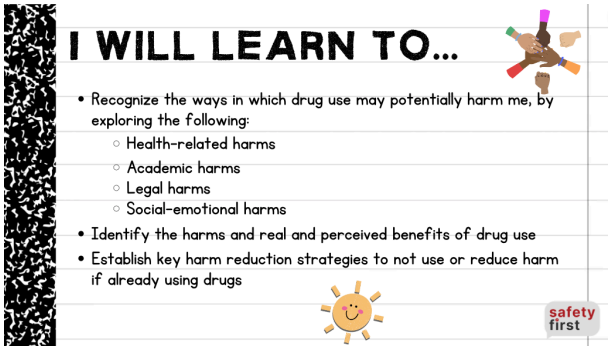
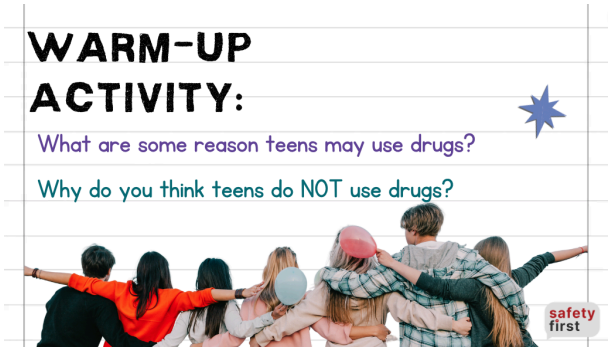
Lesson 2: Keeping You Safe, Reducing Your Harm: An Overview
Talking Points and Slide Chart

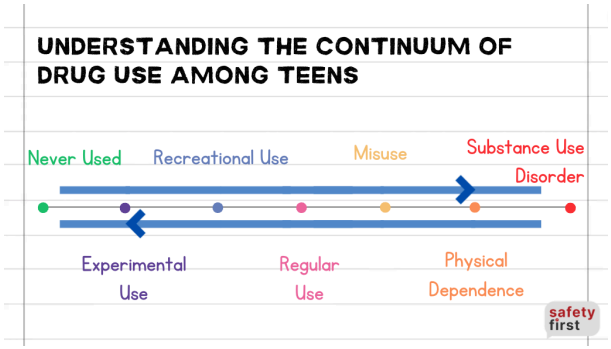


Slide	Image	Talking Points
1		• Hi everyone, let's start our second lesson of Safety First, called "Keeping You Safe, Reducing Your Harm: An Overview."

Lesson 2: Keeping You Safe, Reducing Your Harm: An Overview

2		(Tell students): ● Today, we will be learning about different ways drugs could potentially be harmful; like health-related harms, academic harms, or legal harms, and how best to keep you safe from drugs. ○ (Educator note): Read slide (Ask students): ● Any questions?
3		(Tell students): ● For our warm-up activity, on a piece of paper brainstorm 3-5 reasons to answer the questions: "What are some reasons teens may use drugs?" and "Why do you think teens do not use drugs?" ● (Teacher note): Allow students to brainstorm and express their ideas. Students could rank their reasons in order and possibly memorialize their ideas on poster paper or sticky notes. ● After students write down their ideas, have a discussion. Some reasons youth use also include the following: ○ Misperceptions and misunderstanding of drugs ○ Marketing ○ Flavors ○ Peer pressure and peer use ○ Lack of education ○ Stress, anxiety and depression ● Explain to students that reasons for use will be discussed throughout the lessons.

