

Drug education in NSW government schools

All members of the school community have a responsibility for educating students about drug use, protective strategies and building skills to make effective decisions now and in the future.

Purpose of the document

This document includes information on:

- why we need drug education in NSW schools
- policy and legislation relevant to drug education in NSW government schools
- best practice principles for teaching and learning in drug education
- references and resources for teachers and principals.

Drug education in NSW government schools

Drug education should begin before children and young people are likely to face situations when they make decisions about drug use and before behavioural patterns have become established.

Age appropriate drug education forms a part of the mandatory Personal Development, Health and Physical Education (PDHPE) K-10 curriculum and Life Ready course for students in Year 11 and/or 12.

The NSW PDHPE K-10 syllabus and Life Ready course provide the evidence based guidance for age appropriate content.

The focus of drug education in NSW government schools is on the drugs to which young people are most likely to be exposed to. This includes medications, tobacco, alcohol and cannabis.

Why do we need drug education?

Effective drug education will assist students to:

- acquire knowledge and understanding of the complex issues involved in drug use, including up-to-date information about drugs and their effects
- critically examine the influences on drug use
- develop skills to communicate assertively, including how to say no, and the skills to make informed decisions, solve problems and seek further information or help from relevant support and information services
- develop attitudes and values that promote a healthy lifestyle.

Young people who have begun to use drugs need safety messages about risks and how to reduce risks, including how to reduce or stop use.

Drug education in NSW government schools reflects the whole of government harm minimisation approach. It aims to promote resilience, and build on knowledge, skills, attitudes and behaviours to enable young people to make responsible, healthy and safe choices.

School drug education is most effective when it utilises a whole school approach to health promotion, prevention and early intervention to student wellbeing and engagement, based on the principles of harm minimisation.



Research on drug education programs

The potential for drug-related harm to affect young people, along with other health and social issues is influenced by a range of factors that occur in the many different domains of their lives, including the community, family and school.

Research literature shows that young people's attachment and connection to others, through the quality of their relationships and their social environments, affects their health and academic achievement, which in turn affects a range of behaviours including drug use.

Drug education activities will be more effective when they are part of a comprehensive whole school approach to promoting health and wellbeing for all students, rather than in isolation.

A whole school approach should incorporate links to the curriculum, school policy, wellbeing programs, school ethos and values, interpersonal relationships and effective partnerships with parents and services in the wider community.

Nurturing a positive climate and relationships across the school community is as fundamental to addressing drug-related harm for young people as is determining appropriate classroom programs.

A safe and supportive school environment is protective for young people against a range of health related risks, including substance use problems. A positive climate within and beyond the classroom fosters learning, resilience and wellbeing in students and staff.

An inclusive school provides a setting where students, staff, families and the broader community can connect and engage in meaningful learning, decision-making and positive relationships.

School education is about preparing young people for healthy, fulfilling adult lives. Providing comprehensive drug education supports this.

What does the research tell us about children and young people?

It may be shown differently by the media, but the truth is that the proportion of students in NSW using tobacco, alcohol, cannabis and other illegal drugs has continued to decrease since 1999.

The **Australian School Students' Alcohol and Drugs Survey** (2017) found that:

- 82% of students had never smoked
- 54% of students reported not using alcohol in the previous year, an increase from 2011
- 83% of students reported never using cannabis
- the large majority of young people have never tried an illegal drug
- 97% of students have never tried amphetamines including ecstasy, ice and hallucinogens.

Existing school-based education programs play a key part in the trends associated with reduced alcohol use from young people.

Drug education needs to be relevant to all students. In providing programs, schools should be sensitive to the broad continuum of student experience.

Diverse components of identity, including gender, culture, language, socio-economic status and developmental stage, should be considered when providing drug education that is targeted to meet students' needs.



What do students learn through drug education in NSW government schools?

