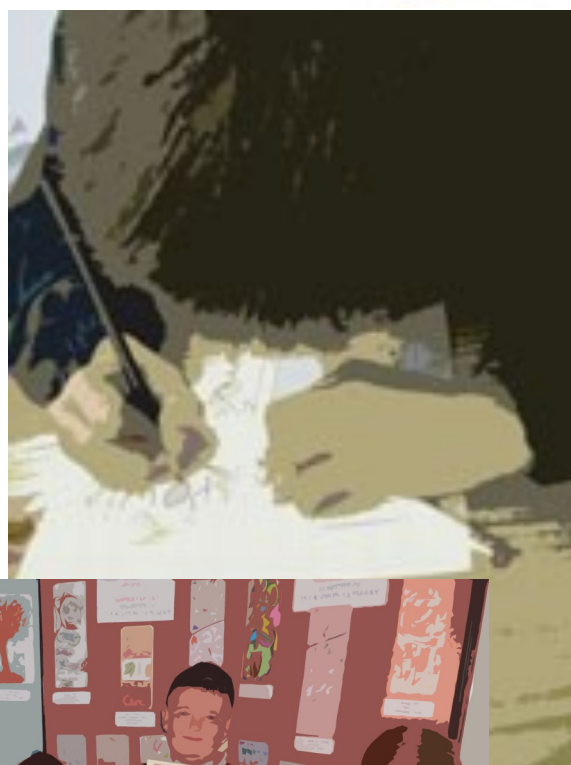


**School
Based**

Bray Drugs Awareness Forum and
Bray Youth & Information Services

***Drug Education
and Prevention
Programme
(S.B.D.E.P.P)***

For 6th Class Pupils



Resource Manual for Youth Workers

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by

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This programme has been compiled by Clay Darcy and is the property of Bray Youth Service and the Bray Drugs Awareness Forum. This programme may only be delivered with the expressed permission of Bray Youth Service and the Bray Drugs Awareness Forum and only by those who have completed the necessary training to do so.

DEPP Background and History

The Drugs Education and Prevention Programme (DEPP) for primary schools was initially piloted between 1994 to 1998 and was a joint project between Finglas Youth Centre and the Eastern Health Board Drugs Outreach Workers. The programme was compiled by Colma Nic Lughadha and is copyright of Catholic Youth Care. In 1998 the programme received funding for four full time Drug Prevention Officers to deliver the programme and in 1999 the programme was independently evaluated by Dr. Mark Morgan of St. Patrick's College, Drumcondra.

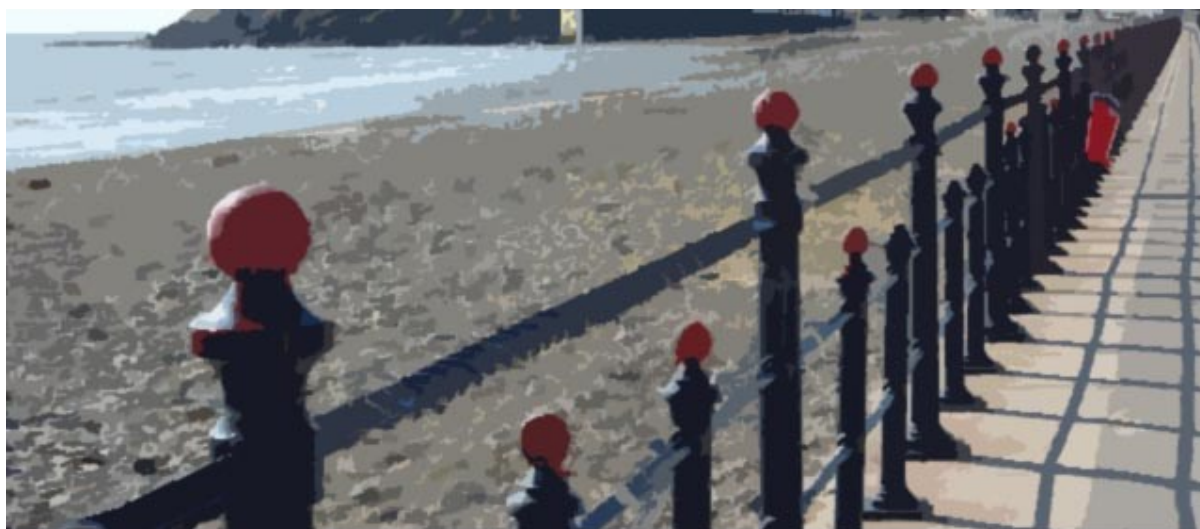
When Bray was given Drugs Task Force designation the Bray Drugs Awareness Forum (BDAF) was one of the groups asked to nominate a community representative to the task force. Because of its history of education and training work in Bray the forum (BDAF) identified the need for a programme to target young people in 6th class in primary school. The DEPP was identified as a suitable programme and was piloted with great success. In 2002 the BDAF applied to the Bray Local Drugs Task Force for funding for 1 full time and 1 part time Drugs Education Workers to deliver the DEPP. Bray Youth and Information Services (BYS) administers the funding for the workers and provides a base for them.

