

**Texas Prevention Resource Guide:
DRUG AND VIOLENCE
EDUCATION**

Texas Education Agency

Division of Safe Schools

Austin, Texas

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**PREVENTION WORKS!.....
.....so let's leap into prevention!**

Texas Prevention Resource Guide: DRUG AND VIOLENCE EDUCATION

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I. Purpose of the Guide

This Guide is to be used as a tool for promoting safe and drug-free schools. It infuses research-based prevention education into the core and supplemental curricula to provide students with consistent, firm, no-drug-use, no-violence messages in all areas of their education. The Guide, however, is only one tool needed to reduce drug use and violence. A comprehensive approach is necessary for real change to occur.

The use of drugs and the frequency and intensity of violence among students in Texas public schools continue to be significant problems demanding an all-out response from teachers, administrators, parents, and students themselves. The *Texas Prevention Resource Guide: DRUG AND VIOLENCE EDUCATION* represents an important component in the effort to stem these problems. The *Guide* incorporates and updates the principles and lessons of the previous curriculum guide, *Education for Self-Responsibility II: Prevention of Drug Use*, and adds new components to address violence prevention. The *Texas Prevention Resource Guide: DRUG AND VIOLENCE EDUCATION* is available in hard-copy format as well as on the worldwide web with a searchable database.

Comprehensive Approach

To be most effective, drug and violence prevention curricula must be accompanied by a strong commitment on the part of administrators, teachers, and other school adults, as well as parents, the community at large, and students themselves. In addition to universal programs for the general population, a comprehensive approach also offers selective assistance programs for students who are at high risk for becoming involved with drugs and violence and indicated programs for those who already exhibit risk-related behaviors.

Schools can create an environment that reduces or eliminates drug use and violence on their campuses by incorporating these key elements of effectiveness into their Safe and Drug Free Schools prevention education. Effective schools:

1. Analyze local data and based on that analysis, incorporate prevention in the campus improvement plan and in curriculum alignment;
2. Apply research based prevention principles when selecting programs;
3. Involve family and community throughout the process;
4. Establish clear no-drug-use/no-violence measures and objectives;
5. Teach that alcohol, tobacco and other drug use and violence are not the norms among young people;
6. Teach that conflicts can be resolved without violence;
7. Help students to recognize behaviors that lead to drug use and violence;
8. Help students recognize the internal pressures, peer attitudes, and media that may influence them to engage in alcohol, tobacco and other drug use and/or violence, and

- help them to develop personal, social, and refusal skills to resist these pressures;
10. Reinforce positive behaviors;
 11. Provide developmentally appropriate material and activities, including information about the short-term effects and long-term consequences of alcohol, tobacco and other drugs and violence;
 12. Use material that is easy for teachers to implement and culturally relevant for students;
 13. Use interactive instructional strategies that engage the learner;
 14. Cover the essential prevention concepts in multiple sessions; then reinforce those concepts in the context of students' daily experiences;
 15. Provide professional development and implementation support for drug use prevention and violence prevention; and
 16. Evaluate regularly and modify programs based on evaluation findings.

The final key element of effectiveness is consistency. Schools that consistently reinforce their comprehensive drug-use prevention and violence prevention education programs, in all areas of their core and supplemental curricula and for all grade levels, are far more effective in their implementation of the Safe and Drug Free Schools and Communities programs.

The purpose of this *Guide* is to provide an effective reinforcement tool for schools that want to increase their effectiveness. The infusion model, on which the *Guide* is based, is designed specifically to reinforce the comprehensive approach. The sample lessons, supporting materials and resources are designed to maximize the convenience of the classroom implementation for the educator.

In order for students to remain free of drugs and violence, they need to do four things:

Learn Information
Examine Models
Acquire Skills
Practise Personal Plans

The goals and objectives presented in this *Guide* are designed to help maximize students' chances of doing these four things.

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II. Rationale for Goals

GOAL A: LEARN ESSENTIAL INFORMATION

Gain knowledge essential for making legal, safe and healthy decisions about tobacco, alcohol and other drugs, and violence.

The initial steps in giving students the knowledge they need to stay safe and drug free include helping them identify factors that increase their risks of becoming involved with drugs and violence and teaching them ways to reduce those factors. Information about drugs and violence must be accurate and relevant. Because children and adolescents are interested in immediate concrete information rather than theoretical or distant consequences, the information should be pertinent to students' lives. To be effective information must be developmentally appropriate and focused on short-term, negative social consequences, particularly for teenagers. When students perceive the harm of risk-related behaviors, such as using drugs or becoming involved with violence, they are less likely to engage in those behaviors. However, students must perceive a *short-term* harm to appreciate a risk. Students are more concerned with what is happening today, tomorrow, and perhaps next week, and less concerned about what will happen five, ten, and twenty years down the road. When students have accurate, timely and useful information, they have the basis for making safe and healthy decisions.

The research.....*Goal A - Learn Essential Information*

Information is necessary for prevention. This is supported by a significant body of research. In the May/June 1995 *Journal of Health Education* article, "Effectiveness of Drug Education Components: Knowledge, Attitudes, Decision Making, Motivations, and Self-Esteem," Scott W. Roberts states that ". . . there was a significant positive correlation between decision making and knowledge/attitudes. This relationship lends support to the premise that if one is supplied with correct knowledge, one will make correct decisions." However, information must be presented in certain ways to be effective. Roberts goes on to say that ". . . peer influences may be stronger than knowledge. This is not to discount knowledge, but the effect of peer influences must also be addressed." When information is provided to youth in their peer groups, such as in their regular classes at school, its effectiveness is increased.

Information that is personally relevant and focused on meeting immediate needs or making immediate decisions is more likely to be effective. This is supported in the September 1989 *American Psychologist* ("Risk Behaviors and Health: Contrasting Individual and Population Perspectives") in which Robert W. Jeffery determined that people tended to overvalue threats associated with short-term risks and that they focused more on specific personal risks rather than general risks to the population. Jeffery concluded that interventions on individuals were likely to be more effective when the reinforcement—as well as the punishment—was personal and immediate.

William H. Bruvold ("A Meta-Analysis of the California School-Based Risk Reduction Program," in the *Journal of Drug Education*, 20, 2, 1990) found that information interventions had an impact on knowledge, but alternative interventions had an impact on attitudes and behaviors. D. Olweus, in "Bullying at School: Basic Facts and Effects of a

School-Based Intervention Program” (*Journal of Psychology and Psychiatry*, 35, 7, 1994), found that in addition to information, effective interventions comprise a warm, positive school and home environment; firm limits; and consistent, nonhostile, nonphysical sanctions. Otherwise, information is limited in the amount of attitude and behavior change produced by an intervention. A similar assertion that information alone is insufficient for prevention comes from Phyllis L. Ellickson and Robert M. Bell, in their article “Drug Prevention in Junior High: A Multi-Site Longitudinal Test” (*Science*, March 1990).

An example.....Goal A - Learn Essential Information

Learning that smoking cigarettes can one day lead to lung cancer is too long-term a consequence for many students. It is difficult for them to feel vulnerable when something bad might happen in 50 years. On the other hand, learning that smoking cigarettes stains teeth and decreases attractiveness is a powerful incentive not to smoke. The effects are more immediate. Students feel vulnerable because being attractive is something they value. Lessons for students should focus on both the immediate effects of smoking cigarettes, such as stained teeth, and the long term effect of lung cancer.

Instructional strategies.....Goal A

When information is presented in a way to engage students and teachers, students will more likely be motivated to learn and teachers will more likely be motivated to teach. Although most strategies can be adapted for use under any of the goals, the following are some suggested specific strategies to vary the teaching and learning styles in lessons featuring the acquisition of knowledge:

- *Media variety*—books, videotapes, audiotapes, posters, puppets, films and filmstrips, board games, art—keeps both the teacher and students interested and motivated.
- *Direct instruction*, commonly known in Texas as the Madeline Hunter lesson cycle, is an effective means of presenting new knowledge to students.
- *Concept development* was originated by Hilda Taba to teach concrete and abstract concepts. The teacher guides students through the following steps:
 - 1) Brainstorm and list as many items, ideas, associations, memories, or attributes as they can think of about the concept (presented by the teacher, e.g., “drugs”). Record specific words or short phrases on the board or a flip chart.
 - 2) Group the responses. Ask students, “Which of the items we generated seem to go together because they’re alike in some way?” Write the responses on a separate section of the board or flip chart as students find things that go together.
 - 3) Label the groups. Ask the students to think of a name for each group and to explain the reason for grouping them in that way. Groups in the subject of “drugs,” e.g., might be “legal drugs,” physical consequences of using drugs,” and so on.
 - 4) To get different perspectives, regroup or subsume individual items of whole groups under other groups.
 - 5) Synthesize the information by summarizing the data and forming a generalization, e.g., “Improper use of medicine can have many harmful physical consequences.”

