

**Health And wellbeing curriculum**

**SUBSTANCE MISUSE**

**PSE PACK**

**SECONDARY EDUCATION PACK**



Pack developed by The Greater Glasgow & Clyde Substance Misuse Education Working Group 2018

Based on original pack by East Dunbartonshire Council

|  |  |
| --- | --- |
| **S3 LESSONS** | **Learning Outcomes** |
| Learner Activity 1 –  **What's in a unit?** | * Understand that the amount of alcohol that a drink contains can be measured in units * Be aware of guidelines for lower risk drinking |
| Learner Activity 2 – Helping Other People | * Examined the sources of support and advice for young people in relation to problems, particularly those relating to drugs / substance misuse * Consider what the signs are of a drug problem * Explore ways to giving help and advice in relation to drug / substance misuse issues |
| Learner Activity 3-Smoking – attitudes, myths and facts | * Clarification of attitudes towards smoking * Awareness of different attitudes towards smoking * Distinguished facts & myths about smoking * Clarified the laws concerning smoking |
| Learner Activity 4-Social Implications of Choices: New Psychoactive Substances (NPS) | * What is meant by the term NPS - New Psychoactive Substances * The reasons why it is misleading to call them ‘legal highs’ * Understand that NPS are now illegal and cannot be legally purchased in shops or on-line * To become aware of what the risks are in relation to NPS |





**SUBSTANCE MISUSE PSE PACK**

|  |  |
| --- | --- |
| **LEARNER ACTIVITY 1** | **LEARNER ACTIVITY 3** |
| I understand the positive effects that some substances can have on the mind and body but I am also aware of the negative and serious physical, mental, emotional, social and legal consequences of the misuse of substances.  **HWB 3-38a / HWB 4-38a**  After assessing options and the consequences of my decisions, I can identify safe and unsafe behaviours and actions.  **HWB 3-41a / HWB 4-41a**  I know that the use of alcohol and drugs can affect behaviour and the decisions that people make about relationships and sexual health.  **HWB 3-41b / HWB 4-41b** | I understand the positive effects that some substances can have on the mind and body but I am also aware of the negative and serious physical, mental, emotional, social and legal consequences of the misuse of substances.  **HWB 3-38a / HWB 4-38a**  Through investigation, I can explain how images of substance use and misuse can influence people’s behaviour.  **HWB 4-39a**  I am developing a range of skills which can support decision making about substance use. I can demonstrate strategies for making informed choices to maintain and improve my health and wellbeing and can apply these in situations that may be stressful or challenging, or involve peer pressure.  **HWB 3-40a / HWB 4-40a**  I know how to access information and support for substance-related issues.  **HWB 3-40b / HWB 4-40b** |
| **LEARNER ACTIVITY 2** | **LEARNER ACTIVITY 4** |
| I understand the positive effects that some substances can have on the mind and body but I am also aware of the negative and serious physical, mental, emotional, social and legal consequences of the misuse of substances.  **HWB 3-38a / HWB 4-38a**  I know how to access information and support for substance-related issues.  **HWB 3-40b / HWB 4-40b**  After assessing options and the consequences of my decisions, I can identify safe and unsafe behaviours and actions.  **HWB 3-41a / HWB 4-41a**  I know the action I should take in the management of incidents and emergencies related to substance misuse.  **HWB 3-42a / HWB 4-42a** | I understand the positive effects that some substances can have on the mind and body but I am also aware of the negative and serious physical, mental, emotional, social and legal consequences of the misuse of substances.  **HWB 3-38a / HWB 4-38a**  Through investigation, I can explain how images of substance use and misuse can influence people’s behaviour.  **HWB 4-39a**  After assessing options and the consequences of my decisions, I can identify safe and unsafe behaviours and actions.  **HWB 3-41a / HWB 4-41a**  I know the action I should take in the management of incidents and emergencies related to substance misuse.  **HWB 3-42a / HWB 4-42a**  I understand the impact that ongoing misuse of substances can have on a person’s health, future life choices and options.  **HWB 3-43a / HWB 4-43a** |



