

**What are Best Practices when Addressing Students Who Have Substance Use
Issues?**

by

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What are Best Practices When Addressing Students Who Have Substance Use Issues?

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Abstract

Research shows that progressive discipline creates a positive school culture and supports students who are in violation of school drug and alcohol policies to reach their full potential by pairing inappropriate behaviour with appropriate consequences. There is little research available to show that zero tolerance policies meet either of these goals by applying the same punitive consequence to any student who violates the policy regardless of gravity of behavior, mitigating circumstances or situational context. When making school drug and alcohol policy dislocation theory and the transtheoretical model (TTM) should be considered. This paper includes a review of literature relating to best practices in relation to discipline and behavioral interventions for students who have substance use issues. It looks at different theoretical models such as TTM, dislocation theory, zero tolerance and progressive discipline. This capstone also documents the importance of considering TTM and dislocation theory when providing behavior interventions to students who use substances. It investigates what school districts are currently doing on local, national and international levels when dealing with students who are in violation of the school drug and alcohol policy and examines what the research says about the drug and alcohol policies school districts are currently using. Lastly, this paper uses the research to consider what are best practices in relation to discipline and behavioural interventions for students who have substance use issues.

Keywords: Progressive discipline, zero tolerance, drug and alcohol policy, Transtheoretical Model, dislocation theory

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Chapter One—The Problem

Introduction

As substance use is a common occurrence and affects all classes and groups of people, I believe that investigating best practice in relation to discipline and behavioural interventions for students who have substance use issues will help inform school districts, teachers, students and parents, and will help inform school districts when making drug and alcohol policy. Considering the research on the transtheoretical model (TTM), dislocation theory, zero tolerance policy, progressive discipline policy and school districts' current practice and policies on local, national and international levels, I will provide recommendations on best practices for addressing students with drug and alcohol issues.

Background to the Problem

Substance use, which is often co-occurring with psychological, social and medical problems, has become typical in society (Connors, DiClemente, Velasquez, & Donovan, 2013). All classes and types of people struggle with substance use and there are no commonalities among users. Substance use among youth is a national priority as youth are more likely to engage in risky behavior, experiment with drugs and alcohol and be affected by the harms associated with substance use, which negatively affects their overall well-being and future (Canadaian Centre on Substance Abuse, 2014). Health Canada reports that harm related to illicit drug use among Canadian youth is especially

alarming (“Canadian Alcohol and Drug Use Monitoring Survey,” 2011). Young people between the ages of 15-24 experience harm from substance use five times more than people 25 years and older with 5.8% of young people disclosing harm related to substance use whereas the adult population reports only 1.1%.

In the past few decades, Canada has seen the nuclear family, (a father, mother and children all living together) become the exception instead of the norm (Maté, 2008). There are significant numbers of single mothers, absentee fathers and divorce rates which has the potential of leaving the children disconnected from the important adults in their lives. These days, in cases where a nuclear family does exist, due to economic hardships, high cost of living and low wages, often both parents have to work full time. This also leaves the child more dependent on their peers where they should be relying on adults to nurture, care for and assist them in their social integration

Statement of the Problem

The World Health Organization stated the resulting effects of youth who use substances is one of societies major global public health issues (Evans-Whipp, Bond, Toumbourou, & Catalano, 2007). Youth and adolescents who experiment with substances are at greater risk of developing addiction and resulting health and wellbeing problems later in life (Fletcher, Bonnell, & Hargreaves, 2008).

In The United States, Monitoring the Future (MTF) study (2011) on Drug Use found that of grade 12’s surveyed, 75% of students had tried alcohol once or more; 54% had been drunk at least once or more; 25% had used an illegal drug other than cannabis at

least once; 44% had user cannabis once or more; 13% had tried opioids other than heroin at least once and 8.5% had tried tranquilizers(Falick, Nahhas, Linna, & Carson, 2012).

In Canada, during their lifetime with students in grades seven-nine more than 30% of students have drunk alcohol, 17% have tried cannabis and 10% have tried hallucinogenic drugs (Canadian Centre on Substance Abuse, 2007b). Of students aged 15-17, 40% have drunk alcohol, 19% had tried cannabis, 10% tried hallucinogens and of students aged 18-19 40% have got drunk, 50% have tried cannabis and 10% have tried hallucinogens. Among youth aged 12-19, over 25% binge drank 12 times during the last year. The average age of the first time a student tries an mind alerting substance is 14 or 15 nationally and illegal drug users between the ages of 15 and 24 make up 60% of the counties overall users (Canadian Centre on Substance Abuse, 2007a).

Administrators involved in a study on substance abuse policies were found to employ exclusionary policy even though most of the administrators involved did not agree with it (Stamm & Frick, 2009). The research and literature suggest that while zero tolerance does not benefit the student or the school culture and when zero tolerance policies are enacted, they cause problems for students and/or the school culture, progressive discipline is beneficial to both the students and the school culture (Milne, 2011). Despite how far the research and literature has come, institutions are still employing ineffective practices (Canadian Centre on Substance Abuse, 2007a).

Providing behavioral interventions not only offers the best chance to improve the life of

the youth but also helps to lower the negative effects substance abuse has on society as a whole (Canadian Centre on Substance Abuse, 2007b).

Purpose of the Study

The purpose of this study is to clarify what are best practices in addressing students who have substance use issues. This capstone project will investigate zero tolerance policy versus a progressive discipline approach, dislocation's role in substance use and strategies to reverse it, how TTM gives insight into the addicted student and how school districts are dealing with students with substance use issues on local, national and international scales. I will use the theories and research findings to clarify best practice in relation to discipline and behavioural interventions for students who have substance use issues so that school districts, teachers, students and parents will be better informed and equipped to support.

I hope that investigating best practice in relation to discipline and behavioural interventions for students who have substance use issues will help inform school districts when making drug and alcohol policy. This capstone will add to the literature on best practices/ policies as it relates to students with substance use issues. The literature review will provide evidence from research as to best practices in addressing students who have substance use issues. TTM, dislocation theory, zero tolerance policy versus progressive discipline policy and school districts current practice and policies on local, national and international levels are used to arrive at conclusions of what are best practices for addressing students who have substance use issues.

Research Question

The research question that this capstone will intend to address is: What are best practices in addressing students who have substance use issues? The areas this capstone will focus on in reviewing the literature on approaches school districts use to deal with substance use are: TTM; dislocation theory; zero tolerance policy; progressive discipline policy; and what school districts are currently doing on local, national and international stages.

Importance of the Study

Alexander believes that addiction has nothing to do with a student's moral value system or that the student has a disease (Alexander, 2008). Students who struggle with substance use are often feeling dislocated, and are in either the precontemplation stage or the contemplation stage. This study will highlight how school districts on a local, national and international level are addressing this group of students and what best practices are when dealing with discipline and behavioural interventions for students with substance use issues. It will add to the literature on best practices in discipline and behavioural interventions for students with substance use, and will better inform school districts, teachers, students and parents on how to support students' needs and to meet best practices. The significance of my study is that it can contribute understanding as to what best practices looks like, through a review of the relevant scholarly and professional literature; this understanding can help to shape attitudes, practices, and the development of policies that will effectively help students who use substances, their families and peers, as well as school and district staff and administrators.

Theory and research findings appear to indicate that to successfully assist youth engaged in substance use in being able to belong and succeed in school, elements critical to a successful program would include: removing displacement; meeting students where they are (in terms of TTM); adopting discipline and behavioural interventions which require school districts to consider circumstances surrounding the infraction and the student's prior behavior. The district can address the student while using various interventions to correct the behavior, instead of using punishment as a deterrent.

Summary

The aim of this capstone project is to clarify what are best practices in addressing and assisting students who have substance use issues. By investigating dislocation theory, TTM, zero tolerance policy, a progressive discipline approach and what school districts are currently doing on local, national and international levels, I hope to clarify what are best practices in addressing students who have substance use issues. This capstone paper will add to the literature and hopefully be used by school districts to identify best practices when making drug and alcohol policy.

Outline for the Remainder of the Paper

In chapter two, I will be reviewing relevant literature regarding zero tolerance policy versus a progressive discipline approach, dislocation's role in substance use and strategies to reverse it and how TTM gives insight into the addicted student. Next, I will review how school districts are addressing substance use issues on local, national and international scales. I will also look at the role of school districts in relation to discipline

and behavioural interventions for students with substance use issues. In chapter three, I will provide recommendations according to the research for best practice in addressing students who have substance use issues, and include a proposed study.

Chapter Two—Review of Literature

Introduction to the Chapter

This literature review will look at theoretical models, research findings and how school districts are addressing substance use on local, national and international scales. TTM, dislocation theory, zero tolerance policy and progressive discipline will be investigated in relation to best practices when addressing students who have substance use issues to inform school districts on strategies to reduce substance use by addressing students who have substance use issues.

Substance Use: Theoretical Models and Research Findings

Transtheoretical theory.

Since traditional interventions assume that the individual is ready to make a change immediately, very few people who are having issues with substance use participate (Velicer, Prochaska, Fava, Norman, & Redding, 1998). Conversely, the high participation rates have been achieved with TTM, as it assumes that individuals are in different stages, as far as their readiness to change, and that interventions should be created for all individuals and meet them at the stage they are at. This model centers on the person's decision making.

TTM sees change as a process that involves five distinct stages (Velicer et al., 1998). These stages of change are described as precontemplation, contemplation,

preparation, action and maintenance (Connors et al., 2013; Prochaska, DiClemente, & Norcross, 1992).

People in *precontemplation* may not yet realize that they have a problem with substance use, may recognize that it is a problem but are unwilling to try to change their behavior or may be apprehensive to try to change their behavior as a result of multiple failed attempts (Connors et al., 2013; Prochaska et al., 1992). These individuals are not open with important people in their lives and are the most resistant to change.

People in *contemplation* have begun to think about changing their behavior. They may have started to weigh the pros and the cons associated with substance use and/or are starting to recognize the consequences of their actions. They are more concerned about their substance use than those in precontemplation, are more likely to seek out information about their problem and are more likely to try to find a solution (Connors et al., 2013; Prochaska et al., 1992). Individuals in this stage are open to learning about consequences their actions are having and ways to change their behavior.

Individuals in *preparation* are ready to make a change in their lives and some have started to think about ways they can accomplish this. This may include trying to alter their behavior and/or increased self-regulation. It is key for individuals in this stage to make and commit to a plan for change (Connors et al., 2013; Prochaska et al., 1992). When an individual is in this stage, they should be learning healthy behaviors to replace unhealthy behaviors and changing negative environments to positive environments. This could include playing with a sports team after school instead of spending time alone or

with peers who are engaged in negative behaviors in order to reduce the amount of mind altering substances.

