

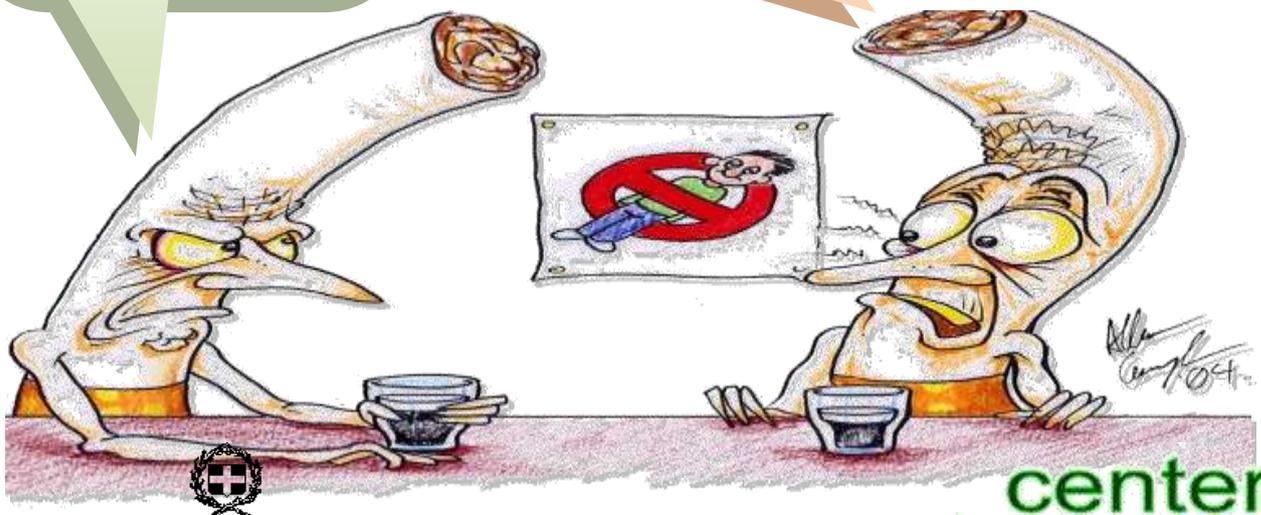
INTERVENTION IN TEENAGERS FOR SMOKING PREVENTION

ADDICTED TO LIFE



*Anything new
Mr.
Thicksmoke??*

*Nothing new Chief Cigaretteman !
He is still
addicted... to life!!!*



HELLENIC REPUBLIC

MINISTRY OF HEALTH, WELFARE & SOCIAL
SOLIDARITY

3rd and 4th Regional Health System Authority of
MACEDONIA - THRACE

MINISTRY OF NATIONAL EDUCATION AND RELIGIOUS
AFFAIRS

REGIONAL DIRECTORATE OF PRIMARY AND SECONDARY
EDUCATION OF CENTRAL MACEDONIA

DIRECTORATES OF SECONDARY EDUCATION OF THE
PREFECTURES OF THESSALONIKI, SERRES AND CHALKIDIKI



PYXIDA (COMPASS)
Drug abuse prevention
and health promotion
centre

center
of
education
formal
non-formal
education



HANDBOOK FOR THE COORDINATING EDUCATORS

3rd Regional Health Authority of MACEDONIA

Chairman Dr. Dimitrios Vartzopoulos

4th Regional Health Authority of MACEDONIA – THRACE

Chairman Dr. V. Delis

IN COOPERATION WITH:

- the Directorates of Secondary Education of Eastern, Western Thessaloniki, Serres and Chalkidiki
- the Drug Abuse Prevention and Health Promotion Centre in cooperation with the Organization Against Drugs (OKANA) “**PYXIDA**”
- the NGO “**A.E.N.A.O**” (Non-formal Education of Youngsters without Borders)

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The alarming spread of smoking amongst teenagers has been for several years now, a torturous reminder of the absence of a systematic health educational planning. Thusly the idea of implementing an anti-smoking intervention in the school settings was now ripe enough and the present handbook is an educational material and guide for its realization.

The implementation of this program was made possible due to the encouragement of the Administrator of the 3rd Regional Health Authority of Thessaloniki Dr. D. Vartzopoulos, whom I most sincerely thank. However, it would be an omission not to mention the Administrator of the 4th Regional Health Authority Dr. V. Dellis as well as the former Administrator Dr. Ap. Chatzitoliou, whom I also thank for their constant interest and support.

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Although it is obvious, I would nevertheless like to point out that this handbook is the product of a collective effort of the members of the scientific team and authors, who did not cease to work hard in order to ensure the program's success. To all these colleagues I wish to express my gratitude and thanks.

The scientifically responsible
Catherine Amoutzia
Dentist ,DDS, MSc
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PREFACE

The initiation of smoking is a complicated process and is determined by several factors from the social, natural and environmental background. Teenagers are influenced in a decisive way by their peers but also by the parents-smokers. Additionally, easy access to tobacco products, promotion of cigarettes through advertisements and the non-strict compliance with the laws, regarding the use of tobacco, contribute to the spread of smoking. Closing, it should be mentioned that characteristics of a teenager's personality such as lack of self-control and tendency to dangerous behaviors, but also the image of a smoker, developed as a strong character by advertisements, are components shaping the profile of a smoker.

A negative attitude and behavior regarding smoking can be achieved through health education programs. Schools are considered to be the appropriate settings to develop such programs. Especially when the efforts made in the schools are not limited only to general information but are combined with interventions from health bodies, local authorities and communal leaderships, are considered as successful. In this way we manage to create a supportive environment encouraging the development of personal skills and the adoption of a healthy behavior.

The pilot program "addicted to life" introduces a development model of preventive anti-smoking intervention in teenagers, and is distinguished for the detailed arrangement and full unfoldment of its thematic areas. It is addressed mostly to teachers who wish to implement a health education program in schools and is an excellent quality educational material. The reference made to the specific issue of smoking prevention does not decrease the general use of this handbook. On the contrary, it demonstrates that a health education program must focus on an issue and on this basis it should then approach the greater dimensions of health. The topic chosen is particularly important to our country, which should follow the targets of the World Health Organization for the year 2015:

"In all countries the ratio of non-smokers should be at least 80%, for those above 15 years old and near to zero for those under 15 years old".

We believe that this book is a helpful guide that can be used as a model for developing an anti-smoking program in the school environment and can contribute to the achievement of the goals set by WHO. It is a practical, modern, useful and helpful paper.

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The Ministry of Health and the Administrations of the 3rd and 4th Regional Health Authorities of Macedonia and Thrace support such innovative initiatives, which approach young people in a methodical manner and contribute to the development of their personal skills.

Thessaloniki, January 2008

Dimitrios Vartzopoulos,
Administrator of the 3rd Regional
Health Authority of
Macedonia

Vasileios Delis,
Administrator of the 4th Regional Health
Authority of Macedonia-Thrace



INTRODUCTION

Start smoking is determined by a number of influences from the social environment. Teenagers are influenced by their peers in a major and decisive way in terms of smoking. The need to maintain their acceptance within a group as well as the fear of being perhaps rejected by such group, lead them into experimenting with tobacco. The use of tobacco is chronologically associated with the transition from the primary to the secondary stage of education and, plenty of times, it reflects the problems teenagers are facing in their interpersonal relationships. In their effort to cope with stress, upsets and anger or other emotional state of mind they start smoking. Teenagers are greatly influenced also by their parents, especially when the parents are smokers. Additionally, easy access to tobacco products and promotion of cigarettes through advertisements, contribute to the spread of smoking. Characteristics of a teenager's personality such as lack of self-control and tendency to dangerous behaviors, but also the image of a smoker developed as a strong character by advertisements and movies, are components shaping the profile of a smoker.

The term "tobacco use" means the use of **cigarettes, cigars** and in general the **use of nicotine even in form of a chewing gum**. Smoking one cigarette means receiving 1-2mg of nicotine and people become even more addicted when smoke is inhaled into the lungs. Nicotine is transferred to the brain through the bloodstream and then dopamine is released. This is followed by the increase of blood pressure and the increase in respiratory and heart rhythm. Nicotine seems to act as a "relaxing" factor on the human body, since it reduces, at a great extent, the abstinence syndrome symptoms. In this way smokers feel the need to smoke more.

The proportion among teenager smokers aged 10-13 varies within the European Union from 13,8% in Greece to 22,1 in Portugal. This rate increases in Greece as teenagers grow older. Thusly, at the age of 15, 16, 28% of boys and 27% of girls are smokers. (Source: Lifetime use of cigarettes, 40 times or more; Hibbell, B., Andersson, B., Ahlström, S., Balakireva, O, Bjarnson, T., Kokkevi, A. and Morgan, M. (2000). The 1999 ESPAD και European School Survey Project on Alcohol and Drugs Report. Stockholm: The Swedish Council for Information on Alcohol and Other Drugs).

The percentage of women smokers is constantly increasing. Smoking is the second major cause of death worldwide. It causes lung cancer but it is responsible

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also for other types of cancer, because of nicotine and additives contained in cigarettes (benzopyrene, vinyl chloride, polonium etc.) as well as for other diseases such as chronic obstructive pulmonary disease (COPD), resulting in premature deaths. Premature deaths caused by smoking are estimated at 400.000 annually and result from laryngeal cancer, chronic obstructive pulmonary disease, coronary heart disease and strokes. Pregnant women who smoke give birth to babies, who seem to be in greater risk of having low weight at birth, decreased lung function, respiratory disorders. Inhalation of secondhand smoke by passive smokers is incriminated for most of the aforementioned diseases. Chewing nicotine gums can cause mouth cancer and leukoplasia.

