

LESSON PLANS

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PSHE
Association

Drug and alcohol education

KS1-2

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LESSON PLANS

Drug and alcohol education

KS1-2

Keeping safe: things that go into and onto bodies

The first of three lessons for key stage 1 pupils, this lesson provides an age-appropriate introduction to drug and alcohol education. Pupils learn about different things that go into bodies and onto skin, and explore how to manage risk in relation to household products and medicines.

Neither this, nor any of the other lessons, is designed to be taught in isolation, but should always form part of a planned, developmental PSHE education programme.



Learning objective

To learn about things that go into bodies and onto skin and how this can make people feel.



Learning outcomes

By the end of the lesson pupils will be able to:

- describe how the things that can go into a person's body and onto their skin can change how people look and feel.
- identify that some things that go into or onto bodies can be harmful (or not so good for people) and how we know if something might be harmful.
- suggest basic strategies to respond to situations involving household products.
- recognise who to ask for help with things that can go into or onto bodies.



Climate for learning

Make sure you have read the [accompanying teacher guidance](#) before teaching this lesson, which includes guidance on establishing ground rules, the limits of confidentiality, communication and handling questions effectively.

Be aware that some pupils in the class may have experienced accidents or misused medicines and household products. It is important to consider sensitivities and prior knowledge about specific pupils' circumstances. If safeguarding concerns (such as possible neglect) arise during this lesson, these should be reported to the Designated Safeguarding Lead.



Resources required

Box/envelope for anonymous questions (ask-it-basket / talk-to-the-teacher note-box)



Resource 1: Ideas list (1 per pupil)



Resource 2: Picture cards (1 set per small group)



Resource 3: Amrit's dilemma cards (1 card or set of cards per pair)



Resource 4: People that help us labels (1 set per class)



Resource 5: Extension activity: Hazard labels (1 set per pupil, pair or group)



Optional

Collection of empty, washed medicine and household product bottles, containers and packets

Plastic hoops or boxes for sorting activity



Key words

body, skin, packet, bottle, syringe, hazard, label, symbol, helpful, harmful

Activity	Description	Timing
1. Baseline assessment	Establish ground rules. Pupils list in two columns, things that are good for bodies and things that are not so good for bodies	10 mins
2. Introduction	Pupils think about what can go into or onto a person's body - label a body outline.	5-10 mins
3. Paired discussion	Pupils discuss how different things that go into bodies or onto skin can change how a person looks or feels	10 mins
4. Sorting activity	Pupils sort products into helpful/harmful and discuss how they know whether something is helpful or harmful	10 mins
5. Amrit's dilemma	Pupils read about a dilemma and discuss how best to manage it	10 mins
6. Signposting support	Pupils consider who to ask for help in different scenarios and the importance of seeking help from a trusted adult	5 mins
7. Plenary/end-point assessment	Pupils share one thing they have learned and add to their baseline assessment activity <i>ideas list</i> in the light of their new learning	5-10 mins

Baseline assessment



Baseline assessment activity



Before teaching, establish or remind pupils of the ground rules, highlighting any that are particularly pertinent for this lesson, such as: *'if we are worried about things that go into or onto bodies, we should tell the teacher. We can do this by writing our name on a piece of paper and putting it in the ask-it-basket so they can talk to us later, rather than telling the whole class.'*

Using **Resource 1: Ideas list**, pupils draw / list:

- Things that are good for bodies...
- Things that are not so good for bodies...

Tell pupils they should not yet fill in the 'How do you know?' box at the bottom of the sheet, as they will do this at the end of the lesson.



Introduction



Display a large body outline. Draw around a pupil on a large piece of paper and display. Draw on eyes, ears, nose, mouth. Ask pupils to think about all the different things that might go into or onto a person's body. Record their responses on the body outline without commenting further.

Ask:

- What things might go into the mouth?
- What might go into the nose or ears?
- What things might go onto the skin?

Pupil responses might include:

Things that go onto bodies: *make-up, clothes, moisturiser/cream, water, tattoos, hugs/kisses, sand, jewellery, animal hair/licks, smoke, plasters, bubbles, medicines*

Things that go into bodies: *food, water, fizzy drinks, sweets, medicines, fresh air, insect bites, injections, smoke*

Core activities



Paired discussion



Choose some examples from the annotated body outline for pupils to discuss in pairs:

Ask pupils:

- How does it change how the person looks and/or feels?
- Is it good or not so good for bodies?

Teacher's note: *Some things may be both good and not so good – notice what ideas the pupils come up with and whether pupils recognise that this can change when there is 'too much... or not enough' of something.*



Sorting activity



Working in small groups, pupils sort picture cards from **Resource 2: Picture cards** into groups according to whether the picture shown is helpful or harmful, or whether some can be both helpful and harmful to bodies. Observe pupils' responses and discuss.

Suggestions to support pupils' learning:

- Helpful: fresh air, water, sunscreen.
- Harmful: exhaust fumes, berries from the garden may be harmful if we don't know what they are or if they are safe to eat.
- Both helpful and harmful: hygiene and cleaning products and medicines must be used safely otherwise they can be harmful; if someone eats too many sweets or drinks too much (fizzy drink) it can damage their teeth or make them feel ill; doctors and nurses use syringes to give injections that help bodies stay healthy but it is dangerous to pick up syringes if we see them lying on the ground.

Support:



Pupils select only the items they think are harmful to bodies and try to explain why.

Challenge:



Extend pupils' thinking by asking more open questions:

- Can they think of other examples?
- Can the pupils explain when or why something is helpful or harmful for the body?
- How do we know if something is helpful or harmful?

Bring the class back together and discuss how we know whether something could be harmful for bodies.

Such as:

Labels and hazard symbols printed on boxes and bottles; where the product should be kept and how it should be used to keep people safe; mum/dad says they are not allowed to touch it; can make someone ill if they have too much (e.g. sweets)

Teacher's note: Empty and washed packaging could be used as the stimulus rather than picture cards for this activity, with plastic hoops or boxes used for the sorting activity.



Amrit's dilemma



Pupils, working in pairs, are given a card from **Resource 3: Amrit's dilemma cards**. Pupils decide on the best answers to the following questions and record their responses on the card:

- What would help Amrit?
- What would not be helpful?

When completed, pupils meet with another pair who discussed the same dilemma and compare answers. Repeat with an alternative dilemma.

Support:



Some scenarios are more common and require a less complex response (e.g. scenario 1, 4 and 5) and so these could be allocated to pupils requiring more support.

Challenge:



Work through each of the dilemmas on the sheet individually, then compare responses with a partner.

Answers to Amrit's dilemmas:

1. *Helpful: b and avoid eating any more ice-cream / Not helpful: a and c*
2. *Helpful: c or parent might put medical cream on it or add medical oil to a bath / Not helpful: a and b*
3. *Helpful: c and not touch it / Not helpful: a and b*
4. *Helpful: a and adult might put antiseptic cream on it / Not helpful: b and c*
5. *Helpful: a and then keep eye shut for a short time / Not helpful: b (rubbing the eye worsens the effect of the shampoo) and c*



Signposting support



Display **Resource 4. People who help us labels** around the classroom.

Choose one example from **Resource 3: Amrit's dilemma cards**, and ask pupils to move to stand next to the label showing the person who could help Amrit in the situation. Choose a few pupils to explain their thinking.

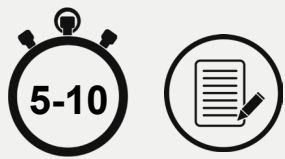
For example:

1. Feeling sick from eating too much ice-cream – a parent or someone else (whoever is looking after them e.g. a grandparent)

2. Skin has spots on it – a teacher, parent, a doctor
3. Liquid has been spilt in the shed - a parent or someone else (whoever is looking after them)
4. Grazed knee from falling over - a friend could get help from an adult, a teacher, a parent or someone else (e.g. midday assistant)
5. Shampoo in eye – parent, or rinse it with water themselves and then tell parent

Draw out that it is important that they tell 'someone', as telling 'no-one' could lead to further accidents or problems. They should always talk to an adult they trust (such as a parent or teacher) if needed. Remind pupils they must never put something into their body or onto their skin if they don't know what it is, or if they don't have permission from their parent.

Plenary/Assessment of learning



Pupils share one thing they have learned about things that go into or onto bodies.

Then go back to their ideas lists they made at the beginning of the lesson. Pupils should add to or amend their list in a different colour in the light of their new learning. Pupils should also include how they know whether something is helpful or harmful to bodies by adding their ideas to the box at the bottom of the sheet – How do you know?

Use this as evidence of learning and progress and to inform further teaching.

Extension activity

Hazard-spotting

Pupils use **Resource 5: Hazard labels** individually, in pairs or small groups to match common hazard labels found on household products to their meanings and recognise why some products might be harmful to bodies.

Keeping healthy: medicines

This is the second of three lessons for key stage 1 pupils introducing age-appropriate drug and alcohol education. This lesson focuses on medicines; what they look like, how they are used and why people use them. It explores how medicines are used to treat illness in the short and long term as well as how some medicines can help protect people from becoming ill in the future. Pupils consider the role of other people in helping them and others to stay healthy and well, manage, or recover from, illness.

Neither this, nor any of the other lessons, is designed to be taught in isolation, but should always form part of a planned, developmental PSHE education programme.



Learning objective

To learn about medicines, and the people who help them to stay healthy



Learning outcomes

By the end of the lesson pupils will be able to:

- identify what can make people feel better if not feeling well
- explain that medicines come in different forms and are used in different ways
- recognise that some medicines, such as vaccinations, can help prevent illness and disease and that some people need to take medicines every day to help them to stay healthy
- identify who helps people to stay healthy and what they do



Climate for learning

Make sure you have read the [accompanying teacher guidance](#) before teaching this lesson, which includes guidance on establishing ground rules, the limits of confidentiality, communication and handling questions effectively.

It is important to consider sensitivities and prior knowledge about specific pupils' circumstances. The topic of medicines and health may be particularly sensitive for some pupils. Be aware that some pupils and their families may be affected by a health condition and may regularly need to take medicines in order to stay well. Some pupils may have experienced misuse of medicines. It is important they understand that a trusted adult is responsible for administering medicines. If safeguarding concerns (such as possible neglect) arise during this lesson, these should be reported to the Designated Safeguarding Lead.



Resources required

Box/envelope for anonymous questions (ask-it-basket / talk-to-the-teacher note-box)



Resource 1: Feel better scenarios (1 set per pair)



Resource 1a: Support: Feel better scenarios (1 set per pair)



Resource 1b: Challenge: Feel better scenarios (1 set per pair)



Resource 2: Medicines cards (1 set per class)



Resource 3: Different medicines chart (1 per pair)



Resource 4: Medicines case studies (1 set per class)



Resource 5: Support: People who help us with health cards (1 set per pupil or small group requiring support)



Optional

Collection of empty, washed medicine and household product bottles, containers and packets

Persona doll or puppet



Key words

Medicine, tablets, capsule, injection, spray, cream, drops, inhaler, vaccination, healthy, unhealthy, well, unwell, recover, illness, injury, protect, body, bodies

Activity	Description	Timing
1. Baseline assessment	To be completed before the lesson. Individually or as a whole class, make a mind-map about what they already know about medicines.	10-15 mins
2. Introduction	Re-introduce or reinforce ground rules. Introduce the lesson with a short explanation about medicines.	5-10 mins
3. Feel better scenarios	Pupils read scenarios and suggest what will help the characters to feel better	15 mins
4. Different medicines hunt	Pairs of pupils describe different types of medicine, what it looks like, how it is used, where on the body and why	10 mins
5. Keeping healthy case study	Pupils explore a case study about someone who needs to use medicine every day to stay healthy	10 mins
6. Give me 5	Pupils think of people who help them stay healthy and well and what they do	5 mins
7. Plenary/end-point assessment	Pupils name one thing that can help someone feel better. Explain the importance of only using medicines with the guidance of a trusted adult and telling them if they feel unwell	5-10 mins
8. End-point assessment	Pupils add to their baseline assessment activity, medicines mind-map, to demonstrate their new learning about medicines	5-10 mins

Baseline assessment



Baseline assessment activity



This activity should be completed before the lesson. This allows time to look through the pupils' work and gain a sense of their current understanding and experiences. Before setting this activity, ensure that ground rules for PSHE education lessons have been developed and shared with the class.

Before the lesson, ask pupils to respond to the question:

- What do we know about medicines?

Pupils draw/write an individual response or make a whole class brainstorm or mind map.



Introduction



Re-introduce ground rules and reinforce any that may be particularly important for this lesson, such as 'although in this lesson we will be thinking about all different kinds of medicines and when people use them, we are not going to name people we know. If we want to share a story about someone using a medicine, we will say "someone I know..." rather than use their name.'

Explain that in this lesson pupils will be learning about some of the medicines and people that help us to stay healthy and well.

Explain that there are different types of medicines which are used in different ways and for lots of different reasons:

- some medicines help someone to recover (get better) from illness or injuries, such as antiseptic cream on a graze;
- some medicines and other products protect the body, such as vaccinations which protect people against diseases (vaccinations might include injections or drops to swallow), sun cream protecting the skin from burning, or mosquito spray protecting against bites
- some medicines help people keep healthy and well and may need to be used every day or over a long period of time

Core activities



Feel better scenarios



Pupils think about a time when they felt poorly and what helped them to feel better. Pupils do not need to share, just reflect for themselves.

Introduce a character and explain that they are not feeling well. You might want to use a persona doll or puppet. Pupils discuss what might help them to feel better.

Pupils work in pairs, to read **Resource 1. Feel better scenarios** and suggest what might help the characters to feel better and get well.

Support:



Resource 1a: Feel better scenarios – support. Pupils match up the symptoms to the remedies/things that might help them feel better.

Challenge:



Resource 1b: Feel better scenarios – challenge. Pupils organise responses into things that go into / onto bodies and add other ideas.

Pupils may identify:

- Medical products such as: *antiseptic cream, ear drops, nasal spray, tissues, plasters*
- Soothing items or activities such as: *cuddling a teddy, hugs, resting, watching TV, sleeping, drinking water, eating soup, rubbing the injury*

Take feedback from the class. Draw out that medicines can be used to treat an illness or injury, but that other things such as hugs or having a hot drink can also help someone feel better.



Different medicines hunt



Pupils think about a time they were given medicine. Ask them to think about the following questions:

- What did it look like?
- Did it go into or onto their body?
- How did it help?

Teacher's note: If pupils cannot remember a time they were given medicine, they can think about someone they know, such as a younger brother or sister. Pupils do not need to share, just reflect for themselves.

Explain that medicines look different (come in many different forms); are used in different ways, and that it is important they are used correctly.

Display **Resource 2. Medicines cards** around the classroom.

In pairs, pupils hunt around the classroom for the cards, find four different types of medicine and complete **Resource 3. Different medicines chart** showing what the medicine looks like, where it might be used on the body, how it is used and why it might be needed.

Bring the class back together and discuss the different forms that medicines come in (e.g. drops, tablets, lozenges, liquids, creams) and explain that each medicine has a specific and individual use; they are all needed for different parts of the body and to relieve different ailments or illnesses.

Teacher's note: Empty, washed bottles, and containers and empty medicine packets can also be used for the medicines hunt, if preferred.



Keeping healthy case study



Explain that some medicines help to keep illnesses under control and are needed to help the person stay healthy – so that they can do all the things most other people can do.

Choose one or some of the medicines case studies to read to the class (**Resource 4: Medicines case studies**) and encourage the pupils to discuss the questions before sharing their ideas. Pupils can work as a whole class or in small groups.

Talk about the type of medicines used and how they help the person. Conclude that some people take medicines to recover from illness quickly and some need to take medicines every day or regularly in order to help keep healthy and well over a longer period of time.

Teacher's note: You might prefer to read an information book on a similar theme. Be aware that the pupils or members of their families may be living with a health condition. In most instances, it is best to select a case study that is not being experienced by a pupil in the class.



Give me 5



In pairs or small groups, pupils think of at least five people who help others to stay healthy and well, discuss their roles and the kinds of things they do.

People might include: *Parent/carer; doctor, pharmacist, nurse, paramedic, teacher, teaching assistant, midday assistant, dentist, counsellor, nutritionist, cleaner.*

What they do might include: *provide healthy food to eat, clean their clothes, keep the house/school clean, check-ups, listen to them, give them medicine.*

Support:



Use **Resource 5. People who help us with health** cards to identify the roles of the people and label their job title and what they do.

Challenge:



Think of 10 different people – 'give me 10'

Plenary/**Assessment of learning**



Reflecting on today's lesson and signposting support



Each pupil shares one thing that can help someone feel better if they are unwell.

Remind the pupils that if they feel unwell it is important that they talk to an adult they trust – at home or school; and that only a trusted adult should give them medicines. Young children should not take medicines without an adult helping them. If they are unsure about taking or using medicines of any kind, they should speak to their trusted adults first.



End-point assessment



Pupils return to their baseline assessment activity, *medicines mind-map*. Using a different colour pencil or pen they add to the mind-map to demonstrate their new learning about medicines.

Extension **activity**

Success story



Write a story or create a storyboard about a character who isn't feeling well and what they do to feel better. Pupils write about who helped them and what they did.

Keeping safe: medicines and household products

This is the third of three lessons for key stage 1 pupils about managing risks in relation to household products and medicines. It focuses on safety rules at home and in familiar environments. Pupils identify risk in different situations and what to do to keep themselves and others safe. Pupils also explore how to manage when feeling pressure to do something that looks like fun but might be harmful to their, or others', bodies.

Neither this, nor any of the other lessons, is designed to be taught in isolation, but should always form part of a planned, developmental PSHE education programme.



Learning objective

- To learn about rules for keeping safe around medicines and other household products



Resources required

Box/envelope for anonymous questions (ask-it-basket / talk-to-the-teacher note box)



Resource 1: Safety rules quiz cards (1 set per class or small group)



Resource 2: Risk cards (1 set per group)



Resource 2a: Support: Action cards (1 set per pupil or small group)



Resource 3: Pressure cards (1 set per class)



Collection of empty, washed medicine and household product bottles, containers and packets, or selected pictures from **Lesson 1: Resource 2**. Picture cards (1 set per class)



Learning outcomes

By the end of the lesson pupils will be able to:

- state safety rules for the use of medicines and other household products
- recognise risk in situations related to medicines and household products, including when there is pressure to do something which is unsafe or may cause someone to be unwell
- identify what to do next in a situation that may involve risk
- identify when asking for adult permission is required (in relation to medicines and household products)



Climate for learning

Make sure you have read the [accompanying teacher guidance](#) before teaching this lesson, which includes guidance on establishing ground rules, the limits of confidentiality, communication and handling questions effectively.

This lesson includes pupils acting 'in role'. To ensure role play is managed sensitively, provide a signal or countdown for pupils stepping 'into role' and another for coming 'out of role'.

