



A QUESTION OF INFLUENCE: CURRICULUM SUPPLEMENT



INTRODUCTION TO THE GRADE 9 UNIT

The overall aim of this grade 9 unit is to build on and enhance students' understanding of the risks and harms linked to substance use developed in grades 7 and 8. Through the unit's activities, questions, and discussion, students are increasingly encouraged to "think for themselves". The unit also addresses the possibility that grade 9 students may find themselves in high-risk situations, particularly with respect to the use of alcohol and, for some students, cannabis. Students will be presented with concrete information on what to do in high-risk situations and how to respond to potential resulting harms. Through role-playing of a party in Learning Theme Two, students will have the opportunity to practise what they have learned. The topics covered here are more wide ranging than the focus on alcohol and cannabis noted in previous grades, expanding to include additional substances and a more sophisticated understanding of the social and legal implications of substances in Canadian society. Finally, students are encouraged to think about themselves in terms of how they can and do influence the people and world around them.

Grade 9 Unit Overview

The grade 9 component of *A Question of Influence* covers the three spheres of influence—personal, social, and cultural—in the form of three learning themes: how I influence myself, how others influence me, and how I am influenced by the world around me. Each learning theme includes a set of activities and associated teacher and student materials matched to the Nova Scotia Healthy Living curriculum outcomes for grade 9. The three learning themes are preceded by an introductory session that introduces the complete unit to the students and lays the foundation for the learning theme activities. A fifth and final wrap-up session completes the unit. It is designed to encourage students to reflect on what they have learned. It also provides the teacher with an opportunity to assess what students have learned from the unit as a whole.¹

Each of the three learning themes, the introductory session, and wrapup session begin with introductory notes to help orient the teacher to the content of that session or learning theme. A summary table is provided at the beginning of each session/learning theme to identify the Healthy Living curriculum outcome links, specific activity objectives, estimated time frame, and preparation required to work through each activity in class. Separate

Suggestions for assessing other aspects of student performance throughout the unit can be found in Appendix



pages for teaching aids, referred to as "slides" throughout the unit, and student handout materials are found at the back of the unit.

The time estimates included here are based on the actual outcomes of the resource field test in the winter and spring of 2006. The complete unit is intended to be delivered in five to six hours of instructional time or a maximum of eight 45-minute classes. Not every teacher will have Healthy Living classes that run for 45 minutes, and the delivery of the activities will have to be adapted based on the length of class time available.

It is strongly recommended that none of the learning themes be dropped in an effort to shorten the time required to deliver the unit. Instead, suggestions for shortening individual activities include the following:

- Reduce the number of case studies or stories used for group activities.
- Reduce the number of groups and increase the group sizes. If increasing the size of small groups is not an option, assign the same story to more than one group, ask one group to report back on the story and, once they finish their report, ask the other groups with the same story if they have anything to add.
- Place strict time limits on brainstorming activities (five minutes, for example) rather than try to get every last idea or comment.
- Place case studies on slides and discuss them with the entire class.

A NOTE ON THE APPROACH TAKEN WITH THIS SUPPLEMENT

This supplement is based largely on the Social Influences Model—the drug education approach that has been shown by research over the past 25 years to be most effective for junior high school students. This model sees adolescent use of substances as the result of influences from peers, the media, and the general culture. These social influences take the form of messages that appear to condone substance use: for example, modelling of alcohol and other drug use by peers and media personalities, persuasive advertising appeals, and/or direct offers by peers to use substances. For the purposes of this supplement, personal influences stemming from normal adolescent development (e.g., need for independence, to experience risk) are also viewed as an important source of influence. This model aims to create greater awareness of these three spheres of influence—personal, social or interpersonal, and cultural or environmental—and to develop skills to analyse and minimize their impact.



A NOTE ON THE USE OF THE TERM "CANNABIS"

The term "cannabis" is used throughout the resource. During the field-test phase of resource development, some students commented that "cannabis" was a new word for them. Although junior high students are more familiar with the term "marijuana," the resource continues to use "cannabis" as it is a more inclusive term, including marijuana, hash, and hash oil. It will be helpful to the students if teachers explain to them that the term cannabis will be used to refer to the substance they may know as marijuana, pot, weed, dope, grass, or hash/hash oil.



FIRST CLASS— INTRODUCING GRADE 9 STUDENTS TO THE UNIT

●◆ Note

The instructions for this first class are written as if Healthy Living 9 students have been exposed to the concept of three types of influences that can affect their decisions around alcohol, cannabis, and other drugs. Consequently, it is brief (five-minute maximum) and serves only as an introduction to the rest of the unit. In the first year that A Question of Influence is used in the Nova Scotia school system (2007–2008), teachers will need to extend the length of time for this introductory class and insert Activity 7.1: Circles of *Influence* from the grade 7 unit of A Question of Influence (see pages 41-42). Add instruction points 1 through 3 of that activity to the beginning of this introduction to the grade 9 unit and drop instruction point 1 below.

Introduction

This first session of Healthy Living 9 is a very brief refresher to the concept of influencing factors connected to alcohol, cannabis, and other drugrelated decision making. It carries through with the grade 7 Healthy Living curriculum outcome "Identify personal, social, and cultural influences related to alcohol, cannabis, and other drug use (B3.7)" that forms the foundation of this curriculum supplement. It also introduces grade 9 students to the entire unit and sets the stage for an ongoing discussion on alcohol, cannabis, and other drugs. It can be delivered in 5 to 10 minutes and can be combined with Activity 9.1 in the same class session.

Grade 9 Introductory Session

Healthy Living Curriculum Links	Activity Objective(s)	Activities	Time Frame	Preparation	Materials
Identify personal, social, and cultural influences related to alcohol, cannabis, other drug use and gambling (reinforce Healthy Living 7 and 8 B3.7)	To introduce students to the entire unit and set the stage for an ongoing discussion on alcohol, cannabis, and other drugs	If introducing <i>Circles of Influence</i> for the first time, it is recommended that students complete Activity 7.1 from Healthy Living 7. Activity 7.1 Circles of Influence—The teacher reviews the concept of multiple types of influences on student decision making and describes upcoming activities.	Up to 15 minutes Up to 45 minutes if introducing the Circles of Influence for the first time	Prepare Slide 9.E—Circles of Influence, if needed.	Overhead projector, Flip chart o blackboard



Instructions

- 1. Remind students that the alcohol, cannabis, and other drugs material they have covered through Healthy Living classes in grades 7 and/or 8 have all looked at three types of influencing factors that can have an impact on their decisions and behaviour. Ask the students to recall the three types of influences. Explain that the activities that will be covered in Healthy Living 9 also look at ways they can influence themselves, how others influence them, and how they are influenced by the world around them.
- 2. Explain to the students that the activities related to the three types of influence in this unit are more in-depth than in previous grades. Tell the students that, in the first few classes, they will be asked to really think about and research the potential risks and harms connected to alcohol and other drugs. They will be asked to translate their research into a prevention and education resource that can be shared with other students. After that, they will focus on ways of telling if their friends are having problems with alcohol or any other drug and what to do to either prevent the problem from going any further or take action in an emergency situation. Tell the students that they will also be "going to a party" a bit later in the unit. Finally, tell the students that they will be considering some of the broader, societal aspects of responding to alcohol and druguse problems in Canada, and they will be asked what they think of some of the actions that have been taken.
- 3. Begin the unit by moving on to Activity 9.1 before the current class ends.