**EXPERIENCES AND OUTCOMES THAT WILL BE EXPLORED**

|  |  |
| --- | --- |
| * For more information on drugs discussed, effects, risks and legal status please refer to: | **Know the Score**  [**http://knowthescore.info/drugs-a-z/**](http://knowthescore.info/drugs-a-z/) |
| * Information about alcohol, its associated harm and how it affects different sections of society as well as briefings on key alcohol issues e.g. minimum pricing and licensing | [**Alcohol Focus Scotland**](file:///\\xggc-vrtl-04\home2$\mathegr623\My%20Docs\ALC%20STUFF\ABI%202013%20onwards\SMT\S%20Lesson%20Plans\BLOCKEDalcohol-focus-scotland%5b.%5dorg%5b.%5duk\BLOCKED)  [**http://www.alcohol-focus-scotland.org.uk/**](http://www.alcohol-focus-scotland.org.uk/) |
| * A suite of positive digital resources designed to support young people to use the internet, social media and mobile technologies to improve their mental health and wellbeing | [**Aye Mind**](file:///\\xggc-vrtl-04\home2$\mathegr623\My%20Docs\ALC%20STUFF\ABI%202013%20onwards\SMT\S%20Lesson%20Plans\BLOCKEDayemind%5b.%5dcom\BLOCKED)  [**http://ayemind.com/**](http://ayemind.com/) |
| * Contains information, advice and facts about drugs, alcohol, tobacco and online safety | [**Choices for life**](https://young.scot/choices-for-life/)  [**https://young.scot/choices-for-life/**](https://young.scot/choices-for-life/) |
| * NHS Greater Glasgow & Clyde service with specialist support for schools and youth organisations | **Quit Your Way**  [**http://www.nhsggc.org.uk/your-health/healthy-living/smokefree/quit-your-way/**](http://www.nhsggc.org.uk/your-health/healthy-living/smokefree/quit-your-way/) |
| * Factual information and up-to-date advice on drugs, and a range of issues relating to substance use and misuse | [**Talk to Frank**](http://www.talktofrank.com/)  [**http://www.talktofrank.com/**](http://www.talktofrank.com/) |
| * Youth work essentials addressing tobacco prevention issues developed by Ash Scotland and Youth Scotland | [**Tobacco Free Generation**](http://www.youthworkessentials.org/youth-tobacco.aspx)[**http://www.youthworkessentials.org/tobacco-free-generation.aspx**](http://www.youthworkessentials.org/tobacco-free-generation.aspx) |



**WHERE TO GO FOR FURTHER SUPPORT**



**ICON GUIDE**

## WHAT’S IN A UNIT? – LEARNER ACTIVITY 1

## Part 1:

The purpose of the activity is to understand that the amount of alcohol that a drink contains can be measured in units and understand the guidelines for lower risk drinking.

Link to PHRD to order alcohol unit and calorie calculators - <https://www.nhsinform.scot/healthy-living/alcohol/how-does-my-drinking-add-up>

* How to calculate number of units in drinks, i.e. a unit is 10ml of pure alcohol. Units in drinks can be calculated with the formula: strength (ABV) x volume (ml) ÷ 1,000 = units (divide by 100 if cl)
* Discuss from Teachers notes - What's in a Unit?
  1. Factors that influence what happens when a person drinks alcohol
  2. Current guidelines for lower risk drinking
  3. Are there differences between male and female guidelines?
  4. Why there should be no alcohol days
  5. Progression from low risk to hazardous drinking & the relationship between quantity & speed of consumption
* Emphasize that people who respect alcohol are more likely to keep within these limits and therefore avoiding damaging their health as a result of hazardous or harmful drinking.

## Part 2:

* Use the handout 'How many Units?' and ask pupils to estimate how many units they think there are in the drinks.
* Display correct answers
* Next, estimate the number of units in the highlighted carry-outs and estimate the time when they think each individual will have no alcohol left in their bodies.
* Display correct answers then discuss whether pupils were surprised with the number of units in the carry­ outs and how long alcohol will take to leave the body.

## 

## Part 3:

* Ask pupils to discuss what myths people know about curing a hangover e.g. Black coffee, cold shower, Irn-Bru.
* Ask pupils what is the only cure for a hangover - time.



**KEY MESSAGES**

* People who respect alcohol are more likely to keep within guidelines and therefore lower their risk of damaging their health.
* Understanding that alcohol is measured in units helps you to measure alcohol consumption and how long alcohol will take to leave your body.

