



# ALCOHOL AND CANNABIS

## Facts - Effects - Support

Workshop implementation guide for facilitators

*Age recommendation 16-25*

with thanks to

**Longleigh**  
Foundation

Funding that enables lives to be transformed

**Life-Stuff.org**  
Facts & advice for  
young adults

**Alcohol  
Education Trust**  
Keeping young people  
safe around alcohol

**TALK** ABOUT  
ALCOHOL

This guide is written and produced by The Alcohol Education Trust, [alcoholeducationtrust.org](https://alcoholeducationtrust.org).  
Information within this guide is based on Government and the UK Chief Medical Officers' guidelines  
and was current when going to press in March 2023.

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# CONTENTS

## ABOUT THE ALCOHOL EDUCATION TRUST

## INTRODUCTION AND OBJECTIVES

## RESOURCES TOOLKIT

### ALCOHOL WORKSHOP

#### **SESSION 1** (Allow 1.5 hours)

- Setting ground rules
- Ice breaker questions
- Motivations for drinking
  - Worksheet activity
- Drinks and units
  - What is a unit?
  - How many units in a drink?
- Responsible drinking
  - Low risk drinking guidelines
  - When not to drink
  - Activity to embed learning
  - The alcohol clock activity
- Being aware of the risk of drink spiking

#### **SESSION 2** (Allow 1.5 hours)

- Alcohol and its effects - physical and social
  - How is alcohol broken down by the body
  - The short and long term effects of drinking too much alcohol
  - Match the consequences activity
  - Film clip activity
  - Safer drinking

#### **SESSION 3** (Allow 2 hours)

- When does drinking alcohol become a problem?
  - Alcohol and the law
  - Alcohol anger and violence
  - Alcohol and relationships
  - Consent and how alcohol affects it
- Alcohol and mental health
  - Drinking to cope – recognising the signs
  - Alternative strategies to help combat anxiety, stress or loneliness
  - Alcohol and antidepressants
- Where to go for help and support
- Reflection and evaluation

### CANNABIS WORKSHOP

#### **SESSION 1** (Allow 2 hours)

- Preparation
- Setting ground rules
- Ice breaker questions
- The effects of cannabis
- Cannabis and the law
- Is cannabis safe?
- Cannabis can cause depression
- Using alcohol and cannabis together
- Cannabis and antidepressants
- Resilience
- Myths and questions about cannabis
- Recognising the signs of dependency
- How drugs can increase vulnerability to gangs and grooming
- What to do if someone needs help having taken drugs
- Reducing stress and anxiety
- Clouds activity
- Reflection and evaluation

## ABOUT THE ALCOHOL EDUCATION TRUST

The Alcohol Education Trust is a small focused charity which works across the UK to keep young people safe around alcohol and other substances. We are a leading early intervention charity that supports young people aged 11 – 25 in making more informed life choices through the 4,500 schools and youth organisations we support free of charge with our award-winning resources and training.



# INTRODUCTION AND OBJECTIVES

The Alcohol Education Trust is a national charity which for the last decade has worked across the UK to ensure that young people have the skills, knowledge and resilience to make safer choices around alcohol and other substances and to reduce negative risk taking.

These workshops have been developed for young adults aged 16-25. The materials will not only cover information and guidance regarding the safer use of alcohol, but will help attendees develop the resilience and coping strategies to help avoid problem drinking. Participants will learn about the mental and physical effects of cannabis, the risks of using it with alcohol and will gain a greater understanding of the dangers of escalating use. They will learn how to recognise the signs of dependent drinking and drug use and where to go for help and support.

The workshops can be broken down into topics and we recommend delivery, if possible, over at least four sessions – allow 1 hour and 30 minutes to 2 hours for each. The activities and toolkit can be used in small groups, but the resources are also designed to be adapted for one to one work with clients where preferred.

The workshop implementation guide works in tandem with the bespoke PowerPoints, film clips on relevant topics, on line activities via [talkaboutalcohol.com](http://talkaboutalcohol.com), as well as real time activities for you, the facilitator, to deliver. The resources, complete with a USB stick and laminates, come in a resource toolkit, which can be ordered from [kate@alcoholeducationtrust.org](mailto:kate@alcoholeducationtrust.org).

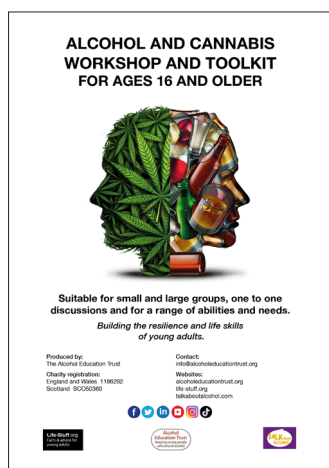
**The workshop implementation guide, resource toolkit and PowerPoints will:**

- Provide attendees with the information and skills to encourage positive life choices to enable better wellbeing;
- Equip young adults with the knowledge to stay safe when going out;
- Give a greater understanding of the dangers of poly use of cannabis and alcohol;
- Help young people to develop resilience and coping strategies to help avoid problem drinking and regular cannabis use;
- Enable participants to recognise the signs of dependent drinking and drug use and to know where to go for help and support.

All materials have been created and adapted by the Alcohol Education Trust. For more information and guidance email [info@alcoholeducationtrust.org](mailto:info@alcoholeducationtrust.org)

There are some additional resources that are not used within the workshops, but are included in the resource toolkit as they may be considered useful. The toolkit also contains a USB with all the resources referenced including some film clips.

Our website [life-stuff.org](http://life-stuff.org) has tips, info and support to help those aged 16-25 to cope with health, wellbeing and social issues and has comprehensive help and support information.



# RESOURCE TOOLKIT

A USB included in the toolkit contains all resources listed below and film clips

## ALCOHOL

### Alcohol workshop PowerPoint

[alcoholeducationtrust.org/rtk\\_alcohol\\_workshop/](https://alcoholeducationtrust.org/rtk_alcohol_workshop/)

### Why people choose to drink or not drink alcohol blank worksheet

[alcoholeducationtrust.org/rtk\\_why\\_choose\\_to\\_drink\\_blank/](https://alcoholeducationtrust.org/rtk_why_choose_to_drink_blank/)

### Why people choose to drink or not drink alcohol completed sheet

[alcoholeducationtrust.org/rtk\\_why\\_choose\\_to\\_drink\\_ans/](https://alcoholeducationtrust.org/rtk_why_choose_to_drink_ans/)

### Fact or fiction? Quiz questions and answers

[alcoholeducationtrust.org/rtk\\_fact\\_or\\_fiction/](https://alcoholeducationtrust.org/rtk_fact_or_fiction/)

### True or false emoji quiz - questions

[alcoholeducationtrust.org/rtk\\_emoji\\_quiz\\_questions/](https://alcoholeducationtrust.org/rtk_emoji_quiz_questions/)

### True or false emoji quiz - answers

[alcoholeducationtrust.org/rtk\\_emoji\\_quiz\\_answers/](https://alcoholeducationtrust.org/rtk_emoji_quiz_answers/)

### How many units in a drink? fact sheet

[alcoholeducationtrust.org/rtk\\_how\\_many\\_units/](https://alcoholeducationtrust.org/rtk_how_many_units/)

### What you need to know about drinking and driving fact sheet

[alcoholeducationtrust.org/rtk\\_drink\\_driving\\_factsheet/](https://alcoholeducationtrust.org/rtk_drink_driving_factsheet/)

### What is foetal alcohol spectrum disorder? fact sheet

[alcoholeducationtrust.org/rtk\\_what\\_is\\_fas/](https://alcoholeducationtrust.org/rtk_what_is_fas/)

### Higher harms cards and instructions

[alcoholeducationtrust.org/rtk\\_higher\\_harms/](https://alcoholeducationtrust.org/rtk_higher_harms/)

### Drinks and units sheet

[alcoholeducationtrust.org/rtk\\_drinks\\_and\\_units/](https://alcoholeducationtrust.org/rtk_drinks_and_units/)

### Emoji cards

[alcoholeducationtrust.org/rtk\\_emoji\\_cards/](https://alcoholeducationtrust.org/rtk_emoji_cards/)

### Unit cards

[alcoholeducationtrust.org/rtk\\_unit\\_cards/](https://alcoholeducationtrust.org/rtk_unit_cards/)

### Drink spiking fact sheet

[alcoholeducationtrust.org/rtk\\_drink\\_spiking\\_sheet/](https://alcoholeducationtrust.org/rtk_drink_spiking_sheet/)

### How too much alcohol affects the body (blank) work sheet

[alcoholeducationtrust.org/rtk\\_alcohol\\_body\\_blank/](https://alcoholeducationtrust.org/rtk_alcohol_body_blank/)

### How too much alcohol affects the body (complete) work sheet

[alcoholeducationtrust.org/rtk\\_alcohol\\_body\\_ans/](https://alcoholeducationtrust.org/rtk_alcohol_body_ans/)

### Consequence cards and instructions

[alcoholeducationtrust.org/rtk\\_consequences\\_cards/](https://alcoholeducationtrust.org/rtk_consequences_cards/)

### 0 2 4 6 + Consequences sheet

[alcoholeducationtrust.org/rtk\\_0\\_2\\_4\\_6\\_consequences\\_sheet/](https://alcoholeducationtrust.org/rtk_0_2_4_6_consequences_sheet/)

### Tips for safer drinking sheet

[alcoholeducationtrust.org/rtk\\_tips\\_for\\_safer\\_drinking/](https://alcoholeducationtrust.org/rtk_tips_for_safer_drinking/)

### Alcohol and the law sheet

[alcoholeducationtrust.org/rtk\\_alcohol\\_and\\_law/](https://alcoholeducationtrust.org/rtk_alcohol_and_law/)

### Where to go for help and support sheet

[alcoholeducationtrust.org/rtk\\_where\\_to\\_go\\_for\\_help/](https://alcoholeducationtrust.org/rtk_where_to_go_for_help/)

### Workshop evaluation - alcohol, printable form

[alcoholeducationtrust.org/rtk\\_evaluation\\_alcohol/](https://alcoholeducationtrust.org/rtk_evaluation_alcohol/)

## CANNABIS

### Cannabis workshop PowerPoint

[alcoholeducationtrust.org/rtk\\_cannabis\\_workshop/](https://alcoholeducationtrust.org/rtk_cannabis_workshop/)

### Cannabis emoji quiz - questions

[alcoholeducationtrust.org/rtk\\_cannabis\\_emoji\\_quiz\\_questions/](https://alcoholeducationtrust.org/rtk_cannabis_emoji_quiz_questions/)

### Cannabis emoji quiz - answers

[alcoholeducationtrust.org/rtk\\_cannabis\\_emoji\\_quiz\\_answers/](https://alcoholeducationtrust.org/rtk_cannabis_emoji_quiz_answers/)

### Cannabis fact sheet

[alcoholeducationtrust.org/rtk\\_cannabis\\_factsheet/](https://alcoholeducationtrust.org/rtk_cannabis_factsheet/)

### Negative effects of cannabis on the body (blank)

[alcoholeducationtrust.org/rtk\\_cannabis\\_body\\_simple\\_blank/](https://alcoholeducationtrust.org/rtk_cannabis_body_simple_blank/)

### Negative effects of cannabis on the body (completed)

[alcoholeducationtrust.org/rtk\\_cannabis\\_body\\_simple\\_ans/](https://alcoholeducationtrust.org/rtk_cannabis_body_simple_ans/)

### Where to go for help and support sheet

[alcoholeducationtrust.org/rtk\\_where\\_to\\_go\\_for\\_help/](https://alcoholeducationtrust.org/rtk_where_to_go_for_help/)

### Mixing alcohol and drugs fact sheet

[alcoholeducationtrust.org/rtk\\_mixing-alcohol\\_and\\_drugs/](https://alcoholeducationtrust.org/rtk_mixing-alcohol_and_drugs/)

### Cannabis traffic light cards

[alcoholeducationtrust.org/rtk\\_cannabis\\_traffic\\_light\\_cards/](https://alcoholeducationtrust.org/rtk_cannabis_traffic_light_cards/)

### Drugs wheel

[alcoholeducationtrust.org/rtk\\_drugs\\_wheel/](https://alcoholeducationtrust.org/rtk_drugs_wheel/)

### Workshop evaluation - cannabis, printable form

[alcoholeducationtrust.org/rtk\\_evaluation\\_cannabis/](https://alcoholeducationtrust.org/rtk_evaluation_cannabis/)

# ALCOHOL WORKSHOP



PowerPoint link: [alcoholeducationtrust.org/rtk\\_alcohol\\_workshop/](https://alcoholeducationtrust.org/rtk_alcohol_workshop/)



## SESSION 1

### Setting ground rules

The PowerPoint includes some examples of ground rules that can be set by the group before the workshop begins. You may choose to put up a blank slide and let the group set all the boundaries for a safe and confidential working group themselves or you can use these as a starting point and ask participants if they have others to add.