Lesson 2: Keeping You Safe, Reducing Your Harm: An Overview

4		(Tell students): ● It is important to note that there is a spectrum of drug use and everyone falls somewhere on the spectrum. Below are general definitions to give you an idea of what the continuum looks like. ● (OPTIONAL ACTIVITY): Ask the students to define each stage in their own words before giving them the actual definition. ● The stages can be defined as: ○ **Never Used**: Has not used or tried the particular drug. ○ **Experimental Use**: Tried the drug once or twice and never continued, or tried once or twice and are unsure if they are going to use again. ○ **Recreational Use**: Uses drugs once in a while (such as at a party or social gatherings). ○ **Regular Use**: Uses drugs regularly (ex. every Saturday after practice). ○ **Misuse:** Uses a substance for a purpose not consistent with legal or medical guidelines (ex. not how the drug is meant to be used). ○ **Physical Dependence**: A condition in which a person takes a drug over time, and unpleasant physical symptoms occur if the drug is suddenly stopped or taken in smaller doses. ○ **Substance Use Disorder:** Substance use disorder is the medical term used to describe a pattern of using a substance (drug) that causes significant problems or distress. ● Substance use disorder is a cluster of physiological, behavioral, and cognitive symptoms associated with the continued use of substances despite substance-related problems, distress, and/or impairment, such as impaired control and risky use. ● We will discuss more about physical dependence and substance use disorder in lesson 3. ● People also may not move linearly along the line: they may jump from part of the spectrum to another, and/or they may be at different points for different substances. ● Throughout our lessons, we will discuss the importance of not using and stopping if you are using. We will also discuss alternatives to drug use to stay healthy, and ways to keep you and your friends safe

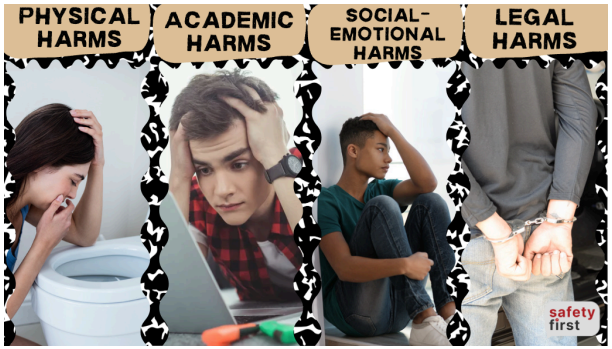
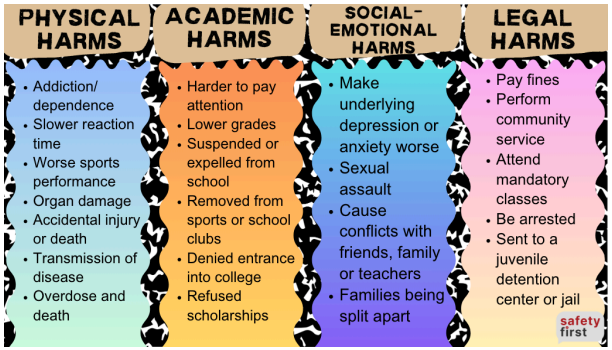
Lesson 2: Keeping You Safe, Reducing Your Harm: An Overview

		if you do use drugs. • We want to acknowledge that some may choose to use drugs, despite information about the risks, so finding safer ways to use, by cutting back, using less harmful drugs or lowering dosages, even seeking resources and professional help for stopping, is critical to understand. • (Educator note): Have students copy the 7 stages (in order) in their notebooks/ on a piece of paper OR draw the continuum on the board for the class to see. References: • https://meridianpsychiatricpartners.com/drug-misuse-abuse-and-addiction-whats-the-difference/ • https://www.turnbridge.com/news-events/latest-articles/recreational-drug-use-vs-addiction/ • https://www.hss.edu/conditions_understanding-addiction-versus-dependence.asp#:~:text=Physical%20dependence%20is%20when%20the,as%20a%20chronic%2C%20treatable%20illness. • https://www.cancer.gov/publications/dictionaries/cancer-terms/def/physical-dependence • https://www.hopkinsmedicine.org/health/conditions-and-diseases/substance-abuse-chemical-dependency • https://www.apa.org/topics/substance-use-abuse-addiction

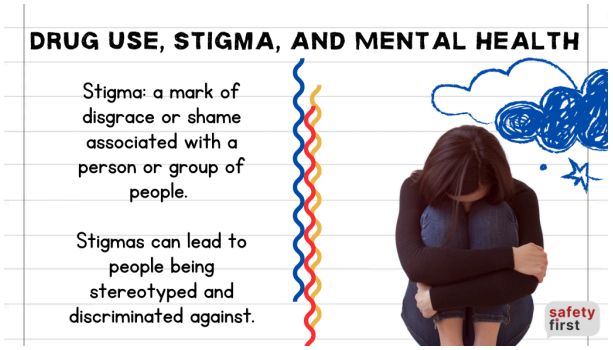
5		(Educator note):
		• Have students refer back to the continuum in their notebooks or on the board.
		
