

# PERCEIVED KNOWLEDGE OF SLOVENIAN ELEMENTARY SCHOOL STUDENTS, TEACHERS, AND HEAD TEACHERS ABOUT DRUG ISSUES

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**Abstract:** *In this research study on a representative sample of Slovenian elementary school students (n = 1527), teachers (n = 163), and head teachers (n = 60), we examined how the responding groups assess their knowledge about drugs, prevention, drug use, and abuse. The data we gathered are similar to the data of a 1998 study carried out in Northern Ireland, entitled 'Drugs: what young people know'. In our study, students, teachers, and head teachers state that students acquire most of their knowledge about drug use and abuse in school, especially from teachers and school counsellors. However, a high share of the respondents thought that the emphasis was not strong enough. Almost half of the elementary school teachers in Slovenia (46.5%) believe that individual subject syllabuses do not contain enough goals and didactic recommendations encouraging the consideration of drug issues. In addition, international study results demonstrate that, during their undergraduate education, teachers do not acquire enough knowledge about drug issues (Allot and Paxton 2000). Therefore, it is not surprising that 61.5% of Slovenian elementary school teachers have expressed a need for additional training in the field.*

**Key words:** *drugs, drug prevention, knowledge about drugs, syllabuses, teachers*

## INTRODUCTION

According to available data, early adolescence (ages 12 to 14) is generally regarded as a critical risk period for the initiation of alcohol use (Kroutil et al., 2010; King and Chassin, 2007; Substance Abuse ..., 2014), with studies showing associations between a young first age of alcohol use and the occurrence of alcohol abuse or dependence (Chen et al., 2009; Substance Abuse ..., 2014). While few very young people take drugs, and though drug dependence by the age of 15 is extremely rare (Drug Use ... 2007, p. 9), a representative research study, "The 2011 European school survey project on alcohol and other drugs" (hereafter cited as ESPAD study) (Hibell et al., 2012), reveals that the prevalence of first cannabis use by the age of 13 in Slovenia is 7% (ibid.). Furthermore, data from the representative research study "Social determinants of health and well-being among young people: health behavior in school-aged children" (hereafter cited as HBCS study)

included a representative sample of 11-, 13- and 15-year-old students, although the questions pertaining to cannabis use applied only to the 15-year-olds (Currie et al., 2012). Moreover, of the Slovenian respondents, 7% of the 13-year-olds reported drinking alcohol at least once a week (ibid., p. 155), 10% of the 13-year-olds reported having been drunk at least twice in their lives, and 17% of the 15-year-olds reported having been drunk for the first time at the age of 13 or earlier. The authors of the HBCS study found that, in the countries participating in the study, including Slovenia, the "[p]revalence of drunkenness increased significantly between ages 11 and 15" (ibid., p. 154). The data relating to smoking tobacco show that, in Slovenia, 3% of 13-year-olds smoke at least once a week while, the share of 15-year-olds smoking at least once a week is 19.5% (ibid., p. 145). Fully 24.5% of 15-year-olds reported having first smoked at the age of 13 or earlier. Thus, in relation to smoking cigarettes, the authors of the HBCS study also found that, in the countries par-

ticipating in the study, including Slovenia, the “[p]revalence of weekly smoking increased significantly between ages 11 and 15” (ibid., p. 143).

Since the age of initiation of drug use is steadily declining, particularly for high prevalence drugs such as alcohol, tobacco and cannabis (Higgins et al., 2000; Degenhardt et al., 2000; HBCS study), and since the age of first use is potentially a good indicator of long-term harm (Foxcroft et al., 2004; Gfroerer et al., 2002; Kandel, 1984; Milam et al., 2013; Pederson and Skronidal, 1998; Strandheim, 2013), it is vitally important for schools to inform students about drug-related issues (Lessons Learned ..., 2002; Hočevar et al., 2014). The school is a social space, and its transmission of knowledge about drugs and drug use can have a significant impact on helping youths to make informed decisions as well as on shaping values and attitudes toward drug use (Schools ..., 2004, p. 21).

