J

1

Vol. 13 No. 4, 1996

- Be readily accessible to colleagues in the same subject area and exportable to other schools.
- Alert and prepare the teacher if the content involves sensitive or controversial issues

A three-day event

In the course of researching local environmental education initiatives we discovered that mental education initiatives we discovered that Coombeshead College, Newton Abbot, Devon, instituted three 'environmental days' for Year 7, 8 and 9 pupils towards the end of the summer term. The underlying theme was 'interpreting the natural world', and each curriculum area prepared its own programme around this theme.
Wherever possible, outside agencies and experts were involved, and the whole of the town and its hinterland became their classroom.

The principal aim of the three days was to able staff and pupils to interpret the natural world in whatever way they wished, freed from the constraints of normal timetabling and, whenever possible, going out into the 'natural world', experiencing it in new ways. It was intended to be an event that would increase everyone's awareness of their world, particularly their own awardics of unit work, particularly and own locality and, where possible, to work with out-side environmental agencies. The activities included drystone walling, rho-

dodendron chopping, pond building, surveying, observing wildlife, an urban housing study, and preparing a local tourist guide. Some of the outcome was integrated into subsequent schemes of work, and some pupils volunteered to continue the conservation work and to involve their parents too.

Conclusion

'Environmental education' is an attractive area for schools to promote because it is far less contentious than sex, drink, or drugs; it has great appeal to many youngsters and parents; it is so wide-ranging that all compulsory curriculum areas can easily find accommodation within it. However, we must not overlook the other 'environment' in which young people spend so much time — their own home, school, and neighbour-

Funding to support the publication of Cross-curricular Environment Education is currently being sought.

Viewpoint

Phil Barnett (Birmingham Health Education Unit) writes:

DARE (Drug Abuse Resistance Education) is a project which originated in Los Angeles, USA in 1993 and which, since 1994, has been used by Nottinghamshire Police to encourage children aged 9-10 to say "No" to drugs. A limited company, DARE UK, has now been set up to franchise DARE through other constabularies countrywide. A range of pencils, rubbers, T-shirts, baseball caps, stickers, etc. is being sold through Nottinghamshire Police to support the project, and the fast food chain McDonalds is also providing generous support, by offering free meal vouchers to children who 'graduate from the DARE project.
The stated aims of DARE are:

- To give children the confidence to say "No" to anything that they know they shouldn't be involved in and be responsible for their own health.
- To reduce and stifle the drugs market by reducing the number of customers.
- To reduce crime and vandalism by promoting responsible attitudes towards people and property.

DARE UK are claiming success on the basis of an evaluation, carried out in a very small number of schools, shortly after the 17-week programme. The claims are that children:

- Knew at least one practical way of saying
- · Identified alcohol and cigarettes as drugs.
- . Knew that drugs can be harmful.
- Knew that drink-driving is illegal.
- Understood the difference between prescribed and harmful drugs.

DARE UK are claiming that they are innovative and reaching areas previously untouched by drugs education. A number of questions need to be considered about the usefulness and effectiveness of DARE, as well as the way in which it is being marketed.

1. How appropriate is American-style razza-matazz with a "Just Say No" philosophy?
2. The approach claims to focus sharply on personal skills, but how broad is its range?

- 3. Is it appropriate for the police to take the education in schools?
- 4. Can DARE achieve more than current proven resources, such as *Health For Life* and *Skills For the Primary School Child?*
- 5. Will such a high-profile approach compromise the commitment of LEAs to effective teacher and governor training?

 6. Has DARE achieved any long-term suc-
- cess in the USA?

7. How meaningful is the UK evaluation? In answering these questions, I can offer the benefit of 22 years' experience as a teacher and adviser in both the primary and secondary sectors. The high-profile marketing approach is attractive to many parents and pupils in the short term (and indeed to the media and to some in Whitehall and

Westminster). and stickers dis-played in shop windows may engage the community in the short term, but there is no evi-

TO KEEP KIDS OFF DRUGS.

'Quick fix' or progressive education?

dence that there is likely to be a lasting effect on the community, and is not consistent with the remit for Drug Action Teams and reference groups as outlined in the Government's White Paper Tackling Drugs Together.

