

Skills for the
Primary School Child
Part 5

The World of Alcohol



Contents

Introduction	4
---------------------	---

Lessons

Lesson One:	Healthy Lifestyles	8
Lesson Two:	Drinks - What's the Difference?	20
Lesson Three:	Alcohol: What Is It?	24
Lesson Four:	Responsible and Sensible Drinking	28
Lesson Five:	Making Choices and Decisions	32
Lesson Six:	Keeping Safe with Alcohol	35
Lesson Seven:	Our Display	40

Workshops for Teachers, Parents, Governors and Whole School Staff
 Guidelines for Running the Workshops

Workshop Activities

Activity 1:	What Is Alcohol Anyway?	47
Activity 2:	Why Alcohol Education for 9-11 Year Olds?	50
Activity 3:	Attitudes and Values About Alcohol	52
Activity 4:	What Do We Want to Achieve in Alcohol Education?	54
Activity 5:	Key Features of Alcohol Education	58
Activity 6:	The Lesson Cards	60
Activity 7:	Policy Issues	61
Activity 8:	Beginning to Design a Policy (1)	63
Activity 9:	Designing an Alcohol Policy (2)	64
Activity 10:	Implementing the Policy	65
Activity 11:	Community Involvement	67

Background Papers

Paper 1	Alcohol Education and the Curriculum	68
Paper 2	Children and Young People and Alcohol	72
Paper 3	The Health-Promoting School	80
Paper 4	The Use of Visitors in the Classroom	81

The material comprises a programme of alcohol education for 9-11 year olds in the primary school. It has been written, trialled and evaluated by Tacade.

THE PROGRAMME CONTAINS:

- lessons for teachers to use with 9-11 year olds, including photocopiable Lesson Handouts (LH)
- workshops for use with teachers, parents, governors and whole school staff, and includes photocopiable Workshop Handouts (WH)
- background papers, providing additional information to support the materials.

The purpose of the material is to provide a comprehensive approach to dealing with a sensitive area of health education - that of alcohol education. It is underpinned by the following key principles:

- that alcohol use is a cultural norm in current UK society
- abstinence is an equally valid alternative for some people and cultures
- behaviour which avoids the misuse of alcohol should be encouraged
- alcohol education should begin in the primary school in order to encourage healthy behaviour before most attitudes, values and behaviours, including those in relation to alcohol use, are fully conceptualised
- alcohol education should be placed within a context of personal and social and health education and the development of lifeskills
- the varying attitudes and values which different cultures and societies hold about alcohol should be respected
- parents, governors, whole school staff and the local school community should be encouraged to become involved in the school's health education provision
- training to use the classroom materials, to enhance teacher confidence and competence, and in order to develop an understanding of the key issues is important.

THE WORLD OF ALCOHOL PROMOTES AN APPROACH WHICH:

- is child-centred and views children as unique individuals
- explores attitudes and behaviour as well as knowledge
- develops personal and social skills
- aims to empower children to take increasing responsibility for themselves and their actions
- places importance on helping children to value themselves and others and on learning to help and support each other
- uses active and participatory learning methods
- is flexible, complementing the broad personal social and health education curriculum provision.

In recent years, several documents have been published which support this approach, notably:

Drugs: Guidance for Schools (DfES, 2004)

Drugs: Guidance for Schools Circular 2004/9 (DENI, 2004)

Substance Misuse: Children and Young People: National Assembly for Wales Circular No: 17/02 (Welsh Assembly Government, 2002)

Personal and Social Education Framework for 7 to 19 year olds in Wales (Welsh Assembly Government, 2008)

A Curriculum for Excellence (Learning and Teaching Scotland, 2009)

[See Background Paper 1: *Alcohol Education and the Curriculum* for relevant extracts from these and other documents.]

WHY TEACH PRIMARY SCHOOL CHILDREN ABOUT ALCOHOL?

From a very early age, children and young people develop a sophisticated awareness of alcohol and drinking behaviour. It appears that regular drinking, that is at least once a week, often begins at an early age.

[See Background Paper 2: *Children and Young People and Alcohol* for specific information on alcohol use by children and young people.]

Research would indicate that the majority of young people have experienced the taste of alcohol by the age of 13. This is not to say that most young people use alcohol regularly or that they misuse alcohol. Some use of alcohol by children and young people is guided by parents as part of the growing-up process, for example the diluted glass of wine or shandy with a meal. Other children and young people may be using alcohol inappropriately and without their parents' knowledge. It is increasingly easy to obtain alcohol from places such as supermarkets and the pressure from friends to try and use can often lead to experimentation.

