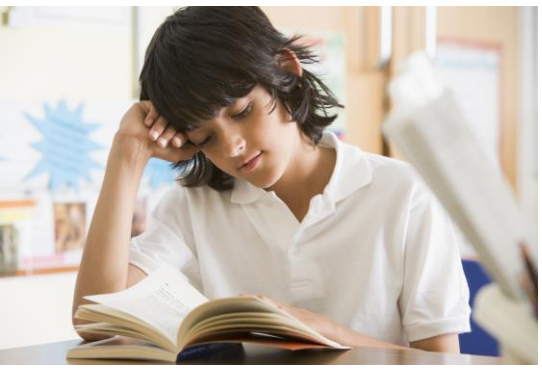

GRADE 6 SAMPLE UNIT

Affirming Personal Standards

Tobacco: Can I Be Healthier?

saskatchewan
preventioninstitute
our goal is healthy children

Acknowledgements

This online resource includes current information about tobacco, related topics, and provides learning activities for Saskatchewan teachers to use in classroom settings.

The Saskatchewan Prevention Institute is pleased to provide access to this sample unit online in efforts to promote further awareness on tobacco prevention.

This unit was developed collaboratively by the Saskatchewan Ministries of Health and Education. Special thanks to all who have contributed, especially Kathy Fowler for initial development.

The key objective of this sample unit is to introduce the health and social issues related to tobacco for youth. Complete with links to other resources, this online unit promotes healthy lifestyles and encourages youth to further explore health behaviours. This resource is designed to be used after outcomes 6.1 and 6.8 in the grade 6 provincial health education curriculum have been addressed.

https://www.edonline.sk.ca/webapps/moe-curriculum-BLEARN/index.jsp?lang=en&XML=health_education_6.xml
Health Education 6 – Saskatchewan Ministry of Education

Use of this Resource

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Table of Contents

Teacher notes 3-4

Tips for talking about tobacco 5

Background Information for the Teacher

Risky and Healthy Behaviours 6
Types of Tobacco Use 7
Tobacco Use Prevention within a Comprehensive School Community Health (CSCH) Framework 8- 9
Primary Health Care 10
Legislation 11
Tobacco Industry 11
Links 12

Learning Activities

Activity Starter 13
Activity 1 14-15
Activity 2 16-17
Activity 3 18-19
Activity 4 20-23
Activity 5 24-25
Activity 6 26-27
Activity 7 28
Activity 8 29-31

Appendices

Appendix A 32-33
Appendix B 34
Appendix C 35
Appendix D 36-37
Appendix E 38

Teacher Notes:

Guiding Principles for Tobacco Education and Prevention

1. Use of commercial tobacco products or exposure to tobacco smoke affects everyone in one way or another, including sectors outside of health. For this reason, effective health promotion is collaborative and uses several strategies, at numerous times, in the places where people live, learn, work, and play.
2. Tobacco misuse is complex. The decision to start or to continue consuming tobacco products has many influences. It is important that all messaging, initiatives, or approaches be respectful, inclusive, and not discriminate or shame those who use tobacco.

3. Health education and health promotion are interdependent. Individuals, organizations, and communities need knowledge, tools, and skills to take action on issues that affect health and well-being. Learning is more effective in an environment that supports making healthy choices.

4. Effective learning allows children and youth to participate in leadership roles in collaboration with school staff, parents, and other community members.

5. Care is needed to differentiate between the traditional/ceremonial use of tobacco and the commercial use of tobacco. Having students learn about ceremony and the role of tobacco in First Nations or Métis traditions will enhance student learning. Engaging Elders in these conversations is important. There is protocol used in asking Elders to work with students. This protocol varies from community to community. Please follow community or school division protocol. For more information on Traditional and Non-Traditional Use of tobacco visit: http://hc-sc.gc.ca/fniah-spnia/substan/tobac-tabac/index-eng.php

6. The development of policies that create environments which encourage and support health and safety is an important component of health promotion/prevention. Policy makers have done substantial work to encourage communities to create environments where it is easier to make healthy choices around tobacco use and to eliminate exposure to environmental tobacco smoke (second-hand smoke) and prevent young people from accessing tobacco products. This includes federal and provincial tobacco legislation, municipal bylaws, and school tobacco policies.

7. The term "replacement smoker" appears in the activities. This term is used within the tobacco industry. According to the World Health Organization the tobacco industry intentionally designs campaigns and products to get new users in replacement of those who quit and the estimated six million people who die each year of tobacco-related diseases worldwide.[1]

8. Understanding that various factors are related to tobacco use and regular smoking among youth. These factors include: social environment, behavioural, intra-personal, socio-demographic, genetic and psychosocial.[2]

9. The messages teachers share with students about tobacco are key to learning and prevention. Whether messages are intended or unintended, they may have consequences on what the students perceive. Making students feel comfortable about talking about tobacco and being honest about health behaviours can help guide student decisions. [3]

For videos on campaigns that address the term replacement smoker visit:
https://youtu.be/UPaS2pbUWY4
The Truth – Replacement Smokers

https://youtu.be/vaCYlHsISHI
Not a Replacement – Tobacco Free Kids

Accessed May 2014 and adapted from:
http://mediasmarts.ca/backgrounder/teaching-about-tobacco-guide-teachers
Teaching about Tobacco: Guide for Teachers

http://tobaccocourse.otru.org/
Tobacco and Public Health: From Theory to Practice

[1] http://www.who.int/mediacentre/factsheets/fs339/en/
World Health Organization - Tobacco Fact Sheet
Accessed April 2015.

[2] http://www.cdc.gov/tobacco/data_statistics/sgr/2012/consumer_booklet/pdfs/consumer.pdf
Report of the Surgeon General: Preventing Tobacco Use Among Youth and Young Adults
Accessed July 2014.

[3] http://www.heartandstroke.on.ca/site/apps/nlnet/content2.aspx?c=pvI3IeNWJwE&b=4147011&ct=6462277
Lift the Smokescreen: Talk to your kids about tobacco
Accessed July 2014

Tips for talking about tobacco:

Try:

- Using language like “making healthy choices”, “youth who smoke”, “health behaviours”, “tobacco misuse”, and language that students can understand about risk taking.
- Providing tips for respectful ways to approach a conversation about tobacco with someone who is currently using tobacco products (e.g. ask “what do you like and what don’t you like about using tobacco?”).
- Encouraging students to focus on immediate consequences such as impaired athletic performance, bad breath, stained teeth, smelly clothes, cost of tobacco products.
- Sharing a “real life” story (yours or someone else’s) to offer experience about quitting or avoiding tobacco.
- Role modeling healthy behaviours.
- Engaging others from the community (health region personnel or health related organizations) in discussions with youth.

Avoid:

- Implying that people are “bad” or “dumb” if they smoke.
- Using the word “habit” when talking about smoking. Tobacco addiction is a chronic, relapsing medical condition.
- Denouncing smoking at home. If the school appears to be intruding into the home-life, families may become alienated from the school’s smoking prevention efforts and the student may become disengaged in conversation.
- Focusing on statements that smoking leads to fatal diseases as these can provoke anxiety in students whose family members smoke. Students respond better to short term effects of products rather than long term consequences.
- Giving mixed messages. If you smoke, don’t hide this from your students. Rather, tell your story and be honest. Tell the students what your personal standards are around tobacco and engage students in a discussion on standards.