6) Evaluate students' progress in using this method by assessing their ability to generate a wide variety of items and to group them flexibly. Listing, grouping, labeling, regrouping, and generalizing are descriptions of the components of higher-order thinking. This concept-development process not only builds concepts in students' minds, but also helps teachers see what students already know and assess their ability to apply the knowledge.

- *K-W-L* is a strategy for students to brainstorm as the teacher lists all that they already know about a concept (K), brainstorm and list all they want to know about a topic (W), and tell what they have learned when the study topic is completed (L). This method involves the students in their learning as well as assists the students and teacher in assessment.
- *Learning centers* are an effective method for reinforcing learning as well as providing hands-on activities to increase comprehension and application.
- *Discussion using pseudo-discussion or recitation* is a means of reinforcing and assessing students' new knowledge. Low-order questions are structured and asked by the teacher to engage all students and ascertain if they can recite, demonstrate understanding, and show the ability to apply the new learning. The teacher reacts and gives feedback as the students respond.
- *Cooperative learning—think, pair, and share* is a way for students to think individually about the information presented to them and to share that information with another student to reinforce the learning.

Cooperative learning—jigsaw II is a way to let students teach new information to each other. Students are arranged into groups. Each group member assembles in another group, where they are given one part of the information and decide how they will teach that information to their original group. After the group members have been taught by each other, the students are tested individually.

Home involvement.....Goal A

Involving the students' families in reinforcing what students learn in school is supported by virtually all of the research on risk and protective factors. Some of the ways that families can support students' acquisition of knowledge about drugs and violence include:

- asking students about and reviewing what they learned in school
- taking advantage of "teachable moments," such as discussing issues in light of family expectations and values during television shows featuring someone drinking or being violent
- participating in parent-child activities suggested by the teacher

Curricula can support home involvement in the following ways:

- featuring take home letters that describe what the student is learning
- encouraging students to discuss prevention issues with parents through take-home activities
- providing opportunities for parents to participate in activities in the school
- providing prevention resources

GOAL B. EXAMINE MODELS AND EXAMPLES

Identify examples of attitudes and behaviors which prevent drug use and violence.

Education to change attitudes and behaviors is a significant aspect of drug and violence prevention. Students anxious to emulate their peers often pattern their attitudes and behaviors after what they perceive others' attitudes and behaviors to be. Often those attitudes and behaviors are harmful, but their negativity is evidently outweighed by the allure of fitting in. Teenagers tend to perceive that "everyone" is using drugs (including alcohol and tobacco), when in reality, less than half are using drugs. When young people perceive their friends' and families' social disapproval of drug use, they tend to avoid initiating drug use. Similar patterns are true when youth perceive approval of violent solutions to conflicts.

It is important for students to see, hear, and model after peers and adults who have been successful without using drugs. They need to learn language and behaviors for peaceful solutions to conflicts from those who effectively demonstrate those attitudes and skills.

The research.....*Goal B - Examine Models and Examples*

Research in drug and violence prevention indicates that changing negative attitudes and supporting positive ones is an effective, even a critical, strategy. For example, Lloyd Johnston of the University of Michigan Survey Research Center has conducted 21 annual surveys of 50,000 high school seniors (eighth- and tenth-graders since 1991) in over 400 public and private secondary schools across the country. The surveys, collectively called the *Monitoring the Future Study*, measures students' attitudes and behaviors relating to drug use. Johnston has found a direct link between students' attitudes and subsequent behaviors toward drugs, as he stated about the 1995 survey results that beliefs about the harmfulness of the various drugs have proven to be very important determinants of use. The data show that attitudes minimizing the risk of a drug precede increases in its use. Strategies that target these attitudes, therefore, can be very effective in preventing the behavior.

Numerous studies attest to the connection between violent attitudes and behaviors. For example, a study by Donnerstein, Slaby, and Eron, "The Mass Media and Youth Aggression" (in L.D. Eron, J.H. Gentry, and P. Schlege, eds., *Reason to Hope: A Psychosocial Perspective on Violence and Youth*, Washington, DC: American Psychological Association, 1994), notes that the 1972 Surgeon General's Report, the 1982 National Institute of Mental Health Report, the 1985 American Psychological Association (APA) Report, and the 1992 APA Task Force Report all endorsed findings that televised violence has a *causal* effect on aggressive behavior. Another study that emphasizes the influence of attitudes on violent behavior is "Youth Violence: An Overview," conducted in 1994 by D.S. Elliott for the Center for the Study and Prevention of Violence (University of Colorado Institute for Behavioral Sciences).

In the case of violence, attitudes may be even more important than information. For example, M.J. Boulton and P.K. Smith's study, "Bully/Victim Problems in Middle-School Children: Stability, Self-Perceived Competence, Peer Perceptions, and Peer Acceptance" (*British Journal of Developmental Psychology*, 1994), points out that students' attitudes about themselves and others play a major role in the extent to which they continue to be bullies or victims. And B.I. Fagot, et al., in "Developmental Determinants of Male-to-Female Aggression" (in G.W. Russell, ed., *Violence and Intimate Adult Relationships*, New York: Spectrum, 1988), finds family attitudes and values toward females as a significant factors in children who are consistently violent toward females.

Most studies on the prevention of drug use and violence among young people point to several factors that influence drug-taking and violent behaviors, but invariably the person's attitude and perception of others' attitudes play important roles in determining the type of behavior.

An example.....*Goal B - Examine Models and Examples*

In many middle and junior high schools, cheering on a fight between two students is a common behavior. Several attitudes demonstrate the norm—for example, “Watching fights is fun,” “People who get beat up usually deserve it,” “Fighting solves problems,” and “People usually don't get seriously hurt in a fight.” Several other behaviors might accompany the norm, for example, watching the fight, cheering on the fighters, talking about the fight positively, and showing respect for the winner. The norm is positive attitudes and behaviors toward fighting which perpetuates violence.

In elementary schools, a different norm often exists: Students go to an adult for help when they observe a fight. In this case, their attitudes might be “The teacher knows what to do,” “I don't want to get involved,” and “Fighting is hurtful.” Associated behaviors might be walking away from a fight, looking for an adult, and talking about the fight negatively. The norm is a negative attitude toward fighting which can deter violence.

Instructional strategies.....*Goal B - Examine Models and Examples*

Strategies for supporting positive attitudes and discouraging negative attitudes include the following:

- cross-age teaching, which engages older students, who understand and demonstrate positive norms, to teach younger students, who admire them and in many cases afford older peers more credibility than they do adults
- peer opinion leaders, who can be trained in content in order to affect other students
- a schoolwide assessment of positive and negative norms so students can acknowledge that many of their peers hold positive norms and so students can identify and begin to change negative norms
- testimonials from people who have succeeded by following drug-free and violence-free norms
- listing alternatives to behaviors that support negative norms

Teaching students about norms works best when students enter into a partnership with each other and with school adults to constantly reinforce the encouragement of positive norms and the discouragement of negative ones.

Other instructional strategies involving attitude and behavior change include the following:

- *Affective teaching methods* comprise several components:
 - Receiving requires students to become aware by listening, observing, and describing.

- Responding asks students to discuss, argue, and agree or disagree to identify desired attitudes. Further responding could involve reading, writing, and telling about changing attitudes.
- Valuing requires students to consider what was received, use the information to make decisions, and prioritize and value it by appreciating, choosing, justifying, and demonstrating the changed attitudes and behaviors.
- *Analogies* are used to build a bridge from the known to abstract concepts.
- *Interviews* can be conducted with successful people, who are asked to describe the attributes of positive attitudes and to share an instance when negative attitudes led to nonproductive behavior. (See “Red Flag #2.”)
- *Guided discussion* is moderately structured with the teacher leading students toward predetermined high-level thinking and promotion of understanding of important concepts, ideas, values, problems, or issues. The teacher may probe some responses to provide clarification and to extend students’ thinking. (See “Red Flag #3.”)
- *Reflective discussion* is least structured and has the potential for generating the most interaction among students. Students must have a solid understanding of the subject matter and be required to evaluate information, opinions, and ideas leading to positive attitudes and the application of these attitudes. Students solve problems, clarify values, explore issues, and defend positions. The teacher guides, advises, and keeps students directed toward the established goals, as well as serving as a resource. (See “Red Flag #4.”)

