

Healthy Choices: Substance Use AND Digital Safety

MODULES FOR GRADE 6 STUDENTS



Educator Guide: Substance Use

Addictions and Related Behaviours

Welcome!

This guide provides support and helpful information for Grade 6 educators to enhance the delivery of the Ministry of Education's Healthy Choices: Substance Use and Digital Safety Modules for Grade 6 students which includes two 60-minute lesson plans. Both modules were developed with input from educators, mental health professionals, and subject matter experts, including those with Francophone and/or Indigenous identities. This guide is intended to support the module titled: "**SUBSTANCE USE: Addictions and Related Behaviours**" It includes content applicable to both modules, as well as information pertaining to teaching substance use more specifically.

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Why this learning is important

To take a proactive approach

Student reports of substance use, such as the [Ontario Student Drug Use and Health Survey, \(2023\)](#) indicate that many students begin increasingly experimenting with substances, such as cannabis or alcohol, in Grades 7 and 8. Therefore, it is essential that learning focuses on understanding the effects of substance use, developing decision-making strategies, and an understanding of factors influencing drug use. By building student's health literacy, we give them the skills needed to get, understand, and use information to make good decisions for health in a variety of settings and across their life-course (Rootman, 2008).



To foster a positive and respectful school climate

The Ontario Ministry of Education's [Policy Program Memorandum 128](#): The Provincial Code of Conduct and School Board Codes of Conduct (2024) provides a framework for fostering a positive and respectful school climate. By teaching about substance use, such as vaping nicotine and cannabis, educators are directly supporting the provincial code of conduct.



To support student mental health and well-being

As the Ontario Ministry of Education's [Policy Program Memorandum 169](#): Student Mental Health (2024) states, mental health is a critical component of overall student success. Making informed choices that align with our identities, values, and goals can help promote our mental health and well-being. Consequently, programs that guide students in making safe and healthy choices, such as these lessons, can contribute to both increased student achievement and improved overall well-being.



To deliver curriculum expectations

This lesson is based on specific expectations within the Health and Physical Education Curriculum (2019). The specific expectations include [D1.2] Substance Use, Addictions, and Related Behaviours from Strand D.1 Understanding Health Concepts as well as [D2.3] Personal Safety and Injury Prevention and [D2.4] Substance Use, Addictions, and Related Behaviours from Strand D.2 Making Healthy Choices.



How to prepare to teach about substance use

With all lessons, educators take time to carefully prepare the appropriate materials and the content. For this module, one place to start might be the [Considerations for program planning in Health and Physical Education](#) within the *Curriculum Context* section of the Health and Physical Education Curriculum. Additionally, the following suggestions and tips might offer support in preparation.

SUGGESTIONS AND TIPS	
<p>Use a trauma-informed approach.</p>	<p>Students may have witnessed family members, friends or significant others using substances, or they may have used substances themselves. The topic of substance use can be particularly difficult for students experiencing recent losses, grief, or high stress. As such, changes in student behaviour during the lessons may stem from their lived experiences rather than the lesson content alone. For additional guidance see How to help if a student needs extra support</p>
<p>Recognizing and supporting students impacted by family substance use.</p>	<p>Some students living in households where substance use is problematic or harmful may find discussions about substance use particularly stressful, fearing shame, secrecy, or judgment. Using inclusive and compassionate language—such as acknowledging that substance use can affect families in different ways and that there can be many reasons for substance use—can help students feel seen without requiring them to disclose personal experiences. It is also helpful to remind students of available support. For additional guidance see How to help if a student needs extra support</p>
<p>Learn more about what students know and want to learn about substance use.</p>	<p>Students will have different attitudes, experiences, and levels of knowledge about substance use. Understanding what information students would like to know can inform your work and future discussions.</p>
<p>Reflect on student identities and experiences.</p>	<p>Effective lesson engagement recognizes that students' diverse backgrounds, including their language, family structure, and social or cultural identities, significantly shape how they learn. Culturally Responsive and Relevant Pedagogy (CRRP) underscores the importance of reflecting on and supporting the unique experiences of every student. Educators should be particularly mindful of offering the context, information and support necessary for students to enter into the discussion in an environment that is supportive of the student's experiences, comfort levels and needs.</p>

