PREVENTING SUBSTANCE-RELATED HARMS AMONG YOUTH
A BLUEPRINT FOR ACTION — IN SHORT

This resource is a call for school communities to think differently about how they approach youth substance use. It is also intended to support school stakeholders in engaging their networks, communities and governments for increased attention, buy-in and resources for comprehensive and long-term approaches for preventing substance-related harms among youth.

This short document presents a framework for informing action on school health matters, four evidence-based approaches to preventing substance-related harms, and a checklist to help conceptualize the different approaches.

The Comprehensive School Health Framework

The Comprehensive School Health Framework encourages school communities to act across four interrelated components that compose the whole school environment when assessing or implementing an intervention:

- Teaching and learning
- Policy
- Partnerships and services
- Social and physical environment

This framework can help to guide and strengthen efforts within school communities related to substance use, while not being prescriptive and allowing school communities to be nimble and adjust their plans as contexts and needs change.

The Approaches to Preventing Substance-Related Harms

Upstream Prevention: Upstream efforts aim to address the "root causes" of a health issue or behaviour, particularly by boosting protective factors while minimizing risk factors. For example, a positive youth development strategy may prioritize increasing opportunities for healthy recreation and leisure for students by building partnerships with local organizations (e.g., photography groups, anime clubs, etc.). As these examples demonstrate, upstream efforts are often not explicitly linked to substance use, unlike substance use policies or education.

Harm Reduction: Harm reduction efforts aim to reduce the potential social and health harms related to substance use, without necessarily promoting or requiring non-use. These efforts support healthy behaviours without "forcing" them. It celebrates even the smallest positive behaviour changes, recognizing that each is a step towards improved health and well-being.For example, a school community could be installing safe disposal containers that school community members can access to safely dispose of needles, razors, broken glass or other "sharps."

Stigma Reduction Initiatives: Stigma reduction initiatives aim to make space for open, informed and non-judgmental conversations about substance use, as well as other stigmatized behaviours, health conditions or identities. Examples of stigma reduction initiatives include: activities that counter misconceptions about substance use and stereotypes about people who use drugs; providing bystander training to students to support them in safely intervening; designing safe zones where youth can ask questions; examining existing school policies to identify and revoke or reform policies that may perpetuate systemic substance use stigma.

Equity-oriented Interventions: Equity-oriented interventions seek to make institutions and systems more accessible, responsive, compassionate and safer for all people. This is achieved, in part, by developing policies, programs and other interventions that reflect individuals' diverse needs, preferences and life experiences. Cultural safety and trauma- and violence-informed (TVI) practices are two examples of intervention approaches that centre on promoting equity.

What should I remember from this?

1. **Evidence-based substance use education is <u>one component</u> of a comprehensive approach for preventing substance-related harms among youth.** Policy, the social and built environment and partnerships and services are other important levers that school communities can integrate into their intervention planning.

2. **The best prevention measures often have nothing do with substance use at all.** Efforts to improve youths' overall health and well-being and reduce social and health inequities can go a long way in minimizing youths' risk of substance-related harms.

3. **Efforts to prevent substance-related harms among youth must reflect school communities' unique needs, values, preferences and contexts.** A key part of this is active, meaningful engagement with various school community members, including teachers, families, school health nurses, other school staff, and (critically) youth themselves.

4. **Many traditional approaches to addressing youth substance use (e.g., zero tolerance policies, abstinence-only education, etc.) have limited effectiveness and can produce unintended negative consequences.** It is important that school communities use the best available evidence to inform their efforts to prevent substance-related harms and evaluate these initiatives on an ongoing basis, instead of simply accepting and repeating the status quo.

Checklist

This checklist is a tool for self-evaluation.

- ☐ Our school community bases all initiatives on evidence of what works or shows promise of working.
- ☐ Our school community applies a strong equity lens to inform prevention efforts.
- ☐ Our school community aims to adopt compassionate, non-judgmental and strength-based approaches.
  - ○ This includes engaging with and listening to people with lived and living experience of substance use.
- ☐ Our school community incorporates harm reduction principles within school initiatives.
  - ○ To prevent and reduce substance-related harms among youth who currently use, or may use substances.
- ☐ Our school community collaborates across sectors and at multiple levels:
  - ○ Parents and families
  - ○ Youth
  - ○ Community supports
  - ○ Mental health and addictions support
- ☐ Our school community includes young people in all aspects of decision-making.
- ☐ Our school community has alternative measures and programs for preventing substance-related harms.
- ☐ Our school community creates opportunities for youth who do not typically participate to find belonging. (Engaging the unengaged)
- ☐ Our school community uses restorative practices to include youth in decision-making when they use substances.