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TEACHING RESPONSIBLE DRUG AND ALCOHOL USE

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ABSTRACT

Various philosophies of alcohol and drug education have been attempted in schools, colleges and universities—generally without much success. They include abstinence, socio-economic, alcoholism, alternatives, control of consumption/prohibition models. Seeing that most young and older adults today in the United States consume at least one psychoactive drug on a daily basis, it is recommended that the philosophy of responsible use and choices concerning alcohol and other drugs be instituted in schools, colleges, universities and communities. This philosophy and educational program would include the responsible use of prescription drugs, over-the-counter medications, coffee, tea, and responsible use and choices concerning recreational drugs such as marijuana, alcohol, and tobacco.

INTRODUCTION

Abraham Maslow (11) proposes that we all have basic needs in a hierarchy which must be met in order to be healthy from a physical, mental, and social aspect. On the bottom is the need for food, oxygen, elimination, water, and sex. These are sometimes called physiological needs. When an individual is hungry, the need to eat arises and the person finds some way to meet that need. After the need has been met, in this case by the person eating, the craving for food decreases for a while. However, this need felt again after a few hours and the urge to fulfill it again arises. Andrew Weil (14) also feels that we have a basic need to alter states of consciousness which we need to meet every so often in order to feel fulfilled. He feels that there is evidence for this by the fact that all cultures have devised methods for changing conscious awareness through a variety of methods.

If you examine ancient cultures, you will notice that all of them appear to have produced changes in conscious states and awareness through religious, medicinal, or recreational vehicles. Many

cultures developed meditation, chanting, singing, physical activities, praying, or dancing to change conscious states as these activities produce changes in conscious states or a "high".

Other cultures relied on various drugs and herbs, or a combination of activities and mood altering substances, to change conscious states. Alcohol has been used for centuries in almost every culture at one time or another for religious and medicinal purposes. Cannabis was found in ancient China, the Middle East, and Greece and was used for medicinal and religious purposes. Opiates were used by the Romans and Greeks for medicinal purposes similar to modern uses.

Mushrooms were used by South Americans, ancient Hebrews, Greeks, Siberians, and Persians for religious and recreational purposes. Tobacco was used in religious ceremonies and for medicinal and recreational purposes in South America and Europe. Most of the mind altering drugs used today, with the exception of amphetamines, barbiturates, and tranquilizers, have been around since the beginning of prerecorded history (5).

As professionals involved in the prevention and treatment of alcohol and drug abuse, perhaps we need to ask ourselves, "Why don't more people use mind altering substances?", rather than, "Why do people use drugs?" if, in fact, the need to change conscious awareness is a basic need.

Since most cultures do socially sanction some mind altering substances for recreational, religious, or medicinal purposes, and since there are many vehicles in society, including peer pressure, mass media, and role modeling, which encourage the use of various substances, it is surprising that there is not more drug abuse in some cultures.

Prevention Models of Drug and Alcohol Use and Abuse

Over the centuries, there have been many methods for attempting to change drug taking behaviors (4). One of the most common methods of attempting to change drug use behavior is telling people not to consume the substance.

1. Abstinence model. A common model of drug/alcohol education is, "Don't do it." There is an assumption among educators that if you tell students not to drink or use drugs for moral, religious, health, or other reasons, they will abstain. Of course, the prohibition of alcohol in America proved that this method is not effective. Cannabis is used on a regular basis in many countries by a sizable minority of youth even though it is illegal.
2. Socio-economic model. This model gives statistics on a variety of problems encountered when people drink or use drugs irresponsibly. Facts such as, over 50% of the fatal automobile accidents in the United States are caused by drunken drivers and the large number of crimes committed under the influence of alcohol, are presented in this model. Facts such as, large amounts of money are lost each year by industry due to alcohol abuse and alcoholism among workers and that many western societies have huge expenditures resulting from health costs such as treatment, rehabilitation centers, and social problems such as family break-ups, are also

communicated in this approach. Facts concerning heroin dependent people also causing similar damage to society are also presented in the socio-economic model of alcohol/drug education. Over time, this method has not proven successful as many educators have found that knowledge about a subject does not change behavior (2, 6, 7, 8, 9, 13).

3. Alcoholism/drug abuse approach. Many audio-visual productions and pamphlets concerning alcohol and drug education stress that alcoholism or drug abuse will almost certainly occur if individuals consume a substance. In some of these productions, it is implied that if you drink, you will become an alcoholic, or if you use marihuana, severe physiological problems will result and you will then graduate to heroin. There is little time or space given to the positive effects of alcohol or other drugs as most of the material focuses on the negative physiological and psychological effects. This type of approach is usually ignored by most students.

4. Alternatives approach. The alternatives approach to alcohol and drug education proposes a variety of alternatives for the individual to become involved with rather than consuming alcohol or other drugs. Alternatives to drinking or drug taking can be successful, in some cases, as long as they are available. This approach, however, often does not change attitudes toward substance use and abuse and does little to change use patterns, other than lessen the amount of alcohol or drugs consumed while the individual is involved with the alternative. Another problem with the alternatives approach is the fact that drinking, in particular, is tied up with many sports activities (2, 4, 10, 12, 13).

