

• *Plan*

• *Build Partnerships*

• *Evaluate*

Substance Abuse Prevention: Who is Responsible?

Some people think schools are solely responsible for educating youth on the risks of alcohol, tobacco and other drugs. Others think that schools should not be providing education on this topic and that it is the sole responsibility of parents. Substance abuse prevention is the responsibility of everyone: schools, community, and families. Research tells us that in order to be effective with substance abuse prevention programs, we need to take a comprehensive approach and that we all need to work together towards the common goal of delaying, preventing and reducing substance use among youth.

Schools have a role in substance abuse prevention, but should not be relied on as the primary source for preventing the early initiation and consequences of alcohol and other drug use. One US study looked at how drug education is actually taught, identified barriers teachers face in teaching prevention, and identified the types of training, support, and materials educators need to improve the effectiveness of their drug education efforts. A national advisory committee of experts in education met several times to discuss the survey results and formulated recommendations. In their recommendations they state:

1. Schools should not be relied on or act as the principal provider of general prevention education. They can and should play a role as part of a comprehensive community prevention strategy including parents and other social institutions.

2. School systems should carefully reevaluate money and time spent on outside programs and speakers and unfocused printed materials because they are likely to have no lasting impact on what they know about alcohol and drugs or on their drinking or drug taking behavior.

3. Schools and communities should pursue opportunities to expand the use of prevention programs and curricula that have been shown by research to be effective.

4. Teachers should have easy access to materials that use prevention methods that have been shown by research to be effective and are organized for presentation within the time constraints that actually exist in most schools.

Source: Prevention Education in America's Schools: Findings and Recommendations from a Survey of Educators

To see the recommendations and report in full [click here](#)

PREVENTION TIPS For Schools

Components of effective prevention programs:

- Help students recognize internal and external pressures to drink or use drugs
- Provide normative information
- Involve family and the community
- Use interactive teaching methods
- Help students develop refusal skills
- Use developmentally appropriate materials
- Consist of a minimum of eight sessions supplemented by at least three booster sessions
- Include teacher training and support
- Are easy to implement

Research has shown that these widely used strategies have little or no effect:

- One-time assemblies
- Personal accounts of people in recovery
- Scare tactics
- Curricula that only provide information on drugs and their dangers or only promote self esteem



Available Resources & Workshops

Making Decisions Series

A leading education initiative to combat drug and alcohol abuse and encourage social responsibility. **Grades 4, 6, 7, 8 & 9** < [More info](#)

Parents as Preventors™

Workshops designed for parents emphasizing the central role parents play in influencing their children to make healthy choices regarding alcohol, tobacco and other drugs. < [More info](#)

Professionals as Preventors™

A customized drug prevention workshop for professionals at Pro-D days or community based events. < [More info](#)

drugfacts.ca

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ASK AN EXPERT

Teachers often do not have any formal training in drug education. Are they the best people to be teaching this topic to students?

There are an increasing number of topics that fall under the area of “social and emotional learning” that teachers are currently facing in classrooms today. The new “Health and Career Education” curriculum designed for students in Kindergarten through grade 10 addresses many of these issues. However, the area of health education is an emerging profession and one that requires specific training for educators.

As teacher-education programs in B.C. Universities have not previously included Health Education, Social Responsibility or Social and Emotional Learning as part of their pre-service programs, schools have had little choice but to assign untrained teachers to address these sensitive issues in classrooms. Teachers have been inclined to merely deliver information on drugs, sexuality, and other health issues. Many teachers,

finding themselves in areas out of their own expertise, have relied on outside experts to come into their schools to “cover” these topics.

It has become increasingly clear, however that “telling isn’t teaching” and merely passing along information is not helping students to develop the attitudes, skills and behaviours that they need to confront these personal and societal issues. It has also become clear that the essence of any successful prevention program is in building student’s “core-self” or their social and emotional development.

At the heart of any prevention program there must be the five competencies of self-awareness, self-management, social awareness, relationship skills and responsible decision making through critical thinking. It is here that teachers will need to focus their own competencies, rather than on “information delivery”.

The strength of any successful teacher is in the relationship that she holds with her students. As an approachable adult, teachers are able to build

trusting relationships that then form the foundation for any learning. When issues are addressed within this trusted, respectful relationship, answers and advice are developed together. Information seeking becomes part of the solution, but the self-awareness and self-understanding are the key elements to building healthy children. It is time that we spend more time and effort on building these core strengths rather than trying to eliminate the inevitable social ills that will always be a part of our society.

Are teachers the best people to address drug education in schools? They are undoubtedly our best hope. A healthy, trusting relationship between students and teachers provides the opportunity for far more than information sharing; it is the foundation for social and emotional learning and for developing health, from the inside out.

Joanne Matheson
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ACTIVITY CORNER

One of the goals of substance abuse prevention is to de-normalize alcohol and other drug use by youth. That is, to try and debunk the myth that “Everyone is doing it”.

Try this activity:

How Many People Really Use Alcohol, Tobacco and Marijuana?

Grade Level: Grade 7-9

1. Display a chart similar to the one below leaving the “actual” column blank.

	Estimates	Actual
Never tried cigarettes		89%
Never tried marijuana		84%
Never tried alcohol		67%

Statistics from 2003 Adolescent Health Survey for 13 year olds (The McCreary Centre Society)

- Ask students to estimate how many 13 year olds (or the age of the majority of students in the class) in BC reported **never using** alcohol, tobacco, or marijuana and record their answers in the column labeled “estimates”.
- Give students the actual numbers and compare answers.

[Click here](#) for more detail .

RESOURCES

Books:

1. Cynthia Kuhn, Scott Swartzwelder, and Wilkie Wilson, 2002,

[Just Say Know: Talking with Kids about Drugs and Alcohol.](#)

Review: www.norton.com

2. National Institute on Drug Abuse, 2004, [Preventing Drug Abuse among Children and Adolescents](#)

To download or order:
www.drugabuse.gov

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