



WHAT YOU NEED TO KNOW ABOUT

Drug
Testing
in Schools

Drug Testing in Schools

OFFICE OF NATIONAL DRUG CONTROL POLICY



***“[W]e find that testing students
who participate in extracurricular
activities is a reasonably
effective means of addressing
the School District’s legitimate
concerns in preventing, deterring,
and detecting drug use.”***

**Justice Clarence Thomas
U.S. Supreme Court
JUNE 27, 2002**

*Board of Education of Independent School
District No. 92 of Pottawatomie County v. Earls*

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Foreword

In June 2002, the U.S. Supreme Court broadened the authority of public schools to test students for illegal drugs. Voting 5 to 4, the Court ruled to allow random drug tests for all middle and high school students participating in competitive extracurricular activities. The ruling greatly expands the scope of school drug testing, which previously had been allowed only for student athletes.

There are those, of course, who will represent the Court's decision as a blow against privacy and a victory for "Big Brother." These concerns are largely unfounded, however, and to focus on them is to ignore the enormous potential benefits of drug testing. Already, testing has been shown to be extremely effective at reducing drug use in schools and businesses all over the country. As a deterrent, few methods work better or deliver clearer results. Drug testing of airline pilots and school bus drivers, for example, has made our skies and roads safer for travel.



John P. Walters

Parents, educators—indeed, anyone concerned about the welfare of our young people—should welcome the High Court's action. It's a big step in the right direction, for it gives every school in every city and every town a powerful new tool for controlling one of the worst threats facing kids today.

The ruling could not have come at a better time. *Monitoring the Future*, a national survey that tracks drug use among America's

youth, reports that in 2001 more than half of all students had used illicit drugs by the time they finished high school. Moreover, the 2000 *National Household Survey on Drug Abuse* revealed that of the 4.5 million people age 12 and older who need drug treatment, 23 percent are teenagers.

This failure to protect our children from drug use and addiction is unacceptable. We cannot responsibly withhold tools as effective as drug testing from communities that believe such measures are appropriate and will save young lives.

Research shows that people who make it through their teenage years without using drugs are much less likely to start using them when they are older. So if testing can help keep kids off drugs and alcohol, if it can help free young minds for learning and allow growing bodies to escape the devastating cycle of dependence or addiction, it will be a valuable and important new tool.

Experience has taught us that people at the local level often know best how to deal with drug problems in their communities. But to combat this insidious threat, they need good information and the best resources available. The Supreme Court's ruling will help schools meet these needs. This is good news for students, parents, and teachers. And it is good news for America.



John P. Walters
DIRECTOR
Office of National Drug Control Policy

Introduction

Should Schools Test Children For Illegal Drugs?

It is an important question, and ultimately one best left to parents, teachers, and school administrators. There is no single right or wrong answer, no “one size fits all” solution. A decision in June 2002 by the U.S. Supreme Court expands the authority of public schools to test students for drugs. Still, it is up to individual communities and schools to decide if drugs are a significant threat, and if testing is an appropriate response.

The question of whether to test students for drugs or alcohol should never be taken lightly. It involves myriad complex issues that must be fully understood and carefully weighed before testing begins. The Office of National Drug Control Policy has put together *What You Need*

To Know About Drug Testing in Schools to shed light and offer perspective on this multifaceted and sometimes controversial topic. Our aim is to provide anyone who is

considering a drug-testing program in his or her community with a broad understanding of the issue and solid, up-to-date information on which to base a decision.

Included in this booklet are answers to questions that students, parents, school officials, and other concerned individuals might have about the process. It explains, generally, what drug testing is all about, who pays for it, who does the testing, what it tells you about an individual’s drug use, and, equally important, what it does *not* tell you. The booklet describes what services should be in place for communities to deal effectively with students who test positive for drugs, and it also offers case histories (pages 3 and 12) showing how several schools used testing to address their drug problems. Their experiences may help others determine whether testing is right for their communities.

It is up to communities and schools to decide if drugs are a significant threat, and if testing is an appropriate response.

Drug Testing: An Overview

What Did the Court Rule?

In the case of the Board of Education of Independent School District No. 92 of Pottawatomie County et al. v. Earls et al., the U.S. Supreme Court upheld a drug-testing program for students involved in competitive extracurricular activities. Although the ruling allows schools to test greater numbers of students for drugs, it is not a blanket endorsement of drug testing for all students. Before implementing a drug-testing program, schools should engage legal counsel familiar with the law regarding student drug testing.