People who are in the *action* stage, have made behavioral changes and have a recovery plan they are following. Individuals in this stage need to practice changing their behavior as outlined in their plan and they need to review their plan often to ensure it is working for them. People in this stage also need to be aware of any psychological issues they have and how these issues can negatively affect their recovery (Connors et al., 2013). These skills are crucial to prevent relapse and send the person back to the contemplation stage. Individuals in this stage require support. Prochaska and DiClemente (1992) say that this stage lasts for approximately six months.

The fifth stage of change is the *maintenance* stage. During this stage individuals continue to progress in making the changes that they have committed to and continue to follow their plan. At this stage, following their plan is easier and they have begun to normalize their new behavior. It is important for individuals in this stage to assess what might be triggers for relapses and develop alternate responses (Prochaska et al., 1992). It may take several years before the individual is secure in their new behaviors (Connors et al., 2013).

It is important to note that according to TTM, processes of change that could work for a student who is at one stage will not work for students in another stage. For example, learning healthy behaviors to replace negative behaviors and replacing things that remind the individual of their negative behaviors with things that encourage healthy

behaviors is useful for those in the action and maintenance stages but will not help someone who is in precontemplation. Someone in precontemplation would benefit from gaining awareness into how their substance use is negatively impacting their lives and from the person intervening to try an illicit an emotional response (Velicer et al., 1998). Students who are caught using controlled substances at school are likely to be in the precontemplation stage. This is a perfect opportunity for a teachable moment to help the student move from the precontemplation stage to the contemplation stage or from the contemplation stage to the preparation stage. At this stage, students need ongoing support and students' who do not receive support will be unlikely to move from the precontemplation stage to the preparation stage. Students who attend a zero tolerance school will be unlikely to seek help for their problem while in precontemplation as they will be concerned that bringing attention to the issue may result in being transferred to another school if they are unable to remain sober immediately (Connors et al., 2013). Students need to feel comfortable to ask for help and confident their schools are capable and willing to help to encourage them.

An adolescent who is caught in violation of a school's drug or alcohol policy will most likely be in the precontemplation or contemplation stage (Connors et al., 2013). For this reason I will focus on these two stages of the five stages of change model in relation to which school policies are more likely to encourage the student to change their behavior. Individuals in the precontemplation stage do not yet acknowledge they have a problem and are less likely to change their behavior if they are transferred to another school. In this scenario the individual is more likely to resume the same behavior at their

new school and seek to integrate with students who are involved in the same behavior (Connors et al., 2013). Prochaska et al. (1984) believe that these substance users are not aware how their substance use affects them or others and many are not capable of processing the indicators that their alcohol or drug use is a problem. Once students recognize that they have a problem but have not done anything to change their behavior, they are in the contemplation stage. Students in the contemplation stage have seriously thought about changing their behavior but have not yet made any actions to achieve this. While students who are in the precontemplation and contemplation stage are not likely to change their behavior if they simply transferred to a different school, this is a perfect opportunity to provide supports the student requires to move to the action stage (Connors et al., 2013). Students in the contemplation stage have given serious thought to making positive life changes but have not yet taken any action to achieve this. The consequences of the infraction could be a planned action stage by the administration so whether resistant or not, the student would most likely choose to participate, rather than have to leave their peer group, teachers and any other supports that are already in place at their home school. Since progressive discipline provides the principal the opportunity to choose the consequence as well as the behavioural intervention and the student remains at their home school, the administration has the ability to do exactly that.

The TTM has limitations. To date there has not been much experimental evidence to prove that the model helps people change health related behaviors (Wikipedia, 2016). Critics of the model assert that the boundaries between one stage and the next are arbitrary lines as opposed to genuine stages which can be tested and therefore the stages

have little to no meaning (Bridle et al., 2005). They also assert that many participants who answer that they have plans on quitting on the multiple choice questions used to assess the individual do not have actual plans to quit and have made no preparations to start despite responding that they have (West, 2005). Scholars have contended that the constructs of the stages do not go together and contrary to Prochaska and diClemente's claims, the critics allege the stages do not actually assess whether or not a person is ready or prepared to change. Another criticism of the model is that the stages do not consider that the unhealthy habits in addicted people have become entrenched and is a behavior that the person processes outside conscious awareness and therefore do not follow decision-making rules such as cost/benefit analysis. Bridle et al. (2005) conducted a systematic review to assess the effectiveness of TTM which found little evidence that TTM improves health related behavior change.

In their study of TTM Applications to Physical activity and Exercise, Marshall and Biddle found that their results support that TTM works as "core constructs differ across the stages and most changes are in the direction predicted by the theory" (Marshall & Biddle, 2001) In a critique of Adams and White (2004) who contended that TTM is ineffective, the authors found that while the stage theory seems to have problems, it has shown promising results and warrants further research to improve upon the existing stages (Brug et al., 2005). They concluded that scholars cannot agree on the best way to assign individuals to a particular stage but assert TTM is "more likely to induce changes in motivation as well as short-term behavior changes" (Brug et al., 2005, p.256) than not using TTM. TTM has also been proven to be more successful than other strategies for

getting people to quit smoking. It was found that “feedback on stage-related variables has the potential to outperform the best self-help program previously available” (Prochaska, DiClemente, Velicer, & Rossi, 1993, pp. 403–404). The NSW DOE believes that the stages of change are important to consider when deciding appropriate consequences to an infraction (New South Wales Department of Education and Training, 2010). Health Canada also subscribes to Prochaska and DiClemente’s model and believes the stages of change should be used to help choose the appropriate behavioural intervention (Canada, 2013)

Despite the many limitations brought forward by critics of TTM, I believe TTM to be valuable in assessing and providing the correct interventions for the correct people. While the model has limitations, it has been shown effective and has promise in becoming even better with further research. Ultimately through studying the literature, the effectiveness of TTM, it’s limitations, and it’s use in New South Wales School District, I believe that students who are assessed using TTM will benefit over students who are not assessed using TTM (Prochaska et al., 1984; Velicer et al., 1998).

Dislocation theory.

The dislocation theory proposes psychosocial integration is a necessity for all humans and when people are not psychosocially integrated they are dislocated. Dislocation happens when a person does not achieve psychosocial integration (Alexander, 2014a). This does not necessarily mean that the person has been dislocated geographically. Moreover it suggests that the person has become psychologically and

socially separated from their society. While this can happen with people who have been displaced geographically, it can also happen to someone who has never left home (Alexander, 2008).

Psychosocial integration asserts that there is a very strong relationship between individual identity and how well an individual integrates into their society, whether that be their family, community, school, club, team or other organization). This interdependence usually gets stronger throughout a person's life. Psychosocial integration unites a person's need to belong to a social group with their need to have their own individual identity. Karl Polanyi called this loss of Psychosocial integration "dislocation" (Alexander, 2014a; Polanyi, 2001).

Bruce Alexander (2008), a professor of Psychology at Simon Fraser University, and recipient of the British Medical Association's high commendation for his 2009 book *The Globalization of Addiction: A Study in Poverty of the Spirit* (Alexander, 2010) says that psychosocial integration requires that a person develops the ability to be comfortable with self and society and have the two intertwined. The theory asserts that a person requires belonging to a group of people and to their society, but they also have a need for independence. Alexander also calls lack of psychosocial integration "dislocation" and believes it to be not only harmful to the individual but to the society as a whole.

Schools are one of the institutions that provide the bases for psychosocial integration. While people can endure dislocation for a while, having to handle it for an extended period of time can be unbearable for humans (Alexander, 2014b). This is why

Alexander argues solitary confinement and ostracism has been effective means of torture for thousands of years, and are still effective means of punishing and torturing people today (Alexander, 2008) Maté (in Smith, 2008) believes that so many people have an inner emptiness caused by the traditional relationships created within families and communities disappearing.

Addiction is a way of adapting to dislocation (Alexander, 2008) When individuals continually fall short of genuine psychosocial integration, they will search for a substitute, and in most cases any substitute for psychosocial integration will fall short (Alexander, 2011b). Maté also believes “the addiction process takes hold in people who have suffered dislocation and whose place in the normal human communal context has been disrupted” (Maté, 2008, p. 265). Addiction is not a primary medical condition as previously thought, it has more to do with the social sciences than the biological sciences (Alexander, 2010; Levine, 2009). Alexander explains “dislocated people, rich and poor alike, compensate for their unbearable lack of culture and identity by desperately clinging to the best substitutes they can find” (Alexander, 2010, p.1) No matter the drug the individual ingests, “drug addicts who can be carefully studied turn out to have been severely dislocated before their addiction ensued” (Alexander, 2011, p.18). While there may be other factors involved, addiction is usually a response to being dislocated (Levine, 2009). Addictions can last from days to a life time and as much as the addict attempts to feel better, addition will never be an adequate substitute for psychosocial interaction (Alexander, 2011). In an unconscious attempt to replace psychosocial integration with addiction, the addicted person will further their dislocation by adopting

the role of the addict, damage their body, mind and become estranged from the people who love them most (Alexander, 2008, 2014a). Individuals who are in this state of dislocation will not be deterred by punitive consequences like expulsion but may respond to attempts to reverse dislocation (Alexander, 2014b). Alexander (2010) asserts that until society deals with remediating its citizen's dislocation, addiction will remain a problem for society. Health Canada reports that "[t]heorists assert that early intervention is important for decreasing the psychosocial consequences that accompany problem substance use and disrupt the educational, occupational and social development of youth" (Health Canada, 2013, p. 2). Ericson refers to the necessity of psychosocial integration for adolescents as urgent. He called having psychosocial integration 'ego identity' (Alexander, 2008, p.92). Erikson explains

[i]n the social jungle of human existence, there is no feeling of being alive without a sense of ego identity. To understand this would be to understand the trouble of adolescents better, especially the trouble of all those who cannot just be 'nice' boys and girls but are desperately seeking for a satisfactory sense of belonging. (Erikson, 1959, p.92)

Erikson asserts that adolescents between the ages of 12-18, are in the middle of a transformation both physically and spiritually where the adolescents learn the roles they will assume as adults (McLeod, 2008). If the adolescent is not able to achieve a reintegrated sense of self, it may lead to role confusion and the individual will begin to experiment with different lifestyles. This can also happen when parents pressure

adolescents to assuming an identity they do not identify with. Labeling adolescents drug users because of a poor decision made when they are in the process of finding their identity, may cause the student to assume the role projected on them. This is a consequence of zero tolerance policy. Alexander asserts:

I believe that the qualities of a drug, no matter how appealing they are, are never the primary cause of addiction. In my way of thinking, the primary cause always involves the separation of an individual from the sources of meaning and identity that are normally found in human society. (Alexander, 2011a, p.1)

Health Canada's research supports this theory. They believe that youth should be encouraged to reinforce the positive relationships and connections in their lives, integrate into the culture of the school, join a non-using peer group and learn to make healthier life choices (Health Canada, 2013). Dislocated students need "community, belonging, usefulness and positive group identities" and need to be socially integrated (Levine, 2009, p. 4). Progressive discipline aims to engage the student, parents and provide the right intervention supports for the right person on a case by case basis, whereas a zero-tolerance policy aims to exclude the student from any psychosocial integration the student has by breaking all ties to teachers and peer groups. Health Canada warns that a lack of positive community and social connections will most likely result in increased substance use by the youth (Alexander, 2014b; Health Canada, 2013). When a student does not have psychosocial integration they should be encouraged to join teams, clubs and volunteer. These are all positive avenues for the student to achieve psychosocial

integration. This will not only benefit the school, but the community as a whole (Alexander, 2008)

Zero tolerance.