It is important to consider sensitivities and prior knowledge about specific pupils' circumstances. Be aware that some pupils in the class may have experienced accidents with medicines and household products in the home. If safeguarding concerns (such as possible neglect) arise during this lesson, these should be reported to the Designated Safeguarding Lead.



Key words

product, medicine, cleaning, safety, instructions, rule, risk, accident, pressure, safe, unsafe

Activity	Description	Timing
1. Introduction	Remind pupils of ground rules. Pupils view different household products' pictures or empty packaging and think about how these are used at home and school	5 mins
2. Baseline assessment	In pairs, pupils discuss safety rules involving the use of household products and medicines	5 mins
3. Safety rules quiz	As a class or in small groups, pupils decide whether a safety rule is true, false or whether it depends on the situation	10 mins
4. Safety rule scenarios	Pupils read scenarios where safety rules might be broken, identify the risk and suggest what the character should do next	15 mins
5. What if?	Pupils discuss scenarios in the light of additional pressure characters may feel from themselves or others	15 mins
6. Signposting support	Discuss when someone should ask for help and who to ask	5 mins
7. Plenary / end-point assessment	Pupils pair up and share their learning on safety rules, then meet with another pair, share and compare	5 mins

Baseline assessment



Introduction



Remind the pupils of the ground rules for PSHE education lessons. Highlight any particular to the lesson, such as 'if anything comes up in this lesson that makes me worried about your safety at home or school, I will need to tell another teacher, to make sure you stay safe in the future', or 'if you are worried about something you can let me know by writing a note and putting it in the talk-to-the-teacher note-box.'

Display empty, washed packaging from household products, including cleaning products and medicines or use pictures from **Lesson 1 – Resource 2: Picture cards**.

Explain that items like these can often be found in our homes and at school. Ask the pupils to discuss:

- What they are
- What they are used for
- Who might use them
- Where they are kept



Baseline assessment activity



Ask the pupils to discuss the following questions in pairs, then share their ideas with the class:

- Are there any safety rules about using these products?
- What are the safety rules?

Use their responses to gain a sense of what they already know and think.

Pupil responses might include:

Be careful not to spill any – if any gets spilt clean it up immediately; don't put it in your mouth; don't put onto skin; if it goes in your eyes wash straight away and don't rub them; don't use it if it is not yours, check how much to use; check if you are allowed to use it; only an adult should use it or give it to you.

Core activities



Safety rules quiz



Display the safety rules from **Resource 1: Safety rules quiz cards**, reading each one aloud in turn. Pupils discuss and decide whether each safety rule is true / false / depends. Categorise the safety rule under one of the headings. This activity can be carried out with the teacher leading the whole class or with pupils working in small groups.

If the pupils suggest 'it depends', discuss this rule in more detail, encouraging them to explain their thinking or give an example of when the safety rule might 'depend'.

For example, Safety rules quiz card 1. 'Children should not use medicine without an adult helping'. Some children will be used to and given the responsibility of using their asthma pump every day on their own.

Safety rules quiz answers:

True:

- Medicines and cleaning products should be kept out of the reach of children
- It is important to use (or take) the amount instructed on the bottle or packet
- Always read the instructions before using (or taking) something

False:

- If someone is ill any medicine will help them
- If you see a syringe you should pick it up and put it in the bin
- All medicines should be taken twice a day
- Medicines last forever

Depends:

- Children should not use medicines without an adult helping (see example above)



Safety rule scenarios



In groups, pupils are given simple sentence cards with pictures (**Resource 2: Risk cards**). Pupils discuss what the risk or danger might be in the scenario.

- Why is it unsafe?
- What could the character(s) do to help prevent something unsafe or dangerous happening?

Support:



Pupils are given a scenario from **Resource 2: Risk cards** and **Resource 2a: Action cards**. They look at the action cards and organise them into things the character should do and things the character should not do in the situation.

Challenge:



Pupils complete the activity and then write a safety rule to match each scenario. The following sentence starters could support pupils:

- Always...
- You should never...
- It is important to...
- Remember to...



What if...?



Choose some of the scenarios from **activity 2: safety rule scenarios** — see **Resource 2: Risk cards**. Find the matching 'What if...?' statement on **Resource 3: Pressure cards**.

Read aloud the scenario on the risk card and then the corresponding pressure statement. Invite pupils to role play the character managing the situation positively.

With the class discuss:

- how might the character feel with the added pressure?
- would it make it easier or harder to keep safe?
- how should they handle the situation to help prevent (or stop) an accident or something unsafe from occurring?

Teacher's note: To ensure role play is managed sensitively, choose pupils who feel confident to role play and be sure to provide a signal or countdown for pupils stepping 'into role' and another for coming 'out of role'.



Signposting support



Discuss the importance of telling an adult if there is a likelihood of an accident and that if an accident has happened, the importance of getting help quickly. If there is an emergency and no adults are available, they should phone 999. If there is something they are not sure about, such as whether to touch a household product or medicine, they should not be persuaded to do it, but should always seek help from a trusted adult at home or school first.

Plenary/Assessment of learning



End-point assessment



Pairs of pupils think about the safety rules they have learned during the lesson, then meet with another pair, share and compare ideas. Ask pupils: Are there any they have learned that they did not know before?

Extension activity →

Make a class list of safety rules about household products and medicines for display.

Safety rules and risks: medicines and household products

This is the first of two lessons for lower key stage 2 pupils providing age-appropriate drug and alcohol education. This lesson focuses on the reasons why we use household products and medicines and the importance of using them safely. Pupils explore a range of medicine labels and instructions and assess risk in different situations. They identify how to minimise further risk to help prevent accidents from occurring.

Neither this, nor any of the other lessons, is designed to be taught in isolation, but should always form part of a planned, developmental PSHE education programme.



Learning objective

- To learn about the safe use of medicines and household products



Resources required

Box/envelope for anonymous questions (ask-it-basket)



Empty medicines packaging

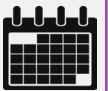


(boxes and clean, washed bottles) and instruction leaflets from over the counter and prescribed medicines such as paracetamol, travel sickness tablets or cold and flu tablets, cough medicine, eye/ear drops, skin creams. Ensure that personal information on printed labels from prescribed medicine is deleted.

Resource 1: Household products and medicines – benefits and risks list (1 per pupil, or pupils can create this grid in their work books or on a piece of paper)



Resource 2: A day in the life (1 per class)



Resource 3: Medicine safety scenarios (1 scenario per small group of three or pair)



Key words

Household, product, medicine, safety, risk, instructions, warning, side effects, dose, dosage, prescribed, pharmacy, vaccination



Learning outcomes

By the end of the lesson pupils will be able to:

- explain the importance of taking medicines correctly and using household products safely
- identify risk in relation to the use of medicines and household products, and suggest what action to take to help prevent or minimise harm
- recognise sources of information and whom to ask for help with medicine safety



Climate for learning

Make sure you have read the [accompanying teacher guidance](#) before teaching this lesson, which includes guidance on establishing ground rules, the limits of confidentiality, communication and handling questions effectively.

Be aware that some pupils in the class may have experienced accidents involving medicines and household products. If safeguarding concerns (such as possible neglect) arise during this lesson, these should be reported to the Designated Safeguarding Lead. Be sensitive to pupils whose families choose to use alternative medicines or cleaning products.

This lesson includes pupils acting 'in role'. To ensure role play is managed sensitively, provide a signal or countdown for pupils stepping 'into role' and another for coming 'out of role'.

Activity	Description	Timing
1. Baseline assessment	To be completed before the lesson. Establish ground rules. Pupils write down the benefits and risks of using different household products and medicines, and suggest how risk of harm can be reduced.	5-15 mins
2. Introduction	Remind pupils of ground rules. Pupils note how a family use medicines and household products safely and how they help them	10 mins
3. Medicine labels and analysis	Pupils discuss the importance of following instructions for using medicines – pupils explore medicine labels and instructions	10 mins
4. Freeze frame	Pupils use scenarios to create freeze frames about risks involving medicines, household products and safety	10 mins
5. Role play	Pupils role-play how the characters in the scenario can best manage the risk	15 mins
6. Plenary / signposting support	Pupils share one thing this lesson has made them think about medicine safety; signpost further advice and emergency help	5 mins
7. End-point assessment	Pupils return to their list from the baseline assessment and add to or amend their ideas to demonstrate their learning	5-15 mins

Baseline assessment



Baseline assessment activity



This activity should be completed before the lesson. This allows time to look through the pupils' work and gain a sense of their current understanding. Before setting this activity, ensure that ground rules for PSHE education lessons have been developed and shared with the class.

Display or provide copies for pupils of **Resource 1: Household products and medicines – benefits and risks list**

Ask pupils the following questions:

- How do these help us?
- Are there any risks from using these products? What are the risks?
- What will help reduce the risks?

Pupils record their ideas on **Resource 1: Household products and medicines – benefits and risks list**, or in their exercise books.



Introduction



Remind pupils of the ground rules for PSHE lessons. Explain that this lesson will focus on household products, especially medicines and the importance of people using these safely. In the lesson they will be looking at packaging from real medicines and that these have been emptied (and washed if required).

Display and read **Resource 2: A day in the life to the class.**

Pupils note the different items used by the family and how they use them safely, discussing in pairs and then feeding back.

Take responses, and circle in a coloured pen on Resource 2: A day in the life, the different items, pointing out any safety aspects.

Suggestions to support pupils' learning:

Benefits:

- Medicines and other products can help someone feel better if they are ill (e.g. paracetamol), protect them from becoming ill (e.g. vaccinations protect people from disease and sun-creams protect the skin from harmful sun rays), or help them stay healthy (e.g. if someone has asthma, medicines help them keep well; pets and farm animals might also need medicines to help them keep well)
- Household products (such as cleaning sprays, liquids and capsules) help keep the house clean and free from germs, and keep bodies clean and protected from germs too (e.g. soap, shampoo and toothpaste).

Safety considerations:

- Whilst some medicines can be bought over the counter in supermarkets and shops; pharmacists, doctors and nurses prescribe medicines and give medicines like vaccinations; it is important to read the instructions before using medicines and other household products; medicines and household products should be kept out of reach of children and disposed of carefully; spillages should be cleaned up immediately; if accidents occur the product should be washed off; gloves may be needed to use some household products and these should only be used by adults.

Core activities



Medicine labels analysis



Refer back to **Resource 1: A day in the life**, when Aunt Lusía has a headache. Point out that one of the things she does is read the instructions on the medicine's packet before she takes the tablets.

Ask pupils: Why is it important for her to do this? Take some suggestions from the pupils.

Pupil responses might include:

So that she knows what the medicine is, to know how many to take and when (e.g. with a meal), to know if they are suitable (the right medicine for her), so she doesn't take too many, to check it is safe to take with other medicines, to check the 'use-by' date (medicines may become ineffective if out-of-date, or - like food and drink - may go bad).

Using real empty medicine packaging, pupils work in pairs to analyse the labels and instructions leaflets – noticing the information provided. Take feedback and make a list to display.

For example:

- Name and type of medicine
- How much / How many in the packet
- Uses - What it does, how it helps
- Who the medicine is meant for

- Dose - How much to take
- How to use
- Safety warning and instructions
- Where and how to store the medicine
- Side effects
- Ingredients
- Expiry date
- Manufacturer

As a class, discuss unfamiliar vocabulary and why instructions are printed on the medicine packaging/ leaflets for safety.

Teacher's note: It may be worth pointing out that sometimes medicines are removed from their original packaging and put in 'pill boxes' for example, which might have the days of the week or times of day on them. These are often used by a person who needs to take medicines regularly to help them remember when to take the medicine. Before they are dispensed into these pots, the adult responsible will be aware of the correct way to take the medicine.

Discuss how some medicines can be bought in shops or pharmacies and some must be prescribed by a doctor or nurse. Explain that prescribed medicine is prepared for a specific individual but that medicines available to buy could be for anyone who needs them. If possible, compare two different packages to demonstrate this.

Support:

Pupils find just three different pieces of information on the medicine packaging label.

Challenge:

Pupils are challenged to find 10 different pieces of information on the medicine packaging label.



Freeze frame

Organise pupils into small groups (of three) or pairs. Give each group a scenario from **Resource 3: Medicine safety scenarios**, ensuring an even spread of examples across the class.

Ask the pupils, in their groups, to read some examples of situations involving medicines and safety rules then get 'into role' and make a 'freeze frame', as if someone had taken a photograph of the scenario.

Once 'out of role', groups discuss the risk in the situation, answering the following questions:

- What is the risk? What might happen?

Teacher's note:

If working in groups of three, one pupil can become the 'director' of the scene, rather than acting 'in role'. To ensure role play is managed sensitively, provide a signal or countdown for pupils stepping 'into role' and another for coming 'out of role'.

Support:

Choose scenarios that are likely to have a more obvious outcome (such as scenarios 2, 4 and 7).

Challenge:

Extend pupils' thinking by asking, if this happens, how could this affect the health of the person or people in the situation?



Role Play



Next, pupils discuss the following two questions for their given scenario:

- What should the characters do now to prevent any further risk?
- Who could help? Where could the person get more support or advice?

Stepping back 'into role', pupils role-play what the characters should do to prevent any further risk and identify who can help.

Some of the groups can show their role plays to the class. The class feedback on whether they think the characters did the right thing to help prevent any further risk and share further ideas.

Suggestions to support pupils' learning:

- Frankie, Sam and the inhaler – prescribed medicines should not be shared, as the prescription (which medicine and how much they should take) may differ for individuals; some medicines are only prescribed to individuals, whereas others can be taken by anyone with that condition. Using someone else's inhaler may cause a bad reaction. This should only ever be done in an emergency and under the guidance of a trained adult or medical professional. Frankie should move away from any triggers, sit up straight, try to remain calm and control her breathing. Sam should go and get help.
- Frankie, Skye and the bottle of liquid – it is important not to take medicine that is not meant or prescribed for you; they do not know what the liquid is or the effect it will have on their bodies if they drink it and it could make them ill. Frankie should refuse to drink the liquid and suggest Skye puts it back where they found it. Frankie should tell a teacher that Skye has the bottle of liquid, in case Skye decides to drink some.
- Frankie, the Year 1 child and the hand sanitiser – using a cleaning product incorrectly can be harmful, in this case, the product is not meant for use on the face and may have caused an allergic reaction. Frankie should alert a teacher and the child should let a teacher/parent know what happened. It is likely the teacher/parent will suggest the child washes their face with water in the first instance to remove the product from their skin. If it has gone in the child's eyes, the adult should help them rinse their eyes with water immediately. If it worsens they may need to see a doctor or pharmacist.
- Frankie, her cousin and the cleaning products – children should not play with cleaning products, if some goes onto their skin or into their mouth this could be very harmful. Frankie should alert an adult immediately; the baby's skin should be washed under water to remove the product; the spillage should be cleaned up quickly so as not to cause further accidents; the cleaning products put away and safely out of reach of children.
- Frankie, Mum and the medicine – children should be supervised by an adult when taking medicines, the amount to use should be checked by reading the instructions and not guessing – taking too much can make someone more ill. Frankie should wait until Mum comes off the phone to help.
- Dad and the tablets – some medicines can cause 'side effects'; Dad is at risk of causing an accident if he is too tired to drive. Dad should check the instructions and side effects warnings; he could ask a pharmacist or call the NHS helpline (111) to find out if it is safe for him to drive and work if he is still not sure.
- Frankie, Aunt Lusia and the tablets on the table – leaving medicines around is dangerous because people might mistake them for something else (e.g. sweets) which, if eaten, could cause a bad reaction or make someone ill; it is important to dispose of unwanted medicines correctly -unused prescribed medicines should be disposed of properly by taking them back to the pharmacist. Frankie should alert an adult that the tablets have been left on the table. The adult should throw them away correctly or put them back into a correctly labelled box.

Plenary/Assessment of learning



Reflecting and signposting support



Pupils share one thing this lesson has made them think about medicine safety – something new they have learned or something they think is important for them to remember in the future.

Reiterate that medicines are helpful for health but only if they are used correctly and stored/disposed of safely. Adults should administer medicines to children; there are some medicines children can use on their own if they have been trained to do so (such as inhalers) but usually adults should give medicines to children. Adults can find help with using medicines on the medicine packets, from a doctors' surgery or pharmacy or by phoning the NHS helpline – dial 111. Explain that if they are ever unsure about using a medicine, they should ask a trusted adult and if they are ever in a situation where a medicine has caused illness and a trusted adult is not available, they should call the emergency services by dialling 999.



End-point assessment



Pupils return to their baseline assessment activity, benefits and risks list and the questions they answered:

- How do these help us?
- Are there any risks of using these products? What are the risks?
- What will help reduce the risks?

Thinking about their learning from the lesson, pupils add to or amend their ideas. They can do this on the original sheet using a different colour pencil or pen or start a clean page if preferred.

Extension activity →

Make a leaflet designed for the Grech Family about safety with medicines and household products.

Safety rules and risks: alcohol and smoking

This is the second of two lessons for lower key stage 2 pupils providing age-appropriate drug and alcohol education. This lesson focuses on caffeine, alcohol and cigarettes/e-cigarettes including their associated risks and effects. Pupils develop their knowledge of related laws and guidelines. They understand that for some people it is difficult to stop smoking but learn about ways people can access support and advice to protect theirs and others' health.

Neither this, nor any of the other lessons, is designed to be taught in isolation, but should always form part of a planned, developmental PSHE education programme.




Learning objective


- To learn that caffeine, cigarettes, e-cigarettes/vaping and alcohol can affect people's health





Resources required

Box/envelope for anonymous questions (ask-it-basket) 

Resource 1: True or false quiz (1 per pair) 

Resource 2: Teacher fact sheet (quiz answers) Drugs common to everyday life (1 for the teacher) 

Resource 3: Overheard conversation script (1 per class or pair) 

Resource 4: Multiple choice questions (1 per small group) 



Learning outcomes

By the end of the lesson pupils will be able to:

- identify some of the risks of caffeine, cigarettes, e-cigarettes/vaping and alcohol
- identify how these risks can affect the person, or those around them
- explain how laws, guidelines and restrictions help to keep people safe and healthy
- identify where people can get help and support to protect their own and others' health



Climate for learning

Make sure you have read the [accompanying teacher guidance](#) before teaching this lesson, which includes guidance on establishing ground rules, the limits of confidentiality, communication and handling questions effectively.

Teacher's note: It is important to consider sensitivities and prior knowledge about specific pupils' circumstances. Pupils in the class will have a range of experience and understanding about alcohol, cigarettes and e-cigarettes. They may be concerned about someone smoking in their home. If safeguarding concerns arise during this lesson, these should be reported to the Designated Safeguarding Lead.