The primary role of schools is ‘[...] to teach skills, to impart knowledge and to establish a sound values base in relation to health and drug use [...]’ (Schools ..., 2004, p. 12). The information on drugs and their use that students are presented with in school, however, must be clear, science-based, culturally relevant, and provided in a timely manner (Political Declaration ..., 1998). Tobler (1992) states that drug education in schools is best taught by classroom teachers, as they have first-hand knowledge of students’ needs and developmental levels. Further, research shows that teachers’ qualifications are crucial to successful drug education (Sharp, 1994; Dusenbury and Falco, 1995; Tobler and Stratton, 1997; Shope, 2001; Denman et al., 2002; McBride, 2002; McBride, 2004; Tang et al., 2009; Dewhirst, 2013).

In order to answer the question of how much students in early adolescence, elementary school teachers, and head teachers in the Republic of Slovenia know about drugs and their consequences, we included relevant questions in the representative research study that we carried out in elementary schools in Slovenia as part of the project “The social atmosphere in school – the educational concept, preventing unwanted phenomena (violence, drugs) and evaluating preventive programs”. The primary purpose of this article is to compare data on the amount of knowledge about drugs and their use that students, teachers, and head teachers believe they have, where they have acquired this knowledge and whether they

think they need more knowledge. We have found no previous analysis of this issue in Slovenia.

## RESEARCH METHODS AND SAMPLE

The research study used a descriptive and causal non-experimental method. It consisted of a representative sample of students ( $n = 1527$ ; 54.4% 7th grade students and 46.6% 8th grade students; 55.9% girls and 44.1% boys), teachers ( $n = 163$ ), and head teachers ( $n = 60$ ). Teachers were included in the study since they are an important source of knowledge about drugs and because they are responsible for solving students’ learning problems, deciding on educational measures, examining educational work, and so on. Head teachers were asked to participate because, according to the law, they are responsible for the realisation of students’ rights and duties, since they head the teaching personnel, supervise school counselling, manage their schools’ cooperation with parents, decide on educational measures, encourage educators’ training and education, and are responsible for the legality of school work (Elementary School Act, 2006).

The average age of the participating students was  $M = 12.94$  ( $SD = 0.73$ ). For the purpose of this study, we created a questionnaire on the occurrence of violence and drugs in schools (hereafter cited as the questionnaire). It was sent to 92 elementary schools in Slovenia, which were selected according to regional and size criteria. The questionnaires were returned from 71 schools, which means that the response rate was 77%. There was a balanced representation of schools from urban and rural areas and of large and small schools. The students completed the questionnaires after their school classes in the presence of teachers. Anonymity was assured by handing the questionnaire to each student with an envelope enclosed. After completing the questionnaire, the student returned it in the sealed envelope. Meanwhile, teachers were also completing the questionnaires prepared for them. The students, teachers, and head teachers returned their completed questionnaires to school contact persons. All the responding groups were guaranteed anonymity, and their participation was voluntary. We obtained written consent from the parents whose children participated in the study.

The questionnaire on drug use for the teachers, head teachers, and students consisted of four evaluation

scales (how frequently students used drugs in schools, how frequently students used drugs in the vicinities of schools, knowledge that the respondents had about individual drugs and about how serious of a problem drugs were in the schools). In addition, the questionnaire included two Likert scales to establish the role of schools and families in preventing drug use among students, as well as three sections of questions about the level to which schools informed students regarding the harmful consequences of drug use, the punishments that should be imposed on students for transgressions related to drugs, and the availability of specific drugs.

The questionnaire for the students included three additional evaluation scales: how frequently individual students used drugs in schools, how frequently individual students used drugs in the vicinities of schools, and the experiences that the students had with specific drugs.

The data were analysed using the SPSS statistical package. The process involved the calculation of the degree of reliability (all the final versions of the questionnaire had sufficient reliability: Cronbach's alpha  $\geq 0.60$  and  $r_{tt} \geq 0.70$ ) and validity (the first factor explained over 20% of the variance).

The data are presented in frequency and structure tables, and the Pearson chi-square test was used to test the hypotheses. The tables show the valid responses of the respondents answering individual questions.

## RESULTS

The teachers and head teachers were asked whether they knew enough about drugs and the

**Table 1.** Do teachers and head teachers know enough about drugs and the methods and consequences of their use to confidently talk about them with their students or to lecture about them?

