## feature

# Just say - 'Oh no, not again'

Just prior to the publication of the Home Affairs Select Committee report, Ivan Lewis, Education Minister announced an eleventh hour 'new tough stance on drugs and schools'. Are we, asks Julian Cohen, heading for a back to the future stab at shock horror tactics?

hose of us who embrace harm reduction as a realistic and pragmatic response to current drug problems are often accused of being defeatist. We are told 'if only we took a rigid stand against drugs, we could overcome this menace'. But how defeatist is it to return to drug education (or rather propaganda) tactics that were discredited in the 1970s?



Ivan Lewis MP

We are supposed to be in an era where drug policy is determined by the evidence-base – a rigorous assessment of not only what works, but what doesn't. Everybody is looking for the magic educational bullet – that programme which can actually change young people's behaviour over the long haul or at least stop them from doing something they might otherwise have done.

Many drug education programmes have been evaluated in this country, other European countries and America against such criteria. But collectively these evaluations show that the impact of drug education on drug using behaviour is limited. It is very unlikely to prevent young people

from ever experimenting with drugs. This has even been acknowledged by Ivan Lewis's own Education Department in its most recent guidance to schools and the youth service.

'Almost all evaluations of programmes have been inconclusive in terms of perceived results in reducing or preventing drug use. Where programmes have shown positive results, the benefits have been in improved knowledge, decision-making skills, and improved self esteem'.

Paradoxically, the only programmes that have been associated with increased drug use are those very programmes the government are seeking to reintroduce - those founded on shock/scare tactics. Again, this is something the DfES acknowledge very clearly in the same guidance note and in the curriculum guidance sent out to schools in 1995: 'Research has shown that such techniques (shock/scare tactics and moral exhortations) are rarely effective in influencing behaviour. Some of the intended audience may consider such messages apply to hardened drug users with whom they have nothing in common. Others may avoid confronting fearful messages or may be intrigued and excited rather than deterred.

'Programmes which rely simply on slogans or vivid and frightening images .....may glamorise drug use.'

## So why bother with drug education?

If drug education can't stop young people using drugs, some may say, why bother? On the positive side research evaluations indicate that drug education can increase knowledge and understanding, clarify attitudes and values and help develop personal and social decision making skills. In other words drug education can have important *educational* outcomes.

To my knowledge all evaluations that examine the impact of drug education on behaviour have focussed on prevalence - how many young people have tried various drugs (even once) and occasionally how often. No one has yet carried out an evaluation of the impact of drug education on drug using behaviours and whether it may lead to safer patterns of use and decreased harm. However, meta-analyses of evaluation suggest that it is reasonable to assume that drug education can contribute towards decreased harm and increased safety for young people, their families and communities. In their seminal overview on drug prevention published ten years ago, which has never been bettered, Nicholas Dorn and Karim Murji wrote 'Both information-type programmes, and general values and living skills programmes seem, on the evidence, to be equally ineffective in terms of restraining initial drug use. Information may, however, have a role to play in restraining post initiation escalation of use, and in harm reduction'

#### **Education not propaganda**

We need to be clear that shock tactics, horror videos, terrible tales of degradation from ex-users and so on - is not education, it is propaganda, defined by the Oxford English Dictionary as something 'regarded as misleading or dishonest'. Extreme cases are presented as though they are common. Dangers of drug use have been exaggerated in an attempt to put young people off drugs - what might be called 'prophylactic lies'. Benefits and pleasures are ignored or denied. This is primarily the territory of primary prevention approaches that seek to censure information, exaggerate dangers, limit discussion,

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perpetuate stereotypes and 'tell' young people what to think. This discourages the development of informed decision making. It also increases the likelihood of young people feeling that drug education is irrelevant, that they are being patronised and that they are not being told the truth or given a balanced picture.

Many young people have found, through their own experiences of drug use and what friends have told them, that they have not been told the truth. The inevitable result is that many young people, and particularly those who are at most risk, have gone on to mistrust adult sources of drug information.

If schools taught other subject areas – such as history, geography or social studies – from such an overtly propagandist stance many people would strongly object. Yet when it comes to drugs, and sometimes sex and relationships education – propaganda often rules.

