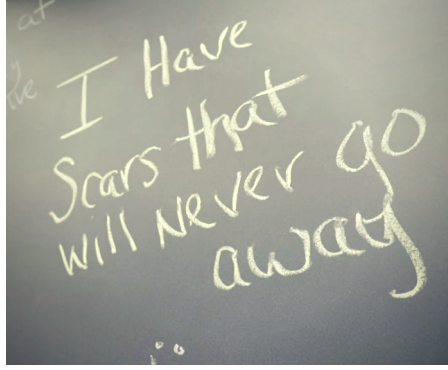




OverdoseLifeline



# This is Not About Drugs

Prescription Pain Medicine (Opioids) and Heroin  
**Prevention Education Program**



[overdoselifeline.org/education](https://overdoselifeline.org/education)

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# This is Not About Drugs

## Youth Program to Address the Opioid Crisis



This is Not About Drugs (TINAD) is the first youth-focused educational program addressing the opioid public health crisis. It is an **in-class, universal program** designed to raise awareness to substance misuse, with a special emphasis on prescription opioids. The **brief intervention** is a **complement to foundational evidence-based programs** such as Botvin Lifeskills and Too Good for Drugs.

The outcome-driven, science-based program, incorporates NIDA principles, risk and protective factors. Fits within school time constraints and aligns with the most common health curriculums.

- Universal, in-class/small group brief intervention
- Complements foundational evidence-based programs (EBP)
- Personal stories from youth affected by opioids / addiction for peer-to-peer learning
- Targets youth in grades 6 – 12, with ability to prioritize transitional years
- Pre- and post-assessment via youth worksheet activity
- Built for 45-minute time block, can expand for longer time periods
- Companion parent, community and educator programming available

### Educational Program Objectives / Outcomes

Youth will know and understand

1. The risks of prescription pain drug misuse.
2. How misuse can lead to addiction, heroin use, overdose, and death.
3. Recognize opioid overdose symptoms, availability of naloxone, and necessity to call 911.
4. Understand the disease of addiction and the impact on the individual, family, and friends.
5. Alternatives to using substances in dealing with life stresses.
6. The many ways to ask for help and available information and resources.

### Over 400 Delivery Partners in 28+ U.S. States

Currently, 28+ U.S. states, leveraging 400+ strategic community partners, are certified and deploying this critical, time-sensitive program.



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### Program Design

TINAD takes a peer-to-peer approach and makes use of personal stories to educate and influence the decisions – or choices – one makes about their own body and health.

The lesson plan and materials are designed to provide youth with the opportunity to learn through a guided and practical exercise - deepening their understanding and retention.

Program materials remain relevant to current conditions and benefit from ongoing feedback from schools / educators, youth and facilitators / presenters.

### Program Elements



#### **PRE-ASSESSMENT**

Captures the student's established perceptions and opinions on six main lesson points aligned to the program outcomes / objectives.



#### **FILM AND DISCUSSION**

The program outcomes / objectives are the blueprint of the film which finds youth in real, everyday terms sharing their personal stories. The discussion portion of the lesson allows students to express their opinion about what they just watched and the facilitators / presenters to guide the discussion.



#### **POST-ASSESSMENT**

Asks the student to re-assess the same six statements after they have benefited from the film and the discussion.



#### **AFTER THE LESSON SUPPORT**

A takeaway and website supports the student after the lesson.



#### **MEASUREMENT AND RESULTS**

The student worksheets and the "After the Lesson" educator survey data helps Overdose Lifeline and Partner Organizations track/measure the effectiveness of the lesson plan and educational materials and improve upon the program.

### Why is it important to talk to youth about opioid risks?

Unlike other substances, there is an increased risk of addiction and overdose with opioid misuse. Few youth are aware of this risk and in a YRBSS national study, 14% report use of nonprescribed pain medication. This education is critical – it's lifesaving.



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## Youth Program to Address the Opioid Crisis

### Informed Theoretical Approaches

- Social Learning Theory – behavior is shaped through modeling or observing behaviors, reinforcement of experiencing positive consequences for behavior.
- Social Development Theory – behavior change occurs when an individual gains information about the risks and benefits of certain behaviors, while forming attitudes based on that information and learn behavioral skills.

### Targeted Risk & Protective Factors

- Risk – early initiation of drug use, friends' use of substances, low perceived risks with substance use, favorable attitudes toward substance use, family history of substance use, easy availability of opioids.
- Protective – educate about the risks of rx opioid misuse, understand disease of addiction and contributing factors, encourage help-seeking behaviors, discuss healthy alternatives to alcohol and drugs in dealing with life stressors.