The DEPP has subsequently been delivered on an ongoing basis in the majority of primary schools in Bray ever since. The programme has however, evolved and changed over the years from its initial conception. This has been necessary in order to respond to local issues, to meet the changing needs of the participants and to enhance the value of new school programmes such as Social Personal and Health Education (SPHE). The programme has nonetheless stayed true to its original values and ethos.

It is important to note that a strong working relationship has been well established between BDAF / BYS and the primary schools that avail of the DEPP. For the past number of years the programme has been requested by 7 out of the 11 primary schools in Bray. The programme is delivered to compliment and augment the substance use education element of SPHE that already takes place in these schools. Many of the schools that request the programme have pupils that would fall under the '*at risk*' category or are exposed to high levels of drug misuse within their communities.

Now 18 years since its original conception the BDAF and BYS recognise the need for the redevelopment and redesign of the DEPP for primary schools. This document therefore aims to provide a frame work and context for the programme and to outline the new programme rationale.

To distinguish this programme from the previously used one, this programme will be known as the School Based Drug Education & Prevention Programme (SBDEPP).



Drug Education & Prevention

The following sets the context to Drug Education and Prevention work which in recent times has come under much scrutiny and evaluation.

According to the EMCDDA *'drug prevention is understood as any activity that is (at least partially) aimed at preventing, delaying or reducing drug use, and/or its negative consequences in the general population or subpopulations'* (2011, p.26). Although drug education and drug prevention are often used interchangeable they are not necessarily synonymous, according to Burgees (1997, cited in Kiely & Egan, 2000, p.7) *'education is obviously not always congruent with prevention and education need have no preventive focus per se'*.



However, for the purpose of this document and for this programme, the term Drug Education & Prevention will be used, in recognition of the fact that this programme aims to both educate and raise participants awareness, whilst endeavouring to prevent or delay the onset of early drug use.

With this in mind the challenge of an effective prevention intervention lies in helping young people to adjust their behaviours, influence their preconceptions or misconceptions and develop their capacities to make informed healthy decisions, all whilst recognizing the *'multiple influences such as social norms, interaction with peers, living conditions, and their own personality traits'* (EMCDDA, 2011, p.19).

Therefore it is important to be realistic in what a drugs education and prevention programme can realistically achieve and to be aware of the challenges and obstacles that lie within the work. It is also recognized that to be most effective school based drugs education and prevention programmes *'need to match their goals, activities and messages to the local situation'* (CCSA, 2009, p.17). Therefore it is important to have a programme that is flexible and fluid, that can respond to changing local needs and current drug issues.

Local Context - Prevalence Rates & European Comparisons

There has been little research to indicate the prevalence of drug use among young people at a local level in Bray. The last piece of such research took place in 1992 in the form of a survey of secondary school pupils. Any information that is currently available is anecdotal or based on information from statutory, community and voluntary service providers within the town. However, at a national level there is research that can guide us and give us some indication of what is happening at the micro level. One such piece of research is the European School Survey Project on Alcohol and Other Drugs (ESPAD). The main purpose of ESPAD is to *'collect comparable data on substance use among 15–16-year-old European students in order to monitor trends within as well as between countries'* (ESPAD, 2012, p.10).

The following are some selected findings from which have been extracted from ESPAD 2011. These findings give some insight into the current prevalence rates and drug use trends among young people.

- In the 2011 survey, on average, one in two of the students (54%) in participating countries reported that they had smoked cigarettes at least once and nearly one in three (28%) reported that they had used cigarettes during the past 30 days (ESPAD, 2012, p.10).
- It was found that an early smoking debut (age 13 or younger) is associated with high levels of use in the past 30 days (ESPAD, 2012, p.10). In other words the earlier a young person begins to smoke the more they tend to smoke.
- In all ESPAD countries except Iceland, at least 70% of the students have reportedly drunk alcohol at least once during their lifetime, with an average of 87% of lifetime alcohol use in the 2011 survey (ESPAD, 2012, p.11).
- It was found that the estimated average consumption differed between the sexes, with boys drinking one-third more than girls (ESPAD, 2012, p.11).
- According to the 2011 survey, on average, 21% of the boys and 15% of the girls surveyed have tried illicit drugs at least once during their lifetime (ESPAD, 2012, p.13).
- There are only a few countries according to the 2011 survey where the proportion having tried illicit drugs is lower in 2011 than it was in 1995. Of particular note here, the most prominent case is Ireland, where 37% had tried in 1995 but only 19% in 2011 (ESPAD, 2012, p.13). This is an encouraging statistic and it will be interesting to see if this trend continues in the next surveying wave.
- Finally on average, more girls than boys report non-prescription use of medical drugs (8% versus 5% in 2011) (ESPAD, 2012, p.14).

Much of these findings reinforce and confirm what has been known anecdotally at a local level in Bray. Youth Workers, Drug Education Workers and other service delivery workers are reporting that by far the drug that most young people are engaging in and which is the most problematic is alcohol. In addition, feedback from front line workers in Bray indicates that there are high levels of cannabis use and non-prescription use of medical drugs, such as diazepam.

It is also important to note that many young people are engaging in poly drug use and are very often unaware of the possible harms of mixing such substances. It is hugely important any drug education and prevention programme is being delivered in cognisance with what is happening locally on the ground.

