Keeping them connected

A national study examining how Catholic Schools can best respond to incidents of illicit drug use

Father Peter Norden SJ

March 2005

Jesuit Social Services
Standing in solidarity with those in need
Expressing a faith that promotes justice
Acknowledgments

This project was funded by the Australian Government Department of Education, Science and Training under the National School Drug Education Strategy.

Jesuit Social Services also wishes to thank the National Catholic Education Commission for its in principle support of this project. We are indebted to the Catholic Education Commissions and the Catholic Education Offices throughout the country without whose assistance and cooperation this study would not have been possible. Our thanks also to the Catholic Secondary Schools and Personnel who participated in this national study, and to consultant, Bernadette Murphy, for her expert knowledge and input into the project.
Contents

PREFACE ........................................................................................................................................... 7

CHAPTER 1: REDUCING THE HARM OF ILLICIT DRUG USE IN CATHOLIC SCHOOLS .............................................................. 9
1.1 Introduction ....................................................................................................................... 9
1.2 School Drug Policies ...................................................................................................... 11

CHAPTER 2: LITERATURE REVIEW .................................................................................... 13
2.1 Background .................................................................................................................... 13
2.2 Community Perceptions of Illicit Drug Use and the Media ...................................... 13
2.3 Patterns of Illicit Drug Use in Young People ............................................................... 14
2.4 Reasons for Using Illicit Drugs ................................................................................... 15
2.5 History of Drug Education in Australian Schools ..................................................... 16
2.6 Harm Minimisation versus ‘Zero Tolerance’ ............................................................... 19
2.7 The Role of Schools ....................................................................................................... 19
2.8 Why a Drug Policy? ...................................................................................................... 20
2.9 Catholic Education Policies ........................................................................................ 20
2.10 Catholic Education Commission Guidelines ............................................................. 21
2.11 Catholic Education Commissions’ Guidelines for Responding to Drug Related Incidents ................................................................. 22
2.12 Schools Responses to Illicit Drug Use ......................................................................... 23
2.13 Expulsion of Students: what does it mean? ................................................................. 24
2.14 What happens to early school leavers? ...................................................................... 25
2.15 Evidence of good practice .......................................................................................... 25
2.16 Conclusion .................................................................................................................... 26

CHAPTER 3: HOW THE CONSULTATION WAS UNDERTAKEN ........................................ 27

CHAPTER 4: KEY ISSUES EMERGING FROM THE CONSULTATION ........... 29
4.1 A Balanced Response .................................................................................................. 29
4.2 Assessing the Incident ................................................................................................. 30
4.3 Input by School Personnel in Determining Response ................................................. 32
4.4 Student Drug Use as an Indicator of Mental Health Disorder .................................. 33
4.5 Communication with Police ....................................................................................... 34
4.6 The Question of Confidentiality ................................................................................ 34
4.7 Catholic School as a Nurturing Environment ............................................................. 35
4.8 The Collaboration with Outside Professional Agencies .............................................. 37
4.9 The Practice of Transferring Students to Other Schools........ 38
4.10 Expulsion Policy in Catholic Schools........................................ 39
4.11 Different Categories of Sale of an Illicit Substance ................. 40
4.12 Drug Testing in Schools............................................................. 41
4.13 A Consistent Ethic in Catholic Schools Drug Policies .............. 42
4.14 Alcohol Use and Binge Drinking ............................................. 43

CHAPTER 5: CONCLUSION........................................................................45

CHAPTER 6: RECOMMENDATIONS ..........................................................47

BIBLIOGRAPHY..........................................................................................49
Appendix 1: Interview Schedule for the Staff of Catholic Education
Offices....................................................................................................... 53
Appendix 2: Interview Schedule for the Principals of Catholic Schools
................................................................................................................... 54
Appendix 3: Interview Schedule for the Teachers and Welfare
Personnel of Catholic Schools............................................................... 55
Preface

This national study of how Australian Catholic secondary schools can best respond to incidents of illicit drug use by students addresses a difficult and complex issue.

Jesuit Social Services is vitally interested in this area because for almost thirty years we have been working with young people whose lives have been damaged by their substance misuse. For many, their difficulties were first identified when they were still in secondary school. Often the consequent community responses left them less connected and more vulnerable. In keeping with Commonwealth Government frameworks and guidelines in this area, Catholic schools which are responsible for the education of more than one in five Australian school students, uniformly seek to keep their learning environments ‘drug free’.

Knowing that the use of illicit substances by young people is not uncommon, no school principal these days remains unaware of how such activity can impact on the behaviour, performance and interaction of a student within the school context.

Occasionally, in every school around the country, students are detected as having been in possession of, or having used, illicit substances in school hours, or in a school related activity. Very few schools can claim not to have been affected by such an occurrence. How the school administration responds to such isolated incidents can be a critical issue - for the student concerned, for the general student body and for the school community.

While recent surveys indicate that there is a significant group of young people who have used illicit substances, often such use is situational or experimental, and does not represent compulsive or seriously problematic behaviour. Nevertheless, serious addictive behaviour by young Australians usually has its foundations in early teenage years. Therefore, it is important for educational authorities to be able to distinguish and identify such behaviour from an isolated incident that does not call for an intervention leading to formalised drug treatment.

In earlier years, a ‘zero tolerance’ approach was often seen to be the best response, in that it sent a clear message to all students and to the wider community that schools must remain a ‘drug free zone’. Students detected in possession of, or using, illicit substances in a school context were transferred to other schools or expelled.

This response was seen to be successful in some respects in that it was thought to have protected the school community and to have given the identified student an opportunity for ‘a fresh start’.

In more recent years, many school principals have undertaken a serious reassessment of this approach. On consideration, the approach was seen to be effective in protecting the school’s reputation as being ‘tough on drugs’, but questionable with respect to the school’s duty of care for the student concerned. The message often received by other students in the school was: “don’t allow your continuing drug behaviour to be detected by school authorities, and if you or another student has problems in relation to illicit drug use, don’t approach school authorities for assistance”.

Jesuit Social Services
As a consequence, many Australian Catholic schools have done considerable soul searching in assessing the appropriateness of this response. They identified that too often that response simply shifted the problem. In many cases the student transferred was not a student who could be assessed as having serious problems in this area, but as someone who was merely engaged in experimentation.

There is a growing awareness that a more fitting focus for Catholic secondary schools should be: How best to respond to the interests of the student concerned, while respecting the duty of care to other students.

In almost every Catholic secondary school that I visited as part of this investigation, I saw in the Reception area or later in the Principal's office, a Mission Statement that spoke of Christian values of inclusiveness, forgiveness, healing and justice. A closer consideration of these values in recent years has led many schools to change their practice in responding to incidents of illicit drug use by students.

The findings of this investigation provide some important guidelines for Catholic schools wishing to further develop their practice in this complex and sensitive area. Any suggestion that a simplistic, single dimension response could ever be appropriate would be foolish. There is a wide range of Catholic schools operating in vastly different localities and contexts: from very large metropolitan centres such as Sydney and Melbourne, through to extremely isolated schools in the Northern Territory including Port Keats and Bathurst Island. However, there are key principles that can be applied in each school seeking to establish good practice in response to students’ use of illicit substances.

Foundational Christian principles need to be central to upgrading our policies and improving our practices in this area.

This policy dimension could become an important distinguishing characteristic of Catholic independent schools and Catholic Systemic Schools in their task of shaping the lives of young Australians through their ministry of education.

Father Peter Norden SJ
Policy Director
Jesuit Social Services
Chapter 1: Reducing the Harm of Illicit Drug Use in Catholic Schools

1.1 Introduction

In 1999, the Council of Australian Governments agreed on the need for national action involving the explicit rejection of the use of illicit drugs. In relation to schools, the Council affirmed that illicit drugs have no place in schools and agreed to strengthen the response to drug use within schools. The Commonwealth agreed, with the support of the States and Territories, to provide resources to increase the capacity of schools and school communities to respond to illicit drug use through the development of enhanced protocols. The aim was to enable school communities to develop better ways of managing drug use in the school environment on a nationally consistent basis (DETYA 1999).

The Catholic Education System, which is responsible for over 600,000 students, representing approximately 20 percent of all students nationally (see Table 1), works within the National Framework for Protocols for Managing the Possession, Use and/or Distribution of Illicit and other Unsanctioned Drugs in Schools (DETYA 2000).

Table 1: Number of Catholic Schools and Students in Catholic schools in Australia

<table>
<thead>
<tr>
<th></th>
<th>Catholic Schools</th>
<th>Students in Catholic Schools</th>
<th>Students in All Schools</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACT</td>
<td>30</td>
<td>17,132</td>
<td>60,166</td>
</tr>
<tr>
<td>NSW</td>
<td>585</td>
<td>236,654</td>
<td>1,107,336</td>
</tr>
<tr>
<td>VIC</td>
<td>488</td>
<td>179,913</td>
<td>819,103</td>
</tr>
<tr>
<td>QLD</td>
<td>278</td>
<td>104,584</td>
<td>629,771</td>
</tr>
<tr>
<td>SA</td>
<td>107</td>
<td>44,640</td>
<td>248,815</td>
</tr>
<tr>
<td>WA</td>
<td>158</td>
<td>60,170</td>
<td>334,050</td>
</tr>
<tr>
<td>TAS</td>
<td>37</td>
<td>12,830</td>
<td>82,376</td>
</tr>
<tr>
<td>NT</td>
<td>15</td>
<td>4,668</td>
<td>37,003</td>
</tr>
<tr>
<td>Total</td>
<td>1,698</td>
<td>660,591</td>
<td>3,318,620</td>
</tr>
</tbody>
</table>

Source: Taken from Australian Bureau of Statistics, Schools, Australia, 2003, Cat No. 4221.0, Tables 2 & 4.
The National Framework was established consistent with the National School Drug Education Strategy (DETYA 1999), setting the goal of no illicit drugs in schools and incorporating three integrated approaches to drug use in schools:

- Supply reduction strategies
- Demand reduction strategies designed to prevent the uptake of harmful drug use, and
- Harm reduction strategies for individuals and communities.

These are the three key elements of the Health Promoting Schools Framework that has been widely adopted throughout the country. Individual States and Territories have applied this framework in their own particular situations. However, while there is a consistency of approach there is certainly no uniformity.

This is the policy context in which the Catholic Education System seeks to develop an effective response to illicit drug use by students in Catholic schools. There is much to be gained from the work of the Commonwealth Government with regard to frameworks and guidelines for policy development. The States and Territories have also attempted to apply these guidelines within the different regional areas of Australia. However, just as there is no uniformity across the States and Territories of Australia, so there is no uniformity within the Catholic Education System. The various Education Offices have borrowed from their State systems to different degrees.

For example, the West Australian Government’s strategy to reduce drug abuse and drug related harm in the community has had much to offer an effective approach within Catholic schools in that State. The West Australian Drug Strategy focuses on the need for a comprehensive approach and emphasises two principles:

- **Opposition to drug abuse:** a policy that emphasises the community’s opposition to abuse of legal and illegal drugs, and
- **Harm reduction:** a policy that recognises the need for strategies to reduce the risks and harm to those continuing to use drugs and to the wider community, while taking care that such strategies do not encourage or normalise illicit drug use (WAADA 2000).

