



Australian Government
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Science and Training

L.E.A.D

Leading Education About Drugs

Student Participatory Approaches

Support Materials for School Drug Education Forums

L.E.A.D

Leading Education About Drugs

Student Participatory Approaches

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Foreword

The Australian Government is committed to fighting drug abuse. Since 1997, the Australian Government has allocated more than \$1 billion to its Tough on Drugs strategy for a range of supply, demand and harm reduction measures. This commitment represents the largest single initiative ever undertaken in Australia to reduce the supply of, and demand for, illicit drugs. It brings together the Australian Government's law enforcement, health, education and family portfolios, along with community groups and organisations to pursue the reduction of, and ultimately abstinence from, illicit drugs.

The Australian Government, through its commitment to supporting schools to deliver effective drug education to their students, is pleased to provide the Leading Education About Drugs (LEAD): Student Participatory Approaches resource to support schools and their communities to conduct successful drug education forums using peer participation strategies. These forums aim to help develop young people's attitudes and knowledge in relation to drug issues. Parents and school communities clearly have a role to play in combating the growing threat to our school students of drug use.

The LEAD resource assists schools in conducting forums by providing practical, hands-on ideas for implementing student participation in drug education; suggestions for using interactive and experiential learning approaches; guiding principles; planning points; sample agendas and outlines of activities for schools to use.

I commend this valuable, user-friendly resource to you. It will support teachers to introduce health promotion activities aimed at developing each student's resilience to deal with drug related issues in a safe and successful manner. In addition LEAD will foster shared understandings on the consequences of drug use on health, the family and society in order to encourage young people to make healthy lifestyle choices, and say "No" to drugs.



Julie Bishop
May 2006

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About this resource

This resource provides guidance to schools to assist them in preparing students for peer leadership roles in the conduct of drug education forums.

The materials are designed to assist in equipping students to conduct drug education forums for peers, for younger students or for multi-age groups or public forums involving parents, agencies and community members. The materials can also be used to inform those designing creative approaches to health promotion involving arts or cultural activities. The guiding principles and approaches to preparing students have application both to the specific activities housed within this resource and to those devising their own events.

The resource:

- is written for the school teacher/organiser as the key reader and leader of the forum;
- is self-contained so the teacher/organiser can pick up the materials and use them without requiring access to additional materials;
- contains easily reproducible materials in the form of handouts for students, staff or parents.

What is the purpose of this resource?

The purpose of this resource is to support teachers in utilising the active participation of students in health promotion activities which focus on preventing or minimizing drug related harm.

What is in this resource?

This resource provides a range of practical advice, grouped into the following sections:

Section 1: Guiding Principles

- Using evidence-based principles to guide the selection of drug education activities
- Evidence-based principles to guide the use of young people as peer educators

Section 2: Training peer facilitators

- How to select and train peer facilitators
- Training activities

Section 3: Choosing an agenda

- Including sample agendas

Section 4: Smorgasbord of activities

- A range of activities for primary and secondary settings

Section 5: How to organise a forum

- A focus on management and logistics
 - o including sample invitations, checklists for planning

Section 6: Evaluation and feedback

- Sample evaluation and feedback tools

The resource provides activities which model

- the use of interactive, inclusive and engaging learning strategies

- activities which foster optimism and efficacy in relation to problem-prediction, problem-solving, and help-seeking
- respect for and responsiveness to the needs of the diverse school communities served by schools across Australia
- clarity in relation to the key points and take out messages at the heart of the activities; and consistency with the National School Drug Education Strategy

Section 1: Guiding principles

Evidence-based approaches to drug education

It is important that the teachers leading the student involvement in educating peers and community members about drugs are familiar with evidence-based approaches to drug education. Teachers should be well informed about their state, territory or system drug education programmes and initiatives. In addition, these teachers must be able to communicate the following key messages to student leaders and facilitators.

Message 1: Using an evidence-based approach

Many research studies have investigated whether drug education programmes reduce the likelihood of young people using drugs. This research indicated that whilst some education programmes have demonstrated a positive effect in preventing harmful drug use, others seem to make no difference, and others again have been associated with an increased likelihood of young people using drugs. We need to be guided by these studies and make sure our efforts to have students make safe choices are not producing the wrong results. This is called taking an evidence-based approach. Some of the key messages about how to make drug education effective are below. They should be kept in mind when choosing or modifying activities.

Message 2: Knowledge is not enough

Having accurate knowledge about drugs and their effects is important but it is not enough to keep people from taking risks with drugs. We need also to consider the pressures and influences that can affect people's choices and give people opportunities to plan and develop the skills they need to help them handle different decisions and pressures.

Message 3: Provide accurate information

Research shows that young people want accurate information in relation to drugs. Sometimes scare tactics, which aim to highlight the danger associated with an activity, can also make the activity seem more attractive – a way to rebel or to add excitement to life. Accurate information is essential. Good education leads to people thinking through their choices.

Message 4: Watch you don't normalise or glamorise risky behaviours

It is important not to create the impression that most young people use drugs. This can happen if we talk about drug use as if we assume everyone is doing it. This assumption can put pressure on people to take up such activities in order to fit what they perceive to be a norm. Examine the statistics – particularly those relating to 'regular use'. They show that 83.5% of 16-17 year olds have never smoked cigarettes; 75% of 12-19 year olds have never tried cannabis and 19.4% of 16-17 year olds have not had a full serve of alcohol. 29% of 14-19 years group abstain from alcohol and 31.5% drink at low levels of risk for short term harm. Around 11% of 14-19 year olds drink at high risk levels in relation to short term harms. Be mindful of this when preparing dramatic scenarios. Avoid casting a disproportionate number of the characters as risk-takers. Make sure you don't portray the risk takers as the most glamorous or interesting characters.

Using ex-users as guest speakers can also glamorise high-risk behaviour. An ex-user's testimonial can inadvertently send the message – 'I took all those risks, but look – I survived, and now I warrant special attention.'

Message 5: Think about safety

Young people need to be asked to look at what the risks or harms of certain behaviours may be, and to think about and plan for how best to make safe choices.

Message 6: Strategies have to match the person and the circumstances

It is important to develop the skills and strategies needed to both prevent and reduce any harm that has occurred as a result of someone's drug use behaviour. When developing strategies it is best to attune them to the circumstances, people and contexts that are likely to occur.

Message 7: Interactive strategies work best

It is best to use activities that actively engage and involve the participants. They need to be mixing, talking, thinking and enjoying themselves.

Message 8: Tailor the programme to suit the needs and interests of the target audience

In selecting the activities for a particular group it is important to consider carefully their needs and interests. This includes choosing activities that are suitable for the age and developmental stage of the target group of young people. It also means working with sensitivity to the cultural and religious beliefs of those in the community. Avoid using scenarios designed for teenagers when working with younger primary students.

The drug education goals promoted in this resource include:

1. providing students with relevant and accurate information about drugs;
2. helping students to understand that most people of their age and most adults in the population choose not to use drugs or not to use in a way that will cause them harm;
3. developing students' resilience and their personal, social and cognitive skills;
4. enhancing students' capacity to deal with drug-related issues in a variety of contexts through a focus on the following skills:
 - Assessing possible risks and harms in situations involving drug use;
 - Generating strategies to prevent or deal with potential harms related to situations where drugs are used;
 - Problem-solving and generating options;
 - Communicating drug-related decisions and concerns;
 - Help-seeking in situations involving substance use.

Prevalence of drug use in the youth population

Alcohol is the most commonly used drug by the 12–17 years age group. Most students do not smoke cigarettes, and though cannabis is the most commonly used of the illicit drugs, most young people do not use cannabis. Use of other illicit drugs is very rare amongst school-age youth.

The following data about prevalence of drug use in the youth population is sourced from Australian Institute of Health and Welfare 2005, *2004 National Drug Strategy Household Survey: First Results*. Canberra: AIHW (Drug Statistics Series No. 13) (available on www.aihw.gov.au/publications or www.druginfo.adf.org).

Alcohol

Alcohol is the most commonly used of the recreational drugs. It should be noted, however, that according to the *2004 National Drug Strategy Household Survey* (published in 2005) 64.8% of 12–15 year olds have never had a full serve of alcohol. In the 16–17 years age group, 19.4% have not had their own drink, and this is so for 11.6% of 18–19 year olds. The majority of young people who do drink are less than weekly drinkers. Of 12–15 year olds, 29.1% are less than weekly drinkers, and this proportion is 55.2% for 16–17 year olds and 40.6% for 18–19 year olds. While frequency of consumption is one concern, amount consumed is also relevant. In the 14–19 years group 29% abstain from drinking, 61.1% drink at low levels of risk for long-term harm, 6.6% drink at risky levels for long-term harm and 3.4% drink at high risk levels of harm in the long term.

More concerning are patterns relating to drinking at levels of risk for short-term harm. In the 14–19 years group (with 29% abstaining) 31.5% drink at low levels of risk for short-term harm, 11.9% drink at risky levels for short-term harm and 10.7% drink at high-risk levels for short-term harms. Males in the 20–19 years age group (17.4%) were the most likely group to drink at high-risk levels on a weekly basis.

Short-term risk of harm as defined by the National Health and Medical Research Council (NHMRC)

Risk in the short term is considered to be that associated with given levels of drinking on a single day:

- Low risk in the short term is defined as 6 standard drinks in a day for males and 4 per day for females.
- Risky use in the short term is defined as 7–10 standard drinks on one day for males and 5–6 per day for females.
- High-risk use in the short term is defined as 11 or more standard drinks per day for males and 7 or more per day for females.
- The status of non-drinker is based on not having consumed alcohol in the last 12 months.

Long-term risk of harm as defined by the NHMRC

Risk in the long term is considered to be that associated with regular daily patterns of drinking:

- Low risk in the long term is defined as up to 28 standard drinks in a week for males and up to 14 per week for females.
- Risky use in the long term is defined as up to 29–42 standard drinks in a week for males and up to 15–28 per week for females.
- High-risk in the long term is defined as 43 or more standard drinks in a week for males and 15 or more per week for females.

Cigarettes

Most young people do not smoke cigarettes. The 2004 statistics indicated that 95.7% of 12–15 year olds had never smoked, that 83.5% of 16–17 year olds had never smoked and that 73.7 % of 18–19 year olds had never smoked.

The rates for daily smoking (as opposed to weekly or less than weekly smoking) are very low for younger secondary students. Only 2.3% of 12–15 year olds, 10.9% of 16–17 year olds and 16.9% of 18–19 year olds were daily smokers. In 2004, of those over 14 who had ever smoked, the average age for daily smokers having their first cigarette was 15.3 years old for males and 17.2 years old for females. The commencement of daily smoking averaged at 17.9 years for males and 19.1 years for females. Smoking rates peak in the 20–29 age group with 23.5% smoking daily.

Smoking rates do vary between States and Territories, with the 2004 data showing that smoking in the 14–19 years group ranged from 7.1% in South Australia, 8.5% in Western Australia, 10.3% in Victoria, 10.9% in New South Wales, 11.6% in Queensland, 17% in ACT, 17.2% in Tasmania to 19.2% in Northern Territory.

Cannabis

Cannabis is the most commonly used of the illicit drugs but it should be noted that most (around 75%) of young people in the 12–19 years age group have never used cannabis, and only 17.9% had used in the last 12 months. Between 2001 and 2004 there was a decrease in the proportion of 14–19 year olds who had used an illicit drug. In the 14–19 years age group, use of cannabis by males declined from 35% in 1998 to 26.6% in 2001, with a further drop to 18.4% in 2004; and for females the drop was from 34.2% in 1998 to 22.6% in 2001 and 17.4% in 2004.

In the 12–15 years age group, approximately 1 in 20 (5.2%) had used cannabis in the last 12 months. In the 16–17 years group, approximately 1 in 5 (18%) had used and in the 18–19 years group 25% had used cannabis in the last 12 months.

Other illicit drugs

Use also declined for most of the other illicit drugs, including heroin, amphetamines and ecstasy. Most young people in the 12–19 years group had not used an illicit drug other than cannabis. Across the last 12 months, approximately 3% of 12–19 year olds had used ecstasy, meth/amphetamines (speed), or painkillers/analgesics for non-medical purposes. For all other substances (e.g. heroin, ketamine, inhalants), less than 1% of 12–19 year olds had used the substance in the preceding 12 months.

What should students know about drugs before taking a leadership role in educating peers or community members about drugs?

Students should be able to:

- identify a range of health and social risks associated with drinking alcohol, smoking cigarettes and using cannabis;
- identify that the reasons for drug use vary and the risks associated with drug use also vary depending on the type of drug and the circumstances of use;
- outline a number of strategies to prevent, minimise or address harm in situations involving these drugs;
- challenge myths such as:
 - o people sober up if they drink coffee
 - o cannabis is natural and can't be harmful
 - o light cigarettes are not as bad for you
 - o smoking doesn't cause harm in young people
 - o everybody is doing it;
- identify a range of influences/reasons affecting choices about drug use, e.g. knowledge about the drug and its possible effects, peer attitudes, family beliefs, legal status, concerns about safety, wanting to look good or fit in;
- identify drug-related situations where adult, emergency or medical help is needed; and
- list some possible sources of help for someone with a possible drug or emotional problem, e.g. trusted adults (teachers, parents, school counsellor, nurse or welfare staff), help lines, drug agencies, GP, health centres, youth centres.

What will assist students to develop this knowledge?

Teachers should ensure that the peer leaders or peer facilitators:

- engage first in the drug education curriculum provided in this resource (or its equivalent) under the leadership of an experienced teacher who is familiar with evidence-based approaches to drug education;
- participate in the activities themselves before leading others through these activities; and
- participate in the facilitator skills exercises provided in this resource (or their equivalent).

What should be expected of peer facilitators?

Teachers preparing students to take on the role of peer facilitators should set out to ensure that the students:

- understand that their role is to facilitate other's learning;
- understand the purpose and the method of the activity they are leading;

- understand the distinction between facts and opinions;
- are prepared to lead in a way that promotes the social health of participants;
- are prepared to maintain the standards and agreements expected as part of the school's code of conduct;
- agree to maintain a standard of privacy and non-disclosure in relation to their own or others' drug use or non-use behaviours; and
- understand the importance of referring on to an appropriate adult any concerns relating to their own or another's wellbeing.

The pedagogical approach – Rich tasks

The learning activities have been designed to suit a wide range of learning styles, employing the multiple intelligences (Gardner):

- linguistic – students engage in dialogue;
- interpersonal – students work co-operatively in groups and explore social and relational issues;
- intrapersonal – students play out and empathise with key characters, reflect on what it might be like to be in similar situations, and generate advice for the character;
- spatial – students estimate amounts and measure and pour standard drinks;
- bodily-kinaesthetic – students participate in activities which ask for enactment of a position or emotion; and
- logical –mathematical – students devise linear flows of action and consequence and manage the breakdown of tasks and assemblage of individual presentations into a whole.

Why Youth Participation?

There is a growing body of evidence that promotes a peer participatory approach to programming and implementation of health and wellbeing educational programmes.

