



Substance Abuse Prevention

Ages 13+

Total Time: 3.5 Hours

PART 1: Icebreaker

PART 2: Use, Misuse, and Abuse of Drug/Substance

PART 3: Why are Adolescents Vulnerable to Substance Abuse?

PART 4: Myth or Fact?

PART 5: Saying No to Substance Abuse

PART 6: Follow-Up Activities

ANNEXURE 1: Label Sheets

ANNEXURE 2: Case Studies

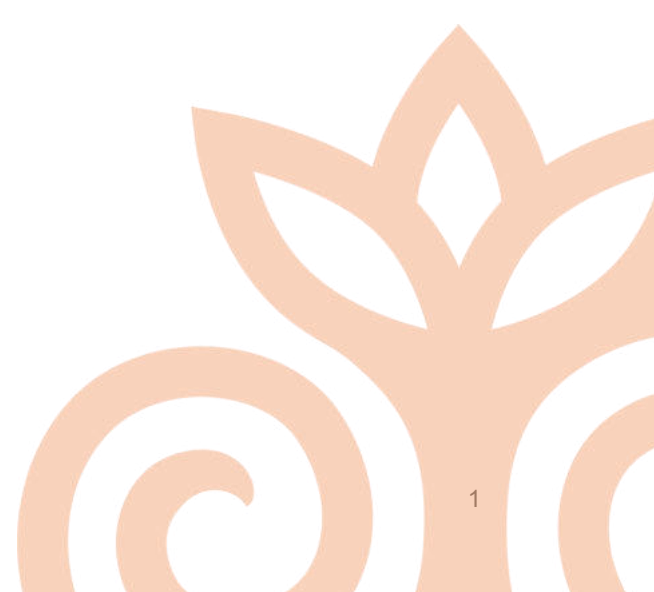
ANNEXURE 3: Myth or Fact Statements

ANNEXURE 4: Role Play Scenarios

ANNEXURE 5: Ways to Say “No”

ANNEXURE 6: Keys to Assertive Communication

ANNEXURE 7: Evaluation





Part 1: Icebreaker

Time:

30 Minutes

Objective:

Participants will understand the meaning of substance abuse and identify a few commonly abused substances.

Materials:

- Marker Board/Chart Paper, markers
- Annexure 1: Label Sheets
- One set of small cards with one of the following drugs written on each one: Alcohol, Paracetamol, Tobacco, Gutka, Aspirin, Country Liquor, Caffeine, Charas, Nicotine, Kerosene, Cocaine, Barbiturates, Cough Syrup, Tranquilizers, Narcotic analgesics (eg, morphine), LSD, Heroin, Crack, Glue, Benzene, and Petrol

Techniques:

- Ice Breaker

TRAINER INSTRUCTIONS:

1. Initiate a brainstorming session by asking the participants to explain what they understand from the terms 'Drugs' and 'Substance'. List their responses on the board.
2. Ask the participants to list the drugs they have heard of or know their friends are using. The responses might include charas, ganja, medicines (over the counter), typewriter eraser fluid, alcohol, cigarettes, bidis (rolled cigarettes) or gutka.
3. Start the session by placing 5 pieces of label sheets (Annexure 1) on the board/wall.
4. **Give a brief verbal definition** of each one.
 - Socially acceptable drugs are legal.

- Over the counter drugs are ones that can be purchased at chemists.
 - Prescription drugs are drugs prescribed by a doctor.
 - Illegal drugs are drugs that are prohibited by law.
 - Solvents are commonly available substances not usually defined as a drug at all.
5. Mix up the cards with the drug names (noted in the materials section) and place them in the centre of the room. Ask the participants to try and match each card to one of the five labels on the wall/board. After the participants have tried, go through each list and make any changes necessary, explaining the nature of the drug. The final list should look like this:

Socially Acceptable Drugs	Over the counter Drugs	Prescription Drugs
Alcohol Caffeine Nicotine Country Liquor Gutka Tobacco	Paracetamol Aspirin Cough Syrup	Transquillisers Barbiturates Narcotic Analgesics (Morphine)
Illegal Drugs	Solvents	
LSD Heroin Crack Charas Cocaine	Kerosene Glue Petrol Benzene	

**Trainer: Note that not all these substances are found in every community. Concentrate on those that are specific to your community.*

