



Substance Use and Addiction Grade 8

UNIT OVERVIEW

Duration: 3 lessons; 3 hours.

Description:

The lessons in this unit will have 4 main foci:

1. review categories of drugs
2. research negative consequences of substance abuse
3. describe causes of stress and identify positive ways to deal with it
4. learn about community resources

Lesson Titles :

1. **Drugs and My Body**
2. **From My Point of View**
3. **Community Compass**

Assessment and Evaluation:

1. **Drugs and My Body:** students will use knowledge of different types of drugs and apply this information to their lives; students will participate in an activity which asks them to categorize drugs under three main headings - hallucinogens, stimulants, depressants – and then reflect on their effects upon the body
2. **From My Point of View:** students explore the negative consequences of using certain substances; students will present information to their peers in a creative manner
3. **Community Compass:** students will identify school and community resources that are involved in prevention and treatment of substance use and abuse; students will use a variety of resources to do research and then present their findings on a local map

Background Information:

Do you not know that you are God's temple and that God's Spirit dwells in you?

If anyone destroys God's temple, God will destroy that person.

For God's temple is holy, and you are that temple.

1 Corinthians 3: 16-17

“The concept of lifestyle indicates the way in which persons choose to meet their human needs. Christians believe that human persons are created with a physical body and eternal soul and reach fullness of personhood in relationship with God and neighbour. We are thus called to choose a lifestyle which addresses our spiritual and material needs and allows others to do the same.” EOCCC

Substance abuse is an issue that touches the lives of many of the families in our school community. As many as one of every five adults in Ontario may have personal experience of these problems. To “just say no” is not enough! The Ontario curriculum states that, “Education is critical to the prevention of drug abuse.” The substance use and abuse learning expectations respond to these facts by focusing on an understanding of the effects of drugs and alcohol and the consequences of their use. This knowledge is integrated with the development of a variety of living skills that help students make and maintain healthy choices. Research has indicated that students who feel attached to their schools are less likely to engage in anti-social behaviour or drug use practices. The quality of the students’ relationships with teachers and their peers influences their sense of belonging. Teachers therefore have an opportunity to make a positive difference in the lifestyle choices of their students by developing warm relationships which value the dignity and worth of each individual, role modelling, sharing of knowledge and teaching of the substance use and abuse curriculum.

The Centre for Addiction and Mental Health states:

Substance use is but one of many "adult behaviours" adopted by youth. As youth generally use substances to express their independence and autonomy, this use should not be automatically equated with "substance abuse". Most adolescents who use substances do not progress to problem use or dependency. But for those youth who do develop a substance use problem, it is common to also find a mental health problem. The combination of problem substance use and a mental health concern is referred to as a concurrent disorder. What comes first - the substance use problem or the mental health concern - varies and may be difficult to determine. The two are often intertwined and related. Accordingly, the treatment of both problems must be integrated. If one problem is present, investigate the possibility of another also being present.

Students build upon the skills learned in Grade 7 by reviewing different categories of drugs and describing the negative consequences of abusing substances. They learn about the community resources that are available to help, and alternatives to substance use and abuse. They learn about the decision-making process that can help them make healthy life choices.

Catholic Graduate Expectations:

1. *A discerning believer* formed in the Catholic Faith community who celebrates the signs and sacred mystery of God's presence through word, sacrament, prayer, forgiveness, reflection and moral living.
 - d. Develops attitudes and values founded on Catholic social teaching and acts to promote social responsibility, human solidarity and the common good.
2. *An effective communicator* speaks, writes and listens honestly and sensitively, responding critically in light of gospel values.
 - a. Listens actively and critically to understand and learn in light of Gospel values.
 - b. Reads, understands and uses written material effectively.
 - c. Presents information and ideas clearly and honestly and with sensitivity to others.
3. *A reflective, creative and holistic thinker* who solves problems and makes responsible decisions with an informed moral conscience for the common good.
 - a. Recognizes there is more grace in our world than sin and that hope is essential in facing all challenges.
 - b. Creates, adapts, and evaluates new ideas in light of the common good.
 - c. Thinks reflectively and creatively to evaluate situations and solve problems.
 - d. Makes decisions in light of gospel values with an informed moral conscience.
 - e. Adopts a holistic approach to life by integrating learning from various subject areas and experience.
4. *A self-directed, responsible, lifelong learner* who develops and demonstrates their God-given potential.
 - f. Applies effective communication, decision-making, problem-solving, time and resource management skills.
 - g. Examines and reflects on one's personal values, abilities and aspirations influencing life's choices and opportunities
 - h. Participates in leisure and fitness activities for a balanced and healthy lifestyle
7. *A responsible citizen* who gives witness to Catholic social teaching by promoting peace, justice and the sacredness of human life.
 - a. Acts morally and legally as a person formed in Catholic traditions.

Links to Fully Alive and Health and Physical Education:

Fully Alive: Theme 4: Growing in Commitment

- Examine the meaning of stress and strategies for handling it
- Be encouraged to use positive strategies for handling stress in their lives

Theme 3: Created Sexual: Male and Female

- Explore appearance, sexual attraction, and relationship from the perspective of adolescent growth and development

Health and Physical Education:

- Outline the possible negative consequences of substance use and abuse (e.g., fetal alcohol syndrome, effects of steroid use, accidents when drinking and driving)
- Identify those school and community resources that are involved in education about substance use and abuse, and those involved in preventing and treating substance abuse
- Describe causes and symptoms of stress and positive ways (as opposed to substance use) to relieve stress

- Apply the steps of a decision-making process to address age-specific situations related to personal health and well-being in which substance use or abuse is one of the factors

Suggestions for Accommodations:

