

# Participant Workbook

PROFESSIONAL  
LEARNING

TALKING  
DRUGS

SDERA

EDUCATING FOR SMARTER CHOICES

**TITLE: Professional Learning: Talking Drugs**



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**School Drug Education and Road Aware**

School Drug Education and Road Aware (SDERA) is the WA State Government's primary drug and road safety education strategy for all government and non-government schools, and early childhood services. SDERA is a cross-sectoral initiative of the Association of Independent Schools of WA (AISWA), the Catholic Education WA (CEWA) and Department of Education (DOE) and is funded by the Mental Health Commission and the Road Trauma Trust Account.

SDERA aims to prevent road-related injuries and the harms from drug use in children and young people.

SDERA empowers early childhood and school-based staff, parents and carers, and community groups to implement effective resilience, drug and road safety education approaches within their schools and community, through the provision of professional learning, evidence-based resources, and a state-wide consultancy team.

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Department of Education



Government of Western Australia  
Mental Health Commission

# School alcohol and other drugs education

Effective school alcohol and other drugs education focuses on skills development and provides students with the capacity to make healthy and responsible decisions for their own and others' safety and wellbeing. It also nurtures a sense of belonging and connectedness, and fosters resilience.

This approach differs from traditional approaches to school alcohol and other drugs education which often focuses simply on providing information about drugs and possible harmful effects, on the assumption that somehow this will safeguard young people against experimentation and use.

## What content is covered in alcohol and other drugs education programs?

As alcohol and other drugs education programs can develop a range of skills such as decision making, help seeking and problem solving, the content through which students practise these skills should be age appropriate and relevant to the students' needs.

## When should alcohol and other drugs education start?

Children become aware of drugs from an early age. They gain information and form attitudes about drugs and drug use issues from a range of influences including family, friends, peers, school, the community, and the media. It is therefore important that

prevention alcohol and other drugs education:

- is started in early childhood
- is age appropriate
- is continued through a child's schooling years in order to build students' knowledge, skills and experiences, and to bring about effective behaviour change.

Prevention education is best introduced when the prevalence of use of the particular drug is still low and before most young people are exposed to the possibility of use.

There are three critical phases when the intervention effects of alcohol and other drugs education are most likely to be optimised, and include:

**Phase 1: Inoculation** which is when children are first exposed to certain drugs. Most children in middle/upper primary and secondary school have had some experiences with analgesics and over-the-counter medications, prescription medications and caffeine. In some communities there will be children who will also be familiar with tobacco and alcohol, as well as cannabis and other illegal drugs.

**Phase 2: Early relevancy** which is where information and skills may have practical application in real life.

**Phase 3: Later relevancy** which is when prevalence of alcohol and drug use increases and the context of use changes (eg alcohol and driving).

## Why alcohol and other drugs education?

Engaging students in alcohol and other drugs education programs assists them to

make healthy and safer choices, identify high risk situations, and develop a range of strategies to prepare them for challenging situations.

SDERA can assist schools to develop:

- ongoing, sustainable, evidence-based whole-school alcohol and other drugs education programs
- a whole-school school drug education plan which include measures to address drug and alcohol use by students.

### Who should deliver alcohol and other drugs education to young people?

The Principles for School Drug Education (refer to <http://www.sdera.wa.edu.au>) highlight that classroom teachers, with specific knowledge of students and the learning context, are best placed to provide alcohol and other drugs education. External agencies and personnel should be used only where relevant and appropriate, and where they enhance existing classroom drug education programs.

### Why does SDERA promote a 'whole school approach' to alcohol and other drugs education?

A comprehensive, whole-school approach is widely acknowledged as best practice in working holistically to promote and enhance student health, safety and wellbeing. By adopting this approach schools ensure full engagement with the school community and are more likely to secure sustainable health improvements.

The whole-school approach is not just what happens in the curriculum. It is about the entire school day. Advocating that learning occurs not only through the formal

curriculum but also through students' daily experience of life in the school and beyond. If consistent messages are evident across the school and wider school community, the students' learning is validated and reinforced.

## How can you use this participation workbook?

This participation workbook has been created to complement the online professional learning module – **Talking Drugs**. As you work through the online learning module you will be directed to the relevant page within the participant workbook and encouraged to complete the activities.

Within this workbook you are encouraged to critically reflect on your own personal knowledge and skills and determine how SDERA can assist you and your school (or agency) to build your capacity to promote and provide resilience and alcohol and other drugs education.

