Lesson 2
Introduction to Harm Reduction

Overview

Students will learn about harm reduction concepts and strategies, including abstinence, that will empower them to make healthy choices for themselves and others regarding substance use.

Learning Objective

Students will be able to:

• Define the term “harm reduction.”
• Identify key harm reduction strategies.
• Identify the ways in which drug use may be potentially harmful. (i.e., health-related harm, academic harm, social/emotional harm, legal harm).
• Demonstrate and apply harm reduction strategies to decision-making processes in real world situations.

Materials

• Attachment: Student Worksheet: “Introduction to Harm Reduction”
• Lesson 2 PowerPoint
• Computer with LCD projector

Lesson Preparation

• Print 1 copy of “Lesson 2: Introduction to Harm Reduction” worksheet for each student.

Educator Notes: This lesson could be longer than 45 minutes, depending on students’ level of engagement. Consider pacing this lesson over two days, for example, Part 1 on the first day and Part 2 the next class day.

Evaluation Tools

• Lesson 2 Assessment Rubric
• Lesson 2 Implementation Fidelity Checklist
Lesson 2: Introduction to Harm Reduction

National Health Education Standards

1.12.5  Propose ways to reduce or prevent injuries and health problems.
2.12.7  Analyze how the perception of norms influence healthy and unhealthy behaviors.
5.12.2  Determine the value of applying a thoughtful decision-making process in health-related situations.

Agenda

I.  Do Now

II.  Part 1: Introduction to Harm Reduction and Drug-Related Harms

III.  Part 2: Harm Reduction in Practice

IV.  Exit Ticket
**Do Now**  
*5 minutes*

**SLIDE 2: DO NOW** Make sure slide is visible as students begin class. Hand out worksheet to each student and ask them to write their responses to the questions on the worksheet.

Tell students:
“Based on these images, identify the harm reduction strategies in these pictures. Then, based on these examples, how would you define harm reduction?”

**Educator Notes:** Possible Modification: Allow students to work in groups of 2-4 to develop their own definition of harm reduction strategies. If students complete tasks sooner than the allotted time, challenge them to brainstorm 1-3 more harm reduction strategies they practice day to day.

**SLIDE 3: LESSON OBJECTIVES** Tell students:
“We will review and discuss the Do Now later in the lesson. Today, we will be learning about harm reduction strategies and discussing different ways drugs could potentially be harmful, like health-related harm, academic harm or legal harm. Any questions?”

**Part 1: Introduction to Harm Reduction Interactive Lecture**  
*25 minutes*

**SLIDE 4: BRAINSTORM: WHY DO TEENS USE DRUGS?** Ask students:
“On your worksheet, brainstorm 3-5 reasons: why do you think teens do drugs?”

**Educator Notes:** Possible Modification: Allow students to brainstorm and express their ideas, students could rank their reasons in order and if possible memorialize their ideas on poster paper or sticky notes.

Tell students:
“One of the main reasons teens may choose to get involved with drugs is that they’re a big part of our world. Drug use is portrayed on TV, in the news, and in music. Many of the adults in your lives may use legal drugs like alcohol and caffeine to either perk up or relax – and this is considered completely normal. In addition to recreational drug use, many people take prescription and over-the-counter drugs to help them manage...
pain, focus, or deal with mental health issues. And again, this is just a normal part of our society. With drugs everywhere, it is no surprise that some teens choose to use them.”

**Educator Notes:** If students suggest any of the reasons on the following page, the instructor can use these statements to elaborate on student responses.

“**They’re curious.** The teenage years are a time for experimentation. People are figuring out who they are and what they like. And that could include drugs.

“**It helps them feel better.** The use of drugs – both legal and illegal – to treat physical and mental health issues is very common in American society. Some teens are prescribed drugs while others may start self-medicating in order to manage the stresses of their everyday lives or physical pains.

“**They want to fit in.** Peer pressure is often pointed to as a reason that teens try drugs – but this doesn’t always mean being aggressively pressured into drug use. Some teens have friends who use drugs or live in environments where drug use is common. They may decide to use drugs because they want to feel like they have something in common with those around them.

