LOWER SECONDARY

| Level | | | | | | | |
|-------|---|---|---|---|---|---|----|
| F | - | 2 | 3 | 4 | 5 | 6 | B6 |

Drugs: Dilemmas and decisions

Strands

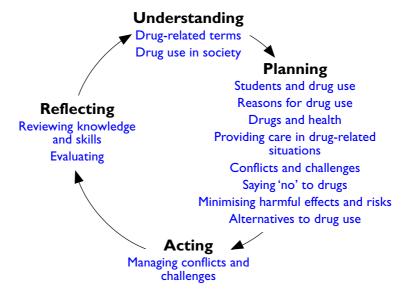
Promoting the Health of Individuals and Communities Enhancing Personal Development

Purpose

Students investigate attitudes towards drugs, their role in the lives of Australians and the associated harmful effects and risks. They propose strategies to minimise harm and risk and practise first-aid skills for providing care to drug-affected casualties. Students also interpret scenarios which help them to develop decision-making and negotiation skills, and to be assertive in drug-related social situations.

Overview of activities

Activities in this module are based on a learner-centred approach with an emphasis on decision making and problem solving. As the following diagram shows, activities are sequenced in **understanding**, **planning**, **acting** and **reflecting** phases.





Core learning outcomes

This module focuses on the following core learning outcomes from the Years 1–10 Health and Physical Education Syllabus:

Promoting the Health of Individuals and Communities 5.1 Students predict the short- and long-term consequences of health behaviours on the health of themselves and others, and propose actions to promote health, now and in the future.

5.3 Students demonstrate behaviours and actions to provide care or manage risk in responding to unsafe or risky situations and behaviours.

Enhancing Personal
Development

5.4 Students demonstrate skills to deal effectively with challenge and conflict in social, team or group situations.

Core content

Promoting the Health of Individuals and Communities

This module incorporates the following core content from the syllabus:

- health-promoting behaviours of individuals relating to tobacco, alcohol and other drug use;
- preventive, protective and treatment actions in response to alcohol-related and other drug-related emergencies;

Enhancing Personal Development

 interpersonal skills in assertiveness, conflict resolution, decision making and problem solving.

Assessment strategy

The following are examples of assessment tasks that provide opportunities for students to demonstrate the core learning outcomes identified in this module.

Promoting the Health of Individuals and Communities 5.1

- Students identify dilemmas faced by characters in drug-related scenarios and the possible decisions these individuals could make. Assuming they were the characters in the scenarios, students predict the likely consequences of each decision option for themselves and others, focusing on ways in which health may be harmed or put at risk. They decide which decisions would most effectively promote health and communicate these appropriately. Students also propose actions they could take to support their decisions and to promote health, now and in the future.
 - Can the student predict how drug use might result in own and others' health being harmed or put at risk in the short term? In the long term?
 - Can the student identify the consequences of each decision about drug
 - Can the student identify which decisions are most likely to promote own and others' health?
 - Can the student propose actions to promote health, now and in the future?

Promoting the Health of Individuals and Communities 5.3

- Students participate in scenarios involving unsafe situations related to drug use. They demonstrate recommended first-aid behaviours and actions to provide care and to manage risks in responding to those situations.
 - Does the student demonstrate appropriate care in response to situations involving drugs?
 - Does the student assess the situation to manage risks to health associated with drug use?

Enhancing Personal Development 5.4

- Students use role-play scenarios involving decisions about drug use to demonstrate the skills of decision making, assertiveness and negotiation.
 - Does the student use a decision-making process to deal effectively with challenges and conflicts that may arise from the situation?
 - Does the student choose an appropriate skill to suit the situation?
 - Does the student demonstrate effective use of assertiveness, decision making and negotiation?

Background information

Drugs in society and secondary drug education

Drugs are a part of modern culture, and how to best equip young people to live in a drug-using society is an ongoing issue facing educators. Two decades of drug education have shown that school programs have been successful in improving students' knowledge and awareness of drugs. Such programs ensure students have access to reliable sources of information, along with opportunities to explore drug-related issues, to make decisions and to clarify their values in a supportive environment.

The components of drug education advocated by the Australian Drug Foundation are basic pharmacology; development of abilities to act to minimise drug-related risks; and analysis of public policy issues concerning drugs (Munro 1997). This module contains activities that enable students to develop an understanding of the pharmacological effects of drugs and the risks associated with drug use. It also contains activities designed to help students develop the personal and social abilities needed to manage situations where drugs are present, to distinguish between low-risk and high-risk use, and to recognise a medical emergency and know how to give assistance.

Drug education programs within schools should focus on the drugs most likely to be used by the target group and not just those highlighted in the media. The activities in this module can easily be modified by teachers to focus on the particular drug(s) that may be most relevant to their students.

This topic, including its specific teaching, is a sensitive issue for many Aboriginal and Torres Strait Islander communities. Consequently, it is important for teachers of Aboriginal and Torres Strait Islander students to consult with the local community about the correct protocol for handling drug-related education to develop a better understanding of culturally based beliefs. The most appropriate community person for advice is best identified through consultation with the local Aboriginal and Torres Strait Islander Student Support and Parent Awareness Committee; the participation officer,

Ministerial Advisory Committee for Aboriginal and Torres Strait Islander Education (MACATSIE); the Elders Council; community education counsellors; or other Indigenous education workers. In some communities it may be appropriate to invite an Indigenous health worker to participate in teaching aspects of this module.

Terminology

Activities in this module involve use of the following language in the context of Health and Physical Education:

| al use |
|-----------------|
| |
| tion medication |
| nal use |
| hips |
| |
| |
| |

School authority policies

Teachers need to be aware of and observe school authority policies that may be relevant to this module, particularly policies relating to sensitive issues.

Social justice principles

This module provides opportunities for students to increase their understanding and appreciation of supportive environments. It includes activities that encourage students to:

- consider and accept the rights, decisions and feelings of others;
- respond in ways that neither condemn nor condone, yet support the rights and feelings of others.

Support materials and references

Australian Brewers Foundation 1995, *Rethinking Drinking: The Classroom Program*, Melbourne.

Australian Drug Foundation, *Australian Drug Foundation*. Available URL: http://www.adf.org.au/ (accessed 15 April 1999).

Australian Drug Foundation 1994, Reducing the Risk: An Alcohol Action Program for Schools, Canberra.

