

GUIDELINES FOR EVALUATING RESEARCH-BASED DRUG PREVENTION MATERIAL

*A major factor contributing to drug-free lives has been the dissemination of factual, updated, research-based drug prevention information. The keystone for drug prevention programs will always be knowledge of the serious health and safety risks associated with the use of mind-altering substances, and recognition that **every child is at risk to use drugs**. Documented, medical, and scientific research-based information is the cornerstone of effective drug prevention education.*

1. Check the date of publication.

If printed more than 10 years ago, the publication is probably out of date (unless it has been revised). There are exceptions some of these publications can contain information which is still valid today. Likewise, be aware that a recent publication or copyright date does not necessarily mean that the material is accurate and up-to-date.

2. Research the author's affiliations.

Authors who support drug legalization or who are associated with the drug culture do not present valid drug prevention information. Identification of the drug culture is made through studying histories and associations with some of the following: The National Organization for the Reform of Marijuana Laws (NORML), the Drug Policy Foundation, the Marijuana Policy Project, MAPS, the Criminal Justice Foundation or other pro-drug legalization organizations. Materials provided by the alcohol or tobacco industries rarely conform to acknowledged drug prevention educational standards, and often contain subtle messages that promote drug use by adolescents.

3. Make certain current, accurate information concerning the effects of drugs on the mind and body is adequately described. Typical facts that should be included (but not be limited to) are:

- The higher potency of marijuana on the market today makes it more harmful than ever.
- The 61 psychoactive cannabinoids in marijuana are fat-soluble and accumulate in cell membranes, causing many adverse biological effects.
- Alcohol and tobacco are drugs.
- Over-the-counter drugs contain risks and should be used with caution.
- Cocaine, methamphetamine, LSD, MDMA, ephedrine, and heroin are addictive and are dangerous to kids.

4. Be alert for contradictory messages. Reject materials which:

- Contain messages that discuss or illustrate how to use drugs.
- Tell young people under the age of 21 "Don't drink and drive." Instead, tell young people "Don't drink. Period!"

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(continued)

- Glamorize "wonderful" or "positive" feelings associated with drug use while minimizing or not listing harmful effects.
- Create confusion of issues. For example, the pro-drug statement that "legalization of drugs will reduce crime" appeals to young people's desire to stop violence. Materials should provide information to contradict the pro-drug argument that smoked marijuana is medicine or that marijuana hemp will save the environment.

5. *The message of school-based information must be clear and unequivocal, as mandated by Congress:*

NO UNLAWFUL USE OF ALCOHOL, TOBACCO, OR OTHER HARMFUL PSYCHOACTIVE DRUGS.

6. *Material should promote positive standards of behavior, especially for children. The message must:*

- Provide information to reinforce the person's courage to stay drug-free.
- Teach people, especially youth, to make decisions for which they are responsible and accountable.

7. *Material should focus on reasons NOT to use drugs and not focus on reasons TO use drugs.*

8. *Since drug use is a root cause of many other problems, drug education materials should focus on drug prevention and not be diluted by addressing resulting problems such as violence, car crashes, teen sex, school problems, etc.*

9. *"Mentoring programs," "alternative activities" and "self-esteem programs" have not proven to be very effective at preventing drug use by adolescents.*

10. *No single program can solve the drug problem. Solutions must be comprehensive, and all segments of society that influence children must support and enforce a clear, consist "no-use" message regarding children and drugs. Media, law enforcement, businesses, etc must support schools and parents.*

11. *When arranging speakers to talk about drug prevention to young children:*

- DO NOT USE recovering addicts or people who talk about former use—it is too easy for children to think that drugs "can't be so bad, after all, this person did them and survived, and is even famous".
- Make certain that presentations are age-appropriate and sensitive to cultural and ethnic differences.

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(continued)

12. When evaluating drug prevention materials, beware of "warning flag" phrases:

Experimental use ~ Drug users do not experiment with drugs as a scientist experiments with substances in the laboratory.

Recreational use ~ The word "recreation" means doing something healthy. Using drugs is NOT an acceptable form of recreation.