The NSW PDHPE K-10 syllabus and Life Ready course provide the evidence based guidance for age appropriate content. Stage based content means teachers have the flexibility to deliver content at a time that meets the student needs – based on maturity, local context, learning progression.

about their health and wellbeing. Using a strengths based approach focuses on the capacities, competencies, values and hopes of all students, regardless of their current circumstances. Students are encouraged to use their own strengths in a wide range of situations to optimise their own and others' health, safety and wellbeing.

All members of the school community have a responsibility for educating students about drug use, protective strategies and building skills to make effective decisions now and in the future.

Principals and teachers should work with their communities to identify localised issues and plan and implement teaching and learning programs to support student learning and support needs.

Learning should address the issues and experiences that children and young people may encounter in their school and early adult years in a manner that builds connections and engages students in an active and meaningful way. Using student voice and student perspectives is the best way of ensuring learning remains current and meets student needs in their local context.

Under the Local Schools, Local Decision reform schools also have the capacity to engage in targeted programs or strategies that meet the identified needs of their students and which are best suited to their context.

Classroom based drug education should be evidence based and reflect best practice. Primary teachers and secondary PDHPE teachers are equipped to deliver the curriculum. Teachers have an in depth knowledge of the curriculum, their students' needs and abilities and understand the context of their school community.

Teachers have expertise in teaching and learning, and knowledge of their students' needs, abilities and the ways they learn. They are skilled in developing teaching and learning programs that address the needs of students within a curriculum context. Principals and teachers have primary responsibility for education programs in schools.

Principals may choose to engage external providers or guest speakers to supplement curriculum delivery or meet outcomes of drug education. While collaboration with external agencies can be beneficial to schools, this relationship should not result in external personnel being the sole source of curriculum delivery in any key learning area.

Research indicates that one-off speakers or sessions, isolated from the context of a planned approach to education, will have minimal effect in enhancing students'

knowledge and skills. Visiting speakers should be used only in situations where their visit adds value to existing teaching and learning practice, for example Life Education.

Partnerships may include service delivery and links to community health or health organisations. Working in partnership with health and community services increases students' awareness of the range of services available and where to find them. This can assist in building students' trust and confidence to access services and provide links between young people, the school and appropriate services. Community services can also be used to enhance staff knowledge and understanding of relevant contexts and consequently assist in building the capacity of teachers to deliver effective education programs.

The **Guidelines for Engaging External Providers for curriculum implementation** provide support for school leaders and school communities that are considering the engagement of an external provider to support teaching and learning programs that address curriculum requirements in public schools. It provides a checklist of key considerations.

The use of shock and fear in teaching and learning programs

Research has consistently found that programs which attempt to use shock tactics or activities to frighten young people by focusing on disastrous consequences of risky behaviours are ineffective.

These experiences, warnings and key messages may not match young people's personal experiences or perceptions. It often results in them detaching and feeling that they are not part of an 'at risk' group. It is recommended that schools do not engage external providers that use shock or fear tactics. This includes the use of former drug users or individuals who have experienced trauma or disastrous consequences as a result of drugs or drug related situations.

The use of shock and fear can trigger feelings of anxiety and an emotional response in students, and teachers. Working in partnership with school staff to support students who find content confronting is crucial. This includes ensuring support staff such as the school counsellor are aware of when this content will be delivered.

This is in addition to creating a supportive learning environment and allowing students to withdraw from activities where required.

Learning experiences that are planned to encourage students to reflect critically on issues, share thoughts and feelings, plan for action and contribute in a positive manner are found to be most effective.

Creating a supportive learning environment

Drug education can be confronting and sensitive for some children and young people. Teachers need to **create a supportive learning environment** so students feel safe to learn and ask questions.

There are number of steps teachers can take to ensure their classroom environment is a safe place for all students when talking about drugs and drug related situations.

Students should be made aware at the beginning of educational programs that disclosures that indicate they may be at risk of harm will be reported to the school principal in all instances. This includes personal disclosures related to drug use or illegal activity.