It is also recommended that you have an 'ask it basket' where attendees can confidentially post a question or concern without needing to share it with others. This can be a lidded container with a slot, but it should look professional and secure.

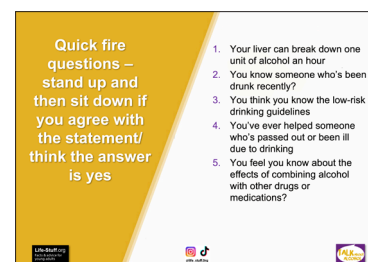
N.B. Alcohol can act as a trigger for some participants. It is highly recommended that the workshop and its contents should be discussed in advance with each planned participant to ensure that there are not any personal or family issues around dependency, domestic violence, addiction, neglect, sexual assault or grooming that might make group work unsuitable or destabilising for them. The facilitator can prepare by having time out cards to hand out, so that people can leave the room if they are affected and, if needed, have access someone to talk to.



### Ice breaker questions

The optional ice breaker activity for the workshop uses questions that help establish the knowledge and confidence of the group and so give the facilitator an idea of knowledge and engagement in the topics to be covered in the workshop. It is good to ask participants to stand up and then sit down immediately in response – this gets them physically engaged from the beginning and can help overcome shyness or the likelihood of stronger characters dominating.

The questions also look to influence social norms from the outset – that is, that most people OVER estimate the number of young people who drink to get drunk or binge drink. This over estimation increases the likelihood of drinking or the feeling of pressure to drink. By correcting perceptions of levels of drinking, we give people the confidence to feel that it's more normal for them to choose soft drinks if, for example, they don't want to drink or get drunk. It also helps those drinking more to think about their levels of consumption and how others behave.



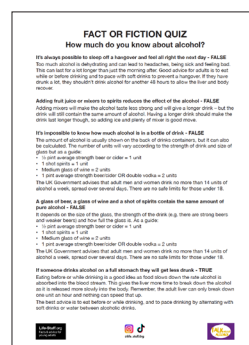
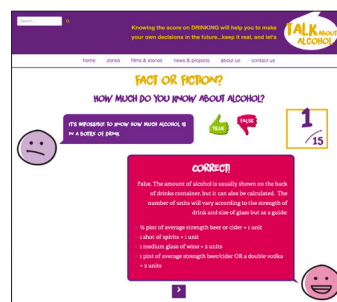
### Background detail for PowerPoint answers

- 78% of adults in England and Scotland drink within the Chief Medical Officer's low-risk guidelines of up to 14 units a week and the overwhelming majority of young adults don't binge drink or drink to drunkenness when they go out. In fact, one in five adults choose not to drink at all.
- Overall consumption has fallen by around 16% since 2004 and binge drinking rates have halved over the same time, so young people are drinking less often and less alcohol.
- More men choose to drink than women, but more young women than men report drunkenness or a hospital admission because of alcohol. This may be due to young women eating less before or while drinking and drinking more spirits than men, who drink more beer and cider.
- Young people in the UK drink less than those in Ireland, Denmark and Germany but more than young people in France, Spain, Italy, Greece and the USA, for example.

References: Office for National Statistics (2018). Adult drinking habits in Great Britain: 2017; NHS Digital (2019). Smoking, Drinking and Drug Use among Young People in England 2021; NHS Digital (2022). Health Survey for England, 2021: Adults' health related behaviours report (version 2); Public Health England (2022). Local Alcohol Profiles for England; Alcohol-related NHS hospital admissions in England; HBSC 2020 reports.

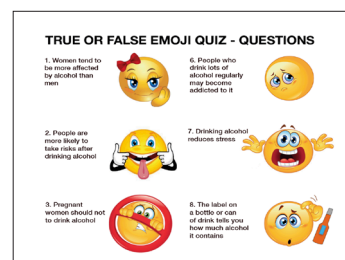
## Online ice breaker question alternatives

As an alternative you can ask participants to log on to: [talkaboutalcohol.com/fact-or-fiction-16/](https://talkaboutalcohol.com/fact-or-fiction-16/) where they can answer randomly selected questions on their phone and provide feedback on their scores – or you can ask them to read out the questions and say what answer they would give. The same quiz is available as a laminate of facilitator quiz questions and answers in the toolkit. [alcholeducationtrust.org/rtk\\_fact\\_or\\_fiction/](https://alcholeducationtrust.org/rtk_fact_or_fiction/)



In addition, there are 10 'True or false emoji quiz questions' in the resource toolkit [alcholeducationtrust.org/rtk\\_emoji\\_quiz\\_questions/](https://alcholeducationtrust.org/rtk_emoji_quiz_questions/) that you can use in the same way. Hand out one to each participant, ask them to read out the question and give an answer before looking at the answer sheet [alcholeducationtrust.org/rtk\\_emoji\\_quiz\\_answers/](https://alcholeducationtrust.org/rtk_emoji_quiz_answers/). Discuss and share misconceptions.

You can use these questions again after the workshop to benchmark improvements in knowledge and attitudes with the group.

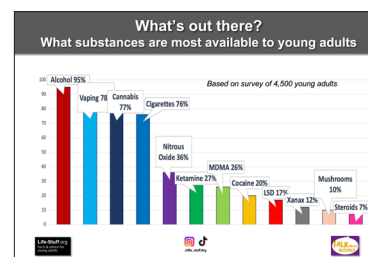


## Motivations for drinking

Alcohol is by far the most available substance out there, but cannabis is at least as prevalent as cigarettes/ vaping.

### Worksheet activity

This activity uses the blank worksheet 'Why people choose to drink or not drink alcohol' [alcholeducationtrust.org/rtk\\_why\\_choose\\_to\\_drink\\_blank/](https://alcholeducationtrust.org/rtk_why_choose_to_drink_blank/) and a completed version [alcholeducationtrust.org/rtk\\_why\\_choose\\_to\\_drink\\_ans/](https://alcholeducationtrust.org/rtk_why_choose_to_drink_ans/) in the resource toolkit.



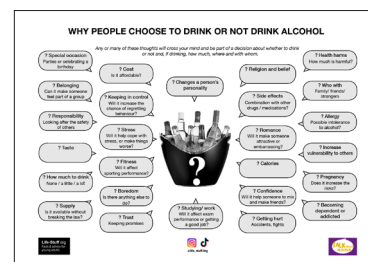
### Opening Question: Do you know what alcohol is?

**Answer:** Alcohol is produced from the sugar contained in fruits, vegetables, cereals and plants, by a process called fermentation. Yeast converts the sugar into alcohol and carbon dioxide – a natural process. The amount of alcohol in drinks can be increased by a boiling process called distillation. This makes spirits such as gin, vodka, whisky and rum, which usually contain about 40% pure alcohol.

Alcohol is a legal drug. A drug is defined by the UN as something you take that changes how you think, feel or act. Alcohol is a depressant, in that it slows down your nervous system and alters your mood, behaviour, judgement and reactions. If abused, it can lead to dependency or addiction.

We recommend that you:

- Organise participants to work in small groups, with each group thinking about one of the questions that follow.
- Ask them to rank their reasons as high or low risk. Suggest that they use post-it notes, and then you can discuss and reorder these motivations.
- Introduce the notion of how the decision to consume alcohol is associated with different reasons: where you drink (on own to cope versus out for a pint with a meal), speed of drinking (with food, pacing with soft drinks).
- The answer sheet will help you expand some of the motives to extend the discussion beyond the more positive reasons your group will give for drinking or not.





### Questions for groups:

#### Question 1: Why do you think 3 in 10 under 25s choose not to drink?

Answers might include: religion, don't like the taste, don't feel the need, health reasons, might lose control and do something stupid, it's fattening, changes behaviour, makes you more vulnerable to risk.

#### Question 2: Do young people give different reasons for drinking compared to older adults?

Example answers: rebel, feel grown up, cool, peer pressure, curiosity - Talk about why this could be risky. Adults drink for some of the same reasons (e.g. to relax, socialize, stress, confidence).

#### Question 3: Why do many adults choose to drink?

Answers may include: to relax, be sociable, unwind, forget worries, stress, to feel more confident, to cope, to celebrate, to have fun, to fit in – it's difficult to say no, to rebel, to get a buzz, nothing else to do, to feel cool, to get plastered.

#### Question 4: Where do people choose to drink?

At pub, at home, at clubs, in the park, on a beach, in a restaurant.

At any point you can use the high risk/ low risk continuum, whereby you ask participants to rank the reasons for drinking and places where people might drink as high risk, medium risk or low risk. Hence drinking in the park might be chosen as 'high risk', whereas drinking to relax might be categorised as 'low risk'. You can use the completed sheet to stimulate further discussions on why people choose to drink or not.

### Expanded answers to questions that may arise

#### Calories?

Alcohol is fat-free but high in calories. A standard half litre of beer has approximately 130 calories, as does a 150ml glass of dry wine. Alcohol can also make you feel hungry, it stimulates your appetite while reducing your self-control, so you're more likely to binge eat if you binge drink.

#### Allergy?

Some people, especially Asians, lack the gene that breaks down alcohol and therefore alcohol consumption can lead to facial flushing and them feeling very sick.

#### Stress?

A little alcohol may help someone feel relaxed, but drinking more than that can lead to someone feeling tearful abusive or angry. Large quantities of alcohol can cause an irregular heart beat and can lead to feelings of panic and increased stress. Any problems someone has will still be there after drinking and a hangover and dehydration may make them more difficult to deal with.

#### Pregnancy?

Drinking too much can lead a person to do things that they wouldn't do if sober – e.g. going home with someone they hardly know or not taking the right precautions, increasing the risk of STDs and an unplanned pregnancy. It also increases vulnerability and the ability to give consent. More than 40% of 16-24 year-old girls and 31% of boys reported having had unprotected sex after binge drinking. (British Medical Journal, 2016).

Drinking heavily when pregnant can lead to birth defects called Foetal Alcohol Syndrome, which include facial abnormalities and learning difficulties, hyperactivity and life long problems. See the 'What is foetal alcohol spectrum disorder?' sheet in the resource toolkit. [alcoholeducationtrust.org/rtk\\_what\\_is\\_fas/](https://alcoholeducationtrust.org/rtk_what_is_fas/)

#### Sport?

Alcohol and sport are not good mixers. Alcohol slows down reaction times, increases body heat loss and reduces endurance. It is also dehydrating.

#### Combination?

Never mix alcohol with drugs - either prescribed drugs, unless cleared with the doctor - or illegal drugs including novel psychoactive substances (NPS).

#### Accidents, fights?

As alcohol affects judgement, coordination, mood, reactions and behaviour, people are more vulnerable to hurting themselves or someone else if they have been drinking. Although declining, in 2019/20 in England and Wales 43% of violent incidents were thought to be perpetrated by a person under the influence of alcohol and 65% of violent incidents which took place in public spaces were alcohol-related.

35% of all Accident and Emergency attendance and ambulance costs are alcohol related and in 2021, a total of 9,641 people died from alcohol-specific causes in the UK.

#### Did you know?

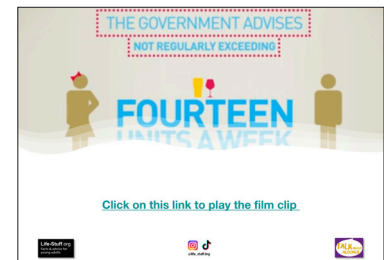
More than 50% of adults globally choose not to drink for religious, health or other reasons.



## Drinks and units

### What is a unit?

Understanding that similar drinks contain different concentrations of alcohol can be hard to grasp and boring. It may be wise to start with an explanatory film clip such as [alcoholeducationtrust.org/teacher-area/units-and-guidelines/drinkaware\\_what\\_is\\_a\\_unit/](https://alcoholeducationtrust.org/teacher-area/units-and-guidelines/drinkaware_what_is_a_unit/)



### How many units in a drink?

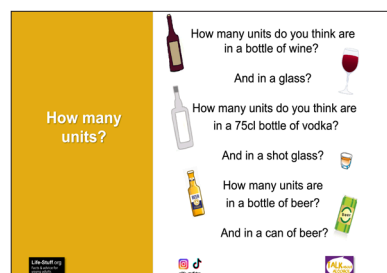
This section looks at pour sizes, units, alcoholic strength, the importance of reading back labels, understanding the guidelines that apply to adults and what blood alcohol concentration (BAC) is.

It is often a good prompt to have empty bottles of popular drinks such as vodka, beer and wine in order to ask participants how many units they think are in the containers.