		(Tell students):
		• Here's an activity to help us understand the continuum of drug use. Read each one of Michelle's behaviors and place them on the continuum.
		  ○ **A:** "Michelle was curious about what MDMA (or molly) feels like, so she took some at a party when offered."
		  ○ **B:** "She only drinks alcohol when she is with her friends, and never when she has a soccer game the next day."

		○ **C:** “Michelle has friends who use drugs, but she’s not interested.” ○ **D:** “She only smokes cigarettes on Saturdays when hanging out with her boyfriend.” ○ **E:** “Michelle always gets headaches when she misses her morning coffee.” ○ **F:** “Her drug use has led to a big drop in her grades and strains her friendships, but she continues to use despite these consequences.” ■ Answers: C (No use) > A (experimental use) > B (recreational use) > D (regular use) > E (physical dependence) > F (substance use disorder) ● (Educator note): have students come up with their own example of "misuse" for Michelle
6		(Tell students): ● Despite the various reasons for using, it is important to note that all drugs have both potential harms and some real and perceived benefits. However, it is the harms that tend to get the most attention. (Ask students): ● Drug-related harms for teens generally break down into four big areas. Can anyone guess what they are? ● Take a few responses, or if time permits, have students turn to a neighbor and discuss.

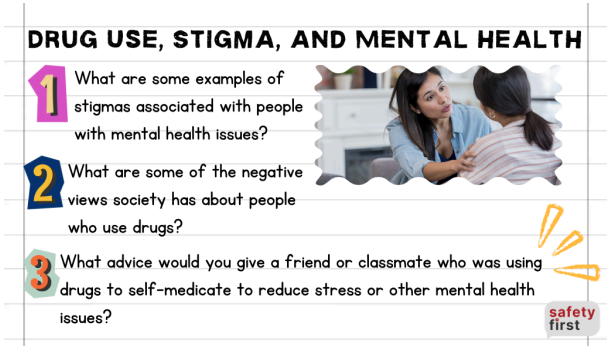
Lesson 2: Keeping You Safe, Reducing Your Harm: An Overview

7		(Tell students): ● The four areas of drug-related harms are: ● physical harms, academic harms, social-emotional harms, and legal harms
8		● Have students compare their predictions to the answers. ● Physical health harms ○ Addiction/ dependence ○ Slower reaction time ○ Worse sports performance ○ Organ damage ○ Accidental injury or death ○ Transmission of disease ○ Overdose death ● Academic harms ○ Harder to pay attention ○ Lower grades ○ Suspended or expelled from school ○ Removed from sports or school clubs ○ Denied entrance into college ○ Refused scholarships ● Social or Emotional Harms ○ Make underlying depression or anxiety worse ○ Sexual assault ○ Cause conflicts with friends, family or teachers ○ Families being split apart ● Legal harms ○ Pay fines ○ Perform community service

