

Procedure Title	Drugs, Cannabis, Alcohol, and Tobacco - Standards and Education		
Date of Issue	July 6, 1999	Related Policy	BP 6820-D
Revision Dates	February 18, 2003; March 24, 2004; October 20, 2007; October 26, 2015; March 2, 2016; October 17, 2018	Related Forms	
Review Date		Originator	Administrative Council
References			
AP 6825-D "Progressive Discipline - Students"; AP 1415-D "Tobacco and Cannabis Free Environment"; Foundations for a Healthy School, Ministry of Education; Canadian Low Risk Alcohol Drinking Guidelines, Canadian Centre on Substance Abuse 2011; School Health Guidance Document, 2010; Cannabis Act; Controlled Drugs and Substances Act; Smoke Free Ontario Act; AP 3810-D "Alcohol and Drugs"			

1.0 RATIONALE

- 1.1 The Ministry of Education encourages school boards to take a comprehensive approach to student health outcomes and has developed 'Foundations for a Healthy School' to guide this work.
- 1.2 This procedure provides a comprehensive and integrated response to alcohol, tobacco, cannabis, and other substance consumption among students. It adopts three principal strategies: the prevention of associated issues, the early identification of issues, and the resolution of issues, which is aligned with board policy BP 6820-D "Safe and Accepting Schools" and administrative procedure AP 6825-D "Progressive Discipline – Students".
- 1.3 The preventive component of this procedure is directed toward students who do not use alcohol, tobacco, cannabis, or other substances, or whose current use is unlikely to cause health or social issues. The intention of the preventive component is two-fold: to encourage and reinforce student decisions not to use alcohol or other substances and, among those who choose to use, to discourage patterns and practices which are illegal or which increase the likelihood of health and social issues.
- 1.4 The board recognizes that the use of alcohol, tobacco, cannabis and other substances is a reality and that a minority of students will develop alcohol and other substance-related issues despite its preventative efforts. These issues affect the health, social, legal, and academic well-being of students, and are often accompanied by a range of observable signs and symptoms, including school performance. The early intervention component is aimed at students who have developed or are in the process of developing issues, and is intended first to identify these issues, and then to provide appropriate assistance to students.
- 1.5 The third component of the process is disciplinary in nature. Disciplinary actions shall be consistent with AP 6825-D "Progressive Discipline – Students".
- 1.6 This administrative procedure has been developed to be consistent with a set of key principles. Foremost is the board emphasis of continuous improvement, self-development and quality of endeavour among students. This administrative procedure is founded upon and recognizes the inherent good in students, and recognizes that self-defeating behaviour is a sign of individual discouragement. For such students, the board will provide appropriate initiatives and opportunities and invite students to take advantage of them.
- 1.7 This administrative procedure also recognizes the responsibility of the family and community in establishing fundamental values and standards of behaviour. The board's role is to complement and support family responsibilities by promoting respect for self and others among students, and to advocate for supportive environments and processes that reduce the impact and influence of alcohol on youth.

- 1.8 Opportunities for partnerships with parents/guardians, Grey Bruce Health Unit, Hope Grey Bruce: Mental Health and Addiction Services, Grey Bruce Task Force on Crystal Meth and Other Drugs and other community resources will be actively pursued in the development and implementation of the three components of the administrative procedures.
- 1.9 The procedures are designed to assure that students develop the following behaviours:
 - a) Solve issues and make responsible decisions using critical and creative thinking.
 - b) Apply the skills needed to work and get along with other people.
 - c) Participate as responsible citizens in the life of the local, national and global communities.
 - d) Make wise and safe choices for healthy living.

2.0 PROCEDURE

2.1 Preventative Education

2.1.1 Curriculum Focus

The preventive education program begins at the junior kindergarten level and extends through to the level of secondary school graduation. The board will continue to develop, review and revise curricula for all students to assist in the promotion of positive health behaviours and to discourage alcohol, tobacco and drug abuse. In order to assist students in promoting positive health behaviours, the staff will be provided with the necessary professional development opportunities.

- a) The preventive education initiative will be designed to recognize the developmental stages of students and to address patterns of alcohol and drug use.
- b) The preventive education initiative will be implemented in health education classes and integrated into other subject areas as appropriate.
- c) The delivery of the preventive education initiative will include, but are not limited to, such things as: an awareness week, special assemblies, field trips, student organizations, theatrical performances, poster contests, and activities for parents.

