Northern Territory Government

DEPARTMENT OF **EDUCATION**

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Mr Nathan Barrett MLA
Chair
Legislative Assembly 'Ice' Select Committee
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Our ref EDOC2015/31267
FILE2015/273

14 September 2015

Dear Mr Barrett

RE: Revised data to inform the NT Department of Education's submission to the Legislative Assembly of the Northern Territory Select Committee on 'Ice'

I am writing to advise you of a data error in the initial information I provided to you on incidents and suspension of students with Ice related offences in NT Government schools. The information that I provided to you in our May 2015 submission was incorrect due to a technical error as a result of changes to administrative data systems. This issue was recently identified and has since been rectified, however due to new system parameters, we cannot isolate suspensions that relate specifically to amphetamines.

The impact of Ice on school education is critical issue and it is imperative that the Inquiry is provided with accurate information to inform its response. Please find attached the amended submission with the correct data. Specifically the data changes relate to information provided on Page 5 of the May submission.

Substance Use/Possession Related Suspensions by Term (2013 - 2014)

Term	Dangerous drugs related suspensions	All other substance use/possession related suspensions	Total suspensions for all substance use/possession related suspensions
Term 4 2014	25	25	50
Term 3 2014	21	36	57
Term 2 2014	17	24	41
Term 1 2014	11	33	44
Term 4 2013	7	7	14
Term 3 2013	16	24	40
Term 2 2013	6	20	26
Term 1 2013	7	23	30

Data is sourced from the Department of Education's behaviour datasets. The data provided is unpublished and therefore should be considered indicative only and subject to change.

I sincerely apologise for any inconvenience this may have caused. I am more than happy to discuss should you have any queries.

Yours sincerely

Ken Davies
Chief Executive

Northern Territory Government

DEPARTMENT OF **EDUCATION**

September 2015

Submission to the Legislative Assembly of the Northern Territory Select Committee on 'Ice'

(Revised submission)

Introduction

This submission provides the Select Committee with information to support the inquiry into methamphetamine abuse in the Northern Territory.

Evidence presented within the submission was collated through:

- available quantitative data
- qualitative feedback from school leaders and other frontline officers (including, school counsellors and attendance officers)
- engagement with a community support group for guardians
- policy and curriculum review.

Context Statement

The role of the Department of Education is to provide educational and training options for Territorians from the early years to adulthood. Specifically, the department is responsible for:

- ensuring quality early learning and development programs, including Families as First Teachers
- delivering high quality education and training services to government schools to maximise student learning
- providing pathways for school aged students aligned with their further education and work or career aspirations
- providing a regulatory function over the operation of early childhood services and non-government schools
- supporting Northern Territory institutions delivering tertiary education.

These services are delivered to over 33 000 school-aged children in 152 government schools providing programs from the early years to post schooling pathways. 73 per cent of schools are located in remote and very remote locations, providing education to 47 per cent of students. Over 50 per cent of schools are located in areas classified in the lowest decile on the index of Relative Socio-economic Disadvantage. Indigenous students make up 44 per cent of the total student population[1].

In Bruce Wilson's recent report, *A share in the future - Review of Indigenous Education in the Northern Territory* (The Review) (2014), he acknowledges some of the challenges facing the department in fulfilling its responsibilities in remote communities:

> *The NT has a small, diverse population spread over an area of 1.35 million square kilometres, 1.7 times larger than New South Wales and six times the size of Victoria… but with a population of 228 265. Delivering services to a population spread so thinly poses massive logistical and economic challenges.*[2]

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[1] Department of Education *Annual Report 2013-14* (2014) p. 6

[2] Wilson, Bruce A share in the future - *Review of Indigenous Education in the Northern Territory* (2014) p.15

In his review, Mr Wilson also identified the impact of "*substantial disadvantage, including health, social conditions in some families and communities, nutrition, developmental difficulties, non-English speaking backgrounds and low levels of adult education.*" He acknowledges that: "*schools and school systems cannot control these issues and should not be blamed when matters beyond their control limit their achievements... working with other departments and agencies to deliver an integrated approach to services for remote communities [would] assist in overcoming the barriers to improved educational outcomes.*"[3]

It is through partnerships and collaborative improvements that the department can support students to fulfil their "*right to an education that gives them power over their lives*"[4].

Strategic Direction

Under *Creating Success Together*, the department's strategic plan for 2013 to 2015, the department's vision is to assist young Territorians to become confident and capable global citizens. Widespread methamphetamine abuse would pose a real risk to the department in achieving its vision and as such this inquiry presents an opportunity to determine the scale of the impact and build productive partnerships across government to work towards shared objectives.

In 2015, a major source of reform across all Northern Territory Government schools is the ten year Indigenous Education Strategy informed by the Review, published in May 2014. The strategy will support school and system changes to mitigate against external risks to student achievement while remaining focused on delivering educational outcomes for students. Especially relevant is the work being undertaken to develop a whole system approach to behaviour management and wellbeing, called *Positive Behaviour and Resilience*. This will focus on supporting students to develop as healthy, resilient young people by maximising access to teaching and learning opportunities and assisting students to make the healthiest and safest decisions in every situation. Phased implementation of *Positive Behaviour and Resilience* will occur from 2016.

The department has commenced implementation of a strategy for the middle years of schooling in 2015. The strategy will see further action to improve individual pastoral care to students in middle schools with consistent implementation of a system-wide positive behaviour and resilience framework. This work stems from the *Work Like the Best: Review of middle schooling in the Northern Territory* report that made the following recommendation with the aim of ensuring that identified teachers are *"the first port of call for any issues that arise either from the students themselves, their teachers and/or their parents. The teacher would be responsible for the wellbeing and academic success of the students in their group and work with their students to develop appropriate individual learning and engagement plans"*[5].

The Department of Education is also working with a number of other departments in implementing government initiatives that can be connected to the impacts of ice in communities. These include the *NT Suicide Action Plan 2015-2016* and the *Domestic and Family Violence Reduction Strategy*. Some of the activities underway within the department, such as the whole system approach to building student resilience and positive behaviour, align with the direction provided in these government initiatives.

The Commonwealth's recently announced National Ice Action Strategy is expected to further frame the department's response to the prevalence and impact of ice use and misuse in school communities.

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[3] Ibid, p. 14
[4] Ibid, p. 15
[5] Zbar, Vic *Work Like the Best: Review of middle schooling in the Northern Territory* (2014) p. 79

Impact of Methamphetamine abuse on Education

Research from the United States finds that '*[b]eyond its devastating effects on individual health, methamphetamine abuse threatens whole communities, causing new waves of crime, unemployment, child neglect or abuse, and other social ills*'[6].

In this submission, anecdotal evidence is provided from school staff and members of school communities that supports the local relevance of this research and indicates that a level of resultant trauma is evident in some students in some schools (refer Section C). Research by the Northern Territory's former Children's Commissioner, Dr Howard Bath, further states that *"[m]any of the children and young people found in child welfare, mental health, special education, and justice settings have been exposed to trauma in their early years*" and that "*the most pervasive and farreaching impact of complex trauma is the dysregulation of emotions and impulses*"[7].

There is significant research demonstrating the negative impact of substance abuse more broadly on education through:

- students' exposure to substance abuse by parents and family members resulting in low school readiness and engagement
- direct substance abuse by students leading to increased behavioural and learning needs – and requiring access to external professional support.

