

Drug education in a *culturally* diverse society

Teachers often raise questions about how to proceed with drug education in culturally diverse classrooms. Questions include:

- Is there a difference in drug use between young people from language backgrounds other than English and young people from English speaking backgrounds?
- Are the risks of developing drug use problems the same for all students irrespective of cultural or linguistic background?
- Are specific teaching and learning activities required in drug education for students from language backgrounds other than English?

Drug education in a culturally diverse society considers these questions and provides some direction for teachers.

© 2001, New South Wales Department of Education and Training,
Student Services and Equity Programs

RESTRICTED WAIVER OF COPYRIGHT

The printed material in this publication is subject to a restricted waiver of copyright to allow the purchaser to make photocopies of the material contained in the publication for use within a school, subject to the conditions below.

1. All copies of the printed material shall be made without alteration or abridgement and must retain acknowledgement of copyright.
2. The school or college shall not sell, hire or otherwise derive revenue from copies of the material for any other purpose.
3. The restricted waiver of copyright is not transferable and may be withdrawn in the case of breach of any of these conditions.

All enquiries about reproduction or use of any material in this booklet should be addressed to:

Drug Education Unit
Student Services and Equity Programs
NSW Department of Education and Training
3A Smalls Road
RYDE NSW 2112

The Drug Education Unit wishes to acknowledge the following organisations for their contribution to the research and development of this booklet:

The Drug and Alcohol Multicultural Education Centre (DAMEC)
The Health Education Unit, The University of Sydney
The Multicultural Programs Unit, NSW Department of Education and Training.

ISBN: 0 7313 70899
SCIS: 1046118

Research was undertaken by the NSW Department of Education and Training in 2000 to identify the drug education needs of students from language backgrounds other than English. Key questions included:

- Is there a difference in drug use between young people from language backgrounds other than English and young people from English speaking backgrounds?
- Are the risks of developing drug use problems the same for all students irrespective of cultural or linguistic background?
- Are specific teaching and learning activities required in drug education for students from language backgrounds other than English?

The research involved a review of available literature, focus group discussions with parents and students from backgrounds other than English, interviews with staff in NSW government schools and an analysis of existing school survey data obtained as part of a study on tobacco use (*Tobacco Use Among Ethnic (Arabic and Vietnamese) Adolescents in Years 10 and 11*, Rissel, C., McLellan, L. and Bauman, A. 1999).

The following information provides a summary of the findings from the research.

Is there a difference in drug use between young people from language backgrounds other than English and young people from English speaking backgrounds?

Australian data indicates that persons born overseas are less likely than Australian-born non-Indigenous people to consume alcohol, smoke or use illicit substances. (Higgins, K., Cooper-Stanbury, M. and Williams, P., 2000, *Statistics on Drug Use in Australia 1998*).

For example, students from western and south western Sydney schools were asked about tobacco use in a school survey. Students from language backgrounds other than English were less likely to experiment with and engage in cigarette smoking than were students from English speaking backgrounds (Rissel, C., McLellan, L. & Bauman, A., 1999, Tobacco Use Among Ethnic (Arabic and Vietnamese) Adolescents in Years 10 and 11).

However, any discussions about drug use and belonging to a particular language background other than English must take into consideration a number of complex issues.

Individuals, over time, take up a variety of aspects of the culture of the country or place in which they are living. The longer a person lives in Australia, the more similar their lifestyle, behavioural risk factors and corresponding health status are likely to become to those born in Australia.

Can ethnicity be used as an indicator of likely drug use?

In general, ethnicity is not a useful indicator of problematic drug use. The concept of ethnicity in itself is complex, as it can encompass a range of variables including cultural, language or linguistic background, country of birth, length of time in Australia, religion, nationality and ancestry. Ethnicity is only one of the many factors that shape an individual's identity.

Culture is not a simple or unitary concept; it is dynamic, responding to changes over time. It is a defining feature of every person's identity contributing to how they see themselves and the groups with which they identify. A person's understanding of their own and others' cultural identity develops over time and is shaped by the values and attitudes prevalent at home and in the surrounding community. Although cultural and linguistic background helps to shape an individual's values, including values about drug use, people also belong to subcultures based on a variety of groupings.

An individual's identity becomes more complex over time as they develop relationships with different groups, all of which influence values, attitudes and behaviours. Not all individuals who identify as having a particular cultural background share the same values, attitudes and behaviours about drugs. Family members and members of communities do not necessarily share common values, attitudes and behaviours. The diversity of attitudes and behaviours within groups from language backgrounds other than English may be as great as differences between groups. For instance, some drug use may be perceived by some young people to be part of 'youth' culture and therefore normal behaviour.

