

Substance Use Prevention Activity Guide



2017



SUBSTANCE USE PREVENTION ACTIVITIES

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For additional activities and interactive resources, see the Recreation for Mental Health Tool Kit or visit www.westernhealth.nl.ca/mha.

Don't Forget...Be Creative & Have Fun!

About the Toolkit

This Activity Guide and Toolkit was developed to support efforts to prevent or delay the onset of substance use among children. The goal is to build resilience, increase protective factors and reduce risk factors. This program emphasizes play and children will be learning through activity. Use the Activity Guide and Toolkit to plan and deliver fun, interactive and educational activities to children.

Kit Contents

- Activity Guide
- Impaired Goggles
- Safety Cones (16)
- Flip Flop Faces
- Jumbling Towers
- Drug Abuse Tumble N' Teach
- What are Drugs Container
- Oven mitts
- 3 Sponge balls
- Paper bags
- Pencil Case with Markers, Crayons, Pencil Leads, Pencils, Pens, Sharpener, Scissors & Glue
- Index cards
- Green Painter's Tape
- Nuts and Bolts
- 2 Skip Ropes
- 1 Bucket
- Craft Supplies (pipe cleaners, popsicle sticks, wools, etc)
- Activity Handouts
- Game Board, Pieces & Dice
- Bubble Gum
- Prize (Pass the Parcel)
- Flip Chart Paper
- Coloured Paper
- Paper Bags
- Paper Plates
- Feelings Stickers

Use the Substance Use Prevention Activities Event Planner to help plan a successful event! See *Appendix C*.

Target Participants

The Substance Use Prevention Activity Guide and Toolkit is intended to be used with children ages 5 to 12. Appropriate ages are indicated for each activity in the guide. See Index by Age on Page 73 for quick reference. It is important to understand developmental ages when working with children. What is appropriate for us to teach at different ages? See Understanding Developmental Ages on Page 11.

Understanding the Basics

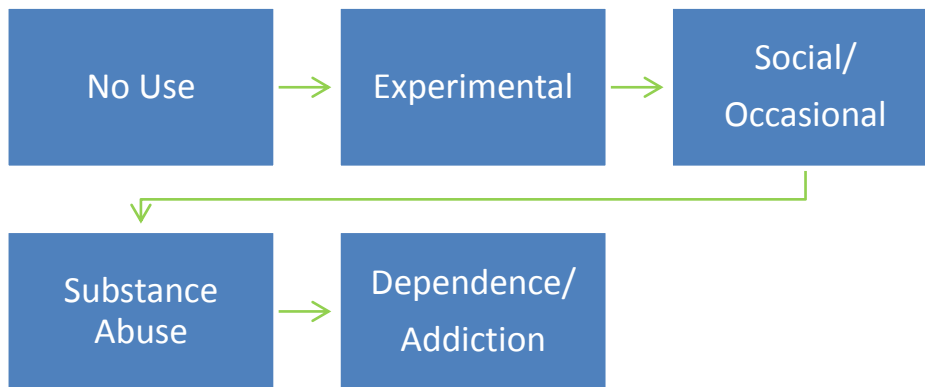
We don't expect you to be experts on the prevention of substance use but it is helpful to have a general understanding on the following topics:

- Youth trends in substance use
- Risk and protective factors, and understanding resiliency
- Continuum of use or process of addiction
- Where to go for more information or support

Key Concepts

Drug is a substance that affects the way the body works.

Stages of Substance Use



No Use ~ Do not use for personal/moral, health or religious reasons.

Experimental ~ Person is usually motivated by curiosity. The person tries a drug once or a few times, just to see what it is going to do for them. Whether use continues, depends on the person's experience with that substance. Low tolerance; using only "soft" drugs; use is often unplanned; no long term consequences connected to use.

Social/Occasional ~ Uses appropriate times and places; uses self imposed rules or limits; Some responsible planning of “next high” occurs; Using when in social situations or with others; No long term consequences. (i.e., drink with a friend or occasional use of medication).

Substance Abuse ~ Increase in frequency & amount of use; Negative consequences; Life areas impacted; Substance becomes a coping mechanism: a way to deal with reality or to escape

Dependence/Addiction ~ The irresistible compulsion to use alcohol, other drugs or gamble despite adverse consequences. It is characterized by repeated failures to control use, increased tolerance & increased disruption in the workplace, family life &/or other life areas.

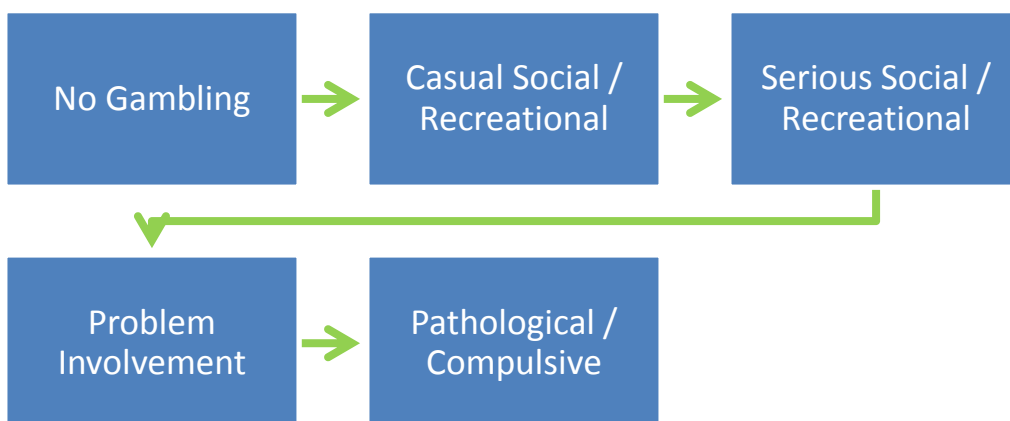
There are two types of Dependency: 1) Physical Dependence and 2) Psychological Dependence.

Physical Dependence ~ The body becomes accustomed to a drug that when taken away creates withdrawal symptoms and this increases the need for the drug. Tolerance refers to the individual needing more of the substance to accomplish the same feeling as when they began using the substance. Withdrawal refers to the individual experiencing physical symptoms associated with no longer using a substance.

Psychological Dependence ~ Emotional or mental drive to continue taking a drug to maintain a sense of wellbeing. Psychological Cycle of Dependence: Guilt, Shame or Discomfort surrounds drug use and the quickest way to deal with these feelings is to use again and hence more negative feelings are generated.

Gambling - the act of risking money, property or something of value on an activity with an uncertain outcome

Gambling Continuum



No Gambling ~ Does not use for personal, moral, or religious reasons.

Social ~ Gambling for a predetermined amount of time and with a fixed amount of money, is able to restrict gambling at any time, and does not use winnings to gamble

Problem involvement ~ Investing considerable time and emotional energy in gambling; The stakes are higher than the person can afford; Causes social, family or work problems

Pathological/compulsive ~ A chronic and progressive disease, characterized by a failure to resist the impulse to gamble, despite negative personal, financial, family and/or life consequences

Mental Health is more than just an absence of mental illness, it's a state of well-being.

- Mentally healthy means you enjoy life and the people in it and you can cope with difficult times.
- This definition is different from what most people think of when they think of mental health. People often think of mental health problems or illnesses.
- It's important to remember that everyone has mental health but not everyone has a mental illness.

Mental Illness is a disturbance in thoughts and emotions that decreases a person's ability to cope with the challenges of everyday life.

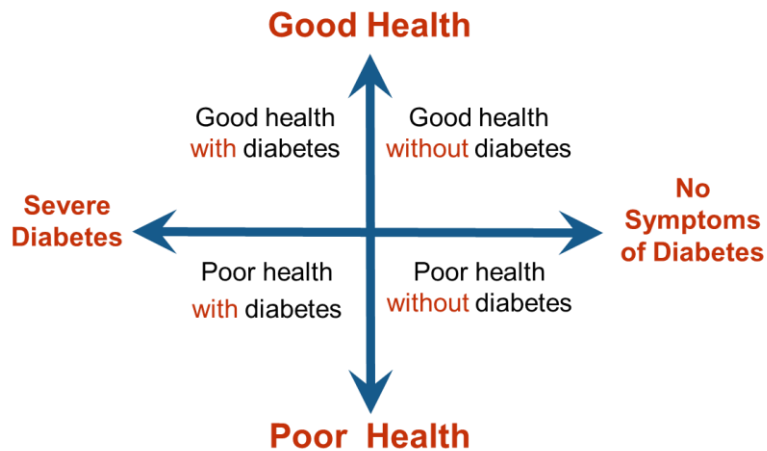
- Mental illness can take many forms just as physical illnesses (e.g., anxiety, depression, schizophrenia, etc.)
- 1 in 5 young people in Canada live with a mental illness.
- There's no single cause of mental illness. It can affect anyone.