Home involvement.....Goal B - Examine Models and Examples

Parents and other family members are significant influences on young people’s attitudes and behaviors, especially pre-teens. Parents can best be involved by becoming aware of the risk factors and protective factors relating to drugs and violence. For example:

- Setting fair and consistent rules governing their children’s behaviors.
- Communicating and implementing positive and negative consequences for following and not following those rules.
- Modeling positive attitudes and behaviors.
- Taking an active interest in their children—in what they do, with whom they associate with, how they behave, and what they think and feel.
- Involving their children in their family activities.
- Instilling in their children positive core values.

GOAL C: ACQUIRE SKILLS AND STRATEGIES

Increase skills to apply knowledge and to follow examples which prevent drug use and violence.

Too often students simply do not have the skills necessary to use their knowledge or to emulate prosocial models. Effective prevention programs focus on strengthening an individual's relationship to peers by developing social-competency skills, including communication skills and resistance skills to avoid drug use offers and violent behaviors. Other essential strategies include knowing where to get help, developing friendships with people who do not use drugs or become involved with violence, and setting and implementing positive personal goals.

The research.....Goal C- Acquire Skills and Strategies

Research on the effectiveness of teaching skills to students as a method of prevention is perhaps the most compelling. Botvin and Botvin (in *Comprehensive Textbook of Substance Abuse*, 1992), Perry and Kelder (*Journal of Adolescent Health*, 1992), and Tobler (in *Evaluating School-Linked Prevention Strategies: Alcohol, Tobacco, and other Drugs*, 1993) show that teaching students social resistance skills, as well as other types of social skills, such as conflict resolution and self-control, is effective in preventing drug use. For middle school and junior high school students who are beginning to be heavily influenced by their peers, these skills are essential for resisting pressure to use drugs and engage in violence. One recent study, by Botvin, Baker, Dusenbury, Botvin, and Diaz ("Long-Term Follow-up Results of a Randomized Drug Abuse Prevention Trial in a White Middle-Class Population," in the *Journal of the American Medical Association*, April 1995), attained significant reductions in both drug and polydrug use as the result of a skill-based prevention program. And N.S. Tobler's "Meta-Analysis of 143 Adolescent Drug Prevention Programs: Quantitative Outcome Results of Program Participants Compared to a Control or Comparison Group," in the *Journal of Drug Issues*, 16, showed that the most successful drug prevention programs for teenagers focused on skills and assertiveness and incorporated peer-helping.

An example.....Goal C - Acquire Skills and Strategies

Empathy and assertiveness skills are foundations that must be in place in order for a child to care enough about another to want to control anger and resolve conflicts to the mutual benefit of both parties. Consider this example. As a gifted, yet rather shy student, Matt was easily frustrated when other students did not accept and agree with his opinions. This was reflected in his angry outbursts and refusal to work with others. Matt's teacher helped him improve his ability to work in cooperative groups by first providing opportunities to appreciate situations from another's perspective. Behavioral social skills training helped Matt improve at taking turns, giving and receiving compliments, expressing opinions, and helping a peer. He was then able to more effectively work on his anger management skills.

Instructional strategies.....Goal C -- Acquire Skills and Strategies

Teaching skills to students requires a multi-step process to ensure success:

- motivation, in which students are convinced that they are at risk
- modeling, in which the skill is demonstrated as having reduced the risk
- practice, in which students role-play the steps of the skill in realistic situations
- transfer, in which students adapt the skill to their own language and style and use it in real-life situations.

Transfer is an integral part of learning not only skills but also virtually every other facet of a prevention program. Only by transferring what they learn in the classroom to their lives outside the classroom can students be effective in reducing their risks. To this end, teachers must continually follow up with students on their progress with using skills and strategies. For example, after students learn that marijuana has both short- and long-term negative effects, they can convey that information to a younger sibling. After they learn that a refusal skill is easy to master, they can use it at a party when a friend offers them a beer. After they learn that standing around a fight reinforces violence, they can not only leave a fight but also persuade their friends to leave the scene when a fight starts on the school grounds.

Specific instructional strategies include the following:

- *Role playing* is designed to assist students in understanding perspectives and feelings in a wide range of personal and social issues that may involve problematic and human-relations situations.
- *Small group discussions* are appropriate for problem solving, attitudinal change, and critical and creative thinking that coincide with the purposes of reflective discussions. They also assist students in the understanding of the subject matter.
- *The Suchman Inquiry Model* is a form of inquiry in which the teacher presents a problem in the form of a story. Through a process of student questioning, in which the teacher can answer only yes or no, data are gathered in a simulated setting. Students hypothesize causes and solutions.
- *Writing* original poems, stories, and essays can strengthen students' understanding and communication skills.
- *Surveys* of successful community members, parents, and peers can be conducted to compile strategies for staying safe and drug-free.

Home involvement.....Goal C- Acquire Skills and Strategies

Parents—either in the classroom or at home—can reinforce the skills and strategies that their children learn, and they can help their children practice those skills and strategies. For example, parents can ask their children, “When is the next time you think you might use the self-control skill you learned in school? Why don’t we role-play that situation and see what happens?” Parents can also follow up after important events such as dances or parties to see how well their children did using the skills.

Cross-age teaching also works well with families. Students in junior high school and high school might well heed older siblings more readily than their parents. These siblings can be trained in both the skill and in how to teach the skill to others. Siblings have the added advantage of providing a relevant context in which to use the skills. A benefit to the older brother or sister is reinforcement of their own commitment to prevention principles.

GOAL D: PRACTICE PERSONAL PLAN

Plan and carry out strategies to live drug-free and without violence.

The ultimate *transfer* to students' lives outside the classroom is to take action. Once students understand that they are safer and healthier without drugs and violence, when they have found examples and models encouraging them to be safer and healthier; and after they possess skills to be safer and healthier—it remains for them to act on their information, their attitudes, and their skills.

The research.....Goal D- Practice Personal Plan

In their book-and-video program *Parents Who Care: A Step-by-Step Guide for Families with Teens* (Developmental Research and Programs, 1996), J. David Hawkins and Richard F. Catalano, the pioneers of risk-factor research, propose what parents need to do to help their teenage children avoid getting into trouble with drugs, violence, and other problems. Essentially, they suggest the following to parents:

- relate to their children
- identify and reduce the risks to their children's health and safety
- bond with their children to strengthen their resiliency
- work within the family to solve problems
- provide a way for everyone in the family to contribute
- set family policies on health and safety issues
- supervise without invading.

Virtually all of these strategies have at their core the establishment of family bonds which build resiliency. Young people establish bonds with school, families, and community by contributing to their school, families, and community; by establishing safe and healthy relationships; and by doing well in school. In doing these things, students accomplish the following objectives:

- develop an accurate sense of personal strengths
- increase self-esteem from contributing
- access valuable resources
- increase their abilities
- maintain safety and health.

Another program that supports adolescents' taking action to stay safe and healthy is "Healthy Communities Healthy Youth," an initiative of the Search Institute (Minneapolis, Minnesota). Healthy Communities Healthy Youth "seeks to motivate and equip individuals, organizations, and their leaders to join together in nurturing competent, caring, and responsible children and adolescents." The bedrock of the initiative is the "Developmental Assets for Youth" identified in a study of more than 250,000 youth across the country conducted by the institute (see *Creating Healthy Communities for Children and Adolescents*, by Peter L. Benson, Jossey-Bass, 1996). These assets can be considered indicators of positive behavior: The more assets a person has, the more likely the person will remain safe and healthy. Some of the assets relate directly to the goal of taking action:

- "Empowerment" assets (community service)
- "Educational Commitment" assets (school performance)
- "Positive Values" assets (responsibility)
- "Social Competencies" assets (planning and decision making).
- "Positive Identity" assets (sense of purpose)

Both the Search Institute and Hawkins and Catalano are saying that giving students the opportunity and the tools to plan and carry out drug-free, violence-free strategies can be effective prevention.

The Giraffe Project in Langley, Washington, introduces students to “heroes,” everyday people like themselves—children and adults alike—who have taken a risk to make people’s lives better. Students are encouraged to model themselves after those heroes and ultimately become heroes themselves. Young people benefit by:

- assessing their strengths and limits
- making contributions to their communities
- seeing their friends make contributions

Service learning projects also provide opportunities for students to develop and carry out their goals. Communities benefit from the work done by the young people.

An example.....*Goal D - Practice Personal Plan*

In this goal, students will assess their strengths, model themselves after people who are drug- and violence-free, and act to reduce drugs and violence in their communities. How would such a strategy work? Consider the following two hypothetical students:

- Student A is a high-school athlete. His strengths are not only his ability to play sports well but also his capacity to persuade others to follow his lead. He looks up to his older brother, a college quarterback. His brother has followed a life free of drugs and violence, and the two often talk about the pressures Student A sometimes feels at school to take drugs or get into fights. Student A’s brother convinces him that he has a responsibility to lead his friends away from drugs and violence; he works with him to enlist his coach to help provide a series of skill trainings for all athletes at the school.
- Student B is in the eighth grade. She loves to organize—everything from parties to funding drives. In many ways, her tendency to get along well with teachers and other adults diminishes her popularity with her peers. Student B feels threatened by the drugs and violence she sees around her. She takes advantage of her relationship with school adults to get them to help her survey the students in her middle school about their attitudes toward drugs and violence. Student B gets her principal to commit to holding a schoolwide assembly to tell everyone about the results of the survey and what the school will be doing to improve the environment.

