Community resources and drug abuse: a strategy for preventive drug education.

Michele Moran Zide

University of Massachusetts Amherst

Follow this and additional works at: https://scholarworks.umass.edu/dissertations_1

Recommended Citation
https://scholarworks.umass.edu/dissertations_1/4217

This Open Access Dissertation is brought to you for free and open access by ScholarWorks@UMass Amherst. It has been accepted for inclusion in Doctoral Dissertations 1896 - February 2014 by an authorized administrator of ScholarWorks@UMass Amherst. For more information, please contact scholarworks@library.umass.edu.
COMMUNITY RESOURCES AND DRUG ABUSE:
A STRATEGY FOR PREVENTIVE DRUG EDUCATION

A Dissertation Presented

by

Michele Moran Zide

Submitted to the Graduate School of the University of Massachusetts in partial fulfillment of the requirements for the degree of

DOCTOR OF EDUCATION

Major Subject: EDUCATION

January 1973
COMMUNITY RESOURCES AND DRUG ABUSE: A STRATEGY

FOR PREVENTIVE DRUG EDUCATION (December 1972)

Michele Moran Zide

B. A. - Mount Saint Mary College, Hooksett, N. H.

M. Ed. - Boston College, Boston, Mass.

Directed by: Dr. Glenn Hawkes

ABSTRACT

The purpose of this study was to identify and describe components judged important for a community drug education program, to create one strategy, to implement the identified components, and to collect and analyze anecdotal data to determine if the components and the strategy merit further development and research. The drug education strategy was identified by reviewing sixty-eight programs in seven states across the country and by identifying and adapting some of the program dimensions operationalized in the sampled programs.

The components judged to be important were: defined selection criteria for facilitators and participants, duration of the training, team approach, trans-disciplinary approach to content information, methodology including group dynamic techniques, and organizational development strategies.

The community drug education training institute was designed to train a cross sectional community team of educators, students, policemen,
social service workers, and other concerned community members. The trained community teams returned to their local communities after the training to implement a drug related action project.

Six community case studies contain anecdotal data describing the trainees reactions to the training institute, a description of the drug related team action projects designed and implemented in the local community by the trained team, and the reactions of the local level trainees to these training programs.

The final chapter of the dissertation contains the author's considerations and directions for further research and training in the area of community and school drug education programs.
COMMUNITY RESOURCES AND DRUG ABUSE:
A STRATEGY FOR PREVENTIVE DRUG EDUCATION

A Dissertation

by

Michele Moran Zide

Approved as to style and content by:

Dwight W. Allen, Dean

Glenn W. Hawkes, Chairman

Robert L. Sinclair, Member

Alfred S. Alschuler, Member

William J. Goldman, Member

December 1972
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Chapter</th>
<th>THE PROBLEM</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Introduction</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Purpose of the Study</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Significance of the Study</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Review of the Literature</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Approach of the Study</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Summary</td>
<td></td>
</tr>
<tr>
<td>II</td>
<td>DRUG PROGRAMS, A PERSPECTIVE</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>Rehabilitation</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Treatment</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Preventive Education</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Community Program - A Problem</td>
<td></td>
</tr>
<tr>
<td>III</td>
<td>THE STRATEGY AND THE IMPLEMENTATIONS</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td>Objectives</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Selection Criteria</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Trans-disciplinary Approach</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Team Approach</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Methodology</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Organizational Development Techniques</td>
<td></td>
</tr>
<tr>
<td>IV</td>
<td>ASSESSING THE EFFECTIVENESS:</td>
<td>47</td>
</tr>
<tr>
<td></td>
<td>THE FINDINGS</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Introduction</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Community A Case Study</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Community B Case Study</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Community C Case Study</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Community C Case Study</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Community D Case Study</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Community E Case Study</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Community F Case Study</td>
<td></td>
</tr>
</tbody>
</table>
Chapter V: CONSIDERATIONS AND DIRECTIONS: A CONCLUDING STATEMENT. 110

APPENDICES. 117

- Appendix A: Communication Exercises 117
- Appendix B: Self-Image Building Exercises 128
- Appendix C: Values Clarification Exercises 136
- Appendix D: Problem Sensing and Problem Solving Exercises 158
- Appendix E: Current Bibliographical References 178

BIBLIOGRAPHY. 192
CHAPTER I

THE PROBLEM

Introduction

The schools blame the police, the police blame the kids, the doctors blame the pushers, the kids blame the schools, the teachers blame the parents - and on and on it goes - unless individuals from each of the segments of the community get together and talk about where the problems and crises really lie. After problems are identified and defined by representatives of all major groups in the community, the whole community can then develop action programs which will affect positively those most involved in drug abuse.

Youth are not the only segment of the population who need to know and understand the realities of a drug orientated culture. Information about drug abuse also needs to be shared with a number of professional and non-professional people functioning within various social institutions. Doctors, educators, high school students, police, elected officials, parents, and other community members all must contribute in order to find solutions to this important social problem. This "problem" is a community problem.

Fifty-five State Drug Education Programs were funded by the United States Office of Education during the summer of 1970 for the purpose of
developing localized preventive action programs throughout these states. During the spring of 1971 the author visited seven pre-selected states to write an in-depth case study report of each. Specific attention was given to the effect State projects had in local communities. Observations of the Multiplier Process in Seven States, National Drug Education Program, contains specific criteria considered to be essential for the implementation of effective community drug education training programs. It is assumed that community members must know about drugs, if they are to deal with the drug issue. This includes knowing about the psychological, physiological, sociological, and legal realities as they relate to the individuals involved as well as to the community at large. It is imperative that action be taken by many sectors of the community in order to effect conditions which are the probable causes of the drug dilemma.

**Purpose of the Study**

The purpose of this study is to identify and describe components judged important for a community drug education program, to create one strategy, to implement the identified components, and to collect and analyze anecdotal data to determine if the components and the strategy merit further development and research. The drug education strategy will be identified by reviewing sixty-eight programs in seven states across the country and by identifying and adapting some of the program dimensions operationalized in the sampled programs.

The approach to implementing the content information about drugs will be trans-disciplinary, that is, sociological, psychological, medical, and legal implications will be studied. In order to facilitate a team's examination and sharing of affectual reactions to the information that will be presented, group
dynamic techniques will be utilized. These will be described and a rationale for their use will be presented. In order to facilitate the designated community programs, organizational development strategies will be discussed and tested. The drug education strategy will be examined through the use of case studies, including anecdotal data relating the participants' perceptions of the training program, local project implementation and long range planning designs.

Finally, recommendations for implementing community drug education programs and some implications for suggested areas of research will be advanced.

Significance of the Study

There are numerous approaches to the issue of drug abuse (Bloomquist, et al., 1970); however, emotionalism, lack of factual knowledge, and the invasion of the "problem" into every area of the community has a paralytic effect on the social environment. Concerned people are often too closely involved with the issue to conjure up viable programs to combat the problem.

A national survey (Moran, 1971) noted that in some communities drug education programs were multiplying myths about drugs. Facts about the issue were not being presented. In other communities youth were not involved in the programs, consequently their perspectives were not shared. In many communities factual information from a one-sided point of view was the only method of so called "drug education." To single out youth as the only target group involved in the drug dilemma is to evade the situation at hand. Still, many more communities failed to act at all because they did not know what to
do. They appeared to be frozen in their own ignorance.

This study presents a multifaceted strategy with components designed to present factual information, remove the emotional impact from the problem, and allow for action to be defined. The proposed strategy shows how individuals can move from problem definition to mobilization for action. It lays out a clearly defined route from objectives, methods to effect needed changes within communities, to action. It presents criteria for the selection of trainees who in turn become agents for change within the local community.

Because this study presents a framework for training, it enables a target resource community team made up of people from various socio-economic backgrounds, ages, races, sexes, to begin to act on other social issues and problems identified by community citizens.

The proposed strategy facilitates communication between all sectors of the community. People are given an opportunity to express their concerns, share resources (personal as well as physical), and to come to respect each other for their personal likenesses and differences.

In order for communities to increase their understanding of how they can internally effect and act on their particular problems, a structured, organized plan for learning and action is essential. This study will advance a method for achieving that end.
Background of the Study

It is readily agreed that drug use and drug abuse is a social issue effecting communities across this country. Stanley F. Yolles, Former Director of the National Institute of Mental Health suggests:

Ours is a drug-taking society, where a host of different drugs are used for a variety of purposes to restore health, lessen pain, induce calm, increase energy, create euphoria, and induce sleep or alertness. Today many substances are available to swallow, drink, or inhale in order to alter mood or state of consciousness. Unfortunately, a good number of substances which have a legitimate use are also subject to abuse. There is also a long list of drugs and chemicals with no known medical use but with potent capacity to alter feelings and behavior.

Narcotic addiction and drug abuse are no longer confined to any isolated sector of our population. The rich and the poor, the urban and the suburban, the young and the middle-aged, of both sexes, are involved.

We face a complex and difficult dilemma for which there is no simple, overall solution. Health, legal, moral and social factors all intervene in a way that defies pat answers. (1970)

A youth of the drug culture has said, "this community better get their thing together and find out where they're at. Shit, this place is unlivable. No wonder the kids are freaking out on drugs. This place is a stinking trip in itself" (place" meaning community, world. . .).
What this youth may be talking about is a matrix of relationships in our society which confuses him. He may see hypocrisy. He may perceive a dichotomy between adults' stated values and the behavior they exhibit. He may feel trapped in a maze of do's and don'ts which stifle his desire to create a lifestyle acceptable to himself.

In my work with run-aways and potential run-aways involved with drugs, I have often heard the following (paraphrased) plea.

Stop passing the buck about what you think is a youth drug problem. Start looking into yourselves – you parents, teachers, lawyers, political leaders, doctors, judges. Be people. See me and my friends as people. See me as a person. We (youth) need you (adults) like you need us. We all need love and respect to live in this "our community." What is our community? A sociological term or a place? If it is a place with live human beings, then let's start to work at making it become a place where we can live, play, work, love, and maybe even pray... stop forcing us to take drugs in order to stay here... and get rid of your stuff (drugs), too. Let's be honest about the terrible problem facing us all and only then can we do something about it.

As suggested in the above passage, only after the problems are identified and defined communally (youth and adults) can an action program which will effect the potential drug abuser and the abusers themselves be operationally developed.

The process for community education for individuals from various segments of the population is not theoretically different from the educational processes which most readily facilitate learning in any other educational
context. Learning which not only imparts factual information but, also, enhances psychological growth is of great importance (Brown, 1971). The use of group dynamic techniques which stimulate the learner's sensitivity to himself, his attitudes and behavior as well as the understanding and acceptance of others' attitudes and behavior is of significant importance in the learning process (Weinstein and Fantini, 1970).

Factual information about the issue of drugs and an understanding and acceptance of various attitudes and life styles are, unfortunately, not enough to effect the drug dilemma. The problems must be identified and defined clearly enough to develop organizational strategies for action. A program of realistic action can be designed around strategy in order to create an operational framework for action planning and implementation (Beckhard, 1969).

Further program development for community mobilization through community education is necessary if communities are to find answers which will effect emerging social issues and concerns. This study attempts to look at mobilization through educational programs for community resource personnel, both professionals and non-professionals, youth and adults alike.

**Approach of the Study**

This study will present the guidelines which will give direction and strength to the proposed strategy for community preventive drug education. It outlines the strategy itself, explains how it was implemented, and contains
the reactions of randomly sampled participants involved in it. Six community case studies will serve as a portion of the feedback data and as an informative report on local action projects implemented as a result of the team training experience.

Guidelines that give direction to the proposed strategy will be generated. A conceptual base will be developed by suggesting identified components judged essential for a community education training model. These components can be identified through an examination of current programs, more specifically by an examination of data presently available from a national survey conducted in sixty-eight communities in seven states (Moran, 1971). The survey includes a description of action programs initiated by resource team members within local communities.

The guidelines for the strategy being presented are taken from the data presented in the national survey (Moran, 1971). These are given special priority in the development of community mobilization through an educational training program. The preceding approach is taken so that the guidelines for the present study are given strength.

The strategy or training program contains the following components:

Defined selection criteria for the facilitators, and participants: Youth (drug users and non-users), parents, educators, law enforcement personnel, and social service agency staff must be represented in order for a community to participate in the educational workshop.
Duration of the training: All staff and participants must participate in all activities during the seven day institute.

Team Approach: Participants function as a team working toward the goal of developing an action project with their local community.

Trans-disciplinary Approach: Specific content information about drug related issues is presented by a doctor, lawyer, psychiatrist, social worker, alcoholic, x-drug addict, social psychologist, educator, and an inner-city minority group member.

Methodology: Group dynamic techniques are designed and facilitated by the training staff. These techniques are used to develop communication skills, to examine content information, and to look at the affect related to the content. Large and small group settings are used to achieve the objectives.

Organizational Strategies: Organizational development techniques are designed to facilitate action planning to be implemented in local communities. Each community resource team designs a program which meets an assessed community need. Trainers serve as consultants to local projects in the field when the need is expressed.

The ground work for the implementation of this strategy has been undertaken by the Maine Drug Education Project Director, Carl Mowatt. Communities throughout the State of Maine were invited to participate in the Drug Education Institute. There was a cross-sectional representation from each community. Representatives from the youth culture (drug users and non-users), educators, parents, police and social service workers had stated that they were willing to participate if the community was to participate in the training program.
Potential trainees were interviewed prior to being accepted as participants. There were community living rules during the seven-day institute which had to be understood and agreed to before an individual was accepted as a participant. He/she also had to be committed to participate in a local drug related action project upon return to the community after the training.

There were no specific demographic criteria which had to be met in order for a community to participate. At the time of the training, demographic factors were studied and action projects were designed by the participants to meet the needs of their particular communities.

The training site was the Poland Springs Resort Inn in Poland Springs, Maine. Only participants and staff\(^1\) used the facilities at the inn during the institute.

Interview instruments were developed. After the training, participants from six communities were interviewed. The anecdotal data provided information about the trainee's perceptions of the training he/she received, feelings about the methodology used, the form their involvement in the local community action took, and the effect of the action taken. Each subject was interviewed as a trainee of the State training program and as a trainer in the local community.

\(^1\)Staff: Carl Mowatt, Maine Drug Project Director; Robert Soulas, Assistant Director; consultants and facilitators; Leonard Goldman, Dr. Patricia Bull, Lu Bain, May Timer, and Michele Moran.
The community case studies included information based on the following dimensions of local projects implemented:

- Selection criteria of trainers and trainees
- Duration of the training
- Team approach
- Trans-disciplinary approach to factual information
- Methodology
- Organizational plans for further action

Summary

In summary, this study presents one strategy for communities to train personnel, identify resources, and define action programs which will constructively effect drug related concerns and/or problems. These action programs will hopefully reach out to and assist a cross section of community structures, institutions, groups, and sub-groups. It will provide a framework for further program development in community education and mobilization.

In Chapter II, "Drug Programs, a Perspective," various components of drug programs and the categories of drug use and abuse will be reviewed. This review is based on the author's personal observations, research, and experience in the field as well as upon recent literature about drug rehabilitation, treatment, crisis intervention and education.

The proposed strategy, and its implementation will be presented in Chapter III. The components will be viewed in terms of an educational design to meet the stated objectives. A rationale for the use of the methodology to meet the objectives will be outlined.
In Chapter IV, selected case studies containing anecdotal comments of the trainees of the State Training Program, the trainers of local training programs, and the local program trainees will be presented. This anecdotal data will describe behavioral changes as perceived by the interviewers themselves. Local action project objectives, implementation designs, and their perceived effect on local trainees will be presented.

The summary, findings, and implications for further study will be the topic of Chapter V.
CHAPTER II

DRUG PROGRAMS, A PERSPECTIVE

In this chapter the author reviews various components of drug programs and the categories of drug use and abuse. This review is based upon the author's personal observations and experience in the field as well as upon recent literature about drug treatment, rehabilitation and crisis intervention.

A basic overview of treatment, rehabilitation, and crisis intervention programs is a necessary part of understanding the strategy for community drug education because it is important to distinguish community drug education from other kinds of programs dealing in the area of drugs. Community drug education programs are designed to allow participants to become aware of the "problem." They are not designed to treat the problem, to solve it, or rehabilitate the individual who is directly involved in the abuse of drugs.

Early treatment and rehabilitation programs were an outgrowth of the need to place court adjudicated drug offenders for treatment (Westman, 1970). The Federal Government opened the first hospital at Lexington, Kentucky for the rehabilitation of heroin addicts in 1935. Since that time both state and federal governments have passed so called "diversion" laws in order to divert drug offenders from the criminal law system to treatment and rehabilitation programs.
Congress passed the Narcotics Addiction Rehabilitation Act in 1966. This law provides for treatment of both drug offenders (from the courts) and drug abusers (not through the criminal law system). The United States attorneys, at the Federal District Court level located in all of the States, are authorized to receive applications for voluntary commitments to Federal institutions for diagnosis as drug dependent or drug addicted persons. The commitment period is for thirty days after which a report is sent from the institution to the Federal District Court Judge. The addicted or drug dependent person is then referred automatically to a state or federal rehabilitation program. This system allows for the purchase of many different kinds of services designed to reorient, treat, and rehabilitate one who is involved with dependency related drugs. Programs vary from an eight week training program to a college education.

Each of the states has established its own laws relating to drug offenses and the treatment and rehabilitation of drug abusers (Glass, 1972). These state laws differ with respect to the classes of those who are eligible for diversion to treatment and whether diversion is mandated by statute or voluntary on the part of the court (Glass, 1972, cf. appendix for Massachusetts General Law Chapter 123).

Irrespective of where the drug abuser comes from (Court or off the street) there are programs to treat and rehabilitate him/her. These programs take several forms: medical, psycho-therapeutic, vocational, educational, or
a combination of these. A review of treatment and rehabilitation programs was published in 1967 by the Vocational Rehabilitation Administration. This volume contains reports from federal and state projects funded by the federal government. These projects included some of the following services:

**Rehabilitation:**

**Intake:** Whatever the source of referral or motivation, verification that the individual is addicted to heroin or other dependency related drugs is usually required. Currently most programs are designed to treat addicts and are not currently set up to handle the drug dependent person (one who is dependent upon but not addicted to a dependency related drug), since so many active addicts are in need of services. In addition, some testing and evaluation is done to establish what kinds of services seem to be indicated, beyond medical detoxification, to assist the addict in his efforts to be self-sustaining following rehabilitation.

**Detoxification:** In chronological order, detoxification is actually concurrent with intake or precedes it, since the addict may have to be relieved of the pain of withdrawal symptoms before any step can take place. The drugs used for detoxification depend not only on the height and weight of the addict and the length and dosage size of his "last run," or habit since the last time without drugs,
but also on the individual physician who supervises his/her detoxification and the policies at the treatment facility. Most current programs seem to vary from using no drugs ("cold turkey"; e.g., Marathon House, Day Top Village, Odyssey House), to giving high dosages.

**Treatment:** This may include any or all of the therapeutic forms used with patients in other psychiatric categories, including group and individual psycho-therapy; recreational, educational, and occupational therapy; and, at times, vocational training (McKee, 1967). All of the therapeutic forms mentioned (or any combination of these) may be considered treatment.

**Placement:** For the addict who has undergone treatment, either a job or a particular kind of follow-up setting (such as Halfway House) is important. Professionals agree that an addict who must return to the same setting and who has no real friends aside from other addicts and pushers needs a great deal of strength to avoid old habit patterns. As a result, the strength or weakness of any program rests upon the effectiveness of the follow-up stage (Perkins, 1972).

**Follow-up:** During the rehabilitation period, trained counselors may coordinate other services in the community and support the ex-addict in his efforts to readjust patterns to a new setting.
Knowing that a particular person is available as needed or on a regular basis can be very helpful to the ex-addict, assuming that the ex-addict feels this person wants to help. Suspicions and doubts transmitted by counselors can be as harmful as the doubts of the ex-addict in himself (Westman, 1970). The official title or professional status of the counselor matters less than his intent; that is, whether he/she is trying to help or is looking for the ex-addict's weaknesses. Some professionals' experience indicates that people usually find what they look for in others, whether it is weaknesses or hidden potentials for growth (Westman, 1970).

**Treatment**

For all practical purposes, it is impossible to control all drug traffic at the present time (Streuk, 1971). Then, how can we control the addict? Obviously, only by mental or physical means or the combination of the two.

Mental treatment of addiction includes psychiatry, psycho-therapy, group therapy of the kind practiced in ex-addict organizations, (e.g., Odyssey House, Synanon, Marathon House, Day Top Village), hypnosis, or some kind of counseling (hot-lines, rap centers, crisis intervention centers). Physical treatment includes drugs to counteract the addicting drug (methadone), drugs to take away withdrawal symptoms (barbituates), and a drug that will make addicting drugs unpleasant to take (naloxone), either by inducing an adverse
physical reaction or by blocking the desire to take drugs. A combination of physical and mental therapy can be used as well (Boston State Hospital).

Barbara Milbauer, in Drug Abuse and Addiction, says that "the whole area of drug abuse is a barren field as far as treatment and research are concerned. This is largely due to the fact that drug abusers generally do not have to commit crimes to get their drugs and, therefore, do not turn up in courts and police stations. The medical profession gets little money for research into drug abuse because abuse does not present a problem for society that can be measured in any terms other than emotional ones." The drug abuser may be a menace to himself, an embarrassment to his family, and a nuisance to others, but he is not usually a potential criminal, nor the menace to society that the addict is considered to be.

Drug abuse is not such a clearly defined problem as addiction, that is, the abuser cannot be categorized the way a heroin addict or alcoholic is. It is not necessary to take so many grains of a chemical substance or so many trips on acid or to smoke just so many joints of pot to qualify as a drug abuser. Anyone who takes more than the prescribed dose of even a legitimate drug or who mixes drugs indiscriminately is a drug abuser.

As Milbauer says in Drug Abuse and Addiction, it would be an impossible and useless task to attempt research projects on every conceivable type of drug abuse and every possible combination of drugs that might be abused. "Research is needed into the causes of drug abuse and into effective means of
educating both the younger and older generations about it, as well as into the types of treatment and necessary rehabilitation the drug abuser will respond to," (Milbauer, 1971).

To date, there are few programs directed at reaching out to the drug abuser who is not an addict and may never become one (Project Place, Boston, Mass.). The author believes there ought to be more emphasis placed on developing programs and setting up places for drug abusers to go for help before they become addicts (Bridge Inc., Boston, Mass.; LUK, Fitchburg, Mass.). Drug abusers do not need the kind of care that addicts get; it is often too late in some cases to keep these abusers and/or experimenters off dependency related drugs. Sympathetic help and some form of therapy is needed; if only to help them recover from the effects of drug abuse and to share with them enough about the physical dangers of indiscriminate drug taking, so that they can avoid the worse, more damaging aspects of abuse (Shannelly, unpublished).

More research must be undertaken and experimental project designs implemented in order to find out what types of programs work or don't work, as well as to discover the pressures that most often cause a person to abuse drugs. Accurate and detailed information is needed before people can be kept from abusing drugs in the first place (Milbauer, 1971).
Preventive Education

Every year the chance is getting slimmer and slimmer that a teenager will not experiment at least once with drugs. Today's average youth knows at least as much about drugs as his teachers and parents do, and has probably tried one of the socially and legally unacceptable drugs (marijuana) (Strauk, 1971). Honest discussion (not preaching) about drugs, as soon as a parent or teacher feels the individual (youth, student) is ready for it, can serve as a preventive measure (Shannely, unpublished).

