



Calendar Highlights

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Message from the Executive Director

One of the most persistent and complex challenges we face in supporting child and youth health lies in the area of substance use. As educators, health practitioners and others working to support young people, we're keenly aware of the harms and risks associated with the use of tobacco, alcohol and other drugs, especially at an early age.

Historically, though, we have not done a good job of influencing child and youth behaviours. For example, in spite of the considerable investments made in substance use education and prevention initiatives, the proportion of young people drinking alcohol and smoking cannabis continues to increase. In the 2004 Canadian Addiction Survey, 83 per cent of young people said they were drinkers, up from 77 per cent a decade earlier. About a third of young people reported using cannabis. That's more than double the rate reported in 1989.

Clearly, we need to take a different approach. Education alone is not enough. And as you will see in this issue of the newsletter, school health leaders all across the country are working to develop and deliver innovative solutions.

We also have a body of evidence that shows us what hasn't worked – and what has. As in other areas of child and youth health, research shows that a comprehensive, whole-school approach can be the most effective in helping students navigate a world in which drug use is a cultural reality.

To help the various partners understand what they can do, and how they can coordinate their actions, the Consortium will soon be releasing a Toolkit for Addressing Substance Use in Canadian Schools. The Toolkit will include an education kit for teachers, a policy kit for administrators, a specialized kit for counsellors and health workers, and a kit for school and community leaders.

These new tools are designed to help practitioners move beyond education – and beyond efforts to influence individual choices and behaviours. They include such concepts as acknowledging the presence and role of drugs in our society, and helping students understand and interact with a range of factors related to their family, cultural, economic, political, social and physical environments.

This Toolkit supports a comprehensive school health approach in our schools and is another step towards improving the health and resilience of our children and youth. It will be available on the Consortium's website in the spring 2009. I'd like to encourage you to download the kit and consider its principles and recommendations. I look forward to seeing it in action, and to seeing results in the years to come.

–Claire Avison

British Columbia

Tobacco Free School Grounds

In September 2007, the BC government enacted legislation banning tobacco and smoking on all school properties. The *Tobacco Control Act* applies to all user groups on school property, as well as property leased by school boards for the delivery of educational programs. Exceptions can be made for ceremonial use of tobacco in relation to traditional aboriginal cultural activities.



The Ministry of Healthy Living and Sport and the Ministry of Education have worked collaboratively to develop tools to support school districts to meet their obligations under this new legislation. These supports include strategies for implementing a tobacco-free school grounds policy, tobacco cessation resources and signage for school grounds. Resources can be found at www.bced.gov.bc.ca/health/tobacco/. In April 2008, the Healthy Schools Network also produced a special edition newsletter on tobacco-free schools, available online at www.bced.gov.bc.ca/health/hsnetwork/newsletter_apr08.pdf. The newsletter contains strategies for implementing a tobacco-free school grounds policy, research data on tobacco use among youth and tobacco cessation resources.

Problematic Substance Use

The Ministry of Education has been a key partner in the BC Crystal Methamphetamine Strategy contributing \$1 million to this provincial initiative. With support from the Ministry of Health, the Ministry of Education developed a school-based awareness component for

the Provincial Crystal Methamphetamine Strategy including: classroom lessons and resources to help students make healthy and informed decisions regarding tobacco, alcohol, cannabis and methamphetamine;

- teacher resources to support classroom lessons;
- a guide for parents providing information to help parents talk to their children about the harms associated with crystal methamphetamine and other substance use; and
- an interactive website, featuring games, activities and information on the effects and dangers associated with the use of crystal methamphetamine.

More information on the no2meth program can be found at www.no2meth.ca

The Ministry of Education has also posted a reference section of school drug and alcohol programs on the Healthy Schools website at www.bced.gov.bc.ca/health/school_drug_alcohol_programs.pdf. The section includes provincially recommended learning resources and school-based programs and initiatives offered in BC and other provincial and international jurisdictions.

Manitoba

Manitoba Addictions Awareness Week (MAAW)

Manitoba Addictions Awareness Week (MAAW) takes place annually in the month of November. The goal of MAAW is to increase knowledge and awareness of addictions and prevention for Manitobans of all ages. As part of MAAW, the Addictions Foundation of Manitoba develops a kit each year with information, ideas, learning activities and promotional

materials around substance use and gambling for schools, communities and workplaces. The MAAW theme for this year was “The Best of Me – Manitobans making Healthy Choices”, which encouraged communities to think, talk and learn about addictions. www.afm.mb.ca/maaw/