By contrast, an educational approach focuses on provision of accurate and balanced information – both potential benefits and risks. It accepts that there are different views about drug use and encourages young people to explore a range of views, to challenge stereotypes and to develop their own opinions. In terms of skill development, an educational approach helps young people develop a range of relevant personal and social skills so they can make their own, informed decisions about drug use.

Drug education raises contentious issues and drug educators should be aware that none are 'value free'. We all deliver drug education in a way that is influenced by our own beliefs. We also have a moral responsibility to learn from the evidence. We have a choice. Is it to be drug education or drug propaganda? Hopefully, Mr Lewis' knee jerk announcement was made under orders from the spin doctors, rather than the consequence of thought-through DfES policy.

#### References

Department for Education (1998) Drug Prevention and Schools, Circular 4/93. London: DfEE.

Department for Education and Employment (1998) Protecting Young People - Good practice in drug education in schools and the youth service, London DIEE.

Dorn, N and Murji, K (1992) Drug Prevention: a review of the English language literature, London: Home Office.

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|                           | EDUCATION  | PROPAGANDA  |
|---------------------------|--|---|
| KNOWLEDGE/<br>INFORMATION | <ul><li>Accurate</li><li>Balanced</li><li>Up to date</li></ul> | <ul><li>Selective</li><li>Exaggerate risks</li><li>Extremes presented</li></ul> |
|                           | Benefits & risks     Honest                                    | as norms • Ignore benefits • 'Prophylactic lies'                                |
| ATTITUDES/<br>VALUES      | <ul> <li>Explore/debate</li> <li>a range of views</li> </ul>   | •No debate  |
|                           | Challenge     stereotypes     Think for                        | <ul><li>Perpetuate<br/>stereotypes</li><li>Think what we</li></ul>              |
|                           | yourself - decide<br>what you think                            | tell you to think   |
| SKILLS                    | About drugs     Develop a range                                | Against drugs     Refusal skills  |
|                           | of relevant skills  •Make your own,                            | • Do what we  |
|                           | informed decisions   | tell you to do  |

### Key points from Dorn and Murji's classic 1992 study Drug prevention: a review of the English language literature

- Drug education programs have been largely ineffective in preventing substance use or abuse. Whereas many programmes are effective in increasing drug knowledge, very few programs influence drug attitudes, and even fewer influence drug use.
- The impact of knowledge-based schools drug education programmes is either minimal or ineffective in preventing use. Gains in knowledge or changes in attitude are counterproductive and stimulate interest in drug experimentation or increase knowledge, but with minor effects on attitudes and behaviour.
- Those receiving a 'warning' approach are less likely to agree that drug use is deviant or harmful and should be prohibited than those receiving the 'informative' approach.
- The only positive effect of peer-led approaches is likely to be an increase in knowledge, while the use of many types of drugs may increased.
- Knowledge is the most easily influenced psychological element followed, to a much lesser degree, by attitudes and behaviour.
- There is a positive correlation between level of knowledge and drug use: those with higher levels of accurate knowledge are more likely to use.
- However, knowledge is less important in determining drug use than attitudes.
- Drug education places excessive faith in the Knowledge, Attitude, Behaviour model.

  Alterations in knowledge and attitude do not

lead to desired behavioural change.

- Schools should recognize that the ultimate goal of drug education is drug abuse prevention or reduction and that such objectives as program popularity, gains in knowledge, or even attitude change may be irresponsible as they may be counterproductive.
- Many programmes are unrealistic in exaggerating the negative aspects of drug use and lack credibility with young people.
- High fear messages may only discourage use if there is no previous knowledge about a drug.
   These programmes are therefore ineffective among those most likely to come into contact with drugs.
- Information should address the values of the audience, be unambiguous, accurate and balanced, and be appropriate to the developmental level of the audience.
- Most studies suffer from serious methodological weaknesses that undermine internal validity, or the ability to make inferences about program effectiveness.
- Most evaluation reports neither specify the programme's goals and objectives nor describe the target population. Most only provide superficial programme descriptions, and do not evaluate programme implementation.

Since writing this article Ivan Lewis has been replaced as Parliamentary Under Secretary of State for Young People and Learning by Stephen Twigg.

