □ Swimming
   n.  □ Tennis
   o.  □ Track
   p.  □ Volleyball
   q.  □ Wrestling
   r.  □ Weight lifting
s. □ Others (list) ________________________________________________

t. □ I did not play any sports or physical activities last year

2. Do you participate in any physical activity for at least 30 minutes four or five times a week? For example, riding a bike, running, walking, swimming, or playing a sport for 30 minutes or more on most days.

   a. □ Yes
   b. □ No

3. Do your friends influence you to participate in regular physical activity?

   a. □ Yes
   b. □ No

4. Do you usually eat a healthy breakfast each morning? For example, cereal and low-fat milk, whole wheat toast, oatmeal, eggs, yogurt or fruit.

   a. □ Yes
   b. □ No

5. Do you usually sleep eight or more hours each night?

   a. □ Yes
   b. □ No

6. During the past 30 days, what is the greatest number of alcoholic drinks you had at any one time?

   a. □ 5 or more drinks
   b. □ 4 drinks
   c. □ 3 drinks
   d. □ 2 drinks
   e. □ 1 drink
   f. □ 0 drinks

7. Are you:

   a. □ Male
   b. □ Female
Directions: Bubble in the item that best answers each question. There are no right or wrong answers.

1. In the next year, how likely are you to...

<table>
<thead>
<tr>
<th></th>
<th>Not at all (1)</th>
<th>A little (2)</th>
<th>Some (3)</th>
<th>Very (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) get physical activity most days a week?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>b) get 8 or more hours a sleep most nights?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>c) eat a variety of healthy foods each day?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>d) drink any alcohol?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>e) smoke any cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>f) use any marijuana?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>g) use any e-cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>h) take action to reduce stress most days?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

2. How many people your age...

<table>
<thead>
<tr>
<th></th>
<th>None (1)</th>
<th>Some (2)</th>
<th>Most (3)</th>
<th>All (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) get physical activity most days a week?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>b) get 8 or more hours a sleep most nights?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>c) eat a variety of healthy foods each day?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>d) drink any alcohol?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>e) smoke any cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>f) use any marijuana?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>g) use any e-cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>h) take action to reduce stress most days?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>
3. If your friends wanted you to, would you…

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Maybe Yes</th>
<th>Maybe No</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a) get physical activity most days a week? O O O O
b) get 8 or more hours a sleep most nights? O O O O
c) eat a variety of healthy foods each day? O O O O
d) drink any alcohol? O O O O
e) smoke any cigarettes? O O O O
f) use any marijuana? O O O O
g) use any e-cigarettes? O O O O
h) take action to reduce stress most days? O O O O

4. If you used any of these, would they harm your health or healthy habits?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Maybe Yes</th>
<th>Maybe No</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a) alcohol? O O O O
b) cigarettes? O O O O
c) marijuana? O O O O
d) e-cigarettes? O O O O
e) other illegal drugs? O O O O
5. If my friends wanted me to, I would...

<table>
<thead>
<tr>
<th></th>
<th>Yes (1)</th>
<th>Maybe Yes (2)</th>
<th>Maybe No (3)</th>
<th>No (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) use alcohol</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>b) smoke cigarettes</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>c) use marijuana</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>d) use e-cigarettes</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>e) use other illegal drugs</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

6. How sure are you that you could say NO to friends if they asked you to...

<table>
<thead>
<tr>
<th></th>
<th>Very Sure (1)</th>
<th>A Little Sure (2)</th>
<th>Somewhat Sure (3)</th>
<th>Not Sure (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) use alcohol?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>b) smoke cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>c) use marijuana?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>d) use e-cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>e) use other illegal drugs?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>
1. **Sports/Physical Activity Last Year**

Collect the screening survey from the youth. Read only ONE response. If youth checks any sport or physical activity in question #1 on survey, read “Yes” response. If youth answers “t” for question 1, read “No” response.

