RIGHT DECISIONS

RD RN

BE NICOTINE FREE

RIGHT NOW

Youth Nicotine Prevention Program

Overview Booklet for Grades 5–9

The middle school years are a time of change for adolescents. They are exploring new interests, developing their own identities, and relying more on friends and peers than parents for ideas, affirmations, and approval. Equipping students with life skills they can carry into adulthood is one of the best ways you as an educator can help them grow. The materials you'll find here have been developed to help you empower your students to make decisions that will positively impact their lives and their health. And, one of the decisions you can help your students make is to be tobacco and nicotine free.

The goal of the Right Decisions Right Now (RDRN): Be Nicotine Free educational program is to help prevent young people from using tobacco and nicotine products (cigarettes, vapes, smokeless tobacco, nicotine pouches and other nicotine products). Developed by Lifetime Learning Systems, Inc.; updated and adapted to a digital format by BKFK; references and footnotes updated by Young Minds Inspired (YMI). **RDRN: Be Nicotine Free** is an evidence-based program that was tested in middle – and junior-high schools in 2006 with students in grades 5 through 9, followed by a replication study conducted in 2007. To ensure that the information presented in RDRN: Be Nicotine Free is up-to-date, all sources and citations included in the material have been vetted for this 2024 edition.

In 2024, the program was updated and reviewed to ensure the content reflects evolving trends in youth tobacco and nicotine use. Youth smoking rates among middle and high school students have declined over the past decade, but e-cigarette use is on the rise[1]. RDRN is funded by R.J. Reynolds Tobacco Company because it believes minors should never use tobacco or nicotine products, and adults who currently use, or have used tobacco or nicotine products in the past, should not start.

A dynamic source that continues to update its material and provide a valuable reference is NIDA for Teens. Tobacco-specific information can be found at **https://teens.drugabuse.gov/drug-facts/tobacco nicotine-e-cigarettes.**

Youth should not smoke, vape or use any nicotine products. The reasons are quite clear:

- The health consequences are well known and well documented through research by the Centers for Disease Control and Prevention (CDC) and the U.S. Surgeon General.

- It is illegal to sell tobacco or nicotine products to minors in every state, and in many states it is illegal for minors to possess tobacco or nicotine products.

Children and youth can be swayed negatively by their peers and can lack the skills they need when it comes to making the decision to be nicotine free. Educators, parents, and others who are most influential in the lives of children and youth need to talk about tobacco and nicotine prevention, the health consequences of their use, the factors that contribute to experimenting with and using such products, and ways to avoid use. This program provides a well-researched, systematic way to have that important, and continuing, dialogue. With your guidance and support and the lessons in this program, your students will be better informed and empowered to be tobacco and nicotine free.

[1] https://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/trends-in-tobacco-use-among-youth.html

WHAT YOU'LL WILL FIND IN THIS PROGRAM

This Overview Booklet, which contains:

Three instructional booklets, each consisting of a teacher's guide, reproducible activities, and a unit quiz for the following grades:

Grades 5 and 6 Grade 7 Grades 8 and 9

Wall posters

Nicotine: Myth or Reality?
Look what tobacco will do. (images of health consequences of tobacco use)
How to Say "No" (refusal skills)

A reproducible brochure for parents and guardians

INTENDED AUDIENCE

This program has been developed for students in grades 5 through 9.

HOW TO USE THE PROGRAM

Right Decisions Right Now: Be Nicotine Free includes three booklets with a teacher's guide, activities, and a reproducible quiz for grades 5 and 6 (combined), grade 7, and grades 8 and 9 (combined). In order to maximize use of the materials, Lifetime Learning recommends the following approach:

Grades 5 & 6

If your school has both 5th and 6th grade students, use the activities and lessons found in the corresponding booklet beginning with 5th grade, and again in 6th. According to the 2023 National Youth Tobacco Survey, about 2.8 million youth use any kind of tobacco product. Tobacco use increased among middle schoolers from 4.5% in 2022 to 6.6% in 2023, with a majority using e-cigarettes or vapes.[2] And, since this research also indicates that 6th grade, or age 11, is the beginning of the age range when children are most likely to try smoking for the first time, 6th grade students should greatly benefit by reviewing the lessons. Sixth graders will also bring new experiences to the table, and they may be exposed to more young people who have tried or use tobacco products.

Grades 7

The booklet for grade 7 should be used with 7th grade students in its entirety.

Grades 8 & 9

There is one booklet designed for grades 8 and 9 that has nine activities followed by three "Support Lessons." If your school ends at 8th grade, complete the first nine lessons with your students, and then supplement the unit by implementing the "Support Lessons" later in the year to reinforce students' understanding of the material. Likewise, if your 9th grade students did not participate in the program in the 8th grade, complete all of the lessons in the booklet with them as outlined above.

Ninth grade is a critical transition year as students are about to enter high school. According to the CDC, tobacco use increases in high school.[3] Therefore, 9th graders who complete the first nine lessons of the program in 8th grade, should be taught the "Support Lessons" to reinforce the information they learned previously. Also, reinforcing life skills before students enter high school is intended to encourage them to make the right decisions and be tobacco and nicotine free.

There is a survey about tobacco and nicotine for each grade, which students should take to launch the unit. This will enable them to assess their thoughts about and experience with tobacco or nicotine (if any), and will provide you with an understanding of their perceptions.

The remaining activities have been organized in a specific sequence to provide students with factual information about tobacco and nicotine that they can reference when completing the subsequent lessons—enabling them to make more informed decisions based on facts.

A reproducible quiz at the end of each booklet will help you assess your students' understanding of the material presented.

To get optimum results from this program and to effectively work towards the goal of keeping adolescents nicotine free, all of the activities in the unit should be presented and completed with your students in the order in which they are presented.