Examining Alcohol and Other Drug Use by Manitoba Students

The Addictions Foundation of Manitoba regularly conducts prevalence surveys into the patterns of substance use and abuse in Manitoba. The “Alcohol and Other Drug Use by Manitoba Students” survey originated in 1993 to measure the prevalence of substance use in schools. In 2007, the survey’s fifth cycle, approximately 5,100 Manitoba students, grades 7 through 12, provided information about their use of alcohol and other drugs. Results show that alcohol use is very common, with substantial increases from grade 7 through grade 12. Marijuana use is also common, also increasing with grade level. Many older students are at risk for developing problems as a result of their current level of alcohol and/or marijuana use. There is also some concern about the number of students using alcohol or marijuana and then driving. These data are used by service agencies to help develop prevention programs and to target these programs to specific grades. www.afm.mb.ca/Research/index.htm

New Brunswick

Provincial Wellness Strategy

Schools, communities and workplaces are key settings that play a role in promoting wellness. The Department of Wellness, Culture and Sport, through the provincial Wellness Strategy, conducts surveys with students. Click on the following links to see the provincial results of the latest surveys, which were carried out in 2006–2007 with students in grades 6–12 in 184 schools across the province. These results have been made available to individual schools and districts which can use them to coordinate action towards wellness in school communities. It is planned that

the surveys will be conducted every three years by the University of New Brunswick’s Health Education Research Group. The next data will be available in 2010–2011.

- *Environments*
- *Healthy Weights and Lifestyle*
- *Mental Fitness*
- *Social Relationship and Influences*
- *Tobacco and other problem Substance Use*

Newfoundland and Labrador

Addictions Awareness Week 2008

In 2005, the Department of Health and Community Services launched *getuponit* to promote Addictions Awareness Week, turning a one week campaign into a year-long initiative, and bringing Rex Goudie of Canadian Idol fame onboard as our spokesperson. *Getuponit* has continued to evolve. In 2006, the focus was drinking and driving. In 2007, we ‘made the message stick’ with a focus on family and communications.

For 2008, our goal was to educate youth about the potential risks associated with marijuana use, and allow them to make smart choices.

This Year’s Theme?



Draw Your Own Conclusions.

This was promoted through posters in schools across the province, as well as web advertising to getuponit.ca.

We conducted focus groups with teens to find out how prevalent marijuana is in their world and how it is perceived. We were glad to hear that the risks they perceived were the same as the risks we wanted to share with them: health risks; dependence risks; and the dangers of smoking and driving.

Key in this year's campaign was a t-Shirt design contest. Teens designed their own shirts around this year's theme, submitted them online and their peers voted for the winner. The winner was presented with their design, printed on their own clothing line – 100 t-shirts and 10 hoodies.

Go to getuponit.ca for more information.

Northwest Territories

Hay River's Four Pillar Strategic Plan

In April of 2008, the South Slave Divisional Education Council began a focused program to try and lessen the negative effects of drug and alcohol use and abuse in their communities. It began by researching effective practices from across the country and then conducting a youth



Staff at Diamond Jenness Secondary School wear Youth Against Drugs t-shirts on Fridays to show unity and support for the Drug Strategy

survey in Hay River to find out the true attitudes, use and trends among teens.

Using the data and comments from the survey, the South Slave Healthy Community Partnership (HCP) called a community interagency meeting and developed a community strategic plan to address all four pillars of intervention, prevention, harm reduction and enforcement. The group, representing health, social services, education, commerce, counselling and the town of

Hay River, put together a strategic plan of 64 timely and achievable goals.

To date the group has met over half the strategic objectives and continues to gather monthly to develop new action items and maintain current objectives. The power of this group lies in the dedication and communication that the interagency meetings allow for. It is very exciting to have people come together for a common cause and work as one to solve problems and action strategic items from the plan.

We no longer feel as if we are addressing these issues in isolation; from our partnership we now have support for each others programs and work for the common good of building a healthier community.

Some of the many strategic items actioned to date include: Healthy Community lawn signs, Youth Help information cards, community-based poster contests, sexually transmitted disease (STI) workshops, drug and alcohol information nights for parents, weekend (Lights On) programs for youth, a Students Against Drinking and Driving (SADD) group up and running, a motivational speakers series, a RCMP school liaison program, a new Learning Center for youth and much more.

Our community is working together and in that there is power. One of our next goals is to share our successes with other communities in our region and to encourage other communities to form a similar partnership for focused planning and cooperation.

Crystal Meth and Associated Drugs Strategy

The document entitled '*Crystal Methamphetamine and Associated Drugs – A Strategy for the NWT*' was prepared by an interdepartmental working committee of representatives from the Government of Northwest Territories' (GNWT) departments of Justice, Health and Social Services, Education, Culture, and Employment, Municipal and Community Affairs, and the RCMP. The document,

which is still in draft form, describes the potential harm crystal meth and related drugs could have on the people of the NWT, particularly youth and young adults. While not yet prevalent, crystal meth or meth disguised in other illicit drugs represents a clear danger to the residents of the NWT. The strategy is a pro-active plan intended to prevent individuals from ever starting meth use, and to prevent the drug from spreading into the NWT. In that respect, the document provides an integrated response in four key priority areas:

- Public Education
- Prevention
- Enforcement
- Treatment

The GNWT has a significant role to play towards implementing these priorities with each priority further divided into action items.