**HOW MANY UNITS? – ACTIVITY 1**

ONE UNIT OF ALCOHOL IS CONTAINED IN:

HALF A PINT OF BEER

Using these standards amounts as a guide, estimate how many units you think there are in the following drinks.

|  |  |
| --- | --- |
| A half-bottle (35cl) of Vodka (37.5% vol.) |  |
| A bottle (75cl) of tonic wine (15% vol.) |  |
| A bottle (275ml) of Smirnoff Ice (5% vol.) |  |
| A can (440 ml) of Tennent’s Lager (4.1% vol.) |  |
| A 2 litre bottle of Frosty Jacks Cider (7.5% vol.) |  |

It takes approximately ONE HOUR for the

body to get rid of ONE UNIT of alcohol.

|  |  |  |
| --- | --- | --- |
|  | **Simon** begins drinking at 8pm. That evening, he drinks: | No. Units? |
|  | A bottle of tonic wine |  |
|  | 2 cans of Tennent’s Lager |  |
|  | 2 x 275ml bottles of Smirnoff Ice |  |
|  | Total number of units drunk:  *(= approx. number of hours for Simon's body to process all the alcohol).* |  |
|  | **What time approximately will Simon will be alcohol-free?** |  |

|  |  |  |
| --- | --- | --- |
|  | **Angela** begins drinking at 6pm. That evening, she drinks: | No. Units? |
|  | A half bottle of vodka |  |
|  | A 2 litre bottle of Frosty Jacks Cider |  |
|  | Total number of units drunk:  *(= approx. number of hours for Angela's body to process all the alcohol).* |  |
|  | **What time approximately will Angela will be alcohol-free?** |  |

**HOW MANY UNITS? – ANSWERS**

Using these standards amounts as a guide, estimate how many units you think there are in the following drinks.

|  |  |
| --- | --- |
| A half-bottle (35cl) of Vodka (37.5% vol.) | 13 |
| A bottle (75cl) of tonic wine (15% vol.) | 11.3 |
| A bottle (275ml) of Smirnoff Ice (5% vol.) | 1.4 (BUT1.5 ON BOTTLE) |
| A can (440 ml) of Tennent’s Lager (4.1% vol.) | 1.8 |
| A 2 litre bottle of Frosty Jacks Cider (7.5% vol.) | 15 |

ONE UNIT OF ALCOHOL IS CONTAINED IN:

HALF A PINT OF BEER

It takes approximately ONE HOUR for the

body to get rid of ONE UNIT of alcohol.

|  |  |  |
| --- | --- | --- |
|  | **Simon** begins drinking at 8pm. That evening, he drinks: | No. Units? |
|  | A bottle of tonic wine | 11.3 |
|  | 2 cans of Tennent’s Lager | 3.6 |
|  | 2 x 275ml bottles of Smirnoff Ice | 2.8 |
|  | Total number of units drunk:  *(= approx. number of hours for Simon's body to process all the alcohol).* | 17.7  = 18 hours |
|  | **What time approximately will Simon will be alcohol-free?** | 2pm next day |

|  |  |  |
| --- | --- | --- |
|  | **Angela** begins drinking at 6pm. That evening, she drinks: | No. Units? |
|  | A half bottle of vodka | 13 units |
|  | A 2 litre bottle of Frosty Jacks Cider | 15 units |
|  | Total number of units drunk:  *(= approx. number of hours for Angela's body to process all the alcohol).* | 28 units =  28 hours |
|  | **What time approximately will Angela will be alcohol-free?** | 10pm next day. |

## What's in a Unit? - Teachers notes

The factors that influence what happens when a person drinks alcohol fall into 3 categories:

* **The product** i.e. the type, strength of alcohol
* **The person** i.e. the individual drinking the alcohol and also anyone they are with who may encourage or discourage safer drinking through the quantity or alcohol and the speed with which it is drunk
* **The place** where drinking occurs i.e. social settings such as parties and clubs, home settings with parents/carers, streets etc…

This is known as “the triangle of interaction” and can be applied to other forms of substance misuse.

## Low Risk Drinking Guidelines (2016)

The UK Chief Medical Officers’ (CMO) revised its low risk [alcohol unit guidelines](https://www.drinkaware.co.uk/alcohol-facts/alcoholic-drinks-units/alcohol-limits-unit-guidelines/) in 2016. They advise it is safest not to drink more than 14 units a week on a regular basis:

* Both men and women should drink no more than 14 units per week
* Spread evenly over at least 3 days
* Aim for at least 2 days in a row with no alcohol
* Avoid drinking if pregnant or trying for a baby
* **Young people under the age of 18 should not consume alcohol at all**

## Why were the new guidelines issued?

It is now known that the risks from alcohol start from any level of regular drinking and rise with the amount being consumed. The new guidelines have been set at a level to keep the risk of mortality from cancers or other diseases "low".