Evidence Based Work

In 2001 Dr. Mark Morgan produced a document on behalf of the National Advisory Committee on Drugs (NACD), the document titled '*Drug Use Prevention – Overview of Research*' explores the effectiveness of various drug prevention programmes. According to Morgan (2001) it is necessary that drug education and prevention programmes are realistic in their expectations of achievable outcomes and it is important to be aware that many factors influencing the onset of substance use or continuation of substance use is beyond the scope of the influence of school. Morgan also states that there is evidence to suggest that the reason why programmes frequently fail is that they are not properly implemented.

This highlights the huge importance of those delivering any drug education and prevention programme being fully trained and qualified youth / drug education workers. It is imperative that such workers are trained in best practice guidelines within the fields of youth work, child protection and substance use education.

Morgan (2001) offers a number of factors that differentiate between drug education and prevention programmes that are effective and those that are not. Morgan (2001) reports that evidence indicates that those interventions that begin early and continue over a long period, that are intensive, that offer direct educational or other relevant experiences tend to demonstrate larger and more enduring results.

There are a huge variety of Drug Education & Prevention programmes that have been tried in tested in and out of school settings. However, consistently research indicates that programmes that incorporate a life-skills training element are the ones that are most successful in preventing or delaying onset of drug use among young people (Crome et al 2004, Kiely & Egan 2000). The EMCDDA (2011, p.20) states that elements of school based programmes that '*focus on normative beliefs and life skills, seem to be effective, and European research is beginning to emerge demonstrating that school-based programmes can be effective in reducing some types of drug use*'.



Best Practice Guidelines

There are two key stakeholders in Ireland that give guidelines around best practice within the area of drug education / substance use education; these are the Department of Education and Skills (DES) and the Drugs Education Workers Forum (DEWF). The Department of Education and Skills has produced guidelines (Circulars 0022/2010 and 0023/2010) on best practice for teachers delivering substance use education as part of SPHE. In addition the DEWF has produced a manual titled '*A Manual in Quality Standards in Substance Use Education*' in accordance with Action 26 of the National Drugs Strategy (Interim 2009-2016).

DEWF's vision of Youth Work based substance use education is that, it endeavours to prevent, postpone or reduce, the potential harm which people may experience when using drugs (DEWF, 2007, p.75).

In addition, according to the DEWF A Manual in Substance Use Education, the purpose of Substance Use Education in and out of the school setting is to:

- ⇒ *To equip young people with a broad range of personal and social skills.*
- ⇒ *To provide accurate age, developmentally, environmentally and culturally appropriate information on substances.*
- ⇒ *To enable young people to make informed healthy and responsible choices.*
- ⇒ *To provide a safe forum for open discussion of young peoples opinions and issues relating to*
- ⇒ *substance use which is appropriate and relevant to them.*

(DEWF, 2007, p.25)

Programme Rationale

This Drug Education and Prevention Programme for primary school seeks to explore the topic of drug use and misuse with participants in an age appropriate, open and honest way. The programme is designed to be delivered using youth work methodologies by trained youth / drugs education workers.

The programme aims to redress common drug misconceptions and problematic normative beliefs among participants. In addition the programme aims to correctly inform participants of the effects of drugs known to them and the harms such drugs can cause. The programme also aims to equip participants with new skills and knowledge that may enable them to make informed healthy life choices. Developing life skills is an intrinsic element of this intensive programme, which seeks to make participants aware of how they make decisions and how they respond to difficult situations. The programme seeks to make participants more aware of harmful or unsafe situations in relation to drugs and alcohol, and provide them with information and skills to stay safe.

The programme has been designed to adhere to Department of Education and Skills and DEWF substance use education best practice guidelines. The programme encourages the teacher to be part of the group (where feasible) and we encourage the participating school to hold an information workshop for parents. Participants are encouraged to talk to their parents and class teacher about the programme. However, we discourage participants from talking to younger siblings and younger class groups (i.e. 4th or 5th class) about the programme and topics covered.

DEPP Structure*

Programme Structure:

The DEPP is a 6 week programme with an additional optional refresher session, that can take place some time after the programme has been completed. The refresher session should be offered to each school participating in the programme and is an excellent opportunity to reinforce the learning that took place in the programme and address any issues that has since presented.

Each session lasts approximately one hour and should be delivered by two fully trained facilitators. The programme works in tandem with SPHE substance use education curriculum and aims to augment and compliment the learning that takes place in SPHE.

Group size should be limited to no more than 14 or 15 participants so this may mean large classes being divided into two groups for the programme.

Programme Outline:

Session 1 - What drugs do you know?

Session 2 - Why are some drugs illegal?

Drug Myths and Facts

Session 3 - Drug Use and Misuse

Who do drugs effect?

Session 4 - Decision Making

* Self Esteem

Session 5 - Dealing with difficult situations

Positive ways of coping with problems

Session 6 - Staying Safe

Refresher Session

Programme Assumptions:

The programme operates on the following assumptions ~

- A drug is a substance that can affect a person physically, emotionally and mentally.
- The word drug includes alcohol and solvents.
- A drug can be legal, prescribed or illegal.
- Drug users are people who take drugs whether they are legal, illegal or prescribed.
- Everyone uses drugs, however, not everyone uses illegal drugs.
- Drug use is simply the use of any drug.
- Drug misuse is: the use of a drug for a purpose other than which it was intended, the use of illegal drugs, the use of legal drugs under the legal age limit and the use of prescribed drugs for purposes other than which they were prescribed.