LEARNING THEME ONE: HOW I INFLUENCE MYSELF

Introduction

In order to make healthy, informed choices, it is important that students have an accurate understanding of risks and harms linked to alcohol and other drug use in adolescence. If prepared, students can be their own best resource on substance-use questions and have a strong influence on themselves. Students are often skeptical of the information they receive on this topic, so this session places the onus on them, through group work, to gather, organize, and design a presentation format for accurate substance-specific information for their peers. It is often said that the best way to learn is to have to teach it to others. Students will need to translate their knowledge into an education resource such as a pamphlet or poster and present it to the class. Through this session, students will develop a clearer understanding of the effects, risks, and harms linked to the use of various substances and an understanding of the challenges of presenting relevant, accurate information for their peers.

This session will require three classes to complete: one to introduce the task, form groups, and start the research process; a second to continue the research and develop the product; and a third to present the resource to the class. Given that research and product design are distinct and time-consuming tasks in their own right, students may require a fourth class to complete the research and design. If so, total time to deliver the grade 9 unit will be extended from 6 hours to 6 hours, 45 minutes. If that amount of time is available, no changes are required to the rest of the unit. If it is not, consider dropping Activity 9.4: *The Party*.

Materials



Grade 9 Learning Theme One—How I Influence Myself

Healthy Living Curriculum Links

Identify high-risk behaviours related to alcohol, cannabis, and other drug use (B3.1)

Identify risks of alcohol, cannabis, tobacco, and other drug use during pregnancy (B3.3)

Identify risks associated with use of alcohol, cannabis, and other drugs (B3.6)

Identify social costs related to harmful involvement with alcohol, cannabis, other drugs, and gambling (B3.7)

Identify ways that community-based services support the prevention and treatment of addictions (D2.2)

Activity Objective(s)

To increase students' knowledge of the shortand long-term physical, psychological effects of specific substances

To enhance students' knowledge of high-risk situations involving alcohol and other drugs

To identify ways of communicating alcohol and other drug-related information that is appropriate for adolescents

To foster an understanding of the challenges of developing prevention resources that are relevant to teenagers

Activities

Activity 9.1 Prevention Education— Product Research and Development—Working in small groups, students conduct research on a variety of assigned topics to prepare classes a prevention education resource appropriate for teens. The activity concludes with in-class presentations of the resources developed by the groups.

Time Frame

Up to 2 hours and 15 minutes; four and a half 30-minute classes or three 45-minute

Preparation

Prepare Slide 9.A— Prevention Education Resource Topics.

Make enough copies of Student Handouts 9.A through 9. F—Prevention Education Resource Research Starting Points for each member of each group to have a copy for their topic.

Make a copy of Student Handout 9.G—*Prevention* Education Resource Research & Development Guidelines for each student or one per group.

Make copies of the appropriate fact sheets in the supplement's Appendix C, one per topic, for each group. If the class will not have access to the Internet during class time, download resource materials to distribute to the groups.

If applicable, make copies of the groups' products and set up equipment to play videos before class presentations.



ACTIVITY 9.1: Prevention Education—Product Research and Development

- 1. Explain to the class that one of the challenges in alcohol and other drugs education is finding meaningful ways to communicate factual information to students without boring them and having them stop listening. Yet, having the facts, particularly about the potential harms linked to substance use, is essential in making healthy choices. In this unit, the class will take on the responsibility of becoming a communication team responsible for youth prevention education. The way that this will be done is by developing a series of information resources on five topics.
- 2. Ask the class to break up into six groups of no more than five students. [If there are more than 30 students in the class, you can add a seventh group and give out one of the topics twice]. Using the Prevention Education Resource Topics slide (9A), either ask students to choose a topic for their group or assign the topics to the groups yourself.
- 3. Distribute copies of Student Handouts 9.A through 9.F—Prevention Education Resource Research Starting Points to the appropriate student groups. Explain to the class that the task of each group is to develop an education resource such as a pamphlet or a poster that presents the facts on the risks related to their topic.
- 4. Distribute copies of Student Handout 9.G—Prevention Education Resource Research and Development Guidelines to each student or group. Go over the points on the handout to make sure the students understand. Although a pamphlet or a poster is the typical education resource, encourage the groups to use another means (such as a brief video if someone can use their family's video camera or the school has access to one, a web page or site, a computer assessment quiz, a teen magazine quiz, or a board game about the facts) if they believe it will be more effective.
- 5. Students have the rest of the current class and, if time allows, the next class or two (three classes maximum) to prepare their prevention education resource. Groups may need to work on the assignment between classes, by having group members download and summarize resource

material from the Internet, for example. Monitor the groups' progress at the start of the second class to see if they are going to need additional time and adjust the other sessions accordingly.

- 6. If the school does not have the resources for the students to design and produce their pamphlets, the emphasis will be on the information presented in the pamphlet as well as the group's plan for what the final product would look like if it could be designed.
- 7. If the resources can be designed and the students want to do it, consider how the resources might be distributed to other students in other grades within the school. The final results of each group's work will be presented to the rest of the class through group presentations. If possible, distribute final copies to all class members, and have each group present highlights of their efforts in a presentation of three to five minutes.
- 8. After all the groups have presented their prevention education resources, ask the class to think about and discuss the following questions:
 - What are some of the main points that you have picked up from the other groups' presentations? (Note the responses on the board or a flip chart).
 - What are the risks associated with ______ [specify each of the substances discussed]?
 - What did you think about the facts and the presentations? Were they interesting to you? Were they more or less believable than if a health professional had been brought in to present these facts? Why is that?
 - What did you learn from researching and developing your own topics?
 - Would you recommend doing this same activity next year with new grade 9 students? Why or why not?



LEARNING THEME TWO: HOW OTHERS INFLUENCE ME

Introduction

This session emphasizes that students can be a good resource and positive influence for their peers. It sheds light on an alternative perspective of peer influence by demonstrating how students in the class can be a positive influence on their peers. It also demonstrates how a peer's negative influence and behaviour can lead to positive action on the part of the students.