Background Information for the Teacher

Risky and Healthy Behaviours

The concept of safety risks is about more than protection from physical injury; it is also about risks to health, including physical, mental, emotional, and spiritual health, as well as risks to social and environmental well-being.

Understanding our values and what's important to us is integral to decision making and fostering healthy behaviours. Personal standards define the expectations we have for ourselves and others. The decisions we make are a reflection of our personal standards. In grade 6, students inquire about a variety of health opportunities and challenges through the perspective of "affirming personal standards".

This resource requires students to explore tobacco as it relates to students' personal standards and to health promotion efforts by governments and organizations.

Students will also analyze the marketing and promotional strategies that influence personal standards and related behaviours. Emphasis is placed on affirming personal standards while considering Canadian and Saskatchewan legislation, the impact of advertising/marketing, and the influences of role models.

There are many factors that influence the decisions that children and youth make. While parents, peers, and the media have a large impact, there are indications that advertising and marketing also have a significant effect on expectations, attitudes, and creating an environment where it is difficult to make healthy choices. Children and youth have become an important demographic of consumers for many products including food, beverages, electronics, and clothing.

Types of Tobacco Use

It is important for all students to understand the difference between the use of commercial tobacco products and the traditional use of tobacco in First Nations and Métis communities.

Traditional/Ceremonial Use

Historically, First Nations and Métis people grew and harvested their own tobacco that was designed for ceremony and did not contain additional chemicals. Tobacco is placed onto Mother Earth in a quiet place where no one walks as acknowledgement for providing all the things that help sustain our physical beings, to pray, to offer thanks to the Creator, and to use for a variety of medicinal purposes. In First Nations and Métis cultures, tobacco is intended to be sacred because smoke from tobacco burned on sacred fires or in sacred pipes rises to the sky, carrying prayers to the spirit world. The ceremonial use of tobacco has a powerful spiritual meaning, establishing a direct communication link between the person giving and the spiritual world receiving. Because of differences in culture, climate, and geography, plant products such as willow bark, sweet-grass, cedar, and sage are also smoked in pipes and used instead of tobacco by some communities. In Saskatchewan, some First Nations use *kinikinik* which is made from the red willow through a traditional process (including peeling and drying) in preparation for ceremonial purposes. First Nations elders maintain that recreational use of tobacco is disrespectful to the spiritual, medicinal and traditional use of tobacco. The protocol on what type of tobacco used in ceremony varies from community to community.

Commercial Use

This is tobacco that is commercially produced, such as cigarettes, pouch, chew, snuff, cigars, etc. Commercially produced tobacco products contain several different chemicals. Burning commercial tobacco produces second-hand and third-hand smoke and according to Cancer Care Ontario, the chemical additives found in commercial tobacco take away from tobacco's original purpose in Aboriginal ceremonies.

Accessed March 2015 and adapted from:
http://www.hc-sc.gc.ca/fniah-spnia/substan/tobac-tabac/index-eng.php
Health Canada – First Nations & Inuit Health – Tobacco

http://www.nnapf.org/tobacco-sacred
National Native Addictions Partnership Foundation

http://www.makeapact.ca/content/sacred-tobacco/sacred-tobacco-is-important
PACT/TAR – Sacred Tobacco is Important

http://www.sk.lung.ca/index.php/educators/teachers/k-3-resource-guide#.U06tn-b4DmQ
KNOW TOBACCO: THINK.LEARN.LIVE - Traditional Use of Tobacco – First Nations and Métis Cultures

http://www.tobaccowise.com/resources/know_the_difference/
Aboriginal Tobacco Program – Know the Difference

http://www.cancer.ca/en/cancer-information/diagnosis-and-treatment/complementary-therapies/first-nations-healing/?region=on
First Nations Healing – Canadian Cancer Society

Tobacco Use Prevention within a Comprehensive School Community Health (CSCH) Framework

Comprehensive School Health (CSH) is an internationally recognized framework for supporting improvements in students' educational outcomes while addressing school community health in a planned, integrated, and holistic way. In Saskatchewan, CSH has been adapted and renamed to Comprehensive School Community Health (CSCH) to further emphasize the vision that a broad range of participants working together can enhance the health and well-being of all students and potentially influence and impact the health and well-being of an entire community. The CSCH approach recognizes that experimentation with substances including tobacco does occur during adolescence and that most young people develop into adulthood without experiencing dependence or addiction. [4]

CSCH encourages values, skills, behaviours, and supportive environments that foster healthy lifestyles and communities for children, youth, their families, and neighbours. It also promotes health within and beyond the school through collaborative school community partnerships. CSCH recognizes that many different factors affect the health and well-being of students. These factors include the physical environments where children and youth live, learn, work, and play. There are also economic and social environments that influence individual and community health. These determinants include: household income, education, employment, housing, access to healthy food, early childhood development, availability of health services, and social supports.

Effective partnerships among teachers, parents, peers, health professionals, and community members can contribute to the well-being of students. In your community there may be health promotion personnel in the regional health authority or from the wider community who could support efforts to address tobacco prevention in schools.

Comprehensive school community health is seen as an effective way to address tobacco use in an integrated way for the benefit of all students. See the examples on page 10 using the four integrated components:

[4] Freeman et al, 2011, *Ibid*

High-Quality Teaching and Learning

- provincial health education curricula
- powerful instructional strategies
- creation and use of culturally and developmentally appropriate resources
- cross-curricular learning opportunities
- informal learning opportunities for students/families

Safe and Healthy Physical and Social Environments

- access to and support for healthier activity options that are tobacco free
- informal role modeling by school staff
- development of a caring and respectful tobacco free environment
- opportunities for youth to dialogue with adult allies, other youth, and policy makers regarding tobacco misuse

Family & Community Engagement

- school/communities support youth-led initiatives to reduce tobacco misuse
- special events to raise awareness include families and community members
- parents/community members support and are engaged in tobacco policy development
- School Community Councils are involved in the planning and implementing of school-based initiatives

Effective Policy

- clear practices, procedures, protocols and regulations regarding tobacco misuse are in place
- promising practices to enhance health and well-being are incorporated
- creating policies regarding the exposure of second-hand smoke for children and youth are considered

For more information on Comprehensive School Community Health (CSCH) in Saskatchewan visit http://www.education.gov.sk.ca/comprehensive-school-community-health

For more information on how other jurisdictions address tobacco from a comprehensive school health approach visit http://www.jcsh-cces.ca/

Primary Health Care

Primary health care is the day-to-day care needed to protect, maintain, or restore our health. For most people, it is both the first point of contact with the health care system and the most frequently used. Visiting a family physician, discussing a prescription with a pharmacist, or speaking with a registered nurse via HealthLine 811 are all examples of how Saskatchewan residents access primary health care every day.

Primary health care contributes to achieving optimal health for the population by supporting individuals to take responsibility for their own health. Being healthy includes physical, mental, emotional, and spiritual well-being as well as striving to reach one's potential and to be able to change or cope with circumstances. Within primary health, health promotion strategies are used to create communities where it is easier for people to live, learn, work, and play in healthy ways. This means we must focus on designing processes in ways that will lessen the gap between those who may have more and those who have less.
Environmental factors such as housing, nutrition, social supports, physical activity, community, recreation, employment all affect health. The aim is to build capacity and partnerships between many sectors to address these factors. Primary health care and health promotion aim to reduce the barriers that people may face and create opportunities for people to feel connected to others, participate in decision-making, and take action.