Instructional strategies.....*Goal D - Practice Personal Plan*

Students need to be encouraged to envision lives without drugs or violence, to identify people who have succeeded without drugs or violence, and to model those people by taking action consistent with what they know. Curricula can foster this process by providing students with opportunities to:

- assess what they can do
Activities that call on students to examine their strengths can give them a realistic view of what kinds of obstacles might prevent them from their goals and what kinds of resources they might be able to call on.

contribute to school, families, and community
Activities that require students to perform projects in their homes (in younger grades), schools (in intermediate grades), and their communities (in higher grades)

extend the curriculum beyond the classroom in ways that enable transfer of knowledge to occur more smoothly.

- achieve success
Because this may be the first time that students actually set goals for themselves, it is important for teachers to set up situations so that the students succeed. Teachers can do this by carefully monitoring students' goals to ensure that they're realistic, by giving students both the emotional support and resources needed, and by making sure that students are recognized and congratulated for achieving their goals.

Other specific instructional strategies that promote students' taking action are the following:

- *Mapping and webbing* the benefits of living safely and drug-free is useful for students to demonstrate understanding and see relationships among concepts.
- *Drama play and theater games* can provide students with opportunities to strengthen communication skills, self-confidence, and community service.
- *Field trips* to view community resources that will assist students in achieving goals gives students a firsthand look at people taking action.
- *Problem-solving procedures and practice* can develop personal abilities and provide strategies for helping others. Common steps include defining the problem, generating as many solutions as possible, deciding on criteria for judging the solutions listed, selecting the best possible solution, putting the solution into practice, and evaluating both the decision and the process.
- *Simulations* can provide students with opportunities to actively study and analyze real-life social situations while being active participants. The teacher's role is to plan and facilitate the simulation and conduct a briefing that allows students to prepare for realistic situations and to transfer skills.
- *Community service projects*, such as those generated by service learning projects, are the most direct means for students to take action in their community.

Home involvement.....Goal D - Practice Personal Plan

Probably the best way that parents can become involved in their children's taking action to remain free of drugs and violence is by providing good role models—themselves and others. If students are to develop goals based on their vision of drug- and violence-free adults, it is critical that parents supply that vision. Each strategy that parents want their children to use may be matched with a strategy that parents themselves can use, for example:

- establishing and maintaining safe and healthy relationships/monitoring their children's relationships,
- explicitly setting personal goals/helping children set and achieve *their* personal goals,
- contributing to the community/helping children contribute to the community,
- modeling lifelong learning/emphasizing the value of their children's education.

III. PHILOSOPHY

Theoretical Foundations

Three theoretical foundations underlie the goals and objectives presented in this Guide:

1. **Risk Factors**
Reducing the risks to students of becoming involved with drugs and violence.
2. **Protective Factors**
Increasing the factors that help protect students against negative influences.
3. **Resiliency**
Tapping into students' potential for structuring their lives to be free of drugs and violence.

These three imperatives correspond to prevention strategies that have been accepted in the prevention field and demonstrated in schools and communities. Studies identify not only risk factors that increase the likelihood of students' involvement with drugs or violence but also protective factors that decrease the likelihood. For example, J. David Hawkins, in "Controlling Crime Before It Happens: Risk-Focused Prevention" (*National Institute of Justice Journal*, August 1995), presents these factors in terms of violence as well as substance abuse. *Preventing Drug Use Among Children and Adolescents* (National Institute on Drug Abuse, 1997) incorporates protective factors in each of the domains as a deterrent to initiation of drug use.

Risk Factors for Violence (V) and Drug Use (D)

Community:

- availability of firearms (V)
- availability of drugs (D)
- community laws and norms favorable toward firearms and crime (V)
- community laws and norms favorable toward drug use (D)
- media portrayals of violence (V)
- transitions and mobility (D)
- low neighborhood attachment and community disorganization (V, D)
- extreme economic deprivation (V, D)

Family:

- family history of substance abuse (D)
- family management problems (V, D)
- family conflict (V, D)
- favorable parental attitudes toward and involvement in violence (V)
- favorable parental attitudes toward and involvement in drugs (D)

School:

- early and persistent antisocial behavior (V, D)
- academic failure, beginning in elementary school (V, D)
- lack of commitment to school (D)

Individual/Peer:

- alienation and rebelliousness (D)
- friends who engage in violence (V)
- friends who engage in drug use (D)
- favorable attitudes towards drugs (D)
- early initiation of violence (V)
- early initiation of the use of drugs (D)
- constitutional factors (V, D)

Protective Factors that Prevent Violence and Drug Use**Community:**

- supporting antidrug norms and prosocial behavior through policy or regulation, mass media efforts, and communitywide awareness programs
- collaboration and coordination among civic, religious, law enforcement and governmental organizations
- providing opportunities of youth involvement

Family:

- bonding expressed in positive relationships with family members, teachers, or other adults
- healthy beliefs and clear standards instilled by parents' beliefs in their children's ability to succeed in school and avoid drugs and crime coupled with establishing clear expectations and rules governing behavior
- monitoring their children's activities, getting to know their friends, and understanding their problems and personal concerns
- parenting skills for better family communications

School:

- enhancing academic performance and strengthening students' bonding to school
- giving students a sense of identity and achievement
- reducing the likelihood of students dropping out of school
- supporting positive peer relationships through development of social-competency skills
- providing an education component designed to correct the distorted perception that most students are using drugs

Individual/Peer:

- enhancing individual characteristics, such as a resilient temperament
- developing social-competency skills, which involve improved communications,
- enhancement of positive peer relationships and social behaviors, conflict resolutions skills, and resistance skills to refuse drug

Resiliency

Resiliency, the capacity to resist, persist, withstand, overcome, rebound and recover from hardships and adversity, is fostered and developed by protective factors. Research has found that it is the quality, intensity and duration of protective factors in all areas of children's lives that determines the extent to which they will or will not become vulnerable to the risk factors to which they are exposed.

The recognition that some young people can survive and even thrive in the face of overwhelming odds has provided the paradigm shift from focusing on risks factors to focusing on resiliency and protective factors. An article by Kevin Bushweller in *The American School Board Journal* (May 1995) discusses case histories and summarizes key studies about resiliency, among them the following: Bernard, B. *Fostering Resiliency in Kids: Protective Factors in the Family, School, and Community*. Portland, OR: Western Center for Drug-Free Schools and Communities, 1991; Werner, E., and R. Smith. *Overcoming the Odds: High-Risk Children from Birth to Adulthood*. Ithaca, NY: Cornell University Press, 1992; Wolin, S., and S. Wolin. *The Resilient Self: How Survivors of Troubled Families Rise above Adversity*, New York, NY: Random House, 1993.

The following tables were extracted from materials developed by Bonnie Bernard, Resiliency, Inc. and Peter Benson, Search Institute. Schools can assess the extent to which whether they are providing the protective factors, whether they are risk-focused or resiliency-focused and to what extent their students exhibit the characteristics of resiliency.