The programme...

- Does not use scare tactics
- Does not introduce participants to drugs they did not already know
- Does not show images of different drugs
- Does not use testimonials from recovering drug users
- Does not normalize drug misuse

**Also see DEPP Logic Model, attached in Appendix 7*

Getting Started

There are a number of things which need to take place before getting started with the DEPP:

1. Firstly only those fully trained can deliver this drug education and prevention programme. This programme is the copyright of the Bray Drugs Awareness Forum and Bray Youth and Information Services, only those with expressed permission from both may deliver this programme.
2. Those delivering the programme should familiarise themselves fully with the programme and the relevant substance use best practice guidelines.
3. The school principle should be formally contacted by letter to establish whether the school wishes to avail of the programme (see sample principle letter— Appendix 1).
4. After receiving confirmation of the schools interest in the programme, the class teacher should be contacted to arrange timetabling of the programme.
5. A letter for parents should be sent home via the school, explaining to parents what the programme is about (see sample parent letter— Appendix 2), parental consent is required and pupil's assent to participate in the programme, as participation is voluntary.
6. If requested a parent information workshop should take place.
7. Once all of the above has been completed, the programme may begin, with a participant pre-test (see pre-test in Appendix 4).
8. Each session should be carefully recorded using a session record sheet (see session record template in Appendix 6)
9. Once the programme is complete participants should complete the post test (see post test in Appendix 5).

Room Layout

Where possible try to use a room in the school that has space to move around, a circular seating plan works best and allows for equal participation from everyone.



You will need the following for each session:

- Session plan
- Session record sheet
- Flip chart paper and markers
- Blue tac
- Pens or pencils
- Other session materials (*see individual session plans*)

Ice Breakers:

1. Ask pupils to say their name and if they were to win the lotto to name two things they would do or buy with the money.
2. Get the group into a circle, ask each pupil to say their name and also name an animal that begins with the same first letter of their own name i.e. John the Jaguar. Now pupils must pass a soft ball to someone in the circle saying their name and animal name, if the ball drops everyone must start again.
3. Ask each pupil to say their name and if they were a weather forecast what would they be i.e. Sunny, rainy or cloudy etc

Session 1

What drugs do you know?



Session Description

This session is the facilitators opportunity to build rapport with the group and to alleviate any anxieties participants may have about the programme. Briefly outline the programme and allow participants to ask questions. The facilitator should assess the needs and ability of the group, and make note of such in their session record.

In this session participants complete a pre-test and form a working agreement (see sample working agreement). Once these have been completed the facilitator will ask participants to help them make a list of all the drugs that participants know. This list will then be used in the second session. It is important to let participants know that there are no right or wrong suggestions here, write up all suggestions from participants, even suggestions such as syringes, bongs or joints as this allows for discussion in session 2. It also encourages participants to openly engage knowing that things they say will not be dismissed or told to be wrong.

Once the list has been completed the session may be closed and a game can be played. Its important to try and ensure that each session ends on a good note!



Session Plan

- (10 Min) Introductions & Name Game
- (10 Min) Simple explanation of programme
Participants hopes and fears (this can be done on a flip chart of conversationally)
- (5 Min) Participants Pre-Test
- (10 Min) Group Working Agreement
- (20 Min) What Drugs Do You Know?
- (5 Min) Closure & Game

Notes on making a Working Agreement

Its important that the **majority points on the agreement come from the participants**, however sometimes a little prompting is needed! There are one or two points that are vital and if participants do not suggest these the facilitator should (these are in bold below).

Sample Working Agreement

- School rules apply
- Listen to each other
- Phones on silent
- One person talking at a time
- **No Naming Names**
- **Confidentiality** / What is said in the room stays in the room
- **Keep yourself safe** (*think before you speak, make sure you are happy to share what you say*)
- Have fun!

Session 2

Why are some drugs illegal? Drug Myths and Facts

Session Description

This session aims to build upon session one and begin to correct misinformation. At the beginning of this session, a name game can be used to settle the group and to continue to build rapport. This should then be followed by reinforcing points on the group working agreement.

Once all of this has taken place, the session then should focus on what legal, illegal and prescribed means in relation to drugs. **It is important that participants themselves distinguish the differences between legal and illegal drugs.** It is also necessary to stress that even legal drugs can be harmful i.e. tobacco or misusing prescribed drugs.

Once the group are clear on what legal, illegal and prescribed means, refer back to the list of drugs made in session one. At this point it might be useful to quickly categorise this list into what drugs are legal, illegal or prescribed. This can be done by putting a (L) beside a legal drug, an (IL) beside an illegal drug and a (P) beside a prescribed drug. This list can be used as a reference throughout the programme and can be added to if a new drug comes up in discussion.

Once this process has been completed proceed to the Drug Myths and Facts exercise (see opposite). This exercise aims to allow an opportunity to challenge normative beliefs, facilitators can amend or select which ones they use to accommodate the needs of the group.

The session can be concluded with questions and answers and a fun game.