Larry Baird, chairman of the National Drug Education Action Committee, believes that directors of preventive drug programs must risk not being moralistic or judgemental when presenting drug education material. He believes that in order for one to make decisions, he/she must have all the facts related to the problem. Facts, both pro and con, must be shared. He maintains that most people will respect information and act responsibly. To fear that individuals will not make the "right" decision is indeed making a value judgment, an unprofessional and unrealistic posture to take. Therefore, "prevention" materials (pamphlets, books, films) laden with irrelevant, moralistic, and legal judgments are in themselves inadequate and ineffective.

A danger of going overboard in teaching or lecturing about the effects of drugs is that a person can make himself appear ridiculous by telling obviously exaggerated stories (Westman, 1970). Another danger of exaggerating is that emphasizing and building up the dangers make drug taking sound even more
thrilling and adventurous. Some young people take drugs for the joy of disobeying parents, getting back at teachers and/or school administrations, or just to find out what it's like (Milbauer, 1971).

There may be little harm in informing youth about how drugs are taken, used, and abused. A percentage of youth may go out to practice what is told them, but if they want to take drugs it is easy for them to learn what they need to know on their own, from their peers and on the streets. Years before sex education was taught in our schools, young people learned the facts of life. Youngsters, without any instruction from their elders about drinking alcohol and smoking cigarettes, had no trouble in trying out those activities.

Barbara Milbauer says that "the greatest of prevention comes not through formal education (the teacher-student interaction), but through what the children learn in the home and the relationship experienced with family and friends. Parents, teachers, police, and other adults who smoke and drink heavily will have a harder time than others in warning youth about drug abuse. So too will adults who gobble amphetamines and barbituates for diets, for insomnia, for headaches and reasons other than genuine illness. Adults who never listen to children or youth or who belittle their problems, concerns, and/or arguments will too have trouble. Though no one knows what are the definite causes of drug use and abuse (other than for medical reasons), there is little doubt that youth imitate what they see, and also that sometimes they take drugs to rebel against adults who do not take them and their concerns seriously."
Community Programs - A Problem

It appears that in many communities drug programs operate in fragmented isolation, e.g., a lecture here, a hot-line there, a treatment program in still another part of the community. Police and law enforcement personnel receive written literature and attend lectures sponsored by their departments in order to get information about drug related problems (Fitchburg Police Chief F. Roddy). Teachers, too, receive literature and may be fortunate enough to attend lectures on drugs. Nurses, doctors and other professionals are also exposed to some information at least as a result of their professional interaction with drug users or abusers. Unfortunately, this method of "in-house" training does not allow for inter-disciplinary and inter-agency cooperation. This limits the discovery of human resources. Professional experience of individuals in other professions is not shared to the point of understanding or mutually exploring potential referral cooperation.

If one objective of a drug education program is to effect action in the community related to the drug issue, the one viable alternative should be to involve various professional groups, social service agencies, and educational personnel in a cooperative training and planning effort. Inter-agency and inter-disciplinary cooperation is essential for designing and implementing programs to meet the needs of the total community.

If drug education is needed in a community and the objectives of such a program include hopefully effecting the incidence of drug use and abuse, then
the target group for such programs should include all of those who use drugs. The author feels that this group should not be limited to youth but should involve all members of the community.

It is, therefore, the goal of the proposed strategy to present factual information about the drug "problem" in a particular context. That context is inter-disciplinary and trans-societal as defined by a community which hopes to deal with the "problem." Factual information includes the pharmacological, medical, legal, psycho-social and educational aspects of drugs. Multi-modality treatment and rehabilitation programs will be explored as a part of the information.

Beyond the presentation of factual information the strategy is designed to explore the affectual reactions of the trainees to each other and the information presented; direct attention to the commitment of a trainee to deal with the "problem" in his/her local community; and to help a team of trainees define action plans and goals to be implemented in its home community.

The following chapter will speak to the five major components of such a community educational training strategy.
In Chapter III the objectives of the proposed drug-training strategy are presented together with a discussion of the five essential training components (selection criteria, trans-disciplinary approach, team approach, methodology, and organizational strategies). The process of implementing this strategy in the state of Maine also will be reviewed.

Objectives

The primary objectives of the Drug Education Institute as defined by the staff team are as follows:

1. To share factual information of the medical, legal, sociological, psychiatric, education, psycho-social, and experiential aspects of the drug issue.
2. To become intellectually and emotionally sensitive to one's own personal needs as well as those of others.
3. To improve communication skills.
4. To become a member of a team and work towards a commonly defined goal.
5. To become aware of the need for a cross-section of society to be part of the "drug-problem" solution.

6. To develop skills in specific methodology for screening and evaluating drug related materials.

7. To develop skills in problem sensing, problem solving, utilization of group dynamic techniques, implementation of organizational development techniques for the purpose of putting into operation community-based designs.

8. To develop skills in assessing local community needs related to the drug issue.

9. To design a drug-related team project to be implemented within the local community.

Selection Criteria

Staff

The criteria for selecting staff to conduct the training session is oriented towards:

1. Group facilitators skilled in the areas of group relations, group processes, and group dynamics.

2. Organizational development specialists:
   a. Capabilities for creating structures for action.
   b. Abilities in the areas of problem sensing and problem solving.
3. Individuals who have worked in, or with, drug-related programs.

4. People capable of functioning as a member of a team to arrive at team decisions.

5. Auxiliary staff persons: specialists in drug-related issues bearing on their own professional discipline, such as the law, medicine, psychology or psychiatry, education, social work, etc.

Participants

The primary purpose of the proposed strategy is to educate a cross-sectional group in a community and to establish a community drug-related program based on the theory that the "drug problem" affects all levels of society and that its solution must be dealt in kind. With this in mind, a concerted effort is made to select from a cross-section of society those people meeting the following prerequisites:

1. An admission of the existence of the drug dilemma and their inability to positively affect the situation single handedly.

2. A willingness to participate in the training program and to abide by the established live-in community rules established by the staff.

3. A commitment to work in a local community program or some drug-related action project.
Trans-disciplinary Approach

The trans-disciplinary approach is the process of pooling the information of selected professional resource peoples. These peoples (doctors, lawyers, sociologists, psychiatrists, educators, social workers, alcoholics, ex-addicts, inner-city minority group members) contribute specific insights concerning the drug problem as it relates to their "discipline." This new knowledge is a cohesive force which can influence the resolution of drug-related problems. These accumulated insights provide a new and comprehensive outlook of the "drug problem," its complexity and societal diversity.

The above mentioned professionals also provide services which bear upon the drug problem. For example, a doctor is necessary to treat an OD case; a lawyer, to counsel offenders since the use of drugs has legal implications; an educator, to devise in-service programs for students and teachers for the development of affective drug-education curricula; a psychiatrist, to identify the psychological and physiological disorders concomitant with serious drug abuse; a social service worker, to give information about the multi-modality treatment and/or rehabilitation programs on-going in some communities; a sociologist, to discuss the implications of the drug culture, especially youth's perception of it; an ex-drug addict, to provide experiential insight into drug addiction; an alcoholic, to set up group orientated rehabilitation program, and an inner-city minority group member to share environmental and cultural causative viewpoints.

The drug problem has for one of its causative factors a general breakdown in societal relationships at all levels. The trans-disciplinary approach,
apart from the resources gained from pooling these areas of competence, stresses indirectly the need to bind all spheres and activities of society into one supportive, affective whole against an enemy whose poison affects the vital bloodstream of society.

### Team Approach

#### Staff

The staff function as a team rather than as a group of professionals working toward the same goal. They develop an affective and attitudinal interrelationship in which individual goals are submerged for the pursuit and attainment of the team defined goals. They work toward the ideal of achieving a unity of function and purpose with each member contributing his insights for the attainment of the goal as communally defined. The achievement of this ideal team outlook and identity serves to elicit mutually benefiting criticisms; to support and re-enforce suggestions and cognitive inputs.

In addition, this team-ness, as modelled by the training staff, serves as a viable and visible model for participants who will be working in a team-oriented drug program in a local community.

#### Participants

The cross-sectional community participants in the training program are in no way assumed to be a team upon their arrival at the training site. They come as individuals with their own expectations, fears, and needs. After a
structured opportunity to share content learning, individual attitudes, values and problems, both professional and personal, hopefully they can begin to formulate a common action goal which necessitates an individual commitment from each group member. When this commitment is defined and responsibilities are accepted, the team should emerge and each team member should decide whether or not to commit himself or herself to a oneness of purpose and action.

The importance of this team building cannot be minimized. Every resource should be tapped and means taken so that the team will continue to act as an entity within the local community. This team-ness will hopefully help to overcome such divisive obstacles as diminishing interest, the desire to act on one's own, the desirability of eliminating a member not considered 'simpatico,' and other encountered difficulties and obstacles which diminish initial enthusiasm.

A skillful facilitator working with his or her group will re-enforce the mutual inter-dependency bonds among the participants, so that the participants will instinctively and experientially realize the need to work as a team, feeling, as it were, the inadequacy and insufficiency of individual action unrelated to the team's defined goals.

Methodology

The primary objectives of the strategy are to learn about drugs, to relate to people within this context and to define communal action to be taken on the issue.
Under the organizational direction of a facilitator, the participants relate in small and large group settings. Group dynamic techniques serve as a vehicle to facilitate communication among the group members.

The group dynamic techniques employed to explore the individual's affective domain range from simple word games to more complex role-playing tasks.

Values clarification, or the process of defining and prioritizing one's values related to drugs, serves as a vehicle to examine one's personal views and to share with others on a social level.

Other techniques such as video-tape filming, lectures, both mini and micro, films, music, tape recorders and other kinds of media are also used to achieve the stated objectives.

Clearly defined team-building techniques are utilized initially and progressively to enhance the development of the team concept. These team-building techniques, coupled with techniques in organizational design, serve as vehicles to achieve action-oriented projects implemented at the local level.

By design, the facilitators on the staff team decide upon and implement the group dynamics techniques in both the large and small group settings. Each facilitator is responsible for a small group during the entire workshop. All facilitators and trainees participate in the large group sessions.

Participant involvement in all of these processes of learning and inter-relating enhance the basic methodology described. In Chapter IV, first-hand
reports from the participants will clearly demonstrate the personal and psycho-social growth experiences they identified through these processes.

**Organizational Development Techniques**

Organizational development techniques serve as a means for a team to operationalize their goals to be achieved in the local community. After team members have identified their own 'back-home' drug-related problems, and they have prioritized these in terms of frequency and severity, then the team proceeds to define a goal statement. It is at this point that a five-phase action plan is completed and immediate action as well as long-range plans are developed (Appendix D).

Objectives for each community team are spelled out and specific task delineations and responsibilities are accepted by the team members. A mutual leadership role is enhanced through the process of responsible self-determination in freely accepted team-related tasks. The team's assessment of local community project implementation is an outgrowth of the accountability intrinsically built into the five-phase action plan.

The training staff serve as consultants to the teams during this organizational portion of the training. This consulting relationship is structurally designed to continue at designated times after the training, e.g., at regional feedback conferences.

When the participants have concluded their training session and have returned to their local communities to establish programs, the staff consultants
make on-site visits at the request of the local team. Written and telephone communications also enhance the development and control of local-team accountability.

Since the process of organizational design is on-going, an unbroken chain of communication with the staff consultants is encouraged at the training site and re-enforced at the local level through communications dictated by accountability and by emerging needs. While preserving the autonomy of and safeguarding the initiative of the local team, this communication is designed to provide support, encouragement, confirmation, and re-direction.

The Implementation

By implementation here is meant the putting into motion of the entire Maine Drug Education Training Institute, which is sponsored by the State Department of Education, Augusta, Maine. The institute is funded by federal and state monies and is under the direction of Carl Mowatt whose responsibility is to initiate and implement the program design.

Mowatt addresses himself to the superintendents of the school systems in the state of Maine. His communication contains information about the institute, the training, and the potential participants. He empowers these superintendents to seek out the desired potential trainees. These potential trainees must meet established selection criteria and come from the ranks of students, educators, and community professionals and non-professionals.

All potential trainees are interviewed prior to their acceptance as
participants. A willingness to submit to and abide by the community living
rules during the seven-day live-in institute, and secondly, a commitment to
become involved in a local drug-related action project upon return to the
community after the training, are prerequisites sought before final selection
is made.

The designated training site is located at Poland Springs Resort Inn,
Poland Springs, Maine. All staff, guest lecturers, and participants establish
full-time residency at the Inn for the duration of the program. To eliminate
any distracting element, no other guests are permitted to be housed at the
resort during the drug training institute.

The atmosphere desired and the one that prevails is one of total
immersion of all participants and staff in the work at hand. This total
immersion is not only considered desirable but has the force of an imperative
since only then will program intensification, an exclusive rapport between the
participants, and a complete channelling of all energies toward the programs
become realities.

Strategies

The proposed strategy is presented in a tri-partite arrangement of
time, purpose, and processes. This flexible program flow can be altered to
meet emerging needs as determined by the staff team as well as the participants.

As stated in the objectives, the emphasis of the training is to impart
information about drugs, deal with ones affectual reactions to this learning,
and as a member of a team to define action to be implemented at the local level.

The methodological processes include one-dimensional, instructional activities designed to inform, such as lectures and films and more complex group interrelationship schemes, such as alter-ego exercises and roles, reverse roles, johari window. Finally, to action and organizational program designs, such as local training sessions for teachers and/or students, total community awareness programs, developing rap centers, crisis-intervention centers, et al.
Flexible Program Flow

Saturday, Noon, Staff Arrival

(Prior to this meeting more than 50 hours of planning had taken place.)

<table>
<thead>
<tr>
<th>Time Block</th>
<th>Purpose</th>
<th>Processes</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 noon on</td>
<td>Review and revise program.</td>
<td>Group setting with rotating leadership for specific tasks to be accomplished.</td>
</tr>
<tr>
<td></td>
<td>Delineate specific staff functions</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Individual staff responsibilities for specific mini-lecturers, total activities are delineated.</td>
<td></td>
</tr>
<tr>
<td>10-12 hours</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sunday

<table>
<thead>
<tr>
<th>Time Block</th>
<th>Purpose</th>
<th>Processes</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00 a.m. - 6:00 p.m.</td>
<td>Continue to design the program flow.</td>
<td>Unstructured milling. Participants and staff getting acquainted.</td>
</tr>
<tr>
<td>9 hours</td>
<td>Meet Incoming participants.</td>
<td></td>
</tr>
<tr>
<td>6:00 p.m. - 11:00 p.m.</td>
<td>Introductory remarks and welcome.</td>
<td>Lecture presentation by director.</td>
</tr>
<tr>
<td></td>
<td>Staff introduction.</td>
<td>Process Wheel</td>
</tr>
<tr>
<td></td>
<td>Community expectations: Staff and participant expectations are negotiated to arrive at &quot;expectations contract.&quot;</td>
<td>Newsprint, Report-Out Fishbowl</td>
</tr>
<tr>
<td></td>
<td>Clarify and reinforce what the rules of living in this environment are and what they mean to each individual.</td>
<td>Trainer: brainstorming, dyad setting, decision making, working toward total group commitment.</td>
</tr>
</tbody>
</table>

See Appendices A, B, C, D, for definition of terms and alternative processes.
<table>
<thead>
<tr>
<th>Time Block</th>
<th>Purpose</th>
<th>Processes</th>
</tr>
</thead>
<tbody>
<tr>
<td>6:00 p.m. -</td>
<td>Each community (team) group must give a statement of policy to the staff on how they will be responsible for their actions as stated in letter received during selection process.</td>
<td></td>
</tr>
<tr>
<td>11:00 p.m. -</td>
<td>(Continued)</td>
<td></td>
</tr>
<tr>
<td>5 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Monday</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:00 a.m. -</td>
<td>To be aware of how the feeling of acceptance, rejection, loneliness, togetherness, and trust influence behavior as related to the use, abuse, or non-use of drugs.</td>
<td>Total community milling.</td>
</tr>
<tr>
<td>10:00 a.m.</td>
<td></td>
<td>Dyads</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Circle</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Monads</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Scale of feelings.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 hours</td>
<td>To sharpen listening skills, observe body language, facial expressions.</td>
<td>Show movie: &quot;I think,&quot; not followed by any verbal discussions.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10:30 a.m. -</td>
<td>Team building.</td>
<td>Small group setting.</td>
</tr>
<tr>
<td>12:00 noon</td>
<td>To give the participants an opportunity to begin to openly and candidly discuss themselves and each other on a personal level.</td>
<td>Dyads: interview each other about reactions to morning exercises.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Introduce your partner to:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>cognitive level group</td>
</tr>
<tr>
<td></td>
<td></td>
<td>affective level group</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Express feelings by drawing on newsprint.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Discuss movie and &quot;Inner Voice.&quot;</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td>Johari window.</td>
<td></td>
</tr>
<tr>
<td>Time Block</td>
<td>Purpose</td>
<td>Processes</td>
</tr>
<tr>
<td>---------------</td>
<td>-------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>1:00 p.m. -</td>
<td>Team building.</td>
<td>Small groups.</td>
</tr>
<tr>
<td>4:30 p.m.</td>
<td>To learn what it takes to build a group in terms of behaviors.</td>
<td>Discuss a helping relationship. When is help helpful?</td>
</tr>
<tr>
<td></td>
<td>To begin to build trusting relationships.</td>
<td>Talking behind the back - positive and negative feedback.</td>
</tr>
<tr>
<td></td>
<td>To begin to identify individual and group behavior expectations, a reality of the team concept.</td>
<td>Sociometric pointing. Sharing a secret. Asking for help. Role playing. Discussions and determine how day's activities relate to drug use and abuse.</td>
</tr>
<tr>
<td>3-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6:00 p.m. -</td>
<td>To learn the pharmacological aspects of drugs.</td>
<td>Lecture (questions and answers) by a psychiatrist from Maine Medical Center.</td>
</tr>
<tr>
<td>7:30 p.m.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7:30 p.m. -</td>
<td>Team building.</td>
<td>Small groups.</td>
</tr>
<tr>
<td>9:30 p.m.</td>
<td>Process the content of the pharmacology lecture.</td>
<td>Break the group up into local teams and have each team list questions on newspaper they had which were and/or were not answered during the lecture. Each team report out in groups. Fishbowl how each team worked together.</td>
</tr>
<tr>
<td>2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time Block</td>
<td>Purpose</td>
<td>Processes</td>
</tr>
<tr>
<td>---------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>9:30 p.m. - 11:00 p.m.</td>
<td>Staff meeting.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Review day's activities which took place in total community and in small group settings.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Discuss problems and/or concerns.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Plan for following day.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Give and get feedback.</td>
<td>Open and closed clinic.</td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Tuesday</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:00 a.m. - 12:00 noon</td>
<td>Team building.</td>
<td>Small groups.</td>
</tr>
<tr>
<td></td>
<td>Team contract building: Identify purpose for being at institute, identify what is important to themselves as individuals, what is their commitment to each other.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Sharing in dyads, building up to total group.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Role playing.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Reverse role playing.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Fishbowl.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Feedback given on individual behavior and body language, discussing how this relates to communication and the accomplishment of a small group task.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Discuss what it feels like to get negative feedback and what to do when you get it.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Force field analysis.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Silent walk.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:00 p.m. - 2:30 p.m.</td>
<td>Factual information presentation of tobacco.</td>
<td>Lecture by medical doctor.</td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td></td>
<td>Questions and answers.</td>
</tr>
<tr>
<td>Time Block</td>
<td>Purpose</td>
<td>Processes</td>
</tr>
<tr>
<td>------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>2:30 p.m. - 4:00 p.m.</td>
<td>Team building.</td>
<td>Small groups.</td>
</tr>
<tr>
<td></td>
<td>To learn the difference between drug use and abuse.</td>
<td>Team brainstorming and prioritizing.</td>
</tr>
<tr>
<td></td>
<td>To distinguish between drug problems experienced by an individual who is abusing drugs and drug related problems which result from an individual or individuals abusing drugs.</td>
<td>Discussion</td>
</tr>
<tr>
<td></td>
<td>Develop problem statements which effect communities that are related to the drug scene, and/or the youth subculture.</td>
<td>Recording. Newsprint report-out. Internal process observation.</td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td>Mini-lecture in process observation.</td>
<td>Hand out printed materials Discussion.</td>
</tr>
<tr>
<td>6:00 p.m. - 7:30 p.m.</td>
<td>Factual information on treatment and rehabilitation, multi-modality treatment center.</td>
<td>Director of Bangor Counseling Center in lecture format will make presentation and answer questions.</td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td>community control of local programs.</td>
<td></td>
</tr>
<tr>
<td>7:30 p.m. - 9:30 p.m.</td>
<td>Team building.</td>
<td>Small groups.</td>
</tr>
<tr>
<td></td>
<td>Continue working on afternoon format.</td>
<td>Similar processes as those used in afternoon session. Mini-lecture, hand-outs. Triads: members of group design and run Group Dynamics Techniques according to structure they've learned.</td>
</tr>
<tr>
<td>2 hours</td>
<td>Learn how to use and design Group Dynamics Techniques for various purposes.</td>
<td></td>
</tr>
<tr>
<td>Time Block</td>
<td>Purpose</td>
<td>Processes</td>
</tr>
<tr>
<td>------------</td>
<td>---------</td>
<td>-----------</td>
</tr>
<tr>
<td>9:30 p.m. - 10:00 p.m.</td>
<td>Obtaining videotape interviews with randomly selected youth participants who individually preview movie &quot;Pit of Despair&quot;</td>
<td>Two staff members and participants work together.</td>
</tr>
<tr>
<td>1/2 hour</td>
<td>Staff meeting.</td>
<td></td>
</tr>
<tr>
<td>10:00 p.m. - 12 midnight</td>
<td>Agenda building. Review of day's processes. Discuss personal concerns had within groups. Discuss personal and/or professional concerns of individuals within groups which are affecting total group. Plan following day. Give and get feedback. Discuss total community climate and projected needs.</td>
<td>Open and closed clinic.</td>
</tr>
<tr>
<td>2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wednesday</td>
<td>Team building.</td>
<td>Small groups.</td>
</tr>
<tr>
<td>8:00 a.m. - 8:45 a.m.</td>
<td>Each participant will begin to identify her/his needs and personal resources.</td>
<td>Fashion show in total community: one piece of newspring list your needs, on another your resources. Each will tape needs on his chest, resources on his back; mill in total community; mill with members of his team (non-verbal).</td>
</tr>
<tr>
<td>45 minutes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time Block</td>
<td>Purpose</td>
<td>Processes</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>8:45 a.m. - 12:30 p.m.</td>
<td>Team commitment to each other as individuals for a specific purpose.</td>
<td>Directed team interaction. Verbal and non-verbal communication.</td>
</tr>
<tr>
<td></td>
<td>Learn how personalities and role effect communication and task oriented projects.</td>
<td>Compile team composite sociogram.</td>
</tr>
<tr>
<td></td>
<td>Define individual contract with each team member and total team.</td>
<td>Forced confrontation on personalities, team control and/or leadership, individual and group resources.</td>
</tr>
<tr>
<td></td>
<td>Learn of the many types of support systems required for team longevity.</td>
<td>Giving and receiving support, discussion of need and contract.</td>
</tr>
<tr>
<td></td>
<td>Team develop its own support systems and communication style without facilitator function (no staff).</td>
<td>Force field analysis. Discuss need for interdependence.</td>
</tr>
<tr>
<td>3 hours and 45 minutes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:00 p.m. - 2:00 p.m.</td>
<td>To learn how to evaluate and use drug education films and materials.</td>
<td>Show movie. Review videotaped interviews. Discussion.</td>
</tr>
<tr>
<td>1 hour</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:00 p.m. - 4:30 p.m.</td>
<td>Learn about various subcultures, minority groups, effect of music and movies on youth and adults.</td>
<td>Lecture. Discussion. Monad reflection. Dyad discussion.</td>
</tr>
<tr>
<td>2-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6:00 p.m. - 9:30 p.m.</td>
<td>To allow for greater community interaction. Identify role - alike group needs. Strengthen interviewing and listening skills</td>
<td>Role - alike group. Interview (game 3-1/2 hrs.): develop questionnaires, interviewing report, and assessing needs, fishbowl.</td>
</tr>
<tr>
<td>3-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time Block</td>
<td>Purpose</td>
<td>Processes</td>
</tr>
<tr>
<td>------------------</td>
<td>----------------------------------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td><strong>Thursday</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:00 a.m. - 9:30 a.m.</td>
<td>Alcohol presentation</td>
<td>Director of Alcohol House (Milestone) present lecture and answer questions.</td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9:30 a.m. - 12:00 noon</td>
<td>Team begins to assess back home community drug related problems, Begin to discuss what can be done on community level.</td>
<td>Team task assignments, Process observations, fishbowl, Report-out, Sociometric pointing, Team effectiveness analysis.</td>
</tr>
<tr>
<td>2-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:00 p.m. - 2:30 p.m.</td>
<td>Legal aspects of the drug issue.</td>
<td>Lecture presentation: simulated lawyer-client interaction. Discussion.</td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3:00 p.m. - 4:30 p.m.</td>
<td>Process morning lecture materials.</td>
<td>Small groups, Fishbowl in teams, Positive feedback for helpful behavior in task oriented groups.</td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6:00 p.m. - 7:30 p.m.</td>
<td>Understanding the psycho-social aspects of drugs.</td>
<td>Lecture format by the Director of the Bureau of Mental Health, Psychiatrist, Discussion.</td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7:30 p.m. - 9:00 p.m.</td>
<td>Present addicts discuss life-style, problems, needs, personal life.</td>
<td>Discussion in total community.</td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9:00 p.m. - 10:30 p.m.</td>
<td>Understanding the here and now drug scene.</td>
<td>View movie &quot;11:59&quot;, No discussion.</td>
</tr>
<tr>
<td>Time Block</td>
<td>Purpose</td>
<td>Processes</td>
</tr>
<tr>
<td>------------</td>
<td>---------</td>
<td>-----------</td>
</tr>
<tr>
<td><strong>Thursday</strong> (cont.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10:00 p.m. - 12 midnight</td>
<td>Staff meeting.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Agenda building.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Review and evaluate day's activities.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Discussion of group problems and concerns of facilitator.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Plan next day's activities.</td>
<td></td>
</tr>
<tr>
<td>2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Friday</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:00 a.m. - 12:00 noon</td>
<td>Begin back home action plans.</td>
<td>Organizational development skills in mini-lecture hand out materials, experiential learning of force field analysis, problem solving model, five phase action plan.</td>
</tr>
<tr>
<td>4 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:00 p.m. - 3:30 p.m.</td>
<td>Continue work on action plan.</td>
<td>Team setting. Facilitators serve as consultants to different teams. Team analysis chart at end of session.</td>
</tr>
<tr>
<td>2-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3:30 p.m. - 4:30 p.m.</td>
<td>Total community: each team shares action plans, goal statements, time blocks, long-range plans, implementation in design.</td>
<td>Milling in total community - &quot;County Fair&quot;.</td>
</tr>
<tr>
<td>1 hour</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time Block</td>
<td>Purpose</td>
<td>Processes</td>
</tr>
<tr>
<td>------------------</td>
<td>-------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------</td>
</tr>
<tr>
<td>6:00 p.m. - 7:00 p.m.</td>
<td>Learn of re-entry problems from resource team which comes in as a resource personnel. Learn of resource team's accomplishments, problems, failures.</td>
<td>Discussion. Factual information presentation. Sharing program models for training on local level.</td>
</tr>
<tr>
<td></td>
<td>1 hour</td>
<td></td>
</tr>
<tr>
<td>7:30 p.m. - 9:30 p.m.</td>
<td>Continue action plan designs.</td>
<td>Team meeting. Consultants can be contracted during 2-hour period or 20-minute time blocks.</td>
</tr>
<tr>
<td></td>
<td>2 hours</td>
<td></td>
</tr>
<tr>
<td>9:30 p.m.</td>
<td>Staff meeting.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Agenda building.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Review and evaluate day's activities.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Discussions of problems and concerns.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Plan next day's activities.</td>
<td>Closed clinic.</td>
</tr>
</tbody>
</table>