Examples of Protective Factors in Schools

Caring and Support	High Expectations	Opportunities for Participation
Positive and encouraging school environment	The belief that all students can succeed	Including students in decisions that affect them
Fostering positive and supportive relationships among students	Provision of challenging instruction and resources for academic and social success	Open opportunity for all students in all areas of school involvement

Comparative Characteristics of Risk-Focused and Resiliency-Focused Schools

Key Domains	Risk-Focused	Resiliency-Focused
RELATIONSHIPS	Hierarchical; blaming; and controlling	Caring, promoting positive expectations and participation
CURRICULUM	Fragmented; non-experiential; limited and lacking in multiple perspectives	Thematic, experiential, challenging, comprehensive and inclusive of multiple perspectives
INSTRUCTION	Accepts a narrow range of learning styles; builds from perceptions of student deficits; authoritarian.	Accepts a broad range of learning styles; builds from perceptions of student strengths and interests; participatory; facultative.
GROUPING	Tracked by perceptions of ability; promotes individual competition and a sense of alienation	Not tracked by perceptions of ability, promotes cooperation, shared responsibility and a sense of belonging
EVALUATION	Focuses on a limited range of intelligences; uses only standardized test; assumes only one correct answer	Focuses on multiple intelligences; uses authentic assessments; fosters self-reflection

Developmental Assets of the Resilient and Protected Student

Commitment to Learning	Positive Values	Social Competencies	Positive Identity
Motivated to do well in school	Places high value on helping other people	Knows how to plan ahead and make choices	Feels he/she has control over “things that might happen to me”
Actively engaged in learning; inquisitive	Places high value on promoting equality and reducing hunger and poverty	Has empathy, sensitivity and friendship skills	Has a positive self concept; likes him or herself
Cares about his or her school; shows willingness to contribute to positive school climate	Acts on convictions and stands up for his or her rights	Has knowledge of and comfort with people of different cultural, racial and ethnic backgrounds	Feels his/her life has a purpose; has goals and dreams
Seeks positive relationships with school personnel	Tells the truth when it is not easy	Can resist negative peer pressure and dangerous situations	Is optimistic about his/her personal future
Is willing to apply extra effort to master difficult tasks	Accepts and takes personal responsibility	Seeks to resolve conflict non-violently	Believes he/she makes a difference
Is willing to assist others in learning and participation	Places high value on abstinence from drug use and violence	Takes responsibility for his/her attitudes and behaviors	Believes she/she can make a contribution

Schools have the power to overcome incredible risk factors in the lives of their students.... including those for drug use and violence. However, schools are only one piece of the

prevention equation. They must work in partnership with families and communities to create a network of safety for youth.

Mutual Responsibility

In order to incorporate the *no-drug-use* and *no-violence* philosophy successfully throughout a student's school experience, system-wide commitment to the following concepts is essential.

1. **Infusion**

Contributing to a safe school climate is the responsibility of all teachers, not just specific content educators.

2. **Drug Prevention**

A common definition of drug use as it relates to all minor youth must be clearly and consistently voiced.

3. **Violence Prevention**

A common definition of violence in a continuum of behaviors must be clearly and consistently articulated.

Infusion

Above and beyond the characteristics of any prevention curriculum, however, is the more basic concept of *infusion*. Curricula that seek to reduce students' risks, increase the factors that protect them, and encourage them to identify and model themselves after drug- and violence-free individuals—while teaching functional information and skills—will be more successful in achieving the objectives of reducing students' use of drugs and involvement in violence. Infusion means that the information students get, the skills they practice, and the models they explore are “infused” throughout their school curriculum, much as tea is infused in water. And just as water takes on the appearance and taste of the tea, the school curriculum takes on the goals and the strategies of prevention.

For example, students in a math class might learn how much it costs per year to smoke a pack of cigarettes a day. Students in an English literature class might read the biography of someone who challenged the violent norms of a community and reduced the occurrence of violence. Students in a physical education class might practice conflict resolution skills. Infusion is one of the best ways to encourage the transfer of students' learning from activities in the classroom to skills they can use in their everyday lives.

The two keys to successful infusion are the students and the teachers.

Students:

- If students are to structure their lives to be free of drugs and violence, they need to actively apply what they learn to all facets of their lives.

Teachers:

- If infusion throughout the school curriculum is a significant mechanism for students to transfer learning of prevention strategies, commitment by teachers and other school adults is essential to students' reaching the goals of remaining drug-free and without violence.
- Teachers are the ones who must be able to reinforce the no-drug use, no-violence messages.
- Teachers must be able to model no tolerance of illegal alcohol, tobacco and other drug use by minors and no misuse of legal drugs nor any use of illicit drugs themselves.

- Adult school staff must be able to model no tolerance of violence behaviors and, by example, demonstrate effective communication and conflict resolution skills.
- Teachers must actively encourage students' adopting those messages for their own until the students become those messages themselves.

The goals of this Resource Guide assume that:

- teachers are involved
- related activities are infused into the school curriculum
- transfer does occur.

Student achievement of the goals--*learning essential knowledge, finding examples to follow, acquiring skills needed, and putting into practice their personal plans to become and remain drug and violence free*---depends on this. This is how schools will be able to successfully *LEAP* into prevention of drug use and violence.

Drug Prevention

Drug prevention includes prevention, early intervention, rehabilitation referral, or education related to the illegal use of alcohol and the use of controlled, illegal, or harmful substances, including inhalants and anabolic steroids; and prevention, early intervention, smoking cessation activities, or education, related to the use of tobacco by children and youth eligible for services under Title IV, Safe and Drug Free Schools and Communities Act. [Ref. Public Law 103-382, Sec. 4131 (2)(C)]

It is important that the term “prevention of drug use” rather than “drug abuse” be applied when referring to any child or adolescent involvement with an illegal substance as well as misuse of a legal substance. In other words, any drug use by a minor is abuse.

Violence Prevention

Violence prevention includes the promotion of school safety, such that students and school personnel are free from violent and disruptive acts, including sexual harassment and abuse, and victimization associated with prejudice and intolerance, on school premises, going to and from school, and at school-sponsored activities, through the creation and maintenance of a school environment that is free of weapons and fosters individual responsibility and respect for the rights of others. [Ref. Public Law 103-382, Sec. 4131 (2)(C)]

The Center for Disease Control-Prevention (CDC-P) states that “violence is the threatened or actual use of physical force or power against another person, against oneself, against a group or community which either results in, or has a high likelihood of resulting in injury, death or deprivation.” Many lessons in the Curriculum Guide use the following definition that focuses more on the precursors to the CDC-P definition: Violence is any mean word, look, sign or act that hurts a person’s body, dignity or things. (*Respect & Protect*, Johnson Institute, Minneapolis, MN) Lesson activities based on this definition focus students on addressing their own behavior at the earliest stages of the violence continuum.

IV. How To Use the Guide



A. Red Flags

The experience of prevention specialists and the knowledge obtained from research have identified some activities that should be avoided in prevention programs. Heed these warnings so that prevention efforts are not counter productive. These “red flags” include the following:



RED FLAG #1: DO NOT.....Trivialize prevention.

Failure to treat seriously the prevention of drug use and violence negates the effect of the program.

- If prevention activities in this Guide are not integrated in regular lesson plans as graded activities, students perceive the prevention messages as unimportant
- Inconsistent verbal and behavioral “no-drug-use” and “no-violence” messages undermine the significance of those messages.
- Insufficient professional development for teaching prevention weakens the capability of staff to give and model appropriate messages.



RED FLAG #2: DO NOT.....Use inappropriate guest speakers.

Sometimes well-meaning teachers inadvertently incorporate resources that are “red flags”, such as:

- Inviting a guest speaker to talk about recovering from drug use or about past gang experiences. Speeches by former addicts, pushers, or gang members may make a strong anti-drug, anti-violence impressions on adults, but students often receive a totally opposite messages. Students may be impressed that a person can use drugs and be involved with violence, yet still be perceived as a successful, even famous adult.
- We rob students of healthy role models when we fail to expose them to successful adults and older peers who have not used drugs and who have not led lives of violence.
- Some prevention speakers may fail to present messages in an age appropriate manner unless they receive appropriate guidance from educators.
- Students may be confused by mixed messages if presenters represent groups that support drug interests or activities that promote violence.



RED FLAG #3: DO NOT.....Engage in self-disclosure.

Personal revelation by either teachers or students should not be encouraged as a means of stimulating classroom discussion.

- Honest dialog is an important aspect of prevention and students should be encouraged to strengthen their thinking skills by considering problems relevant to their own lives, not what happened in a teacher's experience.
- Urging personal revelations places students in situations for which they are not prepared.



RED FLAG #4: DO NOT.....Group students according to behaviors related to drugs or violence.

Be careful not to group students according to behaviors related to drugs or violence.

- Like-minded peers tend to reinforce the same attitudes and behaviors in each other even if those are negative or harmful.
- Less-randomized student groupings are not as likely to expand student perspectives and thus inhibit learning. For example, cooperative teams without a balance of males and females, cultural backgrounds, and levels of ability and interests will not challenge thinking skills in the way a more diverse group might.



RED FLAG #5: DO NOT.....Teach how to use drugs or weapons under the guise of informing about drugs or weapons.

- Dramatic discussions of how drugs make people feel or elaborate descriptions of drug paraphernalia may stimulate curiosity and encourage experimentation. For example, do not provide a list of products that someone might inhale. This type of education in the 1960's produced a generation of "educated consumers".
- Discussions of weapons should not glorify the weapons, nor should curriculum or presentations give the impression that guns are more common than they, in fact, are.



RED FLAG #6: DO NOT.....Sensationalize the drug and violence epidemics.

Dramatic scare tactics may generate attention; however, such tactics are not a useful prevention strategy.

- Distorted film scenarios cause educators to lose credibility in prevention education when students recognize the discrepancy with reality.