As cited by the *American Academy of Experts in Traumatic Stress:*

> *[p]arental substance abuse interrupts a child's normal development, which places these youngsters at higher risk for emotional, physical and mental health problems. Because parents who abuse alcohol or other drugs are more likely to be involved with domestic violence, divorce, unemployment, mental illness and legal problems, their ability to parent effectively is severely compromised. There is a higher prevalence of depression, anxiety, eating disorders and suicide attempts … [and children whose parents use alcohol or other drugs] are 3-4 times more likely than others to become addicted to alcohol or other drugs themselves.*[8]

Further, chronic methamphetamine use leads to '*reduced motor speed and impaired verbal learning. Studies in chronic methamphetamine abusers have also revealed severe structural and functional changes in areas of the brain associated with emotion and memory, which may account for many of the emotional and cognitive problems observed in chronic methamphetamine abusers*'[9], with clear consequences for the learning capacity of such an individual.

It is also important to note that research into the use of methamphetamine during pregnancy and breastfeeding '*points to increased rates of premature delivery, placental abruption, … small size, lethargy, and heart and brain abnormalities*'[10]. Pending the inquiry's findings into the scale of the issue, consideration should be given to the longer term impact of methamphetamine on the ability to provide quality educational services to students with disabilities associated with their mothers' substance use. The impact on the classroom is likely to be similar to that of students presenting with Foetal Alcohol Spectrum Disorders:

> *A large ongoing NIDA-funded study is examining developmental outcomes in children born to mothers who abused methamphetamine. Thus far, researchers have found neurobehavioral*

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[6] Wolkow, N. (National Institute on Drug Abuse) *Letter from the Director* (2013) http://www.drugabuse.gov/publications/research-reports/methamphetamine/letter-director (last accessed on 22 April 2015)

[7] Bath, H. (Reclaiming Children and Youth), *The Three Pillars of Trauma-Informed Care* (2008) https://reclaimingjournal.com/sites/default/files/journal-article-pdfs/17_3_Bath.pdf (last accessed on 23 April 2015)

[8] (American Academy of Experts in Traumatic Stress) *Effects of Parental Substance Abuse on Children and Families* http://www.aaets.org/article230.htm (last accessed on 23 April 2014)

[9] (National Institute on Drug Abuse) *What are the long-term effects of methamphetamine abuse?* (2013) http://www.drugabuse.gov/publications/research-reports/methamphetamine/letter-director (last accessed on 22 April 2015)

[10] (National Institute on Drug Abuse) *What are the risks of methamphetamine abuse during pregnancy?* (2013) http://www.drugabuse.gov/publications/research-reports/methamphetamine/letter-director (last accessed on 22 April 2015)

problems such as decreased arousal and increased stress and subtle but significant attention impairments in these children[11].

The implications of this on children entering early years education programs and childcare warrants further investigation.

Summary of current activity

In relation to methamphetamine use, the department primarily plays a prevention and intervention role through the delivery of a variety of programs and initiatives catering for student wellbeing. Current departmental activity in this area includes:

- working to reduce future drug use in children and young people through the delivery of education programs which develop the knowledge and skills to enhance their own health, safety and wellbeing
- mandatory reporting to the Department of Children and Families and the Northern Territory Police as appropriate which includes delivery of mandatory reporting training to school teaching staff twice a year
- in locations where the resource is available, engagement with Youth Engagement Police Officers
- implementation of the National Safe Schools Framework
- making appropriate referrals for students impacted by ice abuse through the case management of attendance officers and other school-based wellbeing officers
- providing counselling services to Northern Territory Government school students, including responding to critical incidents which may relate to the abuse of ice by a student or parent
- facilitating access to drug education programs run by external providers
- running programs such as Clontarf for disengaged students who may have been impacted by ice
- providing intensive learning and socio-emotional support for students with differentiated learning needs in alternative settings such as the Malak Re-engagement Centre, Positive Learning Centres
- building safe and supportive school environments to cater for the socio-emotional wellbeing of students in partnership with organisations such as KidsMatter and MindMatters.

Responses to Committee Terms of Reference

a) The reliability of government data on ice use and measures to enhance the collection of data to ensure that the scale of the problem and its impacts on the health, justice, drug and alcohol, and law enforcement efforts of the Northern Territory Government are understood and measured as accurately as possible

The data collected by the Department of Education is primarily utilised for the purposes of accountability and performance monitoring in relation to the education of children and young people in Northern Territory Government schools. As such, the department collects a range of data which is directly relevant to students – including, attendance, engagement, behaviour, wellbeing and achievement.

While the department is unable to comment on the reliability of government data in terms of its use to understand the impacts on health, justice, drug and alcohol, and law enforcement efforts, the Department of Education does capture some student data which may provide insight into the broader issue of illicit substance abuse in relation to the impact on schools.

[11] Ibid

The following data relevant to substance abuse, but usually not specific to the abuse of methamphetamine, is collected systemically:

- the reason for a student's suspension under Division 3 of the *Education Act*, including whether or not it is in relation to a student's substance abuse or possession within school grounds
- the reporting of a critical school incident to the Chief Executive and where applicable the Minister, including whether or not the incident is related to substance abuse by a student, parent or community member.

Furthermore, as and when required, frontline officers record case management information relating to students which may specifically disclose an issue of substance abuse, or specifically methamphetamine, including:

- notes completed by school staff detailing incidents as they arise on the student file
- information disclosed to school counsellors during conference sessions
- case notes by attendance officers while implementing Part 4 of the *Education Act*.

It should be noted that in cases where frontline officers might record incidents with students and/or parents' relating to substance abuse, the type of illicit substance that may have been used by a parent or student is often unknown.

Within the timeframe for inclusion of this submission, the department is able to provide data as follows:

- **Suspension data** – System data records suspensions in schools by term. Table 1 (below) shows dangerous drug and use or possession of other substances data collected since 2013. Instances related to suspensions due to drug use or possession have predominantly occurred in the Darwin and Palmerston regions, with relatively few incidents outside urban centres.
- **Critical incident reporting** - Since 2013, of 26 critical drug-related incidents that have occurred on school grounds in government schools in the Northern Territory, cannabis was a factor in eleven incidents (42 per cent of total drug-related incidents) and alcohol accounted for five drug-related incidents (23 per cent of total drug-related incidents). Importantly, with regard to alcohol-related incidents, 60 per cent involved intoxicated family or community members on school grounds. There were six incidents where the drug type was not specified.
- **School Counsellor data** - Since 21 July 2014, school counsellors recorded 74 cases where students presented with substance abuse issues – either their own use or use by a family member. These cases were presented in 14 schools across the Northern Territory, predominantly in urban locations. It should be noted that school counsellors are in the process of transitioning to a new database to record services delivered and as such it is likely that incidents are under-reported.

Table 1: Substance Use/Possession Related Suspensions by Term (2013 - 2014)

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Data is sourced from the Department of Education's behaviour datasets. The data provided is unpublished and therefore should be considered indicative only and subject to change.

While data is collected systemically on suspensions related to dangerous drugs and other substance, specific information about methamphetamine cannot be isolated. It is anticipated that, through this

inquiry, any publication and sharing of health or law enforcement data and information relating to the scale of the issue will be of use to the Department of Education in tailoring particular training and approaches to working proactively with students and parents in locations where the prevalence of the drug is known to be high.

b) *A comprehensive survey of the various government responses to the abuse of ice in the Northern Territory and assess their effectiveness or otherwise*

The department has limited data and information detailing the level of impact of methamphetamine in particular to respond strategically to this specific issue. However, a range of departmental policies and programs do provide support for affected students. Furthermore, at a local level, school leaders identify and work to address local challenges to meet student wellbeing and educational needs.