Session Plan

- (10 Min) Settle, Name Game & Reinforce Working Agreement
- (20 Min) Why are some drugs illegal?
Use drug list mark legal, prescribed or illegal drugs and cross off any non-drugs
- (20 Min) Drug Myths and Facts
- (10 Min) Closure & Game

Drug Myths & Facts

Helpful drugs are those that are legal, while harmful drugs are illegal. (**MYTH**)

*Heroin is probably the most harmful drug and causes the most drug related deaths and accidents in Ireland. (**MYTH** - *alcohol causes more deaths and accidents, tobacco kills more people in Ireland each year than any other drug*)

It is ok to mix drugs, once they have similar effects. (**MYTH** - *it is never safe to mix drugs, except when directed to by a doctor*)

Mixing alcoholic drinks makes you more drunk. (**MYTH** - *it increases the likely hood of being sick*)

*Smoking cannabis is less harmful than smoking tobacco. (**MYTH** - *cannabis is more harmful than tobacco and is it is an illegal drug*)

Misusing solvents can kill you instantly. (**FACT**)

A pint of beer has the same amount of alcohol as a double whiskey. (**FACT** - *both contain 2 units of alcohol*)

Your lungs are permanently damaged from smoking tobacco. (**MYTH** - *your lungs to a degree can regenerate and heal, if a person stops early enough*).

***NB: These can only be used if they are named on the list of drugs compiled by participants.**

Session 3



Drug Use and Misuse *Who do drugs affect?*



Session Description

This session aims to explore the difference between use and misuse, to achieve this a moving debate can be used or show of hands if space is limited (see opposite).

In relation to '*drug use*' this implies a substance been taken or '*used*' **correctly** i.e. the correct reason for use or the correct quantity. Misuse implies something which may have been taken for the wrong reasons, taking too much or taking when not needed. With regard to illegal drugs, there is no correct use and so these are always referred to as drug misuse. Once this has been fully explored with the group and the moving debate is over, proceed to '*Who do drugs affect?*' exercise.

This can be explored by dividing participants into small groups. Each group is given a large sheet with '*Who do drugs affect?*' written on the top. Allow each group a few minutes to complete, then get feedback from each group. This is then used as a means to generate discussion.

Alternatively if group work is not conducive the **Gingerbread Man Exercise** can be used to explore this topic (See over for more details). In this instance the facilitator leads a group discussion.

Following this, using a flip chart sheet, write up **who**, **how** and **why**. This is then used to generate discussion around who uses drugs, it is important to note that everyone uses drugs, when you consider that most people will take a medicine at some point in their life, however, not everyone will use illegal drugs.

The how refers to how drugs can be taken i.e. injected, sniffed / snorted, swallowed, absorbed, eaten and smoked. The why may generate a variety of answers, what is important is for participants to recognise that there are many reasons why a person might take drugs but that drugs do not solve problems but rather complicate them.

Conclude the session with a game.

Session Plan

- (5 Min) Settle and Reinforce Working Agreement
- (15 Min) Drug Use & Misuse
Moving Debate / Show of Hands
- (20 Min) Who do drugs affect?
- (15 Min) Who How and Why
- (5 Min) Closure & Game

Drug Use / Misuse Scenarios:

Someone has a hectic day ahead of them, they know they will have a headache at some point, so they take some pain killers.

A group are playing football, one boy is very out of breath and asks his asthmatic friend for a puff of her inhaler.

A couple are out enjoying a meal, they are in their early 20s, they order a bottle of wine.

Then the couple order a second bottle of wine.

Two young people are in a house unsupervised. One gets a really bad tooth ache, they go looking for pain killers, they find some and the young person with the pain reads the instructions and then takes one.