Students will learn to identify signs of harmful involvement with substances, be able to decide when and how to intervene, and consider how to handle a range of possible responses from a friend (for example, wants help and is willing to access it; knows there is a problem but wants to deal with it without help; doesn't want parents to know; or is denying there is a problem).

The activities in this learning theme have been developed under the assumption that some grade 9 students may find themselves in situations where they have taken a risk or they are with friends who have taken risks that have led to negative consequences, and quick thinking and response are called for to keep everyone safe. Many of the alcohol- and other drugrelated risks faced by youth happen in the company of peers and are frequently a result of the behaviour of peers. This learning theme explores risky situations from the perspective of handling both the risks and the role peers play. The entire class will participate in a party during which a number of alcohol- and drug-related issues and potentially negative consequences arise.



Grade 9 Learning Theme Two—How Others Influence Me

Healthy Living Curriculum Links	Activity Objective(s)	Activities	Time Frame	Preparation	Materials
Identify signs and stages of dependence on a substance or behaviour (B3.8)	To teach students how to identify different degrees of alcohol and other drug use and signs of harmful	Activity 9.2 Are You In Over Your Head?—Encouraging a Friend to Seek Help—Through a class discussion, students consider the degrees of substance use from none at all to being dependent on a substance. Students learn about signs that their friends might be getting into trouble with alcohol or another drug and brainstorm ideas for helping that friend.	Up to 30 minutes	Prepare Slide 9.B—Degrees of Alcohol and Other Drug-Use Risk and Slide 9.C—Ways of Responding to a Friend.	
Identify and practise strategies for helping a friend who is having problems with alcohol, other drugs, gambling, or other behaviours (D2.1)	involvement and potential dependence To support students in developing strategies for encouraging a peer to seek help for their substance use				
Identify ways that community-based services support the prevention and treatment of addictions (D2.2)					
Identify and practise strategies for dealing with the challenges of peer relationships (D3.2)					
Identify high-risk behaviours related to alcohol, cannabis, and other drug use (B3.1)	To enhance students' ability to recognize and respond to physical health	Activity.9.3 When a Friend Needs Emergency Treatment— Working in small groups, students respond to an emergency scenario and apply basic principles of emergency response.	Up to 45 minutes	Prepare Slide 9.D—Emergency Steps—DRABC.	Overhead projector Flip chart
Identify and practise strategies for helping a friend who is having problems with alcohol, other drugs, gambling, or other behaviours (D2.1)	dangers and émergency situations related to alcohol and other drug use among their peers			Make copies of Student Handout 9.H When a Friend Needs Emergency Treatment Scenarios and separate them for distribution, one per group.	
				Make either one copy of Student Handout 9.1—Answer Key for Scenarios: Correct First-Aid Procedures and read the response to the class or separate them for distribution to the groups that had each scenario.	
Identify high-risk behaviours related to alcohol, cannabis, and other drug use (B3.1)	To teach students how to recognize harmful or potentially harmful situations involving alcohol	Activity 9.4 The Party—Using either small-group role-plays or a class play, students act out risky situations that could occur at a party. Through class discussion, students	Up to 60 minutes; two 30- minute classes	Copy Student Handout 9.J—The Party Scenarios and cut the individual situations out for distribution. Include one page of all the scenarios for the group that draws the role of the police. Make copies of Student Handout 9.K—Case Studies for each student and distribute as homework for Learning Theme Three at the very end of the	
Identify social costs related to harmful involvement with alcohol, cannabis, other drugs,	and other drug use by young people				
and gambling (B3.7) Identify and practise strategies for dealing with the challenges of peer relationships (D3.2)	To support students in identifying strategies or options for dealing with risky situations when they occur, including avoiding them in the first place	identify the risks encountered and options for reducing the risks.			
	To enable students to identify elements of peer relationships that have positive and negative influences on substance use choices			current activity	
	To provide students with an opportunity to practise strategies for helping peers who are in trouble				



ACTIVITY 9.2: Are You In Over Your Head?— **Encouraging a Friend to Seek Help**

1. Explain to the class that not all patterns of drug use carry the same potential for harm and that not everyone who tries alcohol or other drugs goes on to experience serious harm or dependence. Using the Degrees of Alcohol and Other Drug Use Risk slide (9.B), explain that there are people who may never try alcohol or other drugs while others may begin to use heavily and experience high risk and problems. In between, there are people who may experiment for a while and then return to no use at all. However, students may encounter a friend who seems to be getting in over their head with alcohol, cannabis, or another drug.

Some signs of problem or high-risk use include heavy, quite frequent use and a substance becoming very important to a person. He or she will make personal sacrifices to get and use the substance and will spend a lot of money and time using the drug. He or she craves the drug and even feels uncomfortable without it. In fact, he or she needs to have the drug to feel "normal". The person continues to use the drug even though it is causing various problems at school, at home, with friends, or with money. The person's substance use can become a concern within a family when it interferes with day-to-day life.

- 2. Ask the class what signs they would look for that might indicate a friend is getting in over their head and having problems with a substance or experiencing high risk. Spend a few minutes brainstorming and record their responses. The list may include things like
 - skipping classes
 - changes in appearance
 - not showing up for things you've planned to do
 - hanging out with new people
 - asking to borrow more money
 - drinking or using another drug every weekend
 - drinking or using another drug on school nights
 - using greater quantities or strengths of alcohol and other drugs
 - passing out from drinking or using other drugs



- showing up at school after drinking or using another drug
- doing dangerous or stupid things under the influence of alcohol or other drugs
- having unplanned, unwanted, or unsafe sex while using a substance
- injecting drugs
- 3. Ask the class what they might be able to do to help a friend who seems to be in over their head? Spend a few minutes brainstorming the options. Record their responses on the board or flip chart.
- 4. Using the Ways of Responding to a Friend (Slide 9.C), explain to the students that there are three categories for the types of responses they may have to a friend who is having difficulty with a substance and present the following descriptions:
 - Some young people will worry that saying or doing anything is interfering, so they will not do or say anything.
 - Others will *enable* their friend, which means doing things that actually (without realizing it) help their friend stay in trouble or get deeper into trouble.
 - Some young people will be *helpful* by speaking to their friend, expressing their concern and offering their support.
- 5. Using the students' ideas in Item 3 above, ask which of the three categories of responses—interfering, enabling, or helping—apply to the ideas. Ask the class to suggest other examples of each of the types of behaviour.
- 6. Have the class work in groups of three to generate three guidelines for helping a friend with a substance-use problem. The guidelines can start with a "do" or a "don't."
- 7. Ask each group to present their guidelines to the whole class. Record the guidelines. From all the responses, ask the class to choose a list of three "do's" and three "don'ts" for helping a friend. For example, their list might contain items such as
 - **DO** be specific about the behaviours you have seen in your friend that concern you and ask if he or she is okay.
 - DO have the name of a counsellor ready in case your friend admits he or she needs help.

