

VII.Observations and Recommendations

17. Enhancing the positive impact of the Scheme

Overview

17.1 As discussed in the preceding chapters, although it is still premature at this stage to say conclusively that the Scheme had a beneficial impact on students' knowledge of drugs, perception of drugs, attitude towards fighting drugs and their drug taking behaviour, the Scheme was perceived by students, parents and teachers to be effective in building anti-drug culture, triggering motivation of those who had abused drugs to quit drugs and enhancing students' resolve to refuse drugs. Besides, most students believed that their personal data were protected and were not worried about the process of giving urine sample. For students sampled for drug testing, most of them were satisfied with the drug testing process. Indeed throughout the six months when the Scheme was implemented, there was not a single incident of leakage of personal data related to the Scheme. The survey findings also showed that the Scheme did not have an adverse impact on students' trust in schools and teacher-student relationship. Furthermore, more than half of students, parents, teachers and principals in Tai Po were of the view that school drug testing should be conducted.

17.2 In addition, it is noted that the total number of reported drug abusers in Hong Kong aged under 21 in first half of 2010 had decreased by some 20% as compared to the same period of last year, representing a reversal of a rising trend since 2004. This may be a result of the much escalated anti-drug efforts in recent years in preventive education and publicity, treatment and rehabilitation, legislation and enforcement, evidence-based research, and external cooperation, a five-pronged approach coupled with collaborative endeavours across different sectors of the community. In this regard, school drug testing has played a major pioneering part in Tai Po.

17.3 In the circumstances, it is desirable to continue implementing the Scheme in secondary schools in Tai Po for the current school year, to reinforce grounds gained last school year and to sustain the overall momentum of school drug testing. The experience to be gained will be valuable for further developing school drug

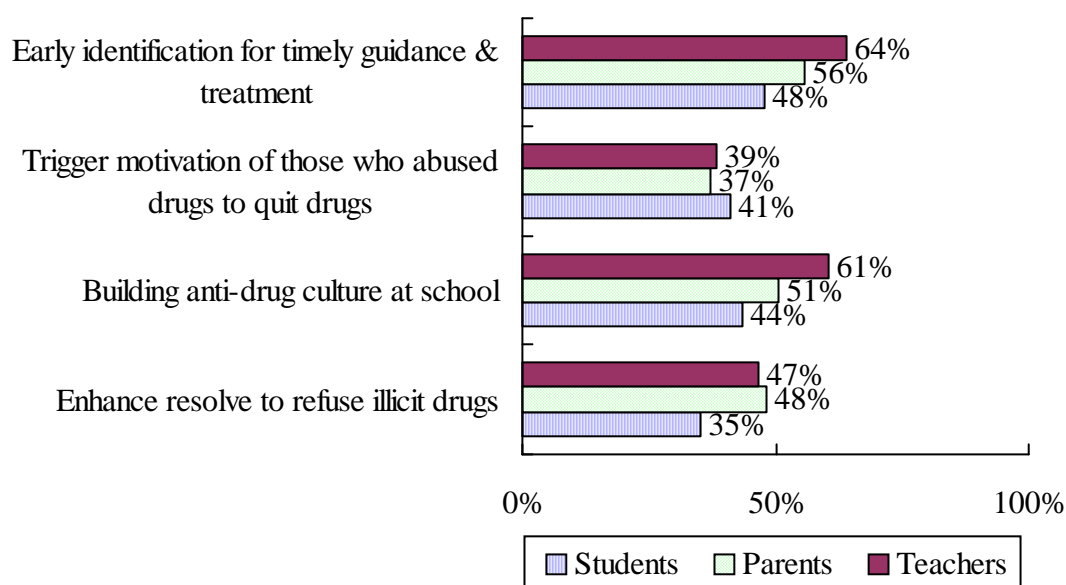
testing in secondary schools in Tai Po or those in other districts.

17.4 As discussed above, the focus of the Scheme should be educational in nature, aimed at helping students cultivate positive attitudes and correct values, as part of the students' whole personal development. Drug testing should not be seen as a standalone panacea, but it can be a key preventive and deterrent part of a comprehensive programme to implement the healthy school policy. In addition, through a comprehensive healthy school programme, teachers, school social workers, parents and students of the participating schools should be engaged in enhancing their ownership of and involvement in school drug testing, with every effort made to enhancing effectiveness school drug testing, while minimizing impact on learning and teaching. These are discussed in the paragraphs below.

Meeting expectations of stakeholders

17.5 There is a general perception and expectation among teachers, students and parents that the Scheme should enable early identification of students who had abused drugs. The June 2010 survey findings showed that a higher proportion of students (48%), parents (56%) and teachers (64%) expected that school drug testing should enable early identification of students who had abused drugs for timely guidance and treatment, as compared with other purposes of the Scheme, such as triggering motivation of those who had abused drugs to quit drugs.

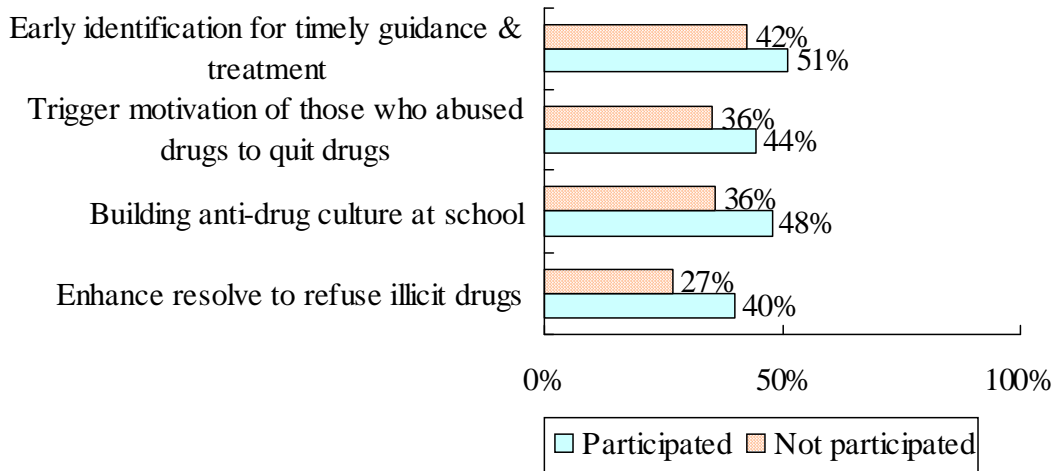
Percentages of stakeholders in Tai Po by expectation on school drug testing



17.6 In light of such expectations, many teachers, students and parents expressed the views that the Scheme was not effective because no student was tested positive. They pointed out that early identification of students who had abused drugs was not possible given that participation in the Scheme was voluntary. While no student was so identified under the Scheme, the Project Team recognized a substantial increase of self-referral cases to seek help in Tai Po pursuant to the implementation of the Scheme. The Team believed that by triggering motivation to seek help, early identification was facilitated.

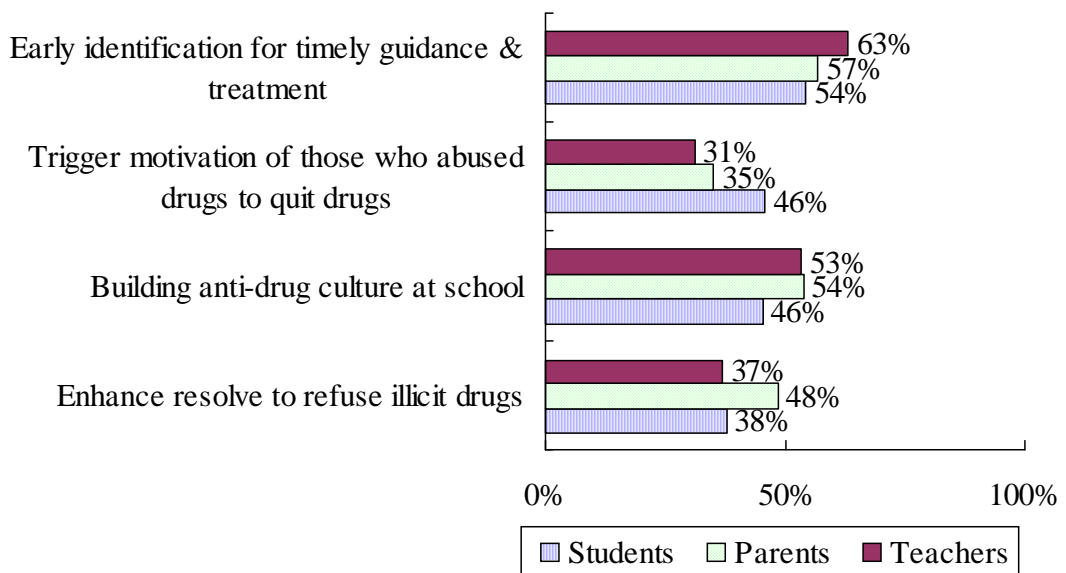
17.7 In addition, students who had participated in the Scheme had a higher expectation on the school drug testing than those who had not participated. More than half (51%) of students who had participated in the Scheme expected that school drug testing would enable early identification of students who had abused drugs for timely guidance and treatment. Only 27% of them expected that school drug testing would help enhance resolve of students to refuse drugs.

Percentages of students in Tai Po by expectation on school drug testing



17.8 For those outside Tai Po, a higher proportion of students (54%), parents (57%) and teachers (63%) also expected that school drug testing would enable early identification of students who had abused drugs for timely guidance and treatment, compared to other purposes of the Scheme.

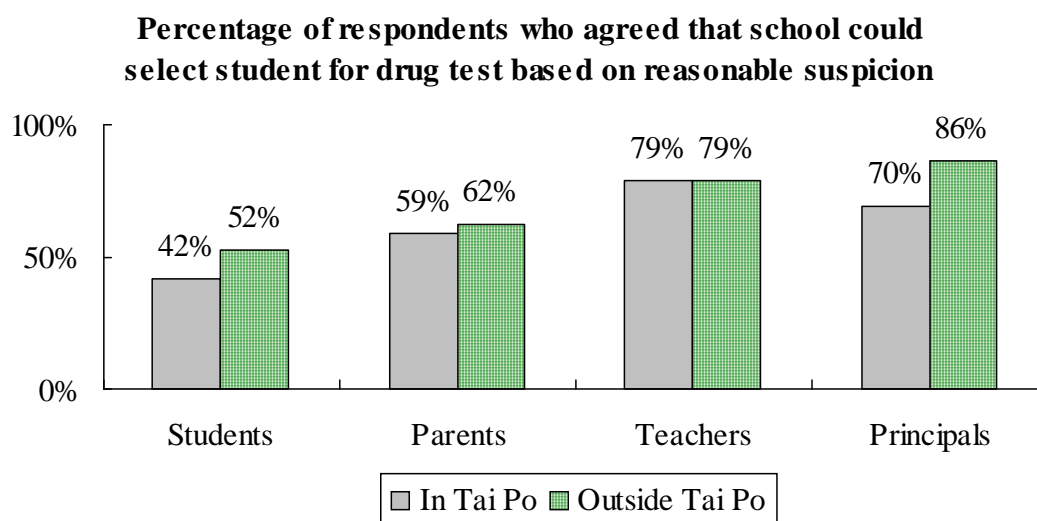
Percentages of stakeholders outside Tai Po by expectation on school drug testing



17.9 During discussions with social workers, they lamented that students usually sought help only when they got into troubles like having been arrested by

the Police, having serious health problems or having encountered difficult-to-solve personal or family problems. By the time students sought help from social workers, many of them had already had taken drugs for quite some time, rendering intervention and treatment much more difficult than when these students were identified at an early stage of drug abuse. Medical practitioners interviewed in the course of study also cautioned that prolonged exposure to drugs would cause irreparable damage to the students' health.