In grade 6, students learn how health promotion and other factors influence personal standards. One of these factors is the environment. To promote health, many individuals, groups, and organizations have focused on creating environments that reduce exposure to environmental tobacco smoke and limit youth access to tobacco products. Other ways to promote health is to offer cessation services to the population through primary health care. For more information on how primary health care is integral to reducing tobacco use for the population, visit: http://otru.org/tims-sk-update-smoking-cessation-an-integral-part-primary-health-care-delivery/ **TIMS-SK Update: Smoking Cessation: An Integral Part of Primary Health-Care Delivery - Ontario Tobacco Research Unit**

Legislation

In Canada, both federal and provincial governments restrict the promotion, advertising, and marketing of tobacco products in order to protect youth from these influences.

In Saskatchewan, legislation limits where people can smoke, identifies the legal age to purchase tobacco products, and addresses how tobacco products can be displayed in a store. *The Tobacco Control Act* and its associated regulations are intended to protect people from exposure to environmental tobacco smoke and reduce youth access to tobacco. The Ministry of Health is responsible for developing and amending *The Tobacco Control Act* and *The Tobacco Control Regulations*. The Act was first put into place in 2002 and has since been amended, most significantly in 2005 and 2010. Municipalities, school divisions, and others can also create local bylaws and policies to take further action to support the reduction of tobacco use in their communities.

The federal *Tobacco Act* was passed in 1997 and amended in 2009. The *Tobacco Act* limits tobacco sponsorship, youth access to tobacco products, and the promotion of tobacco products including advertising that would be targeted at young people. The federal government also requires tobacco manufacturers to provide health information and warnings on tobacco packages through the *Tobacco Products Labeling Regulations (Cigarettes and Little Cigars)*.

Tobacco Industry

The tobacco industry refers to the group of companies who manufacture tobacco products. The tobacco industry:

- glamorizes smoking and use of tobacco products
- works to prevent further regulation of the industry
- designs their products and advertising specifically to attract new users
- actively tries to recruit more users of their products
- suggests it is a person's choice to smoke
- uses large marketing budgets to promote their products
- stages media events
- promotes products informally (e.g., smoking in movies, television programs, or music videos)
- uses celebrities to endorse their products
- attempts to get product placement in movies as a way to attract new users

Health promotion addresses the tobacco industry strategies by:

- advocating for a ban on smoking in movies and promoting smoke-free movies
- promoting display and advertising bans (tobacco legislation)
- monitoring the industry
- engaging in research on the harms of tobacco on health and how to help people quit

Links

Saskatchewan

http://www.health.gov.sk.ca/tobacco-legislation
Tobacco Legislation – Saskatchewan Ministry of Health

Canada

http://www.tobaccoreport.ca/2014/TobaccoUseinCanada_2014_FlavourSupplement.pdf
Minaker L, Manske S, Rynard VL, Reid JL & Hammond D. *Tobacco Use in Canada: Patterns and Trends, 2014 Edition - Special Supplement: Flavoured Tobacco Use*. Waterloo, ON: Propel Centre for Population Health Impact, University of Waterloo.

www.hc-sc.gc.ca/hc-ps/tobac-tabac/legislation/federal/amend_faq-modif-eng.php#q1
Amendment to legislation regarding tobacco advertising

http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/legislation/index-eng.php
Canadian legislation regarding tobacco sponsorship

http://www.lung.ca/protect-protegez/tobacco-tabagisme/facts-faits/teens-ados_e.php
The Lung Association - Smoking & tobacco - Facts about smoking – Teens & Smoking

http://www.playlivebetobaccofree.ca/Youth/Tobacco-Hurts-Your-Game.aspx
Tobacco Hurts your Game

http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/youth-jeunes/index-eng.php
Health Canada – Youth Zone

http://www.freezetheindustry.com/uploads/9/9/5/2/9952657/fti_-_advocacy_resource_flavours.pdf
A Flavoured Tobacco Ban Advocacy Resource - Freeze the Industry

United States

http://smokefreemovies.ucsf.edu/
Smoke-Free Movies – University of California, San Francisco

International

http://globaltobaccocontrol.org/node/11047
Global Tobacco Control: Learning from the Experts

Learning Activities

ACTIVITY STARTER

Goal #1: Understandings, Skills, and Confidences

USC 6.6 Develop and demonstrate the knowledge, skills, and personal standards necessary for establishing and supporting safe practices and environments related to various community activities.

USC 6.7 Assess how health promotion and advertising (related, but not limited to: tobacco, alcohol, diabetes, and HIV) influence personal standards and behaviours and determine how and why certain groups of consumers (e.g., youth as 'replacement' smokers) are targeted.

Goal #2: Decision Making

DM 6.8 Assess the role of personal standards in decision making related to healthy relationships, non-curable infections, stress management, body image, safety, and health promotion.

DM 6.9 Examine health opportunities and challenges to establish personal goal statements related to healthy relationships, non-curable infections, stress management, body image, safety, and health promotion.

Goal #3: Action Planning

AD 6.10 Design and implement (with guidance) two *six-day action plans* that reflect affirmation of personal standards related to decision making, relationships, non-curable infections, stress management, body image, safety, and health promotion.

Questions for Deeper Understanding:

- How do our personal standards impact our health and safety?
- In a culture where we are bombarded with 'others' trying to define us, how are we able to affirm personal standards and make healthy decisions for ourselves?
- What role do media play in shaping the views of ourselves, our health, and our community?

Building the context:

Begin with a question such as "What does safety mean?" Build on student responses to have them reflect on whether their definition of safety includes a focus on health and well-being. Emphasize that creating a safe environment includes promoting physical, mental, emotional, and spiritual well-being; preventing chronic disease and injury; as well as protecting the natural world. A safe community is a healthy community. When people feel safe they are more likely to be active physically, emotionally, spiritually, and socially in their community; they are more willing to try new things, accept others, know that support systems are in place to protect them, and they are confident in their future.

Activity #1

Goal #1: Understandings, Skills, and Confidences
Outcome 6.6: Develop and demonstrate the knowledge, skills, and personal standards necessary for establishing and supporting safe practices and environments related to various community activities.
Indicators: a, b, and c

Questions for Deeper Understanding:

- How and why might our beliefs and attitudes towards community safety be aligned with/contradicted by our own actions and those of others?
- Why do particular people, in particular situations, behave in ways they know are unsafe?

Activity: Place the words "Always", "Sometimes", and "Never" in three locations in the room. Read the following statements and have students move to stand/kneel/do jumping jacks by the word that represents personal attitude towards safety. With each statement, question the students and encourage them to question each other in ways to engage them in conversation about their attitudes towards safety. Possible statements include:

- I believe that safety is my responsibility.
- It bothers me when others do not practice safe behaviours.
- I understand the concept of taking risks.
- I know how to keep myself safe while doing the activities I am involved in.
- Safety is the responsibility of the adults in our community.
- I reflect my family's safety values in my choices and behaviours.
- Our community is a safe place to live.

Use this activity to have students reflect on their attitudes about safety. Divide students into four groups (or eight groups, etc.) and give each group one of the headings.

Physical Mental Emotional Spiritual

Ask students to talk about safety as it relates to their physical, mental, emotional, and spiritual health and to record their ideas. Ask each group to share two key points from their discussion. Conclude this activity by asking students to write a couple of sentences that describes their attitude towards safety of self and how they believe this attitude developed.