- To provide middle school educators with an evidence based youth nicotine prevention and life skills program

- To deliver health and life skills lessons in a multi-faceted framework

- To educate students about the health consequences of tobacco and nicotine use and to provide statistics and facts about tobacco and nicotine use among young people

- To equip students with decision-making and coping skills to help build their self-esteem and encourage them to make informed choices

- To explain and help students examine the difference between peer pressure and peer influence, and the desire for peer acceptance

- To help students develop and practice assertive refusal skills

- To empower students to see themselves as responsible individuals who can make the right decisions for themselves

- To offer parents and guardians information about preventing tobacco and nicotine use among adolescents, and provide guidelines for communicating with their children about not using tobacco and nicotine and promoting positive decision-making skills

PROGRAM OBJECTIVES

This program was created with contributions from a group of experts, including:

Dr. Charles H. Flatter – Professor of Human Development and Director of the Institute for ChildStudy, Maryland

Dr. Cassandra Cook, PhD – Clinical Psychologist, Private Practice, New York City

Dr. Richard Kolbell, PhD, ABPP (American Board of Professional Psychology) – Clinical and Forensic Neuropsychologist, Oregon

Erik Kolbell, LSW – Licensed Psychotherapist, New York City

WHY TEACHING NICOTINE PREVENTION IN MIDDLE SCHOOL IS IMPORTANT

Why is it important to integrate nicotine prevention lessons into your curriculum? The answer is simple: because cigarette smoking is the leading preventable cause of death in the U.S.[4] Educating young people is the first step to preventing the onset of tobacco and nicotine use in youth. By providing them with evidence- based facts related to the health consequences of tobacco and nicotine use, you can teach them how to make good decisions that will impact their future.

Tobacco and nicotine use is primarily started and established during adolescence. Nearly 9 out of 10 adults who smoke started by age 18.[7] Yet at the same time, the CDC reports that "many children and adolescents do not understand the nature of tobacco addiction and are unaware of, or underestimate, the important health consequences of tobacco use."[5] Therefore, it is important to educate students about these topics. In addition, teaching adolescents skills that help them build self-esteem, develop useful decision-making strategies, and form functional refusal techniques can help them make healthy decisions. This includes the decision not to succumb to peer pressure or the influence of other sources and to be tobacco and nicotine free.

The Right Decisions, Right Now: Be Nicotine Free youth nicotine prevention program has materials for teachers and parents, and information and activities for students including:

- Instruction about the negative physiological (health) and social consequences of tobacco and nicotine use.
- Lessons on refusal skills; and lessons to develop students' skills in assertiveness, goal setting, problem solving, and their abilities to resist pressure from peers to use tobacco and nicotine.
- Information to help students understand that most adolescents don't use tobacco or nicotine and why some young people start using tobacco or nicotine; and activities to help them find more positive ways to meet their goals.

The content and components were chosen based on research on youth tobacco and nicotine prevention programs and a formal research testing of the materials with teachers and students. A list of recommendations for school tobacco prevention programs from the CDC can be found in "Guidelines for School Health Programs to Prevent Tobacco Use and Addiction." See **www.cdc.gov/mmwr/PDF/RR/ RR4302.pdf** .

As the research on adolescents indicates, some reasons young people may abstain from using tobacco include:[7, 8, 9]

- They understand the short-term health consequences.
- Their friends don't use tobacco or nicotine.
- They know how to say "no" to peer pressure and peer influence.

- They know their parents disapprove of their using tobacco or nicotine.
- They want to be tobacco and nicotine free.

Reinforcing these concepts will support your tobacco and nicotine prevention program.

In contrast, research also indicates that low self-esteem, the inability to resist peer offers of tobacco and nicotine products, and the perception that using it will help them bond with peers are factors that influence a young person's decision to use tobacco or nicotine.[8] Therefore, equipping young people with skills that address these areas is important—they're also skills students can apply to other risk behaviors. Additional information about tobacco and nicotine use can be found in the next section.

In contrast, research also indicates that low self-esteem, the inability to resist peer offers of tobacco or nicotine products, and the perception that using it will help them bond with peers are factors that influence a young person's decision to use tobacco or nicotine. Therefore, equipping young people with skills that address these areas is important—they're also skills students can apply to other risk behaviors. Additional information about tobacco and nicotine use can be found in the next section.

This program includes lessons and activities for each of the middle school grades. As students grow and develop during this time period, their needs change. This program addresses those needs and accommodates students' cognitive abilities. In addition, posters are included to enhance students' learning potential as a way to accomplish the overall goal to prevent tobacco and nicotine use in youth now and in the future.

STAGES AND PHASES OF CIGARETTE SMOKING AND VAPING

Part of the maturation process includes making independent decisions, including those related to risk behaviors like nicotine use. Most students don't use tobacco or nicotine products. Some never start; others experiment or try it, and then quit. However, a percentage of young people become regular users.

Research studies have outlined the stages and phases adolescents go through from experimenting with cigarette smoking or vaping to becoming regular users. For each stage, there are common factors that influence a young person's decision to use nicotine products or be nicotine free. According to the CDC, the progression occurs in the following stages:[9]

- The preparatory stage, when a person's knowledge, beliefs, and expectations about tobacco or nicotine use are formed.

- The initial/trying stage, when a person tries the first few cigarettes/vapes.

- The experimentation stage, which is a period of repeat, irregular use that may occur only in specific situations over a variable time.

- Regular tobacco or nicotine use, when a routine pattern of use has developed. For youth, this may mean using tobacco or nicotine every weekend or at certain times of the day.

- Nicotine addiction, which is regular use, usually daily, with an internally regulated need for nicotine.

To help you implement this youth nicotine prevention program, we have included a chart compiling research from various studies on the progression of cigarette smoking/ vaping uptake and factors that influence adolescents at each stage, including the decision to abstain or stop experimentation. For the purposes of the chart, we have combined the initial/trying and experimentation stages.

This information can help you reinforce the positive factors that influence students to be tobacco and nicotine free—such as parental support and pride in being tobacco and nicotine free. Likewise, you can use the information about the factors that may influence young people to use nicotine products to help students better understand these issues. While the majority of research is on cigarette smoking, experts suggest that the same prevention programming can be applied to other nicotine products such as vapes and smokeless tobacco.[10]

As you review the chart, keep in mind that every person is different and that most adolescents abstain from using tobacco and nicotine products.

DID YOU KNOW

The vast majority of adolescents do not use tobacco or nicotine. That's something that your students need to know. Young people tend to overestimate the prevalence of tobacco and nicotine use among their peers and adults.[8]

According to the Centers for Disease Control and Prevention (CDC):

- About 1% of middle school students in the U.S. are current cigarette smokers. In high school that number doubles to 2%.[7] (Current is defined as having used tobacco on at least one day in the 30 days preceding the survey.)

