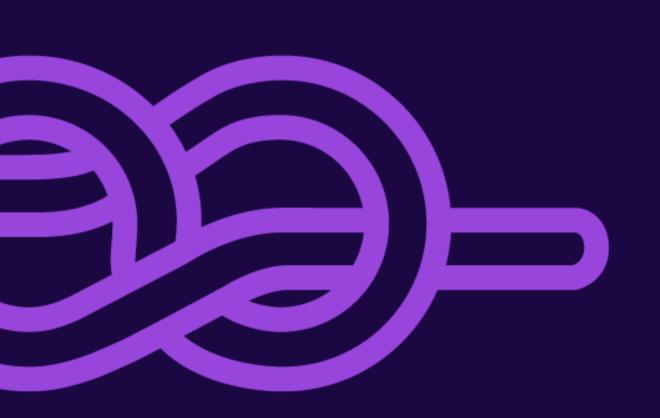
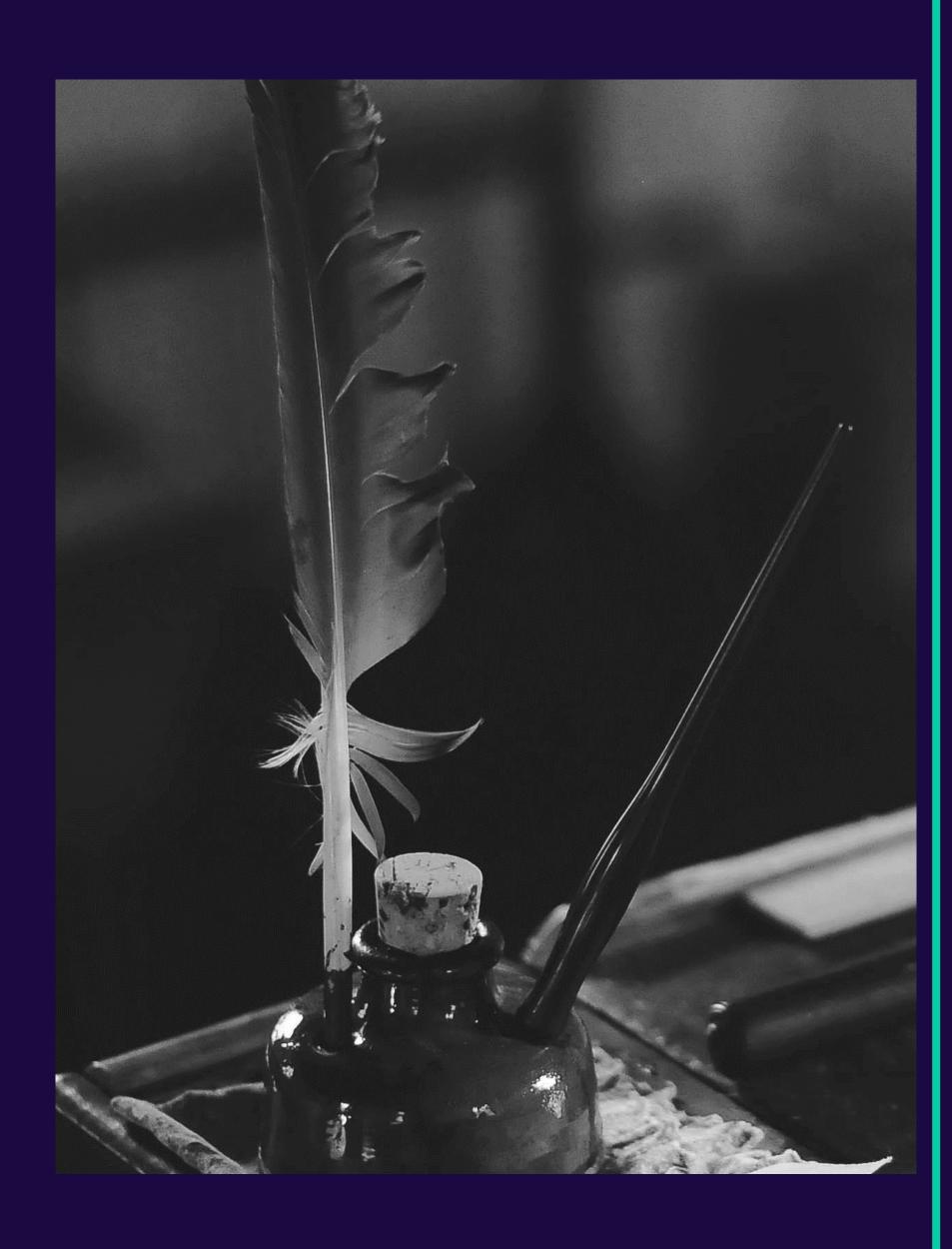
# tuturu,

Preparing *all* students for a world where alcohol and other drugs exist.