**Saturday**

<table>
<thead>
<tr>
<th>Time Block</th>
<th>Purpose</th>
<th>Processes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time Block</td>
<td>Purpose</td>
<td>Processes</td>
</tr>
<tr>
<td>------------------</td>
<td>--------------------------------------------------------------------------</td>
<td>----------------------------</td>
</tr>
<tr>
<td>10:00 a.m. -</td>
<td>Presentation of classroom use of group dynamic techniques and drug ed.</td>
<td>Mini-lecture.</td>
</tr>
<tr>
<td>11:30 a.m.</td>
<td>curriculum in various content areas. Climate of classroom and community</td>
<td>Discussion.</td>
</tr>
<tr>
<td></td>
<td>environment and its effects on individual behavior.</td>
<td></td>
</tr>
<tr>
<td>1-1/2 hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11:30 a.m. -</td>
<td>Fill out post-evaluation material for State Dept. of Drug Education and</td>
<td></td>
</tr>
<tr>
<td>12:00 noon</td>
<td>Staff.</td>
<td></td>
</tr>
<tr>
<td>1/2 hour</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12:00 noon</td>
<td>Share community farewell.</td>
<td>Milling: non-verbal</td>
</tr>
<tr>
<td>1/2 hour</td>
<td></td>
<td>communication.</td>
</tr>
</tbody>
</table>

The rationale behind the choice of the processes selected are self-evident or are explained in their description (Appendixes A, B, C, D). All of these processes contribute to or intensify the overall goal of group unity toward the common goal; resoluted action towards the solution of the drug dilemma.
Follow-up Anectodal Data

Following the live-in institute, each staff team member writes a prognosis report of his or her team's quality of expectation, program plans, and anticipated needs and difficulties. This prognosis report is read and acted upon by the project director, Carl Mowatt and his assistant, Bob Soulas. They are responsible to meet the needs of local community teams, such as acquiring films, providing consultants, identifying local or statewide resources, mailing pamphlets, scheduling feedback conferences, and assigning training facilitators to help solve local level problems.

This continued support provides a back-up strength for the participants and enables them to draw ideas, resources, and continued guidance not readily available within the local community. Also re-enforced is the concept of working in a program which is on-going throughout the state. Each team is an integral part of a statewide effort.

The anecdotal data containing information related to the trainees perceptions of the training institute will be included in case studies presented in the following chapter. This data was gathered through the utilization of interview instruments found in Appendix D.
CHAPTER IV

ASSESSING THE EFFECTIVENESS: THE FINDINGS

Introduction

The six community case studies in this chapter present information gathered on three levels. The first level is the reaction of those trainees who attended a State Drug Training Program at Poland Springs, Maine. The second level is the reactions of these trainees after they returned to their communities and became trainers. The third level is the reactions of the trainees who participated in the local community training programs.

Carl Mowatt, the Maine Drug Education Program Director, was asked to select at random six of the fifty-four community teams which were trained at one of the State Drug Education Training Programs in Poland Springs, Maine during the year 1970-1971. Team members from the most northern regions of the State, the most southern regions, and in between, were potential interviewees.

All of the fifty-four community teams trained by the staff (which was the same for all training sessions) of the Maine Drug Education Program did not attend the same State training session. Not all team members from a local community were trained together at the same State training session. Not all team members trained remained active upon their return to the local
community. All team members interviewed, however, were active and functioning as trainers and had future plans for further action which they had defined. No team members selected at random to be interviewed had in fact dropped off the local community team.

A week prior to the interviewer's arrival in Maine the six communities to be visited were decided upon by Mr. Mowatt. Travel arrangements and motel accommodations for the interviewer were then made. The day prior to the first community visit, the interviewer was given a list of names and telephone numbers of all those team members from a local community who attended a state training program. Upon the interviewers arrival in the community to be visited, telephone calls were made to potential interviewees and interview schedules were determined. Potential interviewees were police, teachers, students, community service workers, parents, and nurses. The role or profession of potential interviewees was dependent upon the individual's availability to be interviewed. For example, a teacher contacted for an interview may have had to teach a class at a particular time when an interview could have been scheduled. He/she were then thanked for having been willing to participate in the case study. It was then necessary to contact someone else, perhaps a policeman, parent, or student who would in fact be able to be interviewed.

One day was spent in each of the six communities interviewing the local community trainers and trainees. A state program trainee was inter-
viewed first. One portion of the interview was designed to gather information about the individual's perceptions of the state program. The same individual was also interviewed as a trainer in the local community. This local trainer gave the interviewer the names, addresses, and telephone numbers of four or five local trainees. These local trainees, selected at random by the interviewer, were interviewed. These interviewees provided information about their perceptions of the local training program they participated in.

The interview instruments (Appendix D) were used by the interviewer as report-out sheets for each interview. The interviewer placed various types of responses into appropriate categories found on the instrument. Interviewees were not asked the questions which appear on the instruments. The initial question was purposefully open-ended. The interview was not highly structured. The data presented in the chapter was gathered through information recorded in writing on the interview instruments and through the taped recordings of each interview. The purpose of the interviews was to get a range of impressionistic feedback on the effects of the State Drug Education Training Program and to gather information on what programs were instituted by state trainees in the local community. The trainees at these local community drug training or awareness programs were also interviewed. Besides learning what happened as a result of the state training session it was the interviewer's intention to learn of local level needs and off-shooting projects. The limitation of the data is that a statistical analysis has not been
made. The anecdotal statements have merely been presented and at the conclusion of each community case study the interviewer's summary statement is presented.

**Community A**

I. **Trainees' Perceptions of the State Training Session at Poland Springs**

Teacher

... I was informed of the training program at Poland Springs by the principal at the high school. He invited me to attend and I was pleased to accept because I knew drugs are a growing problem all over the country. I was told that I would live at Poland Springs and that I would be expected to become involved in some type of program in the community after the workshop. I wasn't sure what that meant, but I said that I would.

The experience at Poland Springs was like nothing I've ever experienced before. So much happened in such a short period of time. We worked every day in our small groups with a staff member and we also had speakers and total group meetings every day. They showed us movies, we listened to youth records, and discussed so many issues. The students were just great. They really showed up a lot of the other people. They were so honest and even patient. Some people really have weird ideas.

I learned a lot about drugs, but I think the most valuable thing I learned was about me and my relationship with other people... students and older teachers especially. I always felt that some of the older teachers really didn't care about the students, and I learned that one of the students on our team was using drugs, that is, he had smoked pot. I had him in my classes and he is a top-notch student. He still is. I really thought that once a kid used drugs he was finished. I learned that in most cases that isn't true.

The thing that really hit me was how important it is to communicate with your own family, other teachers, students, and other people. I used to take so much for granted and had so many preconceived notions about kids and my fellow teachers.
Our team is now working together in this community to try to teach others what we learned at Poland Springs. It isn't easy. There are so many people who don't want to learn about the drug issue and each other. A lot of people think they alone have the answer. I shouldn't really be so hard because I used to think that way too about some things. . .

Community (police)

. . . I was asked by the head of my division if I would be willing to go to a workshop about the drug problem. He told me the program was sponsored by the State Department of Education and that there would be some other people from this community going. He said a few students and some people from the high school would be there. He also said that after the training I would be expected to work with the drug problem back here. Well, I thought about it for a few days and decided I would go. I couldn't imagine what it would be like. My wife thought it was a good idea and she thought that I should go, too. We have 5 kids and they might just get involved in drugs. You never know.

Well, it was the most fantastic thing that ever happened to me. Don't get me wrong! It wasn't a party or anything easy. It was the hardest thing I ever did. I really was forced to stop and think about myself; myself as a policeman and myself as a person. I found out that sometimes I used to hide behind my badge. Those kids made me get away from that.

Everyone on our team got to know each other real well. We shared problems and tried to help each other learn how to live with these problems if nothing can be done about them.

You know, I had been to drug lectures for the police before and we learned so much more at Poland Springs than I ever learned anywhere else. You couldn't help but learn - not only facts, but about people. The drug problem is really a people problem. Like someone on our team said. . . "It's not the drugs that have the problem, it's the people who get hurt by them that have the problem". When I finally learned that, the whole picture really changed.

Our team really works well together. You know it's unbelievable . . . I have been working with some people (other police) for years and I don't know them half as well as I know the people on
my team. I never realized how important "honest talk" was. If you don't ask questions and know how to listen, you can't expect other people to know how to listen to you.

Before Poland Springs I never really knew any of the people on the team. Oh, I had seen a few of the teachers a few times before, in fact, I used to think one of them was really a nut... but, he's one of the greatest people I ever met... I had just thought he was a jerk... I really was proven wrong.

Now, the whole team works together... we meet once or twice a week. It's been like that since Poland Springs... 

II. Program Description: Local Level Community Team A Design and Implementation

Selection Criteria

Trainers: Community Team A Trained at Poland Springs

Teacher M (interviewed)
Teacher F
Community (Police) M (interviewed)
Student M
Student F
School Administrator M
Community (Parent) F
Student F

Trainees: Individuals from within the community who wanted to attend the workshop were invited with the provision that they were committed to attend all of the training sessions and intended to do volunteer work in some capacity with
drug-related action programs within the community after the training.

Participants: Students 40%

Educators 30%

Community 30%

Duration of Training: Five, 3-hour evening sessions per week at the high school.

Team Approach: The team trained at Poland Springs functioned as the training team. Each team member was responsible for the small group discussions and worked with that small group.

Trans-disciplinary Approach to Factual Information: The team invited a lawyer, doctor, educator, psychiatrist and social service worker from the community to speak on the issue of drugs. The psychiatrist who spoke was from the State Department of Mental Health in Augusta, Maine.

Objectives:

1. To share factual information on the legal, physiological, psychological, and pharmacological aspects of the drug issue.

2. To improve communication skills.

3. To understand the professional roles played by the participants.
4. To establish lines of communication between teachers, students, school administrators, parents, and other community people.

5. To have the participants work within the community in a drug-related action project that they choose to become involved in.

Methodology:

Small Group Discussions

Group Dynamic Techniques

Lectures

Films

Pamphlets

Large Group Discussions

III. Trainee as Trainer on the local level:

Teacher

. . . the training session at Poland Springs provided our team with a model or a way of running a Drug Education Program in our community. While we were at Poland Springs, Len (our facilitator) worked with us to design a program we would run back here. What we felt was really needed in our community was a place where young people and adults could talk and work together. We realized that before we could get to the point of getting and running a place like that we needed to run an educational program to make people aware of the drug problem. Our first awareness program or drug education program really started us on the road of achieving that.
We (our team) came back home and met with people who could help us; the principal of the high school, the superintendent of schools, city council men, a group of students and some others. We (our team) meet every week to plan the program, and we've gotten a doctor, a lawyer, a policeman, and ex-addict, and someone from the State Department of Education to come and speak during the program. The program was held at the high school and each team member was responsible for running the small group discussion.

The State Department of Education sent us the movies we wanted to show and one of the team members gave a mini-lecture on the use of group dynamic techniques. We spent the last two nights of the training program working in small interest groups. The participants were willing to work on small task projects, like trying to get a building, working to get furniture and decorating two rooms for rap rooms, etc.

We learned a lot after the first program and our next one will even be better.

Our over-all plan is to run 3 training or awareness programs, keep the task groups functioning and, most important, stay together as a team so that these things can be accomplished. It’s difficult to work at our jobs, for the students to study and work as well, and to do all of this, but it is certainly worth it. These are the types of things that need to be done in a community, and if there is anything that I have learned in this whole thing, that is how important each and every person is. We all have something to give each other. . .

Community (police)

. . . In this community we (our team) have been running a program for drug education. We try to give the participants something like we got at Poland Springs. We teach facts about drugs, we try to get the people to talk, share, communicate their feelings about drugs in this community and of course try to encourage them to help us get what’s needed here. That is, a place for kids to go and talk and play. Not only for kids, but a place where adults are welcomed as well.

We show movies and have guest speakers come to talk. The last time we got a doctor, someone from the State Department of
Education, a lawyer, a student panel, and I (police) spoke about the relationship of the police to the youth and the adults, the drug problem we see and how we must enforce the law.

Don't get me wrong. We don't do everything perfectly. We made some mistakes in the last program we ran and we will I'm sure in the future, but we learn like that.

The people have been great. What we did was to invite people to come and tell them they had to participate in all of the sessions if they wanted to come the first night. We invited youth, teachers and school administrators, guidance counselors, and other community people like doctors, nurses, social workers, and parents. Maybe about 50% didn't stay involved in the action task groups, but they contributed a lot. The other 60% are still very much involved and are going to help us in planning the next training session.

I don't want to sound like it's all that easy. It is really good hard work and a lot of people don't like to learn the truth about themselves and others, but that's really a small fraction of the total community. A lot of people around here are really scared about drugs and that isn't the best feeling when you're trying to get people to help those with drug problems. . .

IV. Organizational Plans for Further Action:

1. Continue Community Training Programs.

2. Design total community feed-back workshop.

3. Participant in regional re-training and feedback conference sponsored by the State Department of Education.

4. Continue local team task force projects.

5. Assist in in-service training programs for school personnel.
V. Trainees' Perceptions of the Training:

Subjects Interviewed

Teacher

Student

Teacher

Community professional

Teacher

... The drug problem is much more encompassing than I had ever before realized. The inability of teachers and adults to communicate with youth, especially youth who have problems, is much more serious than I thought. I learned too that some youth don't have problems and we think they do because they look different; I mean they dress different and act different from adults.

I learned a lot about drugs, too. I never knew how really physically dangerous some drugs were, like sleeping pills and I also learned that marijuana isn't as bad as I thought it was.

In our community we really don't have a place where kids can just meet and talk. When I was young, my parents used to let me have all the friends I wanted sit around the kitchen table at night and talk and just have a good time. I guess some parents, or really a lot of parents, today, don't let kids do that.

I am now working on the task force of trying to get materials together to put in a house we are trying to get from the city. I am also working on helping the people that went to Poland Springs run another workshop in our community.

The drug problem is a serious one, but now I'm aware that there are many other problems in our lives, and sometimes, it is these individual problems that cause the drug problem. ...
Student

The training program helped me to learn a lot more about people. I learned how to talk to people on all age levels. It informed me about how other people think. The training combined knowledge of people and understanding with the communication of facts.

We need to help people learn from each other. Right now I'm thinking. I've accepted the experience, and now I have to think about what I can do best to help out others; my own family, my friends - everyone who needs me.

In talking with the older people, I learned that I don't only need them to teach me, to tell me what to do, but to tell me what they have learned through just living. I used to think that the drug problem was just for kids... that sick kids used drugs to get high. But, this guy I was talking to told me that he used to have a drinking problem and about how bad it was. He said he drank for the same reasons kids use drugs. Man, that guy really taught me a lot.

The speakers were good, but the small group discussion after were great. That's when I met that guy. He and the other people really got talking after the first hour or so.

It would be great if all the students in the high school could get to talk to teachers and police like that.

I am now working on the task force trying to get the house for the kids. We think we might get a house from the city council. We have met with them once and have another meeting planned. I hope it works out.

There are a lot of kids excited about the project and we really need it. So much good could come about from it. You know, school is different for me now because now I really know some of the teachers and they are really great people...
Teacher

... The program that I went to on drugs was really good. I am taking a counseling course at the University of Maine and we had some lectures on drugs. They were nothing compared to this program. Here we had a chance to talk about what we think, and really get to talk to kids and other people. It wasn't like questions and answers, it was really a discussion. Each group had a facilitator (I think that's what they called them) and after every lecture we would break up into groups. We would talk and ask each other questions. I couldn't believe it would be so good when I learned all those students would be there, but the students were really good. I never realized how I treated students before. I guess I always wanted them to think the way I do, but I learned that that just makes them go further away from me.

You know, this experience has really helped me in my own teaching. I have really tried to listen to the students more and understand what they are saying. I never knew that I didn't do that before, but I learned that and just knowing that has really helped me as a person and as a mother. I have 3 children of my own and now I try to talk with them more often. That's a big lesson to learn.

The movies, the lectures, and everything were good, but I think the best thing was learning to communicate. You can't help anyone if you can't really talk with and understand them...

Community (nurse)

... I sat down and really talked with kids for the first time. I learned that only people can solve the drug dilemma. I learned facts about drugs, but more important than any of that, I learned about me.

There are a lot of things people told me about myself that I didn't know before - good things and things that weren't so good. I had a chance to hear and to talk.

Every community in the country should go through something like this. We should take time out to think about ourselves, our friends, our children. We never seem to talk enough about what others need.
We need more training programs... we should have enough for everyone to go to. I plan on working to help plan for and invite community people to another training session. There is a lot of work involved in all this, but it certainly is worth it. . .

Summary Statement of Community Case Study A

The trainers in Community A designed a local drug education training program based on the training design they themselves participated in at the state training session. The entire team trained at the State level did participate as trainers on the local level.

The subjects interviewed as participants at the local level stressed the importance of the time provided to discuss the factual information presented in the lectures within the small groups. This personal sharing and interaction reinforced each individual's understanding of the information presented and each individual's involvement in the issue of the drug dilemma (student p. 58).

The local participants pointed out that they also learned about themselves and the role they play in being either part of the problem or part of the solution. This learning was attributed to the open sharing of perceptions of each other which took place in the small group settings (teacher p. 59). A nurse interviewed (p. 59) stated that this was the first time she ever sat down and talked with youth, students. The trainee also pointed out that she will become involved in helping to design further programs.
One of the objectives of the trainers at the local level was "to have the participants work within the community in a drug related action project" (p. 53). The policeman stated that only about 60% of the forty trainees in the local community were, at the time of the interview, involved in such projects (Student, Drop-In House p. 58). One of the plans for further action (p. 57) was a community feedback workshop. The purpose of the workshop would be to find out what kinds of things are being accomplished by these trainees.

This feedback supports the original contention that the interpersonal climate and relationships help make the information about drugs meaningful and useful.

Community B

I. Trainees' Perceptions at the State Training Session at Poland Springs

Student

... It was just great being on the same level as everyone else. I never expected teachers, guidance counselors, parents, and especially police, to care about what I had to say and to ever get to like them and have them like me as just a person... just an ordinary person.

