

**“Building a Case for RSDT for Middle School Students”  
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**Introduction**

On August 15, 2005, the Pequannock Township Board of Education voted unanimously to implement Random Student Drug Testing in our school district. This board decision made Pequannock Valley School the first middle school in New Jersey to implement Random Drug Testing. The program has been in operation for over three years and our experience with testing middle school students has convinced us that RSDT Programs are effective in helping students at this age level make a commitment not to use drugs and alcohol. We theorize that voluntary participation in RSDT has a lasting effect as students enter and move through their high school years. This article will relate our experiences in implementing RSDT in middle schools, building community support for the program, expanding the program to take a more rigorous approach to alcohol testing, and engaging in research to ascertain the effectiveness of RSDT as a lasting deterrent to drug and alcohol use.

**Why Test at the Middle School?**

Looking at a variety of survey data from national, state, and local sources provides ample evidence that students encounter opportunities to experiment with substances of abuse during the middle school years. Looking at the “Monitoring the Future” study<sup>1</sup> conducted by the University of Michigan tells us that while overall trends in illicit drug and alcohol use continue to decline, there are still significant numbers of middle school students who are experimenting or regularly using these substances. The 2007 results indicate the following for eighth grade students participating in the study:

<b>For Eighth Graders</b>	<b>Lifetime Use</b>	<b>Annual Use</b>	<b>30-Day Use</b>
Illicit Drugs	19%	13.2%	7.4%
Alcohol	38.9%	31.8%	15.9%

While the above numbers represent a slight decline from the previous study, these numbers still point to the importance of addressing drug and alcohol use at the middle school level.

The New Jersey Student Health Survey<sup>2</sup> included middle school students for the first time in 2005. While the total number of students taking this survey was too small to make the results generalizable to the entire middle school population, the results do

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<sup>1</sup> Johnston, L. D., O'Malley, P. M., Bachman, J. G. & Schulenberg, J. E. (December 11, 2007). "Overall, illicit drug use by American teens continues gradual decline in 2007." University of Michigan News Service: Ann Arbor, MI. [Online]. Available: [www.monitoringthefuture.org](http://www.monitoringthefuture.org); accessed 11/10/08.

<sup>2</sup> “2005 New Jersey Student Health Survey of Middle and High School Students.” Available: [www.nj.gov/njded/students/yrbs/2005/full.pdf](http://www.nj.gov/njded/students/yrbs/2005/full.pdf); accessed 11/10/08.

identify areas of concern, particularly in the area of age of first use. For alcohol, the most prevalent answer was between the ages of 10 and 13, and for marijuana, the most prevalent answer between the ages of 12 and 14. It is important to note that significantly lower ages (as low as age 8) were reported by some respondents on this survey. In terms of lifetime use of various drugs and alcohol, the following percentages were reported:

<b>For Eighth Graders</b>	<b>Lifetime Use (Ever used)</b>
Alcohol	39%
Marijuana	7%
Cocaine	3%
Inhalants	9%

In our own community, the administration of the American Drug and Alcohol Survey<sup>3</sup> has given us information about the reported behaviors and beliefs of our own middle school students. The 2007-08 administration of this survey reveals the following data for a variety of drugs and alcohol:

<b>“Ever Tried”</b>	<b>Grade 6</b>	<b>Grade 7</b>	<b>Grade 8</b>
Alcohol	8%	15%	28%
Marijuana	0%	2%	10%
Cocaine	0%	0%	0%
Stimulants	0%	0%	2%
Heroin	0%	0%	0%
Inhalants	2%	8%	14%

<b>“Last 12 Months”</b>	<b>Grade 6</b>	<b>Grade 7</b>	<b>Grade 8</b>
Alcohol	6%	10%	25%
Marijuana	0%	<1%	7%
Cocaine	0%	0%	0%
Stimulants	0%	0%	1%
Heroin	0%	0%	0%
Inhalants	<1%	4%	7%