SUGGESTIONS AND TIPS	
<p>Reflect on student identities and experiences. (continued)</p>	<p>Furthermore, our definitions and perceptions of medicines and substances are deeply influenced by our identities and experiences. It's important to recognize that not all substance use is harmful, and labelling all substances as inherently negative can overlook the ways they may be used to support health, well-being, or cultural practices. Therefore, educators should approach this topic with care, acknowledging diverse contexts, meanings and experiences to avoid reinforcing stigma or dismissing beneficial ways some substances are used.</p>
<p>Reflect on your own identity, experience and knowledge of substance use.</p>	<p>This can help identify any biases that you may have that could impact your approach to working with students. You should also identify your own knowledge gaps and opportunities for learning.</p>
<p>Recognize and address bias and harmful comments.</p>	<p>It's important to stay alert for bias, microaggressions, or harmful comments that may arise. These can include stereotypes, stigmatizing language, or assumptions about people's experiences. If you notice a harmful comment, address it promptly by naming the behaviour and explaining why it's problematic. For example, if a student mentions "drug users" or "addicts," you could respond by saying that "our words have power and it's important to choose words that don't cause harm or stigma. When we use words like "drug users" or "addicts" it can hurt how we see a person and how they see themselves. Instead, we can say "people who use substances". It shows kindness and reminds us that everyone is more than just a specific action.</p>
<p>Learn more about the community your school is situated within.</p>	<p>Understanding who is part of the community, the experiences of its young people, any trends in substance use rates, and significant community events that may shape student perspectives on substances is crucial for effectively supporting students. Look to your local public health unit or data found within the Ontario Student Drug Use Survey for localized data and supports.</p>
<p>Consider the families of students.</p>	<p>Parents/guardians are the primary educators of their children with respect to learning about values, appropriate behaviour, and ethnocultural, spiritual, and personal beliefs and traditions. The lessons include optional parent/guardian communications that can be shared before or after the lessons to help parents/guardians prepare for conversations and deepen the learning. Always follow school/board protocols and ensure your communications align with your board's parent engagement approach and/or strategy.</p>
<p>Build your own understanding of substance use.</p>	<p>Refreshing or deepening your knowledge can help you feel better prepared to teach the lesson and answer questions students may have. You may wish to consult the Appendix A: Background Information for educators on substances to learn more about a variety of substances, their effects, and risks.</p>

How to help if a student needs extra support

You already provide guidance and support to students as an educator and caring adult. You are well-equipped to guide students through these lessons with your care, attentiveness, and ability to facilitate meaningful discussions. **If a student becomes upset during the lesson**, prioritize their dignity and privacy by checking in discreetly during or after the lesson. Listen to the student, let them know their feelings are valid, and ask how you can best help. Small gestures, like giving them time to regroup or offering calming techniques, can significantly impact their well-being. Remember that listening and validating a student's emotions IS a response, and sometimes nothing else is needed.

If a student shares concerns about their own mental health or substance use or the well-being of someone else, remember that this is a significant moment. While it may feel like a big responsibility, it is indeed affirming that the student sees you as a safe and supportive person to entrust with their information, feelings, and experiences. It is important to listen carefully, noting early in your conversation that while you may not be able to keep everything confidential, you will support the student through whatever happens next. A warm response to information shared about concerns can help a student advance toward much needed support and can positively reinforce help seeking. Educators should also be familiar with their school board's protocols and procedures that reflect [PPM 16g](#) for responding to student disclosures. These procedures are designed to help ensure students are supported in a coordinated and timely way, while also safeguarding their well-being.

As a caring adult, you can also play a critical role in [noticing and responding to emerging concerns](#). **If you notice a student might need additional support** with either their mental health or substance use, communicate and collaborate with others in the student's circle of support in alignment with your board protocols. A student's circle of support might include parents/guardians, other educators, administrators, support staff, mental health professionals, family members, Elders and those from faith and specific cultural communities. In some cases, this may mean helping students to access mental health or other services. Remember, you are not alone in supporting a student.

Ensure you are aware of your school and board support and service pathways and student disclosure procedures and policies. As always, follow your school board's protocol for accessing support for students. Your school administrator(s) can guide you if you are unsure.

The following resources could help you to identify and address concerns related to student mental health or substance use:

- [ONE CALL Desk Reference](#)
- [Supporting Minds Strategies at a Glance](#)

The following resources could be shared with students to access when supporting themselves, a friend or loved one with their mental health and/or substance use:

- [My Circle of Support – Student Help-Seeking Resource](#)
- [Kids Help Phone](#)
- [ConnexOntario | Mental Health & Addiction Treatment Services](#)
- [One Stop Talk](#)

Glossary

Additional definitions of substances (e.g., tobacco, cannabis, alcohol, stimulants etc.) can be found in the [Appendix A: Background information for educators on substances](#).