There are four stages a person might undergo until such person becomes addicted to nicotine:

- a) **preparation**
- b) initiation and **experimentation**
- c) transition from occasional to **systematic use** and
- d) **addiction**

Health education programs implemented in schools aim to avoid mainly the first two stages, preventing students from smoking or in case they have already been experimenting, to stop any occasional use. It is difficult to intervene in the stages of systematic use and addiction, and the person involved should seek for further assistance. Besides, round the age of 15-16 many students-smokers report that they wish to quit smoking, but most of them continue (to smoke) in the adulthood, due to addiction. The smoking habit in our country, regarding the frequency, lies in the highest rates compared to other European countries. According to surveys of the World Health Organization, in Greece 47% of the male population over 15 years old is smoking. This is one of the highest percentages in the world. The respective percentage for the female population is 29% and thusly the total average is reduced to 37,6% (Source: United Nations Population Division, World Population Prospects 1950-2050, 2000 revision).

In respect to students particularly, it seems that one out of four is smoking, nine out of ten live in homes where someone is smoking and seven out of ten have

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parents-smokers ("Health and Health behavior among young people in Europe", HBSC survey 1997-98, WHO Regional Office for Europe).

. A negative attitude and behavior regarding smoking can be achieved through health education programs. Schools are considered to be the appropriate place and supportive environment, which encourages the development of personal skills.

Health Education in its typical form is a process based on scientific principles, using planned learning opportunities, so that in the end people can be well informed and can individually or collectively act consciously on issues regarding their health (Draaijer J., Williams T. 1991). No formal health education aims mainly at the socialization of the human being without being based on scientific facts. It is a learning process, based on semi organized and organized educational activities, operating outside the structured and routines of formal educational system. It emphasizes in the learning by participation methodology (flexibility in the structure and planning, based upon participants' needs and interests) Training is not neutral, invisible process but favors participative and experiential learning methodology and combines experience and theory . The planned health education is carried out on individuals, on a wider public or on specific high-risk groups.

Health Promotion is an umbrella term to cover all interventions that promote health, including health education. It means the process through which the individuals learn to control and improve their health. (The Ottawa Charter for Health Promotion, World Health Organization). Generally, the terms Health, Health Education and Health Promotion were formulated at different time periods by different scientific sectors in order to meet the needs of communicating with each other. It is worth mentioning that the term Health Promotion was used in 1974 in Canada by environmental scientists and was then adopted by the health and medical sector. It acknowledges that there are also other factors, besides the biological ones, such as environment, nutrition and behavior contributing to the improvement of health. In Europe the term **Health Promotion** was first used in 1981. This term was applied as a key- concept in order to discuss the need for revision and redefining Public Health. In the "Declaration of the Concepts and Principles of Health Promotion" (WHO 1984), the population is involved as a whole, taking control over and responsibility for their health along with the health services and local authorities. School is one of the places where students spend much of their daily life besides their home and community. It contributes to the students' sociability, mental and emotional maturity, and to the development of their

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personality, moral principles and behavior. Additionally, it helps adopting **healthy attitudes** and **taking actions and decisions** regarding health. According to the above, school is considered as the appropriate place to develop and implement Health Education and Health Promotion programs. It could be the supportive environment helping children to gain self-esteem, self-confidence, develop personal skills and have a better life now and in the future. It is the place where health promotion can combine personal choices with social responsibility for health, providing resources for the infrastructure and implementation of the program and carrying out a specific timetable.

The program “ **Addicted ...to life**” was designed using the results of literature review on international bibliography. In order to have a successful Health Education intervention, the program must include at least ten thematic units during a school year, must aim at helping teenagers to discover and develop personal skills, must include information from peers and must provide further training and support to teachers. The programme was implemented as a pilot project during the time period from November 2006 to May 2007, at 14 High Schools, at the Secondary Education Directorates of Eastern and Western Thessaloniki, Serres and Chalkidiki.

This book was drawn up as the main educational material of the pilot antismoking program and it introduces a model of health education and preventive intervention in teenagers. The methodology of experiential training, supported in the book’s **twelve thematic areas** was chosen as the most appropriate one in order to serve the program’s objectives, which are:

- to stress out the negative effects of smoking on health.
- to raise the children’s self-esteem and thusly turn children into individuals making responsible decisions.
- to enhance the development of interpersonal relations within the school settings , which shall have an supportive character with the ultimate objective to prevent teenagers from smoking.

This handbook is accompanied by the electronic CDrom “**Pandora’s Box**” in which the cognitive part of information is “concentrated” by audiovisual means. The issues it covers are the effects of smoking on the health of active and passive smokers, the addictive effect of nicotine, information, the spread of smoking etc.

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The thematic areas are presented according to the development of health education programs on any other issue. It is flexible and can be adjusted to any time period, place, age and interests of the participants. It is therefore, constant through time and can be used by those who adopt the no formal training in order to help the target-group to develop their personal skills. In this case it is the student -population of the first years of High School, where the prevalence of smoking is still rather low.



PART I : ADVICE AND INSTRUCTIONS TO THE EDUCATORS / COORDINATORS

Dear Coordinators and Educators,

One of the major issues of modern society is the protection of childrens' and teenagers' health through the development of health education programs, implemented at schools. This specific program against smoking which can be implemented in your school, was developed on the basis of such principles.

The program "Addicted ...to life" is addressed to children between 13-15 years old, who are experiencing the difficult stage of adolescence. It consists of an integrated series of thematic areas regarding smoking and can be incorporated within the frame of health education school activities.

Being the coordinators/educators you are given the opportunity to be flexible and become the transmitter to deliver the health education message and play a decisive role in the development, progress and successful completion of the program. Right guidance of the team, your projecting personality, the knowledge acquired and the specialized training you received through experiential seminars, as well as taking full advantage of the potential of the team you are coordinating, are the elements that guarantee the successful implementation of the program. At the same time you must make sure to provide a positive emotional atmosphere, supporting thusly mutual respect of all team members, encouraging their equal participation and involvement and ensuring the effectiveness of the project.

Closing, your main objective must be to enhance the development of the teenagers' skills and self-esteem, which originates from their own personal skills. In this way you shall help children to develop a positive attitude and behavior towards smoking prevention.

Introducing new teaching methods may become stressful at the beginning. Following advice shall help you significantly in order to implement the program properly and without any major problems.

- Do not use any teaching methods, which you yourselves are not ready to participate in.

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- Provide a well-prepared exercise. Give clear instructions and consider the dimensions and probable turn the exercise may take, although it is not possible to predict all probabilities.
- Each innovation encompasses a possible rate of failure. Though a well-prepared method could limit such probability, you have to keep in mind that the more methods you use the easier will be for you to implement no formal health education.
- Each time you introduce a new method, you can ensure bigger success if:
 - what you have planned is introduced in a specific manner.
 - you accept the way children think and function even if this way is not the one you aim at. The solution is to intervene in the improper behavior of a student without rejecting him at the same time.
- Use a variety of methods. Introducing no formal education by using always the same method can be tiring after a certain period of time, thusly students have concentration difficulties and are less interested in learning.
- Consider the concurrent objectives that can be achieved when using a specific method. For example, a game can be used to stimulate the students but at the same time it could also generate following positive effects:
 - it can improve the children's communication
 - it can provide the ability to students to undertake their own responsibilities
 - it can help creating a nice atmosphere in the classroom.
- If you apply a new teaching method for the first time unsuccessfully, it does not mean that this method cannot be effective in the future. On the contrary, try to learn as much as possible from this experience in order to be better prepared next time.
- You may be puzzled by the fact that the use of active learning methods causes mess and you feel you are losing control of the class. You must bear in mind

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that applying new teaching methods presupposes a different kind of control. When students work with a variety of methods it is natural not to be continuously in direct contact with them. The general intervention strategy must be clear and you should be able to intervene when necessary.

- Consider the sufficiency of time made available for each thematic unit as well as the appropriateness of the teaching classroom for applying the specific method (size, furniture arrangement, nearness to other classrooms).

BEGINNING AND CLOSING A HEALTH EDUCATION THEMATIC AREA

Class preparation

Students may come to class either with great or less interest. Some times the coordinator may face notable resistance if he/she begins directly with the planned theme. The students in the class may at first need to calm down or to be stimulated. There is a series of methods that can be used to start a health education activity:

- Begin with a game to evoke the students' interest.
- Use a relaxation exercise or appropriate music when children are very unquiet.
- If students are facing a problem, then it would be perhaps better to deal with it at first. In practice you may discover that this particular issue can cover the entire activity although it was not planned.

Closing the thematic area

At the end of each thematic area there must be time left to connect and close the issues raised, and students must have time to prepare the topic for the next meeting. It is important that nothing is left hanging in the air. All issues should be properly resolved. Sometimes, students may be restless. Here are some relaxation activities to "calm things down":

- a short fantasy
- breathing exercises
- relaxing music.

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You can close the activity by making positive comments on:

- what is achieved
- the strengths of the team
- the progress and course data
- the significant facts established by the team
- any unusual incident that may have occurred
- the work to be done in the next meeting.

Evaluation

Evaluation is the process of estimating the effectiveness of a program and it should be an integral part of the entire training and learning procedure. The evaluation of a program deals with the extent to which the program as a whole meets its objectives as well as with the extent to which specific methods are considered effective for the fulfillment of certain goals. An evaluation is carried out in order to examine the following:

- **Appropriateness:** Does the program cover the students' needs, interests and anxieties?
- **Effectiveness:** Does it fulfill the aim and objectives the program was designed for?
- **Methodology:** Are the methods, applied on the specific team, the appropriate ones?
- **Coordination:** Does the team coordinator have the ability to communicate and work together with the team members in order to facilitate the learning process? Does he/she possess the right skills?

Evaluation methods

Though starting an integrated evaluation process may lie beyond the possibilities of the majority of the schools, a partial evaluation can be carried out on the following issues:

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- Acquiring knowledge can be examined through traditional methods such as tests, questionnaires, multiple choice questions or presentations in the class.
- Acquiring skills can be proven by observing the behavior itself, by the reports of external observers as well as by the reports of the students themselves.
- It is much more difficult to evaluate the changes in ideas, values and emotions, and it also takes time to establish such changes. The student's opinion on his/her own attitude and behavior is necessary in order to evaluate any change.

