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The Nonprofit Evaluation Support Program (NESP) is a collaborative effort between two University of North Carolina Greensboro organizations – The SERVE Center and The Office of Assessment, Evaluation, and Research Services (OAERS). NESP's mission is to provide program evaluation services and program evaluation capacity building support to nonprofit and community-based organizations while providing authentic learning experiences for future leaders in the field of program evaluation.



The SERVE Center at The University of North Carolina Greensboro is a university-based research, development, dissemination, evaluation, and technical assistance center. For more than 24 years, SERVE Center has worked to improve K-12 education by providing evidence-based resources and customized technical assistance to policymakers and practitioners.



The University of North Carolina Greensboro (UNCG) is one of the sixteen university campuses of The University of North Carolina. UNCG holds two classifications from the Carnegie Foundation for the Advancement of Teaching, as a "research university with high research activity" and for "community engagement" in curriculum, outreach, and partnerships.

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Overview

CISNC Introduction

In the 2014-2015 school-year, Communities In Schools of North Carolina (CISNC) introduced a framework that aligns site and student metrics and interventions and supports to four areas that have been shown to have the greatest impact on student success: attendance, behavior, coursework, and parent involvement, or ABC+P. Both combined and individually, attendance, behavior, and coursework are among the best predictors of a student's academic success and on-time graduation. While collecting data around ABC+P is critically important to understanding the school and student, it is even more important to use the data to drive high impact intervention and support delivery to empower each student to reach their full potential. To this end, Communities In Schools of North Carolina has partnered with the SERVE Center at the University of North Carolina at Greensboro to design curricula specifically for CIS within the ABC+P framework to enhance student outcomes in school and success in life. This document is one of more than 50 modules developed to support local CIS staff and most importantly the students that are served. We encourage you to explore all of the modules available online at www.cisnc.org.

Using Evidenced-Based Strategies

There are a multitude of strategies that claim to address attendance, but there are few that actually do so for all students. We suggest that schools use an evidence-based, decision-making model to ensure that high quality information informs the decisions made.

The Institute of Education Sciences (IES) at the U.S. Department of Education defines evidence-based decision making as routinely seeking out the best available information on prior research and recent evaluation findings before adopting programs or practices that will demand extensive material or human resources (including both funding and teacher time) and/or affect significant numbers of students (Whitehurst, 2004).

Evidence-based practice means delivering interventions and supports to students (clients) in ways that integrate the best available evidence from data, research, and evaluation; professional wisdom gained from experience; and contextual knowledge of the particular classroom, school, district, or state that might impact the design or implementation.

The ABC +P framework is inextricably bound; challenges in one area can lead to challenges in another and often exacerbate a student's issues. This document focuses on student behavior, in particular, a problem behavior. Wang and Fredricks (2014) state, "...problem behaviors often elicit negative interpersonal interactions with teachers and parents, in turn leading to aggravated disengagement from school" (Bachman et al., 2008). Association with deviant peers also provides incentives for truancy and a devaluing of academic achievement (Wang & Dishion, 2012). When students are not engaged, the risk of them becoming involved in disruptive behaviors like truancy, substance abuse, gangs, delinquent behavior and others are higher; and participation in those activities weakens the bonds to



their school environment and families (Steward, Steward, Blar, Jo & Hill, 2008; Wang & Fredricks, 2014). While the terminology may differ across fields, the challenge boils down to a disconnect between students and their schools; this module provides an example of a strategy that will reconnect students to their schools, address students challenging behaviors, and hopefully make schools safer, supportive, and engaging.

Problem/Rationale

According to the North Carolina 2013 High School Youth Risk Behavior Survey (NCHYRBS), 9.4 % of students reported smoking a whole cigarette for the first time before age 13, 14.3% reported having their first drink of alcohol (other than a few sips) before the age of 13, and 18.9% reported trying marijuana for the first time before age 13 (North Carolina Healthy Schools, 2013).

Of concern, 40.8% of high school students reported using marijuana one or more times, 17.2% reported having taking a prescription drug without a doctor's prescription, 8.3% reported having used some type of inhalant, and 4.9% reported having used some form of cocaine (North Carolina Healthy Schools, 2013).

Additionally when asked about their consumption of alcohol and tobacco products within the past 30 days, 32.2% reported having had one or more drinks of alcohol, 15% reported smoking one or more cigarettes, and 8.5% reported having used some type of smokeless tobacco (chewing tobacco, snuff or dip) (North Carolina Healthy Schools, 2013).

Teens use alcohol more than tobacco or other drugs. While adolescents and young adults drink less often than adults, when they do drink they tend to drink more than adults, sometimes having as many as five or more drinks on a single occasion (Substance Abuse and Mental Health Services Administration, 2013).