“**They want to improve their performance.** Some teens may try drugs like Adderall to help them study for a test or steroids in order to build muscle mass. Using drugs in this way can be risky both because it’s illegal, but also because prescription drugs and steroids are very powerful substances.

“**They think it’s fun.** This idea usually makes adults uncomfortable, but drugs can be fun to use.

“Otherwise, why would so many adults use legal drugs recreationally, like alcohol and tobacco? They do it because it feels good, so it makes sense that some teens would use drugs for these reasons, too. However, it is important to keep in mind that using
drugs has different, and potentially worse harms for teens than it
does for adults. It can harm teens’ developing brains and bodies. It
can also get them into trouble at school or with the law.”

SLIDE 5: WHICH IS THE MOST FREQUENTLY USED DRUG? Ask students and allow them
time to circle their response on their worksheet.

“Which of the following drugs do you think is most popular
among teens?”

a. Alcohol?
b. Marijuana?
c. Prescription drugs, like Xanax, Adderall and Ritalin,
   Oxycodone?
d. Tobacco?

“Circle the answer on your worksheet and answer: why do you
think it’s the most popular?”

Educator Notes: Encourage students to raise their hands, answer the question and elaborate
on why they chose that answer. Additionally, take a class survey on which drug they think is
most popular.

Tell students:

“Nationally, the drug that teens use most is alcohol. The second
most popular drug is marijuana, followed by cigarettes and
prescription drugs.”

SLIDE 6: HOW HAS TEEN DRUG USE CHANGED? Ask students and allow them time to
circle their response on their worksheet.

“How do you think teen drug use has changed over the years?
Raise your hand if you think teens are using less often…the
same amount…or more than they have in the past.”

Educator Notes: Encourage students to raise their hands, answer the question and elaborate
on why they selected the answer.
SLIDE 7: FEWER TEENS USE DRUGS  **Tell students:**

“Drug use among teens is declining nationally according to Monitoring the Future, a national survey about teens and drugs by the National Institute on Drug Abuse. This survey has been conducted every year since 1975. The most recent data shows that:

• Use of cigarettes and alcohol has reached its lowest levels in the history of the study.

• Use of any illicit drug (other than marijuana) has declined.

• Use of marijuana has declined among 8th and 10th graders, but held steady for 12th graders.

• Prescription opioid misuse has declined among 12th graders.”

**Tell students:**

“Of course everyone’s community is different. The survey shows a national trend. There may be more drug use or less depending on where you go to school. But, remember that media portrayals of all teens as drug-obsessed ‘party animals’ are not accurate. While it is normal for some teens to experiment with drugs, it is also normal for teens to choose not to use drugs. You don’t have to feel pressured to use drugs because everyone is doing it – because not everyone is doing it.”

SLIDE 8: UNDERSTANDING THE CONTINUUM  **Tell students:**

“So let’s start with looking at the different ways in which people may form relationships with drugs. For example, some people never use them, while others only use occasionally with friends. You can think about the way people use drugs as continuum stretching from non-use or abstinence to misuse and dependence. It shows the way people’s drug use patterns can change and acknowledges that some types of use are more likely to lead to severe problems.”

“I’m going to read a few scenarios. On the worksheet, I want you to predict where it falls on the continuum and justify why you put it there.”
**Educator Notes:** Read the scenarios and encourage students to write why they put them there. Go through all of the scenarios first, discuss their predictions and whys. Then, go through the animation on the PowerPoint to reveal the answers (Slide 10).

**SLIDE 9 - 10: UNDERSTANDING THE CONTINUUM - SCENARIOS**

Tell students:

“Michelle felt left out at the party, so she took some MDMA (or molly) when it was offered.”

**Click:** experimental

“Tim drinks alcohol only on Fridays, and never when he has a soccer game the next day.”

**Click:** regular use

“Sarah missed her morning coffee today. Now she has a headache.”

**Click:** dependence

“Damon has friends who use drugs, but he’s not interested.”

**Click:** non-use

“Grace only smokes cigarettes when she’s at parties.”

**Click:** recreational

“Mateo takes double his prescribed dosage of Adderall before a test because he feels like it will help him focus more.”

**Click:** misuse

**SLIDE 7: PEOPLE WHO USE DRUGS AREN’T BAD PEOPLE**

Tell students:

“Everyone, including teens, falls somewhere on the drug-use continuum. This means that some teens might have tried drugs, be thinking about it or perhaps already struggling with or dependent on drugs.”