Zero Tolerance is a philosophy or policy that applies the same penalty to everyone who is in infraction of the policy, regardless of the degree of the infraction, their mitigating circumstance, the environmental factors or the context of the infraction. In the school context, the penalty for zero tolerance is usually suspension, expulsion or a transfer to a different school (American Psychological Association Zero Tolerance Task Force, 2008).

Zero tolerance policies, in effect, dislocate the student even further as they separate the students from their peer group and actually force the students to also be dislocated geographically, as they will be forced to attend a different school, and be separated from their teachers, peers, teams and clubs. This policy does not address any of the student's issues and in fact makes the student feel even more isolated and alone. Alexander (2008) says "[a]ddiction is neither a disease nor a moral failure, but a narrowly focused lifestyle that functions as a meager substitute for people who desperately lack psychosocial integration" (p. 68). Erikson also asserts that youth who go for an extended period of time without psychosocial integration are at greater risk of developing what he calls "negative identity" which is in essence addiction (Alexander, 2008) Negative identity happens when an individual tries to replace psychosocial integration with something else. An individual can turn to mind altering substances to try and fill the void

missing by being dislocated. Unfortunately this route will never be substantial enough to fill the void and the individual may get stuck in a cycle of addiction.

Zero tolerance policies assume that if students who break the rules are removed, other students will be less likely to participate in this behavior, thus creating a better school culture. This policy was born out of President Ronald Reagan's 'war on drugs' initiatives in the 1980s, and his zero tolerance policy under federal drug and weapons regulations. By the early 1990s, U.S. customs was phasing out its use of the policy and during this same time the policy was gaining momentum in schools.(Russ Skiba & Peterson, 1999). In 1994 the U.S. Department of Education mandated that all public schools in the United States have a zero tolerance policy.

The American Psychological Association, in an effort to "advance health, education and human welfare," organized a task force responsible for determining if zero tolerance has a place in schools and if it is in fact an effective policy (American Psychological Association Zero Tolerance Task Force, 2008, p.853). Zero Tolerance "mandates the application of predetermined consequences, most often severe and punitive in nature, that are intended to be applied regardless of the gravity of behavior, mitigating circumstances, or situational context" (American Psychological Association Zero Tolerance Task Force, 2008, p.852.)

Advocates of zero tolerance policies believe that as a result of zero tolerance, there will be an improved school climate (American Psychological Association Zero Tolerance Task Force, 2008). However, Thomas Ryan and Brian Goodram found, after

doing a review of the literature, there is little evidence to support that exclusionary discipline has any positive effect on the offending student or on the overall school culture (American Psychological Association Zero Tolerance Task Force, 2008; Ryan & Goodram, 2013). The task force reported that to the contrary of what proponents of Zero Tolerance policies claim, schools that use exclusionary tactics like suspension and expulsion as the first resort have poorer overall school culture than those who use supportive policies (American Psychological Association Zero Tolerance Task Force, 2008.)

Critics of Zero Tolerance believe that supporting students who are struggling both academically and socially with specific interventions, as well as showing students that their teachers and administration care about them, allows all parties to focus on correcting inappropriate behavior and helping the students learn from their mistakes, making this a much better alternative to zero tolerance (Winton, 2012). Situations involving students violating the drug and alcohol policy are rarely black and white and often require a judgment call (Fries & DeMitchell, 2007). The task force also found that a zero tolerance policy towards adolescents is unfair, as adolescents' brains are less developed than previously thought, and this is causing them to experience "Psychosocial Immaturity" during the adolescent years (American Psychological Association Zero Tolerance Task Force, 2008, p. 855). The Task Force is concerned that school districts are still employing zero tolerance even though most of the research on exclusionary practices does not support what the zero tolerance philosophy claims (American Psychological Association Zero Tolerance Task Force, 2008). School suspension has consistently been shown to be

a good predictor of a student's likelihood of dropping out (Russ Skiba & Peterson, 1999). This would suggest that if a student was to be supported, instead of suspended, there is a better chance they will graduate. The task force (2008) recommends that instead of using a blanketed zero tolerance policy, administrators look at the specifics surrounding the incident, look at the student's behavior history and see where the school can support the student. It is important that at risk students are encouraged to be involved in classes, as well as in extracurricular activities, as the psychological benefits from these connections will improve the student's sense of belonging and reduce displacement, which in turn will make youth less prone to abusing substances as a replacement for social connection (Winton, 2012). Integrating at-risk students into the school community and culture helps students who are dislocated. As Alexander (2008) explains "[a]ddictions often serve other functions simultaneously, but their *raison d'être* is to substitute for psychosocial integration" (p. 62). Schools' discipline codes should be building safe learning environments for their students instead of creating situations that will put students at even more risk (Fergus, 2015).

After extensively studying the research around zero-tolerance policy in schools and its efficacy in dealing with substance use infractions, I believe zero tolerance to be ineffective and harmful to the offending students as well as the overall school culture. Health Canada agrees, as they report that policies that support the student making positive relationships and integrating into the school culture and community will cultivate the youth's sense of belonging (Health Canada, 2013). The APA Zero Tolerance task force concluded that the evidence and literature that supports that zero tolerance should

be replaced with an inclusionary policy is clear (American Psychological Association Zero Tolerance Task Force, 2008). Even a study by the National Highway Transportation Safety Authority (2001) concluded that Canada's tough and punitive drinking and driving laws were not the reason for reducing teenagers drinking and driving (Carpenter, 2006). Giroux (2003) calls the need for reform "urgent because the fate of an entire generation of young people is at stake" (p. 563). Health Canada (2013) also agrees exclusionary policies are harmful to youth as they break all healthy relationships and supports and then label the student a drug user. Brown and Clarey (2012) explain that "a pattern of youthful cognitive dissonance resulting from the combined school delivery of traditional drug education and zero tolerance policies, which in their resolution negatively impact the conditions of educational achievement and is called "disintegrative shaming," a practice that needs to stop (p. 230). School culture has been negatively affected by "disintegrative shaming" caused by zero tolerance policies as students come to believe that their school does not care about them (Brown & Clarey, 2012). Zero tolerance also has a history of being an easy way for school districts to discard their communities vulnerable youth, instead of creating a safe and supportive environment for them (Giroux, 2003). Zero tolerance policies often push already vulnerable adolescents "on a negative psychological, let alone, life trajectory" (Brown & Clarey, 2012, p. 248). This may not be the intent; however, by not leaving administrators any leeway to use their professional judgment, it is the reality (Fergus, 2015). Skiba (1999) reports that without ensuring supports for the students in violation of the zero tolerance policy, the school district "may

simply be dumping problem students out on the streets” which leads to increased drug use and violence in the community (p. 7).

A study done by Mark Stamm and William Frick (2009) to determine how, despite the overwhelming evidence that says zero tolerance policies do not work, school districts and school boards still employ it. The researchers found that even though most administrators and board members did not support exclusionary practices, most rarely looked for an alternative that is supported by sound research and literature. Dean Johnson, the veteran principal from this study explained how he believes zero tolerance served the students:

Zero tolerance means it doesn't matter who you are, or who you know, it's exactly the same penalty with the same consequence for the same item and zero means that there are no exceptions. And that's the hard part – there are no exceptions. It means if you do it no matter how ... to what degree you do it, if you did the penalty applies. (Stamm & Frick, 2009)

Russell Skiba (2014) calls this the "broken window" theory. The theory is that schools and communities must react to even small disturbances with harsh penalties to send a message the school will not tolerate this kind of behavior (Russell Skiba, 2014, p.28). Skiba confirms that there are no data to support the idea that exclusionary discipline practice helps either the violating student or the school community or culture. Replacing zero tolerance policies with alternative intervening and supportive policies are necessary since drug use, while serious, in adolescence is usually normal and

experimental (Brown & Clarey, 2012). The danger in labeling a student a drug user after being caught experimentally using drugs is that the student could accept that identity and end up traveling down a bad life trajectory. The student may end up taking a more positive path if their school supported them at this juncture instead of shaming them (Brown & Clarey, 2012). Students who are suspended are at greater risk of developing antisocial attitudes while those that are supported are more likely to connect with their school in a positive manner. Unfortunately with zero tolerance policy, minor infractions being punished severely is not the exception to the rule but the norm (Skibba & Knesting, 2001)

Gregory and Cornell (2009) believe that instead of using a model where structure and support are opposites, and administrators are either tough or soft on youth, the learning environments should be structured and supportive so students feel safe and respected. Research has found that schools that are positive and use positive reinforcements to teach students to learn from their mistakes have much lower levels of disciplinary infractions (Winton, 2012). Research shows that adolescents are more likely to take greater risks and have a limited ability to reason about the consequences of their behavior (American Psychological Association Zero Tolerance Task Force, 2008), therefore a zero tolerance policy is unfair to students in this age group. The task force suggests that zero tolerance policy exacerbates youth mental health problems by alienating them, rejecting them and breaking the healthy bonds that students have (American Psychological Association Zero Tolerance Task Force, 2008). This problem is compounded as Health Canada confirms that students who have substance use problems

are already at a very high risk of having or developing mental illness (Health Canada, 2013). The Canadian Centre on Substance Abuse (2014) says that many youth who use substances do so because of untreated childhood trauma inflicted on them by adults, including sexual abuse, physical abuse and neglect. Health Canada confirms that substance use is frequently co-occurring with post-traumatic stress disorder (Health Canada, 2013). Zero tolerance does not take into consideration any of these ‘mitigating circumstances’ (Canadian Alcohol and Drug Use Monitoring Survey, 2011, p. 26).