Research shows that brain development continues throughout adolescence and well into young adulthood, which gives reason for concern that drinking during this critical developmental period may cause lifelong impairments in brain function, particularly as it relates to memory, motor skills, and coordination (Hiller-Sturmhöfel & Swartswelder, 2005).

The literature suggests that drug abuse prevention programs for middle and high school students should increase academic and social competence in the following skills (Botvin, Baker, Dusenbury, Botvin, & Diaz, 1995; Scheier, Botvin, Diaz, & Griffin, 1999; Eisen, Zellman, & Murray, 2003; Ellickson, McCaffrey, Ghosh-Dastidar, & Longshore, 2003; Haggerty, Skinner, MacKenzie, & Catalano. 2007):

- Study habits and academic support
- Communication
- Peer relationships



- Self-efficacy and assertiveness
- Drug resistance skills
- · Reinforcement of anti-drug attitudes
- Strengthening of personal commitments against drug abuse

Additionally, research suggests that prevention programs should focus on enhancing protective factors and reversing or reducing risk factors, and should address all forms of drug abuse, alone or in combination, including the underage use of legal drugs (e.g., tobacco or alcohol); the use of illegal drugs (e.g., marijuana or heroin); and the inappropriate use of legally obtained substances (e.g., inhalants), prescription medications, or over-the-counter drugs (Hawkins, Catalano, & Arthur, 2002; Johnston, O'Malley, & Bachman, 2002).

Purpose

The purpose of this three-part lesson is to provide students with the opportunity to explore the social, emotional, and physical consequences of using legal or illegal drugs; develop skills in communicating with others about substance abuse; recognize peer pressure and practice techniques for resisting peer pressure or avoiding situations that may lead to harm; and practice and reflect on personal decision-making skills.

Teachers and school staff can promote a positive, safe, drug-free environment by:

- Including substance abuse prevention in the curriculum,
- Recognizing and addressing risk factors for potential substance abuse,
- Informing and engaging families in the discussion about substance abuse prevention, and
- Encouraging community participation in substance abuse prevention.

Implementation Plan

Uses

Teachers can use the information provided in this guide to help students understand the risks associated with using harmful substances (e.g., legal and illegal drugs), develop techniques for resisting peer pressure, and reflect on their decision making process when it comes to engaging in practices that may be potentially harmful.

Audiences

The primary audience for the lesson is high school students.

Activities

This is a four-part lesson to be completed over four hours. The purpose of this extended lesson is to:



- Help students understand the harmful effects of some common substances adolescents may be tempted to experiment with.
- Explore options for removing themselves from potentially tempting or harmful situations.
- Practice skills for resisting the temptation to experiment with harmful substances.
- Develop skills for making wise decisions regarding the use of harmful substances.

Materials/Equipment/Space

- · Space for students to work in groups
- Access to computers
- Access to the Internet
- Word processing software and PowerPoint or other presentation software/platform
- List of recommended sites (refer to the Resources section)
- Handouts (refer to the Resources section and Appendix D)

Note: For presentations, check for access to computer, Smartboard or data projector and screen, relevant power cords, and remote slide advancer.

Time

This is a four-part lesson to be completed over several days, including time for homework. Allow approximately four hours to complete the full lesson.

Lesson Plan of Activity

This sample lesson will allow students to conduct research on the effects of harmful substances (e.g., legal and illegal drugs), engage in role play to practice peer resistance techniques, work through a decision making tree, and reflect on beliefs and attitudes about harmful substances.

Teachers should be prepared to help students recognize the myths versus the realities of the effects of abusing harmful substances as well as to offer examples of wise choices and reactions to decision making and risk taking.

Sample Lesson - Making Wise Choices—More Than Just Saying No to Drugs

| Activity | Process Notes |
|---|--|
| Introduce the lesson. | Students will: |
| Let students know that this is a four-part lesson that will require them to work in teams and individually to explore various substances and the effects they can have on the human body and brain, | Work in teams to conduct research and develop a presentation to understand the effects of harmful substances. Work in teams to develop a scenario for role play |