Key words

Cigarette, e-cigarette, smoking, vaping, drinking, alcohol, caffeine, laws, guidelines, health, habit, quit, cessation

Activity	Description	Timing
1. Baseline assessment	To be completed before the lesson. Pupils respond to a character's questions about smoking and alcohol	5-15 mins
2. Introduction	Remind pupils of ground rules. Basic introduction to drugs other than medicines: caffeine, alcohol, cigarettes and e-cigarettes	5 mins
3. Quiz	Pairs complete a quiz about laws and guidelines relating to caffeine, cigarettes/e-cigarettes and alcohol	10 mins
4. Group discussion	In small groups, pupils discuss why adults may choose to use these different substances	5 mins
5. Overheard conversation	Pupils read a conversation script to find out about some of the risks of smoking and what can help people who smoke, to stop	10 mins
6. Multiple choice discussion	In small groups, pupils answer multiple choice questions using the information from the previous activity	15 mins
7. Plenary / signposting support	Pupils reflect on their learning, are reminded about advice and support for adults and who they can talk to about any concerns	10 mins
8. End-point assessment	Pupils revisit the baseline activity and add to or amend their ideas on their original or a new sheet of paper	5 mins

Baseline assessment



Baseline assessment activity



This activity should be completed before the lesson. This allows time to look through pupils' work and gain a sense of their current understanding. Assess their recognition of the skills someone might need to protect their own or others' health. Ensure that ground rules have been established and remind the pupils of these, before carrying out the baseline activity.

Read the following scenario to the pupils.

Aunt Lusía is watching a news report. After watching it she says,

"Don't drink too much caffeine and alcohol! Don't smoke! Why are there all these rules? Why are they important? What should people do?"

Ask the pupils:

- What would you say to Aunt Lusía?
- What would help her or other people?

Pupils can write their responses in their exercise books.



Introduction



Remind pupils of their ground rules and highlight any particularly pertinent to this lesson, such as ‘we won’t share personal stories about people we know or name them if we do want to talk about their story, instead it is best we begin sentences with ‘someone I know...’ or ‘someone I heard about...’

Explain to pupils that there are substances (other than medicines) that some people use in their home, or out and about, such as: caffeine (found in tea, coffee and energy drinks), cigarettes or e-cigarettes and alcohol. Some adults choose not to use these because their religion prohibits it. Some adults choose to use these but they are not meant for children. They can be harmful to health and wellbeing and for that reason there are laws and guidelines about their use.

Core activities



Quiz



To find out more about the laws and guidelines on the use of caffeine, cigarettes/e-cigarettes and alcohol, pupils work in pairs to complete **Resource 1: True or false quiz**.

Go through the answers with the class, using **Resource 2: Teacher fact sheet (quiz answers)** to help guide your responses. Discuss how these laws and guidelines help protect people and their health.

Support:



Pupils may require some additional adult support to read or further explain the question.

Challenge:



Ask pupils to suggest which laws/guidelines mainly protect adults, and which are there to protect children.



Group discussion



To further elicit pupils’ understanding and attitudes, ask them to discuss in small groups why even though these products come with risk, some adults might still choose to use them. Take feedback from each group.

Ask pupils: What do they think are the main reasons?

Pupil responses might include:

because they like it (the taste/the feeling); to relax; to socialise; because all their friends do it; because they always do it (habit); because they need it (dependent).



Overheard conversation



Explain that for most adults, a little caffeine or alcohol (in small amounts and not too often) although not very healthy, is likely to have only a low risk on the health of their bodies over time. However, smoking is harmful, not only to the person smoking but also to those around them and the environment. Once someone starts to smoke frequently, it can be difficult for them to stop and that it is best not to start in the first place.

Read aloud **Resource 3: Overheard conversation script** to the pupils asking them to find out:

- What are some of the risks of smoking?
- What has Aunt Lusie tried to help her stop smoking so far?

Support:



Pupils find two risks of smoking and one thing Aunt Lusie has tried to help her stop

Challenge:



Challenge the pupils' thinking further by asking: What are some of the challenges or difficulties for people like Aunt Lusie who want to stop smoking? What are some of the benefits of stopping?

Teacher's note: If you choose to act out this conversation for the class it is best if adults play the role of Dad and Aunt Lusie and the pupils play the role of Frankie. If this is not possible, the teacher should be in role as Aunt Lusie and a pupil as dad. To ensure role play is managed sensitively clear signals should be used to show when 'in-role' and 'out-of-role', such as an item of clothing or prop.



15 Multiple choice discussion



In small groups pupils answer the multiple choice questions using Resource 4: Multiple choice questions. Make the pupils aware that there is not necessarily a 'right' answer and that there may be more than one 'best option'.

Discuss some of the pupils' responses and ask: Which will be the best actions for the characters to take?

Suggestions for the teacher to support learning:

1. Options A, B and C would all be 'best' options. Option D is not true. She does not have to do it on her own. However, some people do give up smoking without help and choose to do so, but as Aunt Lusie has tried this before, she might find some support more helpful.
2. The best options are B and C as these are supportive actions. Option A may come across as aggressive and is not a very friendly action. Option C would not be very helpful and may even encourage her to keep smoking,
3. B would be the best option as the NHS advice is to smoke outside and completely away from the house. A and D are better options but not ideal as they won't have much effect and C is not an effective option at all.
4. C and D are the best options. Although A might be more difficult to carry out, Frankie could move to sit somewhere else in the room. B would not help Frankie's health in the future at all.

Plenary/Assessment of learning



10 Reflecting and signposting support



Pupils reflect on their learning in the lesson.

- What has this lesson made them think about?
- What has it made them think about their health now?
- What has it made them think about their health for the future?

Explain that help is available for people who are drinking too much or too often and for those who want to stop smoking. Adults can get support and advice online (www.nhs.uk), through their local pharmacy or doctor.

If pupils are worried about someone they know or live with then they should talk to a trusted adult – a parent/carer or teacher at school. Reiterate that children are not responsible for adult's decisions about their health but can think about how they can look after own health now and in the future.



End-point assessment



Pupils go back to their baseline assessment and imagine they have been watching the news report with Aunt Lusie. What would they say to help Aunt Lusie now?

Pupils should add their ideas to their original work using a different colour pencil.

Extension activity

Pupils imagine they have been asked to produce a news report for World Health Day explaining the effects of smoking on people's health. They can choose to make it a report for adults or children around their age, write down the key points to be included, act out and record their report.

Managing risk: medicines

This is the first of four lessons for upper key stage 2 pupils providing age-appropriate drug and alcohol education. This lesson focuses on using medicines correctly and safely, and how they contribute to people's health and wellbeing, both every day and in emergency situations. Pupils also develop their knowledge and understanding of how vaccinations and immunisation can work to stop disease spreading and protect people from infection.

Neither this, nor any of the other lessons, is designed to be taught in isolation, but should always form part of a planned, developmental PSHE education programme.

In the light of the Covid-19 pandemic, consider carefully whether to teach this lesson at this time. Please see teacher guidance for further information.



Learning objective


- To learn how the correct use of medicines, and how vaccinations and immunisation, can help to maintain health and wellbeing





Resources required

Box/envelope for anonymous questions (ask-it-basket) 

Large pieces of paper and marker pens for group work 

Resource 1: Thinking bubbles worksheet (Pupils write in their work books or complete the worksheet – 1 copy per pupil) 

Resource 2: Vaccination cards (1 sheet per group) 

Resource 3: Case studies (1 set per group) 



Key words

Medicine, recover, health condition, immune/immunisation, vaccination, population, prescribed, emergency, insulin, EpiPen, diabetes, asthma, eczema, allergy, dose



Learning outcomes

By the end of the lesson pupils will be able to:

- describe how medicines, when used responsibly, can support health and wellbeing
- explain how preventative medicines such as vaccinations and immunisation can stop disease from spreading
- explain the safe use of medicines to help manage illness and allergies
- identify where to find further advice and guidance about the correct use of medicines



Climate for learning

Make sure you have read the [accompanying teacher guidance](#) before teaching this lesson, which includes guidance on establishing ground rules, the limits of confidentiality, communication and handling questions effectively.

It is important to consider sensitivities and prior knowledge about specific pupils' circumstances. Pupils in the class will have a range of experience and understanding of the use of medicines, and some may be experiencing or have family members with health conditions. If any safeguarding issues arise during this lesson, these should be reported to the Designated Safeguarding Lead.

Activity	Description	Timing
1. Baseline assessment	Individually, pupils write down what they already know about managing illness, allergies and disease	10 mins
2. Introduction	Reinforce ground rules. Pupils are reminded of the role of medicines.	5 mins
3. Vaccination card game	In groups, pupils play a card game to develop their understanding of vaccination and immunity	15 mins
4. Rainbow groups	Pairs of pupils read medicine case studies, then in groups make a chart about what they have learned	15 mins
5. Plenary/Signposting support	Pupils reflect on how medicines are administered safely and are provided with guidance on where to get further information and advice	5 mins
6. Endpoint assessment	Pupils go back to their baseline assessments, add to or amend them to demonstrate their new learning	10 mins

Baseline assessment



Baseline assessment activity



In their exercise books or using **Resource 1: Thinking bubbles worksheet**, pupils write down what they know already about what can be done to manage illness, allergies or infectious diseases, by writing their ideas around these words.

Teacher's note: Do not prompt the pupils or give further explanation as this activity is to establish their understanding prior to any lesson input. Therefore, reassure them that if they do not have much to add to their sheets at the moment, it doesn't matter, as they will be learning about this in the lesson and this activity is to find out what they already know and think. They should ensure their ideas are their own and not work with others on this activity. Circulate the room as the pupils complete this to gain a sense of their starting point.



Introduction



Remind pupils of ground rules, pointing out any especially useful to remember for this lesson, such as not putting people on the spot by asking them personal questions about medication they use.

Introduce the learning outcomes and explain to pupils that the use of a medicine depends on the type of disease or illness someone has. Medicines can:

- help someone feel better and relieve pain, such as from a headache
- help the body recover from illness
- help someone manage an ongoing health condition, such as asthma or diabetes
- prevent someone from becoming ill or stop a disease from spreading.

Core activities



Vaccination card game



Explain to pupils that to keep some diseases caused by viruses (for example, measles and flu) under control, people can be given a vaccine so that they become immune to it, even if others around them have the virus. To successfully stop a virus from spreading, nearly all people in the population need to have the vaccine.

To demonstrate this, play the card game using **Resource 2: Vaccination cards**:

Provide small groups of up to six pupils, with cards from either scenario 1, 2 or 3 (aim to ensure an even spread across the class). Let pupils know that the cards represent a population (the number of people in a particular area).

Ask pupils to place all the cards face down on the table except for the card with the red dot. Explain that the card with the red dot represents a virus and the other cards which are face down represent people that the virus is going to come into contact with.

One person takes the card with the red dot and puts it next to another face-down card. They then turn over the face-down card:

- If it has a V on it, that person is vaccinated against the virus, so will not catch it. The V card can be put to one side.
- If the card that is turned over has a circle on it, that person is not vaccinated so catches the virus. The pupil colours in the circle in red to make a second virus card.

Now each of the virus cards is matched to one of the remaining face-down cards and repeat the process – as before, if the card has a V on it, put it to one side, if it has a circle, colour it red so it becomes another virus card to be paired with one of the remaining face-down cards.

Continue matching the virus cards with face-down cards until all the cards have been turned over. Once all the cards have been turned over, ask pupils to share the outcome of their games.

How many people are now infected and how many were vaccinated? Do they think their population is protected from the virus? (scenario 1: 10% vaccinated, scenario 2: 50% vaccinated, scenario 3: 95% vaccinated). The group(s) which had scenario 3 will find that they have only coloured in one additional card and all the rest were vaccinated. So even when they had two virus cards, neither of these could infect anyone else as everyone else was vaccinated and protected from the virus.

Explain to pupils that about 95% of the population would need to be vaccinated to stop a virus from spreading and so scenario 3 (19 vaccinated cards) would be the population most protected from the disease.

Explain that vaccinations for lots of diseases are available from a doctor or nurse, most are given to babies or children so that they develop immunity early on and some to older adults who may need extra protection from diseases like flu. When a new virus occurs, it can take some time for scientists to create and test a vaccine that they know is safe and will protect people.

Teacher's note: *The threshold proportion for the number of people who need to be vaccinated to prevent a disease spreading depends on how contagious a virus is. This is an illustrative example for measles which is highly contagious, meaning a higher number of the population need to be vaccinated, and is typical for similar viral diseases.*

Support:

Pupils may require further input – use **Resource 2a support: Vaccination diagram** to help visually demonstrate the concept of immunity through vaccinations'

Challenge:

Ask pupils to write a paragraph or draw a diagram to show how a virus can be prevented from spreading by using a vaccination.



Rainbow groups



Organise pupils into groups and label each group a different colour (e.g. yellow, blue, red, green, purple and orange). Give each group a different case study to read and discuss – select these from **Resource 3: case studies**. Ask the pupils to focus on the following questions:

- What is the medicine?
- Why is it used?
- How is it used?
- Is it used for every day/sometimes, for emergencies or both (if both, explain how)?

Next, pupils make 'rainbow groups' ensuring that each group includes one person from each colour of the rainbow and so that each person in the group reads a different case study.

Teacher's note: You may want to keep one of the case studies back to model the following activity.

In their groups, pupils draw a grid on a large piece of paper with the following headings across the top: What? Why? How? Every day/Emergency and the name of the medicines down the left hand side.

Pupils discuss the different medicines in their new groups and add the information to the grid.

Plenary/**Assessment of learning**



Reflecting and signposting support



Reiterate that people use medicines differently depending on the type of illness they have. Some young people, such as those with diabetes and asthma, live with their health conditions every day and have been trained by a doctor or nurse to be able to take their medicines on their own.

Remind pupils that medicines are helpful for health but only if used correctly and stored/disposed of safely. Adults should administer medicines to children (with the exception of those mentioned above). Make pupils aware of the following webpages which offer advice and support for the health conditions in this lesson: [National Eczema Society¹](https://www.nationaleczema.org/), [Asthma UK²](https://www.asthma.org.uk/advice/child/), [Diabetes UK³](https://www.diabetes.org.uk/guide-to-diabetes/your-child-and-diabetes) and [Allergy UK⁴](https://www.allergyuk.org/).

Explain that if they are ever unsure about using a medicine they should ask a trusted adult. In addition, if they are ever in an emergency situation and a trusted adult is not available, then they should call the emergency services using 999.

1 – <https://eczema.org/information-and-advice/information-for-parents-and-children/children-and-eczema/>

2 – <https://www.asthma.org.uk/advice/child/>

3 – <https://www.diabetes.org.uk/guide-to-diabetes/your-child-and-diabetes>

4 – <https://www.allergyuk.org/>



End-point assessment



Pupils return to their baseline assessment activity and add to each *thinking bubble* in a different coloured pencil/pen, reflecting on what they have learned in the lesson about what can be done to manage illness, allergies and infectious diseases.

Extension activity

Pupils identify those medicines that might be used in an emergency and focus on one medicine - inhaler, EpiPen or insulin, and then write the steps for their safe use in an emergency situation.

For example:

Asthma attack:

- *Step 1: Sit upright*
- *Step 2: Take one puff every minute for 10 minutes*
- *Step 3: If attack continues call an ambulance*

Managing risk: legal and illegal drugs

This is the second of four lessons for upper key stage 2 pupils providing age-appropriate drug and alcohol education. This lesson focuses on legal and illegal drugs, other than medicines, and the associated effects and risks. Pupils also explore how the risk of drug use may vary depending on factors such as the strength of the drug, how much is taken and how often, the person and the situation.

Neither this, nor any of the other lessons, is designed to be taught in isolation, but should always form part of a planned, developmental PSHE education programme.



Learning objective

- To learn about some of the risks and effects of legal and illegal drug use



Learning outcomes

By the end of the lesson pupils will be able to:

- explain that there are risks associated with using any type of drug and identify some of the risks and effects of drug use
- recognise that drugs have laws related to them and that some drugs are illegal to own, use or give to others
- analyse the level of risk in different situations, identifying that drugs can affect people in different ways
- explain that for some people drug use can become an unhealthy habit that can be difficult to break but there is support available to help people; where to report any concerns they have



Climate for learning


Make sure you have read the [accompanying teacher guidance](#) before teaching this lesson, which includes guidance on establishing ground rules, the limits of confidentiality, communication and handling questions effectively.


It is important to consider sensitivities and prior knowledge about specific pupils' circumstances. Pupils in the class will have a range of experience and understanding of legal and illegal drugs, and some may have families that have been affected by drug use. If any safeguarding concerns arise during this lesson, these should be reported to the Designated Safeguarding Lead.





Resources required


Box/envelope for anonymous questions (ask-it-basket) 


Dice (1 per group) 


Resource 1: Drugs cards (1 set per class) 

Resource 2: Effects & risks cards (1 of each set per group) 

Resource 3: Drugs fact sheets (1 copy of each) 

Resource 4: Drugs and risk scenarios activity (1 per pair) 

Resource 4a: Drugs and risk scenarios activity – support (1 per pair/group) 

Resource 4b: Drugs and risk changing scenarios activity – challenge (1 per pair) 



Key words

Drug, substance, effects, risks, law, legal, illegal, habit, advice, support

Activity	Description	Timing
1. Introduction	Remind pupils of ground rules. Share and discuss the definition of a drug	5 mins
2. Baseline assessment	Pupils list some of the possible risks and effects of using a drug on a spider-gram	5-10 mins
3. Effects and risks card game	Pupils match the possible effects and risks associated with different drugs	10 mins
4. Fact check activity	Pupils use fact sheets to check their information from the effects and risks card game	10 mins
5. Drugs risk scenarios	Pupils read a scenario, identify what is causing the risk and assess the level of risk within it	15 mins
6. Plenary / signposting support	Pupils identify characters who may need support with drug use. Provide information about where to access help and support.	5 mins
7. End-point assessment	At the end of, or following the lesson, pupils return to their baseline activity, and add to or amend their work in the light of their learning.	5-10 mins

Baseline assessment



Introduction

Remind pupils of the ground rules, reinforcing that questions are welcomed in the lesson but if they have any questions they do not want to ask in front of the class or concerns about anything discussed in the lesson, they can put a question or a note to the teacher in the questions box.

To introduce the lesson, write the question 'What is a drug?' on the board or flipchart.

Allow time for pupils to discuss in pairs and feedback, before sharing the following definition.

A commonly accepted definition of 'a drug' from The United Nations Office on Drugs and Crime is:

A substance people take to change the way they feel, think or behave.

The term 'drugs' can, of course refer to all drugs:

- all illegal drugs
- all legal drugs, including alcohol, tobacco and volatile substances (those giving off a gas which can be inhaled),
- all over-the-counter and prescription medicines



Baseline assessment activity



Pupils write the word 'drug' in the middle of a piece of paper. They write down some of the effects and risks associated with using a drug, on either side of the spider-gram - effects on one side and risks on the other. It might be helpful to phrase this as questions:

- What might happen to the person using a drug?