- (Yes) Sports/Physical Activity

1. **Benefits of Sports & Physical Activity (Show slide).**

<table>
<thead>
<tr>
<th>Sports &amp; Physical Activities:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Are fun</td>
</tr>
<tr>
<td>2. Help you look fit &amp; strong</td>
</tr>
<tr>
<td>3. Feel good about yourself</td>
</tr>
<tr>
<td>4. Give you lots of energy</td>
</tr>
<tr>
<td>5. Do better in school &amp; work</td>
</tr>
</tbody>
</table>

I see that you participate in: ________________________________(name sports and physical activities listed on the survey.)

Good for you! Sports and physical activities are a great way to get regular exercise. Sports and physical activities are fun, help you look fit and strong, feel good about yourself, give you lots of energy, and can help you do better in school.

2. **Some Behaviors Harm Sports & Physical Activity (Show slide).**

<table>
<thead>
<tr>
<th>An Active Life and Alcohol Do NOT Mix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol &amp; Drugs Hurt:</td>
</tr>
<tr>
<td>1. Your relationships</td>
</tr>
<tr>
<td>2. How well you do in sports</td>
</tr>
<tr>
<td>3. How you feel about yourself</td>
</tr>
<tr>
<td>4. Your energy level</td>
</tr>
<tr>
<td>5. How you do in work &amp; school</td>
</tr>
</tbody>
</table>

An active lifestyle and alcohol use do not mix. Using too much alcohol can hurt your performance in sports, physical activities, and school. It can also have a negative impact on your health and your relationships with friends and family.
1. Benefits of Sports & Physical Activity (Show slide).

Sports & Physical Activities:
1. Are fun
2. Help you look fit & strong
3. Feel good about yourself
4. Give you lots of energy
5. Do better in school & work

I see that you do not play sports or participate in any physical activities. You can really improve your health and how well you feel by being more active. Sports and physical activities are fun, help you look fit and strong, feel good about yourself, give you lots of energy, and help you do better in school. Pick a fun physical activity that you like to do, such as riding a bike or walking, and do it today!

2. Some Behaviors Harm Sports & Physical Activity (Show slide).

An Active Life and Alcohol Do NOT Mix

Alcohol & Drugs Hurt:
1. Your relationships
2. How well you do in sports
3. How you feel about yourself
4. Your energy level
5. How you do in work & school

Alcohol use can keep you from having an active life. Using too much alcohol can hurt your performance in sports, physical activities, and school. It can also have a negative impact on your health and your relationships with friends and family.

2. Regular Physical Activity

Read only ONE response. If youth answers “Yes” to question #2 on survey, read “Yes” response. If youth answers “No” to question 2 on survey, read “No” response.
30 minutes of Sports & Physical Activities

1. Promote a healthy heart & lungs
2. Help control weight & stress
3. Increases feelings of success & well-being
4. Less anxiety & disease

Alcohol decreases energy & adds empty calories to your diet

The key to a fit and healthy body is lots of physical activity AND staying away from alcohol, tobacco and drugs
3. Physical Activity Norms

Read only ONE response. If youth answers “Yes” to question #3 on survey, read “Yes” response. If youth answers “No” to question 3 on survey, read “No” response.
Young people are more likely to be physically active if their friends are active

- Social support from friends & family can promote healthy habits
- Friends can also influence you to either avoid or engage in unhealthy habits, such as using alcohol or drugs

Spend time with friends who support you being active & avoiding alcohol & drugs.

Ask yourself:
- Do they encourage you to engage in habits that better your fitness & health?
- Or do they pressure you to do unhealthy things?
4. **Breakfast and Nutrition**

Read only ONE response. If youth answers “Yes” to question #4 on survey read “Yes” response. If youth answers “No” to question 4 on survey, read “No” response.

☐ (Yes) Breakfast and Nutrition
It looks like you are eating a healthy breakfast on most mornings. Wonderful! Eating a healthy breakfast such as nutritious cereal with low fat milk, whole wheat toast, oatmeal, eggs, yogurt or fruit every day can have a big effect on how you feel, and help you have more energy in school and sports. Breakfast is just one aspect of a healthy diet. It is also important to eat a variety of other healthy, nutritious foods every day, such as fresh fruits and vegetables, as well as limit eating junk food. What types of healthy foods do you like to eat or would like to eat more of?