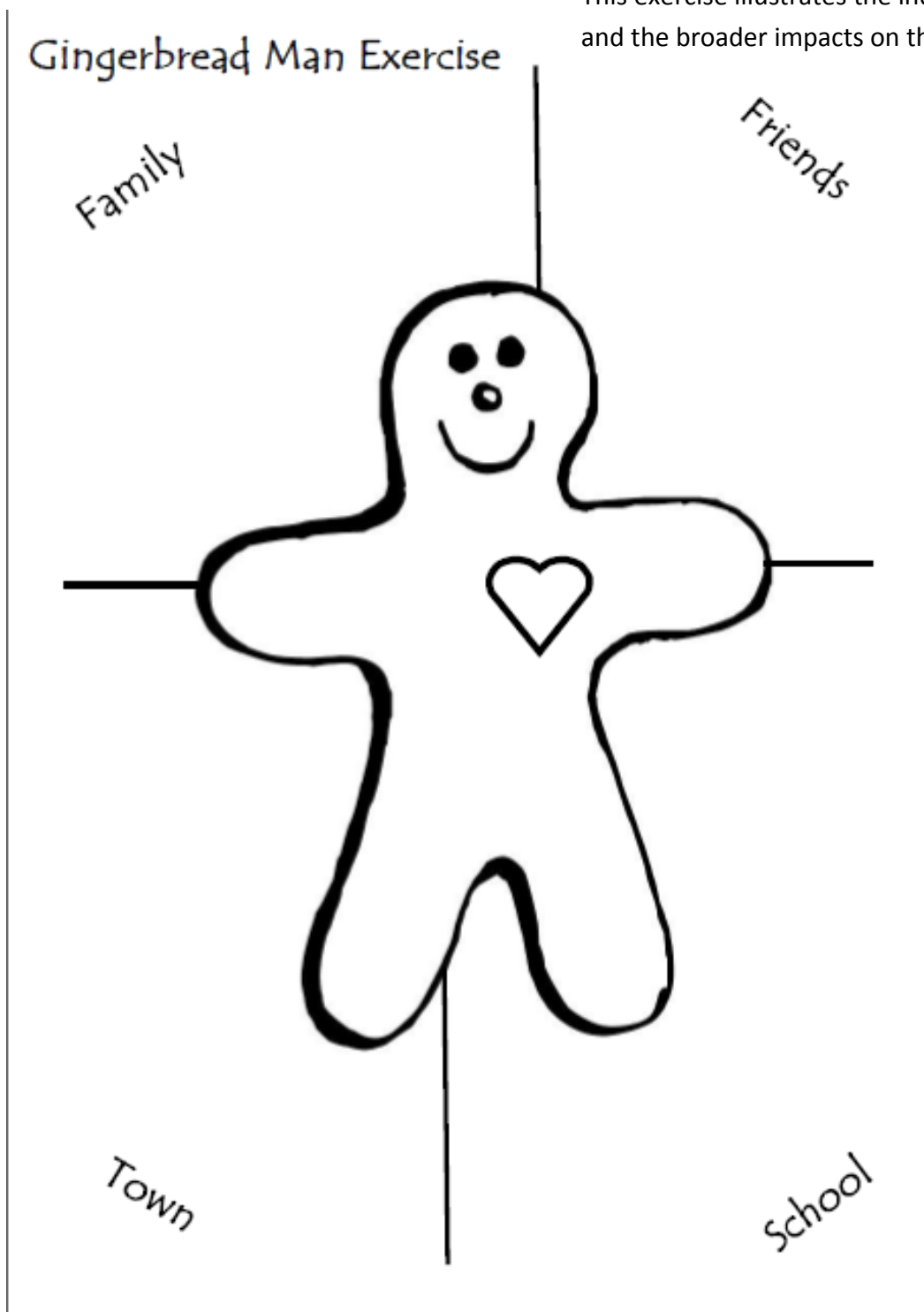
A young person who is at a party, takes a drag of a cannabis joint.

A group of young people go drinking alcohol in a field.

Session 3 ~ continued

On a large flip chart draw out a gingerbread man and divide the background into four sections—family, friends, town and school. The gingerbread man can be given a name and an age. Choose a drug that a young person might be likely to use. Discuss the effects of this drug on the body, illustrating on the gingerbread man. Then discuss how someone's family might be affected if they were using this drug. Likewise discuss the other headings of friends, town and school. Unpack the young peoples responses. **Its important to keep the discussion real** and avoid unrealistic scenarios and effects etc.

This exercise illustrates the individual effects of drugs and the broader impacts on those around us.



Session 4

Decision Making

What influences your decision making?



Session Description

Begin this session by a quick recap of what has been covered in the programme so far. Reinforce the group's working agreement.

This session involves the group taking part in a moving debate to explore their decision making influencers (See opposite - Part 1).

Once this has been done divide participants into small groups give each one a scenario (see below - Part 2) and ask them to write on a flip chart page what might influence someone's decision making in their given scenario. Ask them to explore what might happen as a result.

It is important at the end of this session for participants to be aware of their own influencers in their decision making and how our decision making can be affected by a variety of factors including drugs.

Conclude the session with questions and answers and a game.

***Depending on the needs and ability of the group an alternative session is provided for overleaf.**

2. Scenarios for group work

Scenario 1 - Harry is 14 and is in second year in school. Harry works hard in school and rarely gets into trouble. Today he has had a really bad day and everyone has been on his case. After school he goes up to his friends house. His friend asks if he wants to try sniffing glue.

Scenario 2 - Tanya is 16 and lives in the country side. Every Tuesday and Thursday she plays camogie in the near by town. After camogie one night, Tanya and her friends decide to go up the town and try to get someone to buy them alcohol.

Scenario 3 - Philip is 17 and seems to be always be in trouble. He regularly gets stopped by the guards. A group of friends ask him to try and get cannabis for them, they say they will pay him.

Session Plan

- (10 Min) Settle and Reinforce Working Agreement
- (20 Min) Decision Making Moving Debate
What influences your decision making?
- (20 Min) Scenarios & Group Work
- (5 Min) Closure & Game

1. Decision Making

Print each of the following on a separate sheet and place around the room.

Just to annoy someone, Going with my gut feeling, Decide based on whether it is legal or illegal, Going with what everyone else is doing, Doing what my family or friends say, Talk about it with someone, Consider the effect it will have on others, Doing what I will enjoy most.

Ask participants to stand next to the one which would describe how they make the majority of their decisions. Now use these situations to see if they would make the decision in the same way or if they would change. Discuss changes as they arise.

→ A friend offers you some alcohol.

→ You have had a really bad day and you are asked up to your friends free house.

→ During break time a class mate offers you a cigarette, some of your friends say to try it.

→ Some one you really like offers you a tablet.

Session 4 ~ Alternative

Session Description

This alternative session may be more appropriate depending on the ability and needs of the group. This session is intended to get young people thinking about alternatives to poor choices that involve taking drugs.

The first exercise '**What else could you do?**', is based on some of the reasons given for people take drugs, and gets young people thinking about positive alternatives. See box opposite.

