Mentor’s three-year London Youth Involvement Project allows young people to help improve drug and alcohol prevention in the city by building their confidence, skills and knowledge to share their research, views and expertise with policy makers and influencers.

During Autumn 2011, the volunteer Youth Advisors wished to find out whether their own varied experiences of drug education were reflected across London, so designed a questionnaire for secondary school pupils. This was distributed through schools and youth groups, and online.

This paper reports their findings around alcohol and drug education in London’s secondary schools.

In total, there were 590 responses, 253 female and 337 male. Responses were received from pupils of at least 185 schools across at least 27 London boroughs. Respondents ranged from Year 7 to Year 14 and older. The majority were in Years 9, 10 and 11.

Recommendations are drawn from the 2011 survey, seminar in 2012 and the Youth Advisors’ continuing research.

- Drug/PSHE Education should be a standard part of teacher training.
- Schools should be required to spend a certain amount of time on drug education and to cover specific topics.
- Schools should engage young people by using interactive teaching techniques.
- Drug education lessons should feel like an ongoing learning process not one off information sessions.
- If people are discussing their own experiences this must be appropriate to the audience of young people.
- Confidential student evaluations of lessons would help improve drug education.

“A set curriculum leads to set rules, leads to equal standards for everyone”

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Quantity and timing of drug education

Just over a fifth (22%) of young people surveyed said they had not received any drug education at secondary school. This varied by age: 34% of KS3 students, 12% of KS4 students and 21% of older respondents said they did not remember having any drug education.

Of those who said they had some drug education, a third (34%) said it took place once a year or less. Altogether almost half (48%) of young people were receiving drug education once a year or less often. Almost two-fifths (38%) of young people thought they were not getting enough drug education, compared to just 5% who thought they were getting too much.

Over a fifth of young people said they had not had any drug education at secondary school.

For half (50%) of those who said they did have drug education at school, this first happened in Year 7. For 23% it started in Year 8. But just over a quarter (27%) had to wait until Year 9 or later.

Around half of the young people said they had drugs education in PSHE lessons (53%), a third in science lessons (34%) and almost a fifth (18%) in tutor time, while 10% and 7% said it was covered in assemblies and drop-down days respectively. The concern with covering drugs only in science is that young people may be told the facts but not helped to deal with real-life situations, while form tutors are likely to lack the specialist skills and knowledge to cover sensitive topics.

Topics covered

Figure 2 shows the coverage of different drugs within drug education. Among young people, alcohol, tobacco and cannabis are the commonest drugs used. However some relatively common drugs among young adults seem to be less well covered in schools. For example, 70% of young people had not learned about
‘poppers’ (amyl nitrite) which 10% of 16-24 year olds have used at least once, and 44% had not learned about amphetamines, which 8% of 16-24 year olds have used at least once. In contrast, most young people had learned about heroin, a drug which just 0.2% of 16-24 year olds have ever taken.¹

Most young people – between 80% and 90% - remembered learning about what alcohol and drugs do to your body. However half or less said they had learned about where to get help if they needed it or about units of alcohol. This suggests that important topics are not adequately covered in many schools.

Research has found that an important factor influencing young people’s decisions about drugs is their perception of social norms: whether they consider a substance is widely used and considered acceptable among their peer group. Teaching the reality (for example that use of drugs is not widespread) can counteract this approach, but the results from this survey suggest that this has not as yet been widely adopted by schools.

“If you get good drug education, you can make informed choices.”

Figure 2: Which drugs did you learn about?

- Alcohol
- Cannabis
- Cocaine
- Heroin
- Ecstasy
- Magic Mushrooms
- LSD
- Amphetamines
- Ketamine
- Poppers
- Legal Highs

Figure 3: Topics covered in drug education

- What happens if you get caught giving or selling drugs to other people
- What happens if you get caught with drugs
- Where you can get help if you are worried about yourself or someone you know
- How many young people use alcohol
- How many young people use drugs
- Units of alcohol
- What alcohol does to your body
- What drugs do to your body

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Young people’s views on what they felt was missing from their drug education

The young people were asked what one thing they would like to learn more about in their drug education. There were 371 responses to this question, covering a wide range of topics, but some themes stood out, as shown below (figures in brackets show number of responses in this category).

Everything (17)
“Everything! - Barely anything is taught”
“A bit more of everything”
“More detail of all the things we already do”

Effects/consequences (108)
“Side effects”
“Effects of drugs”
“What drugs do to your body”
“Consequences”

Specific drugs (25)
(Alcohol was mentioned most often)
“Alcohol units”
“Legal drugs”
“Smoking”
“Poppers”

Different types (15)
“Different types of drugs”
“Class A, B, C drugs”

Personal experiences (21)
“Experiences of young people who get addicted in real life”
“People that have been affected by drugs and alcohol. How it can affect family and friends too.”

Legal information (20)
“Legal stuff”
“What happens if you get caught with drugs”

Practical advice (17)
“How to avoid people who will get you using them”
“Who but the police I can talk to if I know someone taking or selling drugs”
“How to help someone who has taken drugs, who is in a serious condition and an ambulance is far away”
“How to drink and not get drunk?”

Origin (21)
“Where they come from”
“How are drugs made”

Statistics (12)
“How many people use drugs”
“How common is it in our school”

Why? (8)
“Reasons why people take drugs”
“Why people get addicted to drugs”

Discussion

The findings from the survey confirm that young people’s experiences of drug education are very uneven. Making PSHE education a statutory subject would help to improve the situation.

Further recommendations to improve the quality of teaching are taken from the survey as well as discussions at our seminar in 2012 and ongoing research by the Youth Advisors.

Mentor is the UK’s leading charity dedicated to protecting young people from alcohol and drug harms. We review research from around the world, test promising approaches and work to translate best policy and practice into evidence based national and local services.

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