It is, therefore, very difficult to know the precise time to introduce some of the issues surrounding alcohol use. The appropriate level and nature of input may differ among children according to their own experience and exposure to alcohol use. Nevertheless there is a need to acknowledge that most, if not all, children are exposed to alcohol at a relatively young age through the media, through parents and siblings' use and through the general exposure to a culture that sees alcohol as the most popular drug of choice, which is legal from certain ages under certain conditions.

What is also evident is the need to address the issue of avoiding alcohol misuse and the personal, social and health problems that can occur if and when alcohol is used irresponsibly. Too often education and prevention initiatives have

waited to address these issues until the problems occur or until the alcohol use is a formalised pattern of behaviour, based on formalised attitudes.

The Portman Group Taskforce on Underage Alcohol Misuse document, *Under the Influence* (1997), recommends that 'alcohol education should be introduced consistently and in an appropriate form at primary school level'. The various documents highlighted in the Background paper 1: *Alcohol Education and the Curriculum* all similarly recommend that alcohol education should begin at the primary school. The Portman Group Taskforce organised Under 18 Panel Meetings as part of the project. The young people's (10-17 age range) suggestions included 'a clear need for more systematic alcohol education; alcohol education should emphasise the fact that moderate, responsible drinking is the norm; and that alcohol education should be introduced at primary school level'.

Increasingly it is being recognised that the time to address knowledge and attitudes in relation to behaviour, including alcohol use behaviour, needs to happen before attitudes and behaviour are formalised. The challenge is how to address such important concepts as responsible use; skills to resist the pressures to misuse; and to develop the knowledge, attitudes, values and skills about deciding if and when to use and how to use before the problems occur and before inappropriate use begins.

This programme will help teachers, parents, school governors and whole school staff address these sensitive but crucially important issues.

PARENTS WITH DRINKING PROBLEMS

Tackling any issue which involves personal behaviour is sensitive and will be handled by the teacher in a way which acknowledges this sensitivity. Children are unique and all have different needs and experiences which they bring to the classroom. They will also all be at different stages of development in terms of their 'drinking careers'. All health education, including alcohol education, must start 'where children are at'. Some will

be barely aware of alcohol and its effects, some will have already embarked on a pattern of drinking and some will be the children of a parent with a drinking problem. If a child chooses to disclose about a drinking problem at home, the teacher will need to refer to the head teacher, the school health education policy, and consult appropriately. The child may be at risk and the school will need to refer to the relevant professionals who will provide the necessary support.

USING THE WORLD OF ALCOHOL

The lessons and activities contained in this programme are not sequential. The teacher has to decide which lessons or which activities to use, when and with whom. The needs, knowledge and developmental stages of children will vary enormously and it is left to the professional expertise of the teacher to decide how and when it is best to embark on this sensitive topic. It is suggested, however, that the first lesson and its activities should be part of the core provision along with other relevant lessons or activities chosen by the teacher.

Each lesson contains several key activities, plus some suggested Extension Activities to explore particular issues in greater detail.

THE LESSON CARDS ARE STRUCTURED IN THE FOLLOWING WAY:

- **Lesson Purpose:** the intended learning outcomes
- **Key Message:** the main focus
- **Pre-lesson Activity/Preparation:** suggested activities for the children to undertake prior to the lesson, and teacher lesson preparation requirements
- **Lesson Overview:** the lesson activities 'at a glance'
- **The Wordbox:** a collection of words relating to the lesson content
- **Lesson Format:** the complete lesson in detail
- **Reflection and Evaluations:** key questions to help consolidate the learning in the lesson activities

- **Home and Family Work:** potential links with home
- **Extension Work:** suggestions for extending the learning
- **Lesson Handouts (LH):** photocopiable handouts for use with the activities

N.B. The lessons vary in the length of time required for completion. The teacher should initially read through each lesson, select the activities and assess the time required dependent on factors such as children's ability, existing knowledge and interest.

Key to Symbols shown on each Lesson Card

Children Working:



Individually



In pairs



In small groups of 4/5 children



As a whole group

Abbreviations:

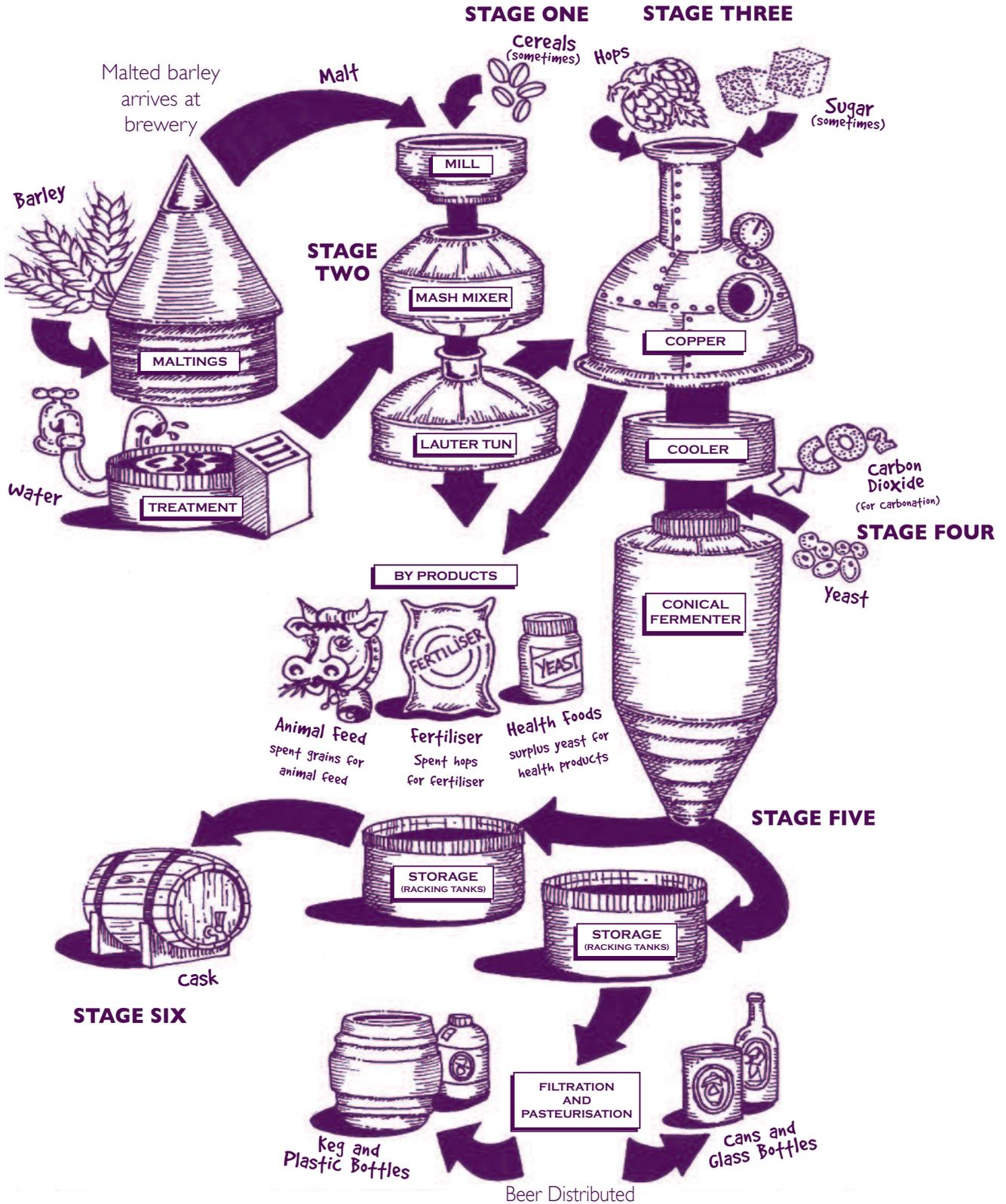
LH : Lesson Handout

WH: Workshop Handout

The training workshops are an essential extra. They are designed to:

- offer an opportunity for whole school staff and parents and governors to work together
- provide information about alcohol and alcohol issues
- support teachers with the necessary skills and confidence to teach the programme in the classroom
- help teachers to select the lessons and activities that meet their needs, the needs of the school and community, and the needs of their pupils.

How is it made?... brewing beer



Stage One

Malted barley ground down into **GRIST** (a coarse flour).

Stage Two

Hot water added to the grist. The liquid produced (called **SWEET WORT**) contains sugars.

Stage Three

Hops are added to the Sweet Wort solution and boiled to produce a bitter **HOPPED WORT**. Hops removed, solution cooled.