Social use ~ Drugs are anti-social and destroy families, friendships, and social interaction.

"Soft" drugs ~ No harmful, illegal psychoactive drug is "soft" on the body or mind.

Mood-altering drug ~ The implication is that only temporary feelings are involved when, in fact, what causes these moods are biological changes in the brain. The term should be "mind-altering."

Substance abuse ~ This term implies that USE is okay but ABUSE should be avoided. Any use of an illegal, harmful psychoactive drug IS abuse.

Controlled use ~ There is no way to control the use of addictive drugs by adolescents. What happens if the child likes the effect, the high? Studies show that the earlier a child uses any drug, the more trouble drugs will cause in his/her life.

Lumping together unlike substances ~ A common ploy used by those who profit from sales of alcohol, tobacco or other drugs to young people is to compare medications, sugar, aspirin, or chocolate with illegal mind-altering drugs. There is a vast difference, and this approach minimizes the difference between legal and illegal substances and gives a message that dangerous, psychoactive drugs have a benign quality.

"There are no good or bad drugs, just improper use" ~ This expression is found in pro-drug literature, which confuses the reader and minimizes the distinct differences among substances. Clarification is needed to differentiate between prescription medicines and illicit drugs.

"It's your choice" ~ "Now that you know the facts, it's your choice whether or not to use illegal drugs." In what other area do we teach our children, "It's your choice to break the law"? Decisions that break the law are unacceptable. Everyone should make decisions for which they are responsible and accountable.

"Scare tactics" ~ Scientific research results are NOT scare tactics. Facts are facts. Carefully interpret statistics. Commonly used percentages can be misleading; i.e.: 50% of 2 is vastly different from 50% of 1000.

"Individual rights" ~ Legal rights and freedoms do NOT pertain to dangerous, ILLEGAL activity.

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(continued)

"What little we know" or "Little is known about marijuana" ~ Since 1965, over 12,500 scientific research papers on marijuana have been published and are listed in *An Annotated Bibliography of Marijuana, Volumes I & II and supplements*, available from the University of Mississippi Research Institute of Pharmaceutical Sciences. All reports state that marijuana is harmful to health. Always check the affiliations and sponsors of research since the alcohol and tobacco industries as well as the drug culture individuals and organizations often fund their own research, supporting their own goals.

"Responsible use" ~ The use of illegal psychoactive drugs is irresponsible, harmful to health and NEVER responsible. Judgments and perceptions are impaired when using any psychoactive drug. After using a psychoactive substance, one cannot make "responsible" decisions.

"Drugs and alcohol" ~ This term ignores the fact that alcohol is a drug. Both alcohol and tobacco are illegal and harmful to growing adolescent bodies, so the standardized prevention term is "Alcohol, tobacco or other drugs."

"Accidents" ~ Motor vehicle, boating, or other crashes and trauma related to the use of alcohol or other drugs are not accidents. They are preventable and predictable.

"Harm reduction" ~ The drug culture promotes this term which accepts drug use as inevitable; therefore, society should try to control use or reduce the harm caused by drug use, not prevent drug use.

References: Committees of Correspondence, Guidelines for Evaluating Drug Prevention Materials, Danvers, MA, 1990; Melear Multi-media, Inc., Guidelines for Evaluating Visual Resources, Marietta, GA; Texans' War on Drug, Drug Use Prevention Terminology; Lake County Prevention Services/In Touch, Prevention Speaker Guidelines; U.S. Dept. of Education, What Works: Schools Without Drugs, 1989; U.S. Dept. of Health, Human Services, Prevention Plus II, 1989; Natl. Clearinghouse for Alcohol and Drug Info, "Style Sheet on alcohol and other Drug Terminology"; Campuses Without Drugs, Recommended Reading List, June, 1989; Tex. War on Drugs, Guidelines for Evaluating Texts/Curriculum; Region 6 Behavior Health Administration, "REGION VI GUIDELINES FOR THE INFORMATION DISSEMINATION STRATEGY for primary Drug Prevention", 1997.