- About 5% of middle school students are current users of electronic cigarettes. In high school, that number has decreased to 10%.[7]

- Less than 1% of middle school students use smokeless tobacco, and approximately 1.5% of high schoolers.[7]

- Most teenagers who smoke want to stop.[8]

- Quitting is not easy for adolescents because most young people who smoke regularly are addicted to nicotine.[8]

INFORMATION ON TOBACCO AND NICOTINE USE

PREPARATORY STAGE

WHY ADOLESCENTS THINK ABOUT TRYING TOBACCO OR NICOTINE PRODUCTS.

Influential factors

- Advertising/media—perception of smokers/vapers
- Availability of tobacco and nicotine products
- Low self-esteem

WHY EXPERIMENT?

Influential factors

- Parents smoke or use nicotine products
- Friends and siblings smoke—a child's chances of using tobacco or nicotine increase as the number of friends who use tobacco or nicotine increases
- Lower parental monitoring
- Uninvolved with school
- Low academic achievement
- Can't resist pressure to use tobacco or nicotine—more likely to be internal, not external, pressure
- Low self-esteem
- Connect use to social acceptance
- Underestimate health risks
- Overestimate prevalence of smoking/vaping
- Lack commitment not to use nicotine in any form

How and where does experimenting happen?

- With small group of friends, usually same sex—not alone
- Early afternoon—after school
- Indoors
- Often not coerced—kids tend to request a cigarette (may feel internal pressure)
- Usually random—not planned

WHY KEEP GOING?

Influential factors

- Feel health consequences won't affect them
- Perceive psychological benefits of smoking/vaping— may think it reduces stress, helps them relax
- "Positive" perception of the social image of smoking or using nicotine (think it looks cool)
- Lack commitment not to smoke or use nicotine
- Low school performance
- Friends/siblings use nicotine products
- Weaker family ties
- Low self-esteem
- Peer acceptance
- Rebellious
- Parents smoke or use nicotine products

WHY ABSTAIN?

Influential factors

- Family use—family members smoke or use nicotine
- Peer use—friends smoke, use nicotine or want to try

ABSTINENCE

WHY STOP?

Influential factors

- Fear of becoming addicted to nicotine and having difficulty quitting
- Want to avoid physical consequences
- Pride in being a non-smoker/vaper/user

EXPERIMENTATION STAGE

REGULAR NICOTINE USE STAGE

CESSATION

WHY STOP?

Influential factors

- Fear of becoming addicted to nicotine and having difficulty quitting
- Want to avoid physical consequences

ADDICTION STAGE

WHY KEEP GOING?

Influential factors

- Becomes difficult to stop
- Enjoy using nicotine products
- Think they can stop when they want

IMPLEMENTING THE RIGHT DECISIONS, RIGHT NOW PROGRAM

Before starting the unit, tell your students that they are going to take part in a youth nicotine prevention program that will provide them with facts about the health consequences of tobacco and nicotine use. It also includes lessons on decision making, self-esteem, and peer relationships. Let students know that the activities represent an opportunity for them to think about and discuss issues and questions that concern them. Encourage students to speak honestly, ask questions, and not to give answers they think you want to hear.

When presenting the program, use techniques you feel will provide a comfort level for students to have a genuine discussion and complete the activities in an honest and serious way. If you find that some students are hesitant or not participating, encourage them to try, but don't force the issue. It is important for students to know that you respect their privacy. For this reason, the surveys should be completed independently and anonymously.

Students should feel free to volunteer answers to the survey about their experience with tobacco and nicotine only if they are comfortable. Once you have completed all activities, please dispose of all student surveys. Likewise, remind students that you expect them to be respectful of their classmates when they are speaking and when they are working in small groups. For example, tell students that you don't want them to use names of other people if they are relaying stories. Also, tell them the personal stories students discuss should not be shared outside the classroom in order to protect people's privacy.

Students may have parents, guardians, or caregivers who use tobacco or nicotine products. In order to facilitate discussion about tobacco and nicotine, approach it as a health issue, not a moral issue. This advice was given to us by parents in focus groups who expressed concern about this issue. They want schools to focus on teaching students the facts when encouraging the healthy choice to be tobacco and nicotine free.

ABOUT THE TEACHER'S GUIDES AND STUDENT ACTIVITIES

The activities are organized by grade level to best suit the students' developmental abilities and the issues each group experiences. The lessons also outline the tobacco/nicotine stages that are relevant to the group. For example, the lessons for the younger students address the preparatory and experimentation stages during which students might be thinking about trying tobacco or nicotine; whereas the lessons for the older students address escalation and addiction, as pressures they face change and may mount, and the prevalence of friends or peers who use tobacco or nicotine may become greater.

Within each booklet, the activities are divided into the following three categories:

- **Keeping Healthy Section** – This section includes a survey to determine students' perceptions about tobacco and nicotine their understanding of its effects and the health consequences, and their experience with it (if any). In addition, it includes activities that address the health risks and consequences associated with tobacco and nicotine use.

- **How Friends Fit In Section (Interpersonal Skills)** - In this section, students explore their relationships with others, and how peer pressure, influence, and acceptance affect their lives. There are also activities on refusal skills to help equip students with strategies for saying "no."

- **How I Am Section (Intrapersonal Skills)**– This section has students take a look at how they act, feel, and think. The activities focus on self-esteem, social image, decision making skills, and personal values (what is important to each student). The lessons are designed to provide students with a chance to practice decision making and to empower them to make healthy decisions. Tips for understanding and dealing with stress and conflict are integrated into the activities for Grade 8.

- **Unit Quiz** –A quiz follows the activities in each booklet to help you assess your students' understanding of the content presented. Each quiz contains multiple-choice and short-answer questions.

LESSON TIMEFRAME CHART

The following chart outlines the number of lessons per category and a suggested timeframe for implementing them with each grade.