Do you know enough about drugs and the methods and consequences of their use to confidently talk about them with your students or to lecture about them?					
		yes	no	not sure	N
teachers	f	74	54	27	155
	f%	47.7%	34.8%	17.4%	100.0%
head teachers	f	38	14	7	59
	f%	64.4%	23.7%	11.9%	100.0%
N	f	112	68	34	214
	f%	52.3%	31.8%	15.9%	100.0%

methods and consequences of their use to confidently talk with their students or to lecture about them. Their responses are given in Table 1.

The data in Table 1 demonstrate that teachers and head teachers assessed their knowledge about drugs and the methods and consequences of their use differently. Almost two-thirds of the head teachers (64.4%) thought that they knew enough about drugs to have a confident talk about them with their students or to lecture about them. A little less than half of the teachers (47.7%) gave the same assessment of their knowledge, a third of them said that they did not have such knowledge, and 17.4% of the teachers were unsure about their level of knowledge. Nearly a quarter (23.7%) of the head teachers said that they did not have such knowledge, and almost 12% were not able to assess their level of knowledge. The difference between the responses of teachers and head teachers was not statistically significant ( $\chi^2 = 4.758$ ;  $df = 2$ ;  $p > 0.05$ ). A research study conducted in ten elementary schools involving 633 children aged nine to ten years, 33 teachers, and 320 parents in the UK by Allot and Paxton (2000) similarly showed that teachers lacked confidence, knowledge, and skills to talk about drugs with young people.

Next, head teachers and teachers were asked whether they believed they had enough knowledge to act appropriately in the event of an incident in school related to drugs and to counsel students and parents about what to do.

The teachers and head teachers differed statistically significantly ( $\chi^2 = 14.705$ ;  $g = 2$ ;  $p < 0.001$ )

**Table 2.** The teachers' and head teachers' assessment of whether they had enough knowledge to act appropriately in the event of an incident in school related to drugs and to counsel students and parents about what to do

Do you have enough knowledge to act appropriately in case of an incident in school related to drugs and to counsel students and parents about what to do?					
		yes	no	not sure	N
teachers	f	44	52	62	158
	f%	27.8%	32.9%	39.2%	100.0%
head teachers	f	33	15	12	60
	f%	55.0%	25.0%	20.0%	100.0%
N	f	77	67	74	218
	f%	35.3%	30.7%	33.9%	100.0%

in their assessments of whether they had enough knowledge to act appropriately in such a case. Over half of the head teachers (55%) believed that they had such knowledge, a quarter said that they did not have such knowledge, and a fifth of the head teachers could not assess their knowledge. A significantly smaller proportion of the teachers indicated that they had the necessary knowledge to take appropriate action and offer counselling with regard to both students and parents if an incident related to drugs occurred in school. More than a quarter of the participating teachers (27.8%) gave a positive answer, almost a third (32.9%) said they did not have such knowledge, and nearly 40% stated they could not assess their level of knowledge. A study carried out by Finn and Willert (2006), involving a sample of 103 teachers in middle schools and high schools in upstate New York, demonstrated that “[...] few teachers had training in or knowledge of how to respond to student drug use” (ibid., p. 39). Moreover, 49% of the teachers did not know how to get help outside the school for students who used drugs (ibid.).

The next question was about the differences between students, teachers, and head teachers regarding their assessment of their knowledge about drugs and the methods and consequences of their use.

The data in Table 3 show that the participating students were more confident of their knowledge about drugs than the teachers and head teachers. More than a tenth of the students (10.7%) believed that they knew a lot about drugs, something that only a little over 5% of the teachers and just under 7% of the head teachers believed. At the same time,

a significant number of the students (just under 29%) thought that they either had no such knowledge (9%) or that they only had very little (8.4%) or little (11.4%) such knowledge. The teachers and head teachers thought differently. Only 9% of the teachers reported that they knew little or very little about drugs, and only two head teachers (3.4%) thought they had little knowledge about drugs and the methods and consequences of their use. No head teacher believed that he or she had very little or no such knowledge. The differences between the groups were statistically significant at the level of  $p < 0.001$  ( $\chi^2 = 64.836$ ;  $df = 10$ ).

