

Life-skills based education for alcohol and drug prevention

Alcohol and Drug Prevention Briefing Paper

February 2016

This briefing paper is **part of a series** produced by Mentor ADEPIS on alcohol and drug education and prevention, for teachers and practitioners.

Questions for schools

1. Why is life-skills based education important?
2. What should school leaders and governors do to encourage life-skills based approaches?
3. What should teachers consider to teach life-skills based alcohol and drug education?

This paper intends to provide governors, head teachers and teachers with practical guidelines on how to help them implement holistic life-skills based education programmes to ensure young people build resilience to alcohol and drug use. As evidence shows that alcohol and drug education alone is ineffective, there is a need for an appropriate balance between knowledge and skills elements within the curricula, as well as for parents and carers involvement wherever possible. Critical to the impact of this learning process is raising awareness and ensuring a comprehensive and balanced approach based on life skills education. Mentor promotes best prevention practices around alcohol and drugs misuse. This briefing paper is part of a series of resources available for teachers, facilitators and leadership roles. The principal objective is to enable healthy development and attitude towards risky situations, specifically with regards to alcohol and drug use.

Why life skills education is important

Over the past two decades life skills education has started to play an important role for social and personal development of young people. Life skills help children, youth and adults to assess risky situations and behaviours and make rational choices in front of everyday challenges. The most common definition of life skills have been given by the World Health Organization as “abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life” (WHO, 1997). In this view life skills can be universal or targeted set of skills, designed either around general or more specific risks.

Life skills education is itself defined as “a holistic approach to the development of values, skills and knowledge in the learner, which assists young people to protect themselves and others in a range of risk situations.” (UNICEF, 2009). It promotes mental well-being in young people, helps them face various and difficult situations in life, and equips individuals to behave in a pro-social way. At the heart of life skills education is the learning of life skills, including skills for “building self-esteem, setting realistic goals, coping with anxiety, resisting pressures, communicating effectively, making decisions, managing conflict and dealing assertively with social situations in which drugs may be offered” (WHO, 1997).



In the recent years life skills education has become important for contributing towards high quality education. Including life skills in teaching curricula is important as, through this learning, children and young people can gain more control on their lives and make better rational choices. It also helps children to safely make transition into adolescence and then into adulthood encouraging positive social norms.

What evidence says on life skills-based education

Over the past 20 years, life skills education has been developed by different organisations following different purposes related to mental and health wellbeing, from substance misuse to AIDS prevention. Many prevention programmes based on life skills education have recently been developed on the basis that it improves knowledge and awareness on substance use, and delays the onset of alcohol and drug abuse. A quite large body of research has also developed in order to assess effectiveness and impact of such programmes. What research has shown so far is that life skills based education programmes have positive impact on increasing young people's knowledge and awareness of risky behaviours. In terms of changing behaviour and reduce substances consumption the most effective ones appear to be those programmes that help young people to make rational choices, with appropriate pedagogic rationale behind, focusing on decision-making processes and skills development—e.g. EU-DAP Unplugged (Martin et al.2013).

How Life Skills-Based Education should be delivered in schools?

Implementation and delivery of life-skills education programmes should involve planning at all levels, from national and regional to local levels, as well as reflecting commitment from schools and students. To ensure effective delivery of life skills education programmes coordination between these stakeholders is in fact essential.

Suggestions for school leaders and governors

Head teachers and governors are the first responsible to set the basis for successful life-skills based education programmes in schools. According to the UNODC (United Nations Office on Drugs and Crime), “schools in which students perceive school rules and reward structures to be clear and sanctions to be unambiguous experience less disorder, as do schools in which students feel they belong and that people in the school care about them” (UNDOC, 2013). Their leadership role is then crucial to promote healthy behaviour in schools and consequently ensure they are embedded in the school goals and mission (PHE, 2015). Few key steps and related questions should be addressed by head teachers and governors when shaping their school programmes.

Life skills based education included in the school mission statement.

Central role of school leaders and governors is to ensure effectiveness of the mission statement and its provisions, which should also include references to life skills development, character and resilience building. The role of a mission statement is considered to be central in providing the setting for successful education outcomes. Aiming at a full personal development and at children's overall health and well-being, learning and achievement are among the major responsibilities of the school and these should be addressed in a mission statement that reflects its own values and priorities.