In this consultation with the Catholic Education System across Australia, it was discovered that ‘harm reduction’ was accepted as a serious objective. The methodologies adopted generally reflected principles of ‘harm minimisation’. This terminology recognises the legitimacy of the ultimate objective of harm reduction, but within the context of prevention and minimisation of harm. This consultation with educational personnel found that the ultimate goal was the reduction of drug misuse.
1.2 School Drug Policies

Most Australian Catholic secondary schools have now developed a School Drug Policy. It is likely that, at some time, drug-related incidents will occur on school premises or involve members of the Catholic school community. A response will be required from the school. A school that has developed a comprehensive drug policy that addresses both prevention and intervention will be well placed to respond to such incidents in a planned and coordinated manner.

The consultation found that in many Catholic schools, their drug policy does not simply reflect the national frameworks established by the Commonwealth Government, but goes further to incorporate the specific values and mission of the school as a Christian ministry of education. The following quote is an example:

\[
\text{The Catholic school strives to create an inclusive Christian community where the message, practice and values of Jesus Christ, as proclaimed in the Gospels, are given practical expression. In this community, the cooperation of each member is required in order to create the common good. Any elements of behaviour that seriously affect or endanger the wellbeing of the community need to be addressed with Christ-like compassion} \quad \text{(Catholic Education Office of Western Australia on the Expulsion of Students for Disciplinary Reasons).}
\]

Across Australia the resources and support services able to be provided by either the State Education Office or the Catholic Education Office differ greatly.

The main source of the funding for the Catholic education system in this area comes from the National School Drug Education Strategy. The support for the States and Territories, however, varied immensely. Considerable support and cooperation was reported from the Catholic Education Offices in Victoria and Western Australia. In other States it appeared that the financial support and collaboration between the Catholic Education Office and the State Education Departments varied a good deal. As a consequence of such varied support in terms of policy advice and funding, when individual school principals were required to resolve a detected incident of drug use by a student in a Catholic school, their capacity to respond in a thoughtful and consistent way was sometimes found to vary from State to State.

This report attempts to highlight some of the ‘good practice’ that was found in the Catholic education system in different parts of Australia in the hope that the formulation of this material will be of assistance and guidance for school principals.

The investigation focused on incidents where students were found to be in possession of, or having used, illicit and unsanctioned substances. This included alcohol, tobacco and non-prescribed medications, as well as illicit substances such as cannabis, amphetamines and ecstasy. As the pattern of drug use among Australian young people suggests (see Table 2), students excessive use of alcohol is clearly the area of greatest concern for many teachers and parents. There is also considerable and growing concern about the extent of tobacco use by young teenagers and the health implications of this, especially for young female students.

Much of the focus of this investigation however, was on the illicit substances, as students’ possession or use of these substances raised complex and difficult issues for school administrators and senior staff at Catholic Education Offices across the country, as reported by many of the educational staff who were consulted.
Table 2: Patterns of Drug Use among Australian Young People

- 20 per cent of males and 17 percent of females, aged 14-17, said they were ‘regular’ drinkers of alcohol;
- 35 per cent of young people in this age group were assessed to be drinking at a level that put them at a high risk of death or injury in the short term;
- among young people aged 14-17, 21 percent said they had used cannabis in the previous twelve months;
- Young Australians aged 14-24 years, think that heroin and cannabis are ‘problem’ drugs, but that alcohol, amphetamines, cocaine, tobacco and ecstasy are not;
- the most socially ‘acceptable’ drugs were thought to be alcohol, tobacco and cannabis.

Chapter 2: Literature Review

2.1 Background

Drug and alcohol misuse by young people is a concern for schools, parents and the community, particularly when it involves illicit drug use by school students. There is a widespread perception that young people who become involved in illicit drugs are at greater risk of not achieving successful life outcomes. As such, there is pressure on governments, both statewide and nationally, to address the issue of drug use by young people.

This literature review will explore what is known about:

- The level of drug use by young people of secondary school age
- State and national policies in relation to drugs and schools
- The role of drug education in schools
- Why the need for a school drug policy
- The role of school in a young person’s life.

The recent extensive research by the National Drug Research Institute and the Centre for Adolescent Health found that secondary schools aim to better prepare young people for school, encourage positive interpersonal relationships at school, ensure effective discipline, maximise learning opportunities and maintain drug free environments. Findings from the research of these two agencies suggest that school organisation and behaviour management practices can influence youth drug use (Loxely et al. 2004).

Professor Margaret Hamilton, a member of the Australian National Council on Drugs, has often advised that most young people will have access to legal and illegal drugs if they want them, and many have exposure to them even when they have not sought them. Hence, we have a responsibility to prepare them for this exposure.

2.2 Community Perceptions of Illicit Drug Use and the Media

Media representation of young people using illicit drugs is often alarmist and raises community concern even though the research reveals that the majority of young people do not become involved in illicit drug use. For example, the Brisbane Sunday Mail recently reported that “there is widespread drug use in our schools or, at least, many students bringing their drug habits into the classroom. Whatever the size of the problem, to pretend drugs are not used in our schools would be an exercise in denial. No reasonable person would expect schools to be quarantined from a contagion that is endemic in our society” (Sunday Mail 27/6/04, 92). Emotive language such as ‘drug habits’ and ‘contagion’ only serve to heighten community concern.
Recent surveys indicate that most students are not regular users of illicit drugs. Bob Aldred of the Queensland Drug and Alcohol Foundation states that “the vast majority of young people experiment once or twice and then stop” (quote in the Sunday Mail 27/6/04, 15). The Victorian Department of Education, Employment and Training (DEET) supports this understanding by acknowledging that young people’s use of illicit drugs is usually social and experimental, associated with exploring altered states of consciousness, and imitating adults. However, it also recognises that drug use can and does cause harm, and any illicit drug use by young people is cause for careful consideration. For a smaller group of students, use can be regular, problematic or dependent. This closely mirrors the pattern and profile of drug use by the adult population. Although harm is more likely to be associated with regular or problematic use, it can also occur with experimental or social use, or when two or more drugs are used at the same time (poly-drug use). Addressing these different patterns of use, and non-use, requires different strategies (DEET 2000).

2.3 Patterns of Illicit Drug Use in Young People

Statistics about the level of drug use by secondary school students come from both the Victorian Department of Human Services (DHS) 1999 School Survey regarding over the counter and illicit substances (Effendi & White 2002) and the 2001 National Drug Strategy Household Survey conducted by the Australian Institute of Health and Welfare (AIHW 2002). Both surveys found that one in three secondary students reported using an illicit substance in the previous year, with the most common drug being cannabis. Fifty two per cent of senior students had tried cannabis, with 15 per cent reporting regular use. The research indicated that use of drugs such as ecstasy, cocaine, amphetamines and heroin was very low, and most school-aged students had never used these drugs.

The Victorian Youth Alcohol and Drugs Quarterly Survey 2002 (DHS 2003) which was an extensive survey of 16-24 year olds, found that in the previous 12 months:

- 32 per cent had used cannabis
- 10 per cent had used amphetamines
- 12 per cent had used ecstasy and
- 4 per cent had used cocaine.

The survey also found that of the young people who had used any illicit drug, 30 per cent had gone to school or work under the influence of an illicit drug. An analysis of illicit drug use by an index of relative socio-economic disadvantage revealed that the highest prevalence of the aforementioned drugs was among those young people living in areas with the least socio-economic disadvantage. Interestingly, the two most common reasons for having tried an illicit drug were curiosity and being offered it by a friend (DHS 2003).

In identifying features of drug use patterns, the National Drug Research Institute and Centre for Adolescent Health study found that the use of cannabis during early adolescence significantly increases the risk of later illicit drug use (Loxely et al. 2004).

A 1999 survey by the Department of Human Services about Victorian secondary students’ drug use, found that the use of analgesics, alcohol and tobacco were the most common substances used by adolescents. Of the illicit substances, cannabis was the most widely used. However, fewer students reported using cannabis on a
regular basis compared with students who were using tobacco or alcohol regularly. Nonetheless, the use of illicit drugs by young people causes community concern and prompts calls for action in schools rather than the reality of secondary students regularly using alcohol and tobacco. Many schools themselves tend not to be alarmist when it comes to illicit drugs, but see the need to balance community perceptions and the effective running of a school (Effendi & White 2002).

2.4 Reasons for Using Illicit Drugs

The statistics of illicit drug use among young people indicate a range of patterns including non-use, occasional, regular and problematic use. This is reflective of the adult population.

Reasons young people choose to use illicit drugs are varied and complex but may include:

- alleviating feelings of distress
- relieving boredom, depression or sense of hopelessness
- having fun
- pushing boundaries
- curiosity
- celebrating or socialising with others who are using
- dependency (DEET 2000).

Recent research conducted on behalf of the National Illicit Drugs Campaign, looked at attitudes, perceptions and behaviours of young people. The study found that many young people think of drugs in terms of the relationship between risk and enjoyment. Different groups of young Australians hold quite different attitudes toward drugs and their potential functions.

The research also found that:

- cannabis is the most commonly used illicit drug in Australia (half of 17 years olds reporting ever used)
- it is perceived to be the least dangerous drug to use, even less so than tobacco
- young people clearly differentiate between the image and perceived effects of specific illicit drugs, and the ‘types’ of people who use these different drugs
- most drug users do not see themselves as being ‘at risk’ of harm from their drug use – the only real exception being heroin use, which was always thought to be dangerous. Most believe they have their drug usage under control
- the majority of both users and non-users believe they know more about the risks relating to drugs than people who might be considered ‘responsible’ for informing them, such as parents and teachers (Clark, Cook & Scott 2003).
Australian schools are under constant pressure to provide safe learning environments for all students and to help prevent negative outcomes for their students. While illicit and unsanctioned drug use is not seen as a major problem for most schools or for most students, where it does occur, it has the potential to disrupt families, academic performance, physical and emotional health. It can also hinder students chances of maintaining a current and life-long connection with education, and living well adjusted and fulfilled lives (DETYA 1999).

The continuum of drug use ranges from abstinence through to exposure, experimentation, occasional use, problematic use and addiction. However, sometimes drug use by some young people can be an indicator of a difficult journey through adolescence.

The National Framework recommends that schools should not assume that the possession, use and/or distribution of illicit and other unsanctioned drugs does not occur among students either at school or outside school hours. Consideration must be taken of the needs of the majority of students who do not use drugs but who may be affected by the drug use of others, thus schools need to provide programs and practices that address the needs of the whole school (DEST 2003).