The general consensus for those who support zero tolerance policies is that zero tolerance removes the disruptive students to make the school climate safer for others and zero tolerance maintains consistency (American Psychological Association Zero Tolerance Task Force, 2008). The evidence and research shows that once a student has been suspended or expelled without remediation, they are at high risk to reoffend (American Psychological Association Zero Tolerance Task Force, 2008). Once a student has been suspended, they are at greater risk of being suspended again, expelled or dropping out (Skibba & Knesting, 2001). Even though this student will no longer be at their home school, they will be a student at a different Chilliwack Secondary School, for example, until they get transferred to another school or drop out of school. The finding of the task force is that “zero tolerance has not been shown to improve school climate or school safety” (American Psychological Association Zero Tolerance Task Force, 2008, p.860) Fries & DeMitchell (2007) point out that “[c]onsistency is not a substitute for rationality” (p. 227). This one-size fits all solution leaves the administration free to punish the student without considering why the student violated the policy and what can

be done to intervene and correct the behavior. This simple solution to a complicated problem needs to be replaced with a “graduated system of discipline, with consequences geared to the seriousness of the infraction” (Skibba & Knesting, 2001). After reviewing evidence on zero tolerance, Skiba believes that zero tolerance schools need to change to a preventative model to insure safety and to stop the practice of discarding of our most vulnerable youth. (Russell Skiba, 2014). The US Department of Education, historically once the biggest supporter of zero tolerance, now says

The widespread overuse of suspensions and expulsions has tremendous costs. Students who are suspended or expelled from school may be unsupervised during daytime hours and cannot benefit from great teaching, positive peer interactions, and adult mentorship offered in class and in school. Suspending students also often fails to help them develop the skills and strategies they need to improve their behavior and avoid future problems. Suspended students are less likely to graduate on time and more likely to be suspended again, repeat a grade, drop out of school, and become involved in the juvenile justice system (U.S. Department of Education, 2014, p.8).

When carried out in connection with zero tolerance policies, such practices can erode trust between students and school staff, and undermine efforts to create the positive school climates needed to engage students in a well-rounded and rigorous curriculum. In fact, research indicates an association between higher suspension rates and lower school wide academic achievement and standardized test scores. Schools and taxpayers also bear

the steep direct and indirect costs from the associated grade retention and elevated school dropout rates (U.S. Department of Education, 2014. p.ii)

Zero tolerance policies have turned our schools into law enforcement agencies, but have not returned any positive results to the violating student or the school culture as a whole (Russ Skiba & Peterson, 1999). Skibba asserts “[b]ecause there is little or no evidence of the efficacy of zero tolerance, schools and school districts need to export preventative alternatives” (Skibba & Knesting, 2001, p.1). I believe the research suggests the better alternative to zero tolerance is progressive discipline.

Progressive discipline.

Progressive discipline is an approach that encompasses the whole school in a range of programs, interventions and supports to educate all students and help correct the behavior of students who violate the policy in a non-punitive manner. Progressive discipline looks to build healthy relationships between staff and students. Disciplinary action is not taken to deter the student from infraction beforehand or to punish the student for the infraction to send a message to the student body. Instead it is an approach that uses behavior interventions to help the student learn from their mistakes and to support the student as they make these corrections to their behavior and learn from their mistakes (Ontario Ministry of Education, 2012).

The research suggests that progressive discipline is beneficial to the offending student as well as the overall school culture as it combines prevention and intervention

strategies with disciplinary measures within a framework that is both corrective and supportive as opposed to simply punitive. School policy should focus on building a healthy school environment instead of simply focusing on individual behavior (University of Victoria Centre for Addictions Research of BC, 2014). Health Canada agrees that inclusive school policies that encourage and provide the resources for the youth to make positive connection with peers and adults and to learn from their mistakes will result in more at risk youth feeling a sense of belonging (Health Canada, 2013). While zero tolerance does not afford adolescents the opportunity to learn from their behaviour, “[p]rogressive discipline focuses on helping students learn to identify and replace negative behaviors with positive behaviours, and therefore minimize and eventually prevent occurrences of problem behavior” (Milne, 2011, p.1) .

In 2008, Ontario replaced its Safe Schools Act (zero tolerance) with progressive discipline as the official approach to student discipline in Ontario Schools. In a resource guide for school and system leaders to support Progressive Discipline in Ontario schools, The Minister of Education, Liz Sandals, explains the research demonstrates that students’ academic success is directly related to their school environment. Students learn better when they feel safe and respected and zero tolerance does not foster that, so Ontario changed to an inclusion model: progressive discipline (The Ontario Ministry of Education, 2013). The University of Victoria found that when students create strong connections with their home school, and have positive relationships with teachers and other staff and peers, they are less likely to participate in risky behaviors and substance use issues (University of Victoria Centre for Addictions Research of BC, 2014) Minister

Sandals said this was not possible with the previous zero tolerance policies in Ontario Schools.. Ontario is committed to engaging parents, helping students learn and offering more supports for students to make schools inclusive and safer (Ontario Ministry of Education, 2009). Progressive discipline offers Ontario students and parents access to social workers, child and youth workers, psychologists, speech and language pathologists, special education teachers, behavioural specialists and other special programs (Milne, 2011).

Since moving from a zero tolerance policy to a progressive discipline policy, the state of Illinois has seen a dramatic drop in suspensions and expulsions because students are supported and respected (Felesena, 2013). Skiba (2001) asserts that “increased expulsion within a school or school district may well be indicative of a negative trend in school safety” (p.32). Since 2008, the Ontario government has instructed their school boards that “disciplinary measures should be applied within a framework that shifts the focus from one that is solely punitive to one that is both corrective and supportive” (Ontario Ministry of Education, 2012). This requires the school administration to take into consideration the particular student circumstances, the nature and severity of the behavior and the impact on the school climate, including the impact on student and other individuals in the school community (Ontario Ministry of Education, 2012).

The Research-to-Practice Collaborative, a group of top researchers, educators, advocates and policy analysts, met for 3 years to discuss and research the status of discipline disparities (Russell Skiba & Losen, 2015). The Collaborative recommended

building supportive relationships, ensuring academic rigor, creating bias free classrooms, behavior modification interventions and a respectful school environment. They do not believe it possible to have a respectful school environment with a zero tolerance policy. Skiba and Losen (2015) report that after zero tolerance was replaced with a restorative approach in Denver, the school district saw a 47% reduction of suspensions.

Milne and Aruini (2015), in their paper asking how greater discretion, flexibility and parent involvement affect the application of school policy, found that the one area where progressive discipline lacks is that parents of higher socio-economic status students are capable of negotiating less serious consequences for their children (Milne & Aurini, 2015). This is not so much a problem with the progressive discipline policy as it is a problem with the school administration's inability to administer progressive discipline fairly. While Milne found that children whose parents are more educated will be able to negotiate better outcomes for their children, the school administration has the latitude in decision making to ensure this does not happen (Milne, 2011). School administration should be properly trained and educated to not be intimidated by parents of high socio-economic students and to apply the policy fairly. In addition, the policy is not one that is meant to be punitive, it is meant to teach and support the student. While the authors of this paper found that the policy is at times being used unfairly by school administration, they did note that an added benefit of progressive discipline is that lower socio-economic-status students are taught behaviours at school that are not being taught at home (Milne & Aurini, 2015). In effect students learn and practice reasoning, negotiation and problem solving skills (Milne & Aurini, 2015).

Of the school districts examined in this capstone project, Ontario and New York City employ progressive discipline in their schools. While Vancouver and NSW School District do not call their support approaches progressive discipline, they are born of the same philosophy. I agree with the Ontario Ministry of Education that when it comes to disciplining and supporting students with infractions to the drug and alcohol policy, progressive discipline is best practice.

What are School Districts' Current Practices?

Chilliwack school district # 33.

The Chilliwack School District has two sets of procedures for infractions to the drug and alcohol policy. One set of procedures is for infractions at the elementary and middle school level (Grade 7-9) and one set of procedures is for infractions at the secondary level (Grades 10-12) (Board of Education School District #33 (Chilliwack), 2010).

For first offence situations at the Elementary and Middle School Level “the parent is informed of the infraction” and “the student is suspended from attending classes and provided the resources to continue his/her learning” (Board of Education School District #33 (Chilliwack), 2010). The principal may refer the student to the District Behavior Committee (DBC), which will consist of the Superintendent or designate, the parent/guardian, the student, an administrator from the school and could include a district counsellor. The student cannot be suspended for more than five days without being referred to the DBC. The student’s situation, overall academic performance, behavior,

attendance, and the student's home situation are taken into account during a review of the student. The team provides recommendations, which could consist of additional counselling support, a school plan for student success, support for parents/guardians and a follow up plan.

The superintendent or designate will decide at this point if the student will return to his/her home school after the suspension of it they will be sent to another Chilliwack school for the remainder of the semester at which time the principal of the home school could accept the student back at the student's home school or require that the student remains at their new school for an undetermined amount of time. The parents may also be given information about a referral to intervention and treatment services like Chilliwack Addiction Prevention Services. Counselling may be suggested or mandated by the school. In cases of mandate, the parents make the referral and the school monitors the follow-up. The student may also be requested to participate in a restorative approach. Restorative practices encourage an inclusive approach and teach the student how to be involved in the community (University of Victoria Centre for Addictions Research of BC, 2014). Any drug or alcohol sample confiscated may be provided to the RCMP along with names of the students involved. If the offence is a repeat offence the student's placement will be decided by a mandatory DBC review. The policy states that in incidences of additional offences, "the primary considerations will be support for the student and the student's educational program" (Board of Education School District #33 (Chilliwack), 2010).

The Chilliwack School District has a zero tolerance drug and alcohol policy at the Secondary Level (Grades 10-12). The Chilliwack Board of Education administration regulation 500.1, Drugs and Alcohol, states that on a first offence of the drug and alcohol policy the parent is told about the violation and of the probable consequences (Board of Education School District #33 (Chilliwack), 2010) and the individual will be suspended from school and provided the resources to continue learning (Board of Education School District #33 (Chilliwack), 2010) on their own. Then “based on a review and in all probability, the student/parent/guardian will be informed that the student will receive an in-district transfer to another educational site within the district (another secondary school, Fraser Valley Distance Education School or the Education Centre)” (Board of Education School District #33 (Chilliwack), 2010, p. 3).

The policy does state that the administrators have the authority to stop the transfer if they believe there are extenuating circumstances, such as a lack of student support services, specialized courses or programs at the student’s new school or social/emotional issues. The policy itself suggests that this is rare as the policy says that “in all probability” (Board of Education School District #33 (Chilliwack), 2010, p.3) the student will be transferred to another Chilliwack school. The policy states that the student will be eligible to return to the home school after completing at least one semester of study and at the principals’ discretion. When appropriate, secondary students will be given information, and a referral to intervention and treatment services. Counselling can be suggested or mandated and situations where it is mandated the school is required to monitor and follow up. The school may also turn over any drug or alcohol substances to

the RCMP. The policy says a restorative approach may be used with the student, however this will not affect the student's transfer to a new Chilliwack School. In addition "an administrator will contact an administrator of the receiving school to inform him/her of the incident" (Board of Education School District #33 (Chilliwack), 2010, p. 4). In my experience as a teacher, at Sardis Secondary and Chilliwack Secondary, when a student changes schools because of an infraction of Regulation 500.1, students in the school know why the student is transferred through rumor and gossip. This does not give the student a new start or any positive support.