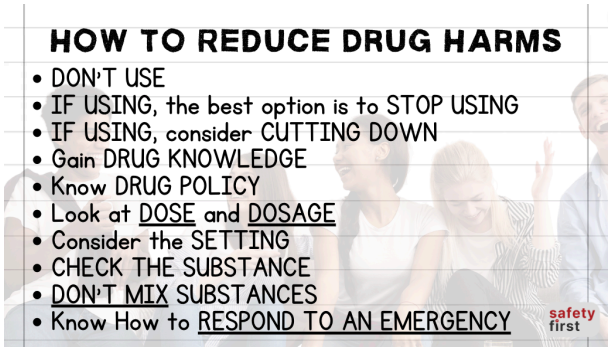
		○ Attend mandatory classes ○ Be arrested ○ Sent to a juvenile detention center or jail (Ask students): ● "Are there any more on this list you can think of? Have you ever witnessed scenarios where these consequences were apparent? What would have made you feel prepared to navigate these situations?" (Tell students): ● For some teens in some communities, especially those in communities of color, the legal harms related to drugs can often be greater than the health-related harms. Teens stopped on the suspicion of drug possession or sales may end up having physical conflicts with law enforcement that could lead to serious injury or even death.
9		(Ask students): ● "Why do you think it's important to not stigmatize people who use drugs?" (Take some responses). ● Everyone, including teens, fall somewhere on the drug use continuum. This means that some teens have never tried drugs (it's ok and even cool to never have tried drugs), might have tried drugs, have thought about it, or perhaps are already struggling with or dependent on drugs. ● Teens who use drugs can live anywhere, from big cities to small rural communities and they may be of any race, gender, religion, or socio-economic class. They could be athletes, musicians, straight-A students, introverts, extroverts – anyone. You never know. This is why it's important not to stigmatize people who use drugs as bad people. We may be judging our friends, classmates, and siblings as immoral and bad people. This may make them too afraid or ashamed to talk to us if they need help. ● Regardless of who you are, where you live or where you fall on the continuum, it is important to be informed so that you can keep yourself and others safe.

10		• When shame is associated with a person or a group of people, that is stigma. For example, a stigma is negative thoughts or feelings associated with drug use or mental health, just to name a few.
		• Ask students: Share some examples of stigma associated with drug use? (Take 2-3 responses)
		• Possible responses:
		  ○ Lazy
		  ○ Bad person/troubled teen
		  ○ doesn't have a future
		  ○ Criminal
		  ○ Stupid/ not smart
		  ○ Irresponsible/careless
		  ○ Untrustworthy
		(Tell students):
		• Continue to ask students: How can stigma related to drug use impact someone's mental health? (Take 2-3 responses)
		• Possible responses:
		  ○ Isolated/lonely
		  ○ Depressed
		  ○ Anxious
		  ○ Angry
		• Those are all great responses and it's important that we recognize stigmas do not only impact us individually but collectively as well. Stigmas associated with groups of people can lead to people being stereotyped and discriminated against, which can create a barrier to someone getting help.
		
		(Ask students):
		• How can removing stigma from drug use reduce harm in teens who use drugs?
		• Possible responses:
		  ○ Building trust
		  ○ Finding resources to get help
		  ○ Talk about what's affecting them
		  ○ Using alternative methods to heal or cope with issues
		• Great discussion everyone! Before we talk more about ways to

Lesson 2: Keeping You Safe, Reducing Your Harm: An Overview

		reduce harm, let's continue to discuss mental health.
11		(Tell students): • Youth may use drugs to cope with stress because they don't have access to other resources or don't know how to access other resources. • Because of the stigma related to mental health issues, some teens may see using drugs to cope with their problems as less shameful than asking for help. • This is why we must always be compassionate to others, as you never know who may need a little help! • (Educator note): Read each question on the slide to the class and have students shout out some answers. Spend about 1-2 minutes per question.
12		(Tell students): • In any case, if stopping use is difficult, how can we reduce the harms drug use can cause? • Well, let me ask you this...