Why Drug-Test Students?

Thanks to advances in medical technology, researchers are now able to capture pictures of the human brain under the influence of drugs. As these images clearly show, the pleasurable sensations produced by some drugs are due to actual physical changes in the brain. Many of these changes are long-lasting, and some are irreversible. Scientists have recently discovered that the brain is not fully developed in early childhood, as was once believed, but is in fact still growing even in adolescence.

Introducing chemical changes in the brain through the use of illegal drugs can therefore have far more serious adverse effects on adolescents than on adults.

If testing can reduce students' use of illicit drugs, it will remove a significant barrier to academic achievement.

Even so-called soft drugs can take a heavy toll. Marijuana's effects, for example, are not confined to the "high"; the drug can also cause serious problems with memory and learning, as well as difficulty in thinking and problem solving. Use of methamphetamine or Ecstasy (MDMA) may cause long-lasting damage to brain areas that are critical for thought and memory. In animal studies, researchers found that four days of exposure to Ecstasy caused damage that persisted for as long as six or seven years. Kids on drugs cannot perform as well in school as their drug-free peers of equal ability. So if testing reduces students' use of illicit drugs, it will remove a significant barrier to academic achievement.

Case History

A Reward for Staying Clean

Autauga County School System

In rural Autauga County, Alabama, students have a special incentive to stay off drugs. As part of a voluntary drug-testing program, participating students who test negative for drugs in random screenings receive discounts and other perks from scores of area businesses.

Community leaders and school officials, prompted by a growing concern about the use of drugs, alcohol, and cigarettes among students, launched the program in 2000 with the help of a local drug-free coalition called Peers Are Staying Straight (PASS). "Our community was awakening to the fact that we needed to do something," says PASS Executive Director Martha Ellis.

The Independent Decision program began with just the 7th grade but will expand each year to include all grade levels. In the 2001–2002 school year, more than half of all 7th and 8th graders at public and private schools participated.

To enter the program, kids take a urine test for nicotine, cocaine, amphetamines, opiates, PCP, and marijuana. Those who test negative get a picture ID that entitles them to special deals at more than 55 participating restaurants and stores. Students keep the ID as long as they test negative in twice-yearly random drug tests.

Those who test positive (there have been only three) must relinquish their cards and any special privileges. The school counselor notifies the parents and, if appropriate, offers advice about where to find help. At that point, the matter is strictly in the parents' hands. If the child tests negative in a subsequent random test, his or her card is returned. "Our whole purpose," says Ellis, "is to reward kids who stay clean and help them see the benefits of a drug-free lifestyle."

Surveys taken by PRIDE (the National Parents' Resource Institute for Drug Education) before the program began and again in 2002 showed significant reductions in drug use among Autauga County's 8th graders: from 35.9 percent to 24.4 percent for nicotine, 39.9 percent to 30 percent for alcohol, and 18.5 percent to 11.8 percent for marijuana.

For more information about Autauga's Independent Decision program, call (334) 358-4900.

Substance abuse should be recognized for what it is—a major health issue—and dealt with accordingly. Like vision and hearing tests, drug testing can alert parents to potential problems that continued drug use might cause, such as liver or lung damage, memory impairment, addiction, overdose, even death. Once the drug problem has been identified, intervention and then treatment, if appropriate, can begin.

Testing can also be an effective way to prevent drug use. The expectation that they may be randomly tested is enough to make some students stop using drugs—or never start in the first place.

That kind of deterrence has been demonstrated many times over in the American workplace. Employees in many national security and safety-sensitive positions—airline pilots, commercial truck drivers, school bus drivers, to name a few—are subject to pre-employment and random drug tests to ensure public safety. Employers who have followed the Federal model have seen a 67-

percent drop in positive drug tests. Along with significant declines in absenteeism, accidents, and healthcare costs, they've also experienced dramatic increases in worker productivity.

The expectation that they may be randomly tested is enough to make some students stop using drugs—or never start in the first place.