The virtual night club can be used to check understanding and to reinforce how long it takes for alcohol to be broken down by the body and how units add up. See [talkaboutalcohol.com/alcohol-clock/](https://talkaboutalcohol.com/alcohol-clock/)

There is a 'How many units in a drink?' fact sheet in the toolkit to photocopy and share or you can download it via [alcoholeducationtrust.org/rtk\\_how\\_many\\_units/](https://alcoholeducationtrust.org/rtk_how_many_units/)

You can recommend that participants download a drinks calculator to their phone to help them monitor their drinking on going [drinkaware.co.uk/tools/unit-and-calorie-calculator](https://drinkaware.co.uk/tools/unit-and-calorie-calculator)



### Facilitator unit and guidelines information

The alcohol content of drinks can vary enormously, depending on the type, size and strength of the drink. Units are the official measurement of alcohol in the UK. A 'unit' is equivalent to 8 grams or 10ml of pure alcohol, but the amount of alcohol in products can vary a lot. It's not as simple as one drink = one unit.

Some strong beers contain nearly 3 units per pint rather than the 2 units found in ordinary strength lager. The measures may vary too (a 'double' vodka will have double the units), while a medium glass of white wine (175ml) can be over 2 units.

There is a formula which can be used to work out how much alcohol is in a drink. You need to know how strong the drink is (alcohol by volume % (ABV)) and how big the glass or bottle is (in millilitres (ml)):

**The strength (ABV) x the volume of the drink (ml) ÷ 1,000 = the total number of units in the drink.**

Luckily there are apps to download that do the work for us, and most drinks say on the back label how many units are in them.

# Responsible Drinking

## Low risk drinking guidelines

There are guidelines for the maximum amount of alcohol an average adult can drink without risking their health. The Chief Medical Officer (CMO) recommends that adult men and women don't drink more than 14 units a week. Drinking more than this amount on a regular basis can lead to serious long term health risks such as liver disease and some cancers, as well as alcohol dependency or addiction.

The really important things to remember is that the liver can only break down (metabolise) about one unit (½ pint or one shot) an hour. Drinking more than one unit of alcohol an hour builds up the blood alcohol concentration (BAC) in the body and it may be many hours before it is safe to drive.

Weekly guidelines/units	
1) Adults should not regularly drink more than 14 units a week.	
What does 14 units look like?	
A pint of beer, lager or cider at 4% abv (2.3 units)	x 6
A 50ml measure (double) of spirits at 40% abv (2.0 units)	x 7
A 175ml glass of wine @ 12% abv (2.1 units)	x 6
A 330ml bottle of beer, lager or cider at 5% (1.7 units)	x 8
A 125ml glass of sparkling wine at 11% (1.4 units)	x 10

## When not to drink

There are times when it is not appropriate to drink at all. Adults should avoid drinking alcohol:

- **Before driving** - spend a few minutes going through the 'What you need to know about drinking and driving' fact sheet.

[alcoholeducationtrust.org/rtk\\_drink\\_driving\\_factsheet/](http://alcoholeducationtrust.org/rtk_drink_driving_factsheet/)

There is also a very good website that explains how we are often unaware that we can still be over the drink drive limit the morning after a night out. If 10 units of alcohol have been drunk (5 double vodkas, or four cocktails) it will take 10 hours for all the alcohol to leave the bloodstream – one unit an hour.

[morning-after.org.uk](http://morning-after.org.uk)

...and when not to drink

Adults should not:

- drink and drive – watch out for the next morning
- operate machinery, use electrical equipment or work at heights after drinking
- drink heavily before playing vigorous sport
- drink while on certain medications – ask your doctor if you are unsure (depression and anxiety)
- drink when pregnant – it can cause life-long damage (fetal alcohol syndrome).



WHAT YOU NEED TO KNOW ABOUT DRINKING AND DRIVING

From this site teens, young people might think of taking to the roads on a night out or late evening. An alcohol affects reaction times, vision and coordination. There is a legal drink drive limit, which is based on a driver's BLOOD ALCOHOL CONCENTRATION (BAC).

What is BAC?

Blood Alcohol Concentration is a measurement of alcohol found in the bloodstream after drinking. BAC varies depending on how much alcohol someone consumes, the more a person drinks, the higher their BAC. However, many other factors also affect BAC such as someone's size and weight.

How is BAC measured?

BAC can be measured with a breathalyzer or by analysing a sample of blood. BAC is the amount of alcohol present in 100 millilitres of blood, measured in grams. For example, a BAC of 0.05, the UK legal limit for driving, means someone has 0.5 grams of alcohol in every 100ml of their blood. The BAC limit for driving in Scotland is 0.02.

Drinking and eating

Having food in the stomach does not stop someone from getting drunk, but it does slow down the rate at which alcohol passes into the bloodstream. Lots of different factors can affect a person's BAC, including:

- whether someone is male or female
- if they are drinking on an empty stomach
- if they are drinking quickly
- individual differences in size, weight, metabolism
- the percentage of alcohol in the drink
- the speed at which they are drinking
- the type of drink they are drinking (sugary drinks are absorbed more quickly)
- the container size (someone may think they're having one drink, but how many units are they actually having?)
- the amount of time since their last drink (the body can only break down about one unit an hour, so BAC can still be rising because alcohol takes time to be absorbed).



- **If operating machinery or working at heights**

This is because alcohol is a depressant – that is, it slows down reactions, coordination and judgement, making it more likely that accidents and mistakes will occur.

- **Before playing sports or swimming**

This is because alcohol is dehydrating as well as affecting coordination and reactions.

- **When taking certain drugs and medicines**

It's not safe to use some drugs and medicines and drink alcohol (information is usually given on the label of the medicine). If on medication, especially for anxiety, hyperactivity or depression, always check with the GP to see if drinking alcohol is ok.

- **When pregnant**

Drinking alcohol during pregnancy can harm the developing baby as it passes directly through the placenta to the developing foetus. Drinking heavily or binge drinking during pregnancy can cause permanent life long defects to facial features, brain development and personality disorder. The range of diagnostics can vary and are called Foetal Alcohol Syndrome (FAS) or Foetal Alcohol Spectrum Disorders (FASD). For more information view the 'What is foetal alcohol spectrum disorder ?' sheet within the resource toolkit. [alcoholeducationtrust.org/rtk\\_what\\_is\\_fas/](http://alcoholeducationtrust.org/rtk_what_is_fas/)

For further advice can be obtained from the Royal College of Obstetricians & Gynaecologists - [rcog.org.uk](http://rcog.org.uk) and The National Organization on Foetal Alcohol Syndrome - [nofas-uk.org](http://nofas-uk.org)

WHAT IS FOETAL ALCOHOL SPECTRUM DISORDER?

What is foetal alcohol spectrum disorder?

Foetal alcohol spectrum disorder (FASD) is the umbrella term for a range of possible alcohol-related conditions that can affect a child's development.

There is no way to know for sure how alcohol might affect a child's development. It can have different effects at different times during pregnancy, and it might affect one child, but not another. There is no safe level for alcohol consumption during pregnancy. The only way to prevent a child from having FASD is to avoid alcohol completely when pregnant.

This is because alcohol is a depressant. It slows down the body's development and can cause long-term damage to the brain. A baby who has FASD may have a smaller head, facial features that are different from other children, and learning and behaviour problems. It can also affect the baby's brain and physical development.

What if a child doesn't get drunk, but has FASD?

Even if a child doesn't get drunk, they can still have FASD. This is because alcohol affects the body's development in many ways. It can slow down the body's development and can cause long-term damage to the brain. A baby who has FASD may have a smaller head, facial features that are different from other children, and learning and behaviour problems. It can also affect the baby's brain and physical development.


Drinking in pregnancy can lead to long-term harm to the baby, with the most common being facial features. Other risk factors include:

- being an older mother
- drinking regularly or heavily
- drinking alcohol in the first trimester

The effects of FASD on a child

FASD affects at least 3 out of 10 children who are born to mothers who drink heavily during pregnancy. It can affect a child's physical, mental, and social development. It can also affect a child's learning and behaviour. It can cause long-term damage to the brain and physical development.

- smaller head circumference
- heart problems
- learning and behaviour problems
- facial features that are different from other children
- smaller head circumference
- heart problems
- learning and behaviour problems
- facial features that are different from other children



There are some A6 'Higher harm discussion cards' [alcoholeducationtrust.org/rtk\\_higher\\_harms/](https://www.alcoholeducationtrust.org/rtk_higher_harms/) and also the A4 'Drinks and units' sheet [alcoholeducationtrust.org/rtk\\_drinks\\_and\\_units/](https://www.alcoholeducationtrust.org/rtk_drinks_and_units/) included in the resource toolkit that are suitable for one to one use, or if you are working with high risk drinkers.

### Activity to embed learning

To ensure that units and guidelines have been understood participants can either visit the online nightclub to see how units add up, especially if not eating, pacing and alternating with alcoholic drinks with soft drinks via: [talkaboutalcohol.com/alcohol-clock/](https://talkaboutalcohol.com/alcohol-clock/), or use the version described below.

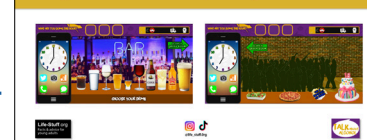
DRINKS AND UNITS			
1 standard drink / 1 unit of alcohol (eg)	2 units		
A 100ml glass of wine (12% alc/vol)	A 100ml glass of wine (12% alc/vol)	A 100ml glass of wine (12% alc/vol)	A 100ml glass of wine (12% alc/vol)
A 100ml glass of beer (5% alc/vol)	A 100ml glass of beer (5% alc/vol)	A 100ml glass of beer (5% alc/vol)	A 100ml glass of beer (5% alc/vol)
A 100ml glass of cider (5% alc/vol)	A 100ml glass of cider (5% alc/vol)	A 100ml glass of cider (5% alc/vol)	A 100ml glass of cider (5% alc/vol)
A 100ml glass of spirits (40% alc/vol)	A 100ml glass of spirits (40% alc/vol)	A 100ml glass of spirits (40% alc/vol)	A 100ml glass of spirits (40% alc/vol)
3 units	4 units	5 units	6 units
A 100ml glass of wine (12% alc/vol)	A 100ml glass of wine (12% alc/vol)	A 100ml glass of wine (12% alc/vol)	A 100ml glass of wine (12% alc/vol)
A 100ml glass of beer (5% alc/vol)	A 100ml glass of beer (5% alc/vol)	A 100ml glass of beer (5% alc/vol)	A 100ml glass of beer (5% alc/vol)
A 100ml glass of cider (5% alc/vol)	A 100ml glass of cider (5% alc/vol)	A 100ml glass of cider (5% alc/vol)	A 100ml glass of cider (5% alc/vol)
A 100ml glass of spirits (40% alc/vol)	A 100ml glass of spirits (40% alc/vol)	A 100ml glass of spirits (40% alc/vol)	A 100ml glass of spirits (40% alc/vol)
10 units	15 units	20 units	30 units
A 100ml glass of wine (12% alc/vol)	A 100ml glass of wine (12% alc/vol)	A 100ml glass of wine (12% alc/vol)	A 100ml glass of wine (12% alc/vol)
A 100ml glass of beer (5% alc/vol)	A 100ml glass of beer (5% alc/vol)	A 100ml glass of beer (5% alc/vol)	A 100ml glass of beer (5% alc/vol)
A 100ml glass of cider (5% alc/vol)	A 100ml glass of cider (5% alc/vol)	A 100ml glass of cider (5% alc/vol)	A 100ml glass of cider (5% alc/vol)
A 100ml glass of spirits (40% alc/vol)	A 100ml glass of spirits (40% alc/vol)	A 100ml glass of spirits (40% alc/vol)	A 100ml glass of spirits (40% alc/vol)



- Need a drink
- Want to drink on own
- Drink secretly
- Can't stop drinking
- Can't cope without alcohol
- Pass out from drinking
- Can't even remember

Go to the Interactive nightclub on [talkaboutalcohol.com](https://talkaboutalcohol.com)  
Have a go at the interactive virtual night club and see the effects of different drinks, and how the units add up! [talkaboutalcohol.com/alcohol-clock/](https://talkaboutalcohol.com/alcohol-clock/)

As part of the workshop or in your own time



### The alcohol clock activity

Preparation: Have ready the laminate on units and the effects of different number of units from the toolkit [alcoholeducationtrust.org/rtk\\_how\\_many\\_units/](https://www.alcoholeducationtrust.org/rtk_how_many_units/). Have copies ready to share. There are also 'Unit cards' [alcoholeducationtrust.org/RTK\\_unit\\_cards/](https://www.alcoholeducationtrust.org/RTK_unit_cards/) and 'Emoji cards' [alcoholeducationtrust.org/RTK\\_emoji\\_cards/](https://www.alcoholeducationtrust.org/RTK_emoji_cards/) in the resource toolkit that can be used for this activity

- Write the numbers of the clock one to 12, each on a separate A4 piece of paper.
- Lay the sheets with numbers (1 - 12) out on the floor to make a large clock.
- Ask participants to plan a night out in small groups thinking about what they are drinking (including the number of units) where they meet, where they go at what time and how they get home safely.
- Give then 10 minutes to map the night out and write out what they do and what they drink (in units) at what time and then nominate one person to talk through the scenario.
- The evening is then talked through, e.g. we meet at 7pm (4 of us) and have 4 shots of vodka each – 4 units are drunk and so 4 people need to stand at 7 pm to represent the 4 units. By 8pm one person steps back as the liver has broken down one unit. As more is drunk, more people stand up to join the clock as the evening progresses. Encourage them to make wise decisions such as staying hydrated, eating a meal, getting home safely when had enough. It shouldn't be a 'worse case' night out, but a rehearsal with different decisions that can be made. At home time, add up how many units are in the blood stream. How long would it take to be safe to drive? (1 unit is processed per hour).
- At the end, give the participants an opportunity to 'turn back the clock'. What might be a wiser decision? (eating/ pacing/ drinking less, for example). What else could they do to stay safe?