A similar research study called “Drugs: what young people know” (1998, hereafter referred to as Drugs) involved a large-scale survey of young people’s knowledge and awareness of illicit drugs and solvents in Northern Ireland. The study included 3,560 young people (10–17 years of age), 1,877 of whom were in the 10–13 age group. In the 10–13 age group, a fifth felt they knew nothing or very little about drugs, a quarter felt they knew a little but not enough, while over a third felt they knew quite a lot but were unsure of their knowledge. Seventeen per cent felt that they knew more than enough (ibid.).

Having asked the students how they assessed their knowledge about drugs, we proceeded with the question about where and from whom they had gained that knowledge. As Table 4 shows, school is by far at the top of the list, and almost half of the students (49.6%) stated that they had acquired most of their knowledge about drugs in school. The media are the second most common source of information (35.4%), home is third, and friends are

**Table 3.** *Students’, teachers’, and head teachers’ assessments of their knowledge about drugs and the methods and consequences of their use*

How much I know about drugs and the methods and consequences of their use								
		a lot	quite a lot	some-thing	little	very little	nothing	N
students	f	158	397	493	168	123	132	1471
	%	10.7%	27.0%	33.5%	11.4%	8.4%	9.0%	100.0%
teachers	f	8	54	80	10	4	/	156
	%	5.1%	34.6%	51.3%	6.4%	2.6%	/	100.0%
head teachers	f	4	27	26	2	/	/	59
	%	6.8%	45.8%	44.1%	3.4%	/	/	100.0%
N	f	170	478	599	180	127	132	1686
	%	10.1%	28.4%	35.5%	10.7%	7.5%	7.8%	100.0%

fourth. In the students' answers, the Internet came in relatively low on the list (chosen by just under 11% of the students).

**Table 4.** *Where have students acquired the most knowledge about drugs?*

I have acquired the most knowledge about drugs	f	f% of valid cases
at home	404	27.6
in school	727	49.6
on the Internet	159	10.9
from books	181	12.4
from the media	518	35.4
from what friends have told me	350	23.9
other	105	7.2

The next question we were interested in was who transmitted the knowledge to the students.

**Table 5.** *From whom have students acquired most of their knowledge about drugs?*

I have acquired most of my knowledge about drugs from	f	f% of valid cases
my parents	573	39.2
my class teacher	321	22.0
a teacher in school	358	24.5
school counsellors	138	9.4
the school's external collaborators	78	5.3
friends	210	14.4
classmates	143	9.8
television	523	35.7
printed media	225	15.4
brother, sister	91	6.2
other	53	3.6

The most frequently selected reply was that the knowledge was provided by school staff—the class

teacher, other school teachers, school counsellors or the school's external collaborators (61.2% combined)—followed by parents (39.2%), television (35.7%) and printed media (15.4%). Slightly less than 15% of the students said that friends were their source of information about drugs, and siblings also came in very low (6.2%). Other sources of knowledge were quoted by 3.6% of the surveyed students.

Our findings correspond with the findings of the Drugs (1998) study, in which the media were identified as a common source of information on drugs, although almost half of all young people (10–17 years of age) had discussed drugs with their parents, 33% with a teacher, and 23% with friends.

More than a third of the teachers (34.4%) had never thought about the question of whether the curriculum, within individual subject syllabuses and cross-curricular integration, emphasised drug issues enough (Table 6), and just under a fifth (19.1%) believed that the curriculum placed enough emphasis on drug issues. Almost half of the teachers (46.5%) thought that the emphasis was not strong enough. Moreover, half of the head teachers maintained that, within individual subject syllabuses and cross-curricular integration, there was insufficient emphasis on drug issues; 30% of them thought that there was enough emphasis, and a fifth of the head teachers had not thought about the question. The differences between the teachers' and head teachers' views were not statistically significant ( $\chi^2 = 5.398$ ;  $df = 2$ ;  $p > 0.05$ ).