The following information outlines the departmental approach to student socio-emotional wellbeing and drug education:

I. Student Socio-Emotional Wellbeing

It is a departmental priority to ensure that schools are safe, supportive and respectful teaching and learning communities that promote student wellbeing. The Safe Schools NT initiative was developed to support and assist schools in building safe environments. It implements the National Safe Schools Framework which identifies key elements for schools in planning, implementing and maintaining school safety.

To assist implementation of the Safe Schools NT initiative, the School Wide Positive Behaviour Support framework helps schools to plan and implement practices across the whole school, to improve educational and behaviour outcomes for all students.

School Wide Positive Behaviour Support is founded on a positive approach to whole school wellbeing with targeted approaches for students with higher levels of need.

As discussed previously, further related activity underway in schools is associated with the recent review of Indigenous education and middle years review. This work includes a whole system approach to positive behaviour and resilience, based on School Wide Positive Behaviour Support.

II. Drug Education

Drug education in NT schools is focused on building resilience and enhancing each student's ability to make positive decisions about personal health and safety.

The Australian Government's Principles for School Drug Education provide a framework of core concepts and values to support effective drug education practices within schools. They are the foundation of significant teaching and learning resources employed throughout the department and are available in the department's online resource repository for school and teacher reference. The Principles are based on recent research on effective drug prevention within school contexts and support a comprehensive, whole-school approach where drug education is embedded within broader health promotion.

A summary of resources presently available to staff at NT schools via the department's online resource repository is included in Appendices D and E.

Northern Territory Government schools currently use either the Australian Curriculum or Northern Territory Curriculum Framework Health and Physical Education learning area to program, plan and deliver drug education from Transition to Year 10.
The Australian Curriculum's Health and Physical Education learning area has been in draft status since 2013 and there is uncertainty as to the changes that may be made. There is presently no timeline for

endorsement of this learning area nationally. Unlike other larger jurisdictions, the Northern Territory has no local capacity to review and develop its own curriculum and provide other pedagogical supports such as materials or training while national direction is uncertain.

Further information about content from both curricula, including sequential structure for delivery of substance-related programs, is provided in Appendix C.

In most instances, education about specific drugs such as methamphetamine is included in the middle school curriculum (Years 7-9). The department suggests that the sensitive issues in the Health and Physical Education learning area, including drug education programs, need to be developed in consultation with the school community to ensure content caters for school community needs as well as addressing the curriculum.

Research supports the department's focus on general information and harm-minimisation through a strengths-based approach. The Victorian *Inquiry into Methamphetamine* found that "*[e]specially important in terms of demand reduction are policies and programs that help build resilience, especially in young people, reduce risk factors and augment protective factors*"[12].

Significant care and expertise is required in designing resources and programs that align with whole-student development. Both Victoria and New Zealand have investigated impacts of methamphetamine use and misuse and recommend production of high-quality and evidence based resources (refer Section D for a more in-depth discussion).

An area for development within the department could be to better focus professional learning for teachers and to expand the scope of drug education to include parents. Such a task could be managed with the support of School Councils.

From a Senior Secondary perspective, the Northern Territory Certificate of Education and Training (NTCET) subject *Stage 1 Health* includes one relevant option for study: '*The effects of alcohol, tobacco and other drugs on health*'. This option provides teachers with an opportunity to assess students on their understanding of the impacts of drugs such as Methamphetamine. In *Stage 2 Health*, one of two core concepts is '*The Social and Economic determinants of Health*', which may involve ways of analysing a health issue, such as the use of Methamphetamine, and exploring its possible determinants, costs and risks to society.

Currently across the NT, Stage 1 Health is taught in eight senior secondary schools with 128 enrolees and Stage 2 is taught in ten senior secondary schools with 218 enrolees.

c) The social and community impacts of ice in urban, community and remote settings

As previously indicated, systemic data capture for departmental purposes does not require specific reference to methamphetamine use, but is more often recorded in general terms such as 'substance' use/misuse. This is largely due to the inability of departmental staff draw conclusions with the required level of certainty about the type of substance impacting a student.

To provide the committee a more detailed snapshot of the impact and prevalence of ice in school communities, the department consulted with the following stakeholders:

i. school leaders from both the government and non-government sectors
ii. school counsellors
iii. attendance officers working with disengaged students
iv. guardians from a local methamphetamine community support group.

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[12] Law Reform, Drugs and Crime Prevention Committee (Parliament of Victoria) *Final Report: Inquiry into the supply and use of methamphetamines particularly ice, in Victoria* (2014) http://www.parliament.vic.gov.au/lrdcpc/article/2135 (last accessed on 23 April 2015)

School leaders were surveyed through a *Principal Survey* (see Appendix A), with an *Analysis of Responses* provided at Appendix B. In one instance during the evidence gathering process, a student volunteered comment upon learning of the inquiry; this statement is also included.

Key findings from consultation included:

- school staff hear of many incidents involving methamphetamine use amongst students and families connected with their schools through third parties but fewer staff have firsthand knowledge or evidence
- some staff have noted increases in aggressive and violent behaviour at school from students and parents related to substance abuse – but cannot confirm that this is a result of methamphetamine abuse in particular
- where abuse of methamphetamine is known, it is more prevalent as an issue among parents. Signs of trauma recognised in the children of methamphetamine-abusers have subsequent impacts upon their ability to engage in school and their learning
- in many locations, greater impact is felt through general misuse of other substances such as cannabis and alcohol
- frontline staff are seeking more involvement and professional support from police, through engagement with both students and staff
- where the resource is available, schools value the role of Youth Engagement Police Officers
- a need for better referral options and systems to community support groups and other government departments
- the contrast between messages relayed in school drug education and those that students receive outside school with continued exposure to adult substance misuse
- rising numbers of students who are being cared for by family members as parents become incarcerated or incapacitated due to misuse of ice.

All respondents indicated that student wellbeing programs are presently being delivered in their respective schools in a manner of forms. Foremost in use in schools are the *School-Wide Positive Behaviour Support*, *KidsMatter* and *You Can Do It* programs.
Comments from stakeholders reflect statistics provided through the Cancer Council's *2011 Australian secondary school students' use of tobacco, alcohol, and over-the counter and illicit substances*, which records amphetamine use by children aged 12 – 17 at 3.2 per cent[13]. A greater impact on Northern Territory students appears to be caused by family or community use and the resultant dysfunction, abuse and neglect preventing students from adequately participating in education.