- Developmentally, adolescents tend to feel invulnerable, and are likely to view scare films as a personal dare.
- Most importantly, however, focusing on extreme examples distracts classroom attention from addressing the early-stage behaviors where prevention is most effective.



RED FLAG #7: DO NOT.....Expect students to report incidents with no assurance of support.

Do not expect students to report incidents of drug use or violence to school adults (for example, knowledge of an imminent fight, a friend's coming to school drunk every day, or someone being harassed on the bus),

- when staff have not been trained in appropriate responses
- when staff have not been enlisted in site-based commitment to safe school climates
- when staff are not expected to model no-drug and no-violence behaviors and attitudes themselves
- when parents are not provided prevention resources.

The lack of clear procedures to assure consistent, fair, and effective responses undermines a trusting relationship between adults and students.

B. Instructional Strategies

Effective instruction is based on the premise that teachers have an important impact on students' learning. Active teachers do the following:

- select clear learning goals and objectives for their students
- identify teaching strategies that match the content and needs of the learners
- provide examples, models, or representations that help students acquire a deep understanding of the study topics
- require active student engagement in the learning process
- guide students as they construct their understanding of the study topics
- carefully and creatively monitor students for evidence of learning (evaluation)
- incorporate home learning opportunities which engage family members in the learning process

Models of Teaching

Validated goals and objectives for the prevention of drug use and violence are identified in this document. Central to the active teaching and learning of these goals and objectives is the use of instructional strategies which incorporate varied learning styles, varied thinking skills and interactive skill-based activities. To do this well, a teacher can choose from a repertoire of strategies appropriate to the intent of each goal.

Variability is one of the teacher qualities validated as promoting student growth. Successful teachers are not just charismatic and persuasive presenters. Incorporating a variety of instructional strategies in lessons helps meet various student needs, problems,

and learning styles. In addition, students are more likely to be motivated when content is presented in a variety of strategies that appeal to differing interests and attitudes. Applying various teaching models during instruction also keeps the spark in the teacher and reduces student boredom.

Joyce and Weil (Joyce, B., and M. Weil. *Models of Teaching*. Boston, MA: Allyn and Bacon, 1996) suggest that models of teaching are really models of learning. As we help students acquire information, ideas, skills, values, ways of thinking, and means of expressing themselves, we are also teaching them how to learn. Teachers become more effective professionals when they engage students in vigorous cognitive and social assignments and teach them to use the learning productively. As students acquire knowledge and skills in a variety of classroom challenges, they are building their own learning repertoires to assist them in transfer and lifelong applications. This, then, is also good prevention of drug use and violence.

Cooperative learning is a teaching strategy especially appropriate for prevention education. Arranging students in groups of about three or four called cooperative learning teams provides an environment in which students cooperate with one another to achieve objectives. Cooperative learning helps students accomplish the following:

- establish healthy friendships
- gain a sense of competence
- become oriented toward goals.

Part of the management of cooperative teams involves giving students responsibility, establishing rules, and setting up the system so that they're dependent on each other.

For more information on cooperative learning, contact the Cooperative Learning Center, University of Minnesota, Minneapolis. Or see *Cooperation in the Classroom*, Johnson, et al., Interaction Book Company, Edina, Minnesota. For specific ways to arrange students in cooperative teams, see Spencer Kagan's article, "The Structural Approach to Cooperative Learning," in the December 1989/January 1990 *Educational Leadership*.]

C. Home-Centered Activities

The Home-Centered Activity Sheets link the goals of the Texas Prevention Curriculum Guide: Drug and Violence Education with activities that can occur in the home environment and include the significant adults in the student's life.

- See Goal A. Learn Essential Information for home-centered strategies to reinforce the drug and violence prevention knowledge gained in classroom lessons about drug-related and violence-related issues.
- The home-centered strategies in Goal B. Examine Models and Examples encourage examination of beliefs, attitudes and behaviors regarding drug use and violence by students and adults together.
- Goal C. Acquire Skills and Strategies provides additional opportunities for students and families to reinforce and practice effective communication skills.

- Families can use the Home-Centered Activity Sheets for Goal D. Practice Personal Plan to help guide the student in refining his/her personal goals and decisions regarding a drug free and violence free life.

The Home-Centered Activity pages and the information in the Guide additionally serve to support the roles identified in *Parenting Training Is Prevention* (U.S. Department of Health and Human Services, 1991). These roles require that parents look closely at their own alcohol and other drug use, that they become knowledgeable about an array of alcohol and other drug use issues, and most important, that a major goal for their children is succeeding by remaining drug free/violence free.

1. *Parents act as role models* regarding the use of such legal substances as tobacco, caffeine, alcohol, and such illegal substances as marijuana, stimulants, sedatives, cocaine, and heroin. Parents also act as role models regarding the behaviors that they display in solving problems, resolving conflicts and managing their own feelings. The focus here is on both what parents model in their own alcohol and drug use behaviors along with the ways that they solve problems and resolve conflicts.
2. *Parents act as educators or information resources* for their children about legal and illegal substances and their likely health and social consequences; ways to peacefully resolve conflicts and handle angry feelings and their physical and social consequences; family histories regarding alcohol/other drug use; family histories regarding the use of violence (witnessed and experienced); and the sale of alcohol and other drugs for personal profit as well as the pro-use messages that emanate from the media, tobacco, alcohol and other drug industries, and poorly informed health practitioners. This multifaceted educational role requires that parents become knowledgeable and that their children learn to turn to them for tobacco, alcohol, and other drug information and for ways to resolve conflicts and problems without violence.
3. *Parents act as family policymakers and rule setters* for their children regarding the use and sale of tobacco, alcohol and other drugs. The focus is on establishing clear no-use (tobacco, alcohol, other drugs, violence) and no-sale family policies or rules with clear and enforceable consequences for violators.
4. *Parents act as simulators of and participants in enjoyable family activities* that provide alternatives to boredom or social events involving tobacco, alcohol, other drugs, and violent behaviors. The focus is on helping children engage in healthy activities (including tobacco, alcohol and other drug free parties) as an alternative to unhealthy activities.
5. *Parents act as consultants and educators* of their children about peer pressure and strategies to resist negative peer pressure. The focus is on helping parents appreciate the power of peer pressure by providing children with resistance techniques.
6. *Parents act as monitors* of their children's whereabouts. The emphasis is on knowing the location of children when they are not at home and being reasonably assured of their safety.
7. *Parents act as collaborators* with other parents and significant adults in their children's world regarding tobacco, alcohol, other drugs and violence. This involves communicating about social events, monitoring children's activities, and conducting community-based alcohol/other drug and violence prevention projects.
8. *Parents act as identifiers and confronters*. Parents must have the knowledge base regarding the signs of their children's or other children's tobacco use, alcohol use, other drug use, and violent behaviors. Additionally parents should be equipped with the skills to confront children regarding their behaviors concerning tobacco/alcohol/other drug use and violent behaviors.
9. *Parents act as interveners* with alcohol and other drug dependent children and in instances where children demonstrate violent behaviors.

10. *Parents act as managers* of their own feelings about their children's tobacco, alcohol, and other drug use and their children's violent behaviors. Parents must work through these feelings so that they can take productive remedial action.

The intent of the home-centered activities is to empower the significant adults involved in a student's life to participate in the education process. These activities have the ability to develop and/or strengthen the adult/child relationship in ways that enhance both adult and student learning.

D. Adaptations for Special Populations

Drugs and violence are social problems crossing all lines of race, socioeconomic status, sex, age, and levels of education. All students who are capable of learning and understanding must be taught the facts and skills necessary to avoid the use of drugs and the participation in violence. "All students" includes special populations—special education students, students who are having academic difficulty, bilingual students and students with limited English proficiency, students from migrant families, gifted/talented students, and students from a variety of cultures. What students have in common, despite their differences, is a need for alternative approaches to classroom instruction.

A major goal of an education program is to provide all students with opportunities to advance to the full extent of their abilities. The state-mandated curriculum now ensures a well-balanced single curriculum of instruction for all students regardless of special need or condition. Instruction for students with special needs includes the same essential elements as instruction given to general education students.

Special program personnel and regular instructional personnel are responsible for the cooperative delivery of effective instruction. In school district programs for students identified as having special needs, educators modify the method of instruction, pacing, and materials as necessary to provide students the opportunity of learning.

Special Education

Special education students may be at greater risk of pressure to use drugs and become involved with violence than other students, since they may be more vulnerable to exploitation or may feel a particularly strong need for acceptance. These students may be able to fulfill the same curriculum requirements as their nonhandicapped peers; however, modified content, instructional methods, and testing methods may be required. Educators should be especially sensitive to the needs of students who rely on medicines and life-support mechanisms.