This demonstrates through a fun activity how units accumulate in the body and how the liver breaks down units over time. It also shows how quickly you can drink a lot of alcohol and how this can have implications for safety in getting home and driving the next day.

The activity can also be completed using the table top version, with post it notes for the clock numbers and counters/ sweets to represent the units of alcohol.

**1 to 2 units**  
After drinking 1 to 2 units of alcohol the brain and nervous system starts to be affected. Disinhibition begins to affect the part of the brain responsible with judgement and decision making, which makes people feel confident.

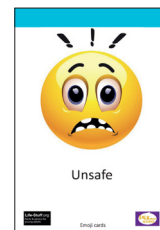
**3 to 4 units**  
After drinking 3 to 4 units of alcohol the brain and nervous system starts to be affected. Disinhibition begins to affect the part of the brain responsible with judgement and decision making, which makes people feel confident.

**5 to 6 units**  
After drinking 5 to 6 units of alcohol the brain and nervous system starts to be affected. Disinhibition begins to affect the part of the brain responsible with judgement and decision making, which makes people feel confident.

**7 to 8 units**  
After drinking 7 to 8 units of alcohol the brain and nervous system starts to be affected. Disinhibition begins to affect the part of the brain responsible with judgement and decision making, which makes people feel confident.

**9 to 10 units**  
After drinking 9 to 10 units of alcohol the brain and nervous system starts to be affected. Disinhibition begins to affect the part of the brain responsible with judgement and decision making, which makes people feel confident.

**11 to 12 units**  
After drinking 11 to 12 units of alcohol the brain and nervous system starts to be affected. Disinhibition begins to affect the part of the brain responsible with judgement and decision making, which makes people feel confident.



**As an alternative: Plan a night out**

In small groups plan a night out. Put the time next to each activity. E.g. 7 - 8pm, 2 friends get ready at Emma's house and share a bottle of prosecco before heading to the pub

Think about:

- Where they meet and get ready
- How much and what they drink (work it out in units)
- When and what would they eat
- How many people are involved
- Where they go at what time
- How they plan to get home

### Alternative scenario

**At 7pm**, some close friends meet at John's house and have a drink with John's family. John's mother has prepared food for everyone, so the friends eat well.

John has 2 small glasses of bubbly. (Ask 2 participants to stand behind John to represent the 2 units of alcohol consumed).

As the story goes on, move John around the clock.

**At 8pm** John and his friends head off and get the bus to the pub. At this point John loses one unit of alcohol from his body (one person behind John sits down).

**At 9pm** John gets to the pub to meet up with a wider circle of friends. Another hour has passed, so John loses one unit of alcohol from his body (one person behind John sits down).

John has a pint of beer (2 units – 2 people get up and stand behind John). He downs that quickly and has another (2 units - 2 more people get up and stand behind John).

**At 10pm** John is still in the pub with his friends (one person behind John sits down). John will have consumed 6 units and 3 units will still be in his bloodstream. Stop the action and ask:

- Could John legally drive a car at this point?
- How might John's behaviour be affected?
- Would it be sensible for John to stop drinking alcohol at this point or should he have stopped drinking earlier in the evening?
- What could he have done to slow down his consumption of alcohol?

John plays pool with some friends.

- Would his judgement be affected?
- Would he be feeling worse if he hadn't eaten earlier?

**It is now 11pm** (one person behind John sits down).

The group decide they will move to a nightclub, but before that, John and his friends decide to switch to shots and have a single shot before leaving 1 unit - another person gets up and stands behind John).

Ask the group:

- How would mixing his drinks make John feel?
- Would John be safe to walk through the town centre?
- When they get to the nightclub, would the bouncer let John in?

**At midnight**, (one person behind John sits down) John has another single shot of spirits (1 unit – another person gets up and stands behind John).

John meets a girl he wants to impress and spends some time chatting and dancing.

Will John be able to speak and dance at this point?

After dancing John is feeling a bit sick and decides to stick to water as he doesn't want to miss the rest of the evening. The friends then stay at the club until 2pm.

Think how John might get home and whether there are likely to be any problems resulting from the amount of alcohol he has consumed. How long will it take for the alcohol to clear from his body? Would he still have alcohol in his blood the next morning?

Discuss how the amount and pace of alcohol drunk can affect behaviour and enjoyment for everyone at the party.

Other things to consider:

- What if someone slipped him some extra alcohol in a drink and he didn't realise?
- What if someone tried to steal his wallet/ money while he was heavily under the influence of alcohol?
- In certain situations you could introduce the idea of
  - unprotected sex.
  - getting into an argument/fight with other people.
  - Trying to get a taxi home – some taxi drivers may refuse the fare. (If you are sick in a taxi, taxi drivers could charge £50-£100).
- If he passed out under the influence of alcohol, what would the dangers be?
- If drugs were also taken, what problems could they introduce?
- How will John be feeling the next morning?

## Being aware of the risk of drink spiking

There is a good selection of film clips on the 16+ area of the AET website on [alcoholeducationtrust.org/teacher-area/16plus/16-ice-breakers/](https://alcoholeducationtrust.org/teacher-area/16plus/16-ice-breakers/). See, for example, the film about the Southampton student.

Drink spiking cases are increasing. It is important to remember that both alcoholic and non alcoholic drinks can be spiked. Most substances used to spike drinks are colourless and odourless. The effects can include memory loss, nausea, blurred vision, confusion, passing out and can be confused with being drunk by those around the victim.

Drink spiking happens at private parties and festivals and not always by strangers in pubs and clubs.

Suspected drink spiking should always be reported to the venue and to someone trusted.

See the information sheet to share in the toolkit or it can be downloaded - [alcoholeducationtrust.org/rtk\\_drink\\_spiking\\_sheet/](https://alcoholeducationtrust.org/rtk_drink_spiking_sheet/)





## SESSION 2

### Alcohol and its effects - physical and social

This section describes and covers the physical and social effects of alcohol on the body.

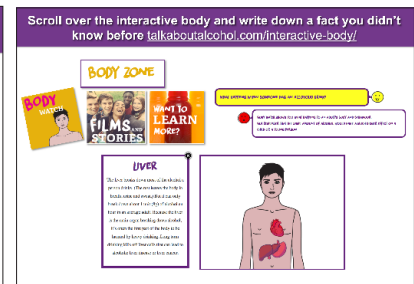
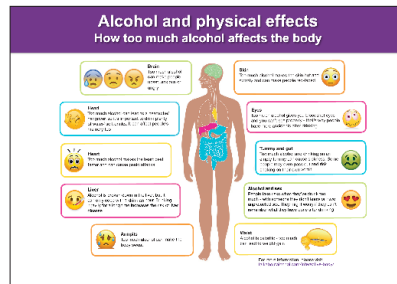
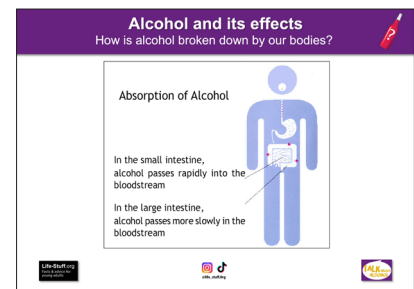
#### How is alcohol broken down by the body

Follow the slides to outline how alcohol is broken down by the body.

#### The short and long term effects of drinking too much alcohol

Preparation

- Take a look in advance at the interactive body via: [talkaboutalcohol.com/interactive-body/](http://talkaboutalcohol.com/interactive-body/)
- Further information is available on a laminated sheet in the resource toolkit, which can be photocopied in advance or can be downloaded via: [alcoholeducationtrust.org/rtk\\_alcohol\\_body\\_ans/](http://alcoholeducationtrust.org/rtk_alcohol_body_ans/)
- A blank version is also included in the resource toolkit that can be photocopied for participants to fill in using information that they have learnt: [alcoholeducationtrust.org/rtk\\_alcohol\\_body\\_blank/](http://alcoholeducationtrust.org/rtk_alcohol_body_blank/)



Using the slides, worksheets and the consequences activity, highlight the short term risks of excess drinking, including a hangover, possible alcoholic poisoning, passing out and loss of memory, increased risk of unprotected sex and being vulnerable to injury or crime.

Outline the long term risks of drinking at harmful levels, which:

- Increases the risk of becoming addicted to alcohol
- Kills off liver cells that can lead to alcoholic liver disease or liver cancer.
- Increases the risk of some cancers – especially breast cancer and head and neck cancers (particularly if someone smokes as well)
- Increases the risk of an irregular heartbeat and heart problems.
- Kills off brain cells, leading to memory loss and mental problems.

**N.B.** At all times keep a balance of how moderate drinking can form part of a balanced diet and lifestyle – it is binge drinking, drinking to drunkenness and speed drinking that lead to most harms. It is important not to highlight the extremes of behaviour and to recognise that drinking and socialising can form important parts of young peoples' lives. If the facilitator is too negative the participants will feel the information is unrealistic or worse, preachy.

#### Social norms

Stress that most people enjoy drinking responsibly and find it a sociable and relaxing thing to do. Of the 75% of adults who drink alcohol in the UK, more than 80% (including 18 to 24-year-olds) do so within the low risk guidelines of 14 units or less a week. If these approximately 7 drinks are spread over the week with one or two alcohol free days, then this fits in with a healthy diet and lifestyle.

## Match the consequences activity

There are laminated A6 'Consequences cards' [alcoholeducationtrust.org/rtk\\_consequences\\_cards/](http://alcoholeducationtrust.org/rtk_consequences_cards/) and an '0 2 4 6 + Consequences sheet' [alcoholeducationtrust.org/rtk\\_0\\_2\\_4\\_6\\_consequences\\_sheet/](http://alcoholeducationtrust.org/rtk_0_2_4_6_consequences_sheet/) in the resource toolkit to be used with the PowerPoint slides. There are no right and wrong answers to this activity, as getting angry or feeling relaxed can equally be associated with many or no drinks in a participants' opinion. As the facilitator, you can expand the choice by asking if drinking too much alcohol would make this even more likely - (getting angry) for example. The 'Emoji cards' could also be used in this activity [alcoholeducationtrust.org/RTK\\_emoji\\_cards/](http://alcoholeducationtrust.org/RTK_emoji_cards/).

Social and physical effects of alcohol Match the consequences activity				
0 drinks	1-2 drinks	4+ drinks	6+ drinks	
				
				
				

You could choose to have physical examples of the drinks – such as a big groups of messy squashed cans and an empty vodka bottle for six plus and attractive soft drinks for 0 units to help participants visualise what a certain number of drinks look like – they could then place their card where they think the consequence fits – e.g. an argument/ fight with six plus drinks.

### Facilitator additional information

What is Blood Alcohol Concentration (BAC)?

If you choose to focus on the alcohol and driving consequence, is a detailed worksheet in the toolkit, 'What you need to know about drinking and driving.' [alcoholeducationtrust.org/rtk\\_drink\\_driving\\_factsheet/](http://alcoholeducationtrust.org/rtk_drink_driving_factsheet/)

When a person drinks alcohol it is absorbed into the bloodstream from the stomach and small intestine. The amount of alcohol in someone's blood is measured by their BAC (blood alcohol concentration).

BAC is usually measured as the number of milligrams (mg) of alcohol in 100 millilitres (ml) of blood. That's because an individual's BAC depends on many different factors, for example:

- how many grams of alcohol they have drunk (not how many drinks they have had)
- size and weight: a smaller person will have a higher BAC than a larger person drinking the same amount of alcohol.
- metabolic rate: which may change for the same person during the day, month or year
- general fitness
- emotional state
- the type of drink, e.g. alcohol in fizzy drinks tends to be absorbed more quickly
- the speed at which they drink
- whether they have eaten before they drink.