“Teens who use drugs can live anywhere, from big cities to small rural communities and they may be of any race, gender, religion or socio-economic class. They could be athletes, musicians, straight-A students, introverts, extroverts – anyone. You never know. This is why it’s important not to stigmatize people who use drugs as bad people. We may be judging our friends,
classmates, and siblings as immoral and evil people. This may make them too afraid or ashamed to talk to us if they need help.”

“Regardless of who you are, where you live or where you fall on the continuum, it is important to be informed so that you can keep yourself and others safe.”

**SLIDE 12: DRUG RELATED HARM**s Tell students:

“All drugs have both potential harms and benefits. However, it is the harms that tend to get the most attention.”

**Ask students:**

“Drug-related harms for teens generally break down into four big areas. Can anyone guess what they are?”

**Educator Notes:** Encourage student responses. Then, click on the slide to reveal the four areas.

**Tell students:**

“On your worksheet, there is a list of some potential harms of drug use. Review the list and try to organize them into the four major categories.”

**SLIDE 13: DRUG RELATED HARM**s Click on the slide to reveal the four areas and their bulleted examples. Have students compare their predictions to the answers.

**Physical health harms**
- Addiction
- Withdrawal symptoms
- Organ damage
- Accidental injury or death
- Transmission of disease
- Sexual assault
- Overdose death

**Academic harms**
- Suspended or expelled from school
- Removed from athletic teams or school clubs
- Denied entrance into college
- Refused scholarships and federal student loans
Social or Emotional Harms
• Make underlying depression or anxiety worse
• Cause conflicts with friends, family or teachers
• Families being split apart

Legal harms
• Pay fines
• Perform community service
• Attend mandatory classes
• Can have drivers license privileges suspended, revoked or denied
• Be arrested
• Sent to a juvenile detention center or jail

Ask students:
“Are there any more on this list you can think of?”

Tell students:
“For some teens in some communities, especially those in communities of color, the legal harms related to drugs can often be greater than the health-related harms. Teens stopped on the suspicion of drug possession or sales may end up having physical conflicts with law enforcement that could lead to serious injury or even death.”

Part 2: Harm Reduction in Practice 15 minutes

SLIDE 14: HARM REDUCTION  Tell students:
“So how can teens and other people protect themselves from the potential harms of drug use? Even if someone isn’t using drugs themselves, they may have a family member or friend who might need their help.”

“Harm reduction is a set of strategies that encourages people to make the safest and healthiest choice they can based on their circumstances.”
Ask students:
“Now look at the images from the Do Now. How could these be examples of harm reduction strategies? Did you come up with any other strategies you use in your daily life?”

Tell students:
“Although it can apply to choices like wearing a seatbelt to minimize the risk of injury in a car accident, it usually refers to alcohol and other drug use.”

SLIDE 15: HARM REDUCTION IN ACTION Tell students:
“Let’s continue testing our understanding of harm reduction. Can you tell if the teen in each scenario is practicing harm reduction, and if so, how?”

Educator Notes: Be sure to encourage student responses, and remind students of discussion norms.

Ask students:
“Situation 1: Matt paces himself by drinking one glass of water for every alcoholic beverage he drinks. Is he practicing harm reduction?”

Tell students:
“Yes – Matt is practicing two harm reduction techniques here. First, by drinking water he makes sure to stay hydrated which is important because alcohol is a diuretic substance – that means that it increases urination. Second, Matt is cutting down on the chance that he will binge drink by slowing himself down and drinking water in between alcoholic drinks.”

Ask students:
“Situation #2: Lisa is stressed out about a big test she has tomorrow. She decides to join some friends in smoking marijuana in order to relax. Is she practicing harm reduction?”

Tell students:
“No – smoking may relax Lisa now, but it may impair her thinking and memory in the short-term, making it more difficult for her to pass tomorrow’s test.”
Educator Notes: Students may bring up the idea that “if I study high, I should take the exam high.” If so, ask students to consider and discuss the potential long-term effects of this strategy on Lisa’s health, well-being, and developing body and brain.