### 2.5 History of Drug Education in Australian Schools

Programs, curriculum and initiatives in Australian schools, including Catholic schools, have a relatively short history compared to other traditional subject domains. Drug education began in the 1970s, with the emphasis on tobacco, and became more widespread in the 1980s centring on alcohol education. By the 1990s drug education had taken on national importance and resulted in the development of a common national approach to drug education in schools. Since then, in regard to education, harm minimisation has been the key principle underpinning Australia’s drug education strategy.

#### 1970-1985

Drug prevention programs have generally been equated with drug education in schools because it is one way to deliver factual information about drugs to young people. In the early beginnings of school drug education, it was found that drug education on its own had little impact on the behaviour of young people and the ‘scare tactic’ approach may have only increased students interest in drugs. The literature reveals that early models of alcohol education programs were largely unsuccessful and ineffective. Research by Munro (1994) showed that young people saw traditional alcohol education programs as failing to meet their needs and as attempting to enforce abstinence, which they perceived as an unrealistic goal. The focus on abstinence and teaching young people to ‘just say no’ also had little impact on young people’s drug use.
In their review of alcohol education programs, Harris and Sheehan (1995) defined the three traditional approaches to drug education as the Information Model, the Individual Deficiency Model and the Social Pressures Model:

- The Information Model provides the facts about alcohol and teaches that teenage drinking is bad and dangerous, and is based on the premise that if young people knew about the adverse affects of alcohol they would stop drinking. This model assumes young people are ignorant about alcohol and that all alcohol use by young people is, or leads to, alcohol abuse.

- The Individual Deficiency Model assumes young people who use alcohol do so because of individual problems and low self-esteem, resulting in poor social skills. Therefore, the solution is to improve and build on an individual's self esteem by instilling a sense of self worth. This model considers alcohol use as deviant behaviour and stigmatises those who use alcohol.

- The Social Pressures Model sees advertising and peer pressure as influential. It attempts to teach young people how to say 'No' by offering alternatives to alcohol use. The model assumes young people really want to say 'no' but do not know how.

Research by the Australian Drug Foundation also found many students believed that traditional alcohol education, which focused on changing behaviour and promoting abstinence, was not beneficial or relevant (Munro 1997). Harris and Sheehan (1995) claim that any approach that fails to take young people’s views into account or simply promotes the adverse effects of young people using alcohol or drugs, is not likely to be effective.

1985: Introduction of Harm Minimisation

Since 1985, drug education with the goal of harm minimisation has become central to drug policy and practice in the education sector. In Australia, harm minimisation recognises that despite the best efforts of policy makers, law enforcers and educators, some people will continue to use drugs and one of their tasks is to lessen the likelihood of personal and social harm.

The goal of harm minimisation involves a range of approaches to prevent and reduce drug related harm including prevention, early intervention, specialist treatment, supply control, safer drug use and abstinence. Harm minimisation strategies are carried out without condoning or encouraging drug use. In schools, the goal of harm minimisation allows the flexibility to develop specific focus areas and implementation strategies that address relevant issues within the school context.

Munro (1997) believes that harm minimisation has allowed schools to expand their delivery of drug education programs and encouraged them to respond to instances of drug use in a ‘pastoral’ rather than punitive manner. According to Principles for Drug Education in Schools (Ballard, Gillespie & Irwin 1994), the goal of harm minimisation should underpin drug education. School principals have reported to the consultant that harm minimisation enables them to communicate more honestly and effectively with students than is possible under a ‘just say no’ approach.
1997: Development of a national approach
The National Advisory Committee on School Drug Education was established in 1997 as part of the Commonwealth Government’s ‘Tough On Drugs’ initiative. The purpose was to bring the States and Territories together and to formulate the National School Drug Education Strategy that was released in 1999. This strategy was applied to both Government and non-government schools. With the prevalence of school drug education programs, came the need for a common and nationally consistent approach for schools to respond to drug related incidents. The Council of Australian Governments agreed in 1999 on the need for national action, deciding on the need for the explicit rejection of the use of illicit drugs. It was agreed that illicit drugs have no place in schools and the response to drug use in schools should be strengthened (DETYA 1999).

In June 2000, the Commonwealth Government released the National Framework for Protocols for Managing the Possession, Use and/or Distribution of Illicit and other Unsanctioned Drugs (DETYA 2000). The focus of the National Framework is on schools’ response to illicit drugs and other unsanctioned drug use. It highlights the need for both prevention (the provision of drug education and safe environments) and intervention (the provision of appropriate supports for students involved in drug incidents).

The National Framework recognises that individual schools and school jurisdictions at the State/Territory and non-government sector level have policies and procedures in place for responding to drug use and that they have primary responsibility for their implementation. As such, the National Framework has drawn upon good existing practice and presented guiding principles for schools to develop their own set of policies in relation to illicit drugs. This means that schools can take into account the characteristics of their own school community when creating drug policy (DETYA 2000).

This consultation discovered that each of the Catholic Education Offices use the National Framework in developing and updating their own policies and guidelines consistent for Catholic schools in their jurisdictions. The aim is for individual schools to develop a drug policy that is in keeping with the relevant state education authority.

According to McBride, Gillespie and Irwin (1995), research has identified policy support from government as a crucial factor in facilitating the conduct of school health programs. This is particularly relevant for school drug education, as the strategy is inclusive of all education sectors and has significant influence at the State and Territory level. An example of this is the Principles for Drug Education developed by Ballard et al. (1994) which have been disseminated nationally and underpin many initiatives in school drug education.

The National Framework recognises that schools and the wider community need to provide all students with information, strategies and skills to reject illicit and other unsanctioned drug use. Programs and practices need to encompass all students, including:

- those who choose not to use illicit drugs but who may be affected by the drug use of others
- students at high risk of using illicit and other unsanctioned drugs
- students found possessing, using and/or distributing such drugs (DETYA 2000).
2.6 Harm Minimisation versus ‘Zero Tolerance’

The goal of harm minimisation adopted by state and national governments has shaped drug education in Australian schools since the early 1990s. Munro and Midford (2001) argue that with regard to illicit drug use, schools tend to frame their approach in terms of abstinence outcomes and drug-free schools. For example, the goal of the National School Drug Education Strategy (DETYA 1999) is to have no illicit drugs in schools, therefore it is not surprising that there is confusion.

Declaring a ‘zero tolerant’ approach to illicit drugs in schools may mean that drug use is driven underground and young people who require assistance may not receive it. Zero tolerance demands conformity and punishes the slightest deviation from the ideal. On the other hand, the harm minimisation approach encourages schools to educate students about drugs and provide care and professional attention for a student when drug use becomes apparent. It has encouraged schools to deepen their commitment to drug education, allowing them to communicate more honestly with students and to respond to instances of drug use in a less confrontational and more caring manner.

Munro and Midford (2001) contend that a harm reduction approach does not fit comfortably in either the school or indeed, prison setting, because it implicitly challenges underlying assumptions that schools and prisons should be drug free. In reality, schools are not islands quarantined from the community. Inevitably they have to deal with low-level illicit drug use.

Munro (1997) also claims that the National School Drug Education Strategy is confusing in that it promotes zero tolerance of illicit drugs while also promoting the development of safe and supportive environments for drug users. According to this national strategy document, zero tolerance is specifically focused at school drug education programs and its purpose is to develop a drug-free attitude among school children and a culture of rejection of drug use.

The Strategy states that an ambiguous policy acts as a barrier to schools being able to deliver effective drug education. Responses need to be consistently supportive of young people. Youth drug use in itself is controversial and this can result in a lack of professional development for teachers in both curriculum development and pastoral responses to students affected by drug activity. While schools are more familiar with alcohol and tobacco, illicit drug use in schools poses a more complex set of problems, because of the illicit nature of such substances and their use or possession involves a criminal offence (DETYA 1999).

2.7 The Role of Schools

In her study on how schools construct the drug problem, Jaatinen (1999) identified three main themes. First, drug use and drug activities are largely invisible and, therefore easy not to acknowledge; second, schools often place the burden of responsibility back on the student and, therefore not address the challenge presented; third, teachers experience a tension between wanting to help drug users and the requirement to punish them. Young people who wish to assist their peers in relation to problematic drug use but fear getting them into further trouble with school personnel experience a similar dilemma. Heavy sanctions may alienate young people who are already using drugs and may inhibit them from seeking assistance for drug related problems.
2.8 Why a Drug Policy?

The National School Drug Education Strategy recognises schools are critical places to educate young people about the potential harms of drug use. It acknowledges that parents and school communities have a role to play in dealing with unsanctioned drug use among school students. School communities need to take action to prevent drug experimentation and usage by their young people and be able to respond appropriately to the harm that may arise (DETYA 1999).

2.9 Catholic Education Policies

The policies of the Catholic Education Offices in the States and Territories and the National School Drug Education Strategy, support the pastoral care and wellbeing of students foremost. They see the expulsion of students for drug use as a last resort. The emphasis is on the provision of a safe and supportive environment for all students and staff, and priority is given to preventive drug education as well as specific processes for managing drug related incidents.

The Victorian State Government’s drug strategy, which is inclusive of Catholic and Independent schools, promotes retention of students identified as ‘at risk’ of developing a drug problem, recognizing that long term exclusion from school marginalises vulnerable young people (DEET 2000). The Commonwealth National Framework, from which many school policies are developed, states that strenuous efforts should be made to retain students involved in drug related incidents within an education or treatment setting (DETYA 2000). This is informed by Fuller’s (1998) notion that participation in and connection to school are protective factors against problematic drug use and a host of other risk behaviours. This view is well supported by Resnick et al. (1997) who found that a sense of belonging to both family and school are the major protective factors against health risk behaviours in young people. The authors contend that the social environment of secondary school is important because it provides a setting where young people can develop new and different relationships with adults and peers.

A lack of attachment or disengagement from school is conversely a risk factor for many students. Glover et al. (1998) contend that this is a major risk factor for developing damaging lifelong health behaviours, including problematic drug use. The National Framework also views detachment from school as an additional risk factor for further involvement in drug use, whereas involvement in school is seen as an important protective factor (DETYA 2000).

Munro (1997) found that, in addition to providing protection from alienation and increasing life opportunities, staying at school improves a young person’s chance of finding employment or entering tertiary education. For many ‘at risk’ young people, school offers a lifeline to the future. Young people who leave secondary school with a certificate of achievement have an increased chance of gaining employment and entry to tertiary education.

Jesuit Social Services Gateway program works with marginalised young people, most of whom did not complete schooling. The Gateway Framework clearly highlights the importance of being able to contribute to economic participation as it increases the likelihood of future success and wellbeing. For many young people, being excluded as a result of their drug use only further marginalises them and can lead to social disconnection in later life (Gateway 2003).
There is wide agreement among Australian researchers that drug problems are more likely to emerge in young people who do not complete high school. The emergence of drug misuse is also influenced by early childhood development, including school adjustment and behaviour problems. Academic achievement and feelings toward school are also relevant to illicit drug use (DEST 2003).

Munro and Midford (2001) believe schools need to use discretion when dealing with drug incidents and to be mindful of the natural pattern of incidental drug use by young people. The authors claim that initiation of drug use is often incidental to a young person’s life, often a result of curiosity or an experimental phase, which passes quickly. Only a minority of novice users graduate to problematic use and this group are likely to be composed of already troubled adolescents with a range of complex issues to address.

