



Adolescent Drug Testing Policies in Schools

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abstract

School-based drug testing is a controversial approach to preventing substance use by students. Although school drug testing has hypothetical benefits, and studies have noted modest reductions in self-reported student drug use, the American Academy of Pediatrics opposes widespread implementation of these programs because of the lack of solid evidence for their effectiveness.

BACKGROUND

School-based drug testing is a controversial approach to preventing substance use by students. Two Supreme Court decisions have affirmed the legality of these programs.^{1,2} Proponents argue that school-based drug testing reduces student substance use by providing students a reason to avoid drug use because of potential negative consequences linked to a positive test and identifying adolescents with substance use disorders who can then be referred for treatment. In a cluster randomized trial, DuPont et al³ found that students subjected to school-based drug testing reported significantly lower rates of marijuana and other illicit drug use over the past 30 days and also the past year compared with students in schools without school-based drug testing.

Despite these promising results, a number of questions surround school-based drug testing. Previous studies yielded ambiguous findings,⁴ and other findings from the DuPont et al study were more equivocal than those cited here, including no change in use patterns for substances not included in their drug testing panels, a substantial concern because school-based drug testing generally does not include the substance most commonly used by adolescents: alcohol. The total number of positive drug test results (and presumably number of treatment referrals) in each study was low, and it was lower than expected on the basis of student self-reported drug use, suggesting that the students who reduced their use had low levels of substance use in the first place. Given that participation in these studies was voluntary, it is likely that students with heavier use simply declined to participate.

Although any reduction in student drug use is beneficial, it is questionable whether school-based drug testing is the best use of limited school resources. A study by Harris et al⁵ found that brief

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professional advice resulted in significantly lower rates of alcohol initiation among those who had not used alcohol in the past 12 months and significantly increased alcohol cessation among those who had used alcohol in the past 12 months in a population of adolescents with infrequent substance use. A school-based counselor could provide such advice and guidance to low-risk students while also providing counseling to students with more significant substance use problems by using a number of effective treatment modalities.⁶ Currently, the Substance Abuse and Mental Health Services Administration estimates that less than 10% of adolescents with a substance use disorder receive any treatment.⁷ Using limited resources to provide advice, counseling, and even on-site treatment of adolescents could both serve a preventive role and increase the number of adolescents who have their substance use disorders addressed and ultimately have a larger effect on reducing student drug use than drug testing alone. The 2 strategies have never been compared in a scientific study.

Other concerns regarding school-based drug testing include the potential for breach of privacy (eg, when a student's prescribed medications are identified on a drug test); detrimental consequences, such as suspension or expulsion for students who have positive drug test results; school dropout or increased truancy for students who fear they would fail a drug test; or increased use of substances not easily detectable on a drug screen. To date, few studies have been designed to monitor these consequences, and their frequency and impact remain unknown.

RECOMMENDATIONS

1. The American Academy of Pediatrics (AAP) recommends that pediatricians advocate for substance abuse prevention programs in schools and support schools in developing intervention programs and referral systems for adolescents with substance use disorders.
2. The AAP recognizes the health and psychosocial burden of substance use by students and supports the development and study of school-based programs to prevent drug use and treat students with substance use disorders. In particular, the AAP encourages schools to include school-based services for adolescents with substance use disorders, because this group is largely underserved, despite the availability of effective treatment.
3. The AAP supports effective substance abuse services in schools but opposes widespread implementation of drug testing as a means of achieving substance abuse intervention goals because of the lack of evidence for its effectiveness.
4. The AAP recommends that schools and school districts that do choose to use school-based drug testing carefully consider and monitor the program for potential adverse effects, including decreased participation in sports, breach of confidentiality, increases in use of substances not included on testing panels, and increases in the number of students facing disciplinary action.

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