The basic assumptions behind youth participation models are that:

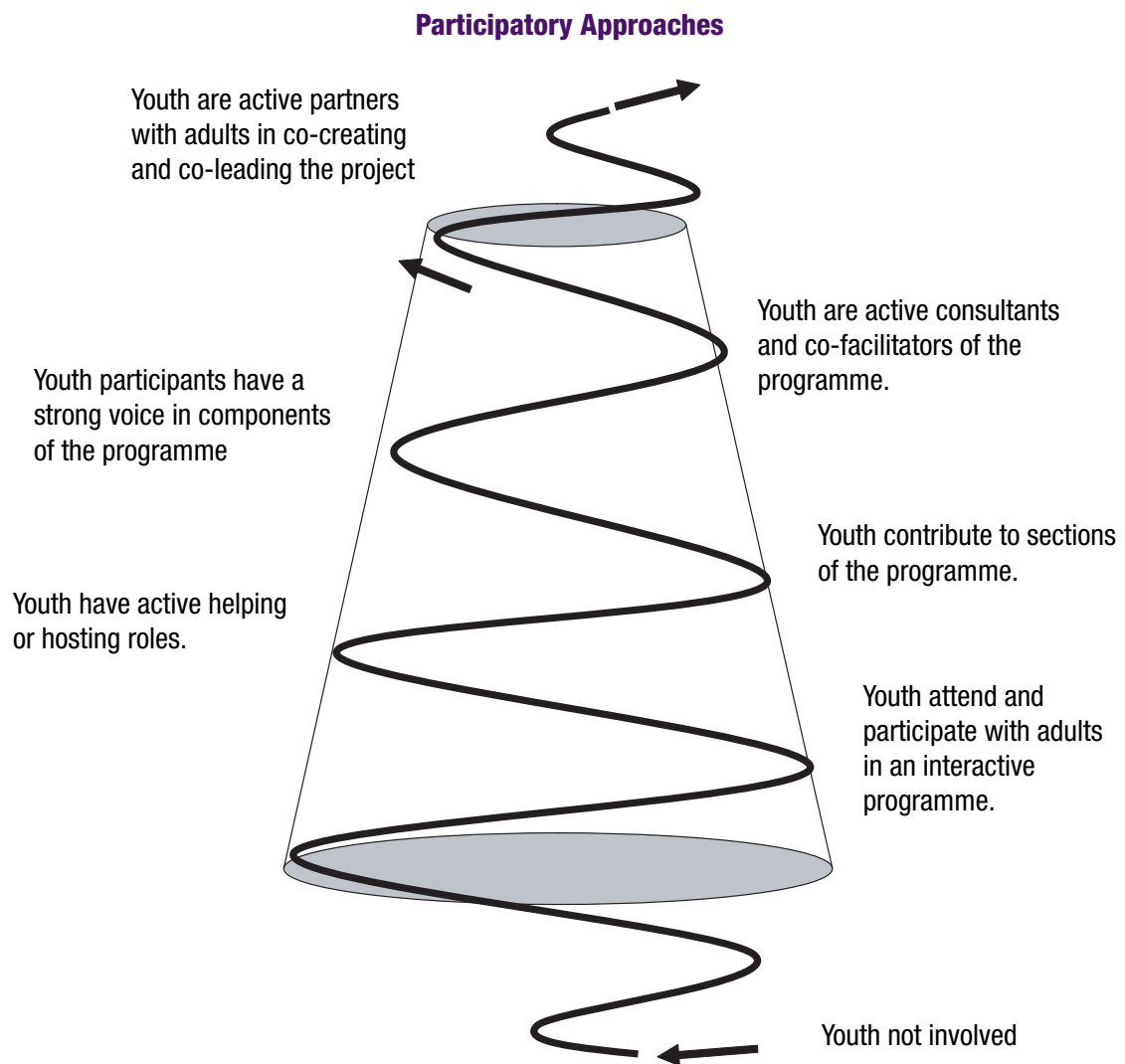
- active participation enhances learning and positive development;
- effective learning occurs when young people are recognised as active partners in the process; and
- young people should be viewed as a resource rather than simply as recipients of the education experience;
- students can do important and valuable work and that they have skills, expertise and knowledge and a valuable perspective to contribute to their community; and
- schools are in a unique position to provide the community with a valuable model of working productively with young people.

Benefits of a Participatory Approach

The benefits of a participatory approach have been demonstrated to include:

- development of young people's self-esteem, leadership and communication skills;
- development of citizenship in the school community;
- increase in young people's sense of connectedness to and pride in their school and community;
- that young people are more likely to see themselves and their peers as valuable resources;
- active and productive student involvement promotes optimistic thinking and challenges negative youth stereotypes;

- that young people are more likely to become active in other areas of their lives such as community, school life, work, services and their individual interests with increased leadership capacity;
- the promotion of pro-social attitudes and contributing to the development of a safe and supportive school environment.



Working Across the Youth Participation Spectrum

- Some schools will have greater experience in positioning students in peer facilitation or leadership roles. When planning a participatory project, schools should consider the spectrum of peer leadership and participation that is possible and choose a level that is realistic given the school's history, circumstances and current practices.
- Valuable peer participatory programmes provide students with the opportunity to lead or contribute to the design and implementation of health promotion and education initiatives.
- Some young people may not want, or feel unready to take on responsibility for leadership or peer facilitation. Maintain both high expectations and support for students, whilst also being cognizant of the range of readiness and capacity that will be exhibited in any group.
- Participatory programmes can offer varying levels of participation within the one initiative. This allows for a range of roles and different levels of responsibility to be available to the young people involved.

Section 2: Preparing students to lead activities

Peer leaders work under the supervision, support and leadership of their teachers. The teacher is ultimately responsible for the process of training and managing peer leaders and exercises the duty of supervision and care that would ordinarily be required of them.

Most teachers are aware of potential challenges arising as a result of peer participation approaches. Throughout the resource there are suggested strategies to help avoid negative outcomes. In particular, these are covered in the following sections: Guiding Principles and Preparing Students to Lead Activities.

Who should be involved as peer leaders?

When leadership opportunities are only provided for a select few, a hidden message can be sent to students that only the elite can be trusted to or are capable of contributing to others. When participation is broad and inclusive, a very different message is sent. Hence it is important to look for ways to involve as many as possible in leadership opportunities. Teachers and students can work together to decide how best to allocate the different tasks and roles associated with the initiative. Agreements, expectations and standards should be made clear from the start. The teacher could facilitate discussion with the students around appropriate behaviour standards and responsibility, coming to an agreement on acceptable standards..

This resource is designed to equip teachers to involve students in a variety of roles that provide students with an active voice and role in educating themselves and others. Those schools with a strong commitment to participatory pedagogies and to the involvement of students as leaders will see this work as a logical extension of their current activity.

The spectrum of student participation offered in this resource is captured in the diagram Participatory Approaches (see page 5). What can be noted is that some students involved in the drug education event may only participate in activities run by others, engaging with others through the interactive curriculum provided. Others may be involved in helping with management, catering, or publicity. Others again may participate as facilitators or as partners or consultants on the organising committee. Each of these forms of participation is valid and educationally sound.

Equally, the event itself may be located somewhere within the spectrum of participatory approaches. Some schools will involve students at each layer of activity. Others will invite parents and students into participation with each other only within the activities themselves. Over time, these schools may choose to move towards heightening the level of responsibility shared with students.

What does the school need to provide to support the participation of students in the leadership of drug education activities?

Ideally any drug education programme occurs within a broader school-wide approach to promoting wellbeing and learning. This should include a leadership team willing to champion youth participation and school-wide participation in health promotion activities. Students will work under the leadership of a designated staff member or staff team. The project should be identified to teachers, parents and students as both a health promotion and an educational process. Those involved will require access to spaces, materials, resources and equipment and will need acknowledgment of the significant commitment of time, skill and personal energy that such endeavours entail.

The students involved may be volunteers, participating in an extra-curricular programme; they may be designated leaders, such as captains or student representatives; or they may be a class such as a health class or leadership class, engaging in a programme which is scheduled into the timetable. There are different challenges associated with working within extra-curricular and in-curricular modes. If working in an extra-curricular mode, there is likely to be a significant demand on the teachers(s) leading the project as they may have limited access to the students and may be carrying the project as super-abundant to their workload. In this case, they need the active support of the school administration and a welfare team in the school.

Once the project is part of a curriculum with its own location in the timetable, the school has in a sense legitimised the endeavour. However, if students are to move beyond their class to engage in leading others in drug education activities, they too will need a level of leadership and school-wide support to facilitate access to other students, classes or the broader community.

How can the school assist students to develop a sense of ownership and responsibility?

Ideally, the students co-create the sense of purpose surrounding the programme. There are a number of ways in which this can be done:

- Students choose the focus, the nature of the event and the target audience;
- Students (given that the audience and the objective of the event has already been set) choose the activities and the form that programme will take;
- Students allocate and take on tasks across the domains of management, catering, public relations, entertainment as well as facilitation;
- Students engage in dialogue about what they can and will do to make the event work well;
- Students carry out tasks and meet regularly to review progress, solve problems and re-steer directions; and
- Students meet after the event to review and evaluate the process.

What should be expected of peer facilitators?

Teachers preparing students to take on the role of facilitators or leaders of drug education activities should set out to equip the students to:

- Understand that their role is to use the activities to facilitate other's learning and thinking
 - o The Facilitator Skills Checklist provided below is a useful tool to guide feedback and discussion around facilitation skills. Students should also sample the activities as part of preparing to lead them. After trying an activity, ask students to identify the skills and stance needed to run the activity well. Give them opportunities to practise leading the activity and to get feedback from the teacher and their peers.
- Lead in a way that promotes the social health of participants (helping to maintain a positive, respectful and inclusive environment, avoiding put downs and stigmatising remarks)
 - o Use the Supporting Participation Checklist to guide a discussion about promoting a positive group environment. The coaching boxes distributed throughout the activities also provide good prompts for the facilitator about how to be mindful of the social health of the group. Read these through with the students and talk about how to implement this advice. The Facilitator Skills Checklist also contains a checklist of skills associated with promoting a positive and inclusive approach.
- Maintain the standards and agreements expected as part of the school's code of conduct
 - o Use the Question of Standards checklist provided below to guide the process of developing agreements and expectations with the students.
- Understand the purpose and the method of the activity they are leading
 - o Use the Understanding Evidence-Based Approaches tool to assist you to inform students about the broader purpose and design of the activities. Students need to be informed about why a certain approach is taken.

- o The purpose of each activity is clearly outlined in this resource. Draw this to the students' attention. If devising your own activities be sure to name the purpose of the activity and question just how the method will help to work towards the purpose. If you do not see an alignment between purpose and method, draw this to the students' attention. Then have a design or problem-solving conversation about how to best work towards the chosen goal.
- Understand the distinction between facts and opinions
 - o Use the information-based activities to develop the students' knowledge. Have students do the quizzes and myth-buster activities to test each other's knowledge. Give them a chance to practice explaining what they know.
- Maintain a standard of privacy and non-disclosure in relation to their own or others' drug use or non-use behaviours
 - o Develop an agreement about not revealing one's own behaviours (See the Question of Standards activity).
 - o Use the sample Privacy Codes text as a way of modelling this for the students. Have them practise explaining why people will not be asked to share their own personal stories. Practice the protective interrupting response used when the facilitator senses that a significant breach of privacy may occur.
- Understand the importance of referring on any concerns that arise regarding their own or someone else's wellbeing
 - o In the preparation process raise with students the possibility that in the process of leading one of the activities, or after the event, they may be told something or come to suspect something which has them worrying about someone else's welfare or safety. Make it clear that they should pass on this concern to the teacher (or other adults as identified in your school community). Their job is not to try and solve the problem. Use a sampling of the Help-Seeking activity (see Section 4, Activity No. VV Help-Seeking – A Friend in Need) to prompt this discussion.

Facilitation Tools

The following tools are provided to assist in the task of preparing students to facilitate drug education activities with groups of peers or with other members of the school community. The ideal preparation includes engaging students first as participants in the activities. (Use a broad selection of the activities provided in Section 4 of this resource.) This will stimulate the development of their knowledge, skills and thinking on the issues they will raise with others. An additional focus on the role and skills of the facilitator will assist in preparing them to lead the activity.

Understanding the need to be guided by evidence-based approaches to drug education

The teacher has an important role to play in ensuring that there is an alignment between the health promotion goals of the drug education event and the strategies and activities that are chosen to work towards those goals. It is important to brief those involved in contributing to the programme before they start designing scripting or rehearsing activities. Common needs are for the students to understand the importance of taking care to avoid glamorising or normalising high-risk use patterns. It can seem easier to command audience attention and engagement by providing a 'horror' story. Let students know that the real challenge is to get participants to engage in deep thinking rather than simply to react to a story. The tools below can be used to assist in explaining some of the key current understandings about effective drug education. These messages can also be emphasised by focusing on the purpose of the activities.

Tool: Understanding Evidence-based Approaches to Drug Education

Message 1: Using an evidence-based approach to drug education

Many research studies have investigated the effect of drug education programmes on young people's likelihood of using drugs. Some education programmes seem to make no difference, others have led to young people being more likely to use drugs and others again have been shown to have a positive effect in preventing harmful drug use. We need to be guided by what has been learnt from these studies and make sure our efforts don't produce the wrong results. This is called taking an evidence-based approach. Some of the key messages about how to make drug education effective are below. They should be kept in mind when choosing or modifying activities.

Message 2: Knowledge is not enough

Having accurate knowledge about drugs and their effects is important but it is not enough to keep people from taking risks with drugs. We need also to look at the pressures and influences that can affect people's choices and give people opportunities to plan and develop the skills they need to help them handle different decisions and pressures. So – it is important to do more than provide information.

Message 3: Provide accurate information

Research shows that young people want accurate information in relation to drugs. Sometimes scare tactics, which aim to highlight the danger associated with an activity, can also make the activity seem more attractive – a way to rebel or to add excitement to life. Accurate information is essential. Good education leads to people thinking through their choices.

Message 4: Watch you don't normalise or glamorise risky behaviours

It is important not to create the impression that most young people use drugs. This can happen if we talk about drug use as if we assume everyone is doing it. This assumption can put pressure on people to take up such activities in order to fit what they perceive to be a norm. Examine the statistics – particularly those relating to 'regular use'. They show that 83.5% of 16–17 year olds have never smoked cigarettes; 75% of 12–19 year olds have never tried cannabis and 19.4% of 16–17 year olds have not had a full serve of alcohol. 29% of 14–19 years group abstain from alcohol and 31.5% drink at low levels of risk for short term harm. Around 11% of 14–19 year olds drink at high risk levels in relation to short term harms. Be mindful of this when preparing dramatic scenarios. Avoid casting a disproportionate number of the characters as risk-takers. Make sure you don't portray the risk takers as the most glamorous or interesting characters. Using ex-users as guest speakers can also glamorise high-risk behaviour. An ex-user's testimonial can inadvertently send the message – 'I took all those risks, but look – I survived, and now I warrant special attention.'

Message 5: Think about safety

Young people need to be asked to look at what the risks or harms of certain behaviours may be, and to think about and plan for how best to make safe choices.

Message 6: Strategies have to match the person and the circumstances

It is important to develop the skills and strategies needed to both prevent and reduce any harm that has occurred as a result of someone's drug use behaviour. When developing strategies it is best to attune them to the circumstances, people and contexts that are likely to occur.

Message 7: Interactive strategies work best

It is best to use activities that actively engage and involve the participants. They need to be mixing, talking and thinking and enjoying themselves.

Message 8: Tailor the programme to suit the needs and interests of the target audience

In choosing activities for a particular group it is important to consider their needs and interests. This includes choosing activities that are suitable for the age group of young people. It also means working with sensitivity to the cultural and religious beliefs of those in the community. Avoid using scenarios designed for teenagers when working with younger primary students.

Knowledge about Drugs

It is important to clarify what student facilitators should know about the relevant drugs before taking a leadership role in educating peers or community members about these drugs. Rather than assuming a level of general knowledge, make sure that the students engage with the information-based activities provided in this resource (or their equivalent).

As a result of participating in the drug education activities, students should have acquired a good working knowledge about the drugs that will be the focus of the education event. They should understand the distinction between fact and opinion and know that when they don't know something it is appropriate to say so and to identify the question as one that should be referred to someone with greater experience. Following participation in the information-based activities, ask students to complete the Can I Do This? Self-Evaluation provided below. This tool will assist in making clear what is needed, and will guide review of any areas in which they may need additional support or preparation.

Tool: Can I do this?			
Self –assessment for student facilitator	Yes	No	Not Sure
Name a number of a health and social risks associated with drinking alcohol, smoking cigarettes and using cannabis.			
Understand that a number of factors can contribute to the risks associated with using a drug, including: amount taken, frequency of use, context in which the drug is used, who is using it, and reasons for use.			
Describe a number of strategies to prevent, minimise or address harm in situations involving cigarettes, alcohol or cannabis.			
Give information and challenge people who believe myths such as: Coffee sobers people up; Cannabis is natural and so can't be harmful.			
List reasons that can affect people's choices about whether to use a drug or not.			
Identify drug-related situations where adult, emergency or medical help may be needed.			
List some possible sources of help for someone with a drug or emotional problem.			
I have enough support and feel equipped to take an active role as a facilitator.			

Facilitator Skills Checklist

It is useful to name the behaviours you wish to promote and to acknowledge them specifically when you see them manifested. This checklist can be used to assist with naming some of the behaviours associated with the desired facilitation skills. It can also be used as a self-evaluation tool or as a structure around which to give feedback to students whilst they practice leading the activities.