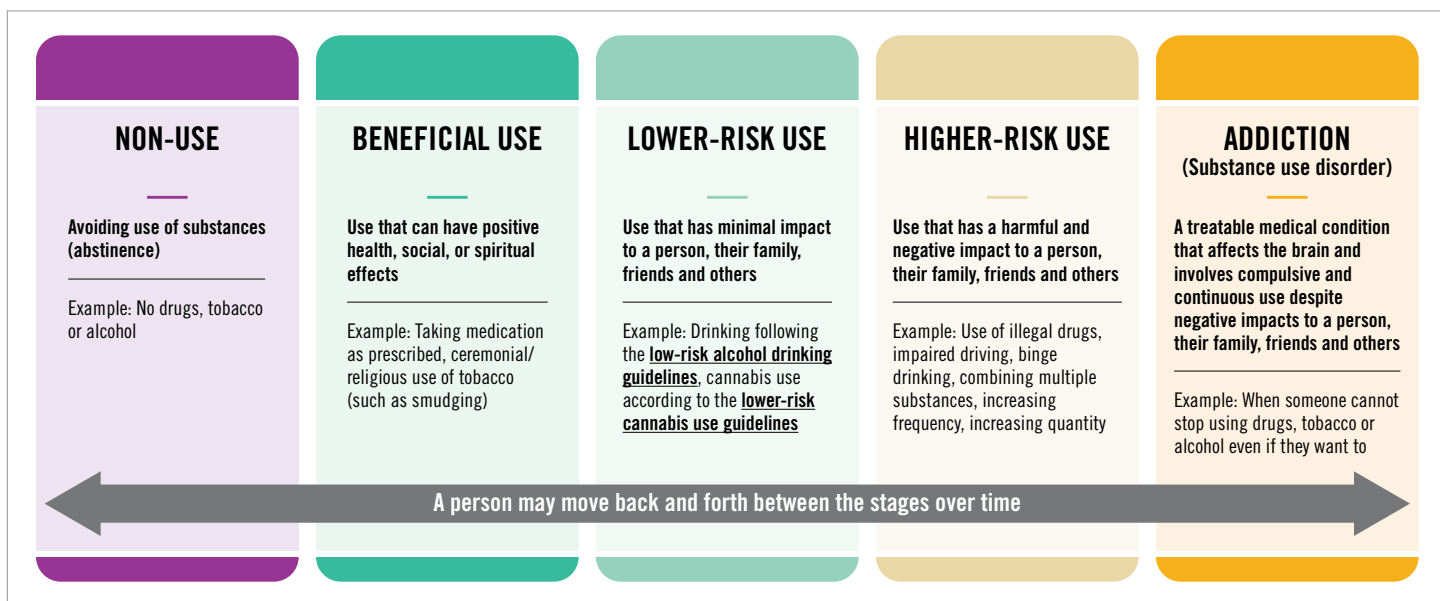
TERM AND SOURCE	DEFINITION
<p>Addiction</p>	<p>Addiction is a complex process where problematic patterns of substance use or behaviours can interfere with a person's life. Addiction can be broadly defined as a condition that leads to a compulsive engagement with a stimulus, despite negative consequences. This can lead to physical and/or psychological dependence. Addictions can be either substance related (such as the problematic use of alcohol or drugs) or process-related, also known as behavioural addictions (such as gambling or Internet addiction). Both can disrupt an individual's ability to maintain a healthy life.</p> <p>Note: addiction may also be referred to as substance use disorder.</p>
<p>Mental health</p>	<p>Mental health is the state of an individual's psychological and emotional well-being. It is a necessary resource for living a healthy life and a main factor in overall health. It does not mean the same thing as mental illness. However, poor mental health can lead to mental and physical illness. Good mental health allows you to feel, think and act in ways that help you enjoy life and cope with its challenges.</p>
<p>Mental illness</p>	<p>Mental illness is defined as alterations in thinking, mood or behaviour associated with significant distress and impaired functioning in one or more areas such as school, work, social or family interactions or the ability to live independently.</p>
<p>Vaping Source: CAMH</p>	<p>Vaping is the act of inhaling and exhaling (puffing) vapour from a battery-operated device known as an electronic-cigarette (e-cigarette). E-cigarettes are also known as vapes, vape pens, e-hookahs, mods, or tank systems. A vaping liquid or "e-juice" is heated to produce a vapour that can be inhaled through the mouth into the lungs. The vaping liquid may contain nicotine or chemical substances found in cannabis.</p>

Appendix A: Background information for educators on substance use

This document is intended to support educators in deepening their own understanding and addressing student inquiries appropriately. It is not meant for direct distribution to students. Research indicates that providing detailed descriptions and visuals can inadvertently normalize substance use and may cause distress. It is also important to remember that learning within the module should focus on potential harms and the range of effects, not how substances can be consumed.

Understanding substance use

- **Substance use occurs along a spectrum** (commonly called a continuum of use) ranging from no use at all to experiencing a substance use disorder. Every person has a place on this spectrum.



Substance Use Continuum

Retrieved from: <https://www.canada.ca/content/dam/hc-sc/documents/services/publications/substance-use-spectrum-infographic/pub-eng.pdf>

- **Substance use carries risks.** During the lesson, students will learn about some of those risks to make informed decisions.
- **Substance use occurs for a variety of reasons** and can have benefits. For instance, students in your class may use substances to relieve physical pain, for ceremonial purposes or to support their learning.
- **Substance use and mental health are related.** For instance, problematic substance use and mental health problems often co-occur, regardless of which comes first.