What we learnt about a systems-approach to prevention.

Ben Birks Ang, April 2021





Not talking about alcohol and other drugs

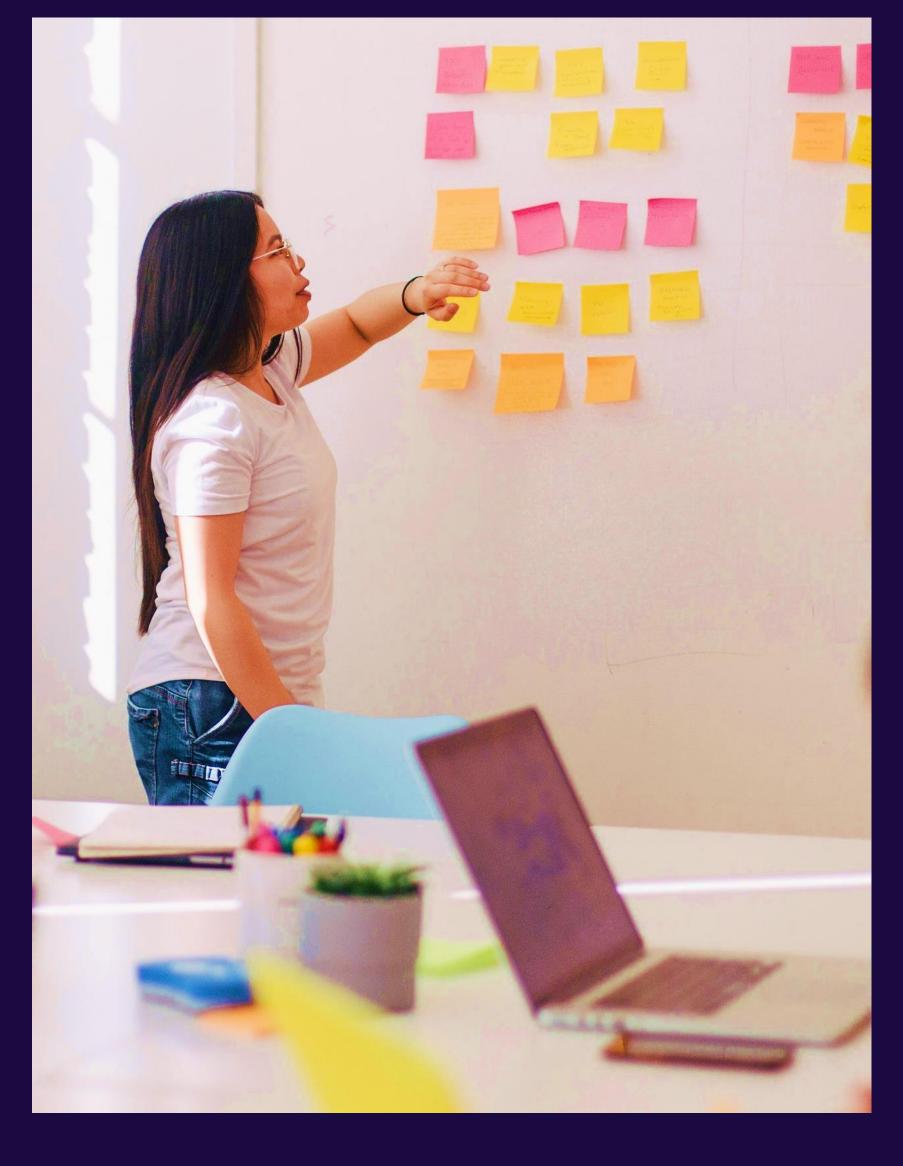


Only sharing the message that drugs cause extreme and terrying harm



Overpreparing students for the risks that a few will face, while underpreparing them for the decision all of them will make.

Teaching about alcohol and other drugs primarily through behaviour management after an incident.



Helping students progressively build the knowledge, values, and competencies needed to make healthy decisions about alcohol and other drugs.

This requires a learning progression for alcohol and other drugs as a topic across all schooling years.



Building core health knowledge, values, and competencies, such as critical thinking, so that al students are prepared to live in a modern world.

Tuturu helps health providers and schools work together to reduce alcohol and other drug-related harm in ways that improve student engagement, critical thinking, and wellbeing.



New Zealand schools can make their learning and disciplinary processes reflect their community and student's learning needs.