<b>“Last 30 Days”</b>	<b>Grade 6</b>	<b>Grade 7</b>	<b>Grade 8</b>
Alcohol	3%	3%	11%
Marijuana	0%	0%	0%
Cocaine	0%	0%	0%
Stimulants	0%	0%	1%
Heroin	0%	0%	0%
Inhalants	<1%	3%	4%

<sup>3</sup> “American Drug and Alcohol Survey” Rocky Mountain Behavioral Science Institute (RMBSI) Available (online): [www.rmbsi.com](http://www.rmbsi.com); accessed 11/10/08

These percentages indicate that there is a cohort of our students who are involved in drug and alcohol use, but when we put a positive spin on this data, we also know that a large percentage of our middle school students are not involved in drug or alcohol use. Here are the numbers of students who reported “Low Use” or “No Use” on the 2007-08 ADA Survey:

	<b>Grade 6</b>	<b>Grade 7</b>	<b>Grade 8</b>
“Low or No Use”	99.2%	96.6%	91.8%

By providing the deterrent power of RSDT at a time prior to moderate or heavy involvement in drug/alcohol usage, we are more likely to find students and their families willing to make a commitment not to use. Part of that commitment could be involvement in a program where they can prove that they are holding to that commitment. That has been our experience in Pequannock. The majority of our students are willing to support their commitment not to use by participating in RSDT. In our first year of operation (2005-06) approximately 40% of our students volunteered to be in the testing pool. Our recruitment efforts in that first year included meeting with all of our sixth, seventh, and eighth graders to explain the purpose of the program, to review the procedures that would be followed, and to explain confidentiality and randomization issues. In just the second year of our program, our volunteerism swelled to 80% of our student body. No additional recruitment efforts were introduced and students were not pressured to enroll in the program. Again, the fact that RSDT became an accepted part of the school culture with a high degree of acceptance by our students explains, at least in part, this increase in participation. In the third and fourth years of our program, participation has stayed at the 80% level.

Moreover, looking at volunteerism at the high school gives us an inkling of possible effects of starting RSDT during the middle school years. In Year One, approximately 25 students entered the high school program as volunteers. During the current year (2008-09), the number of volunteers for the high school has swelled to over 400 students. While it is possible that some/many of these students realize they will be required to participate because of sports or other activities, we see this as a sign that there is a carry-over in attitudes and behaviors resulting from participation in RSDT during the middle school years.

### **Building Community Support for RSDT**

The sad reality in our small community of approximately 15,000 residents, is that personal tragedy was a major factor in the acceptance of RSDT by our schools, parents, and community. In particular, a death from an Ecstasy overdose and a subsequent heroin overdose by a student who survived provided the initial impetus to consider additional prevention strategies for our schools. After several months of research, we identified random drug testing as a powerful deterrent that could affect student attitudes and behaviors. We began this process by researching possible prevention strategies and by visiting schools using those strategies. The president and vice-president of our board of education joined us for these visitations and helped us move the process forward through board consideration to ultimate approval. An important step was an opinion survey

where parents had the opportunity to express their views on various forms of drug testing. A high percentage (88%) of respondents felt that we should be doing more than our state minimum of “for suspicion” testing. The survey was followed by a community forum where public comment was again overwhelmingly positive (9:1).

An important factor in the acceptance of Random Drug Testing was the constant flow of information about testing programs and our progress toward designing our implementation for the Pequannock Schools. During the development phase (Spring 2005) we made several public presentations to our board of education to provide information about our research and site visits. Additionally, parent education programs were planned and held at Pequannock Township High School and at Pequannock Valley Middle School. In September 2005, we planned a kick-off program with Ginger and Larry Katz (“The Courage to Speak”) to provide impetus for our implementation of Random Drug Testing in our schools. Programs for parents and assemblies for students made the drug and alcohol question a central issue as we started school for the 2005-06 School Year.

We truly appreciate the assistance of various partners in building support for our initiative. These include Hunterdon Central Regional High School, Hackettstown High School, DePaul Diocesan High School, Christina Steffner, Lisa Brady, Ginger and Larry Katz, and David Evans, Esq. Without their expert assistance, our path toward initial board adoption would have been much more difficult.