Continue by sharing a scenario with students, such as:
It is the first day that really feels like spring. You can hear water dripping, birds chirping, and the sounds of people enjoying the outdoors. The bell rings and you realize it is noon hour and you can't wait to get outside. You put your books away, grab your jacket, turn on your cell phone, and head for the doors. A couple of your friends and a few others are waiting for you and they signal for you to join them. You go outside and soon realize they are heading to the shed across the street where you know kids go to smoke. You decide to text your dad that you aren't coming home for lunch because you have some work to catch up on. You send the text as you cross the street…

Pose the following questions:

- What are potential safety risks if you choose to meet your friends?
- What are some of the barriers/circumstances that might interfere with your ability to keep yourself safe?
- Are there elements in this scenario where it might influence your personal standards related to health and safety (e.g., peer pressure)?

Tell students they are going to think more deeply about personal standards and safety by investigating (e.g., conversation, research, observations, interviews, online surveys) common adolescent activities that present safety risks in their community (e.g., riding in a vehicle without a seatbelt, skateboarding or snowmobiling without the proper protective equipment, and/or visiting particular chat rooms on line). Students will be asked to share their discoveries with the class.

Ask students to predict probable safety concerns that their families might have for them. Discuss why safety should be a priority to families and communities. Challenge students to think about safety as it relates to the "whole self" and to talk to their families (or other trusted adults) about their beliefs and habits regarding safety practices. Ask students to be ready to report key ideas from these discussions next class.

Additional/Alternate Learning Activities:

1. Ask students to fold a piece of paper in half and to write the title "Environments" on one side and the title "Safety Risks Exist" on the other (an alternative would be to do this electronically/online). Ask students to have three "safety conversations" with other youth not in their class and to record key points related to environments and/or safety risks from the discussions. Take a few moments for students to reflect on the 'type' of risks they have recorded (i.e., physical risks, mental risks, emotional risks, and/or spiritual risks) and to determine how these safety risks are influenced by the environments. Then students create the categories for a "Continuum of Risk" (e.g., low risk for physical safety - medium risk for long-term health safety - very high risk of life). Students work in small groups to place their lists on the continuum and then share their conclusions with another group.

Exit Task: Conclude by giving the students a journal writing "exit card" that has a writing prompt on it such as:

- As a family, we take the safety risk of … very seriously and demonstrate our positive attitude towards keeping ourselves safe in this area by ….
- A safety risk area that our family does not focus on is … and I think this is because ….

Resources to support this activity:

For statistics on adolescent use of tobacco products, visit:
http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php
Youth Smoking Survey
http://www.tobaccoreport.ca/2014/
Tobacco Use in Canada: 2014 Edition

Activity #2

Goal #1: Understandings, Skills, and Confidences
Outcome 6.6: Develop and demonstrate the knowledge, skills, and personal standards necessary for establishing and supporting safe practices and environments related to various community activities.
Indicators: d and e

Questions for Deeper Understanding:

- Who is responsible for your safety? For the safety of others?
- How do rules, regulations, and/or laws influence one's personal standards?
- How do rules, regulations, and laws related to the use of and promotion of tobacco products influence our attitudes, personal standards, and/or behaviours?

Activity: Students generate a list of all the rules, regulations, and laws they can think of that focus on health and safety (e.g., wearing helmets during sport, seatbelts, hitting from behind in hockey). Rules could include personal, peer, and family 'rules', as well as school, school division, and community rules. Help students better understand how their 'personal safety rules' are connected to their personal standards.

Following this activity focuses students' thinking on the rules and regulations regarding tobacco products. See the Legislation Fact Sheet (Appendices A and B) for background on the federal and provincial legislation associated with tobacco use.

Share with students that in 1997, the Tobacco Act came into effect. It regulates the manufacturing, sale, labeling, and promotion of tobacco products in Canada. This Act has been amended to address activities of the tobacco industry. For more information on amendments, visit the link provided in the resource section.

Provinces, including Saskatchewan, have since passed regulations and laws that further protect the public against environmental tobacco smoke and put additional restrictions in place to limit youth access. Local organizations can also create policies which restrict tobacco use. Students may find their local communities have municipal by-laws that provide further limitations.

Discuss with the students that the rules, regulations, and laws associated with the use of tobacco products are a form of health promotion that support safe practices and environments. Use the example of Card 1 (Appendix B) to emphasize the concept of safe environments. Share with them that laws are often developed in response to the influences of the tobacco industry (Cards 3 and 4). Help them to understand that laws are one form of establishing the 'rights' of the non-smoker and that "rights" also influence our "responsibilities".

Additional/Alternate Learning Activities:

1. Students could jigsaw to become familiar with examples of some rules, regulations, and laws related to the tobacco industry (e.g., smoking, smokeless/spit tobacco, environmental smoke). Provide each student with one of the four cards that provide information on a regulation or law that focuses on tobacco-related safety practices/concerns that are common in the com-munity (Appendix A). Provide each student with a copy of all four cards after the jigsaw learning experience is complete. Based on the laws provided, students could reflect on the environments in their community to analyze if the intent of one or more of the laws is 'being lived'. They could share their analysis in a variety of ways, including a journal entry.

2. Students discuss, in small groups, how their personal standards have been influenced by these laws and what personal standards are most impacted by these laws.

3. Divide the students into two groups; one being "Rights" and the other being "Responsibilities". Tell them that individually they are to complete the writing prompt with the issue of tobacco use as their health and safety risk consideration. The "Rights" are given the prompt "When it comes to my health and safety, I have the right to …". The "Responsibilities" are given the prompt "When it comes to my health and safety, I have the responsibility to …". Once the "Rights" and "Responsibilities" are ready, tell them to circulate and ask questions in an attempt to join with a member of the opposite group in a way that makes a direct connect between the right (right to a safe environment) to the responsibility (responsibility to maintain a safe environment). Ask partnerships to share their connections with the class.

Resources:

- Appendix A
- Appendix B
- To learn more about the Saskatchewan Tobacco Act, with its priority to create smoke-free public places and reduce youth access to tobacco products, visit http://www.health.gov.sk.ca/smoking-and-your-health
- For information about the recent amendment to legislation regarding tobacco sales in Canada, see http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/legislation/reg/index-eng.php

Activity #3

Goal #1: Understandings, Skills, and Confidences
Outcome 6.6: Develop and demonstrate the knowledge, skills, and personal standards necessary for establishing and supporting safe practices and environments related to various community activities.
Indicators: f, and g, h, and i

Questions for Deeper Understanding:

- Why do some people seem to "bend" the rules? Is it ever okay to do so?
- What are our rights and responsibilities for creating and supporting safe environments?
- How do personal standards influence how one takes responsibility for personal and community safety?
- What are the rights and related responsibilities of non-smokers?

Activity: Begin by asking students to think about the possible physical, social, and emotional consequences of following and of not following safety rules, regulations, and laws. Create a list of questions your group has about these consequences. Investigate (i.e., through drama, dance, music, movement, storytelling, etc.) responses to your questions. Share what has been learned.

Relate students' investigations to their reflections on individual and community responsibility to establishing safe environments. Guide their reflections to discuss personal standards related to safety. These standards can be used in the safety auction below.

Explain the auction process by giving students a particular amount of play money (e.g., $200) that they can use to purchase values. Students are to purchase safety values that are most important to them while recognizing that once their money is spent, they are no longer involved in the auction. You may want to establish other protocols (bids to be in multiples of $25, bids will be recorded on a spreadsheet).