| Activity | Process Notes |
|---|--|
| the myths and realities of these effects, peer pressure and resistance techniques, and decision making skills as it relates to making wise choices to respect and protect oneself. | about peer pressure and demonstrate techniques for resisting peer pressure. 3. Students will work individually through a scenario to reflect on consequences of decisions. 4. Students will work individually to write a letter warning a younger individual of the harmful effects of drugs and provide advice for resisting peer pressure. |
| Team Research Project: 2 hours | |
| Respecting Yourself—Protecting Your Body and Mind from the Effects of Harmful Substances | Divide class into five teams, one for each substance listed to be researched. |
| Allow two class periods to complete the research and develop the presentation and one class period for presentations and debrief. Additionally, encourage teams to divide the work so they can continue working on the research outside of class. Teams will work together to research information about five common substances that middle school students may be tempted to experiment with: Cigarettes Other nicotine products–smokeless tobacco and e-Cigarettes Alcohol Marijuana Inhalers Prescription Drugs Teams will create a 5-10 minute presentation using posters, PowerPoint, or other media format. | Refer to the handout provided, "Making Wise Choices-More Than Just Saying No to Drugs," for guiding questions for students to answer during their web-based research as well as a list of suggested websites students can use to access pertinent information for this lesson. While students should be able to address all research questions by accessing information on the websites listed, students should be encouraged to access at least one additional website or other resource as part of their research. Review good practices in conducting research (e.g., evaluating quality and accuracy of content, validity of source, and proper citation, etc.). Establish grading criteria for the presentation and share the criteria with students at the beginning of the assignment. If you do not have a rubric that you normally use for student presentations, review the suggested links in the Resources section. Consider: Research-answers all the questions, demonstrates additional facts, used multiple sources, properly cited. Content-accuracy of information, facts are clearly presented. Creativity-graphics are interesting and used to support content/convey meaning. Organization-logical sequence of information, |
| Team Presentations: 1 hour | presentation is easy to read/follow. |
| Student presentations Student presentations | As students complete each presentation, provide time for other students to ask questions about each substance. |
| | Be prepared to ask questions of the presenting teams–refer to the research questions. |



| Activity | Process Notes |
|----------------------------------|--|
| | As a wrap-up to all presentations, ask students questions about how the harmful effects of the substances discussed are contradictory to respecting their minds and bodies. Be prepared to pose questions that encourage students to consider how maintaining a healthy body and mind includes avoiding substance abuse. |
| | Set-up the assignment for the group role play activity. |
| | Download the "Facts Into Action" and "Peer Influence" (refer to Resources section) handouts and give to students to read. |
| Group Role Play Activity: 1 hour | As time allows, give teams time for initial brainstorming for their role play. |

Staying True To Yourself-Resisting Peer **Pressure**

This activity provides students with the opportunity to practice options for not engaging in substance abuse by thinking through aspects of the situation, resisting peer pressure, and/or removing themselves from the situation.

This lesson consists of:

- 1. Reading the two handouts listed in the process
- 2. Allowing teams 20-30 minutes to create a scenario in which they are offered the opportunity to use the substance the team researched and role play how they would avoid not using the substance.
- 3. Conducting role plays.
- 4. Debriefing scenarios.

During the debrief, ask students:

- What are the myths associated with the substance?
- What pressures do students encounter and from whom?
 - Peers, older students, siblings?
 - Do most pressures come when at school or when away from school?
- What difficulties do students experience why trying to resist peer pressure to engage in substance abuse?
- Do students feel that the pressure will increase

Ensure students have read the two handouts:

- Facts Into Action
- Peer Influence

Allow teams time to create their own scenarios in which they might be approached by a friend or friends to engage in using a harmful substance, e.g., cigarettes, alcohol, drugs, inhalants and role play how they can remove themselves from the situation or avoid engaging in substance abuse.

- Teams should use the substance they researched for their scenario.
- Scenario should be realistic (may even be a situation in which they have found themselves).
- Scenario should include some myth about the substance, e.g., it is safe, it is not addictive, just once will not hurt.

Conduct a whole-class debrief at the conclusion of all scenario role play.

Engage all students in the conversation. Seek to include students who you think might have difficulty resisting peer pressure.

Are any students' responses giving you reason to be concerned that some students are engaging in the use of harmful or illegal substances? If so, consider school policy for next steps to assist students who may be at risk from substance abuse.



| Activity | Process Notes |
|--|---------------|
| or decrease as they make a stand to resist abusing harmful substances? | |
| Individual Activities with Whole Class Debrief: 1 | hour |

You're In Control-Wise Decision-Making

This two-part lesson will:

- 1. Allow students to explore decision-making and potential consequences based on a scenario,
- 2. Reaffirm techniques for resisting peer pressure.

Part 1: Students will complete individually the activity as instructed in the *Drugs: Your life: It Isn't Pretty handout.*

Upon completion, conduct a whole class debrief:

- Ask students how they reached their decision.
 - What factors they considered.
 - Ask students how difficult or easy it was to make each decision. Why?
- Ask students if they have been in a situation in which they needed to make a decision about whether to do something their peers (or others) were encouraging (or pressuring) them to do or to make the choice not to.
 - Encourage students to describe their decision-making process.

Finally, have students take on a leadership role by writing a letter to a younger relative (sibling or cousin), or the younger sibling of a close friend for whom they care about and want to advise in the event that they are faced with peer pressure to take substances that are harmful.

Part 2: Reaffirming Peer Resistance Strategies Upon completion of the activity, ask students:

- Why they would want to give advice to a younger relative.
- What advice they gave that would help the younger relative resist peer pressure.

Download the Drugs: Your life: It Isn't Pretty handout.