Spooner, Mattick and Noffs (1999) suggest that labelling an adolescent as a ‘drug user’, or alienating them as a result of their drug use, may escalate their drug use in order to match their identity. They argue that it is preferable for schools to retain vulnerable students and ensure they receive appropriate advice, because leaving school early as a result of heavy or habitual drug use may only lead to further alienation and increased problematic drug use.

2.10 Catholic Education Commission Guidelines

The National Framework and the Catholic Education Commission New South Wales (CEC NSW) Guidelines for developing drug policy, aim to reduce the demand for drugs and emphasise the community’s concern with harmful drug use. Both bodies acknowledge that all students have a right to attend a school that is free of illicit substances and unsanctioned drug use. These guidelines to support school-based drug education policies suggest the development of articulated policies that address drug issues in schools is fundamental to improving the capacity of school communities to respond to drug use when it occurs. Such policies allow schools in New South Wales to implement appropriate preventive drug education programs and agreed understood procedures for handling drug use in the school (DETYA 2000; CEC NSW 2001).

Providing guidelines to assist schools to formulate their own set of policies allows them to take into account the considerable range of familial, ethnic, racial, religious and socio-economic groups in their school community. A drug education policy developed by school leaders for their particular schools establishes the framework for educating and managing drug related issues relevant to their own school community. It is evident that CEC NSW recognises that a ‘one size fits all’ approach does not meet the diversity of schools across the nation.

The CEC NSW Guidelines highlight that drug related issues should be approached within the context of a school’s pastoral care/student welfare policy with clear links to other related school policies, such as a behaviour management policy. Fostering the development of a school environment that focuses on the wellbeing and needs of all students is fundamental to creating a supportive school climate. Factors such as connectedness and belonging to school, fairness, justice and success at school all promote a resilience in students that underpins effective drug education programs.
According to the Commission’s recommendations, the three interactive components of a ‘whole school’ approach to prevention through drug education and management of drug related incidents are:

- Curriculum Teaching and Learning
- School Organisation, Ethos and Environment
- Partnerships and Services.

Schools are encouraged to focus on these areas in their approach to drug education and managing drug incidents (CEC NSW 2001).

2.11 Catholic Education Commissions’ Guidelines for Responding to Drug Related Incidents

The Catholic Education Commissions’ guidelines focusing on the development of good delivery and inclusion of drug education in the curriculum are more straightforward and less controversial than their policies for responding to drug related incidents.

The National Framework acknowledges that unlawful and anti-social behaviours in relation to illicit drugs, when identified by schools, should result in consequences that are based on fair, just and consistent actions which take into account individual circumstances (DETYA 2000).

Policies formulated by the various Catholic Education Offices support the notion of crafting policies specific to the individual. They require that each school prepare its own written policy on the nature of serious offences and that this be made available to all members of the school community. For example, the Catholic Education Commission of Victoria’s (CECV) suggested process for dealing with serious offences in Victorian Catholic schools is the formation of a Discipline and Welfare Conference Group. The Group may consist of a parent/guardian, a parent support, principal, teacher, student and specialist personnel. The CECV recommends that the process should be informed by the values of the school system and have a structure that is supportive of the students, parents and the school. It suggests that when a student commits a serious offence, such as the provision of illicit substances, the incident must result in decisive action. The Conference Group provides a forum for collaborative decision making in the light of civil, diocesan, school and, most importantly, pastoral accountability (CECV 1994).

The process acknowledges that in some instances, where the behaviour of a student is deemed to cause immediate or ongoing harm, distress or danger to others, it may be necessary to withdraw or suspend the student from the school community, pending the deliberations of the Discipline and Welfare Conference Group. In considering the student and the case at hand, the Group has a number of options available to it including contractual arrangements, suspension and negotiated transfer. A contractual arrangement may be an agreement between the school and the parent about the student’s continued enrolment in the school; suspension involves the student not attending school for a set period of time; negotiated transfer involves the student changing to another Catholic school or to a school in another sector. The Commission emphasises that the implementation of any procedures for serious offences should occur only after a school has determined that all measures taken to have a student comply with the agreed code of conduct have failed to produce a satisfactory outcome (CECV 1994).
All other Catholic Education Offices recommend that schools adopt similar procedures to those outlined above when they are dealing with serious offences and young people. All highlight the importance, first and foremost, of pastoral care of the young person. They concur that the exclusion/expulsion of students should be a last resort only if there is significant danger to other students.

Pastoral care policies of students in Catholic schools focus on:

- quality of relationships
- formation of self-discipline
- pastoral programs
- comprehensive and inclusive approaches to teaching and learning
- supportive school/family relationships
- effective networks of care
- supportive organisational structures.

Legal advice relevant to drug issues in Catholic schools address:

- the reporting and recording of incidents
- how to respond to student offences
- accident and safety legislation.

Spooner, Mattick and Noffs (1999) suggest that in relation to young people, it is widely accepted that prevention is more cost effective and better than treatment, and hence, there is strong argument for schools to emphasise support and counselling rather than punishment. Adopting a pastoral approach in handling serious offences by young people does not imply that schools either condone drug use or are 'soft' on drugs.

2.12 Schools Responses to Illicit Drug Use

When illicit drug use is identified, schools respond with a variety of disciplinary and welfare oriented measures. These include warnings, notification of parents and police, education programs and counselling. Suspension and expulsion are more common consequences for students who provide drugs to others (Munro 2000).

Prior to the introduction of national guidelines and policies, it was more common for schools to respond to illicit drug use by suspending or expelling students, though this is still not uncommon. The introduction of national policies has encouraged school leaders to be more mindful of the balance between student wellbeing and appropriate discipline. While many schools have had an expulsion policy for illicit drug activity in an effort to preserve the school name and send a message of deterrent to other students, there is currently greater awareness regarding the needs of the individual student. In many cases, suspension, exclusion or expulsion may indicate failure on the part of the school. ‘Consequences’ in school drug policies have often been synonymous with punishment without support. This approach serves to disconnect many students, not just those most at risk. Hence, even students who are unlikely to be troubled by drug related issues may be alienated by the punitive nature of such consequences (DEST 2003).
A New Zealand study examining the strategies used by schools to deal with students caught with cannabis, found that a common dilemma was trying to find a balance between what was in the best interest of the offending student, on the one hand, and that of the school and other students within the school, on the other. This involved weighing up the message given to society and other students that drugs would not be tolerated in schools versus making sure that the educational future of the offending student was not jeopardised (Abel & Caswell 1997).

Recent publicised incidents suggest that some school leaders would argue that a clear and very public discipline policy enhances the image of the school as tough on drugs, promotes the school as a safe place, and is a way of identifying students in need of assistance.

2.13 Expulsion of Students: what does it mean?

Figures on the number of young people expelled or excluded as a result of drug related incidents from Australian Catholic schools are not readily available. Therefore, comparisons with other sectors are not possible. Often, students who volunteered to transfer, accepted a transfer or were persuaded to leave before facing expulsion would not be registered as expelled. Hence, the outcomes for these students remain unknown. Munro and Midford (2001) argue that more research is required into the effects of expulsion and exclusion from school on young people’s lives. They believe that it would be useful for policy makers and schools to know whether students who transfer to other schools adjust successfully to a new school, whether they continue to offend, whether they complete their schooling or leave earlier than other students.

It is important to note that the stated national policies and protocols do not require or suggest follow-up of students once they have left the school. The Victorian Premier’s Drug Advisory Council (1996) recommended careful case management of a young person leaving school would reduce the impact of the sudden lack of support and connectedness they face which makes them particularly vulnerable to increased and harmful drug use.

Munro and Midford (2001) maintain that school policy makers would be helped by a better understanding of the nature of adolescent drug use. Such background knowledge would help them make better assessments of drug incidents as they occur. It would also provide schools with feedback in relation to the benefits of counselling and pastoral approaches or whether certain characteristics of drug use are likely markers to further, more serious, drug problems. Tracking young people after they have exited a school early would also provide additional data to assist and inform policy makers.


2.14 What happens to early school leavers?

Some young people are vulnerable to developing serious and long-term substance abuse problems. It is important that strenuous efforts be made to retain this group of students in the school system to enhance their skills, knowledge and preparation for the workplace, and to prevent or delay their being labelled as unemployable (Victorian Premier’s Drug Advisory Council 1996). The recent Jesuit Social Services’ research report, Community Adversity and Resilience (Vinson 2004), shows significantly high correlation between early school leaving, long-term unemployment, court convictions and imprisonment.

McDonald (1999) says that in the past there were a number of potential intervention points for young people before problematic illicit drug use set in. Technical and smaller schools catered for those who struggled with larger academic settings. Those who were suited went into apprenticeships which led many into long-term employment. These options provided bridges for young people as they moved into adulthood. Today, these bridges are severely limited with current policies directed at young people revolving around mutual obligation activities, case management of their unemployment and herding them back into unengaging training programs.

2.15 Evidence of good practice

Evidence from the National School Drug Education Innovation and Good Practice project (DEST 2003) indicates that young people do feel safe in their schools. Teachers, families and the great majority of students do not want the damaging effects of inappropriate drug use to be a feature of their lives or those of others. They recognise that the major challenges for students in relation to drugs are outside the school, and that welfare and discipline strategies need to include support for students who breach the rules, so that they do not experience further disconnection.

To achieve these policies, school leaders face many paradoxes. The school leader must find a way to manage conflicting needs such as:

- the school being a safe place for all students
- the school image being seen as firm about inappropriate drug use
- the wider community demanding tough action against inappropriate substance use
- within the school action being taken against inappropriate drug use to demonstrate that such behaviour is unacceptable
- the school maintaining a caring and supportive culture for all students (DEST 2003).

In addressing illicit drug issues, school principals need to ensure there is a balance between welfare and discipline. For example, in responding to possession, use or supplying illicit drugs, the Principal, in consultation with welfare staff, often has to weigh up the needs of the student against the needs of the community. The circumstances surrounding the incident require careful consideration throughout the decision making process. It is therefore important for a principal to take a flexible and informed approach to drug related incidents (DEET 2000).
Good practice in responding to drug incidents need to recognise that student welfare, and discipline policies and practices, both can work together to support a safe school environment for all students. As part of these policies and practices, disciplinary responses to students who breach school drug policies include support so that these students do not experience further disconnection.

An effective policy recognises that punitive consequences alone may not accurately take into account the nature of the incident, the circumstance of the student/s involved and their needs, and the safety of others in the school. Instead of simply offering punishment, the school needs structures and mechanisms to help maintain connection between the student (especially ‘at risk’ young persons) and the school.

Finally, good practice implies that:

- every student should have at least one adult member of staff to whom they can relate and in whom they can trust
- staff identify potential issues early
- staff proactively help students to find better ways to resolve their problems and encourage resilience (Loxely et al. 2004).