The strategy speaks to how drug usage patterns in the NWT are changing and being influenced by improved economics, drug availability, mainstream societal acceptance and media pressures / influences for experimentation. Residents of the NWT want action to fight crystal meth and similar hard drugs. The priorities and actions in the strategy provide a framework for action by the government to get ahead of these dangerous substances. It also emphasizes that effective prevention requires the critical support and involvement of communities, non-government organizations and the private sector.

Also integral to the strategy is a solid communications plan which identifies key audiences and messages. The document concludes with the message that crystal meth and associated drug use or abuse in the NWT has the potential to become a real threat to public health and safety. If their use is not prevented, these drugs could have devastating immediate and long-lasting health, social and economic consequences.

Nova Scotia

2007 Student Drug Use Survey

The 2007 Student Drug Use Survey in the Atlantic Provinces was a collaborative initiative between Nova Scotia, New Brunswick, Newfoundland and Labrador, Prince Edward Island and Dalhousie University. In Nova Scotia, a total of 4486 students in grades 7, 9, 10 and 12 participated in the survey.

The major finding among Nova Scotia students was a decrease from 2002 to 2007 in the prevalence of cigarette smoking, cannabis use, psilocybin or mescaline use and the use of non-medical amphetamine and methylphenidate. The survey also revealed an increase in the prevalence of use of MDMA (ecstasy), but essentially no change in the prevalence of use of alcohol and seven other substances.

In 2007, 42 percent of students in grades 7, 9, 10 and 12 indicated that in the year prior to the survey, they had not used any of 13 substances mentioned in the survey. About 16 percent of students smoked cigarettes during the year. About 52 percent of students took alcohol during the year, and 28 percent of students consumed five or more drinks at a sitting on at least one occasion in the month before the survey. About 32 percent of students used cannabis during the year, and 5 percent of students used cannabis daily in the month before the survey.

A proportion of adolescent students used alcohol or drugs in a manner that placed them at high risk of harm. Among students in grades 9 or higher, 20 percent had three or more alcohol-related problems, and 13 percent had three or more drug-related problems. About 26 percent of all students indicated that, on at least one occasion during the year, they had been a passenger in a vehicle driven by someone who had been using cannabis. About 23 percent of senior high school students with a driver's licence drove a motor vehicle within an



hour of having used cannabis. Of students who had sex during the year, 33 percent had unplanned sexual intercourse after alcohol or drug use.

The 2007 survey revealed essentially no change in the student rate of participation in gambling for money (60 percent), and in the prevalence of at-risk (three percent) and problem gambling (two percent). For the first time, questions about internet gambling were asked. In 2007, five percent of all students played on internet gambling sites for real money, and 26 percent of all students played on internet gambling sites for points or play money.

In 2007, six percent of all students scored positive for very elevated depressive symptoms. About five percent of all students were positive on a screening test for Attention Deficit/Hyperactivity Disorder (ADHD). About 10 percent of students with a positive ADHD test indicated they were on prescribed stimulant medication. These three rates are essentially the same as were observed in 2002.

For more information, visit www.gov.ns.ca/hpp/addictionprevention.html

A Question of Influence

In 2007, the Department of Health Promotion and Protection and the Department of Education were pleased to announce the availability of *A Question of Influence Curriculum Supplement: A Teacher's Drug Education Resource for Healthy Living Grades 7–9*. Developed in consultation with students and teachers and tested in Nova Scotia schools, it is designed to prepare grades 7, 8, and 9 teachers to successfully deliver the curriculum and create a safe environment for open discussion and activity.

The supplement is built on current school-based alcohol and other drug education best practice knowledge. Each grade unit is organized into three learning themes based on the Social Influences Model: the approach supported by 25 years of research

to be most effective for junior high school drug education. The three learning themes are

- How I Influence Myself
- How Others Influence Me
- How I am Influenced by the World Around Me

The grade 7 unit is designed to prevent or delay substance use. Students are encouraged to think about the decisions they make concerning alcohol and cannabis, two of the most common substances that the majority of students are likely to encounter. They are provided with the skills and resources to be aware of what is influencing them as they make those decisions.

The grade 8 unit attempts to strengthen students' understanding of all the factors that influence substance use decisions and to help them make healthy choices. The unit emphasizes sound decision making through a clear understanding of risks and harms linked to substance use.