Pupil responses might include: 'get high', feel happier, feel relaxed, have more energy, recover from illness

- Are there any risks of using a drug?

Pupil responses might include: it could harm their body, it could become a habit or they get addicted, mental health problems, it might be illegal

Teacher's note: As this is a baseline assessment, pupils should first work individually and without further prompting. Circulate whilst pupils complete the task and take them in to look at briefly during the lesson to gain an understanding of what pupils already know, understand and believe about drugs, as well as any misconceptions or gaps in knowledge.

Core activities



Effects and risks card game



Remind pupils that all drugs affect (change) the brain or body in some way (some drugs relax the body, others make a person more awake or alert, some fight infection) but that all drug use comes with risk. Remind pupils of their previous learning in Year 3/4 about the misuse of medicines and explain that although medicines are a drug and if used incorrectly can be harmful, this lesson will mostly focus on other types of drugs. Some risks will depend not only on what the drug is, but other factors too. This activity will look at both some of the effects and risks of different drugs.

Pupils work in groups of three or four. Each group will need a dice, the name of one drug from **Resource 1: Drugs cards** and a set of **Resource 2: Effects and risk cards**. Assign each group the name of a drug – See **Resource 1: Drugs cards**

Teacher's note: The drugs you choose to focus on will depend on the types of drugs that have been suggested on the pupils' baseline assessment activity, health data from your local area and chosen from the list below. Include at least one example of an illegal drug. The drugs we have focused on for this lesson are tobacco (cigarettes, shisha); alcohol; cannabis; e-cigarettes; caffeine, nitrous oxide; cocaine; MDMA (ecstasy) and speed (amphetamines).

Pupils take it in turns to roll the dice. If they roll a number 1 or 2 they pick an 'effect' card and if they roll a number between 3 and 6 they pick a 'risk' card.

They read the card and with the group, decide if it is a likely 'effect' or 'risk' of the drug they are focusing on. Those they think are a likely effect or risk, they should keep in a pile next to the drug; those they think are unlikely should form a discard pile.

Support:



Using **Resource 1: Drugs cards** and **Resource 2: Effects and risks cards** Pupils play 'pick-up pairs' – they pick a drugs card and then an effect or risk card. Pupils say whether they think the effect or risk is true for the drug.

Challenge:



As they choose the cards, pupils identify what might be an immediate effect or risk of using the drug and what is likely to be a longer term effect (if the drug is used often, over a long period of time).



Fact check activity



Give the corresponding fact sheet (see **Resource 3: Drug fact sheets**) to the groups so they can check their answers.

Then bring the class back together and discuss some of their findings, such as whether different drugs have similar risks or if they were surprised by any of the risks of drugs they found out about.

Support:

Pupils may need adult support to check their answers using **Resource 3: Drugs fact sheets**

Challenge:

- Are there differences between immediate use and regular use over a longer period of time?
- How does the strength of the drug affect the effects and risks?

For example: Tobacco – one cigarette may make someone feel light headed and cough. But, smoking many cigarettes over years can damage someone's lungs and other main organs, putting them at risk of illness and disease.

Teacher's note: Although it has not been included in each fact sheet, you may want to share the following learning points with the class:

- drug use can lead to loss of money or a decrease in control over personal finance.
- used drugs can sometimes be left in the environment as litter
- to produce drugs, large areas of land might be cleared to grow the plants needed which is contributing to deforestation and climate change.

Pupils will learn more about this in secondary school.



15 Drugs risk scenarios



Explain that drugs may not affect every person in the same way.

Risk depends on the drug (what it is, how strong it is); the person (their age, their mood, their general health); where they are and the situation they are in, and that we can think of this as the 'risk' triangle:

- What is the drug? What do we (and don't we) know about the drug?
- Who is the person? What do we know about them?
- What is the situation they are in?

In pairs, pupils read **Resource 4: Drugs and risk scenarios activity**, and using the information given, identify what is causing the risk and analyse how risky they think the scenario is (high, medium or low) and record their explanations on the sheet.

Take feedback from the class enabling pupils to explain and justify their ideas. Are there any characters who are taking a risk with their own health or the health and wellbeing of those around them?

Suggestions for the teacher to support learning:

- **Jim** – Higher risk because they are drinking over the recommended amounts
- **Jenny and Jay** – Higher risk because cannabis is an illegal drug and by giving it to Jenny, Jay is supplying her with the drug, the strength of the drug is unknown and they do not know how it will affect them
- **Indie** – Medium or lower risk because although alcohol is not recommended for people aged 15, she is with her family and only drinking a very small amount.
- **Dawn** – Lower risk because e-cigarettes are much less harmful than tobacco cigarettes when used by adults to help them stop smoking, as recommended by NHS and Public Health England. E-cigarettes should not be used by children.

- **Alba** – Higher risk because they cannot be sure what the drug is, how strong it is or how it will affect them, plus it sounds like it is an illegal drug which means they could face a criminal charge for having the drug.
- **Mo** – Medium risk because although it is not an illegal drug, it sounds like it is affecting their balanced diet which is important to keep healthy and may affect their concentration and sleep.
- **Shanise** – Higher risk because she does not know what the drug is, inhaling anything from a canister is very dangerous and being near water is not a safe place when there is a higher likelihood of accidents from drug use.

Support:



Pupils work in pairs or as a group to complete an adapted version of the activity using **Resource 4a: Drugs and risk scenarios activity** – support with scaffolded responses. You may prefer to make these separate cards so there are fewer scenarios.

Challenge:



After completing **Resource 4: Drugs and risk scenarios activity**, pupils are given **Resource 4b: Drugs and risk changing scenarios – challenge**.

Pupils discuss whether the change in the scenario would increase or decrease the risk and record their responses on the sheet.

Plenary/**Assessment of learning**



Reflecting and signposting support



As a whole class, ask whether any of the characters from **Resource 4: Drugs and risk scenarios activity** might need help and support; how and where they could get this and what might happen if they do.

Inform pupils of where to find information, advice and support about any concerns they have now or in the future for themselves or people they know. They could get support by asking an adult for help, such as a parent or teacher.

Provide some examples of organisations where people can get further advice such as: www.childline.co.uk – 0800 1111 (information and advice for young people about drugs, alcohol and smoking) and that if they need urgent help if someone is seriously ill, scared or unsafe they should call 999.

Adults can contact:

- www.nhs.uk – advice and support with drugs, alcohol and tobacco use
- <https://smokefree.gov/> – support to quit smoking
- www.drinkaware.co.uk – alcohol support services



End-point assessment



This can be completed following the lesson if necessary.

Pupils return to their spider-gram baseline assessment and – in a different colour - add to or amend the information in light of their learning about the risks and effects of different drugs. This should be a general reflection of the different risks and effects of drug use and not specific to a particular drug.

For example: Drugs can be different strengths – if it is an illegal drug people cannot always tell how strong it is. People can react differently to different drugs. Most drugs, including medicines, can cause harm and damage the body if they are not used correctly. All drugs come with risks.

Extension activity

Pupils could choose one of the drugs from **Resource 1: Drugs cards** (make sure that only the drugs discussed in the lesson are used) and discuss the following questions:

- What (if anything) would reduce the risk of using the drug?

For example - smoking: cutting down on the amount of cigarettes smoked, trying to quit, not using the drug in the first place

- What would increase the risk of using the drug?

For example - smoking: smoking every day for a long time, smoking around others/in the car

- What could someone do if they were worried about the risk?

For example - smoking: Get in touch with an organisation who can give advice and help such as the NHS or Smokefree

Managing risk: influences and pressure

This is the third of four lessons for upper key stage 2 pupils providing age-appropriate drug and alcohol education. This lesson focuses on the reasons why someone may or may not choose to use a drug, through analysing different influences. Pupils also explore ways to manage these influences and ways to respond, including how to do so assertively in a range of situations.

Neither this, nor any of the other lessons, is designed to be taught in isolation, but should always form part of a planned, developmental PSHE education programme.



Learning objective

- To learn about the reasons why people use drugs; managing situations and peer influence



Resources required

Box/envelope for anonymous questions (ask-it-basket)



Post-it/sticky notes



Resource 1: Bus stop conversation worksheet (1 per pupil)



Resource 2: Influences diamond 9 cards (1 set per group)



Resource 3: Pressure scenario cards (1 set per class)



Resource 4: Responses prompts (1 per pair if needed)



Resource 4a: Responses prompts – teacher guide (1 copy for the teacher)



Learning outcomes

By the end of the lesson pupils will be able to:

- explain why people may choose to use or not use a drug, and the different factors that might influence them
- analyse what is most likely to influence a person to use or not use a drug
- describe strategies for managing peer influence in situations that might involve drugs
- explain how to ask for help from a trusted adult if they have any worries or concerns about drugs and why this is important



Key words

Drug, factors, influence, peer pressure, passive, aggressive, assertive strategies



Climate for learning

Make sure you have read the [accompanying teacher guidance](#) before teaching this lesson, which includes guidance on establishing ground rules, the limits of confidentiality, communication and handling questions effectively.

It is important to consider sensitivities and prior knowledge about specific pupils' experiences in relation to drugs, alcohol and tobacco. Pupils' exposure to different influences will depend on their individual, family and social circumstances. Ensure that ground rules refer to not sharing personal stories and keeping confidentiality. If concerns around personal safety arise during this lesson, these should be reported to the Designated Safeguarding Lead.

Activity	Description	Timing
1. Baseline assessment	To be completed before the lesson. Reinforce ground rules. Pupils complete speech and thought bubbles about smoking, alcohol or other drugs and why people use them	5-15 mins
2. Introduction	Remind pupils of ground rules and introduce the lesson. Pupils discuss reasons why someone may use a drug	5 mins
3. Influences diamond 9 – part 1	Pupils discuss influences on a person's decision to use a drug and rank different influences in a diamond 9	10 mins
4. Influences diamond 9 – part 2	Pupils discuss reasons why someone might choose not to use a drug, then repeat the diamond 9 activity but this time considering the influences not to use the drug	10 mins
5. Strategies for managing pressure	Pupils identify pressure in a scenario and explore what is meant by a passive, aggressive and assertive response	10 mins
6. Pressure and response scenarios	Pupils read scenarios and suggest ways the character can manage the influence or pressure in the situation, giving examples of an assertive response	10 mins
7. Signposting support	Signpost support for advice and what to do if they have concerns	5 mins
8. End-point assessment	Pupils write a 'take-away' sentence about their learning on drugs, alcohol and tobacco, pressure and how to manage it	5-10 mins

Baseline assessment



Baseline assessment activity



Pupils complete this activity before the lesson. This allows time to look through their work and note any particular patterns or misconceptions prior to teaching the lesson. Before carrying out the activity, remind pupils of ground rules for these lessons.

- **Explain:** Some young people are having a conversation about why people use drugs, smoke or drink alcohol.
- **Ask:** What might they be saying?
- **Then ask:** What could someone do or say if they didn't want to use drugs, smoke or drink alcohol?

Pupils use **Resource 1: Bus stop conversation worksheet** to record their ideas. Collect these in and use responses to inform this lesson and future teaching about drugs, alcohol and tobacco

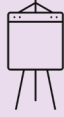
Pupil responses might include:

They are saying: to try it out and see what it's like, because they feel they need it, are addicted, because their friends are doing it, smoking is cool, to relax, vaping doesn't harm you

If someone didn't want to they could: say no; walk away; explain their reasons for not wanting to; avoid the situations or places where it happens



Introduction



Remind pupils of the importance of the shared ground rules for these lessons, including that it is important to accept that people have different opinions and beliefs and to be respectful of each other's views in the lesson.

Ask pupils to think of a drug and why a person might use that drug. Record the pupils' ideas on the board or flipchart.

Teacher's note: To ensure a safe climate for learning is maintained, it is important that pupils know they do not need to name the drug or the person, just to give the reason.

Core activities



Influences diamond 9 – part 1



Pupils discuss the different people, places or things that might influence someone to use a drug. Make a list on the board. Responses might include: where they are; who they are with; what they have seen/heard about the drug; their health; how they get the drug.

Pupils think of a drug and work in groups to consider what will most influence whether a person would use the drug.

Ask pupils to rank the following influences from most to least influence in a diamond 9: friends; family; social media/TV/film; religion/beliefs; money; health advice (e.g. from a doctor); the situation; their feelings/emotions (mental health); their physical health – using **Resource 2: Influences diamond 9 cards**. The card at the top of the diamond should represent what they think is the greatest influence and the card at the bottom of the diamond should represent what they think is the least influence. The cards in the middle section are placed in rows that they think are 'equally important'.

Compare responses from different groups. If there are any other influences that may not have been included on the cards that pupils discussed, highlight these with the class.

Pupil responses at the top of the diamond 9 might include:

- **Friends** – people might feel more pressure to use a drug if their friends are also doing so;
- **Situation** – if the person is in a situation where the drug is readily available, or in which they feel nervous;
- **Social media/TV/film** – if someone they look up to on social media/TV/film is shown using the drug too

Other influences pupils might highlight could include magazine/news articles or the person's own beliefs on whether it is right or wrong to use the drug.

Support:



Pupils work with a reduced number of influences in a diamond 5.

Challenge:



Ask pupils to suggest another influence and add it to the blank card in **Resource 2: Influences diamond 9 cards**.



Influences diamond 9 – part 2



Now ask the pupils to consider reasons why someone might choose not to use a drug (any drug, including medicines). Record their responses on the board, next to the original list of reasons why someone may use a drug. Note whether the pupils think the influences for or against using a drug are similar or very different.

Pupil responses at the top of the diamond 9 might include:

- **Their physical health or mental health** – it is harmful to their body or mind
- **Religion/beliefs** – it is against their religion/beliefs
- **Friends** – their friends don't use the drug so they don't feel pressure to either
- **Family** – their family does not use the drug so they are not used to people using the drug

Pupils repeat the diamond 9 activity, thinking about the same drug but this time considering what is most likely to influence someone **not** to use the drug. Take feedback, drawing out what happened to the diamond 9 cards and noting whether the cards change position or remain similar.

Suggestions to support learning:

It is likely that family, religion, health advice will be higher in this version of the diamond 9 whilst friends and social media will be lower.

Pupils discuss which examples they think are the most influential and why.



Strategies for managing pressure



Write the following words on the board: passive, aggressive, assertive and discuss what they mean. For example:

- **Passive:** accepting or allowing what happens or what others do without actively responding
- **Aggressive:** being ready or likely to confront or attack others or what others do
- **Assertive:** standing up for oneself or someone else, calmly and positively, or getting a point across without causing upset

Display and read aloud one of the scenarios from **Resource 3: Pressure scenario cards**

Pupils work in pairs to identify who or what the character is being influenced by and whether they are feeling pressure, including peer pressure (pressure from those around them).

Pupils consider the different ways the character could respond:

- What would be an example of a passive response?
Such as, joining in with the group to feel included
- What would be an example of an aggressive response?
Such as, shouting no and being rude to others
- What would be an example of an assertive response?
Such as, saying 'no' calmly and giving reasons why they don't want to

Support: Use Resource 4a: **Responses prompts – teacher guide** if pupils need some support to give examples of different responses



Pressure and response scenarios

Working in pairs or small groups, pupils are given copies of **Resource 3: Pressure scenario cards**

Teacher's note: Teachers should choose the scenario cards that best fit the needs of the class, using baseline assessments and drawing on local data on the key issues for the local area.

Pupils work through the rest of the character scenarios, identifying:

- What are the risks for the character?
- Who or what are they being influenced by? (There could be more than one in each situation.)
- Are they feeling pressure and if yes, what/who from?
- In what ways can they manage the situation?
- What would be an example of an assertive response?

Take feedback – discussing strategies that could be used and which would be the most effective in the different situations.

Support:



Pupils use **Resource 4: Responses prompts** to identify the assertive responses and match them to the scenarios.

Challenge:



Pupils are challenged to find two different assertive responses for each scenario and say which they think will be the most effective in each situation.

Plenary/**Assessment of learning**



Signposting support



Discuss whether any of the characters should get help, either in the situation or afterwards? When should they seek help? Who should they talk to and what should they say? Why is this important in this situation?

For example:

Jamie – they should tell a trusted adult what they have been asked to do – giving away or selling illegal drugs is against the law and could be dangerous

Remind the pupils that no-one should feel pressured into doing something unsafe or illegal, especially a young person, and that if they have any worries or concerns they should:

- Talk to a trusted adult at home or school
- Contact a children's advice line such as ChildLine 0800 1111
- Contact the police 101 or emergency services if someone is in immediate danger 999



Reflecting on today's lesson / End-point assessment



Pupils think about their learning on:

- drugs, alcohol and tobacco
- feeling pressure and peer pressure
- ways to respond to pressure

They write a sentence about what they think is the most important thing to 'take-away' from the lesson on a sticky-note.

These can be anonymously typed up and displayed for whole class reflection and then kept as individual assessment of learning.

Extension activity



Pupils draw a cartoon to depict one of the scenarios they have discussed, adding speech and thought bubbles. They should focus on depicting the character demonstrating an assertive response to the situation that will help them to stay healthy and safe.

Managing risk: drugs and alcohol in the media

This is the last of four lessons for upper key stage 2 pupils providing age-appropriate drug and alcohol education. This lesson focuses on media messages and influences in relation to smoking/vaping and alcohol use. Pupils learn to identify key messages through analysing media such as adverts and health advice posters. They apply these critical thinking skills to assess the reliability of sources and learn how to access reliable and accurate advice and information about alcohol and tobacco/e-cigarette use.

Neither this, nor any of the other lessons, is designed to be taught in isolation, but should always form part of a planned, developmental PSHE education programme.



Learning objective

- To learn that mixed messages about drug use in the media exist and that these can influence opinions and decisions



Resources required

Box/envelope for anonymous questions (ask-it-basket)



Resource 1: Mixed message posters A-F (1 set enlarged and displayed per class or 1 set per small group)



Resource 2: Think, feel, do worksheet (1 per pair)



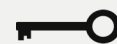
Resource 3: Sources of information cards (1 set per group or 1 set enlarged for whole class use)



Learning outcomes

By the end of the lesson pupils will be able to:

- identify mixed messages in the media in relation to smoking/vaping and alcohol
- analyse key messages, suggest who they are targeted at and why
- describe how these messages might affect a person's thoughts, feelings and actions
- explain what would help a person to make informed decisions about health and where they could find reliable information



Key words

Media, social media, messages, marketing, influences, information, smoking, vaping, drinking, cigarettes, e-cigarettes, vape, alcohol, advertising



Climate for learning

Make sure you have read the [accompanying teacher guidance](#) before teaching this lesson, which includes guidance on establishing ground rules, the limits of confidentiality, communication and handling questions effectively.