2.16 Conclusion

Literature, research and experience indicates government policy and practices should encourage Australian schools to continue the necessary work of helping to limit the negative effects of young people’s drug use. Munro and Midford (2001) believe this task includes providing students with practical and immediately relevant drug education programs, not over-reacting to experimental drug use, and trying to maintain in the education system those students whose drug use is problematic.

Jaatinen (1999) supports the notion that a broader context of the drug problem should be taken into account when planning and implementing preventive strategies and policies. Further, Midford, McBride and Munro (1998) suggest that if we know illicit drug use is a problem in schools, then we also need to recognise and develop strategies that provide skills to young people to assist them to make decisions that reduce the harmful effects of their drug use. Such programs should be offered to students in conjunction with other strategies which allow and encourage them to stay in the school system.

McDonald (1999) argues that if the best way to stop a young person moving into illicit drug use is to keep them at school then, clearly, expelling them is not the answer. Evidence shows that young people who drop out of school become much vulnerable to ongoing drug problems than those still at school. Staying at school gives young people links to a community, increases their resistance to paths of drug addiction and, most importantly, provides them with an environment that continually challenges them to contemplate their future.
Chapter 3: How the Consultation was Undertaken

With the in principle support of the National Catholic Education Commission in Canberra, the State and Territory Catholic Education Offices were approached seeking their cooperation in the implementation of the consultation. In each case, the Director responded positively to the proposed investigation and appointed a senior member of staff to act as a liaison person and member of the Consultancy Steering Committee.

In addition, a nominated member of the Australian Conference of the Leaders of Religious Institutes was appointed as liaison person and member of the Consultancy Steering Committee. This was done in order to provide a link person to the Catholic independent schools should that prove to be necessary.

Visits were arranged to States and Territories during the months of August and September 2004, and each Catholic Education Office arranged a sample of secondary schools in their area for the Consultant to visit during this investigation stage.

The schools were not recommended to the Consultant as schools having encountered difficulties in this area. On the contrary, the schools chosen were ones which the Catholic Education Office in each State or Territory saw as being representative of the wide range of schools that were responding constructively and positively to this complex area of school management.

The following consultations were conducted during this investigation stage:

**Western Australia**
- Catholic Education Office of Western Australia
- Newman College, Churchlands
- Mercy College, Koondoola

**South Australia**
- South Australian Commission for Catholic Schools
- Mount Carmel College, Rosewater
- Our Lady of the Sacred Heart College, Enfield

**Australian Capital Territory**
- Archdiocese of Canberra and Goulburn Catholic Education Office
- MacKillop Catholic College, Isabella Plains

**New South Wales**
- Catholic Education Commission New South Wales
- St Aloysius College, Milson’s Point
- Freeman Catholic College, Bonnyrigg Heights
- St Agnes College, Rooty Hill
- Loyola College, Mount Druitt

**Queensland**
- Queensland Catholic Education Commission
- Principals of Catholic independent schools
- Lourdes Hill College, Hawthorne
Victoria
  Catholic Education Commission of Victoria
  Catholic Regional College, Sydenham
  Mercy College, Coburg
  Deputy Principals' Consultation Meeting:
    - Whitefriars College, Donvale
    - MacKillop Regional College, Werribee
    - Ave Maria College, Aberfeldie
    - Kilbreda College, Mentone
    - Mazenod College, Mulgrave

Northern Territory
  Catholic Education Centre
  O'Loughlin Catholic College, Darwin
  Our Lady of the Sacred Heart College, Alice Springs
  Our Lady of the Sacred Heart Thamarrurr Catholic School, Port Keats
  Xavier Catholic Education College, Bathurst Island

Tasmania
  Tasmanian Catholic Education Commission
  Sacred Heart College, Newtown
  MacKillop College, Rosny Park
  St Brendan-Shaw College, Devonport

In each of the Catholic Education Offices, consultations were conducted with the Director or with a designated senior staff member with responsibility for the development of policies and guidelines for management of health and safety of students in Catholic schools. In order to maintain consistency, an interview schedule was used to guide the consultations (see Appendix 1).

In visiting a range of different schools in different parts of Australia, the approach taken was to interview the following representatives of the school community:

- School Principal or Deputy Principal
- School Counsellor or Welfare Coordinator
- Small focus group of Classroom Teachers or Form Coordinators
- Small focus group of Senior Secondary Students.

The nature of the consultation was explained and confidentiality with respect to identifying particular schools or individuals was assured. As with consultations with the Education Offices, prepared questionnaires were used to guide the interviews (see Appendices 2 and 3).
Chapter 4: Key Issues Emerging from the Consultation

The key issues that emerged from the consultation were identified from the personal interviews conducted by the Consultant with staff of the Catholic Education Offices, school principals and senior staff, and student focus groups.

4.1 A Balanced Response

This consultation with senior staff of Catholic Education Offices around Australia, and with principals and experienced teaching and welfare staff at Catholic secondary schools in each State and Territory, have indicated that the response to illicit drug use by Catholic school students is a matter of importance and sensitivity.

It would appear that while it is important to clearly state that there is no place for the use of illicit drugs in Catholic schools, most respondents indicated that it is no longer possible to adhere to a simple ‘zero tolerance’ approach to student drug use. A more complex and pastoral response is now required.

Generally, students who attend Catholic secondary schools recognise that illicit drugs have no place on the school campus or on any school sanctioned activities. Students, parents and teachers are in agreement that this policy must be upheld.

Reported incidents of illicit drug use by students on school properties or during school organised activities are not common. Senior secondary students generally recognise that there are serious consequences to actions that involve illicit drug use on school properties and on school sanctioned extra curricula activities.

Nevertheless, each year there are instances in many schools when students are identified as breaching these clearly stated policies. Catholic Education Office staff and Catholic secondary school principals have the challenging task of finding the most appropriate and effective way of responding to these breaches of school policy.

The school's response to such an incident needs to balance a variety of different areas of responsibility and accountability:

- to the individual student and his or her family
- to the interests of the wider student population
- to the expectations and desires of the parent body
- to the requirements of the teaching staff of the college
- to the needs of the school council or management structures
- to the concerns of the school community, as an organisational entity
- to the perceptions of the wider community in which the school is located.

Where a school administration has shaped its response to a critical incident largely around only one or two of the above areas of accountability, it would appear that a less than satisfactory outcome was often achieved.
The challenge for school principals is to hold in balance each of these different areas. A number of schools around Australia seem to have been able to establish this balance, while satisfactorily dealing with the pastoral needs of the individual students concerned.

**You need to be able to walk with a student, if you hope for a change in behaviour.** (Quotation from a Student Counsellor at a Catholic secondary school)

### 4.2 Assessing the Incident

Central to how a Catholic secondary school might respond to an incident of illicit drug use within the school environment is an assessment of the significance of the incident in relation to patterns of drug use behaviour.

In assessing the evidence provided to the consultant, Shafer’s model of looking at patterns of drug use and in assessing incidents of student drug use was found to be very helpful (US National Commission on Marijuana and Drug Abuse 1973).

The categories in Shafer’s model, as expressed in the *In Touch* school based program in Western Australia, are defined below:

- **Experimental**: Peer influence may be a factor and use often occurs in the company of one or more friends who are also experimenting. Choice is motivated by curiosity or desire to experience new feelings or moods. Use may be once or short-term.

- **Social/Recreational**: This pattern describes voluntary drug use on specific social occasions, for example, drinking at a party or at dinner in a social setting. This pattern generally refers to experienced or controlled users who know what drug suits them and in what circumstances, rather than experimenters. If they like the effects, and if the participatory group is congenial, they will use a drug despite legality.

- **Circumstantial/Situational**: This pattern is associated with use for specific situations and/or for a set period, for example, a driver using drugs to stay awake on an overnight trip, students drinking coffee during exam periods, a person under acute stress or experience of bereavement.

- **Intensive**: This is similar to the previous category but borders on dependence. It is often related to an individual’s need to achieve relief or to maintain a high level of performance, for example, drinking alcohol over business lunches, taking large doses of tranquillisers or analgesics to cope or using drugs as a source of meaning, excitement or escape. Major doses are taken daily.

- **Compulsive**: Persistent and frequent high doses producing psychological and physiological dependence, where the user cannot at will discontinue use without experiencing significant mental or physical distress. There is also a preoccupation with the need to obtain adequate amounts of the drug.
Shafer suggests that there are more people who use a drug experimentally than use it intensively, which relates to frequency of use. For this reason, he draws the model of drug use conically. He does not suggest that progress is linear through these patterns of use, or inevitable or fixed. The majority of alcohol or other drug use by school-aged children is experimental and recreational or social, with only some problems relating to intensive use, such as binge drinking (WAADA 2000).

When an incident of illicit drug use by a student within the school environment is detected, it is important to be able to identify whether the incident represents a single, one-off event, ranging through to being part of a compulsive or addictive behaviour pattern.

All such incidents that occur within the school environment are considered as serious, but the appropriate response by the school authorities should be influenced by the assessment of the particular circumstances. For example, if a student is identified as possessing or using an illicit substance at school and it is assessed as being a single or completely isolated event, it may be harmful for that student to be referred to attend a drug education or treatment program, where he or she may be placed in contact with other young people whose drug use pattern is intensive or compulsive.

Schools that were able to ascertain whether the possession or use of an illicit substance by a student was experimental or a single stand-alone incident, were able to determine a response which fitted the seriousness of the offence.
On the other hand, those schools that identified the student’s possession or use of an illicit substance as representing a compulsive or addictive form of behaviour, needed to be able to assess whether the health needs of the individual student concerned, and the duty of care to other students, were able to be sustained within the school environment in the immediate short-term.

4.3 Input by School Personnel in Determining Response

When an incident of possession or use of an illicit substance was identified within the school setting, it appears that a change has taken place in many Catholic schools in recent years, in terms of how key members of staff are involved in assessing the incidents and in determining an appropriate response.

In earlier years, a general ‘zero tolerance’ approach was applied in many schools. Immediately an incident was detected the matter was reported to the Principal and, often in communication with the Deputy Principal and the relevant Year Level Coordinator, after interviewing the student concerned and any direct witnesses, an appropriate sanction was determined within a very short period of time. It was then that the student’s family would be notified, as were the Police, and the sanction, sometimes suspension or even expulsion, was communicated to members of staff and students.

Those schools that were consulted as part of this research investigation that appeared to implement ‘good practice’ were those that delayed making an immediate decision with respect to sanctions. Instead, an attempt was made to involve those members of staff who had information or knowledge about the student concerned, their background, including family information that might be relevant to making a more thorough assessment of the incident itself. Such members of staff could include student counsellors, chaplains, home room coordinators, sports coaches or teachers that had personal knowledge and understanding of the student concerned.

An intervention which can be seen as largely a punitive response will invariably lead to an outcome that represents a failure or rejection. A balanced coordinated intervention can often represent an important turning point in a student’s life. (Quotation from a Welfare Coordinator at a Catholic secondary school)

Sometimes it was appropriate for the student to be suspended for a short period of time, while this assessment could be completed. At times this was also seen as required to ensure the health and safety of the student concerned. This immediate suspension was not intended as a disciplinary or punitive sanction, but one that was intended to be supporting the shaping of an effective response to the critical incident.