GRADE LEVEL/ TOPIC	GRADES 5&6	GRADE 7	GRADES 8&9	TOTAL
Health	(3) 25-min. lessons (1) 60-min. support lesson	(2) 25-min. lessons (1) 30-min. lesson	(2) 25-min. lessons (1) 20-min. lesson (1) 20-min. support lesson	11 health lessons
Interpersonal skills	(2) 30-min. lessons (2) Refusal skills lessons @ 20 min. each	(1) 30-min. lesson (3) 25-min. lessons (1) Refusal skills lesson @ 40 min.	(1) 60-min. lesson (1) Refusal skills lesson @ 30 min.	11 interpersonal lessons including 4 on refusal skills
Intrapersonal skills	(2) 30-min. lessons (1) 25-min. lesson	(1) 25-min. lesson (1) 30-min. lesson	(3) 20-min. lessons (1) 30-min. lesson (1) 20-min. support lesson (1) 30-min. support lesson	11 intrapersonal lessons
Unit quiz	(1) 25-min. lesson	(1) 25-min. lesson	(1) 25-min. lesson	3 unit quizzes

EDUCATION STANDARDS ADDRESSED IN THE PROGRAM

Right Decisions, Right Now: Be Nicotine Free meets Common Core State Standards and standards set forth by Mid Continent Research for Education and Learning (McREL). McREL, a nonprofit organization, publishes Content Knowledge: A Compendium of Standards and Benchmarks for K–12 Education, which synthesizes standards in all subject areas. These standards, along with a more comprehensive list including all of the Common Core State Standards, can be found at **www.mcrel.org** .

The activities and lessons in this program will help you to meet the following selected education standards.

Life Skills Grades K–12

Self-Regulation
Standard 3. Considers risks

1. Weighs risks in making decisions and solving problems.

Standard 4. Demonstrates perseverance

1. Demonstrates perseverance relative to personal goals.

Standard 5. Maintains a healthy self-concept

1. Has confidence in one's own abilities, including the ability to succeed.

5. Uses positive affirmations and self-talk to improve sense of self, build confidence, and complete difficult tasks.

Health Grades 6–8

Standard 5. Knows essential concepts and practices concerning injury prevention and safety

4. Knows the various possible causes of conflict among youth in schools and communities, and strategies to manage conflict.

5. Knows how refusal and negotiation skills can be used to enhance health.

Standard 7. Knows how to maintain and promote personal health

3. Knows strategies and skills that are used to attain personal health goals (e.g., maintaining an exercise program, making healthy food choices).

4. Understands how changing information, abilities, priorities, and responsibilities influence personal health goals.

5. Knows how health is influenced by the interaction of body systems.

Standard 9. Understands aspects of substance use and abuse

1. Knows conditions that may put people at higher risk for substance abuse problems (e.g., genetic inheritability, substance abuse in family, low frustration tolerance).

2. Knows factors involved in the development of a drug dependency and the early, observable signs and symptoms (e.g., tolerance level, drug-seeking behavior, loss of control, denial).

3. Knows the short- and long-term consequences of the use of alcohol, tobacco, nicotine and other drugs (e.g., physical consequences such as shortness of breath, cirrhosis, lung cancer, emphysema; psychological consequences such as low self-esteem, paranoia, depression, apathy; social consequences such as crime, domestic violence, loss of friends).

4. Knows public policy approaches to substance abuse control and prevention (e.g., pricing and taxation, warning labels, regulation of advertising, restriction of alcohol consumption at sporting events).

5. Knows community resources that are available to assist people with alcohol, tobacco, nicotine and other drug problems.

Health Grades 6–8

Standard 5. Knows essential concepts and practices concerning injury prevention and safety

3. Knows strategies for solving interpersonal conflicts without harming self or others.

4. Knows how refusal, negotiation, and collaboration skills can be used to avoid potentially harmful situations.

Standard 7. Knows how to maintain and promote personal health

2. Understands the short- and long-term consequences of safe, risky, and harmful behaviors.

4. Understands the impact of personal health behaviors on the functioning of body systems.

Standard 9. Understands aspects of substance use and abuse

2. Knows how the abuse of alcohol, tobacco, nicotine and other drugs often plays a role in dangerous behavior and can have adverse consequences on the community (e.g., house fires, motor vehicle crashes, domestic violence, date rape, transmission of diseases through needle sharing or sexual activity)

3. Understands that alcohol, tobacco, nicotine and other drug dependencies are treatable diseases/conditions

NICOTINE – FREE PLEDGES

Visit **www.rightdecisionsrightnow.com/resource/ student-pledge-pdf/** to download and distribute the nicotine-free pledge to your students after completing the program, or copy and distribute the reproducible pledge found in the back of this booklet and each grade booklet. Students are able to write their own reasons why they want to be tobacco and nicotine free, enabling them to have ownership of the pledge. Congratulate your students for taking the pledge to remain nicotine free.

There is also a downloadable PDF and reproducible version of the pledge for parents and guardians that encourages them to talk to their children about tobacco/nicotine and support their children in being tobacco and nicotine free. Visit: **www.rightdecisionsrightnow.com/resource/parent pledge-pdf** to download the parent pledge, and send this pledge home with students at the end of the unit.

THE POSTERS

There are several posters to complement the program. and can be used as follows:

ADDITIONAL MATERIALS: REPRODUCIBLE BROCHURE FOR PARENTS AND GUARDIANS

Research indicates that adolescents want to talk with their parents about troubling topics and troublesome situations. It further shows that parents may exert a positive influence by discussing health matters with their children.[8] Knowing that their parents disapprove of them smoking or using any nicotine product including vapes, smokeless tobacco or nicotine pouches. can influence a child's decision to abstain.[8]

To encourage families to talk about nicotine use and how it can affect a person's life, we have included materials for parents and guardians. These materials inform families about this program and provide them with tips for communicating with their children—contributing to the program's comprehensive approach to help youth remain nicotine free.

Copy and distribute the guide to parents and guardians when you start the unit so that they are aware that their children are participating in a nicotine prevention program. Let parents and guardians know that they are integral to the success of the program and encourage them to speak with their children about tobacco and nicotine prevention.

To distribute the guide to parents and guardians, you might copy it and:

- Send it home with students at the start of the unit.

- Make it available during parent-teacher conferences or an open house event.

- Include it with your school newsletter.

- Display copies in the guidance counselor's office for families to take.