Tool: Facilitator Skills Checklist		
Skills	Facilitator action:	Comments
<p><i>Communication</i> getting the message across clearly and making sure people are understood</p>	<ul style="list-style-type: none"> • gives clear instructions • makes herself/himself heard • listens well to other's contributions • asks for clarification if not sure what someone else is saying 	
<p>Participation making people feel included and helping them to join in</p>	<ul style="list-style-type: none"> • smiles • uses eye contact or scans the group • invites different people to speak • helps people to group or pair encourages people to join in • respects people's ideas • invites difference of opinion • thanks people for their contributions 	
<p>Method making the activity work</p>	<ul style="list-style-type: none"> • gives correct instructions • uses the right equipment • answers people's questions if they are confused • repeats instructions when necessary • completes the activity with a summary or acknowledgment that the task is done 	
<p>Questioning getting people thinking</p>	<ul style="list-style-type: none"> • uses appropriate questions to guide the discussion • answers questions well • refers on questions if they don't know the answer 	
<p>Managing Resources making sure people have what they need to do the tasks</p>	<ul style="list-style-type: none"> • has the materials ready • gets materials handed out in an organised fashion • gets people organised in the room • makes sure furniture or space is set up or managed for the activity 	
<p>Timing keeping the energy and making sure the whole agenda works</p>	<ul style="list-style-type: none"> • gives people long enough (but not too long) for the activity 	
<p>Team Work working well with others</p>	<ul style="list-style-type: none"> • co-operates with their team • takes turns • completes the tasks they are responsible for • encourages others 	

Making Agreements

It is important to establish a set of standards, rules or expectations to make sure the job is done well. Use the Question of Standards Sheet below to structure a brainstorm with the students about what those standards or expectations should be.

Following the brainstorm and discussion, ask small groups to come up with a short set of statements that they think would be a good set of working agreements or 'rules'. Have groups share their list with the class. The teacher/s should also make clear their own expectations and standards so these can be encompassed in the task. As a whole group choose a set of agreements sufficient to support and guide your work.

Organise for a copy of the agreements to be displayed and/or provided for each person.

Tool: A Question of Standards

What standards or rules do we need to abide by to make sure we get the job done well?

What standards or rules are necessary for physical safety (of people and property)?

What standards or rules are necessary to protect people's privacy or reputation?

What rules or expectations are necessary to have people feel they are included, valued and respected?

What standards or rules are necessary to ensure that all tasks get completed on time and to the best possible standard?

What standards or rules are necessary to support the good name of the school?

What standards or rules are necessary for the programme to achieve its aims (eg. supporting students to take leadership roles, encouraging young people to feel good about making healthy choices)?

Tool: Sample Agreement:

DO:

- Be on time
- Take a positive and friendly attitude
- Do what you say you will do
- Encourage others to join in
- Prepare well and take pride in what you do
- Be a positive role model
- Help people find their own solutions
- Respect differences between people

DON'T:

- Put people down
 - Tell personal drug use stories
-

Protecting Privacy

It is important that those leading activities understand why we protect privacy in the public forums of the classroom or school event. (See the section on understanding the evidence-base for assistance with this.) The following text can be used as a model around which students can develop their own statements about the privacy code that will be observed. The protective interrupting model provided also gives an example to guide facilitators about how to manage potential breaches of the code that may occur when they are leading an event.

Tool: Sample statement about privacy:

The purpose of this event is to have people think about and plan for their health, happiness and safety in situations where drugs such as nicotine, alcohol or cannabis may be used. We ask people not to tell stories about their own or other people's use of these drugs. This is to respect their privacy. Instead, we will ask people to talk about the scenarios and stories we have provided. These will give us a chance to think and share advice about what can be done in these situations. We ask everyone to respect this standard of privacy and not to ask anyone questions about their own personal stories.

Sample protective interrupting statement:

I have a sense you are about to tell us a personal story. Can you find a way to tell us this without breaking privacy. You could put it in the third person and say something like – I know of an old lady who used to smoke.... Or I know parents worry when ...

Group Health

Any participatory project will function best in an environment of care and respect. Ask students to take responsibility for generating and maintaining a positive and friendly environment. This is something to aim for in all activities associated with the project.

A particular responsibility rests upon those students facilitating activities with groups to know how to:

- Promote the freedom to participate, so as all can feel free to join in and express their views; and
- Promote a freedom from put-downs and negative or social behaviours.

Students will have a number of ideas about how to do this. Ask them to contribute these in the planning phases. They may come up with a complete set of approaches.

Should an early conversation suggest that they need to spend more time in generating this guidance for the facilitators, have them review the following Participation Chart.

Supporting Participation Checklist

Building the Freedom to Participate

Try:

- Encouraging people to join in
- Sharing tasks and leadership roles around the group, don't just pick the smartest, fastest, loudest etc
- Playing mixing games so people get used to working with others
- Making the activities fun and interesting to tempt people to participate
- Acknowledging everyone's contribution
- Thanking people for having a go
- Giving people short achievable tasks so they gain confidence in their own abilities
- Avoiding assessing or making judgements on people's answers
- Sitting in circles or small groups
- Organising the space so everyone can feel physically part of the group

Ensuring a Freedom from Harassment

Try:

- Having a strict 'no putdowns' rule
- Interrupting people who break this rule, stating the behaviour you are objecting to and requesting they refrain
- Insisting that all jokes and remarks must be free of put downs – eg. No sexism, racism or ageism, no homophobic or body image remarks
- Laughing 'with' and not 'at' people
- Apologising if you cause an offence

Evaluation and Reflection

It is important to bring the organising group back together after the event or programme has been completed. This will allow for de-briefing and completion. It is a valuable opportunity to engage in reflection on the process and to contribute to further learning and to future action. The How Did It Go? Tool below can be used to steer a reflective conversation.

The organisers will also need to spend time collating and analysing the feedback or evaluation data they have collected at or after the event. (Evaluation tools are provided in Section 6.)

A completion meeting may also be the cause for celebration. Consider catering or providing some means of infusing a celebratory atmosphere.

How did it go? Tool

1. To what extent did things go to plan?
 2. Did any surprising things happen?
 3. How well did we handle the challenges along the way?
 4. Which challenges were the most difficult ones for us?
 5. What helped? What slowed us down?
 6. What did we learn from this?
 7. What did we enjoy?
 8. What are we proud of?
 9. What did others say about what they got out of the process?
 10. What did the evaluations show?
 11. What would we recommend for others taking on a similar project?
 12. Who do we need to thank?
 13. Have we any unfinished business? Who will attend to that?
 14. If we were to do it again, what would we do differently?
 15. What do we want to take on next?
-

Section 3: Choosing an agenda

When preparing the agenda for a student led forum consider:

- **Why:** The purpose of the forum
- **Who:** Who your audience will be
- **What:** What you will do to ensure that the event is participatory, promotes positive relationships, sends sound health promotion messages and where possible includes both knowledge and skills-based activities
- **Where:** The constraints and opportunities provided by the space
- **When:** The timing, including when you wish to hold it, how long you need to prepare and how much time you have for the event itself

Why?

Why are you running this event? What is your goal or purpose?

The purpose of this event will encompass utilising the active participation of students in the education of their peers and/or community about how to stay safe around drugs. In addition, a particular event is likely to have a more specific theme or goal such as 'safe partying' or 'preparing for the teen years'. The agenda and activities should be attuned to the chosen focus or theme and the theme should be responsive to the needs and interests of the target audience. The five sample agendas below provide some models to assist in the design of educative events or forums.

Who?

Who is the target audience and what are their needs and interests?

In selecting the activities for a particular audience it is important to consider carefully their needs and interests and tailor the agenda accordingly. This includes choosing activities that are suitable for the age and developmental stage or interests of the target group. It also means working with sensitivity to the cultural and religious beliefs of those in the community.

If you are planning an agenda to deliver a forum to both adults and young people it is best to include activities that will engage both groups. It is important to provide opportunities for all to actively participate and to select processes that will assist participants to mix and communicate with each other.

If you are running a forum for a larger audience, you will need to consider an agenda that encourages involvement from the audience. The purpose of the forum should be for the student facilitators to lead activities that are interactive and, where appropriate, stimulate discussion with the audience. Where possible a forum with a large audience should include a mix of small group and/or paired sharing activities as well as engagement in whole group activities.

The question about 'who' also relates to who you could involve as presenters and facilitators. Brief guest speakers carefully about the purpose of your event and share the guiding principles with them. Be clear about how long you want them to speak to ensure that there is adequate time for the participatory sections of your agenda.

What?

How do you ensure that the event is engaging and useful and incorporates opportunities for people to interact?

An educative agenda should include a range of activities such as knowledge-based and skills-based activities. Select interactive activities such as those provided in this resource. A health promotion festival

or participatory event utilising arts, cultural or sports activities should be run with health promotion goals clearly in mind. Ensure that the activities, messages and imagery presented assist you to work towards your goals and are consistent with the evidence-based guiding principles presented earlier in this document.

Avoid an event which chiefly uses lecture-based formats to deliver information. Make sure the audience does not spend the whole time sitting, listening or watching a performance. This will cast your audience in a passive role and they are less likely to engage with the challenge of how to implement their knowledge.

A number of sample agendas are provided below each of which illustrate ways to construct an interactive agenda that uses a combination of knowledge and skills based activities.

Where?

How do you ensure that the space is conducive to the activity?

Smaller audiences

It is easier to create a more friendly or intimate atmosphere in a smaller space. Avoid placing a small group in a very large venue such as a hall or theatre. This will make participants feel very exposed. Use a classroom, the staffroom or the library.

If working in a classroom, shift the furniture to facilitate the patterns of interaction that you wish to invite. Move the desks to the side. Set up a horseshoe shape. This will allow focus on a presentation as well as interaction between participants.

Larger Audiences

If your event is to involve a large group, you will need to work within the confines or opportunities of the space you have. If the hall has fixed seating, use strategies such as paired sharing or buzz groups with those sitting near you.

If the seating is not fixed, consider seating people at table groups that can then become small groups for discussion. Other alternatives are to seat the chairs in a series of arcs, so a more inclusive message is sent. During the event, people can be asked to move their chairs to form small groups.

When?

How do you ensure that the event is well prepared and well managed throughout?

An event of this nature requires significant planning time – particularly if students are to take on leadership roles and to play a part in managing the logistics of the event. Being well prepared will entail developing a realistic management timeline.

A common temptation is to put too much in the agenda. This leaves little time for interaction amongst the participants. Restrict yourself to a smaller number of activities. Use a timekeeper to assist with moving the event along. Ensure speakers (especially guest speakers) are working to a strict time limit. Provide them with a 5-minute warning bell. Be prepared to politely indicate their section is over after the warning period has lapsed. It is all too easy for an early speaker to monopolise the agenda and for the important interactive activities to be sacrificed.

Sample Agenda 1: Upper Primary: Transition to the Teens – Staying Safe around Drugs

Theme: Transition to the Teens – Staying Safe around Drugs

Audience: Senior primary students, teachers and parents
 Facilitators: Grade teacher and class of Grade 5/6 primary students
 Duration: Two hours
 Location: Multi-purpose room

Activity	Time	Who
Introduction/welcome <ul style="list-style-type: none"> Welcoming statement from Principal Two student MCs make a statement about the purpose of the forum and the nature of the agenda 	10 min	Principal 2 student MCs
A few facts <ul style="list-style-type: none"> Two students give a short talk supported by a power point display about prevalence of use of cigarettes and alcohol in the teen years OR <ul style="list-style-type: none"> A visiting presenter speaks about alcohol and other drugs in the teen years 	5 min	2 students
Activity E: Information Jigsaw <ul style="list-style-type: none"> Break into small groups Two student leaders are assigned to each group and run the activity 	15 min	16 students
Activity C: Quiz <ul style="list-style-type: none"> Students organise for the table groups to send a representative to compete in the Quiz Game 	10 min	2 students
Activity D: Why do people use drugs? <ul style="list-style-type: none"> Groups continue and complete their brainstorm under leadership of students Student MCs manage the reporting back 	10 min	16 students 2 student MCs
Break for food, drinks and chat	20 min	Team of student helpers
Activity F: Wishes and Worries <ul style="list-style-type: none"> Teacher introduces the activity Students act out the 'Asking Permission' scene Teacher interviews students playing 'hidden thoughts' Teacher asks parents to identify any other concerns or fears parent have about parties 	15 min	Teacher as facilitator 2 students as actors 2 students as hidden thoughts
Activity L- The Decision Game. <ul style="list-style-type: none"> Conduct scenario 1 and 4 Students read out scenario and act the prepared scene Teacher interviews student in decider role Teacher manages paired sharing in audience– What would you advise the young person to do? 	15 min	1 student to read out scenario 3 students actors Teacher as facilitator
Activity O –Problem Solver Panel <ul style="list-style-type: none"> Scenario 1: smoking and asthma Scenario 2: alcohol and the footy club Teacher interviews panel members Teacher facilitates buzz groups in the audience - What would you advise the young person to do? 	20min	5 students in role as panel members teacher as facilitator

Activity	Time	Who
Completion Thank-you speeches from Principal, student MCs and organizing teacher	5 min	Principal Student MCs Teacher
Evaluation <ul style="list-style-type: none"> Students hand out and collect the surveys 	5 min	Team of student helpers
Tidy up		Team of student helpers

Sample Agenda 2: Upper Primary: Facing Change and Challenge

Theme: Facing Change and Challenge

Audience: Senior primary students, teachers and parents

Facilitators: Grade teacher and class of Grade 5/6 primary students

Duration: 1.5 hours

Location: Multi-purpose room

Activity	Time	Who
Introduction/welcome <ul style="list-style-type: none"> Welcoming statement from Principal Two student MCs make a statement about the purpose of the forum and the nature of the agenda 	10 min	Principal 2 student MCs
Stress and Challenge <ul style="list-style-type: none"> Two students give a short talk supported by a power point display about the sorts of things people their age find stressful or challenging OR <ul style="list-style-type: none"> A visiting presenter speaks about Enhancing Resilience and Wellbeing in young people 	5 min	2 students
Activity M –The Stakeholders and Experts Panel address transition to high school <ul style="list-style-type: none"> Teacher facilitates the panel comprising a teacher, a parent, two ex-students currently in junior high school, two current grade six students, a Year 7 or 8 level coordinator from the high school, a local youth worker or social worker and a psychologist - What can young people find challenging in relation to transition to high school and what helps them to cope? 	20min	Invited panel members teacher as facilitator
Activity N: Coping Capers <ul style="list-style-type: none"> Two student leaders brief the participants and run the activity 	15 min	2 students
Break for food, drinks and chat	20 min	Team of student helpers
Activity G: Handling Pressure in the moment <ul style="list-style-type: none"> Teacher introduces the activity Students act out the prepared 'Handling Pressure' scenes Teacher interviews students out of role about that they think would help young people to handle similar situations and what they think parents and teachers can do to help 	20 min	Teacher as facilitator 6 students as actors
Activity I: Help-seeking – A Friend in Need <ul style="list-style-type: none"> Students act the prepared scene Teacher manages paired sharing in audience – What would you advise the young person to do? Visiting presenters from local health agencies make a short statement about the services their agency offers and invites participants to take home samples of the print information. 	15 min	2–3 students actors Teacher as facilitator

Activity	Time	Who
Completion Thank-you speeches from Principal, student MCs and organizing teacher	5 min	Principal Student MCs Teacher
Evaluation <ul style="list-style-type: none"> Teacher invites some public sharing about what people have gained from the event Students ask participants to respond on the Graffiti sheets provided 	5 min	Team of student helpers
Tidy up		Team of student helpers

Sample Agenda 3: Secondary: Safe Partying

Theme: Safe Partying

Audience: Secondary students, teachers and parents
 Facilitators: Health teacher and class of Year 9 students
 Duration: Two hours
 Location: Staffroom

Activity	Time	Who
Introduction/welcome <ul style="list-style-type: none"> Welcoming statement from Principal Two student MCs make a statement about the purpose of the forum and the nature of the agenda 	10 min	Principal 2 student MCs
Activity & Startling Statistics <ul style="list-style-type: none"> Two students give a short talk supported by a PowerPoint display about prevalence of use of cigarettes and alcohol in the teen years 	5 min	2 students
Activity A: Pouring Standard Drinks <ul style="list-style-type: none"> Two students explain what they have learnt about standard drinks and conduct a pouring demonstration involving parent volunteers from the audience 	10 min	2 students
Activity E: Information Jigsaw <ul style="list-style-type: none"> Break into small groups Two student leaders are assigned to each group and run the activity 	15 min	16 students
Activity D: Why do people use drugs? <ul style="list-style-type: none"> Groups continue and complete their brainstorm under leadership of students Student MCs manage the reporting back 	10 min	16 students 2 student MCs
Break for food, drinks and chat	20 min	Team of student helpers
Activity F: Wishes and Worries <ul style="list-style-type: none"> Teacher introduces the activity Students act out the 'Asking Permission' scene Teacher interviews students playing 'hidden thoughts' Teacher asks parents to identify any other concerns or fears parent have about parties 	15 min	Teacher as facilitator 2 students as actors 2 students as hidden thoughts