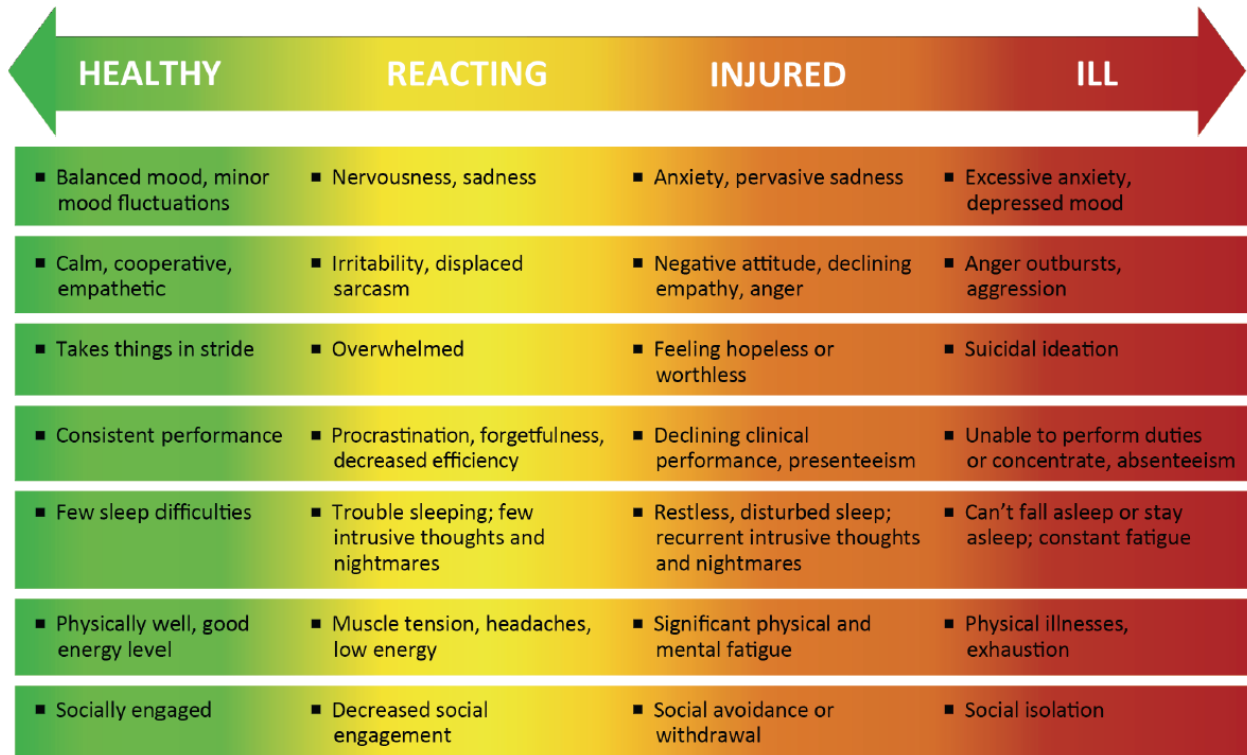
- Everyone has mental health – good, poor or anywhere in between but not everyone has a mental illness.
- Someone could experience depression but they may still have good overall mental health because their symptoms are managed just as someone with diabetes can still be healthy

with their symptoms managed. Also, where a person fits on this continuum changes over time.

- It may be helpful to use the analogy of a physical illness like diabetes.
- Primary Prevention



- ▶ Healthy or ill
- ▶ Mental health can **shift day to day**
- ▶ Everyone falls along this continuum
- ▶ **Everyone** can categorize their mental health along a continuum



Primary Prevention

- Preventing the onset of substance use and mental health problems
- Universal (entire population) or Selected (group at 'higher risk')
- Protection of people who have not yet begun to use substances/gamble/engage in misuse/abuse or before signs of a mental health problem.
- Addictions Prevention & Mental Health Promotion involves increasing protective & reducing risk factors
- Addressing risk/protective factors before signs of a problem occur
- Improving self-esteem or learning positive coping skills are examples of primary prevention for substance use and mental health problems.

Protective and Risk Factors

- Factors to **Protect** a person from developing a substance, gambling or mental health problem or put someone at **Risk** for developing a problem:
 - Individual
 - Family
 - School
 - Life Events/Situational
 - Community/Culture
- Programs should target modifiable risk factors and strengthen protective factors.
- Early intervention with risk factors often has greater impact than later intervention
- Mental Health issues increase risk for substance use issues and vice versa.

To be effective in primary prevention efforts, we need to target children who have not yet begun to use substances/gamble/engage in misuse/abuse or before signs of a mental health problem occur.

Resilience is “bouncing back” from challenges. The ability to recover from difficulties or change - to function as well as before and move forward.

Trends

Alcohol, marijuana and tobacco are the most widely used substances in Canada and Newfoundland.

Age of First Use for the top 3 substances:

- Alcohol is 13.5 years
- Cannabis is 14.2 years
- Binge Drinking is 14.5
(CSTADS, 2014-2015)

Top 3 Substances:

- Alcohol (47%)
- Cannabis (30%)
- Tobacco (16.4%)
(NL Student Drug Use Survey 2012)

Newfoundland Student Drug Use (Past 12 months Grade 7-12)

- Alcohol 44.6% (39.5 Canadian average)
- Binge Drinking 30.1% (23.7% Canadian average)
- Cannabis 22.3% (16.5% Canadian average)
- Pharmaceuticals 4.1% (3.7% Canadian average)
(CSTADS, 2014-2015)

Where to Get Help

Regional Mental Health & Addiction Services Offices:

All Mental Health Services (Corner Brook, Stephenville, Deer Lake, Port Saunders, Burgeo, Norris Point, Port aux Basques) provide promotion, education and prevention services, consultation, assessment and counseling services to children, adults, families, groups and communities for mental health/mental illness-related issues. Mental Health Services accepts self referrals or referrals from other agencies.

Port aux Basques	695-6250
Burgeo	886-1550
Stephenville	643-8740
Corner Brook	634-4171 (Blomidon Place - Children Youth & Families) 634-4506 (Adult Mental Health & Addiction Services)

- They are easily motivated.
- They enjoy music and rhythmic activities.
- They are imaginative and love dramatics.
- There is a general lack of fear and poor appreciation for potential danger.
- They often ask “Why?”
- They like to talk.

- Introduce the concept of self-responsibility for health and safety through experiences with predicting danger in situations.
- Encourage participation in group activities. Allow for conversation during activities.

Social

- Social awareness is developing and they are beginning to understand and enjoy taking turns in games and conversation.
- They enjoy approval of peers and adults.
- They enjoy fun and participation in games with definite rules.

Things to Consider

- Use partner and small group activities to teach cooperation, responsibility, consideration and empathy.

Emotional

- Children are easily confused and enjoy repetition.
- Children demonstrate varying degrees of control over emotions.
- They may be ready for working in groups but not necessarily ready for common goals.
- They are gradually becoming more independent and enjoy success.
- They are creative curious and imaginative.
- They experience difficulty with waiting.

Things to Consider

- Provide activities of short duration give simple directions and repeat enjoyable activities.
- There is a need to foster an awareness of the significance of emotion and the development of socially acceptable ways of expressing emotion without unreasonable conformity.
- There is a need to encourage consideration of others.

Physical

- Children mature at different rates in terms of: body fat , muscle size and strength & posture.
- Gross motor skills are developed than fine motor skills.
- They are usually far sighted; quick or accurate focusing may be difficult; spatial judgment may be difficult but improves with age.

Things to Consider

- Provide for learning experiences that allow for personal expression and positive reinforcement.
- Encourage active participation in games and other activities.
- Promote an understanding of the concept of physical growth and development.
- Provide large muscle activities combined with a variety of activities designed to enhance fine motor development.
- Pay attention to the selection and arrangement of the physical environment
- Physical capabilities are unaffected by gender differences.

Moral

- Tend to conform in order to avoid disapproval.

Things to Consider

- Promote an understanding of the reasons for appropriate behaviours and actions.

- They have developed a concept of right and wrong which may or may not be justified.
- They tend to enjoy discussing moral issues that emerge from their own experience.
- They have the uninhibited sense of curiosity, excitement and wonder.
- The same activities are appropriate for boys and girls.
- It is necessary to recognize basic emotions: love, anger, fear, guilt; how to deal appropriately with the feeling and understand situations which may evoke the feelings.
- Differentiate between and inappropriate reactions.
- There is a need to provide quiet time for reflection.

Elementary Learner (Ages 9-12)

Intellectual

- Attention span is increasing.
- There is a tendency to be curious and ask many questions.
- There is an increasing ability to use language and reasoning skills for self-expression.
- They are often preoccupied with thoughts of sexual development.
- They can understand increasingly difficult concepts.

Things to Consider

- Introduce increasingly complex tasks with varied sequences.
- There is a need to provide background information and promote the development of their skill in increasing quality information. Provide opportunities for verbal participation that focus on cause and effect, logical reasoning and alternative problem solving.
- Need for guidance and knowledge to understand personal growth and development.

Social

- They enjoy competition.
- They seek attention and approval.
- There is a tendency to form cohesive social groups and exclude some peers.

Things to Consider

- Provide group and individually challenging experiences.
- There is a need for recognition and positive reinforcement.
- There is a need to be a part of a small group of friends and to include other peers periodically. Need to be vigilant about children being marginalized from learning and social activities.

Moral

- There is a tendency to choose behaviours in order to avoid censure.
- Internal standards of right and wrong and beginning to develop.

Things to Consider

- Need to provide opportunities for life-skills training such as decision making, problem solving and coping. There is a need to understand that choices have consequences.
- Need to understand the emergence of conscience, the value of parental guidance and to recognize how one's actions affect

others.

Emotional

- They are becoming less egocentric.
- They are becoming more independent.
- They become discouraged easily and there is a need to feel successful.
- They may begin to display more aggression as they struggle to determine their own identity.
- They enjoy repetition of favoured activities.
- Behaviour may be affected by puberty.
- They tend to be competitive but easily upset if losing.
- They become very concerned by issues like pollution, war, poverty, and death and can become frightened and pre-occupied by these.

Things to Consider

- There is a need to foster cooperation through group endeavours.
- Need to increase responsibilities and leadership opportunities.
- Offer encouragement and activities which provide successful experiences. Encourage cooperative skills and alternatives to aggressive behavior.
- There is a need for recognition of differences in personal growth and development patterns.
- There is a need for some child selected learning experiences.
- Need to encourage competition in an appropriate way, recognize and discuss feeling about performance and encourage team cooperation and good sportsmanship.
- Explore issues of concern and reassure regarding immediate personal threat and positive steps which individual can take.

Physical

- Growth may be different for boys and girls. Awkwardness may be exhibited but coordination is improving.
- There is an inherent need to move.

Things to Consider

- Need to understand and accommodate for differences in growth and development.
- Need to balance sedentary activities with movement activities.

Leaders

Responsibilities

**Be a good role model*

Planning:

- Review the Activity Guide.
- Select age appropriate activities for your participants (consider time & setting).
- Make sure you have all the resources you need to conduct the event.
 - Do you need to photocopy any materials?
 - Do you need to request any materials?
- Do a test run of the activity if you can!
- Know the material well and be clear on the directions of the activity.

- Plan an interesting program & carry it out with enthusiasm!

Leading an Activity or Group Discussion

- Be on time
- Try to include as many participants in the group as possible
- Remember that you are trying to share knowledge and have fun!
- *Keep it Simple!!!*
- Everyone has different abilities, be sure to give positive praise and encouragement when an individual is frustrated. Remember the Characteristics of the Primary & Elementary Learner.