It is important to enable students to withdraw if they find issues personally confronting and to protect them from making harmful disclosures. Equally, it is important that teachers are prepared for issues that arise as a result of a student making a disclosure.

1) Create a class agreement and expectations

It is important to set consistent classroom rules as well as reinforce positive behaviours.

Establishing and maintaining guidelines and boundaries for students will encourage mutual respect and allow for positive relationships to develop in the classroom.

A useful strategy is to engage students in the development of these expectations. Below are some examples of expectations you could use for discussion:

- listen to different ideas without 'put downs'
- no interruptions while someone is talking
- stick to the point
- everyone has the right to speak
- each person is responsible for his or her own behaviour
- what other people say in class is confidential
- never refer to someone by name when giving an example
- always support each other
- respect other's cultural traditions, beliefs, values and languages
- everyone has the right not to offer an opinion.

2) Discourage public disclosures

Teachers can actively discourage disclosures of personal or sensitive information. Keep discussions global rather than personal, as this will enable all students to discuss issues more freely. Encourage students to talk in third person, for example, "If a person... what if someone..."

3) One step removed

One step removed is a strategy that allows students to explore a range of sensitive issues without confrontation or personal threat. One step removed suggests teachers use fictitious case studies, moral dilemmas or any techniques that dissuade students from talking in the first person in class discussions.

Instead of the direct "what would you do if..." approach, teachers substitute:

- "suppose this happened to someone...what advice would you give them?...what could they do?"
- "imagine someone was feeling...what advice would you give to help them in their situation?"

When exploring possible outcomes of case studies or moral dilemmas, it is important to use conditional language: such as "...this might happen" or "...this could happen", never use "this will happen".

4) Protective interrupting

Protective interrupting involves teachers interrupting students who begin to disclose private information, e.g. "It sounds as though you want to talk about this. Why don't we talk about it after class?"

After protective interrupting, guide the discussion back to one step removed.

More information on how to create a supportive classroom environment can be found on the **PDHPE website**.

How does best practice drug education comply with and reflect NSW policy, legislation and frameworks in NSW government schools?

Drugs in school policy

School should use consistent policy and practice to inform and manage responses to drug-related incidents and risks.

The Department's Drugs in School Policy sets out requirements for schools to plan and implement appropriate responses to drug related incidents, with an emphasis on prevention through drug education and safe and supportive school environments, and intervention and support for students who may be involved.

This policy covers the possession and use of alcohol, tobacco, illegal drugs and the misuse of over-the-counter and prescribed medications, including the supply of restricted substances, on school premises by students. It also covers the possession and use of alcohol and tobacco on school premises by employees and visitors.

Principals must ensure that all drug-related incidents are managed in conjunction and consistent with Drugs in Schools Procedures for Managing Drug-Related Incidents and the **Suspension and Expulsion of School Students - Procedures (PD/2006/0316)**.

Controversial Issues in Schools Policy

Some members of the community can consider aspects of PDHPE and Life Ready, such as drug education as sensitive or controversial.

The Department's **Controversial Issues in School Policy** and **Implementation Procedures** provide direction for the management of controversial issues in schools.

It is essential that principals maintain communication with parents and carers on teaching and learning programs, visiting speakers, external providers and other school activities, including student organised activities, in which controversial issues may be addressed. Parents and carers need to be advised of the specific details of school activities, programs or events addressing controversial issues and the relevance to the curriculum and school programs and activities.

Where advice is appropriate, it must be given prior to the occasion so parents and carers can provide consent or withdraw their child from a

particular session(s) on controversial issues. The parental right to withdraw their child must be respected.

Evaluation of school programs indicates that, where parents and carers have an understanding of the program, students' learning is improved.

Where parents and carers indicate they wish to withdraw their child from a program it is useful to negotiate which parts of the program they are concerned about. Schools should implement a consultative process to ensure parents and carers have opportunity to participate in discussions on both curriculum content and teaching and learning materials where appropriate to ascertain whether parts of the program need to be modified.