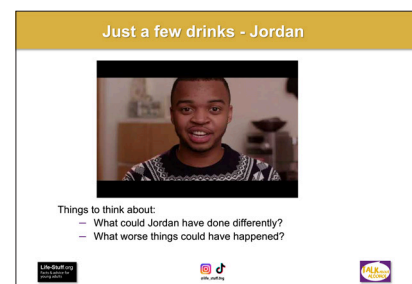
Gender is important too. Alcohol is distributed around the body in water, and females have less body water than males. This means that, given the same amount of alcohol, and proportional to body weight, women will generally have a higher BAC than men.

## Film clip activity

There are also 4 x 7 minute true life stories where things have gone wrong due to drinking too much. The clips can help explain or promote discussion on alcohol and its effects and are included on the USB in the toolkit, but can also be viewed in advance via: [talkaboutalcohol.com/just-a-few-drinks/](http://talkaboutalcohol.com/just-a-few-drinks/)

To illustrate alcohol and its effects we recommend Jordan's story via the AET youtube channel [youtube.com/watch?v=VefxsHa3YZY](https://www.youtube.com/watch?v=VefxsHa3YZY)

Encourage participants to think about what better choices Jordan could have made (such as eating, pacing, choosing lower alcohol drinks, stopping drinking when he started feeling dizzy) and what else might have happened (alcohol poisoning, hospital, been robbed, choked on his own vomit, got hypothermia, etc.).



## Safer drinking

This is then a natural catalyst to lead on to tips for enjoying safer drinking and what to do if things go wrong. These are largely self-explanatory and are key to an enjoyable time socialising. We suggest that you can ask participants to come up with their own ideas on what helps keep people safe when drinking before going through the next slides.

There is an 'Tips for safer drinking sheet' in the resource toolkit to photocopy and share, [alcoholeducationtrust.org/rtk\\_tips\\_for\\_safer\\_drinking/](https://alcoholeducationtrust.org/rtk_tips_for_safer_drinking/)

If, in spite of the tips, things get out of hand it is important to know what to do in an emergency and how to spot the signs of drinking to dangerous levels when someone may really need help.





## SESSION 3

## When does drinking alcohol become a problem ?

The main issues that younger adults face due to drinking too much alcohol are less to do with ill health and more to do with the immediate short term effects such as injury, violence, assault, unprotected sex and their increased vulnerability to others.

Abuse of alcohol is also linked to an increased risk of suicide, sexual assault and domestic abuse. In addition, drugs and alcohol can be used as a lure to draw young people into gangs and exploitation (sexual or running drugs).



## Alcohol and the law

It is important that young adults understand the law around alcohol and how breaking the law can affect their long term prospects of getting a job, or being able to travel. An 'Alcohol and the law sheet' is also included in the resource toolkit. [alcoholeducationtrust.org/rtk\\_alcohol\\_and\\_law/](https://alcoholeducationtrust.org/rtk_alcohol_and_law/)



## Alcohol, anger and violence

Talk through the slide.

To make the topic more relevant, there is the option of showing a film clip. There is a case study showing how drinking too much and getting into a fight leads to going to court for assault. The scenario is very deliberately not too extreme and shows how having too much to drink on a night out can have life changing consequences. The case study examines the effect on victims' and perpetrators' lives. Two young lawyers discuss the case, the law and potential sentencing. See 'Alcohol and violence - Sean case study,' (11 mins) included on the toolkit USB or via: [youtu.be/ToQc7EBRjQl](https://youtu.be/ToQc7EBRjQl). A shorter clip (1 min) on how alcohol can make someone act out of character is available at [youtube.com/watch?v=CIBOp4mCml0](https://youtube.com/watch?v=CIBOp4mCml0)

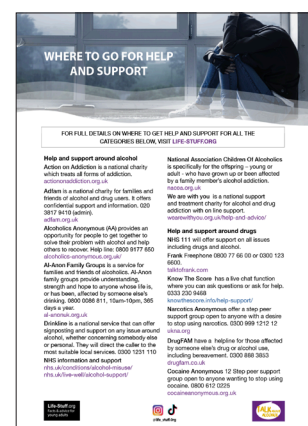


## Alcohol and relationships

See notes on the slide.

People shouldn't wait for an emergency situation to find help. It's important to tell someone and to remember they are not alone. Alert participants to the helplines and support network on the 'Where to go for help and support' laminate in the toolkit. [alcoholeducationtrust.org/rtk\\_where\\_to\\_go\\_for\\_help/](https://www.alcoholeducationtrust.org/rtk_where_to_go_for_help/)

There are also more links to help and support on [life-stuff.org](https://www.life-stuff.org)





Ask participants to think about:

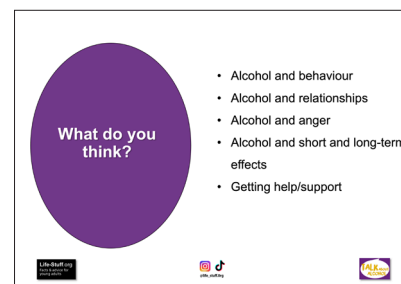
**Question 1** - Why can alcohol increase the likelihood of getting into trouble with the police, hurting someone they care about or a complete stranger.

**Question 2** - Is drinking alcohol an excuse for not remembering what you've done or for behaving out of character?

**Question 3** - If someone has anger problems when drinking alcohol, what could they do to manage this?

**Question 4** - Do you think it's fair that someone has a criminal record for life if they are charged, leading to problems getting a job, travelling abroad ( e.g. can't go to US) or getting car insurance

**Question 5** - Would you feel confident about where to go for help and support?



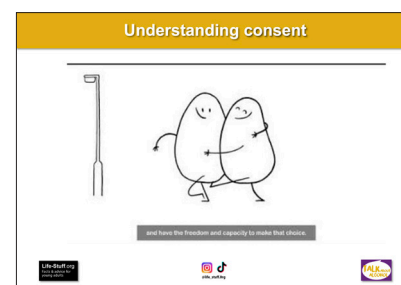
### Consent and how alcohol affects it

Watch the film on alcohol and consent and work through the slides.

The key things to convey are:

- Either party can change their mind at any time.
- Consent must be given without manipulation or coercion. (Ensure that the group understands what coercive behaviour/ coercion is).
- In a court of law, drunkenness means that the injured party would not have been able to willingly give their consent.
- Sentencing is severe, so if any doubt, don't go ahead.
- If someone has been sexually assaulted, whether as an adult or a young person, it is important to remember that it wasn't their fault. Sexual violence is a crime, no matter who commits it or where it happens. Don't be afraid to get help.

Discuss with participants if they would feel confident coming forward if they were a victim and would they know where to go for help and support. Again, refer to the 'Where to go for help' sheet in the toolkit. [alcoholeducationtrust.org/rtk\\_where\\_to\\_go\\_for\\_help/](https://alcoholeducationtrust.org/rtk_where_to_go_for_help/)



The following optional film clips could be used to give a broader perspective:

- Terrence Higgins Trust [youtu.be/qflcyB9llgw](https://youtu.be/qflcyB9llgw)
- Tea and consent [youtube.com/watch?v=pZwvrXVavnQ](https://youtube.com/watch?v=pZwvrXVavnQ). Many young people will have seen this clip; if not, it is an excellent way of explaining the complexities of consent.
- There is also a film clip where two young lawyers discuss how alcohol can affect our ability to give or understand if consent has been given and how this is interpreted by the law. [youtu.be/FCjXzKBoVXg](https://youtu.be/FCjXzKBoVXg)

## Alcohol and mental health

### Drinking to cope – recognising the signs

Some people think that drinking alcohol helps relieve stress and anxiety and so problems will be forgotten for a while. Sadly, any problems will still be there when the person is sober and could be made worse by spending money on alcohol or due to the headache and hangover suffered after drinking too much.

Other people feel that alcohol makes them more confident and happy. Because of this, they can slip into harmful patterns of drinking, drinking more often and more each time. That's why it's important to be aware of the low risk guidelines of drinking 14 units (7 pints or glasses of wine or 7 double vodkas) each week or less and spread over the week.

If someone begins to notice they are drinking significantly more than this, are drinking secretly, or feel they can't stop drinking or need a drink in the morning – then the earlier help is looked for the better. There are local groups of people who meet each week to fight their alcohol addiction. Alternatively, a doctor can recommend the best support groups and organisations in the local area. There are also organisations that support the family and children of alcoholics and a full list can be found on the 'Where to go for help' sheet in the resource toolkit.



### Alternative strategies to help combat anxiety, stress or loneliness

Developing other strategies to cope with anxiety, stress or loneliness as part of the daily routine can really help rather than turning to medication, alcohol or drugs. Activities to recommend include:

#### Winding down before going to sleep

Having a digital detox an hour before bed – this will help people unwind. Having a shower or bath and playing relaxing music that helps switch off can really help too.

#### Fresh air every day

Just half an hour outside each day, whatever the weather can really improve mental health. Establishing a routine such as a walk around the block, the park or to the shops is fine. The longer spent having fresh air and exercise the better.



#### Exercise

This doesn't have to mean going to the gym or taking up an expensive sport – there are lots of free apps for exercises that can be done in the privacy of the home – but a brisk walk or jog counts or using a bike to get around on, or parkour is great. We speed up our heart rate, get our blood circulating and release endorphins when exercising, which makes us feel happier.

#### Making sure we talk to someone every day

Connecting with people is really important so no matter how shy we are, making sure we talk to our family, friends, neighbours, work colleagues, or those who support us helps ensure we don't feel isolated or alone. Popping out for a coffee or a chat at the supermarket is great.

#### Volunteer

If we've got time between work or study, then volunteering is great way to feel valued, make friends and build a sense of belonging to the community. Giving is one of the 5 ways to wellbeing that helps build our self-esteem and self-worth. So many charities are looking for help. Every area has a local volunteering network that you can find via: [ncvo.org.uk](https://ncvo.org.uk)

#### Eating well

Making sure we eat as balanced a diet as possible is really important for our health and wellbeing. Snacking on unsalted nuts and fruit and veg instead of crisps and sweets can really help. Eating well doesn't have to be expensive – a jacket potato and baked beans, pasta and tomato sauce are healthy balanced meals. Too much processed foods like pizza or fried foods like chips lower health and wellbeing.

## Take up a hobby

Keeping ourselves busy and active helps our mental health – a hobby can be music, playing the guitar, taking cool photos, learning to cook or knitting! The more fulfilled and busy we are, the less likely we are to feel lonely, anxious or bored.

## Fighting FOMO (Fear of missing out)

Everyone looks so happy and as though they're always out with their mates having a wild time on Instagram, but the truth is, we don't post pictures of doing the shopping or when we're working. It's best not to follow people if it makes you feel you are missing out – try downloading a meditation app instead!

The 5 ways to wellbeing are advised as a strategy to improve mental health. There is a self help guide available for participants to read and fill in their own time, available at [dpt.nhs.uk/resources/recovery-and-wellbeing/five-ways-to-wellbeing](https://dpt.nhs.uk/resources/recovery-and-wellbeing/five-ways-to-wellbeing)

Small steps can help lead to tiny improvements in confidence and wellbeing, such as making the bed on getting up, a half hour walk outside every day, having a digital detox an hour before bed and turning the phone off.

The bravest thing we can do is to ask for help if we feel we need it. We may or may not be able to identify why we're feeling anxious, stressed or depressed, either way there is always someone to talk to. Refer to the 'Where to go for help and support' sheet - [alcoholeducationtrust.org/rtk\\_where\\_to\\_go\\_for\\_help/](https://alcoholeducationtrust.org/rtk_where_to_go_for_help/)

## Alcohol and antidepressants

Drinking alcohol while taking antidepressants is generally not advised because alcohol can make depression worse. It can also increase the side effects of some antidepressants, such as drowsiness, dizziness and coordination problems. No one should stop taking antidepressant medication so that they can drink alcohol. Always check with a GP or practice nurse.

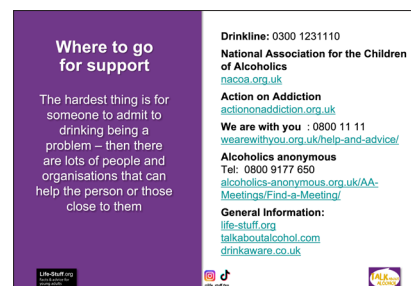
For more information, visit [nhs.uk/common-health-questions/medicines/can-i-drink-alcohol-if-i-am-taking-antidepressants/](https://nhs.uk/common-health-questions/medicines/can-i-drink-alcohol-if-i-am-taking-antidepressants/)



## Where to go for help and support

The hardest thing to do is to make the first step to tell someone that they feel that their drinking has become a problem. Then there are lots of charities and organisations that can help the person or their family. Some of the organisations offering help are listed on the slide, with a full list of organisations able to offer support on the topics in this workshop available in the toolkit or online via: [alcoholeducationtrust.org/rtk\\_where\\_to\\_go\\_for\\_help/](https://alcoholeducationtrust.org/rtk_where_to_go_for_help/)

There are also more links to help and support on [life-stuff.org](https://life-stuff.org)

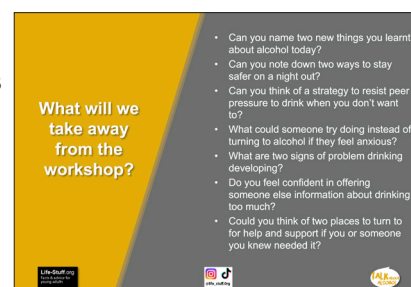


## Reflection and evaluation

A good way to end each session is to reflect on what the participants think, how they might have changed their attitude or what surprised them most about alcohol. You can choose questions such as those on the slide, or create your own.