There are many who would seriously question the ethics of police forces setting up market-ting companies with young children as their main customers, and the involvement of McDonalds ld also be regarded with some cynicism DARE claims that 'it enhances the work already being done in schools and fits perfectly into PSE', but its focus is narrow, with its emphasis on the "Say No" element, and so it does not provide a realistic drugs education. Resources such as Health For Life, Skills For The Primary School Child, and Jimmy Sniffs offer all the useful skills elements of DARE, and they are developmental rather than one-off.

The recent document for all schools from the School Curriculum and Assessment Authority, Curriculum Guidance for Schools, is clear about who should teach drug education. Section 3.1 states: 'Drug education is best led by classroom teachers, with a clear understanding of the school's drug education programme and an es-tablished and continuing relationship with the pupils'. The document also sets out clearly the

separate knowledge, understanding, skills and attitudes to be addressed at each Key Stage in the National Curriculum.

This requires a firm commitment by Local

Education Authorities to provide effective training for teachers and others through the current GEST initiative (additional funding for drug education in schools over and above the school's budget, provided directly by the Government).

In Birmingham, for example, this funding is in Biriningnam, for example, this runding is being used for a rolling programme of training, targeting 60–70 schools per year over a three-year period. Each school is asked to send one teacher, plus a governor or a parent, on an in-tensive two-day training course, covering such areas as drug awareness, signs and symptoms of

drug use, planning a drug edu-cation curriculum, policy writing, and managing drugrelated inci-dents. The dents. The course is also of-

fered to and attended by police schools liaison officers, school nurses, education social worofficies, school nurses, education social workers, and anyone else who is able to make the commitment.

Finally, has DARE succeeded in the USA?

Research (S. Ennett et al., 'How effective is DARE? An analysis of Project DARE outcome evaluations', American Journal of Public Health, September 1994) suggests otherwise.

- DARE's short-term effectiveness for reducing or preventing drug use behaviour is less than for interactive prevention programmes.
- There is no evidence that DARE's effects are activated when subjects are older.
- Across the four outcome domains (knowledge, attitudes, social skills and drug use behaviour), DARE's effect sizes are smaller than those for interactive programmes.
- DARE's limited influence contrasts with its popularity and prevalence. An important implication is that DARE could be taking the place of other, more beneficial drug-use curricula.

The message to LEAs and others is that DARE should not be seen as a low-cost, short-





term solution to the problems posed by *Tackling Drugs Together*. Now that we have finally moved away from simplistic "Just Say No" apmoved away from simplistic "Just Say No" ap-proaches (even though DARE goes further than this) there is clearly no alternative to effective-ly-planned, progressive drug education pro-grammes led by well-trained and supported classroom teachers but seen as a partnership with the local community. If local authorities tried to be more creative with GEST provision there would be no need to prasn at decentively-attracwould be no need to grasp at deceptively-attrac tive packages such as DARE.

We invited a leading UK proponent of DARE, Inspector Dave Scott of the Nottinghamshire Constabulary, to respond. — Ed.

There are many substantial flaws and misrepresentations in Phil Barnett's apparently limited research into the 1995 UK version of DARE

What he sees fit to dismiss as 'engaging the community in the short term with stickers in shop windows' actually amounts to about 50% of the programme mobilising the community and using a highly-qualified representative local steering group to guide the officers in each Dis-trict or Borough Council area. This community-initiated ownership generates substantial local benefits in that:

- It demands the education of adults.
- It creates the environment outside school where any project (not just DARE) will survive and flourish.
- It becomes a catalyst for educational/ business partnership.
- It confidently and openly shows support from all the other significant agencies in the area, therefore celebrating the positive attributes of PSE.

DARE is not 'police officers taking over the teachers' role'. What primary-school teacher could not use, to good effect, a reliable and consistent visiting speaker to help with PSE in a structured way? Head teachers, class teachers, parents and governors are all consulted. The class teacher is always present, and feedback is

actively sought on every occasion.

The 'company' is not run by the police. It is convenient, best practice, and economically sound to let a Board of Trustees run It, particularly so that it does not have a 'police angle'. The Board of Trustees is representative and reads

like the Board of any charity.

The focus of DARE cannot be considered. annow except by those who have only read the headlines. We could not survive rigorous checks in 25 countries if the focus was still the old (and correctly outlawed) abstinence campaign.

I would also like to add that the evaluation so

confidently quoted by Phil Barnett, a meta-analysis of eight past DARE evaluations, was never published by the funding body, the US National Institute of Justice, because it did not meet professional academic standards.