Engagement of parents and carers.

School leaders and governors should also exercise their leadership to carry out activities to engaging parents and the wider community in alcohol and drug prevention. By working in partnerships with parents and carers, they would promote a great awareness of health issues among young people and their families. Also, parents and cares feel empowered by getting involved in consultations with school representatives and this is also helpful in terms of providing them with skills and knowledge on health-related issues, as well as reduces anxiety about being solely responsible for alcohol

and drug education.

Involvement of young people.

According to Public Health England, “the whole school approach to PSHE should include active participation of young people to ensure PSHE education meets their needs” (House of Commons, 2015). A key factor is young people’s participation in shaping and personalisation of contents, which would help them feel part of the school and wider community and to have some control over their lives (PHE, 2015). Parents, young people and teachers should interact and communicate effectively in order to put in place a series of mechanisms to ensure all young people have the opportunity to contribute and influence to decisions that may impact on their social and emotional wellbeing. This would allow students to benefit from expressing their views and to develop strong social networks, by building their own knowledge and skills to make healthy choices and developing their independence.

Clear guidelines and training for teachers.

General life skills-based education is a central component of programmes that enhance Personal, Social, Health and Economic education (PSHE) and promote mental well-being and healthy behaviours. Staff teaching PSHE education should receive subject-specific training and regular updates, including in the teaching of sensitive issues, and ensure timely and appropriate learning about the physical and social effects of alcohol misuse (Ofsted, 2013). Life skills based education is already in use in many education settings. Many teachers are engaging in activities related to the development of life skills but they need guidelines and support to create effective approaches to life skills education for alcohol and drug prevention. Therefore, head teachers and governors play a key role in promoting the training of teachers. Teacher training is an important component and it has proven to be more effective when teachers receive formal training and ongoing advice and support. Rather than only focusing on enhancing their knowledge of specific substances, teachers should also be provided with an orientation that enables them to select content and use a wide range

of strategies and resources appropriate to meeting student needs (UNICEF, 2009). Effective training requires teachers to identify information relevant to students of different age levels and social backgrounds and that information be taught in small amounts in conjunction with the development of skills such as decision-making, assertiveness and coping.

Useful additional questions that head and governors should ask include:

- How is the current school curriculum in place going to prepare students for life opportunities?
- Is there a balance in the curriculum between knowledge and skills development?
- Are students encouraged to positively contribute to their community and society at broader level?

To help review governors and head teachers’ responsibilities around drug and alcohol prevention you can refer to this ADEPIS briefing paper <http://mentor-adepis.org/wp-content/uploads/2014/04/Questions-for-governors.pdf>

A guide for teachers and practitioners

Given that “drug education in schools may be defined as the educational programmes, policies, procedures, and other experiences that contribute to the achievement of broader health goals of preventing drug use and the adverse consequences of drug use to individuals and society” (UNODC, 2013), the role of teachers becomes central in ensuring that concepts and values are not provided in the shape of isolated interventions, but as a comprehensive set of skills that encourages peer to peer communication, inclusion and participation.

The aim of this section is to introduce teachers to a way of teaching alcohol and drug education based on the development of links between knowledge values and life-skills. It is not intended to be a specific alcohol and drug education programme, but it presents ideas and skills for implementing activities that can lead to effective alcohol and drug education outcomes that may ultimately influence students’ substances

misuse and risky behaviours. By its very intent, the following guidelines will provide teachers with practical advice on how best to deliver alcohol and drug education programmes by enhancing both personal and social competence of students through the development of core life skills. The quality of teaching in the school is a key Ofsted judgement area. The inspection criteria states that the role of teaching is to promote learning and the acquisition of knowledge by pupils and to raise achievement, but also to promote the pupils' spiritual, moral, social and cultural development (PHE, 2015).

The below series of activities and strategies are relevant to all who have a role in addressing the physical, social and emotional welfare of students. Since evidence shows that the nature of the information and how it is presented can have a significant influence on its impact, it is safe to say that life skills education is more effective if delivered:

- by teachers or facilitators who help students view themselves as worthwhile;
- in classrooms that have a non-

threatening and non-judgmental atmosphere;

- within a learning environment that reflects care, understanding and involvement.