Once bidding begins, award each value to the highest bidder. Once all the values have been purchased or the money has been spent, facilitate a class discussion:

- Why did you bid on a particular safety value?
- What values were most/least desired? Why?
- Which of these values would you want to be shared with/by your family and friends?

Conclude by highlighting how understanding what we value and why we value it is reflected in our decision making. Ask students, "When society values safety, what are some decisions that are made for the safety of all?" Lead the discussion to include the idea of rules, laws, and regulations.

Provide each student with a copy of the School and/or School Division rules/regulations regarding tobacco use. Note the school division's policy regarding ceremonial tobacco use. Engage students in examining possible consequences of following/not following these school division safety rules related to tobacco use and represent their learnings (e.g., mind maps). Have students identify suggested changes to the policies so that the expected responsibilities align better with their personal standards.

To conclude, give pairs of students an index card or large sticky note and ask them to write a personal standard on it. Ask them to identify particular tobacco rules, regulations, and/or laws that align with the personal standard. Tell them to identify opportunities and/or challenges related to affirming their personal standards regarding the relationship between tobacco and safe practices and environments. Post cards on the wall.

Activity #4

Goal #1: Understandings, Skills, and Confidences
Outcome 6.7: Assess how health promotions and advertising (related to but not limited to tobacco, alcohol, diabetes, and HIV) influence personal standards and behaviours and determine how and why certain groups of consumers (e.g., youth as 'replacement' smokers) are targeted.
Indicators: a, b, and c, d, e, f, and h

Questions for Deeper Understanding:

- Why are so many marketing and health promotion activities targeted at youth?
- Who is responsible for safety?
- How are your personal standards, attitudes, and behaviours influenced by health promotions and advertising?
- Why are there hidden messages in advertising?
- How does your awareness of these hidden messages influence your decisions?

Activity: Introduce students to an example of marketing strategies that focus on promoting health. Ask students to comment on health promotions they have seen/heard and what kinds of marketing strategies were used (e.g., replacement smokers, physical activity). Invite students to comment on those they feel are most effective. Discuss and lead the students through a process to co-construct criteria for evaluating the effectiveness of the marketing strategies used to promote health. Record the criteria and guide students to narrow the lists to three or four of the most important criteria.

See the listing below of webpages, Facebook pages, and videos to learn more about youth initiatives.

Saskatchewan
https://www.facebook.com/pages/Lloydminster-Action-for-Tobacco-Reduction/191880130936444
Lloydminster Action for Tobacco Reduction Facebook page
https://www.facebook.com/LungSask
Lung Association of Saskatchewan Facebook page – Youth Ambassadors
Canada
http://bettertobreathe.com/
Better To Breathe
http://www.freezetheindustry.com/about-us.html
Freeze the Industry
United States
https://www.youtube.com/watch?v=sjSvK2Zi1UM

What is Evolvement? National youth led movement for youth fighting against tobacco throughout the United States.

Share with students …

- There are health promotion activities designed and implemented at the local, provincial, national, and international levels. Local health promotion is where community members make plans and take action to make a change that will solve challenges that are a community concern. One example would be when the School Community Council and representatives of the school staff and students work together to promote tobacco-free school zones. Ask for other examples. Brainstorm with students, or students can search on the web to identify a variety of examples of local, provincial, and national health promotions.
- The tobacco industry uses many ways to target youth and/or counter health promotion strategies. Facilitate a number of small group discussions by asking questions such as:
  - *What strategies do industries use to target youth? How do you know?*
  - *What strategies are most influential for youth?*
  - *Which ones are most influential for you? Why?*
  - *How are strategies used to target youth different than those used to target other populations?*

Discuss that advertising is just one marketing strategy used to encourage young people to use/buy their products. For more information see **Appendix D**.

Show students some visual prompts that demonstrate contrasting marketing of products, including digital promotions (e.g., cereal box of a product marketed towards adults and one marketed towards youth; lip care product marketed towards adults and one marketed towards youth; music concert marketed towards adults and one marketed towards youth; or smokeless tobacco 'regular' and smokeless tobacco 'fruit-flavoured').

Additional/Alternate Learning Activities:

1. Students look for all examples of advertising/marketing strategies that they can find at school and in the community. Give students Appendix C to guide them as they examine and categorize these promotions. Tell students to complete the first two categories only. You could model how to complete the chart using a 'historical' form of tobacco industry advertising such as one found at http://wellmedicated.com/lists/40-gorgeous-vintage-tobacco-advertisements/

Note: If Appendix B is used this way in this lesson, it should be completed in Alternative Activity # 6.

2. Give half of the students in the class an index card with "strategies to promote health" written on it and the other half a card with "tobacco industry marketing strategies" on it. Students record as many different examples of strategies that are used to influence behaviours. Once they have completed this, students join with a partner who has the same index card. Students compare answers to create one list. Working with their partner, students mark each strategy on their cards as either 'health-enhancing' or 'health-compromising'. Following this, each set of partners joins with a set that had the other card to compare their lists and to answer questions such as:
   - *How are the strategies used by agencies and industries to influence health-enhancing behaviours the same as those used to influence health-compromising behaviours? How are they different?*
   - *Which strategies do you think are more effective in influencing youth attitude and behaviours?*

3. Students search for information on the marketing of a specific product (e.g., smokeless/spit tobacco products, diet food products, skin care products, electronic games), and then share the information they find with two other students who found information on the marketing of different products. Together, the students could evaluate the sources of the information to identify which source provided the most helpful information. Students can then share their information with the class through a written product, an interview process, or an oral presentation.

4. Students complete a journal entry in which they evaluate three examples of advertising and related marketing techniques and/or health promotions that they see at school and in the community, or electronically, that are targeted at youth (e.g., tobacco products, food products, electronics).

5. View the poster "It is never going to happen to me" under 'The Scoop' at http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/youth-jeunes/scoop-primeur/never-jamais-eng.php and compare this strategy of health promotion to the tobacco industry strategies seen in Appendix D. Survey students in another class to investigate how each of these strategies might influence their attitudes and behaviours. Report on findings and conclusions.

6. Students read through the information on 'Smoking in Movies'. Analyze this marketing strategy and write a journal entry in which you assess how this strategy could influence the personal standards and behaviours of young people.

7. Ask students to agree or disagree with the following statements and follow up each statement with discussion about why:
   - Young people begin to use tobacco because their friends do.
   - If someone you admire was to use tobacco, it would influence you to use tobacco.
   - The tobacco company's marketing strategies are effective at targeting young people.
   - Smokeless tobacco is a safe substitute for cigarettes.
   - Tobacco companies direct their advertising towards young people, women, and/or minorities.
   - Using tobacco products decreases athletic performance.
   - More people are tobacco-free in your peer group than those who are not.
   - Flavoured additives in smokeless tobacco products are used to lure new users.
   - Smoking in movies is a marketing strategy to encourage young people to use tobacco products.
   - It is ok to say "no" to friends who offer me cigarettes.
   - It is against the law in Saskatchewan to sell tobacco to anyone under 18.
   - It is against the law to smoke in vehicles with anyone under the age of 16 present.