TEACHER GUIDE LINE ACTIVITY 9.2	ES
TEACHER'S NOTES	

- **DON'T** agree to buy CDs or other belongings from your friend if you suspect the money is being used on substances.
- **DON'T** talk to your friend's parent before talking to your friend and finding out what is going on.

	TEA		GUIDE	LINES	
TE	ACHER'	S NOTE	S		
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²The first aid scenarios were inspired by the Australian resource School Health and Alcohol Harm Reduction Project Teacher's Manual (found in Phase Two, Lesson 15-Helping a Friend [2000]).

ACTIVITY 9.3: When a Friend Needs Emergency Treatment

- Divide the class into five groups. Give each group one of the When a
 Friend Needs Emergency Treatment scenarios from Student Handout
 9.H. Ask each group to choose a reporter who will summarize the group's discussion and share it with the class.²
- 2. Give students the following five group discussion questions:
 - 1. What did your group decide to do?
 - 2. Why did you decide to do that?
 - 3. How likely is it that this scenario could occur in real life?
 - 4. What could you do if you did not have access to a phone?
 - 5. How could this situation have been prevented?

Using these questions, the groups are to discuss and list what they would do if they found themselves in that situation.

- 3. Bring the class back together and ask each group's reporter to share their scenarios and responses with the class. Ask the class to discuss and comment on each group's decision.
- 4. Using the DRABC slide (9.D) and Student Handout 9.I—*Answer Key for Scenarios*, reinforce the correct first-aid procedure for each of the scenarios.
- 5. An alternative means of presenting this information is to contact the supervisor of the paramedic or emergency health services unit in your area and ask him or her to send a paramedic guest speaker to the class to provide information on dealing with alcohol- and other drug-related emergencies. Before the class, send the guest speaker a copy of this activity plan so that they can tailor their talk to the goals of the class.

● Note

In all of the scenarios, students are advised to call for emergency medical assistance. In Nova Scotia, emergency calls (911) related to alcohol and other drugs will result in a response by both police and paramedics. Students may be reluctant to call for medical assistance because they are afraid they will get into trouble. Ask the students to consider the consequences of not calling 911 in the scenarios.

ACTIVITY 9.4: The Party

- 1. Inform the class that they are going to a party where alcohol and other drugs are being used and where risks are being taken. Their task will be to identify the risks and potential harms and decide how to avoid or reduce the risks.
- 2. Explain to the class that this activity can be played out in two ways: one way involves discussing a situation in small groups, while the other involves acting the situation out for their class. Briefly describe the two options below and determine which option the students prefer. Alternatively, decide in advance which of the two options would be most beneficial to the students and present that option.

Option 1: Small group work—Discussion Class

Divide the students into groups of three, each group taking on one scenario from Student Handout 9.J—*The Party Scenarios*. For each scenario, the groups will be asked to fill in the details of the scenario, consider what risks and potential harms are involved and what options are open to them, and make a group decision about what they would do. The groups then present their conclusion back to the larger class for open discussion.

Option 2: Class play—Acting Class

Divide the students into groups of three, each group taking on one scenario from Student Handout 9.J—*The Party Scenarios*. For each scenario, the groups will be asked to fill in the details of the scenario, consider what risks and potential harms are involved and what options are open to them, make a group decision about what they would do, assign parts, and practise acting the scenarios. After preparing, each group acts out their skit and facilitates discussion on the skit.

3. Once the option has been chosen, ask the class to divide up into groups of two or three. Have them draw a scenario from the slips of paper. Depending on the size of the class, you may need to make two copies of the scenarios and have two groups work separately on the same scenario. Explain that the scenario consists of a few words only and it is up to them to turn that starting point into a realistic incident. All of the scenarios are meant to be taking place at the same time and in the same place. Indicate

that one group will be drawing the role of the police and their arrival needs to be included in every other scenario.

4. Write the following directions on the board:

Each scenario currently consists of just a phrase. Develop a more complete scenario around the phrase, taking into consideration all "actors" involved in the incident. In other words, create your own "short story".

- Once the complete scenarios have been developed, decide who will play each of the roles involved.
- Identify the risks and potential harms that are present in the scenario.
- Discuss the options for either avoiding harm or dealing with it before it gets any worse.
- Discuss the impact of the police arriving for your situation.
- Make a decision about what to do, and do it.
- 5. Whether going with the acting or the small-group discussion option, give the class the remainder of the current session to discuss and/or practise their scenarios. Acting classes will be expected to present a skit of their scenarios, while discussion classes will be expected to verbally summarize their scenarios and the highlights of their discussion to the class.
- 6. If going with the acting option, have each of the groups act out their scenario in the second class of the learning theme. After each skit, ask the class the following questions:
 - What risk was taken here?
 - What did or could have gone wrong?
 - What options were available for reducing the risk?
 - What do you think about the decision that was made by the actors?
- 7. If the class is going with the small-group work option, their class presentation will consist of the following:
 - a brief description of their scenario
 - a recap of the risks involved and options they considered
 - the action they took

After each presentation, ask the class to comment on additional ideas and suggestions they have about what risks were present and what action could be taken.

ACTIVITY 9.4	
TEACHER'S NOTES	

8. At the end of the class, distribute Student Handout 9.K—*Case Studies* as homework for the next class.

EXTENSION OPPORTUNITY

Students may want to practise the play and perform it for other students in the school.



LEARNING THEME THREE: HOW I AM INFLUENCED BY THE WORLD AROUND ME

Introduction

The ways that attitudes and laws related to alcohol have changed over time are complex. By focussing on three Canadian case studies that reflect the interplay between intervention options, attitudes, and the law, this learning theme provides students with the opportunity to reflect on their own attitudes. The case studies require students to consider their attitudes towards long-term drug users and those with addictions. Through class discussion of the case studies, students will be exposed to three key and current events in the Canadian substance-abuse field. Together, they reflect the most significant shift in drug laws and attitudes in our country over the past 10 years, that is, they each reflect a harm-reduction approach, in that they are concerned with minimizing harm to the user and community without necessarily requiring that the person stop using.