- Provide opportunities to ‘pair-share’ or arrange for student to have a ‘study buddy’
- Arrange activity breaks to assist student to focus on instruction
- Review important vocabulary
- Provide checklists, outlines, organizers to assist in assignment completion
- Provide oral discussion before writing
- Clarify definitions, terms and vocabulary in assignments
- Make use of computer technology where possible
- Make expectations explicit

BLMs:

- [I. Categorization Chart \(for teacher\)](#)
- [II. Substance Cards \(black line master\)](#)
- [III. Substance Cards – Slang Words](#)
- [IV. Recording Chart – Understanding Concepts – Identification and Categorization](#)
- [V. “Things I Like To Do” black line master](#)
- [VI. “Why Do People?” \(questions and answers\)](#)
- [VII. “Negative Consequences of Substance Use and Abuse” sheet](#)
- [VIII. Recording Chart – Understanding Concepts – Negative Consequences](#)
- [IX. Facts Sheets](#)
- [X. Examples – People and Community Resources](#)
- [XI. Key information for teacher – Prevention and Treatment](#)
- [XII. Guidelines for culminating activity](#)
- [XIII. Rubric for culminating activity](#)

Sources:

Grade 8 Curriculum Support for Healthy Living Strand
OPHEA “Health and Physical Education” Grade 8, www.ophea.net

Additional Resources:

CAMH “Educating Students about Drug Use and Mental Health”

Catechism of Catholic Church: 1706 By his reason, man recognizes the voice of God which urges him "to do what is good and avoid what is evil." Everyone is obliged to follow this law, which makes itself heard in conscience and is fulfilled in the love of God and of neighbour. Living a moral life bears witness to the dignity of the person.

Church Documents: Life, especially human life, belongs to God; whoever attacks human life attacks God's very self. *Evangelium Vitae*, (The Gospel of Life), Encyclical Letter of Pope John Paul II, 1995

Websites:

www.school.net.ca/alcohol

www.virtual-party.org

www.ccsa.ca

www.eocca.ca

<http://sano.arf.org>

Substance Use and Addiction Grade 8

Lesson One DRUGS AND MY BODY

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Description:

- students use knowledge of different types of drugs and apply this information to their lives;
- students determine how stimulants, depressants and hallucinogens would affect their bodies

Materials:

- copy of substance abuse cards (BLM II and III);
- “Things I Like To Do” black line master (BLM V), one per student;
- chart paper,
- tape

Notes to Teacher: Adolescents face an overwhelming amount of information related to substance abuse. It is important to support the process of discovering and researching information and for them to formulate opinions and conclusions based on their investigations. This promotes the development of beliefs and accurate perceptions that are more meaningful and therefore more likely to be adopted. See BLMs for further supporting information and black line masters.

Learning Expectations:

1. **Ministry Expectations:** outline the possible negative consequences of substance use and abuse (e.g., fetal alcohol syndrome, effects of steroid use, accidents when drinking and driving)
2. **Catholic Graduate Expectations:** listens actively and creatively to understand and learn in light of Gospel Values; reads and understands and uses materials effectively; makes decisions in light of Gospel values with an informed moral conscience; adopts a holistic approach to life by integrating learning from various subject areas and experience; thinks reflectively and creatively to evaluate situations and solve problems
3. **Fully Alive:** Theme 3, Created Sexual: Male and Female, contains some information about the use of anabolic steroids and their effect on the male body

Assessment Opportunities:

- **Formative assessment:** Pencil and Paper Task to assess the students’ prior knowledge and skills with respect to categorization and effects of drugs.
- **Diagnostic assessment:** “3 – 2 – 1”; have students jot down 3 things they have learned about substance abuse; 2 questions they still have; 1 thing they will always remember

TEACHING / LEARNING STRATEGIES

- 1. Brainstorming:** ask all students to define the word “drug” (A drug is any substance, other than food, which when ingested, inhaled, absorbed or injected, changes the way the mind or body functions, or the way a person thinks, acts or feels)
- 2. Categorizing/Group Work:** draw columns on chart paper or blackboard for the three main categories of drugs – hallucinogens, stimulants, depressants; review with students the definitions of each of these headings (see BLM I); divide the class into groups of 3 or 4 students; give each group some of the substance abuse cards (BLM II and III); have each group in turn, tape a card under the appropriate heading; award 1 point for each correct answer; if a substance is placed under the wrong heading, the next group may choose to correct the answer for an additional point; an option would be to add current street names to the list (see BLM III)
- 3. Pencil and Paper Task:** distribute “Things I Like To Do” sheet (BLM V); ask students to fill out the sheet
- 4. Class Discussion:** share answers with whole class; discuss the quotation from *Evangelium Vitae*, make connection to Theme 3, Fully Alive, pp. 76-78, use of anabolic steroids

Optional Activities: this lesson acts as a review from Grade 7;
no optional activities are provided

BLMs:

[I. Definitions and Categorization Chart \(for teacher\)](#)

[II. Substance Cards \(black line master\)](#)

[III. Substance Cards – Slang Words](#)

[IV. Things I Like To Do chart](#)

Substance Use and Addiction Grade 8

Lesson Two

FROM MY POINT OF VIEW

[top](#)

Description:

- students explore the negative consequences of using certain substances through a cooperative learning activity and then communicate these negative consequences to their peers

Materials:

- copies of “Negative Consequences of Substance Use and Abuse” (BLM VII) sheet, one per student;
- copies of the rubric for presentations, one per group

Notes to Teacher: it is strongly suggested that Topic 3 “Handling Stress”, Theme 4, Fully Alive be taught in conjunction with this lesson (Teacher’s Guide pp. 115 – 119; Student Text pp. 118 – 124); see BLMs for supporting information and blackline masters

Learning Expectations:

- Ministry Expectations:** outline the possible negative consequences of substance use and abuse (e.g., fetal alcohol syndrome, effects of steroid use, accidents when drinking and driving)
- Catholic Graduate Expectations:** thinks reflectively and creatively to evaluate situations; works effectively as an interdependent team member; presents information and ideas clearly and honestly and with sensitivity to others

Assessment Opportunities:

- Formative assessment:** students complete “Negative Consequences of Substance Use and Abuse” sheet (BLM VII)
- Summative assessment:** students present information to their peers (see BLM VIII for rubric)

TEACHING/LEARNING STRATEGIES

- 1) **Review** with whole group, some of the negative consequences from Lesson 1
- 2) **Whole Group Discussion:** ask students “Why do people use drugs?” (see BLM VI); “What are the pros of getting involved in alcohol and drug usage? What are the benefits of NOT getting involved?”
- 3) **Jigsaw Activity:** divide class into groups of 6 (‘home groups’);
 - i. each person in the ‘home group’ will become an ‘expert’ on the consequences of using or abusing one particular substance (e.g., social and health related consequences for the use of alcohol during pregnancy);
 - ii. these ‘experts’ will come together to form an ‘expert group’ and use the “Facts Sheet” (BLM IX) and their own knowledge to determine the negative consequences of this particular substance;
 - iii. students record information in the graphic organizer “Negative Consequences of Substance Use and Abuse” (BLM VII)
 - iv. students return to their ‘home groups’ to share and record information from all the ‘experts’ in the same graphic organizer
- 4) **Whole Group Debriefing:** entire class shares information to ensure accuracy
- 5) **Group Presentation:** students work in their ‘expert groups’ to prepare a presentation highlighting the information they acquired about their topic and to share this information with younger students in the school; students present their information in a creative manner (e.g., newspaper article, TV commercial, drama presentation, poster campaign, morning announcement, power point presentation, etc.); presentations should include references to the role of God in our lives during difficult times (consult Philippians 4: 6-7 or James 1: 2-5); see BLM VIII for rubric

Optional Activities: the culminating activity in this lesson gives students different options to choose from in order to present their information in a creative way; therefore, no “optional activities” are included

BLMs:

- [VI. “Why Do People?” \(questions and answers\)](#)
- [VII. “Negative Consequences of Substance Use and Abuse” sheet](#)
- [VIII. Rubric for presentations](#)
- [IX. Facts Sheets](#)

Substance Abuse and Addiction Grade 8

Lesson Three

COMMUNITY COMPASS

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Description:

- students will identify school and community resources that are involved in prevention and treatment of substance use and abuse

Materials:

- map pins
- local community map
- phone book
- access to internet
- community information booklets

Notes to Teacher: it is suggested that the teacher read “Key Information for Teacher” (BLM XI) prior to start of lesson; see BLMs for supporting information and black line masters

Learning Expectations:

- Ministry Expectations:** identify local support groups and community organizations (e.g., public health offices) that provide information or services related to health and well-being; identify those school and community resources that are involved in education about substance use and abuse, and those involved in preventing and treating substance abuse
- Catholic Graduate Expectations:** respects the rights, responsibilities and contributions of self and others; reads and understands and uses materials effectively

Assessment Opportunities:

- Formative assessment:** active participation in classroom discussion

TEACHING / LEARNING STRATEGIES

- 1) **Whole Class Discussion:** ask students, “How do we know somebody is abusing a substance?”; then ask, “Who can we contact for assistance?”; write the headings “People” and “Community Resources” on chart paper or the blackboard; with the students’ help, list the supports under the two headings (see BLM X for ideas)
- 2) **Research:** using a variety of resources (e.g., phone book, internet, newspapers, brochures), invite students to research information on resources specific to their community; have them focus on prevention and treatment
- 3) **Mapping:** have students locate their community resource on a local map and label the resource; have them include the name, address, phone number as well as if this resource focuses on prevention, treatment or both
- 4) **Think-Pair-Share Activity:** ask students to think to quietly think about the importance of prevention and education (see BLM XI for information); after a brief period of time, have them turn to a partner and share their ideas; then have each group share with whole class
- 5) **Brainstorming:** with whole class, brainstorm activities that promote healthy alternative to substance abuse (e.g., hobbies, music, sports, volunteering, etc.)
- 6) **Culminating Activity:** students are given a choice of completing one of the three following activities.
- 7) **Brochure/Pamphlet:** students produce an information pamphlet or brochure indicating services available in their community for treatment of substance addictions, sources for information on drugs, educational programs and activities that prevent abuse and promote healthy alternatives. (See BLM XII)
- 8) **Technological Presentation:** students present the same information as above but use either Power Point, video, recording to share their information. (See BLM XII)
- 9) **Dance or Drama Presentation:** students present the same information as above but use creative dance or drama presentation to share their information. (See BLM XII)

Optional Activities: there are no optional activities in this lesson since choice is given in the culminating task

BLMs:

[X. Supporting information for teacher – People and Community Resources](#)

[XI. Supporting information for teacher – Prevention and Treatment](#)

[XII Guidelines for culminating activity](#)

[XIII. Rubric for culminating activity](#)

BLM I

Categorization Chart:

Stimulants	Depressants	Hallucinogens
caffeine	wine	LSD
dexedrine	beer	mushrooms
cocaine	whisky	PCP
crack	sleeping pills	peyote
nicotine	tranquilizers	ecstasy
diet pills	glue gasoline	ketamine
	heroin	

Substance Cards

Caffeine	Wine	LSD	Marijuana
Dexedrine	Beer	Mushrooms	Hashish
Cocaine	Whisky	PCP	Hash oil
Crack	Sleeping pills	Peyote	Chronic
Nicotine	Tranquilizers	Ecstasy	Ganja
Diet pills	Glue	Ketamine	Sensimilla
	Gasoline		Hydro
	Heroin		Homegrown

BLM III

Substance Card - Slang Words

Stimulants	Depressants	Hallucinogens
eight ball	smack	Acid
Coke	horse	mushrooms
Mickey	mud	white lightning
suicide pack	brown sugar	blue heaven
poverty pack	black tar	sugar cube
two/four	lady	buttons
Pounder	junk	pane
40's		mini mics
6 pack		beans
Juice		fagollis
feight ball		mesc
Booze		cactus
Ice		cids
Crank		hog
Bumblebees		angel dust
black beauties		killer weed
Pep		pot
Hornets		ganja
Uppers		grass
Speed		hemp
snow blow		weed
Crack		spliff
Rock		toke
Freebase		shake
Snowbird, powder		hash oil
nose candy		khat
Crumbs		philly

BLM V

Why Do People Use Drugs?