These issues prompted changes to alcohol guidelines for men with men now being advised not to drink more than 14 units of alcohol each week, the same level as for women. This is because the risk associated with developing health problems increase the more the drink of a regular basis for both men and women.

## 

## Non drinking days

* Alcohol is a poison which your liver breaks down. It takes 1 hour for 1 unit of alcohol to break down in the liver therefore your body needs to rest and recover therefore it is not recommended that people drink every day
* Refraining on one day should not mean excess on another

## Hangover Myths

* You can sober up from alcohol by drinking black coffee
* You can sober up from alcohol by having a cold shower
* You can sober up from alcohol by drinking Irn-Bru
* You can sober up from alcohol by eating a fry up
* You can sober up from alcohol by getting fresh air

**…ONLY TIME WILL SOBER YOU UP!**

**Units of alcohol within other drinks:**

70cl Bottle of MD 20/20 (13.5% vol.) = 9.5 units

500ml can of Tennent’s Super Lager (9% vol.) = 4.5 units

440ml can of Woodpecker Cider (3.5% vol.) = 1.5 units

## HELPING OTHER PEOPLE – LEARNER ACTIVITY 2

**Part 1:**

* + Distribute “You've got a problem when ...” handout to the pupils.
  + Ask pupils to discuss each statement by agreeing in their groups which statement means there is a problem and which means no problem.
  + Bring the class back together and ask the group to feedback their ideas.

**Further discussion points:**

* + - Who would notice the signs that may indicate someone has a problem with drugs?
    - Are the signs always obvious when someone has a problem with drugs?
    - Would any signs be the same for all drugs?
    - Is there a danger of maybe mistaking innocent signs as signs of drug use?
    - What are the implications of wrongly suspecting someone may be using drugs? Especially illegal ones?

## 

## YOU’VE GOT A PROBLEM WHEN…

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Which of these things would be a sign of a drug problem for you?** | **No Problem** | **Problem** |
| 1 | You spend all your money on it |  |  |
| 2 | You feel really ill after you’ve used it |  |  |
| 3 | You’re hiding things from your folks |  |  |
| 4 | You do less schoolwork because of it |  |  |
| 5 | All your friends are drug users |  |  |
| 6 | You would lie, cheat or steal to get it |  |  |
| 7 | Your moods and going up and down a lot |  |  |
| 8 | You’re getting into trouble from the police |  |  |
| 9 | You lose friends because of it |  |  |
| 10 | It’s all you do at weekends |  |  |
| 10 | It’s all you do at weekends |  |  |
| 10 | It’s all you do at weekends |  |  |
| 10 | It’s all you do at weekends |  |  |
| 10 | It’s all you do at weekends |  |  |
| 10 | It’s all you do at weekends |  |  |
| 10 | It’s all you do at weekends |  |  |
| 10 | It’s all you do at weekends |  |  |
| 10 | It’s all you do at weekends |  |  |
| 10 | It’s all you do at weekends |  |  |
| 10 | It’s all you do at weekends |  |  |

## HELPING OTHER PEOPLE – SCENARIO CARDS

**Part 2:**

* + In pairs imagine that they have a friend has a drug problem and discuss what they might DO and what they should NOT DO to help their friend?
  + Take feedback on a flipchart/whiteboard. Examples may include:

## DON'T:

* + Reject them.
  + Criticise them.
  + Run them down to other people.
  + Get angry with them.
  + Keep on at them about what they should do.
  + Keep interrupting them.

## DO:

* + Encourage them to listen.
  + Listen to what they have to say.
  + Stick by them.
  + Encourage them to be positive about themselves.
  + Make sensible suggestions about what they might do.
  + Encourage them to get help.
  + Go with them to get help if they want you to.
  + In pairs using a role play scenario card, act out what might happen. Optional: learners can show their role play to the class.
  + Invite the pairs to discuss what it was like being a young person with the drug problem and being the friend and discuss in the class?
  + Invite the group to add to their DO'S and DON'T list.
  + Bring the group back together and discuss:
    - How easy or difficult was it to talk to these characters?
    - Which were the sympathetic ones?
    - What are the advantages /disadvantages of telling these people?
    - Do you think it's easy to admit that you have a drug problem? Why not?
    - What would make it easier to talk to people about your problems?