Program evaluation carried out by the participants

The educator as well as the students must begin having clear targets and must define the outcome aiming at, before starting the training procedure.

The same tools can be used during as well as at the end of the training procedure in order to evaluate the progress.

Students can express their opinion based on their experience from the content, planning, methodology and organization of the program they participated in. Was the right program for them? Was it interesting, pleasant?

The effectiveness of the educator can be evaluated through self-evaluation or feedback from colleagues and other parties participating in the program.



LEARNING BY EXPERIENCE METHODOLOGY

Teaching methods

In Health Education it is advisable to apply non-traditional teaching methods, which create a pleasant atmosphere in the class and contribute in turning learning into an interesting experience. In order to choose a method we must take into consideration the targets of the thematic area. An appropriate method encourages students to identify situations in the reality of daily life and it gives them the opportunity to discuss issues as seen from their point of view. To ensure success of the method it is necessary to prepare it in the right manner. Some of these methods are applied on the specific program and are the following:

1. Team work

It has been established that team work in small groups of 4-6 students is a very effective working method. In small groups students have the opportunity to acquire knowledge, to comprehend and apply such knowledge while shaping attitudes and making choices. By discussing, participating and communicating in the group, students can develop and exercise appropriate skills.

Here are some of the benefits a team work can offer:

- It allows all students to participate at a larger extent and there is more time for individual interventions.
- Children undertake responsibilities such as acting as leaders of a team.
- It is easier for a student to ask for clarifications.
- Students have the opportunity to clarify their ideas. Team work supports the ability to discuss. Students can express themselves in a free manner. There is no “desired answer”.
- Students acquire and practice new skills (they work together with other individuals, learn to listen to others etc.)

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- A large variety of ideas is generated by the feedback of the class through working in small groups.

Organizing the class into small groups can be achieved in different ways:

- The educator introduces a topic, students discuss it in groups and present their conclusions to all members of the class.
- Students work individually and afterwards they discuss their conclusions in their group.
- The educator explicates an activity and students shape small groups of 4-6 persons in which they practice such activity.
- By discussing in the class, an issue is raised and students are divided into small groups in order to discuss and propose solutions.

During an activity it is possible to use, alternatively, more than one variation of the team work. It would be wrong to use team work only to give rise to discussions in the class. Variety in team work (e.g. brainstorming, role-playing games, artistic creation) is as necessary as in any other teaching method if we wish to raise the students' awareness.

2. Brainstorming

Brainstorming is a creative method aiming at expressing a variety of ideas. It can be applied for several reasons, e.g.:

- to propose alternative solutions in the decision making process
- to provide ideas for exhibitions or other school works
- to contribute in solving problems
- to provide ideas for an activity
- to cover as many aspects of the topic under discussion as possible

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Brainstorming does not mean simply asking for ideas from others. For an effective brainstorming we must strictly follow some rules:

- the question or topic must be well defined
- team members must express any idea crossing their mind as an answer to the question.
- No one should comment the others' ideas. We insist on it.
- We write the topic or question on the blackboard. We explain the rules to the class. We set a time limit, e.g. 5 minutes. We ask students to begin. We write the ideas on the blackboard quickly. If we establish any gap, we can fill in our own ideas. We encourage students to come up with other ideas after having written down those that were heard.
- The next step is to process the ideas and move on to action. In some cases it may be necessary to ask students to specify some ideas. In this stage some ideas can be clarified, evaluated, chosen and ranked.

The above procedure is necessary because if there is no differentiation during acceptance of ideas, we will probably give the impression that all ideas are equal and acceptable.

3. Role-playing games

In the role-playing games a certain situation is carried over from the real world into the frame of the role-playing game. Role-playing games are useful when we wish to analyze certain behaviors or to test new or alternative behaviors within a controlled and safe framework. For using the role-playing games it is however necessary to have a warm and open-minded atmosphere in the class.

Students, not participating actively in the role-playing game, function as the observers and they are the audience. The educator acts as the coordinator or “director” and is responsible for planning, carrying out and evaluating the activity.

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Stages of the role-playing game

- It is important that all participants are aware of the meaning of the role-playing games and that they agree on certain basic rules in order to work together in a structured manner. Therefore, the educator has to explain in brief the methodology of the role-playing games and further on, the class has to set some rules for the students, playing the roles, and for the students, watching the game, before the game starts.
- The topic is defined as a certain situation and is described with every detail in order to help all participants to understand it.
- We collect several ideas which could help dealing with the certain issue. In this stage “brainstorming” can be useful.
- Casting process of all roles, needed to play the game, must now take place.
- The class jointly decides which behavior shall be played. It is important to describe the behavior with as many details as possible and to choose a realistic behavior that can be exercised. Additionally the chosen scene should not last longer than a few minutes.
- Further on, the “scenario” is performed. Afterwards, the actors and actresses describe their experience and emotions from the game and the audience gives its feedback on all positive impressions.
- The participants may discuss the possibility of carrying over the certain behavior in real circumstances, in order to complete the role-playing game.

4. Artistic creation (drawing, painting, collage)

Certain forms of art are a useful teaching approach for health education in the classroom. In this case students do not just discuss or write about the different social situations, but they also capture and express these situations in paintings and drawings. They can also make collages to express themselves and their skills without requiring a certain talent or specialized skills. It is important that children overcome their fears in artistic creation. Therefore we must point out to them that our aim is not to create a work of art but to express ourselves in a free manner.

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5. Use of CD, DVD, video

The use of a CD, DVD, video in health education should not be passive. There are ways to organize a video show by ensuring the active participation of the viewers:

- Show the videotape one time and observe the reactions of the students. This could stimulate group discussion.
- Play the picture one time for the students to watch the story and further on play it again in order to focus on a certain point or issue you wish to emphasize.
- Play the movie in mute in order to concentrate on the non verbal messages.
- Stop the movie before it ends, giving students the opportunity to end up the story in their own manner.
- Stop the movie at the right scene asking students to solve a problem or to discuss this specific scene.

Keep in mind that showing a movie is not the end in itself but the means to the end.

6. School assignments

School assignments can be carried out on most of the health education topics. By carrying out school assignments, students learn to work as a team, to copy with problems, disagreements etc. The best part a teacher can play is to allow students to take as many initiatives and responsibilities as possible for completing their assignment. There are several ways to present an assignment (essay, presentation, printed material, video). The teacher must make sure that the assignments of all participating students are presented. Closing, the evaluation of an assignment is very important in order to avoid mistakes in future works.

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7. Movement games

During team work activities there are several movement games that bring participants into action and warm up the atmosphere in the class. Thusly, participants have a positive attitude towards several activities. Some of these games are:

- **Names and adjectives**

Participants must come up with an adjective describing their emotional state or appearance. The adjective must begin with the same initial as his/her name, e.g. "My name is Nikos and I am nice". While speaking out the phrase they can state the adjective by performing a pantomime.

- **The speaker's scepter**

Every child wishing to speak to the circle can hold an item, e.g. the speaker's scepter. After completing his/her thoughts, the child leaves the scepter in the centre of the circle for the next speaker to pick it up. This item is not passed on hand-in-hand. In this way only one person at a time can speak without being interrupted.

- **Magic chair**

The coordinator mentions phrases (e.g. related to cigarette advertisements) and the group members must take a seat with reference to the chair, corresponding to their positive or negative attitude towards this phrase. If they fully agree to the phrase they sit on the chair. If they fully disagree they draw themselves back from the chair as far as possible.

- **Who am I ?**

The coordinator sticks a slip of paper with the name of a famous person on the back of every student, without letting the student see the name. Further on the coordinator lets students wander through the classroom asking questions one another about the identity of the famous persons they represent. The questions can be answered only with a "yes" or a "no". The game goes on until everyone finds out who the famous persons are.

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- **Group statues**

Students walk through the classroom shaking slightly their head and neck. After a while the coordinator speaks out a word e.g. “smokeless”. All participants must immediately, without talking, take a pose demonstrating what the word “smokeless” means to them. The exercise is repeated several times.

- **I like you because ...**

The coordinator asks the participants to sit in a circle and to mention the reason they like their fellow student, sitting to the right of them. Students are given some time to think.

- **Train chain**

The coordinator asks children to form a train chain in four rows. The train chain moves forwards until a student shouts “tooh!” The student, then, makes a positive comment or expresses a positive emotion. He/she finishes the game by saying “tooh, tooh!”. Then, the train chain moves backwards. The procedure is repeated until almost every student has spoken.



PART II : INTERVENTION

INTRODUCTION

The number of teenagers who start smoking increases continuously in Europe as well as worldwide, although teenagers are constant receptors of messages regarding the harmful effects of smoking. In Greece the rates are upsetting given the fact that 13,8% of the teenagers are smokers.

The behavior of young people with reference to smoking is significantly influenced by their social environment. The impression young people have on how common or socially acceptable smoking is, significantly determines the formation of standards supporting the tobacco use. Usually youngsters overestimate the rates of smokers in their environment –amongst their peers as well as amongst adults. This results in developing wrong expectations and at the same time young people are positively influenced regarding smoking.

With reference to the peer influence, this is often linked to the aspect that children are “carried away” by their friends, that they are being pressured to do things, which they actually do not approve of, in order to be accepted by the group of friends.

Additionally, easy access to tobacco products, promotion of cigarettes through advertisements, non strict compliance with the laws regarding the use of tobacco , as well as elements of a teenager’s personality such as lack of self-control, tendency to dangerous behaviors, positive image of a smoker created by advertisements, push young people to experiment with smoking.

Recent studies demonstrate that training young people in developing skills as a resistance to peer pressure, is insufficient if the training is not accompanied by “conservative” aspects regarding the tobacco use.

If youngsters think that it is normal to smoke, they will not be willing to resist to any “peer pressure” experienced in their circle of friends.