How I got involved in the whole thing in the first place was the guidance counselor at my high school told me there was going to be a workshop run by the state about the drug problem and that people from our town were invited to go. He said I could get excused from my classes and I would live at Poland Springs for a week. He said that there would be no drugs allowed there and that meant alcohol, too. He said he was going to go, and two other teachers and another student. He also said that after we would be expected to do something in our community about drugs when we got back.
Well, I kind of thought it sounded good, but I couldn't imagine us all working together when we got back because we hardly knew each other, but I didn't know. . . I talked to my parents and they said O.K. Then one Sunday we were all driving down there and it started.

It was an unbelievable experience. We became so close to each other and really got to know and like each other. At first it was really hard because we all thought each other different than we really are. It's not easy to get to know someone. There are walls that have to be broken down. We had a lot of lectures and stuff about drugs. You know, movies and discussions about good and bad drug education movies. But, that wasn't the hardest or most important thing. The most important thing was learning to communicate, understand each other and find out what we needed to do in our own community when we got back home.

Every night when I'd get to bed, I could hardly sleep because I just kept thinking about how I have never really taken the time to communicate with my own family and even some of my friends. It's so easy to be fake. I still am fake with some people. It's really hard to be honest and listen to other people when you don't think you are going to like what they are about to say.

Drugs, I thought, was a problem in itself, but I really learned that it's not the drugs that are the problem, but the people who don't know how to use them without hurting themselves. I also learned from the ex-addicts that some people really do want to hurt themselves. I realize now that I do that sometimes myself, but not really with drugs.

Our team, the group I went down to Poland Springs with, is now doing all sorts of things back here together now. We all work really hard and well together. One of the people who worked with us at Poland Springs doesn't work with us now, but that is because he can't - not because he doesn't want to. . .

Community (Nurse)

. . . When the principal at the high school asked me if I wanted to go to a workshop about drugs at Poland Springs, I thought I'd really like to. I asked my supervisor if that were possible and arrangements were made for me to attend. I was told that I would be expected to work with others who would be attending the workshop when we got back to the community.
The workshop was a very difficult and different experience for me. The hours were long and we had to work hard at learning to work together. The lectures were the easiest. We learned a lot from them, but would then go into our groups to discuss what we had learned and try to get to know each other. At times I was very confused, but towards the end everything began to make sense.

It was an experience I'll never forget and one that I wish many of the people I work with could have. It gave me an opportunity to look at youth and even police in a totally different light. I never before had an opportunity, or maybe I should say didn't take the time to sit down and talk with youth. I usually help them with their problems, but just to talk about how they think and how they feel, I never really did before. Oh, my own nieces and nephews, but not just the high school kids.

I used to look at the drug problem from just a medical and legal point of view. But, it's much more involved than that. The students who have and do use drugs really taught me that. The lectures also stressed it. The kids who get involved in drugs seriously have really problems before they even start. Now, I'm not talking about smoking marijuana just once or two try it. I mean serious and dangerous drugs like amphetamines and barbiturates. Those are serious and especially heroin.

Our team is now working to try to educate other members of our community. We are trying to give them the experience we had at Poland Springs. Of course, we can't give them the same, but we can try...

II. Program Descriptions: Local Community Team B Project Implementation

Selection Criteria

Trainers: Community Team B Trained at Poland Springs

Teacher M
Community (nurse) F (interviewed)
Teacher F
Student M (interviewed)
Student F
Guidance Counselor F
School administrator M

Trainees: Individuals from within the community who wanted to attend the workshop were invited. They were expected to attend all of the sessions.

Participants: Students 30%
Teachers 30%
Community 40%

Duration of Training: A series of 3-hour meetings, three nights a week for three weeks.

Team Approach: The team trained at Poland Springs (minus one team member) functioned as the training team. Each team member was responsible for the small group discussions and worked with the small group throughout the training program.

Trans-disciplinary Approach to Factual Information: The team invited a doctor, a politician, and an educator from the local community to speak from their professional perspective on drugs. A psychiatrist from the State Department of Mental Health and an educator from the State Department were also invited to lecture.

Objectives:

1. To teach the facts about drugs from a medical, legal, psycho-social and educational perspective.
2. To improve communication skills.

3. To establish lines of communication between all fractions of people from the community.

4. To have the participants learn how they can be part of the solution to the drug problem rather than be part of the problem itself.

**Methodology:**

- Lectures
- Films
- Small Group Discussions
- Large Group Discussions
- Group Dynamic Techniques

### III. Trainee as Trainer on the local level:

**Student**

... What we have tried to do is bring what we learned at Poland Springs home. Give our community a chance to learn some of the things we learned so that we can all work together to effect the drug problem. In this community there are not a lot of kids at school using really hard drugs but maybe if everyone learns about it now we can try to stop that from happening. Well, anyway, this is what we are trying to do.

We have run one training session so far. All of us (team members) ran the small group discussion which followed the lectures. The small groups went pretty well, but we had our problems, too. We tried to do too much in such a short period of time. We didn't always have enough time to staff, for we all had to do our work during the day. We just had evenings to work together and that's when the sessions were.
The next thing we want to do is get everyone we trained together again and talk to them about what they think needs to be done next in the community...

Community (nurse)

... What we tried to do was run a mini-Poland Springs workshop, but of course we learned that that was impossible. We didn't have enough time to work with the participants. If only the people that trained us could come here and run the same thing we had, but that is impossible because of lack of money and time... people have to work at their regular jobs. I think that's an understandable excuse, but I bet they would be better at their jobs if they could go through the same thing I went through. I know I am a better nurse because of what I learned.

We made a lot of mistakes at our session. I think the biggest one was we didn't plan enough time to get the participants together to discuss how they could help us accomplish what we think needs to be done, and get more ideas and support from them.

Now we are going to contact everyone and see if they will come back one more night to do that. I think we covered too much too fast...

IV. Organizational Plans for Further Action:

1. To get everyone who attended the training session back to plan what should be done next.

2. To run another shorter community training session.

3. To try to work more closely with the school system.

V. Trainees' Perceptions of the Training:

Subjects interviewed: Teacher
Student
Student
Teacher
Teacher

... I attended the workshop primarily because one of my students had gone to a State Training Program and he and some other people were going to run one here. He was so enthused that I wanted to see what it was like. At first it was kind of confusing because there were so many students there, and so many people who aren't familiar with education... but it wasn't like anything I ever went to anyway.

One thing that impressed me was that everyone worked together and talked. I guess we learned more than we would have than if we had just heard lectures. Going into the groups was messy at the beginning and it was so different having one of my students run the group. It was things like that that I wasn't familiar with that made it hard, but that's when I really learned the most.

A number of the students surprised me with the comments and contributions they made. They seemed to be much more open, that is, they talked more about serious things than I've seen them do in school. But, of course, the atmosphere was different than it is in school.

I've gotten to know a number of students and other people in a different way. I've tried to bring some of this back to my classroom. It would be very nice if there could be more programs like this one, and I'm sure the next one would even be better. One of the people that ran the program teaches with me and he said that they hope to run another one...

Student

... That program at the high school was something else. Really out of sight! It's the first time I have ever seen or heard anything sensible about drugs. At school they (teachers) have shown scare movies and shit. That really sucks... this was not like that. ... man, we just rapped and everyone had something to say. A friend of mine who went to something the state did helped run this thing. No kidding, it was really good.

I guess they are going to do some more things like that. God, they should have one at the school for all the teachers and kids so that maybe the teachers could learn to teach better. Some kids really have good heads.
I think what I learned besides drug stuff is that you've got to stop and think before you spit off your mouth. Some of those parents really give a shit about us. Man, these police who I always used to call pigs are really decent guys. They give a shit and I could hardly believe it, but they really hate to haul us in - the whole thing was heavy. I really want to help these guys run another program - you know, a group of us meet every Wednesday night to just rap about what can be done here in Community B. We're going to do some neat things.

Student

. . . The program I went to at the high school was good. My mother, father, and younger brother went too. It was about drugs, but the thing I learned most about was people. My family got so close to each other because of this thing. We now have a lot of things to talk about. Before, if we didn't have the same opinions we didn't talk. Now we can respect each other's opinions and we don't have to win the others over.

There were a lot of people who went, but a lot more need to go to something like this. My friends wish their parents could go. But they say they are going to have another one sometime. I hope so.

Another thing that happened was that the teachers got to know the students better, and the students got to know the teachers. It has really made a difference, especially in my English class. Mr. ________ talks to us all different now - I guess I talk more in class, too.

Teacher

. . . The drug program I went to at the high school was like nothing I ever went to before. It was an indirect way to get at just getting people together to learn something about drugs, but more importantly, to get to talk together and know each other.

After that I found going to school easier. I've gotten to know many of my students better, or I could say in a different way. I never before realized how wide the teacher-student gap really was. I know I had some intelligent students who could discuss facts easily, but what I learned is that other students who may not know as many
facts have very important and sound things to say as well. I just never knew how to get it out of them. . . I guess because I didn't know how to ask the questions.

I think that it would be very good if teachers could take a course to learn how to communicate better with their students. This is an important need in this school and I bet in many schools. . .

**Summary Statement of Community Case Study B**

Trainees of the State Training Program perceived their greatest learnings to be in the enhancements of communication skills (student p. 61, nurse, p. 62). The opportunity to learn about each other was the thing most appreciated. The nurse stated that prior to the training she looked at drugs from only a medical and legal perspective (p. 62). She learned that "kids who get involved in drugs have really serious problems before they even start" (p. 63).

The community training team wanted to bring home to the community what they had learned at the state training session (student p. 65). The purpose of the local training session was to run a mini–Poland Spring (nurse p. 66). Approximately 50 students, teachers and community people were the participants. The community team invited a doctor, politician, and educator from the community to speak on the issue of drugs from the perspective of their discipline. A psychiatrist from the State Department of Mental Health and an educator from the State Department of Education also lectured. After the lectures, small discussion groups were facilitated by the community team trainers.
A trainee of the local workshop stated "one thing that impressed me was that everyone worked together and talked" (teacher p. 67). The teacher went on to say that we (the participants) learned more about drugs than we would have had we just heard lectures." A student stated "I think what I learned besides drug stuff is that you've got to stop and think before you spit off your mouth (p. 68). Another trainee of the local workshop stated that the workshop "was an indirect way to get at getting people together to learn about drugs, but more importantly, to get to talk together and know each other" (p. 68). This teacher went on to say that an important need in the local schools is for teachers to take a course to learn about how to communicate more effectively with students (p. 69).

The trainers of the workshop stated that they need to enhance their skills in facilitating the discussion groups (p. 66). Another need was to get everyone that had been trained back together again to learn of what each other has done and is doing to effect the conditions existing within the community which need to be changed (p. 66).

Community C

1. Trainees' Perceptions of the State Training Session at Poland Springs

Teacher

... Poland Springs was a place that will always be with me - by that I mean that the things I learned there have become part of me and the part of me I like best. You know, I don't think I ever learned as much during my whole life as I learned in that one week... if you don't know yourself... little else is
important. I am not saying I know myself, but I am trying and working at it.

Drugs are around and there are certain facts that it's good to know about them, but what's more important is that kids and adults communicate... sit down and talk with respect, honesty and trust. It's got to happen or we will never get at some of the reasons for the drug problem.

There were a lot of adults at Poland Springs who were really nervous and anxious at first. I was one of them. I guess it was because I wasn't used to having to explain why I thought the way I did. I used to just expect the kids to understand. I also learned that many adults don't think the way I do. Another thing I learned was I sometimes didn't realize why I said the things I did. It was because I seldom asked why when it came to what I thought was a black and white issue.

I would go to Poland Springs again if I could. I really wish I could take my girl and our parents. It's unbelievable how few people I can really communicate with. I'm working on changing that. This type of program would be great for any person, not only people concerned about drugs.

Our team is working here to try to bring to this community some of what we learned at Poland Springs. We have had one training session at the school. We have run into a lot of problems and have a lot more to do, but we're trying, and it's coming...

Teacher

... The first night and even the first day or so I tried to figure out just what was happening (at Poland Springs). I knew that community people were going to be at the training session, but I couldn't figure out what they would be doing there. I guess I just didn't know - because it wouldn't have been one half as good as it was with them there. They play such an important role in our community and I had really never thought about them before. The guy in our group was a policeman. The students grew to love him so much. The whole thing was just unreal. Now he comes to the school to rap with the kids about different kinds of problems.

People are really funny. I'm including me in that. I never realized before that I had most kids in one set and really treated
them pretty much the same way. I guess that since I started teaching, I never took the time to look at kids outside of the classroom - outside of the one relationship I had with them, that of teacher.

The people that ran the training session were really excellent. They gave each other and everyone of us all the help and attention we needed. They would stay up as late as they felt people needed them to. They really knew everything about drugs. Nothing was left out... absolutely nothing.

The director of the state program is a man who is highly respected in our community. He had the total support at our school board, our superintendent, the vice-principal, and he even came to the training session here. If this type of experience could be had by everyone, I don't think that we would have half of the problems we do have in our society. If one week of this type of experience can make me, one individual, so much stronger, committed to people with needs different from my own, more open to kids, to my own wife, it should be given top priority...

11. Program Description: Local Community Team C Project Implementation

Selection Criteria

Trainers: Community Team C Trained at Poland Springs

<table>
<thead>
<tr>
<th>Role</th>
<th>Gender</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher</td>
<td>M (interviewed)</td>
<td></td>
</tr>
<tr>
<td>Guidance Counselor</td>
<td>F</td>
<td></td>
</tr>
<tr>
<td>Community (police)</td>
<td>M</td>
<td></td>
</tr>
<tr>
<td>Student</td>
<td>M</td>
<td></td>
</tr>
<tr>
<td>Student</td>
<td>F</td>
<td></td>
</tr>
<tr>
<td>Teacher</td>
<td>F (interviewed)</td>
<td></td>
</tr>
<tr>
<td>Student</td>
<td>M</td>
<td></td>
</tr>
</tbody>
</table>

Trainees: Individuals from within the community were invited and
some others requested to attend the workshop. If they attended the workshop the first night they were expected to attend all of the sessions.

Participants: Students 40%
Teachers 40%
Community 20%

Duration of Training: A series of 3-hour meetings, three nights a week for two weeks.

Team Approach: The team trained at Poland Springs functioned as the training team. Each team member worked with a small group after the lectures, and they were responsible for the same small group throughout the workshop.

Trans-disciplinary Approach to Factual Information:

The team invited a medical doctor, a policeman, and a social worker from the local community to speak on drugs from their professional perspective. A psychiatrist from the State Department of Mental Health and the director of the State Drug Program were also invited to lecture.

Objectives:

1. To teach the facts about drugs from a medical, legal, psycho-social and educational point of view.

2. To improve communication skills so that people can talk and listen to each other.
3. To establish lines of communication between all fractions of our community.

4. To have the participants become involved in each others problems and situations.

5. To realize that everyone is needed in this community to make it better for all.

Methodology

Lectures

Large Group Discussions

Small Group Rap Sessions

Films

Group Dynamic Techniques

III. Trainee as Trainer on the local level:

Teacher

... Our team wants to set up a room in the high school where students can go to rap about their problems during free time, and we would like to get a hot line going. In order to do these things and many others that we've discussed, we realized that first we have to educate the community to get them aware of the drug situation in order to get support from them. We decided to run an awareness program.

See, what we wanted to do was to give other people an opportunity to meet each other, learn about drugs, how to relate to each other, and, most importantly, how to get going and deal with the causes of drug abuse so that a lot of people, especially students, don't get hurt by drugs.
The drug problem isn't as serious here as it is in other communities and maybe if we do something about the causes we can prevent a more serious situation from developing.

We have run two drug awareness sessions. There are about 5 task forces working now. These groups meet at night here at the high school to discuss where they want to go from here. In two weeks we are having another meeting for everyone to get together and find out where these groups are going and what they have done. One of these groups is working on setting up another awareness session.

You know, I have been teaching in this town for 12 years and I have never seen anything like what we have started. Kids, parents, teachers, police. . . all working together. It is absolutely fantastic. If only another group from here could go to Poland Springs and we could get another team going, we could get so much more accomplished. . .

Teacher

. . . This community is really buzzing with what has happened in the awareness sessions, and more people are getting together than I've ever seen before. The students have been involved with us (the teachers) and each other in such a different way after Poland Springs.

The principal of the school has been just great to us in letting us use the high school almost every other night for now we have about 6 task groups working on projects they have decided on. What's great is that it isn't all student groups or teacher groups, but everyone is all mixed and working together for the first time. There are still some teachers who think the students belong in their place. I get upset at those people inside, but I try not to let that upset me because so many good things are happening.

When I went to Poland Springs I never thought that this would be the result of just a one-week institute. I've been to so many (workshops) where after you just come back and then do the same things you always did before. Oh, maybe there were a few good speakers, but nothing really comes out of it. This one (drug institute) was really different, . .
IV. Organizational Plans for Further Action:

1. To get a feedback night planned so that we can learn what all of the task force groups are doing.

2. To plan and run a drug awareness session.

3. To get the "rap room" at the high school going.

4. To set up a hot line.

V. Trainees' Perceptions of the Training:

Subjects Interviewed

Student

School Administrator

Teacher

Community (parent)

Student

... It helped me to know a lot more about people. I learned how to relate to people on all age levels. It informed me about what other people think. The training combined knowledge of people, and understanding... with the communication of facts. We need to help people learn from each other. All of a sudden I am beginning to learn how to try to hear my own parents better. We used to fight a lot more than we do now. I also feel like I am doing something good. There are parents who are in my small group who have problems understanding their own kids... and me and the other kids in the group try to help them.

Two months ago I would have kind of just got mad that they didn't understand, but now I've learned to listen and try to help. I am learning a lot about my own parents, too.

School is different now, too. Some of the teachers I thought really didn't care at all about us, but I am learning that isn't true - even the police. There isn't a police in my group but there is one on another team.
I am going to keep coming to the meetings as long as they run. We are going to have another awareness session so other groups can get together and I am going to help with that, too...

School Administrator

...I wanted to go to the awareness session to learn about how the team trained at Poland Springs was going to run it. They had told me all about it before, but it still wasn't anything as I expected. I knew they were having lectures and small groups, but I didn't realize or expect that people would become so involved.

The most valuable thing I learned is how much people really care about each other and how much they are willing to do to help each other. The drug problem isn't serious in this town. I know that because of what is happening in other places. This certainly is an excellent way to prevent it from becoming more serious.

The superintendent and I have given full support to these peoples' efforts. They use our building and equipment whenever it is requested. I have nothing but good things to say about the program... 

Teacher

...In every way it was a valuable experience. I learned everything I wanted to know about drugs. I already knew a lot. I've been working in this area for a great while. But, I also learned a lot about people, psychology, and sociology.

I learned that drug abuse is a common people problem. The training helped us to relate to and understand people better. We need a lot more time for organization and planning to get everything done we want to do.

Too much money could ruin this program, but we do need some. We could go to help other communities, and they could help us...

Community (parent)

...I have six children and this training really helped me see my older children, especially my teenagers, in a different way. My kids' friends often come over to talk in our kitchen, but I never really took the time to sit and listen to them.
This program really helped me understand them better, the stages they may be going through, the problems they are facing, the things they are thinking about, and some of the ways I can help them. It was great listening to how honest these kids are, how much they are willing to share, how they gave, and that they really do want our help.

I think that a lot of kids' problems boil down to a lack of love. A lot of the kids that have serious problems don't feel that they are loved, don't feel that they can go to anyone to share their problems with.

I heard one of the students say that parents don't show love to anyone but little children - not to each other or young adult children. They just show really physical and emotional love to children, babies. This is unbelievable - but you know, it might be true.

This type of learning is so important, so necessary. Everyone needs it . . . maybe they don't know it, but they do . . .

Summary Statement of Community Case Study C

The training team from Community C designed the community workshop on the training session they had participated in at Poland Springs. A teacher stated that "what we wanted to do was to give other people an opportunity to meet each other, learn about drugs, how to relate to each other and most importantly how to get going and deal with the causes of drug abuse so that a lot of people, especially students, don't get hurt by drugs" (p. 74).

At the time the teacher was interviewed the community team had directed two local workshops. Each workshop lasted for 2 weeks. The participants and local trainers met three nights a week for three hour meetings. The teacher went on to say that "I have been teaching in this town for twelve years and I have never seen anything like what we have started. Kids, parents, teachers,
police - all working together. If only another group from here could go to Poland Springs and we could get another team going, we could get so much accomplished".

The workshops directed by the trainers were held at the local high school. This facility is also used as the meeting place for five task groups which are an outgrowth of the first workshop.

Trainees of the first workshop were interviewed. A student recalled that "the training combined knowledge of people, and understanding - with the communication of facts (about drugs)" (p. 75).

A school administrator who attended the workshop was surprised at what was going on. He said, "I know they (trainers) were having lecturers and small groups, but I didn't realize or expect that people would become so involved." He went on to say that "the superintendent and I have given full support to these peoples' efforts. They use our buildings and equipment wherever it is requested. I have nothing but good things to say about the program" (p. 77).

A teacher learned that "drug abuse is a common people problem." This person also stated that much more time is needed for organization and planning if everything that individuals and the community people feel needs to be done is to get accomplished.

A mother interviewed about the training never mentioned the issue of drugs. She talked only about her relationship with her six children and the children's friends. She stated that she "heard one of the students say that parents
don't show love to anyone but little children - not to each other or young adult
children. They just show really physical and emotional love to children, babies.
This is unbelievable - but you know it might be true" (p. 78).

Both the trainers and the trainees in Community C apparently expend a
great deal of energy in working toward the accomplishment of their stated goals
and defined needs. Support from the administrative level was gained which
facilitated the endeavors of the local training team. The need expressed by the
trainers was the enhancement of their own training skills in facilitating groups
and organizational strategies. The majority of subjects interviewed talked about
their affectual learnings more than learnings directly related to the effects of
drugs. Apparently they understand the causes of the drug dilemma to be affectual.

Community D

I. Trainees' Perceptions of the State Training Session at Poland Springs

... The greatest thing that happened to me at Poland Springs
is that I learned I can be me. I used to think that I had to be
what my parents wanted me to be like... I mean I like my
parents, but I learned I don't have to stop liking them in order to
express myself. One of the teachers who was in my group really
reminded me of my father and we didn't hit it off at all. But,
I got to know him and realized that I could still like him. His
attitudes and opinions were different, but I guess he's not the
only one who thinks the way he does.

I really jumped away from telling you how I got to Poland Springs.
The principal asked me if I wanted to go a long time before it
happened. He said that I would have to get permission from my
parents and that he would tell all of my teachers. To tell you the
truth I really thought that something about drugs would really be
a bore, but it was worth it to get out of classes for a whole
week. As I said, it was nothing like I expected.
The doctors and people like that who came to speak on different things like law and treatment were really good. Where we learned the most was in the groups. Our group leader really helped us to get into it... you know what I mean... like my father says, no rocks were left unturned.

I never thought we would be able to get anything done about drugs in our community. But, we discovered as a team that there was a lot to be done and some of it we could start. We had charts and everything like that to help us plan and organize an awareness program. The one we ran was pretty good, but we made a lot of little mistakes... there is a lot more work to be done...

Guidance Counselor

... As a guidance counselor at the school, I knew that some of the kids were using drugs but I never had a way to get to them, and, to tell you the truth, I didn't know if there was anything I could do about it anyway. I have been to a number of lectures and read a lot of literature but that's nothing like the way I learned about drugs at Poland Springs.