Grade 9 Learning Theme Three—How I Am Influenced by the World around Me

Healthy Living					
Curriculum Links	Activity Objective(s)	Activities	Time Frame	Preparation	Materials
Demonstrate an awareness of ways that attitudes and laws related to alcohol and other drugs have changed over time (C3.2)	To encourage students to identify and understand real situations where laws and community attitudes affect the development of new intervention approaches	Activity 9.5 Society's Attitudes and Laws about Drug Use—Through class discussion and consideration of three case studies, students consider how laws and attitudes towards drug use affect the development of new laws and new	Up to 45 minutes	Make copies of Student Handout 9.J—Case Studies for each student and distribute as homework before the class.	
Identify ways that community-based services support the prevention and treatment of addictions (D2.2)	To support students in developing an appreciation for the complexities of addressing substance use issues and the possibility of a "middle ground" on issues	services and treatment approaches.		before the class.	
Identify risks of alcohol, cannabis, tobacco, and other drug use during pregnancy (B3.3)	To enhance students' ability to develop arguments to support their attitudes and reactions to a situation				

Society's Attitudes and Laws about Drug Use

1. After reading the case studies at home, have the students participate in a class discussion of each case study by responding to the following questions.

Case Study: Insite—North America's First Supervised Injection Site

- What are the benefits of having a supervised injection site (SIS) available for injection drug users?
- What are the potential drawbacks of an SIS?
- What are some of the attitudes that community residents display towards a local SIS.
- What do you think? Is an SIS a good idea or not?
- What would happen if a group of injection users organized and requested an SIS in our community?

Case Study: Forcing a woman to take substance-abuse treatment to protect her unborn child (the case of Ms. G)

- What argument does the article make as a reason for legally requiring the woman in question to enter treatment?
- What are the benefits of requiring a pregnant woman to enter treatment?
- What are the drawbacks of making it possible to force a pregnant woman into drug treatment, whether she wants to go or not?
- What do you see as the legal rights of a long-term drug user?
- How do you think people in your community would respond if the woman in question lived here and was well known?

Case Study: North American Opiate Medication Initiative Project— Prescription Heroin for Drug User Treatment

- What argument does the article make as a reason for offering heroin by prescription to heroin addicts?
- What are some of the attitudes that community residents display towards prescription heroin?
- What do you think? Is prescription heroin for drug users who are trying to get off drugs a good idea or not?
- What would happen if a treatment service in our community wanted to offer prescription heroin?
- 2. Wrap up the discussion by noting that each of these cases reflects a harm-reduction approach to dealing with substance-use problems. Harm reduction is an approach that is concerned with reducing the various harms (e.g., overall health of the person, public disorder) associated with substance use without necessarily requiring abstinence. Harm reduction is now considered one of the four pillars of drug policy in this country (along with prevention, treatment, and enforcement) and, although controversial in some respects, represents the most significant shift in public attitudes and government policies witnessed in this country in the past 10 years.

EXTENSION OPPORTUNITY

All of these case studies work well in the form of a class debate.



FINAL SESSION: WRAP UP AND ASSESSMENT— UNDERSTANDING OUR OWN POTENTIAL TO INFLUENCE

Introduction

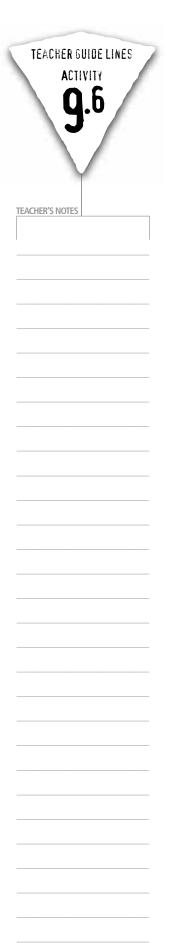
The first session of grade 9 introduced or reminded students of the types of factors—individual, social, and environmental or cultural factors—that can influence their decisions regarding alcohol, cannabis, and other drugs. Many of the activities in the three learning themes of the grade 9 unit clearly gave students an opportunity to influence others. This final session asks the students to reflect on what they have learned about influencing factors from the previous learning themes and activities. It asks them to demonstrate what they have learned by reflecting on the way they can influence people.

By assigning the session's single activity, teachers have an opportunity to assess student progress and learning from the unit by students' responses to identifying their own influences or through the development of a rubric tailored by individual teachers for the activity.³

Grade 9 Wrap-Up Session

Healthy Living Curriculum Links	Activity Objective(s)	Activities	Time Frame	Preparation	Materials
Identify personal, social, and cultural influences related to alcohol, cannabis, other drug use, and gambling (Reinforce Healthy Living 7 and 8 B3.7) Develop an ability to teach or mentor others (D6.1)	To assess student learning and application of that learning about the factors that influence the use of alcohol, cannabis, and other drugs	Activity 9.6 How Do I Influence Others and the World around Me?—Through class discussion, students consider a fourth type of influence on alcohol and other drug decisions—the way they can individually influence others.	Up to 30 minutes	Prepare Slide 9.E—Circles of Influence	Overhead projector

³ See Appendix D for examples of assessment rubrics.



ACTIVITY 9.6:

How Do I Influence Others and the World Around Me?

- 1. Using the *Circles of Influence* slide (9.E), remind the students that the entire unit on alcohol, cannabis, and other drugs in this Healthy Living course has been on the types of things that can influence teens' decisions about alcohol and other drugs.
- 2. Tell the students that many of the activities in the past few weeks actually included a fourth type of influence—the ways each of them as individuals can influence other people and maybe even things in their community. Remind them about the types of activities they completed under each of the three learning themes.
- 3. Based on the things they have done in class, ask the students to brainstorm a list of things they can do that potentially influence others. The list might include
 - informing others of drug-related risks
 - developing new ways of providing accurate information to teens
 - being aware of the risks and sharing their knowledge
 - getting involved when a friend seems to be having trouble
 - preventing an accident or injury
 - paying attention to the development of treatments in the news; writing letters to the editor
 - lobbying politicians
 - saving a life
- 4. Instead of brainstorming an inclusive list, keep the brainstorming to a minimum and ask each student to write down and submit their own personal list of how they can influence others. This can be used as an individual student assessment piece.

PREVENTION EDUCATION RESOURCE TOPICS

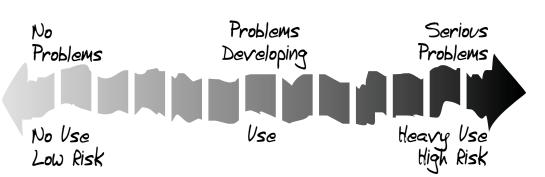
- Alcohol-Related High-Risk Behaviour
- Alcohol Poisoning
- The Risks of Cannabis Use
- The Risks of Using Hallucinogens with a Focus on Magic Mushrooms (Psilocybin)
- The Risks of Anabolic Steroids and Other Performance-Enhancing Drugs
- The Risks of Drinking and Other Drug Use during Pregnancy





DEGREES OF ALCOHOL AND OTHER DRUG USE RISK

The Risk Continuum



Adapted from the Ontario Ministry of Health, A Framework for the Response to Alcohol and Drug Problems in Ontario (1988).