The 10 'True or false emoji quiz questions and answers' in the toolkit and the 'Fact or fiction? quiz questions and answers' are a good way to recap on the workshop content, or you can revisit the opening questions again to see if knowledge has improved.

It is also important to gain feedback from the group as to what they liked most and what else would have made the workshop better. On completion of the workshop ask participants to complete the [online evaluation survey](#). Alternatively, there is a hard copy in the resource toolkit that can be photocopied. Please send completed evaluation forms to the Alcohol Education Trust, Pavilion in the Park, St John Way, Poundbury, Dorchester, Dorset DT1 2FG.



# CANNABIS WORKSHOP



PowerPoint link: [alcoholeducationtrust.org/rtk\\_cannabis\\_workshop/](https://alcoholeducationtrust.org/rtk_cannabis_workshop/)



## SESSION 1

### Preparation

In preparation for this workshop, make photocopies of the 'Cannabis and its effects' laminate in the resource toolkit, or from the pdf online via: [alcoholeducationtrust.org/rtk\\_cannabis\\_factsheet/](https://alcoholeducationtrust.org/rtk_cannabis_factsheet/) and make copies of the 'Where to go for help and support' sheet for participants to take away [alcoholeducationtrust.org/rtk\\_where\\_to\\_go\\_for\\_help/](https://alcoholeducationtrust.org/rtk_where_to_go_for_help/)

An optional background video for life coaches to watch in advance:

[alcoholeducationtrust.org/county-lines/](https://alcoholeducationtrust.org/county-lines/)

For more detailed information on cannabis and treatment pathways please read:

[ncsct.co.uk/usr/pub/Smoking%20cessation%20and%20cannabis%20use.pdf](https://ncsct.co.uk/usr/pub/Smoking%20cessation%20and%20cannabis%20use.pdf)

### Setting ground rules

Remind participants to respect each other's opinion, not to ask personal questions. Encourage them to add any ground rules to the day's session that are appropriate. Remind them that they can come and talk to you in confidence or post a question in the 'ask it basket' if they don't feel happy sharing a question with the group. Explain that the workshop does not aim to condemn use but rather, to provide information to allow each person to make informed responsible choices once equipped with more facts and knowledge.



### Ice breaker questions

Use these questions to relax the group and to help make the participants feel more engaged. Where appropriate you can ask for feedback on the information based questions and then say the answers will be covered in more detail during the workshop. The group's answers will help you gauge how much participants know already and allow you to address misconceptions during the session.

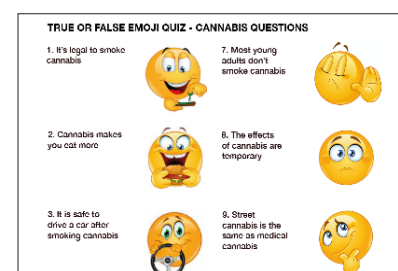
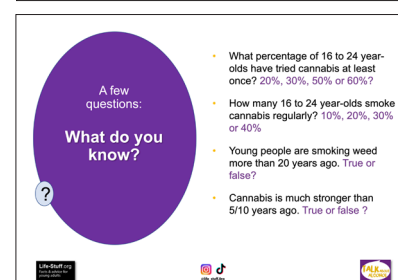
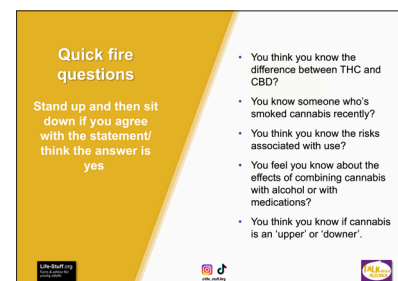
It may surprise participants to know that according to the national crime survey, about 30% of 16 to 24-year-olds have tried cannabis, but just 3.3% of all adults smoke weekly rising to 7.3% of young adults (this has halved since 2002).

Street cannabis is getting stronger and more addictive as the plant is bred to have higher levels of tetrahydrocannabinol (THC). 94% of police seizures were high-potency cannabis in 2018, compared to 51% in 2005.

As an alternative, there are 10 'True or false emoji quiz - cannabis questions' in the resource toolkit [alcoholeducationtrust.org/rtk\\_cannabis\\_emoji\\_quiz\\_questions/](https://alcoholeducationtrust.org/rtk_cannabis_emoji_quiz_questions/) that you can use in the same way. Hand out one to each participant, ask them to read out the question and give an answer before looking at the answer sheet [alcoholeducationtrust.org/rtk\\_cannabis\\_emoji\\_quiz\\_answers/](https://alcoholeducationtrust.org/rtk_cannabis_emoji_quiz_answers/). Discuss and share misconceptions.

You can use these questions again after the workshop to benchmark improvements in knowledge and attitudes with the group.

There is also an online version of this quiz via [life-stuff.org/drugs/cannabis-common-questions-and-myths/](https://life-stuff.org/drugs/cannabis-common-questions-and-myths/)





## The effects of cannabis

Cannabis (also known as: bud, bhang, dope, draw, ganja, grass, hash, herb, marijuana, Mary and Joanna, pot, skunk, weed) is one of the most commonly used drugs in England – but actually 90% of people don't use cannabis.

Cannabis is classified as a Class B - or middle-risk - substance.

It is normally smoked but can also be eaten and comes in three main forms:

- Hash - a lump of resin
- Marijuana - the dried leaves and flowering parts of the female plant
- Oil - a thick honey-like substance.

## Activity

Hand out copies of the cannabis fact sheet [alcoholeducationtrust.org/rtk\\_cannabis\\_factsheet/](https://alcoholeducationtrust.org/rtk_cannabis_factsheet/) and let participants take time to think about the content. Some people take cannabis because it makes them feel relaxed or happy, but it can also make people feel anxious or paranoid. Some users may experience things that aren't real. This is a sign of drug-induced psychosis.

Tetrahydrocannabinol (THC) is the active ingredient in marijuana that is responsible for its psychoactive effects. Skunk, a term for stronger types of cannabis, can pose even greater risks, because it may contain three times as much THC. Cannabis on the market today is estimated to be 7 times stronger than in the 1970s.

A person consuming cannabis high in THC can experience side effects such as:

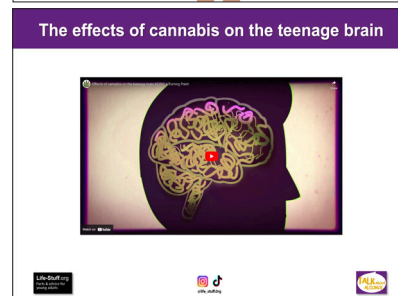
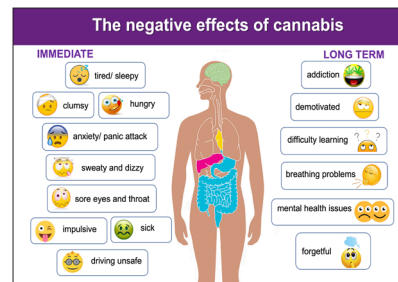
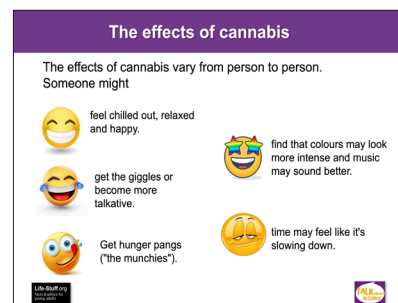
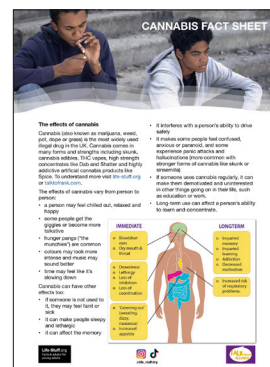
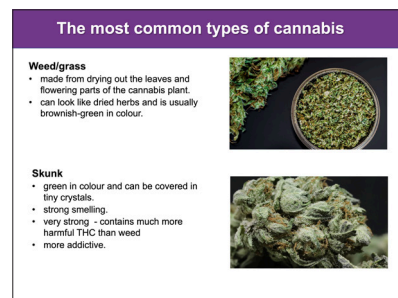
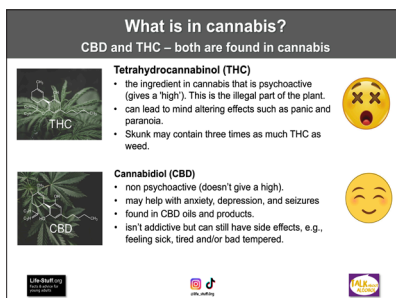
- increased heart rate
- coordination problems
- dry mouth
- red eyes
- slower reaction times
- memory loss
- anxiety/paranoia
- a general feeling of being high.

Studies have shown that the risk of psychosis may be higher if people

- use cannabis for a long time,
- use it frequently, or
- use 'high-strength' cannabis, like skunk.

Hand out copies of the ‘Negative effects of cannabis on the body’ from the resource toolkit or online at [alcoholeducationtrust.org/rtk\\_cannabis\\_body\\_simple\\_blank/](https://alcoholeducationtrust.org/rtk_cannabis_body_simple_blank/). Either individually or in groups, allow participants to fill in the blank worksheet and then to compare what they have written against the answer sheet [alcoholeducationtrust.org/rtk\\_cannabis\\_body\\_simple\\_ans/](https://alcoholeducationtrust.org/rtk_cannabis_body_simple_ans/).

If appropriate for the group, use the optional clip from NCPIIC + Turning Point, explaining brain development in adolescence and the short and long-term effects of cannabis: [youtu.be/FvszaF4vcNY](https://youtu.be/FvszaF4vcNY).





## Questions to ask that will help build resilience:

Take a few minutes to write down some answers or discuss (as whole group or in pairs) the following questions.

### Why do you think most young adults choose not to smoke cannabis?

Answers may include: because it's illegal, they don't like the taste, they're worried about the side effects, they're worried it might trigger a panic attack or psychosis, they can't afford it, they might get caught up in gangs or with dangerous people. It is always much more effective for participants to come up with their own reasons for resisting use rather than facilitators telling them why they shouldn't.

### Why do you think someone might think that more young people are using cannabis than is actually the case?

If people around you smoke cannabis, then it seems more normal and what everyone else is doing – a bit like going to a town centre on a Saturday night where clubs and bars will be full of those who drink – it's them who you notice and not the big majority who are at home/ at the cinema/ bowling/ working/ with friends and not drinking. It's the same with cannabis; 1 in 3 have tried it on occasions, but very few choose to use cannabis/ skunk/ weed regularly. Not even 1 in 10 smoke regularly.

### Why do you think street cannabis is getting stronger and more addictive?

Answers might include: because dealers want customers to need to buy more and to get addicted, because it gives people more of a high, because dealers can charge more, because the dealers make more money.

### If less people are taking weed, why do you think that more people are ending up in treatment because of use?

The many forms of cannabis, and skunk in particular, are getting stronger and more harmful and addictive. They have higher levels of the chemical THC which can trigger psychotic episodes and paranoia - 94% of police seizures were high-potency cannabis in 2018 compared to 51% in 2005.

## Cannabis and the law

In theory, possession of cannabis can lead to five years in prison. However, if someone has a small amount for personal use, they are more likely to get a cannabis warning for a first offence. These warnings do not show up on criminal records checks, but are recorded on the police database. Police can also issue a warning or an on-the-spot fine of £90 to someone found with cannabis or they can face prosecution.

Supplying cannabis can be punished with a 14-year jail sentence or an unlimited fine. Of the 16,101 convictions for cannabis possession in the UK in 2016, 292 were jailed.

In 2021, almost 21,457kg of herbal and resin cannabis was seized by the police and Border Force.

In England and Wales, 30% of adults aged 16 to 64 - that's around 10 million - have tried the drug at least once, according to the annual crime survey.



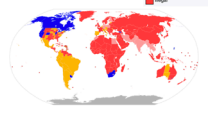
## Why is cannabis legal in some countries?