Resources:

- Appendix C
- Appendix D
- http://smokefreemovies.ucsf.edu/problem/now_showing.html
  Smoke Free Movies
- http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/youth-jeunes/scoop-primeur/never-jamais-eng.php
  Tobacco Youth Zone found in the Health Canada website
- http://wellmedicated.com/lists/40-gorgeous-vintage-tobacco-advertisements/
  40 Gorgeous Vintage Tobacco Advertisements

Activity #5

Goal #1: Understandings, Skills, and Confidences
Outcome 6.7: Assess how health promotions and advertising (related to but not limited to tobacco, alcohol, diabetes, and HIV) influence personal standards and behaviours and determine how and why certain groups of consumers (e.g., youth as 'replacement' smokers) are targeted.
Indicators: g, i, and j

Questions for Deeper Understanding:

- Why are young people such a valuable market for numerous industries and manufacturers such as the tobacco industry?
- Why does legislation regarding the promotion and sale of tobacco products need to be continually revisited?

Activity: Write the term "Replacement Smokers" on the board. Use a 'think-pair-share' (in small groups) strategy to engage students in determining what this term means. After the students share their ideas, post/distribute the following information for them to read and to discuss within their group, and how their ideas compare.

Accessed July 2014 from:
http://mediasmarts.ca/sites/default/files/pdfs/lesson-plan/Lesson_Thinking_Like_Tobacco_Company_Grades4-6.pdf
Thinking like a tobacco company

Share with the students that even though there are regulations and laws that restrict what the tobacco industry can do in regards to the advertising and promotion of tobacco products, the industry has figured out other marketing strategies to use.

Pull up the section ***Tobacco Companies Need You!*** from http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/youth-jeunes/scoop-primeur/indust-eng.php.

Ask trios of students to develop a personal statement about their reflections on the tobacco industry. (These statements will inform the development of personal goal statements – see Goal #2.)

Additional/Alternate Learning Activities:

Choose one option …

1. Interview two adults about how they see smoking restrictions have changed over the years. Document your conversations and include what you have learned about the changes in where and when people are able to smoke, their views on how restrictions have impacted their lives, and their perceptions on the act of smoking in public today.
2. Develop survey questions and survey at least twelve youth about how their lives would be impacted if legislation came into effect that would see any youth under the legal smoking age (current legal age as of 2015 is 18 years) being fined for 'possession' in a similar way to being fined when in possession of alcohol. Share your questions and findings.

Resources:

- Appendix B
- http://mediasmarts.ca/lessonplan/thinking-tobacco-company-grades-4-6-lesson
  Thinking Like a Tobacco Company: Grades 4-6 - Lesson
- https://uwaterloo.ca/canadian-student-tobacco-alcohol-drugs-survey/
  Health Canada's Canadian Student Tobacco, Alcohol and Drugs Survey (CTADS)
- http://theevolvement.org/
  Evolvement
- https://sk.lung.ca/index.php/health-facts/kids-tobacco/tobacc0controlact
  Lung Association of Saskatchewan
- http://www.tobaccotoolkit.ca/index.php?option=com_content&view=article&id=92&Itemid=165
- A partnership of the Canadian Cancer Society the Heart and Stroke Foundation, and the Lung Association
- http://www.nsra-adnf.ca/cms/file/files/SK_Mar_2013.pdf
- Non-Smokers' Rights Association
- http://mediasmarts.ca/sites/default/files/pdfs/lesson-plan/Lesson_Selling-Tobacco.pdf

Prior to Activity #6, grade 6 students should have already completed at least one six-day action plan. They should already be familiar with decision-making models, the factors that influence decision-making, and how these factors influence their personal standards. They will now apply these previous learnings as they make informed decisions based on their examination of tobacco.

Activity #6

Goal #2: Decision Making
Outcome 6.8: Assess the role of personal standards in decision making related to safety and health promotion.
Indicators: e and f

Questions for Deeper Understanding:

- Why is it important for us to understand our personal standards before making decisions?
- What role do personal standards have in decision making?

Activities:
Invite students to reflect back on the activities in this unit and determine how new understandings have impacted their personal standards.

Share some of the following facts and engage students in discussion around how these facts impact them personally.

Research indicates that young smokers in grades 5-9 usually get their cigarettes, from social sources, including buying, taking, or being given cigarettes by friends, family, or others. One in 6 reported usually purchasing cigarettes from a store themselves.

http://www.tobaccoreport.ca/2013/TobaccoUseinCanada_2013.pdf
Tobacco Use in Canada – Propel Centre for Population Health Impact

Smoking is not popular, 8 out of 10 people do not smoke.
http://www.sk.lung.ca/index.php/services-mainmenu/resources/printed-materials#tobacco
Lung Association of Saskatchewan

Many adolescents believe they can stop using tobacco anytime they want.
http://www.makeapact.ca/label-me
Partnership to Assist with Cessation of Tobacco (PACT)

Links for this activity:
Tobacco Facts:
http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/fact-fait/smoke-fumee1-eng.php
Tobacco: Behind the smoke. Health Canada

http://www.hbsc.org/publications/factsheets/
Health Behaviours in School-Aged Children Tobacco Fact Sheets

http://www.jcsh-cces.ca/upload/Health%20Risk%20Behaviour.pdf
Health-Risk Behaviours and Academic Achievement (PDF) – Pan-Canadian Joint Consortium for School Health

Youth Engagement:
http://www.engagementcentre.ca/files/PeerSupportGuide.pdf
Peer Support: A practical guide to implementing a program that engages and empowers young people in a high school setting. Centre of Excellence for Youth Engagement

http://www.heartandstroke.on.ca/site/apps/nlnet/content2.aspx?c=pvI3IeNWJwE&b=4147011&ct=6462277
Lift the smokescreen: talk to your kids about tobacco. Heart and Stroke Foundation

Provide the students with examples of challenging situations such as:

- A classmate tells you he has cigarettes for sale and he will be using the money to buy a new cellphone. When you ask where the cigarettes are from he says they are from his dad.
- On more than one occasion, you have seen the 17 year-old who works at the gas station sell cigarettes to some of the kids in your grade.
- You and your friend are considering waiting outside a store to find someone you see smoking going in to the store. You think you will ask this stranger to buy you some cigarettes.

Ask them to record their thoughts about what personal standards will influence their decisions in each of these situations. Discuss their thoughts as a large group. Support students in concluding that personal standards have a significant role in decisions people make.

Additional/Alternate Learning Activities:

1. Students role-play a given situation that demonstrates the situation, the challenge, their decision in response to the situation with clarity as to how their choice relates to one or more of their personal standards.

2. With a partner, students use an inform debate process with one promoting a responsible decision in response to the situation and the other promoting an irresponsible decision.

3. Journal about a personal challenge or a local challenge of which they are aware. Identify how this challenge has impacted their personal standards and suggest what they might do when facing or witnessing this challenge again.

Activity #7

Goal #2: Decision Making
Outcome 6.9: Examine health opportunities and challenges to establish personal goal statements related to safety and health promotions.
Indicators: a, b, c, and d

Questions for Deeper Understanding:

- How do we embrace potential health opportunities/challenges?
- What can grade 6 students do that might enhance or challenge their personal standards as they relate to safety?
- How might a challenge become an opportunity?

Activity: Co-construct criteria for students to evaluate strategies used to address the health and safety challenges. Support students to create a positive/negative T-Chart in order to evaluate the strategies.

Create a class list of challenges to personal standards as related to personal safety and/or the tobacco industry. Examples may include: members of youth's family smoke, adults that smoke when youth are in a vehicle, not watching movies that portray smoking. From the class list, students individually choose a challenge that personally resonates with their life (or add new challenges).