WAYS OF RESPONDING TO A FRIEND

Interfering Enabling Helping



EMERGENCY STEPS—DRABC

Check for any ANGER

To you, to others, to the injured person

Check RESPONSE

Is the person conscious or unconscious?

Check A IRWAY

Is the airway clear of objects?

Is the airway open?

Check for REATHING

Is the chest rising and falling?

Can you hear the person's breath?

Can you feel the person's breath

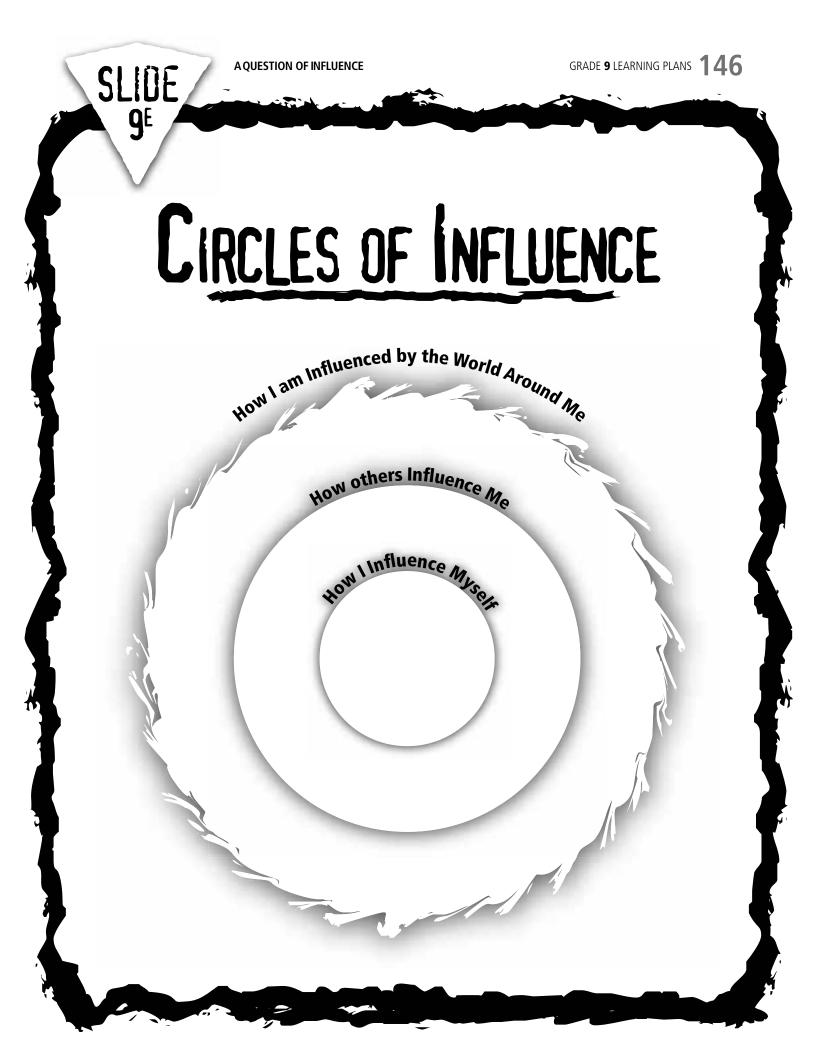
on your cheek?

Check IRCULATION

Are there any obvious signs of life, including any movement, swallowing, or breathing?

Can you see any colour in the skin on the face?

Can you feel a pulse?





ALCOHOL-RELATED HIGH-RISK BEHAVIOUR

- Fact sheet (get a copy from the teacher)
- The Alberta Alcohol and Drug Abuse Commission's teen-oriented website: www.zoot2.com/justthefacts/index.asp
- The Canadian Public Health Association's youth website to raise awareness about the harms associated with high-risk drinking. www.drinkingfacts.ca
- "Your Life, Your Choice". Interactive Canadian website on alcohol for 13- and 14year-olds: www.2learn.ca/currlinks/Health/E/ MainMenue/index.html
- The VS-based National Institute on Drugs and Alcohol's "Understanding Alcohol: Investigations in Biology and Behavior": http://science.education.nih.gov/Customers.nsf/ MSAlcohol?OpenForm
- "Nova Scotia Student Drug Use Survey 2007": www.gov.ns.ca/hpp/addictionPrevention.html



ALCOHOL POISONING

- "Alcohol Poisoning: How to Help a Drunk Friend" (University of California, Davis):

 http://healthcenter.ucdavis.edu/topics/
 alcoholpoisoning.html
- "College Drinking: Changing the Culture"
 (VS Task Force on College Drinking):
 http://www.collegedrinkingprevention.gov/
 OtherAlcoholInformation/factsAboutAlcoholPoisoning.
 aspx
- "Alcohol and Your Body" (Brown University):

 www.brown.edu/Student_Services/Health_
 Services/Health_Education/atod/alc_aayb.htm
- "Stop Alcohol Poisoning" Wallet Card (SAM Spady Foundation): http://www.samspadyfoundation.org/cards.html



THE RISKS OF CANNABIS USE

- Fact sheet (get a copy from the teacher)
- Health Canada's "Be Drug Wise" website and booklet "Straight Talk About Marijuana": www.drugwise.gc.ca
- The Alberta Alcohol and Drug Abuse Commission's teen-oriented website: www.zoot2.com/justthefacts/index.asp
- "Nova Scotia Student Drug Vse Survey 2007": www.gov.ns.ca/hpp/addictionPrevention.html



THE RISKS OF HALLUCINOGEN USE

Prevention Education Resource Research Starting Points Hallucinogens with a Focus on Magic Mushrooms (Psilocybin)

- Fact sheet (get a copy from the teacher)
- The Alberta Alcohol and Drug Abuse Commission's resource "Magic Mushrooms, the ABCs": http://corp.aadac.com/other_drugs/ the_basics_about_other_drugs/magic_mushrooms_ abcs.asp
- Nova Scotia Student Drug Vse Survey 2007: www.gov.ns.ca/hpp/addictionPrevention.html