Have students complete the decision-making activity individually. Students should write down their answers to the three questions about their decisions.

Debrief as a whole class. Solicit questions from different students for each of the decision points.

Students can address the substance they researched. Students should write the letter to help the younger individual:

- Understand the harmful effects of the substance,
- Work through decision points about taking a substance that is harmful to them, and
- Provide suggestions for resisting peer pressure and/or situations in which they may be pressured to do something that is harmful.



Tier 2 Intervention and Support Examples

At the high school level, the Tier 2 strategies are more intense and usually involve community partnerships.

Example #1: Life Skills Training

The study assessed the effectiveness of a universal drug abuse preventive intervention called Life Skills Training (LST) on youth identified as high risk for substance use initiation based on exposure to substance-using peers and poor academic performance in school. LST teaches drug resistance skills, norms against substance use, and material designed to facilitate the development of important personal and social skills. The generalizability of a successful school-based universal drug abuse prevention program was successful for youth at higher than average risk for substance use initiation (based on substance-using peers and poor academic achievement).

Griffin, K. W., Botvin, G. J., Nichols, T. R., & Doyle, M. M. (2003). Effectiveness of Universal Drug Abuse Prevention Approach for Youth at High Risk for Substance Use Initiation. *Preventive Medicine*, *36*(1), 1-7.

Example #2: The Juvenile and Adolescent Substance Abuse Prevention program
The Juvenile and Adolescent Substance Abuse Prevention program (JASAP) is based on the knowledge base of substance abuse prevention and strong community decision maker support. It is a curriculum-based prevention and health promotion program for youth between the ages of 13 and 18 years old, identified through juvenile court, schools, churches, community, and other youth organizations. A majority of the participants (94%) made significantly more healthy decisions. There was an increased attitude about alcohol and drugs on the posttest compared to the pretest, although not significant, mean pretest = 3.63 and mean posttest = 3.84.

Talpade, M., Lynch, D., Lattimore, B., & Graham, A. (2008). The juvenile and adolescent substance prevention program: An evaluation. *International Journal of Behavioral Consultation and Therapy*, 4(4), 304-310.



Resources

The following resources are student handouts for the lesson:

Heads Up (Scholastic) - http://www.scholastic.com/

Facts Into Action

http://headsup.scholastic.com/sites/default/files/NIDA8-INS3 Stu Mag.pdf

Peer Influence

http://www.scholastic.com/headsup/pdfs/NIDA7-PTG%20Bk-worksheet4.pdf

Drugs + Your LIFE: It Isn't

Pretty http://headsup.scholastic.com/sites/default/files/block/images/NIDA11-

PTG Activity3.pdf

The following resources are suitable for students to use in completing the lesson.

Center for Substance Abuse Prevention (Substance Abuse and Mental Health Service Administration). Too Smart to Start.

Resources for teens on underage drinking, including FAQs, quizzes, scenarios, and advice on resisting peer pressure.

http://www.toosmarttostart.samhsa.gov/Start.aspx

Center for Technology in Teaching and Learning (Rice University)

Interactive lessons on substance abuse &

neuroscience http://webadventures.rice.edu/

Foundation for a Drug-Free World - http://www.drugfreeworld.org/#/interactive

Facts about various drugs; PSAs and documentaries for teens and adults; and free resources for educators.

The Truth about Drugs brochure for teens

http://f.edgesuite.net/data/www.drugfreeworld.org/files/truth-about-drugs-

booklet-en.pdf

Learn.Genetics. Drugs of Abuse.

Animated clips of effects of various drugs on the body.

http://learn.genetics.utah.edu/content/addiction/abuse/

NIDA for Teens: The Science Behind Drug Abuse - http://teens.drugabuse.gov/

Facts, interactive lessons, infographics, blogs, and FAQs on drugs.

Inhalants

http://teens.drugabuse.gov/drug-facts/inhalants

Marijuana

http://teens.drugabuse.gov/drug-facts/marijuana

Tobacco, Nicotine, and E-Cigarettes

http://teens.drugabuse.gov/drug-facts/tobacco-nicotine-e-cigarettes



National Institute on Drug Abuse (NIDA)

This Web site contains information about drug abuse and a section designed specifically for parents, teachers, and students. Publications and other materials are available free of charge.

http://www.drugabuse.gov/children-and-teens

Drugs + Your Body (Scholastic)

http://www.scholastic.com/drugs-and-your-body/

The Cool Spot. National Institute on Alcohol Abuse and Alcoholism (National Institute of Health; U.S. Department of Health and Human Services)

Information for teens about alcohol, including tips for resisting peer pressure. http://www.thecoolspot.gov/index.asp

Heads Up (Scholastic) - http://www.scholastic.com/

The Power of Pausing: What Would You
Do? http://headsup.scholastic.com/sites/default/files

Do? http://headsup.scholastic.com/sites/default/files/NIDA12-INS3 TE-worksheet.pdf

The following resources pertain to developing rubrics.