While many accounts were received from principals, school leaders, frontline staff, one of the most relevant is from a student at one school who volunteered the following account:

> *… I am the age of 14 who has lived in an abusive environment with alcohol abuse, drug abuse and physical and mental abuse ... My parents spilt up on around 2012, my mother currently abuses ice and alcohol as she has her whole life, but has gotten worse. My mother leaves her two children to 'fend for themselves'. While she has taken these actions I have looked after my now 5 year old brother. This has occurred for three years. I fed him, I showered him, I protected him like our mother should have but instead she was at the local pub every night drinking and abusing drugs. My brother very rarely saw his mum, neither did I she wouldn't make it on birthdays, didn't buy us stuff for celebrations. She is very rarely seen. She continuously goes to local people's houses, leaving her daughter (myself) to babysit her son on school nights while she drank and slept around. The impact of alcohol and drug use in my house has been an on-going thing. I suffered from depression and anxiety and … I started having small attacks that later something quite large which the cause of it was an anxiety attack. I was not getting the correct food at my mothers, sleep and I had to much stress on my body. I am worried for my younger brother, as every night he is at the local pub while he watches his mum drink and has random drunk people looking after him and well what if something bad happens to him? What's going to happen then? I ask you a question; as a young girl who has seen the effects of drug and alcohol abuse … My mother disregards her children's health and safety; she thinks of it as something else and leaves us to get sick, or just*

[13] White, V. and Bariola, E. (Drug Strategy Branch: Australian Government Department of Health and Ageing) *Australian secondary school students' use of tobacco, alcohol, and over-the-counter and illicit substances in 2011*(2012) http://www.cancervic.org.au/about/media-releases/2012-media-releases/december-2012/nationalsurveyofalcoholandtobacco.html (last accessed 23 April 2015)

doesn't believe when serious things are happening such as seizures, allergic reactions, and other medical problems … I am a student, a daughter, a friend who has witnessed this too much and have given up hope on 'safety amongst children' …

In preparing this submission, the department received information about the support group, '*Families Crying Out for Help'.* The principal and a staff member at Karama Primary School recommended attending one of the group's sessions to gain firsthand information from family members who have the responsibility of caring for children whose parents are unable to because of their use of methamphetamines. The school became involved with the support group as a pattern emerged with more students beginning to attend school with evidence of trauma and neglect.

d) *Government and community responses to ice use in other states and some assessment of the effectiveness of these responses in terms of prevention, education, family and individual support and withdrawal and treatment modalities*

Relatively few jurisdictions' departments for education have addressed the issue of methamphetamine specifically. However, both Victoria and New Zealand have completed significant research into the prevalence and impact of methamphetamine in their jurisdictions. In New Zealand, an Action Plan, '*Tackling Methamphetamine'* was completed in approximately 2009, while Victoria reported findings from its own inquiry in September 2014. Recommendations made through these investigations support many of the education initiatives presently being undertaken in the Northern Territory.

Key recommendations and subsequent activity in both jurisdictions, as related to drug education in general and ice education in particular, are provided in Tables 2 and 3 below.

The consensus seems to be that young students should be given general information about substance abuse with no specific reference to ice until middle to upper secondary years. The evidence gathered for this submission, however, appears to indicate that many Northern Territory students need support and guidance in understanding what is happening when others around them are using ice, how to deal with the situation, including assistance in finding where to go for help, and understanding how to minimise harm in their home environments.

Table 2: Case Study 1 – Victoria

Jurisdiction	Recommendations	Subsequent Activity by Education Department
Victoria **Report released on 5 March 2015**	Programs and initiatives that have been shown to be successful in preventing or reducing the uptake and use of drugs including methamphetamine continue to be financially supported by the Victorian Government.	• For schools, the *Building Resilience: A Model to Support Children and Young People* resource to supports a practical, whole-of-school approach to equipping young people with the skills they need to make good life decisions. • School drug education curriculum for students in Years 7 to 9, freely available to all secondary schools across the state. *Get READY* is a comprehensive, evidence-based whole-school program, recognised as international best practice. • Equip schools to identify and intervene when young people are at risk of disengagement through two particular programs: *SAFEMinds*, and *MAKINGtheLINK*.
	Develop programs and resources for schools and school communities to support children identified as at-risk.	
	Support the development of programs and resources that encourage and empower parents to have a positive influence in developing their children's resilience and good decision making skills.	
	The Victorian Education Department evaluate its current generic school programs which provide information, resilience training and skills that empower young people with the aim of continuing the ones that have proven to have success in this area.	
	The Victorian Government in conjunction with relevant Victorian Alcohol and Other Drug agencies provide information, particularly with regard to harm reduction of methamphetamine, which is delivered in innovative and creative ways that engage young people. Such approaches should include peer education networks and outreach services.	
	Education and information provision with regard to methamphetamine is most usefully developed for targeted user groups each with their own specific needs. These groups would include: • young people in schools who are at risk using methamphetamine • young people who are disconnected from schools • young people in out-of-home care	
	The Victorian Government in conjunction with relevant family drug support groups, develop targeted information and education on methamphetamine for the families of methamphetamine users.	
	The Victorian Government in conjunction with relevant Victorian Alcohol and Other Drug agencies provide intensive tailor-made training on methamphetamine for frontline workers including teachers.	
	Teachers should receive comprehensive training on how to recognise and support young people who are affected by drug use including methamphetamine.	

Table 3: Case Study 2 –New Zealand

Jurisdiction	Recommendation	Subsequent Activity by Education Department
New Zealand **Report released circa 2009**	Support communities - Strengthen best practice interventions already in place, such as CAYADs, and use Community Police to support communities to respond to methamphetamine locally. Build community resilience and ensure that effective education and information is available.	• Production of new Drug Education Guidelines for schools, *Promoting Student Health and Wellbeing: A Guide to Drug Education in* Schools, which recommend classroom-based programs delivered by trained professionals, preferably teachers from within the school, to be taught as part of the Health and Physical Education component of the New Zealand Curriculum. • Teaching resources and training to be developed

Similar activity to that featured in these two case studies is presently being undertaken by the Northern Territory Department of Education, including:

- implementation of PBR approach
- use of both the Northern Territory Curriculum Framework and the Australian Curriculum (see Appendix C)
- resources available through the online repository (see Appendices D and E).

Further activity could relate to professional learning for staff.

e) The sources of ice including cross border trafficking, local manufacture and derivation from legal pharmaceuticals and other legal precursors

Limited knowledge is held by the department about sources of ice. Anecdotal evidence provided through the principal survey indicated that several principals have concerns relating to unverified parental involvement in production and trafficking; the inability of police to act until evidence is confirmed leads to ongoing trauma for students present during the investigation process.

f) Best practice work place health and safety measures for those in the health system who come into contact with users of Ice

Whilst the Department of Education has no responsibility for those employed within the health system, best practice workplace measures should be applied at all times to staff with the potential to interact with students or parents affected by ice. At some schools, anecdotal evidence indicates that staff in contact with students or parents affected by ice may be increasing, and as a consequence, appropriate workplace health and safety measures and professional development must be in place.

Principal feedback reflects a need for skill development to:

- recognise situations that have the potential to escalate
- de-escalate situations
- self-protection
- what to look for and what to expect to identify if students are affected by substance misuse and ice in particular
- how to help students and families impacted by substance misuse and ice in particular
- regular opportunities for debriefing/counselling, especially after critical incidents.

The department recognises the potential for collaborative professional relationships with the Department of Health and the Northern Territory Police to deliver targeted, best-practice professional development to relevant staff.

Conclusion

While it is difficult to determine the impact of methamphetamine particularly, abuse of both licit and illicit substances more broadly has a significant effect on the education of young Territorians. Further exploration of whether methamphetamine requires a particularly specialised response should occur.

The department recognises that collective work between relevant government and non-government agencies is critical to our response to issues related to use and misuse of ice. A collaborative strategy provides greater opportunities to mitigate the risk of increased methamphetamine abuse and is particularly able to provide:

- stronger partnerships with Northern Territory Police, Department of Health and non-government organisations to deliver effective drug education, including, wherever possible, developing strategies to improve access to Youth Engagement Police Officers
- improved referral options to support students impacted by substance abuse
- increased information sharing to better inform and prioritise departmental efforts
- providing parental access to drug education through School Councils
- access to relevant training for staff, including:
  - improving recognition of ice-related incidents
  - providing strategies that support staff to deal safely with users.