For a successful prevention program it is absolutely necessary to “correct” the wrong impressions young people have regarding the dominance and social acceptance of tobacco use as well as to develop a more conservative attitude towards smoking.

Given the above facts, training of young people in “norms” is considered to be of determinative significance in the implementation of a preventive program at schools, especially at those ages (first high school years) in which tobacco use is still

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not very common. At the same time however, preventive programs must focus on training young people in skills as a resistance to the pressure by peers and the social environment.

Having in mind that smoking starts spreading widely on teenagers and that it is a major medical-social issue, we decided to design and implement a pilot program, described in details below.

Intervention structure

The program “Preventive intervention in teenagers regarding smoking”, entitled “Addicted ...to life” consists of 12 thematic areas and it is addressed to teenagers. It aims at preventing teenagers from smoking and is an overview of all our current knowledge on the factors that may lead to or prevent the tobacco use.

It is based on a comprehensive model (cognitive, emotional, psychosocial) which includes the increase of the level of knowledge acquired and the development of the students’ ability to realize and recognize their emotions, as well as the factors affecting them. It demonstrates thoroughly methods by which the above processes are combined in order to help students develop personal skills on multiple levels. Development of skills such as resistance to the pressure from peers, aims at offering students the opportunity to learn new ways and methods in order to approach and communicate with their peers with confidence, without being forced to adopt behaviors they are not fond of. The educational material is based on methods of active training, widely applied in no formal health education, allowing full participation of the students in the learning procedures.(learning by participation methodology).

Program objectives

The program aims at proposing a positive approach in the prevention of smoking and the intervention is carried out in three levels:

1. in the area of knowledge
2. in the area of behavior

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3. in area of developing personal skills

The objectives are to:

stress out the negative effects of smoking on health.

raise the children's self-esteem and thusly turn children into individuals making responsible decisions.

enhance the development of interpersonal relations within the school environment

The targets of the program are:

1. In the area of knowledge:

- to provide clear information in order to help children acquire complete knowledge on self-awareness, to learn more about media, advertisement techniques, the harmful effects of smoking, the addiction etc.

2. In the area of behavior

- to inform children how their needs influence their decisions.
- to jointly define the stages and consequences from the decision-making process.
- to help them develop their judgment, to define the influences from several factors, to decide on their personal choices and to understand their emotions.

3. In the area of developing personal skills

- to help youngsters make their choices and put them into effect when difficult situations arise (by developing their judgment and supporting their aspects)
- to encourage them to be more responsible for their health and to take active role in the health education programs, which make them truly responsible and allow them to believe in themselves.



LEARNING BY EXPERIENCE WORKSHOPS

COORDINATOR'S ROLE:

- He/she introduces the topic, provides information and gives clear instructions.
- He/she observes the group and offers his/her assistance if necessary.
- He/she documents his/her aspects on a piece of paper or on the blackboard.
- When necessary he/she can give some additional information however without dominating in the dialogue, turning it into a monologue.
- He/she assists the group to state its opinion and to draw conclusions.
- He/she offers the group the opportunity to identify the difference and understand the importance the way one can state his/her opinion (passive, aggressive, predicative way).
- He/she urges all students to participate in the group and assists the participants if necessary.
- He/she observes and takes notes if practicable, on the students' reactions.
- He/she provides ideas when these run out but he/she does not lead the group towards a certain direction.
- He/she expresses his/her own opinion, thoughts (but not judgment).
- He/she observes the groups, encourages and help all students to participate.

CHECK LIST – BEFORE STARTING

- ✓ Make sure that you have read all activities in a complete and careful manner.
- ✓ Gather or prepare a priori any material you may need.
- ✓ You may wish to collect information from health services or the internet regarding smoking.
- ✓ Define the usefulness and relativity of the activity with your class. Consider how methods, skills and knowledge transferred within the frame of an activity can apply on real circumstances of the young people's life.
- ✓ Describe clearly the purpose of each activity, the skills to be trained/ developed and the methods you shall use.
- ✓ Arrange time to answer questions and to hear the suggestions and ideas the students may come up with.

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- ✓ Consider the best ways to divide students into small groups (size of the group, boys and girls together, according to the month of birth, etc.)
- ✓ When students work in small groups, inform a priori the participants that you shall ask someone to present their ideas and suggestion to all participants.
- ✓ Give students time to clarify and understand the instructions.
- ✓ Inform students about the time disposed to them for each part of the activity and define the roles the students may wish to have in their small group (secretary, journalist, tv moderator, etc.)
- ✓ Adjust the activity in a way that it complies with your timetable. The activities are designed for a 45-minutes school hour, but cannot be adjusted to longer or shorter periods.



THEMATIC AREA 1 : Acquaintance – Cooperation contract

“Smoking: it affects us all”

Proposed time: 90 minutes

Objectives:

- Acquaintance with the program.
- Acquaintance amongst the members of the group.
- Thorough familiarity with the meeting framework, the topics and training procedure.
- Creation of an atmosphere where students feel safe, can trust and respect each other.

Topics:

During the first meeting it is useful to inform children about the new learning approach (learning by experience) and to clarify the content of the specific program. Having as a guide the poster of the project hanging on the wall, students shall be acquainted with the program “**Addicted ...to life**”. One student shall mark down each thematic area you are working on, thusly students can know what they have achieved up to that point and what their conclusion will be.

Children will become acquainted with each other and with the coordinator as well in a “new” way and the basis of their cooperation shall be put .

Methodology:

- Introduction
- Activities in the circle
- Work in small groups
- Discussion in plenary sessions

Material:

- A poster with the titles of all 12 thematic areas
- A large piece of paper
- A4 paper
- Multi-color markers
- Pens

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- Cards
- Speaker scepter

Procedure:

Introduction (15 minutes)

During the first meeting it is useful to inform students generally on what the health education program is, what its objectives are and what makes it different from all other school subjects. It is also recommended to inform the children about the new learning approach, through which they shall manage to recognize their emotions, raise their self-esteem, find their own identity, comprehend the influences they have from others and make their own decisions about themselves.

Introductory activity (10 minutes)

- Ask children to sit in circle. Explain to them that this configuration helps them look at each other and all of them are equal.
- Ask each one of them to state his/her name and an adjective beginning with the same initial letter as his/her first name and which the students thinks is typical for his/her character (e.g. George-good)
- You may also state your name and an adjective.
- Exchange the thoughts of the group by carrying out this exercise.

Activity 1: “Recommendations” (15 minutes)

As soon as the group members get acquainted, you must explain to the children the applied rules and the way in which meetings shall take place in the circle (one speaker at a time, the others listen carefully, we do not interrupt, we respect the others etc.)

If you wish to have a more transparent procedure, you can use an item (e.g. the speaker’s scepter), held by the child who wishes to speak. As soon as the child ends his/her speech, he/she leaves it in the centre of the circle for the next speaker to pick it up. This item is not passed on hand-in hand. In this way only one person at a time can speak without being interrupted.

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Activity 2: “Wall newspaper”:

Individually (10 minutes)

Ask children to write down on a blank page each one separately what they expect to gain from these meetings.

In small groups (10 minutes)

Afterwards divide the group into an odd number of sub-groups consisting of an odd number of members. In order to secure a random separation you can divide the children into groups based on their date of birth (not year). Form the sub-groups from this alignment without altering the arrangement.

Plenary session (20 minutes)

As soon as the procedure is completed and the sub-groups are back into circle (plenary session), every child from each group (chosen by the group) states the expectations of his/her group. The same is carried out by all groups. All pages are posted on the “wall newspaper”.

During the entire procedure write on the blackboard the main objectives of the groups’ expectations, in order to have at the end a composition of the expectations of all members.

Afterwards, each child proposes a manner to fulfill the purposes (e.g. listen to the others, be reliable etc). All these are written on a big paper. Further on, write down separately what each child will try to do and these shall be the rules. Write down the rules on a big piece of paper and pos it on the blackboard for everyone to see.

Define together with the children the basic rules which are necessary for the performance of the group and for the existence of mutual trust. As soon as the entire group agrees on these rules, then each member of the group signs the “contract”.

The proposed list of basic rules may include the following:

- we speak calmly
- only one child speaks at time
- we listen to the other when he/she speaks
- we wait for our turn to speak
- we respect the others
- we are all equally important
- we trust the others
- we look after the classroom

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Summary-Closure (10 minutes)

Close the meeting with a group discussion asking children about how they felt at the first meeting. Ask the following questions:

- What did you like most or did not like from the things we have done?
- How would you describe our work?
- What new things did you learn?
- Which are your thoughts and emotions when leaving the meeting?

Express your own opinion, thought (not judgment).

Preparation for the 2nd thematic area:

The coordinator/educator, during the 1st meeting of the 1st thematic area, assigns to groups of children the study of specific thematic topic from the CDrom “Pandora’s Box”, so as to be able to proceed to the second thematic area. Alternatively, students can choose the thematic areas.

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THEMATIC AREA 2: Effects on health – Passive smoking “Why should I pay the price?”

Proposed time: 90 minutes

Objectives:

The students:

- must learn about the harmful substances in the cigarette and the course of its use.
- must be able to mention the basic effects of smoking on the smoker’s health.
- must learn about the meaning of passive smoking

Topics:

During the first thematic area of “knowledge” the educational material on the CD-ROM “Pandora’s Box” shall be processed and discussed, on the topics “History of tobacco”, “Anatomy of a cigarette”, “Effects on Health” and “Passive smoking”.

Methodology:

- Topic presentation by groups of children
- Discussion in groups
- Discussion in plenary session

Material:

- CD-ROM “Pandora’s Box”
- Pictures of the human body (from maps) or slides (from the CD) in A4 size or enlarged A3
- A big sheet of paper
- Question cards
- Multi-color markers
- Pens

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Procedure:

Preparation

The CD-ROM “Pandora’s Box” was given to the students during the first meeting. Students, who are divided in groups, undertake to study one of the topics mentioned in paragraph “Topics” in order to present it in the plenary session.