According to the CDC, tobacco use by adolescents is associated with other health risk behaviors, such as use of alcohol or other drugs. Therefore, it is in everyone's best interest to work together to prevent the onset of tobacco and nicotine use in adolescents and create a healthy environment in which students can learn and grow.

SURVEY DATA COLLECTION

Research indicates that adolescents want to talk with their parents about troubling topics and troublesome situations. It further shows that parents may exert a positive influence by discussing health matters with their children. Knowing that their parents disapprove of them smoking or using any nicotine product can influence a child's decision to abstain.

SUPPLEMENTAL VIDEO AVAILABLE ONLINE

Supplemental videos and accompanying teacher's guides are available at **www.rightdecisionsrightnow.com** . Three video segments related to health, interpersonal skills, and intrapersonal skills have been created for each of the grade booklets. Suggestions regarding when to incorporate the videos into your lessons are included in the individual lesson guidelines. Look for the video icons throughout the booklets.
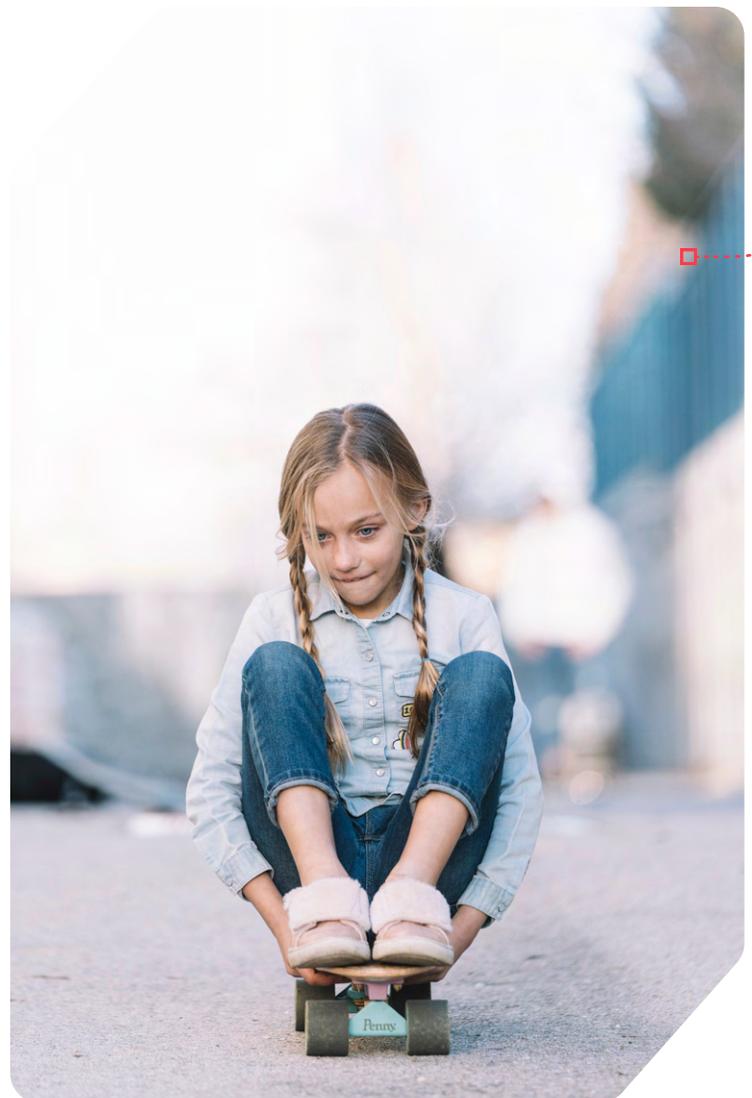
INFORMATION ON THE DECISION–MAKING PROCESS, PEER PRESSURE, PEER INFLUENCE, AND PEERACCEPTANCE

The topics of decision making, peer pressure, peer influence, and peer acceptance are integrated into the activities for all the grades. Share the following information with your students when the topics appear in the activities.

DECISION–MAKING PROCESS

In this program, the decision-making process is described as a six-step process:

1. **Situation:** Why do you need to make a decision?
2. **Goals:** What do you want to happen?
3. **Choices:** What are your options or the alternatives?
4. **Consequences:** What could happen?
5. **Decision:** What will you do?
6. **Think About It:** Did you make the right decision? How did you know?

When addressing this process with your students, it is important to point out the following:

■ We make lots of decisions every day—some are more complex than others. We don't necessarily go through each step for minor decisions, but for serious or complex decisions, it is important to cover all of the steps. For example, when deciding what socks to wear, we may not consider all of our options, but instead, just pick the first pair we find in the drawer. The only consequence we might consider is whether they match our outfit or not. Deciding whether or not to join the soccer team is more serious. We need to consider our goals, options, and the consequences, such as the time commitment and being part of a team.

■ Before making a decision, we need to know the facts and what's important to us, or what we want to happen.

■ We don't always go through these six steps in order. We might go back and forth between goals, choices, and consequences before reaching a final decision.

■ Learning decision-making skills means learning to accept the consequences. Sometimes there are negative consequences even when we think about our options carefully and make the best decision for ourselves.

After presenting the steps, have a class discussion to help you evaluate your students' understanding of the information. Ask students:

■ What kind of decisions do you make every day?

■ What kinds of things would you classify as complex decisions?

■ What does the word "goal" mean to you? (Explain to students that goals are things we want to do or accomplish.

They might be short-term, like deciding to study for two hours for tomorrow's science test. Or, they might be longterm, like playing soccer with your friends once a week so you can get better and try out for the soccer team.)

■ Do you think goals are important to consider when making decisions?

■ How do you figure out your choices or options when you have to make a decision?

■ Do you ask anyone for advice when you have to make a big decision? If so, who do you tend to turn to?

■ Who or what influences your decisions?

■ Which would you say influences your decisions most: your friends, your family, or your goals and what's important to you? (Younger children might feel that their parents are strong influences on their decisions, while older students might feel that they are more influenced by their friends.)

■ What are some things that are important to you?

■ Do you think honesty, respect, compassion, and responsibility are important?

■ Do you think these values influence your decisions?

■ Do you have a role model or a mentor? (Let students know that having a role model or mentor can be a positive influence—these people can help students overcome self-doubt or other pressures.)