# Module 1: Talking Drugs

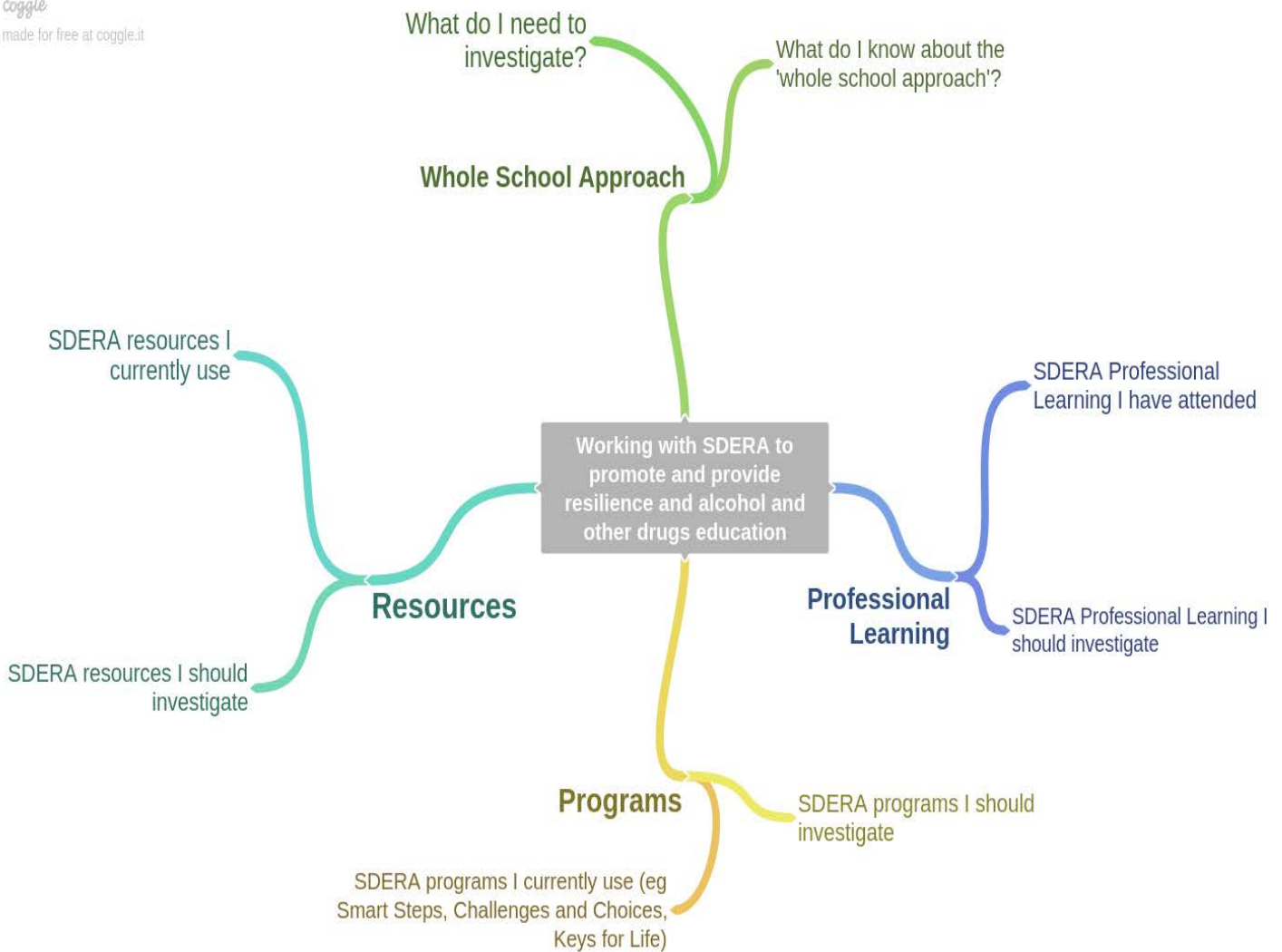


## Reflection

How can you and your school or agency work with SDERA to promote and provide resilience and alcohol and other drugs education?

Think about your personal experiences with SDERA and the experiences of your school/agency. How are you currently engaging with SDERA to provide resilience and alcohol and other drugs education? Is there room for increased engagement? How? Use the mind map below to collect your thoughts.

