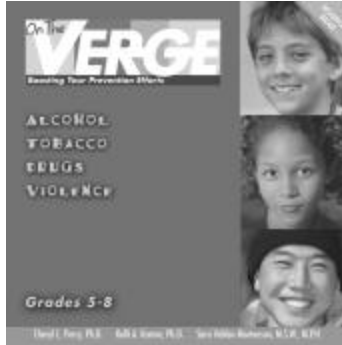


---

# On the Verge



## Boosting Your Prevention Efforts

Grades 5–8

*From*  
**HAZELDEN**



---

## What Is *On the Verge*?

The *On the Verge* program is a tobacco, alcohol, other drug, and violence prevention program consisting of:

- A four-session curriculum with activities conducted by peer leaders with help from the teacher
- Four VERGE magazines which serve as workbooks for both classroom activities and home-based activities that students do with their parents or other adults in the household
- Home note postcards with prevention messages sent to parents or other family members (sold separately)

*On the Verge* can be used as a stand-alone curriculum or as a research-based supplement to any other prevention education program. All the materials needed to implement the program are included in the *On the Verge* binder.

## What Is the Theme of Each Session?

The curriculum sessions and issues of VERGE magazine examine risks and choices as they relate to four areas of influence in young people's lives:

Session 1: Friendship and peer pressure

Session 2: Group influences and expectations

Session 3: Advertising and the media

Session 4: Role models and goals

The program goes beyond telling young people to *not* smoke, drink, use drugs, or use violence, and even beyond giving them the skills to resist pressures. *On the Verge* aims to make a fundamental change in what young people think of as “cool,” “normal,” or “grown-up.”



---

## Who Is the Main Audience for *On the Verge*?

The *On the Verge* messages and materials are designed to appeal to students in grades 5 through 8, taking into account the developmental characteristics of young teenagers.

## Is *On the Verge* research-based?

*On the Verge* has been proven effective both as a stand-alone curriculum and as an enhancement to any prevention program that desires research-based outcomes.

Here is an overview of the research as it appeared in: Perry, Cheryl L. et. al. *A Randomized Controlled Trial of the Middle and Junior High School D.A.R.E. and D.A.R.E. Plus Programs*. Archives of Pediatrics & Adolescent Medicine, 2003, Vol.157:178-184.

“*On the Verge* (also called the Minnesota D.A.R.E. Plus project) sought to evaluate the middle and junior high school Drug Abuse Resistance Education (D.A.R.E.®) and D.A.R.E.® Plus programs on drug use and violence.

The study design involved 24 middle and junior high schools in Minnesota that were matched on socioeconomic measures, drug use, and size and randomly assigned to 1 of 3 conditions. Eight schools received D.A.R.E.® only. Eight schools received the D.A.R.E.® curriculum and the D.A.R.E.® Plus program. Eight schools served as the “delayed program” control group. The D.A.R.E.® Plus components included the D.A.R.E.® curriculum; a classroom, peer-led and parental involvement program; parent postcards; youth-led extracurricular activities; and adult action teams. The interventions were implemented during two school years, when the cohort was in the seventh and eighth grades.

There were no significant differences between D.A.R.E.® only and the controls. There were significant differences among boys between D.A.R.E.® Plus and control schools in tobacco, alcohol and multi-drug use and victimization. There were significant differences among boys between D.A.R.E.® Plus and D.A.R.E.®-only schools in tobacco use and violence. There were no significant behavioral differences between conditions among girls. (This edition of *On the Verge* has been revised to address the needs of girls.) Psychosocial factors support the changes that were found in behavioral outcomes.”

## Why Is It Important To Talk About Tobacco, Alcohol, Other Drugs, and Violence with Teens?



---

Drug use among youth—including tobacco and alcohol use—is a concern both for students’ immediate and long-term health and well-being (Greenblatt, 2000; Grant & Dawson, 1997; Gruber, DiClemente, Anderson & Lodico, 1996; USDHHS, 1994).

### *Tobacco Use*

The majority of adult smokers began smoking before the age of 18 (USDHHS, 1994). It is well established that smoking cigarettes is related to serious health consequences, such as increased risk of stroke, coronary heart disease, lung cancer, emphysema, and bronchitis (USDHHS, 1994). In the United States, the single most preventable cause of premature death is cigarette smoking and one in five deaths is attributable to smoking (USDHHS, 1994). The younger a child is when he or she starts smoking, the more likely he or she will become strongly addicted to nicotine (USDHHS, 1994).