■ Do you think about the consequences of your choices before you make decisions? Why or why not?

■ Why do you think it would be helpful to consider the consequences before making decisions?

■ Once you make a decision, do you go back and think about whether or not you did the right thing?

PEER PRESSURE, PEER INFLUENCE, AND PEER ACCEPTANCE

During adolescence, a child's friends are very influential in both positive and negative ways. As they make more and more decisions for themselves, adolescents need to recognize and understand how their friends, other people, or outside forces influence them both positively and negatively. Adolescents should also be aware of how these forces impact their personal decisions so that they are able to foster positive influences, and avoid negative influences that prompt them to make decisions they will regret later.

In this program, we differentiate between peer pressure and peer influence. Peer pressure is characterized by overt pressure, such as words or gestures.

While the two terms are generally interchangeable, we have separated them to help students recognize the difference between external influences and internal pressures. Ask your students:

What does the word peer mean? What is the difference between peer pressure, peer influence, and peer acceptance?
Peer influence is internal pressure a person puts on himself or herself without any overt pressure from peers.

Explain to your students:

■ **Peer**
According to Merriam-Webster online, a peer is "one that is of equal standing with another; one belonging to the same societal group especially based on age, grade, or status." For adults, a peer could be someone they work with. For you, it might be a friend, someone in your class, your grade, or your school. The word "friend" is often considered a synonym for peer.

■ **Peer pressure**
Peer pressure is obvious and tends to involve teasing, taunting, challenging, or encouraging others. Friends pressure their peers with words and actions to entice them to do things that could be positive or negative. As a result, the people being pressured might do or say something that they don't want to. Or, they might do something that they know is wrong just to avoid the teasing and taunting. Likewise, people might do something good for themselves because their friends prompt them. For example, you might try out for the school musical because your friends continually tell you that you have a great voice and should be in the play. Keep in mind that peer pressure isn't always verbal. Purposely excluding someone from a group or a friendship can also produce pressure. People who succumb to peer pressure do things because their friends prompt them.

■ **Peer influence**
Peer influence is less obvious than peer pressure. It happens when people act a certain way or say things because they assume they have to do so in order to be accepted, to be liked, or to maintain friendships. People then put pressure on themselves because of these assumptions.

This internal pressure causes people to make decisions they believe will help them "fit in" or be like their friends. Peer influence can affect the way people act and talk. It can also affect their style, taste in clothes and music, and what they consider fun to do.
Peer influence occurs when people do things according to the standards of their friends.

■ **Peer acceptance**

Peer acceptance is the desire to feel "accepted," liked, or included by others. Someone who gives in to peer pressure or peer influence wants to be accepted by friends or peers, or feel like he/she fits in.

As you discuss these forces that play an enormous role in the lives of teens, remind them of the following:

■ Peer pressure and peer influence can be positive or negative.

■ Wanting to conform to group standards is normal for people of all ages. It's common to want to fit in. An adult is not likely to go to a business luncheon wearing pajamas because it does not fit with gro- up standards. You are unlikely to come to school wearing a costume every day.

■ Peer influence is pressure that we put on ourselves. We want to be accepted and liked, so we try to act in ways that will ensure this. Yet, sometimes this might mean doing something we feel we shouldn't—either because we feel it is wrong, or because it does not fit in with who we are.

■ Keep in mind your personal goals and what's important to you when you are dealing with peer pressure and peer influence. Think about how your behavior will affect your life in the short- and long-term. And, consider how your actions will affect other people in your life. Will the positive pressure help you? Is giving in to negative pressure worth it?

YOUR SCHOOL'S POLICY

Review with your students your school's policy on tobacco and nicotine use so that they are familiar with the rules. Be sure that students are aware of the consequences if they are found using tobacco or nicotine on school grounds.

STUDENTS WHO WANT TO QUIT TOBACCO OR NICOTINE

If you have students who come to you and want to quit tobacco or nicotine, offer them encouragement and guidance. Let them know that they are making a healthy decision. Tell the students to speak to their parents, a trusted adult, the school nurse, family physician, or the guidance counselor to get help and come up with a plan for quitting. Likewise, if your school or community has additional resources, inform the students. Let these students know that you support their decision and offer assistance if they need it.

EXTENSION ACTIVITIES

■ **Economics/Cost**

Students will assess the costs involved with smoking/vaping. In 2024, a pack-a-day smoker spent about $3000 on cigarettes per year (not including local taxes). How much would that be over 5, 10, and 15 years? What else could you do with $3000?

■ **What Do You Think?**

Adolescents tend to overestimate the prevalence of tobacco and nicotine use among their peers. To demonstrate this misperception, write the numbers 0 through 10 on the board. Then, have 10 students stand up. Ask the class if they think 10 out of 10 middle schoolers are current cigarette smokers or vapers. Record the votes next to the number 10. Next, ask one student to stand back and ask the class if they think 9 out of 10 students smoke or vape. Record the votes next to the number 9. Then ask two students to step back and ask the class if they think 8 out of 10 middle schoolers smoke or vape. Record the answer and keep the process going until you have 0 out of 10 students. Explain that approximately 5% of middle school students vape and 1% use cigarettes.

■ **Watch Anti-Tobacco Ads**

Have students review antitobacco, nicotine, drug, and alcohol ads they may see on television or in print and discuss their reactions. Sample ads from the CDC's Tips from Former Smokers campaign can be found here: **www.cdc.gov/tobacco/campaign/tips/**.

■ **What's My Image?**

Have students describe the image they want to portray and how they want others to "see" them.

■ **What's the Law?**

This activity will help students understand the legal implications of minors smoking or using nicotine products. They will research the laws in their state and the consequences of breaking the laws (on retailers selling tobacco or nicotine to underage purchasers, and on minors purchasing tobacco or nicotine). Students should present their findings to the class.

■ **Invite a Guest**

Invite a local healthcare professional into your school to speak to your students about the health consequences of tobacco and nicotine use. You might even reach out to the local health community for a role model who can speak to your class about his/her personal experiences with trying to quit using nicotine, or about how smoking has affected his/her life.