Cannabis has been legalised in some countries, and reasons for this vary. In the US, it's mostly legalised for financial reasons because of the tax revenue it brings in. This means high-strength THC products aren't regulated for public health reasons.

In Canada, the legalisation was more to limit damaging THC levels and to control the quality of supply. However, the black market is persisting because of the red tape around producing legal weed.

Nowhere in the world is cannabis legal for under 18s because of all the evidence of the harm it does to young people's brains. Stress that legal only means safer, not safe; so a consumer will know the strength of tetrahydrocannabinol (THC) and cannabidiol (CBD) and that it isn't contaminated with other substances, but, of course, no drug is risk-free, including medicines.

**Cannabis and the law**  
So why is cannabis legal in some countries?



- Nowhere in the world is cannabis legal for under 18s because of all the evidence of the harm it does to young people's brains.
- And legal only means safer, not safe, because at least the strength of THC and CBD are known, and it isn't contaminated with other substances. But of course, no drug is risk-free, including medicines.
- There are different reasons for legalisation in different countries. In the US it's mostly legalised for financial reasons because of the tax revenue it brings in. This means high-strength THC products aren't regulated.
- In Canada, the legalisation was more to limit damaging THC levels and to control the quality of supply, but the black market is persisting because of all the red tape around producing legal weed.

## Is cannabis safe?

In recent years, various stronger strains of cannabis produced by dealers to have high concentrations of THC have invaded the street market and these are believed to be linked to the number of people developing psychiatric issues.

According to the Royal College of Psychiatrists, people who use cannabis, particularly at a younger age, have a higher than average risk of developing a psychotic illness, including schizophrenia or bipolar disorder.

One study found that marijuana increased the odds of being in a car accident by 83%.

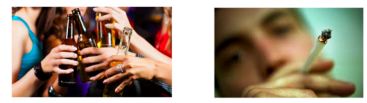
In 2017-18, almost 55,000 people were receiving support for cannabis use in England, and 89% of young people in specialist services are there for cannabis addiction, more than for all other substances put together. (Public Health England, 2019)

24% of all new cases of psychosis are associated with the use of high potency 'skunk-like' cannabis. (Kings College, London, 2015)

Smoking cannabis as a teenager is the strongest factor in later illicit drug use (British Medical Journal, 2017) – That means it can be a gateway to trying other drugs.

In 2016, 94% of police seizures were high-potency cannabis, compared to 51% in 2005 (Kings College London, 2018), so that means the cannabis out there is the very dangerous high strength type more likely to lead to paranoia and addiction.

**Is cannabis safe?**  
Which two substances cause young people most harm/problems?



**Most young people choose not to use cannabis, or only use it occasionally. However,**


- Among young adults aged 20-24 in 2020-21, substance misuse treatment is most common for cannabis, 51% followed by alcohol addiction, 46%.
- Between April 2021 and March 2022, among those under the age of 18, cannabis was most common substance (87%) that people come to treatment for. 48% had problems with alcohol, 12% reported a problem with nicotine use (including vaping), 8% said they had a problem with powder cocaine and the same proportion reported a problem with ecstasy.

**Is cannabis safe?**

**In 2016, 94% of police seizures were high-potency cannabis, compared to 51% in 2005 (Kings College London 2018). So that means that a lot of cannabis out there is the very dangerous high strength type more likely to lead to paranoia and addiction**

**24% of all new cases of psychosis are linked to the use of high potency 'skunk-like' cannabis (Kings College, London, 2015)**

**Smoking cannabis as a teenager is the strongest factor in later illicit drug use (British Medical Journal 2017). That means it can be a gateway to trying other drugs.**



## Cannabis can cause depression

Research suggests that cannabis itself can cause anxiety or depression.


Dopamine is a chemical in the body that plays a role in how a person feels pleasure. It is also important for someone to focus and find things interesting.

Using cannabis causes dopamine levels to fall. This is because the THC in cannabis lowers the body's dopamine to get high. After an initial high someone will feel lower than normal until dopamine levels rebuild.

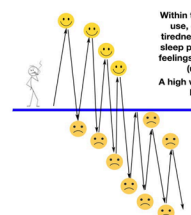
THC can stay in the brain for up to 3 months, meaning it can take three months to be back to normal. Therefore, even if someone is only smoking weed at the weekends they are still building higher levels of THC in their bodies and this will stop dopamine (in effect their 'happy') levels recovering.

**Cannabis can cause depression**

- Cannabis can cause anxiety or depression.
- Dopamine is a chemical in the body that plays a role in how we feel pleasure. It is also important for someone to focus and find things interesting.
- Using cannabis causes dopamine levels to fall. This is because the THC in cannabis depletes the body's dopamine to get high. After an initial high someone will feel lower than normal until the dopamine levels rebuild.
- THC can stay in the brain for up to 3 months, so it is necessary to have a three-month interval between smoking to be back to normal.
- This means that even if someone is only smoking weed at the weekend, they are still accumulating higher and higher levels of THC and this will prevent their dopamine levels (in effect their 'happy') to come back up to normal.



**Cannabis can cause depression**



**Within three weeks of regular use, cannabis can cause tiredness, lack of motivation, sleep problems and alternate feelings of high and then lows (ups and downs). A high will always be followed by a longer low.**

**Prolonged use can lead to anxiety, sleep loss, feeling paranoid and for some psychosis.**

## Using alcohol and cannabis together

Cannabis is a depressant or 'downer' like alcohol, i.e., it slows down the central nervous system and so reactions, coordination and judgement are affected. That's why combining alcohol and cannabis has a double dip effect.

There is an information sheet in the toolkit on poly use: 'Mixing alcohol and drugs fact sheet' [alcoholeducationtrust.org/rtk\\_mixing-alcohol\\_and\\_drugs/](https://alcoholeducationtrust.org/rtk_mixing-alcohol_and_drugs/)

Combining alcohol and cannabis allows the body to absorb the active ingredient tetrahydrocannabinol (THC) faster. This can lead to the cannabis having a much stronger effect than it would have normally.

Cannabis affects basic control functions in the brain, such as nausea and vomiting, and can suppress the body's response to vomit after drinking too much. This could increase the risk of alcohol poisoning.

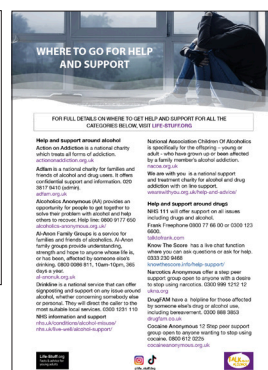
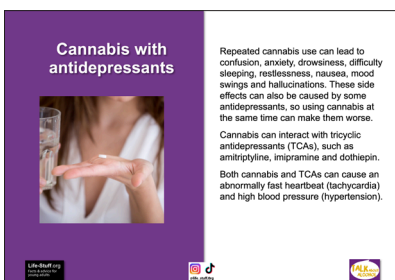
If driving, all it takes is 40 mg of alcohol per 100 ml of blood (a blood alcohol content of 0.04) and a single joint to feel the effects of twice that and being over the legal limit to drive.



## Cannabis and antidepressants

It is advised to avoid cannabis if on antidepressants and indeed many prescription medications. There are specialist websites and helplines where advice can be sought, such as [talktofrank.com](https://talktofrank.com), [drugsand.me](https://drugsand.me) and [youngminds.org.uk](https://youngminds.org.uk). Refer to the 'Where to go for help and support' sheet from the toolkit [alcoholeducationtrust.org/rtk\\_where\\_to\\_go\\_for\\_help/](https://alcoholeducationtrust.org/rtk_where_to_go_for_help/).

There are also links to organisations that can help on [life-stuff.org](https://life-stuff.org)



## Resilience

### Activity

Divide the group equally into two and ask the groups to face each other about a metre apart. One side will be called greens and the opposite side reds.

Ask for a volunteer to walk down the alley.

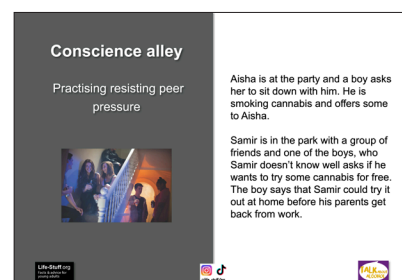
Ask the volunteer to read out a prepared statement. Here are two examples: "Aisha is at the party and a boy asks her to sit down with him. He is smoking cannabis and offers some to Aisha," or

"Samir is in the park with a group of friends and one of the boys, who Samir doesn't know well asks if he wants to try some cannabis for free. The boy says that Samir could try it out at home before his parents get back from work".

Allow the groups five minutes to think about what advice they will give the volunteer. The greens give reasons to refuse/resist and stay safe and the reds give the reasons to say yes.

Ask the volunteer to walk down the alley, with a red or green alternating to give that character advice as to the decision they should make.

Hence, the greens might say, "Don't do it, because you'll be breaking the law", or "it might make you ill" and the reds might say, "It will be really fun and you'll look a loser if you don't join in," or "Yeah, it'll be much more fun if you do".





This activity reflects the realistic peer pressure that young people can face and offers an excellent opportunity to talk about risk taking and how to plan answers to resist peer pressure.

The activity can be followed up with small groups acting out role play scenarios of different situations and how they would resist in a proactive positive way. The cannabis traffic light cards [alcoholeducationtrust.org/cannabis\\_traffic\\_light\\_cards/](https://alcoholeducationtrust.org/cannabis_traffic_light_cards/) can be used in this activity.



## Myths and questions about cannabis

### Activity

You may choose to cover some or all of the myth topics below on cannabis. Give one statement to a small group to discuss for a few minutes. Ask participants to note down their thoughts. You can place statements in different places around the room to get people moving around.

### Cannabis must be safe because it's used by doctors to treat some illnesses.

THC is the main psychoactive compound in cannabis that produces the high sensation, CBD does not. Medical cannabis is high in CBD, whereas street cannabis is much higher in THC.

Medicinal cannabis has all the regulatory safeguards of medicines, which are in place in order to manage the risks for people taking it. Licensed medicines have been researched and tested for specific conditions, and are only prescribed in the UK by hospital consultants and under very limited circumstances. The balance of THC and CBD is really important in managing the effects and risks. CBD can mitigate some of the harmful effects of THC, and medicinal cannabis is much lower in THC.

In the UK, the majority of street cannabis has very high levels of THC (the bit that causes the harm, especially to teenagers) and low levels of CBD. Plus it comes with all the risks of illegal drugs in terms of knowing exactly what has been supplied in relation to strength and purity.

**Cannabis must be safe as it's used by doctors to treat some illnesses**

What's the difference between medicinal cannabis and street cannabis? Medicinal cannabis is high in cannabidiol (CBD) whereas street cannabis is high in the psychoactive tetrahydrocannabinol (THC). Despite their similar chemical structures, CBD and THC don't have the same psychoactive effects. CBD is shown to help with anxiety, depression, and seizures.

Life Shift is a charity that helps young people with mental health problems. @life\_shift on Instagram and TikTok.

### Marijuana's effects are temporary.

Some people think that weed only changes the user's feelings and behaviour for a short period of time. In reality, the changes caused by marijuana can linger, and they can change the way people feel or behave long-term. For example, the National Institute on Drug Abuse (NIDA) suggests that marijuana can permanently change the parts of the brain responsible for learning and memory. As a result, people who abuse marijuana may struggle with names and faces, memory and motivation. Even if an individual stops drug use, the damage remains and can be permanent.

**The effects of cannabis are temporary**

Some people think that weed only changes the user's feelings and behaviour for a short period of time. In reality, cannabis can change the way people feel or behave long-term, affecting learning and memory.

As a result, people who abuse or use cannabis a lot may struggle with names and faces, memory and motivation. Even if someone stops drug use, the damage can be permanent.

Life Shift is a charity that helps young people with mental health problems. @life\_shift on Instagram and TikTok.

### Marijuana/ cannabis is a natural substance.

Marijuana is a plant, so some people may claim that it is safe because it grows naturally. In reality, sophisticated drug dealers will do almost anything to make their products more potent and harder to resist. As a result, many dealers lace their drugs with chemicals such as PCP, formaldehyde, codeine and cocaine – they don't share their ingredient lists or information on the purity of the products they sell. Users may never know what they're consuming until they have a reaction of some sort. Some of the products sold as marijuana are mass produced, chemically altered and laboratory adjusted.

**Marijuana/ cannabis is a natural substance**

- Marijuana is a plant. Some people may claim that it is safe because it grows naturally.
- In reality, drug dealers will do almost anything to make their products stronger and harder to resist.
- Plants can be sandblasted to add weight to the product, when smoked it is like smoking glass.
- Many dealers lace their drugs with chemicals such as PCP, formaldehyde, codeine and cocaine – there's no knowing or legal control and users may never know until they have a bad reaction.
- Some products sold as marijuana are mass produced and chemically altered in a lab.