Pupils will have experienced varying levels of exposure to media. Some may never have noticed media regarding smoking/vaping or alcohol and others will be very aware, especially with increasing exposure to social media platforms as they get older. If necessary, remind pupils that most social media platforms require users to be aged 13 years and over. This lesson uses re-produced images rather than real adverts which may include upsetting or inspirational images, so please use these resources rather than source your own.

Activity	Description	Timing
1. Baseline assessment	To be completed before the lesson. Remind pupils of ground rules. Pupils make a visual or written scenario about an advert/film or TV screenshot about smoking, vaping or alcohol.	5-15 mins
2. Introduction	Reinforce ground rules. Pupils identify where they see messages relating to drugs in the media e.g. social media; TV soaps; TV documentaries, advertising, newspapers.	5 mins
3. Analysing media messages	Working in small groups, pupils analyse a media excerpt to identify whom it is targeted at and the key messages it is giving.	15 mins
4. Think, feel, do	Pairs of pupils imagine a young person looking at one of the media excerpts and discuss what it might make them think, feel, do (or want to do).	15 mins
5. Accurate information continuum	Pupils rank different sources of information on a line of continuum from least to most reliable.	10 mins
6. Plenary / signposting support	Pupils write a message to the young person from the think, feel, do activity – give facts about the drug and where to get accurate information.	10 mins
7. End-point assessment	Pupils complete sentences starters to further reflect on and demonstrate their learning for this lesson.	5-15 mins

Baseline assessment



5-15

Baseline assessment activity



This activity should be completed before the lesson. This allows time to look through their work and gain a sense of pupils' current understanding and experiences of media messages. Remind pupils of the ground rules for these lessons before completing the following activity.

Read aloud the following instructions. Individually pupils draw and write their responses on a blank piece of paper.

*A young person (aged about 13) is looking at an advert, film or TV programme which is about smoking/vaping or alcohol. **Draw or write** about what they can see. In a 'think bubble' **write** what they are thinking about this.*

Collect these drawings in and use them to identify pupils' starting points and to inform future teaching.



5

Introduction



Reinforce ground rules. Point out any that are especially pertinent such as being respectful to each other's views and opinions, accepting these may be different to our own and recognising that we may have different thoughts or experiences.

As a whole class, pupils identify different places where a person might see or hear messages related to drugs in the media. Make a list on the board.

For example: TV soaps, TV documentaries, advertisements, posters, shops, health warning posters, drug packaging, newspapers and magazines, radio, social media (**see note on next page**)

Teacher's note: This might be any drug for now but later in the lesson the focus will be on smoking/vaping and/or alcohol.

Core activities



Analysing media messages



Display around the classroom, or provide each group with copies of, **Resource 1: Mixed message posters A-F**. Pupils analyse the media excerpt to identify the key messages in each.

Pupil responses might include:

- A. Smoking is bad for your health; smoking could lead to death/fatal diseases; smoking is a waste of money; don't smoke
- B. It's easy to become addicted (chained) to smoking; smoking is a hard habit to break; don't smoke
- C. Vape devices are quite interesting gadgets; lots of different types to choose from; encouraging vaping
- D. Parties always include alcohol; if you drink you'll have a good time; there are certain times to drink; alcohol is fun, encourages drinking alcohol
- E. That only men drink beer; beer is the best drink for men; men should drink beer; encourages drinking alcohol
- F. Alcohol will affect your brain badly; drinking alcohol is unhealthy; don't drink alcohol

Ask pupils why they think there are mixed messages about smoking/alcohol?

Support:



Using each poster from **Resource 1: Mixed message posters**, pupils identify which are encouraging and which are discouraging people to use the drug (smoke/vape or drink alcohol) and if possible, explain their thinking.

Challenge:



Pupils discuss what lifestyle choices these adverts are promoting.



Think, feel, do



Working in pairs, pupils choose one example from **Resource 1: Mixed message posters** and imagine a young person looking at it. They discuss what it might make the young person think, feel, and do (or want to do).

Pairs complete **Resource 2: Think, feel, do worksheet**.

Pupils then 'pair/share', firstly with another pair who have chosen the same example as them to compare responses and see if they concur, then with a pair who chose a different example and compare responses for similarities and differences.

Bring the class together to feedback and draw some conclusions from their findings.

For example, pupils might say: The adverts might make them think that all young people vape or use e-cigarettes.

However, it is important to draw out that actually most young people choose not to use these drugs at all. Highlight some of the following positive social norms:

- The number of young people in England (aged 11-15) who smoke regularly (regular means smoking at least one cigarette a week) is very low at 2%
- Some people might think that lots of people use e-cigarettes but actually only 2% of young people (aged 11-15) use them
- We might think that lots of teenagers drink alcohol, but actually 56% of young people (aged 11-15) say they have never drunk alcohol

Reference: Smoking, drinking and drug use among young people in England 2018 (NHS)



Accurate information continuum



Display **Resource 3: Sources of information cards**

Explain what they are, how someone could access them and what information they might find out by doing so.

Pupils discuss which will give the most reliable and accurate information, explaining their thinking, then organise the cards on a continuum from least to most likely to be accurate and reliable.

For example: up-to-date health advice should be available on the NHS website; PSHE education lessons teach the facts; a friend may not really know best; an advert on a bus might be trying to persuade someone to buy something and may not give all the information about the product, such as health risks

Teacher's note: This can be done as a whole class activity or sets of cards given to small groups if preferred.

Plenary/Assessment of learning



Reflecting on today's lesson and signposting support



Pupils go back to their think, feel, do worksheets (Resource 2) from activity 3 and imagine they are giving advice to the young person looking at the media advert. They can use the sentence starters below to write them a message.

- You might think that...
- But this might not be reliable because...
- Some facts about the effects of smoking/vaping/drinking alcohol are...
- Somewhere you could get further information is...



End-point assessment



Following the lesson, pupils complete all or some of the following sentence starters, writing their comments in their work books as evidence of their learning:

- The lesson has made me think about...
- The mixed messages in the media about smoking, vaping and alcohol include...
- People should...
- I have learned that...

Extension activity



Using one of the 'positive' social norms statistics as inspiration, pupils design material aimed at accurately informing young people about the risks of smoking/vaping/drinking alcohol. It should avoid using stereotypes, shock or scare tactics and instead aim to be informative and convey correct information. It could take the form of a poster, film/radio clip or Public Health social media message.



RESOURCES

Drug and alcohol education

KS1-2

Things that are good for bodies...



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How do you know?



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Things that are not so good for bodies....



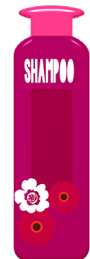
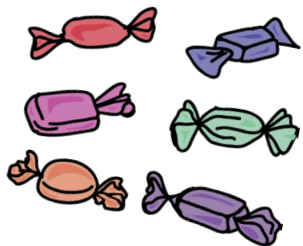
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Both

Helpful

Harmful



1.

Amrit has eaten too much ice-cream and is feeling a bit sick.



- a. Eat more ice cream
- b. Drink water and have a rest
- c. Jump up and down
- d. Something else?

Helpful

Not helpful

2.

Amrit's skin has a rash – with little red spots.



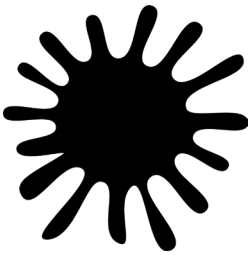
- a. Don't tell anyone
- b. Use some of mum's face cream on it
- c. Go with an adult to see a doctor
- d. Something else?

Helpful

Not helpful

3.

Amrit has dropped a can of black sticky liquid in the shed – it is spilt on the floor.



- a. Leave it
- b. Clean it up
- c. Tell an adult
- d. Something else?

Helpful

Not helpful

4.

Amrit has fallen over and has a grazed knee.



- a. Wash it with water
- b. Rub a leaf on it
- c. Put washing-up liquid on it
- d. Something else?

Helpful

Not helpful

5.

Some shampoo has gone in Amrit's eye by accident at bath time.



- a. Wash the eye with water
- b. Rub the eye
- c. Hold a wet flannel on the eye
- d. Something else?

Helpful

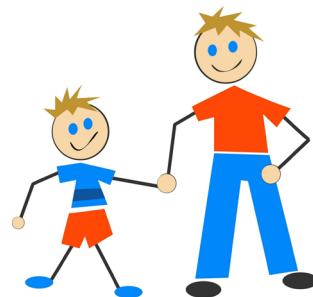
Not helpful



Teacher



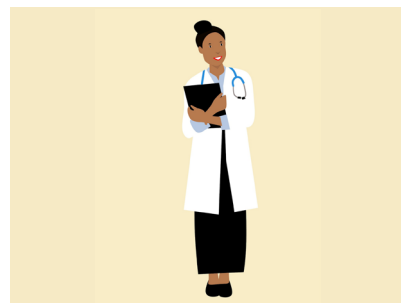
Parent



Friend



Doctor



No one



Someone else





Warning! Can cause harm to bodies.



Catches fire easily.
Very dangerous if used near fire.



Toxic to fish, ponds and rivers.
Dangerous for wildlife.



Not suitable for children under 3 years old.















Keep out of the reach of children.



Rinse hands after use.



Keep away from eyes. If any goes into the eyes – rinse immediately with water

Scenario	What might help them to feel better?
<p>Nico has a tummy ache and is feeling sick</p> 	 <p>.....</p> <p>.....</p> <p>.....</p>
<p>Cody has got a cold and a runny nose.</p> 	 <p>.....</p> <p>.....</p> <p>.....</p>
<p>Ash feels tired.</p> 	 <p>.....</p> <p>.....</p> <p>.....</p>
<p>Casey has a bruise on their leg.</p> 	 <p>.....</p> <p>.....</p> <p>.....</p>
<p>Tori has ear ache.</p> 	 <p>.....</p> <p>.....</p> <p>.....</p>
<p>Riley has a small cut on their finger.</p> 	 <p>.....</p> <p>.....</p> <p>.....</p>

Match up – What might help them?

Nico has a tummy ache and is feeling sick.



Cody has got a cold and a runny nose.



Ash feels tired.



Casey has a bruise on their leg.



Tori has ear ache.



Riley has a small cut on their finger.



plaster

sleep

fresh air

hug from parent

physical activity

medicine

antiseptic cream

water

rest







ear drops

tissue

being quiet

listening to a story



Scenario	Things that go <u>onto</u> the body	Things that go <u>into</u> the body	Something else?
<p>Nico has a tummy ache and is feeling sick</p> 			
<p>Cody has got a cold and a runny nose.</p> 			
<p>Ash feels tired.</p> 			
<p>Casey has a bruise on their leg.</p> 			
<p>Tori has ear ache.</p> 			
<p>Riley has a small cut on their finger.</p> 			



1.



2.



3.



4.



5.



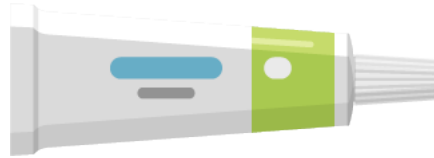
6.



7.



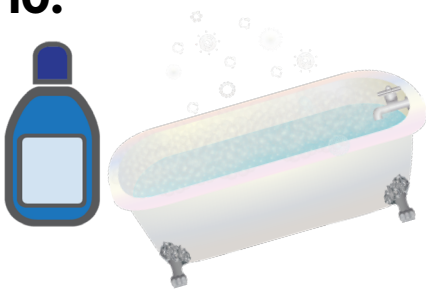
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9.



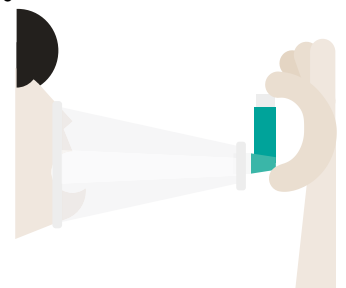
10.



11.



12.



<u>What</u> does it look like?	<u>Where</u> does it go? <u>How</u> is it used?	<u>Why</u> might it be needed?

Eczema



Ali has eczema. It means his skin can become dry and itchy. It particularly affects the back of his elbows and knees, his scalp and face. It can become sore, so Ali has to try not to scratch his skin.

Ali's mum puts some special liquid in the bath to help prevent his skin becoming too dry. The doctor gave Ali some cream to apply to his skin to help soothe the dry patches.

Ali's mum reminds him to use the cream every day, morning and evening because sometimes Ali forgets.

- What medicine does Ali use?
- Why is it important for Ali to use the medicine every day?

For further information for teachers and parents see NHS information:



<https://www.nhs.uk/conditions/atopic-eczema/>

Asthma



Reagan has asthma. It means that she can sometimes find breathing more difficult. For example, she can feel out-of-breath when she runs or if the air is very cold outside.

Reagan keeps an inhaler with her, at school and at home. This is her 'reliever' inhaler – she uses it when needed to quickly relieve asthma symptoms for a short time. She also uses a 'preventer' inhaler every day to help prevent asthma symptoms from starting.

Reagan can use the inhalers on her own but it is important she remembers to use the correct inhaler at the right time.

- What medicine does Reagan use?
- Why is it important for Reagan to use the medicine every day?

For further information for teachers and parents see NHS information:



<https://www.nhs.uk/conditions/asthma/>

Diabetes



Ben has diabetes. It means that the levels of sugar (glucose) in Ben's blood can become too high. This can make him feel very tired and ill.

To help keep the levels of sugar in the blood stable, Ben has to have an injection every day. The injection puts something called insulin into his body, it helps to control the level of sugar in his blood.

Taking the insulin keeps Ben healthy and well so it is very important that he does this every day. Ben's dad helps but Ben is learning how to use the injection pen too. This is so Ben can learn to manage his medicine in the future.

- What medicine does Ben use?
- Why is it important for Ben to use the medicine every day?

For further information for teachers and parents see NHS information:



<https://www.nhs.uk/conditions/type-1-diabetes/type-1-diabetes-in-children/>



Teacher

Class teacher, teaching assistant or someone who helps us learn

Pharmacist

Someone who is qualified to give out or sell medicines

Paramedic

Person trained to give emergency medical care

Counsellor

Person trained to help people with their feelings

Parent

Father or mother or someone who looks after and cares for a child

Nurse / Doctor

A person trained to give health advice and treat someone who is ill

Cleaner

A person who works to keep a place or things clean

Dentist

A person trained to help people have healthy teeth and gums

Are these rules true or false? Or does it depend on the situation?

1. Children should not use medicines without an adult helping.

2. Medicines and cleaning products must be kept out of reach of children.

3. If someone is ill any medicine will help them.

4. It is important to use (or take) the amount instructed on the bottle or packet.

5. If you see a syringe you should pick it up and put it in the bin.

6. All medicines should be taken twice a day.

7. Always read the instructions before using a medicine or household product.

8. Medicines last forever.



false
true

it depends

A.

Baby Kai is playing in the kitchen. Eli walks in...



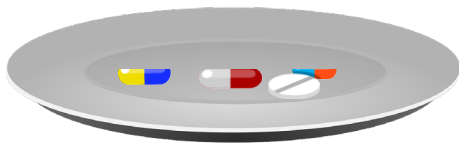
B.

Sam is not sure what this is. Sam is wondering if it is safe to open it?



C.

“Ooh they look like sweets!” thinks Billie. “I’d like to eat those.”



D.

“Let’s share this medicine, it tastes like strawberries,” says Huali.



E.

Zara has a tummy ache. Zara finds some medicine in the kitchen and thinks it will help.



F.

Sky has found some cream in the bathroom and thinks it will make her skin soft.



ask an adult for help

clean or tidy up

swallow it

say no

run or walk away

put it on their skin

smell it

taste it

something else



A.

What if...

Baby Kai cries and gets upset when Eli takes the products away from him.

B.

What if...

Sam's friend says he should sniff it and then guess what it is.

C.

What if...

Billie really wants to eat them.

D.

What if...

Huali's friend says, "Yes! I love the taste, let's drink it all – yummy!"

E.

What if...

Zara does not want to tell mum about the tummy ache because she is busy. Zara thinks two spoonfuls of the medicine will help.

F.

What if...












Sky's friend comes round to play and says "Yes... let's make a face pack. We could mix lots of creams together - it will be lots of fun!"





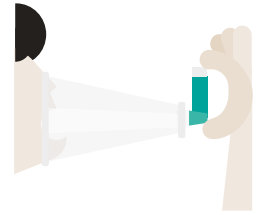
How do these help us?	Are there any risks? What are the risks?	What would help reduce the risks?

Resource 2: A day in the life of the Grech family **KS2 YEAR 3-4 LESSON 1**

	7:30	Frankie wakes up and washes her face. Frankie has asthma, so after getting dressed Frankie takes her brown inhaler.
	8:30	After breakfast, Frankie helps Dad to tidy the kitchen. Frankie clears away the plates and bowls and Dad wipes down the surfaces using liquid spray and a cloth.
	9:30	Mum is off to work but before that she has a doctor's appointment – it's time for her yearly flu vaccination.
	10:30	Aunt Lusia is in the garden. It is hot and sunny, so Aunt Lusia puts sun cream on her face and arms.
	11:30	Dad cleans the cat litter tray and remembers to treat Kota with worm-prevention drops, carefully putting the empty tube in the bin afterwards.
	12:30	Back at school, Frankie has just finished maths and now it's time for lunch. The teacher reminds the class to wash their hands with soap before going into the lunch hall.
	13:30	Aunt Lusia has a headache. She has drunk some water and had a nap but it is not going away. She looks in the bathroom cabinet for some paracetamol tablets and reads the instructions on the back of the packet, before taking two.
	14:30	During P.E. Frankie suddenly finds it difficult to breathe easily. Frankie uses her blue inhaler. After a few minutes, Frankie feels better and joins back in.
	15:30	Aunt Lusia puts the washing in the machine and adds a washing capsule. She puts the box of washing capsules away on the high shelf above the machine.
	16:30	Before dinner, Frankie helps Dad to clean the bathroom. Frankie sweeps the floor and Dad puts on gloves before putting bleach in the toilet. Some gets spilt on the floor so Dad mops it up.
	17:30	Dad makes sure the caps are screwed on securely on all the cleaning products, puts the bottles away in the kitchen cupboard and locks it.
	18:30	Frankie has a bath with soap and Mum helps her wash her hair with shampoo. Some shampoo accidentally goes in her eyes so mum quickly rinses it with water.
	19:30	Just before bedtime, Frankie brushes her teeth with toothpaste and takes the brown inhaler again.



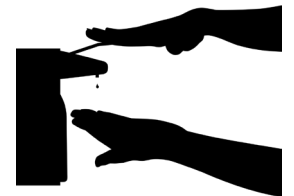
- 1.** After gymnastics club one day, Frankie is feeling short of breath but has forgotten her inhaler. Her friend, Dion, also has asthma and offers her his to take instead.