Ask students:

“Situation #3: Maria had a few drinks at a party and plans to drink some coffee to sober up before driving home. Is she practicing harm reduction?”

Tell students:

“Trick question! – Maria thinks she’s doing something that can reduce harm, but she’s operating on false knowledge. Drinking coffee does not make you sober. So if Maria gets into her car after drinking coffee, she will still be impaired.”

SLIDE 16: HARM REDUCTION STRATEGIES Tell students:

“This is a list of 10 Harm Reduction Strategies that we will be studying and applying throughout our drug education unit. We are going to be talking about these 10 harm reduction strategies. The goal is for you to have a toolbox of skills you can use to minimize the risk or harm for yourself and others related to substance use.”

“Let’s take a closer look at these strategies that you can share with your friends to help them make safer and healthier choices about alcohol and other drugs. On your worksheet, be sure to take notes or write down any questions that you have about a specific strategy.”

SLIDE 17: ABSTINENCE Tell students:

“The safest choice when it comes to alcohol and other drugs is always to abstain – not to use. That’s always true, no matter how many times – or not! – someone has had alcohol or other drugs before.”

SLIDE 18: DEVELOP DRUG KNOWLEDGE Tell students:

“No matter what someone’s choice is about drinking alcohol or using other drugs, it’s important for everyone to know about them – their basic effects, risks, benefits, and harms. We’re calling this ‘Drug Knowledge’. When you have ‘drug knowledge’ you can help
others make safer and healthier choices about alcohol and other drugs. The upcoming lessons in the curriculum will help you develop ‘drug knowledge.’”

SLIDE 19: DOSE AND DOSAGE  Tell students:

“Now let’s talk about dose and dosage. Dose describes how much of a drug is taken at one time. It’s calculated according to how much of a drug is needed to offer the greatest benefit. This can change based on a person’s age, weight, sex, physical health and drug usage habits. Dosage describes how often a drug is taken. In order to maintain a certain level of a drug in the body, new doses of the drug have to be taken within a certain time period. The Federal Food and Drug Administration requires that most legal over-the-counter and prescription drugs come with dose and dosage instructions. This regulation helps people maximize the benefits of a drug while reducing its harms.”

Ask students:

“How could understanding dose and dosage help reduce the harms associated with illegal drugs?”

Tell students:

“Illegal drugs are not regulated, so people have to guess what a safe dose and dosage may be. This increases the potential for organ damage, overdose and death.”

SLIDE 20: START LOW AND GO SLOW  Tell students:

“One harm reduction strategy related to dose and dosage is start low and go slow – meaning use drugs at a low dose and a slow dosage; or don’t take much of any substance, and wait to see the effect before taking any more.”

SLIDE 21: CONSIDER MODERATION  Tell students:

“Remember, harm reduction encourages people to make the healthiest choice. Take smoking cigarettes. The healthiest choice is not to smoke them. But what if someone smokes already? How could that
person reduce harm? Some ways that person could reduce harm include cutting down on the number of packs smoked in a day or committing to smoking only on the weekends or at social events. They might not ever quit smoking cigarettes completely – which, again, would be the healthiest option – but they would be making healthier choices. Harm reduction recognizes that it isn’t realistic to expect all people to abstain from drug use, but it does encourage people to make the least risky choice.”

SLIDE 22: SET AND SETTING Tell students:
“One of the foundational harm reduction concepts is that of set and setting. Set stands for mindset – the state of someone’s thoughts and emotions prior to drug use. Understanding mindset is important because of the powerful effects drugs have on our minds and bodies. They can change our moods, cloud our thoughts and alter our perceptions. What someone is thinking and feeling before and during substance use can either positively or negatively affect their experience with it.”

“Setting refers to the physical and social environment where drug use happens. Is it taking place indoors or outdoors? In a home or at school? Around other people or alone? With friends or strangers? Thinking ahead about the physical and social settings where drug use will occur can reduce the chance of accident, injury or death.”

SLIDE 23: CHECK THE SUBSTANCE Tell students:
“Since most drugs are illegal and therefore not regulated, it is very difficult for an individual user to be 100% certain what’s in any given dose. Drug checking, also known as drug testing or adulterant screening, is a harm reduction service that allows users to get more information about what is in their substance.”