While some students resist the idea of drug testing, many endorse it. For one thing, it gives them a good excuse to say “no” to drugs. Peer pressure among young people can be a powerful and persuasive force. Knowing they may have to submit to a drug test can help kids overcome the pressure to take drugs by giving them a convenient “out.” This could serve them well in years to come: Students represent the workforce of tomorrow, and eventually many will need to pass a drug test to get a job.

It is important to understand that the goal of school-based drug testing is not to punish students who use drugs. Although consequences for illegal drug use should be part of any testing program—suspension from an athletic activity or revoked parking privileges, for example—the primary purpose is to deter use and guide those who test positive into counseling or treatment. In addition, drug testing in schools should never be undertaken as a stand-alone response to the drug problem. Rather, it should be one component of a broader program designed to reduce students' use of illegal drugs.

What Are the Benefits of Drug Testing?

Drug use can quickly turn to dependence and addiction, trapping users in a vicious cycle that destroys families and ruins lives. Students who use drugs or alcohol are statistically more likely to drop out of school than their peers who don't. Dropouts, in turn, are more likely to be unemployed, to depend on the welfare system, and to commit crimes. If drug testing deters drug use, everyone benefits—students, their families, their schools, and their communities.

Drug and alcohol abuse not only interferes with a student's ability to learn, it also disrupts the orderly environment necessary for all students to succeed. Studies have shown that students who use drugs are more likely to bring guns and knives to school, and that the more marijuana a student smokes, the greater the chances he or she will be involved in physical attacks, property destruction, stealing, and cutting classes. Just as parents and students can expect schools to offer protection from violence, racism, and other forms of abuse, so do they have the right to expect a learning environment free from the influence of illegal drugs.



What Are the Risks?

Schools should proceed with caution before testing students for drugs. Screenings are not 100 percent accurate, so every positive screen should be followed by a laboratory-based confirming test. Before going ahead with tests, schools should also have a good idea of precisely what drugs their students are using. Testing for just one set of illegal drugs when others pose an equal or greater threat would do little to address a school's drug problem.

Confidentiality is a major concern with students and their parents. Schools have a responsibility to respect students' privacy, so it is vital that only the people who need to know the test results see them—parents and school administrators, for example. The results should not be shared with anyone else, not even teachers.

Developing a Testing Program

What Should You Do *Before* You Begin Testing?

The decision of whether to implement a drug-testing program should not be left to one individual, or even to a school board. It should involve the entire community. In fact, by making the effort to include everyone, a school can greatly increase its chances of adopting a successful testing program.

It is not enough to have a general sense that student drug testing sounds like a good idea. Schools must first determine whether there is a real need for testing. Such a need can be determined from student drug-use surveys, reports by teachers and other school staff about student drug use, reports about drug use from parents and others in the community, and from discoveries of drug paraphernalia or drug residue at school.

Schools considering testing will want plenty of public input, bringing together anyone who has an interest in reducing student drug use.

If student drug use is found to be a significant problem, schools will want to consult early in their deliberations with an attorney familiar with laws regarding student drug testing. They should seek the advice of drug prevention and treatment professionals, and also contact

officials at schools that already have drug-testing programs to learn what works and what doesn't.

Schools considering testing will want plenty of public input. They should bring together members of the board of education, school administrators and staff, parents, community leaders, local healthcare agencies, local businesses, students, and anyone else who has an interest in reducing student drug use—even those who are against the idea. Listening to opponents and including their views can strengthen the testing program and improve its chances of success.

What Are the Elements of a Drug-Testing Program?

Many workplaces have had drug-testing programs in place for years, and recently some school districts have implemented programs for testing their athletes.

Successful programs typically share a number of common elements, beginning with a clear written policy. Parents

and teachers sign a statement declaring that they understand the policy, which is announced at least 90 days before testing begins. An effective policy addresses questions such as:



- Which students can be tested for drug use?**
- What is the process for selecting students for testing?**
- Who will conduct the test?**
- What are the consequences of a positive drug test?**
- Are steps clearly articulated for helping students who test positive for drugs?**
- Will a second confirming test be done?**
- Who pays for the test?**
- Will subsequent positive tests result in suspension or expulsion from extracurricular activities?**
- Are test results cumulative throughout a student's tenure at the school, or is the slate wiped clean each year?**
- What happens if a student refuses to take the test? Will refusal be construed as a drug-positive test?**
- Who will see the test results, and how will confidentiality be maintained?**
- How will parents be informed about positive test results?**
- How does a student contest the results of a positive test result? And what mechanism is in place for students whose prescription medication triggers a positive reading?**

What Kinds of Tests Are Available?