6. Conclude the activity by explaining the different types of substances and review the notes below:

- Commonly abused substances are tobacco, alcohol, marijuana (ganja), opiates, cannabis, solvents (petrol, glue, correction ink) and aerosols inhalants, cough syrup, caffeine, cocaine and ecstasy.
- There is a need for critically analysing concerns related to substances, because socially acceptable drugs are often misused and even many drugs that are used for medicinal purposes can be misused.
- For many substances, the line between use and misuse is not clear.
- There are different stages that one can occur before an individual is called a substance abuser.
 - The experimenters are those who start using the substance as an experiment or because of peer pressure and curiosity.
 - The next stage is called occasional users and this includes those who have already crossed the stage of experimenting and use the substance occasionally – either for social reasons or during certain phases.
 - A user becomes a compulsive user where s/he is dependent on a substance and s/he needs increase the amount of the substance consumed to experience the same effect. This is the stage when the user has a continuous and uncontrollable craving for the substance.



Part 2: Use, Misuse, and Abuse of Drug/Substance

Time:

30 Minutes

Objective:

Participants will understand the difference between use, misuse, and abuse of substances/drugs.

Materials:

- Marker Board/Chart Paper, markers

Techniques:

- Case Study
- Discussion

TRAINER INSTRUCTIONS:

1. Conduct an activity based on the following case study. Read out the case study loudly in the class:

Raman, Rohit and Rina, students of Class X, are good friends. Rohit used to live in the hostel nearby and once got a bad cold and cough. The doctor prescribed him a cough syrup. Rohit was soon cured. When Rohit was ill, Raman and Rina used to visit his room regularly to know about his health and extend their help to him. Once during such a visit, while Rohit was taking his medicine, he mentioned its good taste to Raman and Rina. Later, whenever Rina and Raman came to Rohit's room, Raman would taste the cough syrup and soon acquired such a strong taste for it that he went and bought the cough syrup for himself from the chemist. Now, he has started consuming the syrup every day and does not feel comfortable if he misses it even on one day.

2. Ascertain that participants have understood the case study.
3. Ask the participants following questions based on the case study:
 - Is taking cough syrup by Rohit use or abuse?
 - Is taking cough syrup by Raman use or abuse?
4. Note down their points and facilitate a discussion using the following questions:
 - Do you think Raman did something wrong when he tasted cough syrup, although he did not need it? Please provide reasons for your response.
 - Do you agree that Raman should not have bought cough syrup without the prescription of a Doctor? If 'yes,' why?
 - Why does Raman feel uncomfortable when he does not take cough syrup?
5. Reinforce the meaning of use, misuse and abuse of drugs based on the following definitions, by citing examples drawn from the experiences of participants:
 - **Drug:** When a pharmaceutical preparation or naturally occurring substance is primarily used to bring about a change in some existing process or state (physiological, psychological, biochemical), it can be called a 'drug'.
 - **Drug Use:** A drug when taken for medical treatment as per the prescription of the doctor constitutes drug use.
 - **Drug Misuse:** When drugs are not taken as per the direction and doses prescribed by a doctor, it is called misuse. For example, if a prescription requires the users to take one pill every four hours and he or she takes three or six pills every four hours or self-medicates over an extended period.
 - **Drug Abuse:** When an individual with or without a prescription intentionally takes a substance or prescription drug in an amount or frequency other than what is intended to treat, it is known as 'drug abuse'.
6. Emphasize that often times, casual first use or experimentation with drugs leads to addiction and dependence that involve increasing tolerance, development of withdrawal symptoms and disruption of psychological, occupational and social functioning.



Part 3: Why are Adolescents Vulnerable to Substance Abuse?

Time:

60 Minutes

Objective:

Participants will understand the reasons for increased vulnerability of adolescents to drugs.

Materials:

- Annexure 2: Case Studies
- Markers
- Paper

Techniques:

- Case Studies
- Lecture
- Discussion

TRAINER INSTRUCTIONS:

1. Begin the session by dividing the participants into 4-5 groups.
2. Give each of the groups a case study to work on. Please refer to Annexure 2 for case studies.
3. Allocate 15 minutes to every group to discuss the case study assigned to them and to answer the questions after the case study.

4. Each group should identify one person as a reporter who will note down the group's responses to the discussion questions.
5. Ask the group to present the group work, each group taking not more than 5 minutes
6. After every group presentation, add on the points that are missed by the group
7. At the end, make sure to repeat the key messages below.