Ask students:
“Raise your hand if you’ve ever seen a drug checking kit like in this picture.”
Tell students:

“These are called reagent drug checking kits. They work by placing a drop of a liquid chemical on a substance, and comparing the color change to a chart of different drugs. Kits like these have limitations and are not always accurate. But generally speaking, they do provide more information so that people can avoid taking something unknown and potentially experiencing a medical emergency or overdose.”

SLIDE 24: DON’T MIX DRUGS Tell students:

“Another harm reduction strategy that we’re going to discuss has to do with mixing substances, also called polydrug use.”

Ask students:

“What are some common drugs that people mix? Why do you think this could be harmful to the body?”

Tell students:

“Raise your hand if you’ve heard the term ‘crossfading.’ This usually refers to using marijuana and alcohol at the same time. This combination is popular because alcohol increases the absorption rate of THC – the active compound in marijuana – resulting in a stronger high. But it can also cause people to feel dizzy, faint, or vomit. Most drug-related injuries and deaths are a result of substance mixing, because of how hard it is to predict how different drugs will interact with each other. There are a lot of factors to consider, including each person’s unique physiology, dose and dosage, the drug’s purity, and the drug’s effects on the brain and body.”

SLIDE 25: KNOW HOW TO RESPOND TO AN EMERGENCY Tell students:

“We’ve been talking a lot about how drug use can lead someone to end up in the hospital, or even die. This is a worst case scenario, and hopefully you’ll never be in this situation, but just in case, it’s very important to know how to recognize an
overdose, and respond. We’ll be going over this harm reduction strategy later in the unit, and talking more about Good Samaritan Laws, which protect people who call 911 seeking help in a drug-related emergency.”

SLIDE 26: KNOW DRUG POLICY  Tell students:

“The potential physical harms related to drug use are only part of the equation for people to think about if they are thinking about using drugs. The possible academic, legal and social harms should also be considered. These types of harms are frequently related to drug policies – the rules and regulations about how drugs are manufactured, sold and used, and the consequences for breaking those regulations.”

Ask students:

“Do you know this school’s drug policy?”

Tell students:

“It’s okay if you don’t know for sure right now. We’ll be talking about this later in the unit, as well as how drug policies in our community and state affect our health. It’s an important harm reduction strategy to know current policies so you can avoid the academic, legal and social harms we talked about earlier. But if your school or community has drug policies that you think hurt instead of help, you can think about what you can do to change them. The chances are high that someone you know or care about will be impacted by these policies so making sure that they are helpful benefits everyone.”

SLIDE 27: INDIRA AND THE PARTY  Tell students:

“Now we’re going to work on putting harm reduction concepts in practice. Putting harm reduction in practice is actually, at its core, about making the best possible decision for yourself. Good decision-making skills involve being able to think through what might happen as a result of certain actions, and understanding the positive and negative consequences of these actions.
“We’re going to talk through two examples to test our understanding of harm reduction.”

**Ask students:**

“Think about this scenario: Indira, a junior in high school, is going to a party where she knows alcohol and other drugs will be present. What types of things should she think about before going to the party that can help her make decisions that would reduce harm?”

**Tell students:**

“Indira should consider the consequences of choosing to use drugs versus staying abstinent. If she doesn’t want to drink alcohol or use other drugs, she should think about ways to refuse them.

“If Indira is considering taking drugs, she should think about her mood and how it will affect her usage.

“She should also consider her physical state – how much rest she’s had, how much she’s eaten – and how alcohol or other drugs might impact her. She should think about setting limits to help reduce the chance of overdose; for example, deciding to stop after a certain number of alcoholic drinks.

“Indira should also think about whether or not she wants to engage in sexual activity. If she does, she should know that when people are intoxicated, their decision-making skills are very poor, and sexual activity at this time is very risky.

“No matter what her decision about alcohol and other drug use, Indira should make sure she has a trusted friend to check in with at the party.

“Indira should make sure she has a safe way to get home from the party. She should go home with someone she trusts, either a sober
driver or a sober friend on public transportation. Thinking about all of these things in advance is part of having a mindset that reduces drug-related harms. Now, let’s consider this situation."

**Educator Notes:** Extension Activities: Students could make a poster or flyer for their friends of things to consider before going to a party, using the harm reduction strategies.