Drinking alcohol adds empty calories that leads to weight gain while robbing your body of vitamins and minerals. Too much alcohol can sap your energy needed to do well in sports, physical activities, and life.
It looks like you haven’t been eating a healthy breakfast on most days. Try eating a healthy breakfast such as nutritious cereal with low fat milk, whole wheat toast, oatmeal, eggs, yogurt or fruit every day. It can have a big effect on how you feel, and help you have more energy in school and sports. Breakfast is just one aspect of a healthy diet. It is also important to eat a variety of other healthy, nutritious foods every day, such as fresh fruits and vegetables, as well as limit eating junk food. What types of healthy foods do you like to eat or would like to eat more of?

2. Some Behaviors Harm Healthy Eating (Show slide).

Alcohol & marijuana rob your body of vitamins and minerals.
They lead to weight gain.
They sap your energy needed for sports, physical activity & life.

Drinking alcohol adds empty calories that leads to weight gain while robbing your body of vitamins and minerals. Too much alcohol can sap your energy needed to do well in sports, physical activities, and life.

5. Sleep 8 or More Hours

Read only ONE response. If youth answers “yes” to question #5 on survey, read “Yes” response. If youth answers “No” to question 5 on survey, read “No” response.
lenty of
um energy
eough
erns.
ctive, high-
6. Alcohol Use

Read only ONE response. For example, if youth answers “f” on the survey item #6, read only the message next to “f.”

☐ (f). It looks like you are not currently using alcohol

1. Alcohol Use Can Harm Your Fitness & Health (Show slide).
Using alcohol or drugs puts you at risk for:

1. Embarrassing yourself in front of friends
2. Getting hurt or sick
3. Getting into trouble with your family, at school, or with the police

2. Alcohol Use Can Cause Life Problems (Show slide).

Some young people think that drinking helps make friends or have fun. The truth is it causes:

1. Arguing & fighting
2. Doing things you later regret
3. Having shallow conversations
4. Problems achieving goals like getting a good job, college & relationships

3. Alcohol Myths (Show slide).

You can increase your skill to say NO by practicing like any sport or skill.

The myth that all athletes drink alcohol probably comes from the media...which often markets and advertises alcohol during sporting events.
4. **Most Youth Do Not Drink (Show slide).**

People often draw incorrect conclusions from seeing one person or hearsay.

Truth is most young people DO NOT use alcohol or drugs.

Statistics show the majority of US high school students DO NOT currently drink alcohol or use illegal drugs.

5. **Choose for Yourself (Show slide).**

Choose **not** to misuse alcohol while leading an active life.

To increase your control:
- Stay away from people that might “push” alcohol on you.
- Avoid places that increase pressure to act in unhealthy ways.
6. Plan Ahead (Show slide).

- Decide in advance to avoid drinking & drug use so you can stay in control & resist pressure from friends.
- Try non-alcohol drinks, exercise, music, sports or reading in place of drinking.

7. Summary (Show slide).

To keep healthy, have more energy, look and feel good, and do better in school and sports...avoid alcohol and drugs that can:

1. Harm your health, fitness & performance
2. Cause embarrassing social problems
3. Add empty calories & weight
4. Disrupt sleep
5. Decrease energy to be active
(d or e). MALE. It looks like the most alcohol you drank at any one time in the last 30 days is 1 or 2 drinks.

(e). FEMALE. It looks like the most alcohol you drank at any one time in the last 30 days is 1 drink.

Using alcohol or drugs puts you at risk for:

1. Embarrassing yourself in front of friends
2. Getting hurt or sick
3. Getting into trouble with your family, at school, or with the police

Some young people think that drinking helps make friends or have fun. The truth is it causes:

1. Arguing & fighting
2. Doing things you later regret
3. Having shallow conversations
4. Problems achieving goals like getting a good job, college & relationships
You can increase your skill to say NO by practicing like any sport or skill.

The myth that all athletes drink alcohol probably comes from the media...which often markets and advertises alcohol during sporting events.

People often draw incorrect conclusions from seeing one person or hearsay.

Truth is most young people DO NOT use alcohol or drugs.