Resources for Using Rubrics in the Middle Grades

(Edutopia) http://www.edutopia.org/rubrics-middle-school-resources

Assessment and Rubrics (Kathy Schrock's Guide to Everything)

http://www.schrockguide.net/assessment-and-rubrics.html

6-8 Presentation Rubric—CCSS Aligned (Buck Institute for Education)

http://bie.org/object/document/6 8 presentation rubric ccss aligned

The following optional resources provide additional information and concepts, or may be used in sharing with others or to expand the activity. Read through these resources to become familiar with the information and to determine their level of usefulness within the school setting.

Center for Substance Abuse Prevention (@ Substance Abuse and Mental Health Service Administration) – http://www.samhsa.gov/topics

The "Talk. They Hear You." campaign aims to reduce underage drinking among youth ages 9 to 15 by providing parents and caregivers with information and resources they need to start addressing the issue of alcohol with their children early. http://www.samhsa.gov/underage-drinking

Too Smart to Start: provides additional resources for youth, teens, parents and educators.



http://www.toosmarttostart.samhsa.gov/Start.aspx

Foundation for a Drug-Free World - http://www.drugfreeworld.org/home.html

Facts about various drugs; PSAs and documentaries for teens and adults; and free educator's resources and toolkit.

The Truth About Drugs Educator's

Guide http://f.edgesuite.net/data/www.drugfreeworld.org/files/the-truth-about-drugs-educators-guide-english.pdf

Drug-free Pledge

http://f.edgesuite.net/data/www.drugfreeworld.org/files/truth-about-drugs-pledges.pdf

Mothers Against Drunk Driving

MADD provides free resources and on-line workshops for parents. http://www.madd.org/

National Institute on Alcohol Abuse and Alcoholism

http://www.niaaa.nih.gov/

Note: All posters, images, and activity guides identified are copyright cleared for non-commercial use.



Measuring Success

Identifying outcomes and collecting data to measure the success of substance abuse prevention strategies can help the school track quality of implementation as well as the effectiveness of these strategies. Following are some suggestions that schools may find useful to begin measuring success.

Issue pre/post substance use questions to students regarding the use of legal and illegal drugs. Refer to the 2013 North Carolina Youth Risk Behavior Survey: Middle School Questionnaire for questions that may be adopted and/or adapted for pre/post questionnaires.

Sample Pre-Lesson Question Related Smoking

Have you ever smoked a whole cigarette?

- A. No
- B. Yes

If you have smoked a whole cigarette, how old were you when you smoked a whole cigarette the first time?

- A. I have never smoked a whole cigarette
- B. 8 years old or younger
- C. 9 years old
- D. 10 years old
- E. 11 years old
- F. 12 years old
- G. 13 years old

Do you belief that smoking cigarettes is harmful to your health and could lead to premature death or other chronic illnesses?

- A. No
- B. Yes

Sample End-Of-Year Questions Related To Smoking

When was the last time that you smoked a whole cigarette?

- A. Within the last month
- B. More than one month ago, but less than two months ago
- C. More than two months ago, but less than three months ago
- D. More than three months ago, but less than four months ago
- E. More than four months ago, but less than six months ago
- F. More than six months ago



If you have smoked a whole cigarette within the last six months, how did you obtain the cigarette?

- A. From a friend.
- B. From a family member.
- C. From someone else.
- D. I bought it or obtained it myself.

Do you believe that smoking cigarettes is harmful to your health and could lead to premature death or other chronic illnesses?

- A. No
- B. Yes

Please share why you choose to or not to smoke.

Have you ever attempted to quit smoking and have been unsuccessful?

- A. No
- B. Yes

Additionally, teachers can ask students about changes in their beliefs and attitudes about legal and illegal drug use and explore their understanding about the harmful effects substances have on their cognitive and physical abilities as well as their self-esteem and social connections.



Appendices

- A. Glossary
- **B.** References
- C. Research Alignment
- **D. Student Handout Research/Presentation Activity**



Appendix A: Glossary

Addiction – is a chronic, relapsing disease characterized by compulsive drug seeking and use, despite serious adverse consequences, and by long-lasting changes in the brain.

Binge drinking – drinking 5 or more alcoholic drinks on the same occasion on at least 1 day in the past 30 days (Substance Abuse and Mental Health Services Administration, 2013).

Electronic cigarette (e-cigarette) – battery-operated products designed to deliver nicotine, flavor and other chemicals. They turn chemicals, including highly addictive nicotine, into an aerosol that is inhaled by the user (U.S. Food and Drug Administration, n.d.).

Heavy alcohol use – is defined as drinking five or more drinks on the same occasion on each of 5 or more days in the past 30 days (Substance Abuse and Mental Health Services Administration, 2013).