### *Alcohol Use*

Early use of alcohol is also a concern. A report by the Substance Abuse and Mental Health Services Administration (Greenblatt, 2000) concludes that there is a strong relationship between alcohol use among youth and many social, emotional, and behavioral problems, including use of illegal drugs, fighting, stealing, driving under the influence of alcohol and/or drugs, skipping school, feeling depressed, and deliberately trying to hurt or kill themselves.

In addition to the problems that occur during adolescence, early initiation of consuming alcohol is related to alcohol-related problems later in life, including alcohol abuse and violence, injuries, drinking and driving, and absenteeism from school or work, as well as increased risk for using other drugs (Grant & Dawson, 1997; Gruber, DiClemente, Anderson & Lodico, 1996).

### *Other Drug Use*

Students who use marijuana are more likely to get lower grades and are less likely to graduate from high school than those students who do not use marijuana (NIDA, 2002). Marijuana use is also related to many serious health consequences such as increased risk of heart attack and lung cancer and impaired short-term memory, attention, and learning capabilities (NIDA, 2002).

We know that tobacco, alcohol and marijuana use among young people pose serious consequences. However, rates of drug use remain at unacceptably high levels. Despite recent improvements in tobacco use among youth, 11% of eighth graders, 18% of tenth graders, and 27% of twelfth graders reported smoking currently (use in the past 30 days) (Johnston, O’Malley & Bachman, 2003).



---

Rates of alcohol use have been fairly stable and remain at unacceptably high levels of use. In 2002, the prevalence of past 30-day alcohol use was 20%, 35%, and 49% for eighth, tenth, and twelfth grade students, respectively (Johnston et al., 2003). Rates of illicit drug use were down some in 2002 from the recent peak levels reached in 1996 and 1997 (Johnston et al., 2003).

### *Teen Violence*

In addition to drug use, violence is a threat to adolescents' health and well-being. Nationally, homicide is the second leading cause of death for youth ages 15–24 (MacKay, Fingerhut & Duran, 2000). Violent behaviors assessed nationally by the Youth Risk Behavior Survey for ninth through twelfth grade students indicate that violence is still a

concern, despite recent reductions in violent behaviors. In the 2001 survey, 6% of students reported having carried a weapon on school property in the past 30 days, 6% reported having carried a gun in the past 30 days, and 33% had been in a physical fight in the past year (Grunbaum et al., 2002).

As these facts illustrate, careful attention to the prevention of substance use and violent behaviors among youth is warranted and critical, and needs to build on demonstrated successful efforts, such as programs like *On the Verge*.

## **References**

Grant, B.F., & Dawson, D.A. (1997). Age at onset of alcohol use and its association with DSM-IV alcohol abuse and dependence: Results from the National Longitudinal Alcohol Epidemiologic Survey. *Journal of Substance Abuse* 9, 103–110.

Greenblatt, J.C. (2000). *Patterns of Alcohol Use Among Adolescents and Associations with Emotional and Behavioral Problems*. OAS Working Paper. Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Rockville, MD.

Gruber, E., DiClemente, R.J., Anderson, M.M., & Lodicio, M. (1996). Early drinking onset and its association with alcohol use and problem behavior in late adolescence. *Preventive Medicine*, 25(3): 293–300.

Johnston, L.D., O'Malley, P.M., & Bachman, J.G. (2003). *Monitoring the Future National Survey Results on Adolescent Drug Use: Overview of Key Findings, 2002*. (NIH Publication No. 03-5374). National Institute on Drug Abuse: Bethesda, MD.



---

Grunbaum, J.A., Kann, L., Kinchen, S., Williams, B., Ross, J.G., Lowry, R., & Kolbe, L. (2002). Youth Risk Behavior Surveillance—United States, 2001. In *CDC Surveillance Summaries*. MMWR 2002; 51 (No. SS-4), pp. 1–64.

MacKay, A.P., Fingerhut, L.A., & Duran, C.R. (2000). *Health, United States, 2000: With Adolescent Health Chartbook*. National Center for Health Statistics: Hyattsville, MD.

National Institute on Drug Abuse (NIDA). (2002). *NIDA InfoFacts: Marijuana*. Available at: <http://www.drugabuse.gov/infobox/marijuana.html>

U. S. Department of Health and Human Services (USDHHS) (1994). *Preventing Tobacco Use Among Young People: A Report of the Surgeon General*. U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health: Atlanta, GA.