Key elements for an effective life skills-based education

The table below represents an overview of alcohol and drug education components, including teaching methodologies appropriate for delivery of these components. Two key components of programmes include:

- Content-drug specific Knowledge, Attitudes and Skills (K.A.S.)
- Teaching Methodology

Content Drug specific KAS			Teaching Methodology
Knowledge	Attitudes	Life Skills	Methodology
Including: <ul style="list-style-type: none"> • types of drugs • qualities of drugs • social, emotional, physical, financial impact of drugs • current national drug trends • prevention services • HIV/AIDS and STI transmission • prevention disease and health services • myths and misinformation 	Including: <ul style="list-style-type: none"> • assumptions about people with HIV • stereotypes • gender issues • social values towards disadvantage • discrimination and assumptions about drug users • gender issues 	Including: <ul style="list-style-type: none"> • communication and self esteem • decision making • values clarification • assertion • coping and stress management 	Including: <ul style="list-style-type: none"> • group processes • child centered • interactive and participatory • brainstorming • role play • educational games • debates • practicing skills with others • audio and visual activities

Source: UNICEF. *Life Skills-Based Education for Drug Prevention: Training Manual*

Small group work

The acquisition of those skills, such as assertiveness, should be taught in small groups, reflecting the approach recommended for school classes. By working in small groups, students are provided both with opportunities for a free exchange of ideas and individual participation. This encourages an environment that fosters attitude change by strengthening trust and reducing obstacles to change, such as egocentrism (looking at things from your own point of view only) and defensiveness (UNODC, 2003).

Those teachers, who show positive personal and interpersonal skills in their classroom, and in the course of the school day, are to be taken as a constructive example for students to observe effective skills in people who are significant to them. Good practice and evidence suggest that programmes facilitated by teachers and tailored to student needs, rather than those that are drug oriented, one-off, or information based, are more likely to achieve health related learning outcomes. Effective group work is a well-prepared organisational strategy, which must be clearly defined before selecting and facilitating a learning activity. It hence requires:

- planning in advance;
- carefully confirm the group goals;
- organise how the small groups are formed;
- establish group member roles;
- select the process for small groups to follow to achieve their goals.

Positive environment and classroom climate

The school environment and the classroom climate in which group work is facilitated have a great impact on influencing the effectiveness of alcohol and drug education programmes. Each classroom has its own normative climate and students' interactions take place in a context that may encourage or discourage health-risk behaviours. Also, the role played by both family and school is considered to be critical in shaping emotional well-being and health, as well as academic outcomes. A sense of belonging

to the classroom is a central agent in developing positive life skills that may ultimately enhance opportunities for meaningful and valued contribution to school life, as well as develop a sense of security, self-esteem and resilience. Students benefit when their schools are purposeful places that clearly define what they want all students to know and do, and describe how they are going to bring about these desired results, and how they know if they are succeeding.

Selecting support resources

Teaching resources for an effective life skills-based education need to be carefully selected and chosen on the basis of their ability to assist students who have differing levels of knowledge and attitudes towards alcohol and drug use. Some of them may have chosen to abstain from the use, others to postpone it, others either already use them or face situations where relatives or friends do it. Again, teachers play a key role in deciding suitability of a resource, based on their own capacity to engage with students in interactive learning processes. Selected and appropriate materials such as charts, videos and stories can contribute to positive learning experience and stimulate interest and even enjoyment. Though, these tools need to present balanced information also by differentiating between problematic and experimental use.

Concluding, to be effective life skills-based education needs to be embedded into the whole school approach and should also be designed in order to reach clear objectives and outcomes. Referring to [ADEPIS Quality Standards](#) to deliver effective life skills based alcohol and drugs education will help schools to design efficient prevention methods.

Mentor has also developed some alcohol and drug lessons plans for teachers - not necessarily a programme to deliver in its entirety, more like a selection of sessions and activities for teachers to pick from. The online link will be available from April on the ADEPIS website. In the meantime, helpful information about [early intervention](#) and [building resilience](#) in children can be found on Mentor website.

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About ADEPIS

The Alcohol and Drug Education and Prevention Information Service is run by Mentor, the drug and alcohol prevention charity and is funded by Public Health England, Home Office, and Department for Education.



More resources and advice are available from mentor-adepis.org. For further information, contact:

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