Statistics show the majority of US high school students DO NOT currently drink alcohol or use illegal drugs.
Choose not to misuse alcohol while leading an active life.

To increase your control:
• Stay away from people that might “push” alcohol on you.
• Avoid places that increase pressure to act in unhealthy ways.

Decide In Advance to avoid drinking & drug use so you can stay in control & resist pressure from friends.

Try non-alcohol drinks, exercise, music, sports or reading in place of drinking.

To keep healthy, have more energy, look and feel good, and do better in school and sports...avoid alcohol and drugs that can:
1. Harm your health, fitness & performance
2. Cause embarrassing social problems
3. Add empty calories & weight
4. Disrupt sleep
5. Decrease energy to be active
(a-c). MALE. It looks like you have been drinking more than 2 drinks at a time during the last 30 days.

(a-d). FEMALE. It looks like you have been drinking more than 1 drink at a time during the last 30 days.
Some young people think that drinking helps make friends or have fun. The truth is it causes:

1. Arguing & fighting
2. Doing things you later regret
3. Having shallow conversations
4. Problems achieving goals like getting a good job, college & relationships

You can increase your skill to say NO by practicing like any sport or skill

The myth that all athletes drink alcohol probably comes from the media...which often markets and advertises alcohol during sporting events.
People often draw incorrect conclusions from seeing one person or hearsay.

Truth is most young people DO NOT use alcohol or drugs.

Statistics show the majority of US high school students DO NOT currently drink alcohol or use illegal drugs.

Choose **not to misuse alcohol while leading an active life**

To increase your control:

• Stay away from people that might “push” alcohol on you.
• Avoid places that increase pressure to act in unhealthy ways.
Decide in Advance to avoid drinking & drug use so you can stay in control & resist pressure from friends.

Try non-alcohol drinks, exercise, music, sports or reading in place of drinking.
Wellness Goal Plan & Contract

Now, take out your copy of the Wellness Goal Plan and read along. (Read the goal plan aloud and assist the participant with completing each item on the goal plan. Then, have them sign and you co-sign the plan. Lastly, read the concluding statement on the plan with the participant. See copy below.).

SPORT© Prevention Plus Wellness
High School Adolescent Version
Wellness Goal Plan

Recommendations for increasing your wellness:

1) Get 8 or more hours of sleep each night;
2) Eat a healthy breakfast every day, such as nutritious cereal and low-fat milk, whole wheat toast, oatmeal, eggs, yogurt or fruit, and eat a daily variety of other healthy foods, such as fruits and vegetables, while limiting junk food;
3) Participate in some fun physical activity, such as riding a bike, running, swimming, or walking, at least 30 minutes a day four or five times a week; and
4) Most importantly, avoid alcohol, tobacco, e-cigarettes, prescription drug misuse, marijuana and illegal drug use.

Keep in mind, being fit does not mean being perfect. Your main goal should be to have a healthy body image and not engage in unhealthy behaviors.

To help you achieve the above goals, make the following commitment:

I will avoid alcohol and drug use each day during the next 7 days in order to maintain an active, healthy lifestyle.

In addition, the one other health habit that I select to improve during these 7 days from the list above is:
Also, to help you be successful in achieving the goals above, check off at least one of the following Wellness Tips that you will use during the next 7 days:

- [ ]
- [ ]
- [ ]
- [ ]
- [ ]

**Congratulations!** You have successfully completed this SPORT Prevention Plus Wellness lesson. Take this contract home and put it where it can be seen each day, week and month (i.e., on your mirror, wall or desk). Also, after one week, review your goal plan and make changes if needed to be even more successful in reaching your goals. We may also give you and your parents some flyers to help you reach your wellness goals.
SPORT PPW

Section 4:
Optional Group Program Script
Hello. For the next several minutes I will be talking with you about SPORT Prevention Plus Wellness, an exciting new fitness and health program. Together we will look at habits that can make you look better, feel better, and improve your performance in physical activities, school, and relationships.