Lesson 2: Keeping You Safe, Reducing Your Harm: An Overview

13		(Ask Students): ● How do you reduce harm while driving? ● (Brainstorm): Have a designated driver when drinking or using other drugs, wear a mask in an Uber, obey speed limits, wear a seatbelt, make sure your car in is good shape (the check engine light is not on), send updates to your friends and family what time you'll be home (ex. texting mom, "I'm leaving school now, I'll be home in 15 mins") ● These are great! Well, there are different ways to reduce harm with drugs too...
14		(Tell students): ● In this lesson we will discuss general harm reduction strategies, and then in the next few lessons we will circle back to these strategies as applied to each drug type. ● This is a list of 9 Harm Reduction Strategies that we will be studying and applying throughout our drug education unit. The goal is for you to have a toolbox of skills and strategies you can use to minimize the risk or harm if: ● You are already using drugs, ● You have friends who are using drugs, ● You are abstinent but considering using drugs one day. ● Let's take a closer look at these strategies that you can also share with your friends to help them make safer and healthier choices about drug use. ○ (Educator note): Have a different student read each of the points on the slide.

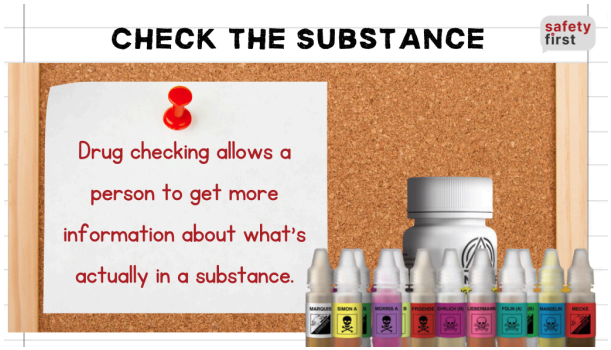
15		(Tell students): • The safest choice when it comes to drugs is always to abstain – not to use. That's always true, no matter how many times – or not! – someone has used drugs before.
16		(Tell students): • Remember, harm reduction encourages people to make the healthiest choice. The healthiest choice is not to use; but what if someone uses it already? How could that person reduce the harm to themselves or others? • Some ways that person could reduce harm include cutting down on the number of times used in a day or committing to using only on the weekends or at social events, or using a lower amount. Harm reduction recognizes that it isn't realistic to expect all people to abstain from drug use, but it does encourage people to make the least risky choice.
17		(Tell students): • No matter what someone's choice is about drugs, it's important for everyone to know about them – their basic effects, risks, perceived and real benefits, and harms. The upcoming lessons in the curriculum will help you develop drug knowledge. • This is important because even if you don't use drugs, you can help other people like your friends, classmates, or even strangers. (Ask students): • Let's take a few moments and think of 5 people you'd like to protect. • Hold those 5 people in your mind as we move on. (Tell students): • Gaining drug knowledge is also related to knowing drug policy -

		knowing the rules around use at your school and knowing the legal implication about substance use for minors (ex. does your school suspend for substance use or possession? What are the legal restrictions in your state?). This is a very important topic, so we will discuss it in-depth in lesson 12.
18		• Now let's talk about dose and dosage. Dose describes how much of a drug is taken at one time. It's calculated according to how much of a drug is needed to offer the greatest benefit. This can change based on a person's age, weight, sex, physical health and drug usage habits. • Dosage describes how often a drug is taken, and for how long (example: once a day for two weeks). In order to maintain a certain level of a drug in the body, new doses of the drug have to be taken within a certain time period. The Federal Food and Drug Administration requires that most legal over-the-counter and prescription drugs come with dose and dosage instructions. • This regulation helps people maximize the benefits of a drug while reducing its harms. It is critical to only use drugs (e.g., prescription drugs) as prescribed by a doctor and not to use another person's drugs. (Ask students): • How could understanding dose and dosage help reduce the harms associated with illegal drugs? (Tell students): • Illegal drugs are not regulated, so people have to guess what a safe dose and dosage may be.