In the left column, list reasons why people use the drug that you have been assigned. In the middle column, list alternatives that people could use for the same reason. In the right column, list reasons for not using the drug.

Drug Topic: _____

Group Members: _____

Why Use Drugs?	Alternatives to Drug Use	Why Not to Use Drugs

Gr. 8 – Health and Physical Education,

Reasons for Drug Use (answer sheet)

<p>Over the Counter Drugs</p> <ul style="list-style-type: none"> — to fall asleep — to wake up — to lose weight — to gain weight — to relieve headache — to relieve backache — for an upset stomach — for a cold — for a toothache — for muscle pain 	<p>Use of Tobacco</p> <ul style="list-style-type: none"> — lose weight — relax — to be like friends — to experiment — to look older — to be like people — can't quit — for excitement — to defy parents
<p>Use of Alcohol</p> <ul style="list-style-type: none"> — to relax — to forget problems — when depressed — like the taste — to be more popular — to feel more mature — to copy people in the media — enjoy the “high” from alcohol — aids digestion — increase sexual ability — help a person sleep — stay warm 	<p>Reasons why people chose not to drink</p> <ul style="list-style-type: none"> — some people don't like the taste — some people choose more active ways to relax such as sports, dancing to music — some people do not feel right about breaking the law — parents would disapprove — religious reasons — some people are concerned about their health and would not introduce alcohol into their bodies — some people just feel it's wrong to drink

Gr. 8 – Health and Physical Education, OPHEA

BLM VII

Negative Consequences of Substance Use and Abuse

	Alcohol During Pregnancy	Nicotine	Steroids	Marijuana	Alcohol	Rave Drugs
Social Consequences						
Health-Related Consequences						

Gr. 8 – Health and Physical Education, OPHEA

Facts Sheets (Adapted from OPHEA, Health and Physical Education document, Grade 8)

BLM IX

Cannabis

Marijuana, hashish and hashish oil are all products of the hemp plant *Cannabis sativa*, a hardy annual that grows in both tropical and temperate climates. The chief ingredient in the cannabis plant — the one that alters mood and perception — is called delta-9-tetrahydrocannabinol (THC).

Although THC and other cannabis constituents have been tested for treatment of asthma, epilepsy, glaucoma, anorexia nervosa and nausea caused by anti-cancer therapy, so far there are no generally accepted medical uses. Cannabis, however, is the most widely used illegal psychoactive drug in North America.

Marijuana comes from the flowering tops and leaves of the dried plant and frequently contains seeds and stems. It ranges in colour from greyish-green to greenish-brown, and in texture from a fine substance resembling the herb oregano to a coarse substance that looks like tea. It is smoked in pipes or in hand-rolled cigarettes called “joints.”

Hashish, known as “hash” is the dried, caked resin from the flowers and leaves of the female plant. It usually contains a higher THC concentration than marijuana, and is therefore more potent. It is sold in either soft or hard chunks and ranges in colour from light or medium brown to nearly black. Hash is usually mixed with tobacco and smoked in pipes or joints.

The most potent preparation other than pure THC is hash oil, a reddish-brown or green oily extract of cannabis, also called weed oil or honey oil on the street. Hash oil is usually dropped onto the end of a regular cigarette, or wiped onto the paper before it is rolled into a marijuana joint.

Tobacco

Today, tobacco use is considered Canada’s greatest public health problem. Tobacco smoke is made up of thousands of components, the main ones being nicotine, tar and carbon monoxide. Nicotine is the addictive agent in tobacco, tar can cause cancers and bronchial disorders, and carbon monoxide contributes to heart disease.

Nicotine is a powerful mood-altering substance that reaches the brain quickly when you smoke a cigarette. Nicotine is also extremely toxic.

Tar is not a single ingredient; it is a dark sticky combination of hundreds of chemicals including poisons and cancer-causing substances. Carbon monoxide (CO), the poisonous emission from automobile engines, is also formed when tobacco is burned. While nicotine causes the heart to work harder, CO deprives it of the extra oxygen this work demands.

Among chemicals in cigarette smoke are acids, glycerol, glycol, alcohols, aldehydes, ketones, aliphatic and aromatic hydrocarbons, phenols, and such corrosive gases as hydrogen cyanide and nitrogen oxide, as well as a heavy dose of carbon monoxide.

Steroids

Steroids include a wide variety of chemicals found in both plants and animals — for example cholesterol, toad poisons, sex hormones and plant toxins. One member of the steroid family are the anabolic steroids which are a chemically manufactured version of the male sex hormone, testosterone. Anabolic steroids have both anabolic (tissue building) and androgenic (masculinizing) effects. They are used primarily in veterinary medicine but they also have medical uses in humans. Athletes and body builders use anabolic steroids in the belief that steroids will enhance performance, and increase muscle bulk and body size. Increasingly, adolescents use steroids to “improve” their appearance. Dissatisfaction with body image particularly the perception of being too small or not muscular enough is common in individuals who use anabolic steroids. This disorder has been called “reverse anorexia nervosa.” Despite the fact that there is little compelling evidence that anabolic steroids enhance athletic performance, the general public and young athletes in particular are often convinced that these drugs can improve physique and athletic performance. While it is illegal to sell anabolic steroids in North America, possession of these drugs is not illegal. They can be readily obtained in gymnasiums or other weightlifting settings.

