

# The drug agency goes to school

*How one-off school assembly inputs were replaced by regular on-site advice and education*

A CROWDED HALL. It's an assembly for 15-year-olds, one of the last before they leave school for good. On stage with the teachers are representatives of the local drug agency, there to 'do drugs and dangers', sandwiched between throaty choruses and news of last week's sporting triumphs.

Most agencies will recognise the scenario. At the Community Alcohol and Drugs Service (CADS) we have had our share of school assembly inputs, one-off classroom sessions and other contacts where brief collaborations have taken place with parents or governors.

When another local high school asked us to meet its management team and discuss approaches to solvent misuse, we were keen to challenge these previous patterns of working. When they asked "What can you do for us?", we parried with, "Well, what do you need?" So began a dialogue between school and agency, with agency staff attending meetings of management and year heads, and teachers visiting our agency to learn about our work. Evolving from this came an active, ongoing collaboration between school and agency (not because this school was particularly 'in need' – incidents of substance misuse were no more common or serious than in other schools).

## **Educational support**

This came to involve CADS in several areas: staff facilitated workshops and discussions with pupils on drugs and sexual health as part of their personal and social education (PSE); an on-site presence was established, providing free confidential advice and information to pupils, teachers and parents; inputs were made into sixth form projects; and CADS participated in a school-based health fair, open to the local community.

In the first two terms of collaboration, up to three workers attended the school at any one time, providing the equivalent of one full time member of staff working for 18 days. They made 610 client/pupil contacts varying from PSE sessions to sixth form

work, staff training and 'drop-ins' providing information, advice and counselling.

Our involvement coincided with a new curriculum approach. For the first time PSE was timetabled to be taught throughout the school simultaneously. Teaching would take place in tutor groups led by class teachers, using materials and programmes provided by the head of PSE.

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**School and parents  
accepted the need for advice  
to be confidential**

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Since the whole approach to PSE teaching in the school was new, it was not surprising to come across fear and uncertainty. Teaching staff were now tackling issues around drugs, HIV and AIDS that they felt unprepared for. Sometimes their own attitudes and values were being challenged. In recognition of this we agreed

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The Community Alcohol and Drug Service in King's Lynn in Norfolk developed a continuing partnership with a local school which led to the agency's staff being present at the school to help in health education about drugs, sex and AIDS, and to provide confidential advice and counselling to pupils and their parents. This appears to have proved an effective way to reach young people and develop a relationship of trust that may make them more likely to use the agency once they leave school.

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with the management team to provide in-service training to all teaching staff. The aims were:

- to make staff aware of their feelings/ attitudes to drugs and alcohol;
- to help them feel comfortable dealing with issues that may arise in the class;
- to 'demystify' substances;
- to introduce them to CADS and to the school/drug agency collaboration.

Our on-site presence gave CADS workers the opportunity to be available to staff in an advisory, consultative role, or to be involved directly in classroom sessions. An example was when a Theatre in Education production visited the school. The play addressed drug use, relationships, HIV and AIDS. There was perceived discomfort among some teachers required to undertake class-based follow-ups with children who had seen the play.

Before the performance we had attended an evening meeting of teachers to consider the issues that might arise. We were present with pupils at the performance and were able to offer support to teachers in classroom sessions involving frank discussion of drugs, alcohol, relationships and sexuality.

We planned our work on drugs with the teachers whose classes we would be sharing. Our approach was to build on the facts already learned by the pupils, using anecdotal material to consolidate the learning process. We provided limited teaching materials, instead encouraging staff to use us as a 'live resource'.

Latest information about MDMA, its links with heatstroke and liver damage, and our experiences of attending raves, were of particular interest to sixth formers. Advice was given on avoiding dehydration and making use of chill out areas.

Occasionally pupils and teachers negotiated our presence in the classroom without school staff present. Teaching staff openly acknowledged the value of creating a less inhibiting forum for pupils. Reactions to these sessions suggested students found them "natural" and "informative".<sup>1</sup>



Away from the classroom, the school was keen to develop a partnership that would be an extension of its pastoral care provision.