Young people are more vulnerable to substance abuse due to the following reasons:

- Some of the factors that make adolescents vulnerable to substance abuse are peer pressure, poor self-esteem, low achievement at school, performance pressure, previous experience of taking substance, family history of substance misuse, and family instability.
- Lack of easily available support from family, friends and school, seeing substance use as a means of 'growing up' or fun also makes the adolescents more vulnerable to substance abuse.
- Pressure from friends to try an addictive substance, the urge to gain popularity among friends, and desire to experiment and curiosity to try out new things also make young people particularly vulnerable to substance abuse.
- Lack of basic knowledge about the effects and dangers of consuming addictive substances.
- Media images that glamorize substance abuse may also mislead young people.
- If an elder (parent, grandparent) in the family engages in substance abuse, young people in that family are more likely to start using the same or different substance/s.
- Factors like relatively easy availability of substance/drugs, community norms, and adverse family situations may push young people into substance misuse.
- Young people should also be educated to recognize that a friend is someone who cares, protects and looks after the welfare of their friends rather than coerce them/ initiate them into unhealthy habits.
- As the attitudes related to smoking, drinking and misuse of other substances are formed during pre-adolescence and early adolescence, this is an important age to invest in prevention efforts. Peer can encourage or motivate their group to avoid substance misuse.



Part 4: Myth or Fact?

Time:

30 Minutes

Objective:

Participants will recognize and counter common myths and misconceptions related to substance abuse.

Materials:

- Annexure 3: Quiz Statements

Techniques:

- Quiz
 - Interactive Discussion
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TRAINER INSTRUCTIONS:

1. Divide the participants into 4-5 groups/teams with each group not having more than five participants.
2. Each team takes a turn to answer a statement from Annexure 3 as 'true' or 'false'.
3. If the answer is correct, the team gets one point and if the explanation is right, an extra point is given.
4. If an explanation is incorrect or incomplete, the facilitator must immediately clear up the misconceptions before going on to the next statement.
5. The team with the most points wins.
6. If participants have any doubts or misconceptions, clarify these as well.
7. End the session by repeating key messages.



Part 5: Saying No to Substance Abuse

Time:

1 Hour

Objective:

Participants will be able to identify protective strategies against substance abuse.

Materials:

- Annexure 4: Role Play Situation Cards/Sheets
- Annexure 5: Ways to Say “No”
- Annexure 6: Keys to Assertive Communication
- Annexure 7: Evaluation

Techniques:

- Role Play
- Lecture
- Interactive Discussion

TRAINER INSTRUCTIONS:

1. Discuss with the children whether the information provided is enough to avoid taking drugs or reducing use and if there is anything else that they may need to do to straighten out their lives. The children should point out that thinking, decision-making and communication are some of the life skills needed for the above goal.
2. Ask the children to recall the ways to say no discussed in earlier sessions (Annexure 5 and 6). The facilitator should help the participants walk through these topics.
3. Ask the participants what happens when there is pressure to take drugs. The responses may include following:

- You feel your own pressure. Other people do not say anything, but you see others and feel pressured to join in
 - A friend offers the drug and you take it without much hesitation
 - Verbal pressure ranging from insults (do not be a baby) to reasoning (one will not hurt you)
 - Physical pressure. Where one is physically threatened to join.
4. Invite participants to list all the techniques they can use to protect themselves. Add to this list if some more are required.
 5. Now divide the participants into 4-5 groups.
 6. Provide them with the role-play/ problem situations and ask them to find solutions. They should discuss the problem within the group and present them as a role-play or some other creative medium.
 7. After presentation, ask the rest of the groups to comment on the solutions suggested i.e. whether the methods used were appropriate? Would they work in a real life situation? Or what do they do if it is difficult to refuse a friends offer?
 8. Distribute Annexure 7 and ask the group to complete the evaluation. Gather the feedback and include it in your trainer's report.
 9. Conclude the session by thanking the participants for their time and effort.



Part 6: Follow-Up Activities

Time:

Varies by Activity

Objective:

Participants will have the opportunity to practice the skills learned in this session.

Materials:

(Depending on Option Selected)

Option One:

- Sweets/ Candies

Option Two:

- Copy of Case Study

Option Three:

- Paper
- Marker Board/Chart Paper
- Markers

Option Four:

- Paper
- Marker Board/Chart Paper
- Markers

Option Five:

- None

Techniques:

- Applying learning to daily life.

