

How Memorable is Substance Use Education in Ontario Schools?

Children and adolescents should receive education about tobacco, alcohol, and cannabis for several reasons: (1) these substances are readily-available; (2) they are associated with injuries, short-term health problems and a host of preventable diseases; and (3) not only are alcohol and tobacco the most common substances used by adolescents, they are typically the drugs used before all others.

In 1998, substance use education was mandated for Ontario students in grades 1 to 8 as part of the new Health and Physical Education curriculum.¹ In 1999, Ontario introduced a new curriculum for high school students stipulating that at least one Health and Physical Education credit is needed in order to graduate. Most students fulfill this requirement in 9th or 10th grade. Substance use education is a course component in both grades 9 and 10. The Health and Physical Education curriculum for grades 11 and 12 does not include substance use education, but instead focuses on mental health.

This *eBulletin* provides a snapshot of substance use prevention education in Ontario schools. Data from the 2003 *Ontario Student Drug Use Survey (OSDUS)* – which is an anonymous in-class survey of 7th- to 12th-graders conducted every two years in Ontario schools – were utilized, as well as *OSDUS* data spanning back to 1993. We focus on the percentage of students who could not recall receiving any substance use education in their classes since the beginning of the school year.

Alcohol Education

As seen in Figure 1, about 25% of grade 7 and 8 students could not recall a class on the topic of alcohol in the 2002/2003 school year, whereas 20% of 9th-graders could not recall a class on this topic. Between 40% and 50% of students in grades 10 to 12 could not recall receiving any alcohol education.

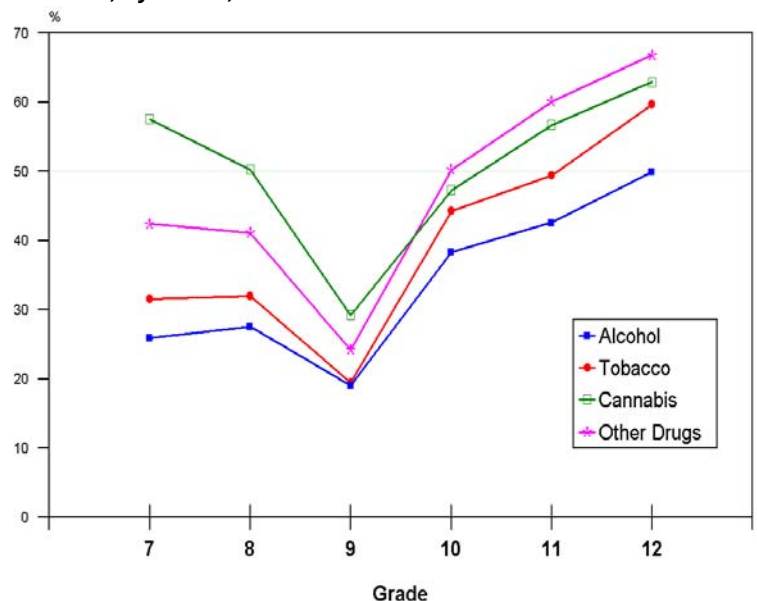
Tobacco Education

About one-third of grade 7 and grade 8 students could not recall receiving tobacco education in the 2002/2003 school year (Figure 1). Thus, it appears that tobacco is less likely to be discussed in these grades compared to alcohol. The percentage not recalling tobacco education drops to about 20% in grade 9, and increases by about 10 percentage points in each subsequent grade.

Cannabis and Other Drug Education

Education about other drugs, especially cannabis, seems to play a smaller role in the health curriculum in Ontario schools, compared to alcohol and tobacco use. For example, over half of students in grades 7 and 8 could not recall a class on the topic of cannabis (Figure 1). Again, similar to alcohol and tobacco, grade 9 seems to be the point at which education about cannabis and other drugs is delivered, or intensified.

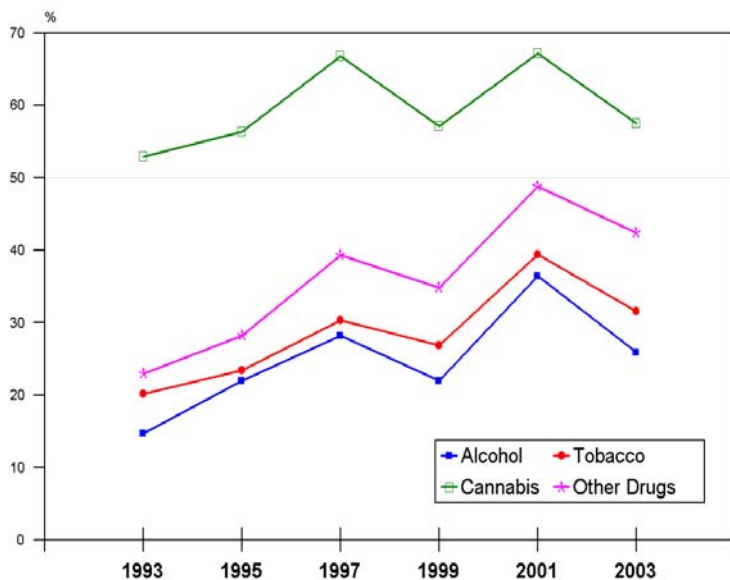
Figure 1. Percentage of Students Recalling NO Classes Taught on the Subject Since the Beginning of the School Year, by Grade, OSDUS 2003