THE RISKS OF USING ANABOLIC STEROIDS AND OTHER PERFORMANCE-ENHANCING DRUGS

- Fact sheet (get a copy from the teacher)
- The Canadian Health Network's pamphlet "Everyone else is using them... why not me?": Go to www.canadian-health-network.ca and search for "steroids"
- The Alberta Alcohol And Drug Abuse Commission's resource "Steroids, the ABCs": http://corp.aadac.com/other_drugs/the_basics_ about_other_drugs/steroids_abcs.asp
- Nova Scotia Student Drug Vse Survey 2007: www.gov.ns.ca/hpp/addictionPrevention.html



THE RISKS OF DRINKING AND OTHER DRUG USE DURING PREGNANCY

- Lesson Plans on Fetal Alcohol Spectrum
 Disorder for grades 8 and 9 (Porcupine
 Health Unit, Ontario): http://www.porcupinehu.
 on.ca/schools/school_health.html#FASD
- Health Canada website on fetal alcohol spectrum disorder: www.fas-saf.com
- Canadian Health Network article "Not Worth the Risk": Go to www.canadian-health-network.ca and search for "fetal alcohol syndrome"
- Nova Scotia Student Drug Use Survey 2007: www.gov.ns.ca/hpp/addictionPrevention.html
- The National Database of FASD and Use during Pregnancy Resources (Canadian Centre on Substance Abuse): WWW.ccsa.ca/fas/



PREVENTION EDUCATION RESOURCE RESEARCH & DEVELOPMENT GUIDELINES

Divide up the workload • Assign group members their roles or tasks.

Gather the facts

- Identify the substance and how it affects teenage users.
- Identify two or three "high-risk" behaviours that can occur when using the substance.
- Include a few statistics from the Nova Scotia Student Drug Use Survey 2007.

Set a priority

• Decide, from all that you've learned, what single message is the most important to share – and make sure you emphasize it.

Decide on a format

- Decide whether to produce a pamphlet, poster, PowerPoint presentation, or video.
- Decide whether to focus on presenting facts or busting myths.

Be credible

- Speak "to teens from teens".
- Include a short list of references in your resource.

Be creative

- Take a risk and do what you think needs to be done to have the message hit home.
- If your creative idea cannot be completed in the time available, write a description of what you think needs to be done to make the resource get noticed by teens.



WHEN A FRIEND NEEDS EMERGENCY TREATMENT SCENARIOS

Scenario

Fifteen-year-old Jasmine and her friends decide to skip the last day of school and go back to Jasmine's house. Jasmine's mother is at work. They decide to sample some of the rum from the liquor cabinet. One of Jasmine's friends drinks quite a bit more than the others and begins to vomit violently. The episodes of vomiting continue.

Scenario 2

Fifteen-year-old Allison is having a party at her house. Allison does not want things to get out of control while her parents are out, so she is not drinking or smoking any of the cannabis that her friends offer. She is in the back yard, where some of the kids have been smoking cannabis quite heavily. Two of the kids begin to push each other. One falls and lands on a broken beer bottle. When he gets up, he has a large piece of glass stuck in his hand.

Scenario 3

Fourteen-year-old Kiesha arrives home from playing basketball to find her older sister asleep on the living room floor. When Kiesha goes near, she sees an open, half-full bottle of vodka on the floor next to her sister and notices that she smells very strongly of alcohol. Kiesha's mom is out for an evening meeting and will not be back until much later.

Scenario 4

Fourteen-year-old Rob is at a party at a friend's house, and there are no adults at home. Some of the kids are drinking alcohol. One of Rob's friends has been drinking heavily. He stumbles outside and falls down on the pavement, hitting his head hard. He is conscious but bleeding quite heavily from the back of his head.

Scenario 5

Fourteen year-old Jamal is with a small group of friends at his parents' cottage. It is nine o'clock in the evening, and some of the kids have been drinking beer. One of the kids falls off the deck, hits her head and loses consciousness for a short time. She says she is okay except for a headache.

The first aid scenarios were inspired by the Australian resource School Health and Alcohol Harm Reduction Project Teacher's Manual (found in Phase Two, Lesson 15-Helping a Friend (2000)).





ANSWER KEY FOR SCENARIOS: CORRECT FIRST-AID PROCEDURES

Scenario One: Jasmine

First Aid:

- DRABC
- Contact parents; reassure and calm the person.
- Seek medical attention if
 - in doubt
 - the parents cannot be reached
 - there is a change in the appearance of the vomit, including the presence of blood
 - the person becomes drowsy
 - the person loses consciousness—the person requires urgent medical care (call 911)

Scenario Two: Allison

First Aid:

- DRABC
- Do not remove the object.
- Place clean padding around the object and secure with a bandage (not over the object).
- Contact parents.
- Calm and reassure the person.
- Seek medical attention (911) if
 - the bleeding cannot be controlled
 - the parents cannot be reached
 - in doubt

The first aid scenarios were inspired by the Australian resource School Health and Alcohol Harm Reduction Project Teacher's Manual (found in Phase Two, Lesson 15-Helping a Friend (2000)).



ANSWER KEY FOR SCENARIOS: CORRECT FIRST-AID PROCEDURES



Scenario Three: Kiesha

First Aid:

- DRABC
- Seek emergency medical assistance by calling 911.
- Contact parents.
- If breathing, place person in the recovery position and observe airway, breathing, and circulation (you are looking for signs of choking on vomit). If you are not sure how to do this, inform the paramedics on the phone and they will advise you.
- If not breathing, begin artificial respiration. If you are not sure how to do this, inform the paramedics on the phone and they will advise you.

Scenario 4: Rob

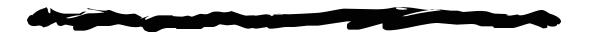
First Aid:

- DRABC
- Stop the bleeding.
- Pad the wound and bandage it with clean material.
- Phone 911. Urgent medical care is needed because bleeding from the head could indicate one of the following injuries:
 - fractured skull
 - significant blood loss
 - concussion

Scenario 5: Jamal

First Aid:

- DRABC
- Contact parent or take person home.
- Someone must stay with the person until parents arrive; a headache could be a sign of other head injuries.
- Seek medical aid if
 - parents cannot be contacted
 - headache gets worse
 - patient becomes drowsy
 - patient loses consciousness (call 911 immediately)
 - in doubt





THE PARTY SCENARIOS

A friend who is mixing alcohol and cannabis (minimum of two students)

Being offered "pills" along with alcohol (minimum of two students)

Sitting around the campfire and getting drunk (three or more students)

Someone passing out on the sidelines (minimum of two students)

Someone wanting to drive others home after drinking (three or more students)

A fight breaking out (three or more students)

Physical injury (minimum of two students)

Arrival of the police (minimum of two students)

Unplanned or unwanted sex when you have had too much to drink⁴ (two students)

⁴This may be a difficult and controversial scenario to handle, yet the survey results found in the Nova Scotia Student Drug Use 2002 and 2007 Technical Reports indicate that it is a realistic scenario. As a teacher familiar with the students in this class, you may choose to remove this scenario from the roleplay options and raise it as a discussion topic instead.