For schools to be able to transmit the drug-related knowledge that the students want, teachers and other educators must be qualified to discuss

**Table 6.** *Teachers' and head teachers' views on whether or not the curriculum, within individual subject syllabuses and cross-curricular integration, emphasises drug issues enough*

Does the curriculum, within individual subject syllabuses and cross-curricular integration, emphasise drug issues enough?					
		yes	no	I haven't thought about it	N
teachers	f	30	73	54	157
	f%	19.1%	46.5%	34.4%	100.0%
head teachers	f	18	30	12	60
	f%	30.0%	50.0%	20.0%	100.0%
N	f	48	103	66	217
	f%	22.1%	47.5%	30.4%	100.0%

drug-related information. Therefore, we inquired whether the surveyed teachers, having insufficient knowledge, felt that they needed further training in drug issues. The responses given by the teachers and head teachers did not differ markedly: the majority of the teachers (61.5%) and head teachers (63.8%) were of the opinion that such additional training was necessary.

**Table 7.** *The teachers' and head teachers' views on the necessity of additional training on drug issues*

<b>Do you think that, not having enough knowledge, you need further training in drug issues?</b>				
		<b>yes</b>	<b>no</b>	<b>N</b>
teachers	<b>f</b>	96	60	156
	<b>f%</b>	61.5%	38.5%	100.0%
head teachers	<b>f</b>	37	21	58
	<b>f%</b>	63.8%	36.2%	100.0%
N	<b>f</b>	133	81	214
	<b>f%</b>	62.1%	37.9%	100.0%

**Table 8.** *Students' assessment of whether they need more knowledge about drugs*

<b>I need more knowledge about drugs and the methods and consequences of their use</b>	<b>f</b>	<b>f%</b>
<b>yes</b>	729	49.1
<b>no</b>	242	16.3
<b>not sure</b>	513	34.6
<b>N</b>	1484	100.0

When the students were asked whether they needed more knowledge about drugs and the methods and consequences of their use, almost half of them answered affirmatively. Just over a third were unsure whether or not they needed such additional knowledge, and 16.3% thought they did not. In the Drugs (1998) study, 81% of youths in the 10–17 age group answered that they would not mind receiving more information about drugs. Comparing the data from Tables 7 and 8, we can conclude that more students than teachers or head teachers thought they had enough knowledge about drugs and the methods and consequences of their use.

## DISCUSSION

In our research study, almost 30% of the students replied that they had little, very little, or no knowledge about drugs. A similar proportion

believed that they needed more such knowledge. These answers demand serious consideration. Almost half of the students (49.6%) said that they received knowledge about drugs in school, and more than sixty per cent (61.2%) said that they received it from their class teacher, other school teachers, school counsellors, or the school's external collaborators. Parents and television were the second and third most common sources of information, respectively. The responses show that school is the most important transmitter of knowledge about drugs. The collected data also draw attention to the need for schools to reconsider how to address the large number of students who lack adequate knowledge about drugs. The students' responses—shown in Tables 4 and 5—show that students also acquire knowledge about drugs from other sources, but these sources do not suffice or fulfil their expectations (83.7% of the students stated that they needed more knowledge about drugs).

Surveyed teachers (60.3%) stated they had some, little, or very little knowledge about drugs (Table 3). More than half of them (52.2%) indicated they did not have enough knowledge or were unsure whether they had enough knowledge about drugs to talk confidently about them with their students or to lecture about them (Table 1). Research shows that teachers' qualifications are crucial to successful drug education (Sharp, 1994; Dusenbury and Falco, 1995; Tobler and Stratton, 1997; Shope, 2001; McBride, 2004). Therefore, Slovenian teachers' lack of knowledge about drugs is a serious problem that must be approached in a relevant, expert manner. This is particularly important as various authors (Hawks et al., 2002; McBride, 2005) conclude that teachers acquire next to no knowledge about drugs during their undergraduate studies. We have not come across an analysis of this issue in Slovenia; however, the responses given by the teachers and head teachers in our study alert us to the fact that they did not gain such knowledge—or not to a sufficient degree—during their university studies. It is clear that the participating teachers working in Slovenian elementary schools did not acquire additional knowledge through continuing education either; fully 61.4% of the surveyed teachers and 63.8% of the surveyed head teachers stated that they needed additional training in drug issues (Table 7).