While a larger number of staff personnel might have been involved in assessing the nature of the incident and its significance for the student concerned, efforts were made to protect the identity and reputation of those concerned.
4.4 Student Drug Use as an Indicator of Mental Health Disorder

An increasing amount of research evidence and practice knowledge in Australia is concluding that a significant amount of illicit or problematic drug use by young people is one of the clearest indicators of an underlying mental health disorder (Norden 2001).

Much attention has been given in recent years to the causative relationship between marijuana use and consequent mental illness, including the early onset of schizophrenia. While there is evidence that a small percentage of young people are prone to this outcome, there is now clear evidence from practice experience in Australia that a far stronger correlation is to be found between pre-existing mental illness and the use of substances, including alcohol and illicit substances, as a form of self-medication.

Adolescents are one of the groups in the Australian community at greatest risk of mental illness, yet are the most prominent group among those needing mental health services who do not access such treatment services. In many parts of Australia, mental health services designed for the needs of young people are simply not to be found. In addition, young people are extremely reticent in accepting the need for mental health treatment and this reinforces the tendency to find a form of self-medication, which attempts to deal with the symptoms but not the cause of the illness. For example, serious drug misuse by students still involved in senior secondary studies has been shown at times, to indicate long-term trauma that has resulted from serious sexual abuse from an early age. If the students use of illicit substances is purely interpreted as a breach of school discipline, the school community will be seen to have failed to initiate proper professional responses, at a time when the symptoms of such trauma were being very clearly communicated to the school community.

The awareness of this dimension to the problem was highlighted in the consultations with senior staff of the Catholic Education Commission New South Wales. In major metropolitan cities like Sydney and Melbourne, there is a greater likelihood of finding programs dealing with the co-existing dual disability of mental illness and substance misuse. Such programs are not readily available in all parts of Australia. That is why careful assessment of a student’s behaviour is seen to be so critical following an incident of illicit drug use, and why the involvement of a wide range of inputs is required across the disciplines of the school personnel.

Critical incidents of self-harm by either students, or even members of staff, should always be assessed carefully, to see if they indicate personal trauma or systemic problems within the school community itself.
4.5 Communication with Police

The consultation found that in each jurisdiction visited, the Catholic secondary schools, without exception, had established good communication and a positive working relationship with the local police representatives.

In some jurisdictions, this resulted from the role of Police School Liaison Officers who were involved in the schools broader curriculum, especially in areas of health and safety. In other school situations, the Principal or Deputy Principal had taken the initiative to establish personal working relationships with a senior officer at the local Police Station.

The decision as to whether the school authorities were required to contact the police in relation to every incident of possession or use of illicit substances by students was affected by differing policies and legislation in each State and Territory. In some jurisdictions, the Police had to be notified if an illicit substance was found on school property. In other situations, the school authorities could fulfil this requirement without having to pass on identifying details of the students concerned, but were responsible for disposal of the substance, or the transporting of the substance to the local Police Station.

In previous years, it appears that most Catholic schools as a matter of course reported every incident to the Police including identifying details of the students involved. In some jurisdictions, this was not required by law or local regulations and it ran the risk of involving students whose involvement with an illicit substance was restricted to a single incident to significant engagement with the criminal justice system.

Most jurisdictions today do not require such details to be passed on to the local police authorities when the incident is a minor matter. Such authorities have in place substantial diversionary programs for minor drug offenders. These programs discourage the involvement of police representatives in pursuing matters of insignificance, for fear of unnecessarily drawing young people into further contact with the instrumentalities of the criminal justice system when it is not deemed appropriate or required by law.

School authorities need to clarify what the current legal requirements are in relation to these matters. Several school personnel who were interviewed indicated a false belief that every incident needed to be reported to the Police. Such clarification as to what is actually required is achieved when a good working relationship has been established with local police representatives.

4.6 The Question of Confidentiality

The issue of confidentiality in relation to student drug use is a difficult and complex one in a secondary school setting. The school has a duty of care for individual students and also for the total student body.

This study was completed in secondary schools where the students age range was from twelve to nineteen. The duty of care in relation to the question of confidentiality differs for students at the lower end of this age range to those at the higher end. Some State jurisdictions specify what the responsibilities of school authorities are in relation to this matter.
The question of confidentiality can also differ depending on whether the issue of student drug use has been a matter raised by the student seeking assistance. Further, it can also differ as to whether the drug use is one that is related to school activities or outside of school activities.

Many Catholic secondary schools employ school counsellors or welfare officers. Some have full-time or sessional chaplains as members of staff. The effectiveness of these members of staff in fulfilling their work responsibilities depends on their capacity to offer a safe, engaging environment in which the student can seek advice, guidance or help. Their effectiveness often also depends on their ability to ensure a trusting and open relationship with the school authorities.

Many of the students consulted as part of this research investigation insisted that they would never raise the issue of their illicit drug use with members of school staff for fear of the repercussions from the disciplinary arm of the school. Other students reported that they believed that their school was a trusting, engaging environment in which they could readily seek help or advice in this difficult area.

Given the figures revealed by the *2001 National Drug Strategy Household Survey* that one in three secondary students had reported use of an illicit substance in the previous year (AIHW 2002), it would appear critical that Catholic secondary schools should be able to offer some clear assurance of confidentiality to students seeking help from school personnel in this area.

However, given the duty of care of school personnel to the health and safety of the whole student body, there are necessarily limits to the assurance of confidentiality that can be offered, in the school setting. It is clearly important that where there is a serious issue affecting the health or welfare of a student, the Principal needs to be informed, at least on a general level. Consequently, school staff including teaching staff, need to know when it is appropriate to warn students about the limits of confidentiality when discussing matters of this nature.

### 4.7 Catholic School as a Nurturing Environment

The environment of Catholic secondary schools varies a great deal around the country, in terms of their capacity to provide an engaging and nurturing learning environment for students. The range of more than twenty schools involved as a cross sample for this consultation portrayed different characteristics.

Some schools displayed a capacity to work well with students who possess a strong commitment to high academic performance. Students who did not, or were not able to maintain that commitment, often left during the middle secondary years to continue their education in another setting.

Other schools communities were composed of students from a broad range of social backgrounds, and were seen to involve students with different capacities and differing learning needs. Such schools did not appear to lack a capacity to foster high academic achievement in their student body.

Given the broad range of students attending Catholic secondary schools throughout the country, making up around one fourth of the nation’s secondary students, it is clear that many of these students will present challenging behaviour during a turbulent and sometimes unsettled period of adolescence.
While the predominant goal of the school environment is to provide a setting for educational achievement, it is also perhaps the only nurturing environment which many students will ever experience. Those who have that available at home are fortunate, but it is increasingly beyond the capacity of many parents to provide this during the unsettled years of adolescence.

She sees her school as a sanctuary, like a ‘safety zone’, while the rest of her life outside is falling apart. I ask myself: how can we keep this student engaged with our community here at the school? Every community has its fractured members and so how can we turn this situation into a positive learning opportunity for all concerned?  (Quotation from a Deputy Principal of a Victorian Catholic secondary school, describing a student involved in drug use outside the school)

Schools that presented positively in this area were ones that set very clear boundaries of what was expected and encouraged, in terms of student behaviour and performance, but were able to move with a degree of flexibility and continuing engagement, even when at times these standards were not achieved. This applied especially when the school was dealing with students with special needs. One school principal explained that it was important to distinguish between the general level of recreational use of substances used by students in their lives outside of the school setting and a student who had developed a serious heroin addiction. She explained: “Of course, we would never expel her from the school, given that her condition is clearly a serious health problem”.

The exclusion of students from the school or the transfer of students from one school to another, was seen as risking isolating the student further from potential sources of support and help, such as fellow students and teachers who are more likely to provide a supportive environment. There was a real sense that when a student is affected by serious personal difficulties, despite the presence of counsellors and welfare staff, there are real barriers to raising these matters within a school environment, for fear of parents and authorities being notified. They recommended the establishment of a more informal form of personal help and advice within the school situation, if the critical, important and sensitive areas of a student’s life are to be able to be explored in a helpful way. Very few students knew of any community agencies that could provide that sort of service. (Notes from a Focus Group of Senior Secondary Students)

There is a definite need for school authorities to have a clear protocol for managing students who may be receiving ongoing drug treatment by an outside agency.
4.8 The Collaboration with Outside Professional Agencies

Many of the schools visited had established close collaborative working relationships with community based agencies and professional services that were able to complement the resources of the school's limited resources.

Some of these agencies had access to health professionals that could provide excellent medical assessment and intervention. Others were agencies that had a greater capacity to engage with and involve young people themselves in developing treatment responses. Centacare agencies in different parts of Australia were sometimes found to have that capacity, but in one location the waiting period of eight weeks was too long to be effective for the school's purposes. In other areas, specialist youth agencies such as Marist Youth Care provided very valuable services.

Marist Family School Conferencing Services is offered to all secondary schools in Sydney in response to students who breach drug policy. The aim of the service is twofold. Firstly, that the students learn the inappropriate-ness of their behaviour and the impact that their behaviour has on the broader school community. Secondly, that the students remain at their school.

At a secondary school in Sydney, five Year 10 students were found at school with marijuana, purchased from a dealer outside the school. The students were suspended for five days while the Conference was prepared. An external Facilitator from Marist Youth Care interviewed each of the students and their parents as well as key personnel from the school. These pre-conference interviews explored the key issues and explained the process and desired outcomes. Typically at the interviews, the students minimised the seriousness of the incident while some staff felt that the students should be expelled and that the school was ‘going soft’.

A week later, the Conference was held with eighteen participants including the students, their parents, the Principal, Assistant Principal, Year Advisor and School Counsellor. The Facilitator guided the group, seated in an open circle, through a highly structured process in which the students gained greater insight into the effect that their behaviour had on others. The parents spoke of their fears and concerns. The Principal spoke of the conflicting pressures to cease their enrolment and the desire for them to remain at school.

In the second part of the Conference, the group created an Outcome Plan in which specific strategies were listed that allowed the students to compensate the school community for the harm that their behaviour had created. The students themselves gave suggestions, such as working with younger students on some social justice issues.

We believe that young people can learn from their mistakes said the Principal. To move these students to another school may have removed them, at a time of crisis, from a well connected and supportive school environment.
4.9 The Practice of Transferring Students to Other Schools

During the 1990s, it appears to have been a common practice for many Catholic secondary school principals to arrange a transfer to another Catholic school for students found to have been in possession of, or used, illicit substances in the school environs.

While the number of incidents detected may be relatively low, the Catholic school principal exercised an option, often not available within the government school sector, of arranging the transfer of such a student quietly and without public attention. In many situations, this was expressed as providing a ‘fresh start’ in a new environment. It was often also explained as having been done “with the approval of the student’s parents”.