Alcohol (CAMH, n.d.)

ALCOHOL	
GENERAL INFORMATION	
Pure (ethyl) alcohol is a clear, colourless liquid. Alcoholic beverages get their distinctive colours from their ingredients and from the process of fermentation.	
ALTERNATIVE NAMES	DRUG CLASSIFICATION
liquor, booze, juice	Depressant
SHORT TERM EFFECTS	LONG TERM EFFECTS
<ul style="list-style-type: none"> impaired judgment and attention reduced inhibition reduced muscle control slowed reflexes nausea and vomiting a severely intoxicated person may “black out,” and have no memory of what was said or done while drinking consuming more than 2 standard drinks per occasion is associated with an increased risk of harms to oneself and others (Canadian Center on Substance Use and Addiction, 2023) the risk of harm from alcohol is low for those consuming 2 standard drinks or less per week, moderate for 3 to 6 standard drinks per week, and increasingly high for 7 or more standard drinks per week, with each additional drink increasing the risk (Canadian Center on Substance Use and Addiction, 2023) 	<ul style="list-style-type: none"> Three to six standard drinks per week increases the risk of developing several types of cancer including breast and colon cancer. Seven or more standard drinks per week increases the risk of heart disease and stroke. Alcoholic liver disease is a major cause of illness and death in North America. Long-term alcohol use can damage the brain. Alcohol dependence often results in clinical depression.
LEGAL INFORMATION	
<ul style="list-style-type: none"> Must be 19 years old to buy, use, and possess in Ontario. The Liquor License and Control Act (LLCA) allows parents or legal guardians to provide alcohol to their own children (under 19) in their home and under their supervision. Liquor License and Control Act, 2019 	
DATA FROM THE ONTARIO STUDENT DRUG USE AND HEALTH SURVEY (2023)	
<p>In 2023, over one-third (36%) of students in grades 7–12 report drinking more than just a few sips of alcohol during the past year. The prevalence of drinking alcohol has decreased over the decades.</p> <p>About one-in-five (21%) students in grades 7– 12 report drinking alcohol in the past month. About 5% drink on a weekly basis.</p>	

Cannabis (CAMH, n.d.)

CANNABIS	
GENERAL INFORMATION	
<p>Cannabis (see also visual dictionary) is a product of the cannabis sativa plant that is used for its psychoactive and therapeutic effects. It comes in many forms, including as dried flowers and leaves; hash; extracts (such as oil and shatter); and edibles.</p> <p>THC (delta-9-tetrahydrocannabinol) is the main psychoactive cannabinoid and is most responsible for the “high” associated with cannabis use. Cannabidiol (CBD) has little or no psychoactive effects.</p>	
ALTERNATIVE NAMES	DRUG CLASSIFICATION
Cannabis (marijuana, weed, pot, bud, green, herb or flower), hash, extracts (honey oil, phoenix tears, shatter), edibles	Stimulant and depressant effects.
SHORT TERM EFFECTS	LONG TERM EFFECTS
<ul style="list-style-type: none"> • mood alteration • red eyes • dry mouth and throat • irritated respiratory system (from smoking) • increases in appetite and heart rate • decreases in blood pressure, balance, and stability • drowsiness or restlessness <p>Therapeutic uses of cannabis are associated with its ability to regulate (and manage):</p> <ul style="list-style-type: none"> • nausea (e.g., for chemotherapy patients) • appetite (e.g., for people with cancer or HIV/AIDS) • pain (e.g., for people with multiple sclerosis, cancer-related pain) • depressed mood and insomnia (e.g., for people who have chronic diseases). 	<ul style="list-style-type: none"> • Problems with thinking, memory or physical co-ordination mental health problems, specifically if there is a history of mental health issues, like psychosis or an addiction to alcohol or other drugs, for the user or their immediate family cannabis dependence • breathing or lung problems from smoking • cancer from smoking
LEGAL INFORMATION	
<ul style="list-style-type: none"> • Must be 19 years old to buy, use, and possess in Ontario. • Ontario Cannabis Laws 	

CANNABIS
FORM AND USE
<ul style="list-style-type: none"> • rolled into a cigarette (called a joint), mixed with and rolled into a joint (called a spliff), or packed into a pipe or bong and then smoked • vaped • extracts (such as oil or shatter) are often dabbed with an oil rig pipe • used as an ingredient in food
DATA FROM THE ONTARIO STUDENT DRUG USE AND HEALTH SURVEY (2023)
<p>In 2023, about one-in-six (18%) students in grades 7–12 report using cannabis in any way during the past year. While past year cannabis use did not significantly change since the previous survey in 2021 (17%), the current prevalence is lower than in 2019 as well as estimates seen two decades ago.</p> <p>About 11% of students report using cannabis in the past month. About 2% use cannabis daily. This estimate increases to 5% of 12th graders.</p>

Commercial tobacco (CAMH, n.d.)