THE MIDDLE SCHOOL YEARS

■ **What Students Experience**

■ **Classroom Considerations**

As an educator, you know that middle school students experience many developmental changes as they grow physically, intellectually, and emotionally. The Right Decisions, Right Now: Be Nicotine Free program was created with this information in mind.

The charts on the next four pages provide a broad description of emotional, intellectual, and social developmental changes that occur in early- to mid-adolescence.[13] These changes are grouped by grade level for ease of reference. The charts also include tips and suggestions you might find useful in helping your students through their middle school years.

When using such a chart, it is recommended by psychologists to keep in mind the following points:

■ Every child develops at his or her own pace; what one child experiences at 11 years of age another might not experience until age 14, if at all.

■ Children don't necessarily complete one stage before progressing to the next. There are regressions, false starts, and stalls. Sometimes unanticipated crises (death in a family, move to a new state, etc.) arise that either spur or stunt development.

■ Environmental factors (the stability of a neighborhood or a family, for instance) can impact the timing and nature of development.

Boys and girls often develop in different ways and in different timeframes.

GRADES 5 AND 6

Student Developmental Stages	Classroom Considerations
Emotional Development	**Emotional Development**
■ Slight self-consciousness and an increased desire for privacy appears ■ Early feelings of conflict between family values and peer values ■ Getting better at articulating the content of feelings, but connection between feelings and thoughts not fully developed ■ May begin modeling the behavior of older children ■ Anxiety about "fitting in" in new school environment	■ Create opportunities for small group discussions. ■ Give frequent compliments. ■ Acknowledge concerns that come with being the youngest in the school. ■ Have an area for kids to have time alone.
Intellectual Development	**Intellectual Development**
■ Beginnings of more complex thinking, from purely concrete (the car starts when the key is turned) to slightly abstract (electricity from the battery ignites internal movements in the car's engine) ■ Intense value placed on competency, on being able to do things well ■ Though they can apply rudimentary abstract thinking to their schoolwork, they may not be able to apply it to dealing with personal dilemmas ■ Issues of right and wrong generally viewed narrowly ■ Begin to question the "why" behind rules	■ Have occasional one-on-one student-teacher conferences. ■ Move from concrete to open-ended questions. ■ Encourage use of Internet for research. ■ Send children on Internet scavenger hunts. ■ Employ project-based learning.
Social Development	**Social Development**
■ Less forthcoming with parents about a day's activities ■ Early experimentation with risk behavior (smoking, drinking, etc.) ■ Modeling of behavior of older students ■ Some avoidance of regular family activities	■ Provide cooperative learning opportunities. ■ Maintain clear expectations for social interactions. ■ Teach students about positive role models from history and current events. ■ Practice interpersonal skills. ■ Display group and individual projects.

(Please note that there is no direct correlation between parallel bullets in the two columns.)

GRADE 7

Student Developmental Stages	Classroom Considerations
Emotional Development	**Emotional Development**
■ Powerful desire for privacy ■ Increased anxiety about "fitting in" and "being accepted" by peer group ■ Significant shift in academic expectations can trigger stress about student's ability to achieve	■ Teach deep breathing techniques. ■ Give students opportunities for free-writing as a means of expressing their feelings. ■ Use humor to address foolish behavior. ■ Ensure a balanced gender mix in all classrooms.
Intellectual Development	**Intellectual Development**
■ Increased ability to think abstractly, and in slightly more complex terms ■ Sense of right and wrong loosens some, with personal moral responsibility shifting (in some cases) from the individual group ■ Increasing curiosity about things outside of self but the curiosity is often not sustained ■ Falling off of the idealization of parents that exists in pre-adolescence	■ Have occasional one-on-one student-teacher conferences. ■ Move from concrete to open-ended questions. ■ Encourage use of Internet for research. ■ Send children on Internet scavenger hunts. ■ Employ project-based learning.
Social Development	**Social Development**
■ increased isolation from family, increasingly private about one's activities ■ May seek out adult relationships outside of family (teachers, coaches, neighbors) ■ Less attention paid to parents ■ Pee identification rises; child will begin to dress, speak, act like those in peer group with whom she or he wants to be identified. "fitting in" is still highly valued ■ The prevalence of group mentality ■ Competition among same sex peers to be found attractive to the opposite sex ■ Image conscious, may spend long hours preening, getting ready for school ■ More experimentation with risk behaviors	■ Encourage students to apply their knowledge to social issues of importance to them. ■ Create mixed work teams (e.g., by race, gender, ethnicity, etc.) to build mutual understanding. ■ Create space for students to share their feelings and concerns with teachers. ■ Provide opportunities for one-on-one discussions of current assignments ■ Create a buddy system for the benefit of incoming students.

GRADE 8

Student Developmental Stages	Classroom Considerations
Emotional Development	**Emotional Development**
■ Increased sense of differentiation from family; child feels less ambivalent about this separation but more concerned with status among peers ■ Feelings of desire for members of the opposite sex, but often idealized ■ Feels more at home with academic life, more willing to consider responsibilities beyond academics	■ Offer peer counseling/support groups ■ Particularly in English class, connect literature to self in discussion. ■ Incorporate journal writing into lessons.
Intellectual Development	**Intellectual Development**
■ Enhanced intellectual abilities ■ Beginning to question and analyze life more extensively and more abstractly ■ Greater abstract thinking, particularly noticeable in math skills ■ Increased ability to separate thoughts from behaviors; respond to situations instead of merely reacting to them ■ Increased tendency to shift moral responsibilities to peer group ■ Curiosity about things outside of self can be more sustained	■ Differentiate instruction. ■ Ask students to apply complex thinking skills to real-life problems ("You're lost in the woods, how do you find your way home…" or "You have to create a budget for a family of four…"). ■ Set up literature circles. ■ Support academically- or artistically-based student organizations and encourage students to join at least one that is reflective of their interests and values.
Social Development	**Social Development**
■ Activities with the opposite sex (dating, "hanging out," after-school events) begin in earnest; dating often done in groups rather than pairs ■ Sexual activity may begin ■ Popularity becoming more important; may engage in "attention-getting behaviors" in order to win approval of others ■ More pronounced, more overt drug and alcohol use, as well as tobacco and nicotine use ■ More pronounced, more overt drug and alcohol use, as well as tobacco and nicotine use ■ Group mentality continues	■ Provide books on current topics, including conflict resolution, peer pressure, bullying, etc. ■ Reprimand in private, praise in public. Address the behavior, not the student. ■ Have students work in groups with children who are of different temperaments, skill speeds, etc., than themselves. ■ Create situations where students have to practice democratic behavior. ■ Create groups, by gender, where students can safely explore issues of body image, health and hygiene, sexuality, etc.