Activity L- The Decision Game. <ul style="list-style-type: none"> Students read out scenario and act the prepared scene Teacher interviews student in decider role Teacher manages paired sharing in audience– What would you advise the young person to do? 	15 min	1 student to read out scenario 3 students actors Teacher as facilitator
Activity K – The Fortune Teller’s Booth <ul style="list-style-type: none"> Teacher manages selection of the fortune scenario using audience volunteer to select cards from the boxes Teacher facilitates predictions and advice from the fortune tellers booth Teacher facilitates buzz groups in the audience - What would you advise a young person to do to either avoid or manage this challenge? <p>OR</p> <ul style="list-style-type: none"> Visiting presenters from local health agencies make a short statement about the services their agency offers and invites participants to take home samples of the print information. 	20min	1 student to read out fortune scenario 2 students in role as ‘predictors’ and 2 in role as ‘advisors’ teacher as facilitator
Completion Thank-you speeches from Principal, student MCs and organizing teacher	5 min	Principal Student MCs Teacher
Evaluation <ul style="list-style-type: none"> Students hand out slips of paper and invite response via the collection boxes 	5 min	Team of student helpers
Tidy up		Team of student helpers

Sample Agenda 4: Secondary: Life after School – transition to the post-school years

Theme: Life after School - transition to the post-school years

Audience: Secondary students, teachers and parents

Facilitators: Volunteer team of Year 11 and 12 students

Duration: 1.5 hours

Location: Staffroom

Activity	Time	Who
Introduction/welcome <ul style="list-style-type: none"> Welcoming statement from Principal Two student MCs make a statement about the purpose of the forum and the nature of the agenda 	10 min	Principal 2 student MCs
Stress and Challenge <ul style="list-style-type: none"> Two students give a short talk supported by a power point display about the sorts of things people their age find stressful or challenging as they anticipate leaving school <p>OR</p> <ul style="list-style-type: none"> A visiting presenter speaks about Enhancing Resilience and Wellbeing in young people 	5 min	2 students
Safe Celebrating <ul style="list-style-type: none"> Two students give a short talk supported by a power point display giving practical advice on how to keep safe at celebratory events such as schoolies or post-school parties <p>OR</p> <ul style="list-style-type: none"> A visiting presenter speaks about staying safe in public venues such as night clubs and pubs 	10 min	2 students

Activity	Time	Who
Activity P: Horseshoe Harms <ul style="list-style-type: none"> Break into small groups Two student leaders are assigned to each group and run the activity 	15 min	16 students
Break for food, drinks and chat	20 min	Team of student helpers
Activity H: Help-seeking – A Friend in Need <ul style="list-style-type: none"> Students act the prepared scene Teacher manages paired sharing in audience– What would you advise the young person to do? 	15 min	Teacher as facilitator
Activity M –The Stakeholders and Experts Panel address coping with the challenge of post-school life <ul style="list-style-type: none"> Teacher facilitates the panel comprising a teacher, a parent, two ex-students one in tertiary and one in employment, two current Year 12 students, a local youth worker or social worker and a psychologist – What can young people find challenging in relation to transition out of secondary school and what helps them to cope? 	20min	Panel of invited guests teacher as facilitator
Completion Thank-you speeches from Principal, student MCs and organizing teacher	5 min	Principal Student MCs Teacher
Evaluation <ul style="list-style-type: none"> Students hand out slips of paper and invite response via the surveys 	5 min	Team of student helpers
Tidy up		Team of student helpers

Sample Agenda 5: Secondary: Drugs and You

Theme: Drugs and You

Audience: Class of Year 8 secondary students

Facilitators: Year 10 Health Class

Duration: 1.5 hours

Location: Classroom

Activity	Time	Who
Introduction/welcome <ul style="list-style-type: none"> Two student MCs make a statement about the purpose of the lesson or forum and the nature of the agenda 	5 min	2 student MCs
Activity & Startling Statistics <ul style="list-style-type: none"> Two students give a short talk supported by a power point display about prevalence of use of cigarettes and alcohol in the teen years OR <ul style="list-style-type: none"> A visiting presenter speaks about alcohol and other drugs 	5 min	2 students
Activity A: Pouring Standard Drinks <ul style="list-style-type: none"> Two students teach about standard drinks and set up pouring stations so as all students can pour a set of standard drinks 	20 min	2 students
Activity E: Information Jigsaw <ul style="list-style-type: none"> Break into small groups Two student leaders are assigned to each group and run the activity 	15 min	16 students

Activity	Time	Who
Activity P: Horseshoe Harms <ul style="list-style-type: none"> • Break into small groups • Two student leaders are assigned to each group and run the activity 	15 min	16 students
Activity L - The Decision Game. <ul style="list-style-type: none"> • Students read out scenario and act the prepared scene • Teacher interviews student in decider role • Teacher manages paired sharing in audience– What would you advise the young person to do? 	20 min	1 student to read out scenario 3 students actors Teacher as facilitator
Completion Thank-you speeches from student MCs	2 min	Student MCs
Evaluation <ul style="list-style-type: none"> • Students hand out slips of paper and invite response via the surveys 	5 min	Team of student helpers

Section 4: Smorgasbord of activities:

All of the activities included in this collection can be adapted for use in multiple formats including:

- Student/s leading activities within their own class;
- Student/s leading activities with other classes or groups of students;
- Student/s leading activities for groups of students in other schools or for younger students;
- Student/s leading activities for multi-age groups as part of a school festival or health promotion event;
- Student/s leading public forums for parents or community members.

Tailoring scenarios to suit your local context

It is important to choose scenarios as a focus for your role-plays, discussions, games and panels that are relevant to both the target age group and the community context. It is also important to be mindful that choosing the worst-case scenarios is not the most useful approach. This can lead to an unnecessary glamorising or normalising of the activity and place added pressure on young people who may feel that to take risks is somehow a necessary rite of passage into adulthood or a universal practice.

When tailoring scenarios to suit your locality, take the time to research local issues. Your local health centre or youth workers may be able to assist you with this. In modifying or tailoring a scenario to meet your needs consider the following elements:

Scenario building elements	
WHO is likely to be present?	Consider age, culture, gender, occupation, wealth ...
WHICH drugs are likely to be present and in what sort of quantities?	alcohol (a cask of wine, a can of pre-mix, a slab of beer, a bottle of champagne, a bottle of spirits), cigarettes, cannabis ...
WHAT is the activity?	a party, a family gathering, a sports club event, a special occasion, a group of friends hanging out together ...
WHEN is this event taking place?	late at night, after the deb ball, after the footy match, before the birthday party, after the funeral ...
WHERE is the event taking place?	down the creek, at the footy club, on the veranda, in the park, down the back paddock, in the lounge room, at the beach, at the shopping centre ...

Coaching points

Grouping

When left to choose their own groups, people tend to work with the same few peers and thus do not improve their capacity to relate with others in the class. Many students also face significant fear of social rejection when asked to form their own groups. Selecting inevitably involves rejecting. Playing grouping games to establish groups adds an element of fun and surprise. Short achievable group tasks build students' skills and confidence in their capacity to work effectively with others.

Similarly, when gathering a large audience of parents and community members, people will appreciate some assistance with grouping or some activities which assist them to interact with others.

Brainstorming

Brainstorming is a way to collect as many ideas or responses as possible. Do not judge offerings during the brainstorm; just gather as many ideas as possible.

Protected Space

The use of the brainstorm or scenario, rather than the personal disclosure as this ensures that a layer of protection is available in the public space of the classroom.

Referral

If you are concerned about someone, follow up afterwards. Tell the teacher. Ask him/her to follow up or to refer the matter to the welfare teacher or senior staff.

When to tell

In serious situations, no-one should be left to deal with things on their own. When someone is sending warning signs that things are really bad or that they are having a tough time, it is important to tell an appropriate adult.

Privacy

Every teller of a story must take responsibility for protecting the privacy of those in the story. The classroom isn't a place for gossip - so don't allow people to tell tales about others.

Your privacy

You have the same right to privacy as the other students. Share your opinion but not the details of your personal life. Your job is to get other people thinking and talking about the issues.

Protective Interrupting

You can interrupt if you think someone is about to tell a story that they should not tell in class.

Playing back role-plays

When showing the class, keep the scenarios short. A 'flavour' of what is going on in the scene is usually enough to promote discussion.

Eye contact

Use eye contact or scan the group as you talk to them. Make them feel you are talking directly to each of them.

Listening

Show respect for other people's ideas by listening carefully and summarising their main points. Check back with them if you are not sure you have understood. Call on people with different opinions to add theirs as well.

Paired sharing

Encourage people to talk in pairs before talking to the whole group. This can be a good way of getting everyone involved.

Activity A: Pouring Standard Drinks

Purpose:

- To understand what is in a standard drink
- To identify the link between the amount of alcohol consumed and a Blood Alcohol Content (BAC)
- To be able to estimate the number of standard drinks in a range of alcoholic drinks

Resources:

- Containers of coloured water (use food dye)
- Measuring jugs (sourced from science or food technology departments)

- Glasses or transparent disposable cups
- Set of Drinks Cards

Method

Make sure the student presenters have an understanding of the following information before conducting the activity.

What is a standard drink?

A standard drink is one that contains 10 grams of alcohol.

What is BAC?

The amount of alcohol in your bloodstream is called your Blood Alcohol Content (BAC).

How is BAC measured?

BAC is measured with a breathalyser or analysing a sample of blood. It is measured by the number of grams of alcohol in 100ml of blood. For example a BAC of .05 means you have .05 grams of alcohol in every 100ml of blood.

What factors affect your BAC? (see alcohol fact sheet for further information)

1. Distribute the Drinks Cards to members of the group or audience.
2. Set up the table area with containers of coloured water and glasses.
3. Appoint three students to run the activity; they will become the 'bar managers'. These students invite people with a card to come up, to read out their card, and then to measure and pour the designated amount of coloured water into one of the containers. They then display this drink so as others can see what a standard drink of wine/ beer etc looks like.
4. After each drink has been poured, the 'bar tenders' can ask the participants to consider the following questions.
 1. Is this the way we commonly see this drink poured?
 2. Are drinks commonly served as standard drinks?
 3. How does this match with what you estimate it would be?
 4. Which alcoholic drinks surprise you the most?
 5. How accurate do you think you would be when pouring a standard drink without a measure?
 6. What do you notice about low-alcohol beer and regular beer?

Variations

- This activity is suited to both primary and secondary and can be adapted to include further information about standard drinks.
- This activity can be conducted as a demonstration to a large audience or run as a small group activity with all having a hands-on experience.
- Compare what the standard drink looks like in a number of different glasses such as those commonly used for wine or champagne.
- Measure sip sizes and calculate how many sips in the standard drink identified.
- Provide empty alcohol bottles or cans and ask participants to read the labels and find the information about how many standard drinks are in that container.

Activity B: Prevalence statistics

Purpose

- To help participants identify that harmful drug use is not the norm for most adults or young people
- To highlight that the use of illicit drugs is not the norm amongst young people

Resources

- Statistics cards

Note: The statistics have been sourced from: Australian Institute of Health and Welfare, *2004 National Drug Strategy Household Survey: First Results*, Canberra: AIHW (Drug Statistics Series No. 13).

This report is available on www.aihw.gov.au.

Keep up-to-date with statistics on www.druginfo.adf.org.au.

Method

1. Distribute a card to each participant.
2. Ask participants to mingle around the room and when the group leader blows a whistle they are to form pairs.
3. Participants ask their partner the question on their card and offer them the 4 options, asking them to choose the one they think is the right answer. Their partner guesses the answer and is then provided with the right answer. Players swap cards and move on to find new partners and repeat the process.
4. Repeat this process until the group has covered a range of questions.
5. Ask participants to note whether they tended to over-estimate or under-estimate levels of use. (Most people tend to over-estimate). Point out that we may get our understandings about the prevalence of use from the media or from soap operas and that this encourages us to think that use is more common than it actually is.

The data cited below used the following definitions of non-drinker, and low risk, risky, and high-risk use of alcohol.

NHMRC Guidelines: Risk of harm in the <i>long term</i>		
	Males	Females
Low risk	Up to 4 standard drinks a day (up to 28 per week)	Up to 2 standard drinks a day (up to 14 per week)
Risky use	5 to 6 standard drinks a day (up to 29–42 per week)	3 to 4 standard drinks a day (up to 15–28 per week)
High-risk	7 or more standard drinks per day (43 or more per week)	5 or more standard drinks per day (29 or more per week)

NHMRC Guidelines: Risk of harm in the <i>short term</i>		
	Males	Females
Low risk	Up to 6 standard drinks a day, no more than 3 days per week	Up to 4 standard drinks a day no more than 3 days per week)
Risky use	7 to 10 standard drinks on any one day	5 to 6 standard drinks on any one day
High-risk	11 or more standard drinks on any one day	7 or more standard drinks on any one day
Non-drinker	based on not having consumed alcohol in the last 12 months	based on not having consumed alcohol in the last 12 months

Variations

Use the cards as the questions in a Quiz Game. Award points to the team or player that makes the correct or the closest guess.

<p>Q. What percentage of 12–15 year olds used cannabis in the last 12 months?</p> <p>(a) 4%</p> <p>(b) 5.2%</p> <p>(c) 24%</p> <p>(d) 34%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>	<p>Q. What percentage of 16–17 year olds used cannabis in the last 12 months?</p> <p>(a) 6%</p> <p>(b) 12%</p> <p>(c) 18%</p> <p>(d) 24%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>
<p>Q. What percentage of 12–15 year olds do not drink alcohol?</p> <p>(a) 38%</p> <p>(b) 48%</p> <p>(c) 58%</p> <p>(d) 68%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>	<p>Q. What percentage of 16–17 year olds do not drink alcohol?</p> <p>(a) 23%</p> <p>(b) 33%</p> <p>(c) 43%</p> <p>(d) 53%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>
<p>Q. What percentage of 12–15 year olds drink alcohol at risky to high-risk levels?</p> <p>(a) 6%</p> <p>(b) 16%</p> <p>(c) 26%</p> <p>(d) 36%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>	<p>Q. What percentage of 16–17 year olds drink alcohol at risky to high-risk levels?</p> <p>(a) 13%</p> <p>(b) 23%</p> <p>(c) 33%</p> <p>(d) 43%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>
<p>Q. What percentage of 14–19 year olds drink alcohol at risky to high-risk levels on a weekly basis?</p> <p>(a) 42%</p> <p>(b) 52%</p> <p>(c) 10.7%</p> <p>(d) 72%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>	<p>Q. What percentage of 18–19 year olds used cannabis in the last 12 months?</p> <p>(a) 7%</p> <p>(b) 17%</p> <p>(c) 26.5%</p> <p>(d) 37%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>
<p>Q. How many 14–19 year olds have ever used ecstasy?</p> <p>(a) none</p> <p>(b) 6.2%</p> <p>(c) 5%</p> <p>(d) 10%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>	<p>Q. How many 14–19 year olds have ever used heroin?</p> <p>(a) none</p> <p>(b) 0.7%</p> <p>(c) 1%</p> <p>(d) 1.5%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>
<p>Q. How many 14–19 year olds have ever used speed?</p> <p>(a) none</p> <p>(b) 1%</p> <p>(c) 6.6%</p> <p>(d) 3%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>	<p>Q. How many 14–19 year olds have used ecstasy within the last year?</p> <p>(a) none</p> <p>(b) 0.3%</p> <p>(c) 4.3%</p> <p>(d) 2.3%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>

<p>Q. How many 12–17 year olds have used speed within the last year?</p> <p>(a) none (b) 0. % (c) 4.4% (d) 2.5%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>	<p>Q. How many 12–17 year olds have used heroin in the last year?</p> <p>(a) none (b) 0.1 % (c) 0.1% (d) 0.3%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>
<p>Q. How many 12–15 year olds have ever used pain-killers for non-medical purposes.</p> <p>(a) none (b) 1.7% (c) 2.7% (d) 5.2%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>	<p>Q. How many 16–17 year olds have used pain-killers for non-medical purposes in the last year?</p> <p>(a) none (b) 1.4% (c) 3.2% (d) 3.4%</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>
<p>Q. How many 12–15 year olds are daily smokers?</p> <p>(a) 2.3% (b) 12% (c) 22 % (d) 32 %</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>	<p>Q. How many 16–17 year olds are daily smokers?</p> <p>(a) 2% (b) 10.9% (c) 22 % (d) 31 %</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>
<p>Q. What percentage of 12–15 year olds have never smoked?</p> <p>(a) 66% (b) 76% (c) 86 % (d) 95.7 %</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>	<p>Q. What percentage of 16–17 year olds have never smoked?</p> <p>(a) 63% (b) 73% (c) 83.5 % (d) 93 %</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>
<p>Q. What percentage of 18–19 year olds have never smoked?</p> <p>(a) 64% (b) 73.7% (c) 84 % (d) 94 %</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>	<p>Q. How many 18–19 year olds are daily smokers?</p> <p>(a) 7% (b) 12% (c) 16.9% (d) 22 %</p> <p>from: Australian Institute of Health and Welfare 2005, <i>2004 National Drug Strategy Household Survey: First results</i>, Canberra: AIHW (Drug Statistics Series No. 13) (available at www.druginfo.adf.org).</p>

Activity C: Drug quizzes

Purpose

- To provide drug information
- To provide the opportunity for students to develop facilitation skills

Resources:

- Set of quiz questions and answers
- Prizes to be distributed
- Score board

Method:

The quiz can be run in a variety of ways depending on the size of the group and the number of peer leaders involved. Select the method that best suits your agenda.