Know How to Handle Difficult Situations

Handling Personal Questions

- Re-direct questions posed to you about your own personal experiences.
- You do not have to answer personal questions (“Do you use drugs?”)-- in fact, you are much better off not to do so, as one question will undoubtedly lead to another one that is even more personal. You can respond honestly without putting down the participant. (“I don't think it's a good idea for me to tell you about that, because I want to help you explore your feelings and ideas”).
- Don't let yourself be put on the defensive. It is important to convey to each participant that his or her contribution is worthwhile, welcome and appreciated

Handling Challenging Questions

This could be questions that seem to challenge your knowledge about your topic or comments that seem completely off-base or untrue.

- Don't get boxed into coming across as an expert, authority or judge -- you can show confidence in your information and experiences without having to prove yourself an expert.
- You can "buy time" to prepare your answer:
 - *"That's very interesting; I have to think about that."*
- Use a question to answer a question (after all, we want students to think for themselves):
 - *"Before I respond, I'd like to know what you think about that."*
 - *"Does someone else have something to add or a different opinion?"*

* After you get several ideas expressed by different participants, all you will have to do is formulate a compromise between the opposing ideas, therefore coming up with the wisest response of all!

Handling Participant Disclosures

- Child discloses risky home situation
- Child tells you their parents use drugs
- Child discloses abuse or neglect

What to do:

- Don't ignore it – but you aren't a police officer either
- Talk to others who work at the site
- Still doesn't sit well, talk to your supervisors – they have the knowledge to help you work this through

Duty to Report

Youth Recreation Workers are included as an identified group with professional or official duties with respect to a child under the *CHILDREN AND YOUTH CARE AND PROTECTION ACT*

- You are responsible to report abuse or neglect – directly – not through a supervisor
- Your supervisor is your mentor and leader, get them involved immediately
- Child abuse includes physical, sexual or emotional harm, living with violence or being left without adequate supervision.
 - Physical abuse is any non-accidental physical force or action that harms a child.
 - Sexual abuse is the inappropriate exposure of a child to sexual contact, activity or behavior.
 - Emotional abuse is anything that causes mental or emotional harm to a child.

For more information on the duty to report child abuse, read the full Act here:

<http://www.assembly.nl.ca/Legislation/sr/statutes/c12-2.htm>

Or, view the brochure developed as part of a provincial awareness campaign:

<http://www.health.gov.nl.ca/health/childrenyouthfamilies/cyfscampaign.pdf>

Tracking/Evaluation

- Complete the Activity Tracking Form and submit it to the Addictions Prevention Consultant:
Tracey Wells-Stratton
Western Health, Blomidon Place
PO Box 2005
Corner Brook, NL
A2H 6J7

Leader Training

A 6-hour leader training is available through Mental Health & Addiction Services. This training will provide participants with a general understanding of addictions prevention and mental health promotion. In addition, participants will become familiar with the toolkit and activity guide, while enhancing their leadership skills to effectively implement these substance use prevention activities with children aged 5-12.

Activity 1: Flip Flop Faces – Emotions in Motion

Target Participants: Kindergarten to Grade 1, Grades 2-3, Grades 4-6, Mixed Ages

- This innovative bean bag toss game teaches children to understand facial expressions.
- Game encourages cooperative play (practice taking turns), and social awareness.
- Includes 6 target bowls and 6 bean bags labeled with emotions that add up to one great party game.
- Children learn to identify words for different emotions. The game fosters conversations focusing on feelings and understanding self and others.



Emotions in Motion Instructions:

- Look together at the faces printed on the bowls. Show your child how each bean bag is labelled with an emotion that matches the face on its matching colour bowl. Review the emotion labels together. Take turns mimicking the faces. Talk with the children about times they have experienced these different emotions. Offer stories from your own memory and experience (e.g., I remember that I felt happy the day we got our new puppy, I felt scared when he ran away, etc.)
- Play a game in which you take turns choosing a bean bag of choice, identifying the emotion label printed on it, then tossing the bag to its matching colour/face bowl. When the bowl flips over, take turns making that face while telling of a real or pretend time you felt the same way (e.g., I felt silly when I splashed in the rain puddles). Another time, guide the children he/she observed others experiencing the various emotions (e.g., James felt sad when it was time for his friend , Lucas, to go home).
- Offer the children a sequence of scenarios after sharing each one, have them toss a bag until he/she flips the bowl that tells how how he/she would feel about that scenario.

Sample scenarios:

- It's your Birthday
- Grandma brings you a present
- A big dog barks at you
- You see a clown, wearing a red nose
- Its nap time and you don't want to go to bed
- It's raining so you can't play outside.

Have participants name the emotions and ask questions to facilitate a discussion about emotions.

- Tell me about a time when you felt...
- What did you do when you felt...
- What makes you feel...

Activity 2: Bubble Gum

Target Participants: Kindergarten to Grade 1, Grades 2-3, Grades 4-6, Mixed Ages

Purpose:

- To help children understand what it would be like to have an addiction.

Instructions:

- Hand out one piece of strong-flavoured gum to each child
- Tell the children to hold the gum close to their nose and mouth but not to put it in their mouth.
- After a minute, let them put it on their tongue, but not to chew it.
- After a minute, let them chew it once or twice, but no more.
- Ask the group:
 - Who is pretending not to chew?
 - Who finds it easy not to chew?
 - Who finds it hard not to chew?
 - Who has not chewed the gum? How did you resist chewing it? What did you say to yourself?
 - What was it like? How did it feel to want the gum?
- Explain that when a person is “stuck” or addicted to a drug, they crave it and badly want to have it. Say:
 - The same way your mind told you that you really wanted the gum, the minds of people who are addicted to drugs tell them they really want the drug.
 - Just like your body told you that you really wanted the gum, the bodies of people with addictions tell them that they really want the drug. With drugs the feeling is much, much stronger than it is with gum
- Explain that everyone’s mind and body is different, the addiction feeling is stronger for some people than others.

(Activity taken from Strengthening Families for the Future, Child Manual - Session 8)

Activity 3: Refusal Skills Puppet Show

Target Participants: Kindergarten to Grade 1, Grades 2-3, Grades 4-6

Part 1: Choices & Consequences

Purpose: To help children realize that they are responsible for making choices based on thinking about the consequences of their actions.

Instructions:

- Explain to the group that everyone is responsible for his or her own behavior; that we can make our own choices and are responsible for what happens as a result of what we do.
- Begin a discussion about the kinds of trouble, or problem situations, the children can get into, by asking “What are some things that can get you into trouble?”
- Provide some examples if needed: picking on another child, taking something that wasn’t yours, fighting, talking back to your teacher, going somewhere you weren’t supposed to go, smoking, lying,
- Explain choices and consequences, using the following points:
 - With every choice we make, good or bad things can happen.
 - Often our choices are based on what we think will happen to us, how we feel about ourselves or how our behavior will affect others.
 - What could happen if:
 - You did not do your homework?
 - You used drugs?
 - You stole some candy?
 - You swore at your mom?

Note to Group Leaders:

- Remind the group of the importance of confidentiality – that nothing they say in this group will leave the room. Emphasize that their parents will not be told what they say in the group and that the other children in the group must also respect this rule.
- Be prepared for the possibility that disclosures of abuse may come up during this discussion.

Part 2: Refusal Skills

Purpose: To introduce the topic of refusal skills and have children learn strategies to say no to peer pressure.

Instructions:

- Introduce the topic of refusal skills by saying something like:
 - Often saying no, even to ourselves, can be hard to do. Saying no to other people, especially our friends, older kids, adults or strangers can be very hard to do.
 - There are different ways of saying no. Can you show me some ways of saying no using your voice and your body? Show us ways that you really mean it and ways that don't
- Tell the children that there are many ways to say no other than just using the word no. Today we are going to learn some different ways to say no:
 - Say, "No, thanks."
 - Broken record (e.g., repeating "no" or "no, thank you" over and over again, including using different words)
 - Making excuses (e.g., "I have to be home for dinner soon.")
 - Turning the tables (e.g., "you do it!")
 - Changing the subject (e.g., "look at my new comic book.")
 - Telling the truth that you don't want to do it (e.g., "I don't want to do that!")
 - Suggest doing something else (e.g., "let's go to the store.")
 - Give a reason "I'm not allowed to do that," or "That's bad for you." It could state the consequences, such as, "I don't want to do that; it will make me sick,"
 - Walk away or ignore the offer.
 - Assert yourself. This is the most important tactic. If you can stick up for yourself, you are learning an important life skill.
- Discuss how these strategies work for many situations.

Part 3: Practice Saying No

Purpose: To have children demonstrate how they would use each of the refusal skills to keep from getting into trouble.

Instructions:

- Split children into pairs or small groups and read aloud the situations for them to act out using puppets. *Note to Group Leaders: Assign age-appropriate scenarios.*
- Have children make puppets out of paper bags. Provide crayons or markers. They may also want to construct a simple puppet theatre from cardboard boxes. Allow time for them to practice their puppet shows.
- Invite groups to perform their puppet shows. Have each group act out their scenario in front of the larger group demonstrating an effective way to say no.

- For each situation discuss the possible choices and what might happen with each choice. End with a discussion about the skits. What worked well? What didn't? Was it realistic? What would it be like to say no in real life?

Sample Scenarios:

- You are in a store with your friend. You see him hide a bag of chips in his/her coat. He/she calls you over and hands you a bag and tells you to steal it.
- You are at school and your next class is math. You don't like it at all. You and your friend are out in the hall and teacher closes the door and starts the class. Your friend says he/she is going to skip math class and asks you to come along.
- Someone you think is really cool invites you to hang out with their friends after school. Everyone is sitting around talking and your friend pulls out a cigarette and lights it. He/she smokes it a couple of times and hands it to you. Everyone is watching.
- You and your friend are playing basketball at the park. Your grandmother is coming to dinner and your parents want you home by 5:00p.m. You go to leave but your friends want you to stay and keep playing.
- There is a boy in your class that is always dressed badly. He talks out of turn and makes jokes that aren't funny. You and your friend see him walking down your street after school. There is no one around and your friend wants to beat him up.
- Some kids in your class are hiding books and other things from the teacher. They want you to join in.
- Your friends took some candy from the corner store yesterday and didn't get caught. They shared the candy with you. Now they want you to help them take some more candy from the store.
- Some kids try to get you to throw rocks at the schools windows.
- You have agreed to babysit your younger brother. Now your friends suggest you go with them to a movie.
- Some kids want you to smoke a cigarette with them. They call you a chicken when you say no.
- You are at a family gathering. Your older cousin offers you some of his beer.
- A cousin offers you some cough medicine to cure your cough.