Almost half of the participating students (49.1%) thought they needed more knowledge about drugs (Table 8). The data show that school is the most important source of information about drugs, and a significant share of teachers (and head teachers) admitted that they have inadequate knowledge about drugs to teach about them. Thus, it is clear that teachers need continuing education on drugs for their professional work in schools. This is also one of the emphases in the Resolution on the National Programme on Illicit Drugs 2004–2009 (2004), which includes the recommendation that “special attention should be devoted to additional training [in drug issues] of pedagogical and non-pedagogical staff in educational institutions” (Resolution on ..., 2004, p. 3129).<sup>1</sup> However, there is no such recommendation in the Resolution on the National Programme on Illicit Drugs 2014–2020 (2014).<sup>2</sup> Our research findings suggest that such a recommendation should be made part of a national policy document of this sort. Another reason to support such a recommendation is the fact that less than half of the surveyed elementary school

students (49.1%) said that there were enough educators in their schools with adequate knowledge to react and counsel appropriately in the event of students’ troubles related to drug use.

As we have already stated, our data show—as do other expert and scientific texts—that school is the central (or at least a very important) factor for the prevention of drug (ab)use among students. However, schools do not do enough. They must do more than provide students with knowledge about drugs; they must help students to develop life skills and personal traits that can serve as drug abuse prevention. In view of this, we agree with the opinion that “[...] the strategy of the prevention of drug abuse and addiction to these and other psychoactive substances should be an integral part of educational activities carried out during the educational process in school [...]” (Resolution on... 2014, p. 13). It is, therefore, not surprising that teachers and head teachers desire more knowledge about drugs and are willing to receive additional training in this area.

1 The Resolution (2004) contains the observation that ‘continual training at undergraduate and postgraduate levels should be guaranteed regarding the treatment of illicit drug addicts’ (Resolution on ... 2004, p. 3137). However, there is no notice of undergraduate education of pedagogical and non-pedagogical staff in the area of drug prevention and education intended for the general population.

2 The Resolution (2014) does state, however, that in realizing the Resolution, we follow the principles of ensuring the conditions for responsible decision-making regarding drug use, especially among children and adolescents. The state realizes this principle by “allowing children and adolescents, parents and educators access to objective information, knowledge and skills” (ibid., p. 8). Teachers are not specified, but we assume that the term “educators” refers to them.