COMMERCIAL TOBACCO	
GENERAL INFORMATION	
<p>Tobacco is a plant that contains nicotine. Commercial tobacco is typically grown and processed with added chemicals for the purpose of commercial use, such as manufactured into cigarettes. Ceremonial tobacco is grown and gathered naturally, without the use of additives, and used in sacred ways as part of cultural and spiritual practices. The information provided below pertains to commercial tobacco only.</p>	
ALTERNATIVE NAMES	DRUG CLASSIFICATION
cigarettes, cigs, smokes, darts, chew, spit, snuff, dip	Stimulant and depressant effects.
SHORT TERM EFFECTS	LONG TERM EFFECTS (SMOKING)
<ul style="list-style-type: none"> • increases heart rate and breathing • trouble breathing • increases dopamine • mood-alterations • nicotine dependance 	<ul style="list-style-type: none"> • main cause of lung cancer • increased risk of cancers of the colon, mouth, throat, pancreas, bladder, and cervix • major cause of chronic bronchitis and emphysema • major cause of heart disease and stroke • increased risk of digestive problems • weakened immune system
<p>Many of the risks and dangers of smoking also apply to people who are exposed to second-hand smoke.</p>	

COMMERCIAL TOBACCO	
LEGAL INFORMATION	
<ul style="list-style-type: none"> Selling or supplying to those under the age of 19 is an offence under the Smoke-Free Ontario Act, 2017. Smoke-Free Ontario Act, 2017 Vaping and smoking are prohibited in areas including: <ul style="list-style-type: none"> All public and private schools' indoor and outdoor grounds including playgrounds and sports fields as well as public areas within 20 metres of the school's grounds. Public outdoor spaces such as playgrounds, sporting areas and community recreational facility grounds as well as public areas within 20 metres. Enclosed public spaces such as workplaces and sheltered areas (e.g., a bus shelter). Drivers and their passengers cannot smoke tobacco or vape anything in a car or other motor vehicle if anyone inside is age 15 years or younger. 	
Reference	
<ul style="list-style-type: none"> https://www.ontario.ca/page/rules-selling-tobacco-and-vapour-products https://www.ontario.ca/page/where-you-cant-smoke-or-vape-ontario 	
FORM AND USE	
<ul style="list-style-type: none"> smoked in cigarettes, cigars or pipes smoked in loose form in hookahs (water pipe) chewed 	<ul style="list-style-type: none"> sniffed as dry snuff held inside the lip or cheek as wet snuff mixed with cannabis and smoked in "joints."
DATA FROM THE ONTARIO STUDENT DRUG USE AND HEALTH SURVEY (2023)	
<p>In 2023, about 3% of students in grades 7–12 report smoking tobacco cigarettes (more than just a few puffs) during the past year. Less than 1% smoke cigarettes daily. The past year prevalence of cigarette smoking shows a significant downward trend over the decades.</p>	

Dextromethorphan (DXM) (Drug Free Kids Canada, 2022)

DEXTROMETHORPHAN	
GENERAL INFORMATION	
<p>Dextromethorphan is the active ingredient in many over-the-counter medications used to treat headaches and cold/flu symptoms. These products are easily available in supermarkets, drugstores, and convenience stores. They can also be ordered over the Internet.</p>	
ALTERNATIVE NAMES	DRUG CLASSIFICATION
candy, drank, robo, C-C-C, dex, DM, drex, red devils, rojo, skittles, tussin, velvet, and vitamin d	depressant and hallucinogen

DEXTROMETHORPHAN	
SHORT TERM EFFECTS	LONG TERM EFFECTS
<ul style="list-style-type: none"> • hallucinations • blurred vision • slurred speech • dizziness • impaired judgment • paranoia and confusion • excessive sweating • nausea and vomiting • irregular heartbeat and high blood pressure • hyperthermia, an extremely high fever 	<ul style="list-style-type: none"> • loss of consciousness • seizures • brain damage
LEGAL INFORMATION	
<ul style="list-style-type: none"> • DXM is not a controlled substance and as such can be purchased without a prescription. • There are no age limitations for who can purchase many medications containing DXM. 	
FORM AND USE	
<ul style="list-style-type: none"> • Medicines that have DXM in them come as syrups, capsules, pills, or throat lozenges. • DXM can also be extracted from cough syrup and made into a powder or capsule of “pure” DXM. 	
DATA FROM THE ONTARIO STUDENT DRUG USE AND HEALTH SURVEY (2023)	
<p>One-in-ten (10%) students in grades 7–12 report using cough or cold medication to “get high” in the past year. Nonmedical use of these drugs significantly decreases with grade.</p>	

Inhalants (CAMH, n.d.)

