



meeting DRUGS EDUCATION SELECT COMMITTEE

date 14 January 2008

agenda item number

Report of the Drugs Education Select Committee

Meeting with Dr Max Biddulph, Nottingham University

Purpose of the report

1. To provide Members of the Drugs Education Select Committee with the opportunity to consider issues arising from the meeting with Dr Max Biddulph , Centre for Study of Human Relations, School of Education, Nottingham University

Background

2. At a meeting on the 9 July 2007 Members identified a range of options available to them to collect information for the review. As part of the evidence gathering process, on 6 December Councillors Llewellyn Jones and Lonergan held a meeting with Dr Biddulph to enable them to examine the content and delivery of the current curriculum around drugs education in initial teacher training.

Issues

3. Dr Biddulph explained that the initial training of teachers had a strong emphasis on practical school based learning, supported by University based seminars and lectures. For the Post Graduate Certificate in Education this incorporates a period of 36 weeks in school which includes performing a variety of tasks and observations; teaching practice and school based inquiry. 12 weeks of university based activities addressing amongst other issues the specific teaching of subjects; professional studies; the physical, social and emotional development of pupils and social issues in education. The programme is prescribed by the Government with an emphasis on school based learning.
4. The nature of the programme and its content means that there is little time to induct teachers into drugs education and this usually takes the form of one evening lecture. The skills to educate young people about drugs are therefore acquired at a later time by qualified teachers when employed in school.
5. Personal Health and Social Education, which usually includes drugs education, is an area of interest for some teachers and requires highly skilled individuals who are most effective when they have understanding of the

issues, perhaps gained through life experience. Teachers who demonstrate an interest in PSHE usually are a self selecting group within a school and require skills/confidence and a range of teaching styles to be able to deliver an effective drugs education programme.

6. Schools have no uniform approach to PHSE teaching and it is often delivered in tutorial time by teachers who are not always comfortable or knowledgeable about the issues.
7. The National Curriculum and the use of targets and league tables have led to the marginalisation of the personal/spiritual area of education. *Academic achievement is seen by students, parents and schools as more important than PHSE.* In order for young people to develop into rounded adults it is necessary to receive life skills education and to develop good interpersonal skills to help resist peer pressure.
8. PHSE needs teachers with particular skills to connect with young people and requires the use of different teaching methods to be effective. Schools that frequently draft in outside specialists, whilst fulfilling the requirements of the PHSE curriculum, may not find it as effective as programmes where young people are able to build a relationship with the teacher.
9. It is necessary to have a more integrated curriculum between primary and secondary schools which give age appropriate teaching. Young people's perceptions of Sex and Relationships education is too little to late, the same is possibly true of drugs education.

Conclusions

10. Prescriptive Government policies have restricted time available during initial teacher training and in the PHSE curriculum within schools.
11. For a teacher to be able to deliver an effective drugs education programme as part of the PHSE curriculum, they should ideally choose to do it rather than have it forced on them.
12. The individual development of pupils is sometimes neglected in the pursuit of intellectual development.

Recommendation

It is recommended that

The Drug Education Select Committee review the summary of evidence received from the meeting and consider possible areas for recommendations.

Councillor Edward Llewellyn-Jones
Chair of the Drug Education Select Committee

Background papers: nil.