Urinalysis, the most common drug testing method, has been studied exhaustively and used extensively, has undergone rigorous challenge in the courts, and has proved to be accurate and reliable. As a result, urinalysis currently is the only technique approved for drug testing in the Federal workforce. Some employers, however, have already begun using other types of drug tests—on hair, sweat, and oral fluids. Each of these new tests has benefits as well as drawbacks. The chart on page 9 outlines some of the pros and cons.

What Does Each Test Measure?

Drug tests are used to determine whether a person has used alcohol or illegal drugs. Some tests show recent use only, while others indicate use over a longer period. Each type of test has different applications and is used to detect a specific drug or group of drugs. The Federal Drug-Free Workplace program, which serves as a model for accuracy and quality assurance in drug testing, relies on a urine test designed to detect the use of marijuana, opiates, cocaine, amphetamines, and phencyclidine (PCP). Urine tests can also be used to detect alcohol, LSD, and cotinine, the major metabolite of nicotine.

Following are summaries of the most commonly used tests:

Urine

Results of a urine test show the presence or absence of specific drugs or drug metabolites in the urine. Metabolites are drug residues that remain in the system for some time after the effects of the drug have worn off. A positive urine test does not necessarily mean the subject was under the influence of drugs at the time of the test. Rather, it detects and measures use of a particular drug within the previous few days.

Hair

Analysis of hair may provide a much longer “testing window” for the presence of drugs and drug metabolites, giving a more complete drug-use history that goes back as far as 90 days. Like urine testing, hair testing does not provide evidence of current impairment, only past use of a specific drug. Hair testing cannot be used to detect alcohol.

Pros and Cons of the Various Drug Testing Methods

Type of Test	Pros	Cons	Window of Detection
Urine	<ul style="list-style-type: none"> • Highest assurance of reliable results. • Least expensive. • Most flexibility in testing different drugs, including alcohol and nicotine. • Most likely of all drug-testing methods to withstand legal challenge. 	<ul style="list-style-type: none"> • Specimen can be adulterated, substituted, or diluted. • Limited window of detection. • Test sometimes viewed as invasive or embarrassing. • Biological hazard for specimen handling and shipping to lab. 	<ul style="list-style-type: none"> • Typically 1 to 5 days.
Hair	<ul style="list-style-type: none"> • Longer window of detection. • Greater stability (does not deteriorate). • Can measure chronic drug use. • Convenient shipping and storage (no need to refrigerate). • Collection procedure not considered invasive or embarrassing. • More difficult to adulterate than urine. • Detects alcohol/cocaine combination use. 	<ul style="list-style-type: none"> • More expensive. • Test usually limited to basic 5-drug panel. • Cannot detect alcohol use. • Will not detect very recent drug use (1 to 7 days prior to test). 	<ul style="list-style-type: none"> • Depends on the length of hair in the sample. Hair grows about a half-inch per month, so a 1½-inch specimen would show a 3-month history.
Oral Fluids	<ul style="list-style-type: none"> • Sample obtained under direct observation. • Minimal risk of tampering. • Non-invasive. • Samples can be collected easily in virtually any environment. • Can detect alcohol use. • Reflects recent drug use. 	<ul style="list-style-type: none"> • Drugs and drug metabolites do not remain in oral fluids as long as they do in urine. • Less efficient than other testing methods in detecting marijuana use. 	<ul style="list-style-type: none"> • Approximately 10 to 24 hours.
Sweat Patch	<ul style="list-style-type: none"> • Non-invasive. • Variable removal date (generally 1 to 7 days). • Quick application and removal. • Longer window of detection than urine. • No sample substitution possible. 	<ul style="list-style-type: none"> • Limited number of labs able to process results. • People with skin eruptions, excessive hair, or cuts and abrasions cannot wear the patch. • Passive exposure to drugs may contaminate patch and affect results. 	<ul style="list-style-type: none"> • Patch retains evidence of drug use for at least 7 days, and can detect even low levels of drugs 2 to 5 hours after last use.