Once this exercise has been completed, ask the group what do they understand **self-esteem** to mean? Unpack this with the group until they are clear in their understanding (see guide opposite).

Ask the following question—'**Does the mood we are in and how we feel about ourselves have an impact on the decisions we make?**'.

Unpack the groups responses, highlighting how being in a bad mood or not feeling good in ourselves can lead to making poor choices.

Gather the group into a circle and do the hand exercise. Get participants to draw their hand on a blank sheet and decorate. The hand must represent them, they must write their name clearly and leave space inside/outside the hand for writing.

The hand will be passed around in order and they will get 30' to write something nice about that person, then they'll pass to next person. Everyone must write something **POSITIVE** about the person (no negative comments are allowed). Everyone will get the chance to leave a comment on each hand. Give participants a few minutes to read the comments when they get their hand back. Get participants to share their favourite comment.

Close session and play a game.

Session Plan

- (10 Min) Settle and Reinforce Working Agreement, Ice breaker game
- (20 Min) What else could you do exercise
- (25 Min) Hand Exercise—building self-esteem
- (5 Min) Closure & Game

What else could you do? - Exercise

This exercise can be done as part of a group or individually if it is a small class. Below are reasons given for people taking drugs, young people must think of an alternative way to do each of the following that does not involve alcohol or other drugs.

Ways of making friends: _____

Ways of having fun: _____

Ways of relieving stress: _____

Ways of forgetting problems: _____

Ways of being cool: _____

Ways of being funny: _____

Ways of being brave: _____

Ways of increasing confidence: _____

Ways of coping: _____

Self Esteem Guide:

Self-esteem in its simplest means how we feel about ourselves. Its our attitude towards ourselves and whether we like who we are.

A person can have high or low self-esteem. Low being they don't feel good about themselves or don't like who they are.

High being they feel good about themselves and like who they are.



BEE
HAPPY...

Session 5

Dealing with difficult situations.

Positive ways of coping with problems.



Session Description

This session aims to explore the types of difficult situations that young people find themselves in and common ways people react to difficult situations.

Begin the session by reminding participants of the working agreement and a quick recap of the previous session.

Once this is complete you can divide the participants into small groups or the facilitator can lead discussion. Ask participants *'What types of difficult situations do young people find themselves in?'.* After compiling a list of various situations (see opposite for possible responses), then it is important to explore *'How do people react in difficult situations'.* This can be recorded on a large flip chart sheet. Now it is important for participants to identify which are positive ways of reacting in difficult situations and which are negative ways.

As a group use a flip chart to list the positive things ways to cope with difficult situations. These might include: **talking to someone you trust, taking a deep breath, sleeping on something, not doing something straight away - stop and think, ask for advice, find out information, going to a place that you like, exercising or some other positive activity.**

Ask participants to name professionals that are there to help young people—i.e. teachers, youth workers, guidance counsellors, school chaplains and helplines etc. Stress the importance of talking to someone if they are experiencing difficulty.

Answer any questions or address any concerns. Conclude the session with a game.

Session Plan

- (10 Min) Settle, reinforce Working Agreement and recap on session 4
- (20 Min) Group work—*'What types of difficult situations do young people find themselves in?'*
- (20 Min) Group discussion—coping positively
- (10 Min) Closure & Game

'What types of difficult situations do young people find themselves in?'

Possible responses:

- *Get in trouble with parents or teachers*
- *Being bullied*
- *Being offered drugs*
- *Peer pressure*
- *Being stopped by the Gardai*
- *Get 'started' on*

'How do people react in difficult situations?'

Possible responses:

- *Get scared / lash out*
- *Cry / Shout / Scream*
- *Panic / Hide / Run / Avoid*
- *Take drugs*
- *Fight or become aggressive*
- *Take it out on others / Get help*
- *Freak out*
- *Take deep breaths / Stay calm / Talk it out*

LOL!

LOL!

Session 6

Staying Safe



Session Description

This session aims to raise participants awareness of potentially risky or harmful situations.

Begin the session by settling the group and discussing their experience of the programme to-date. Allow pupils to ask any questions they might have at this point.

Next using the points opposite (see box 1) use the scenarios to discuss how pupils would stay safe if they found themselves in such a situation.

Once this is complete proceed to the section 'What you do if...' (see box 2). It's important to clarify terms such as 'spiked' and 'unconscious' to ensure that pupils fully understand. It is also necessary to discuss how someone might know if they were spiked.

Finally if time permits and facilitators feel it appropriate, demonstrate with another facilitator how to put someone into a recovery position (see diagram below). Pupils must be clear that this is only to be done if someone has fallen

unconscious and **they are breathing**, pupils must also be instructed that they must **call an ambulance immediately**. Once pupils are clear on this get them to practice the recovery position in pairs of two.

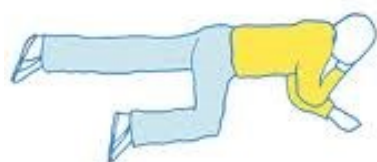


Illustration Source ~
<http://www.lifelinewords.blogspot.ie/>

Session Plan

- (5 Min) Settle and Reinforce Working Agreement
- (20 Min) Staying Safe
- (20 Min) Recovery Position
- (5 Min) Q & A
- (10 Min) Closure & Game

1. How would you stay safe if...

- You are on a bus or train and there are people drinking and or taking drugs.
- You are 'down the town' and you are approached by someone smelling of alcohol.
- You are walking down a street and two people appear drunk and are fighting.
- You are at a disco and some of your friends go outside to drink alcohol and you are left alone.
- You were at a disco and you thought your drink had been spiked.

