

Key Points for Effective AODA Education

When Educating Teens	When Educating Parents
How to begin a learning experience	
Remember “Students won’t care to know until they know you care.” - especially on this topic. Help the students connect with the topic -create a learning experience for how it plays out in THEIR life.	It’s equally important to connect w/ adults - why do THEY need to know about this issue. Parents really don’t know what’s happening with drug use w/ teens and sometimes parents don’t know that THEY are influential in the choices their child makes.
WHO should present	
Research has shown that Peer to Peer is effective. The classroom teacher is more effective than a one-time presenter. If bringing in an expert, the classroom teacher should remain in the classroom so they can reinforce the learning experience later.	It is important for the presenter to share their expertise with the audience but IF they are a parent, that probably speak more to the audience than anything else. Sharing your professional expertise is appropriate but keep the credential part brief.
Showing Methods of drug use or specific products or paraphernalia associated with use	
This should NOT be done w/ students - it increases their sophistication of use and/or their curiosity. DONT use drug boards, show pictures of the products or pills or ways to use.	Parents DO need to know what drug paraphernalia looks like as it will help them identify what they might be finding in their child’s room, etc. Showing them products that can be inhaled is also appropriate. Parents are usually not as sophisticated as their teens about current trends so this can help.
Address Short or Long Term Consequences	
Focus on immediate or short-term consequences (cost of product, fine amounts, what happens if convicted of a felony, etc.). In general, stay away from a lot of statistics, especially national statistics.	Short and Long Term are appropriate as adults understand the differences and recognize both as important
Scare Tactics - citing only the “extremes” or inaccurate info.	
If all teens hear are the horror stories, you’ll lose credibility because initial use is usually a good experience. If they later learn something is not true, they’ll dismiss the message and the messenger.	Parents need and want to know about the randomness and extreme consequences of overdose but be accurate about the facts.
Presentation by a Recovering Addict	
As much as we think this will work with teens, it’s not supported by research. It gets their attention but then they either translate it to “I’ll stop when I get that bad”, or it normalizes or glamorizes the behavior. It may be effective approach specific for teens in recovery.	Having a recovering person talk can be helpful but don’t have them just tell their story. Make sure the focus is on WHAT adults should do to get help for the abuser or addict. Have online and paper resources available so the adults don’t leave with feelings of hopelessness
ONLY information	

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Information can get a teen's attention but it won't change behavior - make sure it is balanced with experiential activities.	Information can get the parent's attention as well but should always be followed with skill building and time for personal reflection and application.
How much time for lecture?	
The less the better - no more than 10-15 min. in each "chunk". Use of media and interactive strategies are more effective in engaging students.	Limit to 15-20 min. at a time. Balance with small group discussion, Q&A, skill practice when appropriate.
Focus on the Risks	
Girls are more likely to take risk info. seriously. Boys are less likely to take risk info. seriously.	Parents need to know about risks because they can be an important communicator about this to their child.
Assemblies	
Assemblies aren't effective unless followed by small group discussion to reinforce/address what was learned.	Depends - best to have small group discussion but assemblies might work with some topics - ask yourself what the purpose is before you decide on this.
Which Skills?	
Coping Skills - dealing w/ stress Sense of Autonomy (they are not responsible for some one else's behavior) Sense of Hope/Future Refusal skills Problem solving skills Stress Management Not enabling Identifying individual biological predisposition for addiction Identifying individual low-risk guidelines for alcohol When/Where/How to get help	Coping skills - dealing with stress Setting boundaries, Effective Communication w/ child & other parents Warning Signs Not Enabling Identifying individual biological predisposition for addiction Identifying own low-risk use guidelines for alcohol When/Where/How to get help
Find the Positive Feeling	
Connect with positive feelings to motivate change - their future, relationships, finishing school, etc. If only focus is on the negative, it can result in teens disconnecting or feeling paralyzed	Connect with positive feeling to motivate change - being the best parent, protecting their children, making a difference, you can do this!!, etc. If all the focus is on the negative, it can be paralyzing as they feel helpless or apathetic
Which Drugs to address?	
Don't talk about drugs that students are NOT exposed to (look at local data)- tobacco, alcohol, prescriptions and inhalants in middle school, probably just about anything in high school.	This is not a concern w/ adults. Share local data of use including any trends so they understand progression. Comparison with state, regional or national may be helpful but DON'T overdo it.

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HOW to share data as well as other information - Think VISUAL	
<p>The NORM - i.e. “80% of students have not misused prescription drugs” instead of “20% of students misuse prescription drugs”. Feeling “part of the herd” influences teens. The more visual the better - work to show statistics in other ways beside a bar graph. Have 10 students stand up and use those 10 to show percentages, color in the % of stick figures, etc.</p>	<p>Be thoughtful about purpose - if to convince them there’s a problem, you might share that “20% of our children are misusing prescription drugs”. IF you want them to set boundaries, then sharing that “80% of students report that their parents ask them where they are going.” When possible show it visually - color in 2 of 10 teen profiles or 8 of 10 adult outlines, etc.</p>
How to end a learning experience	
<p>Reflection & Commitment - teens need to identify what THEY learned so allow them time to identify that and then what are they going to do about it. A wish or a hope is useless without a commitment - needs to be put into action planning,</p>	<p>Same as for Teens - reflection and commitment. The commitment is reinforced if it’s stated out loud so including that opportunity is important. AND everyone has the right to pass.</p>

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THE ELEPHANT ANALOGY and Behavior Change

(based on book Switch by Chip & Dan Heath)

What is the best predictor of the direction the elephant will go:

- a. Keep telling the rider to “turn left”.
 - b. Wherever the elephant wants to go
 - c. Having one clear path to travel
 - d. All of the above
- a. The **RIDER** represents an appeal to **THINKING** - the educational component. If all we do is present information, it will be as effective as yelling to the rider to “turn left”. What IS effective is to feel like they are “part of the herd” (Norm approach) and focusing on “what works”. It includes **SKILL** building - see list of skills in the table.
- b. The **ELEPHANT** is analogous to the **EMOTION** - just as the way the elephant wants to go is very influential to its course, so emotion will override knowledge. It is why you want to have your audience connect with a positive emotion -
- For Teens: get into the college they wanted, have a relationship, being a good athlete, etc.
- For Parents: feel good about their role as a parent, have successful & happy children, belief that they CAN do this.
- c. The **PATH** represents the **ENVIRONMENT** - how easy is it to make the change? This could include ease of access to drugs (well stocked liquor or medicine cabinet, beer in spare refrigerator or garage, prescriptions in purse or on counter, multiple sellers, etc.), attractiveness (advertising, belief that everyone’s using), cost (cheap, no awareness of harm).