INHALANTS	
GENERAL INFORMATION	
<p>The term “inhalants” refers to chemical vapours or gases that produce a “high” when they are breathed in. Inhalants are inexpensive, legal and readily available. They have a high potential for abuse—especially by children and young adults.</p>	
ALTERNATIVE NAMES	DRUG CLASSIFICATION
<p>glue, gas, sniff (solvents); whippets (nitrous oxide); poppers, snappers, room odourizers, aromas—some sold under “brand” names such as Rush, Bolt, Jungle Juice (nitrites)</p>	<p>Varies</p>

INHALANTS	
SHORT TERM EFFECTS	LONG TERM EFFECTS
<ul style="list-style-type: none"> • produces immediate, brief intoxication • distorted perception (shape, size, color, time, space) • initial excitement, then drowsiness/sleep • with frequent use, euphoria, exhilaration, vivid fantasies • giddiness, outgoingness, confidence • dizziness, nausea, vomiting • blurred vision, sneezing, coughing • staggering, slowed reflexes, light sensitivity 	<ul style="list-style-type: none"> • risk of suffocation • recklessness, dangerous and destructive behaviour • high risk of self-destructive or suicidal behaviour • sudden sniffing death (SSD): Prolonged sniffing of highly concentrated inhalants can cause a rapid and irregular heartbeat, leading to death from heart failure. • organ damage
FORM AND USE	
<p>When solvents are used as drugs, they are either inhaled directly from the container ("sniffed"), from a soaked rag held to the face ("huffed") or from a bag ("bagged"). Sometimes people spray aerosols into a bag or balloon and then inhale the gas.</p>	

Opioids (e.g., prescription opioids, [fentanyl*](#), [heroin*](#)) (CAMH, n.d.)

*See also visual dictionary

OPIOIDS		
GENERAL INFORMATION		
<p>Opioids are a family of drugs that are usually prescribed to relieve pain. Some opioids are available over-the-counter or without a prescription in medications containing codeine.</p>		
NAME OF SUBSTANCE	ALTERNATIVE NAMES	DRUG CLASSIFICATION
Prescription opioids	M, morph (for morphine); meth (for methadone); percs (for Percodan, Percocet); juice (for Dilaudid)	Depressant
Fentanyl	Apache, China white, murder 8, jackpot, poison, TNT, tango and cash	
Heroin	junk, H, smack, horse, skag, dope, China white	

OPIOIDS	
SHORT TERM EFFECTS	LONG TERM EFFECTS
<ul style="list-style-type: none"> • euphoria • drowsiness • difficulty concentrating • shallow breathing • slowed heart rate • nausea, vomiting, or constipation • sweating • constipation • problems in concentration 	<ul style="list-style-type: none"> • physical dependence (withdrawal symptoms with cessation of use, such as uneasiness, diarrhea, vomiting, abdominal cramps, and craving for the drug) • mood swings • loss of consciousness • risk of infections (e.g., HIV, hepatitis) from sharing needles • death (even a small amount can cause overdose and accidental death) • brain damage and memory loss • seizures • organ damage including narcotic bowel syndrome
LEGAL INFORMATION	
<ul style="list-style-type: none"> • legal when prescribed by a medical practitioner 	
FORM AND USE	
<ul style="list-style-type: none"> • Some of the most abused opioids are prescription drugs, such as codeine-containing Tylenol, hydromorphone, oxycodone, morphine, and others. • Prescription opioids come in various forms, including tablets, capsules, syrups, solutions, and suppositories. • Fentanyl is most often prescribed as a slow-release patch. • Illicit/Illegal fentanyl is often made as an odourless and tasteless powder and mixed with other drugs (like heroin, cocaine or crack). It can also be pressed into counterfeit pills made to look like other prescription pills (like OxyContin, 80s or Percocet). Many overdoses have occurred because people did not know that what they were taking was contaminated with fentanyl. • Fentanyl is 50 to 100 times stronger than other opioids and only requires a small amount to create the effect of analgesia or euphoria. The potency presents a high risk of overdose. • Street Fentanyl may be swallowed, smoked, snorted or injected. • Most accidental opioid toxicity deaths in Canada from January-September 2024 involved Fentanyl (Health Canada, 2025). 	
DATA FROM THE ONTARIO STUDENT DRUG USE AND HEALTH SURVEY (2023)	
<p>About one-in-five (22%) students in grades 7–12 report using a prescription opioid pain reliever without a prescription in the past year. Past year nonmedical opioid use significantly increased between 2021 (13%) and 2023 (22%).</p>	

Stimulants (e.g., cocaine*, crack*, methamphetamines*, MDMA/ecstasy*, methylphenidate) (CAMH, n.d.)