Version 1 – as a television quiz show

1. Ask some students to put the quiz into a PowerPoint version or on overhead transparencies.
2. Set up the room as a television studio with an audience who will become the participants or part of a team of participants.
3. Select members of the audience to participate (could be names out a hat, lucky seat etc).
4. Appoint peer leaders as judges, a scorer, prize giver and show host/s.
5. Run the quiz questions on a screen with the members of the audience.

Version 2 – as a trivia quiz

1. Divide the class/audience into groups of 8–10 and where possible place these groups on tables at a distance from each other.
2. Either prepare a quiz page for each table or have the host read out the questions and place a peer leader at each of the tables to act as recorder.
3. After all questions have been covered ask the judges to go over the answers and appoint a winning group.
4. This method will also require prize givers, judges and a person to score.

Quiz Activity: Primary School

Statement – true or false?

1. True or False: All drugs are illegal?
2. True or False: Alcohol is the drug that kills most people?
3. True or False: More than half of all teenagers smoke?
4. True or False: All drugs can be harmful if not used properly?
5. True or False: Caffeine is a drug found in chocolate?

Multiple choice. Select one answer

1. Which of the following does not contain a drug?
 - (a) Chocolate ice cream
 - (b) Cola drink
 - (c) Strawberry milk
 - (d) Champagne
2. The chemical present in alcohol is:
 - (a) Ethanol?
 - (b) Methanol?
 - (c) Propanol?
 - (d) all of the above?
3. Alcohol can cause people to:

- (a) feel alert?
 - (b) stay awake?
 - (c) decrease in body temperature?
 - (d) slow down?
4. Cola drinks are considered to contain a drug because they
- (a) are addictive?
 - (b) contain caffeine ?
 - (c) too many of them can harm your health?
 - (d) contain carbon dioxide?
5. Coffee first came from what country?
- (a) Arabia
 - (b) Italy
 - (c) Turkey
 - (d) Greece
6. The time taken for nicotine to react on the brain after smoking a cigarette is
- (a) 1 sec?
 - (b) 7 sec?
 - (c) 10 sec?
 - (d) 1 minute?
7. In 1945 the number of men in Australia who smoked cigarettes was approximately
- (a) 20 %
 - (b) 50 %
 - (c) 70 %
 - (d) 90 %
- (a) it is impossible to know
8. Analgesics are:
- (a) painkillers?
 - (b) antibiotics?
 - (c) asthma medicines?
 - (d) all of the above?
9. Drugs which are depressants make you
- (a) become very depressed?
 - (b) feel confident and strong?
 - (c) feel less coordinated and slower?
 - (d) feel very energetic?

Extended response questions.

1. Why do some medicines have a prescription?
2. Describe three ways the Government tries to protect people from the harmful effects of drugs?
3. Which drug causes the most harm in Australia?
4. Describe 3 ways that the use of medicines is made safer.
5. What are three harms from smoking?
6. What are three harms from alcohol use?
7. What word starting with 'P' describes someone who can provide medications?
8. If someone is on 'P' plates how much alcohol are they allowed to drink before they can drive?
9. What does passive smoking mean?

Quiz Answers: Primary School

Statement	True/false
1. All drugs are illegal.	FALSE
2. Alcohol is the drug that kills most people.	FALSE
3. More than half of all teenagers smoke.	FALSE
4. All drugs can be harmful if not used properly.	TRUE
5. Caffeine is a drug found in chocolate.	TRUE

Multiple choice. Select one answer

1. Which of the following does not contain a drug?
(b) Strawberry milk
2. The chemical present in alcohol is
(e) ethanol
3. Alcohol can cause people to
(e) slow down
4. Cola drinks are considered as a drug because they
(e) contain caffeine
5. Coffee first came from what country?
(e) Arabia
6. The time taken for nicotine to react on the brain after smoking a cigarette is
(f) 7 sec
7. In 1945 the number of men in Australia who smoked cigarettes was approximately
(c) 70%
8. Analgesics are a
(e) painkillers
9. Drugs which are depressants make you
(c) feel less coordinated and slower

Extended response questions.

1. Why do some medicines have a prescription?

Answer: to prevent people from using them in ways that are not safe and to help provide the correct dose. To make sure people are using the correct medication for their condition.

2. Describe three ways the Government tries to protect people from the harmful effects of drugs?

Answer: Advertising campaigns, drink driving laws and booze buses, health promotion messages, banning advertising of tobacco or alcohol in some places

3. Which non-medical drug costs Australia the most?

Answer: Nicotine (cigarette smoking)

4. Describe 3 ways that the use of medicines is made safer.

Answer: clearly labelled containers, prescriptions, childproof lids

5. What are three harms from smoking?

Answers: lung cancer, reduced fitness, reduction of taste sensation, shortness of breath etc

6. What are three harms from alcohol use?

Answer: any harms which may be physical, emotional, financial, legal or sexual for example physical injury from falling over, being sick or saying or doing something that you would not have done if you weren't under the influence of alcohol.

7. What word starting with 'P' describes someone who can provide medications?

Answer: Pharmacist

8. If someone is on 'P' plates how much alcohol are they allowed to drink before they can drive?

Answer: Zero alcohol content – no alcohol at all. (Helen- there may need to be a note here asking that this be checked for accuracy in each state eg WA it is 0.02%)

9. What does passive smoking mean?

Answer: breathing in cigarette smoke from another person's cigarette

Quiz Activity: Secondary School

Statement	True/false
1. Tobacco use by young people between the ages of 12 and 20 has <i>decreased</i> in the last 5 years	
2. Psychoactive drugs stimulate not depress the Central Nervous System (CNS)	
3. Steroids are psychoactive drugs.	
4. All drugs are capable of producing dependency or addictions	
5. Heavy drinking interferes with blood cell production and therefore weakens the immune system	
6. Heavy cannabis use can lower a person's sperm count	
7. 30ml of spirits contains less alcohol than 100 ml of full strength beer	
8. Cannabis can be detected in the body for up to a month after use	
9. Alcohol is a stimulant.	
10. Cannabis is a depressant	

Multiple choice. Select one answer

1. The chemical present in alcohol is
 - (f) ethanol
 - (g) methanol
 - (h) propanol
 - (i) all of the above

2. The number of young people in Australia who take up smoking every year is
 - (f) 10,000
 - (g) 30,000
 - (h) 50,000
 - (i) 70,000

3. The number of chemicals present tobacco smoke is about
 - (f) 40
 - (g) 400
 - (h) 4000
 - (i) 40,000

4. Which of the following is not a psychoactive drug?
 - (e) Steroids
 - (f) Tobacco
 - (g) Cannabis
 - (h) Alcohol

5. Alcohol affects the central nervous system by
 - (g) speeding it up
 - (h) slowing it down
 - (i) no effect
 - (j) speeds it up then slows it down

6. The time taken for nicotine to react on the brain after smoking a cigarette is
 - (e) 1 sec
 - (f) 7 sec
 - (g) 10 sec
 - (h) 1 minute

7. In 1945 the number of men in Australia who smoked cigarettes was approximately
 - (e) 20 %
 - (f) 50 %
 - (g) 70 %
 - (h) 90 %

8. Analgesics are a
- (f) stimulant
 - (g) depressant
 - (h) hallucinogen
 - (i) none of the above
9. Drugs which are depressants make you
- (e) become very depressed
 - (f) feel confident and assertive
 - (g) feel less coordinated and slower
 - (h) feel very energetic

Quiz Answers: Secondary School

Statement	True/false
1. Tobacco use by young people between the ages of 12- 20 has <i>decreased</i> in the last 5 years	TRUE
2. Psychoactive drugs stimulate not depress the Central Nervous System CNS	TRUE
3. Steroids are psychoactive drugs.	FALSE
4. All drugs are capable of producing dependency or addictions	TRUE
5. Heavy drinking interferes with blood cell production and therefore weakens the immunity system	TRUE
6. Heavy cannabis use can lower a person's sperm count	TRUE
7. 30ml of spirits contains less alcohol than 100 ml of full strength beer	FALSE
8. Cannabis can be detected in the body for up to a month after use	TRUE
9. Alcohol is a stimulant.	FALSE
10. Cannabis is a depressant	TRUE

Multiple choice. Select one answer

1. The chemical present in alcohol is
 - (j) ethanol
2. The number of young people in Australia who take up smoking every year is
 - (d) 70,000
3. The number of chemicals present tobacco smoke is about
 - (c) 4000
4. Which of the following is not a psychoactive drug?
 - (i) Steroids
5. Alcohol affects the central nervous system by
 - (j) slowing it down
6. The time taken for nicotine to react on the brain after smoking a cigarette is
 - (b) 7 sec
7. In 1945 the number of men who smoked cigarettes was approximately
 - (c) 70%

8. Analgesics are a
(k) depressant
9. Drugs which are depressants make you
(i) feel less coordinated and slower

Extended response questions.

1. What is pharmacology? Clue biology, psychology
Answer: study of drugs and their effects
2. Which non-medical drug causes the greatest number of deaths in Australia?
Answer: overall it is tobacco (due to cancers affecting older people) followed by alcohol (alcohol does cause more deaths in the youth population)
3. Which drug costs Australia the most?
Answer: tobacco
4. List 3 main types of offences related to illegal drugs.
Answer: possession, selling, producing,
5. What does BAC stand for?
Answer: Blood Alcohol Content
6. What is the BAC for a probationary driver?
Answer: Zero
7. Explain why the effects of a drug might differ from person to person.
Answer: it may depend on size, sex, where they take it, how much is used, how the person is feeling....
8. What is the only effective thing that can help someone to sober up?
Answer: time
9. What drug is present in cigarettes?
Answer: nicotine
10. What does reducing drug-related harm mean?
Answer: It is an approach to drug use that aims to reduce the harmful effects on the person, their friends and family. It focuses on preventing the damage that might result from using drugs and not on whether using drugs is right or wrong.

Activity D: Why Do People Use Drugs? (Primary and Secondary)

Purpose:

- To explore the role of alcohol use in Australian society
- To explore the differences and similarities between adults and young people in relation to alcohol use

Resources:

Reasons for Use/Non-Use Brainstorm sheet (one per group)
Reasons cards (optional)
Discussion card (optional)

Method:

1. Divide the class/group into small groups of 6–8 people.
2. Provide each group with a ‘Reasons for use/non-use’ brainstorm sheet. Ask some groups to brainstorm the Reasons Why Some Young People Choose to Use Alcohol and Reasons Why Some Young People Choose Not to Use Alcohol. Ask other groups to complete the same task but to focus on the reasons relating to adult use and non-use of alcohol.
3. Ask groups to feedback their responses.
4. Compare those reasons recorded for adults with those recorded for young people.
5. Run a discussion. If running it in the small groups, distribute the Discussion Card to assist in focusing the discussion.
 - Which reasons for drinking are more likely to lead to harmful outcomes?
 - Which reasons for drinking are less likely to lead to harmful outcomes?
 - Are there different pressures or influences affecting males or females to drink?
 - How might who someone is with affect their choice to use alcohol or not?
 - How might where someone is affect their choice to use alcohol or not?

Variation:

Distribute a set of the Reasons cards to each group.

Instead of completing a brainstorm, ask them to allocate the cards to one side or the other of the Reasons for Use or Non-Use sheet. The group members may believe that some reasons belong on both sides. In this case they should place them in the middle of the sheet.

Reasons why some young people use alcohol	Reasons why some young people choose not to use alcohol

Reasons why some adults use alcohol	Reasons why some adults use choose not to use alcohol

Reasons Cards		
to enjoy the taste	stress	taking medication
concern about the law	too young	to be cool or look good
too young to buy it	allergies	next day commitments
don't like it	experiment	bored
don't want to embarrass self	depression	previous bad experience
religious reasons	family expectations	Cost
diabetes	having an alcohol-free day	to celebrate
to impress	because everyone is	to get away from problems

not allowed	dieting	to lose inhibitions
pregnancy	to relax	to gain confidence
driving	to have a good time	responsible for their friends
to feel confident	health and fitness	because they're addicted
workplace/school rules	facing a challenge	because it's offered

Discussion Card
<ul style="list-style-type: none"> • Which reasons for drinking are more likely to lead to harmful outcomes? • Which reasons for drinking are less likely to lead to harmful outcomes? • Are there different pressures or influences affecting males or females to drink? • How might the company someone is with affect their choice to use alcohol or not? • How might the time or the place where someone is affect his or her choice about whether to use alcohol or not?

Activity E: Information Jigsaw (Primary and Secondary)

Purpose:

- To provide information about drugs (alcohol, nicotine and cannabis) and their effects
- To encourage participants to identify the most important or useful knowledge about these drugs

Resources:

'Information Jigsaw' cards (one section per participant)

To make the jigsaw cards, copy the Drug Information sheets located at the end of this section on to coloured paper – a different colour for each drug (eg. White = alcohol, Blue = nicotine, Green = cannabis), and cut the sheets into sections.

Method:

1. Explain how to play 'Information Jigsaw'. Each person is given a piece of the 'jigsaw'. Participants find those who have pieces of the same colour. They group together to complete their jigsaw. Once their group is assembled, they will have a collection of different pieces of information about the drug.
2. Ask them to read out to each other the information they have. They then select one or two pieces of information to share with those groups who have looked at different drugs.
3. Ask one person from each group to share the chosen information with the whole group.

Activity F: Wishes and Worries (Primary and Secondary)

Purpose:

- To explore the fears and concerns people have about socialising in situations involving drug use

Resources:

Asking Permission role-play cards

Method:

1. Play a pairing game to organise participants into pairs. Organise for one to play the child and one the parent.
2. Read out the role-play scenario.
3. Brainstorm the questions and concerns the parent might have.
4. Ask pairs to try out the 'Asking Permission' role-play and when playing the scene ensure that the parent asks the questions.
5. After they have tried out the role-play ask for a volunteer pair(s) to play their scene out in for the class
6. To deepen the enquiry, explore the characters' concerns using an interview technique as outlined below, or conduct a group discussion.

Interview techniques:

Use the Hidden Thoughts technique whereby another actor who has watched the scenario steps forward and is interviewed as if they were the thoughts of the character,

OR

Interview the actor in role as the character (as one would on a TV or radio interview).

Sample interview questions:

- What is this character thinking or feeling but not saying out aloud?
- What is this character afraid of?
- What does this character worry about?
- What is this character hoping for?
- What would help this character?

Discussion Questions

- What do parents worry about most in relation to parties?
- What do young people worry about most in relation to parties?

<i>Asking Permission: Secondary Role-play scenario</i>
Lee/Leah, aged 15, asks his/her parent's permission to go to a party. The parent is concerned and has many questions.

<i>Asking Permission: Primary Role-play scenario</i>
Tim/Teena aged 11 asks his/her parent's permission to go to her friend's house for New Year's Eve as the friend's parents are having a big party. Tim/Teena's parent is concerned and has many questions.

Variations:

A role-play such as the one above can be rehearsed and prepared as part of a presentation at a large forum or for triggering discussion with a class or group.

This scenario can be discussed rather than role-played.

Parents and young people can be interviewed on panels about what they think the fears and concerns of young people and parents are in relation to parties.

Activity G: Handling Pressure in the Moment (Secondary and Primary)

Purpose:

- To enhance skills in dealing with peer pressure or peer invitations to engage in drug use

Resources:

Lines of Offer Cards, Tactics Cards and In the Style of... Cards

Method:

1. Explain that knowing how to deal with pressure from friends is important. It can be useful to have ideas about what you can do or say if you are invited to use a drug but wish to decline.
2. Organise the Role-play by asking the class to form trios or fours. Hand out Lines of Offer cards to each trio and ask them to work out a response in which they decline the offer. Make it clear that the offer is to be made by one person to two others who do not want to take up the offer (or in the case of a foursome, the offer is made by one person to three who do not want to accept).