Those who believe that their products are natural, just because dealers say so, may be deceived on a regular basis.

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## Cannabis isn't addictive.

Cannabis can and does cause addiction in people who use it, and chemical changes are to blame for this behaviour.

The NHS estimates that one in 10 people who use weed will become dependent on it. In addition, those who begin using the drug under the age of 18 have a one-in-six chance of dependence.

These people may find that they need to take higher doses of the drug in order to feel the same effects. Escalation of use and a withdrawal syndrome are components of dependency.

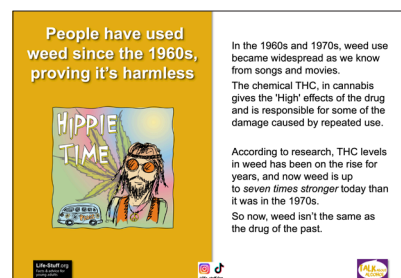
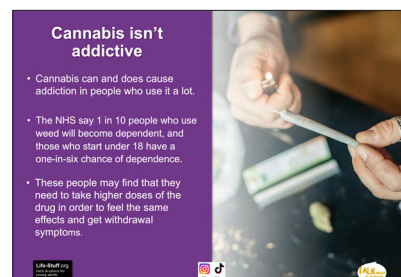
## People have used weed for decades, proving it's harmless.

In the 1960s and 1970s, marijuana use became widespread as we know from songs and movies. The potent chemical in marijuana, THC, is responsible for the effects of the drug. It's also responsible for some of the damage caused by repeated use. According to research, THC levels in marijuana have been on the rise for years, and now marijuana is approximately seven times stronger today than it was in the 1970s. Studies like this suggest that the modern marijuana simply isn't the same as the drug of the past. As a result, comparing modern marijuana and its impact on users to the substance of past decades doesn't stack up.

## The relaxation caused by weed can help people to succeed in life.

When under the influence of marijuana, someone's mind can become sedated and calm. In fact, some users believe the peace they feel allows them to navigate the stressful modern world more easily.

Unfortunately, marijuana use makes an individual's success less likely. Research shows that when a marijuana user is compared with someone who does not use marijuana, users have lower grades and are more likely to drop out of study and work.



## Additional Facilitator information:

Both THC and CBD compounds interact with the body's endocannabinoid system. This allows them to interact with the body's cannabinoid receptors but each has very different effects. The interaction affects the release of neurotransmitters in the brain. Neurotransmitters are chemicals responsible for relaying messages between cells and have roles in pain, immune function, stress, and sleep, to name a few.

Despite their similar chemical structures, CBD and THC don't have the same psychoactive effects. CBD is shown to help with anxiety, depression, and seizures.

THC binds with the cannabinoid 1 (CB1) receptors in the brain. It produces a high or sense of euphoria. CBD binds very weakly, if at all, to CB1 receptors. CBD needs THC to bind to the CB1 receptor and, in turn, can help reduce some of the unwanted psychoactive effects of THC, such as euphoria or sedation.

When the chemicals in the plant are controlled, some evidence suggests medicinal cannabis high in CBD can help patients suffering from illnesses such as epilepsy, multiple sclerosis or sickness linked to chemotherapy.

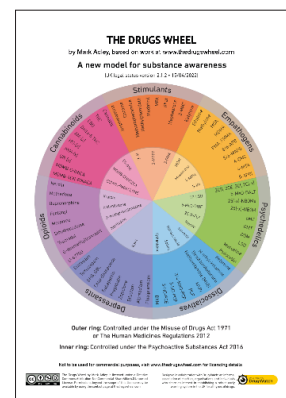
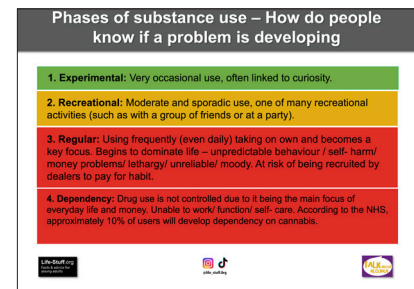
Towards the end of 2018, cannabis was reclassified to allow some cannabis-derived medicines to be prescribed by specialist doctors in limited situations. However, CBD's side effects may include: appetite changes, fatigue, weight loss, dizziness, diarrhoea.



## Recognising signs of dependency

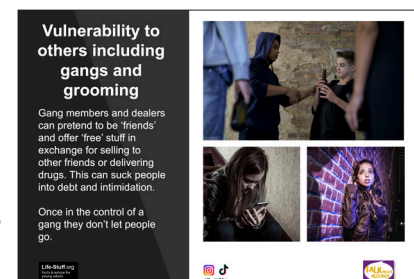
About 10% of regular users of cannabis become dependent on cannabis or its derivatives according to the NHS, so it is important to recognise the signs of someone developing problems.

1. **Experimental:** Very occasional use, often linked to curiosity for the 30% who try cannabis at least once. For most, this will not lead to problems, but for a very small proportion of users, it may trigger a propensity in the person to psychosis.
2. **Recreational:** Moderate and sporadic use, one of many recreational activities (such as with a group of friends or at a party) again for most this will be a passing stage of occasional use. Beware of the combination 'double dip' effects of alcohol and cannabis both being downers and so amplifying the depressant effects of both.
3. **Regular:** Using frequently (even daily) taking when alone and it becoming a key focus. Cannabis begins to dominate life – when dope begins to rule someone's life it is a dependency problem. Their behaviour may become unpredictable, they may self-harm, suffer loss of appetite and motivation. Money and keeping a job may be problematic. They may often be sleepy, unreliable or moody. They will also be at risk of being recruited by dealers to pay for their habit.
4. **Dependency:** When someone reaches the stage of dependence they cannot function without the drug and it is the main focus of everyday life and money. In most cases the person will be unable to work, look after themselves or others. This is unlikely with cannabis (more likely with Spice and Skunk) but early and regular use of cannabis alters the brain permanently and often leads to use of stronger Class A drugs. N.B. This workshop does not cover other drugs, but there a drugs wheel is included in the toolkit [alcoholeducationtrust.org/rtk\\_drugs\\_wheel/](http://alcoholeducationtrust.org/rtk_drugs_wheel/).



## How drugs can increase vulnerability to gangs and grooming

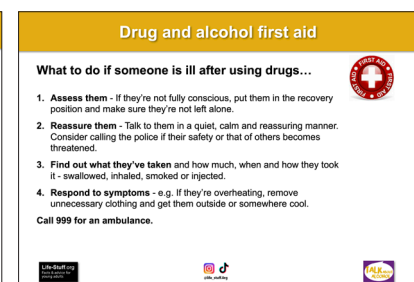
The lure of free drugs or alcohol is used by gang members or those recruited by them (often the same age as the victim) to hook more people in. They may befriend a person in the park or when buying drugs and offer them free gifts in exchange for delivering parcels, running errands or selling small amounts to mates. They then say the person has to pay off the debt by doing more and worse things for them. They are known to take over people's accommodation, use violence, intimidation and coercion with children from as young as 10 upwards.



Be wary of people's motives, even if known, especially if they are pressurising others to try cannabis or are giving it or other things away for free - sadly there will probably be a reason – they are trying to get more clients.

## What to do if someone needs help having taken drugs

If someone is in trouble from taking drugs it is vital know what to look out for and to stay with them and get help if necessary.



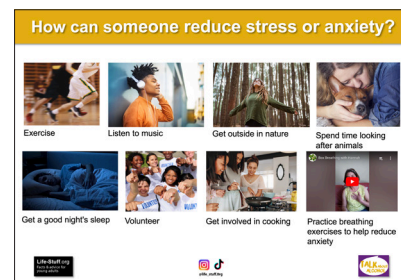
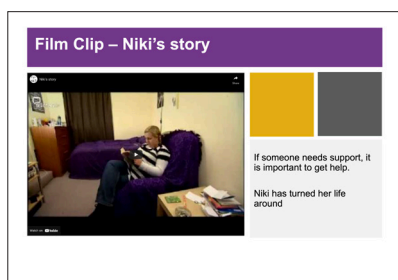
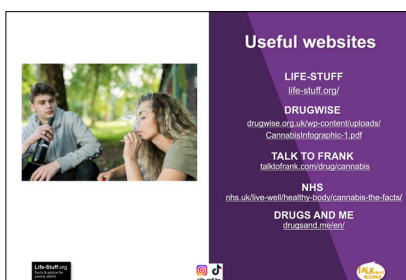
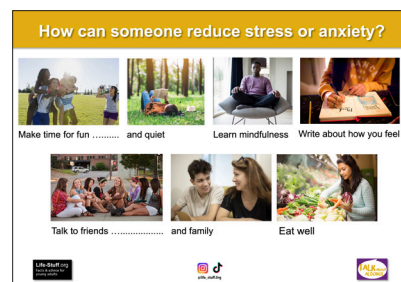
## Reducing stress and anxiety

Share some ideas for reducing stress and anxiety.

As well as the resources listed in the PowerPoint, there is a full list of where to go for help and support in the resource toolkit or via: [alcoholeducationtrust.org/rtk\\_where\\_to\\_go\\_for\\_help/](https://alcoholeducationtrust.org/rtk_where_to_go_for_help/)

There is also a good film clip covering the importance of asking for help that you may want to show via: [youtube.com/watch?v=LA8U7ZcXAH4#action=share](https://youtube.com/watch?v=LA8U7ZcXAH4#action=share)

For more information, visit [life-stuff.org](https://life-stuff.org)



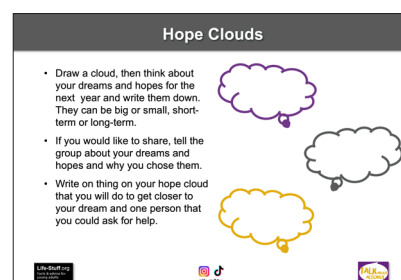
## Clouds activity

Ask participants to draw a cloud and to think about their own dreams and hopes for the next year.

It might be something that they can change or it might depend on others. Again, the suggestions may be very simple short-term ideas or aspirations that may take a lot more time, effort and support. Explain that they can choose to share their dream or hope with the rest of the group or keep it to themselves.

Ask participants who are willing to share to read out their dream/hope and discuss with group. Ask the whole group how being hopeful might help us to feel able to cope with things that happen or problems we want to solve.

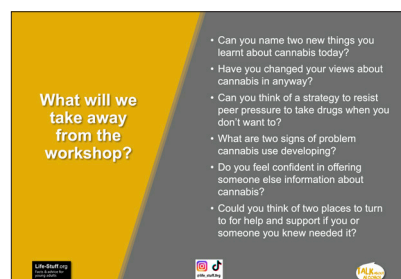
Ask them to write on their hope cloud one thing they will do to get closer to their dream and one person that they could ask for support.



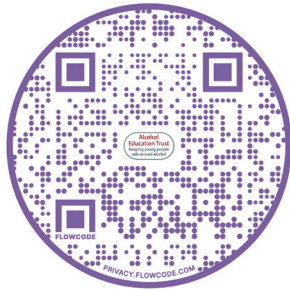
## Reflection and evaluation

These recap and reflect questions (do add your own, perhaps based on the introductory ice breaker questions) will help to ensure that participants think about the content of this workshop and are given an opportunity for open debate and reflection.

On completion of the workshop, please ask participants to complete the online survey that will help to evaluate changes in attitudes, knowledge and behaviour as a result of the workshop. There is a [online evaluation survey](#), or alternatively, there is a hard copy in the resource toolkit that can be photocopied. Please send completed evaluation forms to the Alcohol Education Trust, Pavilion in the Park, St John Way, Poundbury, Dorchester, Dorset DT1 2FG.



Please complete the online evaluation (alcohol)



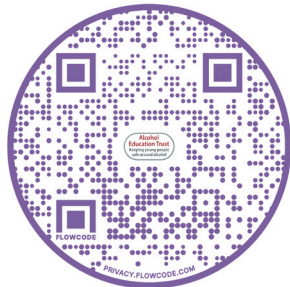
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**Produced by:**

The Alcohol Education Trust  
Pavilion in the Park, St John Way,  
Poundbury, Dorset DT1 2FG

**Charity registration:**

England and Wales 1186202  
Scotland SCO50360

**Contact:**

[info@alcoholeducationtrust.org](mailto:info@alcoholeducationtrust.org)

**Websites:**

[alcoholeducationtrust.org](http://alcoholeducationtrust.org)  
[life-stuff.org](http://life-stuff.org)  
[talkaboutalcohol.com](http://talkaboutalcohol.com)



If you have any feedback or comments regarding this guide or the web materials on  
[alcoholeducationtrust.org](http://alcoholeducationtrust.org) and [talkaboutalcohol.com](http://talkaboutalcohol.com),  
please email [info@alcoholeducationtrust.org](mailto:info@alcoholeducationtrust.org)

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