### **The Importance of Student “Buy-In”**

For random drug testing to work as an effective measure of prevention, students must believe in the program. First, they must understand how the program works. So, as an important first step, we meet with every eligible student in grades six through twelve at both schools. We thoroughly explain the concept behind random drug testing and the procedures used when conducting testing. We are careful to explain the means used to protect confidentiality and random selection. Students truly understand what is involved in the program from the start, and with each year of program operation, we have been careful to follow similar steps to keep our entire school community informed about the program and any procedural or policy changes to the program.

Since sixth graders are new to our school, our program director does presentations at the classroom level that reach every sixth grader in our school. In this small group environment, the program and its procedures are explained through role play, and discussion. These presentations open the door for student questions and comments. This free exchange of information provides a healthy way to discuss the issue of drugs and alcohol. Our presentations also help students gain an understanding of the purpose behind RSDT as prevention not punishment. This is particularly true at the middle school where all members of the testing pool result from volunteerism rather than from mandatory participation. Finally, the meetings allow us to ask students to make the commitment not to use and to back that commitment with a willingness to prove they are holding to their commitment through random testing should their number come up.

Testing procedures also support our educational mission by providing an additional learning experience for students and their parents. Our procedures are designed to minimize disruption to the educational program and to maintain confidentiality about who is tested. Students are not pulled from class during testing or special presentations and activities. This practice is appreciated by our faculty and engenders their support for the program. As students report for testing, our program director has an additional opportunity to explain the testing process and answer student questions. Follow-up contact with the parents through telephone and written communication encourages them to ask questions and engage parents in discussions about the program, processes and procedures, and student reactions to the testing experience.

Not only has RSDT become an accepted part of our school culture as evidenced by our 80% volunteerism rate, our students believe so strongly in RSDT that they have become advocates for the adoption of testing in other middle schools. During our first year of testing, a group of eighth graders prepared and presented an assembly program about RSDT which they gave to the student body of another middle school in New Jersey. Their advocacy of RSDT contributed to the decision to implement a testing program at that middle school the following year. Our students continue to advocate for testing as they provide orientation programs for fifth grade students at the elementary schools in our district as these students prepare to enter middle school the following year. Efforts of students and staff have helped to maintain the high voluntary participation rate from year to year. From the students’ standpoint, RSDT has become part of the culture of our school.

### **Increasing the Rigor of Alcohol Testing**

Looking at survey data from our community, we know that alcohol is the “drug of choice” for most of the students who report using in our community. All of our survey data confirms this fact. There are several reasons for this reality. [1] Alcohol is easily obtainable. [2] The use of alcohol is permissible by law for adults, and [3] There is a definite double standard about the use of alcohol. We have found, through working with many students and their parents, that while “drug” usage is considered to be a bad idea, using alcohol is often seen as a rite of passage. Some parents accept the idea that their children will inevitably drink as they grow up. Some parents even provide alcohol to their underage children to teach responsible drinking. We do not condone any form of underage drinking, but we also realize that this is a family-based decision.

In the Spring of 2006, we conducted a follow-up survey to determine public opinion about our drug testing program. Once again, we received strong support for random drug testing. We also received a community mandate to address the underage drinking problem more aggressively. In response to this mandate we began to look for tests that established a degree of rigor similar to that obtained through our drug testing devices. We identified EtG (Ethyl Glucuronide) testing which opened an eighty-hour window on alcohol use. Previously, we used saliva swabs for the alcohol component of our testing program. This test would only detect students who were actively drinking before or during school hours since alcohol typically metabolizes out of the system in six to eight hours. After researching sensitivity levels of EtG testing to eliminate innocent exposures

such as mouthwash, hand purifiers, and sacramental use of alcohol, we instituted EtG testing in February 2007 on a pilot basis at our high school. Our EtG testing program differs from our other tests in that every test must be read by clinical laboratory analysis. Results of these EtG tests are typically available within 48 to 72 hours after sending the samples to the lab. Consequences of EtG positives result only in a parent conference and some form of intervention program. Confirmed EtG positives through our Mandatory RSDT program at the high school do not carry the consequence of removal from sports or activities or loss of driving/parking privileges on campus as do confirmed positives from illicit drugs.