Presentation (60 minutes)

Presentation can have the form of questions asked by a small group of “extraterrestrials”¹, landing on earth, who see smokers smoking and wonder. They describe what they saw to a group of “earthlings” with a lot of humor and imagination that is left up to the children, with the core idea of the “illogical” and incomprehensive “tobacco machine-man”. Group members who have studied the topics, answer the questions of the extraterrestrials, one of them writes down in a few words the data on a big piece of paper on the blackboard.

Stage 1: Explanations

Extraterrestrial 1 (the children can give a name) **describes what he/she saw (a smoker).**

A member of the group who studied the **history of tobacco** explains to the others and the extraterrestrials that this is similar to what the sailors of Columbus saw. Other data from the history of tobacco are mentioned.

A member of the group of extraterrestrials writes down with a marker, the basic data on a piece of paper affixed on the blackboard.

Extraterrestrial 2 asks a question on **what this thing is that the smoker inhales.**

A member of the group who studied the **anatomy of cigarette** explains to the extraterrestrials and other students what he/she knows about cigarettes, the gaseous and solid phase.

A member of the group of the extraterrestrials writes down with a marker the basic data on a piece of paper affixed on the blackboard.

Extraterrestrial 3 asks a question on **how the body can tolerate such things**

- A member of the group, that studied the effects of cigarettes on health, provides information on the main effects, facilitated by other questions (questions cards may be available)

¹ A sample of the scenario with the extraterrestrials is available on the cd-ROM as a suggestion from the groups. It can be amended, supplemented, enriched with imagination, humor and creativity by the participants

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- A member of the group of extraterrestrials writes down the basic data on a piece of paper affixed on the blackboard.
- Extraterrestrial 4 asks questions on what happens to the smoke that is exhaled.
- A member of the group that studied passive smoking explains the effects of passive smoking.
- A member of the group of extraterrestrials writes down with a marker the basic data on a piece of paper affixed on the blackboard.
- Extraterrestrials get dizzy with the things they hear and ask to return to their spaceship to refill energy.

Summary-closure (10 minutes)

The coordinator asks students the following questions:

- What was the most impressive thing from all they have heard?
- Which questions could now the “extraterrestrials” raise after what they have heard?
- Which are the thoughts and emotions of the students when leaving the meeting?

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THEMATIC AREA 3: Addiction – Quitting smoking

“I am not duped.....I cast out smoking”

Proposed time: 90 minutes

Objectives:

- To understand the addictive and entrapping effects of nicotine.
- To learn about the importance of quitting smoking early enough, and about the possibilities of providing help to smokers.

Topics:

During the second thematic area of “knowledge” the information material on the CD-rom “Pandora’s Box” shall be processed and discussed, on the issues “Addiction” and “Quitting smoking”

Methodology:

- Topic presentation by groups of children
- Discussion in groups
- Discussion in plenary session

Material :

- CD-ROM “Pandora’s Box”
- A big sheet of paper
- Question cards
- Multi-color markers
- Pens
-

Procedure

Link with the previous thematic area

The group of extraterrestrials returns mentioning the basic points of the information they gathered in the previous meeting by reading these points from the sheets of papers where they were documented.

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Stage 2: Apology

From the things they heard, the “extraterrestrials” cannot understand how someone can smoke at free will. A member of the group which studied the addiction, a supposed smoker “apologizes” explaining the **addiction** issue.

A discussion concerning the meaning of addiction is carried out. Following questions are asked: Are there daily “normal” addictions? How much can addiction affect our live? Which are the effects on an addicted smoker in his daily life?

Students who have read thematic areas from the CD “The economics of smoking” and “epidemiology data” can give examples and provide information to all members.

Stage 3: “Therapy”

The extraterrestrials ask what happens if someone who fell in the trap and became a smoker recognizes his/her mistake and feels the consequences. Members of the group who studied the chapter “**Quitting smoking**” state the ways to quit smoking and the benefits from quitting it. The extraterrestrials put in mind the power of addiction and it is pointed out how difficult it is to quit smoking definitely.

The class is divided **into small groups** that discuss the following:

- How can smokers be assisted by their family or generally by their social environment.
- Is there a way to find a solution of “co-existence” between addicted smokers and non-smokers and how could this apply. Is it possible to set limits? Which groups are excluded?
- On the content of the anti-smoking poster regarding health.

Plenary session (20 minutes)

The groups state their suggestions. The extraterrestrials write down their suggestions on the piece of paper and promise to help.

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Summary-closing (10 minutes)

The coordinator asks the students the following questions:

- What was the most impressive thing from all they have heard?
- Which are their thoughts and emotions when leaving the meeting?

Use of supervisory material

The group members make a presentation on a topic and choose pictures they can show either from the CD (in form of printed slides of A4 size which can be distributed to other groups which did not study this specific topic, or in A3 “posters” (enlarged from A4 pictures, or the members can use anthropology atlas or models).

Variation

Instead of the “game” with the extraterrestrials, the topics can be presented within a procedure of a “**tobacco court trial**” where the “*prosecution*” states the harmful effects caused from smoking (addiction, diseases, passive smoking). The prosecution can call an expert on the stand to state his/her opinion on every disease by providing evidence from the CD or Internet. The “defense” may refer to the arguments raised by tobacco industries and smokers. The jury (a separate group of children) shall document the evidence and make a verdict.

Remark on the time allocation of the thematic areas 2 and 3

The above procedure of the two cognitive areas 2 and 3, as presented, presupposes that the program is carried out in two continuous teaching hours for each thematic area. This means that the total duration is 2 X 90 minutes.

However if the time made available at a school for the health education lesson, based on the hourly program, is 2 X45 but not continuous, then the cognitive content of each area can be divided approximately in half. When closing each sub-area of presentations, the most impressive information shall be summarized and documented. The extraterrestrials withdraw to think about what they have heard. In the next thematic area the extraterrestrials, this time, put in mind the most basic information. Afterwards the groups can continue with the presentation of the topics.



THEMATIC AREA 4: Tobacco industry profits “Cheated by advertisements”

Proposed time: 90 minutes

Activity 1: Who am I (10 minutes)

Objectives:

- The group should warm up and relax before starting the activities related to the topic.

Methodology:

- Activity in the group.

Material:

- A4 paper sheets with the name of a Greek singer (male or female) written on them.

Procedure:

Out of the childrens' sight, we stick on their back a A4 sheet of paper with the name of a singer (male or female) written on it. Then we ask the children to move free in space and with the help of the other children around them, they try to find out the name stuck on their back. They are allowed to ask any one and anything they wish but the answer must be only a yes or a no.

Activity 2: Tobacco advertisements and their role (20 minutes)

Objectives:

- To realize that tobacco industries, through tobacco advertisements, attract and manipulate the consumers.

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Methodology:

- Brainstorming.
- Semantic chart.
- Plenary session.
- suggestions

Material:

- Blackboard and chalks

Procedure:

5 minutes: The coordinator poses a question to the group: “What do tobacco industries want to achieve through tobacco advertisements?”

By using the method of brainstorming the members of the group state their aspects and the coordinator writes these aspects on the blackboard.

10 minutes: The answers given by the members are assorted in categories by all the members of the group (again using the method of brainstorming), this is followed by a summary of the aspects presented by the coordinator. Afterwards the members discuss on whom tobacco industries are addressed to and if they fulfill their goals.

5 minutes: Short suggestion by the coordinator mentioning the methods applied by tobacco industries in order to attract their customers.

Activity 3: What does the advertiser want to tell us? (60 minutes)

Objectives:

- to realize the methods by which tobacco industries use the tobacco advertisements to attract and manipulate the consumers.

Methodology:

- Activity in the group
- Discussion in plenary session
- Suggestions

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Material:

- Printed cigarette posters from magazines (plastic posters if possible)
- Copy of the Activity 1 sheet (one copy for each group) including the questions following and there must be enough space left to write down the answers.

Procedure

5 minutes: The coordinator divides the group into sub-groups of 4 persons. Each sub-group must name a person who shall take notes and a person who shall represent the group in plenary session.

20 minutes: Each sub-group takes one cigarette poster and within 30 minutes the sub-group must discuss and document the following questions: What does this specific advertisement stand for: Which is the message sent through the advertisement to those staring at it? Which age and type of person is the advertisement addressed to? Do you believe people of your age would like this particular advertisement? If yes, which are the features that make it attractive and effective? How does the advertisement manage to manipulate the consumer?

15 minutes: The group is gathered in plenary session and each sub-group presents its poster and shares its thoughts regarding the poster.

5 minutes: Short suggestion* by the animator on the messages usually sent through advertisements to their potential clients.

Activity 4: Closure (10 minutes)

Objectives:

- to close the meeting by expressing their emotions experienced during the meeting.

* Data on advertisements at the end of Thematic Area 5

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Methodology:

- Activity in plenary session

Procedure:

The coordinator asks the group with all its members present sitting in circle, to express in one word or phrase an emotion or thought arisen from the today's meeting

Activity 1 Sheet

Group:

Our aspects on.....	I document them
What does this specific advertisement stand for:	
Which is the message sent through the advertisement to those staring at it?	
Which age and type of person is the advertisement addressed to?	
Do you believe that people of your age would like this particular advertisement?	
If yes, which are the features that make it attractive and effective?	
How does the advertisement manage to manipulate the consumer?	



THEMATIC AREA 5: I construct an advertisement

“They cannot fool us!!!”

Proposed time: 90 minutes

Activity 1: Magic chair (10 minutes)

Objectives:

- to re-link the meeting with the previous one
- to create a pleasant atmosphere of relaxation and amusement which shall prepare the ground for the activities following
- to link the upcoming activity with those preceded in the previous meeting

Methodology:

- Activity in the group
- Suggestions by the coordinator

Material:

A chair placed in the middle of an empty classroom for the coordinator,

A A4 sheet ,

Activity 2 sheet, including the phrases he/she must say to the group and space left for notes.