*See also visual dictionary

STIMULANTS	
GENERAL INFORMATION	
Stimulants, sometimes called “uppers”, are substances that speed up the nervous system. Some stimulants are also considered hallucinogens. Stimulants include prescription medications such as those used to treat attention deficit hyperactivity disorder, asthma, narcolepsy or other sleep disorders.	
NAME OF SUBSTANCE	ALTERNATIVE NAMES
Cocaine	blow, C, coke, crack, flake, freebase, rock, snow
Methamphetamines	speed, meth, chalk, ice, crystal, crystal meth, jib
Ecstasy/MDMA	E, XTC, Adam, MDMA, the love drug
Methylphenidate	Vitamin R, skippy, rids, uppers, amps
SHORT TERM EFFECTS	LONG TERM EFFECTS
<ul style="list-style-type: none"> • rapid pulse • sweating • increased energy and talkativeness • heightened alertness and euphoria • reduced hunger and need for sleep • some experience calmness, increased self-control, confidence, and sociability • others experience nervousness, agitation, and difficulty relaxing 	<ul style="list-style-type: none"> • risk of severe psychiatric symptoms, including psychosis, anxiety, depression and paranoia • hallucinations and delusions • lung damage (when smoked or inhaled) • risk of infections (e.g., Hepatitis or HIV from needle use)
LEGAL INFORMATION	
<ul style="list-style-type: none"> • Cocaine, crack, methamphetamines, ecstasy/MDMA are not legal in Canada. • Medications containing methylphenidate are legal when prescribed by a medical practitioner. 	
FORM AND USE	
<ul style="list-style-type: none"> • Comes in pill, tablet, capsule or powder form. • Can be consumed by: <ul style="list-style-type: none"> • injecting either into a vein, into a muscle, or under the skin. • snorting the powder through the nose (also called sniffing). • inhaling or smoking, which involves gently heating the substance on aluminum foil and inhaling the smoke and vapours through a tube. 	

Vaping (Health Canada, 2024)

VAPING	
GENERAL INFORMATION	
<p>Vaping is not a substance itself; it is the act of inhaling and exhaling the aerosol produced by an electronic device that heats a liquid, which typically contains substances like nicotine and flavourings.</p> <p>The term “vaping” is also used to refer to the inhalation of cannabis aerosols, which are produced by products that differ from nicotine products. For more information about cannabis see the section below.</p>	
VAPING DEVICES	
<p>Vaping devices (see also visual dictionary) are usually battery powered. They may come with removable parts. Vaping products have many names, including:</p> <ul style="list-style-type: none"> • mods • pod-mods • vape pods • vapes • disposables • sub-ohms • vape pens • e-hookahs • tank systems • electronic cigarettes / e-cigarettes • electronic nicotine delivery systems (ENDS) • electronic vaping device • nicotine vaping products (NVP) • They may also be known by various brand names. <p>Vaping devices are available in many shapes and sizes. Some are small and look like USB drives or pens, while others are much larger.</p> <p>There are two kinds of vaping devices:</p> <ul style="list-style-type: none"> • open <ul style="list-style-type: none"> • The device is manually filled by adding vaping liquid into a tank or a pod, which is usually on the top of the device. • closed <ul style="list-style-type: none"> • The device holds a disposable cartridge or pod that is pre-filled with vaping liquid, which is disposed of after it runs out; or, • A single-use, disposable device that comes ready to use and is disposed of after it runs out of vaping liquid or charge. 	
VAPING LIQUIDS	
<p>Vaping liquids have many names, including:</p> <ul style="list-style-type: none"> • e-liquid • nic juice • e-juice • vape juice • pod juice 	

VAPING
VAPING LIQUIDS <i>(continued)</i>
<p>In vaping liquids, nicotine and/or flavouring ingredients are dissolved in a liquid mixture. This mixture is typically made up of propylene glycol and/or glycerol (vegetable glycerin) and other chemicals. Flavouring ingredients include chemicals and blends of chemicals used to make different flavours.</p> <p>Most vaping substances available for sale:</p> <ul style="list-style-type: none"> • are flavoured • contain nicotine • are liquids (but some are offered as herbs) <p>Vaping products do not contain tobacco. However, nicotine used in vaping liquids is often sourced and extracted from tobacco plants. More recently, products containing synthetic nicotine, which is created through chemical processes, have been made available in Canada.</p> <p>In the vaping liquids that contain nicotine, the level of nicotine can vary widely. Legal vaping substances contain 0 to 20 mg/ml of nicotine.</p>
POTENTIAL EFFECTS OF VAPING
<p>Vaping nicotine can lead to physical dependence and addiction.</p> <p>It is difficult to assess the exact impacts of vaping aerosols on human health. This is because the quantities and number of chemicals from vaped aerosol, which users are exposed to, depend on things like the type of device, temperature setting, vaping liquid ingredients and quality, as well as individual vaping patterns.</p> <p>Some of the chemicals and contaminants found in vaping aerosol are associated with negative health effects. The most common types of side effects reported by people who use vaping products are throat and mouth irritation, headache, cough, and nausea.</p>
LEGAL INFORMATION
<ul style="list-style-type: none"> • In Ontario, it is illegal to sell or supply vapour products to anyone under the age of 19 years old. <p>Reference</p> <ul style="list-style-type: none"> • https://www.ontario.ca/page/rules-selling-tobacco-and-vapour-products • https://www.ontario.ca/page/where-you-cant-smoke-or-vape-ontario
DATA FROM THE ONTARIO STUDENT DRUG USE AND HEALTH SURVEY (2023)
<p>About one-in-eight (13%) students in grades 7–12 report vaping (using an electronic cigarette) in the past year (more than just a few puffs). The prevalence of vaping increased between 2015 (first year of monitoring) and 2019 but has decreased since then.</p>

