

Spotlight On District Alcohol/Drug Policy

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Seventh grade teacher Mrs. Nichols rounds the corner moments before the 3rd period bell, and sees Allison standing by her locker, drinking from a bottle in a bag. Allison puts the bag into her locker just as Mrs. Nichols comes up behind her. Mrs. Nichols smells the odor of beer. This scenario could happen in any school, anywhere in the country. If this happened in your school, would you know how to handle it?

Project ALERT, in fact, any substance abuse prevention curriculum, has greater impact when it is part of a carefully planned, comprehensive strategy for keeping youth drug-free. Central to this strategy is a school policy on alcohol, tobacco and other drugs (ATOD) that demonstrates the school district's resolution to help students and staff maintain healthy, drug-free lifestyles. As an ALERT educator, you will find your school's ATOD policies are important. They are important not just for discipline, but they actually provide an excellent basis for your prevention program. A few high profile cases have grabbed national attention (negative attention) so this is a good time to check out your policies and procedures, to ensure that your district doesn't end up in the headlines.

You may find alcohol/drug policies in the teacher handbook, your "back to school" folder, or in the principal's office. Policy summaries for students may be in the student handbook or pamphlet about student codes of conduct.

Good policies go beyond a list of prohibited behaviors and consequences; they frame "the big picture" by placing behavior in context with an overall objective (usually the school's aim to educate responsible, healthy community members). By explicitly stating this goal, the school can help build support for the policy and its implementation. Policies and procedures can protect your students and enhance the school's educational mission.

As you read it, note that your district policy should place ATOD (alcohol, tobacco and other drug) concerns in the context of the district's comprehensive prevention program. Does your school have a student study team? Student assistance counseling? Early intervention program? Drug prevention curricula? These should be mentioned in the policy to reinforce the spectrum of protective measures, and remind everyone that policy is not meant to be punitive, but rather as a tool to support safety, appropriate conduct and healthy living.

Indeed, a well-crafted policy distinctly defines the boundaries of behavior. In most cases, this will mean a core statement that specifies who is covered by the policy, what behaviors are prohibited, in which areas, at what times and under what circumstances. This is done for reasons of clarity and also to forestall future legal challenge. If your policy clearly spells out the limits of behavior, it is less likely that students will violate these boundaries.

Are you and your colleagues prepared to meet the challenge? Find out by asking three colleagues to tell you what steps they would take if they encountered a student who smelled strongly of beer. Are they confident in their responses? Do they know what to do? Gauge their answers against your school's policies and procedures.

As you review your policy, you may note that some issues need special attention. School-aged children report deliberately inhaling substances like correction fluid, glue and cleaning products in school. This dangerous practice should be covered under your school's policy, but many policies accidentally omit inhalants. If inhalants aren't mentioned in your policy, this is a good time to revise your policy to include them.

The following is an example of a core statement that may be included in your school's Policy on Alcohol, Tobacco and Other Drugs:

No person may possess, use, produce, sell or distribute alcohol, drugs or other substances, nor use or possess paraphernalia for the purpose of drug use, at any time, in school buildings, on school property and grounds, in school-sponsored vehicles or at school-sponsored events at other sites.

The terms "alcohol, drugs and other substances" shall be construed to refer to all substances in all forms, including, but not limited to: alcohol and alcohol-containing beverages; all forms of tobacco; inhalants (such as gases, solvents, butane, propane, adhesives); marijuana or its derivatives; cocaine/crack; LSD or other hallucinogenic drugs; PCP; amphetamines and amphetamine-like compounds; heroin; methadone; scheduled narcotics; steroids; herbal/"natural" stimulants, herbal/"natural" euphoriant; look-alike products; and any substances commonly referred to as "designer drugs."

The inappropriate and/or illegal use of prescription and over-the-counter preparations is prohibited. Prescription medication or over-the-counter preparations for personal use shall be allowed only as per district medication policy, under the supervision of school personnel, with written orders from a physician. Federal, state and local laws shall apply to students and employees alike.

In almost every case, policies are reviewed and approved by the board of education. This makes them "board-approved." This is important, because enforcing policy can be tricky if the policy is not perceived as official. Uniform implementation and enforcement is key to establishing and maintaining a high level of compliance to policy.

Review drug-related policies and procedures at least once a year by way of a committee with a variety of perspectives on the issues. Members should include at least one student at the middle and high school levels; an administrator, at least one parent from each school level; a school board member; a pupil services professional; and a school counselor. This committee can examine the existing policies to see if they are clear and relevant.

At the same time, administrators and counselors should review each year's policy data

(be sure to remove any names or identifying information) to look at trends: what kinds of infractions occurred and what consequences were imposed? How were the cases similar? Were there significant changes from the previous year? Sometimes this analysis can be quite revealing. For instance, a significant upturn might not necessarily signal a worsening drug problem in school. It might actually be a function of better training for staff, so that staff members know what to look for and how to report cases. Better understanding often results in more enforcement. This can result in more students being referred for assessment and assistance, and can help prevent a student's problems from progressing.

Staff training is a vital link that can easily be overlooked. School personnel must understand their roles and responsibilities under the district's policy, or they cannot act appropriately. In practice, this means planning exactly how an educator should handle the situation if confronted with a student suspected of violating policy. What should be said and/or done? Should he/she report the incident? To whom, and in what manner? If the school doesn't already have a reporting procedure, develop it and make sure that all staff (including bus drivers, clerical staff, coaches, monitors, etc.) are well prepared. Using a standard format for responding, reporting and record keeping will be helpful to everyone, including the students involved. A "paper trail" provides accountability and ensures accuracy of records.

What about "zero tolerance?" Most people aren't quite sure what this really means. "Zero tolerance" refers to a schedule of pre-defined consequences for pre-defined offenses. In practice, this should mean that if Student A is caught smoking in the boys' bathroom he is subject to the same penalty as Student B if she is caught under the same circumstances. "Zero tolerance" is supposed to remove favoritism and make consequences fair, consistent, and certain. When schools end up in the headlines for "zero tolerance" policies, this is a sign that the policy or implementation procedures need to be reviewed more carefully.

Your drug school policy impacts students, parents, staff and community members. A top quality policy, clear implementation procedures and trained staff are the hallmarks of a district committed to health and safety.

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