Cocaine

Cocaine is a powerful central nervous system (CNS) stimulant that heightens alertness, inhibits appetite and the need for sleep, and provides intense feelings of pleasure. It is prepared from the leaf of the *Erythroxylon coca* bush, which grows primarily in Peru and Bolivia.

Pure cocaine was first extracted and identified by the German chemist Albert Niemann in the mid-19th century, and was introduced as a tonic/elixir in patent medicines to treat a wide variety of real or imagined illnesses. Later, it was used as a local anesthetic for eye, ear and throat surgery and continues today to have limited employment in surgery.

Because of its potent euphoric and energizing effects, many people in the late 19th century took cocaine. In the 1880s, the psychiatrist Sigmund Freud created a sensation with a series of papers praising cocaine’s potential to cure depression, alcoholism and morphine addiction.

Skepticism soon replaced this excitement, however, when documented reports of fatal cocaine poisoning, alarming mental disturbances and cocaine addiction began to circulate. According to information collected in 1902, 92 percent of all cocaine sold in major cities in the United States was in the form of an ingredient in tonics and potions available from local pharmacies.

In 1911, the Canadian government legally restricted cocaine use. Cocaine's return to popularity, beginning in the late 1960s, coincided with the decreased use of amphetamines.

Drug Use and Pregnancy

Alcohol

Many times, we do not think of alcohol as a drug — largely because its use is common for both religious and social purposes in most parts of the world. It is a drug, however, and compulsive drinking in excess has become one of modern society's most serious problems.

The effects of drinking do not depend on the type of alcoholic beverage — but rather on the amount of alcohol consumed on a specific occasion. Pregnant women who drink risk having babies with fetal alcohol effects known as Fetal Alcohol Syndrome or FAS. The most serious of these effects include mental retardation, growth deficiency, head and facial deformities, joint and limb abnormalities, and heart defects. While it is known that the risk of bearing a FAS- affected child increases with the amount of alcohol consumed, a safe level of consumption has not been determined.

Opioids (“pain killers,” cough suppressants, “nerve pills”)

Opioid-dependent women are likely to experience complications during pregnancy and childbirth. Among their most common medical problems are anemia, cardiac disease, diabetes, pneumonia and hepatitis. They also have an abnormally high rate of spontaneous abortion, breech delivery caesarean section and premature birth. Opioid withdrawal has also been linked to a high incidence of stillbirths. Infants born to heroin-dependent mothers are smaller than average and frequently show evidence of acute infection. Most exhibit withdrawal symptoms of varying degrees and duration. The mortality rate among these infants is higher than normal.

Tobacco

Tobacco use during pregnancy increased the risk of such complications as stillbirths, low birth weight, premature delivery, miscarriage and Sudden Infant Death Syndrome. Women who smoke may also experience reduced fertility.

Benzodiazepine (“nerve pills, anxiety pills, medication for sleep disorders)

Use of benzodiazepines during pregnancy may lead to withdrawal symptoms in the newborn. They are also passed on through breast milk and should be used with caution, if at all, while nursing. Consult a physician about the safety of medications during pregnancy.

Amphetamines

Little research has been done in humans into the effects of amphetamine use on pregnancy and fetal growth. Experiments with animals suggest, however, that use during pregnancy may produce adverse behavioural effects, such as hyperexcitability, in

offspring. Among humans, several cases have been documented of withdrawal symptoms among newborn infants of mothers using amphetamines.

Sedative/Hypnotic

Studies link certain sedative/hypnotic drug use with birth defects and behavioural abnormalities in babies. Breathing difficulties have also been reported among infants, as have such withdrawal symptoms as irritability, disturbed sleep and feeding difficulties.

Cannabis

Cannabis use during pregnancy can retard fetal growth and result in mild withdrawal symptoms in the newborn. Experiments with animals also suggest that prenatal exposure retards the baby's growth and behavior.

Cocaine

There is little research on cocaine effects on pregnant women or the fetus. One preliminary report suggests that its tendency to raise blood pressure may increase the risk of obstetrical complications. Studies of the effects of crack use on offspring have been reported, but the possible contributions to these effects of other factors, including use of other drugs — such as alcohol, cannabis and tobacco is difficult to assess.

LSD

There appears to be a higher risk of spontaneous abortion and congenital abnormalities in babies born to women who regularly used LSD during pregnancy. Studies with LSD use and chromosome damage have yet to be confirmed.

PCP

Little is known about PCP's effects on pregnancy. Since the drug passes through the placenta, however it may cause the signs of intoxication often observed for a few days after birth in babies born to PCP users. The drug is also excreted in the milk of nursing mothers.

Alcohol, Other drugs and driving

Most people know that driving while impaired by alcohol is against the law in Canada. Not so many realize that driving while impaired by any drug is a crime. Driving while impaired whether by alcohol, by other drugs, or by one or more other drugs combined is a major health and safety problem. It is also by far the largest single criminal cause of death and injury in Canada. Driving requires attention, judgement, perception, decision-making, physical reaction and the ability to coordinate these skills. Drivers under the influence of any drug that alters behavior, or mood, may be dangerous behind the wheel or other complex machinery.