If a student in grades 10-12 in Chilliwack is involved in an additional offence, the regulation states that "a decision about the student's educational future will be made at the District Board Committee review by the superintendent or designate" (Board of Education School District #33 (Chilliwack), 2010, p.5). There is not a process for the school district to work cooperatively with other government agencies; however, in the introduction to the Drugs and Alcohol administrative regulation the Board of Education states "the use and abuse of Drugs and Alcohol by students is an issue that involves parents, educators, students and the community" (Board of Education School District #33 (Chilliwack), 2010, p.1) and then says that "[t]he Chilliwack School District takes responsibility to provide [...] interventions that support students" (Board of Education School District #33 (Chilliwack), 2010, p. 1).

The Chilliwack School District's Drugs and Alcohol Policy 500, was under scrutiny across British Columbia after news broadcasts aired a story about 12 students at

Sardis Secondary who were suspended for a semester after admitting to smoking cannabis on an overnight soccer trip to Surrey, B.C. (Bellrichard, 2013). On Monday September 30, 2013, the twelve Sardis Secondary students were called to the office one by one to be interviewed regarding rumors of drug use during the overnight trip, which happened a month previous. Eleven of the students admitted to smoking cannabis and all twelve were suspended from Sardis Secondary for one semester. The twelfth student who did not admit to smoking cannabis was suspended for being in the company of students who were smoking cannabis. On appeal, the student who was suspended for being in the presence of cannabis had his suspension overturned and one other student had the suspension overturned. The other 10 students completed their semester at other Chilliwack Secondary Schools (Bellrichard, 2013).

Evelyn Novak, superintendent of the Chilliwack School District told the CBC “when we talk review, we’re not necessarily going to change our regulation or policy. But we are trying to look at making sure we do reflect our community and that we do listen to parents” (Bellrichard, 2013, 11). Derrick Middleton, one of the parents who had the suspension of his child overturned, feels the punishment doesn’t benefit students. Mr. Middleton told the CBC “[i]t’s pointless to uproot students in their junior and senior years when alternative punishments would be more effective [...] scare tactics don’t work anymore. [...] I think there’s got to be more dialogue and better education on [cannabis]” (Bellrichard, 2013, para 5,6). The literature supports Mr. Middleton, as exclusionary policies that punish without discretion are far less effective for remediating the behavior or improving the school culture than inclusive supportive policies (Brown & Clarey,

2012; Fergus, 2015; Jones, 2013; Milne, 2011; Norden, 2008; Ryan & Goodram, 2013; Russ Skiba & Peterson, 1999; Russell Skiba, 2014; Skibba & Knesting, 2001; Stamm & Frick, 2009; University of Victoria Centre for Addictions Research of BC, 2014)

At risk students already feel as if they do not belong in the school or community and are in need of psychosocial integration. When administration sends them to a different school, they are affirming to the student and the student's peers that in fact they do not belong and in effect increase the student's dislocation. Chilliwack School Trustee Dan Coulter agrees. At the trustee election debate on November 21, 2013, Mr. Coulter said expelling students could impact the most at risk youth and restorative justice should be used instead (Hellinger, 2013). Restorative justice is a much better solution to zero tolerance (Skibba & Knesting, 2001). School board Chair Walt Krahn and trustees Heather Maahs and Doug Mackay disagreed. After the 12 Sardis Secondary students were suspended for a semester there was a review of the policy and they voted to keep the policy as is. Mr. Krahn believes we need to keep our school environment free of drugs and alcohol (Naylor, 2013). The University of Victoria's Centre for Addiction Research of B.C. found that "schools are less likely to have drug-related incidents – and students are less likely to suffer harms – when drug policies are integrated into an overall strategy that promotes a positive school ethos and nurtures healthy behaviour choices" (University of Victoria Centre for Addictions Research of BC, 2014). Mrs. Maahs believes that the current policy works because she feels kids need to know what the boundaries are and will push them to "see if they hold" (Naylor, 2013, para 4).

To the contrary, a recent study published in *Child and Adolescent Psychiatric Clinics* found that the problem with punishment models is that they “fail to understand the complexity of youth misbehaviors and how they can be remediated, replaced, and/or managed through multiple intervention tiers” (Fergus, 2015, p.17). Mr. Mackay told the *Chilliwack Times* “the policy had the support of all students on the advisory committee” (Bartel, 2013, para 3).

Trustee Barry Neufeld was the only trustee who did not agree with regulation 500.1 (Bartel, 2013). Mr. Neufeld pointed out that while the students chosen for the committee are bright, ambitious and all going to university, they do not have any experience or context for deciding drug and alcohol policy in Chilliwack. Mr. Neufeld feels that if students are going to be on the committee that decides policy for addicted students, addicted students and recovered students should be represented on the committee. However, they were not represented at all. Mr. Neufeld described Regulation 500.1 as “punitive” and “archaic” and said that it cuts kids with substance use problems off from school (Naylor, 2013, para 10). Mrs. Novak told the *Chilliwack Times* that the policy itself is not punitive (Bartel, 2013). However, several scholars and professionals argue on the basis of evidence that zero tolerance is a punitive model of discipline (American Psychological Association Zero Tolerance Task Force, 2008; Giroux, 2003; Gregory & Cornell, 2009, 2009; Jones, 2013; Milne, 2011; Russ Skiba & Peterson, 1999; Russell Skiba, 2014; Skibba & Knesting, 2001; The Ontario Ministry of Education, 2013; U.S. Department of Education, 2015). Mr. Neufeld, Chilliwack School Trustee, a former probation officer, and restorative justice facilitator with the Ministry of Children and

Family Development does not believe that punitive consequences will help addicted students. Mr. Neufeld told the Chilliwack Progress “students with addiction problems, they have a disease, they’re sick. When they’re going through troubling times, removing them from their friends and school environment will only make it worse. If we’re really serious about wanting to increase graduation rates, then this policy is totally out of sync” (Naylor, 2013, para 10-11). This is in line with a progressive discipline approach. I also believe that removing students from their home school will dislocate the student further (Alexander, 2008) While in contrast to Mr. Neufeld, Alexander says addiction is not a disease but a psychosocial disorder, they both believe that like Mr. Neufeld said, forcing student’s to leave their friends and their school environment “will only make it worse” (Naylor, 2013, para. 10).

The Chilliwack School District has adopted the role of using punitive-based approaches to deter students from violating the policy. While the Middle School Policy provides more opportunity to look at each situation on a case-by-case basis, the grade 10-12 policy, requires that all students in violation of the policy be punished the same regardless of mitigating factors, and the student will be transferred to another Chilliwack school. The APA’s task force on Zero Tolerance reports that the amount of research that negates the assumptions of zero tolerance’s philosophy is astounding (American Psychological Association Zero Tolerance Task Force, 2008). Nevertheless, Chilliwack’s policy states; “in all probability, the student/parent/guardian will be informed that the student will receive an in-district transfer to another educational site within the district” (Board of Education School District #33 (Chilliwack), 2013, p. 3). This policy dislocates

the student further by removing any positive attachments they have to teachers, peers, counsellors and administrators at their home school. The research says that zero tolerance not only hurts the affected student but it also hurts the overall culture of the school (American Psychological Association Zero Tolerance Task Force, 2008).

Vancouver school district.

The Vancouver School Board's drug and alcohol policy is currently under revision and not available to the public until the revision is complete. The Vancouver School Board (VSB) in partnership with Vancouver Coastal Health (VCH), implements a prevention and early intervention initiative called Substance Abuse Health Promotion of the School Age Children and Youth (SACY) program. SACY aims to implement best practices in substance use prevention and intervention through an evidence-based, wrap-around approach which includes four interrelated streams of activity: Youth Prevention and Engagement; S.T.E.P., a three day structured educational program; parent engagement; and curriculum and teacher training. SACY serves primarily secondary level students, their parents/guardians and school staff. Art Steinmann, Manager of Substance Abuse Health Promotion of School Age Children and Youth (SACY) for Vancouver School Board, believes the partnership between VSB and VCH is crucial to supporting students with substance use issues (Arbor Educational & Clinical Consulting Inc., 2013). Mr. Steinmann told me that "Since SACY is a partnership with VCH, we are able to smoothly connect students to a range of youth addiction services as well as other health services" (Steinmann, 2015, personal communication).

Mr. Steinmann also informed me that when students are caught using drugs or alcohol in Vancouver Secondary Schools they are enrolled in the SACY program. They usually attend a three-day workshop called S.T.E.P and then return to their home school. Instead of choosing a consequence-based approach, the VSB chooses to intervene, support and educate the student. Students do not even need to have had an incident with drugs or alcohol to be eligible for the program. Many parents send their child to SACY because they know their child is suffering with substance use or mental health issues and the VSB wants to support the student struggling long before the student commits an infraction at school (Steinmann, 2015, personal communication).

In 2013 The Vancouver School district hired Arbor Educational & Clinical Consulting Inc. (AECC) to do a full report on SACY and the findings are clear: SACY works. The following results were published by AECC and are highlights from an evaluation of SACY between 2009 and 2013. 25,500 students participated in a classroom education session and 8400 students attended workshops or groups. 511 youth attended S.T.E.P, a three day, structured, educational opportunity for students experiencing substance use related issues. S.T.E.P. made 3000 contacts through which parents/caregivers received support and 225 school staff participated in a total of 9 professional development events organized by S.T.E.P (Arbor Educational & Clinical Consulting Inc., 2013).

The report highlights many of the successes of the program. No consequences were mentioned. 74% of those interviewed report they know where to go for help for

issues related to substance use and 62% indicated that the information learned would be helpful in life. 22% of youth indicated they intended to make changes in their lives as a result of participating in SACY. When interviewed by AECC, the top three ways that youth from S.T.E.P identified to avoid substance use were as follows. 60% decided not to buy substances; 52% told others that they do not want to use and 51% told others that they have to be somewhere so they can't be drunk or high. SACY was successful in harm reduction. From the S.T.E.P. program to ten weeks post S.T.E.P. Students reported a 12% decrease in weekly cannabis use, a 20% decrease in daily cannabis use and 34% of S.T.E.P. youth reported that they felt they would easily be able to avoid alcohol and drugs if they chose to do so. Of students who participated in S.T.E.P., 79% feel there is an adult from SACY with whom they can talk, 52% participate more in school and 65% reported feeling more involved in their community. As a result of attending a workshop or Capacity Café, 94% of parents intend to enhance their communication with their children, 57% intend to spend more time talking with their youth about substance use issues, 59% strongly agreed that they know where to get more help or resources, and 62% continued to use some of the techniques they learned in their day-to-day parenting.

