

KENTUCKY

ADOLESCENT TOBACCO PREVENTION PROJECT

7th Grade Curriculum Guide

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This curriculum was developed with the support of a research grant from the National Cancer Institute (#CA 48625).

To be used only for research purposes at Kentucky Adolescent Tobacco Prevention Project experimental schools. Not for distribution. All curriculum materials can be obtained from the Kentucky Adolescent Tobacco Prevention Project (606) 257-4162.

INTRODUCTION

Background

In 1984, health educators from the University of Kentucky and professional staff at the McDowell Cancer Network, Markey Cancer Center met to discuss the problem of tobacco use among youth in central Kentucky. From that first meeting, interest in the subject continued until funding from the National Cancer Institute was obtained in 1987 to collect data on tobacco use among adolescents in central Kentucky. These data demonstrated that the youth in the counties studied were using tobacco at a very high rate. Those who were especially at risk for tobacco use were those who came from tobacco-raising households.

In May of 1992, funding was obtained from the National Cancer Institute to launch the Kentucky Adolescent Tobacco Prevention Project. The Project is aimed at preventing the onset of tobacco use among youth who live in a tobacco-producing region.

Overview of the Project

Initial data collection for the Kentucky Adolescent Tobacco Prevention Project was conducted from October to December, 1992. Data were collected on all 7th graders in 19 middle schools. Students completed a survey relating to their tobacco usage and a carbon monoxide test to verify the validity of their smoking self-reports. Subsequently, schools were matched according to tobacco usage rates and number of students and then randomly assigned to either experimental or control conditions. The 10 schools assigned to experimental conditions sent teachers for training to teach a curriculum designed to prevent tobacco use among youth. The curriculum was implemented in the spring of 1993. Students in both the experimental and control schools will be surveyed again in the Fall of 1993 and the Fall of 1994 to determine if the curriculum is effective in delaying tobacco use.

Description of the Intervention

The intervention is based on a social influences model. Social influence is a term referring to the psychological effects that others have on a person (Sussman, 1989). Social influences certainly are one of the most important determinants of adolescent tobacco use. The intervention developed for this Project is based on research literature that indicates the type of program that is effective in delaying the onset of tobacco use by youth. Traditionally, information-oriented programs have been employed, but have not been effective. Social influences curricula have reduced smoking onset by as much as 50% up to three years after the curricula were implemented.

The primary features of the program are:

- (1) inclusion of the negative consequences of using cigarettes and smokeless tobacco with emphasis on immediate physical consequences and the undesirable social consequences.
- (2) correction of students' misperceptions regarding normative tobacco-use behaviors (i.e., correcting the misperception that the majority of 7th graders use tobacco).

- (3) the use of trained peer leaders to lead group activities.
- (4) skills training, specifically, learning to recognize types of peer pressure applied to persuade youth to use tobacco; refusal skills; and assertiveness.
- (5) emphasis on recognizing the types of appeals advertisers use.
- (6) active participation by students; for example, they devise their own ads that present a counter-message to advertisers' persuasive appeals.
- (7) student pledges to not use tobacco.

These features are those that are usually included in effective, social influences tobacco prevention programs (Glynn, 1989). Rather than construct a totally new curriculum, we have drawn from the Minnesota Smoking Prevention Program; STAR (Students Taught Awareness and Resistance), a drug prevention program; and Project Towards No Tobacco Use (TNT); a tobacco prevention program, in designing our curriculum. These are nationally-known programs that have been demonstrated to be effective. In addition to these established elements, our curriculum is unique in that it includes:

*Culturally-relevant information and examples

The primary impetus for the Program is that youth who live in high tobacco-production regions are at high-risk for tobacco use, particularly if they are reared in tobacco-raising households. Our previous research has allowed us to identify some information that has been incorporated into the curriculum to make it more relevant to a tobacco-growing region.

*Event tasks and portfolio tasks

These are designed to address a number of goals and valued outcomes mandated by the Kentucky Education Reform Act of 1990. The Appendix contains complete information on each event and portfolio task outlined in the curriculum. Each session also begins with a listing of KERA Goals and Valued Outcomes addressed in that session.