This investigation found that there were often serious shortcomings in this common practice by Catholic secondary schools, a practice that was also found to be common within the broader Independent School System in each State and Territory.

The opportunity of finding a ‘fresh start’ can certainly be supported in some situations where relationships have been found to have broken down within the school community between the offending student and other students and the teaching body. However, in many situations this practice was found to simply ‘move the problem’. In doing so, with students displaying ‘at risk’ and potentially self-harming behaviour, it increased their level of disconnectedness. They were then placed in a high-risk environment, without the sustaining relationships with familiar friends and trusted teachers.

This practice was often presented as an outcome that was reached with the support of the student’s parents. It was often more an ultimatum presented to the parents: cooperate or let your son or daughter face possible expulsion.

The practice still continues but in schools that represent good practice it is done as a last resort and not as a first option. Parents are generally appreciative of the strenuous efforts that many Catholic secondary schools take to continue to engage their child in the school environment. It is when these relationships break down that an opportunity for a legitimate ‘fresh start’ actually presents itself.

Our investigation found schools taking this option with great caution and pastoral care for the student concerned, ensuring a smooth transfer between the two schools and looking to the student’s own best interests. Good practice identified a real consultation with parents about this possible outcome, and not an ultimatum presented without reasonable alternatives. When this practice has been implemented, it seems important for school authorities or Catholic Education Offices to monitor the future progress of such students at their new schools. Does the practice of getting a ‘fresh start’ achieve the intended objectives?

One of our Year 9 students was detected smoking marijuana in the school toilets. It was known that this student had a history of sexual abuse. After she was transferred to a Public School, we found out her drug use became seriously problematic. (Case study from a Catholic Secondary College)
4.10 Expulsion Policy in Catholic Schools

As with the practice of transferring students, the practice of expelling a student from a Catholic secondary school, as a result of an incident of possession or use of an illicit substance, occurs more rarely in recent years than was the practice in the previous decade.

In most States and Territories the expulsion of a student can only take place with the specific approval of the Director of Catholic Education and not by the school principal alone. Early in 2004, the Catholic Bishops of one State communicated with the Director of Catholic Education that they wished the school principals to be notified that the Bishops required them to give careful and prolonged consideration before considering the option of expulsion or transfer of students following an incident of illicit drug use.

It appears that formal expulsions are generally avoided by most Catholic secondary schools around Australia. The option taken is the transfer of the student to another school, or the agreement by the family of the student to withdraw from the school.

In a recent study on suspensions and expulsion of students from non-government schools in New South Wales by Geoff Riordan, Associate Professor at the University of Technology in Sydney, a significant difference was found between Systemic Catholic Schools and Independent Schools in relation to their willingness to expel students for drug incidents. While approximately the same percentage of schools from both categories were ready to suspend students for incidents in relation to illegal drugs (68.7 per cent Systemic Catholic; 70.7 per cent Independent), a much higher percentage of Independent Schools reported that they would resort to expulsions (29.3 per cent) in contrast to Catholic Systemic Schools (19.4 per cent).

In canvassing with Catholic school principals what the indicators were that an expulsion might be necessary, as part of this research project, it was clear that in schools exercising good practice in this area, it was an option being taken ‘as a last resort’.

School principals reported that expulsion or transfer was resorted to when the student concerned had clearly indicated a lack of willingness to cooperate with school authorities and where there was a clear indication that working relationships had been broken and were not likely to be repaired easily. It was also seen as an option to be considered when there was a serious threat to the safety and wellbeing of other students and staff.

Exclusion of a student, although not considered a solution, must be considered if the student poses a definite risk to himself or any other member of the school community. (Extract from Catholic secondary school’s Policy on Drugs)
Generally, the option of expulsion applies to situations where a student is a repeat offender in possessing or using illicit substances within the school environment. The sanction is more often applied when the student has been found to be selling or distributing an illicit substance to other students.

Automatic expulsion of students even for serious offences needs to be reviewed, because it is critical to keep connections, although it is tricky, because you have to give the right message to the rest of the school. (Student Counsellor at a Catholic Secondary College)

4.11 Different Categories of Sale of an Illicit Substance

Our consultation found that few schools were able to make the distinction between sale of illicit substances in order to maintain personal use of that substance, and sale of an illicit substance for personal gain or monetary reward. This is an important distinction to be made, and often it is not made even within the criminal courts.

Students who may have established a compulsive or dependent use of illicit substances will often resort to the sale of that substance to two or three other parties only, in order to maintain their personal use. This is not necessary if the student has an independent source of income that enables him or her to purchase the illicit substance. But a student without access to such material resources may well resort to this practice of low level distribution.

If the practice is established within secondary schools that an automatic expulsion applies to students found to be supplying an illicit substance, it could be interpreted as a policy that discriminates against students from low-income families, who in some circumstances could be taking whatever efforts are available to them to sustain their own addictive behaviour.

Those who supply illicit substances to numbers greater than two or three may be seen to be involved in an activity that is intended to bring about personal financial gain, and this would always be seen as a more serious level of distribution than the lower level referred to previously.

This interpretation is not intended to be understood as excusing the distribution of illicit substances in any instances, but rather to make a distinction between supplying for personal financial reward and the sale of a substance simply to maintain one’s own personal use. It is a distinction that will be difficult to communicate to parents and teachers unfamiliar with the patterns of personal drug use. But it is a distinction that needs to be appreciated by Catholic secondary schools wishing to be seen to be just in determining sanctions in response to illegal drug activity by students.
4.12 Drug Testing in Schools

Urine or blood testing of students who have been identified as having been in possession of, or used, illicit drugs has been hotly debated in recent years in different parts of Australia.

There are a small number of Catholic secondary schools in Australia who are currently undertaking this practice, but the practice has been publicly identified in a small number of private Independent Schools in Victoria and New South Wales.

Those who support the practice see it as decisive action by the school authorities in response to drug usage by students and as enhancing the image of the school as ‘tough on drugs’. It is also seen as a way of promoting the school as a ‘safe environment for your child’, and a way of identifying those students in need of assistance.

The question of the school’s jurisdiction to undertake such intimate testing needs to be debated. There is also the question of the invasion of privacy of the students concerned. Legal opinion has expressed serious questions around the reliability of such testing, the ownership of the specimen and the safe protection of the testing results themselves. Correctional authorities around Australia have found it difficult to confidently address such issues. It is questionable whether school authorities have greater expertise.

Bev Baker from the Federation of Parents and Citizens’ Associations of NSW sees testing as little more than a marketing tool for private schools and says it won’t help students: *If you’re doing it to demonstrate that you’re tough and you’re not going to take any rubbish here, then what you’re demonstrating is that you don’t care about the kids. You are more interested in your market position, your appearance in the community, than you are about doing something that works.* (Transcript quotation from 7:30 Report, ABC Television, 30/03/2000)

The critical issue for a Catholic school environment is the de-emphasis on the relationship of trust and open communication between students and staff that may result, and the de-emphasis of other pastoral and disciplinary approaches that might be used. The publicly stated consequences of breaches usually relate to the transfer of ‘the problem’ elsewhere and the suggestion that such a practice create such a thing as a ‘drug free school’.
It is the conclusion of this consultation that drug testing of students in Catholic secondary schools has not been seen to be effective for students, but an effective marketing instrument for some schools.

Our student counsellor helped to see that I was risking my future education by using so much (marijuana). When I was in the middle of all that, it was really helpful to develop a focus and a goal that could give me something to aim for. I know that in order to be accepted for this program in motor mechanics at the end of the year I will have to undergo a comprehensive health test to ensure that I am drug free. So I am now committed to remaining drug free for the rest of the year so that I can be accepted into this training apprenticeship for next year. (Quotation from a Year 10 student reflecting on his school’s helpful intervention)

4.13 A Consistent Ethic in Catholic Schools Drug Policies

This consultation has attempted to avoid the terminology ‘best practice’ with respect to Catholic schools response to student possession or use of illicit substances. This is because it recognises that there is no best practice that applies to the range of different circumstances in the different States and Territories of Australia. Instead, the preferred term that we have used is ‘good practice’ recognising that what applies to one school may not be appropriate in another educational setting.

Nevertheless, the consultation has identified that there is a commonly held conviction that there exists a 'dual track system' in the way in which Catholic secondary schools around the country respond to incidents of possession or use of illicit substances by students. This dual system appears to be evident in some of the Independent Catholic Schools that are not part of the 'systemic' network of schools managed by the Catholic Education Offices in each State and Territory.

It is suggested that such schools are persisting with a model of ‘zero tolerance’ and a ‘tough on drugs’ stance that is more concerned with the maintenance of the high profile of the school’s image and reputation than the fair, reasonable, consistent and just approach to students with substantial pastoral needs.

This is a view that was put to the consultation by senior officers of the Catholic Education Offices, by Principals of Systemic Catholic Colleges and by Principals and senior staff at some Catholic independent schools.

The consultation could draw the conclusion that Catholic independent schools have the right to a different pattern of responses in this area by the very fact that they are ‘independent’. The issue that this report raises in response, however, is the question of the importance of a consistent ethic, in the light of the common 'Catholic' identity.
The consultancy identified a shift in policy that has taken place over several years in much of the Catholic education sector, as educational authorities and school administrators have developed a greater understanding and responsiveness to this issue as a health concern and a significant pastoral concern. It would be unfortunate if this growth in the Catholic secondary schools response to incidents of possession or use of illicit drugs by students was seen not to apply to some high-profile Catholic independent schools.

A consistent Catholic ethos would be focused primarily on the growth, development and pastoral care of the student body and not the school as a corporate entity.

Many schools that participated in the consultancy were found to emphasise the former objective, focusing on the needs and pastoral care of the student body. Some other schools appeared to be more preoccupied with the schools public reputation. A more consistent Catholic ethos in this complex area would strengthen the credibility of the Church’s mission in the field of education in Australia.

4.14 Alcohol Use and Binge Drinking

The consultancy focused largely on the student possession or use of illicit drugs but has not excluded the use of unsanctioned substances, such as alcohol or tobacco.

Repeatedly, in the consultations, school administration, welfare and teaching staff reported major concerns at what they observed as a greater and intensive use of alcohol by students of an increasingly younger age. While such alcohol use, like illicit drug use, only occasionally occurred within the school environment, the impact of its use was more and more identified on school performance, student relationships, and a balanced life style and ethic.

Experimental use and risk taking behaviour were increasingly observed in junior secondary forms, but the intensity of use was becoming more apparent at student parties, often, with little if any parental or adult supervision. This trend was confirmed both by welfare and counselling staff and by the student focus groups who participated in the consultation.
The growth of this pattern of behaviour, which has been occurring now for several years, may be indicative of increasing social and academic pressures being placed on secondary students in Australia during the last decade. This applies to those seeking high performance and results in order to secure competitive tertiary education entrances. It also applies to those students seeking to escape from such a highly competitive environment or from social circumstances at home or in schools that are less nurturing and sustaining.