The Law

It is a crime in Canada under the Criminal Code of Canada to operate any motor vehicle, boat, railway equipment or aircraft while ones ability to do so is impaired by alcohol or other drugs. More charges are laid for drinking and driving than for any other federal offense. A convicted impaired driver has a criminal record. It is also a Criminal Code offense to:

- Drive if you have more than 80 milligrams of alcohol in 100 millilitres of your blood (0.08 % BAC).
- Refuse to provide a breath, or in some cases a blood sample, unless you have an acceptable excuse for your refusal:
 - Drive if you are disqualified from doing so by either a federal court order or an accompanying provincial suspension.

Minimum Federal Penalties under the Criminal Code:

First Offense: Three-month driving prohibition and \$300 fine.

Second Offense: Six-month driving prohibition, \$300 fine and 14 day jail sentence

Third Offense: One-year driving prohibition, \$300 fine and 90 day jail sentence.

Fourth and Subsequent: Same as third offense.

Besides Federal offenses, there are Provincial Penalties. In Ontario, an impaired driver's consequences under the Highway Traffic Act is as follows:

First Offense: One-year suspension and remedial measures requirement.

Second Offense: Three-year suspension and remedial measures requirement.

Third Offense: Lifetime license suspension (reducible to 10 years if certain conditions are met).

Fourth and Subsequent: Lifetime license suspension.

Drivers who are caught while their license is suspended for a Criminal Code conviction will have the vehicle they are driving impounded and face fines from \$5,000.00 to \$50,000.00.

Rave Drugs

Individuals who use rave drugs do not typically drink alcohol while using the drugs. Instead, they typically drink a lot of water. They may also have baby pacifiers, which they use to keep from grinding their teeth. At the present time, the media has focussed much attention on the rave scene specifically recent deaths of students who have died while using various rave drugs. During the spring of 2000, there have been many articles in the media about rave culture and the rave drugs. All rave drugs are created in home labs, therefore the quality and content of the drug will vary. The potency of the drug and the effects that it will have on the individual vary greatly. For this reasons, the rave drugs can be very dangerous.

Ecstasy

Also called MDMA-a methylenedioxymethamphetamine, ecstasy can cause the user to feel relaxed, energetic, happy, exhilarated, warm, loving and sensitive. The user may also feel panic anxiety, nausea, have vomiting, be unable to sleep, have jaw clenching, become overheated, have seizures, have an irregular heartbeat and/or a stroke. The user may feel “spaced out” for a period of about 24 hours after use because the use of ecstasy depletes serotonin. The user may feel lethargic, depressed and/or moody. The long-term effects of use have not yet been established. Liquid ecstasy acts on the body in very similar ways to ecstasy, and has become known as the date rape drug.

Crystal

Crystal is a methamphetamine (see amphetamines above). It is also known as crystal meth, cat and ice. Its use will cause an adrenalin rush with feelings of high energy, well-being, sensuality and sexual self-confidence. Similar to ecstasy, the user will feel nauseous and have vomiting, and experience inability to sleep, jaw clenching, irregular heartbeat, overheating, seizure and/or stroke. The long-term effects of use are weight loss, paranoia, aggressiveness, extreme fatigue and psychological dependency.

Ketamine

Ketamine is clinically known as ketamine hydrochloride. On the street it is called special K, Vitamin K, Ket and K. Use of ketamine causes the individual to have an “out of body experience” and a speedy rush. The drug is fast-acting general anaesthetic which has hallucinogenic and pain-killing qualities. The user will lose motor control, have temporary mem loss, numbness, drowsiness and nausea. The user may also cause severe injury to Qv(thout being aware of it, since ketamine blocks normal thinking patterns and sensory input.

Rohypnol

Rohypnol is a benzodiazepine (see benzodiazepine above) called Flunitrazepam. It is known on the street as rophies, ropies, roofies, R-2, Mexican Valium, rip and rope. The user will lose his/her inhibitions and will often use this drug in combination with other drugs to soften the effects. The user will have amnesia and enhanced feelings of drunkenness.

BLM X

People	Community Resources
parent friend's parent, relative coach teacher clergy school counselor police friend older sibling	Centre For Addiction and Mental Health Health Department Community & Recreation Centres Clubs (e.g., Guides/Scouts, Boys & Girls Clubs, etc.) Police Department Community Health Centre YMCA / YWCA Kids' Help-Line Churches, temples, mosques, synagogues

Other Examples:

Gr. 8 – Healthy Living Curriculum Support, Durham Health Dept./D.C.D.S.B.

BLM XI

Information and Resources can also be obtained from:

- Centre for Addiction and Mental Health; Heart and Stroke Foundation of Ontario;
- Health Canada; Lung Association;
- OPHEA;
- The Canadian Cancer Society.

Prevention of substance use and abuse encompasses much more than those programs directly related to drugs. There are a variety of programs that offer healthy alternatives to drug use and therefore should be considered as community resources with a role in the prevention of substance abuse.

Programs that help young people to reduce stress, that help to relieve the pressures of their fast-paced life and make them feel good about

themselves are valuable resources. Community programs that promote the types of activities listed below play a significant role in substance abuse prevention:

- | | |
|--|---------------------|
| © hobbies | © games |
| © music | © fun, laughter |
| © reading | © talk |
| © skill development | © physical activity |
| © sports | © team building |
| © goal-setting | © self-esteem |
| © volunteering | © healthy eating |
| © friendships | © socializing |
| © relaxation skills | © nature |
| © meaningful causes, e.g., environment | |

Treatment

There are a variety of people and community agencies available to young people experiencing problems with substance use and abuse. Each community is unique in the services it offers and it is important to know what is available in your own community.

- | | |
|-------------------|--|
| Parent | Health Department |
| Trusted adults | Centre For Addiction and Mental Health |
| | Community & Recreation Centres |
| Coach | Clubs (e.g., Guides/Scouts, Boys & Girls |
| Teacher | Clubs, etc.) |
| Clergy | Police Department |
| School counsellor | Community Health Centre |
| Police | YMCA/YWCA |
| Friend | Public Library |
| | The Lung Association |
| | Churches, temples, mosques, synagogues |

Adolescence is a time of change and discovery. With these changes most young people experience turmoil, peer pressure, a desire to be part of a group and an increase in risk taking behaviour.