Additionally, the Department of Education acknowledges the Commonwealth's commitment to develop a National Ice Action Strategy, with the National Ice Taskforce working with all governments to develop a comprehensive strategy. The department recognises the opportunity to align efforts for a coordinated response that addresses the impact and prevalence of ice in Northern Territory school communities.

Principal Survey

Principal Survey - ***prevalence***, ***impacts*** *and government* ***responses*** *to illicit use of 'Ice'*

Question	Response
Thinking about your school in the last year, how many incidents have you been aware of that have involved direct student use of Ice?	
To your knowledge, have any students at your school been indirectly impacted by the use of Ice, for example by family or community members?	
What drug education programs, if any, are presently delivered in your school?	
What student wellbeing programs, if any, are presently delivered in your school?	
As far as you are aware, do these programs specifically address the use of Ice?	
Would you propose improvements to these programs to increase their effectiveness? If so, what? *Please consider this in terms of building self-esteem, resilience, assisting to cope with peer pressure situations*	
What role do schools and school councils presently play in supporting parents regarding ice and other drug use by students? *Please consider this in terms of giving parents advice on what to look out for and strategies for combatting and coping with a child who may be using drugs*	
What is your experience, if any, of the current role of youth engagement police officers in the context of drug education and managing incidents? Should this role be changed or expanded? If so, how?	

Analysis of Responses – Principal Survey

Question	Summary of Responses								Additional Comments
Number of incidents involving direct student use of Ice	**0**	**1**	**2**	**3**	**4**	**5**	**Multiple** Unspecified	**Unsure**	• Ice is a constant conversation – students, staff, families • Significant change in town – more students accessing • Suspect more
	51	19		1		4	2	3	
Have students been indirectly impacted by the use of Ice, for example by family or community members	**Yes**	**No**	**Unsure**	**Hearsay**					• At least 4-5 families • Separated parent with ice addiction attempting to see kids at school • Substance use at home; admitted addicts; charges & prosecution – supply and possession; family homelessness • Older siblings who use ice and talk openly about it • Number of families – increased domestic violence and poverty • Children raised by grandparents; parents incarcerated; trauma; challenging behaviour; impacts others' learning • Complete breakdown of family; severe stress; domestic violence; neglect (DCF involvement); financial hardship; 7 yr old diagnosed with PTSD • Parent reports of heavy use by older siblings • Students attacking each other with knife attack outside school • At least 5 families • Perhaps one family manufacturing and selling; poor student attendance; mandatory reporting • Multiple students affected • Students needing to care for family member who use or who are neglected • Reports to DCF regarding family violence • Students going down path of street gangs/police/watch house/Don Dale
	27	23	6	4					
Drug education programs presently delivered in schools	**None**	**Informal**	**Health/ HPE**	**Wellbeing**	**Cyber Safety**	**Life Ed**	**YEPO/ Police**	**Unsure**	**Other**	• Very limited in primary school • Drug Ed part of program as consequence of greater issues • Weekly for Yrs 7-12; different topics; use of specialists • Sniffing covered • Yrs 7-9/10 • From clinic • Indigenous support counsellor • Yr 6/4-6; upper primary • All middle school students; guest speakers • Support agencies, eg Sommerville, youth agency • Tabacco/Alcohol/Cannibis • Walpiri Youth Development Aboriginal Corporation (WYDAG) – petrol and substance abuse • Yr 9 pilot program by school counsellor HPSW • DAISY with Clontarf and select students • Across school with regional health team – Kate Finnigan • School nurse • Dealt with on demand • 'So Safe' program for SWD • Professional Development for staff • Human Growth and Development; Catholic Care
	10	5	25	6	1	7	5	1	8	
Student wellbeing programs presently delivered in schools	**Informal**	**Anglicare**	**SWPBS**	**DI**	**Keeping Safe**	**Kids Matter**	**You Can Do It**	**Blue Earth**	**Other**	• Weekly school counsellor input in classes • 250mins/wk mentoring & wellbeing • Staying Safe – the Ramo Way • Peer skills; NAPCAN; Ruby Gaea SAPPS • BounceBack • School culture for primary • Tribes; Yepo • Bill Rogers • Health Curriculum; health clinic • Stronger sisters; Clontarf • Anti-Bullying Day • BLOKES • Strategies for Managing Abuse Related Trauma (SMART); Keeping them Safe Child Protection Curr; Rock and Water; Chaplaincy; Play Therapy; Drum Beat; garden • Finding My Magic; Menzies Life Skills • Mind Matters • 7 Habits of Highly Effective Teams; Free To Be; Managing the Hulk • Komichi • Did receive funding through Chaplaincy; hopeful of reinstating this through DSS funding and Good Beginnings • Restorative Justice; 123 Magic • So Safe • Sunrise Girls
	5	1	15	2	5	10	13	6	13	
Do these programs specifically address the use of Ice?	**Yes**	**No**							• Planning to • By external agencies or police
	4	58							
Proposed improvements	• Program improvement; curriculum links; sequential process • Focus on issues of copying • Principals need to know symptoms – what to look for • Incorporating other staying safe ideas – eg 'The Choking Game' • Programs can always be improved • Forearming students and families with skills • If implemented well, current programs are adequate • Build resilience; deal with peer pressure; YEPOs in schools all the time to support education and wellbeing • More PD for teachers • At a family/community level	• One aligned program would be helpful • All schools should have resources • Greater support from other community stakeholders, eg Health and Pollice • Issue of drug abuse needs to be addressed and presented by trained professionals • Developing resilience • On going • More financial resources to implement • Further links to NTG service providers • May be good to address consequences of drug use	• Need to research how to deliver to students with intellectual disability as they are vulnerable • Increase the teaching within the Health curriculum • Parent engagement • Need to promote student safety, being exposed to users • Focus on trauma; unpacking what trauma is; its effect on learning/development/behaviour • Building a community against ice • Power of the peer is ever increasing; youth in Tennant Creek at high risk; includes others forcing participation in dangerous and antisocial behaviour	
Role that schools and school councils presently play in supporting parents regarding ice and other drug use by students	• Through behaviour management; student support; counselling; external support; wellbeing groups • Links/referrals to outside agencies • Information, education – staff and families • Advise parents of concerns; try to engage in shared responsibility with very limited success – a sense of denial • Limited effectiveness – poorly resourced • Needs addressing • Support	• Schools will play a key role in providing a discussion forum around ice and its impact; aligned with Parent and Community Engagement (PACE) team • Part of FaFT program • Working with Night Patrol, Youth Centre, Women's Safe House; Police; Clinic; Vulnerable children meeting • Engagement with Youth Worker • Looking to engage with Health • Flyers for families	• Clear messages and education around issues that affect development of children and their learning, family cohesiveness and community sustainability and resilience • Reporting to police/FACS; having a contact resource person available • Assisting with searching for affected students who have not returned • Needs to be school based forums for families to know what to look for ; perhaps councils should take the role for this	

	None	Limited	Good	Excellent	Unsure	Need DARE	Need more	
Respondent experience of the current role of Youth Engagement Police Officers (YEPOs) in the context of drug education and managing incidents.	24	10	5	3	3	4	23	• Discussions regarding older siblings and family members not returned • They are overworked and role has diminished – we need more help! • One visit a term insufficient • So thinly spread not able to be effective • Individualised approach on request • Local police have a bigger role and impact as they are there all the time and have developed relationships with community; use YEPOs very occasionally – once in 2 years • Absolutely invaluable; needs far more involvement; 2 visits • Would appreciate more communication; no conversation around Ice • Currently work with police to co-deliver programs; regular visits essential to positive view of police • Attendance and truancy is the focus • Police pulled out school based constables – set us right back!; small number of police to provide informal support as a response to legally at-risk behaviours; address students at assembly, eg cyber-bullying • Tried to engage local police, they are short on resources; no contact this year; one ACPO does not support school; other is keen but assigned to other duties • Poorly understood; more attention to selection of officers, role and education/support • Managing incidents – good; education – poor • Never see at primary school; would prefer therapist/psych to support wellbeing programs • Very important role • Attempting with help of Danila Dilba; difficult without community support • Often unavailable; local police very supportive when required; YEPOs cover too many schools – shouldn't be doing radars/traffic/crossings • Under-resourced • Needs to change to adapt to changing needs of youth/families • Police communicate that they feel powerless too!