Modifications to teaching special education students may include the following:

- identification of the specific needs of each student
- identification of the specific learning styles that are effective for each student
- repeated summaries of key points
- detailed directions
- continual feedback
- allowance of more time for assignments
- use of adult tutors, cross-age tutors, and peer tutors
- group assignments.

Compensatory Education

Compensatory instruction is targeted for students who are having academic difficulty in English language arts, mathematics, science, or social studies. Other students who may require remedial or compensatory instruction include migrant students, students whose primary language is not English, and pre-kindergarten or kindergarten children who have been identified as having developmental needs. Many of the modifications to teaching compensatory education students are similar to those indicated for special education students in the previous section. Moreover, teachers should consider special remedial alternatives such as the following:

- tutorials
- additional teachers to provide more time on task
- courses on reading improvement
- courses on study skills
- summer school
- counseling.

Bilingual Education

Limited English Proficient (LEP) Students must have the opportunity to use materials that develop expanded meanings of language, build vocabulary, and teach word recognition and comprehension techniques. In addition, to prevent feelings of isolation that may result from a lack of proficiency in English, students should be given frequent opportunities to participate in prevention activities provided at the school and in the community. Home-Centered Activity Sheets provided in Spanish to engage the Spanish speaking family in prevention activities should be utilized.

Bilingual- or English as a Second Language (ESL)-certified instructors may team with personnel on emergency teaching permits to teach the goals and objectives identified by the state for LEP students. Parent volunteers and paraprofessionals may work with regular instructional personnel to deliver the needed programs. While modification of the program involves changing the language in which the content is conveyed, the scope of the Curriculum Guide should remain the same. In an ESL program, the sequence in which the essential knowledge and skills are presented may be modified to accommodate students' progress in acquiring English language skills. Oral and visual stimuli aid students in grasping the concepts that English-speaking students develop by writing.

More specifically, teachers may do the following to help bilingual students:

- help students build card files and glossaries
- encourage categorizing of key words, important facts, or essential concepts
- use pictures, drawings, and diagrams to illustrate ideas and relationships
- explain special vocabulary items in the students' native languages
- simplify directions
- de-emphasize speed
- ask open-ended questions to allow students practice in thinking and speaking in English
- keep a variety of reference materials written in simple English
- use games.

Migrant Students

An accurate assessment is essential in order to adapt the content of the curriculum and the methods of instruction to the needs of migrant students. For example, districts must determine to what extent students' needs are a result of lack of experience, lack of time on task, lack of proficiency in English, or, in many cases, only partial attendance throughout the school year.

Teachers may get vital educational information concerning individual migrant students from the New Generation System, which reports credits earned in courses and partial work completed. If migrant counselors are available, they may assist teachers in planning instructional programs. Teachers should try to capitalize on migrant students' varied experiences of travel, work, and family structure—not only to make assignments and classroom discussions relevant, but also to enrich the experiences of the other students.

Gifted/Talented Students

Because gifted/talented students may feel or may be perceived as “different” from their peers, these students meet the profile of high risk for alcohol and other drug use.

As with the other groups of students, gifted/talented students must receive the same essential information and skills as everyone else. Administrators and teachers may accelerate, expand, or enrich the program for gifted/talented students to include activities that encourage students to do the following:

- apply critical thinking and analysis to writing questions and constructing puzzles related to the prevention of drug use and violence
- use creative thinking and communication skills by writing plays, poems, advertisements, slogans, posters, stories, and books related to prevention strategies
- plan and present an assembly about prevention using songs, skits, and other activities they have developed
- conduct research into a prevention topic
- organize a drug use prevention or violence prevention campaign in the school.

Older gifted/talented students may participate in such activities as designing and setting up a learning center, writing legislative bills, publishing a school newsletter, and constructing and administering a school survey—all related to the prevention of drug use and violence. Students may also serve on community task forces and give presentations to parent groups and civic organizations.

Modification of curricula for gifted/talented students may occur in the acquisition of information, the development of skills, and the curriculum materials used for instruction.

Multicultural Sensitivity

Multicultural education helps prepare young people to be productive and sensitive citizens of a multicultural nation. Texans live in a multicultural society. From school to work to play, Texans constantly deal with multicultural attitudes, beliefs, and interests. All educators in the state, especially in the area of prevention, need to be sensitive to the diversity of the students under their care.

Teachers may reach students best when they understand, accept, and incorporate cultural differences into the classroom instruction. Training is essential to increasing teachers'

awareness and sensitivity, so that they make it a point to learn to spell and pronounce correctly *all* students' names. In addition, teachers need to be aware of the following:

- Students are greatly influenced by teachers' praise and disapproval, and by their relationships with their teachers.
- Students need to be respected for their culture.
- Multicultural education is neither remedial nor compensatory.
- Students often learn best through cooperating, not competing.

E. Recommendations for Extension of this Guide

The Texas Prevention Resource Guide: Drug and Violence Education is designed to be a dynamic document that can take full advantage of the flexibility and immediacy of the Internet. Based on the ongoing evaluation of educators and prevention specialists, the Guide's informational texts, resources and individual classroom lessons will be periodically updated.

Another advantage of the Guide's design is the capacity to add new information, resources and classroom lessons. Such additions must be submitted to the Safe and Drug Free Schools and Communities Coordinator at the Regional Education Service Center. All suggested lessons must meet minimum criteria.

Criteria for Lesson Development

To be accepted for inclusion in the Texas Prevention Resource Guide: Drug and Violence Education, lessons must:

- Correlate to Texas Essential Knowledge and Skills (TEKS);
- Be written to address one of the goals and objectives stated in this Guide;
- Adhere to the prevention philosophy, principles and practices stated in this Guide;
- Be developmentally appropriate for the grade intended;
- Incorporate one or more of the instructional strategies recommended in this Guide;
- Foster home involvement whenever possible;
- Include all necessary Student Activity Sheets, Teacher Resource Sheets and/or Home Centered Activity materials; and
- Not infringe upon and/or violate any copyright, granted or pending.

F. Evaluation

Principles of good evaluation are applicable to prevention education just as they are to any academic area. The personnel involved in prevention education must remember that the purpose of all evaluation efforts is to help a program succeed. Evaluation demonstrates success or the need for revision or expansion of prevention efforts. In essence, the process of evaluation involves asking critical questions about student behavior, about the prevention curriculum, about the instructional process, and about the overall prevention effort of the school. Once the questions have been identified, evaluation involves gathering data to address each question. The final step involves changing the program based on the

information gathered. The term *evaluation* implies that an informed decision about programming can be made.

G. Instructions for Using Lesson Pages

Searchable Web Site Database

The Resource Guide is available on the Internet as a searchable web site document. The search feature enables educators, parents, and community youth providers to access lessons by content area, grade level, developmental level, or by goal and objective. Lessons may be viewed and printed according to individual need. Go to:

<http://daveesc4.net>

Developmental Levels

Lessons have been developed for use, as appropriate, in all grades within each developmental level. Because the Guide is a resource to infuse, the prevention concepts should be reinforced repeatedly in multiple content areas. Within each developmental level any given lesson may be taught at any grade level, with adaptations if necessary.

- Grades PreK-2
- Grades 3-5
- Grades 6-8
- Grades 9-12

Lesson Page Components

- **Lesson Title and Number**
- **Lesson Overview**
- **Goal and Objective**
- **Grade Level Icon**
- **Content Area Icon**
- **Activities / Strategies** (Instructions for teaching the lesson)
- **Assessment** (Suggested assessment of student mastery of the prevention concepts stated in the goals and objectives.)
- **Teacher Resource Sheets** (Suggested pages for duplication or transparencies to guide student work.)
- **Student Work Sheets** (Suggested pages for duplication or transparencies to guide student work.)
- **Home-Centered Sheets** (Available in Spanish and English.)
- **Teacher Tips** (Additional information to assist the teacher)
- **Texas Essential Knowledge and Skills (TEKS)**



Texas Prevention Resource Guide: DRUG AND VIOLENCE EDUCATION

GOALS AND OBJECTIVES

A. Learn Essential Information

Gain knowledge essential for making legal, safe and healthy decisions about tobacco, alcohol and other drugs, and violence.

Students will demonstrate the ability to...