Lesson 2: Keeping You Safe, Reducing Your Harm: An Overview

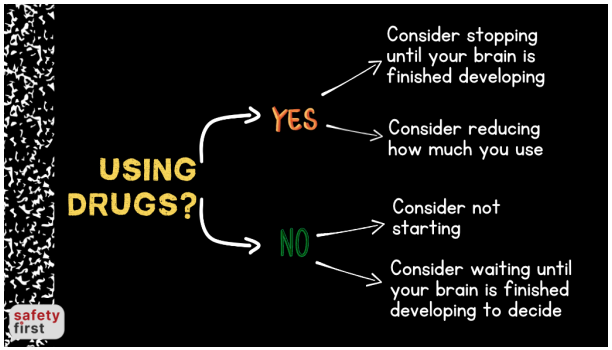
19		(Tell students): ● Use drugs only as recommended, meaning use drugs at the lowest dose possible; or don't take a lot of any substance, and wait to see the effect before taking any more. ● For example, if 200mg (the standard amount) of ibuprofen will relieve the pain, start with only that much, and don't jump to a higher dosage unless absolutely needed.
20		(Tell students): ● One of the foundational harm reduction concepts is that of set and setting. Set stands for mindset – the state of someone's thoughts and emotions prior to drug use. Understanding mindset is important because of the powerful effects drugs have on our minds and bodies. ● They can change our moods, cloud our thoughts, and alter our perceptions. What someone is thinking and feeling before and during substance use can either positively or negatively affect their experience with it. ● Setting refers to the physical and social environment where drug use happens. Is it taking place indoors or outdoors? In a home or at school? Around other people or alone? With friends or strangers? Thinking ahead about the physical and social settings where drug use will occur can reduce the chance of accident, injury or death.

Lesson 2: Keeping You Safe, Reducing Your Harm: An Overview

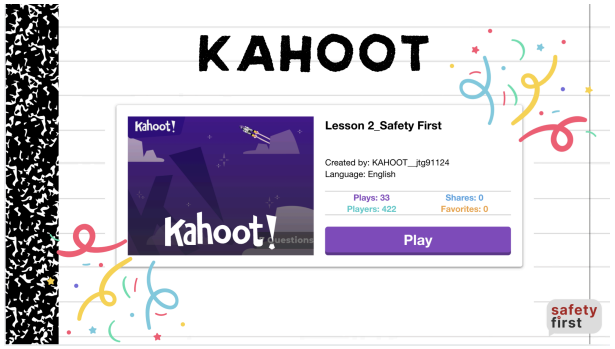
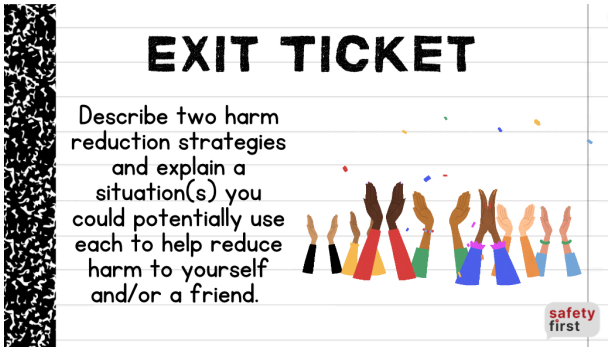
21		(Ask students): • What do you think adulteration means? (Take 1-3 responses) (Tell students): • Drug adulteration is a practice of substituting an original crude drug partially or wholly with other similar looking substances but the latter is either free from or inferior in chemical and therapeutic properties. • The term adulterant may be applied to a variety of substances used to increase the perceived quantity (i.e., used to increase the bulk or weight) of an illicit drug. In addition to pharmacologically active adulterants, some samples of street drugs may be contaminated with manufacturing by-products such as glass and metals—including lead and aluminum. • Commonly used bulking agents include cellulose, talc, as well as sugars such as dextrose, mannitol, lactose, and sucrose. In addition to these common players, other risky contaminants of different drugs can include infectious microorganisms like bacteria (e.g., Bacillus and Clostridium species) and certain types of fungi (e.g., Aspergillus) References: • https://kccollege.ac.in/uploads/1e03437bb3676616a6da11b84838228fSEM-IV,%20SEC-II,%20HERBAL%20TECHNOLOGY-Unit-4(Drug%20adulteration).pdf • https://greenhousetreatment.com/drug-addiction/adulterants/
22		(Tell students): • It is very difficult to be 100% certain what's in any given dose of a drug. Drug checking, also known as drug testing or adulterant screening, is a harm reduction strategy that allows users to get more information about what is in their substance. (Ask students): • Raise your hand if you've ever seen a drug checking or testing kit like in this picture. (Tell students):