Like much illicit drug use, intensive alcohol use and binge drinking by adolescents needs to be interpreted not merely as a problem within itself, but in terms of what it indicates about the environment in which young people are moving through today. Catholic schools that continue to build and sustain healthy, safe and nurturing environments will more effectively help students to develop greater resilience in the face of such growing pressures.

While this consultation found that there was significant concern expressed about the impact of binge drinking by students attending Catholic secondary schools, the number of incidents where students actually were in possession or used alcoholic beverages at school or at school related activities were infrequent. One possible explanation for this is that alcoholic beverages are far more easily detectable by school authorities than many forms of illicit drugs.
Chapter 5: Conclusion

The critical issue that emerged from this national consultation of Catholic schools in each State and Territory of Australia for those young people involved at some level in illicit drug use or experimentation was the importance of ‘keeping them connected’.

This issue seemed to apply to the broad range of students from Catholic secondary schools who were found to be involved in drug use, from those who were thought to be involved in a completely one-off experimental or risk taking episode, to those who had developed a serious problem of drug misuse. Students in both categories needed to know that they were still connected and that there were committed, professional and caring members of school staff who could keep them engaged and were prepared to walk them through the difficult circumstances in which they had found themselves.

Those Catholic schools which emphasised the strong message of zero tolerance reported student drug use did not appear to diminish, but to be more carefully camouflaged. If students knew that they would be expelled from their school or more benignly ‘transferred’ to another school for any incidents involving illicit drug use, the school quickly became a ‘no go zone’ for seeking help or guidance in this area.

There was no evidence presented that suggested that such a ‘tough on drugs’ approach led to a reduction in student drug use or problematic drug behaviour. On the contrary, a great deal of evidence was provided to the consultation that an approach that ‘shifted the problem’ to another school, or more subtly, pushed it underground, increased the risk that students with difficulties in this area became more unlikely to access sources of guidance, direction and support.

The Catholic school environment is potentially one of the most resourceful sources of guidance, direction and support for many students. In many situations around the country, it would appear that students were able to seek guidance and direction from teachers and school based staff when they had no opportunity of turning to those closest to them, their family members. While some students reported that they valued an open and honest relationship with their parents at home where they could talk about any issue of concern, most students reported that in the area of illicit or unsanctioned drug use or experimentation, it was simply a taboo topic within the home environment.

During the difficult transitional years of adolescence, especially early adolescence when most incidents of illicit drug use by students in the school environment actually occurred experienced and trusted classroom teachers, school counsellors, welfare workers, guidance counsellors and home room teachers were the ones with the greatest opportunity of being of assistance.

Many schools visited as part of this national consultation showed an outstanding capacity to retain staff who could create this climate of understanding and respect. These schools reflected a climate that was seen as safe by the student body, because they clearly maintained high expectations and boundaries of acceptable behaviour while at the same time recognising that young people often learn more from their own mistakes.

These schools did not condone illicit drug use, but when it was identified within the school environment, there were members of staff who could work the situation through with the young person involved. They understood the context of the student’s poor...
judgement and were able to respond in a way which reflected this knowledge and personal engagement. Incidents of illicit drug use that occur within a school environment have much to teach all parties concerned: the students directly implicated, their fellow students, family members and other members of staff.

Schools consulted as part of this national research project that were not prepared to engage with the students involved in an incident of illicit drug use were found to be more concerned with the protection of their own reputation and less concerned with the interests of the student body as a whole, as they often suggested was their major concern.

They sent out a message that drugs would not be tolerated in the school environment, but they also sent out a subliminal message that the school was not prepared to engage with such a real issue facing young people growing up in Australia today. Young people are very adept at reading such subliminal messages.

Throughout the country there are many highly skilled, knowledgeable and experienced staff working in Catholic secondary schools and as specialist advisers in Catholic Education Offices in each State and Territory, with particular expertise in this area. This national consultation study has simply garnered the best knowledge and experience that already exists within this national educational network. Nevertheless, an enormous disparity was found from one part of the country to another and from urban to regional and remote areas, such as those in the Northern Territory, in terms of the resources available and the capacity to deal effectively with this issue.

It is hoped that the recommendations that conclude this research report will provide both the encouragement, the information and strategies that might be helpful to ensure that students in Catholic secondary schools across the country will find their school environments not only places of learning, but also places of respect, understanding and personal growth.
Chapter 6: Recommendations

1. It is recommended that schools maintain the focus of responding to incidents involving students and illicit substances as primarily a health and education issue, recognising that an emphasis on disciplinary responses alone can reflect a breakdown in the relationship with the student concerned.

2. It is recommended that each school, in consultation with key stakeholders including parents, students and teachers, should establish a clear drug policy, including both procedures and protocols, to assist its response to illicit drug use by students.

3. It is recommended that each school drug policy should be able to distinguish problematic drug use and experimental use, in relation to students who are found to be in possession of illicit substances.

4. It is recommended that the school drug policy be clearly communicated to all stakeholders and that schools adopt a range of techniques to keep students, parents and staff members informed about the school drug policy and relevant protocols that relate to illicit drug use within the school context.

5. It is recommended that all staff, including administrative, teaching, welfare and chaplaincy staff members, have an opportunity for input into the development of protocols responding to student drug use.

6. It is recommended that school principals develop a management response to suspected illicit drug use by students that is differentiated from the response to students being identified or caught with illicit substances.

7. It is recommended that each school should have a broad policy framework that reflects an understanding of the nature of illicit drug use by students and which is inclusive of the individual circumstances of each student.

8. It is recommended that school drug policies should distinguish between the supply of illicit substances intended for simple financial gain and the supply of illicit substances to others that can be identified as an attempt to support or maintain personal, dependent use.

9. It is recommended that each school maintain an advisory or consultative group, which should include classroom teachers, welfare personnel, administrative staff and parents, with knowledge of and familiarity with patterns of adolescent drug use.
10. It is recommended that the school drug advisory group should maintain familiarity with the link that often exists between mental health needs of young people and problematic drug use.

11. It is recommended that each State or Territory Catholic Education Office ensure that school drug advisory groups receive specific and ongoing professional development so as to be effective in shaping the schools' protocols and strategies in response to student drug use.

12. It is recommended that each school develop good working relationships with local community service agencies that provide drug and alcohol services for young people, promoting knowledge and access by both students and parents, independent of the school.

13. It is recommended that in circumstances where a student may require treatment for a recognised substance dependency, schools adopt an approach that facilitates a young person's continued school attendance as a significant part of the treatment.

14. It is recommended that each school principal establish and foster a good working relationship with local police representatives prior to any drug related incidents.

15. It is recommended that when a school principal is considering the transfer of a student to another school following a drug related incident, the principal consults the school drug advisory group and any other member of staff with knowledge of the student, or, his or her family circumstances.

16. It is recommended that each school develop an understanding of patterns of personal drug use by young people and an ability to apply this knowledge when making decisions regarding student transfer or suspension.

17. It is recommended that when a school finds it necessary to transfer a student to another school that the period of time spent out of school is minimised and that wherever possible, ongoing pastoral care of the student is maintained.

18. It is recommended that when a school principal is considering transferring a student to another school in response to illicit drug use, the principal should discuss this proposal with the school drug advisory group.

19. It is recommended that authority to expel a student from a Catholic school in response to student drug use should rest solely with the Director of Catholic Education in each State or Territory, or the School Board or Provincial Superior of a Catholic Independent School.
Bibliography


Clark, G., Cook, S. & Scott, W. (2003), *Formative Research with Young Australians to Assist in the Development of the National Illicit Drugs Campaign*, Blue Moon Research & Planning, Belconnen, ACT.


McBride, N; Midford, R & James, R (1995), ‘Structural and management changes that encourage schools to adopts comprehensive health promotion programs’, *Health Promotion Journal of Australia*, vol. 5, no. 1, pp 17-23.

Munro, G. (1994), *Alcohol and Drug Education in Schools*, unpublished paper for *Alcohol and Drug Issues in Australia*, a seminar run by the Centre For Adolescent Health.


Appendix 1: Interview Schedule for the Staff of Catholic Education Offices

1. Are you familiar with the National School Drug Education Strategy?

2. What elements of this strategy have been helpful to you in shaping a drug policy for Catholic schools?

3. Are you familiar with the National Framework for managing the possession, use or distribution of illicit or other unsanctioned drugs in schools?

4. What elements of this framework have been helpful to you in shaping a response policy in relation to such incidents?

5. What policy guidelines have been developed by your Office in relation to school drug policies?

6. Do you believe that these policies are currently adequate to meet your current requirements?

7. What are the areas or issues that you believe need further development?

8. Has the issue of possession of illicit drugs been one of significant concern in the last twelve months?

9. Do you believe that there is a need to further develop your policies in this area?

10. Apart from the development of policy guidelines, what assistance do you provide to schools in relation to specific incidents of illicit drug use or possession by students?

11. Can you recommend any further actions or approaches that might be helpful in developing the response of Catholic schools in this sensitive area?
Appendix 2: Interview Schedule for the Principals of Catholic Schools

1. Does the school have a written drug policy?

2. When was the policy developed?

3. Who was involved in writing the policy – were students or parents involved, if so, how?

4. Did you refer to the National Protocols for responding to drug related incidents and possession of illicit substances (2002)?

5. Does your policy specifically mention use of illicit substances and consequences of use?

6. How is this policy communicated to students/parents?

7. In your school, what are the consequences of being:
   (a) Caught in possession of an illicit substance?
   (b) Arriving at school under the influence of an illicit substance?
   (c) Providing an illicit substance to another student?

8. Are students in this school aware of the consequences of illicit drug use?

9. What are some of the difficulties for schools to retain young people involved in illicit drug use?

10. When is it appropriate or what sort of circumstances make it necessary for a student to be excluded from school?

11. Do you feel there is appropriate support from the Catholic Education Office in relation to handling difficult incidents? Give examples.

12. Under what circumstances would you involve the police in a situation?

13. What processes do you have in the school to handle illicit drug incidents?

14. What recommendations could you suggest in relation to schools handling incidents about illicit drug use in schools?
Appendix 3: Interview Schedule for the Teachers and Welfare Personnel of Catholic Schools

1. Where does drug education fit in your curriculum? What subject area and what year level is it taught?

2. How are students made aware of the consequences of illicit drug use/activity?

3. How are parents made aware?

4. (a) Would students in this school know where to seek help if they were concerned about either their own drug use or that of their peers?
   (b) Would they be likely to seek help easily?
   (c) What might be the barriers to help-seeking behaviour?

5. What are some of the issues for you as a teacher in relation to drug use and young people?

6. Are the protocols for handling a drug incident clear for you as a teacher?

7. What are your thoughts on excluding students from school who become involved in illicit drug activity? Are there times when it is necessary?

8. If a student in your class is clearly affected by drug use, what procedures would you follow?

9. In what circumstances might it be preferable for teachers to not notice or not act on this situation?

10. What recommendations could you suggest in relation to schools handling incidents about illicit drug use in schools?