There are many misconceptions about what students learn about and how students learn in drug education. Communication with parents and carers assists the community to better understand the content and aims of the programs.

Establishing how parents will be informed about programs and involved in consultation is a school-based decision.

Where appropriate, schools can support parents and carers by providing them with current information about a wide range of drug related issues.

Schools working in partnerships with parents and carers can also dispel some of the anxiety parents may experience from an expectation that drug education is their sole responsibility.

Child protection and wellbeing

The legislation passed in 2009 for the Keep Them Safe: A shared approach to child wellbeing stipulates that all NSW agencies which provide services to children, young people and their families, or whose staff come into contact with children and young people in the course of their work, are considered to have a particular role in protecting children and young people from harm.

Employees of the NSW Department of Education have responsibilities under the Children and Young Persons (Care and Protection) Act 1998 relating to the reporting of concerns about suspected risk of significant harm and risk

of harm to children and young people to their principal or workplace manager.

The **Mandatory Reporter Guide (MRG)** can assist in making an informed decision regarding child protection concerns. If concerns about the safety, welfare or wellbeing of children or young people constitute risk of significant harm, principals must report these to the Child Protection Helpline on 133627.

The Child Wellbeing Unit can be contacted on 9269 9400 when staff are unclear about how to use the MRG, wish to get advice on the MRG or the MRG indicates to contact the Child Wellbeing Unit.

Education has an important role to support children and young people and to identify where problems arise that may put their safety, welfare or wellbeing at risk. All staff must convey risk of harm concerns to the principal.

Child Protection Policy: Responding to and reporting students at risk of harm sets out the responsibilities of NSW Department of Education employees under the legislation. All staff have a duty to recognise safety, welfare or wellbeing concerns for children and young people that arise from or during the course of their work. If staff have reasonable grounds to suspect risk of significant harm to a child or young person, they are required to tell their principal or workplace manager.

Staff employed by the NSW Department of Education are expected to plan for a safe environment for all student activities. The safety, welfare and wellbeing of children, young people or students are paramount.

Student's needs and welfare are the primary concern and the primary focus of professional practice. Professional knowledge and practice need to be examined in terms of their potential for furthering the best interests of children and young people.

Student focused practice includes:

- respect
- age/ developmentally appropriate responses
- realistic expectations
- empathy
- focusing on the student's needs

- ensuring the student is able to participate in decision making about his or her future
- maintaining appropriate boundaries
- promoting positive experiences and outcomes.

Source: NSW Department of Education, Child Protection Awareness Training – Section 3 Professional Practice – e-Learning reading, updated 2015.

When planning programs, teachers should review the content of sensitive or controversial material to ensure it is appropriate to the development, experiences and cultural values of their students.

It is recommended that sensitive subjects be planned for later in the school year, when respect and trust has been developed between students and with the teacher.

Code of conduct

Teachers continually use their professional judgement to decide on the best strategies, resources and teaching and learning methods for any given situation.

In making these judgements, teachers must take into account the age, maturity, health and other characteristics of children and young people. They must also be aware that their own conduct at all times, must be keeping with that specified in the **Department's Code of Conduct** and of their role and responsibilities pursuant to it.

Resilience research confirms that the presence of a caring adult in aspects of their lives is important in assisting students to overcome adversity and achieve at school.

Effective teaching in PDHPE relies on positive relationships that are developed in a professional manner. The teacher is, by the nature of their role, in a position of trust, authority and influence.

Positive relationships can have a significant impact upon students' educational progress, social and emotional wellbeing and behaviour and have the responsibility and authority to manage interactions and situations.

Relationships need to be carefully managed for the safety of all involved.

Effective teaching and learning is supported by establishing a trusting relationship between student and teacher that:

- focuses on the needs of the student
- models and fosters caring and supportive relationships to increase

- self confidence, awareness and management of behaviour
- positive attitudes towards assisting others.

Clear guidelines are provided to ensure appropriate relationships with clear expectations of the student and teacher.



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