- 2.** Out in the playground Frankie and her friend Nadia are playing dares. Nadia takes out a small bottle of liquid from their pocket. They say it is their sister's medicine, that they had a bit the other day and it tasted nice. Nadia dares Frankie to drink some.



- 3.** At school, Frankie is queueing to use the hand sanitiser pump before lunch. They see a child in Year 1 rub it onto their face and run off into the lunch hall. After a while the child's face goes red and their eyes start to sting.



- 4.** When she gets home, Frankie walks into the kitchen to find her younger cousin playing with some cleaning product bottles from the kitchen cupboard. One has just spilt onto the floor and some has gone onto her cousin's hands.



- 5** Frankie is not feeling well and so Mum fetches some medicine from the medicine cabinet at home. Mum tells Frankie to take some and then rushes to answer a phone call. Frankie isn't sure how much to take but makes a guess.



- 6.** Dad has been taking tablets from the doctor for the last few weeks. The instruction label states that one of the side effects is tiredness and that anyone taking the tablets should not drive or operate machinery. Dad is a lorry driver and is getting ready to go to work.





	True	False	Not sure
1. Drinks that contain caffeine (tea, coffee, cola and energy drinks) are good for toddlers and young children			
2. It is against the law to smoke in a car with anyone under 18			
3. Vaping/smoking an e-cigarette is completely safe			
4. Smoking with the door or window open will stop others breathing in any smoke			
5. It is legal to buy e-cigarettes at age 16			
6. Anyone can buy alcohol in supermarkets, even if they are under 18			
7. Adults that drink alcohol should have some 'alcohol-free' days each week			

1	False	<p>Caffeinated drinks are not suitable for toddlers and young children.</p> <p>Caffeine is a stimulant and can temporarily make people feel more alert or less tired. For most adults, tea and coffee can be consumed in moderation, as part of a balanced diet. Energy drinks often contain high levels of caffeine and high levels of sugar too as well as other stimulants.</p> <p>Reference: NHS – caffeinated drinks www.nhs.uk/live-well/eat-well/water-drinks-nutrition/</p>
2	True	<p>*It is illegal to smoke in a car with anyone under the age of 18. Smoking in cars means there is a risk of second-hand smoke. Second-hand smoke comes from the tip of a lit cigarette and the smoke that the smoker breathes out. Breathing in second-hand smoke, increases the risk of getting the same health conditions as smokers. Babies and children are particularly vulnerable to the effects of second-hand smoke as their lungs are less developed.</p> <p>Reference: NHS – What are the risks of smoking? https://www.nhs.uk/common-health-questions/lifestyle/what-are-the-health-risks-of-smoking/</p> <p>*Illegal in most of the UK, although not as yet in Northern Ireland.</p>
3	False	<p>E-cigarettes are not risk free but carry less risk than smoking cigarettes (tobacco).</p> <p>The liquid and vapour in e-cigarettes contain potentially harmful chemicals (although in much lower levels than cigarettes which also contain tobacco). E-cigarettes can contain nicotine which raises blood pressure and increases people's heart rate; nicotine use over time causes a craving for the user to smoke more.</p> <p>Reference: NHS smokefree – e-cigarettes/vapes https://www.nhs.uk/smokefree/help-and-advice/e-cigarettes</p>
4	False	<p>Opening windows and doors or smoking in another room in the house will not make it safe for others.</p> <p>Harmful cigarette smoke can still blow back inside. More than 80% of smoke is invisible, you can't see where it goes and it is impossible to control. To protect others from second-hand smoke, smokers should keep the environment around them smoke free. People who smoke cigarettes should:</p> <ul style="list-style-type: none"> • always smoke outside and away from the house • not smoke in the car • try to stop smoking <p>Reference: NHS – Passive smoking https://www.nhs.uk/live-well/quit-smoking/passive-smoking-protect-your-family-and-friends/</p>
5	False	<p>Only people aged 18 and over are allowed to buy e-cigarettes.</p> <p>Reference: Department for health and social care https://www.gov.uk/government/publications/towards-a-smoke-free-generation-tobacco-control-plan-for-england</p>
6	True	<p>It is against the law for someone under 18 to buy alcohol anywhere, including supermarkets.</p> <p>It is also against the law to sell alcohol to someone under 18. An adult is not allowed to buy alcohol on behalf of someone under 18. However, they can buy a child over the age of 16 beer, wine or cider if they are eating a table meal together in licensed premises.</p> <p>Reference: Drinkaware – Alcohol and the law https://www.drinkaware.co.uk/facts/alcohol-and-the-law</p>
7	True	<p>Adults who drink alcohol are advised to have two alcohol-free days a week. They should only drink in moderation – in small amounts and not regularly. Alcohol is measured in 'units' and adults should have no more than 14 units a week (approximately 6 pints of beer or 6 glasses of wine). Doctors recommend that pregnant woman or woman planning to have a baby avoid drinking alcohol. The Chief Medical Officers recommend that children (under 16) do not drink alcohol.</p> <p>Reference: UK Chief Medical Officers' Low Risk Drinking Guidelines</p>

Earlier on in the day, Dad and Aunt Lusia watched a news report about healthy habits. Frankie overhears them having a conversation.

Aunt Lusia: Oh I wish I didn't smoke!

Dad: Yes... all the chemicals and tar in the tobacco can seriously damage your health and could lead to lung disease, heart disease and cancer...

Aunt Lusia: ... and it makes your breath and clothes smell, stains your hands and teeth and gives your wrinkles!

Dad: Why don't you just stop smoking?

Aunt Lusia: I have tried. You know I've been smoking so long now that I think it will be too difficult to quit. I don't think people know how hard it is. I wish I had never started.

Dad: I know, I understand, so what have you tried so far?

Aunt Lusia: I've tried throwing my cigarettes away, but it didn't work. I just bought more. Then I tried hiding them, but that didn't work either!

Dad: Maybe we should look up that website they mentioned on the news and find out what other support is available to help you. The doctor can definitely help – they might suggest swapping smoking cigarettes to e-cigarettes, or nicotine chewing gum or patches.

Aunt Lusia: I know that if I keep smoking I am just doing more damage to my body. I often have a terrible cough and I know that's caused by smoking too. Frankie says I smell when I hug her! I know I might be making Frankie's asthma worse, just being around her when I am smoking. She gets so cross if I walk in her bedroom smoking.

Dad: But you shouldn't smoke in the home - the advice is to smoke outside and away from the house.

Aunt Lusia: I know... I know this advice exists for a reason – I will make sure I follow it. I also know that if I stop smoking now and stay smoke-free it will really help my health and Frankie's too.

Dad: So, what can we do to help? Let's have a think about what to do next.

Read the questions, which responses (A, B, C or D) would be the 'best' or 'most useful' options?

1. What help is available to help Aunt Lusia stop smoking?

- A. Talking to the doctor about changing to an e-cigarette or using nicotine patches or chewing gum
- B. Ringing the Smokefree National Helpline – 0300 123 1044
- C. Getting advice about stopping smoking from a website such as NHS quit smoking
- D. Nothing - she has to just do it on her own

2. How can the family help Aunt Lusia the most?

- A. Getting cross and shouting at her about smoking
- B. Suggesting she looks for more advice about stopping smoking
- C. Telling her it's too late - she won't be able to give up smoking now ever!
- D. Asking what they can do to help

3. What could Aunt Lusia do to help protect the family's health if she continues to smoke?

- A. Shut the door to Frankie's bedroom
- B. Smoke outside and completely away from the house
- C. Hide the smell of smoke in the house with an air freshener
- D. Smoke out of the window

4. How could Frankie help protect her own health at home?

- A. Sitting close to Aunt Lusia when she is smoking
- B. Start smoking when they are older
- C. Reminding Aunt Lusia she should smoke outside away from the house
- D. Talking to Mum or Dad about their concerns

What can we do to manage...? 



Scenario 1: 10% vaccinated

Virus card

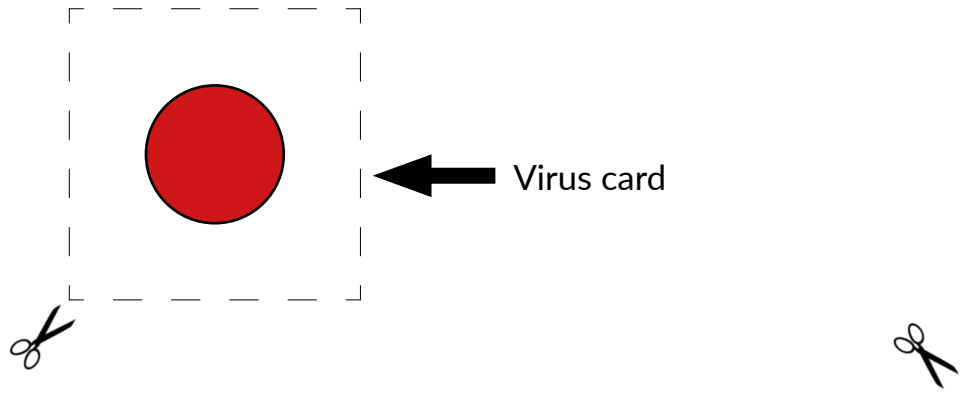
○	○	○	○	○
○	○	○	○	○
○	○	○	○	○
○	○	○	V	V

Scenario 2: 50% vaccinated

Virus card

V	V	V	V	V
V	V	V	V	V

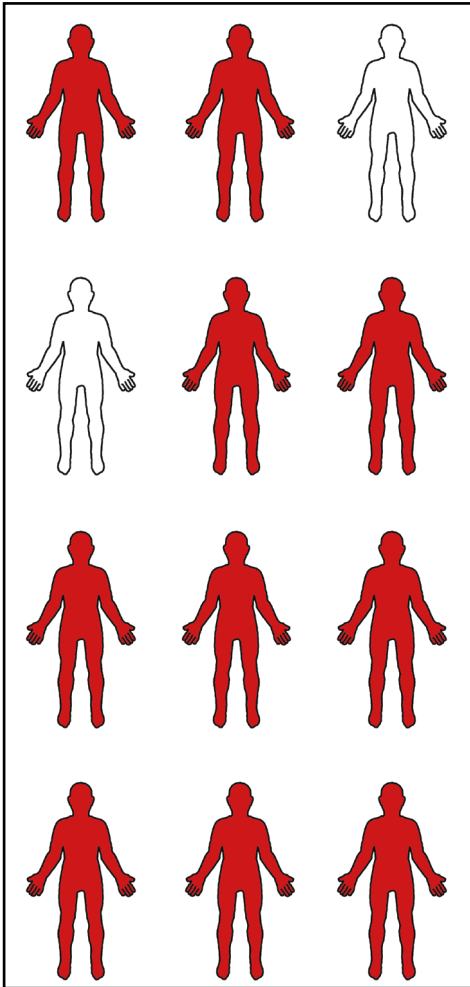
Scenario 3: 95% vaccinated



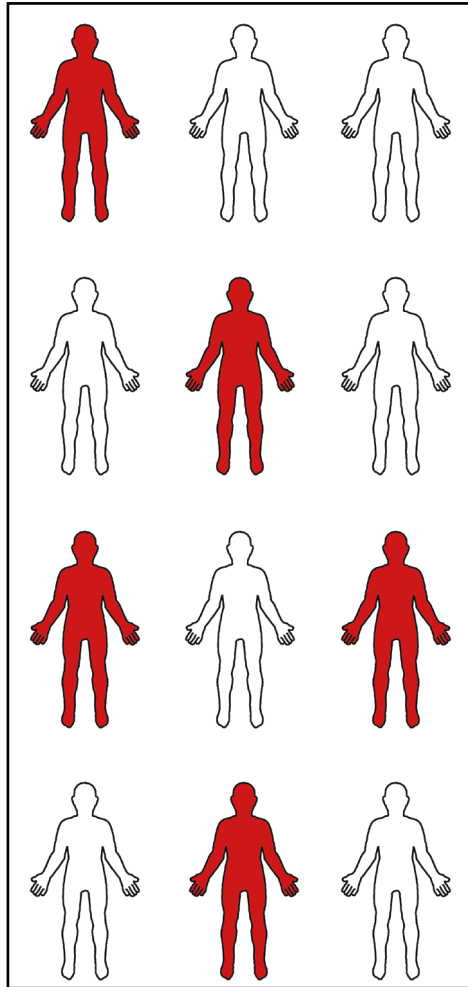
V	V	V	V	○
V	V	V	V	V
V	V	V	V	V
V	V	V	V	V

If a virus comes into contact with the people in the three groups, which population is most protected against the virus?

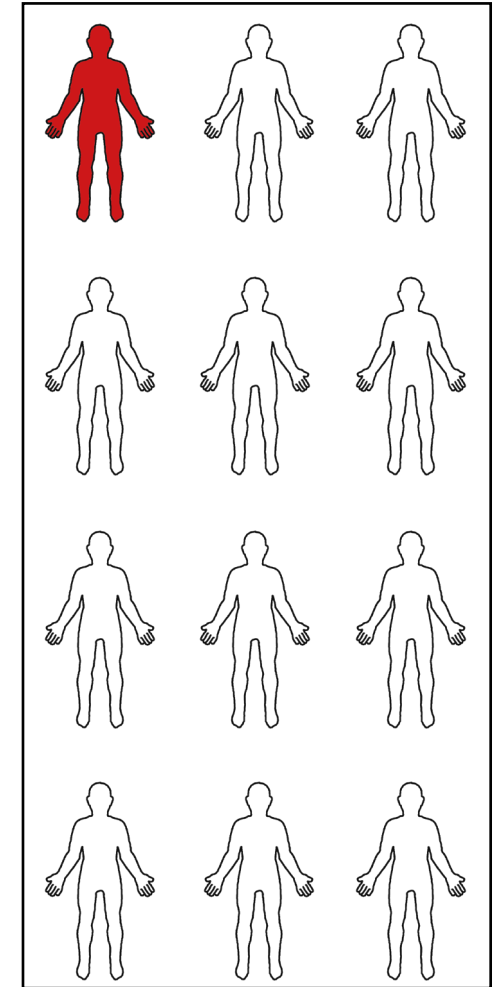
A



B



C



Red = not vaccinated



White = vaccinated



Medicine: **Inhaler**



I have asthma which means my airways can get inflamed and irritated. This makes me cough and breathing is more difficult. I have a blue Ventolin inhaler, prescribed to me by the doctor, which I take to help my symptoms. I have to make sure I breathe in deeply and slowly to get all the medicine and then hold my breath for 10 seconds afterwards. To help it stay clean, I make sure to replace the small cap where I breathe and wash the plastic part with warm water every week. After P.E or exercise, I take two puffs but the amount can vary depending on someone's prescription. Everybody needs a different dose of the medicine so it is important that inhalers are not shared, even if they look the same. If there's an emergency and I have an asthma attack, I need to sit up and take one puff every minute for 10 minutes. If I don't feel better after that, an ambulance should be called.

Medicine: **Allergy tablets**



In the summer I often get hay fever. When my symptoms are bad I get itchy eyes, skin and a blocked nose so my step-dad buys some tablets for me from the pharmacy. On those days I take half an allergy tablet every day before school. If the symptoms continue and get worse later on, I can take another half a tablet but there must be at least four to six hours between taking them. I usually take the tablet with a glass of water or with a meal. Sometimes I forget to take the medicine, but my step-dad says I should never take two doses at once because it could make me ill. I'm also allergic to cats and being around them makes my allergy worse so although I can't have a cat, I have a pet fish instead.



Medicine: **Paracetamol**



Last week I had to go to the dentist because I had toothache and my mouth was a bit swollen. To help the pain, my Mum bought some paracetamol from the supermarket. The dose depends on how old you are, so Mum and I read the instructions carefully beforehand. I need to take one tablet at a time, but it is less for younger children. After about 30 minutes the medicine started to work and the pain went away. I had to wait six hours before taking another tablet because you can't take too much in one day.

Medicine: **EpiPen**



I have a tree nut allergy so I can't eat nuts like almonds or walnuts. If I eat even a small amount I could have an allergic reaction - my lips feel fizzy and tongue swells up. At school I have an allergy pen, called an EpiPen, in case I have a bad reaction, I take it with me anytime I go out. Before a school trip, the office staff at my school always check my EpiPen to make sure it has the instructions with it. The adults at my school know how to use it but this makes it extra safe. To use the EpiPen correctly in an emergency, there is a blue safety cap which should only be taken off just before using it. The orange tip points downwards, and it should be injected into the thigh and held in place for three seconds, then an ambulance should be called. My Mum gets a text from the doctor when I need a new one, as using an old one could mean the medicine doesn't work as well.

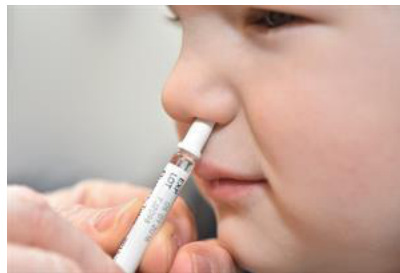


Medicine: **Insulin**



I have Type 1 diabetes so my body finds it difficult to break down glucose (sugar) because I don't produce a hormone called insulin. Instead I take insulin every day to keep well. I can do this on my own now, but my Dad used to help me when I was younger. To inject it safely I use an injector pen with the correct amount of insulin already inside - the amount has been prescribed to me by the doctor. I have a checklist with me to remember all the steps - I have to wash my hands so that the pen doesn't get dirty. I also have to choose a different place to inject each time so that my body can take in the insulin properly. When I have finished, I use a special bin called a 'sharps bin' to throw the injector pen away so that it can't hurt anyone. Insulin needs to be kept cool so the pens are stored in the fridge. I carry a diabetes ID so if there's an emergency people know about my condition. If I go out of school or away from home I take a special wallet with emergency medicine called a 'hypowallet' with instructions on what to do if I feel really unwell. If this doesn't work or the person helping me is unsure about using the kit, then an ambulance should be called.

Medicine: **Flu vaccine**



The school nurse gave some people in our class a flu vaccine at the start of the school year in Year 3. It is given using a nasal spray - it gets squirted into your nose from a small tube. A medical professional with the right training must provide it, usually a nurse or doctor. I was worried about having the vaccine; the last time I had one I was a baby, so I couldn't remember what happens and I think that was an injection. One of my friends told me they had a few side effects after having the flu vaccination - they felt tired with a headache. My Mum said there was no need to worry - it gets tested for a long time, and the doctor said that if there are some mild side effects, these are far less serious than the flu itself. Mum says that she thinks having the vaccine is really important because it not only protects me from the flu but also other people in the community.