Insite—North America's first legal supervised injection service

In September 2003, Vancouver became home to North America's first legal supervised injection site (SIS). The site is located in Vancouver's Downtown East Side, one of Canada's poorest neighbourhoods, and home to close to 5,000 injection drug users (IDU). The site operates from 10:00 a.m. to 4:00 a.m., seven days a week.

What is it?

The SIS, known as Insite, is a clean, safe environment where users can inject their own drugs under the supervision of clinical staff. Nurses and counsellors provide on-site access and referral to addictions treatment services, primary health care, and mental health providers, as well as first aid and wound care.

To operate legally, Health Canada granted organizers an exemption to Canada's drug laws (the Controlled Drugs and Substances Act), which make it illegal to possess these drugs, and provided around \$1.5 million to support the scientific research pilot project. The provincial government in BC has also provided \$2 million to fund the program. It has been established in partnership with the City of Vancouver, the Vancouver Police Department, and local community groups.

Insite is being studied to determine whether it will reduce the harm associated with injection drug use to individuals (particularly overdose, HIV, and hepatitis) and the community (particularly public injecting). The Downtown East Side has significant health issues relating to infectious diseases and substance misuse. Over the course of the next three years, researchers will examine if it reduces overdoses, improves the health of injection drug users, increases their appropriate use of health and social services, and reduces the health, social, legal, and incarceration costs associated with injection drug use.

How does it work?

Clients who enter the SIS are assessed and led through a waiting area to a 12-seat injection room where they can inject their own drugs under the supervision of trained medical staff. They will have access to clean injection equipment including spoons, tourniquets, and water, aimed at reducing the spread of infectious diseases.

After injecting, they move to a post-injection room where, if appropriate, staff can connect clients with other on-site services. These include primary care for the treatment of wounds, abscesses, and other infections; addiction counselling and peer support; and referral to treatment services such as withdrawal management,



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opiate replacement therapy, and other services.

Along with the on-site coordinator, two registered nurses are present at all times with an addiction counsellor and physician support available on-call. Program assistants help greet and register people, as well as provide peer contact to encourage safe injection practices and show drug users how to use the site.

The SIS can accommodate up to several hundred injections each day as part of the research pilot project, although the experience at similar sites in Australia and Europe suggest the user community will take a while to accept the concept of a legal injection site.



Forcing a woman to take substance abuse treatment to protect her child (the Case of Ms. G)

The situation

"Ms. G" was a 23-year-old woman from Winnipeg who was ordered into treatment by the provincial court when five months pregnant with her fourth child. She was addicted to glue sniffing, which could have damaged the nervous system of the developing fetus. As a result of her addiction, two of her previous children were born permanently disabled and are permanent wards of the state. "Ms. G" was unable or unwilling to stop sniffing glue on her own. A provincial court judge ordered that Ms. G be placed in the custody of the provincial government child and family services and held in a health centre for treatment until the birth of her child.

At the same time, the government child and family services department asked the court for the power to order substance-using pregnant women into treatment, even against their will, and looked to the Supreme Court, the highest court, in the land to authorize it.

The question before the Supreme Court was whether the state has the right to force pregnant substance users into treatment programs.

The concern

Experts in women's health were concerned that forced treatment would result in women at risk steering clear of services, fearing they and their children will be apprehended. This would have the effect of driving them underground and make it less likely that they would seek health care for themselves and their unborn children. They feared that forced treatment laws would be applied unfairly. Studies from other countries show the majority of women confined against their will are poor and/or members of racial minorities. They considered this type of law-and-order response to be a quick fix that fails to deal with the social causes of women's substance use, including violence, sexual abuse, poverty, low self-esteem, and lack of control.

The Decision

In the end, seven out of nine Supreme Court Judges said that the court does not have the right to force pregnant substance users into treatment programs.

Recommended Practices

Women who are heavy users of substances during pregnancy almost always live





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in difficult circumstances (that is, they have often experienced violence, poverty, physical or sexual abuse, and mental health problems). What works best in helping a woman in this situation is to show respect and not judge her actions. It means helping a woman take small steps to improve her own health and the health of her unborn child. It may be that she cannot stop using substances, but she may be able to cut back and improve her diet or get out of an abusive relationship, which will improve her own health and that of her child.



North American Opiate Medication Initiative (NAOMI) Project (North America's first project to study the effectiveness of prescribing heroin to addicted people)

The Problem

In Canada, there are approximately 60,000 to 90,000 people addicted to illegal opiates such as heroin. Opiate addiction is linked to overdose, infection risks, loss of regular social functioning, drug-related crime, and extensive costs to the public health, welfare, and criminal justice systems. Scientists estimate that the cost of untreated heroin addiction is more than \$45,000 per person per year. While other treatment is effective in many cases, some long-term, higher-risk patients do not respond to or benefit from this standard treatment.

What is NAOMI?

NAOMI (North American Opiate Medication Initiative) is a research project to determine whether providing injectable, pharmaceutical-grade heroin is more effective than standard treatment in attracting, holding onto, and helping chronic, opiate-dependent injection drug users (IDUs) who have not been helped by regular forms of treatment.

The NAOMI study is intended to see whether this form of treatment will be more effective and will also improve the health and quality of life of injection drug users, by reducing their use of street drugs, reducing homelessness, and decreasing interactions with the criminal justice system. The researchers will also determine whether they can find a way of attracting and keeping drug users in treatment so that they can hook them up with other parts of the health-care system, social support, and counselling.

The research study will take place in three cities in Canada: Toronto (Centre for Addiction and Mental Health and the University of Toronto), Vancouver (University of British Columbia), and Montreal (Université de Montréal).

How it works

According to program guidelines, drug users must be over 25, have been heroin addicts for more than five years, and previously have tried standard treatment for heroin addiction. Persons on probation, facing criminal charges, or with severe mental illness will not be able to participate.

During the study, those selected to receive heroin will visit the clinic up to three





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times a day, seven days a week, where they will receive prescribed doses of heroin under a physician's supervision. Participants will be asked to remain at the clinic for a half hour after each injection. Available at the clinic will be social workers, addiction counsellors, and other social support staff, who will work with participants to achieve a more stable lifestyle and, ultimately, wean them from opiate addiction.

At the study's end, participants will have a three-month transition period to wean them off heroin. They will then have the option of going into detox, going into standard treatment, or going back to the streets to feed their habit.