Challenge the actors to develop a scene in which those refusing the offer do not come across as the less attractive characters – but rather as funny, witty, attractive or able. Role-swap or re-cast if a stronger actor is needed in the decline position. Remind the students that the goal of this activity is to model ways in which people can decline without looking like a ‘loser’ or losing status. Point out that the media often stereotype the one who declines as a ‘nerd’ and the one who offers as cool or attractive. Make sure you break this stereotype. If this is not possible given those involved, choose another activity instead.

3. For a focus on tactics have players choose an approach for themselves, or alternatively use the Tactics Cards to assign a particular tactic for the actors to use.
4. For a more humorous approach, ask players to act out their lines in a certain style. Use the In the Style Of...Cards for this.
5. To add a degree of difficulty, assign players both a ‘tactic’ and a ‘style’.
6. After groups have had time to prepare, ask them to play their scenes out to the class. Make humorous as well as serious enactments welcome. Ensure that the aim of the activity is met – modelling a successful ‘decline’.
7. Run a discussion about how one learns to handle pressure or assert choices.

Variation:

Students on a panel can talk about how to decline offers or be interviewed about effective refusal lines.

Lines of Offer Cards (Primary)
Put pressure on the other player by suggesting that they must be too scared to try this drug (cigarettes)
Put pressure on the other player by suggesting that everyone will do it one day (try alcohol)
Put pressure on the other player by suggesting that this will help them look cool with the other kids (trying a cigarette)

Put pressure on the other player by suggesting that this is the way to make their party fun (tasting the parents' alcohol)
Put pressure on the other player by suggesting that no-one will ever find out – so why not try it (smoking cigarettes)

Lines of Offer Cards (Secondary)
Put pressure on the other player by suggesting that they must be too scared to try this drug (cannabis)
Put pressure on the other player by suggesting that everyone has to try this sometime (smoking cigarettes)
Put pressure on the other player by suggesting that everyone else is doing it (drinking alcohol)
Put pressure on the other player by suggesting that this will help them cope with their distress and relax them (smoking cannabis)
Put pressure on the other player by suggesting that this will help them relax and get over their social nerves (drinking alcohol)
Put pressure on the other player by suggesting that this is the time for celebration – it's a special occasion (drinking alcohol)
Put pressure on the other player by suggesting that this is the way to make their party fun (providing alcohol for everyone)
Put pressure on the other player by suggesting that no-one will ever find out – so why not try it (smoking cannabis)

Tactics cards: Deal with the pressure by	
Stalling	Complaining about something you have to do
Changing the topic	Joking
Making up an excuse	Reasoning
Distracting	Arguing
Explaining	Ignoring

'Acting it out in the style of...' Cards:
Play this scene as if you were gangsters
Play this scene as if you were elderly citizens
Play this scene as if you were movie stars
Play this scene as if you were gorillas
Play this scene as if you were society snobs
Play this scene as if you were chickens or roosters
Play this scene as if you were brain surgeons
Play this scene as if you were sheep
Play this scene as if you were toddlers

Variations:

Student leaders can run this activity with groups of students. Alternatively, if using this activity as part of a large forum, a more theatrical approach would be to have a few players rehearse their short scenes and play them out as a collage.

If you don't wish to use role-play as the mode – the Lines of Offer cards can be used as the basis for discussion in small groups or for a panel response.

Activity H : Help Seeking – A Friend In Need (Secondary)

Purpose:

- To identify situations where a friend may need help regarding a drug-related problem
- To identify possible sources of support for young people dealing with social or emotional problems

Resources:

Sample wallet cards

Method:

1. Point out that sometimes people come to serious harm in situations involving alcohol or other drugs. Let participants know that the next activities are designed to help everyone be sure about what they could do if called on to handle a first-aid medical emergency. Point out that going for help in a medical emergency is only one sort of help a friend or bystander may be called on to give. Other issues can arise that don't seem as urgent but may be just as serious. Sometimes people need emotional rather than physical help. There are ways to seek this help or to alert others that help may be needed.
2. Hand out the wallet cards. Have students use the telephone directory to help them complete their card with useful help numbers to call should they or their friends or family ever need some extra support with a physical social or mental health problem. Private numbers can also be added. Encourage students to show this card to friends and family as part of collecting their number. It can be used to start a conversation called 'When do you think I should call on you for help?'
3. When should I worry?

Act out a scenario in which Friend A talks with Friend B, explaining that he/she is worried about how down he or she is and offering to help them contact someone who can help.

Discuss:

When should you be concerned about a friend?

Where can you go for help if you think your friend needs support with stress, family or mental health issues?

Kidshelpline 1800551800	Parent _____
Ambulance _____	Parent _____
Health Centre _____	Another adult _____
Doctor _____	School counsellor _____
Police _____	Friend _____
Drug& alcohol helpline _____	Neighbour _____
Lifeline _____	_____

Variations

Peer leaders can prepare a short speech on when they think young people should call for help.

Peer leaders can interview a panel of parents about when they think young people should call on adults for help.

Peer leaders can invite a paramedic to talk to the class/forum about what happens when an ambulance is called to a party and to speak about when they recommend help should be called.

Peer leaders can invite local agencies to the class/forum to speak about what happens when a person comes to them to get some help with a problem and what sort of help they can offer.

Prepare a short scenario in which a team of actors demonstrates how to call for medical help and/or adult help when a problem occurs at a party.

Activity I: Help Seeking – A Friend In Need (Primary)

Purpose:

- To identify situations where a friend may need help regarding a bullying problem
- To identify possible sources of support for young people dealing with social or emotional problems

Resources:

Sample wallet cards

Method:

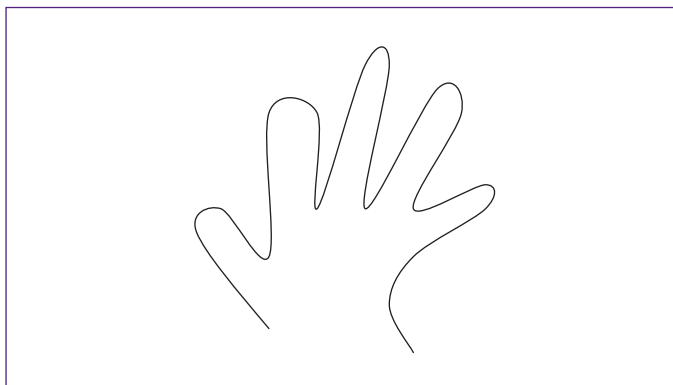
1. Point out that sometimes people can experience distress because of how others treat them, particularly if they are bullied, teased or excluded because they are seen to be different in some way. Let participants know that the next activities are designed to help everyone be sure about what they could do if they see bullying going on. Point out that going for help in such a situation may take courage, but everyone has the right to live and learn free of harassment and it is important to help protect other people's rights.
2. Hand out the helping hands cards. Have students complete their cards, filling in the names of useful adults who could be called upon to help with a situation involving bullying. (Write one name per finger of the hand.) Encourage students to show this card to friends and family and to talk with them about 'When do you think I should call on you for help?'
3. When should I worry?

Act out a scenario in which Person A talks with an adult, explaining that he/she is worried about how others have been treating person B and asking for the adult to help.

Discuss:

When should you be concerned about a friend?

Where can you go for help if you think your friend needs support with stress, family or mental health issues?



Variations

Peer leaders can prepare a short speech on when they think young people should call for help.

Peer leaders can interview a panel of parents about when they think young people should call on adults for help.

Peer leaders can invite a paramedic to talk to the class/forum about what happens when an ambulance is called to a party and to speak about when they recommend help should be called.

Peer leaders can invite local agencies to the class/forum to speak about what happens when a person comes to them to get some help with a problem and what sort of help they can offer.

Prepare a short scenario in which a team of actors demonstrates how to call for medical help and/or adult help when a problem occurs at a party.

Activity J: Lucky Dip (Primary and Secondary)

Purpose:

- To encourage thinking about possible ways to handle situations where the people involved have different views about what is the right thing to do

Resources:

One collection of Lucky Dip Scenarios for each group

Cut up the Lucky Dip Scenarios and place in a box, bag or jar

Method:

1. Group the participants.
2. Give each group a Lucky Dip Jar.
3. Explain that in life we never know what our luck may bring and one day we may be called on to handle one of the situations in the jar.
4. Ask the group to take a lucky dip card from the jar and read it out to the group.
5. As a group spend some time talking about how you could handle that situation, making sure you come up with a few possible options.
6. When you have finished with your card, draw out another and repeat the process.
7. When the groups have played a few rounds, ask them to brief the rest of the class on the problems they ended up with and the sorts of strategies they came up with.

Lucky Dip: Secondary Scenarios
A group of five friends are at a party. Another friend asks if they all want to try smoking dope. None of them have tried it before and some of them know they don't want to.
Gino/Gina is concerned that his/her older sibling has been driving when stoned.
A group of friends have decided they should have a party at your place while your parents are away and you are worried that things could get out of hand. Your parents would definitely not give permission for this to happen.
Your best friend has started hanging out with a group who smoke at lunchtime. Now he/she is starting to social smoke with them. You think the idea of him/her taking up smoking is crazy.
A party you are at is getting out of hand. Some gatecrashers are causing trouble and a few people are really drunk. The person you were going to get a lift home with doesn't want to leave but you do.

Lucky Dip: Primary Scenarios
A group of five friends are at a party. One person suggests that they send some 'hate' emails to someone in the class who was not invited. No-one else in the group has done this before and they know they don't want to (but they don't know what each other think).
Gino/Gina is concerned that his/her older sibling has started smoking a few cigarettes when out with friends.
Your best friend has invited everyone in the class except for one person to his/her birthday party. This person gets teased a lot at school. You feel bad about how this person will feel about being left out.
You are at a party with kids and adults. Some kids are taking the adults' alcohol and offering it around – even offering it to really little kids who are too young to know what it is.

Activity K: The Fortune Teller's Booth (Secondary)

Purpose:

- To explore how factors such as the drug, the person and the place affect the potential risks and consequences of using a drug
- To engage participants in predicting possible outcomes or consequences

Resources

A copy of the Fortune Cards (cut up and placed in into five buckets or containers according to category)

A copy of The Fortune Scenario worksheet for each group

A table set up for the Fortune Teller's Booth (props as appropriate)

Method:

Part 1: The Game- small group activity

1. Cut the game sheet out to form sets of cards. Put the cards into separate boxes or bags named 'Drug', 'Amount', 'Place', 'Reasons For Use', and 'The Person'.
2. Organise participants to work in groups of 5 and provide each group with a worksheet.
3. A representative from each group collects one card from each container.
4. The group read out their collection of cards to establish the scenario they are working on and fills in the details on their Fortune Scenario Sheet.

The Fortune Scenario	
Drug–	
Person–	
Place–	
Amount–	
Reasons–	
Our Risk Rating for this situation is: Extreme / High / Moderate / Low	
Our prediction for the character:	

Part 2: The Game- whole group activity

1. Set up a 'Fortune Teller's Booth' which consists of 4 student leaders, 2 are the 'predictors' and 2 the 'advisors'.
2. Ask a student representative to select a card from each of the buckets and make an appointment to go to the fortune-teller's booth. (Alternatively, use the sheets filled in by groups in part 1 of this activity.)
3. Once the scenario is read out, the Predictors' role is to suggest what is likely to happen to the character during and/or after the incident (One can predict a bad fortune and one a good fortune). The Advisors' role is to suggest some strategies to use to avoid the bad fortune.

Fortune cards					
The Drug	Cannabis	Nicotine – cigarettes	Alcohol – pre-mixed drinks	Alcohol – full strength beer	Alcohol – straight spirits
The Person	Year 9 Boy	9-year-old student	Two Year 7 students	Year 10 girls	Parent
The Place	At home	At a pub	Down the Creek	In the park	At School
The Amount	A small sample	As much as he/she can get	The whole container	Half of what others are having	A tiny bit
The Reason	To impress	To cope	To find out what it is like	To have fun	To forget bad times

Activity L: The Decision Game (Primary and Secondary)

Purpose

- To identify some of the factors influencing decisions relating to health issues
- To identify a range of choices and possible outcomes in situations which involve difficult decisions
- To predict likely consequences for those choices

Resources

- A Decision Game Card for each group from the list provided or one made up by the leaders
- a chair for each group
- butchers paper and markers

Method

1. Divide the class into groups of 5.
2. Each group is responsible for preparing and presenting one of the Decision Game scenarios.
3. In the preparation phase ask the group to brainstorm and write down the possible for and against arguments.
4. Assign roles to the group members.
 - **Person 1:** Sits in the chair to listen to the arguments and then make the decision
 - **Person 2:** Is responsible for presenting the 'for' arguments
 - **Person 3:** Is responsible for presenting the 'against' arguments
 - **Person 4:** Is responsible for reading out the scenario and for helping to coach the actors
 - **Person 5:** Is responsible for facilitating the process and interviewing Person 1 about his/her decision
5. To play out the scenario, Person 1 sits in the chair. Person 4 reads the dilemma out to the audience. Persons 2 and 3 take a stance on either side of the chair and begin to alternately argue their case. Person 5 calls a stop to the argument when it has reached its peak and asks Person 1 what decision their character might make if it was based on those arguments. Useful questions include:
 - Which arguments were coming through most strongly on each side?
 - What decision do you think someone would make if these were his or her thoughts?
6. After the activity has been rehearsed, ask the group to look at the case presented and identify some possible consequences of the decisions. (see worksheet...)

Decision Game: Secondary Scenarios
You are at a paddock party standing around the bonfire. The party is to celebrate your friend's 16th birthday. Some of the older people there who have been drinking are starting to mess around and throw things into the fire. Do you ask them to stop?
You have been invited to a party that you know will be pretty wild. You think that your parents won't let you go if they know whose party it is. What will you do?
A friend (who you were going to walk home with) has accepted a lift home with someone who has been drinking. Your friend wants you to accept the ride too. Will you?
A group of friends drops by and invites you to go down to the river for a swim. They have some beers and a cask of wine. You know that later, after a few drinks, some of your friends will start doing some risky stuff such as jumping from higher and higher points of the cliff. What will you do?
You promised your parents that you would not drink. A friend starts teasing you because you are not drinking. Will you drink?
Two rival teams have just been brawling in a very close finish. Some of the spectators are drunk and your friends want to start a fight with the opposition spectators. Will you join them?

Decision Game: Primary Scenarios
You are at your friend Jenni's/Jacko's farm property. Her/his older brother has the trail bikes out and is offering rides across the paddocks. Your parents have told you never to ride trail bikes unless they are present. It looks like great fun. Do you accept the offer?
Kim/Kym has moved from interstate to join your Year 5 class. She/he seems very shy and hasn't made any new friends. Some of your friends think she/he is unfriendly and don't want you to ask her/him to sit with them to have lunch. You feel concerned for her/him but still want to be with your friends. Do you invite her/him?
A large group of Year 6 students are planning an after-party for their end of year graduation. As usual they have left Tanya/Tony out of any of the planning. They don't mind if s/he comes along but Tanya/Tony can be quite moody and unreliable. You know Tanya/Tony has troubles at home and think it is not very fair to leave her/him out this last time. Do you say something to your classmates?
A group of your friends are meeting some students from the neighbouring school at the park after school. Gina/George has a few cigarettes in her/his bag and wants everyone to share them together. She/he says it's just a few puffs each and what's the harm in doing that just for a bit of fun. You want to be part of the group but you don't want to smoke and your parents are always telling you not to ever try smoking. What do you do?
Fiona's/Finn's parents have gone away for the week and her/his older sister is looking after him. The sister goes to work early and Fiona/Finn has suggested you and your other friend come over and hang out there for the day rather than go to school. What do you do?

Variations:

The scenarios can be prepared for a more theatrical presentation at a forum.

The Decision Game can be followed by a role-play in which the audience advises the key character as to how to carry out a decision and this decision is enacted in a role-play. Re-plays of the scenario can be used to try out different pieces advice generated by the audience.

Activity M: The Stakeholders' and Experts' Panel (Secondary)

Panels are a good vehicle through which to involve stakeholders, experts and agencies in peer-led forums. It is important to choose a focus for the panel's attention. Student leaders can invite the guest speakers, brief the speakers and facilitate the panel.

Purpose

- To investigate views of community members and experts in relation to health issues important to young people (eg Safe Partying)
- To assist young people to develop interview techniques
- To engage the audience in thinking ahead about challenges they may encounter and possible strategies for dealing with them

Resources:

Panel members, facilitator and Questions

Method

1. Select the topic for the panel and ensure it serves the objectives of the event.
2. Plan the event, book facilities and invite audience.
3. Choose appropriate guests.
4. Invite the guests to participate.