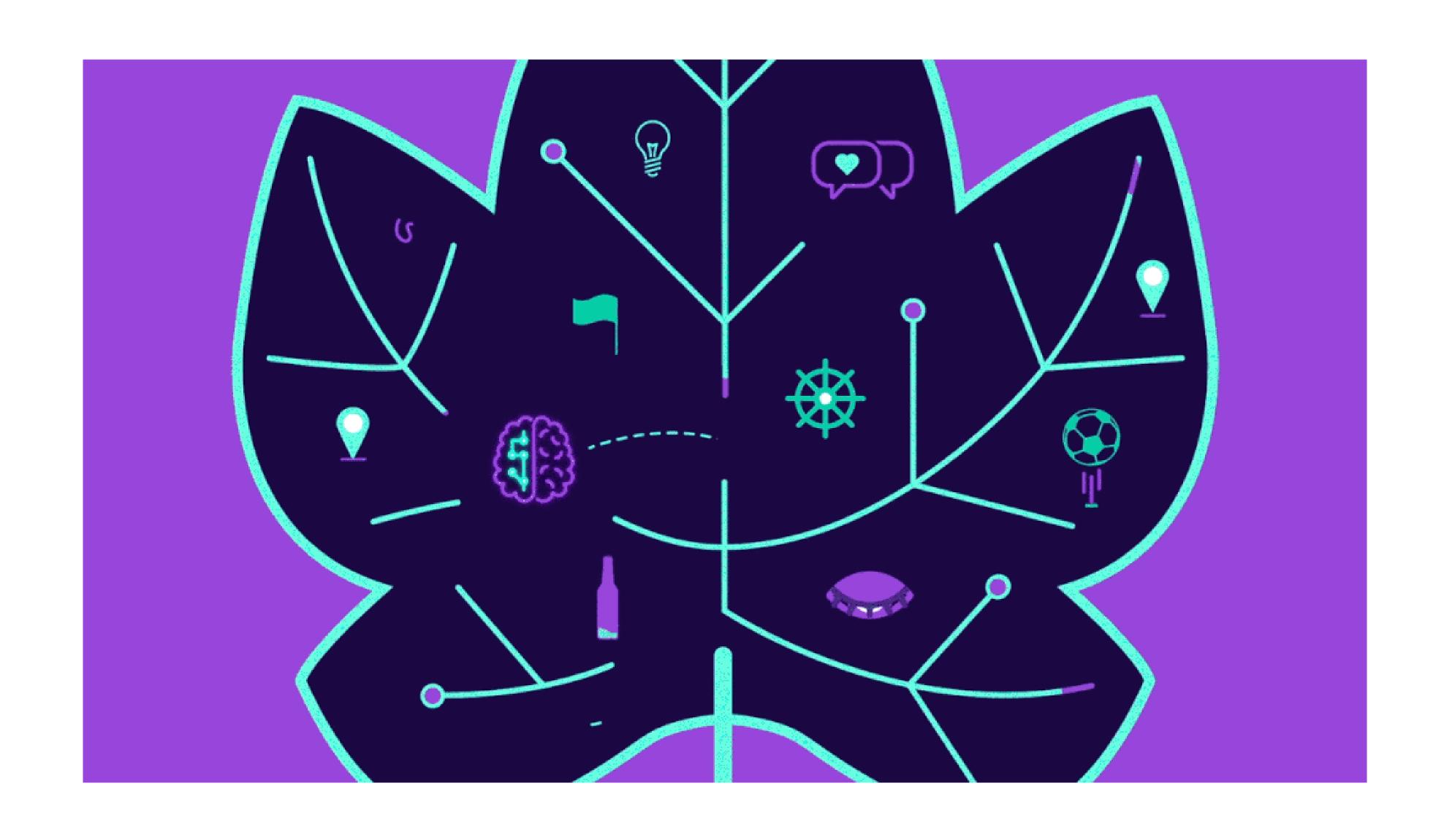


Tuturu's independent evaluation found the review/planning, and implementation resources "changed the focus from punitive to pastoral"



#### It:

- Assisted a philosophical shift in schools
- Strengthened pastoral processes
- Normalised conversations about alcohol and other drugs so students get support early
- Built students' critical thinking skills
- Grew student leaders
- Helped more students access support
- Strengthened AoD providers' relationships with schools
- Supported system change