Next, have students develop a list of supports or resources they need to address the challenge. Examine existing resources (e.g., norms around tobacco use). Ask students to identify three specific actions they may take to address their personal challenge and to use established criteria to decide which action is the best action to take (e.g., which one means the most to me, which one do I have the supports for, and are there possible negative outcomes?).

From there, each student creates a goal statement that affirms personal standards related to safety and tobacco. Students justify, in writing or through discussion, how their personal goal statement relates to the affirmation of personal standards. **See Appendix E.**

Students exchange their goal statement with a partner and they evaluate each other's goal statements using previous established/teacher-given criteria. Arrange for students to discuss the evaluations and revise personal goals as needed.

Each student submits a final version of their personal goal statement.

Resources:
https://www.edonline.sk.ca/bbcswebdav/library/curricula/English/Health_Education/Health_Education_6_2009.pdf Saskatchewan Curriculum, Health Education 6.

Activity #8

Goal #3: Action Planning
Outcome 6.10: Design and implement (with guidance) one *six-day action plan* that reflects affirmation of personal standards related to decision making, safety, and health promotions.
Indicator: d, e, and f

Questions for Deeper Understanding:

- How will my action plan influence the personal standards of others?
- How do I keep myself open to other opportunities that may arise?

Activity: Pose questions to the students to focus their thinking on what they know about action planning (refer back to the first six-day action plan experienced earlier in the year). Ensure that they describe the design elements of an effective action plan, including:

- Why am I doing what I'm doing?
- What am I going to do? (i.e., a goal statement)
- How will I reach my goal? (i.e., process used)
- When will I begin and end my action plan?
- How will I know if I am successful?

Each student designs a six-day action plan (either in writing or through video). See Appendix F as a sample template for action planning. This template appears on page 30 in the Saskatchewan Health Education 6 Curriculum – See link in Resource section below. Work with students to co-construct criteria for the purpose of self-assessment of action plans.

Students discuss their action plans with a partner using the five questions above. Opportunity is provided to revise their plans as needed. These discussions and the self-assessments are discussed with the teachers.

Assessment criteria for the implementation of action plans should be discussed prior to action being taken. Sample criteria may include:

- What did I do?
- Did I reach my goal?
- When did I start and end my action plan?
- What surprised me?
- How did I overcome any obstacles?
- Did I revise and why?

Students document their implementation and reflections as they carry out their six-day action plans. This documentation is shared in a talking circle. Use a talking circle for the full class, or smaller groups, for students to share a story about their experience with carrying out their action plan. In a Talking Circle, each one is equal and each one belongs. Students in a Talking Circle learn to listen and respect the views of others. A stick, stone, or feather (something that symbolizes connectedness to the land or that is appropriate for the class/community) can be used to facilitate the circle. Whoever is holding the object has the right to speak and the others have the responsibility to listen. Those who are hesitant to speak may eventually speak because of the safety of the Talking Circle. The object "absorbs" the words said in the Circle.

This emphasizes that what is shared in the Circle is not to be spread around outside the Circle. Many Talking Circles begin with words which foster the readiness of the Circle. This is an excellent opportunity to have Elders involved in the classroom. The intention is to open hearts to understand and connect with each other. For more information on Talking Circles, visit the links in the Resource section below.

Each student submits an action plan (in writing or video) and the documentation of their implementation. Student-teacher interviews for reflection and assessment can include questions such as:

1. If you had the chance to start your action plan over again,
   - What would you do differently? Why?
   - What would you keep the same? Why?
2. How were you able to make use of your support person?
3. What impact did your action have on your personal standards?
4. What impact did your action have on improving the personal health and safety of self and/or others as influenced by the tobacco industry?

Resources

https://www.edonline.sk.ca/webapps/moe-curriculum-BBLEARN/index.jsp?view=indicators&lang=en&subj=health_education&level=6&outcome=3.1
Health Education 6 Outcomes, Indicators & Support Materials
Outcome AP 6.10
Appendix E – Template for Action Planning

http://www.tobaccotoolkit.ca/
Tobacco Toolkit – A partnership of the Canadian Cancer Society, Heart and Stroke Foundation, and The Lung Association

Talking Circles:

http://www.scs.sk.ca/cyber/elem/learningcommunity/6/1/curr_content/aboriginal_res/supplem.htm
Saskatchewan Cyber School

https://www.edonline.sk.ca/bbcswebdav/library/curricula/English/Social_Studies/Native_Studies_10_2002.pdf
Grade 10 Native Studies Curriculum

http://ae.gov.sk.ca/evergreen/socialsciences/part4/portion05.shtml
Adult Basic Education Curriculum – Advanced Education and Employment – Government of Saskatchewan

http://www.sicc.sk.ca/fckimages/file/SICC%20Cultural%20Awareness%20Training%20Handbook.pdf
Cultural Awareness Training Handbook – Saskatchewan Indian Cultural Centre

Appendix A

Legislation

Canadian Tobacco Legislation

Canadian tobacco legislation is among the most comprehensive in the world and is referred to as *The Tobacco Act, 1997.* This legislation regulates the manufacturing, sale, labelling, and promotion of tobacco products. Some of the main laws within *The Tobacco Act* are:

- The manufacturing and sale of flavoured little cigars, cigarettes, and blunt wraps is prohibited. A blunt wrap is a sheet or tube made of tobacco used to roll cigarette tobacco in. It is similar to rolling paper.
- There are minimum size requirements on packaging (e.g. no fewer than 20 little cigars in a package).
- Health warnings and information about tobacco use must be displayed on tobacco packaging as defined in the regulations.
- There are very limited places and ways by which tobacco can be advertised.
- In Canada, tobacco products can be advertised in publications which are mailed to adult subscribers and on signs in places where young people are not permitted by law (e.g. bars).
- Tobacco products can not be promoted or advertised through Canadian Media Outlets (e.g. on Canadian radio and TV stations), in ways which provide false facts or glamorize tobacco use, through testimonials, endorsements, or sponsorship, or be promoted at cultural or sporting events.
- Tobacco products which are displayed, but not promoted, in museums, used in literary, dramatic, musical, cinematographic, scientific, educational, or artistic work are exempt from the restrictions.

For more information on Canadian Tobacco Legislation visit:
http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/legislation/index-eng.php
Health Canada

Saskatchewan Tobacco Legislation

Saskatchewan tobacco legislation is called *The Tobacco Control Act*. The main goals of *The Tobacco Control Act* are to protect Saskatchewan residents from the harms of environmental tobacco smoke and to restrict youth access to tobacco products through limiting advertising and promotion and regulating the sale of tobacco products.

The Act was created in 2001 and was amended in 2004 and 2009. The 2009 amendments were passed in spring 2010 and they are:

- Prohibit smoking in vehicles when children under the age of 16 are present.
- Prohibit smoking in the enclosed common areas of multi-unit residential dwellings.
- Prohibit smoking within 3 metres of all doorways, windows, and air intakes of enclosed public places.
- Prohibit the sale of little cigars in packages of less than 20.

- Prohibit the display of outdoor signs that advertise or promote tobacco or tobacco-related products.
- Restrict the display of indoor signs that indicate the price of tobacco and tobacco-related products.
- Prohibit tobacco and tobacco-related products from being visible from outside of retail premises.

The Tobacco Control Act does not restrict against tobacco use for Aboriginal spiritual or cultural practices.