Adapted from Middle Years F&ST Club Handbook, Strengthening Families for the Future, Child Manual - Session 9 and 101 Ready-to-use Drug Prevention Activities, Activity 96

Activity 4: Emotional Jumbling Towers

Target Participants: Kindergarten to Grade 1, Grades 2-3, Grades 4-6, Mixed Ages

Purpose: To teach children to understand facial expressions and help children learn to identify words for different emotions.

Materials:

- Jumbling Towers Game

Instructions:

- The activity leader will make the tower with the words facing down and break the participants into two or three teams. Jumbling Towers combines the rules of two well-known games: Jenga and Charades.
- Each of the participants are invited up to remove a block
- When a block is successfully removed the player must act out the emotion written on the block without speaking
- The remainder of the participants on their team will be asked to guess the emotion
- If the team is successful they receive two points, if they are not then the other team(s) will have an opportunity to steal one point for a correct answer
- If a participant topples the tower their team will lose 5 team points
- The team with the most points when the tower topples wins.
- The activity leader will take score on a white board or flip chart paper
- For younger children, the activity leader may need to explain the emotion using a simpler term and allow the others to be successful if they guess an equal but different term for the intended emotion.
 - For example – exhausted can be tired, depressed can be sad, enraged can be angry, etc.
- The Emotions Vocabulary Chart on the next page can be printed and used as a guide to help participants identify the emotions and related facial expressions.

Rationale: Sometimes it can be difficult for individuals to express an emotion or to have a vocabulary to express their feelings. This activity provides a fun way for group members to build such a vocabulary and learn to recognize emotions.

(Activity Adapted from Recreation for Mental Health Tool Kit)

Emotions Vocabulary Chart



EXHAUSTED



CONFUSED



ECSTATIC



GUILTY



SUSPICIOUS



ANGRY



HYSTERICAL



FRUSTRATED



SAD



CONFIDENT



EMBARRASSED



HAPPY



MISCHIEVOUS



DISGUSTED



FRIGHTENED



ENRAGED



ASHAMED



CAUTIOUS



SMUG



DEPRESSED



OVERWHELMED



HOPEFUL



LONELY



LOVESTRUCK



JEALOUS



BORED



SURPRISED



ANXIOUS



SHOCKED



SHY

Activity 5: Worry Warriors

Target Participants: Kindergarten to Grade 1

Materials:

- Popsicle sticks
- Pipe cleaners / plastic beads
- Wool / embroidery thread
- Glue
- Scissors



Instructions:

Keep the bogeyman at bay by making a worry doll to take your troubles away! Worry people are very popular in the Guatemalan culture.

- To make your own worry doll, take two popsicle sticks. Cut one in half lengthwise, and then cut each half across the width.
- Glue two ¼ stick lengths to the bottom for legs and the other two ¼ sticks for arms. Leave it to dry for a few minutes.
- Put some glue on the bottom of the stick, making sure that the “legs” and part of the body are covered.
- Wind one colour of thread / wool / pipe cleaner around the bottom half of the stick, making sure that there is no bare wood showing through.
- Now cover the top half in glue, but keep the very top (2 – 3 cm.) glue free.
- Take another colour of thread / wool / pipe cleaner and wind it around the top.
- You can add hair and other little fancy decorations by gluing them on.
- The next time you feel scared, tell the worry doll your troubles, place it under your pillow until morning. Legend has it that the worry doll will take away your worries –

*“Worry Night, Worry Day,
Worry Doll, Take My Worries Away!”*

(Activity Adapted from Recreation for Mental Health Tool Kit)

Activity 6: Today I Feel...

Target Participants: Kindergarten to Grade 1, Grades 2-3

Purpose: This activity helps children share how they feel without having to say anything. It can also be used to initiate discussion about emotions.

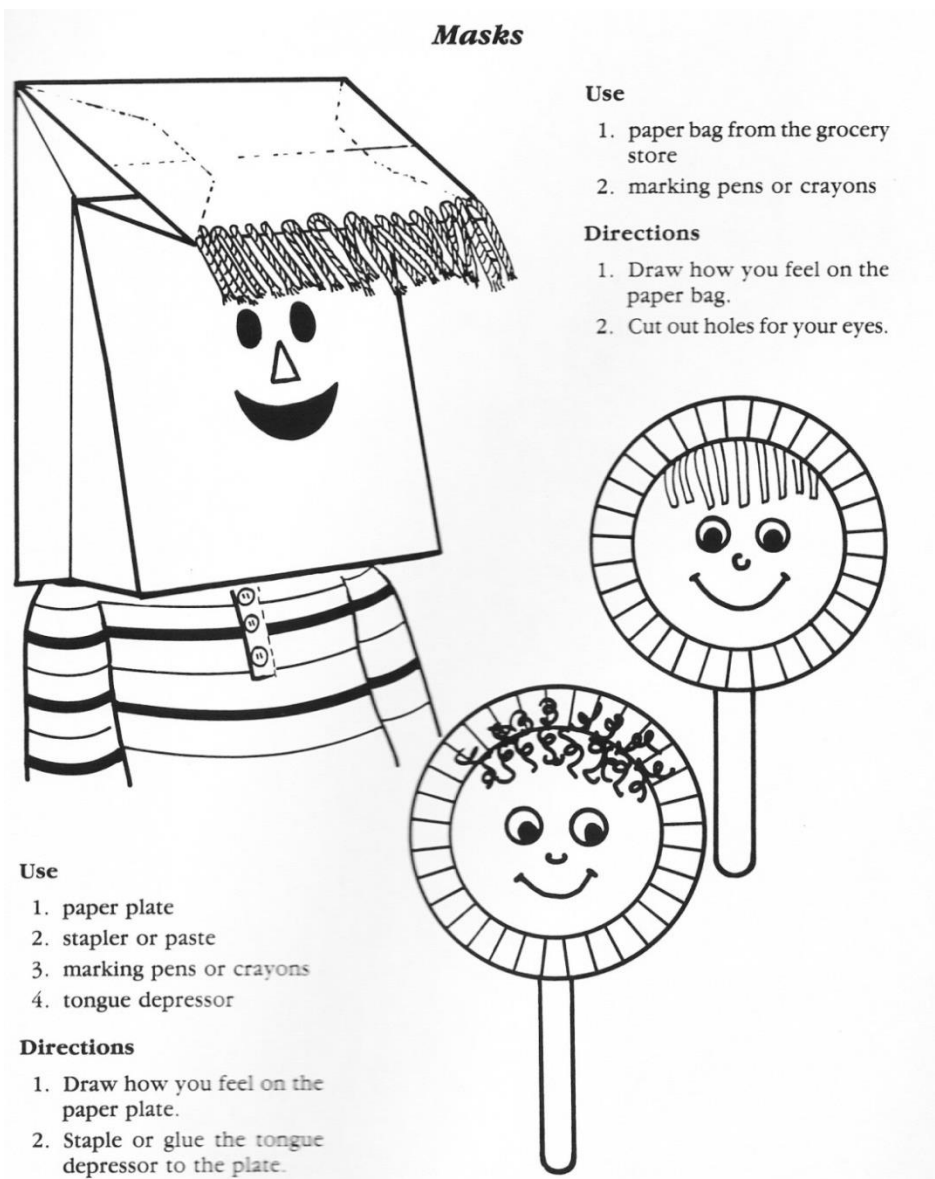
Sometimes it can be difficult to express our emotions and share how we feel.

3 Options for participants to share their feelings with others:

Option #1 – Paper Bag Mask

Option #2 – Paper Plate Mask

Option #3 – Feeling Face Sticker



Adapted from Children's Health Festival Program Guide

Activity 7: Meena's Mistake

Target Participants: Kindergarten to Grade 1, Grades 2-3

Purpose: Children will be able to explain the relationship between the use of medications and living a healthy life.

Materials:

- Responsible Meena's Mistake' story resource sheets
- Meena's Mistake picture resource sheets
- Responsible Meena's Activity Sheet
- Safety Rules

Instructions:

- Select four volunteers from the group to assist you. Give each volunteer one of the picture resource sheets. Ask each child to hold up his or her picture to show the group when called upon.
- Read the "Meena's Mistake" story from the activity sheets. As you read the story, note "breaks" in the story under the instructions column where the posters are shown and class discussion is required.
- Using the story as a catalyst, lead a discussion with the group to develop the following major points:
 - a) Medicines should not be used as a cure-all for every little ache or unpleasant feeling.
 - b) The use of medicines can be helpful or harmful.
 - c) Elementary-age students should not take medicines unless directed by parents or medical personnel.
- Questions similar to the following could be used to stimulate discussion and emphasize the major ideas:

Safety:

- Was it alright for Meena to take the pills by herself?
- What might happen if young children take medicines by themselves?
- Who should you take medicines by themselves?

Choices:

- Was Meena right in thinking that the pills would make her feel better?
- Can you always believe what television ads tell you?
- Did Meena demonstrate responsible behavior in the story? Why/Why not?
- What non-medicine alternatives could Meena have chosen?

Results:

- How does Meena's mother discover what Meena has done?
- What can Meena's mother do to help her?

- What happens to Meena now?
- Conclude the lesson by emphasizing that people’s use of medicines affects their health/well-being. It is important that students recognize that even small decisions about the use of medicines have a direct relationship to health. Stress the importance of knowing and obeying safety rules related to the use/non-use of medicines.
- You may wish to do the activity **“Responsible Meena”**.
- Tell the children that because medicines contain drugs, they must always be used in a responsible manner (or, in the correct way).
- Distribute copies of “Responsible Meena” activity sheet to each child. Review instruction with the group and allow them time to come up with an alternate conclusion to the story.
- Once the children have finished their new ending to the story, have them draw a picture of some aspect of the story; children can read their ending to each other. Post pictures and stories so that everyone made read them.

Story Resource Sheet

“Meena’s Mistake”

Instructions:

Read the story. At the appropriate times, have the children hold up the appropriate picture resource sheets (marked 1-4) as indicated in instructions below. Discussion starts are also included in the story.

“Meena’s Mistake”

Story: Meena was usually a very happy, energetic, responsible person. Today was different- Meena was upset. She stomped into the house and slammed the door behind her. “Hey Mom...” she called out, but there was no answer. “I feel awful,” Meena muttered as she looked around the kitchen. After a moment she saw a note on the table. It was from her mother.