5. Student facilitators can invite and liaise with guests.
6. Develop appropriate questions to address the chosen issue.
7. Students may send questions to the guest or ask the guest to suggest questions they could address. Email contact is useful for this.
8. Student facilitators welcome and introduce guests.
9. Student facilitators chair the panel and facilitate questions from the audience.

Sample Topic: Safe Partying- End of Season Celebrations

Panel members:

- Student 1
- Student 2
- Drug and Alcohol Worker
- Parent
- Police Representative
- School Principal

Questions To The Panel:

1. (to **the Parent**)

End of year celebrations are important to young people – especially when they feel they have made a big effort to complete their final year at school. What role do you think parents need to play around this time?

2. (to **Drug and Alcohol Worker**)

Often binge drinking or getting drunk is a concern in regard to end of season celebrations. What are the main things we need to worry about with young people getting drunk?

3. (to **Students 1 and 2**)

What do you think students are hoping for when they participate in end of year celebrations and parties?

4. (to **Principal**)

Often the community expects schools to make sure that young people are educated about how to make safe health choices. What role if any, has the school to play in relation to binge drinking and young people?

5. (to **Police**)

What sorts of things do police do to prevent harms from binge drinking and young people? What sort of problems are they called on to deal with?

6. (to **Parent/Principal**)

Campaigns often use scare tactics for a whole range of health issues, including road accidents. Do you think scare tactics work to stop young people from taking risks?

7. (to **Principal/Parent**)

If a party is hosted at a student's house after a big school event (commonly called 'after parties') should the school be responsible in any way? If so how?

8. (to **the Police**)

Is there any role for police in keeping an eye on 'school' parties? (open up for general discussion about leaving school/schoolies week etc)

9. (to **Principal**)

What about end of year activities for final year students, many of whom have already turned 18 and where alcohol is often consumed in celebrations? What are your concerns about this?

10. (to **Drug and Alcohol Worker**)

What can young people do to keep themselves safe from harm if they are at a big party or event which is part of the end of season celebration – such as schoolies, after parties etc?

11. (to **Police**)

How can your organization support school communities in relation to the end of Year 12 school activities?

12. Questions from the floor.

Activity N: Coping Capers (Primary and Secondary)

Purpose

- Identify different strategies people use to help cope with challenging situations

Resources

- Reaction cards (copy and cut up)
- Sign cards designating response
 - Helpful (likely to make it easier)
 - Not much Use (wouldn't really change the situation)
 - Harmful (could make it worse)
- large space

Method

- Give each member of the group one or two Coping Capers Cards reaction cards
- The facilitator then describes a situation that may be very challenging for someone eg
 1. You are new to a school and feel quite lost and lonely. You have more homework than you can manage and you are having trouble understanding the timetable.
 2. You are having friendship troubles and nothing seems to go smoothly.
 3. Your grandmother is ill and your whole household seems to be too busy to listen to you. You need some help with your homework but you feel worried about your grandmother.
 4. Your friends are in a mood to get up to mischief to entertain themselves and you think what they are planning is not right for you.

Alternatively the group leader can just ask the participants to think of a situation that is challenging.

- Ask the group to consider whether the action on their coping capers card would be helpful, harmful or useless to help someone in this situation. They then move to the designated space in the room as marked by the signs saying Helpful / Harmful / Useless
- Ask the group to share talk to those around them about what is on their card and why they chose that position.
- Ask some people from each category to share why they chose their sign.

- Point out that different people with the same reaction might go to different signs. For example some might find tidying up helpful whereas others may not.
- Repeat the process using a very different challenge.
- Seek an opportunity to point out that different challenges require us to use different coping strategies and that is why we need a broad range in our personal collection.

Variations

- This could be conducted as a whole class activity or as part of a larger forum.
- Response cards could be printed so that some people have the same response but may go to different signs.
- The activity could also be conducted with participants lining up along a continuum from helpful to harmful.
- Pairs can compare their cards and talk together about when their strategy could be helpful or harmful, then mingle on to swap cards and responses with new partners.

Coping Capers Cards	
Talk to a friend	Think about walking on a beach
Take the dog for a walk	Go for a swim
Do some exercise	Find a spot that is quiet and private
Climb a tree	Put your headphones on and play your favourite music
Tell your mum or dad	Take the day off
Go to bed	Yell and scream
Tidy up	Daydream
Ask your friend for help	Tell everyone you know
Act brave	Eat your favourite food
Say a prayer	Look for someone to blame
Write a letter	Cry
Speak to an Elder or respected community member	Ignore it
Wait till tomorrow	Do a puzzle
Sing your favourite song out loud	Cook your favourite food and share it with someone
Spend time with a friend	Get out in the garden
Make a plan	Write an email
Talk on the phone	Play ball
Make something	Help someone out with their tasks
Go to bed early	Eat something nice
Tell your self you are doing OK	Ask for advice

Activity 0: The Problem Solver Panel (Primary and Secondary)

Panels are also useful devices for structuring problem-solving conversations. Placing students in role on a panel can be a good way to get access to a variety of perspectives about how to manage challenging situations. Being in role invites them to generate thinking from a particular perspective, rather than just to put forward their own personal views. This can also be protective for students, particularly when they may feel under certain pressure to hold socially acceptable views. Useful roles include doctor, coach, psychologist, parent, teenager, local business person, banker. Alternatively, fictional roles, such as those modelled in the sample below, can prompt thinking from particular perspectives.

Purpose

- To apply different perspectives in developing strategies to avoid, reduce or minimise harm in a range of situations involving drug use

Resources

- Problem scenarios
- Problem Solver Panel Role Cards
- Table and chairs for a panel

Method

1. Assign panel roles to student volunteers.
2. Inform panel members that their role is to devise a series of strategies and advice as if they were an expert. Each panellist has a particular expertise and they need to provide advice from this perspective.
3. Assign each panel member a small group to work out what the thoughts of the expert might include.
4. Distribute scenario cards to the group or brainstorm with the class to devise scenarios to suit the group or local community.
5. Allow the student leaders to run through the activity before conducting it in front of an audience.

The Panel Roles

- Health and Safety Officer – takes care of safety and looks out for potential health issues. Preventing problems is this person's aim.
- Relationships Officer – takes into account issues of friendship and family.
- Creative Thinker- comes up with creative options and suggests ways others may not think of.
- Financial Advisor- takes into account the financial costs.
- Duty Officer – takes into account duties and responsibilities such as school work, sport, hobbies and other commitments.

Problem Solver Question Sheet
<p>For the <i>Health and Safety Officer</i></p> <p>Could anyone come to harm in this situation? If so how? What advice would you give to deal with this? Is any one's property at risk of damage? What advice would you give to help prevent this damage?</p>
<p>For the <i>Relationships Officer</i></p> <p>Who could get upset or distressed here? What advice would you give them?</p>
<p>For the <i>Creative Thinker</i></p> <p>What creative or lateral solutions could help here? Who else could be brought in to solve this problem?</p>
<p>For the <i>Financial Advisor</i></p> <p>What costs do you predict? How can they be avoided or minimised?</p>
<p>For the <i>Duty Officer</i></p> <p>Will this situation affect anyone's work, study, sport, hobby or family responsibilities? If so, how and what advice would you give?</p>

Problem Solver Scenarios: Secondary
<p>Julia (15) and Mat (16) are a bit concerned. They are part of a group of young people celebrating New Years Eve on the beach. Their parents are celebrating up at the surf club. The beach is pretty dark and some of the kids (aged 12–17) have been sipping their parent's champagne. Jason and George, both 14, have been drinking and are now in swimming and dunking each other and calling for others to join them. Usually this beach is patrolled – it can have a strong undertow. What should Mat and Julia do?</p>
<p>Ben's parents have said he can have an 18th birthday party in the backyard and they will provide the alcohol, beer and wine, and Ben's uncles will be on the front gates. Ben's parents have said they do not want any dope smoking at the party. Some of Ben's friends smoke dope at parties in preference to alcohol. What should he do?</p>
<p>Lisa and Kelly are 16 and they have gone to a huge party of a student in Year 10 at their school. Lisa has been accepting drinks from someone she is keen on but doesn't really know that well. She is about to go for a walk with him down to the park. Kelly is concerned the Lisa will regret what she is about to do, and would not make that choice if she were sober. What should Kelly do?</p>
<p>Rita is 16. She has been babysitting the children of her mother's boss. They arrive home after midnight and the father is intending to drive Rita home. He is obviously affected by alcohol and Rita thinks he should not be behind the wheel. She has a basketball game early the next morning and is keen to get home. What should Rita do?</p>
<p>Gina is in Year 11. She is sleeping over at a friend's house after a party. One of the other girls sleeping over (Mary) drank a lot at the party, and became very ill quite early in the night. At 1am Mary starts vomiting again but her friends can't seem to wake her up properly and they can't get her to swallow water. Now everyone wants to go to sleep. They try to get Mary cleaned up and put in a bed but she doesn't respond. The parents have long gone to bed. What should Gina do?</p>

Problem-Solver: Primary Scenarios

Laura is going on Year 6 school camp and has been assigned to a tent group with girls she would like to be friends with because they are considered the cool kids. They have told Laura that they will be sneaking out of their tent at midnight to meet the boys from Jacko's tent and have feast. Jacko is going to bring cigarettes and they are all going to try one because Jacko says that everyone at high school smokes. What should Laura do?

Kim has been invited to spend the night at her friend Louise's place, they are going to watch their favourite programmes and cook spaghetti for dinner. Kim has asthma and both Louise's parents smoke inside the house. Last time Kim stayed over she had bad asthma afterwards. She wants to go but doesn't want to get asthma. What should Kim do?

Jake is 12 years old and has just moved from the farm to live with his grandparents so he can attend secondary school in town. He has joined the footy club and is starting to make new friends. One Saturday his new mates invite him to hang out at the footy club after the adult game. Their parents always stay on for drinks and a barbeque. They tell him about how they sneak swigs of alcohol from people's glasses and assume he will join in this game too. What should he do?

Variations:

The Problem Solver Panel can be conducted within a class group led by student facilitators.

In a more theatrical format, it can be used as part of a forum facilitated by students. In this case the panel members could be equipped with props or items of clothing suggestive of their role.

Activity P. Horseshoe Harms (Primary and Secondary)

Purpose

- Identify risk associated with the circumstances or places in which alcohol is consumed
- Identify low risk within the spectrum of alcohol consumption
- Explore social and personal factors which influence people's views about alcohol uses

Resources

- situation cards
- most to least dangerous sign posts
- space

Method

- Identify a continuum (arranged as a large arc or a horse shoe shape) ranging from most to least risky/harmful.
- Give each participant a situation card. Ask them to place themselves along the continuum according to whether they believe their situation to be more or less risky.
- Once in position they should compare their cards with those around them and move to fit with where they think they rank on the continuum.
- Ask some of those at the riskier end to read out their cards and explain their choice.
- Ask some of those at the least risky end to read out their cards and explain their choice to position themselves where they are.
- Repeat the process for some of those in the middle of the spectrum.
- Point out that people often rely on their luck to keep them safe (hence the horse shoe), but that a responsible attitude towards safety entails a thinking about the risk factors associated with the person, the drug, the frequency and context in which drugs are being used.

Situation Cards: Primary Scenarios
Having a cigarette with your friends just to try it
Letting a toddler taste alcoholic drinks
Asking your older brother to buy some beer for you and your friends
Asking your older friend to buy some cigarettes from the shop
Accepting a drink from someone you don't know
Taking four cigarettes to Year 6 school camp
Sipping champagne at your Uncle's engagement party without your parents knowing
Taking your friend's prescribed medication because you have similar symptoms
Taking some painkillers without direction from an adult
Using your friend's asthma puffer because you are out of breath
Picking up a half smoked butt from the floor and smoking it
Tasting someone else's cough mixture to see if it tastes as bad as they say
Drinking cola drinks for breakfast everyday
Drinking a high energy fizzy drink every afternoon when you get home from school
Breathing in other people's cigarette smoke
Drinking a ten cups of coffee a day
Taking some of your father's home brew to show your friends
Getting into a car with an adult driver who has had too much to drink
Putting alcohol into a punch bowl at a family party without telling anyone
Drinking alcohol when under 18 just because your friends are
Encouraging someone to get drunk
Smoking if you are an asthmatic
Taking up smoking

Situation Cards: Secondary Scenarios
Drinking alcohol if you're pregnant
Taking up smoking
Trying a few cigarettes at a party
Giving alcohol to a toddler
Drinking alcohol while using other drugs
Having a glass of wine with dinner
Smoking if you are asthmatic
Drinking to the point of passing out

Driving when affected by alcohol
Drinking caffeine drinks to help you stay awake while studying
Binge drinking
Tasting others' alcoholic drinks before you drive them (as a 'p' plate driver)
Giving a lift to a car load of friends who have been drinking heavily
Drinking alcohol with strangers
Walking home alone drunk
Riding a push bike whilst affected by alcohol
Arriving home drunk
Going to a party without a plan to get home
Taking someone else's prescription medication to help you cope with feeling stressed
Having a glass of champagne at a wedding
Getting into a car with a drunk driver
Having a couple of drinks at a party
Getting drunk with friends around a campfire
Allowing someone who has been smoking cannabis to drive you home
Providing unlimited alcoholic drinks at an 18th birthday party
Drinking whilst at a beach party
Smoking cannabis
Using a drug someone has told you is ecstasy
Drinking on a fishing expedition
Staying over at someone's house after you have been drinking

Information About Drugs

Definitions:

Drug

The World Health Organisation (WHO) defines a drug as follows:

‘ A drug is any substance which, when taken into the body, alters its function physically and /or psychologically, excluding food, water and oxygen.’

This definition includes medicines, caffeine, alcohol and tobacco as well as the psychoactive drugs that people are often concerned about.

Harm minimisation

This is the primary principle underpinning the National Drug Strategy. It refers to policies and programmes aimed at reducing drug related harm. It aims to improve health, social and economic outcomes for both the community and the individual, and encompasses a wide range of approaches, including abstinence oriented strategies. Australia’s harm minimisation strategy focuses on both licit and illicit drugs.

Harm minimisation includes preventing anticipated harm and reducing actual harm. Harm minimisation is consistent with a comprehensive approach to drug-related harm, involving a balance between demand reduction, supply reduction and harm reduction.

Legal and illegal drugs.

Legal drugs, sometimes called licit drugs, are acceptable by the law under certain circumstances. For example alcohol is a legal substance even though it is not legal to serve it to someone under the age of 18 years and it not legal to sell it to them. Cigarettes are also legal, but it is not legal to sell them to someone under the age of 18 years. Medicines are legal, although for some medicines it is necessary to have a prescription to obtain them.

Illegal or illicit drugs are those that it is against the law to produce, use or possess. These include cannabis, heroin, cocaine, amphetamines and ecstasy.

Psychoactive drugs.

These drugs are taken for their effect on how people think, feel and behave. They can be categorised into the following three groups according to the way they affect the body.

Stimulants – speed up the messages to and from the brain. They increase the heart rate, blood pressure and body temperature. They can increase confidence, and reduce tiredness and hunger. Examples include nicotine, amphetamines, speed and ecstasy.

Depressants – slow down the messages from the central nervous system to the rest of the body and they way the body works becomes much slower. These drugs tend to have a relaxing or calming effect in small amounts. In larger amounts they can cause loss of coordination, unconsciousness, vomiting and in extreme cases, death. Examples include alcohol, cannabis, heroin and tranquillisers.

Hallucinogens – can affect a person’s perception of what’s going on and distort what a person may see, feel or hear. The effects can vary from person to person as they can change the way the brain works so people who take them cannot be sure of how they might feel. Examples include LSD, ecstasy and cannabis in large doses and magic mushrooms.

Fact Sheet: Cannabis

Cannabis is both a depressant (slows down the messages between the brain and the body) and a hallucinogen (it distorts a sense of reality).

Cannabis comes from the plant – cannabis sativa. It is mainly in three forms:

1. Marijuana – made from dried leaves, stems and flowers and is the most commonly used form.
2. Hashish – made from the plant's resin which is dried and compressed.
3. Hash oil – thick liquid taken from the plant.

It is usually smoked in hand-rolled cigarettes called 'joints' or in water pipes called 'bongs'. It can also be mixed with food and eaten. THC (Delta-9 tetrahydrocannabinol) is the chemical in cannabis that is responsible for its effects. Some parts of the plant have more THC than others and the way the plant is grown also results in different strengths.

Effects of using cannabis.

The effects of cannabis will vary from person to person and will depend on the amount used, strength of the cannabis, how it is used, personal difference such as weight, size, health and mental health, the setting – whether the user is alone or with others, and the user's level of tolerance to the drug.