Unfortunately drugs are often seen as an integral part of dealing with the teen experience.

Drug use remains a problem among young people. After a lengthy period of decline in drug use during the 1980's, the 90's have seen a resurgence of adolescent drug use.

The following chart provides an overview of student drug use in Ontario in 1999.

Rates of Past Year Drug Use by Gender and Grade Level, 1999

Drug	Total	Males	Females	7	9	11	13
Alcohol	67.5	70.7	64.2	39.7	63.1	82.0	83.0
Cigarettes	29.2	29.8	28.6	7.4	27.8	41.7	38.0
Cannabis	29.3	33.5	25.1	3.6	25.5	48.1	43.3
Other Hallucinogens	13.8	16.2	11.4	0.9	10.2	22.7	24.7
LSD	6.8	8.0	5.5	1.2	6.8	10.7	6.9
NM Stimulants	7.8	6.1	9.5	1.8	6.9	10.7	12.8
M Barbiturates	12.3	12.6	12.0	11.1	11.1	13.6	9.4
M Stimulants	6.8	7.4	6.2	4.7	6.9	8.8	4.3
Methamphetamines	5.3	6.6	4.0	1.5	3.5	8.2	8.4
Ecstasy (MDMA)	4.4	4.5	4.2	0.6	2.3	9.8	7.8
Cocaine	3.7	4.2	3.2	2.5	3.2	5.4	6.4
Solvents	7.1	6.1	8.1	12.1	8.4	4.9	1.4

NM Barbiturates	4.4	4.1	4.7	2.5	3.2	7.0	4.9
Crack	2.4	2.9	1.8	0.6	3.0	3.6	1.1
M Tranquillizers	3.3	3.5	3.1	1.9	3.8	3.1	4.2
PCP	3.0	3.2	2.8	0.7	3.1	5.4	3.0
Heroin	1.9	2.4	1.3	0.5	2.5	1.8	1.6
NM Tranquillizers	2.4	2.3	2.5	†	1.7	1.3	5.8
Glue	3.6	3.7	3.5	6.8	4.3	2.0	1.2
Ice (crystal meth.)	1.4	2.0	0.8	†	1.1	3.2	0.0

Note: NM = nonmedical use; M = medical use; † estimated less than 0.5%. Addiction Research Foundation, (1999) Ontario Student Drug Use Survey, Executive Summary

- The chart shows significant increases in drug use as age increases except for inhalants which show a decrease in use with increased age.
- It is important that teens know that the decision to use drugs, although it may appear to have a desirable effect at the time, can have many serious results. Some of these negative consequences are considered below.

Health Effects

- The short term health effects of substance use can include headaches, irregular heart beat, tremors, sleeplessness, upset stomach, cramps, vomiting, anxiety, chest pains, difficulty breathing, visual disturbances cough, diarrhea, drowsiness.,.
- Because of the impact of drugs on the Central Nervous System a user's memory, attention span, coordination, judgement, speech, balance, reflexes, concentration, problem-solving and decision-making skills can all be impaired.
- Substance abuse can cause serious and permanent damage to the heart, lungs, liver, kidneys, stomach, reproductive system and the brain. Users also have an increased risk of developing life threatening infections, such as HIV and hepatitis, from dirty needles.
- Drug overdose and overuse can be fatal.

Reproductive Health

- Many substances taken into the body of a pregnant woman, enter the blood stream and from there are carried to the unborn baby.
- Alcohol, tobacco and other drugs can seriously harm an unborn child. The consequences can include birth defects, low birth weight, premature birth, increased risk of stillbirth and the baby may be born addicted to the drug the mother is using. There can be a higher risk of Sudden Infant Death Syndrome.
- Drugs can also interfere with fertility. For example they can interfere with a woman's menstrual cycle and a man's sperm production.
- Studies have shown that hormones in both males and females can be seriously affected, e.g., in males testosterone decreases by 25-35% within 3 hours after smoking cannabis.

Fetal Alcohol Syndrome (FAS)

- FAS refers to a set of alcohol-related disabilities associated with the use of alcohol during pregnancy.
- Babies with FAS often have facial abnormalities, e.g., an elongated and flattened face; growth deficiency, e.g., low birth weight, failure to gain weight; and central nervous system dysfunction, e.g., impaired fine motor skills, poor eye-hand coordination.
- In Canada, FAS is one of the leading causes of preventable birth defects and developmental delay in children.

Second-Hand Smoke

- Second-hand smoke has been linked to an increased risk of heart disease and cancer. Exposure increases heart rate and blood pressure, increases the amounts of carbon monoxide in the blood which reduces the blood's ability to carry oxygen, aggravates asthma and increases the incidence of colds, flu, ear infections, pneumonia and bronchitis. Exposure also decreases the blood supply and oxygen to a fetus.

Steroids

- Steroids are synthetic chemicals that imitate the natural male hormone, testosterone.

There is an alarming rise in the use of anabolic steroids. They are becoming increasingly popular with teenagers in an attempt to make their bodies bigger and improve their athletic ability. Initially they appear to help build muscle and increase strength and speed. However, over the long term, they hurt the athlete's ability. They also can stunt growth in teenagers by permanently stopping the lengthening of bones.