---

## On The Verge *Scope & Sequence*

**By the end of the session, students will be able to:**

<b>Session 1 Friendship and Peer Pressure</b>	<ul style="list-style-type: none"><li>• identify what they like and don't like in a friend</li><li>• describe the positive and negative ways friends influence them</li><li>• identify qualities of a "true" friend</li><li>• make choices that support a friendship without choosing risky behaviors</li><li>• identify some of the false reasons why teens use tobacco, alcohol, other drugs or violence</li><li>• describe positive ways to build friendships</li><li>• describe positive ways to resolve conflicts without fighting</li><li>• evaluate their own friendship skills</li></ul>
<b>Session 2 Group Influences and Expectations</b>	<ul style="list-style-type: none"><li>• identify the different groups they belong to</li><li>• describe how groups can influence a person in positive and negative ways</li><li>• evaluate how groups have influenced their choices</li><li>• use a decision-making process to set priorities among group expectations</li><li>• identify stereotypes that groups have of each other</li></ul>
<b>Session 3 Advertising and the Media</b>	<ul style="list-style-type: none"><li>• critically analyze the "hidden" messages behind advertising techniques and media images</li><li>• describe how these hidden messages influence their choices and behavior</li><li>• describe how some tobacco and alcohol advertising is designed to appeal to teenagers</li><li>• use advertising techniques to create pro-health, anti-risk messages</li></ul>
<b>Session 4 Role Models and Goals</b>	<ul style="list-style-type: none"><li>• identify the qualities of a positive role model</li><li>• identify positive role models in their own lives</li><li>• be aware of how their own choices provide an example for others</li><li>• set goals for becoming more positive role models for others</li><li>• demonstrate making smart choices around alcohol, tobacco, and other drug use, as well as violence. Set goals around NOT using tobacco, alcohol, other drugs or violence</li></ul>

---

## Meeting National Academic Standards\* With the *On the Verge* Program

### Health Education (Grade 5):

- know characteristics needed to be a responsible friend and family member
- know how health-related problems impact the whole family
- know strategies for resisting negative peer pressure
- know some nonviolent strategies to resolve conflicts
- know behaviors that are safe, risky, or harmful to self and others
- know influences that promote alcohol, tobacco, and other drug use
- know ways to avoid, recognize, and respond to negative social influences and pressure to use alcohol, tobacco, or other drugs

### Health Education (Grades 6–8):

- understand how various messages from the media, technology, and other sources impact health practices
- understand how peer relationships affect health
- know strategies that improve or maintain family health (e.g., how one's personal behaviors can affect the behavior and feelings of other family members)
- know how communication techniques can improve family life (e.g., talking openly and honestly with parents when problems arise)
- know appropriate ways to build and maintain positive relationships with peers, parents, and other adults (e.g., interpersonal communication)

\*Standards are taken from Kendall, John S. and Marzano, Robert J. *Content Knowledge: A Compendium of Standards and Benchmarks for K–12 Education (3rd edition)*. Aurora, CO: Mid-continent Research for Education and Learning (MCREL), 2000.



---

## **Health Education (Grades 6–8) *(continued)*:**

- understand the difference between safe and risky or harmful behaviors in relationships
- know techniques for seeking help and support through appropriate resources
- know the various possible causes of conflict among youth in schools and communities, and strategies to manage conflict
- know how refusal and negotiation skills can be used to enhance health
- know the short- and long-term consequences of the use of alcohol, tobacco, and other drugs

## **English/Language Arts Standards (Grade 5):**

### *Listening and Speaking*

- contribute to group discussions
- ask questions in class
- listen to classmates and adults
- make basic oral presentations to class
- organize ideas for oral presentations

### *Viewing Media (Advertising)*

- understand basic elements of advertising in visual media

## **English/Language Arts Standards (Grades 6–8):**

### *Listening and Speaking*

- play a variety of roles in group discussion
- ask questions to seek elaboration and clarification of ideas
- convey a clear main point when speaking to others and stay on the topic being discussed
- make oral presentations to the class

---

*Viewing Media (Advertising)*

- know that people with special interests and expectations are the target audience for particular messages or products in visual media
- understand techniques used in visual media to influence or appeal to a particular audience

**Life Skills (Grade 5):**

*Thinking and Reasoning*

- identify issues and problems in the school or community that one might help solve

**Life Skills (Grades 6–8):**

*Thinking and Reasoning*

- identify alternative courses of action and predict likely consequences of each
- select the most appropriate strategy or alternative for solving a problem
- analyze personal decisions in terms of the options that were considered

*Working with Others*

- demonstrate respect for others in the group
- occasionally serve as a leader in groups
- display effective interpersonal communication skills

*Self-Regulation*

- set explicit long-term goals
- weigh risks in making decisions and solving problems