After completing the three-day S.T.E.P workshop, 84% of students reported it was very important for them to graduate from high school and 69% strongly agreed things would go well for them when they returned to their home school after completing the program (Arbor Educational & Clinical Consulting Inc., 2013). While the VSB calls their program SACY and S.T.E.P, they have all the key aspects and is aligned with the same philosophy as progressive discipline.

The Vancouver School District has adopted the role of intervening, supporting and educating students who have drug and alcohol issues. Their policy is in line with the philosophy of Progressive Discipline. In partnership with Vancouver Coastal Health, they support students in grade 8-12 through their SACY Program. Art Steinmann, Manager of SACY and Substance Health Promotion explains, “SACY serves primarily secondary level students and their parents/caregivers and school staff (although there is much that can be done at the elementary grade levels presently our resources are focused on grade 8 - 12)” (Art Steinmann, 2015, personal communication). SACY’s role is to provide support to four streams: Youth Prevention and Engagement, S.T.E.P, parent engagement and curriculum and teacher training (Arbor Educational & Clinical Consulting Inc., 2013).

Ontario ministry of education.

The Ontario Safe Schools Act governs all of Ontario Public Schools Code of Conduct and how students are disciplined in Ontario. The Ontario Government did a review of Safe Schools Act, which was originally introduced in 2000, and revised in 2006 (Ontario Safe Schools Action Team, 2006). According to the Safe Schools act of 2006, students must not have or be under the influence of alcohol or illegal drugs (Ontario Safe Schools Action Team, 2006). To address students who violate the act, every school board in Ontario must have a progressive discipline policy. Progressive Discipline is an approach that promotes positive student behavior and gives the principal the authority to choose the appropriate consequence (Ontario Ministry of Education, 2009). The Safe

Schools Act is meant to engage parents, provide early and ongoing intervention, and have the principal assigning what he/she deems to be appropriate consequences. School boards are also encouraged to build partnerships with community agencies to support early intervention (Ontario Safe Schools Action Team, 2006).

Ontario School Boards have adopted the role of supporting the offending student through progressive discipline. The Ontario Ministry of Education has mandated that Ontario school boards must establish policies and guidelines on progressive discipline “in accordance with subsection 302(2) of Part XIII of the [Ontario] Education Act” (Ontario Ministry of Education, 2012, para 2). In Policy Program Memorandum No. 145, the Ontario Ministry of Education states: “A progressive discipline approach combines prevention and intervention strategies and discipline with opportunities for students to continue their education” (Ontario Ministry of Education, 2012 para 2). Ontario school boards engage parents, provide early and ongoing intervention and give the principal discretion to assign what he/she feels to be an appropriate consequence.

The New York City department of education.

Internationally, we find that the New York City Department of Education also believes in progressive discipline. Their policy, revised in April 2015, outlines five levels of progressive infraction. Level 1 is Uncooperative and non-compliant behavior. Level 2 is disorderly behavior. Level 3 is disruptive behavior. Level 4 is aggressive or injurious/harmful behavior. Level 5 is Seriously Dangerous or Violent Behavior. Each of

the infraction levels is accompanied by a set of possible behavioural interventions as well as a minimum to maximum range of possible disciplinary responses. Their discipline code also provides graduated accountability measure for students who engage in repeated misbehaviors despite prior intervention (New York City Public Schools Department of Education, 2015). The New York City Department of Education believe behavioural interventions encourage students to learn from their inappropriate behaviour, lessen repeated inappropriate behaviour and improve the school culture as students feel supported and respected (New York City Public Schools Department of Education, 2015). Being under the influence of or possessing illegal drugs or alcohol on school grounds are level 4 infractions. Possible behavioural interventions for level 4 are: parent outreach; intervention by counselling staff; restorative approaches; positive behavioral interventions and supports; individual and group counseling; mentoring program; referral to appropriate substance use counselling services and or a behavior plan. The range of possible disciplinary action for a level 4 infraction in conjunction with behavioural interventions are parent conference; in-school disciplinary actions (detention, exclusion from extracurricular activities or communal lunch time); or a principal's suspension of 1-5 days (New York City Public Schools Department of Education, 2015). Contrary to the philosophy of progressive discipline, these behavioral interventions reflect a zero tolerance attitude. Detentions and exclusions may not be effective and could worsen things for the student. In New York City Public Schools, suspension does not mean the student is not allowed at school for 1-5 days. It means that for the duration of the suspension, the student will attend an alternative instructional site within the school and

be provided with the missed instructional resources and assignments (New York City Public Schools Department of Education, 2015). The Department of Education believes in behavioural interventions with minimal disciplinary action for first offences. They explain discipline should be used as a teachable moment by using incremental interventions in a positive manner and to make the student accountable and encourage a positive change in their behavior and integration into the school culture. (New York City Public Schools Department of Education, 2015). Progressive Discipline helps students learn from their mistakes and to be accountable while being supported and respected.

New York City Department of Education has adopted the role of teaching pro-social behavior to students who have a drug and alcohol infraction. Their progressive discipline approach uses incremental interventions to address inappropriate behavior. The NYC DOE states “The goal of progressive discipline is prevention of a recurrence of negative behaviour by helping students learn from their mistakes. [...] Every reasonable effort must be made to correct student behavior through behavioural interventions and other school-based strategies such as restorative practices” (New York City Public Schools Department of Education, 2015, p. 4). The NYC DOE does not see their role to punish the student. They see their role to encourage concurrent accountability and behavior change from the student.

New South Wales department of education.

In New South Wales (NSW), Australia, NSE DOE believes in a safe and supportive school environment and intervention and support for students who may be

involved in Drugs and Alcohol. The Department has different consequences for drugs than they do for alcohol. In the Department of Education's Drugs in Schools Policy, schools must be places free of illegal drugs and alcohol (New South Wales Department of Education and Training, 2010). If a student's infraction has to do with illegal drugs then the administration must discipline the student according to their suspension and expulsion procedures (New South Wales Department of Education and Training, 2010).

While issues with students and alcohol are also subject to the suspension and expulsion, procedures at the discretion of the administration of the school, typically the situation is assessed by the counsellor and if further intervention is needed a plan is created by the counsellor according to the school's "Student Welfare and Discipline Procedures" (New South Wales Department of Education and Training, 2010).

Suspension still removes the student from the supports that are available in and through the school community; as well, many parents have little expertise in teaching. According to the Suspension and Expulsion of Student Procedures of the NSW Department of Education, suspension is not meant to be a punishment. It is to give time for the school to work with parents to get the student the support needed and also to give time from the school to put the proper supports so the student can have a successful return to their home school (Public Schools NSW, 2015).

The procedures highlight the parents' responsibility for taking an active role, with the school district, to modify their child's behavior. Schools use the "Young People and Drugs: a guide for school and staff to support students" (New South Wales Department of

Education and Training, 2007) published by the DoE Student Welfare Directorate to guide their student welfare and discipline policies. According to the guide, students who have been suspended for possession or use of illicit drugs should be referred to the school counsellor and parents and caregivers must be involved. The School counsellors have the training to refer students to a government or non-government funded agency or to deem that if the occurrence was a one-time discretion and will unlikely to happen again (New South Wales Department of Education and Training, 2007). The guide cautions schools that

Research has found that the strongest predictor of increased drug use is the effects of being labelled a ‘drug user’. In other words, drug use increases as a result of getting into trouble for initial drug use. There are three identified pathways by which negative social sanctions can lead to an increase in drug use (Spooner et al 1996).

The drug user perceives the label as a positive thing, enabling more positive self-evaluation and self-acceptance.

The drug user is alienated from society by being labelled and is no longer motivated to conform or belong to that society.

The drug user has less opportunity to socialise with non-drug users as a result of alienation, and consequently increases involvement with drug using groups.” (New South Wales Department of Education and Training, 2007, p.17).

The NSW Department of Education uses the stages of change to help school staff figure out how to best support their students who use substances. They describe Prochaska and DiClemente's model as "a useful model for understanding and assessing a young person's readiness to change drug use behaviour" (New South Wales Department of Education and Training, 2007, p.20). Evaluating where the student is according to TTM will determine how the school will intervene. The NSW DOE promotes counselling as one of the interventions when substance use is involved.

The Ted Noffs Foundation provides counselling services around drugs and alcohol to many NSW schools with a focus on diminishing risky behaviours and encouraging the student to adopt new positive behaviours" (New South Wales Department of Education and Training, 2007). The program uses skill-based strategies to teach the students how to better manage their lives. The NSW DOE believes that encouraging students who have been involved with drugs and alcohol to get involved with extracurricular activities to boost the student's sense of belonging, achievement and to help improve their social skills. This philosophy is in line with Progressive Discipline practices and will increase the student's psychosocial integration and reduce dislocation. While the NSW DOE requires students involved in illegal drugs be suspended, they also require that the school provide resources for the student to be successful upon re-entry and to encourage inclusion of student in their home school. The NSW DOE strongly discourages breaking apart the student's peer group, especially when the student is part of a positive peer group (New South Wales Department of Education and Training, 2007). Students who are part of a bad peer group are encouraged to participate in extra curricular

activities, to join a positive peer groups and discussions about the students peer group are done in counselling to help the student make positive changes. The danger in a zero tolerance policy is that it does not distinguish between a student who has used drugs or alcohol a few times, and those that are habitual users. Disciplining these two groups with the same consequences risks labeling a student who is not a habitual user a “drug user.” The student often lives up to the label placed on them by their school (New South Wales Department of Education and Training, 2007, p.17).

The NSW DOE has adopted the role of intervening and supporting students who may be involved in drugs and alcohol. Their policy is in line with Progressive Discipline. The NSW DOE directs districts that “The school’s response to a drug related incident must not isolate and marginalise students as this is likely to put them at further risk and increase the likelihood of them developing problematic drug use” (New South Wales Department of Education and Training, 2010, p.8). The school sees its role is to educate, provide support aimed at promoting the student’s welfare, encourage the student to continue on an education pathway and where appropriate, assist the student and the family to link to appropriate community support services. (New South Wales Department of Education and Training, 2010).