17.10 To meet the expectations of teachers, parents and students, and from the perspectives of effective treatment and intervention, early identification is obviously a goal worth pursuing in school drug testing. For early identification of students who had abused drugs, several principals consulted in the survey suggested that drug testing should be conducted on suspicion. This is the practice adopted by some international schools in Hong Kong and some schools in the US and UK. Results of the June 2010 survey showed that most principals and teachers, especially those of schools outside Tai Po, supported the idea of selecting students for drug testing based on reasonable suspicion. More than half of parents of students in and outside Tai Po as well as students outside Tai Po also supported drug testing based on reasonable suspicion.



17.11 Several principals interviewed in the course of the study also pointed out that drug testing based on reasonable suspicion was more cost-effective than random drug testing. Indeed, researchers overseas also considered targeted drug testing based on suspicion was effective and recommended that schools should be allowed to implement proactive, preventative drug testing for certain groups of

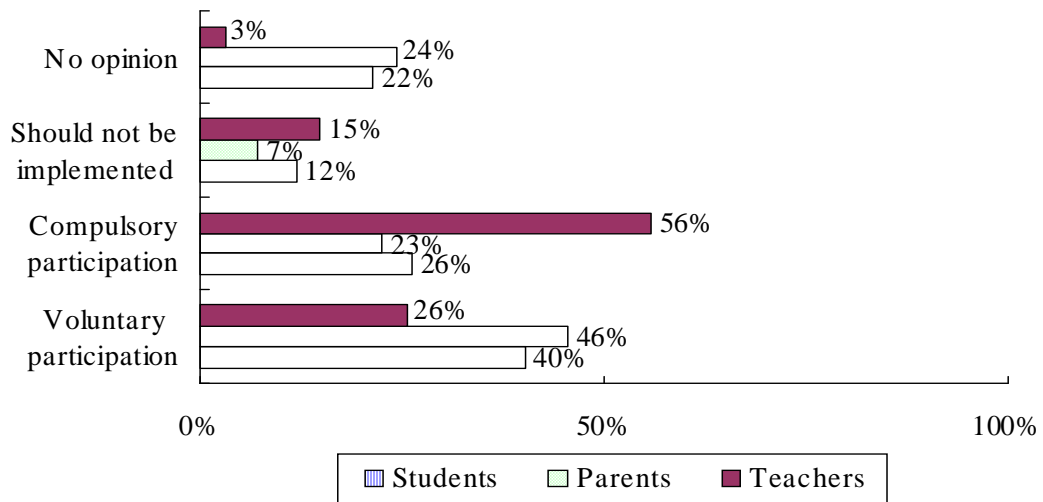
students based on evidence of likelihood of drug use. They reasoned that the need to prevent students from abusing drugs provided the “necessary immediacy” for a drug testing policy. However, they cautioned that testing based on suspicion would place additional burden on teachers and would have potential detrimental effects of stigmatization. Suspicion-less random drug test, on the other hand, was less disruptive, as it was based on preventing drug abuse problems rather than suspecting individual students of drug use.¹⁴⁹

17.12 During discussions with a number of social workers, they expressed confidence in identifying students who were likely to be at risk or who had abused drugs. However, some teachers consulted in the study raised the concern that if their judgment was wrong and students suspected to have abused drugs were tested negative, there might be complaints from parents and students and teacher-student relationship might be adversely affected.

17.13 Another option was to introduce compulsory drug test, which was also advocated by a number of principals, teachers and students during in-depth interviews and focus group discussions with them. They believed that only through compulsory drug test, early identification was possible. A number of non-school stakeholders in the medical and legal professions also believed that compulsory drug testing was more effective and could throw light on the prevalence of drug abuse among students and did not have any labelling effect. However, a number of social workers were worried that compulsory drug testing might risk alienating the students. Even though the students were tested positive, if the students were not willing to receive guidance and treatment, not much help could be offered to the students concerned. Findings of the June 2010 survey revealed that more than half of students (66%), parents (69%) and teachers (82%) were of the view that school drug testing should be conducted. In addition, a clear majority of parents (46%) and students (40%) supported voluntary drug testing, compared with those supporting compulsory participation (23% parents, 26% students), objecting to drug testing (7% parents, 12% students) or having no opinion (24% parents, 22% students). As regards teachers, the majority (56%) supported compulsory participation.

149 Higbee, Kari L (2005), “Student privacy rights: drug testing and Fourth Amendment protections”, in *Idaho Law Review*, 41: 361 – 401.

Percentages of stakeholders in Tai Po by future arrangement for school drug testing



17.14 The Project Team believes that at the moment it may not be the right time to pursue compulsory drug testing in schools as only about a quarter of students and parents support this approach. Compulsory drug testing is highly controversial involving issues such as those related to children’s rights, privacy and legal issues, etc, and requires sound justifications. Besides, voluntary school drug testing has just been introduced to local secondary schools in December 2009 in the form of a trial scheme only. Obviously, it takes time for stakeholders concerned to have a better idea of what voluntary school drug testing could achieve and its possible drawback. While early identification is important, engaging those who have abused drugs and triggering their motivation to seek help are equally important. On balance, the Project Team believes that voluntary drug testing supplemented by other proactive measures in engaging those at risks, to be discussed in the paragraphs below, should be actively pursued at this moment.

17.15 Separately, the Project Team noted that some international and ESF schools in Hong Kong conduct drug testing based on contractual agreement with parents and students. It appears that there may be scope for local schools enjoying similar autonomy in student admission (e.g. private schools and Direct Subsidy Scheme schools), other than following a voluntary approach, to explore and consider such an arrangement, but only if they find it appropriate in their own circumstances.

17.16 In short, the Project Team recommends that given the positive results

revealed in the research, its contribution to entrenching an anti-drug culture now taking root in schools and the community, and stakeholders' support, as highlighted above, school drug testing should be further developed in Hong Kong as a pioneering and innovative part of government's overall anti-drug efforts, following a voluntary approach.

Attending to the diverse and different needs of students

17.17 Schools have long recognized that there is diversity of students in terms of their needs and abilities. Thus, in as early as 2000, the Education Commission has recommended that “the ultimate objective of education is to enable every student to achieve all round development according to his/her own attributes”, and that reforming the methods of learning and teaching, “students’ needs and interests must be the foremost consideration”.¹⁵⁰ The Advisory Committee on Teacher Education and Qualifications has also recommended that one of the core competencies of teachers is to “identify and support students’ diverse needs”.¹⁵¹

17.18 As pointed out in the preceding chapters, in conducting briefing sessions for students on the Scheme, students were treated as a homogeneous group. Teachers had refrained from talking to students proactively on the Scheme, providing advice on whether it was in the interest of students to participate in the Scheme, for fear of breaching the confidentiality of information related to the Scheme and to avoid being misconstrued by students or parties outside schools as a deliberate attempt to prevent students from making a genuine consent. This may be against the spirit of putting students’ interests as the foremost consideration and is not in line with the expectation on teachers to attend to students’ diverse needs.

17.19 Besides, during discussions with school social workers of secondary schools in Tai Po, a number of them pointed out that school social workers knew the students well, especially those at risk. They were in the best position to help students. In preparing for and implementing the Scheme, a lot of anti-drug information in general, and information on the Scheme in particular, was provided

150 Education Commission (2000), *Learning for life, learning through life: Reform proposals for the education system in Hong Kong*.

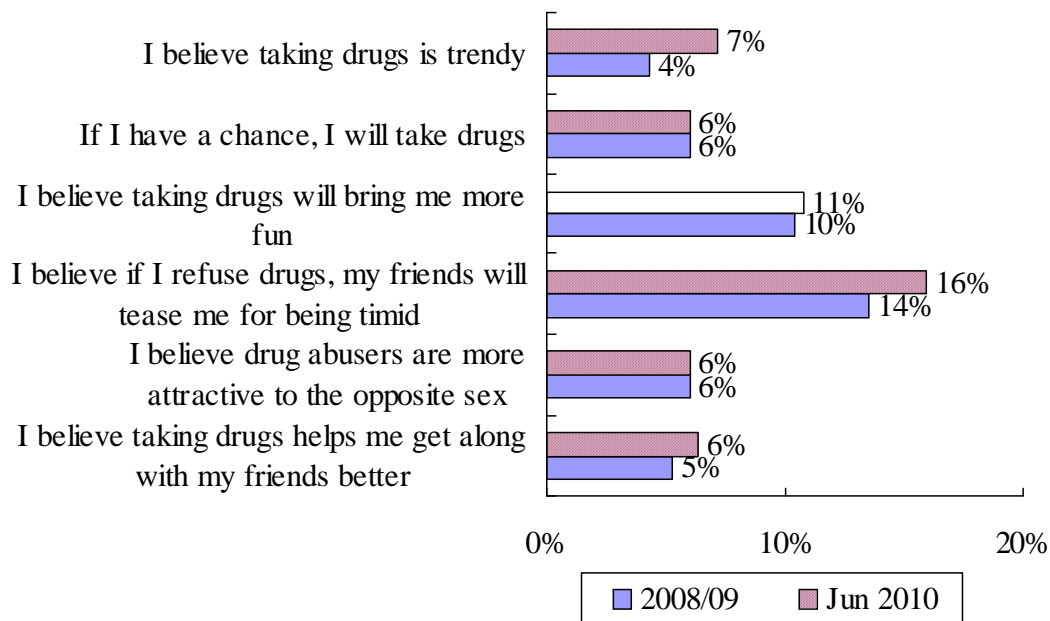
151 Advisory Committee on Teacher Education and Qualifications (ACTEQ) (2003), *Towards a learning profession: the teacher competencies framework and the continuing professional development of Teachers*.

to the students. Many students required assistance in order to internalize the information provided to them and make decisions that were in their best interests. It was desirable that the school social workers could proactively offer counselling and advice to students on matters related to the Scheme.

17.20 Several school social workers interviewed were also of the view that counselling of students sampled for drug testing might better be performed by school social workers who knew the students better, provided that additional resources were available. The students would feel more comfortable talking to school social workers than to a stranger they did not know. Besides, school social workers would be in a better position to follow up with any problems identified in the course of the interview, noting that drug abuse problems were related to personal and interpersonal problems of students. On the other hand, a few school social workers interviewed in the study accepted the present arrangement of asking the social workers of the SDT team to conduct screening interview for students sampled for drug testing, as school social workers were already quite heavily involved in their regular duties at schools.