When the principal at the high school asked me if I wanted to go, I said I would, that is, after talking with my husband and children. I have three children and it isn't easy to just take off for seven days, but we got all of that straightened out.

I've got to say that what I learned at Poland Springs from the people in my group, as well as from everyone else there, has changed my style or maybe priorities as a counselor. Before, I thought I only had time to get students' course problems taken care of and help them get into college. Maybe that is because I didn't know how to ask the questions the students needed to find the answers to, and I didn't know my own answers to those questions. Maybe I just thought I did.

Something that I found out from the group that really hurt me and taught me was that some of the kids thought I had a mother's complex. My need to protect and cover up for the kids was really noticeable. They helped me see that that isn't always helpful. Learning that has also changed my relationship with my husband and children.
You know, it's really a shame that everyone can't go through something like we went through. Everyone on our team got to know each other in such a different and beautiful way than we knew before. It wasn't easy, but nothing worthwhile really is.

In fact, my husband had become involved in what we are doing here. He had learned a lot and what we are doing together now had really made us closer. Oh, the whole thing was just great. But, I said it wasn't easy...

11. **Program Description** Local Community Team D Design and Implementation

**Selection Criteria**

**Trainers:** Community Team D trained at Poland Springs

- Student M (interviewed)
- Teacher M
- Police M
- Guidance Counselor F (interviewed)
- Student F

**Trainees:** Individuals from within the community were invited and some others requested to attend the workshop. If they attended the workshop the first night, they were expected to attend all of the sessions.

**Participants:**
- Students 30%
- Teachers 30%
- Community 40%

**Duration of the Training:** A series of 3-hour meetings, three nights a week for two weeks.
Team Approach: The team trained at Poland Springs functioned as the training team. Each team member worked with a small group after the lecture and they were responsible for the same small group throughout the workshop.

Trans-disciplinary Approach to Faction Information: The team invited a policeman, a social worker, and pharmacologist from the local community to speak on drugs from their professional perspective. A psychiatrist from the State Department of Mental Health and the assistant director of the State Drug Program were also invited to lecture.

Objectives:

1. To teach factual information about drugs from medical, legal, psycho-social, educational, and experiential perspectives.
2. To improve communication skills.
3. To gain knowledge about attitudes and opinions had by different fractions of the community.
4. To become involved in being part of the solution to the drug situation rather than part of the problem.
5. To realize that everyone has something to contribute to the community.
Methodology

Lectures

Panel

Large Group Discussions

Films

Small Group Discussions

Group Dynamic Techniques

III. Trainee as Trainer on the Local Level:

Student

... We (our team) has run one drug awareness session at the high school. We tried to give the people who came a part of what we learned. It was really hard because we don't know half as much as the people who taught us did. What was the hardest was running the small groups because it was in the small groups at Poland Springs that we learned most. They didn't look that hard to run, but you really need to know a lot about communication to do it right.

Our team had some problems in planning too because we didn't have enough time to work together after the small groups and then we didn't know what each other was doing. The next time we run a program we are going to see if someone from the State Department can come to help us.

The lectures went well and the people said they really learned a lot from them. That's what we talked about in the small groups mostly, but I wanted to get people talking more about how they felt.

What we (our team) has decided is that we are going to wait about two months before we plan another program and in the meantime we are going to meet with individuals who will help us and let them know more about what we want to do.

The principal has really been great and a lot of my friends have helped us a lot too...
Guidance Counselor

... Since we got back from Poland Springs we have spent most of our time planning the drug awareness session we ran three weeks ago. It certainly wasn't easy planning and running it. We spent hours and hours talking and meeting with people who we needed to help us and also meeting together to design the program.

Now that it is over we can see that we should have taken more planning time. The last two nights were supposed to be for planning what was to happen after the program so that everyone who came could get involved in some kind of action group, but it just didn't get done right. We need some help in that.

The trainers at Poland Springs knew much more about organizing than we do. I have talked to Carl Mowatt and there is going to be a feedback conference in about a month. Then we will learn how to organize our groups. We have decided to wait until after that to run another awareness session.

Many of the teachers who came to the awareness program said that they enjoyed it. What we are going to try to do is run an in-service day for the teachers. The students are also planning a "Give a Darn" day. That should be very good. The students have been most helpful and enthusiastic. They seem to have so much energy. . .

IV. Organizational Plans for Further Action:

1. To attend a regional feedback conference run by the State Department of Drug Education director.

2. To plan and run another drug awareness session.

3. To organize and run an in-service drug education day for the teachers.

4. To organize and run a "Give a Darn" day at the high school.
V. Trainees' Perceptions of the Training Subjects Interviewed:

Subjects Interviewed

Student

Community (parent)

Teacher

Community (parent)

Student

... We talked together, shared our feelings, and worked together. We have become friends - there are many people we can learn to like, to love, if we get to know them, their problems, their needs ... and it's important to share ours with them.

I learned that other people care about me. I have a place to go. They are providing me with an alternative to using drugs. It keeps me off the streets. I learned to be turned on by other people. It was worth my walking five miles every night to come ... to get help and to help others.

A man once told me that I had a very negative attitude. The next night I told him that he wasn't really right, but that I did understand his point. I've learned that I have to make an effort to be accepted if I want to help others like I feel I need help.

I used to stay by myself a lot, but now I'm getting to know a lot of different types of people. I have a wider range of friends. I am now attracted to people who are different because I can learn from them.

I don't know why we would want any support except community support. We are politically involved locally, but money would ruin the program. All we really need is more time and more people. Then we would have love everywhere...
Community (parent)

... Being with kids that I would never choose to sit down and talk with shocked me somewhat the first hour or so. I never let my own children chum with other children with long hair and who dress in dungarees all of the time. What I learned was that these children are no different from my own and that appearance has nothing to do with how one thinks. I have always been so afraid that my children would use drugs if they chummmed with these others types of children.

Children, or, I should say, high school students, have problems today. More problems than I ever had. We didn't have so many fears and things around us. I guess I never stopped to look at those things before.

Talking and working so closely in the group discussions helped me learn how important it is to be honest. I am not as openly honest as most of the students I talked with are, and, you know, it's funny, but the longer the kid's hair was, the more honest he seemed to be.

I want to keep involved in this program... there is a great deal we can all learn. Now my husband is interested in coming to the next one...

Teacher

... This program taught me more in two weeks, three hours a night, three nights a week, than I learned about students in my four years of college. No one took the time to teach us to just talk and learn how to ask questions. I learned that the only questions I know how to ask are ones I already have the answers to in my mind. One of my students taught me that. He was in my small group and when he told me I was really shocked. He said just to ask me a question you don't know the answer to and I couldn't. Every time I asked a question in the group, I did already have my own answer. That was a tough thing to learn. I guess I have to learn a lot more about communication. I think personally, that teachers are the worst when it comes to listening - all I used to want to hear was what I knew was right.

I also learned that drugs are more serious than I thought, and in a way some less serious than I thought. When I heard from the kids that they used marijuana and how they just wanted to see what it was like, I started to think about myself. I went right from high school
into the service. I wasn't of age to drink legally, and I drank like a fish. They are doing the same thing I did, but with a different drug. They (the kids) started asking me why I did that. It turned out that we had pretty much the same reasons. That's when I started thinking about how dangerous that is if you take heroin instead of beer.

The thing that really affected me was I realized how important it is for teachers to care about their students and that doesn't mean just their grades.

This whole thing was really what I needed, and unless one of my students hadn't almost forced me to go, I would have never gone. I am going to do all I can to get more of the teachers and my wife to go to the next workshop.

Community (parent)

... I learned about drugs. The lectures were very good. As a doctor I know a lot about drugs and the effects they have on the body. I think there should have been more lectures and less discussion. I feel a lot of time was wasted in the small groups. I also think that a lot of the young kids didn't take the lectures as seriously as they should have. If you are learning about drugs that is what is important, not just talking about communication. All good kids and parents should communicate in their families. If they can't, they are doing something wrong.

Don't get me wrong. On the over-all, a lot of good facts were presented, but I think too much time was wasted.

Summary State of Community Case Study D

The trainers in Community D seemed to feel that the workshop they designed after the state training program fell short of their goals (p. 83). This was due primarily to lack of time for planning during the workshop and to the trainers lack of expertise in facilitating group dynamic techniques and discussion groups (p. 84).
Invited from the community to present lectures during the drug awareness session were a policeman, social service workers, pharmacologist and psychiatrist for the State Department of Mental Health and Robert Sonlas the assistant director of the MDEP. Other methods used to achieve the stated objectives (p. 83) were a panel discussion, films, group dynamics techniques, and large and small group discussions.

A student participant who stated that she was a drug user said, "I learned to be turned on by other people. It was worth my walking five miles every night to come... to get help and to help others. I found people who care about me" (p. 86). She also stated that "money would ruin the program. All we really need is more time and more people. Then we would have love everywhere."

A doctor interviewed felt very differently from this student. He said that the lectures were good but the discussions were a waste of time (p. 88). He further stated that "all good kids and parents should communicate in their families (not in a drug session). If they can't, they are doing something wrong."

The trainers decided not to run another drug awareness session until they received further training in group dynamic techniques. They had contacted Carl Mowatt and learned that a two-day feedback conference for the state trainers in the region would take place in a month. They planned to direct another drug awareness session after this conference.
Community E

Trainees' Perceptions of the State Training Session at Poland Springs

Community (police)

This experience was the biggest thing that ever happened to me. My chief asked me to go so I went. There were no questions asked.

What happened was that I got to know people as people. The communication skills taught me how to talk, to listen, to relate. We learned to really communicate to each other regardless of age. There were no barriers at the end of the week. You could feel trust. The kids really grew to trust me. They talked with me about all sorts of things. The fact that I was a policeman didn't seem to matter anymore. They just saw me as me.

This experience was the greatest thing that ever happened to me. I've been a policeman for 14 years and I've gone to every kind of training program I could possibly attend. The police department sends men for all types of training. Well, this program was the best I ever went to. When I got back I told our captain that every policeman should go through it.

Another thing I learned was that it is really important to know why a kid violates the law. I used to think that the most important thing was that he did violate the law. Well, if you know why, maybe you can help him not need to.

The greatest thing that happened which has changed my life is the name some kids gave me, 'super-chief' . . . that is really what they call me! They call me that when they see me walking my beat . . . directing traffic. That has really changed me. Now, I feel that I am the kind of policeman I always wanted to be.

Yes, we learned all about drugs. The people that gave us talks and things like that really know everything. The kids know a lot too, but drugs aren't really a problem. That I learned, too. The whole mess with drugs is really problems of people. If everyone could just give time to help each other out.
This thing should just go on and on and on. The world would get better and better because everyone would feel happy, important, and strong like I do now.

---

**Student**

... When the principal of our high school told me about the drug program at Poland Springs, I said I'd go but I wasn't sure if I wanted to go. None of my friends were going to go. What a mistake I would have made if I hadn't gone!

It was absolutely nothing like I expected it would be. I thought we would just sit there, take notes, and then look at each other. Well, it was nothing like that. I learned so much about myself and other people. I never knew that teachers and other people really cared about kids and how we felt. There were a lot of people like me from all over the state there. I made some really great friends and most of them were not my age — what I mean is they were from different places, had different kinds of jobs, and were as old or older than my own parents.

I learned that age, work, a way a person looks or dresses has nothing to do with the way he feels, how he thinks or what his problems are. It was the greatest thing to learn because now I can have all kinds of friends I never thought I'd have.

I learned a lot about drugs, too. All kinds of things about what they can do to the mind and body, but more important than that, why people take drugs. I mean all kinds of drugs like smoking cigarettes, drinking alcohol, and popping pills. Not just drugs that are illegal. Some of the drugs that people get legally are worse than the ones that the kids take.

Another thing I learned was that a lot of teachers and other older people really care about students, and that some didn't know that we had problems. They thought that everything was O.K. with us and that when we did things they didn't understand, we were just bored. Well, we learned a lot and they did too.

The person in our group that really taught me a lot was 'super-chief'. He is a policeman at home. I always thought that he was a mean, rough guy. Man, I was so wrong. He is about the greatest person I've ever known. He works so much with us now.
See, what they were trying to teach us is that drugs are important to know about, but to help kids not take drugs in the first place they have to like and understand where the kids are, why they're there and what they're doing.

In this community we have run two drug programs for as many people who wanted to come. We are trying to teach the people here what we learned at Poland Springs. We are doing it because a lot of people are much happier now. You can see it. We (the team) still have a long way to go. . .

11. Program Description Local Community Team E Drugs and Implementation:

Selection Criteria

Trainers: Community Team E Trained at Poland Springs

Student M (interviewed)
Teacher F
Community (police) M (interviewed)
Student F
Guidance Counselor M

Trainees: Individuals from within the community were invited and others requested to attend the workshop. If they attended the workshop the first night, they were expected to attend all of the sessions.

Participants: Students 25%
Teachers 30%
Community 45%

Duration of the Training: A series of 3 hour meetings, five nights a week, for 2 weeks.
Team Approach: The team trained at Poland Springs functioned as the training team. Each team member worked with a small group after the lectures. After the small group sessions, all the participants met in total group for one-half hour.

Trans-disciplinary Approach to Factual Information: The team invited a social worker, a doctor, and pharmacologist from the local community to speak on drugs from their professional perspective. A psychiatrist from the State Department of Mental Health and the assistant director of the State Drug Education Program were also invited to lecture.

Objectives:

1. To teach factual information about drugs from medical, legal, psycho-social and experiential perspectives.

2. To improve communication skills.

3. To gain knowledge about attitudes and feelings had by different segments in the community.

4. To discover what each individual is going to do to prevent drug abuse.

Methodology

Lectures

Films

Panel Discussions
Large Group Discussions

Group Dynamic Techniques

Small Group Discussions

111. **Trainee as Trainer** on the Local Level

**Community** (police)

... What our team wanted to do was bring home to our community what we learned and experienced at Poland Springs. We just had to bring this here because as I said it is so much needed.

What we (our team) decided to do was to run an awareness session. We invited police, parents, teachers, students, just everybody who could come. We ran the thing right here in the high school. It went off really well. There were about 85 people here.

This thing just has to keep going until everyone in the community knows each other. We'll do it. We have to. Drugs are now a different problem than they used to be. Now kids who didn't use drugs really feel sorry for those that do and now teachers and parents are glad to talk with kids.

That's really different from the way it used to be. If I had my way and if it could be done, it would have everyone just stop what they are doing and go through and experience what I went through. Everyone would be so much happier getting up in the morning...

**Student**

... This program has really changed this community. The principal and so many of the teachers are now working with students for the first time. Every night during the awareness program, our team would meet for about an hour before the people came and then after the night session we would work for another hour. This went on for two weeks. Now everyone gets together once a week here to work in their group to plan what we are going to do next.

There is still a lot to be done, but what is getting done is really great. It takes time to change the whole town to make everyone happier. It takes a lot of talking for us to do something that makes everyone happier.
If it wasn't for 'super-chief', we wouldn't ever have gotten so much done. He works all the time. He picks up kids in his police car to take them over here for meetings and everything. The principal wants us to run a big program in the high school and that's what we are working on now. If we only had more time to give to this we could get so much more done.

IV. Organizational Plans for Further Action

1. Design an in-service program for teachers and students on communication.

2. Run another drug awareness session.

3. Attend the Regional Feedback Conference.

V. Trainees' Perceptions of Local Level Training

Teacher

... I learned at this training program that the most important thing in life is communication. When real communication exists and one has put much effort into being open, then real joy and peace is felt. After getting home late at night, I found that I wasn't as tired as I would have normally been because I was learning and helping people.

This program has changed me as a teacher. I have come to like my students more. I guess the word is... trust my students more. I also learned that parents and other people really care about what happens in the school. The ones who really care, too, are the students. I never stopped to think about if they don't like school they don't have much to be happy about because most of their waking hours are in school. Teachers should really spend more time learning about how the students feel and how they can help them be more comfortable in the classroom.

Much has to be done to learn about how we can relate better to students in the classroom. I have read about the importance of this and now I realize how very important it really is...
Student

...This program taught me a lot. Mostly, it taught me that teachers and parents really care about kids and do want them to be happy and not need to take drugs. I never thought that they really cared about how we felt. I thought that they just wanted us to memorize things in school and be home when they tell us to.

A lot of teachers and parents and even police want us to be happy. That is, they want us to help ourselves and they want to help us. The only way they can help us is if we talk to them and tell them what we need. I guess I never thought that they wanted to know what we needed.

My father is a policeman and he came to the session. I got to know him in a different way. I thought he was different from the way he is. That's because I never really got to know him as he is.

I want to help the people who ran this thing run another one. We really need this...

Community (police)

...I learned that this thing is needed. We've got to have a way to find out how kids and parents feel about what's happening in this community. Some kids never get into trouble with the police, which is really good, but they still need to know about our problems as policemen.

Some kids felt that we wanted to get kids into trouble. That, of course, isn't true. It took a lot of talking to hear from them and have them hear from us. Drugs are a very serious problem. We have to try to stop kids from using drugs. If they don't know all of the trouble they can get into they won't know why they shouldn't take the chance.

As I said, we really need more programs like this, not only here but all over the state...

Community (parent)

...I never realized that kids think about so many things. Not just the records they listen to and parties they go to... but they also think about the war, what they want to be, school, how their teachers
and parents feel and how their friends feel. There really is a lot
of pressure on kids today. Much more than there was when I was
growing up.

You know, kids have to learn too that there is a lot of pressure on
parents too. I have five children and it isn't easy to listen to and
talk at length with each of them. But, this is what I will have to do
to keep interested in them.

I don't have a lot of time to give to the program because I work
besides having a lot to do at home, but I will help in running the next
drug awareness program if they need me. . .

Summary Statement of Community Case Study E

"What our team wanted to do was bring home to our community what we
learned and experienced at Poland Springs" (police, p. 94). Since the training
sessions, more members in the community have come to know each other.
Those individuals who need others know where to find them. "Drugs are now
a different problem than they used to be" (p. 95). Another trainer attributed the
success that the training team had achieved to 'super-chief' the policeman inter¬
viewed (p. 90). A student stated that "if it wasn't for super-chief, we wouldn't
ever have gotten so much done. He picks up kids in his police car to take them
over here for meetings and everything. The principal wants us to run a big
program in the high school and that's what we are working on now" (p. 95).

Community Team E had directed two drug education training sessions at
the time of the interviews. The training team was asked by the principal to
design an in-service training program for teachers and students and this was
to be their next project.
The local trainees interviewed talked primarily about their affectual reactions to the drug awareness session. A teacher stated that, "this program has changed me as a teacher. I have come to like my students more. I guess the word is, ... trust my students more. I also learned that parents and other people really care about what happens in the school" (p. 95). A student went on to say that "this program taught me a lot. Mostly, it taught me that teachers and parents really care about kids and do want them to be happy and not need to take drugs" (p. 96). This student interviewee was the only trainee interviewed (pp. 96–97) who mentioned the words drugs. Yet, each interviewee discussed what he/she perceived to be some of the causes of drug use and abuse and also talked about their role in relation to that issue.

The program objectives (p. 93) indicate that one of the purposes of the session was to present factual information about drugs. The interviewer or reader can then make the assumption that if these facts were presented they were presented in such a way that the trainee became affectually involved and related this information to himself or herself. One of the limitations of the study is that the manner in which the data was collected does not allow for these objectives to be statistically measured. The data does however reinforce the contention that the drug issue involves all sectors of the community and that all community members can identify their role in relation to being part of the solution to the drug dilemma.
Community F

I. Trainees' Perceptions of the State Training Session at Poland Springs

Student

... When the high school principal asked me to go to a Drug Education Training Program, I was really shocked. I smoke grass and I thought he wanted me to go so that everyone would find out. I said that I would go, but I really didn't know if I wanted to.

It was the most out-of-sight thing I ever did. I could hardly believe what it was like and it got better every day. We really got to know each other. I said things about myself I never told anyone before and I learned things about myself that I never knew before either. I realized that I really do care about my parents and that I don't want to hurt them any more. I used to think that it was only kids that have big problems, but now I know that everybody has them. One of the guys in my group was a policeman and he was saying how difficult it is to spend time with his children. He has 5 children, works overtime all the time to support them and pay all the bills, and because of that he really doesn't know his children that well. The reason he doesn't know them that well is because he is always working. He was saying that his 17-year old son always wants the family car and because he is afraid of an accident he gets uptight. He was also talking about his wife and how badly he feels that she has to work so hard and how he wishes he could spend more time with her so he could get close to her.

This really hurt me because it made me start thinking about my own father, and maybe he has some of the same problems.

I used to fool around all the time and now I want to help my parents out more. My friends thought I was crazy when I came back because I didn't want to fool around all the time and I had new friends. They just didn't understand. Some of my friends came to the thing we ran at the high school. Now they understand better. You know what, I even got my hair cut when I got back home, because I knew my parents didn't like it and I wanted to tell them I learned a lot. I really didn't know how to tell them, so I showed them. I am trying much harder to talk to them now and it works...
Teacher

. . . When the high school principal asked me if I wanted to go to Poland Springs, all I could think of was all of the time it would take me to get my courses prepared a week ahead and how my wife would react to my being away for a week. After thinking about it and talking it over with my wife, I decided to go.

I am pleased that I went because it has made a world of difference to me, my wife, and my students. I got out of college four years ago and have taken 3 graduate courses since then. All of that schooling didn't teach me as much as I learned at Poland Springs.

It's hard to put into words just what the whole experience was like. I learned more about myself than I ever knew before, and I have to say that that has really effected my relationship with my wife and my way of teaching.

I used to have a hard time talking with students. Not all students, because some of them I got friendly with, but what I learned was that I only got friendly with the ones that were like me or wanted to be like me. Not the ones I didn't know or understand. Now I see that the reason I didn't understand them is because I never talked to them.

I also learned that I treated my wife something like a student. I guess in a way I had women and students in the same category. I learned that from one of the women teachers in my group. She showed me that I always gave my opinions and ideas to women. I seldom asked students and teachers for theirs, but I always asked men for their opinions and ideas. Just learning that has really changed my relationship with female teachers and my wife. We talked a lot about this after I went home, and she said she had noticed that for a long time.

I learned a lot about drugs. What hurt me most is that everybody in the community is the cause of and responsible for drugs and drug abuse. It is the responsibility of everyone, not just the youth, to try to stop kids from getting hurt by drug abuse. . .
11. **Program Description** Local Community Team F Design and Implementation

**Selection Criteria**

**Trainers:** Community Team F Trained at Poland Springs

<table>
<thead>
<tr>
<th>Role</th>
<th>Gender</th>
<th>Interviewed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student M</td>
<td></td>
<td>interviewed</td>
</tr>
<tr>
<td>Teacher M</td>
<td></td>
<td>interviewed</td>
</tr>
<tr>
<td>Community (police) M</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student F</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teacher F</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student F</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Trainees:** Individuals from within the community were invited and others requested to attend the workshop. If they attended the workshop the first night, they were expected to attend all of the sessions.

**Participants:**

- Students: 20%
- Teachers: 30%
- Community: 50%

**Duration of the Training:** A series of 3 hour meetings, five nights a week for 2 weeks.

**Team Approach:** The team trained at Poland Springs functioned as the training team (minus one female student team member). Each active team member worked with a small group after the lectures.

