SUBSTANCE ABUSE - STUDENT ASSISTANCE PROGRAM

The primary responsibility for helping students who are involved with substance abuse lies with the students and their parents. However, the potential for lasting personal damage exists unless educators and parents work together to help students understand the complex nature of chemical dependency. A supportive school environment is necessary for students who have been harmfully involved with substance use/abuse.

The School Board supports substance abuse programs that can vary in scope according to individual needs. Included among these would be programs for persons who desire more information, and for those who need help with intervention activities and programs.

The School Board supports efforts to help students during the school day as well as to reinforce programs provided by other sources. To that end individual school substance abuse programs may provide group experiences, individual counseling and other programs.

While the School Board recognizes the need to assist students with substance abuse problems, it shall remain the policy of the School Board that the use or abuse of alcohol and illegal drugs shall be prohibited in compliance with federal and state laws and regulations. Students are prohibited from possessing, using, or distributing restricted substances in accordance with Policy JFC, Student Conduct. - Students who violate this policy will be subject to disciplinary and/or other legal action pursuant to School Board policy and applicable laws and ordinances.

Adopted: July 1, 1993

Amended: September 12, 1994; November 20, 2003; November 14, 2013

Reviewed: October 22, 2009; September 12, 2019

Legal Refs.: Code of Virginia, 1950 as amended, §§22.1-78, 16.1-305.1

Cross Refs.:	CLA	Reporting Acts of Violence and Substance Abuse
	IGAG	Teaching about Drugs, Alcohol, and Tobacco
	JFC	Student Conduct
	JFCF	Drugs in School
	JGD/JGE	Student Suspension/Expulsion
	GAE	Child Abuse and Neglect Reporting
	JO	Student Records

DRUGS AND ALCOHOL: PREVENTION, INTERVENTION, AFTERCARE

I. PREVENTION

The purpose of the drug and alcohol prevention program of the Albemarle County school division is to provide students with information and activities which will prevent them from using alcohol and drugs in a manner harmful to themselves and others. The division's prevention program shall focus on classroom instruction, parent education, guidance and counseling, and the school climate. Involvement of parents and other community members is essential for the success of division prevention activities.

A. Instructional Program

1. All schools, elementary and secondary, will have instructional programs which assist students in making responsible decisions about the use of alcohol and drugs. Current and accurate information about alcohol and drugs and their effects upon the body is one component of an instructional prevention program. Other components include instruction and skill development related to self-esteem, goal-setting, decision-making, understanding feelings, conflict management and problem-solving, refusal skills, and the development of communication skills.

Health education programs will have responsibility for providing instruction about the prevention of drug and alcohol use/abuse. Other areas of the curriculum will reinforce the prevention concepts taught in the health program. Instruction will be provided about student responsibilities and rights as they relate to use of drugs and alcohol in the school and community.

2. Staff will be provided training in new curricula used to teach prevention strategies. Instructional materials will be available for each school to implement the program.

B. Guidance and Counseling Program

Guidance and counseling personnel will assist teachers with the implementation of classroom drug and alcohol prevention activities. Counselors will work with students, individually and in small groups, to supplement drug and alcohol prevention instruction and skill development. Counselors will also work with staff and parents to maximize the prevention efforts of the school.

C. School Climate

School climate is an important element in the prevention of drug and alcohol use/abuse. The effects of drug and alcohol use/abuse may manifest themselves in poor school achievement; truancy; dropping out; poor relationships with family, peers and school personnel; delinquency and other behavioral problems.

All building staff will receive training in how to deal with problems associated with drug and alcohol use. Building-level prevention activities will be initiated under the leadership of the building administrator and supported by staff, students and parents. Community organizations will be encouraged to support school prevention activities.

The division will encourage programs which foster student advocacy of drug and alcohol prevention in secondary schools. These programs may include, but not be limited to, the formation of natural helper groups; development of Students Against Drunk Drivers (SADD) groups; a building-wide focus day; and student support groups. Student support groups assist students concerned about their own use of drugs/alcohol, students living in families suffering from drug/alcohol abuse or dependency, and students concerned about the drug/alcohol use of someone else.

II. <u>INTERVENTION</u>

- A. Secondary schools will establish and maintain an intervention program. The goal of the program shall be to eliminate drug/alcohol use and abuse by students.
- B. Procedures will be established for student, parent, and staff involvement in the identification of high risk students, and for the development and implementation of student treatment plans.

III. AFTERCARE

It is important that students returning to school from a community inpatient or outpatient treatment program be given aftercare support. Primary aftercare responsibility for students returning from a community treatment program rests with the student, parent and community treatment program personnel. School staff, the student, parent(s) and community treatment personnel will work cooperatively to facilitate the aftercare plan.

Adopted: July 1, 1993

Amended: November 13, 2014

Reviewed: November 20, 2003; September 12, 2019