Drug

cannabis

Drug

e-cigarettes

Drug

alcohol

Drug

cocaine

Drug

MDMA/ecstasy

Drug

**speed
(amphetamine)**

Drug

tobacco

Drug

nitrous oxide

Drug

caffeine

Drug



Effects cards

dizziness or blurred vision	more willing to take risks	feeling relaxed and happy
chatty and sociable	thoughts and feelings intensified	hallucinations (seeing or hearing things that are not really there)
raised heart rate and temperature	feeling confident	awake and alert
feeling anxious or irritable	giggly and silly	sleepiness or drowsiness



Risk cards

injuries from falls or accidents	long term illness or disease	sickness
lethargy — no energy — tiredness	difficulty concentrating or remembering things	fainting or breathing difficulties
becoming dependent on the drug	risk of heart attack	mental health problems
overheating or dehydration	money worries or problems	affects a person's looks
risk of criminal record, fine or prison	confusion, panic or paranoia	unable to know how strong the drug is
difficulty sleeping or relaxing	harm to others or the environment	increased risk of illness such as colds or flu



Alcohol

Alcohol is found in drinks such as beer, wine and spirits. Some alcoholic drinks are stronger than others (such as spirits, e.g. gin, vodka, rum or whisky) – these usually include high levels of alcohol and so are drunk in smaller amounts or ‘mixed’ with non-alcoholic drinks).

The amount of alcohol found in drinks is measured in units. Adults who choose to drink are advised to drink no more than 14 units a week, over a week (this is equivalent to approximately 6 pints of beer or 6 glasses of wine) and advised to have several alcohol-free days a week.

Children should not drink alcohol*

Effects

- The effect on mood will depend on how the person was feeling before drinking alcohol – alcohol is likely to heighten that mood or feeling, for example:
 - ◊ some people feel more relaxed or sociable
 - ◊ some people will feel more angry
 - ◊ some people will feel more withdrawn or lonely
 - ◊ feeling more or less self-conscious
 - ◊ more willing to take risks
- People absorb alcohol at different rates so some may become ‘drunk’ (feel effects more strongly) more quickly than others – this might include a lack of co-ordination, blurred vision and slurred speech
- The more alcohol that is consumed, the stronger the effects

Risks

- Too much alcohol can lead to sickness, dizziness, falling over or fainting, memory loss
- Inability to control own behaviour
- Aggressive behaviour
- Injury or accidents may occur – it is dangerous to drive or operate machinery after drinking alcohol
- Feeling ill (e.g. tiredness, headaches and sickness) the next day is common if someone drinks too much the day before
- Drinking a lot or often over time can become an unhealthy habit leading to feelings of agitation and anxiety (needing the next drink) -people can become dependent on alcohol
- Drinking more than the recommended guidelines can cause damage to the brain and body, illnesses such as cancer, strokes, liver disease and depression

Laws

- It is illegal to give a child under age 5 alcohol
- It is illegal for anyone under the age of 18 to buy alcohol
- Even if someone is over the age of 18, shops can refuse to sell alcohol to someone under the age of 21 (Challenge 21)
- The police can confiscate alcohol from someone they suspect to be aged under 18 in a public place
- It is illegal for an adult to buy alcohol for someone aged under 18 (except where that person buys beer, wine or cider for someone aged 16 or 17 to be drunk with a table meal while accompanied by a person over 18)
- It is illegal to sell to, or purchase alcohol for, someone who is already drunk
- Drink driving is illegal – it is safest for someone not to drink any alcohol if driving

** The UK Chief Medical Officers advise an alcohol-free childhood. If a young person (age 15-17) does drink alcohol it should only be rarely and with guidance of a parent or carer, in a supervised environment (such as at home) and even then, only a small amount should be consumed.*

Caffeine

Caffeine is found in drinks such as tea, coffee, cola, energy drinks, sports drinks and some medicines. Energy drinks often contain high levels of caffeine, sugar and may also contain other stimulants.

Effects

- Caffeine is a 'stimulant' meaning it can temporarily make people feel like they have lots of energy, more alert or less tired.
- Can make the body produce urine more quickly.
- Caffeine can affect some people more than others and can depend on how much is consumed – usually the more caffeine consumed, the stronger the effects

Risks

- For most adults, tea and coffee can be consumed in moderation, as part of a balanced diet without detrimental health effects.
- However, drinking lots of caffeine or stimulants can lead to restlessness or an inability to relax and difficulties sleeping.
- Caffeinated drinks often also include high levels of sugar or flavoured syrups which can cause weight gain and tooth decay.
- Caffeinated drinks are not suitable for toddlers and young children.
- Pregnant women should also reduce their intake of caffeine.

Laws

- There are no legal restrictions on the sale or use of caffeine in food and drink, although some medicines which contain caffeine may only be available on a doctor's prescription.
- Some shops and supermarkets have chosen to only sell highly-caffeinated products to people aged 16 and over.

Cannabis

Cannabis is a drug that comes from the Cannabis plant. It can be smoked, eaten or vaped. It usually comes in the form of dried herbal material including dried flowers, leaves, and stems, or as an oil, or solid material. It is often mixed with tobacco when smoked, but can also vaped. Some types of cannabis are stronger than others.

Effects

Changes how the brain works:

- Some people feel relaxed and happy
- Some people feel chatty and giggly
- Some people feel very tired
- Can make people hungry
- Some people have a sense of time slowing down
- Thoughts and feelings may become much more heightened or experienced more deeply
- Hallucinations (seeing or hearing things that are not really there)

Risks

- Sickness, dizziness or fainting
- Difficulty concentrating and remembering things
- Confusion or anxiety, paranoia
- Disturbed sleep
- Mood swings, depression
- Lethargy – no motivation to do things
- People can become dependent on cannabis (they feel they need it all the time)
- Injury or accidents – dangerous to drive or operate machinery after using cannabis
- **If Cannabis is smoked with tobacco, all the risks associated with tobacco also apply** *see Tobacco fact sheet
- Cannabis may also be mixed with other chemicals (which may be unknown) and which can also be harmful to the body

Laws

- Cannabis is illegal to possess, give away or sell (class B drug)
- Possessing cannabis could mean receiving a police warning or on the spot fine (£90) but could also lead to a criminal record* or up to 5 years in prison, an unlimited fine, or both
- Supplying (selling or giving away) cannabis, even to friends, could mean up to 14 years in prison, an unlimited fine or both
- Driving after using cannabis is illegal and can lead to a fine, driving ban or prison

**Having a criminal record can affect a person's ability to apply for certain jobs or travel to different countries, such as United States of America (USA).*

Cocaine

Cocaine is an illegal drug. It is derived from the leaves of the coca plant. It comes as a white powder (coke) and is snorted through the nose or in small rocks (crack cocaine) which are smoked.

Effects

- Can make someone feel happy and excited, alert and wide awake, confident and chatty or more animated
- Someone may feel restless or unable to relax
- Overconfidence and arrogance
- Increases heart rate (makes the heart beat faster)
- Raises body temperature, so someone might feel hot

Risks

- Sickness
- Anxiety and panic
- Regular use can lead to depression and/or paranoia and other mental health issues
- Can be fatal – risk of heart attack or stroke and increased risk for people with heart conditions
- Snorting causes damage to the nose and smoking causes breathing problems and chest pains
- Addictive – people can become dependent on cocaine (they feel they need it all the time)
- Increased risks to personal safety as may be more likely to do something dangerous

Laws

- Cocaine is illegal to possess, give away or sell (class A)
- Possessing cocaine can mean up to 7 years in prison, an unlimited fine or both, and a criminal record*
- Supplying (selling or giving away) cocaine, even to friends, can mean up to life in prison, an unlimited fine or both
- Driving after using cocaine is illegal and can lead to a fine, driving ban or prison

**Having a criminal record can affect a person's ability to apply for certain jobs or travel to different countries, such as United States of America (USA).*

Nitrous Oxide

A colourless gas that is stored in a small metal canister and inhaled, sometimes from balloons. It is also called laughing gas or balloons.

Effects

- Feelings of calm and relaxation
- Euphoria (extreme happiness)
- Giggles and laughter
- Dizziness
- Slows down the brain and the body's responses

Laws

- Nitrous oxide is illegal to give away or sell but there is no penalty for possessing the drug (Psychoactive Substances Act, 2016)
- Supplying (selling or giving away) or producing nitrous oxide can lead to 7 years in prison, an unlimited fine or both and a criminal record
- Driving after using nitrous oxide is illegal and can lead to a fine, driving ban or prison

**Having a criminal record can affect a person's ability to apply for certain jobs or travel to different countries, such as United States of America (USA).*

Risks

- Severe headache or feeling sick
- Inability to 'think straight'
- Risk of accidents from dizziness, from taking too much or using it in a dangerous place
- Short but intense feelings of paranoia
- Lack of oxygen – inability to breathe properly
- Fainting or unconsciousness
- If used in large doses a person might see or hear something that is not really there (hallucinations)

- Regular use can lead to loss of vitamin B12 and low white blood cells in the body, causing illness such as anaemia and nerve damage (numbness in fingers and toes)
- Inhaling any gas direct from a canister is very dangerous because it is under such high pressure – it can cause spasms of the throat, cause someone to stop breathing and can be fatal

Speed (amphetamine)

An illegal drug. It usually comes in an off-white or pink powder that sometimes looks like small crystals, which is dabbed onto gums, snorted or swallowed.

Effects

- It can make people feel excited, alert and energised or wide awake for long periods of time
- Some people can become very chatty or talkative
- Some people can feel agitated, irritated or aggressive
- It can reduce appetite
- Speeds up the heart rate

Laws

- Speed is illegal to possess, give away or sell (class B)
- Possessing speed can mean up to 5 years in prison, an unlimited fine or both, and a criminal record*
- Supplying (selling or giving away) speed, even to friends, can mean up to 14 years in prison, an unlimited fine or both
- Driving after using speed is illegal and can lead to a fine, driving ban or prison

**Having a criminal record can affect a person's ability to apply for certain jobs or travel to different countries, such as United States of America (USA).*

Risks

- Difficulties sleeping or relaxing
- It can cause confusion, anxiety or panic
- Increases mental health problems
- It puts a strain on the heart leading to high blood pressure or heart problems and heart attack
- Using speed regularly can lead to problems with learning and concentration
- For days after use people can feel very tired, lethargic, sad or depressed
- Taking a lot can affect the immune system so there is an increased risk of colds and flu
- In high doses it can create hallucinations – seeing or hearing things that are not really there
- Regular use can make someone feel dependent on the drug, meaning they want more
- It may be 'mixed' with other dangerous drugs or chemicals which may be unknown
- Injury or accidents – dangerous to drive or operate machinery after using the drug

E-cigarettes (Vapes)

Using an e-cigarette is known as vaping. An e-cigarette is a device that allows someone to inhale vapour (rather than smoke). They work by heating a liquid that contains chemicals and some (but not all) contain nicotine. There are different types: some look like cigarettes, a small tube or pen and others are small pots of liquid.

Effects

- E-cigarettes often contain nicotine which raises blood pressure and increases heart rate
- When nicotine enters the body it can make people feel relaxed and calm, or increase alertness depending upon how the person is feeling beforehand
- Cravings for nicotine can make someone feel anxious or irritable
- When combined with face-to-face support from a smoking cessation or medical professional, e-cigarettes or vaping can help people to quit smoking – by helping people to manage and reduce the amount of nicotine they are taking in.
- There is currently no evidence that vaping causes harm to others (like second-hand smoke from cigarettes).

Risks

- E-cigarettes are not risk free, and more research is needed to understand any potential long-term harms, but use carries less risk than smoking cigarettes
- Although e-cigarettes don't contain tobacco or produce carbon monoxide (two of the most damaging elements in tobacco smoke) the liquid and vapour do contain potentially harmful chemicals (although in much lower levels than cigarettes).
- E-cigarettes contain nicotine which is addictive and causes a craving for the user to smoke more
- E-cigarettes must be used with care (such as using the correct charger) to ensure they do not pose an increased risk of causing fire

Laws

- Someone must be aged 18 years and over to buy e-cigarettes
- It's illegal for an adult to buy e-cigarettes for someone under the age of 18
- Vaping is not allowed on buses, planes, trains or at train stations
- It is up to the owner of other public places to decide if vaping is allowed (for example in bars, restaurants or cafes)

MDMA (Ecstasy)

An illegal drug that usually comes in pills or tablets, a powder or white / grey crystals. It is swallowed, dabbed onto gums or sometimes snorted through the nose.

Effects

- Can make people feel happy and chatty, energised and alert
- Can make people feel confident and sociable
- Feelings and surroundings, or music, or colours can become more intense
- Raises body temperature
- Increases heart rate
- Some people feel tingles or tightening of muscles

Laws

- MDMA is illegal to have, give away or sell (class A)
- Possessing MDMA can mean up to 7 years in prison, an unlimited fine or both, and a criminal record*
- Supplying (selling or giving away) MDMA, even to friends, can mean life in prison, an unlimited fine or both
- Driving after using MDMA is illegal and can lead to a fine, driving ban or prison

**Having a criminal record can affect a person's ability to apply for certain jobs or travel to different countries, such as United States of America (USA).*

Risks

- Difficult to know what is in the drug – it may be 'mixed' with other dangerous drugs or chemicals
- Difficult to know how strong the drug is or how much the drug will affect someone
- Sickness
- Can cause anxiety, confusion, panic or paranoia
- Body dangerously overheats or dehydrates – can be fatal
- This can also lead to accidents where people try to cool down or drink too much water to rehydrate
- Liver, kidney and heart problems (people with asthma, epilepsy or heart conditions can have a dangerous reaction)
- People can become dependent or want to take more to get more of a 'buzz'
- Long term use, when used in higher amounts can cause memory problems or depression
- Increased chance of colds and sore throats
- Injury or accidents – dangerous to drive or operate machinery after using MDMA

Tobacco (cigarettes, shisha)

Tobacco is a plant. The leaves are dried and shredded and sold as factory-made cigarettes, rolled tobacco (roll-ups) or shisha which is smoked through a water pipe (hookah). The drug in tobacco is nicotine, but cigarettes also contain other chemicals that harm the body.

Risks

- Sickness and dizziness (particularly for first time smokers)
- Breath, hair and clothes smell
- Nicotine in tobacco is addictive
- Increased anxiety, tension, irritability and possibly depression over time
- Tar in tobacco smoke can lead to stained teeth and nails
- Stops oxygen getting to the skin which can lead to a dull complexion and premature ageing (wrinkles)
- Tobacco smoke contains harmful chemicals which damage most of the body's organs and can lead to long term or life threatening disease (such as lung disease, heart disease, diabetes and different types of cancer)
- Second-hand smoke means other people are also at risk of these diseases (particularly children as they have less developed lungs, airways and immune systems).
- Causes weak and brittle bones (arthritis)
- Reduces fertility (ability to make a baby) in both men and women
- If a pregnant woman smokes it can harm the unborn baby
- If Shisha is smoked, more smoke is inhaled (so, smoking shisha for 20- minutes is equivalent to smoking approximately 25 cigarettes)
- Risk of accidental fire




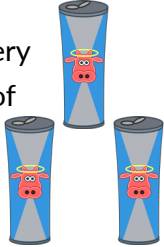
Effects





- Contains nicotine which raises heart rate and blood pressure
- Many smokers believe that smoking helps them relax but nicotine interferes with the chemicals in the brain meaning when they haven't smoked for a while they have a craving to do so. They may feel irritable and anxious until they can smoke. These feelings are temporarily relieved when they smoke again

Laws


- It is illegal to smoke in all public enclosed areas and workplaces (including restaurants, bars and pubs or vehicles used for work purposes)
- Smoking in a car with someone under the age of 18 is against the law*
- It is illegal for shops to sell cigarettes to anyone under the age of 18
- It is illegal for an adult to buy cigarettes for someone under the age of 18

**Not currently illegal in Northern Ireland*


Scenario	Is the risk high, medium or lower? Why?
<p>Jim, 51, drinks four pints of beer most days of the week.</p> 	<p>high medium lower</p>
<p>Jenny's cousin Jay says he has got some cannabis for them to try and it will be fun. They are 17.</p>	<p>high medium lower</p>
<p>Indie, 15, is having meal with their family to celebrate Gran's birthday. Indie's mum says that Indie can have a small glass of wine.</p> 	<p>high medium lower</p>
<p>Dawn, 45, has smoked cigarettes for 25 years. Dawn has decided to stop smoking cigarettes and try e-cigarettes instead.</p> 	<p>high medium lower</p>
<p>At a party, Alba, 19, buys a tablet from someone, because they have heard it will help them have an even better time.</p>	<p>high medium lower</p>
<p>Mo, 14, skips breakfast every day and drinks three cans of energy drinks on the way to school instead.</p> 	<p>high medium lower</p>
<p>Shanise, 16, meets up with friends by the canal. She notices some of them are inhaling something from a cannister.</p>	<p>high medium lower</p>

Scenario	Identify who is involved	Identify the drug (may be 'unknown')	Identify at least one potential risk
<p>Jim, 51, drinks four pints of beer most days of the week.</p> 			
<p>Jenny's cousin Jay says he has got some cannabis for them to try and it will be fun. They are 17.</p>			
<p>Indie, 15, is having meal with their family to celebrate Gran's birthday. Indie's mum says that Indie can have a small glass of wine.</p> 			
<p>Dawn, 45, has smoked cigarettes for 25 years. Dawn has decided to stop smoking cigarettes and try e-cigarettes instead.</p> 			
<p>At a party, Alba, 19, buys a tablet from someone, because they have heard it will help them have an even better time.</p>			
<p>Mo, 14, skips breakfast every day and drinks three cans of energy drinks on the way to school instead.</p> 			
<p>Shanise, 16, meets up with friends by the canal. She notices some of them are inhaling something from a cannister.</p>			


Changing Scenario	How does this change the level of risk?
Jim cuts down to drinking 2 pints of beer, only on 3 days a week.	
Jenny and Jay also drink beer whilst smoking the cannabis.	
After drinking the wine, Indie sneaks off to the kitchen and drinks more glasses of wine.	
Dawn stops smoking cigarettes and e-cigarettes completely.	
Alba decides not to take the tablet.	
Mo really likes the energy drinks and starts drinking them on the way home from school too.	
Shanise decides not to join in or meet up with her friends.	