2. What would you do if...

- You are at a friend's house unsupervised and someone there takes a tablet.
- Your friend takes a drug and becomes unconscious. (**It is necessary here to inform pupils that if a quantity of the substance remains, this should be given to the paramedics*).

End the session with a fun game!

Evaluation

Session Description

The evaluation session should take place relatively soon after the programme has completed, this can be arranged with the class teacher. But ideally should not take place any longer than 2 weeks after the programme has ceased.

At the beginning of the evaluation, it is important to give pupils an opportunity to ask questions about any issues that may have arisen since the programme. It may also be worth quickly recapping on what happened during the programme.

Next pupils are asked to complete a post test, this is essentially the same test given to them at the beginning (pre-test) with one or two differences. The aim of the post test is to act as an indicator of whether learning outcomes have been achieved. The test should be completed by pupils on their own in quiet.

Once this has been completed, each pupil will be awarded a certificate of completion, signed by the programme facilitators. A big round of applause once all the certificates have been awarded and a few positive words of encouragement!

Teachers should be reminded of availing of a refresher session later in the year.



Refresher Session

Session Description

This session aims to reinforce and remind participants of the learning that took place during the DEPP. The session can take place at any point after the programme has been completed, but preferably allow minimum of a month between the programme and the refresher session. Facilitators can adapt the content of the session based on the needs of the group.

Remember the Group Agreement

- No Naming Names
- Confidentiality
- No stories
- One person talking at a time
- Have fun!



Fact or Myth:

Helpful drugs are those that are legal, while harmful drugs are illegal.

Having a cold shower or drinking coffee sobers a person up.

Smoking cannabis is actually less harmful than smoking tobacco.

Misusing solvents can kill you instantly.

Mixing drugs is safe once they are legal or prescribed.

How would you stay safe if...

You are at a disco and some of your friends go outside to drink alcohol.

You are on a bus or train and there are people drinking or taking drugs near you.

You are walking down a street and two people appear drunk and are fighting.

You are at a friends house unsupervised and someone there takes a table.

Session Plan

- (5 Min) Settle and Group Agreement
- (10 Min) A Quick Recap
- (10 Min) Fact or Myth
- (10 Min) What would you do if?
- (10 Min) How would you stay safe if?
- (5 Min) Who can help & Closure



A Quick Recap!

Let's
Recap

- Are drugs only illegal substances?
- What is the difference between 'prescribed' and 'illegal' drugs?
- What does drug misuse mean? List examples
- Do drugs affect everyone in the same way?
- Do drugs only affect the person who takes them?

What would you do if...

What would you do if you were out with friends and they were passing around alcohol?

What would you do if you were at a disco and you thought your drink was spiked?

What would you do if a friend took a drug or drank alcohol and they went unconscious?

Who can help?

Who would you contact if you were worried about drugs?

- Parent
- Family Member
- Teacher
- Friend
- Youth Worker

References:

- Canadian Centre on Substance Abuse (2009) *Building on our strengths: Canadian standards for school-based youth substance abuse prevention: A guide for education and health personnel* (Version 1.0), Canadian Centre on Substance Abuse (CCSA): Ottawa, ON.
- Crome, I., (2004) *Young People and Substance Misuse*, Bell & Bain Limited: Great Britain.
- Department of Community, Rural & Gaeltacht Affairs (2009) *National Drugs Strategy Interim 2009-2016*, Department of Community, Rural & Gaeltacht Affairs: Dublin.
- Department of Education & Science () *Social, Personal and Health Education – Junior Cycle*, DES: Ireland.
- Department of Education & Science (2010) *Social, Personal and Health Education Best Practice Guidelines for Primary Schools – Circular 0022/2010*, DES: Ireland.
- Drug Education Workers Forum (2007) *A Manual in Quality Standards in Substance Use Education*, Drug Education Workers Forum: Dublin.
- Drug Scope (2000) *Drug Education for School Excludees*, Drug Scope: London.
- European School Project on Alcohol and Other Drugs (2012) *The 2011 ESPAD Report*, CAN: Dublin.
- European Monitoring Centre for Drugs and Drug Addiction (2011) *European Drug Prevention Quality Standards*, EMCDDA: Lisbon.
- Haase, T. et al (2008) *Children, Families & Neighbourhoods in the Bray Area*, Bray Community Consortium: Bray, Co. Wicklow.
- Kiely, E. & Egan, E. (2000) *Drug Education – A Social and Evaluative Study*, National University of Ireland: Cork.
- Morgan, M. (2001) *Drug Use Prevention – Overview of Research*, National Advisory Committee on Drugs: Dublin.
- National Advisory Committee on Drugs (2010) *Risk and Protection Factors for Substance Use Among Young People - A Comparative Study of Early School-Leavers and School-Attending Students*, The Stationary Office: Dublin.
- Sutherland, I. (2004) *Adolescent Substance Misuse*, Russell House Publishing: United Kingdom.