5. Control of consumption or prohibition. Throughout history, many of the common substances used in many countries today have, at some time or, are at present, prohibited in one culture or another. Alcohol is prohibited in Moslem countries and marihuana is illegal in most western cultures. Tobacco and even coffee were prohibited at one point in Europe. Opiates are also illegal in many of the countries of the world where at one time they were considered to be a recreational or over-the-counter medication drugs used by many.

However, when a society makes a substance illegal, against the will of many of its members, a number of problems arise.

1. A black market is established to sell the drug.
2. Organized crime procures and supplies the drug for profit.
3. The price of the drug goes up.
4. The purity of the drug goes down.
5. Law enforcement spends much time searching for, seizing, and destroying the illegal product.
6. Otherwise honest and law abiding citizens are arrested.
7. There is a general flaunting of other laws.
8. In general, hostility and lack of respect for authority figures occur.
9. Society wastes much time, money, and energy in preventing the use of the substance.

Because these results of making a substance illegal have occurred throughout history without appreciably preventing people from using the illegal substance, perhaps making a substance illegal is not the best way of preventing continued drug use, misuse, and abuse. Because people use a variety of substances, whether or not they are considered legal, the teaching of responsible and safe use of these substances might be a better solution to a variety of problems related to drug use for individuals and society.

RESPONSIBLE DRUG AND ALCOHOL USE

Since there has been a growing awareness that individuals do, in fact, use a variety of substances in most cultures and that at least one psychoactive substance is sanctioned for recreational use in most countries, some educators have begun to develop the concept of teaching individuals to make choices concerning the responsible and safe use of substances if they do choose to use them. Responsible and safe use would include use that does not harm oneself or one's society, either physically, psychologically, or sociologically.

By the end of the 1970's, several alcohol and drug education programs in the United States reflected this philosophy. The JC's Operation Threshold encourages its members (who are in their 20's and 30's) and others to consume alcohol in a responsible way through small group discussions, public lectures, and educational pamphlets (3).

The author, at Indiana University developed, in conjunction with input from a committee, a four hour module, *Booze and You's* (7), for its university students and integrated it into the existing residential life, educational structure without relying on outside or government funding.

This program contains a cartoon film, *Booze and You's*, which gives hints for responsible drinking, objective, factual information, several value clarifications, information about mixing drugs with alcohol, and discussion exercises.

A government grant sponsored a program in Somerville, Massachusetts, USA called CASPAR in both the public schools and the community. It describes the nature of alcohol, hints for using it responsibly, and alternatives to drinking and drug taking (1).

These are a few of the many programs with the philosophy of responsible substance use which were developed during the mid-1970's for different age groups in the United States.

Suggested content in the area of responsible drug and alcohol use education for any group, as adopted from many sources, would include the following:

1. Objective, factual information concerning the positive and negative effects of drugs on physical, mental, and social health.

2. Information concerning the various religious, medicinal, cultural, and personal reasons why individuals do and do not consume various substances.
3. Methods for using and serving alcoholic beverages in a responsible manner and for using other substances in a responsible way.
4. Ideas and methods for responsible alternatives to drinking and drug use.
5. Responsible abstinence and the rights of the non-drinker or non-drug user.
6. The learning of problem solving skills to cope with problems of daily living other than alcohol or other substance use.
7. The clarification of values concerning ones' own present or possible future drinking or drug or non- drinking or non-drug taking behavior.

For the educator, in any setting, to teach in the area of drug education, he/she must also be aware of his/her own values or biases concerning drinking and drug taking so that information may be presented in an objective manner.

Establishing a Program with the Philosophy of Responsible Drug Use

Teaching responsible drug and alcohol use needs to include many factors to be successful and accepted by a community. It is important to get a variety of people involved in curriculum development before such a program is implemented in a community and the following steps are suggested.

- A group of interested parents, teachers, students and community leaders need to form a steering committee. In the university setting this would include faculty, staff, students and administration.
- This committee needs to carry out a need study to determine local problems.
- The type and philosophy of the educational program also needs to be discussed.
- Out of this group, a curriculum committee should be formed to develop the program.
- The next step, after approval by the school board or committee, is to do a pilot project in selected classes
- After this pilot, an evaluation needs to be done
- If the evaluation has been shown not to be detrimental to students or increased irresponsible behavior, the program can then be instituted in the total school system.
- Frequent evaluations are then necessary to determine the effect of the program (4, 7, 9).

Because this philosophy has only been recently introduced to communities and schools, its evaluation has not, as yet, been forthcoming and longitudinal studies over this decade will need to be accomplished to determine its effectiveness.

However, many educators now in the area of alcohol and drug education feel that, since most people do in fact consume a drug each day, we need to help teach the use of substances in a responsible and safe manner as an aid in curbing many societal and personal problems related to the irresponsible consumption of various substances.

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- 7a. NOTE: The *Booze and You's* program is now available on IUScholarWorks Repository: <http://hdl.handle.net/2022/17183>. The *Booze and Yous* film is available at IU film archives: <http://webapp1.dlib.indiana.edu/vss/view.do?videoId=VAC2521>
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