The double standard mentioned above became immediately obvious upon starting EtG testing. There was a degree of student backlash resulting from our opening the window on weekend drinking. While students did not have an issue with our testing for drug use, many did feel that teen drinking was a “rite of passage” and that we did not have the right to test their behavior on the weekend. This issue is complicated by the fact that in New Jersey, as well as many other states, parents can legally give their children alcohol in their own home. In our experience, parents of students testing positive with EtG (we have had no positive alcohol tests using the saliva swab) have been cooperative and open to working with the school’s Student Assistance Counselor to provide positive interventions for students using alcohol. EtG testing commenced at the Middle School in September 2007. Middle school students had been taking the saliva swab test since the start of testing in Fall 2005. For more information on our experience with EtG testing, please see our companion article about implementing EtG testing in the Pequannock Township Schools.

### **Engaging in Research about the Effectiveness of RSDT**

We believe that RSDT provides students with a reason to hold to their commitment to live drug and alcohol free. We also believe that having students volunteer for random testing during middle school will have a lasting effect on their behaviors through their high school years. Hard data on the effectiveness of RSDT over time is not currently available.

In August 2007, our Board of Education approved participation in a longitudinal study of the possible effects of RSDT in Grades 6 through 12. This study is funded by the Partnership for a Drug Free New Jersey and was designed and administered by a research group called “PublicMind Poll” at Fairleigh Dickenson University. This study uses a survey approach to track student beliefs and behaviors from grade to grade. The stated purpose of the study is "to study the long-term effectiveness of a random drug testing regime in New Jersey public schools." Using between two and five schools per year over the course of six years, students with active parental consent respond anonymously to a survey instrument designed cooperatively by “PublicMind Poll” and the Partnership for a Drug Free New Jersey<sup>4</sup>. Data is collected via anonymous optical recognition surveys in

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<sup>4</sup> For more information on the research design and its implementation, contact Dr. Daniel Cassino, Survey Analyst, the PublicMind Poll, Fairleigh Dickinson University, Madison, NJ 07940.

different cohorts in the schools, over the course of several years, in order to control for both generational (differences between people born in different years) and age (differences between 6th and 7th graders, for instance) effects separately, and allow for the statistical determination of the effect of the testing. Special focus is paid to the indirect effects of the drug testing regime on school environment, which is thought to have a more direct effect on drug use.

The survey instrument consists of twenty-five multiple choice questions which ask students some basic demographic questions, questions which determine their knowledge of the drug culture (availability of drugs, kinds and costs of various drugs), perceived probability of being drug tested, why students enrolled in the testing program (mandatory or voluntary), the positive/negative effects of peer pressure, as well as rephrased questions to confirm or disconfirm other answers in the survey. The survey instrument itself went through cognitive testing in another area of the country to test the clarity of questions as well as their validity and reliability.

This research has the potential to shed significant light on the long-term effects of participation in a middle school RSDT program as students move on through their high school years when peer pressure and availability of drugs are more pervasive. We hope that the evidence provided by this study confirms our belief in the importance of Random Student Drug Testing in helping students hold to their commitment not to use drugs or alcohol as they grow older.

### **Summary**

In becoming the first middle school in New Jersey to implement a Random Student Drug Testing Program, Pequannock Valley School and the Pequannock School District weighed the potential negative connotations against the potential benefits for students. After considerable study and experience with RSDT, we are convinced that the potential benefits far outweigh the negatives. Our experience leads us to believe that once understood, RSDT becomes part of the culture of a school. This happened quickly at Pequannock Valley School and our students not only responded as volunteers for the testing pool, but also as advocates for living drug and alcohol free. We also believe that middle school testing sets a strong foundation for RSDT at the high school level and that the effects of the program are lasting. By engaging in a research project with the Partnership for a Drug Free New Jersey, we hope to be able to contribute to scientific knowledge about the effectiveness of RSDT as a viable deterrent to drug and alcohol use. We further believe that RSDT provides students with a source of positive peer pressure to live safe and healthy lives free of abuses from drugs and alcohol.

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