Sweat Patch

Another type of drug test consists of a skin patch that measures drugs and drug metabolites in perspiration. The patch, which looks like a large adhesive bandage, is applied to the skin and worn for some length of time. A gas-permeable membrane on the patch protects the tested area from dirt and other contaminants. The sweat patch is sometimes used in the criminal justice system to monitor drug use by parolees and probationers, but so far it has not been widely used in workplaces or schools.

Oral Fluids

Traces of drugs, drug metabolites, and alcohol can be detected in oral fluids, the generic term for saliva and other material collected from the mouth. Oral fluids are easy to collect—a swab of the inner cheek is the most common way. They are harder to adulterate or substitute, and collection is less invasive than with urine or hair testing. Because drugs and drug metabolites do not remain in oral fluids as long as they do in urine, this method shows more promise in determining current use and impairment.

Breath Alcohol

Unlike urine tests, breath-alcohol tests do detect and measure current alcohol levels. The subject blows into a breath-alcohol test device, and the results are given as a number, known as the Blood Alcohol Concentration, which shows the level of alcohol in the blood at the time the test was taken. In the U.S. Department of Transportation regulations, an alcohol level of 0.04 is high enough to stop someone from performing a safety-sensitive task for that day.

What Do Drug Tests NOT Measure?

The five-drug urine test used in the Federal Drug-Free Workplace Program does not detect all drugs used by young people. For example, it does not detect so-called “club” drugs such as gamma hydroxybutyrate (GHB) and Ecstasy, for example, although other urine tests can determine use of these drugs, and hair tests can easily detect Ecstasy use. No standard test, however, can detect inhalant abuse, a problem that can have serious, even fatal, consequences. (Inhalant abuse refers to the deliberate inhalation or sniffing of common household products—gasoline, correction fluid, felt-tip markers, spray paint, air freshener, and cooking spray, to name a few—with the purpose of “getting high.”)

Administering the Test

What Can Students Expect?

Drug testing is commonly a four-step process: collection, screening, confirmation, and review. When called in to take a drug test, the student is met by a trained “collector,” or test administrator, who gives instructions and receives the specimen. It is also the collector’s job to complete the chain-of-custody form, which keeps track of where the specimen has been and who has handled it throughout the process. The form ensures that the specimen was handled properly and in such a way that does not call its source or the test results into question.

If the student is providing a urine sample, a temperature strip is put on the collection container to guard against a substitute sample. A tamper-evident tape is put over the specimen container, and then the student is asked to initial it and verify the chain-of-custody form.

Next, the specimen is screened for drugs or drug metabolites. If the screening test is positive, the test will be confirmed by a second, more exacting test. All confirmed positive tests should then be reviewed by a physician or nurse with knowledge of substance-abuse disorders to rule out legitimate prescription drug use.

Some specimens are screened at the collection site, and the initial results are known within minutes; others are screened at a laboratory. All negative screens—those that show no drugs or drug metabolites—are eliminated from further consideration.

Specimens that test positive for drugs in the initial screen are examined further in the laboratory through a second analytic technique called gas chromatography/mass spectrometry (GC/MS), which is actually a combination of two specialized techniques. Technicians use gas chromatography to separate the various substances in the specimen, then they make a positive identification through mass spectrometry.



Case History

Testing Made the Difference

Hunterdon Central Regional High School

Teachers and administrators at Hunterdon Central Regional High School in Flemington, New Jersey, were alarmed. A survey taken during the 1996–1997 school year revealed that 45 percent of the school’s 2,500 students had smoked marijuana, 70 percent were drinking alcohol, and 13 percent of all seniors had used cocaine. More than 10 percent of the student population had used hallucinogens, and 38 percent of seniors reported that heroin was readily available to them.

“Our drug problem was probably no worse than that of other high schools,” says Principal Lisa Brady. “But for us, this was just unacceptable.”

In September 1997, Hunterdon began a random drug-testing program for all student athletes. Urine was tested for marijuana, cocaine, heroin/codeine, amphetamine/methamphetamine, PCP, steroids, and alcohol. If a student tested positive, the school notified the parents and set up a meeting with the student, his or her parents, and a school counselor to discuss treatment options. The student attended a mandatory 4-week drug education course and was suspended from athletic activity until a subsequent test showed the drug use had stopped.

“We had one of the best random testing implementations in the country,” says Brady. “It was working well.” Indeed, a survey in 1999 showed that drug use at Hunterdon had declined in 20 of 28 key categories. For example, cocaine use among seniors had dropped from 13 percent to 4 percent, according to the survey. In another encouraging finding, the number of 10th graders reporting little or no use of drugs or alcohol increased from 41.8 percent to 47.3 percent.