Stage Four

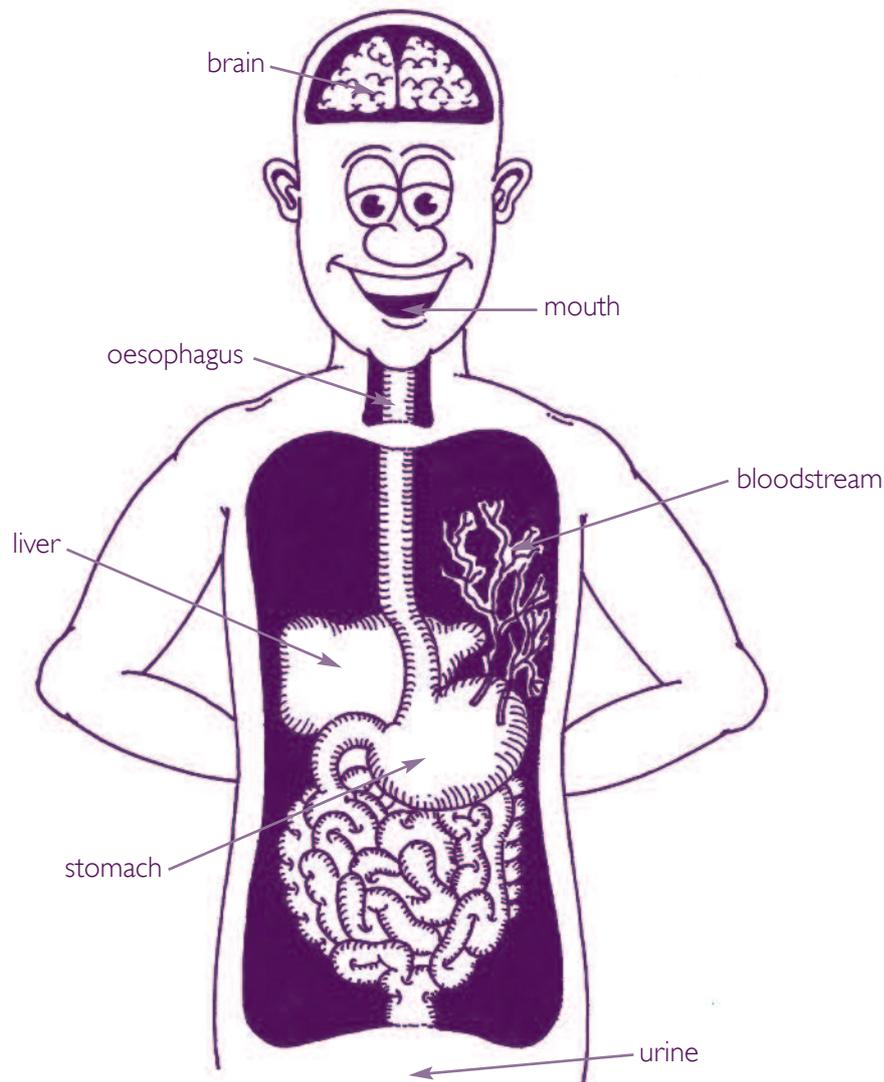
YEAST added to **FERMENT** the hopped wort. The yeast converts the sugars into alcohol. **CARBON DIOXIDE** also produced.

Stage Five

Beer matured in a **CASK**. Sugar and finings (to clear the beer) added. Clear beer produced, chilled, filtered and carbon dioxide added.

Stage Six

Beer packaged into draught or cans/bottles. Beer **PASTEURISED** to prevent spoilage by micro organisms.



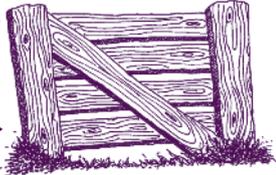
- Alcohol can be considered as a food, as a drug and as a poison. It can be used by one's body to provide energy. Alcohol is extremely soluble in water. When it is drunk it does not need digesting and will go directly into the bloodstream, with some immediate effects.
- Alcohol is drunk, passes down the oesophagus or food pipe, and into the stomach. It passes into the bloodstream and is carried around the body, quickly reaching the brain. Once there, it begins to affect the way in which the brain works.
- Alcohol is a depressant drug. It depresses, or slows down, the brain.
- Almost all the alcohol taken into the body is broken down by the liver, the largest organ in the body. Only between 5 per cent and 10 per cent is excreted as urine through the kidneys, or as sweat through the skin, or in the breath by the lungs.

Food and Drink

Try to crack the following coded message:

WE ALL NEED TO  **AND**  **OTHERWISE**

WE WOULD  **WATER**  **AND OTHER** 

ARE ALSO VITAL FOR US TO LIVE, OTHERWISE
WE  **D**  **RY UP OR DEHYDR**

IT IS IMPORTANT
T  **WE EAT THE** 

SORT OF  **TOO MUCH OF THE**
WRONG FOODS 

MAKE US  **UN** **THE SAME IS**
TRUE FOR 

If you have decoded this message so far can you now list as many foods and drinks as possible. Use your own 'codes' and then ask others in your group to identify the different foods and drinks, and your message.

Eg (picture of fish) and 'c' (plus a picture of chips), (picture of lemon + 'ade').