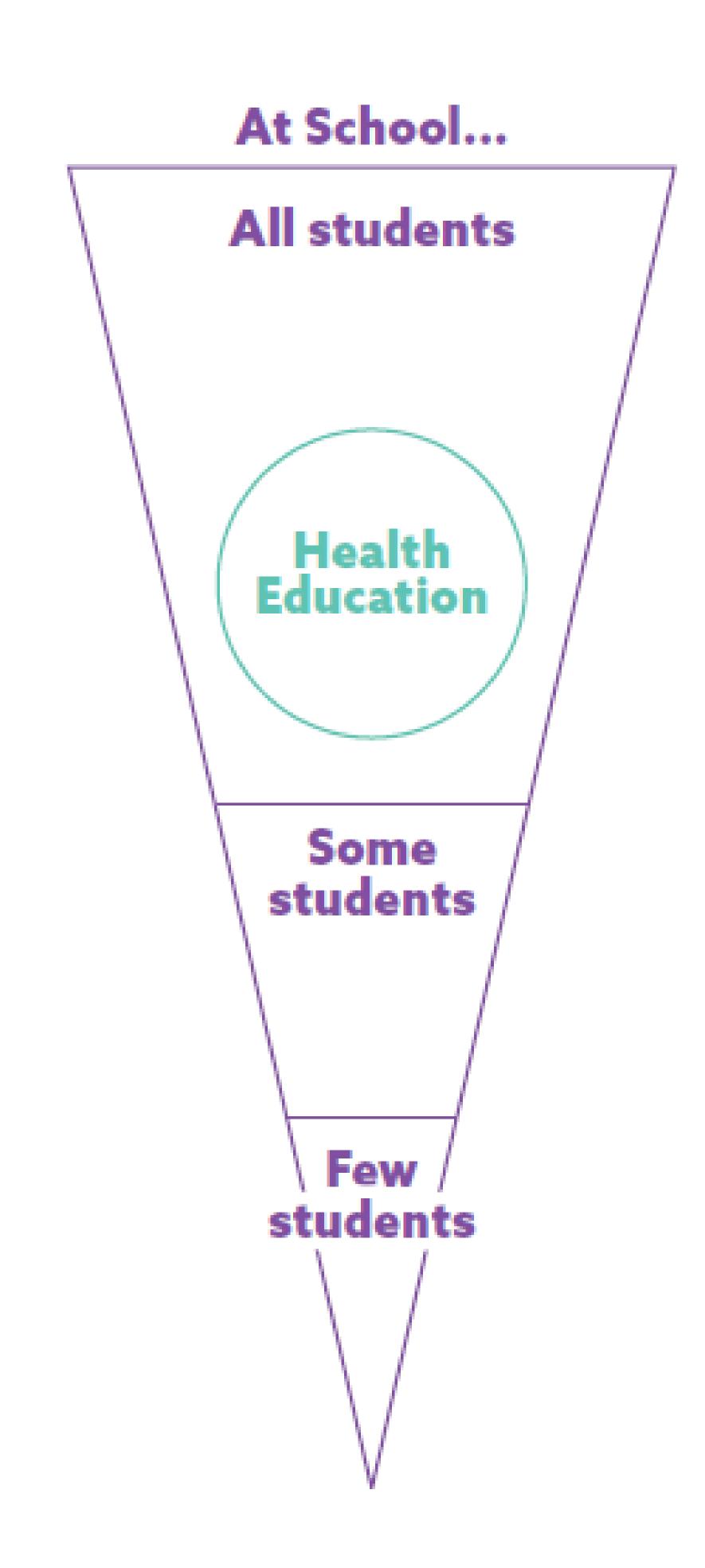
An ecosystem of learning and support helps students learn and easily get support.



This means a suite of interventions that align:

- What students experience in the school environment that helps them to develop
- What they learn
- How they are supported at school when issues arise
- How professional services provide additional support
- How the wider community of school, whānau, and services help them to lead healthy successul lives.

And creating solutions together to fill the gap between education and treatment approaches.