Instructions: Show Poster # 1

Story: Meena was disappointed. She wanted her mother. She had a sore throat and felt very hot. She thought maybe she had the flu. What a day she’d had at school! It seemed like she couldn’t do anything right.

Instructions: Show Poster # 2

Story: During recess she'd had an argument with her best friend, Jackie.

Later her teacher had become angry with her because she hadn't handed in her math questions on time. Then, in the gym, Meena had kept missing the ball every time it was thrown to her. No things hadn't gone well for Meena. She was in terrible mood. Now she felt sick and no one was home to help.

Instructions: Discuss with the children Meena's options for dealing with her feelings. Possible responses might include:

- Laying down until her mother gets home
- Watching TV and trying to forget her feelings.
- Calling someone on the phone to talk over her problems.

Complete the story to find out what Meena decided to do.

Story: Meena had seen ads on television that said, "Take Ease-Away for fast relief." She also remembered that her mom had given her Ease-Away when she was sick during the holiday at the lake. Even though she had been told never to take medicines on her own, she couldn't see any harm in taking an Ease-Away pill.

She went to the medicine cabinet and looked inside.

Instructions: Show Poster # 3

Story: Meena saw all kinds of bottles. There were containers with powder in them, tubes and jars with sticky salves and pills of different colors. How could she know which was the Ease-Away bottle? She thought the Ease-Away her mother had given her the last time she was sick was pink. She looked until she found some pink-colored pills.

Meena took the top off the bottle and took one of the pills. She thought for a moment. "If one pill helps get rid of a sore throat, maybe if I take more I'll feel all better right away." So Meena took three or four more of the pills and swallowed them with some water. She put the bottle back in the cabinet and walked to the kitchen.

She started to feel odd. Her head felt awful-even her legs felt funny. Meena thought she should lie down. She had thought the pills would make her feel better, but she was feeling even worse than before. Just as Meena lay down on the couch, she heard the front door open. Her mom was home.

"What's wrong, Meena?" Her mother asked when she saw Meena laying down.

Instructions: Show Poster # 4

Story: Meena started to tell her mom about the rotten day she'd had, but she kept getting mixed up. The words weren't coming out right.

Her mother looked worried. "What's the matter, Meena? What have you done?"

"MEENA'S MISTAKE"
POSTER 1



"MEENA'S MISTAKE"
POSTER 2



"MEENA'S MISTAKE"
POSTER 3



"MEENA'S MISTAKE"
POSTER 4



“Responsible Meena”

Meena was upset and disappointed. She had argued with her best friend during recess, had done poorly in math class and was clumsy during gym. To make things worse, she had a sore throat and fever. She was in a terrible mood and no one was at home when she got there, so she helped herself to some Ease-Away pills.

Change the ending of the story to show how Meena could have acted responsibly. Use the following questions to give your ideas.

1. What things could Meena think of doing to make herself feel better until her mother comes home?
2. Which idea should Meena decide is best and why?
3. Describe what might happen when Meena’s mother comes home.

Safety Rules

1. Never take anyone else's medicine
2. Never take more than one medicine at a time unless under a doctor's direction.
3. Take medicine only in the way your doctor tells you to.
4. Use medicine only when it is needed.
5. Children should only take medicine when it is given by an adult.
6. Keep medicine out of the reach of small children.
7. Never use medicines which are old.
8. Always throw old medicines down the toilet, never in the garbage.
9. Always look at medicines in a lighted room to be sure of taking the right medicine.
10. Use medicine only for the right reasons.

Activity 8: Telling or Tattling

Target Participants: Kindergarten to Grade 1

Materials

- Telling or Tattling Story Sheet

Instructions:

- Begin by explaining the difference between telling and tattling is to the group
 - Tattling is trying to get someone into trouble. (No one is being hurt and no rule is being broken)
 - Telling is trying to get someone or yourself out of trouble (getting help when there are unsafe behaviours)
- Read the following brief stories to the group
- After each story ask the group if Julie is telling or tattling and explain some things Julie could have done instead.

Telling or Tattling - Story Sheet

First story:

Julie was at drawing table in class. She was busy writing her name on a booklet she had made. Sean came to the table and sat beside her. He took one paper, wrote some letters with a pencil then took another paper. He wrote some tiny marks on this paper, then took another and did the same thing. Julie didn't like him taking so much paper, so she went to tell the teacher.

Let's decide if Julie was telling or tattling:

Was Sean breaking a safety rule or doing anything dangerous?

- No, he wasn't breaking any rule or hurting anyone.

Did Julie really need help from the teacher?

- No, she wanted Sean to stop taking so many papers, or maybe wanted him to get into trouble.

Sean was just writing on many papers. It was not dangerous behaviour. Sean was not hurting anybody. When Julie went to tell the teacher, she was tattling. She did not really need help to keep someone safe and Sean was not really breaking any rules.

What else could of Julie done instead of going to the teacher?

- Ignore him, ask him to stop wasting paper, invite him to write/draw with her, offer to make him a booklet.

Telling or Tattling - Story Sheet

Second story:

Next Kyle came to the drawing table. For some reason, he got mad at Sean and poked Sean with the sharp end of a pencil. Sean told Kyle to stop, but Kyle poked him again. Sean had tears in his eyes. Sean asked Kyle to stop, but Kyle didn't stop. Julie went right away to get help from the teacher.

Let's decide if Julie was telling or tattling:

Was Kyle breaking rules or hurting anyone?

- Yes, he was hurting Sean and poking him with a pencil.
- Even when Sean asked him twice to stop, Kyle did not stop.

Was Julie tattling when she went to tell the teacher this time?

- No, because she really did need help to keep someone safe.

When you ask the teacher or another adult for help because someone is in danger, is being hurt or having their feelings hurt, you are NOT tattling. You are trying to get help.

But when children ask for help when they don't really need it, or when they want to get someone in trouble, they ARE tattling.

Activity 9: Good Vibes Picture/Collage

Target Participants: Kindergarten to Grade 1, Grades 2-3, Grades 4-6, Mixed Ages

Purpose: Positive self-talk, personal reflection

Materials: magazines or newspapers, coloured pencils, markers, scissors, glue.

Activity:

1. Ask the students to think about what makes them feel good. What are the things that give them good vibes? This can be getting a hug from mom, laughing with my best friend, hitting a home run, anything.
2. Have the students draw a picture or make a collage representing the things that give them good vibes.

Activity 10: Nuts n' Bolts

Target Participants: Grades 2-3, Grades 4-6

Materials:

- Nuts and bolts
- Mitts
- Impaired Goggles
- Stop-watch

Instructions:

- Divide kids into even teams; have each team form a line.
- Give each team a bolt & nut with the nut screwed all the way onto the bolt. Explain that each person must unscrew the bolt entirely and then re-screw it back on completely before passing it on to the next teammate. Also explain that you will be timing them.
- The first team to finish the relay wins. Record each team's time.
- The second time through the exercise, explain that they must do the same thing but this time wearing a pair of mittens. The mittens are to be passed from player to player along with the bolt & nut.
- Record each teams time during the mitten round.
- The teams will need to do the same task but wearing dark sunglasses with the lights off.
- Again record their times.
- After the sunglasses round, have each team note their three times & share their observations.
- Wrap up with a discussion of how these various impairments mirror the effects of drugs & alcohol on us when we are preforming important tasks like driving or operating machinery.

Discussion Points:

- Although this activity encourages participants to have fun, it is also intended to represent the very serious inverse relationship between alcohol/drug consumption and coordination, reaction time, and balance. It is extremely important to discuss this with the participants prior to starting, so as to ensure that the intended message is not undermined by the amusement provided by the activity.
- Discuss how wearing the mitts represents the loss of coordination that accompanies the consumption of alcohol and drugs and that wearing the goggles represents the impairment to our vision and balance. Encourage feedback from the participants about how much more difficult the activity was while wearing the mitts/goggles. This goal can also be achieved by

listing the increased time it took to complete the relatively simple task of unscrewing the nuts and bolts while the participants were mimicking impairment.

- Discuss the various ways in which driving a vehicle is much more complicated than unscrewing nuts and bolts. Discuss how when driving any type of vehicle (car/truck, ATV, snowmobile, etc.), you need to be able to simultaneously use the brakes, steering wheel, mirrors, signal lights, etc. while also maintaining awareness of your surroundings.
- Talk about the teamwork aspect of this activity within the framework of understanding how our decisions/actions affect other people besides just ourselves. When a person decides to drive impaired, they are putting themselves, their passengers (if applicable), pedestrians, and other drivers in danger. If you wish to further explore this topic, divide the teams by having some members wear the mitts/impaired goggles, while the others do not. When the races are over, discuss how the two members wearing the mitts/goggles let their other teammates down by slowing down the entire team's performance.
- Ensure that participants understand what is referred to by the term "impairment". Impaired driving is not limited to driving while under the influence of alcohol, but it also encompasses driving while under the influence of illicit drugs such as marijuana and cocaine, or prescription and/or over-the-counter medicine that has fatigue as a side effect (Atavin, Gravol, etc.). Encourage participants to read labels on all medications prior to driving while under their influence.

Activity 11: Helping Hands

Target Participants: Grades 2-3, Grades 4-6

Purpose: Thinking about friendship, creative activity

Materials: Construction paper, markers, large paper

Activity:

1. Draw the trunk and branches of a tree onto a large piece of paper.
2. Ask each child to trace both their hands onto the coloured construction paper and then cut them out.
3. Each person should write one example on each hand of what makes a good or supportive friend.
4. Paste all the hands up on the “Friendship” Tree.

Adapted from Middle Years F&ST Club Handbook

Activity 12: Climbing the Ladder of Health

Target Participants: Grades 2-3

Purpose: Children will compare helpful & harmful health practices.

Material:

- Gameboards
- Game cards
- Game pieces

Directions:

- Divide the group into two-four teams and provide each team with a gameboard and each individual with a game piece.
- Each team takes turns rolling the dice. Each numbered square on the gameboard corresponds to a numbered Game Card. Players have to answer the question in order to move to this new number on the board.
- Rules follow with a typical game of Snakes & Ladders, one roll at a time (unless card indicates extra roll or miss a turn). Landing on a snake means moving backward to the base of the snake, landing on a ladder means moving up to the top of the ladder.
- Play until someone on each team has reached the finish.

Note to Group Leaders:

- Leaders can read aloud game cards for younger children.