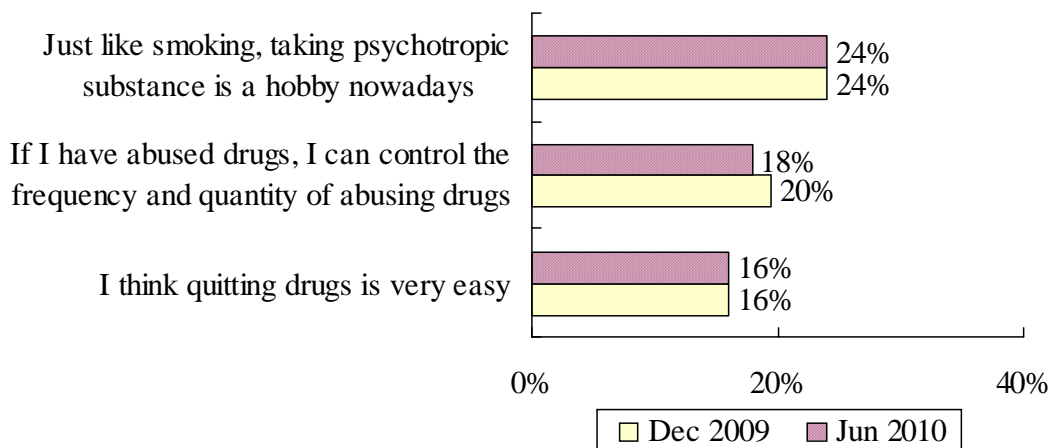
17.21 As noted in para. 15.17, it is doubtful if students were making an informed decision on whether to participate in the Scheme or not. The survey findings appended below also showed that there was a worrying trend of increasing misconceptions about taking drugs and peer influence on taking drugs. Six questions were asked in both the 2008/09 survey and the June 2010 survey which were related to students' perceived peer influence on taking drugs. For students in Tai Po, in June 2010, a higher proportion of students believed that (a) taking drugs was trendy, (b) if they refused drugs, their friends would tease them for being timid, (c) if they abused drugs, it would bring more fun, help them get along with friends better and become more attractive to opposite sex, as compared with 2008/09. In other words, peer influence on students' drug taking had increased, even though the percentage of students holding such a view was still quite low. On the other hand, a lower proportion of students were of the view that if they had a chance they would take drugs in the June 2010 survey as compared with 2008/09 survey.

Percentage of students in Tai Po by views on drugs



17.22 Furthermore, in both the December 2009 survey and the June 2010 survey, data on students' misconception of drugs were collected for students in Tai Po. As shown in the chart below, about 24% of students in Tai Po were of the view that taking psychotropic substance, just like smoking, was a hobby nowadays. In June 2010, about 18% of students believed that if they had abused drugs, they could control the frequency and quantity of abusing drugs and 16% thought that quitting drugs was very easy.

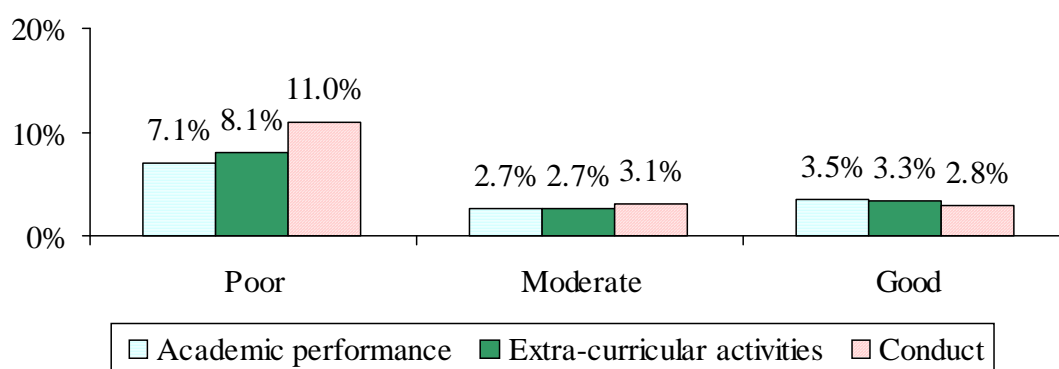
Percentage of students in Tai Po by misconceptions about taking drugs



17.23 Indeed, as noted by the Task Force on Youth Drug Abuse, there is “widespread misconception, especially among the youth, that psychotropic substances are less harmful than “traditional” narcotics such as heroin. There are worrying signs of a permeating sub-culture of treating abuse of psychotropic substances as a social norm among the youth.....Many people are not aware that the consumption of drugs itself is illegal”.¹⁵² For this group of students, the number of which is not small, they definitely need the special attention of teachers and school social workers for implanting proper understanding of the harmful impacts of drug abuse if so identified.

17.24 The June 2010 survey also revealed that a higher proportion of students in Tai Po who admitted that their academic performance, performance in extra-curricular activities or conduct was poor approved others taking drugs, as compared with those who considered their academic performance, performance in extra-curricular activities or conduct was moderate or good. The survey findings indicated that some students, especially those who were relatively weak in their academic performance, extra-curricular activities or conduct, were more receptive to drugs and hence were more at risk of abusing drugs. This group of students required closer attention and assistance from teachers and social workers to help them stayed away from drugs.

Percentage of students in Tai Po who approved others taking drugs



17.25 Besides, as discussed in Chapter VI, most students do not mind that information related to their participation in the Scheme is made known to principals, teachers, classmates and school social workers. There is also not likely

¹⁵² Report of the Task Force on Youth Drug Abuse (November 2008), p.30.

to have any labelling effect on students who have or have not participated in the Scheme. The Project Team believes that there is little justification to keep such information strictly confidential to the detriment of the interests of students. On a need to know basis, teachers and school social workers should be provided with the aggregate statistical information on students' participating or not participating in drug testing. For class teachers, designated teachers and school social workers, as specified in the consent form signed by students and parents, they would have access to information related to individual students who have participated in the drug testing.

17.26 The Project Team notes that over the years, thanks to the efforts made by Education Bureau, school management, teachers and other stakeholders and as part of the education reform, teachers have assumed a more proactive role in providing pastoral care to students and in building trust and rapport with students, in addition to learning and teaching. Besides, the Project Team is of the view that there are always some teachers in school, who may be the class teachers, career masters or other teachers, whom students look to for care, advice and emotional support. Given that students spend most of their day time at school, teachers and school social workers are in a very good position in offering guidance and support to students and in enhancing their resolve to stay away from drugs. In particular, teachers and school social workers should offer advice and guidance to students in making their decision to participate or not in drug testing, especially to those who are in need. Without creating much additional workload on teachers, teachers could discharge such a duty in their day-to-day interactions with students and in their attempts to nurture students' critical and independent thinking, as part of the learning and teaching process.

17.27 As noted by the Task Force on Youth Drug Abuse, "apart from conducting programmes to promote the positive development of secondary school students from adolescence to adulthood, the school social work service has played a pivotal role in the early intervention of problem students with a view to preventing them from becoming hardcore youth at risk. School social workers provide the necessary professional support to tackle the student drug abuse problems, among other psychosocial and behavioural problems."¹⁵³ In connection with drug testing, school social workers could also focus on those students most in need, and provide counselling in smaller groups or through case work.

¹⁵³ *Report of the Task Force on Youth Drug Abuse* (November 2008), p.62.

17.28 After students have decided to participate or not in drug testing, they may change their mind. As evidenced from the experience of the Scheme in Tai Po, some of the students who have not participated in drug testing may decide to do so at a later stage, while some of those who have participated may decide to opt out. It is desirable that the class teachers, designated teachers and school social workers should continue to proactively provide advice and assistance to students, after they have made up their mind to participate or not in drug testing. Proactive advice and assistance expected from teachers and school social workers should not be confined to those who have not participated in drug testing. Students who have participated in drug testing may also have misconceptions, may not be making informed decisions or may be subject to peer influence.

17.29 Nevertheless, the Project Team acknowledges the need to act with prudence. Given there is likely an “imbalance of power” between teachers and students, even though drug testing is introduced with the interests of students and not those of teachers in mind, schools should ensure that consent made by students on whether to participate in drug testing is genuine, and is seen to be doing so. Hence, it is advisable that class teachers, designated teachers and school social workers should proactively approach students in groups, including students who have participated or not participated in drug testing.

17.30 The Project Team is aware that some opponents of school drug testing may take the opportunity to criticize teachers for exerting pressure on students, resulting in “false voluntary consent” by students. The Project Team believes that schools should in turn seize this opportunity in educating the students on how mutual trust, differences in view points and respect of each other’s decision could coexist. This is part of the educational process in developing critical and independent thinking skills, in promoting toleration and civility in student-student and student-teacher interactions and in cultivating an inclusive and cohesive school environment.

17.31 To sum up from the above discussions, *the Project Team recommends that teachers and school social workers should proactively approach students in groups, without identifying students who have participated or not in drug testing, to offer advice and assistance, before and after they have decided to participate or not in drug testing.*

17.32 Given that only 25% of teachers were approached by their students for advice, teachers might not have played a more active role than desired in the Scheme. Following from the above discussions, *the Project Team also recommends that teachers should be empowered to take up a proper role in school drug testing. Schools should make extra efforts to explain to students and parents the advisory and support role played by teachers in school drug testing, assuring students and parents that their decisions to participate or not in drug testing will be respected by teachers. Furthermore, appropriate training will have to be provided to teachers on anti-drug education in general and drug testing in particular.*

Fostering a harmonious relationship

17.33 As noted from the discussions above, there is a worrying sign of increasing peer influence on taking drugs. Thus, efforts should be made to engage students, regardless of whether they have or have not participated in the Scheme or whether they have or have not abused drugs, in developing a drug-free environment in general and in particular, strengthening peer support among students, turning peer pressure to try drugs to peer pressure to quit drugs and cultivating students' sense of inclusion towards each other, including those who have abused drugs.

17.34 During discussions with school social workers, they pointed that it was desirable to cultivate an inclusive school environment in order to help students who had abused drugs, by ensuring that their linkage with schools and families was maintained. Researchers noted that social inclusion was not just the opposite of social exclusion, but also involved active engagement and participation, where people were and felt integrated in different relationships, organizations and structures that constituted daily lives.¹⁵⁴

17.35 Furthermore, despite the controversial nature of school drug testing the Scheme could help school foster a harmonious relationship among students and between students and schools. According to the *Ladder of Shared Common Life* conceptualized by researchers, there are four steps leading to social harmony, namely toleration, civility, social inclusion and social cohesion. In the context of

154 Phillips, David (2008), "Social inclusion, social exclusion and social cohesion: tensions in a post-industrial world".

the Scheme, toleration basically refers to refraining from interference with another student's participation or non-participation in the Scheme. Civility represents appropriate behavior or attitudes in public discourses. It means respecting other students' different views and decisions on drug testing, without engaging in *ad hominem* attack, escalation of conflicts, exploitation of loopholes in the rules to advance one's interest, etc. Social inclusion in short, refers to a sense of "we-ness" among students, including those who have or have not participated in the Scheme, and those who have or have not abused drugs. Social cohesion is characterized by trust in school, a sense of belonging to school and the willingness to participate in school activities and help other students in need.¹⁵⁵

17.36 In the course of conducting the research, the Project Team has visited schools in and outside Tai Po which have put in place successful mentorship programmes, with students in the higher forms acting as mentors for students in the lower forms, especially Secondary 1 students first enrolled in schools. The mentorship programme can be an effective means to strengthen peer support and foster a harmonious relationship among students, and reinforce students' ability to withstand peer pressure on taking drugs. Feedback from students interviewed in the course of the study who had participated in such mentorship programmes, as mentors or mentees, was highly positive. The Project Team believes that such mentorship programmes are being implemented in many schools in Hong Kong, with some in the form of "Health Ambassador" scheme. Research conducted elsewhere showed that mentoring had a greater beneficial impact on youth who were at risk than a typical youth.¹⁵⁶ As a practical step towards fostering a harmonious relationship among students, *the Project Team recommends that consideration should be given to encouraging schools to implement similar mentorship scheme if they do not have one, or strengthening the existing mentorship scheme in schools if one is already in place, as part of the healthy school programme with an anti-drug focus.*

Enriching the educational contents of the Scheme

17.37 Given the focus of the Scheme should be placed on the educational

155 Based on the framework developed by Professor Joseph Chan and Dr. Elaine Chan of the Department of Politics and Public Administration, The University of Hong Kong.

