

Comprehensive, School-Based Alcohol, Tobacco and Other Drug Prevention

Substance use among youth is influenced at the individual, peer, family, school, community, and societal levels. School communities increase the likelihood of positive outcomes when multiple levels of influence are addressed using evidence-based prevention programs and practices. To promote a safe and healthy school environment, substance abuse prevention and early intervention work best when they are robust and integrated into the school's whole approach (e.g., <u>Whole School</u>, <u>Whole Community</u>, <u>Whole Child Model</u>). Recommendations for school-based substance abuse prevention include the following elements:

Safe and Healthy School Environment

A safe and healthy school environment that supports student connection to school promotes healthy relationships, academic success and buffers against negative effect of unhealthy risk behaviors, such as early alcohol and drug use. A Multi-Tiered System of Supports (MTSS) framework can be applied to effectively promote healthy behaviors for all students.

Health and Early Intervention Services

Availability of early intervention services is recommended for all students in the school. Such services include: screening, referral for assessment when indicated, educational support groups, family outreach, direct health services, and emergency response protocols.

School Policy

<u>16 VSA §1165</u>, concerning school policy, requires each school district to adopt policies for the education, discipline and referral for rehabilitation of students who are involved with alcohol or drug abuse on school property or at school functions. Included in these policies are recommended procedures for education; referral for treatment, counseling and rehabilitation; and standards consistent with due process of law for discipline, suspension or dismissal of students. School policies should be regularly communicated to staff, parents and students.

Parent Outreach and Community Engagement

Parent outreach includes engaging parents and providing information on the school's programs, substance abuse policy, family education resources, health services, and referral system. Early substance use and abuse is more likely to decrease when parents, schools, and other community organizations work together and plan mutually supportive strategies to promote youth involvement in the community and discourage substance abuse. It is recommended that schools partner with local prevention coalitions to support these efforts.

Classroom-based Health Education

Comprehensive, classroom-based health education curriculum, taught by a licensed <u>elementary</u> health educator, or <u>middle and high school</u> health educator (<u>EQS, 2121.2</u>), should focus on skill development for preventing the use of harmful substances. This approach may address all forms of drug abuse, including the underage use of legal drugs; the use of illegal drugs, and the inappropriate abuse of legally obtained substances (i.e. inhalants, prescription medications, or over the counter drugs).

Comprehensive K-12 health education must be based on the <u>National Health Education Standards</u>, adopted by the Vermont State Board of Education. Curricula should also be aligned with the <u>CDC's Characteristics of Effective</u> <u>Health Education Curriculum</u>. <u>16 V.S.A. § 131</u> defines "comprehensive health education" as a systematic and extensive elementary and secondary educational program designed to provide a variety of learning experiences based upon knowledge of the human organism as it functions within its environment. The term includes the study of eleven content areas including "(9) Drugs including education about alcohol, caffeine, nicotine and prescribed drugs."

For more information, visit: <u>education.vermont.gov</u> or <u>healthvermont.gov</u>.