Ballard, R., Gillespie, A. & Irwin, R. 1994, *Principles for Drug Education in Schools*, University of Canberra, Canberra.

Centre for Education and Information on Drugs and Alcohol, *CEIDA*. Available URL: http://www.ceida.net.au/ (accessed 15 April 1999).

Commonwealth Department of Health and Family Services, National Centre for Disease Control 1996, *Candidly Cannabis: A Straight Forward Approach to Cannabis Education*, Canberra.

Commonwealth Department of Health and Family Services, National Health Promotion and Protection Branch 1996, *How Will You Feel Tomorrow?*, kit, Canberra.

Education Queensland, Health Issues Section 1997, Who's in Charge Here? Marijuana Education for Lower Secondary Students, Brisbane.

Heart Foundation 1996, Heart Health Manual: A Resource Kit for Primary Teachers, Canberra.

McConnell, C. 1997, Don't Have to Smoke: Smoking Prevention Education for Years 8, 9 and 10, Education Queensland, Health Issues Section, Brisbane.

Munro, G. 1997, School-based drug education: Realistic aims or certain failure?, paper presented to 8th International Conference on the Reduction of Drug Related Harm, Paris, March.

Queensland Department of Education 1996, *Bama Yabba Yabba: Drug and Alcohol Resource*, kit, Regional Equity and Development School Support Centre, Cairns.

Queensland Department of Education 1994, *Drug Education: Policy, Procedures, Guidelines*, Brisbane.

Queensland Department of Education 1993, *Interpersonal Skills in Drug Education: Activities for Groups*, 3rd edn, Brisbane.

Queensland Department of Education 1991, Let's Face It: A Resource on Marihuana for the Lower Secondary School, Brisbane.

Queensland Department of Education 1990, When You Think About It: An Alcohol Education Resource, kit, Brisbane.

St John Ambulance Australia 1989, *Australian First Aid*, vol. 1, 2nd edn, Forrest, ACT.

Stanton, W., Walker, D., Ballard, R. & Lowe, J. 1997, *Alcohol, Cigarette and Illicit Drugs Use Among Year 7 to 12 Students in Queensland, 1996*, University of Queensland (Centre for Health Promotion and Cancer Prevention Research) and Education Queensland (Health Issues Section), Brisbane.

Activities

It is recommended that students keep a personal journal, reflecting on the activities they participate in during this module.

Understanding

DRUG-RELATED TERMS

Developing an understanding of drug-related terms

► Students brainstorm terms related to drug use and compile class definitions of those terms — for example, drug, prescription medication, overdose, dependency, withdrawal.

Teaching considerations

Ensure that students have opportunities to discuss and develop an understanding of the following:

- A drug is any chemical substance that changes the way a person's mind or body works.
- Prescription medications are drugs used in the treatment of illness that can be obtained only with the authorisation of a health-care professional.
- Drug abuse is the use of a drug (usually illegal) for non-medical reasons.
- Overdose is a condition in which a person takes so much of a drug that regular body functions break down.
- Dependency is the reliance on a drug's effect psychologically or physically.
- Withdrawal refers to the unpleasant, even life-threatening, negative symptoms that appear when an addict stops using a drug.

DRUG USE IN SOCIETY

Sharing perspectives about drug use in Australian society

► Students consider how drug use has become part of Australian culture.

Focus questions could include:

- What drugs are commonly available and used in our homes?
- When and why are these drugs used?
- How does the community perceive drug and alcohol use and abuse?
- Do all cultural groups approve of the use of these drugs? Which groups disapprove?
- Which drugs are commonly used by young people? By adults?
- When do some young people use drugs?
- Are there laws in place in the community, schools and workplace about drug use? What are some of these laws? Why may they have been developed?
- What drug-related health services are available in the community? Why are they in place?
- Are there preventive programs in place in the community? What is their main objective?

Teaching considerations

Ensure that students understand the following:

- Drugs are used by individuals in our culture for various reasons for example, medicinal and recreational reasons.
- There are cultural variations in attitudes to and practices with drug use. For
 example, some religious groups value abstaining from the use of particular
 drugs including prescribed medication; some parents/carers may have special
 rules for their children regarding drugs.
- Laws, such as those relating to drink driving, the sale of tobacco or
 prescription medication, the cultivation and trafficking of drugs, and drug use
 in the workplace, are in place to protect the health of individuals and the
 community.
- ▶ Students read, and reflect on, a selection of texts that express different attitudes and beliefs about drug use. Materials for this activity will depend on resources available in the school. Examples of texts are articles, brochures and statements by drug users, religious groups, parent organisations and members of the legal profession.

Focus questions when reading articles could include:

- Whose 'voice' is heard in this text?
- What is the reader invited to understand about attitudes to drug use/abuse?
- What is the reader invited to understand about the harmful effects and benefits of drug use/abuse?
- Who else may have a voice on this issue? What views might these other voices have?
- ► Students recall what they know of the potential health effects of each of the drugs commonly used by some young people. They then rank the drugs according to their potential to cause mild to severe harm to the user or others. They share their perceptions with a peer and identify and discuss any differences of opinion.

Focus questions could include:

- What could be the short- and long-term health effects of using these drugs?
- Which drugs do you perceive to be the most/least harmful to your health? To others' health? Why?
- Are there differences between your own and others' perceptions about drugs that are most/least harmful? If so, what are these?
- Which drugs was there disagreement about? Why?

Teaching considerations

The following 'risk thermometer' activity from Candidly Cannabis: A Straight Forward Approach to Cannabis Education (Commonwealth Department of Health and Family Services, p. 37) could be used for students' rankings of drugs.

- · Record the names of drugs on separate cards or pieces of paper.
- Create a continuum on the floor or wall with a piece of string, masking tape or wool. Label one end 'Most harmful' and the other 'Least harmful'.
- Individually or in pairs, students take turns to read a card and place it on the
 continuum according to the level of harm they attach to the drug. They then
 explain their judgment to the class.
- Once all cards are placed, students may move the cards to different positions on the continuum, giving reasons for the changes.

Planning

STUDENTS AND DRUG USE

Investigating drug use by Australian students

➤ Students predict the five drugs most commonly used by Queensland students. They list the drugs in order from 'most commonly used' to 'least commonly used'.

Focus questions could include:

- What do you think are the five drugs that are most commonly used by students?
- Would these five be different for adults? Why?
- When and why are these drugs used by students/adults?