156 DuBois, David L. et al (2002), "Effectiveness of mentoring programs for youth: a meta-analytic review", in *American Journal of Community Psychology*, 30(2): 157 – 197.

process it should not be void of any core values it embodies. As discussed in Chapter VI, the Project Team has the impression that much has been said about students' rights to the neglect of protection of students' interests. But core values are more than rights and interests. A number of studies have been conducted in Mainland China, Hong Kong and other places on core values. For example, based on a survey of university students in 20 countries, researchers found out 40 Chinese values, including tolerance of others and harmony with others.^{157 158} In a survey of 346 seventh graders in Beijing and Shanghai, researchers found that there were 11 components of Chinese cultural values, including collective orientation (e.g. group solidarity, sense of righteousness, patriotism, etc.).¹⁵⁹ In a study of the views of over 900 Chinese university students in Hong Kong, researchers found that instrumental values, including "responsibility", "courageous", "intellectual" and "capable" were ranked most important.¹⁶⁰

17.38 During discussions with principals and teachers, it transpired that while students' rights were given full attention, little was mentioned of essential core values like "responsibility", "self-respect", "tolerance of others" and "harmony with others". In particular, students should be aware that they had a responsibility to themselves, their parents, their classmates and their schools to behave well, including staying away from drugs. They should also serve as a role model for other students, especially those in the lower forms. Participation in the Scheme represents a pledge they made to themselves, to their parents, their classmates and their schools that they would stay away from drugs. In short, this is an educational process that schools should not overlook when implementing the Scheme.

17.39 The Project Team also notes that a resource kit on anti-drug education, Anti-drug Resource Kit for Schools, as a component of healthy school policy has been prepared by the Hong Kong Federation of Youth Groups. The resource kit is widely available to schools and educational bodies. It is recommended in the resource kit that the core components of anti-drug education should include, apart

157 Chinese Culture Connection (1987), "Chinese values and the search for culture-free dimensions of culture", in *Journal of cross-cultural psychology*, 18(2): 143 – 164.

158 Matthews, Barbara Marshall (2000), "The Chinese Value Study: an interpretation of value scales and consideration of some preliminary results", in *International Education Journal*, 1(2): 117 – 126.

159 Shen, Jianping and Yuan, Bao-Jane (1999), "Moral values of only and sibling children in Mainland China", in *Journal of Psychology*, 133(1): 115 – 124.

160 Lau, Sing (1988), "The value orientations of Chinese university students in Hong Kong", in *International Journal of Psychology*, 23: 583 – 596.

from knowledge (e.g. knowledge of harmful effect of drugs) and techniques (e.g. techniques in refusing drugs), values and attitudes.¹⁶¹

17.40 The Project Team recommends that in conducting education and publicity programmes for students on the Scheme, more efforts should be made to include teaching of core values such as “responsibility” and “self-respect”, in addition to explanation on students’ rights.

Strengthening support to parents

17.41 As remarked by the Task Force on Youth Drug Abuse, “prevention of drug abuse starts at home.” And “from a family viewpoint, parental absence, loose parental supervision and sanction against drug abuse, lack of positive relationship with adults and lack of family strength are some common risk factors.”¹⁶² During discussions with principals of schools inside and outside Tai Po, a number of them pointed out that if family function failed, it would be much more difficult for schools to intervene and help students stay away from drugs.

17.42 In launching the Scheme, a number of briefing sessions had been organized for parents to explain to them the purposes of the Scheme. Assistance and advice had also been provided to them, if required, by principals, teachers and social workers. As noted by several principals in Tai Po, through the Scheme, communications between schools and parents had increased, thereby fostering closer home-school cooperation.

17.43 Nevertheless, several teachers and social workers interviewed in the study cautioned that parents who were most in need usually did not participate in activities organized for them. In other words, schools’ efforts to providing advice and assistance to parents might not reach those parents who were most in need. A study conducted in 2008 by the Department of Social Work and Social Administration of The University of Hong Kong and Tung Wah Group of Hospitals showed that only 2% of parents of students in general and 12% of parents of students with drug taking history participated in drug prevention programmes organized for them.¹⁶³

161 健康校園新一代——學校禁毒資源套, Book 2, para. 1.4.2

162 *Report of the Task Force on Youth Drug Abuse* (November 2008).

163 the Department of Social Work and Social Administration of The University of Hong Kong and

17.44 In the June 2010 survey, 8 items were used to solicit views of students and their parents on the involvement of parents in the anti-drug education of their children. Expressed in a Likert scale of 4, with “1” denoting “never” and “4” denoting “almost always”, mean scores were computed for the 8 items based on survey data. For the 8 items, exploratory factor analysis was performed and two underlying factors, with eigenvalues greater than 1, were identified. The two factors, namely parental guidance and parental control, accounted for 76.4% and 73.3% of the total variance of data based on views of students and views of parents respectively.

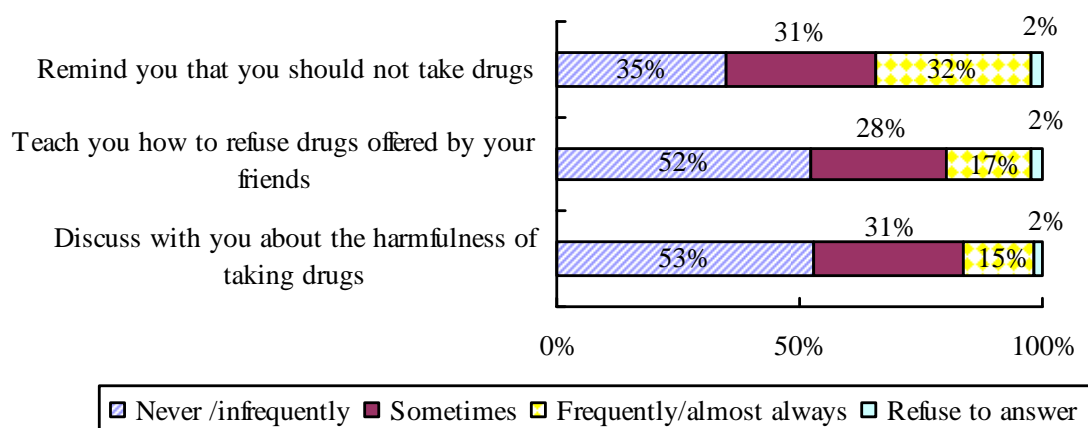
17.45 As an indication of the extent of relatedness between individual items and the two underlying factors, item-total correlations were computed and, with values ranging from 0.61 to 0.83, were found to be quite high. To assess the extent of similarity in the views of students across items measuring the same underlying factor, two measures of the split-half reliability, namely the Spearman-Brown and Guttman Split-half coefficients, were computed. With values in the range of 0.77 to 0.89, the measures were found to be quite high. In addition, the Cronbach’s Alpha was compiled to assess the internal consistency of the data. With the Alpha coefficients ranging from 0.87 to 0.89, the internal consistency of items measuring the two underlying factors was very high. Finally, to assess the validity of the two factors, estimates of convergent and discriminant validity were compiled using the survey data on students’ views. The results showed that the correlations between items that made up the same factor were in general higher than those for items that did not measure the same factor.

17.46 What may be concluded from the above discussion is that the two underlying factors, namely parental control and parental guidance, which are measured by the 8 items used in the June 2010 survey, have good validity and reliability and can be used for further analysis in the research. In the paragraphs below, survey findings in respect of individual items are presented and discussed. In addition, results of further analysis are presented on the two underlying factors which are measured by individual items used on the June 2010 survey.

Parental guidance

17.47 The June 2010 survey showed that parents' involvement in anti-drug education of their children was weak. For example, more than half of parents never or infrequently discussed with them about the harmful effect of taking drugs (53%) or taught their children how to refuse drugs offered by friends (52%). About one third (35%) never or infrequently reminded their children that they should not take drugs.

Percentage distribution of students by views on parental guidance



17.48 The index on parental guidance was computed from the data based on data on views of students. A higher index implies that the extent of parental guidance is greater. When analyzed by whether participated in the Scheme, it may be noted from the table below that the index for students who had participated in the Scheme was 2.65, which was higher than that for students who had not participated in the Scheme (at 2.44) and the difference was statistically significant, at 99% confidence, based on results of the t-test. In other words, parents of students who had participated in the Scheme were more likely to give guidance more frequently to their children on matters related to drugs.

Views of students	Index	SD	p-value (t-test)
Participated in the Scheme	2.65	1.11	.000 *
Not participated in the Scheme	2.44	1.07	

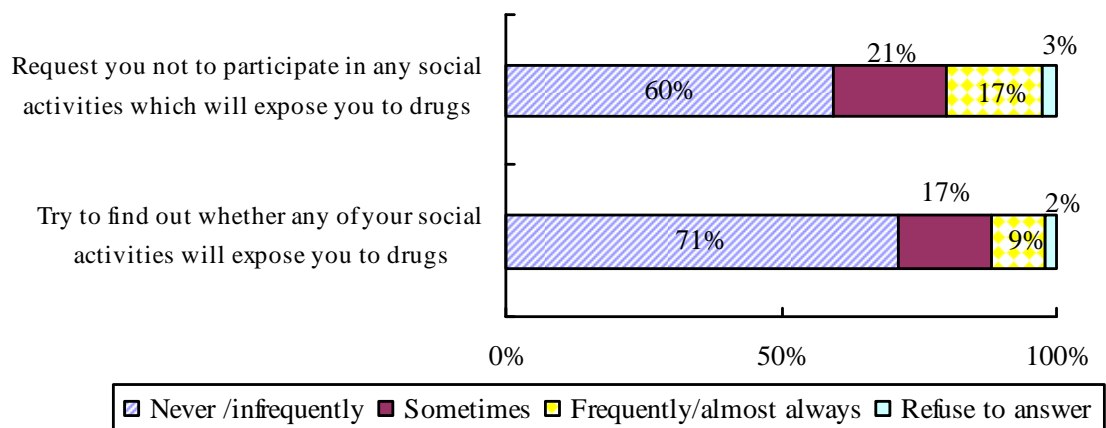
17.49 When analyzed by whether had taken drugs, it may be of interest to note from the table below that the index for students who admitted that they had taken drugs was 2.46, which was lower than that for students who had not taken drugs (at 2.58) and the difference was statistically significant, at 95% confidence, based on results of the t-test. In other words, parents of students who had not taken drugs were more likely to give guidance to their children more frequently on matters related to drugs.