Screening Survey

Now, please take out your copy of the SPORT Prevention Plus Wellness Health and Fitness Screen. The purpose of this survey is to determine what you are doing about your health. Your answers are private. DO NOT PLACE YOUR NAME ON THE SURVEY. We want your answers to be a secret. Please answer all questions honestly. Thank you. (Wait until everyone has completed the survey).

1. **Sports/Physical Activity Last Year**

   (Ask class members to raise their hands and respond as you read each of the types of physical activities). What sports or physical activities did you play in the last year?

   a. [ ] Baseball or softball
   b. [ ] Basketball
   c. [ ] Riding a bicycle
   d. [ ] Dance/Cheerleading/Gymnastics
e. ☐ Football
f. ☐ Golfing
g. ☐ Horseback riding
h. ☐ Running or walking
i. ☐ Rollerblading
j. ☐ Skateboarding
k. ☐ Soccer
l. ☐ Surfing
m. ☐ Swimming
n. ☐ Tennis
o. ☐ Track
p. ☐ Volleyball
q. ☐ Wrestling
r. ☐ Weight lifting
s. ☐ Others (describe) ______________________________________________________.

1. Benefits of Sports & Physical Activity (Show slide).

   ![Sports & Physical Activities](image)

   - Are fun
   - Help you look fit & strong
   - Feel good about yourself
   - Give you lots of energy
   - Do better in school & work

   Good for you! Sports and physical activities are a great way to get regular exercise. Sports and physical activities are fun, help you look fit and strong, feel good about yourself, give you lots of energy, and can help you do better in school.

2. Some Behaviors Harm Sports & Physical Activity (Show slide).
An active lifestyle and alcohol use do not mix. Using too much alcohol can hurt your performance in sports, physical activities, and school. It can also have a negative impact on your health and your relationships with friends and family.

2. **Regular Physical Activity**

(Ask participants to answer only to themselves). Do you participate in any physical activity for at least 30 minutes four or five times a week? For example, riding a bike, running, walking, swimming, or playing a sport for 30 minutes or more on most days.

- Promote a healthy heart & lungs
- Help control weight & stress
- Increases feelings of success & well-being
- Less anxiety & disease
3. Physical Activity Norms

(Ask participants to answer to themselves). Do your friends influence you to participate in regular physical activity?

Young people are more likely to be physically active if their friends are active

- Social support from friends & family can promote healthy habits
- Friends can also influence you to either avoid or engage in unhealthy habits, such as using alcohol or drugs
4. **Breakfast and Nutrition**

(Ask participants to answer to themselves). Do you usually eat a healthy breakfast each morning? For example, cereal and low-fat milk, whole wheat toast, oatmeal, eggs, yogurt or fruit.

1. **Benefits of Healthy Eating (Show slide).**

Eating a healthy breakfast such as nutritious cereal with low fat milk, whole wheat toast, oatmeal, eggs, yogurt or fruit every day can have a big effect on how you feel, and help you have more energy in school and sports. Breakfast is just one aspect of a healthy diet. It is also important to eat a variety of other healthy, nutritious foods every day, such as fresh fruits and vegetables, as well as limit eating junk food. What types of healthy foods do you like to eat or would like to eat more of?
2. Some Behaviors Harm Healthy Eating (Show slide).

Drinking alcohol adds empty calories that leads to weight gain while robbing your body of vitamins and minerals. Too much alcohol can sap your energy needed to do well in sports, physical activities, and life.

5. **Sleep 8 or More Hours**

(Ask participants to answer to themselves). Do you usually sleep eight or more hours each night?

Getting 8 or more hours of sleep each night can give you maximum energy and help you think clearly all day.
6. **Alcohol Use**
(Ask participants to answer to themselves). In the past 30 days, did you drink any alcohol?

1. One of the most important things you can do to help improve your health and maintain an active life is to avoid alcohol. Health and research organizations recommend no more than one drink for adult females, and no more than two drinks for adult males per day. Of course, alcohol use is illegal for anyone under age 21.

2. **Alcohol Use Can Harm Your Fitness & Health** (Show slide).

   Using alcohol or drugs puts you at risk for:

   1. Embarrassing yourself in front of friends
   2. Getting hurt or sick
   3. Getting into trouble with your family, at school, or with the police
3. Alcohol Can Cause Life Problems (Show slide).