Illicit drugs – include marijuana/hashish, cocaine (including crack), inhalants, hallucinogens, heroin, or prescription-type drugs used nonmedically, based on data from original NSDUH questions, not including methamphetamine use items added in 2005 and 2006 (Substance Abuse and Mental Health Services Administration, 2013).

Inhalants – are a variety of substances–including solvents, aerosols, gases, and nitrites—that are rarely, if ever, taken via any other route of administration (National Institute on Drug Abuse). Inhalants are often ordinary household products that children inhale or sniff in order to get high. May also be known as Gluey, Huff, Rush, or Whippets (Partnership for Drug-Free Kids, n.d.).

Marijuana (weed, herb, pot, grass, bud, ganja, Mary Jane) – is a greenish-gray mixture of the dried, shredded leaves and flowers of Cannabis sativa—the hemp plant used by smoking, baking in products, or infusing as a tea in order to get high (National Institute on Drug Abuse, n.d.).

Prescription Drug Abuse (Nonmedical Drug Abuse) – is the use of a medication without a prescription; in a way other than as prescribed; or for the experience or feeling elicited. May also be known as: Opioids: Hillbilly heroin, oxy, OC, oxycotton, percs, happy pills, vikes; Depressants: barbs, reds, red birds, phennies, tooies, yellows, yellow jackets, candy, downers, sleeping pills, tranks; A-minus, zombie pills; Stimulants: Skippy, the smart drug, Vitamin R, bennies, black beauties, roses, hearts, speed, uppers (NIDA for Teens, n.d.).



Risk-avoidance – places emphasis on eliminating or avoiding behaviors that lead to adverse health outcomes. Examples include: not smoking, not drinking alcohol or using other drugs; not engaging in sexual intercourse; and not engaging in violence (Health Education Curriculum Tool, n.d.).

Tobacco product – is any product made or derived from tobacco that is intended for human consumption, including any component, part, or accessory of a tobacco product, including cigarettes, cigars, roll-your-own tobacco, and smokeless tobacco (U.S. Food and Drug Administration, n.d.).



Appendix B: References

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Appendix C: Research Alignment

| Citation | Brief Summary of Strategy | Sample Size | Impact/Evidence of Effectiveness | Implementation |
|---|---|--|--|---|
| Lennox, R. D., & Cecchini, M. A. (2008). The narconon drug education curriculum for high school students: A nonrandomized, controlled prevention trial. Substance Abuse Treatment, Prevention, and Policy, 3(1), 8. | The Narconon drug education curriculum for high school ages incorporates a unique combination of prevention strategies with content addressing tobacco, alcohol, marijuana and common "hard drugs." Health motivation, social skills, social influence recognition and knowledge-developing activities address a number of risk and protective factors in the etiology of substance abuse and addiction | N=995 students from 14 high schools in Oklahoma and Hawaii. | There were significant differences between the educational group and control group such that the educational group was less likely to engage in these behaviors: amount of cigarette use showed the strongest effect ($F = 3.89$, df = 11, p < 0.001,) followed by use of smokeless tobacco ($F = 3.39$, df = 11, p < 0.001) and cigarette frequency ($F = 3.35$, df = 11, p < 0.001), frequency and amount of Marijuana were also statistically significant ($F = 2.28$, df = 11, p = 0.010 and $F = 2.12$, df = 11, p = 0.017, respectively) and differences in alcohol usage, $F = 1.87$, df = 11, p = 0.040. | The study design called for each of the schools recruited to the experimental conditions to receive the complete drug education curriculum. Professionally trained facilitators followed a codified delivery manual and completed a daily compliance report. Codified Narconon drug prevention curriculum materials helped the facilitator implement the program according to specific standards, maintaining program fidelity. |
| Lisha, N. E., Sun, P., Rohrbach, L. A., Spruijt- Metz, D., Unger, | Project Towards No Drug Abuse (TND) is a substance abuse | N=1426 students from 24 continuation high | Relative to controls, there was a significant decrease in the proportion of | The Project TND curriculum consisted of 12 classroom sessions, |