TRAINER INSTRUCTIONS:

Option 1: Tempt Me, Tempt Me Not –

1. Ask for 7-8 volunteers from the group. Take them outside the room and give them sweets/candies that they can eat once they enter the room, and some extra sweets/candies that they can give to other participants back in the room in case they ask. Instruct them to eat the sweet in a manner quite tempting as they return to the room. They can give one to any other participant who asks for a sweet.
2. After a few minutes ask the volunteers to identify those in the room who asked for sweets and were given some.
3. Ask all participants who were tempted and asked for a sweet for the reasons why they were tempted. Also ask the other group who did not ask for sweets why they refrained from the temptation. Discuss these reasons together and relate them to substance abuse. The facilitator can use following discussion points.
 - Why were some people tempted?
 - Ask the participants to think of risky situations where they were tempted. Was it similar to this one or different? Why and in what way?
 - Try to relate this exercise to any other risky behavior such as gambling, drinking, drug abuse or sexual behavior.
4. After the activity, ensure that the whole group gets a sweet.

Option 2: My Life, My Choice –

1. Read the below-mentioned case story aloud to the participants. The facilitator can also invite a volunteer to read out the case study.

Amit went with some friends to see a movie. Then they all decided to go to Pankaj's house.

Nobody was there and they could drink as much as they liked. Amit just had a fight with his girlfriend and got quite drunk and then Pankaj started smoking a cigarette he had rolled. Amit did not want to smoke but Pankaj told him to have just one puff. He did but had no clue what happened next. All he knew was that when he woke up, he was in the police station. He is worried about his health and what he may have done.

2. Make sure that everybody in the group understood the case study.
3. Once the reading part is over, the facilitator should review with the participants about:

- Why did Amit take those drugs? Then ask them to recollect (what they had learned earlier in session) why do people take any drugs?
 - How can taking drugs venture into difficult situations? What might have happened after he puffed cigarette and passed out?
 - What are the consequences of taking drugs (physically, mentally and socially)
 - How else could have Amit handled the entire situation?
4. Summarize the main points and end the activity.

Option 3: Complete The Story –

1. Start the activity by asking the participants to share what they know about the signs and symptoms of substance abuse.
2. Ask them to elaborate on how they would identify if a person is misusing a substance Write down the points on the board.
3. Inform the participants that the session will be a participatory story building activity that will incorporate the signs and symptoms of substance abuse.
4. Write the incomplete story on the board/chart as follows:

“Akram and Sagar are classmates. Akram observes that Sagar has not been coming to school for some days. One day Akram finds Sagar lying under the tree at an odd hour.....

5. After reading the incomplete story, divide the participants into 4-5 groups.
6. Ask each group to complete the story in 15 minutes. The story should highlight some of the signs and symptoms of substance abuse that they are aware of.
7. Ensure that everyone in the group participates in completing the story.
8. Ask all groups to share the completed story in the larger group.
9. Note down the important signs and symptoms of substance abuse highlighted in different stories on the board.
10. Make sure that all the signs and symptoms have been covered in the list by mentioning the points that have been missed out by the participants.
11. Summarize the session by highlighting the key points below.
 - The signs and symptoms of substance abuse vary depending upon the type, dose and method of substance abused (for example, inhaling, oral intake or through needles/ injections)

- The signs and symptoms also vary by the age of the person. Furthermore, the same substance can affect different individuals in different ways and it is difficult to predict this in advance. Hence, signs and symptoms of substance abuse may present in several different ways
- No one starts taking substances with the aim of getting addicted to them. However, very few young people realize that experimentation can lead to addiction
- Many of these substances have properties that alter brain functioning and after a point of time, the individual loses discretion and judgment and could become addicted
- An individual who is addicted to a substance displays certain behaviour patterns which are different from his/her normal behaviour. This includes being overly submissive or aggressive, stealing and being furtive, unable to maintain a regular schedule or routine, unable to complete school work on time, withdrawal from friends and family