Schools are required to be *in loco parentis*, but early on it was recognised that pupils using a counselling service provided at the school by CADS should be assured of confidentiality. At CADS we followed guidelines on working with young people being drafted by the East Anglian Drug Workers Forum, based on case law.<sup>2</sup> Youngsters would be encouraged to inform parents or guardians of their decision to use the service. If they were unable or unwilling to do so, the worker needed to be satisfied that the child's best interests would be served by giving them information or advice without their parents' consent.

### On-site advice

This was accepted by the school's management team. Parents and guardians were told a confidential service was available and could say they did not want their child to use the service. No such indications were received. It was agreed that the school would not be given any feedback about which pupils used the service, or about our interventions. Reports from school staff support our view that pupils had faith in the confidentiality being offered.

Referrals for advice, information or counselling could be made by teachers or parents, but self-referral was encouraged. Messages to this effect were given in school assemblies and on notice boards around the school. Initially contacts were slow to materialise. In response, teaching staff organised 'whistle stop' tours of tutor groups in years 10 and 11 (ages 14-16). During these we outlined the on-site service, emphasised its confidential nature – and countered one early rumour that we were from the drug squad!

Pupils soon started attending the lunchtime drop-in advice service in numbers ranging from four to 21, usually 12-16. These drop-ins together with one-to-one counselling, accounted for 15 per cent of our contacts with the school. Issues raised by the young people centred on their need for accurate information – on substance-related harm (poppers, cannabis, alcohol, nicotine), on relationships, and on sexual health, HIV and AIDS.

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Among those attending was a year nine pupil. Her class had not been visited in our 'tour', but she asked for time with us to look at the emotional and legal ramifications of her complex relationships with her family and boyfriend. Counselling was offered to another pupil and to their parents within hours of an alleged solvent abuse incident. Both parties accepted the offer. With the agreement of pupil and parents, the year head was advised with a view to providing additional pastoral care.

Schools have well-established support systems provided by school nurses, the school psychological service and education welfare officers. We aimed to complement these networks, combining with pastoral staff to help provide the best care for pupils. One year head wrote, "Apart from the obvious benefit of [CAD's] presence in school to help students who might be in crisis situations, I also believe their presence enhances the caring attitude of the school as being the place where education of the 'whole child' takes place."

### Sowing seeds

Developing trust between the agency and the school (teachers and pupils) was a key to the success of this collaboration.

In one school term, 340 pupils in years 10 to 13 were introduced to our agency and to its services, both on-site and as a resource available to them when they leave school. One hundred and forty received accurate, unbiased, up to date information about drugs, alcohol, HIV and AIDS in class PSE sessions. Sixty-eight attended in their own time. They gained information for personal

use or course work, received advice or one-to-one counselling, or participated in peer-led discussions on issues of concern. In-service training reached 37 staff.

Anecdotal evidence suggests that information from CADS has been passed among friends. Sixth form students in particular have been surprised at a willingness to discuss subjects in school "which might have been taboo before."<sup>3</sup>

The greatest value of the exercise has been in developing relationships of trust with young people who might wish to use our service in the future. This was recognised by the school in the words of a head of year addressing the issue of whether the collaboration should continue.

"If it is not feasible for [CADS] to remain in school every Thursday ... I think we should maintain close links so that staff can plug into their specialist knowledge when necessary. Far more importantly, however, I believe that they should still remain available on a regular basis ... so that students can live in the knowledge that CADS will be available to them whenever they might need them and for whatever the purpose."

We are now working with the 12-13-year-olds in year eight. We anticipate phasing down involvement in the summer term when exams, assessments and school trips make inroads into an already busy timetable. What we will provide in the next academic year has not been discussed but our involvement is likely to continue.

Which brings us back to assemblies. We didn't escape! Only this time we were approached by a group of pupils keen to



Tiebreak Touring Theatre's *Love Bites* play led to frank classroom discussions on sex and drugs

stage a year-group assembly on HIV/AIDS. They wanted our help to construct a drama communicating accurate and thought-provoking messages to their peers.

So early one morning we'll be there – but not on stage 'doing the dangers'. We'll be in the hall with the pupils, adding our voices to the throaty choruses and eagerly watching the presentation. This time we'll not be present as visitors, but as associate members of the school community. ■

1. Pupil questionnaire responses following sessions.  
2. Gillick v West Norfolk & Wisbech Health Authority. All England Law Reports: 1985, 3, p.402-437.  
3. Pupils responses via teachers to school head of PSE.