- ► Students examine the survey data provided on Resource Sheets 1–6 to determine patterns of student drug use within the school community. They could:
- identify the sorts of drugs students most commonly experiment with;
- compare these findings with the list they compiled in the previous activity;
- determine the extent to which socially acceptable drugs (such as alcohol, pain relievers, nicotine and caffeine) are used compared with illegal drugs (such as marijuana and heroin).

Focus questions could include:

- According to the data, which sorts of drugs do school students most commonly experiment with? Give three or four examples.
- Are these different from your predictions?
- Are these drugs legal or illegal?
- Which groups are using/not using drugs? Why might this be?
 Are there differences by gender? By age? If so, what are these and what may be the reasons for the differences?

Teaching considerations

The survey data provided on Resource Sheets I-6 are examples only. Teachers may choose to use other data more relevant to their particular student groups.

Other studies will allow different comparisons to be made — for example, male/female, city/rural. Where studies show comparisons between Caucasians and Indigenous populations, teachers of Indigenous students should consult with appropriate members of their local community about the correct protocol for handling this topic.

REASONS FOR DRUG USE

Investigating reasons for use/non-use of drugs

▶ Students conduct a survey of parents, adult friends and peers to determine and draw conclusions about common reasons for use or non-use of social drugs such as tobacco and alcohol. They compare the data gathered with the survey data previously examined.

Focus questions could include:

- What percentage of people surveyed used social drugs? What percentage did not use social drugs?
- How do these percentages compare with data from other studies?
- What influence do peers have on adolescent decisions to use/not use drugs?
- Does the need to belong to a group influence adolescent usage? Why or why not?
- What are the reasons for alcohol and tobacco use/non-use? By gender? By age-group (adults, adolescents)?
- What are the similarities and differences between the reasons given for the use of each drug? By gender? By age-group?
- Are there differences in the pattern of alcohol and tobacco use? By gender? By age-group?
- What conclusions can be drawn about reasons for alcohol and tobacco use/non-use?
- What are the similarities and differences between reasons for use/non-use among different social groups?

Teaching considerations

The survey could be administered in a number of ways. For example, one group of students could administer a set number of surveys, while another group collates or examines the data, and a third group draws conclusions or summarises the findings.

Be aware that reasons for drug use may be a sensitive issue in Aboriginal and Torres Strait Islander communities. Teachers of these students are advised to consult with their local community to develop appropriate strategies.

DRUGS AND HEALTH

Investigating the short- and long-term consequences of drug behaviours on own and others' health

▶ Students gather information about the possible health consequences, for themselves and others, of the use and abuse of prescribed drugs and of other socially acceptable drugs. They categorise their findings using the headings 'Physical', 'Mental–emotional' and 'Social'. Where possible, students should identify both adverse and beneficial consequences, and short- and long-term health consequences.

Focus questions could include:

- What are the potential short-term/long-term *physical* health consequences of completing a prescribed course of medication?
- What are the potential short-term/long-term *mental-emotional* health consequences of completing a prescribed course of medication?

- What are the likely consequences of using a prescription medication after its use-by date?
- What are the likely consequences if the entire course of prescribed medication is not taken?
- What are the short-term/long-term *physical* health consequences of drug abuse for the user? For others?
- What are the short-term/long-term *mental-emotional* health consequences of drug abuse for the user? For others?
- What are the short-term/long-term social health consequences of drug abuse for the user? For others?
- Were these the consequences you expected?
- What might the *financial* or *legal* consequences be for the user? For others?

Teaching considerations

There are many commercially produced teaching resources and web sites that outline the health effects of specific drugs (see 'Support materials and references', pp. 4–5). Refer also to labels on drug products; resources produced by private health funds, Queensland Health and Queensland Police Service; and newspaper and magazine articles.

Remind students that some drugs have legitimate uses that can enhance aspects of health as well as have possible detrimental effects. Positive consequences of drug use can include relief from physical and emotional pain, improvement in health condition, and cure from disease.

Highlight for students some of the negative consequences of drug misuse or abuse in the short term — nausea, hallucinations, accidents, dependency, job loss, conflict, depression, antisocial behaviour (including crime and alcoholism); and in the long term — low self-esteem and depression from social rejection (including by family), long-term unemployment, loss of quality of life and/or death from overdose, disease (lung cancer, liver cirrhosis) or infection (hepatitis, AIDS).

Ensure students understand that drug use by others can have an impact on non-users.

PROVIDING CARE IN DRUG-RELATED SITUATIONS

Assessing own capacity to take action and practise first-aid behaviours in response to drug-related incidents

► Students indicate their perceived level of knowledge, confidence and skill in being able to provide care or to manage risks and conflicts in drug-related situations.

Focus questions could include:

- How confident are you that you could provide care to an unconscious casualty who has abused drugs for example, in a suicide attempt? What would be your actions? Why?
- How confident are you that you could manage the risks associated with an emotionally disturbed individual under the influence of drugs? What would be your actions? Why?
- How confident are you that you could manage a social situation where you are pressured to use a drug? What would be your actions? Why?
- How confident are you that you could manage a social situation where individuals persist in pressuring you to use a drug despite the fact that you have refused their offers?

- ► Students investigate and practise first-aid behaviours and actions to provide care and manage potential health risks in drug-related situations.
- They recall the physical health risks and consequences associated with drug misuse and abuse.
- They practise the skills needed to provide care for casualties exhibiting drug-related signs and symptoms. For example, in teacher-developed scenarios, casualties might present as follows:
 - *Scenario 1*: Casualty has severely depressed breathing, irregular heartbeats, and is vomiting.
 - Scenario 2: Casualty has seizures and displays acute confusion.
 - Scenario 3: Casualty displays antisocial behaviour (aggression, violence).

Other scenarios can be developed as necessary to enable students to apply first-aid knowledge and skills.

Focus questions could include (depending on the scenario):

- What signs or symptoms might indicate that the casualty's health condition is serious or is the result of drugs?
- Which dangers should you be alert to? For yourself? Others? The casualty?
- How would you respond to the dangers?
- When you monitor the response of the casualty, what information would you look for?
- In which position would you place an unconscious casualty? How would you do this?
- Demonstrate how you would monitor the airway, breathing and circulation of an unconscious casualty.
- When would you apply expired-air resuscitation? Demonstrate how you would do this. When would you apply cardiopulmonary resuscitation? Demonstrate how you would do this.
- When would you seek medical aid? How would you do this?
- What might be the consequence for the casualty and for you if you fail to seek medical aid?