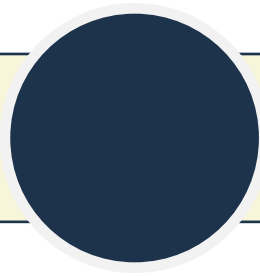
Option 4: Four Square –

1. Give each participant a piece of paper to fold into four sections, like a square with four boxes. In each box, the participant should write four things that are very important to them, such as some people, what they possess, something they really like to do, something they treasure and is special.
2. Participants can draw or write.
3. Ask participants to identify four different types of drugs such as inhalants (thinner, glue, paint solvent), amphetamines or cough syrups, heroin, and marijuana. The participants share the information they have about the drugs.
4. As each drug is named, the participants will tear one box and place it on the floor next to him or her. When all four drugs have been called out, all four boxes will be on the floor and the participant will have nothing in his hand. Ask the participants to read what they lost.
5. The facilitator will list all that the participants have written and add the following, if not mentioned:
 - Family breaks up;
 - Jobs are lost;
 - Crimes like stealing start to pay for the drugs; and
 - Conflicts with friends.

6. Ask the participants what problems one could have that could make a person want to try drugs. Take two or three examples, and ask the participants whether there were any other ways to handle those problems other than to take drugs.
7. Sum up the activity by telling participants about consequences of substance abuse to the person concerned and people around him/her.

Option Five: Guest Speaker – Someone Who Has Undergone A Drug De-Addiction Program (An Ex-Drug Addict)

Invite an ex-Drug Addict to come and discuss with the group how it feels to be an ex-Drug Addict and what are that person's life experiences? How has society reacted to their abuse?



Annexures

Preventing Substance Abuse

Ages 13+

ANNEXURE 1: Label Sheets

ANNEXURE 2: Case Studies

ANNEXURE 3: Quiz Statements

ANNEXURE 4: Role Play Scenarios

ANNEXURE 5: Ways to Say “No”

ANNEXURE 6: Keys to Assertive Communication

ANNEXURE 7: Evaluation





Annexure 1: Label Sheets

Socially Acceptable Drugs

Over the Counter Drugs

Prescription Drugs

Illegal Drugs

Solvents



Annexure 2: Case Studies

Case Study 1

Sohan has performed well in class IX annual exams. Now, he is worried whether he will be able to keep up his performance and score good grades in class X. His parents always tell him how they expect to see him at the top of his class. Afraid of disappointing them, Sohan does not share his concerns with his parents. He feels that some of his friends may be going through the same phase and discusses his problem with them. His friends suggest that smoking may reduce his stress and help him to relax. Sohan wants to feel better and decides to follow his friends' advice. He starts smoking a cigarette or two every day. Without realizing, over a period of six months he was smoking 6-10 cigarettes a day. Smoking has become a habit with him.

Discussion Points/ Questions for Discussion

1. Who do you think is responsible for Sohan's habit of smoking and why?
2. Do you think smoking helped reduce Sohan's stress? Why?
3. What else could Sohan have done to reduce his stress effectively?
4. What role could Sohan's parents have played to prevent him from smoking?

Case Study 2

Three friends Mani, Adil and Ramesh met at a marriage party. Mani and Ramesh wanted to drink in celebration and compelled Adil, who has never had a drink before, to join them. They tell him that he should join them for the sake of friendship. Adil is in a dilemma. On the one hand he doesn't want to lose his friendship but on the other he is conscious that nobody in his family drinks. He has also learnt from his parents that alcohol is harmful for health.

Discussion Points/ Questions for Discussion

1. What are the choices that Adil has?
2. What would you have done if you were in Adil's place?
3. How else could Adil's friends have celebrated?

Case Study 3

Gudiya was used to seeing both her mother and grandmother enjoy chewing tobacco regularly. When she turned twelve she felt that she was old enough to begin chewing gutka/tobacco and paan (betel) along with them. Gudiya knows that the corner shop keeper stocks gutka and she buys it from him.

Discussion Points/ Questions for Discussion

1. Using the above case study establish the role of family in initiating adolescents into substance abuse.
2. Do you think Gudiya's mother could have dissuaded her in picking up this addictive habit? If yes, in what ways?
3. Why do you think Gudiya should listen to her mother and resist the temptation of paan (betel) and gutka/tobacco chewing?

Case Study 4

Amrit, Manu, Rishi have started smoking because they wanted to be noticed by others in their school and wanted to be “cool. They were quite sure that they will be able to keep their habit in check and escape any long term negative consequences of smoking.