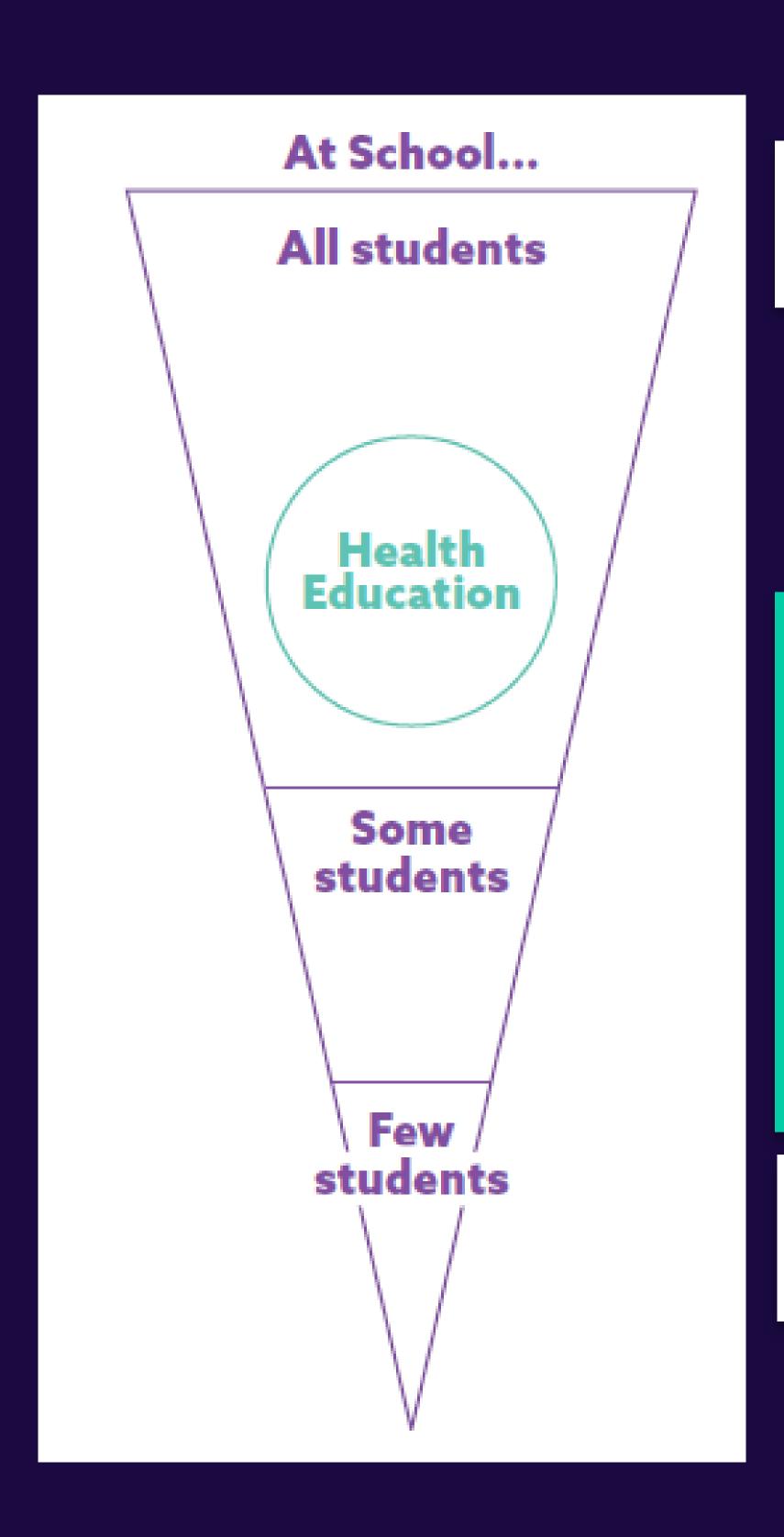


Set up the team to innovate over at least 7 years, and choose from the evidence-based resources to align with school priorities.





# Disconnected initiatives disrupt how other approaches work.



"Drugs are bad"

Blind spot

"Drugs are bad"

"It takes time for students to connect what they learn with their lives." – Principal