Research indicates that young people growing up in Australia today may have views about drug use that are different from their parents. Young people either newly arrived, or born in Australia, operate both within their parents' and local culture and may develop attitudes and behaviours not shared by their parents.

For example, a young person may identify with the cultural values and practices of his or her family, but also be influenced by the values and practices of his or her peer group. If alcohol use is a common behaviour within the young person's peer group, a high level of cultural identification may not stop this young person from drinking with his or her friends, even if the use of alcohol is not an accepted practice within their culture.

Are the risks of developing drug use problems the same for all students irrespective of cultural or linguistic background?

Although ethnicity and culture are not useful indicators of drug use, some young people from language backgrounds other than English experience drug related problems.

Risk factors

All drug use involves a degree of risk. Factors such as the person using the drug, the drug itself, how it is used and the environment in which it is used influence the degree of risk. Many young people will experiment with drugs but most will not progress to regular use of drugs or develop problematic drug use.

The literature identifies a number of environmental and individual characteristics that may contribute to some young people being particularly vulnerable to developing problematic drug use. Risk factors include:

- distant or hostile relationships with parents
- association with friends who encourage or tolerate drug use
- school failure or academic difficulties
- feelings of alienation from home, school and/or community
- a history of poor mental health or troublesome behaviour.

Vulnerability to problematic drug use has been shown to increase as the number of risk factors increases.

Additional factors such as intergenerational conflict, transition and resettlement, racism and cultural identity may increase vulnerability. These factors should be considered when seeking to understand the involvement in drug misuse and the drug education needs of young people from language backgrounds other than English.

• Intergenerational conflict

Family members from different generations may hold different views about a range of social issues including drug use. This may become a source of conflict between parents and children.

Concerns about intergenerational conflict are highlighted in the report by Kids Help Line 2000 which examined issues facing young people. This report states that phone calls from young people from language backgrounds other than English about relationships with family and friends were 30% greater than the figure recorded from callers from English speaking backgrounds for the same period. The calls from these young callers were most likely to be about conflict with adult family members.

Parents from language backgrounds other than English who were interviewed in the focus group research provided some additional insights into two sources of intergenerational conflict. They were extremely concerned that their children might grow up without a clear sense of identity because they had to operate in two or more cultures. They were also concerned about the perceived freedom of teenagers in Australia and their children's desire to consult their friends rather than their families when making decisions.

• Transition and resettlement

Periods of transition, such as change of country, community or school can be times of increased risk for some young people. Stress and uncertainty arising from transition and resettlement associated with the migration process can impact on families over a period of several years, not just in the initial resettlement period. Young people from backgrounds other than English consistently identify family resettlement as stressful and often cite relief of negative feelings caused by stress as a reason for drug use.

In a school smoking survey (Rissel et al, 1999) students were asked to give reasons for smoking. Students from language backgrounds other than English more frequently rated providing relief from negative feelings or problems such as depression, loneliness, anxiety, stress, anger, school or family troubles as reasons for smoking than did students from English speaking backgrounds.

Young refugees and others experiencing war and conflict in their countries of origin may also suffer stress caused by interrupted schooling, homelessness, loss of a parent or other family member and physical or emotional problems related to trauma and displacement. Such experiences may also add to their vulnerability in relation to drug taking.

- **Racism**

Young people from minority groups can be the subject of harassment or racism. Researchers have noted that media portrayals focussing on drug problems in 'ethnic youth gangs' may establish and reinforce inaccurate stereotypes about drug use and minority youth groups. Victims of such racism may exhibit hostile and defensive behaviours associated with drug use.

- **Cultural identity**

All young people need to establish a sense of identity. This can be particularly challenging for students from minority cultures in that an individual's sense of identity is grounded in one's own cultural identity.

In a culturally diverse society like Australia, individuals may have several identities depending on the prevailing group, community or sub-cultural group allegiances. These identities may include language background, cultural heritage, ancestry, birthplace of self or parents, religious or social affiliation and as a member of Australian society. For young people coping with the challenges involved in the ongoing process of resettlement, establishing identity in a new physical, linguistic and cultural environment may be particularly difficult and stressful.

Students from language backgrounds other than English (Rissel et al, 1999) more frequently gave reasons for smoking associated with image or identity (such as presenting an identifiable image to others or trying to portray themselves as they would like to be seen) than did students from English speaking backgrounds.