Some young people think that drinking helps make friends or have fun. The truth is it causes:

1. Arguing & fighting
2. Doing things you later regret
3. Having shallow conversations
4. Problems achieving goals like getting a good job, college & relationships

4. Alcohol Myths (Show slide).

You can increase your skill to say NO by practicing like any sport or skill

The myth that all athletes drink alcohol probably comes from the media...which often markets and advertises alcohol during sporting events

5. Most Youth Do Not Drink (Show slide).

People often draw incorrect conclusions from seeing one person or hearsay

Truth is most young people DO NOT use alcohol or drugs

Statistics show the majority of US high school students DO NOT currently drink alcohol or use illegal drugs
6. Choose for Yourself (Show slide).

Choose not to misuse alcohol while leading an active life.

To increase your control:

- Stay away from people that might "push" alcohol on you
- Avoid places that increase pressure to act in unhealthy ways

7. Plan Ahead (Show slide).

Decide In Advance to avoid drinking & drug use so you can stay in control & resist pressure from friends.

Try non-alcohol drinks, exercise, music, sports or reading in place of drinking.
Wellness Goal Plan & Contract

Now, take out your copy of the Wellness Goal Plan and read along. (Read the goal plan aloud and assist participants with completing each item on the goal plan. Then, have them sign and you co-sign their plans. Lastly, read the concluding statement on the plan with the participants).

Optional Group Interactive Exercise

(You may implement the optional Group Interactive Exercise as described as a follow-up activity if time permits. See below.).
SPORT Prevention Plus Wellness
Group Interactive Exercise

When: You may decide to implement this optional exercise after the goal setting strategy.
Length: 45 minutes.
Materials: paper, pencils, white board, marker.

Goals:
Section 5:
Evaluation Materials
## PPW Program Feedback Survey

Directions: Bubble in the item that best answers each question. There are no right or wrong answers.

1. In the next year, how likely are you to...

<table>
<thead>
<tr>
<th></th>
<th>Not at all (1)</th>
<th>A little (2)</th>
<th>Some (3)</th>
<th>Very (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) get physical activity most days a week?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>b) get 8 or more hours a sleep most nights?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>c) eat a variety of healthy foods each day?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>d) drink any alcohol?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>e) smoke any cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>f) use any marijuana?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>g) use any e-cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>h) take action to reduce stress most days?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

2. How many people your age...

<table>
<thead>
<tr>
<th></th>
<th>None (1)</th>
<th>Some (2)</th>
<th>Most (3)</th>
<th>All (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) get physical activity most days a week?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>b) get 8 or more hours a sleep most nights?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>c) eat a variety of healthy foods each day?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>d) drink any alcohol?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>e) smoke any cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>f) use any marijuana?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>g) use any e-cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>h) take action to reduce stress most days?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>
3. If your friends wanted you to, would you...

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Maybe Yes</th>
<th>Maybe No</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(1)</td>
<td>(2)</td>
<td>(3)</td>
<td>(4)</td>
</tr>
<tr>
<td>a) get physical activity most days a week?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>b) get 8 or more hours a sleep most nights?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>c) eat a variety of healthy foods each day?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>d) drink any alcohol?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>e) smoke any cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>f) use any marijuana?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>g) use any e-cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>h) take action to reduce stress most days?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

4. If you used any of these, would they harm your health or healthy habits?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Maybe Yes</th>
<th>Maybe No</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(1)</td>
<td>(2)</td>
<td>(3)</td>
<td>(4)</td>
</tr>
<tr>
<td>a) alcohol?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>b) cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>c) marijuana?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>d) e-cigarettes?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>e) other illegal drugs?</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>
5. If my friends wanted me to, I would…

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Maybe Yes</th>
<th>Maybe No</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(1)</td>
<td>(2)</td>
<td>(3)</td>
<td>(4)</td>
</tr>
</tbody>
</table>

a) use alcohol  
O O O O
b) smoke cigarettes  
O O O O
c) use marijuana  
O O O O
d) use e-cigarettes  
O O O O
e) use other illegal drugs  
O O O O