**Trans-disciplinary Approach to Factual Information:** The team invited a policeman, a doctor, and a panel of students from the local
community to speak on drugs from their personal and/or professional perspective. A psychiatrist from the State Department of Mental Health and the director of the State Drug Education Program were also invited to lecture.

Objectives:

1. To improve communication skills.

2. To teach factual information about drugs from medical, legal, psycho-social and experiential perspectives.

3. To gain information about attitudes and feelings had by different segments in the community.

4. To discover what each individual is going to do to prevent drug abuse and to make the community a better place in which to live.

Methodology:

Lectures

Films

Large Group Discussions

Panel Discussions

Group Dynamics Techniques

Small Group Dynamics Techniques
III. Trainee as Trainer on the Local Level

Student

... Well, what we tried to do was to bring back home what we learned at Poland Springs. We realize now that we really can't do that. We had a lot of problems getting the first program off. First, one of the members of our team was unable to work with us any more, and then we had a hard time getting the high school.

Our biggest problem is that we (the team) just can't work together as well as I wish we could. We just don't have the training. Well, the session went just O. K. The speakers except for the doctor, were quite good, but the small groups didn't go too well. It's because we couldn't decide what to do and I think some people did too much and others not enough.

Other people saw it was really good, but I think it could have been a lot better. We hope to try again ...

Teacher

... The program here went well considering our own inexperience in running this type of workshop. It is really difficult to get all the cooperation which is necessary. We had some difficulty in obtaining the use of the high school facilities. We ran into problems we never expected.

Another thing that happened was that one of our team members had to drop off the team due to her own personal schedule and problems. This effected the morale of the team and that took a while to get over.

The speakers were quite good. Some of the young people thought that the doctor who spoke put too much on the kids and I had to agree with them. We did also have some problems running the small group sessions. I personally think that this could have been avoided had we spent more time planning the workshop.

From the feedback we received in the community, I think we have done quite well for the first try. It takes time and, of course, if we had some money and more people to help us it would go much better. We are all looking forward to the regional feedback.
conference to get some help and learn better to do the things that
need to be done. Especially, this is important in the areas of
developing communication skills. We really need help in
running the small group sessions...

IV. Organizational Plans for Further Action:

1. Attend the regional feedback conference.

2. Plan another Drug Education Program.

V. Trainees' Perception of the Training:

Community (parent)

... The training program about drugs was good. It taught me
a lot of facts about drugs that I didn't know before. The doctor
from the State Department in Augusta was really good. He made
me see that drugs are not just abused by kids alone. A lot of
parents use and abuse drugs, too.

I don't know why so many people have such a hard time talking
with their children, and why so many children have difficulty in
talking with their parents. As I say to my kids, if everyone would
just slow down and take the time to talk, things wouldn't be like
they are.

I can't imagine what terrible things or problems kids could have
that would coerce them to use drugs, but since the drug problem
is so great, I imagine that there are quite a few who do have such
problems.

I guess the group that ran this program is going to run another
one, at least they said that they hoped to. If they do, I think that
less time should be spent just talking and there should be more
lectures...

Student

... I learned that a lot of people want to learn about drugs, but
when it comes right down to doing something to stop the drug
problem, that's another story. The small groups could have
been good if the older people would talk rather than just ask
questions they already have the answers to in their head. That
doesn't do anything but make me mad.
The lectures were good. I already learned most of that stuff in school. I don't think that to just keep talking about the facts is good. Man, a whole bunch of kids are busting their heads on drugs and they don't give a shit about the facts. What we have to teach everyone is that kids and old people too take drugs for a reason. The reason is they can't take what is happening in this fucking world. Something has to be done about that.

The movie "11:59" was really good. It showed it like it is, but man so many older people thought the movie was not scary enough. What do you do about that?

If more kids had been there I think it would have been much better. But, I have to say, it was better than a lot of things we've had at school. . .

**Student**

. . . The thing sucked! There were too many hard hats there. Drugs are not that bad. To let people think that grass is bad is to lie. Man, I used to hit the booze and it shits compared to grass. Hell, people do what they damn please. I wouldn't trust some of those adults with anything. They think they're all such hot shits because they have some fat job, like the doctor. Man, he knows nothing about the drugs we were talking about.

The whole thing just blows my head. I don't know if they'll ever learn how full of shit they are. If old people or some of them are young, I should say if people in control of the money don't get their heads together, everyone in the country will be freaking out on drugs. . .

**Teacher**

. . . I learned a lot about drugs. I was very impressed with the doctor who spoke on the psychological and sociological reasons why kids use drugs. I had never really thought about it much before that.

I liked the small group discussions, but some people weren't willing to share and be as honest as the students were. The one criticism I have is that I don't think we had enough youth. There really should have been more students in the discussions. They are really more open and sometimes more honest when it comes down to really discussing the drug problem.
I hope that the group that ran the program has the opportunity to run another one and involve more youth. In fact, I have offered to help. One of the students that helped run this is in my English class and I told her that I'd be willing to work with her. She has learned so much from her experience in this program. Believe it or not, it really is noticeable in her classwork. I think this program is most beneficial to the youth as well as the adults...

Summary Statement of Community Case Study F

Of the six trainers who attended the state training session, two were interviewed. Both of these interviewees felt that the experience was most worthwhile (pp. 99-100). A drug taking student who was invited to attend the workshop by his high school principal stated that he really didn't want to go because he felt the principal wanted to get at him. How he did decide to go. One of the statements he made about the training was, "I learned that I really do care about my parents and that I don't want to hurt them any more. I used to think that it was only kids that have big problems, but now I know that everyone has them" (p. 100). A teacher stated "I learned a lot about drugs. What hit me most is that everybody in the community is the cause of and responsible for drugs and drug abuse. It is the responsibility of everyone, not just the youth, to try to stop kids from getting hurt by drug abuse" (p. 100).

These trainees who were also interviewed as trainers on the local level talked about some of the problems they had as members of a team. The student said, "our biggest problem is that we just can't work together" (p. 102). He went on to say that, "the speakers, except for the doctor, were quite good, but the small groups didn't go too well. It's because we couldn't decide what to do and I think some people did too much and others not enough" (p. 102). Another
trainer stated that he thought "the program went well considering our inexperience in running this type of workshop. . . It is really difficult to get all the cooperation which is necessary. We had some difficulty in obtaining the use of the high school facilities" (p. 103). When logistic problems are experienced and the necessary support and needed resources are not obtained early enough to design an effective program, the trainers are often negatively effected. This can hamper the program's effectiveness. Another problem experienced was that there were communication and inter-personal relationship problems had by the team members themselves (p. 103).

Trainees interviewed stated that they felt more youth or students should have attended the workshop (student p. 103; teacher p. 103). Only 20% of the 50 participants were youth. The adults apparently questioned the students and were not willing to share information themselves. A student stated that "the small groups could have been good if the older people would talk rather than just ask questions they already have the answers to in their head" (p. 104). The student went on to say, "What we have to teach everyone is that kids and old people take drugs for a reason. The reason is they can't take what is happening in this fucking world. Something has to be done about that" (p. 105).

The training team members stated that they were going to attend a regional feedback conference before attempting to run another community drug education training program. They felt they definitely need to gain strength in running small group discussions and to work out their own team's problems. After these
two areas of concern have been met, they hoped to then direct another local training program.

In summary, these case studies have presented some of the effect the training on the state and local levels has had in the community and within individuals themselves.

Some of the needs reported by the trainers on the local level are for further training in facilitating small group discussions, the enhancement of skills in designing and implementing group dynamics techniques and further training in organizational development strategies in order to channel energy created in the local level workshops.

Other problems shared were the need to gain more support within the community in terms of physical resources. For example, trying to locate a building for a "Rap Center" and rooms in the high school for youth centered activities. Another need was further training for local community people, teachers, students, parents and policemen. The over-riding need expressed was for release time from ones regular professional responsibilities in order to achieve the goals set by the community training teams as well as those set by individuals themselves.

The feedback presented in these case studies clearly supports the original contention that the interpersonal climate and relationship help to make the information on drugs meaningful and useful. This can be especially supported by the anecdotal data presented in Case Study F.
Some of the limitations of these case studies are the objectives of each training team were not statistically measured in terms of the team's success or failure in meeting these objectives. The interviewer has not reported whether or not the plans for further action on the local level were in fact carried out. Another unknown is if the feedback conferences designed for furthering training and problem solving actually meet the needs the local level trainers or whether these conferences actually occurred.

The data presented however, does support the contention that followup training and support is essential if in fact the original program objectives on the state level are to be met. One of these being continued action programs on the local level.

Both the state and local level training programs were designed to motivate the trainees to examine their own roles, behavior and attitudes as they relate to the issues of drug use and abuse. The anecdotal data suggests that this was achieved. Another stated objective was to help the participants to see themselves as part of the solution to the drug dilemma rather than as part of the problem. The data also suggest that this objective can also be reported as achieved. How long these affectual outcomes of the training will in fact be consciously acted on by the trainees of both the state and local programs is an unknown.
CHAPTER V

CONSIDERATIONS AND DIRECTIONS: A CONCLUDING STATEMENT

This dissertation presents a strategy for community drug education based on the concept that the drug "problem" is really a community-wide "problem" (Westman, 1970). The main thrust of the strategy is that people from all walks of life must work together to learn the facts about drugs, their use, abuse, treatment programs, and rehabilitation programs. The strategy further emphasizes the importance of each individual's defining his/her own feelings and interpersonal relationships with other members of the community group. The anecdotal data in Chapter IV underscores that it was this open sharing and the relationships which developed from it, as well as the content information, which motivated the trainees to act at the local level. As a result, young people involved in the training stated that they now felt part of and had something to share with the community in which they live.

The proposed strategy should remain flexible. The feedback or input should be examined during the training session not only to be utilized in the continuing development of the design, but also as a means of studying the effectiveness of the training. The other methods of follow-up are gathering feedback data at the conclusion of the training session, on sight visitations at the community level, and continuing written and telephone communication. This
continuing contact maintains the growth of staff personnel and the refinement of methodology. This, too, allows for flexibility, innovation, and the development of future programs.

This strategy, utilizing total community energy, can be helpful for other types of training related to social issues. Take a social problem: alcoholism, drug addiction, racism, sexism, riots. All are defined by the majority of society with one tag: "What is wrong with those people? Why aren't they behaving like the rest of us?" These questions put it "out there" away from the here and now and at a safe uninvolving distance from us. That attitude compounds these social problems. Commitment to action depends on taking the emotional charge out of the issue and placing it in its proper perspective; then attacking the problem on a multi-disciplinary learning level; getting the facts and thereby creating a new sense of community based upon common action.

We can do many things as a group, to improve the quality of life for everyone. We can and must arrange things within our community and our personal behavior, so that each of us will feel that a part of his/her work is to make it easier for someone else to realize the best that is in him/her. A strong sense of self leads to a strong sense of extended self - the community. A group of strong communities make up a strong state, a strong nation (Westman, 1970).

Social problems are very much part of our community environment. This project is about only one - the drug dilemma. But wearing blinders so that
social implications of this "drug problem" are avoided is still happening in many communities.

Where did the causes originate? Urbanization, the economic definition of a man's work, industrialization, family disorganization, ghettos, and racism, they all are contributing factors. As a nation where did we make our mistakes in attempting to deal with these problems? In assuming that we could legislate conformity to middle-class morality, in taking the word of people who said they had "the answer" rather than an approach? In refusing to accept personal and community responsibility? In many ways we have failed ourselves.

Can we really solve the drug problem? To arrive at the correct answers associated with this problem you have to ask the right questions. If we look for drug problems to work on you don't have to travel more than a few miles at the most. But working on human problems is not the same as solving them, like solving math or a chemical problem. "Being human is a problem in itself" (Westman, 1970), so we will have to continue to work on human problems as long as we are human and as long as more and more humans keep coming along.

We are working, we have been working, and shall continue to work on problems. What we have done about solving drug problems is not nearly enough. We have to do much more. The degree to which we focus attention on human problems reflects the degree to which we, as a society and a nation, feel that
human beings are important. Our current competitive society, based on the rather de-socializing foundation of private economic gain, often defines human beings only in a functional sense. If you could take a computer and add up all the beings who are in the process of becoming, you would have our future as a nation of people in your hands. Otherwise you had better just turn the computer off before somebody drops a Molotov cocktail into its cold remote electronic guts. If all of the above suggest that our drug problem stems from a societal and ideological malaise in our culture, it is meant to be so.

Young and old, poor and wealthy, all segments of our society are seeking a refuge in the use and abuse of drugs. Over and above the observations of what is happening and how often, we must wrestle with a deeper issue: the why and wherefore of drug abuse. A growing body of knowledge about the causes of drug abuse (Shaperio, 1970; Steffenhagen, 1971) and the author's own first hand experience with the phenomenon of the drug culture throughout the United States, suggests that the root cause lies in the disintegration of this country. The present isolated culture is causing a despair which seeks release and comfort in drug use, drug abuse and other maelstroms of misery.

Mark Lieberman, in his book The Dope Book, All About Drugs, sounds the same note when he says the "drug problem" like other social and human problems is a "people problem." Throughout this study, in discussions of drugs, drug abuse was characterized as a symptom and the abuse results not from any magical properties of the chemicals themselves, but rather from the interaction of personality, environment and psychological condition. Similarly,
just as each drug abuser's use of a particular drug is a symptom, so too the
national abuse of drugs by people young and old - is a sign that something larger
is afoot here.

The part of the answer to the question, "Why do people use drugs?" is that, in several vitally important areas, young people feel that their country
(and more particularly, industrial society as a whole) has let them down, has
failed to live up to its humanistic promises: not enough justice, not enough
food, too much pollution, too much war, too much hypocrisy, and not enough
love. To many young people, drugs become a way out of an intolerable situation,
an escape valve for some of their frustrations. "Look at us," they say, "we're
just channeled through a Mickey Mouse educational system, into meaningless
jobs to produce goods nobody really needs" (Lieberman, 1971).

Perhaps, in closing, the cryptic advice of one of the youth at the
training session is worth repeating: "Society better get its thing together fast,
or else, wow."
APPENDICES
APPENDIX A

COMMUNICATION EXERCISES
APPENDIX A

COMMUNICATION EXERCISES

1. "Opposite Sides":

The purpose of this exercise is to understand another's point of view. In essence, this exercise allows two people, discussing a topic, to "get in each other's shoes." Understanding another's viewpoint is an important step in resolving differences of opinion.

Procedure:

1. Each student chooses a partner, and both agree on a topic for discussion.
2. One of the pair must argue for the issue, and the other against.
3. After several minutes of discussion (20 min.), the roles are reversed, and each must argue the opposite of what they had previously done.
4. Several minutes are again allowed to pass, then the discussions are halted. Students return to the larger group and talk about some of the feelings generated from this exercise.

2. "Gossip"

The purpose of this exercise is to examine breakdowns in communication. Misunderstandings can arise if we rely too heavily on other people to relay our messages to others. Meanings get confused; details are left out; feelings are not conveyed. "Gossip" is a good illustration of this breakdown in the communications process.

Procedure:

1. Four volunteers are chosen, and are instructed to leave the room. The facilitator relates a story containing the elements listed below on this sheet to the first volunteer.
2. A second volunteer is then called into the room, and the first must relate the details of the story that he remembers to the
second. This is continued with the 3rd and 4th participants.

3. Observers in the classroom are given a tally sheet (see below) to follow the number of details which are gradually excluded.

COMMUNICATION EXPERIMENT - ORAL

Bits of Information

1. Picture streetcar train
2. Interior train six people seated
3. Usual advertising signs above windows
4. One smoking cigarette
5. Soap ad
6. Some camp
7. Political ad candidate alderman
8. Seated man hat and newspaper
9. Funny rounded engrossed newspaper
10. Woman shopping bag right arm eyeglasses hat
11. Empty space
12. Woman small baby
13. Watching man reading paper
14. Plainly dressed - long hair
15. Fat man asleep hands clasped
3. "Echo"

The purpose of this exercise is to examine breakdowns in communication. Oftentimes communication between two people breaks down because as one person is speaking, the other is already rehearsing a response to the speaker. Consequently, the "real message is often distorted or forgotten."

Procedure:

1. Students are instructed to break up into dyads (pairs). Each pair then chooses a topic, or is given a topic, to discuss.

2. One of the pair volunteers to begin the discussion by making an opening statement.

3. Before the second person responds with his own thoughts, he must repeat the message of the first person. Only then can he issue his response.

4. The process continues with each person repeating the previous statement of the other before responding.

4. "Who's Telling the Truth"

The purpose of this exercise is to illustrate how people can easily hide the real meaning of their verbal messages.

Procedure:

1. Ask for six volunteers and give them slips of paper which read either "True" or "False."

2. Construct several questions; each student must then answer the question either truthfully or dishonestly, depending on what their slips of paper say.

3. Other students in the class must then guess who's telling the truth and who isn't. After each question, have the student volunteers trade slips, or vary the ratio of True-False slips.

This is a good supplementary exercise leading to, or resulting from, a discussion about the various modes of communication, and the perception of messages in the communications process.
5. "Consultants"

The purpose of this exercise is to examine the effect of status and rejection. Participants explore the effect of status and rejection on a few individuals, in a problem-solving situation.

Procedure:

1. This exercise is best limited to approximately eight participants and requires about one-half hour to complete.

2. Two volunteers are requested from a group. After all participants reach a consensus about a particular problem to attempt to solve, the two volunteers are instructed to leave the room. Their role will be as consultants to help solve the problem, and, in their absence, they will try to discover several solutions to the problem.

3. The remaining members of the group are then instructed to behave in a particular way when the consultants return. That is, they will accept and agree upon the solutions offered by one consultant, praising him to no end. They will also reject the other consultant's solutions, and, in fact, ignore practically anything he offers, considering his solutions worthless.

4. The discussion afterward should concern the feelings of the two individuals, the one rejected and the one accepted and praised. Participants should be especially sensitive to how their behavior affects the two consultants, noticing any signs of frustration, withdrawal, etc.

6. "The Million Dollar Gift"

The purpose of this exercise is to examine group decision making. Three sub-groups try to reach agreement on proposal for spending a million dollars. They usually end up at loggerheads and thereby lose title to the grant.

Procedure:

1. Divide a group into three sub-groups: A, B, and C. Tell each sub-group they have fifteen minutes to meet one another and get acquainted so that they can then work together effectively on a common task. They are also to appoint a spokesman or representative from their group.
2. Ask representatives to sit in the center of the room facing their respective groups.

3. Inform the group of their assigned task. They are to pretend that they are from the same school system and a foundation wishes to give their system one million dollars for a school project. The only condition is that the entire group agree upon what the project should be.

4. Send the spokesmen back to their respective groups to decide upon a proposal for a project. (Allow fifteen minutes.)

5. The three spokesmen meet again in the center facing their groups and make their respective proposals.

6. The task now becomes to merge proposals or accept one. After the exchange of information about proposals, spokesmen return to their sub-groups to discuss new ideas and strategies (five minutes). The spokesmen return to the center and meet the other spokesmen and attempt to reach some agreement on how to use the one million dollars (five minutes). Two or more times, the spokesmen meet in the center for five minutes and then return and meet with their sub-groups for five minutes.

Probable Outcomes:

Most often with this experience, no agreement is reached and thus the school system or the group does not receive the one million dollars. One reason for this is the human tendency to get "locked in" and hold fast to ideas and proposals. It is difficult to "let go" and collaborate with others even when the prize is one million dollars and all stand to gain by working together.

Issues which usually appear are:

**Competition:** The three groups tend to compete rather than cooperate.

**Cooperation:** It's often high within each sub-group and low between the three groups.

**Group Pressure:** The effect on each spokesman, especially when in the center facing his group is very strong.
Delegation: How much power and freedom was given each Spokesman and how did it feel to be represented by another?

Decision Making: Did the sub-group generate several ideas before selecting one or did it begin with a single idea? Did everyone agree to the decisions of others? How were the decisions made in each sub-group? How were the spokesmen selected? How was the proposal selected?

Participation: Did all have opportunities to participate? Were some excluded? Was an effort made to draw people out? Did a few dominate? Who spoke most? Who were involved least?

Leadership: Did a leader as such emerge? Was the leader designated? Was leadership shared? Was there any structuring of the group? Who were the leaders?

Roles: Who initiated ideas? Were they supported and by whom? Did anyone block? Who helped push for decisions? How did people feel about their role in the group?

Communication: Did people feel free to talk? Was there any interrupting or cutting people off? Did people listen to others? Was there clarification of points made?

Sensitivity: Were members sensitive to the needs and concerns of each other?

7. "Communication and Listening"

The purpose of this exercise is to look at how emotions effect the communication process. Participants send and receive verbal messages under controlled conditions, learn about emotional blocks to effective communication.
Procedure:

(1) Display the following diagram.

**Figure 1.**

A \[\rightarrow\] B

**Figure 2.**

A \[\rightarrow\] B actually hears arc of distortion B may hear

Explain: The process of communication may be conceived as shown in **Figure 1**. Individual A sends a message and individual B receives it. **Figure 2** shows what often happens. There is usually an arc of distortion between what A sends and what B receives. The reason for this is that the content sent by A is packaged in some way by A's own emotional disposition at the time. The receiver in turn may add to the package, depending on his frame of mind. As a result, the distortion may be so great that B receives very little, or none, of the content. A possible remedy to this problem is suggested by the following experience.

(2) Select two people in the group with differences of opinion on some matter. Appoint a MONITOR to sit in with them in a circle (fishbowl) inside the larger group circle, thus:

A \[\rightarrow\] B

MONITOR

A is to send a message in small packages as clearly as possible. He must organize his thoughts so as to present them logically and concisely. B meanwhile is to listen to A as attentively and objectively as possible. The job of the MONITOR is to intervene at opportune times. He must
try to be objective on content to intervene at the right moment and not become "locked in." At various points, the MONITOR requests B to give A feedback on what B actually heard. If A is satisfied with B's reception, he sends the next package. If A isn't satisfied, he restates his first message and feedback is again given. This procedure is carried on for approximately 15 minutes.

(3) After the above demonstration, break up the group into threesomes. Within each threesome, one is the sender, A, another is the receiver, B, and the third person is MONITOR. After ten minutes, the roles are switched and then again after another ten minutes, so that each member of the triad has a turn at being A, B, and MONITOR.

Probable Outcomes:

At the end of the experience, people usually discover the following blocks and aids to communication:

Some BLOCKS to communication on the part of sender A are:

- Unorganized thinking
- Too large a package at one time
- Speedy delivery
- Projection
- Uneasy feeling towards B

BLOCKS on the part of the receiver B:

- Preconceived notions about A, or topic
- Tension in effort to listen
- Projection
- Emotional reaction
- Distraction or lack of interest

Some AIDS to communication on the part of A are:

- Clear, brief delivery
- Low level of emotion
- Objectivity
- Feeling of ease with B
AIDS on the part of B:

Attentive listening
Open Mindedness
Withholding of emotional reaction
Feeling of ease with A

8. "Alter-Ego"

The purpose of this exercise is to facilitate getting acquainted in newly formed groups, indicate listening ability, and demonstrate ability to empathize with others.

Procedure:

Group forms in dyads (pairs). The members of each dyad should not know each other well. Member A takes three minutes telling about himself. Member B takes three minutes introducing himself to member A. Dyads then form into groups of four. Member A then introduces himself as if he were B, and B introduces himself as if he were A. Members C and D do the same. Groups of 8 are then formed and the process repeated.