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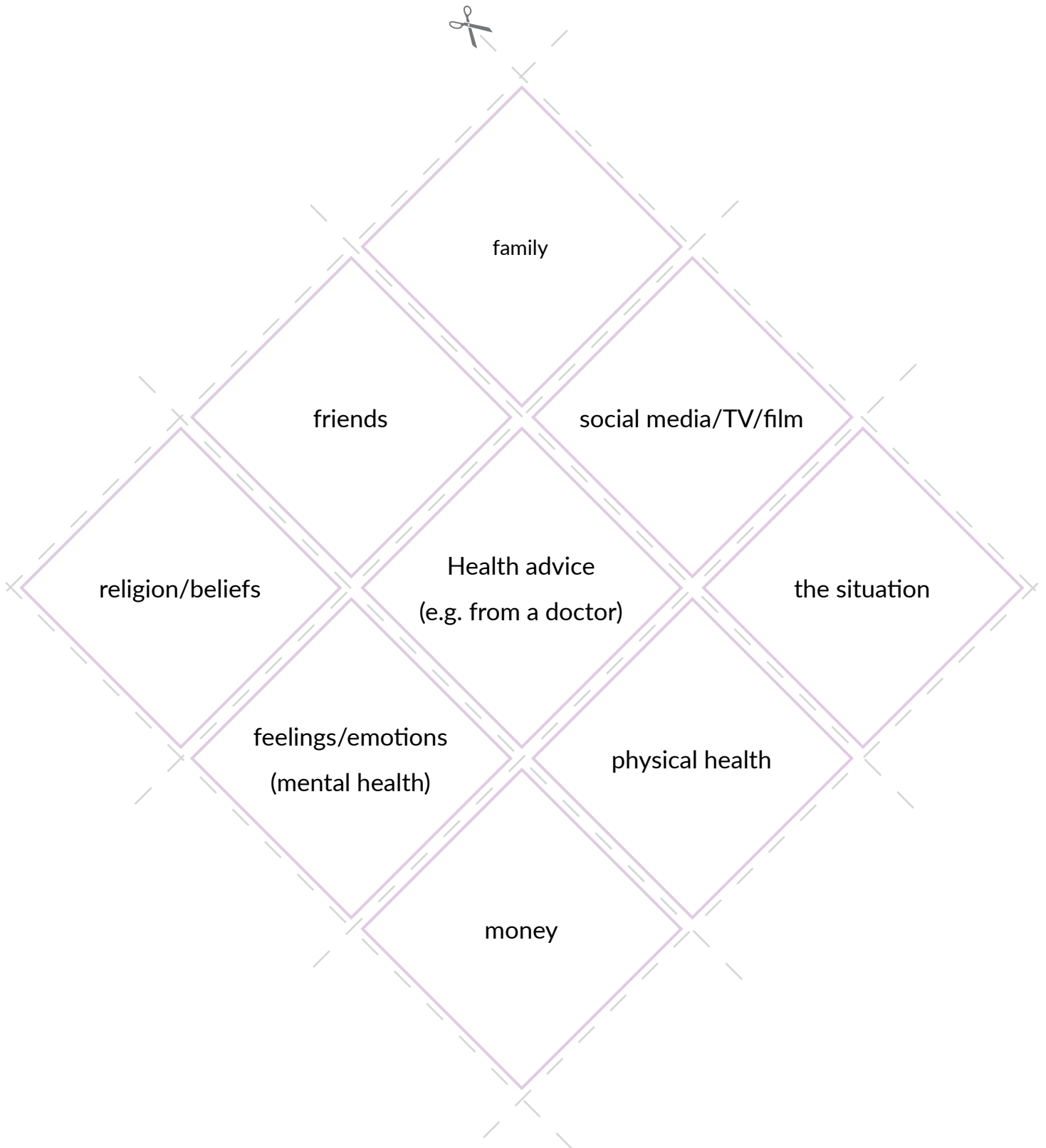
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A large, empty rounded rectangular box for writing, with a pencil icon in the top-left corner.





Bailey is meeting a group of older friends in the park. After a while, some of the group start smoking cannabis. It is being passed around the group and they all smoke it. Bailey is offered the cannabis too.



Dee is going to a friend's birthday party. When she arrives, there are no adults around. Most people seem to be drinking alcohol from bottles and dancing together. Dee's religion does not permit drinking alcohol. She sees her friend who passes her an open bottle of beer and says, "Come on, have a drink and dance with me!"



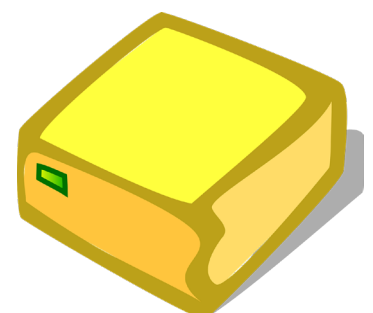
Mich has noticed people vaping outside the cafes on the high street. A new vape shop has opened nearby too. Mich has heard that vaping is much better than cigarettes. Mich sees an advert for vaping on their way to work and thinks they will try vaping too.



Pip's mum always has a cigarette with a cup of coffee in the morning but at the moment she is trying hard not to smoke. It's really hard. She sees a packet of cigarettes that Dad has left on the table. Then, her friend comes around for coffee and says, "Aren't we going outside for a cigarette too?"



Jamie's cousin says that later that day he will give Jamie a packet to deliver to an address across the estate. He tells Jamie not to tell anyone because in the packet are some illegal drugs but not to worry as no one will know what he is doing anyway.





Get cross and shout at the other person/people involved

Criticise or insult the other person/people involved

Dare the other person/people to do it first

Feel they don't want to but join in anyway

Just say 'no thanks'

Try the drug and then feel worried

Walk away / leave the situation

Give a reason for not wanting to use the drug

Suggest doing something else instead

Talk to / text a helpline

Talk to a trusted adult

Something else?

Example passive responses:

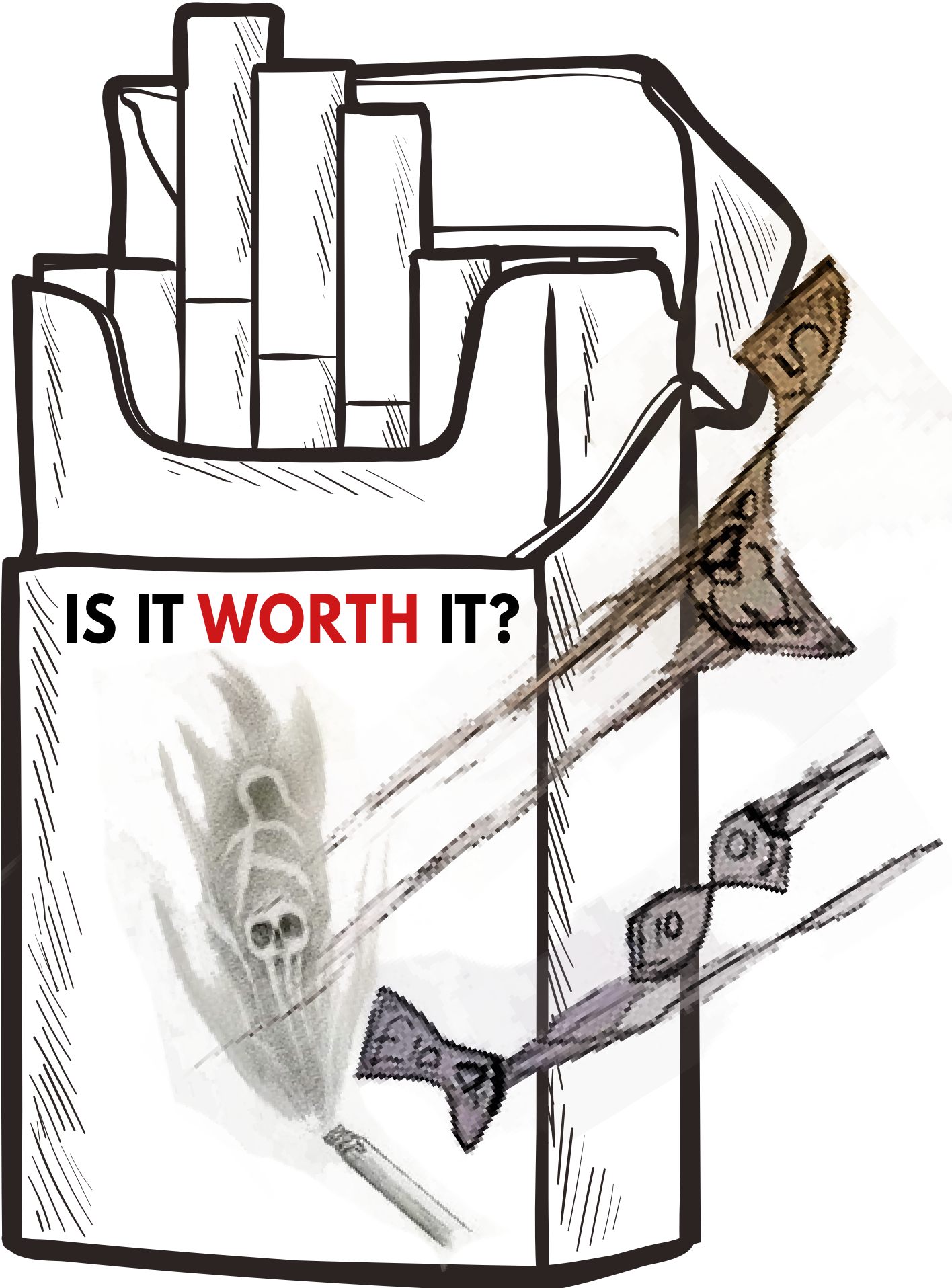
- Feel they don't want to but join in anyway
- Try the drug and then feel worried

Example aggressive responses:

- Get cross and shout at the other person/people involved
- Criticise or insult the other person/people involved
- Dare the other person/people to do it first

Example assertive responses:

- Just say 'no thanks'
- Give a reason for not wanting to use the drug
- Suggest doing something else instead
- Walk away / leave the situation
- Talk to a trusted adult
- Talk to / text a helpline



DON'T BE CHAINED TO SMOKING...



BREAK THE HABIT!

SO MANY WAYS TO VAPE...



TO RELAX... FOR FUN... TO PARTY !

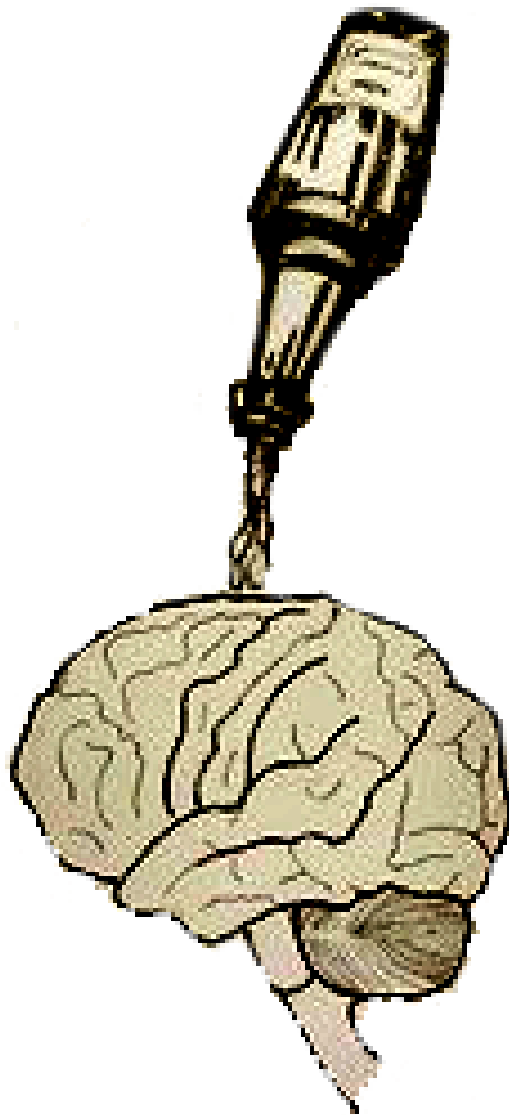


REAL MEN



DRINK REAL BEER

DRINKING



AFFECTS YOUR THINKING



THINK



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FEEL



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DO/WANT TO DO



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advert on a bus/train/underground

friend

TV documentary

story in a film/book

www.nhs.uk/live-well

news story

parent

teacher/PSHE lesson



KNOWLEDGE ORGANISERS

Drug and alcohol education

KS1-2



Safety rules

- ✔ Only use own prescribed medicine, don't share with other people or use medicine that is for others
- ✔ Any unused prescribed medicines should be taken to a pharmacy to be disposed of safely
- ✔ Follow the advice in instructions for medicines including that about side effects
- ✔ Wash grazes with water to make sure they're clean
- ✔ If any household products get on the skin, wash the area and let a trusted adult know if it's itchy or sore
- ✔ If any household products get in the eyes, ask a trusted adult for help to wash the product out
- ✔ Tell an adult about any spills from household products such as cleaning products to make sure it is cleaned up
- ✔ If a product has a hazard label on it, let adults use it and leave it alone

Types of medicines

Inhalers

Can be used with a spacer to relieve asthma symptoms or prevent attacks

Tablets or pills

A range of medicines can be in tablet form including pain killers and prescribed medicines

Insulin pens

Can be used to manage diabetes to help the body use sugar for energy

Liquid medicines

A range of medicines can be in liquid form including pain killers and prescribed medicines

Bath oils

Can be used to manage skin conditions such as eczema

Ear drops

Can be used to relieve earache or loosen ear wax

Skin creams

Can be used to manage skin conditions such as eczema

Eye drops

Can be used to relieve eye conditions, treat infections or help manage hay fever

Ways to keep healthy

- ✔ Taking medicines that are prescribed according to the instructions
- ✔ Eating a healthy, balanced diet
- ✔ Clean environment and clothes
- ✔ Going to check-ups at the doctors and dentist
- ✔ Talking about worries or feelings including telling someone if they feel ill

People who help us and where to ask for help

Speak to a **parent, carer** or **adult they trust**

Speak to a **teacher, assistant** or **school nurse**

Listen and talk to a **doctor, dentist** or **nurse**



Drugs

Drug	Something a person can take to change the way they think, feel or behave.
Legal drug	Substances such as caffeine, alcohol or over-the-counter medication, these may have age-restrictions.
Caffeine	A drug found in tea, coffee and soft drinks that makes people feel alert. Children should only consume caffeine in moderation.
Alcohol	A drug found in drinks such as beer and wine, measured in units. It is not needed for a healthy diet. Too much alcohol can risk making a person ill or getting hurt due to an accident. An alcohol-free childhood is the healthiest option. Adults who want to drink less alcohol can get help to stop or reduce their use.
Nicotine or tobacco	Nicotine is a drug found in tobacco and other products such as e-cigarettes/vapes. Nicotine and tobacco can make a person ill. Adults can get help from their doctor to stop smoking. It is illegal to sell tobacco to under 18s.

Medicines and household products

Household product	Products typically used within a household. This includes cleaning products such as bleach, kitchen/bathroom spray, as well as toiletries and cosmetic products such as soap, shampoo and body lotion. These should be used as per the instructions on the product.
Medicine	A drug or remedy that may be prescribed by a health professional or purchased over-the-counter.
Dose	The amount of medicine to be taken at one time. This can follow a health professional's instructions or the instructions that come with over-the-counter medicines.
Health condition	A disease, illness, injury or disorder either physical or psychological.
Allergy	When the body reacts to certain things such as pollen, animals, foods or insect bites. Allergic reactions might include breathing problems, skin rashes, swelling, or itching.
Immune	Protected from an illness, either because a person has had the illness before or because they have received a vaccine.
Vaccine	A medical preparation that protects a person from an illness by making them immune
Bacteria	A small organism, some of which can cause infections and/or cause people to feel ill (though not all!)
Virus	A small particle that can cause infections and/or cause people to feel ill

External support services

Accessing health-related support

Explain to pupils that adults who need support to stop smoking or drinking can get help from their doctors or from the [NHS](#) online.

Calling emergency services

In an emergency call 999
For non-emergencies call 111
Pupils may need an explanation as to what these services do.

Childline

[childline.org.uk](https://www.childline.org.uk) 0800 1111
Confidential support service

CALLS DO NOT APPEAR ON PHONE BILL.

Drugs

Drug	Something a person can take to change the way they think, feel or behave.
Substance	This term includes alcohol and other drugs that may be legal or illegal.
Legal drug	Substances such as caffeine, alcohol or over-the-counter medication, these may have age-restrictions.
Illegal drug	Substances that a person can be charged for if they possess it or supply it to someone else. These are not subject to quality controls so it is hard to know what is in each batch of a drug, which can increase risk.
Possession	A person can be charged with possession if they have an illegal drug, even if it's not theirs.
Supply	A person can be charged with supply if they sell, share or give away illegal drugs.
Dependency	When a person relies upon a substance to feel or function as normal.
Caffeine	A drug found in tea, coffee and soft drinks that makes people feel alert. Children should only consume caffeine in moderation.
Alcohol	A drug found in drinks such as beer and wine, measured in units. It is not needed for a healthy diet. An alcohol-free childhood is the healthiest option.
Nicotine or tobacco	Nicotine is a drug found in tobacco and other products such as e-cigarettes/vapes. Nicotine and tobacco can make a person ill. Adults can get help from their doctor to stop smoking. It is illegal to sell tobacco to under 18s.
Cannabis	An illegal drug that can be smoked, eaten or vaped that makes people feel 'chilled out' or giggly. Can be different strengths. Against the law to possess, grow or sell.

Medicines and health

Medicine	A drug or remedy that may be prescribed by a health professional or purchased over-the counter.
Dose	The amount of medicine to be taken at one time. This can follow a health professional's instructions or the instructions that come with over-the-counter medicines.
Health condition	A disease, illness, injury or disorder either physical or psychological.
Allergy	When the body reacts to certain things such as pollen, animals, foods or insect bites. Allergic reactions might include breathing problems, skin rashes, swelling, or itching.
Immune	Protected from an illness, either because a person has had the illness before or because they have received a vaccine.
Vaccine	A medical preparation that protects a person from an illness by making them immune
Bacteria	A small organism, some of which can cause infections and/or cause people to feel ill (though not all!)
Virus	A small particle that can cause infections and/or cause people to feel ill








Influences

Situation based	Own feelings, attitudes, emotions. Mental and/or physical health.
Peer based	Friends' attitudes and opinions Pressure, teasing or friendly offers
Role model based	Family attitudes and opinions Health advice from a doctor/nurse Teacher attitudes and actions
Society based	Culture, religion or belief Social norms
Media based	Social media, TV or film Advertising

Responses to influence

Passive	Accepting or allowing what happens or what others do without actively responding
Aggressive	Being ready or likely to confront or attack others or what others do
Assertive	Standing up for yourself or someone else calmly and positively, or getting a point across without causing upset

External support services

<p>Health-related support</p> <ul style="list-style-type: none">  National Eczema Society,  Asthma UK,  Diabetes UK  Allergy UK 	<p>Support with drugs, alcohol and tobacco use</p> <ul style="list-style-type: none">  NHS  NHS Smokefree  Drinkaware 	<p>Childline</p> <p>childline.org.uk 0800 1111 Confidential support service CALLS DO NOT APPEAR ON PHONE BILL.</p>
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