Drug education in the Australian Curriculum and NT Curriculum Framework, Health and Physical Education learning areas

The development of the Australian Curriculum, Health and Physical Education learning area was informed by extensive current research into best-practice teaching and learning. It supports a strengths-based approach to drug education, focussing on the capabilities, competencies, values and hopes of all students, regardless of their current circumstances, to optimise their own health and that of others. Drug education advocates positive teachings related to building resilience and harm-minimisation. Drug education is delivered from Foundation to Year 10 and is outlined through the achievement standards in the table below.

The 2009 NT framework gives teaching staff and schools an important structure for delivering outcomes-focused student learning, while at the same time allowing them to take into account specific local needs and to promote multiple learning pathways. Drug education is delivered from Transition to Year 10 and is outlined through the achievement standards in the table below.

Level	Australian Curriculum Year level achievement standards	Northern Territory Curriculum Year level achievement standards
Foundation / Transition	Students use personal and social skills to include others in a range of activities. They demonstrate, with guidance, practices and protective behaviours to keep themselves safe and healthy in different activities. They recognise actions that help them be healthy and safe.	Students describe and demonstrate health related habits and identify known people and products needed to maintain and promote health and safety.
Years 1 and 2	Students demonstrate positive ways to interact with others. They select and apply strategies to keep themselves healthy and safe and are able to ask for help with tasks or problems. They examine messages related to health decisions and describe actions that help keep themselves and others healthy and safe.	Students apply basic elements of health care. Students identify health-care providers and services in the community. Students explain the importance of achieving balance between the dimensions of health. Students describe health care providers' roles in keeping us healthy and safe.
Years 3 and 4	Students interpret health messages and discuss the influences on healthy and safe choices. They use decision-making and problem solving skills to select and demonstrate strategies that help them stay safe and healthy.	Students investigate ways in which health and wellbeing can be enhanced and maintained. Students demonstrate ways in which health and wellbeing can be enhanced and maintained including investigating products, services and information.
Years 5 and 6	Students access and interpret health information and apply decision-making and problem-solving skills to enhance their own and others' health, safety and wellbeing.	Students identify and discuss health messages in the media, they consider strategies used to improve personal safety and wellbeing, and locate agencies and sources that can provide current, reliable advice on health and lifestyle issues. Students analyse images of health, develop strategies to promote personal safety and wellbeing and investigate the health services available to different groups in the community.
Years 7 and 8	Students investigate strategies and practices that enhance their own and others' health and wellbeing. They apply personal and social skills to establish and maintain respectful relationships. Students demonstrate skills to make informed	Students analyse the influence of individual behaviour on major causes of illness, injury and prevention strategies. They discuss mental health, peer group influence community safety and wellbeing. Students evaluate behaviours, situations

	decisions, and propose and implement actions that promote their own and others' health, safety and wellbeing.	and programs that recognise community health needs including substance use and life style choices, and explain their influence on personal and community safety and wellbeing.
Years 9 and 10	Students critically analyse contextual factors that influence their identities, relationships, decisions and behaviours. They analyse the impact attitudes and beliefs about diversity have on community connections and wellbeing. Students access, synthesise and apply health information from credible sources to propose and justify responses to health situations. They apply decision-making and problem-solving skills when taking action to enhance their own and others' health, safety and wellbeing.	Students evaluate personal health and safety plans and research community initiatives to promote health and safety. Learners identify self-management skills that enable them to make informed decisions for healthy living, and explain how attitudes promote personal health and wellbeing and positive personal relationships. Students develop and act on a personal health and safety plan and evaluate community initiatives to promote health and safety. Students demonstrate self-management skills that enable them to make informed decisions for healthy living, and exhibit attitudes and values that promote personal health and wellbeing within family, personal and community relationships.

Northern Territory Government

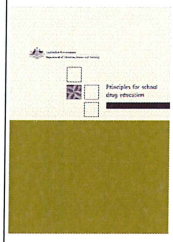
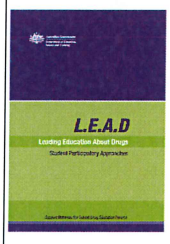
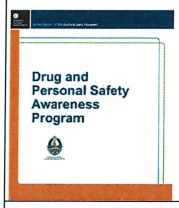
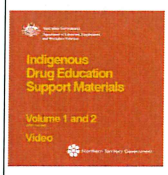
DEPARTMENT OF **EDUCATION**

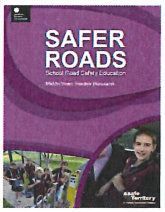
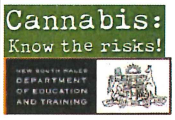
PERSONAL, SOCIAL AND COMMUNITY HEALTH

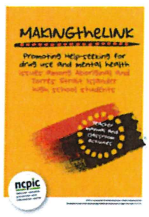
Alcohol and other drugs

The following resources are recommended for use in NT schools. Please ensure the appropriateness of selected resources at the local school/community level.

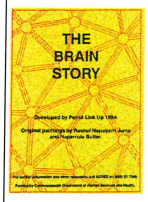
Audience key: Early Childhood - EC, Primary Years - P, Middle Years - M, Senior Years - S, Indigenous - I, Parent - Parent

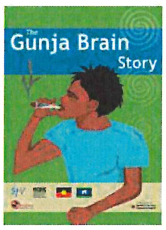
	TITLE AND RESOURCE DESCRIPTION	AUDIENCE
	***g) Principles for School Drug Education*** http://www.oxygen.org.au/downloads/resources_for_schools/Principles_for_School_Drug_Education.pdf This document presents a revised set of principles for school drug education. The principles for drug education in schools comprise an evolving framework that has proved useful over a number of decades in guiding the development of effective drug education.	ALL
	***h) Leading Education About Drugs (LEAD)*** http://www.oxygen.org.au/downloads/resources_for_schools/LEAD-Leading_Education_About_Drugs.pdf This resource provides guidance to schools to assist them in preparing students for peer leadership roles in the conduct of drug education forums. The materials are designed to assist in equipping students to conduct drug education forums for peers, for younger students or for multi-age groups or public forums involving parents, agencies and community members. The materials can also be used to inform those designing creative approaches to health promotion involving arts or cultural activities.	M, S
	***i) Drug and Personal Safety Awareness Program*** Drug and Personal Safety Awareness Program for NT Police Officers in conjunction with classroom teachers	EC, P, M, I
	***j) NT Indigenous Drug Education Support Materials*** http://www.det.nt.gov.au/teachers-educators/students-learning/safety-wellbeing/health The Indigenous Drug Education Support Materials resource has been developed primarily for Indigenous school communities as a part of the NT National School Drug Education Project and contains materials for teachers and students.	EC, P, M, I