Or - in the groups of 4, A can introduce B, and B introduces A, etc. Then use the "Alter-Ego" part of assuming the other's identity for the groups of 8.

9. "Killer"

The purpose of this exercise is to examine the use of eye contact as a means of communication.

Purpose:

1. Participants sit in a circle so that they can all see each other. No talking allowed.

2. Each participant is dealt a card. One card will be the Joker. Keep cards face down. The person who receives the Joker is the Killer, and he wants to keep his identity a secret.

3. The Killer aims to keep his identity secret as he proceeds to "kill" the other participants by winking at them. When a
participant sees the Killer wink at him, he throws his card into the center of the circle, being "cagey" about it so that the others still in the game don't know who caused him to "die." (It is not necessary to throw the card in at the precise moment that the wink is received.)

4. If at any time a participant who has thrown his card into the center, and then learns that the person whom he thought winked at him was not really the killer (because the person he thought winked at him throws his card into the center) he can retrieve his card and re-enter the game.

5. At any time, as the game proceeds, a participant may accuse another of being the Killer. All participants still in the game (that is, who still have their cards) must agree to the accusation (except the accused). If all agree, the accuser and the person accused must reveal their cards. If neither has the Joker, both are out of the game. If the person accused is indeed the Killer, he has been apprehended and the game is over.

6. If the Killer has not been apprehended by the time there are only 2 people left, the game is over.
APPENDIX B

SELF-IMAGE BUILDING EXERCISES
APPENDIX B

SELF-IMAGE BUILDING EXERCISES

1. "The Red Banana Fish"

The purpose of this exercise is to get to know self better through others. Participants gain feedback about themselves discussing what kinds of color, fruit and animal they would like to be.

Procedure:

1. Divide the group into sub-groups of three or four people.

2. Ask each participant to choose a color that he would most want to become, if he had the chance. (Sometimes it helps to ask participants about their favorite color). Allow a few minutes for reflection and then suggest that they share their respective colors with other members in the group not only identifying the color, but also giving reasons why they chose it.

3. Now ask the participants to choose what fruit they would like to be. Again, give some time for reflection and then suggest that they discuss with the other members in the group the reasons for their choices.

4. Finally, ask the participants to select what animal they would like to be. Have the participants again explain their choices to members of their small group.

5. This experience may be expanded to include countries, furniture, vegetables, cities, clothing, etc.

Probable Outcomes:

A person's choice of color, fruit and animal tells something about him. It also gives him an opportunity to talk about himself to other people. Frequently, in these discussions there is a considerable amount of humor and spontaneity. If a group has some history together, they may give "feedback" about a person's responses. This gives each group member a chance to hear how others perceive him.
2. "Who Am I?"

The purpose of this exercise is to get to know self through self-description. Nine slips of paper tell reader who he is. He learns which traits he cherishes most and which he wants to get rid of.

Procedure:

1. Take a sheet of paper. Fold it into three parts. Open the paper and tear along the creases made by folding. You should now have nine pieces of paper.

2. Consider what roles you play and what you consider to be your personality traits. Some examples of roles are: father, husband, teacher, truck driver. How do you see yourself? That is, what do you feel to be your personality characteristics? For instance, some words which might come to mind are: helper, lover, angry, peaceful, afraid.

3. Now ask yourself the question - "Who Am I?" Respond by whatever words come to mind. Each word or response that comes to mind should be placed on one of the nine pieces of paper. Usually, the closer the words are to your personality traits, the more effective the experience will be.

4. After you have written one word on each piece of paper, arrange the papers in their order of importance. Place the least important on top, and the most important on the bottom, and arrange them accordingly.

5. Remove these traits or roles individually one by one, very slowly, to give yourself time to think about what it would be like without each one. It's similar to removing the layers from an onion, until we get down to the core, or like removing the rings from the bark of a tree. The idea is to gradually strip yourself of your roles and traits and to enter into yourself.

6. After all the traits or roles have been removed, pick the one you value the most. Then pick the one you value the second most and the one you value the third most. Then select one you wish to get rid of. Select two, three, or more of the ones you wish to get rid of, tear them up and THROW THEM AWAY.
7. Arrange or organize the papers in their order of importance once again. Have you arranged the papers differently this time from the way you did the first time?

Probable Outcome:

Depending on how well you imagine yourself dispossessed of certain characteristics, you may feel rather naked as you gradually enter within yourself. It can be a very uneasy feeling.

3. "Personal Growth Charts"

The purpose of this exercise is to examine one's own strengths and needs. How we are perceived by others has a great influence on our own self-image. Too often students are given feedback on themselves in a hit-and-run manner, with little chance for discussing this feedback, and with little understanding of the reasons for it. This exercise attempts to create a more open atmosphere for discussing a person's strengths and needs.

Procedure:

1. Each participant will write his name on a sheet of newsprint. He then divides the sheet in half by drawing a line down the middle. One side of the sheet is labeled "... Things I appreciate," the other side... "Areas to Grow." These sheets are hung on a wall.

2. Each participant then writes in comments in the appropriate area on all the other participants' sheets, excluding his own.

3. When everyone has completed writing in comments on all the sheets, the participants then collect their respective sheets and discuss the comments made on them.

4. "Learning Climate"

The purpose of this exercise is to examine some of the dimensions mentioned above to determine their effect on the group you are in.

Learning about self, others, and groups is facilitated when a climate is created in which members feel free to be themselves. This means that members are most valuable when they are able to be themselves; they can give most when they are most themselves, and they can give least when they are boxed in a role.
The extent to which people seem free to be themselves appears to be highly correlated with the trust level existing in a group. When the trust level is low, people tend to be defensive, to adopt manipulative strategies, and to withhold information about themselves. When the trust level is high, defensiveness is reduced, information flow is increased, and manipulative strategies tend to disappear.

Creating a high trust level seems to be facilitated when there is an increase of awareness, self acceptance, acceptance of others, and of problem-centering.

Procedure:

1. Read the definitions given.

2. Complete the rankings called for.

3. When everyone has finished, compare rankings.

4. As a group, place one person in each of the dimensions listed.

5. Discuss and record what might be done to increase the trust level in the group.

Definitions:

A person may be said to be:

1. **Aware**, when outward behavior reflects inner feelings and thoughts; when there is an explicit recognition of how ones feelings are influencing behavior; when he recognizes and responds to feelings being experienced. Awareness may be marked by statements such as: "I don't know what to do if we don't have a topic," instead of "We're just foundering without something we can get our teeth into," or "I'm not sure I want to say how I feel about you," instead of "I don't think we ought to get personal."

2. **Self-accepting**, when he is able to accept his own feelings without denying them or giving rationalizations for them, or apologizing for them. Self-acceptance may be evidenced by statements such as, "I'm bored with what you are saying," instead of "This is a boring topic," or "I'm angry at myself for being ineffective," instead of "This group is not getting anywhere."
3. **Accepting of others**, when he is able to receive the feelings and thoughts of others without trying to change them; when he is able to let others be themselves even though their mode of being is different than his. May be evidenced by listening to try to understand; listening without trying to refute; not trying to argue down; asking questions to insure understanding of what the other is experiencing; or not sitting in judgment on the other side.

4. **Supportive**, when he seeks ways to help others reach goals that are important to them; when he tried to understand what others want to do although he may not agree with their conclusions; or when he encourages others to try behavior which may be new to them. May be seen in statements such as, "Could you tell me how I might help you reach your objective," or "I am not sure I agree with what you are proposing, but I support your effort to get something going," or "Let me see if I understand what you want us to do."

5. **Risk taking**, when he goes beyond the known; when he experiments with new behavior; when he wants to accomplish something or to support someone else more then he wants to play it safe or keep it cool; when he is willing to risk being angry, anxious, caring, driving, or retreating, even though these may make him appear foolish or arouse anxiety on his part, or make him appear inept or unintelligent. May take the form of asking for feedback on behavior, when this has not been done before, or supporting someone when it is not clear what the consequences of supporting will be, or giving feedback to others on the feelings their behavior has evoked.

6. **Problem-centering**, when he focuses on problems facing a group rather than on control or method; when he tries to learn by solving problems rather than by getting someone else's solutions. May be seen in efforts made to try to find out what is blocking a group, or in efforts to go beyond symptoms. Problem-centering rests on the assumption that more work gets done when individuals and groups learn how to solve problems, than by maintaining a certain control pattern, a certain methodological pattern, a certain leadership pattern, or a certain feedback pattern.

7. ** Levelling**, when he is able to be free and open about his feelings and thoughts; when his behavior outwardly is congruent with what he is experiencing inwardly.
Second Step:

In the spaces provided below, put in the names of one or two persons who most display in the group the kind of behavior described in the definitions.

<table>
<thead>
<tr>
<th></th>
<th>Your Nomination</th>
<th>Group Nomination</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Awareness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Self-acceptance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Acceptance of others</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Supportive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Risk taking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Problem-centering</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Levelling</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Third Step:

After everyone has finished with their individual nominations announce these and share the data on which the nominations were based. Then, as a group, place one name in each of the spaces provided. Try to teach a consensus in the group nomination, that is, try not to reach agreement by majority vote. Discuss the behavior until there is some agreement.

Fourth Step:

Discuss and record below what can be done to increase the trust level in the group. Please turn in the completed exercise as you leave.
5. "First Impressions"

The purpose of this exercise is to obtain feedback on first impressions and to elicit feelings about one's wishes for inter-personal relationships.

Procedure:

The following three questions are presented to the group. Each person answers the questions on a sheet of paper and then volunteers are called upon for discussion of what they have written. The questions are:

1. How do people see me when they first meet me?
2. How do people see me when they've known me for a time?
3. How would I like people to see me?
APPENDIX C

VALUES CLARIFICATION EXERCISES
APPENDIX C

VALUES CLARIFICATION EXERCISES

1. "Forced Choice Game"

The purpose of this exercise is two-fold: to get members of group interacting, and to give some thought to reasons for each person's choice. In this game, people are forced to make a choice which is then explained to a second person who has made the same choice.

Procedure:

1. A large sheet of newsprint is divided into two sections. It is then tacked to the wall. On each side of paper, one lists contrasting choices. The paper might look like this:

<table>
<thead>
<tr>
<th>1. McDonald's</th>
<th>1. Gourmet</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Non-shaver</td>
<td>2. Shaver</td>
</tr>
<tr>
<td>3. Waiting for</td>
<td>3. Thin Ice</td>
</tr>
<tr>
<td>thick ice.</td>
<td></td>
</tr>
<tr>
<td>4. Joiner</td>
<td>4. Loner</td>
</tr>
<tr>
<td>5. Picker</td>
<td>5. Pickee</td>
</tr>
</tbody>
</table>

2. After each category is placed on sheet of paper, members of group make a choice. All those choosing one category move to one side of the room. They then choose a partner from same side of room to whom they explain their choice. Same procedure is used for second, third choice, etc.

3. Other suggestions for choices are Honda-Corvette, Hamburg-Steak, River-Ocean, Speaker-Listener.

4. Group leader may choose other categories which relate to special interests of group involved.

5. In this exercise it is possible to place oneself in the exact middle, i.e., on the fence. An explanation of this choice is also given.
2. "Partner-Risk"

The purpose of this exercise is to increase interaction within the group and to increase ability of members of group to communicate their feelings.

Procedure:

1. Group forms triads. Each member of triad discusses with two others his feelings about three topics, which can be:
   1. High point of yesterday.
   2. High point of previous school year.
   3. Last time I cried.

2. Other topics which are particularly meaningful for group may be chosen by students.

3. "Personal Journal"

The purpose of this exercise is to learn how to keep a record of one's feelings. This is a personal record of feelings which have been protected until this point. This is a good exercise to combine with previous exercise. Hidden Feelings in Triad Interaction may be Journal Entry.

4. "Beliefs or Values"

The purpose of this exercise is to examine one's values or beliefs. In this exercise, students are asked to think about their own values or beliefs which they maintain, or act upon. Emphasis is placed upon concrete values, and/or actions which meet certain criteria.

Procedure:

There are 14 categories, derived from the seven value criteria. With a little imagination, these categories can be expanded. Students are asked to write down two items in each that correspond to:

1. a belief that the student holds freely.
2. an action that he made freely.
3. a belief chosen from several alternatives.
4. an action made after considering alternatives.

5. a belief in which a great deal of consideration was given to the pros and cons.

6. an action whose consequences were seriously considered.

7. a belief which he holds that he's proud of.

8. an action he has taken of which he's proud.

9. a belief that he publicly affirmed.

10. an action taken to uphold a particular value.

11. a choice which the student made upon which he took some action.

12. a belief which he acted upon.

13. a belief which he values and upon which he acts often and consistently.

14. an action which he values and takes pride in, and which he performs consistently when given the opportunity.

Discussions about these can include such strategies as "I learned" statements, or "I discovered" statements.

5. "Theory of Values"

The purpose of this exercise is to examine the strength of one's value commitment.

Procedure:

1. Values are consistent.

2. Most important is the process of choosing values.
1. Choices are prized and cherished.
2. Publicly affirmed.
3. Chosen from alternatives.
4. Thought given to consideration of consequences.
5. Choices are made freely.
6. Choices are acted upon.
7. Acted upon with a pattern, repetition and consistency.

6. "Focus Game"

The purpose of this exercise is to develop listening technique so that one really hears and understands what another is saying.

Procedure:

Form into small discussion groups which must obey the following rules:

1. Rule of Focusing - one participant becomes the focus of all other group members.

2. Rule of Understanding - all other members of discussion group try to hear and empathize with focus person without making judgments.

3. Rule of Accepting - acceptance of difference of values.

7. "Value-Indicators"

The purpose of this exercise is to examine how one's values are indicated.

Procedure:

Most important: value-indicators meet less than seven criteria of the valuing process.

Examples: attitudes, beliefs, morals, feelings, goals, activities, interests, aspirations.
8. "Forced-Choice Leader"

The purpose of this exercise is to elicit or clarify values of participating members by setting up a scaling system.

Procedure:

1. Have each member of group draw a ladder of ten steps in the following manner. Each step is numbered.

   10
   9  Intense
   8
   7
   6
   5
   4
   3
   2
   1  Bland

2. The left hand step is the most bland listing (pro or con) and the right hand step the most intense (pro or con).

3. Facilitator writes descriptions of ten people who behave in manner inconsistent with their values. Participant places each story on proper step level.

4. After ladder is completed, persons who have chosen number 1 step for story 1, form in groups and choice is discussed by whole group. Those who have chosen step 2 for story 2, form in groups and discuss reasons for their choice, etc.
9. "Bread and Butter"

These strategies are simple introductions to the process of values clarification.

A. "Value-Voting"

The purpose of this exercise is to bring into the open values which have been hidden or left unclear. It also brings to the fore a feeling of community to those who find that they are not alone in stating preference. Value voting should start with everyday things and progress to more important issues.

Procedure:

1. One may vote in following ways by:
   1. Raising hand and waving vigorously for enthusiastic response.
   2. Merely raising hand for yes response.
   3. Thumb down for no response.
   4. Thumb down and turning hand simultaneously for completely negative response.
   5. Arms crossed means student wished to pass and not answer question.

2. Questions suitable for value voting are:
   1. Marijuana should be legalized.
   2. New York Times should have printed Pentagon papers.
   3. Teachers should be allowed to physically punish students.
   4. Students should have equal voice in determining curriculum.

   (It is appropriate for class to choose questions in which they are interested.)

B. "Rank-Ordering"

The purpose of this exercise is further clarification of values. It aids person making choice to weigh the alternatives to his decision. Clarifying and justifying choices builds the student's confidence in his values.
Procedure:

1. Three concepts are placed on blackboard. They are then rated 1-2-3 by student who gives reason for his choice.

2. Topics suitable for rank ordering are: How would you rate, (a) traditional marking system, (b) pass-fail system, (c) curve.

   1. love more than loved.
   2. be loved more than you love.
   3. equal love, but slightly dull.

   1. no compulsory education.
   2. compulsory education to age 13.
   3. compulsory education to age 16.

C. "Continuum"

The purpose of this exercise is to share values in a non-threatening manner. It serves to further group solidarity by comparing values of peers.

Procedure:

Teacher presents a visual continuum on which each student is permitted to mark his own place.

<table>
<thead>
<tr>
<th>Seatbelt</th>
<th>Scissors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sam</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The choice is for a values in using seat belts.

10. "Twenty Things I Like To Do"

The purpose of this exercise is to clarify certain values that we hold; that is, under what conditions we practice them; where they come from, etc., who influenced these values.

Procedure:

Make a list of 20 activities; rank the five we like the most; code them;
A - things we do alone.
P - things we do with others.
AP - either, or both.
$ - things that cost more than $5.
I - things that require an interpersonal intimacy.
PA - things about which we would not have appeared on the list
      of 5 years ago.
F or M - things which correspond to the values of my father or mother.
Date - on which we performed each activity last.

11. "Outline of the Value-Clarifying Process"

The purpose of this exercise is to allow one to express and share his/her
values without judgment.

Procedure:

1. Elicit the values from students.
2. Accept these values without judgment.
3. Push-clarify (an example of this would be the "20 things I like
to do" strategy).
4. Accept - not only the students' values, but the reasons for his
   choice - without criticism.

12. "I Learned Statements"

The purpose of this exercise is to conclude the "20 things" game with a
sharing of new thoughts or feelings about the process of clarifying one's
values.

Procedure:

Volunteers are asked to make short statements, beginning with
various phrases, such as:

I learned that...
I discovered that...
I relearned that...
I was surprised that... (pleased that)... (displeased that)... I noticed that...
13. "I Urge Telegram"

The purpose of this exercise is to publicly affirm values. A message sent to anyone in the world, urging that person do something.

Procedure:

Have each participant write a telegram beginning with phrase, "I urge." Student may or may not read telegram to class.

14. "Areas of Confusion and Conflict"

The purpose of this exercise is to look when values should be appreciated and accepted.

Procedure:

Value education especially suitable when dealing with such controversial areas as:

- Politics
- Religion
- Work-school
- Leisure
- Health
- Money
- Family
- Friends
- Personal tastes
- Aging
- Death
- Love-sex

Can you think of other areas where values should be shared?

15. "Privacy Blocks"

The purpose of this exercise is to make one aware of the different levels of communications one shares with others.

Procedure:

Four concentric circles are drawn. The innermost is the self, followed by those labeled, "intimates," "friends," "acquaintances," and finally, "strangers" outside the circles. Participant is then asked to write two or three things shared with those persons who can be categorized in these circles.

The circle which each participant draws will look like this: (see page 145).
STRANGERS

ACQUAINTANCES

FRIENDS

INTIMATES

SELF
16. "Fallout Shelter Game"

The purpose of this exercise is to elicit values of individuals and of the group.

**Procedure:**

Group of six people chosen to perpetuate the race upon notification of impending holocaust. They must then choose 6 from a group of ten to join them in fall-out shelter. Each participant chooses six, then group is chosen by consensus. Discussion of choice is then held by groups. The following questions may be considered in discussion:

1. how well did you listen?
2. how did group handle conflict?
3. what did this tell you about my values?
4. what values or value-indicators did you seem to be protecting in your choice?

The people from whom the 6 are chosen may be:

1. pregnant H.S. dropout of dubious I.Q.
2. ex-policeman, 28 years of age known for his brutality.
3. 19-year old black militant with no work skills.
4. female medical doctor, age 37, noted as a racist.
5. 75-year old Rabbi.
6. law student, 26 years of age, male, married.
7. his wife, 26 years of age, with record of 2 stays in mental hospital. This couple will not go without each other.
8. violinist, 45 years of age, with a record of narcotics addiction.
9. architect, 32 years of age, avante garde, record of buildings being non-functional.
10. ex-prostitute, 38 years of age, living on her annuity.

(Other examples may be chosen which closely relate to students' personal experiences.)
17. "Three Characters"

The purpose of this exercise is to see how one views oneself in terms of other historical or famous people, or people from literature.

Procedure:

Trios are formed; participants are asked to discuss, after some thought, characters chosen by individual that...

1. are most like me.
2. I would most like to be like.
3. I would least like to be like.

18. "I wonder"

The purpose of this exercise is to give participants an opportunity to bring into open any questions from an area of confusion and conflict.

Procedure:

Statement made by volunteer who begins his statement with "I wonder." Opportunity to speak (without being judged) is given to anyone wishing to do so.

19. "Proud Whip"

The purpose of this exercise is to have people share certain things about themselves, or what they've done, that they're proud of.

Procedure:

The teacher, preferably as part of course content on "self-image," asks students to share what they're proud of. One row of students might be chosen, and each must share this one aspect with the others in the class.

20. "Public Interview"

The purpose of this exercise is to get to know each other better through the medium of an interview. The classroom is used as a forum for people to talk to, and understand each other a little better, in interview fashion.
Procedure:

One area is chosen, by the person interviewed, from the list of "areas of confusion and conflict." Five or ten minutes of the period are set aside for the interview, which the teacher begins by requesting a volunteer. Once the interview topic is chosen, the teacher begins to question the student about his thoughts, feelings, and values in this area, at times pointing out some discrepancies between beliefs and behavior in a non-threatening manner. When the teacher has completed his questioning, the student can then question the teacher in a similar fashion.

21. "Coat of Arms"

The purpose of this exercise is to provide a pictorial expression of values, hopes, aspirations, etc.

Procedure:

Draw figure to form outline of a coat of arms, and divide it into six separate parts. These sections will contain, respectively, in picture form:

1. two things I do very well.
2. my psychological home.
3. the proudest moment of my life.
4. the three most influential people in my life.
5. where I would be now if I had one year to live.
6. three words that I would want written as my epitaph.

These drawings can then be hung on the wall in the classroom if students desire it. Sometime can be allowed for viewing and comparing Coat of Arms.

22. "Who Comes to My House"

The purpose of this exercise is to begin to get in touch with the feelings we have toward people with whom we are well acquainted, very friendly, or related.

Procedure:

Make two lists - the first of people that have eaten at your house; the second of those at whose house you have eaten, both within the
last year. Classify them using the following coding system:

- F - friends
- R - relatives
- O - others
- J - people who have related racial or ethnic jokes in your home.
- P - people who bring presents, or to whom you bring presents when visiting.
- M - people whose manners you disapprove of.
- N - people who are well liked and received by you.
- O - people not well liked or received.
- P - don't know if they're well liked.

23. "Spread of Opinion"

The purpose of this exercise is to illustrate the wide range of stances possible on most controversial issues.

Procedure:

Group of six; must choose to write about one particular position on the issue.

Ex-marriage - communal living; legal contract; spiritual union, etc. The group then makes public the six positions chosen, by hanging them in the classroom. This can be followed up by discussions on the issues and opinions generated.

24. "Fantasies"

The purpose of this exercise is to elicit values by introducing situations outside a student's normal life style, i.e., fantasies.

Procedure:

One procedure that can be used in the classroom, relevant to certain courses or units is the following: students can be asked to write about, or discuss in small groups, various possibilities.

1. Run for your life (You have a year to live, what would you do? Where would you go? Who would you spend your time with?)
2. Superman (You have super-powers; how would you use them? Would you do good and fight evil?)

3. The Fugitive (You are wanted by the police for a crime you didn't commit. How would you solve this problem?)

4. Win the lottery (You won the Million Dollar lottery. How would you use the money?)

5. Leader of the U. N. (You have been elected to head the U. N. What causes would you fight for? What would you do with your authority?)