### People learn through progressive exposure to new ideas or skills



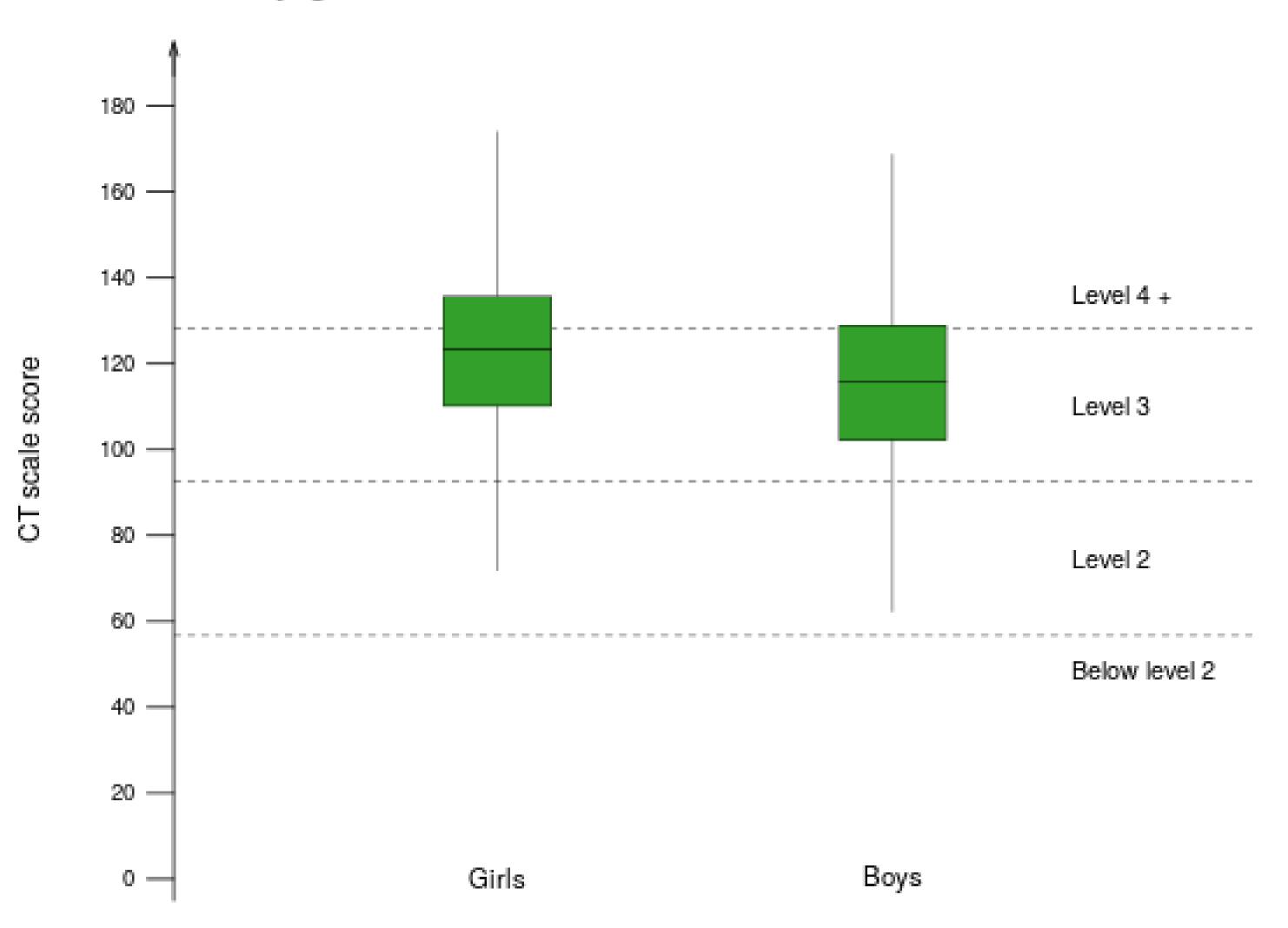
We perpetuate inequity in health outcomes if we use learning approaches that only transfer knowledge or don't adjust for the learning needs and experiences of students.

The long-term burden of this missed learning will be carried by health services, school pastoral care, and the young people themselves.

This is the first generation who have mass exposure to alcohol and other drug use before learning about it.

Helping them to make sense of what they see and hear is now higher priority than frontloading knowledge.

All students' achievement on the Critical Thinking in Health & PE (CT) assessment by gender at Year 8