	k) Keeping in Touch – The Kit http://oxygen.org.au/downloads/resources_for_schools/Keeping_InTouch-The_Kit.pdf The KIT comprises sections covering a range of topics to assist school staff to increase their knowledge and skills in understanding alcohol and other drug use and in supporting students at risk.	ALL
SDERA SCHOOL DRUG EDUCATION & ROAD AWARE Helping to keep young people safer	***l) School Drug Education and Road Aware Project (WA)*** http://www.det.wa.edu.au/sdera/detcms/portal/ School Drug Education and Road Aware (SDERA) is the WA State Government's primary drug and road safety education strategy.	ALL, PARENT
	***m) Safer Roads Middle Years Teacher Resource*** http://transport.nt.gov.au/safety/road-safety/for-schools/teacher-resource This resource has been developed for students in Years 7-9. The content is divided into the following focus areas: Drug use issues, Predicting and responding to drug use risks and consequences, Road user issues, Predicting and responding to road use risks and consequences, Taking action. The Teaching and learning strategies section describes a range of teaching methodologies to provide students with a variety of learning experiences to enhance their learning and skill development.	M
	***n) Cannabis: Know the risks!*** http://www.schools.nsw.edu.au/media/downloads/schoolsdrug/learning/yrk12focusareas/druged/yr2010/cannabis_resource.pdf This NSW Department of Education and Training resource supports teachers to provide cannabis education for Years 7-10 students. It includes an interactive online game (www.cannabisknowtherisks.com.au) where students can have fun testing their knowledge about cannabis and a downloadable resource for teachers featuring information about cannabis and teaching and learning activities.	M, S
	o) Making the Link (NCPIC) http://ncpic.org.au/workforce/teachers/making-the-link/ MAKINGtheLINK is a curriculum-based program for schools to promote help-seeking for cannabis use and mental health problems, based on evidence-based research and developed in collaboration with teachers and students.	M, S
australian drugFOUNDATION	***p) Australian Drug Foundation*** www.adf.org.au/ This is a great site that provides information on specific drugs and on issues such as talking to teenagers and organising a party with lots of downloadable factsheets which are really useful.	ALL, PARENT

	***q) Making the Link (NCPIC)*** http://ncpic.org.au/workforce/teachers/making-the-link-indigenous/ This package is an educational resource incorporating a series of activities for Aboriginal and Torres Strait Islander students, to encourage them to seek help for problems related to drug use and mental health. This resource has been made specifically for Aboriginal and Torres Strait Islander young people in an attempt to provide culturally-appropriate and relevant information that these young people can relate to.	M, S, I
	r) Making the Link: Seeking help for risky drinking http://www.turningpoint.org.au/Media-Centre/Latest_News/MAKINGtheLINK.aspx MAKINGtheLINK: Seeking Help for Risky Drinking is a school-based health promotion program which teaches secondary school students how to seek help for problems related to alcohol use and risky drinking behaviour. The program comprises a teacher manual, seven interactive and engaging discussion-based activities for secondary school students, an animation about the effects of alcohol on the developing brain and two vodcasts modelling how to assist a friend to seek help. Commercially available.	M, S
National Drug Strategy	***s) National Drug Strategy*** www.nationaldrugstrategy.gov.au/ On this website you will find information about the National Drug Strategy; links to the current drug campaign sites with information on initiatives at national, state/territory or community levels; the key research and data components supporting the strategy; publications; and key links to relevant government, professional organisations and drug-related portal sites.	M, S
DRUG INFO www.druginfo.adf.org.au	***t) DrugInfo*** www.druginfo.adf.org.au/ This site collects, interprets and disseminates information on drug prevention. Its in-house library also offers an online catalogue.	M, S
Australian Government	***u) Australian Secondary Students Alcohol and Drug Survey*** http://www.nationaldrugstrategy.gov.au/internet/drugstrategy/publishing.nsf/Content/school08 The 2008 Australian Secondary Students Alcohol and Drug Survey Report presents prevalence estimates of use of the different substances in 2008 within each age between 12 and 17 years for males and females.	M, S
NATIONAL DRUGS CAMPAIGN	***v) National Drugs Campaign*** www.australia.gov.au/drugs The website provides information for young people about different illicit drugs and provides details about where to get help.	M, S, PARENT

adin.com.au Australian Drug Information Network	***w) Australian Drug Information Network*** http://www.adin.com.au/content.asp?Document_ID=1 The Australian Drug Information Network provides a central point of access to quality Internet-based alcohol and other drug information provided by prominent organisations in Australia and internationally.	ALL
SOMAZONE	***x) Somazone*** www.somazone.com.au The Somazone website focuses on health and lifestyle issues such as mental health, drug-use, relationships and body image, with fact sheets, personal stories and advice on where to get help.	M, S
ncpic national cannabis prevention and information centre	***y) National Cannabis Prevention and Information Centre*** http://ncpic.org.au Factsheets are provided on a range of cannabis-related topics and the Young People's section of this website is particularly useful, particularly if you want to navigate through it with a teenager.	M, S
www.alcohol.gov.au	***z) Alcohol*** www.alcohol.gov.au Information about alcohol-related health issues and Australian Government policy.	M, S
DrinkWiseAustralia	***aa) Drink Wise*** http://drinkwise.org.au/ A wonderful website that provides extremely useful information for parents around all issues alcohol, particularly if, when and how parents should provide alcohol to their children. Full of practical strategies and tips no matter what age your child.	M, S, PARENT
DON'T TURN A NIGHT OUT INTO A NIGHTMARE	***bb) Drinking Nightmare*** http://www.drinkingnightmare.gov.au/internet/drinkingnightmare/publishing.nsf/Content/home Information all about the 2008 National Binge Drinking Campaign 'Don't turn a night out into a nightmare'. Topics include: choices, consequences, excessive alcohol consumption, alcohol related harm, violence and social issues. This site also includes an interactive online board game based on the 'Don't turn a night out into a nightmare' campaign. http://www.drinkingnightmare.gov.au/internet/drinkingnightmare/publishing.nsf/Content/game	M, S, PARENT
OxyGen.org.au	***cc) OxyGen*** http://www.oxygen.org.au/ OxyGen is all about the hard facts of smoking and the truth about the tobacco industry. Site contains video clips and interactive games.	P, M