Teaching considerations

Reference should be made to first-aid manuals published by organisations such as St John Ambulance, Red Cross or The Royal Life Saving Society Australia.

Advise students that all unconscious casualties should be placed in a lateral position with head tilted (for a clear airway) and mouth turned towards the floor (for draining of fluids).



CONFLICTS AND CHALLENGES

Developing an understanding of the conflicts and challenges faced by individuals in social and group situations involving drugs



► Students interpret scenarios to determine the nature of the conflicts and challenges faced by individuals (including non-users, users, parents) in drug-related situations. Examples of scenarios are provided on Resource Sheet 7.

Teaching considerations

Advise students that conflict may arise as a result of personal, family or institutional values, the law, mood control, financial expense or cultural beliefs.

Explain that challenges faced by individuals can include formulating a stance that supports one's own beliefs and values and asserting that stance, even in the face of persistent coercion, while at the same time respecting the rights and feelings of others.

SAYING 'NO' TO DRUGS

Exploring interpersonal skills used to deal with conflicts and challenges in drug-related social situations

- ► Students discuss their own and others' rights to say 'no' and the responsibility of others to acknowledge that right.
- ► Students develop a list of ways of saying 'no' to inappropriate offers of drugs in a range of situations. They review their list, consider how successful each form of rejection might be and evaluate whether it is a passive, aggressive or assertive way of handling the situation.

Focus questions could include:

- What are some different ways of communicating 'no'?
- If someone offers you a cigarette, alcohol or other drug, would you refuse politely or become angry and push the offending drug away?
- How do you think the person making the offer would feel? Would the person feel offended or hurt, or understand and respect your wishes?
- Would you feel confident, anxious or nervous using either of these responses?
- What would be more effective being angry, being calm and convincing or being nervous? Why?

Teaching considerations

Encourage students to think of different ways of saying 'no'. These may include:

- simply saying 'no' ('No, thank you');
- giving a reason ('No, I'm into sport'; 'lt's bad for your health'; 'l don't want to have an asthma attack/get lung cancer/bad breath/stained teeth/stained fingernails');
- offering an alternative ('No, thanks. Why don't we get something to eat instead?');
- standing up to pressure ('I said no and really meant it');
- leaving the scene ('I really have to go now');
- avoiding the scene ('No, I've got other things on this afternoon').

Advise students that becoming upset or responding aggressively are less effective responses than being calm and convincing, and those that acknowledge the other person's feelings. Also discuss how some people are harder to say 'no' to than others.

► In a role-play, students apply the Assertion Model to practise ways of saying 'no' and overcoming insistent or persuasive offers.

Teaching considerations

The Assertion Model from When You Think About It: An Alcohol Education Resource (Queensland Department of Education, p. 14) states:

- I. Be clear in your mind about what you want to say.
- 2. Say 'no' with a reason. ('No, thanks, I don't like alcohol.')
- 3. Acknowledge the other person's feelings. ('Thanks, anyway. It was nice of you to offer.')

The Assertion Model can be used in any situation where someone tries to persuade another to do something against his or her wishes.

Encourage students to think of some forms of persuasion that may be used — for example, 'Come on, everyone else is'; 'It won't hurt you'; 'Are you scared!'; 'It will make you feel good'; 'Just once can't hurt you'.

Advise students that people are less likely to be persuaded to say 'yes' to something they don't want to do if they know in advance clearly where they want to stand.



▶ Students use a decision-making model to respond to dilemmas which involve conflict and challenge. Examples of scenarios presenting possible dilemmas are provided on Resource Sheet 8.

Teaching considerations

There are a number of decision-making models that can be used:

- Model I: Identifying the problem or decision, listing choices, determining
 positive and negative consequences and making the decision on the basis of
 best choice (Heart Health Manual: A Resource Kit for Primary Teachers, Heart
 Foundation, p. 477);
- Model 2: Decide: Describe the problem. Establish a list of possible choices.
 Consider all information about the choice. Identify the reasons for and against each choice. Decide make a choice. Evaluate. (How Will You Feel Tomorrow?, Commonwealth Department of Health and Family Services, p. 45);
- Model 3: Identify the problem. Gather information. Identify alternatives.
 Identify the results of alternatives. Make a decision. Enact the decision.

 Evaluate the decision. (Interpersonal Skills in Drug Education: Activities for Groups,
 Queensland Department of Education, pp. 4-17 to 4-20).

MINIMISING HARMFUL EFFECTS AND RISKS

Proposing practices for minimising the extent to which drug use could potentially harm or risk health

► Students create a poster about drug use. The focus should be on providing guidelines and practices for minimising the extent to which drug use might harm or risk their own and others' health. Posters could be about using prescription medications or over-the-counter drugs; choosing to drink alcohol; choosing to smoke; or choosing to experiment with other drugs.

Focus questions could include:

Prescription medications and over-the-counter drugs

- What precautions are needed when taking these types of drugs?
- Where can users find this information?
- What practices should users follow if they miss a dose?
- What practices might users need to follow if offered alcohol while taking certain medications?
- What action should drug users take if they develop a reaction or side effect?
- What advice do drug users need about following a course of medication or using medication that is past its use-by date?

Alcohol

- What information do people who choose to drink alcohol need to minimise harm and risks to themselves and others? For example, what should they know about:
 - the strengths of some common alcoholic drinks?
 - how various amounts of alcohol will affect them for example, one drink, three drinks?
 - topping up drinks?
 - transport arrangements they could make?
 - services to access if drinking is realised to be a health concern?

Cigarettes

- What information do people who choose to smoke need to minimise harm and risks to themselves and others? For example, what should they know about:
 - the amounts of tar and nicotine in various types of cigarettes?
 - where to smoke?
 - services to access if smoking becomes a health concern to them?

Other drugs

- What information do people who choose to use drugs such as heroin need to minimise harm and risks to themselves and others? For example, what suggestions could the posters convey about:
 - needle exchange programs?
 - the risk of transmission of infection and disease?
 - services to access for assistance or rehabilitation?

ALTERNATIVES TO DRUG USE

Proposing health-promoting activities as alternatives to drug use

- ► Students propose alternative activities to using social drugs (tobacco, alcohol and prescription drugs).
- What alternatives are there to drug use?
- Can you think of some times when people have enjoyed occasions that did not involve the use of tobacco, alcohol or other drugs? What occasions were these?