6. How sure are you that you could say NO to friends if they asked you to…

<table>
<thead>
<tr>
<th></th>
<th>Very Sure</th>
<th>A Little Sure</th>
<th>Somewhat Sure</th>
<th>Not Sure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(1)</td>
<td>(2)</td>
<td>(3)</td>
<td>(4)</td>
</tr>
</tbody>
</table>

a) use alcohol?  
O O O O
b) smoke cigarettes?  
O O O O
c) use marijuana?  
O O O O
d) use e-cigarettes?  
O O O O
e) use other illegal drugs?  
O O O O

7. What did you like BEST about this lesson?
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

8. What did you like LEAST about this lesson?
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

52
### SPORT Prevention Plus Wellness (PPW) Instructor’s Survey

**Code:** ________

Directions: Complete this survey after each lesson provided. Circle one response for each item.

<table>
<thead>
<tr>
<th></th>
<th>None</th>
<th>A little</th>
<th>Some</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. What was your level of comfort while providing the SPORT PPW lesson?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2. Did you use active presenting strategies (i.e., good eye contact, body positioning, changing tone of voice, and listening)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>3. What was your level of enthusiasm and passion while presenting the lesson?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>4. How smooth and continuous was the flow of the lesson delivery?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5. How accurately did you follow the protocol (i.e., adherence to the script, no ad libbing extra content)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>6. Was the lesson content provided completely (i.e., covered all of the scripted messages)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>7. What was the youths’ responsiveness to the lesson (i.e., listening, answering, showing interest)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
Prevention Plus Wellness
Program Fidelity Checklist

1. □ Attend a Prevention Plus Wellness Program Implementer’s Training Workshop every 3-years.
2. □ Implement the individual script to participants in a private or semi-private setting.
3. □ Implement the lesson using the script as provided.
4. □ Maintain good eye contact during each lesson.
5. □ Do not ad lib extra content during any lesson.
6. □ Provide the script content with enthusiasm and passion each time.
7. □ Cover all messages in the script during each lesson.
8. □ Show the PowerPoint slides during each lesson.
9. □ Read the goal plan and helped participants complete it.
10. □ Have participants sign while you co-sign each contract.
11. □ Ask participants to take home their goal plan and post it.
12. □ Implement the feedback survey immediately after each lesson.
13. □ Read the feedback survey instructions to participants.
14. □ Collect and keep the screening and feedback surveys together for each participant.
15. □ Scan and email surveys to the Prevention Plus Wellness office for analysis.
16. □ Collect and monitor instructor survey data from implementers/teachers after each lesson.
17. □ Make program alterations based on feedback and instructor survey data analysis and monitoring.
18. □ Follow up with participants. For example, by reminding them to continue to monitor their goal plans, ask them to write a revised goal plan(s), provide follow up program materials (e.g., parent flyers, website resources, more lessons), and/or re-implement the PPW program every 6-12 months.
SPORT© PREVENTION PLUS WELLNESS
FOLLOW-UP PHONE PROTOCOL
FOR PARENT FLYERS

Purpose
The purpose of this phone call is to contact parents/guardians to ensure they received one or more of the flyers, and either talked about them or gave them to their youth to read.

1) Place a call to the parent/guardian to discuss the SPORT Flyers.
   Introduce yourself: "Hello, my name is ______________.  I am with the SPORT Prevention Plus Wellness program at ___________.  May I please speak with the parent/guardian of ______________?"

2) When the parent/guardian comes on the line:
   Repeat: "Hello, my name is ______________.  I am with the SPORT Prevention Plus Wellness program at ____________."
   “Did you receive any of the SPORT Program Flyer(s) we mailed/sent home to you?"
     If NO, then:
     “If you haven’t received any of them yet, maybe we do not have your correct address (only if mailed).  We have your address as: (Repeat address on file).  Is this correct?”

3) If we do have the correct address, let them know that several mail outs have been made to that address, however we will send another set of SPORT Flyers to their house and ask them to please read them and share with your son/daughter.  Thank them for their time and participation with SPORT.