Protective factors

In addition to risk factors research has identified some factors that may protect young people from developing drug use problems. Protective factors apply to all young people and include:

- having a sense of belonging to school or another social institution
- having at least one close relationship with a caring adult

- being a member of a peer group that discourages drug use.

Research also indicates that parenting practices used by some parents from language backgrounds other than English, such as high care and high protection, may protect against early drug use.

The specific factors associated with young people from language backgrounds other than English being less likely to smoke tobacco (Rissel et al, 1999) were linked to parenting practices. These are:

- *spending less than three evenings a week out with friends*
- *having less than \$20 a week pocket money*
- *having rules at home about smoking.*

Findings from a number of other Australian studies have confirmed that parental enforcement of non-smoking rules at home, a strategy used in particular by some parents from language backgrounds other than English, is a protective factor against smoking. These research findings reinforce the importance of parenting practices and the family as a significant influence on young people's drug use.

Are specific teaching and learning activities required for drug education for students from language backgrounds other than English?

Research has found that some drug education programs can be successful in delaying and preventing the uptake of drugs, including alcohol, tobacco and cannabis with all students.

Components of effective drug education

Components of these effective drug education programs include:

- providing up-to-date and accurate information on drugs to enhance knowledge
- providing opportunities to practise resistance skills, such as refusals and assertiveness
- teaching personal skills, such as decision-making, problem solving or goal setting
- enhancing social skills, such as using non-verbal cues, conversational skills or complimenting others
- using interactive teaching and learning strategies which encourage students to interrelate with each other.

Interactive teaching and learning activities include small group activities, class discussions that involve questioning techniques requiring students to justify statements, and role rehearsal that includes a combination of teacher demonstration, behaviour rehearsal, feedback and reinforcement.

What are some other issues for parents and young people from language backgrounds other than English?

Focus group discussions with parents and students from language backgrounds other than English about drug education identified communication and access to information as important issues.

Some parents said that communicating with their children about drugs was difficult. Their reasons included:

- lack of a common language which is sufficiently developed to discuss complex and sensitive issues (the child may not speak the parent's first language fluently enough and the parent is not able to use English at the level required)
- they perceive that their children know more about drugs than they do
- there may be 'shame' surrounding issues of drug use
- drugs are generally not discussed within their community.

Young people from language backgrounds other than English confirmed that they would be unlikely to discuss drug issues with their parents. Some said that it was a 'taboo' subject while others feared being suspected of using drugs or of eliciting a strong emotional response from their parents if they raised the topic.

Some parents said that they were unaware of available drug services or did not know how to access services. Barriers identified to accessing information and services include:

- a limited facility with English
- a general lack of awareness of the health care system or how to access information
- differences between the cultural attitudes, values and norms of the health care providers and their clients from various backgrounds.

Parents requested information in their own languages. They asked for information about drugs and their effects, suggestions about how to handle common scenarios and how to get help if necessary. Both the parents and students from the focus group discussions also said that schools could play a significant role in providing this information.

A preference for interactive activities in drug education classrooms has been emphasised by students in a number of studies. Many indicated that they are interested in discussing the issues raised in drug education at school but that their experience of drug education was teacher centred rather than interactive. Students favoured stimulating and accessible approaches, which allowed for open discussion and the development of an environment where they felt comfortable asking questions.

Successful strategies with students from backgrounds other than English

Research from the USA indicates that tailored and culturally sensitive programs made greater gains in delaying drug uptake. Specific strategies involved:

- adjusting the reading level of materials
- using graphics and stories representative of the cultural groups involved
- modifying language to make it more accessible to the students
- choosing role rehearsal scenarios relevant to the students' experience
- using examples appropriate to the cultural groups involved.

Two approaches to drug use prevention were tried with young people from minority backgrounds in New York (Botvin, G., 1995, 'Drug abuse prevention in school settings', in Drug Abuse Prevention with Multiethnic Youth, Eds G. Botvin, S. Schinke & M. Orlandi). These were a generic skills training prevention approach and a culturally focused prevention approach. The major difference between the approaches was the way in which they were taught. The culturally focused approach used mediums such as myth and contemporary story telling. Drug related high-risk problems that were actually faced by early adolescents in the environment of New York were posed. Both approaches were successful but there was lower drug uptake and drug use over time with students who received the culturally focused intervention.

