



HERTFORDSHIRE DRUG EDUCATION FORUM

## **Drug Testing in Schools – Hertfordshire Drug Education Forum Position Statement**

The Hertfordshire Drug Education (DEF) was established in 1995 in response to the launch of the national drug strategy 'Tackling Drugs to Build a Better Britain'.

The DEF acts as an expert advisory group to the Hertfordshire Young Peoples Substance Misuse Joint Commissioning Group and the Crime and Disorder Reduction Partnership on drug education for young people, parents and carers, in accordance with national guidance and principles.

The Hertfordshire Young Peoples Substance Misuse Joint Commissioning Group and the Hertfordshire DEF do not currently support random drugs testing in schools until there is more conclusive evidence concerning its likely impact. The introduction of random drug-testing of pupils would be an ethically complex move which might have unintended adverse consequences.

Based on a review by the Joseph Rowntree Foundation (McKeganey, 2005) the Hertfordshire DEF has concerns regarding the potential damage to relationships between teachers and pupils making communication about drugs more difficult. The DEF also has concerns that a robust and supportive mechanism for those young people who test positive is not currently in place in many schools.

Before agreeing to support any drug testing in our schools the DEF would encourage those organisations considering this approach to consider the following questions. Some of these have been adapted from the national Drug Education Forum, Public Policy Briefing (2006).

- How will drug testing be evaluated over a period of time? What effect should be measured (behaviour, attendance, drug use)?
- Will drug use by young people be measured using valid and reliable tools, before, during and after the drug testing trial?
- Who would carry out the proposed testing? What training would they have specific to testing the proposed sample?
- What is the chain of custody arrangements to clearly demonstrate that the sample was collected correctly? Is there a constant quality control measure in place?
- Does the young person and/or family have the right of appeal and are they aware of what services can advocate for them?
- What method of testing is proposed as some methods are more/less invasive than others?
- Will staff be tested?
- How would the implications of testing individuals belonging to particular religious/ethnic groups be addressed?
- How would the implications of testing individuals with existing medical conditions, which may be contra-indicative, be addressed?

- When the sample is taken is the young person asked what prescribed medication, over the counter medication that they have had for the past 7 days? This is important to rule out false positives. For example some common cold cures can give false positive results for Stimulants.
- Will pupils be able to give genuinely informed consent before being tested?
- What will happen to a pupil who does not consent to the testing and how would that be managed?
- How will individual pupils' results remain confidential?
- How will the school ensure that the testing is random and NOT aimed at pupils in a prejudiced/stereotypical way?
- How will schools ensure that testing is a pastoral intervention, not disciplinary?
- Will schools be able to provide the appropriate support that young people and parents need if a pupil has a positive test result? Who would offer this support?
- Who is expected to fund additional resources needed in order to provide this support (e.g. training, equipment, human resources)?
- Will the DfCFS approach to drug education be compromised by the introduction of testing?
- Where will funding for drug testing come from and for how long will it last?

Rob Bacon – Chair, Hertfordshire Drug Education Forum, September 2007