DARE is an effectively-planned, progressive programme which exceeds all the requirements of the National Curriculum and Tackling Drugs Together. Its popularity and persistence is because it is genuinely and compellingly community-based, encompassing all the benefits of peer, adult, and community education.

OUR OFFICES ARE STILL A FIRE RISK!

Ouestionnaires are continually Questionnaires are continually arriving for processing and storage, and we are constantly generating new materials. To make room, and to reduce the risk of TOTAL CONFLAGRATION, we are making preposterous reductions on existing stock...

(2 books, Doctor & Dentist and Health), down from £12 to £3.50 the pair YOUNG PEOPLE INTO THE NINETIES

TOOTHBRUSHING AND ADOLESCENCE, down from £20 to £10.

CROSS-CURRICULAR SEX EDUCATION (2 books, 400+ pages) down from £45 to $\underline{\text{f30}}$.

WE TEACH THEM HOW TO DRINK! down from £2.50 to a <u>ludicrous £1</u> as long as you order something else too.

YOUNG PEOPLE AND ILLEGAL DRUGS, down from E7 to $\underline{\epsilon5}$.

And, almost gone now, the last surviving stocks of our annual YOUNG PEOPLE reports::

YOUNG PEOPLE IN 1991: £10

YOUNG PEOPLE IN 1986: £5

All these books are POST FREE

Tania Beavet was the Loddon NHS Trust

Vol. 13 No. 4, 1996

Tania Beavet Health Promotion Service for the duration of this project. Parents, schools, and sex education

Are parents aware of their right to withdraw their children from sex education? Can they foresee a need to exercise that right? Do they feel that they are kept sufficiently informed about what the school is doing? Do schools feel happy with what they are offering? The 1993 Education Act Amendment 62 gave

parents the right to withdraw their children from any 'sex education' that did not include work covered by National Curriculum Science Or-ders. We decided to conduct a year-long project within the Loddon NHS Trust District to look at

the ways in which parents and schools communi-cate with each other regarding sex education. We initially contacted all 16 secondary schools within the area covered by the project. The plan was to conduct semi-structured interviews with PSE co-ordinators, governors, and parents, but although the initial feedback from schools was positive, the parents' response to the letters of invitation to be interviewed was low,

and several schools dropped out of the project.

To boost the parental representation, self completion questionnaires were sent home by

completion questionnaires were sent nome by pupil post to 60 parents (representing Year) and Year 11 pupils) in each of two schools.

The final tally of data came from 31 interviews with governors, PSE co-ordinators, and parents, and 55 postal questionnaires returned by

Main findings

Parents and sex education

1. The majority want schools to have a role in

A parent commented: I don't mind answering questions, but I'm glad they act. questions, but I'm glad they get lessons at school because I wouldn't be too sure about how to

- 2. The majority want the right to withdraw their children from sex education. The criterion for withdrawal would be connected with the
- quality and method of delivery rather than a general objection to the topic being taught.

 3. However, very few thought it was likely that they would want to withdraw their child.

Parents and schools

- The majority of parents were satisfied with the programme at their children's school, and did not make any suggestions for change, even though they were invited to do so.
- 2. In fact, parents did not seem to know much about the sex education programme and the materials used. Despite this, they felt that communication between the school and themselves was good.
- 3 Fase of access to the school and to relevant teachers, by being able to telephone rather than having to make an appointment to visit, was
- considered very important.

 A parent commented: All the staff there are very accessible and easy to talk to, you don't feel as if you are being a nuisance.
- 4. Some parents expressed a wish for a more detailed timetable of the PSE programme so that they might be prepared for discussion or questions arising as a consequence.

Parents as 'sex educators'

Schools and Sex Education, HEA, 1994), the majority of parents said they felt comfortable discussing sexual matters with their children, but they did not perceive their children as being out they did not perceive uner critiques as being comfortable in discussing the topic with them. A parent commented: It can be a bit difficult, my daughter will talk to me but my son is getting

1. In contrast to the national study (Parents,

- to the age where he would be embarrassed.
- 2. However, they were aware that not all children would have the sort of relationship with their parents that would facilitate communication, and for this reason they thought that schools should provide information on local sources of advice on sexual health matters. A parent commented: I think they get most of

their stuff from friends, it was the same when I was at school, there are some things you don't