		• These are called reagent drug checking kits. They work by placing a drop of a liquid chemical on a substance, and comparing the color change to a chart of different drugs. Kits like these have limitations and are not always accurate, so you still have to be careful. But generally speaking, they do provide more information so that people can avoid taking something unknown and potentially experiencing a medical emergency or overdose. • Again, it is best not to use, but if you are using a drug, you want to make sure that you know that the drug does not have harmful additives. We will learn more about checking substances later.
23		• (Educator note): Prepare two pitchers: Please get two pitchers and fill them both with water (or mixable/ powder juice if accessible). Add sugar to one of the pitchers, and salt to the other. Set out a few disposable cups. (Tell students): • These two batches of powdered drink look exactly the same, but one was made with sugar and one was made with salt. Can you tell the difference between the two? I need some brave volunteers to come up and see if they can pour themselves a drink from the pitcher made with sugar. • Select a few students or allow the whole class to participate in this activity. Have students come up to the front of the room and choose a pitcher from which to receive a drink. Pour drinks from the “A” pitcher into the cups labeled “A” and drinks from the B pitcher into the cups labeled “B.” • DO NOT let students drink until everyone’s cup has been filled. After all participants are ready, count to three and have every student take their drink at the same time.

24		(Ask students): • Why did you choose the pitcher that you did? Did you choose the pitcher with sugar in it? • Did knowing that one of the pitchers had something you didn't want to drink in it change the way you thought about choosing a pitcher? • How does knowing that drugs sometimes have other substances in them change how someone might think about drug use?
25		• Another harm reduction strategy that we're going to discuss has to do with mixing substances, also called "polydrug use." (Ask students): • Why do you think mixing drugs could be harmful to the body? (Take 1-2 responses) (Tell students): • Most drug-related injuries and deaths are a result of mixing drugs, because of how hard it is to predict how different drugs will interact with each other. There are a lot of factors to consider, including each person's unique physiology, dose and dosage, the drug's purity, and the drug's effects on the brain and body. • But bottom line - don't mix drugs.
26		• We have and will talk a lot about how drug use can lead someone to end up in the hospital, or even die. This is a worst case scenario, and hopefully you and your friends will never be in this situation, but it's very important to know how to recognize an overdose, and respond. • Sometimes teens are afraid to call 9-1-1 for help, especially if they've been using substances themselves. However, there are laws in most states, referred to as Good Samaritan laws, which protect teens (or anyone) from getting into trouble for underage drinking if they are calling to report alcohol poisoning. Nothing should prevent you from calling 9-1-1 if there is a medical emergency. • We'll be going over this harm reduction strategy later in the

		curriculum, and talking more about Good Samaritan Laws, which protect people who call 911 seeking help in a drug-related emergency.
27		• Also, throughout this curriculum we will be discussing the recovery position. If someone is overdosing, it is important to place them into the recovery position so they are safe and do not choke. • We'll be practicing the recovery position in Lesson 8.
28		• So, using what we've learned, here is a chart of your potential choices. • If you are using drugs, you might consider stopping, at least until your brain is done developing. Also, if you are using drugs at least consider reducing how much you use. • If you aren't using drugs, you might consider not starting to use it and/or waiting until your brain is done developing to decide whether or not you want to use it.

Lesson 2: Keeping You Safe, Reducing Your Harm: An Overview

29		• Let's play a Kahoot! game to see what you remember. • (Educator, click on the "Play" button on the slide).
30		• For your exit ticket today, describe two harm reduction strategies and explain a situation(s) in which you could potentially use each to help reduce harm. • If you have any questions about harm reduction strategies, add them to your exit ticket. • (Have students write their responses on a sheet of paper).