NSW DOE looks to work with parents/guardians to modify the student’s behavior. Counsellors at the home school have special training on referrals. The counsellor’s role is to determine if the infraction is a one-time discursion or if the student has issues with drugs or alcohol. If the student has issues with drugs or alcohol, the

school counsellor will arrange for counselling for the student and make referrals to appropriate government and non-government funded agencies. NSW policy covers Kindergarten through graduation and does not distinguish different consequences according to age or grade (New South Wales Department of Education and Training, 2010).

Summary of Findings

The research shows that both the school as a whole and the student in violation of the school's drug and alcohol policy benefit from "a positive school climate that is safe, inclusive, and accepting of all students in order to support their education so that all students reach their full potential" (Ontario Ministry of Education, 2012, para 3). As progressive discipline addresses inappropriate behavior with appropriate consequences (Ontario Ministry of Education, 2009) and zero tolerance does not consider the gravity of behavior, mitigating circumstances, or situational context (American Psychological Association Zero Tolerance Task Force, 2008), a progressive discipline approach is favorable over a zero tolerance policy to achieve these goals. Progressive discipline also works to reduce dislocation of the student and meet the student where they are in terms of TTM while zero tolerance dislocates the student further and does not allow the administration to use TTM to intervene in an effective manner for zero tolerance do not allow mitigating circumstances to be considered.

The findings on zero tolerance are clear. It doesn't work. Research found that schools that use positive inclusive policies instead of punitive, one size fits all policies,

will have less youth delinquency (Winton, 2012) and there is not any evidence that zero tolerance improves school climate or school safety (American Psychological Association Zero Tolerance Task Force, 2008). The collaborative found school districts should be using positive corrective and supportive discipline practices (Russell Skiba & Losen, 2015). This literature review has attempted to accomplish four goals: First, to look at the theoretical models of TTM, dislocation theory, zero tolerance and progressive discipline; second, to investigate what school districts are currently doing on local, national and international levels when dealing with students who are in violation of the school drug and alcohol policy; third, to examine what the research says about the policies school districts are using as drug and alcohol policy and given the research which policies uses best practices. The research suggests that school districts who are still using a zero tolerance policy should abandon that policy in favor of a progressive discipline policy.

Chapter Three—Summary, Implications, Recommendations, Suggested Research and Conclusion

Summary

This paper reviewed theoretical models and the literature as well as school districts' drug and alcohol policies on local, national and international scales with the goal of identifying best practices in dealing with students who violate the drug and alcohol policy. This review identified two distinct types of policy: zero tolerance and progressive discipline. This paper also investigated how dislocation theory and TTM can be used to support students who use substances and to meet them where they are with the ultimate goal of determining an appropriate consequence and interventions when dealing with students who violate their schools drugs and alcohol policy.

The research shows that zero tolerance policy does not help either the student who violated the code or the school culture as a whole (Russell Skiba, 2014). Those students that were excluded through suspension or expulsion are more likely to re-offend (American Psychological Association Zero Tolerance Task Force, 2008). Since zero tolerance does not afford the administrator the ability to distinguish between the gravity of the behavior, mitigating circumstances or situational context (American Psychological Association Zero Tolerance Task Force, 2008), the administrator cannot use current research on substance use and addiction to support the student.

After considering the research, I believe that schools that have zero tolerance policies would benefit from abandoning zero tolerance and adopting progressive discipline. Progressive discipline allows the administrator the discretion to use

appropriate consequences for inappropriate behavior with the goal of positively influencing the student's behavior (Ontario Ministry of Education, 2012). Dislocation theory says that students who are in violation of the drugs and alcohol policy need psychological integration to reduce dislocation (Alexander, 2008). This can be achieved through encouraging the student to participate in extracurricular activities such as teams, clubs and volunteer (Health Canada, 2013). TTM provides a framework for the administration to assess where the student is as far as the stages are concerned in order to provide the most appropriate consequences depending on the situation (Connors et al., 2013).

The research demonstrates that best practices include a progressive discipline policy where the administrator considers dislocation theory and TTM when deciding appropriate consequences and behavioural interventions for students who violate the school's drugs and alcohol policy.

Implications

I aimed to clarify what are best practices in relation to discipline and behavioural interventions for students who have violated their school's substance use policy to better inform school districts, teachers, school counsellors, parents and students. This study has shown progressive discipline to be favorable to zero tolerance (American Psychological Association Zero Tolerance Task Force, 2008) which were the two distinct types of discipline policies employed by the school districts reviewed at local, national and international levels. When an administrator is deciding appropriate consequences for the offending student under their school's progressive discipline policy (Winton, 2012), it is

important that the said administrator considers dislocation theory (Alexander, 2008) and TTM (Connors et al., 2013; Prochaska et al., 1992). It is not possible to consider dislocation theory of TTM under a zero tolerance policy as zero tolerance does not afford the administrator the freedom to look at the mitigating circumstances before applying the punitive consequence (American Psychological Association Zero Tolerance Task Force, 2008).

This paper has suggested that progressive discipline is best practice when applied by an administrator who is familiar with current trends in addiction research like dislocation theory and TTM. Dislocation is reduced when the offending individual is encouraged to participate in extra curricular activities such as teams and clubs with the goal of reducing dislocation (Canada, 2013). It is also important for the administration to use TTM to meet the student where they are. The research also suggests that schools should adopt discipline and behavioural interventions which requires school districts to consider circumstances around the infraction the student's inappropriate behavior and ways the district can support the student while using various interventions to correct the student's behavior (Ontario Ministry of Education, 2012). A switch from zero tolerance is necessary to allow administrators the ability to consider mitigating factors like the student's age, the circumstances of the behavior, and the student's history before determining the best way to respond to the situation (American Psychological Association Zero Tolerance Task Force, 2008). The research also suggests that this will improve the overall culture of the school (Ontario Ministry of Education, 2012).

Recommendations

After looking at the current research, I believe that school administration that uses progressive discipline policy and considers important addiction research on dislocation theory and TTM to administer appropriate consequences for inappropriate behavior are best practices when dealing with students who violate their schools drug and alcohol policy (American Psychological Association Zero Tolerance Task Force, 2008). The following recommendations attempt to inform the districts, school administration, school counsellors, teachers, parents and students of best practices in relation to discipline and behavioural interventions for students who have substance use issues.

The first recommendation is for districts who are currently using a zero tolerance policy to consider adopting a progressive discipline policy. While zero tolerance was once thought to be the best option available, the research has shown that it should not be an option at all (American Psychological Association Zero Tolerance Task Force, 2008). The U.S. department of education and the Ontario government, historically two of the strongest supporters of zero tolerance, have both abandoned the practice in favor of progressive discipline (Means, Toyama, Murphy, Bakia, & Jones, 2009; Ontario Ministry of Education, 2009). This would require the school board to adopt progressive discipline at the board level, as with a zero tolerance policy at the district level, school administration do not have the option to re evaluate their policy on a regular basis or adopt any of the recommendations (American Psychological Association Zero Tolerance Task Force, 2008).

In developing and implementing district or school wide progressive discipline plans, it is recommended that the district or school consult with another district or school that has already implemented a progressive discipline policy. The Ontario Ministry of Education would be a valuable resource as they have done a lot of research and have experience in changing from a zero tolerance model to a progressive discipline approach(Ontario Ministry of Education, 2009).

The school implementing a progressive discipline plan should:

- Have a range of interventions, supports and consequences. While suspension or expulsion can be an option, it should only be used when all other options have been exhausted.
 - Before suspending or expelling a student all mitigating and other factors should be considered. This should be a last resort.
- Use the most appropriate consequence in accordance with the with the school's progressive discipline plan. The consequences should become progressively more serious for repeated violation of the policy
- Use a range of behavioural interventions, developed by the school, to support students who are in violation of the policy. Consequences should not be administered without an appropriate behavioural intervention to support the student. Interventions could include:
 - Speaking with the teacher, school counsellor or administration
 - Attendance, performance and behavioral agreements

- Reflection assignments
 - Parental contact and including parents in the process
 - Using TTM to meet the student where they are in an effort to alter their behavior.
 - Peer mediation
 - Counselling
 - Restorative practices
 - Requiring student participate in extra curricular activities to increase students psychosocial integration
- When deciding on appropriate consequences, consider “dislocation theory” and encourage the student to do things that will reduce dislocation and increase psychosocial integration by integrating the student into the culture of the school. This could include joining school teams, clubs, volunteering...
 - Build partnerships or build on existing partnerships with community agencies that support students and families.
 - Communicate with parents about student’s achievement and behavior.
 - Create opportunities for students to improve the school culture by participating in leadership roles. This could include peer mediation and mentorship.
 - Ensure the school’s code of conduct is aligned with the school’s progressive discipline policy.
 - Communicate progressive discipline policies to all students, parents, staff member and community.

- Monitor and review the effectiveness of the program and adjust accordingly.

(Toronto District School Board, 2013)

I believe that if a school follows these recommendations when dealing with students who violate their school's drug and alcohol policy, the school culture will improve (Ontario Ministry of Education, 2012) and the offending student will receive the support they need to be successful in school and in life (The Ontario Ministry of Education, 2013).

Suggested Research for the Future

Through my research on addressing students who have substance use issues, the research says that there is a strong correlation between displacement and substance use. If students do not feel a sense of belonging, Alexander (2008) and Maté (2008) argue that they are more likely to use substances. I currently work in Chilliwack and this is a research study that could be conducted in Chilliwack's Middle and Secondary schools. Using psychosocial integration as a guiding theoretical framework, the purpose of this study is to see how many students are lacking meaningful connections to other people, to see how many students are using substances and to see if there is a relationship between lacking meaningful connections to other people and using mind altering substances. Each of these topics will have three variations to establish the validity of the results. This study would measure psychosocial integration and dislocation by asking students if they feel they have a sense of belonging, if they feel supported at home, if they believe there is abuse in their home, are they actively involved in extracurricular activities and are they

using mind altering substances. This study would be helpful for school administration to know if schools need to play an active part in getting dislocated students connected to the school. The study would also allow administration to know if students are actively using substances as well as if there is a correlation between dislocation and substance use in Chilliwack schools.

Description of research methodology.

This is a quantitative research study because it involves one survey with a four point and five point Likert scale. Participants will have 4-5 choices to choose from when responding to questions. The student surveys will be informative because they will, I hope, show if students feel a sense of belonging, if students are using mind altering substances and if there is a quantifiable relationship between students sense of belonging and using mind altering substances. This study would help the schools find out the percentage of the student population that are dislocated; use mind altering substances and if there is a relationship between being dislocated and using mind altering substances. This data would tell them if this is a significant problem, if certain schools have more or less dislocation and also whether or not improving students' sense of belonging would have an positive impact on reducing students' use of mind altering substances.

Selection of subjects.