	***dd) Petrol Sniffing and Other Solvents*** http://www.adac.org.au/siteF/resources/brainstory/index.html This manual covers all aspects of petrol sniffing and other solvent use in Indigenous Communities. The manual consists of a number of illustrated booklets that target a range of audiences - family members, community members, community decision-makers, health and community development workers. The booklets contain basic health information, examples of successful programs, strategies to develop your own responses, teaching resources and information about where to go for further assistance.	P, M, S, I
Australian Indigenous HealthInfoNet	***ee) Sniffing and the Brain*** http://www.healthinfonet.ecu.edu.au/key-resources/promotion-resources?lid=14816 'Sniffing and the brain', 'When girls and women sniff', and 'When boys and men sniff' are flipcharts used to raise awareness of the effects of petrol sniffing and inhalant abuse, and contain culturally appropriate information in plain English. The diagrams depict how petrol sniffing affects the brain and causes damage over time; it also depicts the damage to both individual health and the health of the community.	P, M, S
Quit	***ff) Quit Now*** www.quitnow.gov.au/ Information on Quit campaigns, health effects of smoking, smoking and pregnancy, research, health warnings.	M, S, PARENT
SMARTER than smoking	***gg) Smarter than Smoking*** http://www.smarterthansmoking.org.au/ Information and resources to help prevent young people from starting to smoke.	P, M, S
No Smokes	***hh) No Smokes*** http://quit.nosmokes.com.au/ The No Smokes website is a fantastic tool to use with young people who are thinking about quitting or wanting more information about the health effects of tobacco. It is aimed at Aboriginal and Torres Strait Islanders from 12-25 years old.	P, M, S, I
	ii) Tobacco: A case for action http://www.eduweb.vic.gov.au/edulibrary/public/stratman/Policy/schoolgov/druged/tobaccolegalcase.pdf An electronic research and problem solving activity for Years 7-8 which aims to educate young people about nicotine addiction prior to experimentation. Students can work individually or in teams to engage in discussions and debate; undertake research; think deeply; and present a coherent and complex argument.	M

the future is in your hands	***jj) The Future Is In Your Hands*** http://www.futureinyourhands.com.au/ This web site aims to prevent the uptake of smoking among 10 to 15 year-old students. It has a number of interactive games, quizzes and facts.	P, M, S
CANNABIS KNOW THE RISKS PLAY GAME	***kk) Cannabis – Know the Risks*** http://www.cannabisknowtherisks.com.au/ This is an interactive cannabis board game courtesy of New South Wales Department of Education and Training.	M
	***ll) The Gunja Brain Story*** http://ncpic.org.au/ncpic/publications/e-zines/article/ncpic-e-zine-june-2012 NCPIC's prevention-focused flipchart for Aboriginal and Torres Strait Islander people all about the effects of cannabis use on the brain, body, mental health, spirit, community, culture and relationships. Other issues covered include the dangers of bingeing on the drug, social problems and how to get off the gunja and stay strong.	M, S, I
Lawstuff Know your rights	***mm) Lawstuff – Know your rights*** http://www.lawstuff.org.au/nt_law/topics/ Lawstuff provides legal information to children and young people in Australia.	P, M, S
	nn) What's the Buzz? http://stevewallis.net/iceweb/ This is a set of interactive fact based activities testing knowledge about methamphetamine. Produced by the Queensland Government.	M
TIO	***oo) Tune In Not Out*** http://www.tuneinnotout.com/topics/alcohol-other-drugs/ Tune In Not Out brings videos, factsheets, real stories and blogs from across Australia into one central point for young people to explore.	M, S
YOUR ROOM	***pp) Your Room*** http://yourroom.com.au/ Useful information about drugs and alcohol in an interactive environment. Information sheets about drugs, support and treatment options and games.	M, S

Northern Territory Government

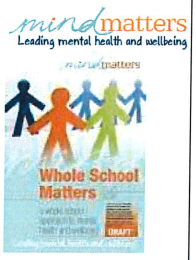
DEPARTMENT OF **EDUCATION**

PERSONAL, SOCIAL AND COMMUNITY HEALTH

Mental health and wellbeing

The following resources are recommended for use in NT schools. Please ensure the appropriateness of selected resources at the local school/community level.

Audience key: Early Childhood - EC, Primary Years - P, Middle Years - M, Senior Years - S, Indigenous - I, Parent - Parent

	a) TITLE AND RESOURCE DESCRIPTION	AUDIENCE
	***b) Mind Matters*** http://www.mindmatters.edu.au/ MindMatters is a mental health promotion resource for secondary schools. It is best used as part of a comprehensive whole school approach to mental health and wellbeing, focusing on entire school communities, not just individual students with identified needs. It aims to enhance the development of school environments where young people feel safe, valued, engaged and purposeful.	M, S
KidsMatter Australian Primary Schools Mental Health Initiative	***c) Kids Matter*** http://www.kidsmatter.edu.au/resources/ A range of resources for schools and families have been developed to support the implementation of KidsMatter Primary in schools. All schools, as well as the general public, are now able to access the KidsMatter Primary range of resources via this website.	EC, P
cyber(smart:)	***d) Cybersmart*** http://www.cybersmart.gov.au Cybersmart is a national cybersafety and cybersecurity education program. The program is specifically designed to meet the needs of its target audiences of children, young people, parents, teachers and library staff. Cybersmart aims to: Inform children, young people, parents, teachers and library staff about cybersafety issues, Educate audiences through information, resources and practical advice and empower children and young people to be safe online.	ALL, PARENT

beyondblue SENSEABILITY	***e) Beyond Blue*** http://www.beyondblue.org.au/ http://www.beyondblue.org.au/senseability SenseAbility is a strengths based resilience program designed for young Australians aged 12-18. It consists of a suite of modules developed to enhance and maintain emotional and psychological resilience in young secondary school aged Australians. Download all modules online or place an order.	M, S
Teacher Manual YEAR 8	***f) BeyondBlue: Year 8 Curriculum*** http://www.beyondblue.org.au/resources/schools-and-universities/secondary-schools-and-tertiary/secondary-schools-program/year-8 The theme of the Year 8 Program is "Getting to know yourself; getting along with yourself". The program covers the following topics: images of adolescence, self-concept, emotions and emotional regulation, the thinking-feeling link and coping with challenges and stress. The Year 8 Program is supported by a student workbook and teacher manual available to download.	M
Teacher Manual YEAR 9	***g) BeyondBlue: Year 9 Curriculum*** http://www.beyondblue.org.au/resources/schools-and-universities/secondary-schools-and-tertiary/secondary-schools-program/year-9 The theme of the Year 9 Program is "Getting to know others; getting along with others", and covers the following topics: forming and maintaining relationships, communicating in relationships, feelings and thoughts in relationships, social problem solving and how to seek help for self and others. The DVD shows vignettes with associated discussion to illustrate key teaching points around the themes of communication, problem solving and conflict resolution in context of relationships. The Year 9 Program is supported by the student workbook and teacher manual available to download.	M
Teacher Manual YEAR 10	***h) BeyondBlue: Year 10 Curriculum*** http://www.beyondblue.org.au/resources/schools-and-universities/secondary-schools-and-tertiary/secondary-schools-program/year-10 The theme of the Year 10 program is "Getting along in the world and planning for the future". The Year 10 program covers the following topics: understanding and using the 'six senses', the role of 'self-talk' in emotional health and wellbeing, problem solving and managing stress, time management and planning for the future. The DVD is a 10-episode program that uses the concept of a reality TV program. The Year 10 Program is supported by the student workbook and teacher manual available to download.	S

	i) ReachOut.com http://au.reachout.com/ ReachOut.com is a web-based service which aims to inspire young people to help themselves through tough times. The site has fact sheets and personal stories about a wide range of health and lifestyle issues.	ALL
	j) headspace www.headspace.org.au headspace is the National Youth Mental Health Foundation. GPs, psychologists, alcohol and drug workers help young people who are going through a tough time.	M, S
	k) Orygen Youth Health www.oyh.org.au Orygen Youth Health is a youth mental health organisation based in Melbourne. It has three main components: a specialised youth mental health clinical service; an internationally renowned research centre; and an integrated training and communications program. Orygen Youth Health aims to ensure that young people are able to access high-quality mental health, and drug and alcohol services provided in friendly, accessible environments.	S
	l) Reach Out Central www.reachoutcentral.com.au Designed specifically for young people, Reach Out Central is an interactive program that's designed to help you explore how your thinking, behaviour and feelings all interact with each other, and to help you improve and learn new life skills.	S