2.1.2 Resources for the Preventative Curriculum

- a) The preventive education initiative will be developed collaboratively by board personnel, students, parents, and agencies serving Bluewater District School Board.
- b) Professional development of the staff at all levels will be ongoing.
- c) The preventive education initiative may include the training of students to act as peer helpers under appropriate direction.

2.1.3 Five Recommended Practices

The success of any preventative education initiative depends entirely on the extent to which students know and subscribe to the following five recommended practices.

- a) No use of tobacco as it is strongly associated with health issues – Bluewater District School Board supports tobacco and cannabis free environments (see AP 1415-D “Tobacco and Cannabis Free Environments);
- b) No use of alcohol or cannabis before the age of 19;
- c) No use or low-risk use of alcohol or cannabis after the age of 19. (“Low-risk” refers to consumption practices reflective of the *Canadian Low Risk Alcohol Drinking Guidelines*);
- d) No use of illicit drugs or inhalants; and
- e) Use of prescription drugs only as directed by a physician.

2.2 Intervention

2.2.1 Statement of Intent

- a) It is acknowledged that some students will develop alcohol and other drug-related issues despite the preventive intent of the curriculum. The board believes that the major responsibility for the provision of counselling and rehabilitative programs rests with community agencies. It recognizes that schools are in an advantageous position to identify and provide early intervention for students who are in any way affected by drug or alcohol abuse. Bluewater schools will collaborate with appropriate community agencies in the referral of students to counselling and rehabilitative programs and will endeavour to develop positive working relationships with all school stakeholders including students, parents/guardians, school staff, administrators, school councils and community partners to ensure a healthy school approach (School Health Guidance Document, 2010, pg.19).
- b) It must be understood that intervention is a process, not a single event. Successful intervention begins early for students whose lives are affected by substance abuse – their own or someone else's. Help must be offered as soon as the issue becomes apparent. The school community has a responsibility to support students whose lives are affected by substance abuse, and to assist them to use the intervention program established in the school. Students, parents, and school personnel need to be aware of the importance of early intervention and be encouraged to collaborate and access services available in the community.
- c) It is acknowledged that confidentiality is an essential component of the intervention program. Confidentiality is necessary in order to encourage the involvement of students in the process. However, it is recognized that under some circumstances an educator's legal obligations may require disclosure.
- d) It is acknowledged that intervention initiatives must be evaluated prior to onset to ensure necessary capacity and skills are in place and/or available.

2.2.2 The Goal of Intervention

The goal of the intervention initiative is to reduce and, where possible, eliminate the abuse of alcohol, tobacco, cannabis, non-illicit drugs, and the use of illicit drugs. The goal of the initiative is to reduce the number of existing cases of alcohol, tobacco, cannabis and other drug-related issues through identification, assessment, counselling and referral to community support services when necessary. This goal is consistent with the board's concern for the health, social and personal well-being of its students.

2.2.3 The Objectives of Intervention

- a) To reduce harmful consumption practices among students.
- b) To establish in each school a process for identification, early intervention, and referral of students with alcohol, tobacco, cannabis, and drug-related issues.
- c) To inform all staff of the need and the nature of the intervention process.
- d) To inform all students and their parents/guardians of the availability of the intervention initiative.

2.2.4 Process of Intervention

It is acknowledged that a successful intervention program requires partnerships between schools and community agencies.

a) Identification

Students may be identified for intervention in the following ways:

- i. Self-Identification - a student may seek assistance through any staff member. A student who has issues arising from alcohol, cannabis, or other drug use by parents, family members or friends, may also seek assistance.

- ii. Identification by Staff or Others
- iii. Identification through Disciplinary Action – a student may be identified as a result of disciplinary action.

b) Early Identification

Following identification, the school will attempt to determine the nature and extent of the issue and will:

- i. provide in-school counselling (e.g., face to face, peer to peer, group)
- ii. initiate family involvement
- iii. consult with community partners

The school may involve peer helpers.

c) Referral

Following identification, the school may refer a student to the appropriate support agency. The school will maintain liaison with the agency as appropriate.

Note: If a referral is contemplated for a student 16 years of age or older, the student's written consent and co-operation should be sought. Similarly, if a student is under the age of 16 such consent should be sought from the student's parent or guardian. Referrals without such consent should not be made without the approval of the superintendent for the area of schools.

2.3 Procedures for Dealing with Student Drug, Cannabis, Alcohol and Tobacco- Related Incidents

Bluewater District School Board utilizes a progressive discipline approach for student incidents related to drugs, cannabis, alcohol and/or tobacco related incidents, in accordance with AP 6825-D "Progressive Discipline – Students".