Adapted from Middle Years F&ST Club Handbook – Stairway to Health

Activity 13: Drug Abuse Tumble 'n Teach Cube

Target Participants: *Grade 6

This inflatable cube is a great way to address the consequences of drug abuse. Players roll the cube and use both the word on the inside cube and the substance pictured on the outside cube to start a discussion.

Instructions: Ask participants to roll the cube and answer a question related to the drug category (tobacco, alcohol, other drugs) and area of influence that appears on the cube. Use the following starter questions:

TOBACCO

Physically

- How does tobacco affect your body?
- Is tobacco physically addictive?

Emotionally/Mentally

- How does tobacco affect your mind?
- Is tobacco addictive mentally?

School

- How might tobacco affect your school work?
- Do you know anyone at school that smokes?

Work

- How might tobacco use affect your work?
- Do your parents smoke at work?

Friends

- If you started smoking would you lose any friends?
- Do your friends smoke?

Family

- Does anyone in your family smoke?
- Have any of your relatives had lung problems caused by smoking?

ALCOHOL

Physically

- Do alcoholics have healthy organs, explain?
- Tell a story you have heard or read about a drunk driving accident.

Emotionally/Mentally

- How does alcohol affect your emotions?



- Do people act differently when they are under the influence of alcohol, why?

School

- How might alcohol use affect your school work?
- Share a story that relates alcohol to your school.

Work

- What might happen if you were intoxicated at work?
- Why is it illegal to drink at most jobs?

Friends

- Have any of your friends pressured you to drink?
- Do you have friends that drink alcohol?

Family

- Does alcoholism run in your family?
- Do your parents drink?

OTHER DRUGS

Physically

- Name a drug(s) that negatively affect your body.
- Are most drugs physically addictive?

Emotionally/Mentally

- Name a drug(s) that causes hallucinations.
- Have you ever seen someone's personality change because of drug abuse?

Schools

- Are drugs present in your school?
- How might abusing drugs affect your school work?
- What drugs do you see around your school?

Work

- How might being addicted to drugs affect your body?
- Will it be hard to get a job if you are addicted to drugs?

Friends

- Would your friends be mad if you started taking drugs?
- What would you do if your best friend started using drugs?

Family

- How would your parents feel if you started taking drugs?

Activity 14: Impaired Goggles Obstacle Course

Target Participants: Grades 4-6

Purpose: Participants will complete a number of obstacles while wearing goggles that impair their vision. Make a line out on the floor with tape for them to try and walk a straight line, while tossing soft balls at them to throw them off. Place pylons around the station, and ask them to try to zig-zag in and out of them while still wearing the goggles. Discuss the consequence of driving while impaired by drugs or alcohol.

Materials:

- Alcohol or Drug Impaired Goggles
- Tape for walk the line
- Foam balls
- Discs / Markers / Pylons

Instructions:

- Participants will complete a number of obstacles while wearing goggles that impair their vision. Place pylons around the station, and ask them to try to zig-zag in and out of them while still wearing the goggles. Discuss the consequence of driving while impaired by drugs or alcohol.
- Ask participants to first complete the stations of the obstacle course – first without wearing the impaired goggles, then have participants complete the same station while wearing the impaired goggles.
- Ask participants what it was like to wear the goggles and how it impacted their ability to complete the task.
- Ask observers what it was like to watch the person trying to complete the task wearing the impaired goggles.

Walk the Line / Field Sobriety Test - Make a line out on the floor with tape or skipping rope for participants to try and take 10 steps, in a straight line, walking heel to toe with their hands at their sides, counting the steps out loud as they walk. Then, have them turn and walk the same way back to the start while you increase the difficulty by tossing foam balls at them to throw them off.

Obstacles - Try to weave your way in and out of the markers/pylons as quickly as possible, without actually touching them. Remember, have the participants first do the task without the impaired goggles and then repeat while wearing the impaired goggles. Discuss what it was like to complete these tasks and how loss of coordination can affect everyday tasks.

Pick Up – Throw keys, coins, dice, candy, or other small objects on the floor and tell participants to pick them up as quickly as possible. For a variation, you can have the participant pick up specific items as you instruct them to do so. Remember, have the participants first do the task

without the impaired goggles and then repeat while wearing the impaired goggles. Discuss what it was like to complete these tasks and how loss of coordination can affect everyday tasks.

Other Everyday Tasks – Have participants try to complete some everyday tasks such as read, write their name, tie their shoes, catch a ball, skip rope, open a wrapped candy, etc. Remember, have the participants first do the task without the impaired goggles and then repeat while wearing the impaired goggles. Discuss what it was like to complete these tasks and how loss of coordination can affect everyday tasks.

Discussion Points:

- Although this activity encourages participants to have fun, it is also intended to represent the very serious inverse relationship between alcohol/drug consumption and coordination, reaction time, and balance. It is extremely important to discuss this with the participants prior to starting, so as to ensure that the intended message is not undermined by the amusement provided by the activity.
- Ensure that participants understand what is referred to by the term “impairment”. Impaired driving is not limited to driving while under the influence of alcohol, but it also encompasses driving while under the influence of illicit drugs such as marijuana and cocaine, or prescription and/or over-the-counter medicine that has fatigue as a side effect (Atavin, Gravol, etc.). Encourage participants to read labels on all medications prior to driving while under their influence.
- *Walk the Line*: Discuss first how difficult it is to achieve balance while wearing the impaired goggles. Liken this to trying to drive while remaining on your side of the road. Discuss the dangers implicated by failing to remain on your side, even if you only veer off for a second. Secondly, discuss how when we are driving a vehicle, we not only need to be able to accomplish the relatively simple task of staying on our side of the road, but also to quickly react to unexpected events. Compare the balls being thrown at them to pedestrians darting into the street unexpectedly, another vehicle cutting into their lane, etc. Talk about how when we are impaired, our reaction time is significantly decreased and thus, our ability to effectively deal with unexpected events is severely impaired.
- *Obstacles*: Discuss how difficult it is to navigate the markers/pylons while wearing the impaired goggles. Liken this to trying to turn onto a different street, navigate an intersection, change lanes, etc. while driving a vehicle. Talk about how much more complicated these activities would be than merely trying to navigate the markers/pylons, which was difficult in itself.

Activity 15: What are Drugs?

Target Participants: Grades 4-6

Purpose: To understand that “drug” refers to a substance that affects the way the body works.

Instructions:

- Place a prescription medicine container, an over-the counter pain reliever, a tea bag/packet of coffee, imitation cocaine and imitation marijuana in a box and close the lid.
- Tell students that you are holding a box with “drugs” in it.
- Pass around the box, and ask students what should be done with a box like this if they found one.
- Reveal the contents of the box, and discuss what are “drugs”.

Discussion Points:

- Explain that “drug” refers to any substance that affects the way the body works.
- When discussing the tea/coffee, tell students that both of these foods contain a chemical that speeds up pulse and breathing.
- Be sure that students understand that not all drugs (ex: coffee/tea, pain reliever) are illegal.
- Stress that no drug – even if legal – should be taken on their own.
- If they find drugs, children need to give it to a parent or trusted adult.

(Activity adapted from 101 Ready-to-use Drug Prevention Activities, Activity 68)

Activity 16: Alcohol Risks and Effects

Target Participants: Grades 4-6

Purpose: To learn the effects of drinking alcohol, cooperation, creative activity.

Materials: Tape, Alcohol Effects Cards

Activity:

1. Draw a big glass on the blackboard or flip chart. Separate the glass into three sections: Effects on our Bodies, Effects on What We Do, Effects on other People.
2. Have each participant choose an Effects Card from the grab bag and paste it in the appropriate section in the glass.
3. You may want to break the group into two teams and have them work on separate glasses and then compare.
4. When finished, discuss the different effects using the facilitator notes as a guide.

*An alternative option is to use this activity for a booth, with participants each selecting one card as they come up to the booth and placing it on the glass, then discussing their response/perspective one-on-one.


(Adapted from the Government of the United Kingdom's Life Bytes web site:
<http://www.lifebytes.gov.uk>.)

Adapted from Middle Years F&ST Club Handbook


Alcohol Effects



You may feel giggly.




You may drink too much and have alcohol poisoning.




You may feel dizzy and have poor balance.




You may feel sick and throw up.




You may start arguing with your friends and get into a fight.




You may say or do things that you didn't plan and wouldn't do sober.




You may drink more often than you planned and have trouble trying to stop drinking (dependence).



You may get a bad headache.



You may get into trouble.



You may have problems with your liver.

Adapted from Middle Years F&ST Club Handbook

Facilitator Notes:

- Alcohol is a depressant that slows down your body and mind.
- Alcohol affects different people differently.
- Too much alcohol at once can have very serious effects.
- Too much alcohol over a long period of time can have serious effects on your health.

You may feel giggly: Lowered inhibitions, lack of self-control

You may feel dizzy and have poor balance: Lack of self-control, body slows down, poor balance

You start arguing with your friends and get into a fight: This can happen because you lose control of your emotions and actions.

You may become dependent: There are lots of reasons why people get addicted and people do not plan or expect that they will have a problem with alcohol dependence. If someone in your family has a substance abuse or dependence problem, you are at a higher risk.

You may get in trouble: Drinking can get you in trouble at school, with your parents, and even with the police. For example, underage drinking is a crime. Also, you may think that you are fine to drive and cause a car crash, hurting yourself & others.

Alcohol Poisoning : If you drink too much you can get alcohol poisoning, which causes breathing problems & slows the pulse. In severe cases, it can even lead to death.

You may feel sick and throw up: Different people get sick on different amounts of alcohol

You may say or do things that you didn't plan: Alcohol lowers inhibitions & impairs judgement. You may act differently and say or do things that you would not do if you were sober, causing embarrassment, shame, or guilt once you are sober.

You get a bad headache: Alcohol dehydrates the body giving you headaches and nausea.

You may have problems with your liver: Drinking in high amounts can cause the liver to be damaged.

Activity 17: Pass the Parcel

Target Participants: Grades 4-6

Formation: Sitting in a circle

Materials: Prize wrapped in layers of paper, music

Instructions:

- Facilitator prepares a parcel with layers of wrapping paper. A key message (true/false question) is written on each layer of the paper.
- Begin passing the parcel and when the music stops the child tears off the top layer of paper to reveal a question/message that is read out loud. The question/message is discussed with the group. This process continues until all the layers of paper are removed and the child to unwrap the last layer of paper will get the prize inside.