Views of students	Index	SD	p-value (t-test)
Taken drugs	2.46	1.15	.040 *
Not taken drugs	2.58	1.10	

Parental control

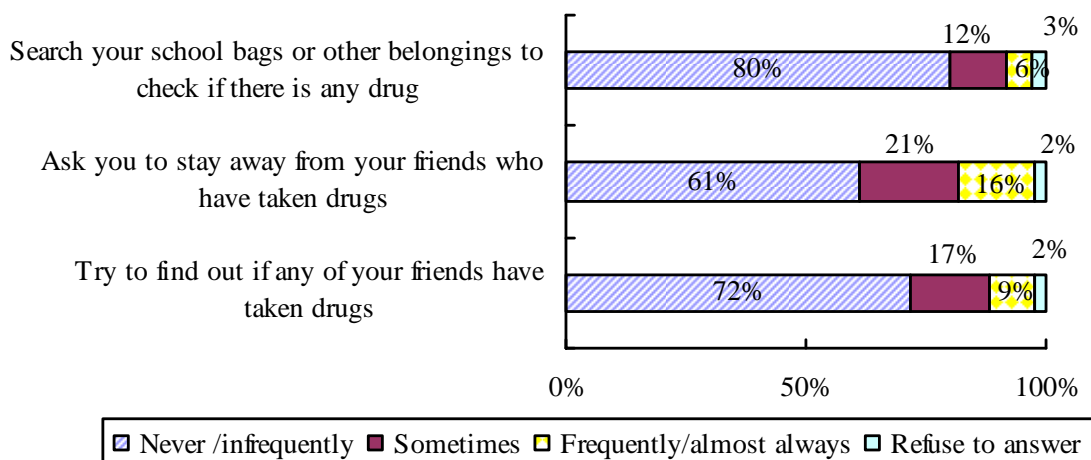
17.50 Furthermore, more than half of parents never or infrequently requested their children not to participate in any social activities which would expose them to drugs (60%) or tried to find out whether any of their social activities would expose them to drugs (71%).

Percentage distribution of students by views on parental control



17.51 In addition, the majority of parents never or infrequently tried to find out if any of their children’s friends had taken drugs (72%), asked them to stay away from their friends who had taken drugs (61%) or searched their school bags or other belongings to check if there was any drug (80%).

Percentage distribution of students by views on parental guidance



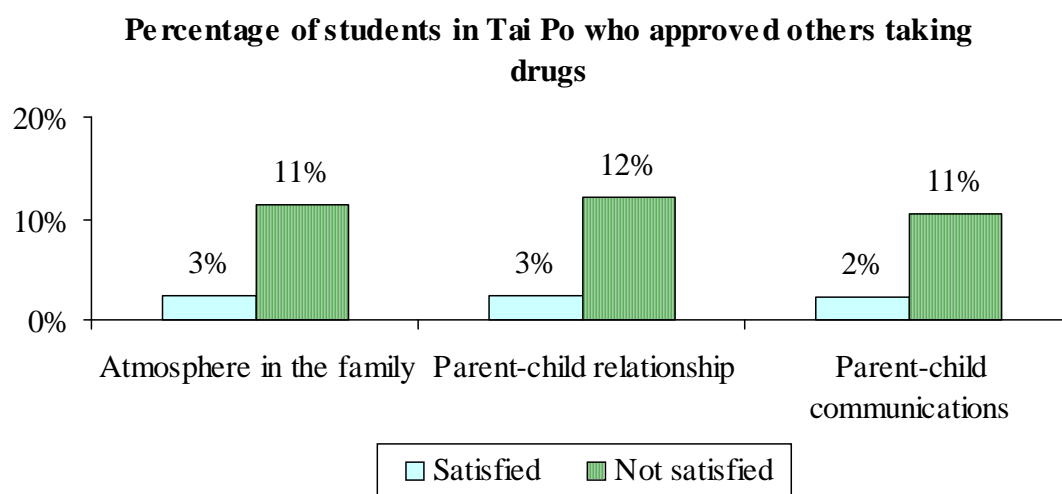
17.52 The index on parental control was computed from the data based on views of students. A higher index implies that the extent of parental control is greater. When analyzed by whether participated in the Scheme, it may be noted from the table below that the index for students who had participated in the Scheme was 2.02, which was higher than that for students who had not participated in the Scheme (at 1.89) and the difference was statistically significant, at 99% confidence, based on results of the t-test. In other words, parents of students who had participated in the Scheme were more likely to exercise control over their children more frequently on matters related to drugs.

Views of students	Index	SD	p-value (t-test)
Participated in the Scheme	2.02	0.99	.000 *
Not participated in the Scheme	1.89	0.95	

17.53 When analyzed by whether had taken drugs, it may be of interest to note from the table below that the index for students who admitted that they had taken drugs was 2.10, which was higher than that for students who had not taken drugs (at 1.97) and the difference was statistically significant, at 99% confidence, based on results of the t-test. In other words, parents of students who had taken drugs were more likely to exercise control over their children more frequently on matters related to drugs.

Views of students	Index	SD	p-value (t-test)
Taken drugs	2.10	1.12	.010 *
Not taken drugs	1.97	0.97	

17.54 What may be observed from the above analysis is that while parental control and parental guidance on matters related to drugs are generally sadly lacking among students, “parental guidance” appears to have a positive impact on students’ drug taking behaviour. Besides, the June 2010 survey also showed that for students in Tai Po who were not satisfied with their family atmosphere, parent-child relationship or parent-child communications, a higher proportion of them approved others abusing drugs, as compared with those who were satisfied with their family atmosphere, parent-child relationship and parent-child communications. In other words, family factors and parental guidance or control have an important bearing on students’ attitude towards fighting drugs.



17.55 The Project Team also notes that in the Anti-drug Resource Kit for Schools on anti-drug education as a component of the healthy school policy prepared by the Hong Kong Federation of Youth Groups, a number of measures are suggested for schools to strengthen home-school cooperation.¹⁶⁴ In addition, a Resource Kit for Parents has also been prepared by the Tung Wah Group of Hospitals and the Department of Social Work and Social Administration of the University of Hong Kong. The Resource Kit is to help schools and parent education centres/ organisations to equip parents with anti-drug knowledge,

164 「不可一 不可再」健康校園新一代——學校禁毒資源套, Book 2, para. 1.9.

attitudes and skills through parent training sessions.¹⁶⁵

17.56 *The Project Team recommends that counselling and support services to parents should be stepped up, in a proactive manner, to help them provide parental guidance and advice to their children.* Such services could be provided through schools, in cases where the students' activities in schools are concerned, or through NGOs in the community, in cases where assistance to parents is required in tackling family problems and problems related to parent-child relationship.

18. Extending the scope of the Scheme

Engaging students likely to be at risks

18.1 For local schools, while secondary schools in Tai Po were conducting voluntary drug testing, a number of NGOs and schools in other districts were experimenting different initiatives aiming at engaging students likely to be at risk, for the purposes of early identification and treatment. For instance, in a school in North District visited by the Project Team, the principal made use of the Operating Expenses Block Grant (OEBG) to hire a few more school social workers to organize small group counselling for students likely to be at risks. The school had been careful to mix students not at risk with those likely to be at risk for these group activities in order to avoid having a labelling effect on students. For students identified to be at risk, individual counselling would be provided to the students, and if required they would be referred to CCPSA for further guidance and treatment. The principal believed that if there was mutual trust between school and students and if students realized that their school was trying to help them, they would be more receptive to such intervention measures from school.

18.2 In mid 2008, Tung Wah Group of Hospitals (TWGHs) CROSS Centre has coordinated a two-year pilot collaboration project (the "Project MAC") funded by BDF between medical practitioners and NGO to engage youth who had abused drugs and trigger their motivation to seek help. Services provided were initial screening by social workers and nurses, body check-up and motivational interviewers by medical practitioners and follow-up counselling and group work activities by social workers. Items covered by the body check-up covered urine

165 「不可一 不可再」無毒家教有妙法－家長禁毒教育資源套》

test, blood test, eye-hand coordination, bone-mineral density, etc.

18.3 In 2009, Wong Tai Sin District Fight Crime Committee, Our Lady of Maryknoll Hospital and Hong Kong Playground Association collaborated a project (funded by BDF) called “Fresh Express”. The project involved co-operation between medical professionals and social workers at district-based level. Services provided included body check and follow-up counselling. Educational workshops for teachers, parents, youths, private medical practitioners and social workers, training course & camp for ambassadors (students and parents), comic contest, were also part of the project etc.

18.4 In the North District, medical practitioners participated as volunteers in a “night clinic”, providing non-invasive, medical check up services (e.g. blood pressure, body weight and height measurement, lung volume, bladder scan and urine flow measurement) to youth at risk who were referred to the “night clinic” by social workers. Through medical check up, mental health assessment and physical fitness test, those who had abused drugs would realize the harmful effect of drugs on their mental and physical health, triggering their motivation to seek help.

18.5 In Kwai Tsing District, a group of community leaders, medical practitioners, academics and social workers pioneered a program of physical fitness test, risk taking behaviour screening, mental health assessment, and memory and eye/hand coordination assessment for students of several schools. Through the program, students who were identified to be risk, including drug abuse, would be identified and early guidance and intervention would be provided to the students. Similar programs were also pioneered by social workers and schools in Yuen Long and Ma On Shan. By engaging students through these programs, principals, social workers and medical practitioners involved believed that it would help trigger students’ motivation to seek help.

18.6 The Project Team is impressed by the enthusiasms of community leaders and medical practitioners, who are working as volunteers, in offering their professional services to help social workers and schools in identifying and engaging students who are at risk. The Project Team believes that cross-disciplinary team involving medical practitioners, social workers, education professionals and community leaders would be effective in tackling drug abuse behaviour of students.

18.7 *The Project Team recommends that programs to engage students at risk, similar to those pioneered by schools and district organizations involving social workers, medical practitioners and other community stakeholders, should be encouraged and supported, and where applicable, included as part and parcel of school drug testing.*

18.8 It is noted that while the various programs described above are considered effective by principals, social workers, medical practitioners and other community stakeholders involved in engaging students at risk, no systematic, evidence-based research has been conducted to evaluate their effectiveness, strengths and weaknesses. *The Project Team recommends that if such programs are included as part and parcel of drug testing and funded, the effectiveness of these programs should be evaluated.*

19. Ways ahead: essential features of school drug testing

School-based, student-oriented and community participation

19.1 The success of the Scheme, as evidenced from the research findings, owes not only to the fact that the Scheme has been carefully drawn up and professionally implemented by the SDT team and schools, but also to the dedication and hard work of school staff, especially school principals. Without the wholehearted support of school management and staff, the Scheme, however well designed, will not be effective. If schools concerned do not have a caring culture, students will not be receptive to the Scheme and the effectiveness of the Scheme will be much reduced.

19.2 The Project Team believes that bottom-up initiatives, rather than top-down directives, are the key to the successful implementation of school drug testing. This is essentially the spirit of school-based management, the objectives of which is ‘to devolve decision-making relating to student learning and use of resources to the school as far as possible, so as to suit the circumstances of individual schools and the needs of their students.’¹⁶⁶

166 Education and Manpower Bureau (May 2005), “Funding flexibility and support measures for schools to set up Incorporated Management Committees”, LC Paper No. CB(2)1716/04-05(04).