In order to complete this research study, I would use an opportunity sample, which is to survey a targeted group of people. An opportunity sample allows me to target

students at all Chilliwack middle and secondary schools in grades 7-12. Using the students from Chilliwack middle and secondary schools would allow me to get data on whether or not students feel dislocated, if they use mind altering substances and if there is a relationship between feeling dislocated and using mind altering substances. My hope is that the Chilliwack School District would use the data to inform them where students need support.

Procedure.

The study consists of one questionnaire that has 35 questions and 4-5 possible responses for each question. I will ask questions in multiple ways to establish validity of responses. In the study, each questionnaire is assigned a youth number, a school number, and then is distributed to all Chilliwack middle and secondary schools to be filled out on a voluntary basis by students in grade 7-12.¹ The surveys are coded by school, and grade, to see if certain schools, and grades have more or less dislocation and drug use. This is a large sample size, which would likely include several hundred participants. Since this study is anonymous, the only identifying markers on the surveys will be the youth number, the student's school and the student's grade. The surveys can be distributed during class time, a homeroom or whenever it is most convenient for the school. The

¹ This proposed study is based on the assumptions that the District would approve and possibly play a role in implementing the survey.

teachers would need to be trained in how to serve as research assistants. Participation is voluntary and the participants would be told that the survey is completely anonymous and there will be no negative repercussions for being honest or for not participating. The survey contains fourteen questions and has 4-5 choices for its response. I designed the survey and I would test its reliability by administering it twice with a sample class of 25-30 students. The sample class would be chosen at random. The survey is the first item of the appendix of this capstone.

Ethical considerations.

A description of the study and a consent to withdraw form for the study will be mailed to the homes of all parents who have a child in grades 7-12 in Chilliwack Secondary Schools to arrive at their home three weeks prior to the study to give parents the opportunity to withdraw their child from the study. Parents and students will be informed that their participation in the study is voluntary and anyone who has a consent to withdraw form returned will not be allowed to participate in the study. Students will also be told that they can decline to answer any questions they do not want to answer and to withdraw from participation at any time without any negative consequences.

The participants' confidentiality will be protected because all surveys will remain anonymous. The only identifying markers are the student's school and grade. The students will also be informed that all information they provided will remain anonymous.

Limitations.

All research studies have limitations. One of the limitations of this study is that people often lie especially when they think they may get in trouble or get their family into trouble. In the instructions to students, the research assistant will explain that the study is completely anonymous and there will be no negative consequences to anyone for being honest in replying or for choosing not to participate. The students would be told the researchers are not interested in finding out personal information. The second limitation is that this survey is just quantitative, not qualitative, so I do not know the “why” to any of the questions. The third limitation is that I do not know the previous behavioral history of any of the students.

The survey is asking students to share behavior and experiences that their family may have told them not to tell anyone and, as well, using drugs or alcohol has stiff penalties at their school. Students may have a fear of reprisal and therefore not answer truthfully. Even though they are informed that the study is anonymous, many will still be weary of it actually being anonymous. The second limitation is that I don't know any of the ages of the students, do not know their socio-economic backgrounds, do not know their genders, or any other mitigating factors the student may have. Mitigating factors would include substance abuse in families, family history, responsibility of students within their families, etc. The third limitation of this study is that I do not know if they have they have been caught before, if they have any behavioural problems, if they have

any learning difficulties, or if they have been forced to move to another school for any reason other than substance use among other mitigating factors.

The only thing that can be done for the first limitation is to tell students that the survey is anonymous and nobody has a right to break confidentiality, including for harm to self or harm to others, on an anonymous survey. This may reduce this limitation. For the second limitation, I had originally thought of including a qualitative piece to the study but did not because I feel that would make the survey too long and create a new limitation of students not filling it out because it is too long. For the third limitation it would be difficult to get the behavioral history of the students while keeping the questionnaire anonymous and short.

Conclusion

The problem this paper addressed is what best practices are in addressing students who violate the school's drug and alcohol policy according to the research. The goal of this paper was to look at the theoretical models of TTM (Prochaska et al., 1992), dislocation (Alexander, 2008), zero tolerance, progressive discipline and what school districts are currently doing on local, national and international scales to deal with a student who has violated the school's drug and alcohol policy. There were two distinct types of policy among the school districts I reviewed: zero tolerance and progressive discipline. I also reviewed the literature on dislocation theory and TTM, two pieces relevant to administrators who decide consequences and interventions, as they will help decide the intervention and estimate what the student will be receptive to.

The literature showed that zero tolerance is an outdated policy that is no longer even endorsed by two of its biggest former supporters the U.S. department of education and the Ontario ministry of education (Means et al., 2009; Ontario Ministry of Education, 2009). Both recommend progressive discipline and I have come to the same conclusion. Zero tolerance does not afford the administrator the authority to consider the situation, degree of infraction or any other mitigating circumstances (American Psychological Association Zero Tolerance Task Force, 2008). This is not in line with current research that indicates it is best to give students multiple chances and to use their infraction as a “teachable moment” and an opportunity to support the student and correct the behavior (New York City Public Schools Department of Education, 2015). That is exactly what progressive discipline does.

Progressive discipline gives the administration the discretion to impose the consequence as long as it is in line with the progressive discipline policy (Ontario Ministry of Education, 2012). When imposing consequences and interventions, dislocation theory should be considered. Dislocation theory says that students use substances in an effort to fill the void they have from not making significant connections in their lives (Alexander, 2008). We are seeing a lot more dislocation than there used to be as divorces and single parents are more common than ever before and children are spending more and more time alone instead of with adults who create important connections with them (Maté, 2008). People who are dislocated try and fill that void with substances and it is important to reduce dislocation by engaging the student in the culture of the school. This increases the students’ psychosocial integration, which in turn reduces their dislocation (Alexander,

2008). TTM (Prochaska et al., 1992) are also important for the administrator dealing with infractions to know as it will help them estimate at what stage the student is at and help get them to a point where they will accept help (New South Wales Department of Education and Training, 2007). Usually students with their first violation to the code will be in the precontemplation stage or the contemplation stage (Connors et al., 2013). In the precontemplation stage the student either does not realize there is a problem or realizes there is a problem but is not willing to change their behavior and in the contemplation stage they are thinking about changing their behavior and may be open to a solution (Connors et al., 2013).

I believe that the research is clear as far as what substance abuse policies should entail. They should be flexible as there are many mitigating factors in every infraction to the code and students violate the code for many reasons (American Psychological Association Zero Tolerance Task Force, 2008). In this paper, I focused on how to support those who suffer with substance use problems and violate the code. For those that violate the code for other reasons, progressive discipline provides the administration discretion to use their professional judgment to decipher between these two groups and provide the supports and consequences for whatever reason the student violated the code (New South Wales Department of Education and Training, 2007). Zero tolerance does not allow the administration the discretion to differentiate between these two groups or do anything to support either of these groups (American Psychological Association Zero Tolerance Task Force, 2008). I believe progressive discipline helps create a positive and inclusive school climate where everyone feels supported and respected.

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Appendix A

Proposed Survey

<p>Please check the response that best describes how you feel.</p> <p>This survey is completely anonymous. Please do not write your name on this paper. Your survey has been assigned a youth number that cannot be traced back to you.</p> <ul style="list-style-type: none"> • Participants can withdraw at any time without any kind of penalty • Participants are not required to answer all questions if they do not feel comfortable doing so • Participants can ask questions at any time 				Youth #: _____ Your Grade: _____
Using the following scale:	Never	Sometimes	Most of the time	Always
I feel a sense of belonging at my school.				
I feel happy and safe at home.				
I do not feel a sense of belonging in my community				
I have a place and I am valued in my family.				
I volunteer/donate my time in the community.				

I feel safe and heard in my family.				
I have an adult I can talk to openly about what daily life is like in my family.				
I do not feel a sense of belonging with people my own age				
I feel safe at my school.				
I have family I can talk to openly about what daily life is like in my family.				
Nobody living in my home is abusive (physically, emotionally, sexually)				
I feel a sense of belonging within my family.				
I do not feel my parent(s) value and support me.				
I have a connection with the adults at my school.				

I feel my parents listen to me and care about what I have to say.				
I do not feel a sense of belonging at my school.				
I feel a sense of belonging with people my own age.				
I do not feel a sense of belonging within my family.				
I have friends outside of school my own age.				
I feel my parent(s) treat me with care and respect.				
I have friends I can talk to openly about what daily life is like in my family.				
I participate in activities with peers my own age in and outside of school.				

I do not have family I can talk to openly about what daily life is like in my family.					
I feel my parents are interested in me and in my life.					
I feel a sense of belonging in my community.					
In my opinion, one or more of the people living in my home is abusive (physically, emotionally, sexually).					
I feel my parent(s) value and support me.					
I participate in activities outside of school.					
Using the following scale:	0	1- 4	5- 9	10- 14	15 or more
I spend ___ hours a week connecting with peers through school extra-curricular					

activities. (I.e.: Teams, clubs, leadership, etc.)					
I spend __ hours a week connecting with peers in an out of school organized activity. (I.e.: Sports, clubs, youth groups, church, etc.)					
I spend __ hours a week hanging out with friends.					
Using the following scale:	Never	1- 2 times a month	Once a week	3- 5 times a week	Daily
I have used cannabis__ times.					
I have drank alcohol __ times.					
I have used any other street drug(s) __ times.					
Thank you for your participation. All responses will remain anonymous and confidential.					

Appendix B

Survey Themes for Coding

Sense of belonging at school

I feel a sense of belonging at my school.
I do not feel a sense of belonging at my school.
I have a connection with the adults at my school.
I feel safe at my school.

Sense of belonging in community

I feel a sense of belonging in my community.
I do not feel a sense of belonging in my community.
I participate in activities outside of school.
I volunteer/donate my time in the community.

Sense of belonging with peers

I feel a sense of belonging with people my own age
I do not feel a sense of belonging with people my own age
I have friends outside of school my own age.
I participate in activities with peers my own age in and outside of school.

Sense of belonging within my family

I feel a sense of belonging within my family.
I do not feel a sense of belonging within my family.
I feel safe and heard in my family.

Someone to talk to about family like

I have family I can talk to openly about what daily life is like in my family
I do not have family I can talk to openly about what daily life is like in my family
I have friends I can talk to openly about what daily life is like in my family.
I have an adult I can talk to openly about what daily life is like in my family.

Supported by parents

I feel my parent(s) value and support me.
I do not feel my parent(s) value and support me.
I feel my parents are interested in me and in my life.
I feel my parents listen to me and care about what I have to say.

Exposure to abuse

In my opinion, one or more of the people living in my home is abusive (physically, emotionally, sexually).

Nobody living in my home is abusive (physically, emotionally, sexually).

I feel happy and safe at home.

I feel my parent(s) treat me with care and respect.