Discussion Points/ Questions for Discussion

1. Using the above case study, describe how the three adolescents started misusing a substance.
2. Like Amrit, Manu and Rishi, do you also think that they will not get addicted to smoking and escape its negative effects? Please explain your reasons.
3. Do you think Amrit, Manu and Rishi were reasonable in wanting to be noticed by others? Please explain your reasons.
4. Could they have been “cool” and got noticed in other ways? Please explain with examples.

Case Study 5

Mukesh's father was an alcoholic. He did not interact with anyone in the family and there were constant fights between Mukesh's parents. Mukesh was fed up and started drinking because he thought that this would help him ease off the tensions at home. Even though he could forget his problems and tensions for some time, the problems persisted and in fact grew worse over time.

Discussion Points/ Questions for Discussion

1. Who all are responsible for Mukesh's drinking habit?
2. What choices did Mukesh have?
3. What would you have done if you were in Mukesh's place?



Annexure 3: Quiz Statements

	Statements	True or False
1	One or two cigarettes a day cannot harm me.	False. Smoking is harmful. Cigarettes contain a very large number of toxic chemicals (about 4000) that harm us. Besides, people can get addicted by smoking just one cigarette a day
2	Inhaling glue or paint thinner or petrol or nail polish remover or whitener is safer than other substances.	False. Death can occur at the first attempt to sniff. This can damage the brain, and cause personality changes.
3	Drug use in pregnancy is dangerous.	True. There is a possibility of miscarriage, low birth weight and developmental delays.
4	Drugs increase creativity and make the user more imaginative	False. Drug addict loses clarity and may become incoherent over a period of time
5	Sharing a needle cleaned with water is safe.	False. The needle and syringe must be cleaned with water and bleach or should be boiled for 20 minutes before reusing. Sharing needles should be avoided.
6	If you use 'lower level' legal drugs like cough syrups and prescription drugs, you will be safe from addictive drugs like heroin, crack and marijuana.	False. Most addicts say they started off this way and quickly moved to more dangerous drugs.
7	Drugs help a person manage his or her problems.	False. Drugs may temporarily make a person forget or feel better. But the problem does not go away. In fact, by substance use, one more problem is being created.
8	More young people are beginning to use drugs and alcohol.	True. Advertisements, stress, peer pressure are pushing young people to experiment at earlier ages
9	Alcohol is a sexual stimulant. <i>*(This statement should only be used with elder participants)</i>	False. In fact it weakens sexual performance. It also impairs judgment and condom use becomes difficult. What it does is loosen one's inhibitions, making a person take sexual risks that would not be taken if sober.
10	Using more than one drug at a time is dangerous.	True. The effect of more than one drug is unpredictable.
11	Those who take drugs should be punished. That is the quickest way to solve the problem.	False. Punishing does not solve the problem. It is important to prevent young people from taking drugs. Many young people take drugs because they have insufficient information or are pressured by peers or do not know how to deal with emotional problems

12	If I smoke or drink at a party, I will be liked.	False. People who matter will like you regardless. The others are not worth the friendship.
13	There is no harm in trying a drug just once, because one can stop after that.	False. Almost all drug addicts start by trying just once. Once the drug is taken, the user is always amenable to further drug intake, which becomes a part of his/her habit.
14.	Alcohol helps people forget their problems.	False. Very often the opposite is found to be true. People bring up their forgotten problems under intoxication. Alcohol only adds to the existing problems.
15.	Willpower alone can help a drug addict stop taking drugs	False. Besides strong will power, love and support of family and friends, medical and psychiatric treatment may be needed to come out of drug addiction.
16.	Drugs sharpen thinking and lead to greater concentration	False. Drugs induce dullness & adversely affect normal functioning of body and mind.
17.	Drug use makes one 'cool' and better accepted by peers	False. In the beginning, it may seem that use of drugs helps in winning more friends but this is a myth as these peers are not true friends or well-wishers. Furthermore over a period of time, drug dependence makes one asocial and isolated.



Annexure 4: Role Play Scenarios

Situation 1

You have gone to a party with your very close friend. When you get there you realize that there is a lot of drinking going on and several people are quite 'high'. In addition, some drugs are also being passed around. Your friend comes to you with a glass of alcohol and wants you to drink this. However, you are unsure of what to do.

Situation 2

You are having lunch with your friend in school. S/he asks you to accompany her/him to a lonely terrace. You ask, "What for?" S/he says, "I have some cigarettes. We'll try smoking. It will be fun."