- They are usually taken orally or by injection and they are stored in the body for weeks.
- Steroids are legally sold only through a doctor's prescription. However, only about 20% of steroids are sold legally, the other 80% are sold illegally on the 'black market'.
- Steroids are dangerous and addictive.
- They can have serious effects on the body:
 - increased cholesterol
 - decreased sperm production
 - liver damage
 - decreases endurance
 - longer time for injuries to heal
 - damage to heart, lungs, kidneys, muscles, circulatory, reproductive and nervous systems
 - personality changes, irritability, moodiness
 - harms immune system
- Because anabolic steroids are a male hormone, women who take them develop a deeper voice, facial hair and even chest hair. Breasts shrink and permanent damage can be done to the reproductive system.

Addiction

- Most drugs are highly addictive. A person can very quickly become physically and psychologically dependent on a drug.
- Young people who start off using drugs as 'recreation', a way to relieve stress, have fun with their friends and feel good, can very quickly become hooked and dependent on the drug.
- A drug can become the entire focus of a person's life. Old interests, goals and relationships are replaced with a need to get high and stay high.
- Some substances, like cocaine, are so addictive that within a few weeks a person can become enslaved to an addiction that completely controls his/her life, that consumes all his/her money, time and energy.

Legal Consequences

- Offences related to drugs are usually dealt with very seriously by the courts.
- Sharing or selling cannabis or other restricted substances to anyone is considered 'trafficking' by the law and can lead to arrest and criminal charges.
- Crimes related to making, smuggling and selling controlled substances cost society billions of dollars every year. Many more millions are spent fighting

crimes committed by users involved in an array of illegal activities in order to get money to support their habit.

- Police services spend much of their time and resources fighting drug use and related crimes. An estimated 30-50% of crimes are alcohol related.
- It is a crime in Canada to operate any motor vehicle while one's ability is impaired by alcohol or other drugs. More charges are laid for drinking and driving than for any other federal offence and a convicted impaired driver will have a criminal record.
- Providing alcohol to an underage or intoxicated person is also a criminal offence.

Economic

- Smoking is the most preventable cause of disease and early death. It causes 40,000 deaths each year in Canada.
- Health care costs related to tobacco, alcohol and other controlled C substances are astronomical. Tobacco alone costs Canadians more than a billion dollars a year to treat tobacco related illness.
- Drug use costs employers millions of dollars every year due to lost productivity, increased medical claims and accidents.
- There is also a tremendous cost to society related to motor vehicle crashes, drownings, falls and other injuries that occur as a result of impaired judgement while on drugs. Alcohol is involved in 30-40% of all falls, drownings and fires.

Substance Abuse and Driving

- Motor vehicle crashes are the #1 killer of those under 25. Driving while impaired, whether by alcohol or other drugs is a major health and safety problem. It is also the largest criminal cause of death and injury in Canada. Since driving involves such basic skills as attention, judgement, perception, decision-making, physical reaction, and coordination, drivers under the influence of any behaviour or mood altering drug present a road safety hazard.
 - According to one study, one of every three people injured in car or motorcycle crashes had been smoking marijuana.
 - Alcohol is the most widely used drug, and the one most often linked to motor vehicle crashes. Alcohol is involved in almost 45% of all motor vehicle deaths.
 - In the graduated licensing system new drivers must maintain zero blood alcohol concentration. A breach of this would result in a license suspension and a fine.
- Environmental Consequences**
- A negative consequence that is not always recognized is the environmental impact of tobacco growing and manufacturing.
 - Tobacco growth and manufacturing negatively impacts the environment in a number of ways, e.g., soil depletion, de forestation.

Guidelines for Culminating Activity

As Grade 8 students, you may have experienced peer pressure, the effects of media and stress in your lives as they relate to substance use and abuse. Using your experiences and the knowledge you have acquired in this unit, how can you help others? One of the ways you can help is by sharing your knowledge and skills with other intermediate students.

The purpose of this assignment is for you to create a resource booklet for other youth. Your booklet should include:

1. The negative consequences of substance use and abuse.
2. The support groups and community services that can help.
3. Suggestions on how to make informed decisions about drug use.
4. Positive alternatives to substance use (e.g., stress relievers).

Grade 8 – Health and Physical Education - OPHEA

Culminating Activity Rubric

Category	Level 1 50 - 59%	Level 2 60 – 69%	Level 3 70 – 79%	Level 4 80 – 100%
KNOWLEDGE / UNDERSTANDING • Student understands negative consequences of substance use and abuse.	• Demonstrates limited understanding of the negative consequences of substance use and abuse SELF____ TEACHER____	• Demonstrates some understanding of the negative consequences of substance use and abuse SELF____ TEACHER____	• Demonstrates understanding of the negative consequences of substance use and abuse SELF____ TEACHER____	• Demonstrates thorough understanding of the negative consequences of substance use and abuse SELF____ TEACHER____
KNOWLEDGE / UNDERSTANDING • Student identifies information school community resources.	• Identifies limited information on school/community resources SELF____ TEACHER____	• Identifies some information on school/community resources SELF____ TEACHER____	• Identifies information on school! community resources SELF____ TEACHER____	• Thoroughly identifies information on school/community resources SELF____ TEACHER____
KNOWLEDGE / UNDERSTANDING • Student demonstrates understanding of the causes of stress and the positive ways to relieve it.	• Demonstrates limited understanding of the causes and symptoms of stress and positive ways to relieve it SELF____ TEACHER____	• Demonstrates some understanding of the causes and symptoms of stress and positive ways to relieve it SELF____ TEACHER____	• Demonstrates understanding of the causes and symptoms of stress and positive ways to relieve it SELF____ TEACHER____	• Demonstrates thorough understanding of the causes and symptoms of stress and positive ways to relieve it SELF____ TEACHER____
COMMUNICATION • Student communicates information.	• Communicates information and ideas with limited clarity SELF____ TEACHER____	• Communicates information and ideas with some clarity SELF____ TEACHER____	• Communicates information and ideas with clarity SELF____ TEACHER____	• Communicates information and ideas with a high degree of clarity SELF____ TEACHER____

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