19.3 Moreover, participation should be voluntary for schools, allowing flexibility in the grouping of schools to join hands in a scheme apart from a district-based arrangement (e.g. a cluster of schools under the same school sponsoring body or schools served by the same NGO in the provision of school social work services). NGO responsible for implementing the program may be CCPSA located in the same district of the participating schools, or non-CCPSA NGO in collaboration with CCPSA concerned.

19.4 In addition, drug testing has to be designed with students' interests in mind. The purpose is to help students in need, rather than to impose punitive measures on those who are found to have abused drugs. Understandably, drug abuse is a serious unruly and delinquent behaviour and should not be tolerated. On the other hand, as noted by the Task Force on Youth Drug Abuse, there are a number of personal and interpersonal factors that might contribute to drug abuse, which in turn are related factors at the school (such as poor academic achievement and lack of appropriate life skills), family (such as parental absence and lack of family strength) and societal levels (such as postmodern youth culture and growing pessimism about upward social mobility). To tackle the youth abuse problem at root, it is necessary, among other things, to enhance the culture of care for young people in the community.¹⁶⁷ As emphasized by a number of social workers interviewed in the study, it was essential that for students at risk, including those who had abused drug, their linkage with schools should be maintained, such that these students could continue to be benefited from the care and attention of teachers, in order to minimize risk factors and reinforce protective factors, helping them to stay away or quit drugs. Of course, the provision of a professional support programme to provide timely guidance and treatment to those troubled by drugs, who are identified by drug testing or other means or who volunteer themselves for help, is important. In short, the Scheme has to be "student-oriented".

19.5 Furthermore, the Project Team believes that schools alone cannot tackle students' drug abuse problems, which are related to students' personal and interpersonal problems, and problems in the family and the community.¹⁶⁸ Community involvement is crucial to the implementation of drug testing schemes. As exemplified by the experience of the Scheme in Tai Po, close cooperation between social workers and schools is important. Programs being tried out in other districts in engaging students at risk have demonstrated that community support

167 *Report of the Task Force on Youth Drug Abuse* (November 2008), Chapter 3.

168 *Report of the Task Force on Youth Drug Abuse* (November 2008), Chapter 3.

and participation is important. During discussions with frontline medical practitioners, they have stressed that it is important to show that the community cares about the wellbeing of youth at risk and those who have abused drugs.

19.6 It may be noted that school based management involves building new relationships with stakeholders, helping schools leverage support from teachers, parents and the community.¹⁶⁹ As evidenced from experience of the Scheme, partnership with community stakeholders is one of the key success factors. Indeed, as noted by the Task Force on Youth Drug Abuse, “in order to more comprehensively and effectively avail the vulnerable youth to the protective factors, it is essential to foster a caring culture for our youth within the community at large.”¹⁷⁰ Furthermore, given school staff, principals and teachers are busy with the ongoing learning and teaching activities, it is desirable not to overburden school staff, especially teachers, with school drug testing.

19.7 School drug testing involves the delivery of cross-disciplinary services, involving the education, social work and medical professions. To deliver such services effectively requires close cooperation among parties concerned. School drug testing should be conducted by organizations or groups of organizations, in cooperation with schools and CCPSA that can deliver drug testing services, and education, counselling and treatment and support services for students and those who have abused drugs. The main criterion for the choice of NGOs and schools is that there should be mutual trust and understanding among parties concerned, and preferably parties concerned have successful experience of cooperation such that the official arms are not involved except on prior assessment and approval of funding application.

19.8 In other words, *the Project Team recommends that drug testing should be school-based and student-oriented, with community participation. Apart from a district-based arrangement, individual groups or a cluster of schools across different districts, e.g. under the same sponsoring body, may join hands in a scheme in a way that may best suit their circumstances.* Examples of such set-up are as follows:

169 Advisory Committee on School-based Management (February 2000), *Transforming schools into dynamic and accountable professional learning communities*, School-based Management Consultation Document.

170 *Report of the Task Force on Youth Drug Abuse* (November 2008), p.27.

- a) CCPSA located in the same district of the participating schools, similar to the Scheme in Tai Po;
- b) Provided bottom-up initiatives are maintained, schools under the same School Sponsoring Body in cooperation with NGO;
- c) NGO providing school social work services to schools and its client schools;
- d) Any grouping of NGO and schools sharing similar vision and mission with regard to school drug testing.

Components of the anti-drug healthy school programme

19.9 Drug abuse is one of students' behavioural problems which also include gambling, bullying, smoking and prostitution. These are unhealthy lifestyles of students. As recommended in the resource kit prepared by the Hong Kong Federation of Youth Groups, anti-drug education involves learning and teaching inside and outside classrooms, including meaningful life-wide, out-of-school activities, designed to help students develop healthy lifestyles and positive attitudes and values, and enhance their life skills and skills in resisting temptations. Schools have all along been organizing these activities, in tackling students' unruly and delinquent behaviour, including drug abuse.

19.10 As part of the healthy school policy promulgated by EDB, it has been recommended that each school should appoint an experienced teacher to coordinate all matters relating to the healthy school policy, who will be responsible for fostering a caring environment and a positive and amicable atmosphere to encourage students to lead a healthy way of life. The school management will need to ensure that all staff understand and support the healthy school policy. The healthy school policy should be an integral part of the school's Three Year Development Plan and Annual Plan and Report, and should be subject to regular review for adjustment and improvement.¹⁷¹

19.11 It is noted that healthy school policy is an embracing framework covering a wide range of themes including anti-drug education. Schools have the flexibility to develop a healthy school policy to cater for the specific needs of their students. Regarding anti-drug education, early identification of at-risk students should be an integral part of the strategy of healthy school policy. Among others, drug testing is

171 *Report of the Task Force on Youth Drug Abuse* (November 2008).

one of the options for anti-drug education and early identification purposes.

19.12 From a macro perspective, and for better coordination and effective implementation, any anti-drug activities including drug testing should become part of the healthy school programme of schools. In addition to healthy school activities for students, schools should take steps to cultivate a harmonious school environment and foster a culture of mutual support and care among teachers and students. A mechanism should also be put in place for identifying students in need of help and referring them to relevant parties for timely guidance and treatment.

19.13 To summarize from the above discussions, anti-drug activities should cover preventive education for students at large, early identification of students at risk, including those who have not yet abused drugs, in collaboration with community partners, and timely guidance and treatment for students who have abused drugs. As parents play an important role in anti-drug education, prevention and treatment, the Project Team believes that support and assistance to parents are also essential.

19.14 *The Project Team recommends that a host of educational, support and assistance programmes, for both parents and students, shall be put in place to supplement drug testing. We recommend that the anti-drug activities, as part of the healthy school program should comprise a number of components including:*

- a) Education for parents and proactive support and assistance to parents in need, in collaboration with community partners;*
- b) Measures to cultivate mutual support and care among teachers and students (e.g. healthy ambassador scheme to promote mentoring among students);*
- c) Anti-drug activities inside and outside classrooms for students at large;*
- d) Drug testing as a preventive and deterrent measure;*
- e) Specific programmes such as physical and mental health screening and physical fitness tests to engage students at risk; and*
- f) Mechanism for timely guidance and treatment for students identified to have abused drugs.*

Fine-tuning the Protocol

19.15 Drug testing was implemented in Tai Po for six months. Students who were drug tested were largely satisfied with the drug testing process. The Scheme was found to be effective in strengthening students' resolve in refusing drugs and triggering motivation to seek help, as perceived by students, parents and teachers. The Project Team does not see any strong justifications for significantly modifying the Protocol of the Scheme.

19.16 Nevertheless, as discussed above, there is room to fine-tuning the Protocol, based on experience gained in implementing the Scheme, with a view to increasing the efficiency and minimizing inconvenience to students and disruption to learning and teaching. The main features of such fine-tuning are summarized below. The slightly modified sample Protocols, for schools adopted POCT urine test, laboratory urine test or laboratory hair test, is given in [Appendix 5](#).

- a) In line with the proposal that anti-drug activities should become part and parcel of healthy school activities, the consent form should become a pledge made by students to adopt healthy lifestyle and stay away from drugs. Consent to take drug testing becomes part of the pledge, thus emphasizing the educational focus of drug testing;
- b) The process of drug testing can be streamlined, as there is no need for students to take drug tests in a manner such that the students will not be seen by other classmates, subject to compliance with provisions of the Personal Data Privacy Ordinance and that students should be allowed to give their urine samples in private. Furthermore, there is no need to spend time in repeating anti-drug messages to students during the drug testing process, as such should have been or could be given during other group briefing and promotion programmes (to all participating or non-participating students). Consequently, drug testing is expected to be completed in a few minutes rather than 15 minutes;
- c) In the spirit of shifting the balance of resources for school based drug testing, in proportionate terms, from the process of conducting drug tests to activities on preventive education, the number of staff deployed to conduct drug tests can be reduced. The NGO concerned may consider deploying trained technicians other

than professional nurses to collect specimens and/or conduct on-the-spot screening tests (where applicable);

- d) The role of Project Officer (fielded by the Government for the Scheme), in providing advice to schools on data protection arrangement and in quality assurance should in the long run be taken up by schools and NGO concerned. Indeed, in organizing activities for students and other clients, schools and NGOs are expected to exercise utmost care and caution in protecting privacy and personal data of students or their clients and to ensure that the activities are conducted in a professional manner. It is recommended that schools should consider deploying “School Project Assistants” dedicated to overseeing the drug testing and matters related to data protection arrangement;
- e) Depending on the types of drug testing methodology adopted by schools, students will be informed of the drug test results at the point of collection if POCT urine testing is adopted, or several days later if laboratory urine test or hair test is adopted. Schools will have to ensure that emotional problems of students, if any, will be promptly attended to in case students are informed of the test positive results at the point of collection but subsequently found to be false positives, or in case students are informed of the test results several days later and not at the point of collection; and
- f) Direct laboratory confirmatory testing may be used, if there is valid concern about carrying out a screening test (e.g. where the result may be affected by medications taken lawfully).

19.17 In brief, the following drug testing arrangements are recommended for future school drug testing schemes –

A district-based consensual scheme (similar to the Trial Scheme in Tai Po)

- a) Suitable for a significant number of schools within a district (not necessarily the majority) sharing the same aspirations.
- b) Formation of a Student Drug Testing (SDT) team by a designated NGO - for overall co-ordination of the drug testing schemes, management of the drug testing arrangements, receiving test results,

- providing on-the-spot counselling service for students (where appropriate), and assurance of quality;
- c) Participation of the CCPSA serving the district in which the schools are located – for case management and counselling services for drug abusing students uncovered by the scheme (additional resources will be provided only when the CCPSA can show that the drug testing scheme has generated additional caseload over and above their current service capacity);
 - d) Enhancement of the school social work service - for providing counselling and education to participating / non-participating students, students in need and their parents / guardians; and
 - e) Administrative and logistics support for schools - including resources for the provision of School Project Assistants by schools to oversee all drug testing visits, arrange logistics support on drug testing day, assist the school principal in complying with the privacy requirements as set out in the Protocol, handle complaints/enquiries on drug testing and compile school visit reports to schools.