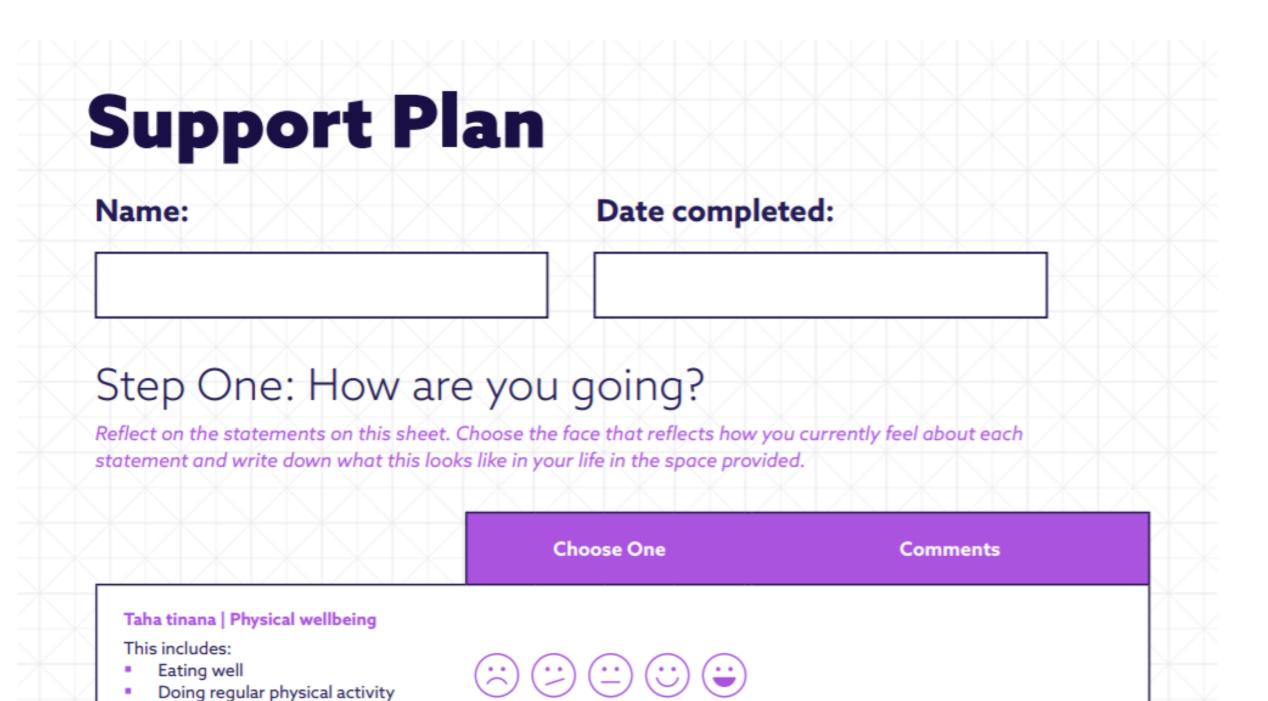
National Monitoring Study of Student Achievement, 2017

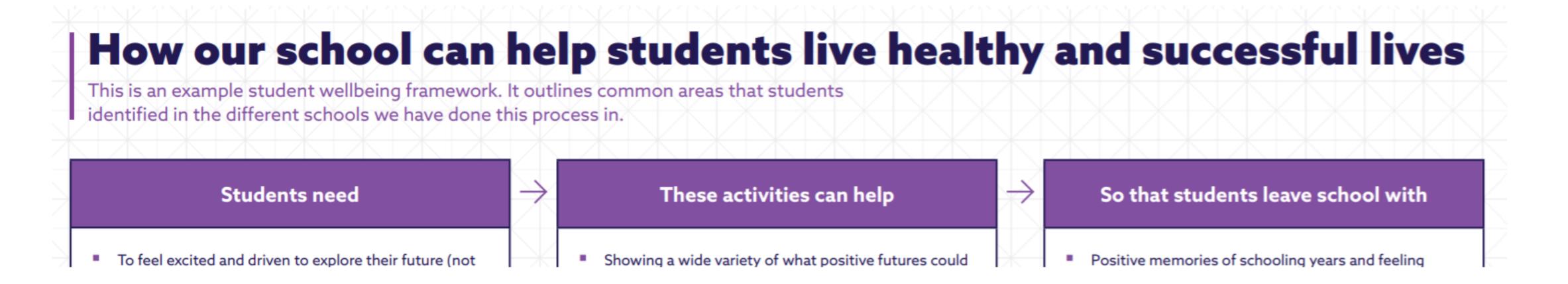
## Connected approaches provide the foundations for schools to innovate to meet their students' needs