GRADE 9

Student Developmental Stages	Classroom Considerations
Emotional Development ■ Greater conflict with parents may arise due to burgeoning sense of independence and personal responsibility ■ Concern about the importance of high school and the "stakes" attached to academic performance ■ Feelings of inferiority imposed by upper classmen on freshmen; or feelings of invincibility, of elevated status that comes with being "oldest kids in the school"	**Emotional Development** ■ Build journal writing time into the curriculum. ■ Emphasize education for education's sake, not as a "ticket to a good job." ■ Review conflict resolution techniques.
Intellectual Development ■ Increased cognitive development allows child to think about issues such as "the meaning of life" and their purpose in it ■ Thought patterns are more flexible, less rigid ■ More personally responsible moral code begins to develop ■ Thoughts often turn toward the child's future, college, career, etc.	**Intellectual Development** ■ Teach the importance of journaling. ■ Have regular student-teacher conferences. ■ Challenge students to justify statement of opinion intellectually. ■ Encourage critical thinking by asking questions that can have more than one defensible answer.
Social Development ■ Image conscious; attention to clothes, grooming, overall appearance, style, attractiveness to opposite sex ■ More curiosity about sexuality in general; more dating ■ May have broadened conflicts with parents ■ Increased interest in experimentation with risk behaviors ■ More personal code of behavior begins to emerge, with more responsibility taken for personal actions	**Social Development** ■ Instill in students a nascent sense of themselves as future leaders of the school; impose responsibilities and reward them when they are executed properly. ■ Model appropriate behaviors. ■ Label inappropriate behaviors that are immature. ■ Design a peer counseling program. ■ Emphasize what it means to show respect for members of the opposite sex. ■ Engage in role plays where behavioral choices have to be made.

REFERENCES

Footnotes

The educational resources listed or linked to in this publication are provided as a convenience. R.J. Reynolds Tobacco Company (RJRT) is not responsible for the content of those materials. The statements and views in those materials do not necessarily represent the views of RJRT or its management.

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Bibliography & Resources

There are additional organizations and resources that can provide information on these and other lifestyle behaviors. The listing in this booklet does not imply that the organization endorses the program contained herein, nor does it constitute an endorsement of the organization by R.J. Reynolds Tobacco Company.

WEB SITES

www.cdc.gov/tobacco – The Centers for Disease Control and Prevention has a variety of resources for educators, parents, and students on tobacco.

www.nida.nih.gov - The National Institute on Drug Abuse (NIDA) has information for adults and students about tobacco and other drugs. For information on addiction, see: NIDA Research Report Series- Tobacco / Nicotine: NIH Publication No. 16-4342 Referenced2017.

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GLOSSARY OF TOBACCO-RELATED TERMS

Rationale:
These terms will be helpful for your students as you progress through the Right Decisions, Right Now: Be Nicotine Free program. You may wish to periodically display and review the terms on an interactive white-board as your students work through the program activities. Alternately, print out the list of the terms and definitions below to copy and distribute.

Glossary Terms:

addiction: A chronic, relapsing disease characterized by compulsive drug-seeking and abuse despite adverse consequences. It is associated with long-lasting changes in the brain.[1]

cessation: Quitting tobacco or nicotine products.[8]

emphysema: A lung disease in which tissue deterioration results in increased air retention and reduced exchange of gases. The result is difficulty breathing and shortness of breath.[1]

leukoplakia: A precancerous lesion of the soft tissue in the mouth that consists of a white patch or plaque that cannot be scraped off.[3]

nicotine: An alkaloid derived from the tobacco plant that is primarily responsible for smoking's psychoactive and addictive effects.[1]

secondhand smoke: A mixture of gases and fine particles that includes smoke from a burning cigarette, cigar, or pipe tip; smoke that has been exhaled or breathed out by the person or people smoking; and contains more than 7,000 chemicals, including hundreds that are toxic and about 70 that can cause cancer.[4]

smokeless tobacco: The two main types of smokeless tobacco in the United States are chewing tobacco and snuff. Chewing tobacco comes in the form of loose leaf, plug, or twist. Snuff is finely ground tobacco that can be dry, moist, or packaged in sachets.[3]

tar: A substance in some respects resembling tar; especially: a condensable residue present in smoke from burning tobacco that contains combustion by-products (as resins, acids, phenols, and essential oils).[5]

tobacco: A plant widely cultivated for its leaves, which are used primarily for smoking; the N. tabacum species is the major source of tobacco products.[1]

withdrawal symptoms: A variety of symptoms that occur after chronic use of an addictive drug is reduced or stopped.[1]

www.nida.nih.gov/ResearchReports/Nicotine glossary.html

www.cdc.gov/tobacco/data_statistics/fact_sheets/cessation/quitting/index.htm

www.cdc.gov/tobacco/data_statistics/fact_sheets/smokeless/health_effects/index.htm

www.cdc.gov/tobacco/data_statistics/fact_sheets secondhand_smoke/general_facts/index.htm

http://www.merriam-webster.com/dictionary/tar

I Pledge to Be Nicotine Free

I understand that tobacco and nicotine products have health risks and consequences.

I choose to say "no" to tobacco and nicotine and pledge to stay nicotine free.

This means I will not use any nicotine products because:

Signed: Date:

RD RN RIGHT DECISIONS BE NICOTINE FREE RIGHT NOW

I PLEDGE
To Encourage My Child To Be Nicotine Free

By signing below, I pledge to encourage my child to be tobacco and nicotine free.

I will respect my child, listen to them, and answer their questions.

I will talk with my child about the importance of not using any tobacco or nicotine products including cigarettes, vapes, smokeless tobacco or nicotine pouches.

Signed: _____   Date: _____

RD RN — RIGHT DECISIONS — **BE NICOTINE FREE** RIGHT NOW