A consensual scheme for a cluster of schools across different districts

- f) Suitable for schools across different districts sharing the same aspirations, e.g. under the same school sponsoring body. Small sponsoring bodies with like minds may join hands to form a bigger cluster of schools, with assistance from EDB and ND as appropriate.
- g) Same arrangements as the district-based consensual scheme, except that more than one CCPSA will be involved in providing the counselling services to students in need (according to the districts where the participating schools are located).

19.18 The slightly amended Protocol mentioned above is intended for schools in the same districts, following the arrangement of the Scheme in Tai Po. For other school-based set-up, involving schools in different districts, a different set of sample Protocols is required and is given in Appendix 6. It is advisable to pilot the different sets of Protocols on a few schools to ensure their workability and based on the experience gained further refine the Protocols. Besides, the Protocols have to be updated taking into account changing drug abuse situations, including the types of drugs taken, among students, shift in public opinion and views of

stakeholders on drug testing in general and the drug testing in particular and changes in drug testing technology (e.g. the availability of POCT for hair testing).

Choice of testing methods

19.19 In the Scheme, Point of Collection Test (POCT) devices were used in the on-site initial screening to detect the presence of 5 drugs, namely ketamine, ecstasy, methylamphetamine, cannabis and cocaine, in a urine sample. If the results of the two screening tests were positive, the same urine sample would be taken to the Government Laboratory for a confirmatory test, using sophisticated instruments, namely gas chromatography-mass spectrometry (GC-MS) or liquid chromatography-mass spectrometry (LC-MS).

19.20 While the use of POCT devices is more economical, the window to detect ketamine is small. Furthermore, there is considerable subjectivity in interpreting test results, leading to potential false-negative and false-positive errors. Alternatively, laboratory tests may be used, which has a longer detection window and is much more reliable, though laboratory tests are more costly. In addition, the Project Team also notes that following the Chief Executive's steer for the Government to take the lead in bringing in hair drug testing, Government Laboratory has successfully developed the hair drug testing method, obtained accreditation by the Hong Kong Accreditation Service and launched a pilot scheme. Other than urine testing, hair testing may also be made use of for the benefit of a longer detection window, subject to considerations of higher costs and students' possible resistance. It is relevant that Government does not mandate any option that may discourage students' participation.

19.21 It is recommended that in addition to urine testing, with on-site screening followed by laboratory testing for screened positive cases, more testing methods should be made available for participating schools to consider.

20. Roles of government bureaux and departments

Narcotics Division (ND)

20.1 The Scheme is a joint initiative of the Government (led by the Narcotics

Division (ND), Security Bureau (SB) and Education Bureau (EDB)) and 23 public sector secondary schools in the Tai Po District, supported by parties in the social welfare, healthcare and related sectors. If school drug testing continues to be conducted in secondary schools in Tai Po or is replicated in other schools, it is recommended that a bottom up approach in line with the school-based management arrangements should be adopted. Where schools take the initiative to pursue drug testing ND will have to assume an important role to work with departments concerned to ensure that the design of drug testing by schools is geared to the needs of the schools and implemented in such a manner that will achieve its intended objectives and with utmost care and caution on protecting the rights/interests of students and the privacy of students taking the drug tests.

20.2 As noted by the Task Force on Youth Drug Abuse, all along ND of SB plays a central policy formulation and coordination role. Over the years, great efforts have been made to arouse awareness of the drug issues in the community and to educate the public about the harm of drug abuse. ND has worked hand in hand with Action Committee Against Narcotics in organising wide-ranging educational and publicity activities to spread the anti-drug messages, in collaboration with other government bureaux/departments such as EDB, Department of Health and SWD, and many stakeholders in the community.¹⁷²

20.3 Over the years, the Beat Drug Fund (BDF) has sponsored a variety of preventive education, publicity and treatment and rehabilitation programmes, including the preparation of anti-drug resource kits, recruitment and training of students as health ambassadors and peer counsellors, mentorship and experiential programmes for high-risk students. BDF has also funded projects with elements of preventive education, early identification, treatment and rehabilitation. As drug testing and the accompanying anti-drug activities fall squarely within the ambits of BDF, BDF should continue to serve as the major funding source for future school-based drug testing schemes. As most schools do not have experience in BDF procedures, ND may also be expected to provide the necessary advice and guidance to them.

20.4 *The Project Team recommends that ND should continue to play a pivotal role in promoting drug testing as part and parcel of a healthy school programme that embodies drug testing and support services to both students and parents. ND should also be expected to provide advice to schools and NGOs concerned to*

¹⁷² Report of the Task Force on Youth Drug Abuse (November 2008), p.29.

ensure that the drug testing and complementary programmes are implemented with due care and caution over the protection of students' rights and privacy, as well as to perform an auditing role over the "quality" of future school-based drug testing.

Education Bureau (EDB)

20.5 As discussed above, drug testing should be a component of the healthy programme of schools that aims at helping students to develop healthy lifestyle, enhancing their resolve to refuse drugs and triggering those who have taken drugs to quit drugs. As noted by the Task Force on Youth Drug Abuse, EDB is taking the lead to promote institutionalisation of a healthy school policy in all schools. It has set up a time-limited dedicated anti-drug education team to spearhead and coordinate such efforts during the initial three years and an advisory committee to benefit from the counsel of representatives from the school sector and departments concerned.¹⁷³

20.6 In addition to the role of promotion and coordination, the Project Team believes that EDB could provide direct support to schools through its Regional Education Offices (REOs). It is noted that four REOs were set up in July 2000 under the then Education Department to forge a closer partnership with schools and to provide comprehensive and integrated services to schools and the public at the district level. There are 18 School Development Sections in the four REOs to support schools in the areas of school administration, curriculum development, learning and teaching, student guidance and psychological services. Among the various duties of REO, it is responsible for enhancing school development, facilitating schools to implement school-based management and coordinating school-based support services for schools.¹⁷⁴ As regards drug testing as a component of a healthy school programme, the REO is in an advantageous position to serve as an advisor to help schools take stock of their needs and match with available services provided by NGOs and other stakeholders.

20.7 *The Project Team recommends that EDB (with support by ND, SWD and other relevant government departments), apart from promoting and coordinating healthy school activities, should through its REO act as advisor for schools to*

¹⁷³ Report of the Task Force on Youth Drug Abuse (November 2008).

¹⁷⁴ EDB website, <http://www.edb.gov.hk/index.aspx?nodeID=234&langno=1> assessed on 27 July 2010.

match their needs with available services provided by NGOs and other stakeholders, in implementing schools' healthy school programme.

20.8 It is noted that though REO is positioned to support and facilitate schools to develop and provide quality education, drug testing by nature involves expertise quite new to REOs. Thus, the REOs will need adequate training and professional support on the strategy and implementation details of school drug testing as well as other measures aimed at early identification and timely support for students-at-risk under the healthy school program so that they could take up an effective advisory role in this area. Furthermore, to facilitate the work of REO in performing its advisory role in matching school's needs with services available, consideration should be given to developing an information sharing platform on services provided by NGOs.

Social Welfare Department (SWD)

20.9 As noted by the Task Force on Youth Drug Abuse, SWD plans and subvents an array of NGO-run preventive, developmental, supportive and remedial services to address the multifarious and changing needs of young people of different backgrounds through an integrated and holistic mode of service, including the counselling centres for psychotropic substance abusers (CCPSAs) which provide counselling services and other assistance to psychotropic substance abusers and youth at risk. SWD also supports and subvents efforts to engage youth and identify those at risk, including services such as the school social work service, District Youth Outreaching Social Work Teams (YOTs), and designated Integrated Children and Youth Services Centres which provide overnight outreaching service for young night drifters (YNDs).¹⁷⁵

20.10 In connection with anti-drug work in general and the school drug testing in particular, apart from planning, supporting and subventing drug treatment and rehabilitation services targeting at risk youngsters and those who have abused drugs, SWD has been collaborating with concerned bureaux/departments under the policy coordination of ND to achieve the various initiatives. SWD could always play a coordinating role among its subvented NGOs to meet the welfare needs of targeted groups, including needy students and drug abusers, which are stipulated in the funding and service agreements mutually agreed and signed with the NGO operators. Necessary interfacing and collaboration with other

¹⁷⁵ *Report of the Task Force on Youth Drug Abuse* (November 2008).

stakeholders in the district or the community at large in managing various anti-drug measures would be achieved through the district or headquarters levels.

20.11 The Project Team recommends that SWD should join hands with ND, EDB and Department of Health (DH) continuously to help schools in leveraging and coordinating support from its subvented NGOs in providing preventive, early identification, intervention and treatment services to students, as part of the healthy school programme of schools.

Department of Health (DH)

20.12 As noted by the Task Force on Youth Drug Abuse, the Student Health Service (SHS) run by DH provides services to primary and secondary school students ranging from health examination, individual counselling, health education and referrals through its Student Health Service Centres. It is a key platform to engage young people to safeguard their physical and psychological health through comprehensive, promotion and preventive health programmes. It has an outreaching component to secondary schools with services provided by a multi-disciplinary team comprising doctors, nurses, dietitian, social workers, clinical psychologists and health promotion officers. Apart from refusal skills and basic life skills training covering emotion and stress management and healthy living, the team also educates students on the harmful effects of drug abuse to health. In addition, the team runs topical programmes for students, teachers and parents on topics including suicide and substance abuse prevention.¹⁷⁶

20.13 In the course of conducting the present study, a number of principals and social workers put forward the suggestion of asking SHS to take over drug testing. The Project Team notes that SHS has an important role to play in promoting the health of school children, through various promotion and preventive services which cater for the physical and mental health needs of school children in different stages of development.¹⁷⁷ If SHS takes over drug testing, there are serious concerns that students' willingness to participate in activities organized by SHS will be adversely affected, thereby jeopardising the SHS itself. On balance, the Project Team does not consider it desirable to add drug testing to the health check programme under the SHS. Instead, SHS is better placed to perform the role of promoting anti-drug education for primary and secondary school students.

¹⁷⁶ Report of the Task Force on Youth Drug Abuse (November 2008).

¹⁷⁷ Reference is made to SHS website, <http://www.studenthealth.gov.hk/eindex.html>.

20.14 *While SHS through its regular promotion and preventive activities could supplement anti-drug efforts by schools and NGOs, the Project Team recommends that SHS should be better placed to perform the role of promoting anti-drug education for primary and secondary school students and should not be involved in school drug testing.*

Police

20.15 As noted by the Task Force on Youth Drug Abuse, the Police School Liaison Programme (PSLP) can play a key part in supporting schools in combating the youth drug abuse problem on campus. Under the PSLP, there are school liaison officers who assist schools in identifying early juvenile delinquency, preventing and tackling students' involvement in crime and illegal activities. Apart from liaising closely with schools on the practical enforcement of the law and collecting information concerning student involvement in illegal activities, school liaison officers also interview problematic students identified by schools on a small group or individual basis to assist them in building up positive values and observing discipline, and conduct talks in schools regularly on a wide range of topics including preventing and combating drug abuse.¹⁷⁸

20.16 During discussions with principals and teachers, a number of them expressed their appreciation of the work of school liaison officers in helping schools tackle student's unruly and delinquent behaviour. A few of them even expressed the wish that the Police should be more actively involved in drug testing, in order to gather intelligence on the supply of drugs to students especially those tested positive. The Project Team notes that in the Scheme, the Police would not be informed of the personal data of any student participating in the Scheme. They were however provided with aggregate statistics on the test results to help them understand drug situations at schools. This would facilitate the Police to better focus their efforts and resources to combat the supply of drugs.