## REFERENCES

- Allot, R. & Paxton, R. (2000): Drug education in primary schools: putting policy and research into practice, *Health Education*, 100, 6, 242–251.
- Chen, C. Y., Storr, C. L. & Anthony, J. C. (2009): Early-onset drug use and risk for drug dependence problems, *Addictive Behaviors*, 34, 3, 319–322.
- Currie, C., Zanotti, C., Morgan, A., Currie, D., de Looze, M., Roberts, C., Samdal, O., R. F. Smith, O. & Barnekow, W. (eds.) (2012): *Social determinants of health and well-being among young people: Health Behaviour in School-Aged Children (HBSC) study: International report from the 2009/2010 survey*. Retrieved 5 April, 2013 from [http://www.euro.who.int/data/assets/pdf\\_file/0003/163857/Social-determinants-of-health-and-well-being-among-young-people.pdf](http://www.euro.who.int/data/assets/pdf_file/0003/163857/Social-determinants-of-health-and-well-being-among-young-people.pdf).
- Degenhardt, L., Lynskey, M. & Hall, W. (2000): Cohort trends in the age of initiation of drug use in Australia, *Australian and New Zealand Journal of Public Health*, 24, 4, 421–426.
- Denman, S., Moon, A., Parsons, C. et al. (2002): *The health promoting school: policy, research and practice*. London: Routledge Falmer.
- Dewhirst, S., Picketts, K., Speller, V., Shepherd, J., Byrne, J., Almond, P., Grace, M., Hartwell, D. & Roderick, P. (2013): Are trainee teachers being adequately prepared to promote the health and well-being of school children? A survey of current practise, *Journal of Public Health*, 36, 3, 476–475.
- Drug use and related problems among very young people (under 15 years old). (2007): Retrieved 16 June, 2013 from [http://www.emcdda.europa.eu/attachements.cfm/att\\_44741\\_EN\\_TDSI07001ENC.pdf](http://www.emcdda.europa.eu/attachements.cfm/att_44741_EN_TDSI07001ENC.pdf).
- Drugs: What young people know. Report on knowledge and awareness among 10-17 year olds in Northern Ireland. (1998): Belfast: Health Promotion Agency for Northern Ireland. Retrieved 7 April, 2013 from [http://www.drugsandalcohol.ie/5939/1/2644-2826\\_Drugs\\_what\\_young\\_people\\_know\\_NI.pdf](http://www.drugsandalcohol.ie/5939/1/2644-2826_Drugs_what_young_people_know_NI.pdf)
- Dusenbury, L. & Falco, M. (1995): Eleven components of effective drug abuse prevention curricula, *Journal of School Health*, 65, 10, 420–431.
- Elementary School Act. (2006): Official Gazette of the Republic of Slovenia, No. 81/2006, 8662–8673.
- Finn, K. & Willert J. H. (2006): Alcohol and drugs in schools: teachers' reactions to the problem, *Phi Delta Kappa*, 88, 1, 37–40.
- Foxcroft, D., Allen, D. & Coombes, L. (2004): *Preventing alcohol and drug misuse in young people: adaptation of the Strengthening Families Programme (SFP) for use in the UK*. Oxford: Oxford Brookes University.
- Gfroerer, J., Wu, L. & Penn, M. (2002): *Initiation of marijuana use: trends, patterns and implications*. Rockville: SAMHSA.
- Hawks, D., Scott, K., McBride, N., Jones, P., Stockwell, T. (2002): *Prevention and psychoactive substance use: a selected review of what works in the area of prevention*. Geneva: World Health Organization.
- Hibell, B., Guttormsson, U., Ahlström, S., Balakireva, O., Bjarnason, T., Kokkevi, A. & Kraus, L. (2012): *2011 ESPAD report: substance use among students in 36 European countries*. Stockholm: The Swedish Council for Information on Alcohol and Other Drugs.
- Hočevar, A., Kovač Šebart, M. & Mažgon, J. (2014): The availability and use of drugs in Slovenian primary schools and in vicinities close to schools, *Hrvatska revija za rehabilitacijska istraživanja*, 50, 1, 26–35.
- Kandel, D. B. (1984): Marijuana users in young adulthood, *Archives of General Psychiatry*, 41, 2, 200–209.
- King, K. M. & Chassin, L. (2007): A prospective study of the effects of age of initiation of alcohol and drug use on young adult substance dependence, *Journal of Studies on Alcohol and Drugs*, 68, 2, 256–265.
- Kroutil, L., Colliver, J. & Gfroerer, J. (2010): *OAS Data Review: Age and cohort patterns of substance use among adolescents*. Rockville, MD: Substance Abuse and Mental Health Services Administration, Office of Applied

Studies.