The grade 9 unit builds on and enhances students' understanding of the risks and harms linked to substance use developed in grades 7 and 8. The unit addresses the real possibility that grade 9 students may find themselves in high-risk situations particularly with respect to the use of alcohol.

An exciting feature of this curriculum resource is the interactive website. To find out more go www.druged.ednet.ns.ca.

Strategically Responding to the Needs of Youth

In 2007, the Department of Health Promotion and Protection launched a Nova Scotia Alcohol Strategy to lead a major cultural shift so that Nova Scotians who choose to drink do so without harm to themselves, their families or their communities.



The strategy incorporates the vision of broad cultural change, where Nova Scotia is a society in which individuals, families and neighbourhoods support responsibility and risk reduction in the use of alcohol. The goal of the Nova Scotia Alcohol Strategy is to prevent and reduce alcohol-related acute and chronic health, social and economic harm and costs among individuals, families and communities in Nova Scotia.

The strategy identifies many important initiatives that will help to promote the health of Nova Scotian youth and prevent or delay the onset of harmful drinking. In order to achieve success, these initiatives require a collaborative approach that responds to the needs of youth, their families and their communities.

Over the next year, the Department of Health Promotion and Protection will be releasing the Nova Scotia Problem Gambling Strategy and, in collaboration with the Department of Justice, the Nova Scotia Drug Strategy. Like the Alcohol Strategy, these strategies will be comprehensive in their approach and will outline a number of key initiatives to support the health of Nova Scotian youth.

For more information, visit www.gov.ns.ca/hpp/addictionprevention.html

Nunavut

Social Work through Hiphop comes to Cape Dorset, Nunavut

By Clyde Steele, Student Support Teacher

On September 9–13, 2008, the BluePrintForLife Hiphop crew came to Peter Pitseolak School (grades 8–12) in Cape Dorset for an intensive five-day workshop which became the school curriculum for the entire week.

The project empowers youth with positive alternatives to drugs and alcohol. It is a dynamic, culturally appropriate program designed for First Nations and Inuit youth that is founded on HipHop, rooted in traditional culture and centred on community needs.

Having taught for 29 years and being involved in coaching and tournament play at various levels, this event has been the most positive activity that I have ever been involved in. This event involved everyone in a non-threatening environment that focused on teamwork, acceptance and encouragement.

There was much anticipation for the event which was funded by various groups who contributed in many ways, including the National Aboriginal Solvent Abuse Program, RCMP F Division, Department of Culture Language, Elders and Youth, the Walter & Gordon Duncan Foundation, First Air, the Northwest Company and Arctic Cooperatives Limited.



The BluePrintForLife project empowers youth with positive alternatives to drugs and alcohol

A committee comprised of representatives from Education, Health, Justice, Social Services, RCMP, the Healing Team and the Hamlet was set up to oversee this venture.

Over 100 students registered and attendance each day was over 80. Many of the students were reluctant at first but, as the week progressed, they became more comfortable and confident. The smiles on their faces and their willingness to try something new became infectious. It brought a tear to many an eye, especially when the elders came on Friday and during the Saturday evening Hiphop Battle.

Following the workshop, leader Stephen Leafloor also known as "Buddha" and I



attended an interagency meeting which focused on the many suicides in town over the summer. Buddha was asked to speak to the group and many of the people in attendance applauded the work done by the BluePrintForLife team, especially the elders. They recognize that there is a need in this town and that changes need to be made in the homes. They hope his team will return and work with both the parents and the children.

In conclusion, this was a very successful event. The staff are very professional and relate exceptionally well to the youth and the community as a whole. I would love to see them return, and we must continue to promote this program and ensure that local people take up the torch and take responsibility for the continuation of this program.

Provincial Substance Use Prevention Initiatives

In mid-November, Ontario released the new Ontario Public Health Standards. Included in the Chronic Disease and Injuries Program Standards are requirements for boards of health to work with community partners, including school boards and schools, using a comprehensive health promotion approach to influence the development and implementation of healthy policies and programs, and the creation or enhancement of safe and supportive environments that address alcohol and others substances.

Ontario recently announced the third year of the Healthy Schools Recognition Program. www.edu.gov.on.ca/eng/healthyschools/search.asp. Over the last two years, more than 1,700 schools have pledged to undertake more than 4,600 healthy activities through the Healthy Schools Recognition Program. Examples of substance abuse prevention activities include presentations by local police on use and abuse of illegal drugs, anti-smoking campaigns and partner-led educational programs with access to counselling opportunities when required.

The FOCUS Community Program operates in 22 Ontario communities. Community coalitions support alcohol and other substance abuse prevention programs. All coalitions sponsor programs target youth with school activities that vary from community to community.