### Program Applied Theory

- Raising awareness of accurate and evidence formulated information about opioids, addiction and substance use encourages non-substance use norms.
- Learning from peer experience around the initiation, progression and addiction of opioids strengthens low benefit and high risk perceptions of misuse.
- Increasing awareness of role of peers, coping, family and environment initiates student pursuit of help-seeking behavior and self-efficacy.

**As reported by the CDC:** Heroin use more than doubled among young adults ages 18–25 in the past decade. Following CDC recommendations “Address the strongest risk factor for heroin addiction: addiction to prescription opioid painkillers.”

### Program Evaluation

There is not currently an evidence-based program specifically addressing youth opioid misuse. In collaboration with the Public Policy Institute (PPI) at Indiana University, ODL conducted an evaluation of the program using a quasi-experimental design with a pre-and 90-days post-test comparison of program objectives.

Findings: significant increase in understanding the risks associated with the use of nonprescribed pain pills, the dangers of using/misusing opioids one time, the relationship between prescription pain medication and heroin, and more knowledgeable about naloxone and its purpose.

View study brief and full report at [overdoselifeline.org/study](https://overdoselifeline.org/study)



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### Lesson Outline: 45 Minute Lesson Example

Fits a 45 minute classroom schedule - easily adapts to fit longer time periods

Worksheet - Pre-Assessment	Part 1: Student provides opinion on six statements - align to main learning objectives.	2 minutes
Introduction	Introduce the theme (Choice) and topic.	1 minutes
Opioid Public Health Crisis	What is occurring. What it means for the student. RX opioids and heroin association. RX opioid misuse - risk of addiction, overdose and death.	5 minutes
Understanding Addiction	Brief overview of the disease of addiction. How many affected. How age and family history increase the risks of developing this chronic disease.	4 minutes
This is (Not) About Drugs Film	Peer-to-Peer Film: Young people share personal stories of how they have been affected by opioid misuse/heroin use, addiction or overdose.	14 minutes
Opioids Effect on Brain & Central Nervous System	Opioids impact on the brain (how it adapts), tolerance, dependence, withdrawal. How one may start with other drugs and transition to heroin.	4 minutes
Opioid Overdose	How to recognize the signs of an opioid overdose What is naloxone (NARCAN) - opioid overdose reversal drug. What to do -- call 911.	4 minutes
Dealing w/ Stress / Peer Pressure / Seek Help	Why people turn to drugs. Making good choices. Healthy alternatives to dealing with stress. Encourage one to seek help/talk to someone. Available resources.	5 minutes
Worksheet - Post Assessment	Part 2: Student reassess their opinion on six statements. Capture additional measures and student insights.	3 minutes
Key Takeaways - Conclusion	Review lesson's key points, handout student take-away, encourage students to visit the "After the Lesson" website, share what they have learned.	3 minutes



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This lesson is something every school should consider to educate students about the dangers of opioids and how this epidemic is impacting individuals and communities across the country. It's a relief knowing my students have this information and are able to make better decisions regarding their personal health and well-being.

— Brebeuf Jesuit Preparatory School, Indiana

The overall quality and content of this presentation is an excellent tool to raise awareness of teens and drug use, specifically prescription drug use, misuse, and abuse. Every teenager should be educated on this topic, and this presentation is an excellent method of delivering this information.

— Convington Community High School, Indiana

After Overdose Lifeline presented in our classroom we had multiple students open up about experiences around drug culture/drug use and we were able to assist in finding students resources to assist.

— Decatur Central High School, Indiana

I learned that drugs can really mess up someone's life. More than anyone thinks in the first place, but listening to someone describe how hard it was to get through hit me in ways that are indescribable.

— Student

That practically any drug out there could really screw up your plans for life. If I want to do big things, I can't let something stupid like a little pill effect my grades, my goals, and my friendships/relationships.

— Student

If a family member is addicted, they don't not love you ... they're just in a mindset that's planted in them ... caused by the drugs and they can get better.

— Student

### Youth Worksheet Results

**Pain Pills and Heroin are the Same Type of Drug**



58% in Knowledge

**More Likely to Get Help and Talk with Someone**

**70%** Strongly Agree/Agree

**Less Likely to Misuse Pain Medicine or Use Heroin**

**80%** Strongly Agree/Agree

**The Younger Someone Starts Using Drugs/Alcohol, Increases Addiction**



21% in knowledge

**Youth Give TINAD High Marks**

**92%** Excellent/Good

**Overdose Can Happen with the 1st, 2nd, 3rd Use -- there is a Risk Everytime**



22% in knowledge

**Pain Pill Misuse is as Risky as Heroin**



39% in knowledge

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