Overdose/drug poisoning (Ottawa Public Health, 2025)

OVERDOSE/DRUG POISONING	
GENERAL INFORMATION	
<p>Overdose, or drug poisoning, can happen with many different substances, and the signs and symptoms will vary depending on the substance.</p> <p>If someone is overdosing, call 911 right away! If you suspect an opioid overdose, you can use a naloxone kit to temporarily reverse the effects of the overdose while you wait for medical attention. See also the visual dictionary.</p>	
TYPE OF SUBSTANCE	COMMON SIGNS AND SYMPTOMS OF AN OVERDOSE
<p>Alcohol</p>	<ul style="list-style-type: none"> • blue/grey, cold, clammy skin • vomiting and not waking up • not moving, cannot be woken up • slowed breathing • loss of bladder and bowel control
<p>Stimulants (e.g., cocaine, crystal meth, MDMA/ecstasy)</p>	<ul style="list-style-type: none"> • seizures • pressure and tightness in chest • foaming at the mouth • racing pulse • excessive sweating • vomiting • headaches/dizziness/ringing in the ears • hard time breathing • sudden collapse • loss of consciousness/passed out (can't wake the person up)
<p>Opioids (e.g., heroin, morphine, fentanyl, methadone, OxyContin)</p>	<ul style="list-style-type: none"> • breathing is very slow, or irregular, or they may not be breathing at all • fingernails and/or lips are blue • body is limp • deep snoring or gurgling sounds • loss of consciousness/passed out (can't wake the person up) • unresponsive (not answering when you talk to them or shake them) • pinpoint (tiny) pupils
LEGAL INFORMATION	
<p>The Good Samaritan Drug Overdose Act protects you from being charged or convicted for drug possession if you call 911 to report an overdose, or if you are at the scene when emergency services arrive.</p>	

Visual dictionary

Alcohol



Cannabis



Cocaine rocks (crack)



<p>MDMA/Ecstasy</p>	
<p>Methamphetamines crystals/meth</p>	
<p>Narcan/Naloxone</p>	

Powder form of cocaine, fentanyl, or heroin



Vaping devices, a vape



Appendix B: Accessing and navigating Ontario's Virtual Learning Environment

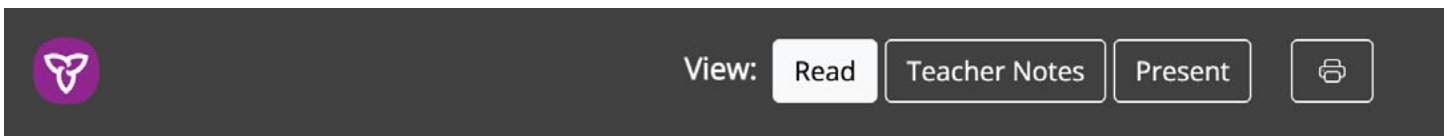
To access the Ministry of Education's Virtual Learning Environment (Ontario's VLE) you need to start at your school board's Virtual Learning Environment. Every school board in the province has its own Virtual Learning Environment, and the website addresses vary. Usually, the format of the website address is your board acronym followed by .elearning.ca.

To find your board's address, go to d2l.com/k-12/Ontario. Once you have selected your school board, you will be shown the URL to use as well as the name of the Technology Enabled Learning and Teaching (TELT) contact. This person can provide assistance with your school board virtual learning environment.

The following [video](#) demonstrates how to access the VLE as well as the modules.

Within the VLE, there are tools to enhance your interaction with the content:

- A sorting tool offers three views to filter content to ease navigating the content:
 - Read — displays all the content (e.g., instructions, tips, optional extensions, discussion guides).
 - Teacher notes — shows only the notes, materials, and supports needed for delivering the lessons.
 - Present — includes all the student-facing tools (e.g., slide decks, videos, etc.)
- A print button makes it easy to print a hard copy of any of the materials or save them as PDFs.
- Embedded throughout the modules are links for downloading materials such as slide decks, graphic organizers, and discussion guides to be downloaded.



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