In small amounts Cannabis can cause people to

Feel more relaxed and calm	Have difficulty in concentrating
Talk and laugh more than usual	Be more aware of sensations like colour and sound
Have poor balance and coordination	Get red eyes
Feel hungry	

Larger amounts of Cannabis can cause

Confusion and paranoia	Sense of separation from reality
Restlessness	Nausea or vomiting
Excited state	Hallucinations
Anxiety or panic	Accidents
	Unwanted or unprotected sex

Using Cannabis for a long period of time can cause

Loss of memory	Increased risk of respiratory diseases such as bronchitis and lung cancer
Acute (serious) paranoia	Some may develop mental health effects including psychosis
Decrease in motivation	Being more prone to sickness and infections including poor skin
Difficulty in coordination and ability to do things like driving or operating machinery	Irregular menstrual cycles
Legal problems	Lowered sperm count
Financial and lifestyle difficulties	
Conflict with family and friends	

Can people become dependent on cannabis?

Yes. Some people do become dependent on cannabis, which means they rely on the drug and regularly seek its effects. They may begin to centre their life around when they can smoke. They may have cravings for the drug which include physical and emotional pain experienced as withdrawal symptoms. People can be dependent on cannabis both physically and psychologically.

How many teenagers use cannabis?

35% of all secondary students have used cannabis. 30% of the adult population have used cannabis and 13% have used in the last 12 months.

Legal status

It is illegal to grow, sell, possess, or use cannabis in all Australian States and Territories. However, in SA, WA, ACT and NT, the growing and possession of a small quantity for personal use is not a criminal offence, but carries a small fine.

It should be noted that people convicted of drug offences may be precluded from travelling to many foreign countries.

Fact Sheet: Alcohol

Alcohol is a drug. It is a depressant that can slow messages from the brain to the body. Alcohol is made through a fermentation process of a variety of fruits and vegetables and includes beverages such as beer, wine and spirits. Alcohol enters the bloodstream through the stomach and walls of the intestine.

How does alcohol affect the body?

Alcohol changes the way your mind and body works and affects different people in different ways. It depends on a person's age, size, weight and sex. It also depends on how much a person drinks and what their level of tolerance to the drug is.

In small amounts Alcohol can cause people to

Slow down	Feel tired and sleepy
Feel more happy and relaxed	Become clumsy
Get a bit confused	Become giggly or silly
Feel more confident	Feel less inhibited

Larger amounts of alcohol can cause people to

Slur their speech	Be embarrassed because they said or did something they wouldn't normally do
Disrupt their concentration	Have unprotected sex
Behave differently	Get into fights or cause damage
Feel sick or vomit	Feel angry or become violent
Feel very sad or down	Become unconsciousness
Have a hangover the next day	Suffer memory loss about what happened when drink
Get into trouble with parents or school	
Have an accident	

Drinking a large amount of alcohol for a long period of time can cause

Brain damage- including memory loss	Liver damage – food cannot be broken down properly
Heart problems – increased blood pressure, heart attack	Diabetes – the body can't break down sugar very well
Addiction	

Alcohol and the law

In Australia it is not legal for people under 18 to buy alcohol.

It is illegal to drive with a blood alcohol content over .05 and in most states it is illegal for probationary drivers to drive with any alcohol in their blood.

Can people be dependent on alcohol?

Yes. Drinking can lead to dependence. A heavy drinker has to drink more to feel the same effect. This condition is called tolerance and in the long run a heavy drinker can become dependant on alcohol, they may have difficulty coping without it and suffer withdrawals if they don't drink alcohol.

The NHMRC recommends safe levels for drinkers as:

- No more than two standard drinks a day for adult women and two alcohol free days per week. (More than 6 per day is considered hazardous).
- No more than four standard drinks a day for adult men and two alcohol free days per week. (More than 8 per day is considered hazardous).

There are no recommendations for safe levels for young people.

Most doctors recommend avoiding alcohol during pregnancy. Some say one standard drink per day can be considered safe. High levels of alcohol during pregnancy can cause damage to the child's development.

Fact sheet: Nicotine

Nicotine is a stimulant and it speeds up messages between the brain and the body. Nicotine is a drug that comes from tobacco plants. People use nicotine by smoking cigarettes, cigars and pipes.

Cigarettes don't just contain the tobacco leaf, they have many other chemicals added to make the tobacco burn more slowly. Cigarette smoke has more than 4000 chemicals in it and many of these chemicals can cause illness.

What are the immediate effects?

Nicotine can cause

- headaches
- nausea
- light headedness
- coughing or choking
- difficult breathing
- red and itchy eyes
- bad breath
- your clothes and hair to smell

People who smoke often and for a longer time may also suffer more serious illnesses and diseases, they include:

Lung cancer – the tar in tobacco is known to cause lung cancer;

Emphysema – emphysema is a disease that causes lung tissue to degenerate and makes breathing very difficult and uncomfortable;

Heart problems – smoking increases the risk of heart attack or stroke because it thickens your blood vessels and makes it harder for the blood to flow around the body.

What is passive smoking?

People who breathe in other people's cigarette smoke can also suffer coughing, sore eyes, dizziness, headaches and smelly clothes and hair. Smoking is particularly dangerous for people who suffer from asthma.

Is nicotine addictive?

Yes. Nicotine is a drug people can become very dependent on and at any age. If they stop taking nicotine they may feel anxious and have cravings for it.

Legal Issues

It is illegal to sell cigarettes to anyone under the age of 18 in Australia.

Financial Costs

Our community spends a great deal of money as a result of people becoming ill from cigarette smoking. More people die from tobacco related illnesses than any other drug.

Fact sheet: Painkillers

What are they?

Most painkillers come in the form of pills, tablets or capsules. People mostly use painkillers to stop a variety of aches and pains including headache, earache, toothache, high temperature and period pain. Another name for painkiller is analgesic.

What do they contain?

Aspirin and paracetamol are common components of readily available painkillers.

How do they work?

Painkillers slow down the messages to the brain that something is wrong so the body feels less pain. Painkillers do not cure a person's illness they just help to make the person more comfortable until they do recover.

Where do you get them?

Some painkillers can be bought straight from the chemist or supermarket. Stronger painkillers need a prescription to be written by a doctor and can then be purchased from a pharmacist.

Do they cause harm?

Yes painkillers are drugs and like all drugs can cause harm if they are not used correctly. People can get sick if they take other people's painkillers or if they take too many painkillers.

People who become ill from painkillers might:

- feel drowsy and want to go to sleep;
- get hot and cold flushes;
- vomit or feel very sick;
- lose concentration;
- say things that don't make sense.

If people take too many painkillers they can cause damage to their liver, kidneys, heart or stomach. Painkillers can also cause death if too many are taken at the one time. The body is not able to break them down and they become toxic in the body and a person may die or cause permanent damage to their organs.

Using medicines wisely.

All medicines are meant for helping people when they are ill but medicines may have side effects. It is important to make sure the side effects are not more harmful than the cure and the best way to do this is to make sure medicines are taken correctly or as prescribed by a doctor. Some important tips include:

- Never take other people's medication;
- Keep medicines in a safe place away from children;
- Always read the label and follow instructions carefully;
- If you feel strange after taking medicine always tell someone who can help;
- If someone else becomes ill after taking medicine always seek help from an adult or call emergency 000.

Section 5: Organising a forum: management and logistics

Sharing Tasks: Who Does What, When and Where?

Student leaders can play an active role in taking on the organizational tasks associated with preparing and running a forum. Students, working under the supervision and leadership of their teacher, can gain a valuable experience of civic service through taking on roles associated with publicity, equipment, management and catering. Many students may prefer to fulfil these roles rather than to take on facilitating activities within the agenda itself.

A class or team can take on the management and logistics of the forum whilst another class or team prepares the agenda and leads the activities. Alternatively, the one team or class may fulfil both sets of duties.

Management tasks

The sample task list provided below outlines a range of activities that will need careful management and planning in order that the event runs smoothly.

Task	May Include:	Suggested Number of students to work with support of teacher
Event Management	<ul style="list-style-type: none"> • Liaise with school leadership team • Work within school policy and liaise with relevant teams and services • Select theme or focus of the event • Check budget requirements with school personnel • Keep school administration informed of the process • Lead planning of the agenda • Liase with team preparing to facilitate the agenda items • Designate a person to manage the running sheet and ensuring that all participants understand the timing sequence • Coordinate event promotion 	4
Catering	<ul style="list-style-type: none"> • Decide what will be provided • Work to budget • Organise equipment such as urns and cups • Liaising with the Food Technology teacher • Organize a shopping list • Make and serve 'mocktails' and • Make and serve other food and refreshments • Clean up 	6
Invitations	<ul style="list-style-type: none"> • Decide on who to invite • Invite, brief and liaise with guest presenters • Design and make invitations and posters • Run a class activity to write invitations • Follow up on RSVPs to calculate numbers • Liaise with catering group 	4

Task	May Include:	Suggested Number of students to work with support of teacher
Displays/Costumes	<ul style="list-style-type: none"> • Display posters and materials gathered from relevant health agencies • Organise materials, costumes or props for appropriate activities • Liaise with team who will facilitate the forum activities 	4
Technical support	<ul style="list-style-type: none"> • Liaise with team who will facilitate the forum activities • Identify needs in relation to lighting, sound and any audio-visual material required e.g. data projector • Book equipment • Set up technical equipment • Troubleshoot during event as needed • Pack and return equipment 	4
Venue layout	<ul style="list-style-type: none"> • Liaise with team who will facilitate the forum activities • Develop floor plan which will cater for activities selected • Arrange tables and chairs • Set stage or presentation area • Moving furniture on presentation area as required during the event • Pack up at end of event 	4
Master of Ceremonies	<ul style="list-style-type: none"> • Time the agenda • Provide copies with timesheet • Liaise with team who will facilitate the forum activities • Practice welcoming speeches • Prepare introduction to presenters and activities • Prepare acknowledgements for both the audience and participants 	2
Registration and welcome	<ul style="list-style-type: none"> • Organise registration needs • Greet people as they arrive • Give directions • Write name tags as people register 	4
Evaluation /distribution of support materials.	<ul style="list-style-type: none"> • Select and prepare evaluation materials • Distribute and collect evaluation materials • Collate evaluation data after the event • Report responses to management committee 	4

Section 6: Evaluation and feedback

There are a number of ways to gather feedback from recipients. One way is simply to talk with them over refreshments after the event. Consider the purpose of the evaluation before planning how to collect the data. The likely purpose is to discover what participants learnt or valued about the event. This is also a good time to ask about ways to improve the programme or process or ways to extend upon it in the future.

The feedback sought may be qualitative – in which case you seek to understand what the experience was like for the participants. You may use interviews, feedback sheets, surveys, graffiti sheets or focus groups to gather these responses.

You may have a need for quantitative data – perhaps you want to count and sort responses. In this case you will be likely to use a survey tool.

You do not need to get feedback from every participant. You can usually develop a good sense of the range of responses from just a sample.

Once the evaluation data has been collected and reviewed by the organising team, they may wish to publish this information or provide it to the school community. A written report can be included in the school newsletter. Members of the organising team can make a presentation at staff meetings, student assemblies or parent meetings.

A number of evaluation tools are provided below. You may prefer to design your own feedback process.

How many attended?

Register everyone who attends. Keep a copy of names or numbers as people arrive and sign in for a name-tag.

Organise for someone to do a head count shortly after the session starts.

Give everyone a feedback sheet and collect one from everyone as people leave.

Graffiti sheets

Place some large sheets of butchers paper on tables or on the walls and provide a collection of felt pens. Invite participants to travel around the room, writing their own feedback comments and reading what others have written. The advantage of this method is that everyone can see the feedback and people can respond to each other's comments. At the end of the event, collect the graffiti sheets and have someone type them up for review by the organising committee.

Sticky labels

Provide everyone with some sticky labels (post-it notes) and pens. Ask them to write a comment or two (one per label) and then post these up on the boards or sheets provided. Advantages of this method are that it is anonymous and the method of collecting the views is very quick. At the end of the event, collect the post-its and have someone type them up for review by the organising committee.

Public sharing

Ask people to converse with one or two people around them, sharing what they found to be valuable about the event. Then ask a range of people to share what was said in the paired sharing with the whole room. The advantage of this method is that it is quick and personal and the leaders of the event get to hear any acknowledgements. If you want to collect these comments organise a scribe to write them down as people speak.

Feedback Sheets

A number of feedback sheets can be placed on the walls prior to the event. Provide pens and invite people to write on the sheets in the breaks and at the end. You can include the questions you want addressed on these sheets. The advantage of this method is that you can get some feedback along the way and in some cases this will mean you can start to respond to questions or suggestions. One model is the one provided below. You may need to design one to suit the nature of your event. At the end of the event, collect the sheets, type out the responses, and provide them to the organising committee to read and discuss.

Questions or topics you would like addressed in the future	
What is working well?	What did you learn or think more about as a result of participating?
How we can improve:	Question or topics you would like addressed in the future:

Collection boxes

Provide small slips of paper and pens and ask each participant to write a message to the organising team. Collect these slips in boxes or bags as people leave. The advantage of this technique is that it can be anonymous or not, according to the wishes of the respondents. Type out the responses and provide them to the organising committee to read and discuss.

Interviews

If you want a more in-depth understanding of how people found the event you can conduct interviews or focus groups (group interviews). You will need to invite people to be part of this process and find some way to follow up with volunteers to make a time to do this. An interview can be done face-to-face or over the phone.

Some sample interview/focus group questions are included below. You will need to tailor the questions to fit the specific nature of your event. Have one person conduct the interview whilst another takes notes. At the end of the process type up all the notes and provide them for the organising group to read and discuss.

Sample Interview/Focus group questions:

- What do you think of this event?
- What did you enjoy?
- What did you learn?
- What did you find useful?
- What did you think about the facilitation and organising work done by the students?
- What suggestions do you have about how to improve on this?
- Do you think an event like this should run again in the future?
- What else do you think would be useful?

Surveys

The advantage of a survey is that it can be anonymous, and because everyone is answering the same questions in the same format their responses can be collected and counted. You can also provide a space for an open-ended response so as people can tell you things you didn't think to ask them. Organise for a team to enter the responses and provide tallies or graphs for the organising committee. (An excel file can

be useful here.) A sample survey is provided below. You will need to tailor one to suit your event. You will need to name the activities you want feedback on.

Sample Survey A

Role: Parent / Student / Community member <i>(please circle)</i>	Gender: Male / Female				
Information about drugs and their effects					
	Mark from 1 = not useful to 5 = very useful				
	1	2	3	4	5
Information Jigsaw					
Pouring standard drinks					
Activities designed to help us understand the pressures and influences on young people					
Why do people use drugs?					
The Decision Game					
Activities focussing on strategies to deal with situations involving drug use or decisions about drug use					
The Panel of Experts					
Lucky-Dip					
Help-seeking – A Friend in Need					
Topics chosen as the focus for the activities					
Staying safe around alcohol					
Dealing with pressure from friends					
Involvement of students in running the event					
Students running activities					
Students organising invitations and programmes					
Students organising catering					
Students organising registration and equipment					
Suggestions for additional topics for future sessions:					
Ideas for improving on the session:					
Anything else you want to say:					

Reporting

Having collected and analysed feedback from the participants, and reviewed the project with those involved in the planning and delivery of the event, it will be useful to prepare a short report which records what was accomplished and what was learnt. The reporting template below may be useful.

Reporting template	
Title of the event:	What did the school call this initiative?
Dates:	When did the activity occur?
Organised by:	List names and roles of those involved at an organisational or leadership level in planning and running the event.
Description of the event:	Outline the agenda and give a short description of the programme.
Student involvement in leadership	How many students participated as facilitators during the event itself? How many students contributed as helpers / performers / organisers?
Student roles	What were the roles and tasks fulfilled by students?
Staff / adult roles	What were the roles and tasks fulfilled by staff or other adults?
Student recruitment and training	How were student facilitators and helpers recruited and trained? What processes were used? Which staff (or other adults) contributed to this process?
Attendance	How many parents/students/community members participated in the event?
Community support	Describe the contributions made (if any) by other agencies, groups or institutions.
Feedback from the participants	What processes were used to collect feedback? Summarise the feedback you were given by the participants or audience. Include comments about the extent to which they found the event useful and engaging, and the extent to which the event contributed to their awareness of how to stay safe around drugs.
Feedback from the organisers and student facilitators	Summarise what the organisers thought about the extent to which the event met their goals. Outline the key supports, the key challenges encountered, and how these were addressed.
Budget	Report on the expenditure or income associated with the event. Acknowledge sources of sponsorship, financial support or in-kind support for the event.
Recommendations	Make recommendations to guide those who will/ may run a similar event in your school in the future.