Teaching consideration

The activities proposed should be safe ways to satisfy the reasons individuals use drugs, as concluded from the survey students undertook earlier in this module. Examples of alternatives could include playing sport, dancing, exercising, listening to music, chewing gum or drinking 'mocktails' (non-alcoholic mixtures).

Acting

MANAGING CONFLICTS AND CHALLENGES

Preparing health-promoting responses to drug-related social situations



➤ Students interpret scenarios involving drug-related dilemmas in social situations. Examples of dilemmas are provided on Resource Sheet 9.

Teaching consideration

Encourage students to apply the decision-making models and interpersonal skills learnt in previous activities.

► Students create and act out scenarios to demonstrate the types of interpersonal skills needed in situations involving drug use — for example, independent decision making, assertiveness, negotiation and conflict resolution. They could adapt scenarios from Resource Sheets 8 and 9 for this activity or develop their own. Scenarios must also present the short- and long-term effects on health of the drug-taking behaviour depicted.

Reflecting

REVIEWING KNOWLEDGE AND SKILLS

Reflecting on facts about drugs, and responses to and management of drug-related situations

► Students reflect on what they have learnt about drugs and the skills they have developed to respond appropriately to drug-related situations.

Focus questions could include:

- What have you learnt about the short- and long-term consequences that drugs can have on the health of users and non-users?
- What did you learn about the attitudes of different people and groups towards drug use?

- Have your attitudes to drugs and drug users changed? How?
- What skills and strategies have you acquired to manage drug-related situations?
- How confident are you of applying your skills effectively in a real-life situation that involves an unconscious casualty? In a situation that involves conflict and challenge? What other skills would you need? What emotions might you have to deal with?

Teaching consideration

This activity can be conducted through students writing in their personal journals or through an oral question-and-answer session. Students with low self-esteem or poor self-confidence and those who use drugs may feel more comfortable participating in the written mode.

EVALUATING

Reflecting on the teaching-learning process

► Students reflect on the effectiveness of using the inquiry approach in the teaching—learning process.

Focus questions could include:

- Did the inquiry process assist you to identify the information you needed?
- Did the inquiry process broaden your knowledge about drugs as a health issue for individuals and communities?
- Did the inquiry process challenge your current attitudes and broaden your perspective about drugs in society and drug users?
- Did the inquiry process assist you to understand diverse opinions? Supportive environments? How?
- Did the activities help you to develop useful skills? If so, how? If not, what activities might better assist you to develop these skills?

Drug use among school students: Alcohol, smoking



| Prevalence of alcohol us | se among scho | ol stu | dents | in Ye | ars 7 | to I2 | (%) |
|---|----------------|------------|----------|----------|----------|----------|----------|
| Response | Gender | Year level | | | | | |
| | | 7 | 8 | 9 | 10 | 11 | 12 |
| Never consumed alcohol | Male Female | 17 27 | 14 18 | 10 13 | 8 7 | 5 5 | 3 |
| Have consumed alcohol, but not within the last twelve months | Male Female | 3 I 40 | 26 31 | 16 18 | 10 16 | 8 | |
| Have consumed alcohol within the last twelve months, but not in the last four weeks | Male Female | 23 | 23 22 | 28 25 | 25 27 | 19 28 | 13 |
| Have consumed alcohol within the last four weeks, but not in the last seven days | Male Female | 14 | 11 | 15 17 | 14 23 | 20 21 | 2 24 |
| Have consumed alcohol within the last seven days | Male Female | 15 9 | 26 18 | 30 27 | 43 27 | 48 38 | 58 53 |

| Prevalence of smoking am | ong students | in Y ea | ars 7 (| to 12 | (%) | | |
|---|----------------|----------------|---------|-------|-------|--------|--------|
| Response | Gender | | | Year | level | | |
| | | 7 | 8 | 9 | 10 | 11 | 12 |
| Have never smoked | Male | 58 | 49 | 36 | 3 I | 32 | 29 |
| | Female | 69 | 55 | 39 | 38 | 32 | 25 |
| Have smoked, but not within the last twelve months | Male | 18 | 16 | 23 | 38 | 32 | 20 |
| | Female | 18 | 13 | 14 | 16 | 21 | 19 |
| Have smoked within the last twelve months, but not in the last four weeks | Male | 12 | 13 | 14 | 18 | 12 | 15 |
| | Female | 8 | 16 | 16 | 14 | 18 | 18 |
| Have smoked within the last four weeks, but not in the last seven days | Male Female | 2 I | 4 4 | 6 4 | 4 4 | 5 3 | 5 4 |
| Have smoked within the last seven days | Male | 9 | 18 | 22 | 24 | 26 | 31 |
| | Female | 4 | 12 | 27 | 27 | 27 | 33 |

Source: Stanton, W., Walker, D., Ballard, R. & Lowe, J. 1997, *Alcohol, Cigarette and Illicit Drugs Use Among Year 7 to 12 Students in Queensland, 1996*, University of Queensland (Centre for Health Promotion and Cancer Prevention Research) and Education Queensland (Health Issues Section), Brisbane, pp. 11 & 19.

Drug use among school students: Pain-killers, tranquillisers

| Prevalence of pain-killer (| use among sch | ool st | udent | s in Ye | ars 7 | to I2 | (%) |
|--|----------------|----------|----------|----------|----------|----------|----------|
| Response | Gender | | | Year | level | | |
| | | 7 | 8 | 9 | 10 | П | 12 |
| Have never used pain-killers | Male Female | 5 | 4 3 | 3 I | 5 2 | 4 I | 3 I |
| Have used pain-killers, but not within the last twelve months | Male Female | 3 2 | 2 3 | 4 2 | 2 2 | 3 I | 5 I |
| Have used pain-killers within the last twelve months, but not in the last four weeks | Male Female | 30 31 | 28 21 | 27 14 | 23 8 | 31 16 | 34 14 |
| Have used pain-killers within the last four weeks, but not in the last seven days | Male Female | 28 30 | 26 27 | 33 35 | 36 35 | 31 32 | 31 33 |
| Have used pain-killers within the last seven days | Male Female | 34 34 | 40 46 | 33 49 | 35 53 | 31 49 | 28 51 |

