

# What to do When You Suspect Substance Use in the Classroom

This briefing paper is **part of a series** produced by Mentor-ADEPIS to support the delivery of effective alcohol and drug education and prevention in schools and other settings. It is intended to be read alongside the “What Works” Briefing Paper

## About Mentor

Mentor promotes best practice around building young people's resilience in order to prevent alcohol and drug misuse.

## About ADEPIS

The Alcohol and Drug Education and Prevention Information Service (ADEPIS) is a platform for sharing information and resources aimed at schools and other professionals working in drug and alcohol prevention. In 2017, ADEPIS was recognised by UNESCO, UNODC and WHO as a 'prime example' of best practice in alcohol and drug education.

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The drug landscape for young people is ever-changing and there is no doubt that it is very different than when we were at school. Sometimes teachers see a different side of children and young people than their parents see. And that side may sometimes show signs that they are using substances in excess, perhaps to the point of having a substance use disorder. For teachers, knowing what signs to look out for and knowing how to respond to this issue in general is often not easy. At the start of a new school year, for those teaching new classes, it is very difficult to gauge what behaviour is typical or atypical for each young person. While this becomes easier when teachers become familiar with each individual's behaviour and personality, it does not make it any easier to respond to it.

It is important to remember that drug abuse isn't limited to illegal drugs and with easier access, young people are more likely to misuse prescription and over-the-counter medications such as painkillers, stimulants, sedatives, and tranquillisers. The risk of substance abuse increases during times of transition, such as changing schools. The challenge is distinguishing the red flags of substance misuse from 'normal' teenage behaviour.

As teachers, it is critical to have an understanding of the behavioural, physical and psychological signs as the use of substances at an early age is a risk factor for developing more significant misuse at a later point in time.

## What to Look Out For

While we might think we know all the signs to look out for, we don't, and research in this area is continually updated. While different substances can manifest different symptoms, there are a few shared clear warning signs of drug and alcohol abuse that we can watch for in the classroom. It is essential, however, for teachers to ensure that these signals are not the result of other problems and not to immediately jump to the conclusion that a pupil is abusing substances.

### Emotional Signals

- Mood swings ranging from extreme happiness to paranoia, sudden withdrawal and depression
- Irritability and anger for no reason
- Bouts of violent behaviour

- Loss of interest and decreased motivation in school or extra-curricular activities
- Difficulty getting along with others and uncharacteristically isolated behaviour
- Truancy and chronic absenteeism
- Falling grades/ poor academic performance
- Short attention span

### Physical Signals

- Red eyes and dilated pupils
- Sleepiness in class or appearing tuned out
- Slurred/ impaired speech and confusion
- Inattention in class
- Forgetfulness
- Neglect of personal hygiene and general appearance
- Trembling and uncoordinated movements
- Changes in appearance such as unexplained weight loss or gain
- Change in groups of friends
- Scent of alcohol on the breath
- Atypical display of money or possessions (or the opposite—for example, trying to sell their belongings)

## What You Can Do

You may feel as if you want to reach out directly to the pupil to offer help. But generally, that is not the most effective road to go down. The first thing that we should do is to consult the school's policy regarding substance misuse in pupils and follow the appropriate action plan. While it is

important to keep confidentiality, it is essential to talk to your principal or a member of the senior leadership team. The most you may be able to do for an individual pupil is to pass the word along that you've seen troublesome signs that may indicate substance misuse.

As teachers, we play an influential role in the shaping of our pupils and have an extraordinary opportunity, leading by example, to either damage or make a positive long-term difference in young people's lives.

As teachers, we can help children to become confident, happy people who feel good about themselves by establishing the classroom conditions, which is essential to the development of five characteristics: a sense of security, a sense of identity or self-concept, a sense of belonging, a sense of purpose and a sense of personal competence (Alberta Health Services, 2018).

## Prevention Strategies

As the old proverb says, "It is easier to stop something from happening in the first place than to repair the damage after it has happened". There is never a time that is too early to start talking about prevention.

Many factors are contributing to substance abuse, and there is no single solution that schools can use to prevent it. However, there are some things schools can do that can help pupils make healthy choices.

## Warning Signs of Commonly Abused Drugs

**Marijuana:** Glassy, red eyes; loud talking, inappropriate laughter followed by sleepiness; loss of interest, motivation; weight gain or loss.

**Stimulants (including amphetamines, cocaine, crystal meth):** Dilated pupils; hyperactivity; euphoria; irritability; anxiety; excessive talking followed by depression or excessive sleeping at odd times; may go long periods of time without eating or sleeping; weight loss; dry mouth and nose.