Brady credits drug testing for the decline. “It was the only variable in the equation,” she says. “Nothing else had changed.” Hunterdon expanded its testing program in February 2000 to include students participating in any extracurricular activity. Even kids who wanted to act in school plays or obtain a parking permit could be called in to take a drug test. Eventually, problems with adulterated urine samples prompted school officials to give up urine testing and start testing oral fluids.

In September 2000, however, the school suspended all random testing when the American Civil Liberties Union filed a lawsuit in New Jersey state court on behalf of students who claimed their Fourth Amendment rights were violated. (The suit is still pending.) Since the school halted testing, Brady has seen what she believes to be clear evidence that drug use at Hunterdon has begun to rise. “There’s no question it’s gotten worse,” she says.

Before drug testing began at Hunterdon, many people in the community resisted the idea, explains Brady. “Now parents are demanding that we test their kids.”

Alcohol-specific tests may be performed entirely at the collection location if appropriate breath-alcohol testing equipment and procedures are used. Some oral fluid tests can also be used to obtain an immediate initial test result, with the positive screen going on to a laboratory for confirmation.

A positive test result does not automatically mean the student uses illegal drugs. In fact, positive results are sometimes triggered by other, legal substances. Certain over-the-counter medications, for example, can cause a positive reading for amphetamines. So when the GC/MS confirmation test comes back positive, it is important for a doctor, nurse, or other specialist to review the results and determine if illicit drugs are indeed the culprit.

The purpose of drug testing is to keep students from using drugs, and to help those who may be drug dependent.

In the Federal Drug-Free Workplace Program, a medical review officer is required to go over positive test results with the donor and determine if there could be a legitimate explanation. Everything is done confidentially, and safeguards are in place to make sure workers are not falsely labeled drug users when their positive test results are found to have a legitimate cause.

Schools should also take care that a student's confidentiality and privacy are not violated, and that students who test positive because they are taking prescription medications are not wrongly branded as drug users. It bears repeating that the purpose of drug testing is to keep students from using drugs, and to help or refer to treatment those who may be drug dependent.

What Happens If the Test Is Positive?

Results of a positive drug test should not be used merely to punish a student. Drug and alcohol use can lead to addiction, and punishment alone may not necessarily halt this progression. However, the road to addiction *can* be blocked by timely intervention and appropriate treatment.

When a positive test result has been reviewed and confirmed for illegal drug use, the school's crucial next step is to contact the parents and help them stop their child's drug use. Parents play a key role in drug-abuse prevention, so they need lots of guidance and support. They also need to know that anger, accusations, and harsh punishment could make the situation worse. The best

approach for parents is usually to stay firm and to treat their child with respect as they work together as a family to change his or her behavior.

After involving the parents, school officials may refer the student to a trained substance-abuse counselor, who can perform a drug assessment and determine whether the child needs treatment or other specialized help. For young people who use drugs occasionally, a few words from the counselor or parents—coupled with the prospect of future drug tests—may be enough to put an end to the drug use. For frequent users or those in danger of becoming drug dependent, treatment will likely be necessary.

Many schools require drug-positive students to enroll in a drug education course or activity. Some also offer Student Assistance Programs, whose trained counselors are linked to resources in the greater community and can help students cope with a variety of problems, including substance abuse. In any case, the school will want to perform follow-up drug tests on students with positive results to make sure they stay drug free.

Can Students “Beat” the Tests?

Many drug-using students are aware of techniques that supposedly detoxify their systems or mask their drug use. Some drink large amounts of water just before the test to dilute their urine; others add salt, bleach, or vinegar to their sample. In some cases, users call on their drug-free friends to leave bottles of clean urine in the bathroom stalls.

Popular magazines and Internet sites give advice on how to dilute urine samples, and there are even companies that sell clean urine or products designed to distort test results. A number of techniques and products are focused on urine tests for marijuana, but masking products increasingly are becoming available for tests of hair, oral fluids, and multiple drugs.

Most of these masking products do not work, cost a lot of money, and are almost always easily identified in the testing process. But even if the specific drug is successfully masked, the product itself can be detected, in which case the student using it would become an obvious candidate for additional screening and attention.