- Lessons Learned in Drug Abuse Prevention: Global Review. (2002): New York: United Nations.
- McBride, N. (2003): A systematic review of school drug education, *Health Education Research*, 18, 6, 729–742.
- McBride, N. (2005): The Evidence Base for School Drug Education Interventions. In Stockwell, T. (Ed.), *Preventing harmful substance use: the evidence base for policy and practice*. (pp. 101-110). Chester: John Wiley & Sons, Ltd.
- McBride, N., Farrington, F., Midford, R., Meuleners, L. & Phillips, M. (2004): Harm minimization in school drug education: final results of the school health and alcohol harm reduction project (SHAHRP). *Addiction*, 99, 3, 278–291.
- Milam, A. J., Furr-Holden, D. C., Bradshaw, C. P., Webster, D. W., Cooley-Strickland, M. C. & Lear, P. J. (2013): Alcohol environment, perceived safety, and exposure to alcohol, tobacco, and other drugs in early adolescence, *Journal of Community Psychology*, 41, 7, 867–883.
- Pedersen, W. & Skrondal, A. (1998): Alcohol consumption debut: Predictors and consequences, *Journal of Studies on Alcohol and Drugs*, 59, 1, 32–42.
- Political Declaration on the Guiding Principles of Drug Demand Reduction. (1998): New York: United Nations, General Assembly.
- Porath-Waller, A. J., Beasley, E. & Beirness, D. J. (2010): A meta-analytic review of school-based prevention for cannabis use, *Health Education & Behavior*, 37, 5, 709–723.
- Resolution on the National Programme on Illicit Drugs 2004–2009. (2004): Official Gazette of the Republic of Slovenia, No. 28.
- Resolution on the National Programme on Illicit Drugs 2014–2020. (2014): Official Gazette of the Republic of Slovenia, No. 24/14.
- Schools: School-based drug education for drug abuse prevention. (2004): New York: United Nations.
- Sharp, S. (1994): *Alcohol education for Young People: A Review of the Literature from 1983–1992*. Berkshire: National Foundation for Education Research.
- Shope, J., Elliot, M., Raghunathan, T. & Waller, P. (2001): Long term follow-up of high school Alcohol Misuse Prevention Program's effect on students subsequent driving. *Alcoholism: Clinical and Experimental Research*, 25, 3, 403–410.
- Strandheim, A. (2013): *Substance use and health problems in adolescents: The Young-HUNT study*. Nord-Trøndelag: Norges teknisk-naturvitenskapelige universitet, Det medisinske fakultet, Institutt for samfunnsmedisin.
- Tang, K. C., Nutbeam, D., Aldinger, C., et al. (2000): Schools for health, education and development: a call for action, *Health Promotion International*, 24, 1, 68–77.
- The TEDS Report; Age of Substance Use Initiation among Treatment Admissions Aged 18 to 30. (2014): Rockville, MD: Substance Abuse and Mental Health Services Administration, Centre for Behavioral Health Statistic and Quality.
- Tobler, N. (1992): Drug prevention programs can work: research findings. *Journal of Addictive Diseases*, 11, 3, 1–28.
- Tobler, N. & Stratton, H. (1997): Effectiveness of school-based drug prevention programs: A meta – analysis of the research, *Journal of Primary Prevention*, 18, 1, 71–128.
- Ward, N. L. & Linke L. H. (2011): Commentary: understanding adolescent health-risk behaviors from a prevention science perspective, *Journal of the American Academy of Psychiatry and the Law*, 39, 1, 53–56.

## **SAMOPROCJENA ZNANJA UČENIKA OSNOVNIH ŠKOLA, NASTAVNIKA I RAVNATELJA O DROGAMA I PITANJIMA VEZANIM UZ DROGE**

**Sažetak:** U ovom istraživanju, na reprezentativnom uzorku učenika osnovnih škola ( $n = 1527$ ), nastavnika ( $n=163$ ) i ravnatelja ( $n = 60$ ), istražili smo kako sudionici procjenjuju svoje znanje o drogama, prevenciji, konzumaciji i zlouporabi droga. Podaci koji su prikupljeni slični su podacima istraživanja provedbenog u Sjevernoj Irskoj pod nazivom 'Droge: što mladi ljudi znaju' (1998). U ovom istraživanju, učenici, nastavnici i ravnatelji navode da učenici najviše znanja o konzumaciji i zlouporabi droga stječu u školi, posebno od nastavnika i stručnih suradnika. Međutim, veliki udio sudionika smatra da naglasak nije dovoljan. Gotovo polovica nastavnika osnovnih škola u Sloveniji (46.5%) vjeruje da pojedinačni nastavni planovi i programi predmeta (kurikulumi) ne sadrže dovoljno ciljeva i didaktičkih preporuka koje se bave pitanjima droga. Nadalje, rezultati inozemnih istraživanja pokazuju da, tijekom svojeg preddiplomskog obrazovanja, nastavnici ne stječu dovoljno znanja o pitanjima vezanim u droge (Allot i Paxton, 2000). Stoga ne čudi da je 61.5% nastavnika slovenskih osnovnih škola izrazilo potrebu za dodatnim edukacijama u ovom području.

**Ključne riječi:** droge, prevencija konzumacije droga, znanje o drogama, kurikulumi, nastavnici