For more information visit:
http://www.health.gov.sk.ca/tobacco-legislation
Saskatchewan Ministry of Health

Impact of the United States Legislation on the Canadian Population
American legislation differs from Canadian legislation in many areas, including tobacco. Because of the significant impact that American media has on Canadians, it is important to know what their legislation says as well.

According to Canadian legislation, if a broadcast (television or radio) originates from outside Canada, the advertising ban will not apply as long as Canadian tobacco companies, marketing agencies, and broadcasters are not involved in the advertisement. Fortunately, the United States also has had legislation in place since 1971 which prohibits the advertisement of little cigars or cigarettes on any medium of electronic communication (e.g. television, radio), therefore, tobacco advertising is not permitted on any American television or radio services that may be offered through Canadian cable companies.

The US recently passed *The Family Smoking Prevention and Tobacco Control Act, 2009 which* will expand the advertising restrictions for tobacco products in the US.

http://www.fda.gov/NewsEvents/PublicHealthFocus/ucm168412.htm
U.S. Food and Drug Administration

Appendix B

Information Cards on Tobacco Legislation

CARD 1

Saskatchewan Tobacco Control Act legislates:

- A smoking ban in enclosed public places (since January 1, 2005).

http://www.qp.gov.sk.ca/documents/english/Statutes/Statutes/t14-1.pdf

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CARD 2

Saskatchewan Tobacco Control Act legislates that:

- No person shall furnish tobacco or a tobacco-related product to a person who appears to be a young person unless the person produces as proof that he or she is 18 years of age or older.
- Retailers must keep tobacco products out of sight (since January 1, 2005).

http://www.qp.gov.sk.ca/documents/english/Statutes/Statutes/t14-1.pdf

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CARD 3

The Federal Tobacco Act:

- Bans the manufacture and sales of little cigars, cigarettes, and blunt wraps that are flavoured (2010).
- Requires that little cigars and blunt wraps be sold in packages of at least 20 (2010).

http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/legislation/federal/amend_faq-modif-eng.php#q1

CARD 4

As stated in the Federal Tobacco Act, No person:

- May display a tobacco product-related brand element or the name of a tobacco manufacturer in a promotion that is used, directly or indirectly, in the sponsorship of a person, entity, event, activity or permanent facility.
- Shall promote a tobacco product by any means, including by means of the packaging, that are false, misleading, or deceptive or that are likely to create an erroneous impression about the characteristics, health effects, or health hazards of the tobacco product or its emissions.

http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/legislation/federal/amend_faq-modif-eng.php#q1

Appendix C

Promotion Chart

Product Promotion	Description	Health Enhancing? Health Compromising?	Effectiveness
Example: *Smoking Camel cigarettes*	**Type of Promotion** • *Poster* **Target Audience** • *Youth* **Strategies Used** • *Character Association* • *Colourful* • *Slogans*		
	Type of Promotion **Target Audience** **Strategies Used**		
	Type of Promotion **Target Audience** **Strategies Used**		
	Type of Promotion **Target Audience** **Strategies Used**		

http://mediasmarts.ca/sites/default/files/pdfs/lesson-plan/Lesson_Selling-Tobacco.pdf
Media Smarts – Lesson Plan: Selling Tobacco

Appendix D

Tobacco Industry, Marketing, & Legislation

The federal government banned candy flavoured cigarillos in 2010. In Saskatchewan there is no legislation banning flavoured products. The tobacco industry manufacturers flavoured products to mask the taste of tobacco which makes them easier to consume. If a youth's first experience with tobacco is pleasant, the more likely it is that they will become regular smokers. The tobacco industry uses trendy packaged products and includes names such as "Caribbean Chill", "Midnight Berry", "Mocha Taboo", and flavours such as grape, mango, ice cream, and more. The tobacco industry also uses flavours to encourage those who use tobacco to switch brands. Health promotion personnel believe that flavoured products are intended for children and youth. Packing these products individually also made them more affordable for youth.

The tobacco industry targets youth, particularly young females, by packaging cigarettes in youth-friendly packages such as a new version of cigarettes which comes in a shiny black box with pink and teal borders. There are also "slim" cigarettes that are targeted at young women. These brands are promoted as being more elegant and fashionable. Perfumed cigarettes have also re-emerged. Candy and fruit flavoured smokeless/spit tobacco and dissolvable tobacco products, packaged in bright, colourful packages appeal to youth. Smokeless/spit tobacco has been considered a 'gateway drug' to smoking initiation. Here is a quote from a former tobacco industry representative *"Cherry Skoal is for somebody who likes the taste of candy, if you know what I'm saying."*

Flavoured tobacco products and smokeless tobacco use is widespread among youth in Canada, and is growing. According to 2012 Youth Smoking Survey[5], 28.2% of those in Grades 6-12 in Canada have ever tried a tobacco product. This includes flavoured and smokeless products. In a special report by Propel Centre for Population Health Impact over half (52%) of Canadian grade 9-12 students reported using flavoured products and 32% of youth cigarette smokers smoked menthol cigarettes in the last 30 days. The prevalence of flavoured tobacco use as a proportion of all tobacco use was slightly lower for students in grades 6-8, at 35-42%, equivalent to 18,800 students.

Use of flavoured products varies by province and for more information on Saskatchewan visit https://uwaterloo.ca/canadian-student-tobacco-alcohol-drugs-survey/information-researchers/reports/saskatchewan

Advocates in provinces across Canada are calling for a regulation to ban all candy and fruit-flavoured tobacco. To learn more, visit http://www.freezetheindustry.com/ and/or www.takeaction.ca

[5] 2012-2013 Youth Smoking Survey

Accessed March 2015 and adapted from http://mediasmarts.ca/sites/default/files/pdfs/lesson-plan/Tobacco-Advertising-in-Canada-Lesson-Kit-2.pdf
Lesson Plan – Tobacco Advertising in Canada – Media Smarts: Canada's Centre for Digital and Media Literacy

Accessed May 2014 and adapted from http://mediasmarts.ca/sites/default/files/pdfs/lesson-plan/Tobacco-Advertising-in-Canada-Lesson-Kit-2.pdf
Lesson Plan – Tobacco Advertising in Canada – Media Smarts: Canada's Centre for Digital and Media Literacy

Through the *Tobacco Act* to date (as of May 2014), there is no legislation protecting youth from flavoured tobacco. For more information on a flavour ban visit:
http://www.freezetheindustry.com/
Freeze the Industry

Accessed May 2014 and adapted from:
http://www.freezetheindustry.com/uploads/9/9/5/2/9952657/fti_-_advocacy_resource_flavours.pdf
A Flavoured Tobacco Ban Advocacy Resource - Freeze the Industry

Appendix E

Planning for Action in Grade 6 Health Education

Name: _____ **Date:** _____

What: In order to address the health opportunity or the health challenge and affirm my personal standards about _____, my personal goal is to begin to _____ by _____.

How: To meet my goal, I am going to _____.

Who: I have asked for the support of _____ and _____
(i.e., name of one or two people who are willing to fulfill the role of support person/people).

When: I will commit to _____ every day for six days.

I will begin _____ on _____ (date).

I will evaluate _____ on _____ (date).

Between the start date and the evaluation date, I will check with my support person(s) on (check-in dates):

-
-
-

Where: I will carry out my action plan in such locations as_____.

Signatures:

Student signature: _____

Support person(s) signature: _____

Check-in Dates and Comments:

Evaluation Date and Comments:

saskatchewan
preventioninstitute
our goal is healthy children