**Part 3**

* + Discuss with the class – where do people go if they have a drug problem? (including smoking, alcohol and drugs, within and without school).

A list of up to date services can be found at:http://www.nhsggc.org.uk/about-us/professional-support-sites/substance-misuse-toolkit/useful-websites

This page could be printed as a handout.

**Key Messages**

* The word 'drug' has many true or false definitions depending on the level of knowledge and understanding you have about drugs. It is important to understand the meaning of the word before drug education can be effective.
* All medicines are drugs but not all drugs are medicines. Some drugs may be used to make you feel better but it’s important to understand that they can sometimes interfere with your mind as well.
* Drugs can be placed under legal and illegal drugs and it is important to understand why they are categorised into these groups.

## SCENARIO CARDS

A good friend smokes cigarettes and is spending all their money on them.

Your friend tells you that they smoked a joint at a party and now they want to know how they can get some more.

Your best friend tells you that they have used ecstasy twice and are worried about someone finding out.

Your friend tells you that they have been to their GP and explains that they are drinking half a bottle of buckfast a night.

Your friend admits that they have been trying different substances from the internet (NPS).

You know that your friend is hanging about with people who sniff solvents and you are not sure if they are doing it too.

## SMOKING- ATTITUDES, MYTHS AND FACTS – LEARNER ACTIVITY 3

### Part 1

* + Explain the purpose of the activity and that different people have different views about smoking. Also stress that you want the group to speak out about what they really think. They do not have to say something just because they think it will please you or be the correct thing to say.
  + There are two different ways of running this activity.

### Option 1

* Give a copy of the worksheet to individuals and ask them to fill it in.
* Then split into small groups and ask them to discuss and compare their answers.
* After this, ask each small group to choose 3 questions they find most interesting.
* Bring everyone back together and discuss the questions chosen in the whole group.

### Option 2

* Or set up 4 corners across the room with agree in one and disagree in the other and also true in one and false in the other.
* Read out statements from the worksheet and ask the group to go to the corner that represents their view.
* Discuss the statement and then repeat with another statement.
  + Summarise by discussing:
* What the young people thought of the activity.
* What they found out about attitudes to smoking.
* Whether there were different views and if so why?
* Whether anyone changed their minds listening to others and why?
* Ask the pupils to identify any new or surprising things they have learned from this exercise.
  + Conclude this exercise by checking that young people are aware of where they can go to for support: Quit Your Way (NHS service) or local pharmacies

<http://www.nhsggc.org.uk/your-health/healthy-living/smokefree/quit-your-way/smokefree-young-people-and-schools/quitting/>

|  |  |  |
| --- | --- | --- |
| SMOKING – WHAT DO YOU THINK? | AGREE | DISAGREE |
| 1. Children should be allowed to buy cigarettes from the age of 12. |  |  |
| 1. The legal age to buy cigarettes should be put up to 21. |  |  |
| 1. If a student is caught smoking in school they should be expelled. |  |  |
| 1. It is more acceptable for boys to smoke than girls. |  |  |
| 1. Smoking is only a problem if you carry on with it for years. |  |  |
| 1. Many girls carry on smoking because they are scared of putting on weight. |  |  |
| 1. Nicotine patches and chewing gums are just a big rip off. |  |  |
| 1. It is wrong for pregnant women to smoke. |  |  |
| 1. Smokers are more fun. |  |  |
| 1. People who have smoking-related illnesses only have themselves to blame. |  |  |
| 1. People who have smoking related illnesses should have to pay for their health care. |  |  |

|  |  |  |
| --- | --- | --- |
| SMOKING – WHAT DO YOU KNOW? | TRUE | FALSE |
| 1. Over 120, 000 people die every year in the UK from smoking - related illnesses. |  |  |
| 1. Most young people smoke cigarettes |  |  |
| 1. Smoking only damages your health after you have been doing it for years. |  |  |
| 1. Smoking does not really cost that much money |  |  |
| 1. Smoking helps you relax |  |  |
| 1. About 30 Scottish children take up smoking every day. |  |  |
| 1. A shopkeeper can be fined if they sell cigarettes to someone under 18 years old. |  |  |
| 1. It is OK for an older teenager to buy cigarettes for their friend if they aren’t old enough to buy their own. |  |  |
| 1. The police are allowed to take cigarettes off young people aged under 18 years old who are smoking in public places. |  |  |
| 1. Cigarettes cannot be advertised on television. |  |  |