Sample Questions/Key Messages:

Alcohol is a depressant that slows down the brain affecting behavior and thinking. True or False?	Binge drinking is defined as 8 or more alcohol drinks on one occasion. True or False ? 5 or more on one occasion for men and 4 or more on one occasion for women
Amongst youth, males are more likely than females to drink and drive. True or False ? For youth, male and female drivers are equally likely to drink and drive.	If you are under the age of 19, It is okay for someone who is over the age of 19 to buy alcohol for you. True or False . In NL, it is a crime to purchase alcohol for anyone under the age of 19.
The youth brain is more sensitive to the effects of alcohol than an adult's. True or False? Research shows alcohol affects a teen's developing brain differently than an adult's and the risk of becoming dependent increases the younger a person is when they start drinking.	You can still get high from second-hand smoke even if you do not smoke weed yourself. True or False? Being exposed to second hand smoke can impair you even if you do not smoke it yourself.
Smoking weed and driving doubles the risk of having a car crash. True or False? Smoking weed will affect your ability to safely operate a vehicle because it affects coordination, reaction time, and depth perception. Police can charge you with impaired driving.	Marijuana is safe to smoke because it is all natural. True or False ? Marijuana smoke contains many chemicals known to cause cancer. It may also be mixed with other substances that are harmful to the body.
Continued use of marijuana during the teen years have been linked to a drop in IQ. True	Smoking marijuana can cause mental health issues. True or False? Many factors are

or False? Research indicates that both how much marijuana you smoke and for how long you smoke marijuana can have a negative impact on your IQ.	related to the use of marijuana and mental health issues. These factors include: how much you smoke, age at which you started smoking; and if you have any predisposition to mental health issues, such as schizophrenia and depression.
It's safe to be a passenger in a car driven by someone who has just smoked a joint. True or False ? If someone drives when they are high, they are impaired and have double the chance of being involved in a fatal car crash. Marijuana affects the ability to perform complex tasks, making driving high a risky undertaking.	Alcohol and Energy Drinks Don't Mix!
The top 3 substances used by students in NL are Alcohol, Cannabis and Tobacco (NL Student Drug Use Survey, 2012).	The average age of 1 st use of Alcohol among students in NL is 13.5 years old (NL Student Drug Use Survey, 2012 & CSTADS 2014-2015).
The average age of 1 st use of Tobacco among students in NL is 13.4 years old (NL Student Drug Use Survey, 2012).	The average age of 1 st use of Cannabis among students in NL is 14.2 years old (NL Student Drug Use Survey, 2012 & CSTADS 2014-2015).
Operating a motor vehicle after smoking marijuana is not as dangerous as doing after using alcohol. True or False ? Operating a motor vehicle under the influence of any drugs is unsafe. Marijuana reduces your attention span and motor skills (e.g. reaction time).	If you eat while you are drinking it will help soak up the alcohol, so you can drink more and still not get intoxicated. True or False ? Food does not soak up alcohol. It does slow down the rate that the alcohol is absorbed. However, eating will not prevent intoxication, sober you up, or help with a hangover.
What is the term used to describe the effects of someone else's smoking? Second hand smoke	What drug is more addictive than heroin or cocaine? Nicotine.
What is the one thing most youth do not think about before using tobacco or other drugs? The consequences	What is the primary health risk of smoking tobacco? Lung cancer
What is the color that nicotine stains fingers and teeth? Yellow	What is an example of a fun activity that doesn't involve drugs? Movies, study, or sports team
What substance makes your clothing, breath and hair smell bad? Tobacco/ Nicotine	What is the only thing that can sober you up? Time
Which of the following is the most common used drug in Canada? Caffeine	If a pregnant women smokes, she is not harming her unborn child. False

Alcohol is the most widely used drug amongst teens in this province. True	Alcohol is a drug. True. Anything (other than food), which changes the way the body or mind works is considered a drug.
Hearts of teens who smoke have to work harder than teens that don't smoke. True	Smoking damages your lungs. True
Mixing alcohol and marijuana is more dangerous than using each separately. True. Taking more than one drug at a time is always more dangerous.	There are no risks to drinking alcohol while pregnant. False. Women who drink while they are pregnant, risk having a baby with Fetal Alcohol Spectrum Disorder.
You have a greater chance of having a car accident when you drive after using marijuana. True	Name one way to gain popularity without using drugs or alcohol? Be a good friend
What is the best way to get ready for a test the next morning? Get enough sleep	An activity you can do with a friend that doesn't involve drugs? Movies, exercise
What can you do if a friend has a drug problem? Encourage them to get help	Birth defect linked to alcohol during pregnancy? Fetal Alcohol Spectrum Disorder
Taking a prescription drug that was prescribed for someone else is considered 'prescription drug abuse'. True	Taking more of a medication than what was prescribed to you is considered 'prescription drug abuse'. True
Trying to get a doctor to prescribe a medication to you that you don't need is considered 'prescription drug abuse'. True	Storing your prescription in a safe place and taking them as prescribed by your doctor is the safest way. True
The safest way to dispose of any unused prescription medication is to throw it away. False. This can be dangerous as other people or animals could get into it. If you have unused medication, you should return it back to the pharmacy.	Prescription drugs, when prescribed by your doctor, can help you feel better when you are sick or hurt. True
What kills more Canadians than alcohol, drugs, car crashes or murder? Health problems from tobacco usage	What percentage of all lung cancer is caused by smoking tobacco? 90%

Activity 18: Asking For Help/Who Will Help

Target Participants: Grades 4-6

Purpose: To have the children identify and explore ways of seeking help from others when dealing with their problems.

Materials:

- Newspapers, magazines
- Scissors
- Paper, colored paper
- Pencils, crayons/markers
- Paper cups
- Glue, tape
- Activity sheets

Instructions:

1. Have groups brainstorm verbal ways to ask for help. Encourage humorous as well as serious ways to ask for help. Have volunteer write expressions on the board. (Do not pressure everyone to come up with ideas; allow shy or reluctant children to just listen).
What are some of the many ways someone might ask for help?
What are some ways that do not use words?

Discussion Points

Point out that there is really no right or wrong way to ask for help; the main thing is to just ask. Acknowledge that asking for help is difficult, but with practice, children can learn that they are neither helpless nor isolated. Guide them toward recognizing that asking for help is a sign of strength, not weakness. It means a person understands that everyone needs help from time to time, that everyone has the right to ask for help and that nobody is perfect or completely self-reliant. Point out that we often learn most from our mistakes.

2. Then have groups brainstorm situations in which someone might ask for help.
When might someone need to ask for help?
What are some crazy or silly things that might happen?

Examples:

What would you do if...

- A cup is out of reach on a high shelf.
- Your ball rolls into a busy street.
- Your little brother falls and hurts himself.
- You're not sure of what is in a certain container that someone else tells you contains soda.
- You become ill and there is no one around you to help.
- You forgot to bring your lunch to school.
- An older child in an upper grade is bullying you.

Choose one of the following 3 options to help lead the discussion:

Option #1: Create Cup Puppets to show *Who Will Help*

Instructions:

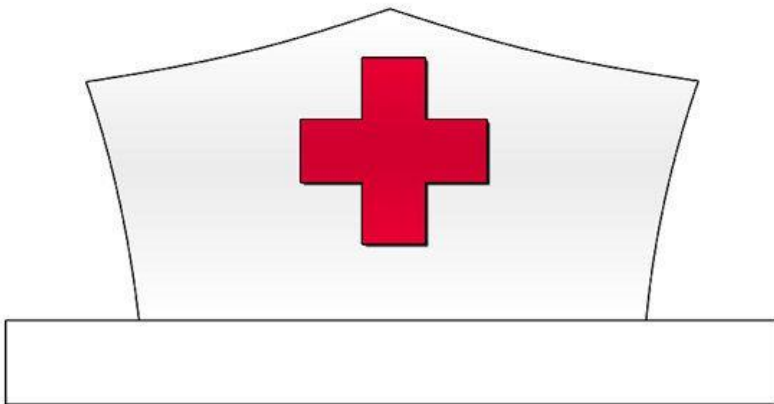
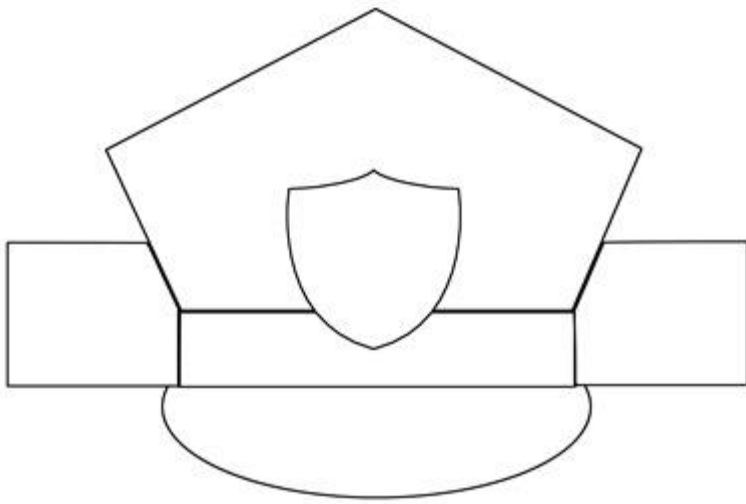
- Puppet 1 - Turn cup upside down and draw a face of a child that needs help (e.g., sad, crying, angry, etc.) Use markers and other craft supplies to draw the face, add hair, glasses, eyes, and so forth.
- Puppet 2 - Turn cup upside down and draw a face of a trusted adult or other professional that could help. Use the templates included (*or create your own*) headpieces to identify the helpers or *Who Will Help*.
- Ask children to use their puppets to identify helpers and practice how you will ask for help when you need help. Children can insert their hand into the cup to move the puppets.

Discussion Questions:

- When do you need to ask for help?
- Do you ask for help when you need help?
- What happens when you ask for help?
- Who will you ask to help?



Sample Headpieces:



Option #2: Have the children cut out pictures in magazines and newspapers that show people helping others. Discuss the pictures selected.

- An ambulance at the scene of an accident.
- A police officer helping someone.

Option #3: Have each child draw a picture of them in the middle of a circle. Then, have them draw or write three loving, caring people they know so they are surrounded by a circle of support.