Interactive strategies may also be especially effective in classrooms with young people from diverse cultural and linguistic backgrounds. They allow opportunities for life experience and background to be discussed in the classroom. Teachers are then able to clarify perceptions and correct myths if necessary, but also to validate and affirm a range of strategies that are effective for particular young people or groups.

What drug education teaching and learning practices have NSW teachers found successful?

Drug education is taught within Personal Development, Health and Physical Education (PDHPE), as part of a whole-school approach. This allows programs to be selected and adapted to meet the specific needs of the school's students, including those from backgrounds other than English.

Successful practices that support the language and learning needs of students from language backgrounds other than English include:

- using visual or concrete information, such as graphs, pamphlets, videos or pictures
- reinforcing important points with writing
- breaking down tasks and using only a few directions at a time and/or modifying activities
- using short activities with repetition rather than longer activities
- simplifying and explaining instructions and checking for meaning
- teaching essential new vocabulary before each unit or activity
- using structured formal lessons. For example, modelling an activity, then asking the class to complete an example before proceeding to independent work.

Information should be up-to-date to be believable to young people, including those from backgrounds other than English. Current drug education information may be obtained from sources such as drug education resources and appropriate Internet sites, magazines or newspaper articles and taped excerpts from news broadcasts or documentaries.

What research was involved?

The NSW Department of Education and Training undertook the following research.

- A search of the available literature on drug education issues and strategies for students from language backgrounds other than English.
- The analysis of existing school survey data obtained as part of a study on tobacco use (*Tobacco Use Among Ethnic (Arabic and Vietnamese) Adolescents in Years 10 and 11* Rissel, C., McLellan, L. and Bauman, A. 1999).
- Focus group discussions with students, parents and community members about drug education issues.
- A review of the most commonly used drug education resources in NSW government schools to identify culturally inclusive teaching and learning activities.
- Interviews with key staff in schools about drug education needs and strategies with culturally and linguistically diverse groups of students.

What directions does the research provide for drug education in a culturally diverse society?

The Personal Development, Health and Physical Education (PDHPE) syllabus and the Student Welfare Policy provide the framework for drug education and opportunities to promote and support the health and safety of all students in NSW government schools.

Drug education with students from all cultural backgrounds is more likely to be effective if the content is current and relevant, and activities include opportunities for students to develop social skills, resistance skills and enhanced knowledge. When developing culturally inclusive drug education it is important to consider:

- a supportive school environment
- cultural sensitivity
- interactive teaching and learning strategies
- informing and involving parents.

A supportive school environment

- Foster a sense of belonging and positive relationships between members of the school community.
- Establish appropriate procedures for dealing with racism, drug related issues or serious incidents.
- Support students over transition periods such as a change of school.
- Build links with suitable community agencies, such as area health drug and alcohol services.

Cultural sensitivity

- Be aware of the values and sensitivities of students.
- Set group rules that minimise the possibility of racially based comments and stereotyping during group discussion.
- Use students as rich sources of cultural knowledge.
- Consult professionals such as ESL teachers, community liaison officers, community information officers, ESL/multicultural consultants and interpreters to access valuable advice.
- Use parents and community members as important sources of cultural expertise.

Interactive teaching and learning activities

- Use teaching and learning activities that allow cultural differences and similarities to be sensitively explored and permit students to clarify their perceptions with each other and their teachers.
- Develop students' oral and social interaction skills that are essential for group work.
- Teach student group leaders to involve all students, including those who do not have the confidence to voice ideas, in group discussion.
- Support text-based learning with illustrations and visual resources.
- Introduce new or technical vocabulary and keep vocabulary lists for revision.

Inform and involve parents

- Consult local parent and community groups to develop culturally appropriate ways of involving parents in drug education. For example, run meetings in an environment comfortable for the parents.
- Provide parents and caregivers with drug education information in their own languages wherever possible. For example, Drug education–Information for parents and caregivers, *Parent Information Meetings for Primary Schools* and Family activity sheets from *Smoke screen* can be found on the Department of Education and Training's Intranet.
- Use recognised interpreters. Funds administered by Multicultural Programs Unit can be accessed to use either the Telephone Interpreter Service (131 450) or engage on-site interpreters from service providers such as the Community Relations Commission For a multicultural NSW (CRC) or the Department of Immigration and Multicultural Affairs.
- Encourage parent involvement in drug education from the earliest stages. For example, use homework activities where students interview or discuss aspects of drug education with their parents.

ISBN 073137089-9



9 780731 370894