Procedure:

10 minutes: The animator mentions phrases (e.g. related to cigarette advertisements) and the group members must take a seat, with reference to the chair, corresponding to their positive or negative attitude towards this phrase. If they fully agree to the phrase they sit on the chair. If they fully disagree they draw themselves back from the chair as far as possible.

The phrases are:

- I happened to like an advertisement and bought therefore its product (it is not necessary that the advertisement is a tobacco ad)
- I believe that tobacco advertisements manipulate

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- I have a favorite tobacco advertisement
- What I look at in an advertisement are the models
- What I like in a tobacco advertisement are the models
- What I like in a tobacco advertisement are the colors
- What I like in a tobacco advertisement is its message.

5 minutes: The coordinator presents to all members of the group what do people look at an advertisement and which are the features of an advertisement that attract most of the people. He/she may refer to the tendency of the specific group in relation to the questions asked.

Coordinator's role:

He/she observes and, if applicable, takes notes on which comments the majority of the group wishes to make for each question. If he/she thinks it is necessary, he/she can summarize the features that attract a person to look at an advertisement and lead this person to buy the advertising product.

Activity 2: An anti-smoking advertisement (65 minutes)

Objectives:

- to construct an anti-smoking advertisement based on their work from previous activities.

Methodology:

- Work in groups
- Discussion in plenary session
- Suggestion

Procedure:

5 minutes: the group is divided in sub-groups of 4 persons.

35 minutes: each sub-group takes its material and begins to construct an antismoking-poster. The given instructions are to have an argumentation for anything they design (why did they use it, what are their goals and who do they address to) and to elaborate during presentation of their poster.

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20 minutes: each group presents its poster and explain the reasons for choosing the specific features, the meaning sent through this advertisement and whom it is addressed to :

5 minutes: Short suggestion by the animator mentioning the features that make an anti-smoking advertisement effective.

If there is enough spare time, the rest of the groups may state their opinion on how they feel, while looking at the specific anti-smoking advertisement and what they like in it and attracts them to look at it (which features are attractive). There is no need to mention what they do not like. They shall focus only on the things that attract them in each anti-smoking advertisement.

Activity 3: Closing of meetings related to tobacco advertisements (15 minutes)

Objective:

- to summarize everything they processed in these two meetings related to tobacco advertisements.

Methodology:

- Activity in the circle

Material:

- A A4 sheet

Procedure:

The group to all members. Each member of the group one at a time (and provided that he/she wishes to speak) states a thought (the first that comes to his/her mind in relation to the topic they elaborated in these two meetings). This thought is accompanied if possible also by an emotion related to it.

Activity Sheet 2 (Only for the coordinator)

- I happened to like an advertisement and bought therefore its product (it is not necessary that the advertisement is a tobacco advertisement)
- I believe that tobacco advertisements manipulate.
- I have a favorite tobacco advertisement

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- What I look at in an advertisement are the models
- What I like in a tobacco advertisement are the models
- What I like in a tobacco advertisement are the colors
- What I like in a tobacco advertisement is its message.

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Observation Sheet for the coordinator (Meeting 2 – Activity 1)

Attitude towards tobacco advertisements	I fully agree (On or next to the chair)	I quite agree (near the chair)	I do not agree (Far from the chair)	I fully disagree (Very far from the chair, at the end of the classroom)
I happened to like an advertisement and bought therefore its product (it is not necessary that the advertisement is a tobacco advertisement)				
I believe that tobacco advertisements manipulate				
I have a favorite tobacco advertisement				
What I look at in an advertisement are the models				
What I like in a tobacco advertisement are the models				
What I like in a tobacco advertisement are the colors				
What I like in a tobacco advertisement is its message				

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Observation sheet for the coordinator (Meeting 2-Activity 3)

Thoughts on tobacco advertisements

Emotions

Theoretical background

- **Methods applied by tobacco industries to attract their customers**

In order to attract their customers, tobacco industries use various promotion activities. These activities are:

- Advertisement
- Offering other products for free by buying a packet of cigarettes
- Offering coupons by which the customer receives a product for free as soon as he/she gathers a certain number of coupons.
- Providing financial offers to shopkeepers who sell cigarettes in order to promote a particular cigarette brand at a prominent spot in the shop.
- Reducing prices in form of short-term offers.
- Continuous creation of images which connect smoking with the basically imaginary satisfaction of the customers' needs and wishes.

The positive response towards these activities is directly related to the intention of the individual to smoke.

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- **Messages usually sent through tobacco advertisements**

Tobacco advertisements use images, which promote messages that drive individuals who are exposed to them, either to start smoking or to continue smoking.

The images used in the advertisements are mostly images of being independent and healthy, enhancing the identity of teenagers. They also use human models that look younger than 25 years old and are particularly attractive to the consumers according to a research (Mazis et al. 1992). In this way, advertisements generate social images related to smoking, on the basis of which smoking is shown as a socially acceptable procedure and as a habit mostly of young people with independent character.

At the same time the advertisements through light cigarettes, promote the impression that some cigarettes (the light ones) are harmless and contribute to a healthy life (Arnett 1999, Pollay 1993). However nothing could be further from the truth since light cigarettes are produced by using special processing and production methods, which allow higher and deeper absorption of tar and nicotine (Etter et al. 2003).

- **Elements usually observed by individuals who are exposed to an advertisement and which advertisement features attract most.**

The effectiveness of cigarette advertisements is influenced by different factors, such as:

- The attitude of the individual towards advertisements in general: Individuals with a favorable attitude towards advertisements are more likely to pay attention to them and be influenced by them.
- The attitude of the individual towards tobacco advertisements: The same happens also with the attitude towards tobacco advertisements. If the attitude is favorable, their influence on the individual exposed to them increases.
- Exposure time: An often and repeated exposure to the advertisement of a product increases its effectiveness especially if the repeated exposure is combined with exposing the individual to different advertising strategies.

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- Advertising strategies applied: When the advertising strategies vary and are renewed for the same product, then the possibility of purchasing the product increases.
- Applied advertising techniques: humor, age of models etc. Humorous advertisements combined with cartoons generate a favorable attitude towards the advertising product, especially on young people. The same happens also with the existence of young models that look younger than 25 years old.
- The route chosen to process information: **Central and peripheral processing.** In central processing the individual processes carefully and thoughtfully the information taken in from the advertisement and focuses on the arguments, while in the peripheral processing, information is processed peripherally focusing on the elements that compose an advertisement such as colors, shapes, models, sounds etc. Tobacco advertisements seem to be peripherally processed. This means that the individuals exposed to them focus much more on the visual part and less on the verbal part.
- The type of involvement in the product, namely the extent and type of the individual's involvement in the product: We are strongly involved in objects of high economical or emotional, social and psychological value etc. The involvement is low when the individual is not interested in searching deeper for information and arguments on the product, either because the individual has already established a strong opinion about the product and its significance in his/her life or because the product has no economical or other value to him/her. The category, in which cigarettes belong, depends on the individuals and the significance of the specific product to them.
- Type of control field: External or internal locus of control. Individuals with an external locus of control contribute everything that happens to them to external factors such as luck, pundits, friends, family etc., they process less information and are influenced by the opinions of the persons that are important to them. On the contrary, individuals with internal locus of control contribute everything that

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happens to them to internal factors, such as emotion, desire etc and tend to seek for information which they widely process and evaluate. Individuals with external locus of control are usually more vulnerable to advertisements than those with an internal .

- The elements of personality (e.g. vanity) (Prepoutsidou 2006).

- **Features that make an anti-smoking advertisement effective.**

- it should be plain, clear and comprehensible by the target group.

- it should be design to meet the age-related, social, cultural and psychological needs of the target group (for teenagers some needs that must be satisfied are freedom, independence, revolution, vigorousness, health, power, belonging to the world of adults, solidarity, participation in the group, imitating row models etc).

- it should not contain any provocative appeals which generate strong emotional reactions, but do not affect the behavior (e.g. a picture with lungs full of malignant tumors and the title smoking kills, may generate strong emotional reactions but it does not alter the behavior).

- If it is addressed to teenagers, it should contain one or more of the following elements: humorous messages, models that look younger than 25 years old, various and intensive colors, cartoons and animals (for children under 12 years old).

- Verbal information should be placed in the right side of the advertisement, pictures in the left side.

- It should be checked that the messages are understandable by the target group (Prepoutsidou, 2006).



THEMATIC AREA 6 : Health – Self-protection
“We have a responsibility to preserve our health”

Proposed time: 45 minutes

Objectives:

- to find alternative solutions for avoiding smoking
- to empower the individual through social activities, which support health promotion.

Methodology:

- Creative work in small groups.
- Presentation in plenary session.

Material:

- Large sheets of paper
- A4 paper
- Multi-color markers
- (optionally: magazines, scissors, glue)

Procedure:

In small groups (20 minutes)

Ask the children to work in small groups and to construct posters or collages, demonstrating social or other favorite activities that prevent smoking (e.g. an athlete who does not smoke, a group of children planting trees etc.)

Plenary session. (20 minutes)

- Present the work to the class
- Discuss on the activities
- Ask:
 - Why do you like them?
 - Which are appropriate for someone who smokes?
 - Which are good for the health? Why? Are they good alternative solutions instead of smoking?

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- Take photos from all the works

Closure (5 minutes)

Group statues:

Students walk through the classroom shaking slightly their head and neck. The coordinator speaks out the word “smokeless”. All the members of the group must form a statue, demonstrating the word “smokeless”. The exercise is repeated using other words or forming another statue.

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THEMATIC AREA 7: Social influence

“Since all other children smoke, why shouldn’t I?”

Proposed time: 45 minutes

Objectives:

teenagers should recognise that:

- their behavior is influenced by what they think is common and socially acceptable
- their peers continue to smoke based on wrong perceptions

Method:

- Suggestions
- Brainstorming
- Work in small groups
- Discussion in plenary session

Topics:

- Which are the factors that influence young people in relation to smoking.
- How are wrong perceptions created in relation to the socially acceptable behaviors.
- What is the smoking prevalence on students

Material:

- Slides or photocopies with statistic data of the research for the smoking prevalence on students.