| Citation | Brief Summary of Strategy | Sample Size | Impact/Evidence of Effectiveness | Implementation |
|--|--|---|---|---|
| J. B., & Sussman, S. (2012). An evaluation of immediate outcomes and fidelity of a drug abuse prevention program in continuation high schools: Project towards no drug abuse (TND). Journal of Drug Education, 42(1), 33-57. | prevention program specifically designed to address the needs of youth in continuation high schools. The program is based on a motivation, skills, and decision-making model. This study examined a Project TND trial designed to examine the efficacy of a multiyear, motivational interview-based, telephone-delivered booster program that followed the Project TND school-based program. | schools in four counties in Southern California. | use cigarettes (p = .00), alcohol (p = .00), marijuana (p = .00), and hard drugs (p = .00). Significant differences were also found in the TND Only group relative to the TND +MI group; for the TND Only group, there was a greater decrease in the proportion | approximately 45 minutes each. In each school (control group schools excluded), delivery of the program took place in the selected classrooms over a 4 week period. In the control condition, students received only drug abuse prevention activities, if any, provided directly by their school. In the TND + MI condition, delivery of the motivational interviewing (MI) booster component was initiated approximately one month after the completion of the immediate posttest. |
| Werch, C. C., Moore, M. J., DiClemente, C. C., Bledsoe, R., & Jobli, E. (2005). A multihealth behavior intervention | The study tested the efficacy of a brief, multi-health behavior intervention integrating physical | N=604 students in the 9th and 11th grade from one high school. | Overall MANCOVA tests at 3-months post-intervention were significant for alcohol consumption (F=4.79; df=4, 570; p=0.001) and | The Project SPORT consultation consisted of an in-person health behavior screen, a one-on-one consultation, a |



| Citation | Brief Summary of Strategy | Sample Size | Impact/Evidence of Effectiveness | Implementation |
|--|---|-------------|---|---|
| integrating physical activity and substance use prevention for adolescents. Prevention Science, 6(3), 213-226. | activity and alcohol use prevention messages for high school adolescents. Students were randomly assigned to receive either a brief consultation and prescription with a mailed reinforcing follow-up flyer (Project SPORT) or a minimal intervention control consisting of a wellness brochure provided in school and a pamphlet about teen health and fitness mailed to the home. | | initiation behaviors (F=9.93; df=2, 507; p=0.000), alcohol use risk (F=2.23; df=6, 491; p=0.03) and protective factors (F=2.07; df=9, 316; p=0.03) drug use behaviors (F=3.69; df=2, 579; p=0.02), with positive effects for those exposed to Project SPORT. At the 1 year follow up Project SPORT intervention showed positive effects for alcohol protective measures (F=2.86; df=9, 276; p=0.003), alcohol risk factor measures (F=2.22; df=6, 438; p=0.04), and drug initiation (F=6.21; df=2, 422; p=0.002). | take-home fitness prescription targeting adolescent health promoting behaviors and alcohol use risk and protective factors, and a flyer reinforcing key content provided during the consultation mailed to the home. The minimal intervention control consisted of two commercially prepared generic alcohol prevention and health promotion print materials. |



Best/Promising Practices

| Promising Practice | Source(s) | Comments/ Limitations |
|---|--|---|
| Computer based and parent involvement program | Schinke, S. P., Schwinn, T. M., & Ozanian, A. J. (2005). Alcohol Abuse Prevention Among High-Risk Youth: Computer-Based Intervention. Journal Of Prevention & Intervention In The Community, 29(1/2), 117-130. | This study examined the feasibility of a CD-ROM intervention to prevent alcohol abuse among high-risk youths. Participants were assigned to control, CD-ROM intervention, and parent-enhanced CD-ROM intervention. Through interactive skills-based sessions, participants in the intervention groups showed an increased understanding of assertiveness and were more cognizant of the harmful effects of alcohol. However, there was a lack of change in alcohol and substance use between intervention and control groups. The lack of behavior change was understandable, considering the low base rates of alcohol and substance use among participants at pretest |
| Computer based and parent involvement program | Schinke, S. P., Schwinn, T. M., & Fang, L. (2010). Longitudinal outcomes of an alcohol abuse prevention program for urban adolescents. Journal Of Adolescent Health, 46(5), 451- 457. | The present study tested the long-term efficacy of a computer-delivered alcohol abuse prevention program for early adolescents. Seven years following post-intervention testing and relative to control-arm youths, youths in CD and CDP groups reported less alcohol use, cigarette use, binge drinking, and peer pressure to drink; fewer drinking friends; greater refusal of alcohol use opportunities; and lower intentions to drink Overall however, participants' older age was associated with increased 30-day alcohol and cigarette use at the 7-year follow up. Study findings lend support to the potential of computerized, |



| Promising Practice | Source(s) | Comments/ Limitations |
|--|---|---|
| | | skills-based prevention programs to help urban youth reduce their risks for underage drinking, though it may be less effective as participants get older. |
| Parent involvement | Guilamo-Ramos, V., Jaccard, J., Dittus, P., Gonzalez, B., Bouris, A., & Banspach, S. (2010). The Linking Lives Health Education Program: A randomized clinical trial of a parent-based tobacco use prevention program for African American and Latino youths. American Journal Of Public Health, 100(9), 1641-1647. | This study evaluated the effectiveness of a parent-based add-on component to a school-based intervention to prevent cigarette smoking among African American and Latino middle school youths. At follow-up, the odds of smoking cigarettes were reduced by 42% for adolescents in the parent add-on condition versus the TNT-only condition. The majority of parent-based tobacco reduction programs have focused on White middle-class youths. Thus, the program's effectiveness with African American and Latino adolescents is that much more important. Although results are promising, the study did not include a formal, randomized, "no intervention" control group, so any statements about the absolute effectiveness of the interventions should be taken tentatively. |
| Promoting healthy decision-making skills | Talpade, M., Lynch, D., Lattimore, B., & Graham, A. (2008). The Juvenile and Adolescent Substance Abuse Prevention Program: An Evaluation. | - The JASAP program was established in 2007 to promote healthy decision-making skills that would eventually lead to informed choices and decisions surrounding drug and alcohol use. Program evaluation assessed the cognitive and behavioral impact of the program—how program participation had changed prior knowledge, and the processes and outcomes related to making decisions about drug and alcohol use and how this was reflected in |