6. The Millionaire (You have several millions to give away, 1 million at a time. Which people would you give the money to. What criteria do you use?)

7. Fairy Godmother (You have a Fairy Godmother al la Cinderella. What would you want her to do for you? What changes in your life would you want her to make? Can you do this yourself?)

8. Alladin's Lamp (What 3 wishes would you want fulfilled?)

25. "Feeling/Thought Sheet"

The purpose of this exercise is to reconcile one's simultaneous thoughts and feelings.

Procedure:

Participant describes his feelings on one side of sheet, and thoughts on the other side. Papers may then be read back anonymously. These can provide valuable feedback to teachers.

26. "Weekly Reaction Sheet"

The purpose of this exercise is that the teacher may ask students to keep weekly records of their feelings and reactions to their learning processes and experiences.
Procedure:

Usually no discussion, as they are expressions of the students' personal feelings.

At the end of the week, the teacher may pose several questions to the students, usually concerning value choices they made during the week. These can be used in several ways: the teacher may simply read them and talk privately with students that might need help; sample answers may be mimeographed or read aloud followed by discussion; or students may compare answers and talk with other students about their responses and values.

27. "Opposite Quadrangle"

The purpose of this exercise is to again be in touch without likes and dislikes, and the reasons for these choices.

Procedure:

Divide a sheet of paper into quadrangles, and in sequence write:

1. 5 people I love to be with.
2. 5 places I hate to go to.
3. 5 places I love to go to.
4. 5 people I don't like to be with.

These classifications can be altered, such as, things I like to learn; don't like to learn, etc. The object is to set up opposites in the quadrangles.

28. "Interview Chain"

The purpose of this exercise is to become acquainted with people in a structured, game-like fashion.

Procedure:

Groups of six; one person begins by asking three questions of any other person. Latter may then ask three questions of someone else, etc. Emphasis should be on person's values and feelings, not on his functions (i.e., his job). In essence, what the person is, as opposed to what he does.
29. "Scale of Feelings"

The purpose of this exercise is to use with #31, or any similar group exercise, to gauge one's feelings on an intensity scale, ranging from low to high.

Procedure:

Each person from group draws a personal scale, to measure the qualities of the other people in the group. He then places somewhere on the scale the following coded items:

L - how well others listened.
C - how much they cared.
I - how involved others were.
V - how well others helped in the search for values.
Q - the quality of the questions.

Other qualities may be added, either for oneself, or for the others. Ex: exciting questions; did people gain my confidence?; did questions help gain insight?

30. "Alternative Search"

The purpose of this exercise is to brainstorm ideas for classroom discussion - procedures; rules; methods of grading, etc.

Procedure:

Group chooses topic such as classroom activities, ideas are then brainstormed and listed. Three columns are drawn adjacent to the list and labeled:

1. things I would use
2. things I'll consider
3. things I wouldn't use

31. "Here and Now Wheel"

The purpose of this exercise is to get in touch with feelings in the present, expressing them both in a written and verbal manner.
Procedure:

1. Draw a circle and divide it into four equal parts so that it appears to have four spokes.

2. In each sector write a word that best describes one feeling that is being experienced in the present time, e.g., anger, frustration, anxiety, etc. Try to get in touch with four different kinds of feelings.

3. Expand these into statements which more accurately describe the feeling, i.e., "I feel nervous because..." Do this for each feeling, writing one or more sentences describing it.

4. Have students read some of these statements, or trade wheels so that they can discuss and compare feelings and thoughts. Discuss whether there is any discrepancy between how a person says he feels, and how he actually appears to others. (e.g., If he says he feels calm, but appears to be nervous.)

32. "Quote Without Comment"

The purpose of this exercise is to involve students to a greater degree in activities of the classroom, as well as to make public affirmations of their beliefs.

Procedure:

Student can make a statement, or read a quote of his own choosing, without response to this statement, unless specified. The student reading or making the statement should do so having in mind the values or beliefs which are expressed in the statement.

33. "Alligator River"

The purpose of this exercise is to introduce students to the notion of a hierarchy of values based on the behavior of the characters involved. In a discussion, it is also well to point out that the dynamics of ranking these characters is something that occurs often in everyone's life.
Procedure:

Read or paraphrase the story.

The story elements: The five characters are Abigail; her lover, Gregory; Sinbad the Sailor; Ivan and Slug. Abigail is on one side of Alligator River, with no way of crossing; Gregory is on the other. Abigail meets Sinbad; he offers to transport her across the river for certain of her favors; she refuses at first. She then meets Ivan to whom she tells her story. He refuses to get involved, or help her. He also knows that Sinbad has venereal disease, but again does not tell Abigail because of his apathy. Frustrated, Abigail agrees to Sinbad's offer, so he helps her across. Upon meeting Gregory, she tells him the story, and he is shocked. He calls her an evil woman, and refuses to be her boyfriend any longer. Abigail, again saddened, thereupon encounters Slug who consoles her. He is enraged by Greg's behavior, searches for him, and brutally beats him. Abigail becomes enchanted by Slug's concern for her.

These characters must be ranked in order of the least reprehensible to the most reprehensible. Content may be revised to suit grade level.

34. "Killer Questions"

The purpose of this exercise is to examine one's style of asking questions.

Procedure:

Questions that neither clarify another's position nor help gain an understanding of another:

1. Wouldn't you say that. . . ?
2. Don't you see that. . . ?
3. You don't really believe that. . . ?
4. Can't you see that. . . ?

Other Killer Questions can be discovered by the students. These can be brought out in a discussion and alluded to by the teacher. Or, students can try to argue using them, with a discussion about how these influence the argument.
35. "Counseling-Free Choice Game"

The purpose of this exercise is to aid in decision-making and counseling.

Procedure:

The following steps:

1. Understand - i.e., know the issues.
2. Clarify - ask if there are other thoughts and feelings about the issues.
3. Explore the alternatives - seeking those that have been considered, and exploring for others.
4. Explore the consequences - both pro and con aspects.
5. Deciding - considering the next steps.

Note: focus is not on a problem or personality, but rather a choice.

36. "Skills Biography"

The purpose of this exercise is to gain an appreciation of self.

Procedure:

Choose some particular skill you have (dancing, riding a bike, etc.) and write about it.

Where did you learn it?
When?
Did anyone help you?

37. "Metaphors"

The purpose of this exercise is to gain an appreciation of self.

Procedure:

Choose an object, institution, idea, etc., and construct a metaphor about it and yourself.
Ex. If I was a car, I'd be a (Volks, Ford, Chevrolet, Mercedes).

Note: This is used to:
1. Elicit information about the person.
2. Determine what meaning this metaphor has for him.
3. Discover what values are being upheld.

38. "First Experiences"

The purpose of this exercise is to get to know self in more detail.

Procedure:

Write in an autobiography some first experiences you've had. i.e.,
first car, plane ride, pay check, kiss, vote, death in the family,
time resisting conformity.

39. "Inventory"

The purpose of this exercise is to examine the value of one's material possessions.

Procedure:

Make an inventory of some personal possessions and try to determine why they are maintained.

Suggestions:
Clothes: What clothes do you have in your closet, and why did you buy them?
Medicine Cabinet: Name brands and others.
Unanswered Mail: Why haven't these letters been answered?
Cancelled Checks: What did you buy with them?
Scrapbook: What are the experiences there you wish to remember?

40. "I Appreciate"

The purpose of this exercise is to call forth statements from members of the group which clarify positive feelings.

Procedure:

Volunteers are asked to make short statements beginning with the phrase, "I appreciate. . ."
APPENDIX D

PROBLEM SENSING AND PROBLEM SOLVING EXERCISES
APPENDIX D

PROBLEM SENSING AND PROBLEM SOLVING EXERCISES

1. "Make It or Break It"

The purpose of this exercise is to discover the difference between reacting and pro-acting. Group organizes for survival on deserted island, discovers difference between reacting and pro-acting.

Procedure:

1. Tell the group: "You were on a ship and it sank. Either by floating or swimming this group has landed on an island. The island is a 'healthy one' and can sustain life. Your task as a group is to organize yourselves for survival."

2. For intergroup learning between teachers and children, parents and teachers, etc., it is best to form two island groups. Send each to a separate area so that they are alone on the island. Then, after an hour or so, select a member from one island group and show him that there is another group on the island besides his party. The next move is up to him.

2. "Force-Field Analysis"

The purpose of this exercise is to move from thought to action. Reader analyzes problem into "pushing" forces and "restraining" forces; moves from thought to action.

Procedure:

1. Using diagram on the next page, state a problem. Think of what it would be like if the problem were solved or didn't exist. List those forces from inside and outside of you which push you toward solving the problem. List those forces which hold you back.

2. Select one of the restraining forces and "brainstorm" the way you might lessen it. Do this with other restraining forces.

3. Select one of the pushing forces and "brainstorm" how you might further increase it. Do this with other pushing forces.
4. Make a contract with yourself to DO something. Move from thinking about solving the problem to some ACTION strategy. Plan to ACT. Resolve to DO something.

**PSYCHO-SOCIAL LEARNING EXPERIENCE**

**Force-Field Analysis**

**Statement of the Problem:**

<table>
<thead>
<tr>
<th>Pushing Forces</th>
<th>Restraining Forces</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. **"I Have A Problem"**

The purpose of this exercise is to develop skills in problem definition.

**Procedure:**

Interrogator asks for personal problem to be defined and redefined. Respondent's problem changes from "Back to Nature" to "Attitude Reform."

**PLEASE STATE YOUR PROBLEM.**

My problem is to find the freedom to escape from the human rat race, the everyday world and business problems, city problems, pollution, etc. How to escape the whole mess. Do you know what I mean?
COULD YOU STATE THE PROBLEM DIFFERENTLY?

Yeah. (long pause)

CAN YOU THINK OF ANOTHER WAY TO STATE THE PROBLEM?

You're trying to pull it out of me.

COULD YOU STATE IT MORE SPECIFICALLY?

Well, material things hold me down. Things such as the car and the furniture.

SO NOW WHAT'S THE PROBLEM?

How can I break away from material, physical things?

IS THAT THE PROBLEM?

Yes, I think so. My problem is that I want to get away.

SO WHAT'S THE PROBLEM?

(Laughter)

What's the problem! The problem is being able to break away from all the luxuries. Getting back to basics. Having the strength to do it. If this is really what I want, then I should be able to do it.

CAN YOU STATE THE PROBLEM IN A SIMPLE STATEMENT?

No, I don't think I can. Well, okay, simple statement. Let's see. The problem is I'm unhappy in being in today's rat race, the rat race of life. I would be content to break away and leave everything behind. Period. But how do I do it is the next question.

TRY TO STATE THE PROBLEM AGAIN.

How can I give up what we have worked hard for, but are unhappy with, to live off the land in nature?

IS THAT THE PROBLEM?

Another way to state it is that maybe I need to look at things differently. Maybe I need to learn how to accept things and not be so negative.
HOW WOULD YOU STATE THE PROBLEM NOW?

How can I change my attitude?

NOW LET'S PHRASE THE PROBLEM IN A WAY THAT'S MOST COMFORTABLE, RIGHT, AND CAPABLE OF SOLVING.

How can I change my viewpoint? How can I see the good and accept what I have while, at the same time, moving away from the material and toward the natural?

Some experts claim that when a problem is clearly stated and understood, it is fifty percent or more solved. The above dialogue allowed an individual to explore a problem and see it in a new light.

What is not conveyed in the dialogue is the tone, the manner, the non-verbal gestures and communication that goes on between the interviewee or problem-sender and the interrogator or problem-reflector. How the reflector states his questions (IS THAT THE PROBLEM? ARE YOU SURE THAT'S THE PROBLEM?) in no small way determines the effectiveness of this procedure.

4. 'Will I or Won't I?'

The purpose of this exercise is to illustrate a student's resistance or acquiescence to peer pressure.

Procedure:

1. A student is sent from the room on an errand.

2. The remainder of the class views a poster on which there are two lines which look like this:

   A. __________________________

   B. __________________________

3. The class decides which line is longer and then agrees to insist that they think the longer line is actually line (B).

4. When the absent student returns, the teacher introduces an exercise in "Visual Perception." The students who are "in"
on the game, give the wrong answer when asked which line is longer, seeing if the absent student will go along.

5. The exercise may also be used in the following manner:
Which line is the same length as line D?

A. _______________________
B. _______________________
C. _______________________
D. _______________________

*Model Cities Drug Abuse Education Staff,

Health Curriculum Guide in Mental and Social Health: Fall River School, Massachusetts; Fall River School Department, 1971.
ACTION PLAN FLOW CHART

Phase II
Organization Procedure

Phase III
Program Plan

Phase IV
Follow-Up

Phase V Re-cycle

Select Alternative

How

Alternative #1

Alternative #2

Alternative #3

List Expected Accomplishments (objectives)

Select Problem

Prioritize Problems

Identify Backbone Problems

Identify Problems
TASK DELINEATION CHART

<table>
<thead>
<tr>
<th>What has to be done to achieve goal?</th>
<th>Prioritize Tasks</th>
<th>What is needed?</th>
<th>How will it happen?</th>
<th>Where will it happen?</th>
<th>When will it happen?</th>
<th>Who is responsible?</th>
<th>How will feedback occur?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Used with Phase II, III, IV of Action Plan Flow Chart
IMPACT OF MASSACHUSETTS LAW CHAPTER 123 ON TREATMENT: DRUG ABUSERS, THE CRIMINAL LAW, AND THE COURT

I. Generally speaking the pertinent sections of the new law entitled: "Treatment and Commitment of Mentally Ill and Mentally Retarded Persons" begins to recognize the need to divert drug abusers from the criminal law system and its sanctions in order to better treat and rehabilitate the "offender."

II. Eligibility

A. Drug addicted persons

(a drug dependent person who, due to the use of a dependency related drug has developed a tolerance thereto such that abrupt termination of the use thereof, produces or would produce withdrawal symptoms.)

B. Drug Dependent persons

1. (A person who is unable to function effectively because of the use of a dependency related drug) or

2. (A person who is unable to function effectively resulting in the use of or which causes him/her to use a dependency related drug.)

C. Diversion is voluntary - written consent, i.e., request by the defendant is necessary.

III. Drug Offense Only (where defendant is charged only with drug violation)

A. Court must notify defendant of his/her right to drug exam.

B. If exam requested then proceedings are stayed.
C. Examiner

1. Court appointed or
2. Qualified physician or psychiatrist

D. Report to Court and findings that:

1. Drug addicted or
2. Drug dependent
3. Would benefit by treatment

E. Right to hearing if not found drug addicted or dependent

F. Court must grant request for commitment

G. Order of commitment must be to Division (Mental Health)*

1. If addict, inpatient not to exceed two years
2. If dependent, either inpatient or outpatient not to exceed one year.

H. At end of commitment or upon completion of treatment Division must report to Court.

I. If successful treatment the Court must dismiss criminal proceedings.

*There is one possible alternative the Courts have made use of where there are no adequate facilities available in the Division, i.e., a continuance for a period of time under the supervision of the probation department with involvement in therapy or some acceptable method of counselling.
IV. Drug Offense and an Offense not Involving Drugs

A. Notification same as III-A.

B. Same as III-B. except only until report is received

C. Same as III-C.

D. Same as III-D.

E. Same as III-E.

F. Trial on non-drug offense

1. if not guilty, follow F through I above relative to drug offense.

2. if guilty and finding that drug addicted or dependant
   a. If commitment to a penal institution then Court may order
      treatment for drug problem. The defendant must consent
      to this order in writing.
   b. If probation then condition of probation may be that defendant
      receive treatment.

V. Where there is no offense related to drug violations

A. The defendant must request an exam.

B. Then follow B through F in IV above.

VI. Juvenile offenders - Chapter 123 does not pertain.

I am indebted to Attorney Elliott Zide for this outline and analysis.
Trainee Interview Form  
(All levels except for State Team)

Code #__________
Community__________

Student
Teacher
Counselor
Administrator
Parent__________________
Community Prof.

Date of Interview:__________
Name:__________________________
Profession:_____________________
Level:__________________________
School District:________________

Location of Training:________________

How did you come to participate in the training program?

Selected__________        Had a choice__________
Volunteered__________
Heard about it and wanted to take part__________

What was your reason for taking part in the training program?
Who were the other people involved in the program?

Trainees:

<table>
<thead>
<tr>
<th>Students</th>
<th>Reaction to this combination:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teachers</td>
<td></td>
</tr>
<tr>
<td>Principals</td>
<td></td>
</tr>
<tr>
<td>School Adm.</td>
<td></td>
</tr>
<tr>
<td>Community people</td>
<td></td>
</tr>
<tr>
<td>Parents</td>
<td></td>
</tr>
</tbody>
</table>

Would it have been better if there had been more people from a particular category?  y  n

Why?

Consultants:

<table>
<thead>
<tr>
<th>Doctors</th>
<th>Reaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lawyers</td>
<td></td>
</tr>
<tr>
<td>X-Addicts</td>
<td></td>
</tr>
<tr>
<td>Drug Users</td>
<td></td>
</tr>
<tr>
<td>Police</td>
<td></td>
</tr>
<tr>
<td>School Adm.</td>
<td></td>
</tr>
<tr>
<td>University</td>
<td></td>
</tr>
<tr>
<td>Parents</td>
<td></td>
</tr>
<tr>
<td>Drug Counselors</td>
<td></td>
</tr>
<tr>
<td>Pharmacist</td>
<td></td>
</tr>
<tr>
<td>State Dept. of Ed.</td>
<td></td>
</tr>
<tr>
<td>State Drug Programs</td>
<td></td>
</tr>
</tbody>
</table>

Trainers: Number

Others:
What do you think the trainers wanted you to learn as a participant in the training program.

<table>
<thead>
<tr>
<th>S</th>
<th>F</th>
<th>Why</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What did you learn from the experience?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
</tr>
</tbody>
</table>

What methods were used in the training? Which were the most effective? Why?

<table>
<thead>
<tr>
<th>Lectures question/answer</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Film</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tapes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sensitivity Techniques</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discussion Group</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Have you noticed any changes in yourself as a result of this training? In what way?

<table>
<thead>
<tr>
<th>Family relations:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Husband</td>
<td></td>
</tr>
<tr>
<td>children</td>
<td></td>
</tr>
<tr>
<td>Professional expertise</td>
<td></td>
</tr>
<tr>
<td>Relationship with faculty</td>
<td></td>
</tr>
<tr>
<td>Understanding of own needs</td>
<td></td>
</tr>
<tr>
<td>Understanding of other needs</td>
<td></td>
</tr>
<tr>
<td>Know more about drugs I use and their effects</td>
<td></td>
</tr>
</tbody>
</table>

How did this training effect you professionally?

<table>
<thead>
<tr>
<th>How</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship with students</td>
<td></td>
</tr>
<tr>
<td>Principals</td>
<td></td>
</tr>
<tr>
<td>Developing school policy</td>
<td></td>
</tr>
<tr>
<td>Community programs I can get involved in</td>
<td></td>
</tr>
<tr>
<td>Referral Centers</td>
<td></td>
</tr>
</tbody>
</table>

Did you expect this type of training? y n

What didn't you expect?

What did you expect?
What improvements would you recommend in future programs?

<table>
<thead>
<tr>
<th>Why</th>
<th>What additional resources would be needed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
</tr>
</tbody>
</table>
Trainee as Trainer

Trainer Interview Form

Code # __________________________
Community ______________________

Section A

Where were you trained? __________________________________________________________

When? __________________________

Was it a valuable experience? ______

Knowledge:

Process:

Other:

Was it useful to you in planning your own program? ______

How?

How did you happen to become a trainer?

How would you define your role as trainer?

By whom was your program planned or designed?

<table>
<thead>
<tr>
<th>Me</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Us</td>
<td></td>
</tr>
<tr>
<td>He</td>
<td></td>
</tr>
</tbody>
</table>
Have you any key staff?  

<table>
<thead>
<tr>
<th>Who</th>
<th>Volunteer</th>
<th>Consultants Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Program Design Map**

**Section B**

I. Number of training Programs

<table>
<thead>
<tr>
<th>Date began</th>
<th>Ended</th>
<th>Duration</th>
<th>No. of Trainees</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

II. Major Purposes

<table>
<thead>
<tr>
<th>Who</th>
<th>When</th>
<th>S</th>
<th>F</th>
<th>Why S or F</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Section C

I. How would you improve or change the program design next time?

II. Have you any evidence of the success of the program?

<table>
<thead>
<tr>
<th>Community Response (Active Program)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Structured Follow-up Evaluation Sheets</td>
</tr>
<tr>
<td>Free floating feedback</td>
</tr>
</tbody>
</table>
III. Where are good things happening now? (location)

1. 


2. 


APPENDIX E

CURRENT BIBLIOGRAPHICAL REFERENCES

Socio-Cultural Aspects


Seide, Marilyn, and Eagle, Carol J. "Health care crisis: a cry for help and/or a technique for change?" American Journal of Orthopsychiatry, 42(2): 299-300, April 5-8, 1972.

Epidemiology

"Drug abuse by youths said to be on increase." Medical Tribune and Medical News, 13(9):20, March 1, 1972.

"Fifteen percent in high school said to abuse drugs." Medical Tribune and Medical News, 13(8):10, February 23, 1972.
Psychotherapeutic drugs 'are not over-used in U.S.' Medical News-Tribune, 4(3):2, January 17, 1972.


Law and Public Policy


"Congress moves to curb drug abuse." Lancaster Medicine, 47(7):24, 26, 1972.


"FDA begins inventory of all drugs currently marketed for human use." FDA Papers, 5(9):33, November, 1971.


"International agreement on psychotropics - medical groups urge Senate not to ratify it." Medical Tribune and Medical News, 13(10):1, 22, March 8, 1972.


"Mental health institute finds penalties 'much too severe.'" Medical Tribune and Medical News, 13(10):1, 25, March 8, 1972.
"Minister speaks on drug abuse - extract from Dail debates 9th December, 1971."


**Etiology**


**Treatment and Rehabilitation**


"Drug addiction "hospital." Philadelphia Medicine, 68(5):184, March 5, 1972.

"Drug consultation service: case No. 1." Behavioral Neuropsychiatry, 3(9-10); 18, December, 1971 - January, 1972.


Psychology and Psychological Effects


Public Information


Drug Education


Community Action


Marr, Judith. "Some county societies have drug programs; but they'd like more." Michigan Medicine, 71(5):166, February, 1972.


Pharmacology, Chemistry, and Toxicology


**Behavioral and Physiological Effects**


*Narcotics*


**Stimulants**


"Strokes in young persons tied to drug abuse." Medical Tribune and Medical News, 13(8), February 23, 1972.

**Depressants**


Weiner, Myron; Buterbaugh, Gary G.; and Blake, David A. "Inhibition of hepatic drug metabolism by cyclic 3', 5'-adenosine monophosphate." Research Communications in Chemical Pathology and Pharmacology, 3(2):249-263, March, 1972.

Hallucinogens


**Cannabis and Derivatives**


Other Drugs of Abuse


Literature


Taken from:

DACAS: Drug Abuse Current Awareness System
Volume 1, Number 1, June 3, 1972
National Clearinghouse for Drug Abuse Information
BIBLIOGRAPHY
BIBLIOGRAPHY


Shannely, P. *Whose Child is This?* Unpublished, 1972.