1. Analyze the effects of tobacco, alcohol and other drugs on an individual, including:
 - a. physiological effects
 - b. psychological effects
 - c. relationships between addiction and genetic predisposition
2. Describe the potential consequences of using tobacco, alcohol and other drugs, including:
 - a. health consequences
 - b. family consequences
 - c. school consequences
 - d. social consequences
 - e. legal consequences
 - f. financial consequences
 - g. work consequences
3. Analyze the effects of advertising and the media in shaping attitudes about:
 - a. use of tobacco, alcohol and other drugs
 - b. perception of violence
4. Define violence and describe the most common types of violence toward students in various settings, including:
 - a. school
 - b. home
 - c. community/social situations
 - d. work
5. Analyze causes of violence, including:
 - a. attitude that violence is acceptable and normal
 - b. need for status
 - c. uncontrolled anger
 - d. presence of alcohol or other drugs
 - e. presence of weapons
 - f. perceived need for protection, regardless of the actual threat
 - g. association with peers who act in violent ways
 - h. attitudes and behaviors of bystanders
 - i. intolerance and prejudice
6. Describe the effects of violence on an individual, including:
 - a. physical
 - b. emotional
 - c. intellectual
 - d. social
7. Describe the potential consequences of violence on an individual, including:
 - a. health consequences
 - b. family consequences
 - c. school consequences
 - d. social consequences

- e. legal consequences
 - f. financial consequences
 - g. work consequences
8. Describe the danger of creating, imitating, or using signs, symbols, and graffiti associated with gang activity.
 9. Identify personal, physical and emotional boundaries and communicate them to others.
 10. Identify strategies to stay safe and drug-free.

B. Examine Models and Examples
Identify examples of attitudes and behaviors which prevent drug use and violence.

Students will demonstrate the ability to...

1. Predict the effects of misinformation concerning the risks of tobacco, alcohol and other drugs and acts of violence.
2. Distinguish between characteristics that prevent vs. promote drug use and violence including:
 - a. caring vs. selfishness
 - b. equality and social justice vs. intolerance
 - c. honesty vs. dishonesty
 - d. responsibility vs. irresponsibility
 - e. restraint vs. foolhardiness
 - f. courage vs. cowardice
 - g. respect vs. disrespect
 - h. participation vs apathy
3. Develop strategies to encourage drug-free and nonviolent attitudes and behaviors and to discourage drug use and violent attitudes and behaviors.
4. Identify and seek out groups and individuals, including family members, peers, and adult friends, who provide encouragement to remain drug-free and nonviolent.

C. Acquire Skills and Strategies
Increase skills to apply knowledge and to follow examples which prevent drug use and violence.

Students will demonstrate the ability to...

1. Identify and practice effective communication skills and strategies to:
 - a. express empathy
 - b. use self-control
 - c. manage anger
 - d. resolve conflicts
 - e. resist negative influences
 - f. avoid dangerous situations
 - g. seek guidance of trusted adults
 - h. help friends
 - i. deal with bullying
 - j. cooperate

D. Practice Personal Plan
Plan and carry out strategies to live drug-free and without violence.

Students will demonstrate the ability to...

1. Describe the benefits of living safely and drug-free.
2. Assess personal strengths and challenges and list achievements.
3. Develop personal goals based on individual abilities and interests, including:
 - a. developing individual potential
 - b. staying in school and completing educational objectives

- c. contributing to school
 - d. contributing to community
 - e. establishing safe and healthy relationships
 - f. avoiding drugs and violence
4. Use resources in the family, school, and community that help achieve goals.
 5. Identify and act on strategies to help friends avoid involvement with drugs and violence.
 6. Identify and participate in initiatives to reduce and eliminate drugs and violence in schools and communities.

RESOURCES

• **National Clearinghouse for Alcohol and Drug Information**

- The National Clearinghouse for Alcohol and Drug Information (NCADI) is the information service of the Center for Substance Abuse Prevention of the Substance Abuse and Mental Health Services Administration in the U.S. Department of Health & Human Services. NCADI is the world's largest resource for current information and materials concerning substance abuse.

1-800-729-6686. [1-800-SAY-NO-TO] Se Habla Español.
Information in English and Spanish is available.

<http://www.health.org/>

Tips for Teens

- Pamphlets on alcohol and other drugs, including information on effects, problem indicators and resources. [Print in “landscape” format]

<http://www.health.org/tipteens.htm>

Alcohol and Drug Facts

- General Substance Abuse Fact Sheets
- NCADI's Interactive Dynatable
- Straight Facts About Drugs and Alcohol
- What You Can Do About Drug Use In America

<http://www.health.org/pubs/qdocs/index.htm#facts>

PREVLIN Publications for Youth

- PREVLIN offers electronic access to searchable databases and substance abuse prevention materials that pertain to alcohol, tobacco, and drugs.

<http://www.health.org/youth.htm>

- **National Inhalant Prevention Coalition**

The NIPC serves as an inhalant referral and information clearinghouse, stimulates media coverage about inhalant issues, develops informational materials, produces *ViewPoint* (a quarterly newsletter), provides training and technical assistance and leads a week-long national grassroots inhalant education and awareness campaign.

1201 W. Sixth Street, Suite C-200
Austin, Texas 78703
phone: 800.269.4237 or 512.480.8953
fax: 512.477.3932

<http://www.inhalants.org>

- **National Parent Information Network [NPIN]**

The purpose of NPIN is to provide information to parents and those who work with parents and to foster the exchange of parenting materials. Materials included full text on NPIN have been reviewed for reliability and usefulness. Publications, brochures, and other materials that are merely listed on NPIN may not have been reviewed and are included for informational purposes only.

<http://ericps.ed.uiuc.edu/npin/npinhome.html>

- **National School Safety Center**

The Center represents a partnership of the U.S. Department of Justice, the U.S. Department of Education and Pepperdine University. NSSC's charge is to promote safe schools - free of crime and violence - and to help ensure quality education for all America's children. Orders may also be processed over the phone or by mail.

National School Safety Center
4165 Thousand Oaks Blvd., Suite 290,
Westlake Village, CA 91362
Phone: (805) 373-9977 - Fax: (805) 373-9277.

<http://www.nssc1.org/resource.htm>

- **Partnership's Against Violence Network**

A “virtual library” of information about violence and youth-at-risk, representing data from seven Federal agencies. It is a “one-stop,” searchable, information resource to help reduce redundancy in information management and provide clear and comprehensive access to information for States and local communities.

<http://www.pavnet.org/>

Curricula

<http://www.reeusda.gov/pavnet/cur.html>

- **Prevention Yellow Pages**

Texas Youth Commission Office of Prevention

A worldwide directory of programs, research, references and resources dedicated to the prevention of youth problems and the promotion of nurturing children

<http://www.tyc.state.tx.us/prevention/40001ref.html#CONTENTS>

- **Safe and Drug Free Schools Programs - US Department of Education**

The Safe and Drug-Free Schools Program is the Federal government's primary vehicle for reducing drug, alcohol and tobacco use, and violence, through education and prevention activities in our nation's schools. The Safe and Drug-Free Schools Program consists of two major programs: State Grants for Drug and Violence Prevention Programs, and National Programs .

<http://www.ed.gov/offices/OESE/SDFS/>

SDFS Publications

- The publications and videos are produced by the Safe and Drug-Free Schools Program, to deal with a variety of subjects related to creating safe, disciplined, and drug-free schools.

<http://www.anstec.com/doed/list.html-ssi>

Model Programs

- The Department of Education identifies effective drug and violence prevention programs that demonstrate reductions in youth drug use or violence, or that results in more discipline and improved order in classroom environments.

Safe and Drug-Free Schools Program

600 Independence Ave., S.W.

Portals Building, Room 604

Washington, DC 20202-6123

<http://www.ed.gov/offices/OESE/SDFS/programs.html>

- **Texas Commission on Alcohol and Drug Abuse [TCADA]**

TCADA provides educational materials on substance use, develops prevention, intervention, and treatment and offender education programs, and conducts studies on the problems of substance use in Texas.

9001 North IH 35, Suite 105

Austin, TX 78753

TCADA Hotline 1-800-832-9623 - Call for immediate help.

<http://www.tcada.state.tx.us/>

TCADA Prevention Initiatives and Prevention Resource Centers

- In 1997, the agency opened 11 new Prevention Resource Centers to provide materials, information and programs across Texas and to coordinate substance

abuse prevention efforts with teachers, parents, community leaders, and local government officials.

<http://www.tcada.state.tx.us/prevention/>

TCADA School Surveys of Substance Use

- Statewide school surveys are conducted biennially by TCADA's Needs Assessment Department. Since the award-winning school project began in 1988, 60 percent of the school districts in Texas have participated and over 1.5 million students have filled out survey forms. The survey covers not only prevalence of substance use, but also factors affecting youthful substance use and the students' attitudes toward substance use.

512.349.6634

<http://www.tcada.state.tx.us/research/research.html>

- **National Parent Information Network [NPIN]**

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<http://ericps.ed.uiuc.edu/npin/npinhome.html>

- **Texas Parent Teachers Association**

One objective of the organization is to develop between educators and the general public such united efforts as will secure for all children and youth the highest advantages in physical, mental, social, and spiritual education.

www.onr.com/tpta/

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