# SMOKING – WHAT DO YOU KNOW? - ANSWERS

## Over 120,000 people die every year in the UK from smoking- related illnesses.

**TRUE** - Around a fifth of all deaths in Scotland are tobacco related

* 1. **Most young people smoke cigarettes.**

**FALSE** - Recent surveys (2017) have found that 2% of 13 - that’s only 2 in every 100 S2 pupils, so for every person you know who does, there are 98 who don’t. This rises to 7% of 15 year olds smoke in Scotland.

* 1. **Smoking only damages your health after you have been doing it for years.**

**FALSE** – most people only think about the longer term health effects, but there are lots of short term effects also:

* + - **Physical Effects**

Immediately, smoking can cause stains to your teeth and skin. Just as wine and coffee can stain your teeth, so can smoking. You start to develop a yellow or brown tinge that will not go away overnight. It makes it very obvious that you smoke. In addition, your breath, skin, hair and clothing start to have an unpleasant, smoky smell. Most people are appalled by the way smokers smell.

* + - **Respiratory Problems**

Your lungs obviously need oxygen. When you smoke, it displaces your lung’s oxygen levels, which makes it more difficult to breathe. It also makes you run out of breath more quickly, so exercising gets more challenging. If you do not exercise on a regular basis, you lose out on the long term health effects and your muscles could atrophy (weaken / become less effective). Not to mention, your energy levels can decrease.

The chemicals produced from smoking affect your airways and lung tissue. As a result, you might be more prone to infections and viruses. You might get more frequent colds and coughs. If that wasn’t enough, it can induce asthma attacks. Then, it could lead to emphysema and bronchitis.

* + - **Addiction to nicotine –** once addicted, body will get withdrawal symptoms when no access to NRT – lack of concentration, moods,anxiety,
    - **Risk of other drug use**
    - **Limited lung growth and function if used in youth.**
    - **Elevated heart rate**



* 1. **Smoking does not really cost that much money.**

**FALSE** - A packet of cigarettes costs anything from £7.50 to £9 a pack. Based on a 10 a day habit that works out:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 Packet | 1 day  (10 a day) | 1 week | 1 month | 1 year |
| £7.50 | £3.75 | £26.25 | £114 | £1,368 |

(Be aware that there is also an illicit market in cigarettes with some people buying them at a lot less than the full retail price. Like all counterfeit products, fake tobacco products are made to the same manufacturing standards as regulated cigarettes and have been found to contain far higher levels of toxic ingredients such as tar, nicotine, carbon monoxide, lead and arsenic, according to Local Government Association reports (2016).

* 1. **Smoking helps you relax.**

**FALSE**. - Research into smoking and stress has shown that instead of helping people to relax, smoking actually increases anxiety and tension. Nicotine creates an immediate sense of relaxation so people smoke in the belief that it reduces stress and anxiety. This feeling of relaxation is temporary and soon gives way to withdrawal symptoms and increased cravings.

* 1. **About 30 Scottish children take up smoking every day.**

**TRUE**. (Ash Scotland Factsheet 2017 – 36 children under 16 start smoking in Scotland everyday)

* 1. **A shopkeeper can be fined if they sell cigarettes to someone 18 years old.**

**TRUE**. The legal age for purchasing cigarettes is 18. Most retailers will apply “Challenge 25” guidance, which means that for any young person who looks under 25 years they will ask for ID – no ID, no sale. Trading Standards are responsible for monitoring retailer’s compliance with this law – there is a regular programme of “test purchasing” where young people employed by Trading Standards are sent out to try to purchase cigarettes and shops who do not ask to check their ID, or sell without ID are fined. A retailer that is fined more than once could lose their licence to sell tobacco.

* 1. **It is OK for an older teenager to buy cigarettes for their friend if they aren’t old enough to buy their own.** ****

**FALSE** - If is an offence for someone over the age of 18 to buy cigarettes for a young person who is under the age of 18. This is known as a ‘proxy sale’. Anyone found guilty of this offence can be fined up to £5000 – it doesn’t matter whether the two people knew each other or not.