| Promising Practice | Source(s) | Comments/ Limitations |
|-----------------------|---|--|
| | International Journal Of Behavioral Consultation And Therapy, 4(4), 304- 310. | behavioral measures. Results indicated that 94% of participants made more healthy choices regarding drugs and alcohol. The follow-up of participants a year later indicated that the positive effects were sustained for at least a short period of time. Although the early intervention showed promising results, it is acknowledged that the impact is short-term, and long-term support may be essential in sustaining the positive impact of the JASAP program. |



Appendix D: Student Handout - Research/Presentation Activity

Making Wise Choices - More Than Just Saying No to Drugs

Respecting Yourself-Protecting Your Body and Your Mind from the Effects of Harmful Substances

For your groups' harmful substance, you will conduct web-based research to respond to the following questions. Cite at least two sources used for finding your information.

After conducting your research, your team will create a presentation to communicate your findings to the class.

- What is the harmful substance?
 - o What are the common street/slang names?
 - O How is it used?
 - O What are the common side effects?
- What are the chemicals in substance that cause reactions in the brain?
- What effects do the chemicals in the substance have on the brain?
- What effects do the chemicals in the substance have on the body?
- What are the short-term effects of the substance on the brain and body?
- What are the long-term effects of the substance on the brain and body?
 - Illustrate the long-term effects the substance can have on your mind and body.
- Is the substance addictive?
- What are the potential effects of substance abuse on your behavior or ability to make decisions?
- What are other potential negative effects of abusing the substance?

Some suggested websites are listed on the following page.



Some suggested websites for students to explore for completing the lesson: *Respecting Yourself-Protecting Your Body and Your Mind from the Effects of Harmful Substances*

Center for Substance Abuse Prevention (Substance Abuse and Mental Health Service Administration). Too Smart to Start.

Resources for teens on underage drinking, including FAQs, quizzes, scenarios, and advice on resisting peer pressure.

http://www.toosmarttostart.samhsa.gov/Start.aspx

Center for Technology in Teaching and Learning (Rice University)

Interactive lessons on substance abuse & neuroscience http://webadventures.rice.edu/

Foundation for a Drug-Free World - http://www.drugfreeworld.org/#/interactive

Facts about various drugs; PSAs and documentaries for teens and adults; and free resources for educators.

The Truth about Drugs brochure for teens

http://f.edgesuite.net/data/www.drugfreeworld.org/files/truth-about-drugs-booklet-en.pdf

Learn.Genetics. Drugs of Abuse.

Animated clips of effects of various drugs on the body. http://learn.genetics.utah.edu/content/addiction/abuse/

NIDA for Teens: The Science Behind Drug Abuse - http://teens.drugabuse.gov/

Facts, interactive lessons, infographics, blogs, and FAQs on drugs.

Inhalants

http://teens.drugabuse.gov/drug-facts/inhalants

Marijuana

http://teens.drugabuse.gov/drug-facts/marijuana

Tobacco, Nicotine, and E-Cigarettes

http://teens.drugabuse.gov/drug-facts/tobacco-nicotine-e-cigarettes

National Institute on Drug Abuse (NIDA)

This Web site contains information about drug abuse and a section designed specifically for parents, teachers, and students. Publications and other materials are available free of charge.

http://www.drugabuse.gov/children-and-teens

Drugs + Your Body (Scholastic)

http://www.scholastic.com/drugs-and-vour-body/



The Cool Spot. National Institute on Alcohol Abuse and Alcoholism (National Institute of Health; U.S. Department of Health and Human Services)

Information for teens about alcohol, including tips for resisting peer pressure. http://www.thecoolspot.gov/index.asp

Heads Up (Scholastic) - http://www.scholastic.com/

Drugs + Your LIFE: It Isn't

 $Pretty \ \underline{http://headsup.scholastic.com/sites/default/files/block/images/NIDA11-lines/NIDA11-lines/NIDA11-$

PTG Activity3.pdf

The Power of Pausing: What Would You

Do? http://headsup.scholastic.com/sites/default/files/NIDA12-INS3 TE-

worksheet.pdf