| Prevalence of tranquilliser | use among sc | hool st | uden | ts in Y e | ears 7 | to I2 | (%) |
|--|----------------|----------|----------|------------------|----------|----------|----------|
| Response | Gender | | | Year | level | | |
| | | 7 | 8 | 9 | 10 | П | 12 |
| Have never used tranquillisers | Male Female | 81 91 | 81 84 | 85 78 | 79 76 | 78 80 | 84 78 |
| Have used tranquillisers, but not within the last twelve months | Male Female | 8 | 10 | 6 7 | 10 8 | 9 5 | 7 6 |
| Have used tranquillisers within the last twelve months, but not in the last four weeks | Male Female | 8 4 | 7 6 | 6 7 | 7 | 8 | 5 10 |
| Have used tranquillisers within the last four weeks, but not in the last seven days | Male Female | 2 I | 1 | 3 | 3 | 3 2 | 2 3 |
| Have used tranquillisers within the last seven days | Male Female | 2 2 | 2 2 | 2 4 | 2 2 | 2 3 | 2 4 |

Source: Stanton, W., Walker, D., Ballard, R. & Lowe, J. 1997, *Alcohol, Cigarette and Illicit Drugs Use Among Year 7 to 12 Students in Queensland, 1996*, University of Queensland (Centre for Health Promotion and Cancer Prevention Research) and Education Queensland (Health Issues Section), Brisbane, p. 28.

the last four weeks, but not

Have used marijuana within

in the last seven days

the last seven days

Drug use among school students: Marijuana, sniffing (glue etc.)



9

19

П

12

19

15

| Response | Gender | Year level | | | | | | |
|--|--------|------------|----|----|----|--------------------|----|--|
| | | 7 | 8 | 9 | 10 | 11 | 12 | |
| Have never used marijuana | Male | 86 | 76 | 69 | 54 | 53 | 47 | |
| | Female | 94 | 85 | 71 | 62 | 53 63 6 4 | 45 | |
| Have used marijuana, but not | Male | 2 | 6 | 5 | 3 | 6 | 6 | |
| within the last twelve months | Female | 2 | 2 | 4 | 2 | 4 | 7 | |
| Have used marijuana within | Male | 7 | 8 | 8 | П | 14 | 17 | |
| the last twelve months, but not in the last four weeks | Female | 3 | 6 | 8 | 14 | 12 | 22 | |
| Have used marijuana within | Male | 2 | 4 | 7 | 11 | 8 | 10 | |

Female

Male

Female

<|

3

7

12 11 21

13

3

6

| Prevalence of sniffing (glue | etc.) among so | chool s | tuden | ts in Y | ears 7 | to I2 | (%) |
|--|----------------|----------|----------|----------|----------|----------|----------|
| Response | Gender | | | Year | level | | |
| | | 7 | 8 | 9 | 10 | 11 | 12 |
| Have never 'sniffed' | Male Female | 65 73 | 75 75 | 76 70 | 75 69 | 84 88 | 86 84 |
| Have 'sniffed', but not within the last twelve months | Male Female | 7 4 | 6 8 | 5 8 | 7 9 | 6 5 | 7 8 |
| Have 'sniffed' within the last twelve months, but not in the last four weeks | Male Female | 10 9 | 7 5 | 8 12 | 9 15 | 5 5 | 5 6 |
| Have 'sniffed' within the last four weeks, but not in the last seven days | Male Female | 5 4 | 4 6 | 5 | 4 4 | 3 I | I |
| Have 'sniffed' within the last seven days | Male Female | 12 10 | 7 | 6 4 | 6 3 | 2 I | I I |

Source: Stanton, W., Walker, D., Ballard, R. & Lowe, J. 1997, Alcohol, Cigarette and Illicit Drugs Use Among Year 7 to 12 Students in Queensland, 1996, University of Queensland (Centre for Health Promotion and Cancer Prevention Research) and Education Queensland (Health Issues Section), Brisbane, pp. 29 & 30.

Drug use among school students: Amphetamines, LSD



| Response | Gender | Year level | | | | | | | |
|---|----------------|--|----------|----------|----------|-------------|----------|--|--|
| | | 7 | 8 | 9 | 10 | 11 | 12 | | |
| Have never used Imphetamines | Male Female | 98 98 | 97 97 | 95 95 | 93 95 | 95 95 | 91 90 | | |
| Have used amphetamines, but not within the last welve months | Male Female | I | I | I | 2 <1 | 1 2 | 3 I | | |
| Have used amphetamines within the last twelve months, but not in the ast four weeks | Male Female | I | I I | 2 | 2 4 | 3 2 | 3 5 | | |
| Have used amphetamines within the last four weeks, but not in the last seven days | Male Female | - <i< td=""><td> I -</td><td>2</td><td> I -</td><td>< </td><td>l I</td></i<> | I - | 2 | I - | < | l I | | |
| Have used amphetamines within the last seven days | Male Female | <i -</i | < | 2 <1 | 2 I | | 2 | | |

| Prevalence of LSD use am | ong school st | udent | s in Y e | ars 7 | to I2 | (%) | |
|---|----------------|--|-----------------|----------|----------------|----------|----------|
| Response | Gender | Year level | | | | | |
| | | 7 | 8 | 9 | 10 | П | 12 |
| Have never used LSD | Male Female | 99 98 | 97 98 | 94 94 | 90 93 | 89 93 | 88 84 |
| Have used LSD, but not within the last twelve months | Male Female | l I | 2 I | 2 I | <i 2</i | 3 I | 1 5 |
| Have used LSD within the last twelve months, but not in the last four weeks | Male Female | I I | 1 | 3 | 5 5 | 5 4 | 7 |
| Have used LSD within the last four weeks, but not in the last seven days | Male Female | - <i< td=""><td>< < </td><td>- I</td><td>2 -</td><td>1 2</td><td>2 3</td></i<> | < < | - I | 2 - | 1 2 | 2 3 |
| Have used LSD within the last seven days | Male Female | - - | I – | 3 <1 | 3 <1 | 2 I | 3 I |

Source: Stanton, W., Walker, D., Ballard, R. & Lowe, J. 1997, *Alcohol, Cigarette and Illicit Drugs Use Among Year 7 to 12 Students in Queensland, 1996*, University of Queensland (Centre for Health Promotion and Cancer Prevention Research) and Education Queensland (Health Issues Section), Brisbane, pp. 30–31.