**Inhalants (glues, aerosols, vapours):** Watery eyes; impaired vision, memory and thought; secretions from the nose or rashes around the nose and mouth; headaches and nausea; appearance of intoxication; drowsiness; poor muscle control; changes in appetite; anxiety; irritability; lots of cans/aerosols in the trash.

**Hallucinogens (LSD, PCP):** Dilated pupils; bizarre and irrational behaviour including paranoia, aggression, hallucinations; mood swings; detachment from people; absorption with self or other objects, slurred speech; confusion.

**Heroin:** Contracted pupils; no response of pupils to light; needle marks; sleeping at unusual times; sweating; vomiting; coughing, sniffing; twitching; loss of appetite.

Taken from Help Guide International

There is an Aladdin's cave of research on the effectiveness of prevention programmes. Details of these are available in more in the Mentor 'What Works' briefing paper. If you are deciding on a prevention programme to run in your school setting, we are

## Warning Signs of Commonly Abused Prescription Drugs

**Opioid painkillers (including OxyContin, Vicodin, Norco):** Drooping eyes, constricted pupils even in dim light, sudden itching or flushing, slurred speech; drowsiness, lack of energy; inability to concentrate, lack of motivation, decline in performance at work or school; neglecting friendships and social activities.

**Anti-anxiety medications, sedatives, and hypnotics (including Xanax, Valium, Ambien):** Contracted pupils; drunk-like, slurred speech, difficulty concentrating, clumsiness; poor judgment, drowsiness, slowed breathing.

**Stimulants (including Ritalin, Concerta, Adderall, Dexedrine):** Dilated pupils, reduced appetite; agitation, anxiety, irregular heartbeat, high body temperature; insomnia, paranoia.

Taken from [Help Guide International](#)

happy to advise. Mentor strongly recommends that prevention programmes have evidence of effectiveness for the specific issues targeted and offer a searchable database of Evidence-based Programmes called CAYT, which can be accessed from the Mentor website.

## The School as a Community

For a programme to have an impact, it must be multi-pronged and long range and it should be integrated into the entire school environment. A school community with teachers fostering protective factors can help young people to avoid actions that

place them at risk. One of these actions requires supporting young people understand that teachers and peers in their school care about their learning and crucially about them as individuals.

## Evidence-Based Practice

It is crucial for teachers to use quality resources from reputable resources and to use information that is evidence-based, i.e. that continually looks at new research and studies and re-evaluates practice based on findings.

## Relevant Content

It is critical that when talking about substances and healthy choices that the information provided to pupils is factual and relevant. Teachers can provide information on promoting healthy choices talking about skills such as decision making, goal setting, and self-management. There is further information on this in other Mentor briefing papers.

When teaching, it is critical for teachers to focus on health, wellbeing and brain science. It is not good practice to focus on morality but rather teach pupils about how their brains work. All drugs manifest themselves in a variety of physical ways, however all substances (including both prescription medications as well as recreational drugs) share one thing in common: their repeated use can alter the way the brain functions. Mentor discusses this topic in more depth in the "Adolescent Brain" briefing papers.

## Quality Standards

It is critical that the standard of pupil education when it comes to drugs and

alcohol is of a high standard. Mentor's developmental Quality Standards for schools aim to improve the quality of alcohol and drug education and prevention in England. They are very much in line with the UK's National Drug Strategy (2017) which stresses the importance of reducing demand through: increased focus on prevention, universal approach across the life-course, committed to supporting schools to build children and young people's confidence and resilience and supporting the development of dedicated alcohol and drugs education resources. To achieve the Quality Mark schools must ensure:

1. Alcohol and drug education is comprehensively covered, using local and school level data and reinforcing positive social norms.
2. Learning about risk-taking behaviour is included in the programme, ensuring pupils have the skills to assess and respond to risk.
3. A planned, spiral PSHE education programme builds upon themes, is well resourced, based on pupils' need and supported by staff CPD.

## References

<https://www.albertahealthservices.ca/amh/Page2678.aspx>

<https://www.helpguide.org/articles/addictions/drug-abuse-and-addiction.htm>

## Mentor Support

Mentor supports the delivery of effective alcohol and drug education across a range of educational and community settings.

When we talk about alcohol and drug education, we're not just thinking about what happens within the classroom. We support practitioners in schools, SEN and PRU settings, colleges and universities, custodial settings and community groups.

The role of a child's school in prevention is much broader than alcohol and drug education lessons. Research tells us that the links between educational detachment and the use of alcohol and drugs at an early age are very clear: a young person's attachment to school is a powerful protective factor which makes them resilient against substance misuse. This is strengthened by a positive and supportive school ethos, as well as quality PSHE education.

Practitioners working in alcohol and drug education and prevention can benefit from the evidence base we have built as well as the free resources available from Mentor-ADEPIS.