**SLIDE 28: NICK AND THE GROUP PROJECT**  
Ask students:

"Nick just finished a big group project at school. Now that it’s over, some of his group members want to celebrate by meeting up and smoking marijuana. Nick doesn’t know the people in his group well, although they seem nice enough. And he’s been to the place they are meeting before; it’s by a lake and it’s pretty isolated which will allow them to avoid parental supervision. What are some things Nick should think about?

Tell students:

"First, Nick should remember that it’s illegal for people under 21 to use marijuana – even if he lives in a state like California, Colorado or Washington where recreational marijuana is legal.

"Second, he should think about the social setting. Nick doesn’t know these teens well, so how does he know that he can trust them to look out for his well-being?

"Third, Nick should consider the physical setting. It’s isolated which may keep them from being caught. However, if something goes wrong it may be hard for the teens to get help. Also, it’s near a lake which could pose a drowning hazard to anyone with marijuana-impaired motor skills and reaction times. Lastly, they will have to drive from this location – potentially still high – in order to get home. This increases the risk of accident and of an interaction with the police."

Ask students:

"If Nick is determined to go, what is one thing he could do to reduce harm?"
Tell students:

“Nick could decide to go, but remain sober. Or, if he decides he wants to smoke marijuana, Nick could invite some friends that he can trust to stay sober to come with him. That way he’ll have someone to look out for him and a safe ride home. Never using alone and using with trustworthy people are key harm reduction strategies. Taking drugs makes people both physically and emotionally vulnerable. Using with trusted people reduces the chances of things like sexual assault and increases the chances that someone will take action to help – for example, calling 9-1-1 in the case of an overdose.

“In these examples, if Indira and Nick choose not to use alcohol or other drugs – which is the safest choice – it’s important that they still remain aware of their social settings. They can be a life-saving resource in case something goes wrong – for example, acting as the designated driver or preventing an intoxicated friend from wandering off alone. However, teens who don’t use drugs have also gotten into trouble for being in places where drugs were present, even when not using themselves.

“As you can see, thinking through all the possibilities and consequences can take some time. But with practice, you can develop the habit of weighing your options and making a decision that will lead to the safest and healthiest outcome for you and others around you. Ultimately, putting harm reduction into practice will help keep you and your friends safer.”

Exit Ticket  
5 minutes

SLIDE 29: EXIT TICKET  Tell students:

“Describe two harm reduction strategies and explain a situation(s) in which you could potentially use each to help reduce harm. If you have any questions about harm reduction strategies, add them to your exit ticket.”

Collect completed worksheet at the end of class.
Ask teens to interview their parents, guardian or another adult they trust about drug use with the following questions:

1. Do you worry about me using drugs?
2. What is your biggest concern about me and drug use?
3. What advice do you have for me about drug use?

Educator Notes: Before assigning this activity, consider creating space for teens to indicate if they do not feel comfortable or safe speaking to their parent/guardian about drug use. For these teens, consider having them look up 1-2 articles about parental views on drug use and write 1-2 paragraphs answering the question, “What part of drug use are parents most concerned about?” Consider engaging parents by sending home copies of “8 Tips for Talking to Your Teen About Alcohol and Other Drugs.”
Lesson 2: Introduction to Harm Reduction: Answer Key

Maximum point value: 100

Do Now: 6 points (3 points per question)
1. Identify the harm reduction strategies in these pictures.
   Answers: wearing a seatbelt, eating healthy food, and wearing a helmet
2. Based on the examples in the pictures, how would you define “harm reduction?”
   Answers may vary

Brainstorm: Why do teens use drugs? (3 points)
Answers may vary

1. Which is the most frequently used drug? (1 point)
   Alcohol
2. How has teen drug use changed since 1998? (1 point)
   Less drug use

Drug Use: Continuum (3 points per scenario = 18 points)

Scenario #1: Experimental. Why? (3 points)
Scenario #2: Regular use. Why? (3 points)
Scenario #3: Dependence. Why? (3 points)
Scenario #4: Non-use. Why? (3 points)
Scenario #5: Recreational. Why? (3 points)
Scenario #6: Misuse. Why? (3 points)