Drug use among school students: Steroids, ecstasy



| Response | Gender | Year level | | | | | | |
|--|----------------|----------------|--|----------|----------------|-----------|-----------------|--|
| | | 7 | 8 | 9 | 10 | П | 12 | |
| Have never used steroids | Male Female | 98 99 | 97 99 | 97 99 | 98 100 | 98 100 | 98 99 | |
| Have used steroids, but not within the last twelve months | Male Female | <i -</i | 2 <1 | _ _ | _ | < < | I - | |
| Have used steroids within the last twelve months, but not in the last four weeks | Male Female | I - | _ _ | I - | < < | _ _ | < - | |
| Have used steroids within the last four weeks, but not in the last seven days | Male Female | - I | - <i< td=""><td> I -</td><td><i -</i </td><td>_ _</td><td>- -</td></i<> | I - | <i -</i | _ _ | - - | |
| Have used steroids within the last seven days | Male Female | I - | I - | I I | I - | 2 – | - | |

| Prevalence of ecstasy use | among schoo | stude | ents ir | Years | 7 to | 12 (%) |) |
|---|----------------|---|---------|-------|--------|--------|--------|
| Response | Gender | | | Year | level | | |
| | | 7 | 8 | 9 | 10 | 11 | 12 |
| Have never used ecstasy | Male | 98 | 98 | 97 | 95 | 96 | 97 |
| | Female | 99 | 99 | 98 | 98 | 97 | 97 |
| Have used ecstasy, but not within the last twelve months | Male | < | | < | I | | |
| | Female | | | < | I | | |
| Have used ecstasy within the last twelve months, but not in the last four weeks | Male Female | < | < < | 2 | I I | 2 I | 1 2 |
| Have used ecstasy within the last four weeks, but not in the last seven days | Male | < | _ | | I | < | < |
| | Female | < | _ | | - | | - |
| Have used ecstasy within the last seven days | Male | <i< td=""><td> </td><td> I</td><td>I</td><td> </td><td> </td></i<> | | I | I | | |
| | Female | - | | - | - | - | < |

Source: Stanton, W., Walker, D., Ballard, R. & Lowe, J. 1997, *Alcohol, Cigarette and Illicit Drugs Use Among Year 7 to 12 Students in Queensland, 1996*, University of Queensland (Centre for Health Promotion and Cancer Prevention Research) and Education Queensland (Health Issues Section), Brisbane, p. 32.

Drug use among school students: Cocaine, heroin

| Prevalence of cocaine use among school students in Years 7 to 12 (%) | | | | | | | |
|---|----------------|----------------|----------------|----------|-----------|----------------|----------|
| Response | Gender | Year level | | | | | |
| | | 7 | 8 | 9 | 10 | П | 12 |
| Have never used cocaine | Male Female | 96 98 | 95 98 | 95 97 | 94 99 | 97 99 | 98 98 |
| Have used cocaine, but not within the last twelve months | Male Female | 2 I | 3 I | 2 I | | | - I |
| Have used cocaine within the last twelve months, but not in the last four weeks | Male Female | | | 2 | I I | I I | 2 I |
| Have used cocaine within the last four weeks, but not in the last seven days | Male Female | <i -</i | <i -</i | | I - | <i -</i | _ _ |
| Have used cocaine within the last seven days | Male Female | I - | 2 <1 | | 2 - | I - | I - |

| Prevalence of heroin use among school students in Years 7 to 12 (%) | | | | | | | |
|--|----------------|----------------|----------------|----------|---|-----------|----------------|
| Response | Gender | Year level | | | | | |
| | | 7 | 8 | 9 | 10 | 11 | 12 |
| Have never used heroin | Male Female | 97 98 | 98 98 | 96 97 | 93 97 | 96 98 | 97 98 |
| Have used heroin, but not within the last twelve months | Male Female | 2 I | I I | I | 2 I | | I |
| Have used heroin within the last twelve months, but not in the last four weeks | Male Female | <i -</i | < | | 2 I | 2 | 2 I |
| Have used heroin within the last four weeks, but not in the last seven days | Male Female | < | <i -</i | | <i -</i | I - | I - |
| Have used heroin within the last seven days | Male Female | | < < | | 3 <i< td=""><td> </td><td><i -</i </td></i<> | | <i -</i |

Source: Stanton, W., Walker, D., Ballard, R. & Lowe, J. 1997, *Alcohol, Cigarette and Illicit Drugs Use Among Year 7 to 12 Students in Queensland, 1996*, University of Queensland (Centre for Health Promotion and Cancer Prevention Research) and Education Queensland (Health Issues Section), Brisbane, p. 33.

Identifying conflicts and challenges



For each scenario:

- **I.** Identify the character(s) experiencing conflict and describe the nature of the conflict.
- 2. Suggest reasons for the conflict.
- **3.** Explain the challenge(s) faced by the character(s):
 - when making a decision to resolve the conflict;
 - · as a result of the decision made and carried out.
- **4.** Reflect on the range of factors influencing the decision that was made.
- **5.** Identify other possible decisions that the character(s) could have made.

Scenarios

- I. Mustafa is new to the school and, being quite shy, has made only a few friends. He is invited to a party where alcohol is available and notices everyone is drinking and smoking. He overhears one of the more popular boys saying that only 'dorks' don't drink and smoke. He doesn't usually smoke but has one anyway so that he fits in. Initially, he decides not to drink as it is against his Islamic faith. However, he changes his mind when he sees that everyone else who is drinking seems to be having a good time. After having a couple of drinks, Mustafa finds he is feeling more relaxed and has the confidence to talk to other students. He decides to drink more regularly to help him socialise but feels guilty each time he does.
- 2. Joel knows that his parents would disapprove of him going to a party where there is going to be alcohol and smoking so he seeks their approval to stay at a friend's house overnight to watch videos. He and his friend make their way to the party and join in the drinking. They are being driven home from the party by an older mate when the police stop the car. They breathalyse the driver who is found to be driving under the influence of alcohol. The police telephone Joel's parents and ask them to collect him from the station. Joel later discovers that his friend's parents thought that the boys were staying at Joel's house.
- 3. Stefica's parents have expressed their opposition to under-age drinking and smoking and parties without adult supervision. Nevertheless, while her parents are away, Stefica decides to host a party. Some of her friends want to know if they can smoke and drink at the party, saying that no-one will come unless they are able to do so. She says, 'No'. However, at the party, some of her friends ring through orders for drinks from a company that delivers to the door. During the party Stefica's parents arrive home early.
- **4.** Ellen lives with her mother and younger sister. Her mother works long hours and often arrives home tired and with a headache. Ellen has often watched her mother take two pain-killers to relieve the headache and follow this with a few glasses of wine to help her 'sleep better' and forget about her troubles. Ellen has been having a hard time at school lately. She gets harassed by a gang of other girls. She decides to try her mother's 'pain-killers and wine' remedy to help her cope. She soon realises that she is having to take the combination daily to help her cope and is embarrassed about seeking help.