20.17 Given that the focus of drug testing is educational in nature, the Project Team supports the arrangement that the Police is not informed of any personal data of students participating in the Scheme and those who are tested positive in drug testing. The Project Team is aware that the research findings, as discussed in Chapter VI, show that most students do not mind that information related to their

¹⁷⁸ *Report of the Task Force on Youth Drug Abuse* (November 2008).

participation in the Scheme is made known to principals, teachers, classmates and school social workers. There is also not likely to have any labelling effect on students who have or have not participated in the Scheme. Furthermore, similar to other school activities, students sampled for drug testing are inevitably seen by other students or school staff. Nevertheless, the Project Team is of the view that personal information related to students participating in drug testing should only be released to those named in the consent forms signed by students and their parents.

20.18 The Project Team also notes that the purposes of PSPL are educational in nature, in fostering good relationship between students, parents and teachers on the one hand and the Police on the other, and in helping students understand the risks associated with crime, drug abuse, triad activities and other offenses, etc.¹⁷⁹ Besides, the Police has other channels of gathering drug-related intelligence and does not need to rely on drug testing to obtain intelligence on the supply of drugs to students.

20.19 The Project Team recommends that similar to the arrangement for the Scheme in Tai Po, personal data of students participating in drug testing, including those who are tested positive in drug testing, should not be provided to the Police.

Government Laboratory (GL)

20.20 GL has played an important role in the Scheme by conducting confirmatory tests on urine samples tested positive in the screening tests. At present, GL is the only accredited laboratory in conducting confirmatory hair drug tests. If hair drug testing is adopted by schools, GL will be the only laboratory in Hong Kong which is accredited to conduct hair drug testing.

20.21 In his 2009-10 Policy Address the Chief Executive announced that “to make available another effective drug-testing tool, GL will take the lead in bringing in hair drug testing, with a view to transferring the technology to the industry”.¹⁸⁰ The Project Team believes that, given GL’s expertise and experience in conducting drug tests, especially hair drug tests, it could play a pivotal role in

179 Reference to made to PSPL website,

http://www.police.gov.hk/ppp_en/11_useful_info/youth/pslp.html.

180 *The 2009-10 Policy Address: Breaking new ground together*, p.34.

supporting school drug testing and facilitating the transfer of technology to local industry. If school drug testing is adopted by a greater number of schools, it will generate sufficient demand to stimulate private sector investment in testing technology. Indeed, as pointed out by the Chief Executive in his 2009-10 Policy Address, apart from the four pillar industries (namely financial services, tourism, trading and logistics, and professional services), the six industries which includes testing and certification are crucial to the development of Hong Kong's economy. The testing and certification industry is highly acclaimed by users for its professionalism, integrity and credibility of test results.¹⁸¹

20.22 GL may provide drug testing services in support of schools and NGOs which require its assistance. To facilitate technology transfer, to arouse interests of local laboratories and potential investors or service providers and to promote good drug testing practices, GL could consider organizing technical seminars and workshops to share its expertise and experience in conducting drug testing in Hong Kong, with a view to promoting and encouraging private sector laboratories with capabilities and accreditation to participate in drug testing schemes.

Department of Justice (DoJ)

20.23 Prosecution policy is a matter for DoJ which needs to uphold the public interest and strike a balance. It may continue following a prosecution policy that a participating students who has been tested positive or who admits drug abuse pursuant to the school drug testing scheme will not be prosecuted for consumption of drugs contrary to section 8 of the Dangerous Drugs Ordinance.

Home Affairs Department (HAD)

20.24 HAD may review the experience gained from implementing the one year community-based mentoring scheme in the 18 districts and in-depth mentoring scheme for Tai Po, taking into account the results of a supplementary part of this current research on the support programme.

181 *The 2009-10 Policy Address: Breaking new ground together*, p.14.

21. Resources

Overview

21.1 Estimating resources required for implementation of the above recommendations is not easy as it is difficult to project how many schools will implement an anti-drug healthy school programme that includes drug testing as one of its components. Furthermore, while a rough estimation of the cost of conducting drug testing may be drawn up based on experience gained from the Scheme, little information is available on the unit costs for other components. A cursory examination of projects funded by BDF that are related to physical and mental health screening and physical fitness tests shows that there are wide variations in the unit costs of different projects. Admittedly, much depends on the project contents, the extent of treatment and intervention provided to students and how these projects are implemented. The Project Team believes that NGOs, as usual, will display their ingenuity and creativity in coming up with proposals that are geared to the needs of individual schools or groups of schools, with cost implications that may be higher or lower than what are presented below. Invariably, NGO bidding for funding from BDF will have to justify each and every component of their proposal and the staffing and other cost implications.

Rough estimate of cost on drug testing alone

21.2 As a very rough estimate of cost on drug testing alone based on the Scheme in Tai Po, the cost may be \$350,000 per school per annum for schools adopting urine screening tests and laboratory confirmation, \$360,000 for schools adopting urine laboratory tests and \$400,000 for schools adopting hair laboratory tests. This has included cost for enhancing school social work service and CCPSA support. If Government's plan to enhance the manpower of school social service in all secondary schools, as announced in the Policy Address 2010-11, is implemented, the cost of additional school social service may be deducted from the estimated cost (by about \$100,000 per school per annum).

21.3 It should be noted that schools may find their own ways to pursue the healthy school policy according to their own circumstances (i.e. a school-based approach) and pursue complementary components in their own rights with or without other preventive / deterrent initiatives. If schools planning to introduce school drug testing take up other components of the healthy school programme suggested above, including for example education and support to parents in need and specific programmes such as physical and mental health screening and physical fitness tests to engage students at risk, the cost will be higher than those illustrated above.

22. Limitations of the research

Quasi-experimental design

22.1 As discussed above, apart from data limitations, the time is too short for the research to identify any impact of the Scheme, of practical significance, on students' awareness of drugs, attitude towards fighting drugs and drug taking behaviour. The Project Team has attempted to make the best use of statistical information gathered in the 2008/09 survey, December 2009 survey and the June 2010 survey. However, the data were gathered from three independent surveys, adopting different sampling designs and questionnaires. In short, this is not a pre-post design, rendering it impossible to draw any definitive inference on the impact of the Scheme from the data.

22.2 In addition, participation in drug testing was based on decisions of students and parents while participation in the Scheme by schools was based on the joint decision of all schools in Tai Po. In other words, participation in the Scheme and in drug testing was not random. Hence, a randomized design was not possible.

22.3 Furthermore, the 2008/09 survey, the December 2009 survey and the June 2010 survey were conducted anonymously, without identifying individual students completing the questionnaires. While this is a sensible approach in conducting the survey, given the need to protect confidentiality of information provided by students and the desirability of keeping the survey response anonymous in order to encourage frank response by students, the survey design does not allow matching of students in comparing their changes in knowledge,

awareness, attitude and behaviour before and after drug testing. Any analysis of changes can only be conducted at an aggregate level for groups of students as a whole.

Controlled group not controlled

22.4 The original intent is to recruit samples outside Tai Po as control group of the study in order to examine the impact of the implementation of the Scheme. In the course of conducting the research, the Project Team realized that this was not possible. Principals, teachers, students and parents were watching closely what was happening to drug testing in schools in Tai Po. The survey findings, for example, showed that the great majority (over 80%) of students, parents, teachers and principals of schools outside Tai Po had heard about the Scheme in Tai Po, and among them the majority (over 90%) knew something or a lot about the Scheme.

22.5 Moreover, the introduction of school drug testing in Tai Po had sparked heated discussions in the community, with media reports on views supporting or not supporting school drug testing. Besides, the government had stepped up its anti-drug publicity and educational efforts, not only in Tai Po but also in other districts. In fact, it was difficult, if not impossible, to contain the impact of publicity and educational activities to schools in Tai Po only even though such activities were organized in Tai Po schools only, as such activities would attract attention of those outside Tai Po, through say media reports. In addition, students, parents, teachers and principals of schools in Tai Po inevitably had contacts with those of schools outside Tai Po, sharing their experience and exchanging their views.

22.6 In short, the control group of students, parents, teachers and parents cannot in practice be “controlled”, as far as the impact of the Scheme is concerned. Given that school drug testing and the related publicity and educational activities are largely educational in nature, such impact on the control group should be welcomed, even though it has diminished the usefulness of the control group in the research design.

Time span too short

22.7 The research study was conducted in a time span of less than six months. Though efforts were made by the Project Team to delay the post-survey to early June 2010 before schools closed for the summer holidays, the lapse time of less than six months after drug testing was first conducted in January 2010 was too short for the research to detect any significant changes in students' knowledge, awareness, attitude and behaviour. The Project Team believes that any educational efforts should be sustained and the impact on students' attitude and behaviour is likely to be gradual. In other words, the present research study may not be able to capture the full impact of the Scheme.

22.8 Furthermore, students may change their behaviour due to the attention they are receiving from the researchers rather than due to the Scheme. This is the commonly known "Hawthorne effect". Later research into the Hawthorne effect has suggested that the original results may have been overstated. In 2009, researchers at the University of Chicago reanalyzed the original data and found that other factors also played a role in productivity and that the Hawthorne effect originally described was weak at best.¹⁸² Researchers also pointed out that many clinical trials were unable to quantify the magnitude of the Hawthorne effect. Furthermore, the extra attention given by researchers or higher levels of clinical surveillance applied to both the treatment and control group. Consequently, it might result in an inflated estimate of effect size in routine clinical settings by over-estimating response of both groups.¹⁸³

Coverage and response rate not satisfactory

22.9 As the post-survey was conducted in early June, most Secondary 5 and Secondary 7 students did not have to attend classes and return to schools. As a result, it was not possible to conduct interviews on Secondary 5 and Secondary 7 students. Consequently, the present research could only assess the impact of the Scheme, before and after drug testing, for Secondary 1 – 4 and Secondary 6

182 "Light work." (2009, June 6). *The Economist*, accessed on 15 August 2010.

http://www.economist.com/businessfinance/displayStory.cfm?story_id=13788427

183 McCarney, Bob, et al (2007), "The Hawthorne Effect: a randomized, controlled trial", in *BMC Medical Research Methodology*, 7:30.

students.

22.10 In addition, when the survey was conducted in June, most schools were having examinations. Many of them were not able to spare time for the Project Team to conduct interviews with their students and arrange the dispatch and receipt of questionnaires from parents. Thus, while the response rate for schools in Tai Po is highly satisfactory, thanks to the help of schools in Tai Po, the response rate for schools outside Tai Po is not satisfactory. In interpreting statistics derived from the June 2010 post-survey for schools outside Tai Po, readers should note the likely non-response bias caused the high non-response rate.

Recommendations

22.11 In view of the above limitations and in order to better assess the impact of the Scheme, providing timely feedback on its implementation and identifying improvement measures required, it is recommended that further research should be conducted over a longer time frame, on the scheme(s) to be implemented in future, e.g. the Scheme in Tai Po extended in school year 2010/11.