Content

Introduction to the topic: “Today we shall talk about the factors affecting our decisions and especially about those that affect our decision to smoke or not”.

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Brainstorming:

To your opinion, which are the factors that could influence a student of your age and lead him/her to smoke a cigarette?

Possible answers: if his/her parents smoke, if his/her friends smoke, because he/she is influenced by the advertisements, because he/she wants to play the “smart guy” because it is trendy).

We summarize the answers and affirm that all factors mentioned before affect young people. We focus on the “trend” issue.

Discussion in plenary session:

- Why are we influenced by the “trend”? Why do we do things which we think they are trendy, namely things that most people/youngsters do?

(Possible answers: because we want to be modern and “trendy”, because we do not want to stand out negatively, because we believe that if we do not follow the trend, the others will not like us, etc.)

- How is a “trend” created?

(Possible answers: by the mass media, through movies, from what we see around us, from what we hear etc.).

Possible comments made by the educator:

We have seen in previous thematic areas that especially tobacco advertisements have a strong influence on us. We have also seen that the profits of the tobacco industries are very high. Tobacco industries fund their daily effort to drive us to smoking. One of the methods they use to seduce us is to convince us that smoking is trendy – that “I am a modern young person only if I smoke” and that “since all young people smoke why shouldn’t I smoke, too?”. In reality, however, things can be much different”

Work in small groups (max. 5-6 persons in each group):

Let’s see what happens in our country with students in relation to smoking:

You ask children to answer the following questions:

- In your opinion, how many children of your age (11-15 years old) in Greece have smoked a cigarette at least once in their life? Answer using percentages separately for girls and boys

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- In your opinion, how many children smoke on a daily basis?

Comments made by the educator:

Information from recent researches conducted on students (UMHRI 2005):

*(Information and recent data on smoking amongst students in Greece:
<http://www.educational-center.gr/dmdocuments/ygeia-efibwn-06.pdf>).*

Choose the rates corresponding to the age of the children:

- 11-12 years old: 5,2% of the boys & 2,4% of the girls have smoked at least once in their life.
- 13- 14 years old: 18,5% of the boys & 14,9% of the girls have smoked once in their life.
- 15 -16 years old: 42,6% of the boys & 38,8% of the girls have smoked once in their life.

Conclusions:

Most of the students prefer not to smoke even if it is only for a try!!!

Daily smoking by students (from 1 cigarette/day up to and over 10 cigarettes/day):

- 11-12 years old: 0,8 % of the boys & 0,5% of the girls.
- 13- 14 years old: 2,7% of the boys & 1,4% of the girls.
- 15-16 years old: 0,6% of the boys & 9,2% of the girls.

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Discussion in plenary session:

As soon as all groups present their percentages, they shall discuss on the percentages and on how wrong our impression is in relation with the prevalence.

If it is applicable, namely if there is trust and secrecy amongst the members of the group, then the members can discuss about the students' personal experiences, as well.

Closure:

When closing the thematic area it would be helpful to ask the following questions:

- What new have I learned today?
- What are my thoughts and emotions when leaving the meeting?
- How can I take advantage of the things I learned?

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THEMATIC AREA 8: Resistance to the peer pressure **“How can I make others like me without having to smoke”**

Proposed time: 45 minutes

Objectives:

- to improve the children’s image.
- to support the ability of children to approach their peers with self-confidence
- to train the children to resist against the pressure exercised by their peers

Method:

- Discussion in plenary session, case study, assertiveness exercises

Material:

- A representation of a thermometer on a piece of paper and copies for all children
- Copies of “Giannis” case
- Blank sheets, paper tape and markers for the assertiveness exercises.

Topics:

- How confident are we.
- How can we develop confidence.
- How can we approach the others in a positive way and with confidence.

Introduction to the topic:

Many of the young people are smoking, say that the reason for starting smoking is because their friends smoked and they were afraid that they might lose them, unless they smoked as well, or that they have started smoking because they believed that in this way the others would like them more.

Today we shall deal with friendship and how can we make friends without giving up our beliefs and principles and finally we shall deal with how confident we are.

Exercise:

“The confidence thermometer”

How confident do you feel about yourself (your appearance, how much the others like you, your skills, at what extent can you demand the things you want from the others)?

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Each student receives a sheet of paper and writes down the degree of confidence corresponding to his/her personality.

Further on, he/she picks up a fellow student of his/her trust and shares with him/her what he/she wrote down and how he/she feels about it.

Discussion in plenary session:

- By which factors is our confidence influenced? How can we ourselves influence our confidence?

(Possible answers: self-confidence is a matter of character, family and friends and others play significant role)

During the discussion we can point out that assertiveness is a behavior that can be acquired and practiced. The positive thoughts we have for ourselves are a particularly important element in the development of self-confidence. Nevertheless, it is important to try to be real and not to give up easily our personal choices for the sake of being accepted by the others, because the risk of losing our self-respect is high.

Case study in small groups: “Giannis”

Giannis came recently to our school, he is a new student and does not have any friends neither in the class nor in the neighborhood. He feels very lonely. His parents were transferred in their job and so he had to move to another town and change school in the middle of the school year. His fellow students know each other very well since many years. He is a little shy and finds it hard to make new friends. A fellow student invites him to his birthday party at his house. There are many children there from the class. Giannis gives it much thought. How to go there, what to wear, how to talk to the other children, how will he manage to make new friends. Since he heard that some students from his class smoke, he thinks of taking cigarettes with him in order to impress them and who knows, maybe he smokes one himself. He does not dare to talk to anyone about these thoughts.

- *What would you advice him to do and why? How could he feel more confident about himself? How could he approach his fellow students at the party without the cigarettes?*

Discussion in plenary session:

As soon as each group answers the questions, the questions shall be presented to all members.

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The educator adds his/her comments on Giannis's positive efforts in being more confident about himself and in risking experimenting with new positive and not negative (smoking) behaviors.

Assertiveness exercise:

Introduction: A good way to improve our self-confidence is to let the others tell us our positive skills.

You stick on the back of each student a blank sheet of paper with a paper tape. You ask all students to write down a positive comment to as many students as possible. «:What I like in you is...». You have to point out that the rule is strict, and that no negative comments or indirect statements are allowed!

As soon as all students are finished, each one is allowed to read his/her comments. They comment, share or ask for further information if they wish.

Closure:

When closing the thematic area it would be helpful to ask the following questions:

- What new have I learned today?
- What are my thoughts and emotions when leaving the meeting?
- How can I take advantage of the things I learned?

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THEMATIC AREA 9: Row models

“But adults smoke”

Proposed time: 45 minutes

Objectives:

- teenagers should express emotions and share thoughts in relation to smoking, exercised by their significant adults.
- they should stipulate arguments and express their opinion about their own choices.

Method:

- Discussion in plenary session, role playing.

Material:

- Small items that will help build a scenery for the role playing.
- Small Bristol papers with the description of the roles participating in the role playing.

Topics:

- How do we feel about the adults who tell us not to smoke while they themselves smoke.
- What can we do about the inconsequentiality of the adults
- What decisions do we need to make for ourselves in relation to smoking.

Content:

Discussion in plenary session:

We often hear children say that the adults tell them not to smoke while they themselves smoke. What is your opinion?

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Exercise: “Talk show”

The coordinator describes a show which deals with smoking. This show gives the opportunity to the “young” and the “old” to express their opinions. Hand out the roles to the students, arrange the space where the show shall take place and let the discussion unfold. The rest of the students can act as a live audience and intervene by asking questions or by stating their opinion if they wish. Give students, who will play the roles, a few minutes to prepare.

The TV show “HEALTH” runs a dedication to the restriction of smoking, which as we all know, is a modern disease and the need to restrict smoking is big.

The following persons are invited to the show:

- A doctor focusing on the serious effects of smoking on health.
- A mother, who although a smoker herself, believes that young people should not smoke. She is representing the Parents Union.
- A teacher who used to smoke in the past and is now an active member in anti-smoking campaigns.
- A famous female signer who smokes and wishes to quit.
- A famous actor who participates in tobacco advertisements.
- Two high-school students, representing the students communities and do not smoke.
- A female high-school student, who smokes and regrets for having started it.

The journalist, defender of smoking prevention, wishes to give young people as much as possible the opportunity to state their opinions and to convince them not to smoke.

Processing:

As soon as you “release” the actors from their roles, you give all enough time to comment the things discussed on the show, to state their opinion about each role and about the adult smokers.

Closure:

When closing the thematic area it would be helpful to ask the following questions:

- What new have I learned today?
- What are my thoughts and emotions when leaving the meeting?
- How can I take advantage of the things I learned?



**THEMATIC AREA 10 : I choose arguments:
Cigarettes make me “sick”**

Proposed time: 90 minutes

Objectives:

- children should practice on stating their opinion about smoking

Material :

- Papers - pencils.

Procedure :

- Everybody sits in a circle.
- We stick on the blackboard a big sheet of paper, split in the middle, which contains indicatively the following phrases with positive and negative opinions about smoking :
 - Smoking is my own business
 - My best friend smokes so that the boys and girls like him
 - Smoking is “cool”
 - Smoking “eats up” my pin money
 - Smoking “destroys” my breath

By using the method of brainstorming we ask all children to add other similar phrases on the page hanging on the blackboard.

Further on, we divide the students, in random, into small groups of 4-5 persons.

Each group is asked to create a scenario which shall include as many phrases mentioned above as possible. All members of the group shall play the scenario.

The group which using in its scenario as many arguments as possible and the most clever ones to support its positions, shall be the winner.



THEMATIC AREA 11:

Decisions making

“A contract between you and yourself”

Proposed time: 90 minutes

Objectives:

- the children should practiced in decision- making

Material:

- Papers
- pencils
- markers
- pictures from magazines
- glues

Procedure:

We discuss with the children what conclusions may be drawn from the previous exercise

Which argument that was used, sounded convincing and which can, on the contrary, have weakened the effort?