Examples of Drug-Related Harms (12 points)

Physical Harms
- Addiction
- Withdraw symptoms
- Organ damage
- Injury or death due to accident
- Transmission of disease
- Sexual assault
- Overdose death

Social or Emotional Harms
- Make underlying depression or anxiety worse
- Cause conflicts with friends, family or teachers
- Families being split apart

Academic Harms
- Suspended or expelled from school
- Removed from athletic teams or school clubs
- Denied entrance into college
- Refused scholarships and federal student loans

Legal Harms
- Pay fines
- Perform community service
- Attend mandatory classes
- Can have drivers license privileges suspended, revoked or denied
- Be arrested
- Sent to a juvenile detention center or jail
1. Define harm reduction. (3 points)

Harm-Reduction Strategy Notes (5 points each box = 50 total points)

Scenario #1: Indira and the Party (5 points)
Answers may vary

Scenario #2: Nick and The Group Project (5 points)
Answers may vary

Exit Ticket: (6 points)
## Lesson 2: Assessment Rubric

### Activity: Class participation

**Maximum point value:** 25

<table>
<thead>
<tr>
<th>Frequency of participation</th>
<th>20 – 25 points</th>
<th>10 - 15 points</th>
<th>5 - 10 points</th>
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<tbody>
<tr>
<td>Student initiates participation more than once (e.g., raises their hand to ask or answer questions).</td>
<td>Student initiates at least once (e.g., raises their hand to ask or answer questions).</td>
<td>Student only participates when they are addressed directly.</td>
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<th>Quality of responses</th>
<th>20 – 25 points</th>
<th>10 - 15 points</th>
<th>5 - 10 points</th>
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<tr>
<td>Student makes thoughtful and constructive comments that specifically address the topic under discussion. They demonstrate full comprehension of the lesson’s content and bring new ideas into the discussion.</td>
<td>Student makes thoughtful and constructive comments which may occasionally go off topic. They demonstrate strong, if not complete, comprehension of the lesson’s content.</td>
<td>Student makes comments that are unrelated or tangential to what is being discussed. They demonstrate a lack of comprehension of the lesson’s content and only repeats previously stated ideas.</td>
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<th>Listening skills</th>
<th>20 – 25 points</th>
<th>10 - 15 points</th>
<th>5 - 10 points</th>
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<tr>
<td>Student listens attentively to the instructor and their classmates. Their comments address and build on classmates’ responses.</td>
<td>Student is mostly attentive to the instructor. Their comments address responses made by classmates.</td>
<td>Student is inattentive. Their remarks are unrelated to what is currently being discussed.</td>
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Lesson 2: Educator Implementation Fidelity Checklist

Your Name/Position:  
School Name:  
Class Taught:  
Grade Taught:  
Number of Students:  
Date Taught:  

1. Place an X in the column that indicates how much of the lesson script you used while teaching each part of the lesson.

<table>
<thead>
<tr>
<th></th>
<th>Completely paraphrased</th>
<th>Mostly paraphrased</th>
<th>Half paraphrased; half word-for-word</th>
<th>Mostly word-for-word</th>
<th>Completely word-for-word</th>
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<td>Do Now</td>
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<td>Part 1 –</td>
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<td>Introduction to</td>
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<td>Harm Reduction</td>
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<td>and Drug-Related</td>
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<td>Harms</td>
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<td>Part 2 –</td>
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<td>Harm Reduction</td>
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<td>Exit Ticket</td>
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2. Did you deliver each part of the lesson? Circle one: YES / NO  
If NO, please name the part of the lesson you did not deliver and explain why.

3. Did students complete the worksheet “Introduction to Harm Reduction”? Circle one: YES / NO

4. Did you use any materials or activities not included in the curriculum for this lesson? Circle one: YES / NO  
If YES, please describe the materials and why you chose to add them.

Continued on back
5. Place an X in the column that indicates your level of agreement with the following statements:

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<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree or disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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</thead>
<tbody>
<tr>
<td>My students understood the lesson’s content.</td>
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<td>My students were engaged with the lesson.</td>
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<td>I found the lesson easy to implement.</td>
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<td>I had time to complete all parts of the lesson.</td>
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<td>Overall, the lesson went well.</td>
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