Making decisions



For each scenario:

Apply a decision-making model that enables you to:

- identify the dilemma faced by the key character;
- consider the options available to the character;
- consider the short- and long-term consequences of each option;
- determine which option is most health promoting.

Scenarios

- I. You go camping overnight with a group of friends. Around the campfire, one member of the group offers petrol and glue for everyone to sniff. Peers ahead of you accept, and you are about to be offered a turn. What do you decide to do?
- 2. Paolo is quite stressed about the forthcoming exams and has been getting very little sleep. He is also suffering regularly from headaches. Jason advises him to take pain-killers to relieve the tension and offers him some loose pills from his pencil case. What does Paolo decide to do?
- **3.** Phung has never used drugs but knows of others in his year level who do. Word has spread among the students that the school administration has been informed that there are students within the school with marijuana and that a bag and locker inspection is about to happen. One of Phung's best friends asks him to mind a pouch containing the drug. What does Phung decide to do?
- **4.** A friend has asked you to come to a party where you know that people will be drinking alcohol. You need the time to finish an assignment. Your friend says, 'I haven't finished my assignment either. Don't worry about it. Come out and relax'. What do you decide to do?
- **5.** You observe someone criticise your friend for saying 'No, thank you' to cigarettes. You agree with your friend's decision and want to support it. However, you don't want to be criticised. What do you decide to do?
- **6.** Kylie is at a party that her parents have given her permission to attend. At the end of the night, one of the boys she admires offers to drive her home in his parents' car. It is obvious that his speech is slurred. What does Kylie decide to do?
- 7. Raphael is a keen footballer. He wants to develop a more solid and muscular body. One of the older boys in the club has offered to get him some 'vitamins' that are guaranteed to increase his muscle bulk and improve his performance. Raphael asks Patrick, a talented sprinter in the pool, if he would like to try the 'vitamin' too as it is a sure way of improving his performance in the water and making the regional and state teams. Patrick knows that drug testing is happening in his sport and that those who are found to take drugs are labelled as cheats and disqualified. He remembers that drug testing in his sport is only random and then wonders what his chances of being found out would be. What does Patrick decide to do?

Drug-related dilemmas: Taking action



For each scenario:

- 1. Apply a decision-making model that enables you to:
 - identify the dilemma faced by the key character;
 - consider the options available to the character;
 - consider the short- and long-term consequences of each option;
 - · determine which option is most health promoting.
- **2.** Propose actions to support the decision and to promote health, now and in the future.
- **3.** Demonstrate a way of communicating the decision so that the rights and feelings of others are supported.
- **4.** State the desired outcomes for the character and other individuals in the social situation.
- **5.** Reflect on the decision that you might have made if faced with the situation in real life and the factors/values that would have influenced your decision.

Scenarios

- I. Belinda has been offered drugs and is thinking seriously of saying 'Yes'. Fiona is Belinda's best friend and tries to dissuade Belinda from trying drugs. Fiona is aware that she needs to decide how to communicate this now.
- 2. Your neighbourhood friend has some drugs and asks you to keep them for a couple of days. You believe it is wrong to be in possession of drugs. You can also see that your friend really wants you to mind them. You need to make a decision now and communicate this.
- **3.** Amy and Tamara go to a party together and upon arrival find that they do not know very many of the people. They stand near the refreshments, trying not to look nervous. A couple of older boys soon come over and start a conversation. One of them offers Amy a cigarette. Amy is a non-smoker but she starts to take one, then changes her mind and says, 'No, thanks'. The boy laughs and says, 'What's the matter, scared your parents will find out?' Amy is embarrassed and reaches out to take one but again changes her mind. She realises that she needs to make a firm decision and communicate this.
- **4.** Mitchell is at a beach party with other school mates. At the party he observes liquid paper thinner being offered around and many young people sniffing it. He even watches his older sister inhale it. When it is offered to him, he decides to say 'No, thanks. I think I'll pass'. He is teased by his older sister and her friends about being soft. They say that if he wants to be a man, he should try it. Mitchell needs to make a firm decision and communicate this.
- **5.** Binh and Russell are shooting baskets. Russell offers Binh a cigarette, which he politely refuses. He is taken by surprise when Russell says, 'Come on, mate, just try it! You need to get used to it. What are you going to do if Leigh offers you a joint at Craig's party on Saturday night?'. Binh realises that he needs to make a decision and communicate this to Russell.

(continued)

Drug-related dilemmas: Taking action (continued)



Resource Sheet

- **6.** Deanna has promised her parents that if she is allowed to have a party she will make sure there will be no alcohol or other drugs. Some of her friends have told her that they will only go if there is alcohol. Deanna needs to decide what to say to these friends so that she can keep her promise to her parents.
- 7. Kim accepts an invitation to a BYO party at a friend's house. She takes a cask of wine with her. Kim and many of the other guests continue to drink throughout the evening. Their inhibitions are gradually reduced and they begin to sing, dance and laugh loudly. Kim notices some guests disappearing into a bedroom. After a brief time she sees them reappear, very excited and as if on a 'high'. Kim is soon invited into the bedroom by one of her friends. Kim enters the bedroom and is offered a syringe. She stares blankly and is informed by a stranger in the room that it contains speed. She watches as one of her friends pays for the syringe and injects half of its contents into her arm. Kim is again offered the syringe. She is aware that she needs to make a firm decision and communicate this to those in the room.

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Any inquiries should be addressed to: Queensland School Curriculum Council PO Box 317 Brisbane Albert Street, Q 4002 Australia

Telephone: (07) 3237 0794 Facsimile: (07) 3237 1285 Website: http://www.qscc.qld.edu.au

Email: inquiries@qscc.qld.edu.au

Illustration by Stephen Francis

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