Did the way by which everyone demanded the acceptance of his/her opinion, influenced the result or not?

Did the tone of voice, the body posture, during argumentation, influence the result?

As soon as the discussion is completed, we shall ask each student to draw up his/her personal contract. He /she can use not only written speech but symbols and pictures as well. H e/she can draw or pick up a picture from those in the magazines to make a collage.

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THEMATIC AREA 12 :

Closure - Evaluation

“Have we really changed” ?

Proposed time: 90 minutes

Objectives:

- to apply the new facts on private life.
- to learn how to analyze and probably achieve short-term and long-term goals.
- to examine ways of securing the positive effects of the program on the group.
- to evaluate (in contradiction to criticize) the positive and negative intervention points.

Methodology:

- suggestions
- Individual work
- Work in small groups
- Discussion in plenary session
- Game (the talking train chain)

Material:

- Photocopy of the evaluation sheet
- Large sheets of paper
- A4 paper
- Multi-color markers
- Pens, pencils

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Procedure:

Beginning (5 minutes)

Remind children of the previous meetings. Was there something they learned and put into practice in their daily life? Listen carefully to what they say.

Introductory procedure (40 minutes)

In small groups (5 minutes)

Divide the group into sub-groups of four persons and let the children discuss with each other the short-term and long-term goals. (e.g. short-term goal: to listen carefully to what others say to him/her, without interrupting them. Long-term goal: to improve his/her relationship with a particular person).

Individually (5 minutes)

Ask children to fill out each one separately the photocopy from the activity sheet given to them.

Plenary session(30 minutes)

The members of each group discuss the goals they have set, they agree on a positive and a negative thing and announce these things as a group to all members.

Evaluation (30 minutes)

Ask children to write down on a sheet of paper, their positive and negative experience from participating in the program. Ask them also to express in brief a positive emotion they have from participating in the program.

Hang the completed sheets on the blackboard and let children make comments in various ways.

Closure (15 minutes)

Ask children to form a train chain in four rows. The train chain moves forwards until a student shouts "tooh!" The student, then, makes a positive comment or expresses a positive emotion. He finishes the game by saying "tooh, tooh!". Then, the train chain moves backwards. The procedure is repeated until almost every student has spoken.

Evaluation sheet of the 12 thematic area

1. What I have learned from the program is
2. Some of the short-term goals are

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3. Some of the long-term goals are
4. A thing I have appreciated or liked is
5. A thing that must be altered or added is ...



Bibliography

1. Community Health Promotion, ACT Community Care: A Puzzle Solver for Health Problems
2. Arnett J, (1999): Winston's "no additives" campaign: "Straight up? "No bull?" Public Health Reports, 114, 6: 522 – 527.
3. Benta Wold (2004): Tobacco use among youth and smoking policies in schools- HBSC and CAS studies . University of Bergen
4. Botvin GJ (2000): Preventing Drug abuse in Schools: Social and Competence Enhancement Approaches targeting individual-level etiology factors. Addict Behav;25(6):887-97.
5. De Vries H., et all (2003): The European smoking prevention Framework approach (ESFA): an example of integral prevention Health education research Theory and practice Vol 18 no 5 611-26
6. Draaijer J., Williams T.(1991), School Health Education and Promotion in the member States of the European Community, The Commission of the European Communities.
7. Etter et al., (2003): What smokers believe about light and ultra light cigarettes Preventive Medicine, 36: 92 – 98.
8. Hartocollis C. (1996): Vers une Generation sans Tabac, Ligue Nationale contre le Cancer
9. Haws, D. (2002): Prevention of psychoactive substance use: a selected review what works in the area of prevention. Geneva: Division of Mental Health. WHO.
10. Hibbell, B., Andersson, B., Ahlström, S., Balakireva, O, Bjarnson, T., Kokkevi, A. and Morgan, M. (2000): Lifetime use of cigarettes, 40 times or more.
11. Η Χάρτα της Οτάβα για την Προαγωγή της Υγείας (1986). Μετάφραση Κ. Σώκου, Ινστιτούτο Υγείας του Παιδιού.
12. Κασαπίδου Ζ., Λεκάκης Γ., Μοστριού Αλ., Μπαφέ Ν., Παυλής Μ., Χαραλαμπίδης Β. (1996): Στηρίζομαι στα Πόδια μου, Εγχειρίδιο για τον Εκπαιδευτικό, Εκδόσεις Κέντρο Εκπαίδευσης για την Πρόληψη της Χρήσης Ναρκωτικών και την Προαγωγή της Υγείας
13. ΚΕ.Θ.Ε.Α., Ε.Ψ.Υ.Π.Ε. (2000): Αγωγή Υγείας, Υπουργείο Εθνικής Παιδείας και Θρησκευμάτων, Γραφείο Αγωγής Υγείας, Αθήνα

addicted to τσιγ



14. Κ.Ε.Θ.Ε.Α Ε.Ψ.Υ.Π.Ε (2000): Αγωγή Υγείας Ψυχική Υγεία και Διαπροσωπικές σχέσεις 11-14 ετών . Αθήνα
15. Κοκκέβη, Α. (2005): Η υγεία των εφήβων, ΕΠΙΨΥ
16. Kokkevi, A., Loukadakis M, Plagianakou S, Politiku K, Stefanis C: (2000) Current regular smoking. Sharp increase in illicit drug use in Greece: trends from a general population survey on licit and illicit drug use. European Addiction Research 6 (1) 42-49
17. Κουρέα – Κρεμαστινού Τζ. (1997): Αγωγή Υγείας στο Σχολείο για την Πρόληψη του AIDS και των ΣΜΝ. Εθνική Σχολή Δημόσιας Υγείας, Τομέας Δημόσιας και Διοικητικής Υγιεινής
18. Mazis et al. (1992): Learning from the Ad or Relying on Related Attitudes: The Moderating Role of Involvement, Journal of Bussiness Research, 25: 81- 93.
19. Μιχαηλίδου Α.(2003) : Το αλφαβητάρι της Αγωγής Υγείας. Θεσσαλονίκη
20. Ντάβου Μπετίνα (1992): Το Κάπνισμα στην Εφηβεία, Εκδόσεις Παπαζήση Α.Ε.Β.Ε.
21. (EU-Dap) European Drug Addiction prevention trial, (υλοποιείται σε χώρες της Ε.Ε): Ξέρω ότι αξίζω (2006)
22. Pollay R. (1993): The changing character of American cigarette advertising: content analysis findings, World Marketing Congress Proceedings VI, Sirgy J, Bain K, Erem T (eds), 297 – 301.
23. Πρεπουτσιδου, Γ. (2006): Διαφημίσεις Τσιγάρων: Ο ρόλος τους στην απόφαση των παιδιών και εφήβων να καπνίσουν. Τρόποι αντιμετώπισης τους. Θεσσαλονίκη.
24. Σώκου Κατερίνα (1994): Οδηγός αγωγής και προαγωγής της υγείας. Ελληνικά Γράμματα, Αθήνα
25. The Flemish institute for health Promotion (2002) : Gender differences in smoking in young people. Brussels
26. The university of Texas Health Science center at Houston (2001): Tobacco prevention initiative media campaign and community program effects among children and adults. Texas
27. The Swedish Council for Information on Alcohol and Other Drugs (1999): The 1999 ESPAD και European School Survey Project on Alcohol and Drugs Report. Stockholm.

addicted to TIA

28. University of Waterloo (2002) : Smoking at any place Secondary school Ontario
29. University of York (1999):Preventing the uptake of smoking in young people. Effective Health care vol. 5
30. USA ,Department of health and Human Services(1994): Guidelines for school health programmes to prevent tobacco use and addiction. Atlanta Georgia
31. United Nations Population Division (2000), World Population Prospects 1950-2050, 2000 revision.
32. WHO Regional Office for Europe , HBSC survey 1997-98 : "Health and Health behaviour among young people in Europe"
33. WHO, (1984). Health Promotion: A discussion document on the concept and principles. Coopenhagen: World Health Organization.
34. WHO, Health and Human Development Programs (HDD) (2004): Model School Health Tobacco Control Intervention,



Table of Contents

ACKNOWLEDGMENTS

PREFACE

INTRODUCTION

PART I: ADVICE AND INSTRUCTIONS TO THE EDUCATORS/COORDINATORS

BEGINNING AND CLOSING A HEALTH EDUCATION THEMATIC AREA

Class Preparation

Closing the thematic area

Evaluation

LEARNING BY EXPERIENCE METHODOLOGY

Teaching methods

PART II: INTERVENTION

INTRODUCTION

INTERVENTION STRUCTURE

EXPERIENCING LEARNING WORKSHOPS

CHECK LIST – BEFORE STARTING

THEMATIC AREA 1: Acquaintance – Cooperation contract

”Smoking: it affects us all”

THEMATIC AREA 2: Effects on health – Passive smoking

”Why should I pay the price?”

THEMATIC AREA 3: Addiction – Quitting smoking

”I am not duped.....I cast out smoking”

THEMATIC AREA 4: Tobacco industry profits “Cheated by advertisements”

THEMATIC AREA 5: I construct an advertisement “They cannot fool us !!!”

THEMATIC AREA 6: Health – Self-protection

”We have a responsibility to preserve our health”

THEMATIC AREA 7: Social Influence “Since all other children smoke, why shouldn’t I..?”

THEMATIC AREA 8: Resistance to the peer pressure

”How can I make others like me without having to smoke”

THEMATIC AREA 9: Row models “But adults smoke”

THEMATIC AREA 10: I choose arguments: Cigarettes make me “sick”

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THEMATIC AREA 11: Decision making “A contract between you and yourself”

THEMATIC AREA 12: Closure – Evaluation “Have we really changed?”

BIBLIOGRAPHY