4) If we have the wrong address, write down the correct address and let them know we will re-mail another set of SPORT Flyers.  Ask them once they have received them to please read through them and share them with their son/daughter.  Thank them for their time and participation with SPORT.
If YES, then:

“I only have three questions to ask you, so this will take just a moment of your time. Your answers are important in helping us improve SPORT Prevention Plus Wellness program for the future.”

1. “How many SPORT Flyers do you recall receiving?”
   a) 1
   b) 2
   c) 3
   d) All 4

2. “Did you talk to your son/daughter about the Health and Fitness Facts on any of the SPORT Flyers?”
   a) Yes
   b) No

3. “Did you give any of the SPORT Flyers to your son/daughter to read?”
   a) Yes
   b) No

“Thank you again for participating in the SPORT Prevention Plus Wellness program!”
SPORT PPW

Section 6:
Optional Follow-up Parent Flyers & Youth Wellness Resources
Dear Parent or Guardian,

Welcome to SPORT! Your son or daughter has been selected to participate in this exciting program. The goal of this program is to assist parents/guardians in helping their adolescents continue to lead active, healthy and drug-free lifestyles.

Very soon you will receive a series of four SPORT Flyers. Every Flyer will contain specific health and fitness messages. Please take a few minutes to read and talk to your son/daughter about the important facts in each of these Flyers. After talking with your son/daughter, give him/her the Flyer to read for themselves.

Thank you for your participation in this important program!
Dear Parent or Guardian:

Welcome to SPORT Flyer #1. What you say and do plays a key role in whether your son/daughter leads an active, healthy and substance abuse-free life. This week’s SPORT Flyer will help you talk with your adolescent about crucial Health & Fitness Facts. These facts are based on research that shows they can promote healthy choices among youth. Choices like avoiding alcohol, tobacco and drug use, exercising, eating healthy, and getting adequate sleep.

Please take a few minutes to read each of these facts to your son/daughter today. Check off each item after you read and talk to your youth about it. Then, hand this flyer to your son/daughter and ask them to read the Health & Fitness Facts. It can make all the difference to their health!

This week’s Health and Fitness Facts are:

- Sports and physical activities are a good way to get regular exercise. But alcohol use and an active lifestyle don’t mix. Alcohol use by youth can harm their fitness level and hurt their performance in sports and school activities.

- Getting 30 minutes of exercise each day promotes a healthy heart and lungs. But too much alcohol use can cause heart damage over time. Staying away from alcohol when young is the key to keeping a healthy heart when you are active and exercise.

- Parents: To help your son/daughter stay active, and at the same time avoid alcohol harm, know where he/she is. Ask your adolescent to keep you informed as to where he/she is throughout the day and night. Also, encourage your son/daughter to spend time in sports and physical activities.
Estimado Padre ó Guardian,

Bienvenidos a Sport! Su hijo ó hija ha sido seleccionado para participar en este emocionante programa. El objetivo de este programa es de ayudar a los padres/guardianes a que sus adolescentes sigan manteniendo un estilo de vida activa, saludable y libre de drogas.

Muy pronto usted recibirá una serie de cuatro folletos de Sport. Cada folleto contendrá mensajes de salud y acondicionamiento físico. Por favor tómese unos minutos para leer y hablar con su hijo ó hija acerca de los hechos importantes de cada uno de estos folletos. Después de hablar con ellos, entreguele a él /ella el folleto para que lo puedan leer solos.

Gracias por su participación en este programa importante!
SPORT Prevention Plus Wellness
Wellness Resources

A Guide to Eating for Sports—Teens
Health from Nemours:
https://kidshealth.org/en/teens/eatnrun.html#cat20139

Fit Sanford WebMD Teens:
https://fit.webmd.com/teen/food/videos/default.htm

For Tweens and Teens—Nutrition.gov:

How Much Sleep Do I Need?—Teens
Health from Nemours:

NIDA for Teens: Teens Drug Use and the Brain:
https://teens.drugabuse.gov/

Physical Activity Resources—President’s Council on Sports, Fitness & Nutrition:
https://www.hhs.gov/fitness/resource-center/physical-activity-resources/index.html