Who Does the Testing?

Laboratories all over the country perform drug tests, but not all of them produce consistently accurate and reliable results. Many schools choose labs from among those certified by the Substance Abuse and Mental Health Services Administration (SAMHSA) to perform urine testing for Federal agencies. A list of SAMHSA-certified labs is available on the Internet at <http://workplace.samhsa.gov/ResourceCenter/lablist.htm>.

Before deciding on a laboratory, schools should carefully assess the drug problem in their community. The standard Federal workplace test screens for the presence of marijuana, cocaine, opiates, amphetamines, and PCP. But if a school faces a significant threat from Ecstasy, methamphetamine, ketamine, GHB, or some other drug, administrators will need to be sure that any laboratory they are considering is also capable of testing for these drugs.

Before deciding on a laboratory, school officials should carefully assess the drug problem in their community.

How Much Do Drug Tests Cost?

The price of drug testing varies according to the type of test and the drugs involved, but generally the cost is between \$10 and \$30 per test, with hair testing somewhat higher. The price for onsite alcohol tests usually ranges from \$1 to \$10 per test.

Some schools have paid for drug tests through Federal grants from SAMHSA or the U. S. Department of Education's Safe and Drug-Free Schools Program. Others get money for testing from private foundations. When school-based programs begin to expand, testing providers will likely start offering volume price incentives.

Conclusion

Again, the aim of drug testing is not to trap and punish students who use drugs. It is, in fact, counterproductive simply to punish them without trying to alter their behavior. If drug-using students are suspended or expelled without any attempt to change their ways, the community will be faced with drug-using dropouts, an even bigger problem in the long run. The purpose of testing, then, is to prevent drug dependence and to help drug-dependent students become drug free.

Before implementing a drug-testing program, parents and communities must make sure appropriate resources are in place to deal with students who test positive. For example, substance-abuse specialists should be available to determine the nature and extent of the drug use, and there should be comprehensive treatment services for students with potentially serious drug problems. Schools need to educate parents about exactly what the drug tests are measuring and what to do if their child tests positive. It is vital for parents to know that resources are available to help them gauge the extent of their child's drug use and, if necessary, find drug treatment.

For those who worry about the "Big Brother" dimension of drug testing, it is worth pointing out that test results are generally required by law to remain confidential, and in no case are they turned over to the police.

Resources

For Guidance and Facts About Drug Testing

The Web site for the Substance Abuse and Mental Health Services Administration (SAMHSA) provides information about testing technologies, products, and services.

www.drugfreeworkplace.gov

SAMHSA's list of certified laboratories is updated every month.

<http://workplace.samhsa.gov/ResourceCenter/lablist.htm>

The College of American Pathologists has a Web site offering information about choosing a lab.

www.cap.org/lap/fudt.html

Substance Abuse Information and Treatment Referrals

SAMHSA's National Clearinghouse for Alcohol and Drug Information provides referrals and resource materials about substance abuse prevention and treatment.

English: 1-800-729-6686

Spanish: 1-877-767-8432

TDD: 1-800-487-4889

Fax: 301-468-6433

www.health.org

Use the toll-free number to:

- Request printed materials on substance abuse.
- Learn about treatment options in your state.
- Speak to someone about substance abuse.
- Speak to someone about drug treatment referrals.

Recovery Network provides information about substance abuse, addiction, and mental health problems.

www.recoverynetwork.org

The National Association of Student Assistance Professionals has information about Student Assistance Programs.

www.nasap.org

Government Web Sites Offering Drug-Related Information

Office of National Drug Control Policy
whitehousedrugpolicy.gov

The Anti-Drug.com
www.theantidrug.com

Freevibe.com
www.freevibe.com

National Youth Anti-Drug
Media Campaign
mediacampaign.org

druganswer.com (in Asian languages)

National Institute on Drug Abuse
www.nida.nih.gov

The Substance Abuse and Mental Health
Services Administration (SAMHSA), part of
the U.S. Department of Health and Human
Services

www.samhsa.gov

Center for Substance Abuse Prevention
www.samhsa.gov/csap

Center for Substance Abuse Treatment
www.samhsa.gov/csac

The Safe and Drug-Free Schools Program
(U.S. Department of Education)

www.ed.gov/offices/OESE/SDFS/index.html



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