* 1. **The police are allowed to take cigarettes off young people aged under 18 years old who are smoking in public places.**

**TRUE** - If you are under 18 and found in possession of tobacco products they can be confiscated by the police. Anyone who fails to co-operate with the police can be fined up to £500.

* 1. **Cigarettes cannot be advertised on television.**

**TRUE** – Research shows that tobacco advertising and promotion encourages children to take up smoking. Internal tobacco company documents have also shown that children tend to smoke the most heavily-promoted brands. Virtually all tobacco advertising is prohibited in the UK – TV, radio, printed publications as well as a ban on tobacco sponsorship of international sport.  All tobacco brand advertising and displays of tobacco products at the point of sale have been prohibited since April 2015.

### Part 2

* Parachute game - Divide into 5 groups and give each group one of the following roles:

1. Someone who smokes 40 cigarettes a day.
2. Someone who is a heavy alcohol user.
3. Someone who works in a cigarette factory.
4. Someone who is asthmatic and smokes 20 cigarettes a day.
5. Someone who is a young parent and smokes in front of their 2 children.

* Explain that all people are adults of the same age. They are on an aeroplane that is about to crash but there are only 3 parachutes.
* Ask each group to prepare arguments for why they should have a parachute.
* Let in turn each group present their argument and allow the other groups to question them.
* Then take a vote about who should have the parachutes by allowing everyone to have 3 votes - but not for their own group.
* Discuss what happened and why the vote went as it did. Be prepared to sensitively challenge any discriminatory attitudes that emerge.
* Finally discuss how well the smoker did compared to the other people and why.

**Key Messages**

* Importance of being aware of the true facts in relation to the harmful effects of smoking.
* It is important to consider our own and other people’s attitudes to smoking and related issues.

## CHOICES – NEW PSYCHOACTIVE SUBSTANCES (NPS) – LEARNER ACTIVITY 4

**Teacher’s note:** The Choices resource was produced prior to the 2016 Psychoactive Substances Act and shows a young person buying NPS from a shop. This, however, may be a useful discussion point to demystify any beliefs still held that you can legally purchase NPS from a shop or on-line. This does not detract from the wider learning in the film in relation to risky behaviours and substance misuse in general.

**Part 1**

* Begin by starting the Choices Video Powerpoint: which explains to the class that the film they are about to watch is interactive. The main character Ben will face a number of key decisions/choices and pupils can vote on the course of action for Ben to take at each point.

<https://young.scot/get-informed/national/watch-choices-the-new-interactive-video>

* At page 6 of the powerpoint, you are prompted to show the film “Choices”. This can be accessed by clicking on the Choices for Life resources link above, or by searching for “Choice for Life Choices” in You Tube.
* *After the film, return to the powerpoint at page 7, and discuss the following* questions with the class:
  + How does Mark influence Ben’s attitude and values regarding substance misuse?
  + What choices does Ben face regarding substance misuse? Are these informed decisions/choices?
  + What effect could taking the NPS have on Ben’s body?
  + What does taking the NPS lead Ben to do?
  + What aspects of Ben’s behaviour were safe?
  + What aspects of Ben’s behaviour were unsafe?
  + Where could Ben access support if he has a problem with substance misuse?
* Discuss alternative choices that Ben could have made, and how this might have changed the outcomes for him.

**Part 2**

1. Think about how the following are affected by topics in this programme:

* Young People

**KEY MESSAGES**

* There is no ‘safe’ amount or way to take NPS
* Mixing NPS with alcohol or other substances is even more dangerous
* NPS can contain harmful or toxic chemicals
* NPS are now illegal and cannot be legally purchased in shops or on-line
* Image of Scotland
* Friends / Family
* Emergency Services
* Area / Community

## CHOICES – CLASS DISCUSSION SHEET

|  |
| --- |
| 1. How does Mark influence Ben’s attitude and values regarding substance misuse? |
|  |
| 1. What choices does Ben face regarding substance misuse? Are these informed decisions/choices? |
|  |
| 1. What effect could taking the NPS have on Ben’s body? |
|  |
| 1. What does taking the NPS lead Ben to do? |
|  |
| 1. What aspects of Ben’s behaviour were safe? |
|  |
| 1. What aspects of Ben’s behaviour were unsafe? |
|  |
| 1. Where could Ben access support if he has a problem with substance misuse? |
|  |