Ask the children:

- Who are they?
- How do they show they are caring people? (hugging, listening, helping, etc.)
- Do you ask them for help when you need it?

Discuss other possible supports (family, friends, classmates, teachers, neighbours, nurses, police officers, etc. .

Activity 19: Good Vibes Obstacle Course

Target Participants: Grades 4-6

Purpose: Physical activity, processing information about drugs, exploring good decision-making.

Materials: prizes
Good Vibes Word Scramble handout
Checkpoint Cards (use index cards and follow instructions below)
flip chart paper
markers
paper plates
beanbags (Available in Flip Flop Faces box)

Activity:

1. For this exercise you will need lots of space. Divide the gym or outdoor area into four stations and clearly label them – Station 1, Station 2, Station 3, Station 4. Split the group into teams of four or five and give each team a checkpoint card.

2. At the starting line, tell each team they must work together to complete the obstacle course.

3. To prevent the teams from “bunching up” on the obstacle course. Send each team a different way. Write the stations’ number in a different order on each checkpoint card.

4. Station 1:

Cut up the Word Scramble handout and give one word to each team member. They can work on their own or with the group to solve them. When all team members hand in their completed words, sign the checkpoint card and send them to the next station.

5. Station 2:

Draw a ladder with five rungs on a piece of flip chart paper. (One ladder per team). The team members must take turns writing an example of something that gives them good vibes (what makes them feel good) on each rung of their ladder. No doubles! No copying other teams!

- Examples of good vibes:
 - getting a hug from mom
 - laughing with my best friend
 - hitting a home run
 - singing / dancing

When the team reaches the top rung of their ladder, sign the checkpoint card and send them to the next station.

6. **Station 3:**

Place two lines on the ground about 10 feet apart, using painter's tape. Each team member writes a word related to good decision-making on the paper plates. Each team must cross the "Pit of Bad Decisions" without falling in. They must use the paper plates to cross. Only one person can stand on a plate at a time. Plates can be picked up and moved, and some will have to backtrack to help other teammates across.

- Discuss bad decisions and talk about things that influence us to make bad decisions, such as peer pressure, wanting to fit in, not thinking about consequences, not knowing how to say no
- Discuss things that support us to make good decisions, such as making a plan with a parent or friend; practicing refusal skills; having positive interests/involvements in hobbies or teams; etc.

7. **Station 4:**

Put two buckets or containers on the ground 4-5 feet apart. One bucket/container has 5 beanbags. The other is empty. The leader stands in front of the participants and role plays a scenario (see sample scenarios) and the participant must use refusal skills to respond. Each team member takes a turn giving an example or strategy on how to say no – not repeating others. Once a team member states a strategy in response to the leader, they can try to throw one beanbag into the empty bucket/container. Repeat until all beanbags have been transferred to the second bucket/container.

Facilitator notes:

- Introduce the topic of refusal skills by saying something like:
 - Often saying no, even to ourselves, can be hard to do. Saying no to other people, especially our friends, older kids, adults or strangers can be very hard to do.
 - There are different ways of saying no. can you show me some ways of saying no using your voice and your body? Show us ways that you really mean it and ways that don't
- Tell the children that there are many ways to say no other than just using the word no. Today we are going to learn some different ways to say no:
 - Say, "No, thanks."
 - Broken record (e.g., repeating "no" or "no, thank you" over and again, including using different words)
 - Making excuses (e.g., "I have to be home for dinner soon.")
 - Turning the tables (e.g., "you do it!")
 - Changing the subject (e.g., "look at my new comic book.")
 - Telling the truth that you don't want to do it (e.g., "I don't want to do that!")
 - Suggest doing something else (e.g., "let's go to the store.")

- Give a reason “I’m not allowed to do that,” or “That’s bad for you.” It could state the consequences, such as, “I don’t want to do that; it will make me sick,”
- Walk away or ignore the offer.
- Assert yourself. This is the most important tactic. If you can stick up for yourself, you are learning an important life skill.

○ **Sample Scenarios:**

- You are in a store with your friend. You see him hide a bag of chips in his/her coat. He/she calls you over and hands you a bag and tells you to steal it.
- You are at school and your next class is math. You don’t like it at all. You and your friend are out in the hall and teacher closes the door and starts the class. Your friend says he/she is going to skip math class and asks you to come along.
- Someone you think is really cool invites you to hang out with their friends after school. Everyone is sitting around talking and your friend pulls out a cigarette and lights it. He/she smokes it a couple of times and hands it to you. Everyone is watching.
- You and your friend are playing basketball at the park. Your grandmother is coming to dinner and your parents want you home by 5:00p.m. You go to leave but your friends want you to stay and keep playing.
- There is a boy in your class that is always dressed badly. He talks out of turn and makes jokes that aren’t funny. You and your friend see him walking down your street after school. There is no one around and your friend wants to beat him up.
- Some kids in your class are hiding books and other things from the teacher. They want you to join in.
- Your friends took some candy from the corner store yesterday and didn’t get caught. They shared the candy with you. Now they want you to help them take some more candy from the store.
- Some kids try to get you to throw rocks at the schools windows.
- You have agreed to babysit your younger brother. Now your friends suggest you go with them to a movie.
- Some kids want you to smoke a cigarette with them. They called you a chicken when you said no.
- You are at a family gathering. Your older cousin offers you some of his beer.
- A cousin offers you some cough medicine to cure your cough.

8. When the team has completed all the tasks, they can run to the start/finish line. The first team there wins a prize (or everyone else claps/bows/etc. in recognition).

Adapted from Middle Years F&ST Club Handbook

Good Vibes Word Scramble

(Answers: CHOICES, SAY NO, DRUGS, ALCOHOL, TOBACCO)

H O I C E S C

Y A S O N

D R G S U

H A L C O O L

T O A C C O B

Adapted from Middle Years F&ST Club Handbook

Additional Resources

Visit the Western Health Prevention and Promotion website at www.westernhealth.nl.ca/mha for educational resources and promotional materials.

Email: mha@westernhealth.nl.ca to request print materials or borrow resources.

Some examples are:

Recreation for Mental Health Toolkit

Impaired Driving Toolkit

APPENDIX A: Activity Tracking Form





Substance Use Prevention – Activity Tracking Form
 Please record each time you use the Substance Use Prevention Activities

	Date	# of Participants	Age of Participants	Name of Activity Delivered	Materials Used	Things you liked	Things you would change
1.							
2.							
3.							
4.							



Substance Use Prevention – Activity Tracking Form
 Please record each time you use the Substance Use Prevention Activities

	Date	# of Participants	Age of Participants	Name of Activity Delivered	Materials Used	Things you liked	Things you would change
5.							
6.							
7.							
8.							



Substance Use Prevention – Activity Tracking Form
 Please record each time you use the Substance Use Prevention Activities

	Date	# of Participants	Age of Participants	Name of Activity Delivered	Materials Used	Things you liked	Things you would change
9.							
10.							
11.							
12.							



Substance Use Prevention – Activity Tracking Form
Please record each time you use the Substance Use Prevention Activities

	Date	# of Participants	Age of Participants	Name of Activity Delivered	Materials Used	Things you liked	Things you would change
13.							
14.							
15.							

Send completed tracking and feedback form to:
 Regional Addictions Prevention Consultant
 Western Health
 133 Riverside Drive, P.O. Box 2005
 Corner Brook, NL A2H 6J7
 T: (709) 634-4171 F: (709) 634-4888

APPENDIX B: Facilitator Feedback Form





Facilitator: _____ **Location:** _____

Total # of Sessions Delivered: _____

Total # of Activities Delivered: _____

Total # of Participants: _____

1. Were there any concerns from the Recreation Program Staff regarding activities?

Yes

No

If yes, explain:

2. Summary of Participant Feedback (write comments below):

3. What did you like best? What worked well (successes)?

4. What did you like least? What did not work well (challenges)?

5. If we were to do this again, what would you do differently (Recommendations and opportunities for improvement)?

For each statement, indicate how much you Agree or Disagree:

6. I feel overall the program was successful.

Strongly Agree

Agree

Undecided

Disagree

Strongly Disagree



7. I would recommend that this program be offered again.
 Strongly Agree Agree Undecided Disagree Strongly Disagree
8. I feel that I had adequate information and support available to implement this program.
 Strongly Agree Agree Undecided Disagree Strongly Disagree
9. The program materials were easy to use.
 Strongly Agree Agree Undecided Disagree Strongly Disagree
10. The program materials were good quality.
 Strongly Agree Agree Undecided Disagree Strongly Disagree
11. The program materials were appropriate for the participants.
 Strongly Agree Agree Undecided Disagree Strongly Disagree
12. Feedback from participants about the activities was positive.
 Strongly Agree Agree Undecided Disagree Strongly Disagree
13. I felt comfortable facilitating these activities.
 Strongly Agree Agree Undecided Disagree Strongly Disagree
14. I feel participants are now more aware of the risks associated with substance use.
 Strongly Agree Agree Undecided Disagree Strongly Disagree
15. I feel this program has addressed protective and risk factors associated with substance use.
 Strongly Agree Agree Undecided Disagree Strongly Disagree

16. Other Comments:

Thank-you for your feedback!

Please return the completed form to:

Tracey Wells-Stratton
 Regional Mental Health Prevention Consultant
 Blomidon Place, Western Health
 PO Box 2005
 Corner Brook, NL A2H 6J7

Email: traceywells@westernhealth.nl.ca Fax: (709)634-4888

APPENDIX C: Event Planner



Substance Use Prevention Activities EVENT PLANNER

Name of Organization: _____

Mailing Address: _____

Contact Person: _____

Title (if applicable): _____ Tel Number: _____

E-mail address: _____ Fax Number: _____

ABOUT THE EVENT:

Location of Event (Town/Site): _____

Date: _____ Time: _____

Age of Participants: _____ Expected Number of Participants: _____

Indoor or Outdoor Space? _____ Size of space: _____

Note any other information about participants/location to help plan appropriate activities:

ACTIVITIES CHOSEN	MATERIALS REQUIRED
1.	• • •
2.	• • •
3.	• • •
4.	• • •
5.	• • •

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For more information, please contact the Prevention & Promotion Consultants:

Regional Addictions Prevention Consultant
Regional Mental Health Promotion Consultant

Western Health
133 Riverside Drive, P.O. Box 2005
Corner Brook, NL A2H 6J7
Telephone: 634-4171

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