Substance Use Education Over the Past Decade

Figure 2 presents the percentage of 7th-graders who could not recall receiving substance use education between 1993 and 2003. We chose to focus on 7th-grade because it is the youngest grade cohort for which we have trend data. Two general patterns can be gleaned from this chart: (1) among the substances, alcohol is most likely to be discussed in 7th-grade, followed by tobacco, other drugs, and cannabis; and (2) while there has been some fluctuation, substance use education may actually be declining over time. For example, 15% of 7th-graders in 1993 could not recall a class about alcohol, whereas this percentage was 26% in 2003. Similarly, 20% of 7th-graders in 1993 could not recall tobacco education, and this percentage was significantly higher in 2003, at 32%.

Figure 2. Percentage of 7th-Grade Students Recalling NO Classes Taught on the Subject Since the Beginning of the School Year, OSDUS 1993 - 2003



Conclusion

While self-reported drug education has limitations in assessing the quality and quantity of what is actually delivered in the classroom, it does reflect what students can remember. That a sizeable proportion of younger students were unable to recall receiving alcohol, tobacco, cannabis or other drug education during the 2002/2003 school year reflects either that the curriculum was not delivered, or that it simply was not memorable.

The 2003 *OSDUS* showed that substance use education is most likely to be recalled by grade 9 students. Prevention researchers recommend that any school-based drug education program begin during the early elementary grades and intensify during the “high risk of onset” grades, from 7 to 9.^{2,3} Indeed, the 2003 *OSDUS* found the average age of initiation of tobacco and alcohol use was 13 years of age, and 14 years for cannabis use. Therefore, delivering or intensifying substance use education in grade 9 (age 14) may be inefficient in terms of prevention.

Experts recommend that substance use education present students with factual information about drug use, as well as incorporate social influence strategies (e.g., media literacy, normative education).^{2,3} Further, to be effective, the program must be of sufficient duration. Although there is no consensus on how many classes should be delivered per grade, experts do agree that one or two classes is not sufficient. Of course, any school drug education program should be part of a larger comprehensive prevention strategy, incorporating policies, family-based and community-based programs.

Methods:

The *Ontario Student Drug Use Survey (OSDUS)* is an Ontario-wide survey of elementary (grades 7 and 8) and secondary (grades 9-12) school students conducted every two years since 1977. The 2003 survey, which used a stratified (region) two-stage cluster design (school, class) included 6,616 students in grades 7 to 12 from 37 school boards, 126 schools, and 383 classes. Self-administered questionnaires, which promote anonymity, were administered by staff from the Institute for Social Research, York University on a classroom basis between January and June 2003. The student participation rate was 72%. About 80% of the students completed the survey between April and June 2003. Previous *OSDUS* surveys were also conducted in the Spring months of the given year.

All survey estimates were weighted, and variance and statistical tests were corrected for the sampling design. The 2003 full sample size of 6,616 students represents about 970,000 students in grades 7 to 12 in public and Catholic schools across the province. The substance use education questions were asked of a random half sample in 2003 (N=3,152).

Terminology:

- **Tobacco Education** was measured with the question “*Since September, how many classes or lectures did you have that talked about tobacco?*”
- **Alcohol Education** was measured with the question “*Since September, how many classes or lectures did you have that talked about alcohol?*”
- **Cannabis Education** was measured with the question “*Since September, how many classes or lectures did you have that talked about cannabis?*”
- **Other Drug Education** was measured with the question “*Since September, how many classes or lectures did you have that talked about drugs other than alcohol, tobacco, or cannabis?*”
- **Significant Difference** refers to a difference between two percentages that is not likely due to chance. For example, a difference found at the $p < .05$ level of statistical significance is one that is less than 5% likely to occur by chance alone.

Source:

These results are based on unpublished statistical analyses of the *OSDUS* data. For more details on student drug use in Ontario, please see:

Adlaf, E.M., & Paglia, A. (2003). *Drug Use Among Ontario Students, 1977-2003: Detailed OSDUS Findings*. CAMH Research Document Series, No. 13. Toronto: Centre for Addiction and Mental Health. (available in PDF format at: http://www.camh.net/research/population_life_course.html).

References:

1. Ontario Ministry of Education and Training. *Health and Physical Education Curriculum*. Toronto: Ontario Ministry of Education and Training. Available at: http://www.edu.gov.on.ca/eng/document/curricul/health/health_e.html (accessed Sept. 2004).
2. Paglia, A., & Room, R. (1999). Preventing substance use problems among youth: A literature review and recommendations. *Journal of Primary Prevention*, 20 (1), 3-50.
3. Hawks, D., Scott, K., McBride, N., Jones, P., & Stockwell, T. (2002). *Prevention of psychoactive substance use: A selected review of what works in the area of prevention*. Geneva: World Health Organization.

For CAMH Curriculum Resources see:

Educating Students about Drug Use and Mental Health – Curriculum Support for the Ontario Curriculum. Available at: http://www.camh.net/education/curriculum_main.html.

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