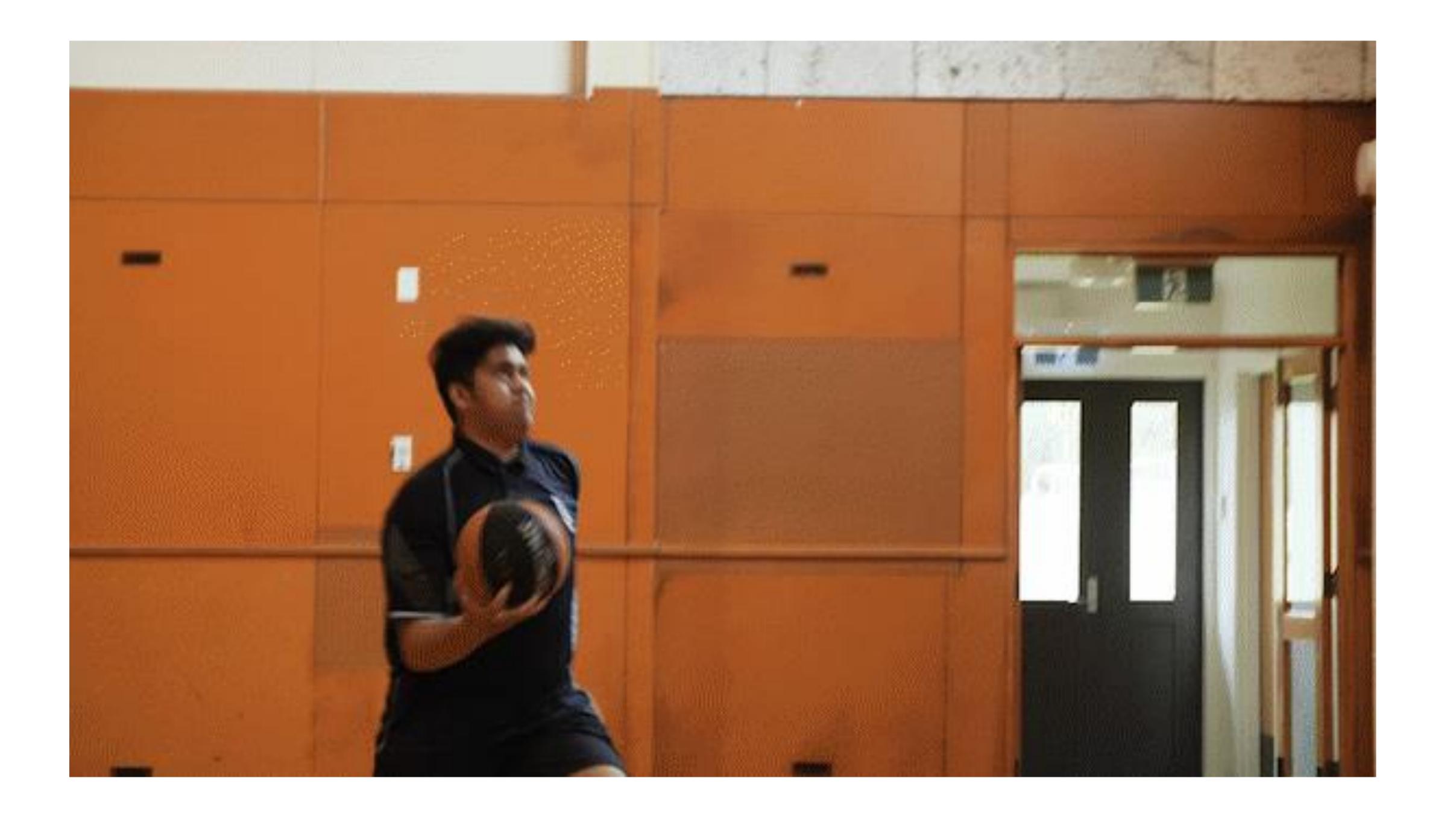


### Examples:

- Student-driven change:
  - 1. Students create a wellbeing framework for their school
  - 2. Teachers use that to reflect and plan their teaching and assessment across all learning areas. Student leaders use that to prioritise their action.
  - 3. 11 week, 400 minutes a week education for the whole school community (led by student voice) with parent events and a four day story festival.
- Integrated learning across English, Mathematics, and Health.
   We found students want more challenges to think critically.
- Strengthening a student support pathway (including codes in the student management system to record harm minimisation conversations.







## The evaluation highlighted systemic-factors that influence the pace of change



School factor	Change is supported when (Faster moving schools have many of these factors)	Change is slower when (Slower moving or stalled schools have many of these factors)	Strategies used or suggested to address challenges
The school sees the need for Tūturu	School leaders are clear about the impact of AoD use on their students and community	School leaders have a perception that AoD is not a big issue in their school or community	School leaders use recent issues as a stepping off point to illustrate community issues to staff
The school connects Tūturu to bigger picture wellbeing goals and other initiatives	<ul> <li>The school has a bigger picture focus and goals relating to wellbeing (for students and staff)</li> <li>The school is clear about their support and wellbeing philosophy and sees Tūturu as well-aligned with their beliefs</li> <li>The school sees Tūturu as well-aligned with related initiatives such as Restorative Practices or</li> </ul>	The school does not have a clear bigger picture focus on wellbeing or school goals that clearly link to Tūturu	Providers support the school to develop a wellbeing focus (e.g., run student workshops to show the different ways students would like to see their wellbeing supported)
The Tūturu lead	PB4L A school SLT member leads and	Responsibility for Tūturu is	Providers re-launch Tūturu by
in the school is a decision maker	actively champions Tūturu by allocating staffing or resources	handed to a staff member who does not have influence over school-wide decisions	meeting school leaders (and the BoT) stressing the need for SLT leadership and a team approach