Situation 3

Your good friend has started taking cough syrup on regular basis without any illness (cold and cough). H/She likes its taste and says that it is harmless as it will keep away cold and cough. H/She insist that you also try it.

Situation 4

You have gone out to a movie with your friends. After the movie, everyone is hanging around. Then someone started smoking a cigarette and passed it around. It has now come to you. Your friends say, all of us are smoking it, why don't you?

Situation 5

Your close friends have discovered a new thrill – Sniffing Thinner. They have been forcing you to join them and when you resist they call you a coward. You are feeling frustrated about this.

Situation 6

Your friend wants you to skip school, and go to the river and drink beer. H/She tells you a whole group is going. H/ She says, 'You are afraid, aren't you?' You got caught skipping school last month, and do not want to get caught again. You decide to tell him/her you do not want to go.

Situation 7

While returning back home from the school, you noticed two of your seniors smoking. On asking them about it, you were told that it was something that you should also try. They also threatened you that if you wished to be their friend you should not talk about this to anyone. You go home and think about what to do.



Annexure 5: Ways to Say “No”

Method	Persuader	Decider
Polite Refusal	“Can I get you a drink?”	“No thanks”
Give Reason	“How about a beer?”	“I don’t like beer”
Be firm	“Here smoke this joint with me” “Come on!” “Just try it, chicken”	“No thanks” “No thanks” “No thanks”
Walk away	“Hey do you want to buy some brown sugar?”	Say “No” and walk away after you say it
Cold Shoulder	“Do you want some brown sugar?”	Keep going as if you did not hear the person. (Not the best use with friends)
Give an alternative	“Let’s go upstairs to my room”	“I’d rather stay here and watch TV.”
Reverse the pressure	“Come on upstairs with me.”	“What did I just tell you? Were you listening?”
Avoid Situation		If you know of people or situations where people will pressurize you to do, stay away from these situations.
Strength in numbers		Hang around with people who support your decision to not drink, use drugs etc.
Own your feelings		“I am not comfortable doing this” “It makes me unhappy”



Annexure 6: Keys to Assertive Communication

Assertive Communication is when you communicate what you need or want clearly, honestly, calmly and directly without trying to offend or scare anyone else and without apologizing. You defend your right to have what you want or need and refuse to do what is not in your own best interest. Always respect other people and never tease, threaten, punish or humiliate another for disagreeing with you.

Key Points of Assertiveness:

- Know your beliefs and values and be able to communicate them to others
- Everyone has the right to be their best and act in their own best interest
- You have the right to make a fair request
- You have the right to be treated fairly and not to be intimidated
- You have the right to make a mistake
- You have the right to change your mind

Techniques of Assertive Communication:

- Choose the right **time and place**. Make sure you have privacy if needed, and enough time to discuss.
- Use a **confident voice** – speak firmly but calmly.
- Use **assertive body language** –stand tall, use eye contact, keep a serious expression on your face.
- Use **“I” Messages** - begin the statement with “I” rather than “You”.
- State **firmly and clearly** what you need without avoiding the subject or apologizing for your request.
- **Let the other person know** that you hear what they are saying, and then repeat your position.



- Go on the **offense (gently)** - Ask a question. Explain how you feel.
- Offer a **compromise** if appropriate.
- **Respect** the other person's feelings and needs, but be clear about your feelings and needs as well.
- If you aren't getting anywhere, **refuse to discuss** the issue further, change the subject or walk away.

“I” Messages – begin the statement with “I” rather than “You” (For example, “I wish” or “I feel” rather than “You always” or “You never”). Use the following template to form your sentence:

1. Say what you feel (**I feel...**)
2. Tell what the other person did that upset you (**when you...**)
3. Describe how you were affected (**because...**)
4. State what would make the situation better for you (**and I want...**)



Annexure 7: Evaluation

Unit 17 – Substance Abuse Prevention	Score (Circle a number, 5 is the Best)	 What I Liked/Learned	 What I Didn't Like or Things I'm Confused About
Part 1: Ice Breaker	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Part 2: Use, Misuse, and Abuse of Drug/Substance	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Part 3: Why are Adolescents Vulnerable to Substance Abuse?	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Part 4: Myth or Fact?	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Part 5: Saying No to Substance Abuse	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Overall Score	1 2 3 4 5		