*coggle*  
made for free at [coggle.it](http://coggle.it)



## Module 2: Talking Drugs



### Reflection

What personal characteristics, knowledge and skills do educators, trainers and facilitators need to have when teaching and facilitating resilience and alcohol and other drugs education in a school or other setting?

Think about the above question and then reflect on your personal skill-set.

<b>What personal characteristics, knowledge and skills do educators, trainers and facilitators need to have when teaching and facilitating resilience and alcohol and other drugs education in a school or other setting?</b>	<b>What personal characteristics, knowledge and skills do <u>you</u> have that make you ready to teach resilience and alcohol and other drugs education?</b>



## Quick Quiz

How much do you know about drugs?

Take the quick quiz.

1. Drugs can have different effects on your body. Classify these drugs according to the main affect they have on your central nervous system (CNS).

*nicotine caffeine alcohol ecstasy magic mushrooms cannabis cocaine LSD  
heroin methamphetamines*

<b>Stimulants</b>	
<b>Depressants</b>	
<b>Hallucinogens</b>	
<b>Multi-action</b>	

2. According to the 2014 Australian School Students Alcohol and Drug (ASSAD) survey what percentage of 12-17 year old students have **ever tried** alcohol?

\_\_\_\_\_

3. Apart from analgesics and alcohol, most young people aged 12 to 17 years do not use drugs.

True  False

4. Are new psychoactive drugs legal in WA?

Yes  No

5. Analgesics or pain relievers are harmless drugs because everyone takes them.

True  False

6. Smoking cannabis is not as harmful as smoking tobacco.

True  False

7. Guideline 3A of the Australian Guidelines to Reduce Health Risks from Drinking Alcohol states that, *Parents and carers should be advised that **children under 15 years of age** are at the greatest risk of harm from drinking and that for this age group, not drinking alcohol is especially important.*

True  False

8. Some drugs amplify mood.

True  False

9. Any drug use experience is impacted by factors associated with three interacting elements: the individual, the environment/setting, and where the drug is taken.

True  False

10. Methamphetamine is an amphetamine-type stimulant that speeds up the function of the brain and central nervous system.

True  False

## Answers

1. Stimulants – nicotine, caffeine, cocaine, methamphetamines  
Depressants – alcohol, heroin

Hallucinogens – magic mushrooms, LSD

Mult-action – ecstasy, cannabis

2. 68 out of 100 (68.5%) Results 2014 Australian School Students Alcohol and Drug Survey for WA. 3. True. 4. No. In WA they are all illegal under the *Misuse of Drugs Amendment (Psychoactive Substances) Bill 2015*. 5. False. While it is true that analgesics are the most commonly used drug in Australia, like any drug they can be harmful. For instance Aspirin should not be taken by children under 12 years of age or by pregnant women. Over-use or prolonged regular use of analgesics can cause liver and kidney damage. 6. False. Many chemicals found in cannabis are also found in tobacco. Cannabis smoke contains more tar and cancer causing agents than tobacco smoke which may lead to cancers in the respiratory system, mouth and tongue. 7. True. 8. True. Some drugs also amplify mood. This means that if someone is feeling – or if a situation is making them feel – depressed, anxious or aggressive - then drugs could make things a lot worse. 9. False. The three interacting factors of the drug experience include: the individual, the environment/setting and the drug(s). 10. True.





## Reflection

How could you use and/or adapt alcohol and other drugs *Challenges and Choices* resources to meet the needs of your class/school?

Choose a Year level (or a few), research the activities in *Challenges and Choices* and jot down your responses in the chart below based on your thoughts and findings.

Year level:	Activities:	
How you could use this learning activity to address the learning intentions.	If the activity has to be modified to meet student needs and your school and community context. If so, consider how you will do this.	How this activity could be built into an existing resilience and alcohol and other drugs education program or alternatively be included in planning for another learning area eg English, The Arts etc.

## Module 3: Talking Drugs



### Reflection

What do you know about methamphetamine and its use in Australia?

After watching the video and reading the SDERA resources provided in Module 3, jot down your thoughts to the following questions.

<p>Why is the methamphetamine information included in the fact sheets and student FAQs important in informing you, your school community or agency?</p>	
<p>How has the video you watched, and the information you have read, added to your knowledge and understanding of the drug methamphetamine and its use in Australia?</p>	
<p>How can this information be included in your school or community alcohol and other drugs education program (if age and context appropriate)?</p>	

Have a question  
or want to know  
more?

Contact us

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