



COMMONWEALTH of VIRGINIA

DEPARTMENT OF EDUCATION

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November 18, 2024

The Honorable Glenn A. Youngkin
Governor of Virginia
Patrick Henry Building, Third Floor
1111 East Broad Street
Richmond, Virginia 23219

The Honorable Ghazala F. Hashmi
Chair, Senate Education
201 North 9th Street, Room 1404
Richmond, VA 23219

The Honorable Sam Rasoul
Chair, House Education
201 North 9th Street, Room 123
Richmond, VA 23219

Dear Sirs and Madam:

I am pleased to submit the enclosed report on Guidelines for Incorporating Opioid Related Instruction into Classrooms required by Chapter 434, 2024 Acts of Assembly.

If you have additional questions, please contact Dr. Andrew R. Armstrong, Associate Superintendent of Programs, at (804) 839-9756 or andy.armstrong@doe.virginia.gov.

Sincerely,

Lisa Coons,
Superintendent of Public Instruction

Enclosure

GUIDELINES FOR INCORPORATING OPIOID RELATED INSTRUCTION INTO CLASSROOMS

Report to the Chairs of the House Committee on Education and the Senate Committee on Education and Health Addressing House Bill 134.



GUIDELINES FOR INCORPORATING OPIOID RELATED INSTRUCTION INTO CLASSROOMS

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GUIDELINES FOR INCORPORATING OPIOID RELATED INSTRUCTION INTO CLASSROOMS

INTRODUCTION

The 2024 General Assembly passed [House Bill 134](#), which requires the Virginia Department of Education (VDOE), in consultation with such stakeholders and experts as it deems necessary or appropriate, to develop (i) age-appropriate and evidence-based education materials concerning the risks to health and safety that are posed by opioids, with a particular focus on prevention, identification of the signs of overdose, resources for supports, risks, and effects of addiction, and the risk of death that is posed by fentanyl and (ii) guidelines for school boards for incorporating the education materials developed into instructional programs for students enrolled in the local school division. The educational materials and guidelines in accordance with the act are required to be submitted to the Chairs of the House Committee on Education and the Senate Committee on Education and Health by November 1, 2024.

In fulfillment of this requirement, the VDOE provides the *Guidelines for Incorporating Opioid Related Instruction into Classrooms*. The document includes resources, guidelines, and instructional guides to assist educators in providing instruction on the risks to health and safety that are posed by opioids with a focus on prevention, the identification of signs of overdose, the risks and effects of addiction, the risks of death posed by fentanyl, and information on overdose reversal.

The creation of the *Guidelines for Incorporating Opioid Related Instruction into Classrooms* involved consultation with numerous stakeholders including division health education specialists, school-based mental health professionals, school nurses, and state agency partners from the Virginia Department of Health (VDH) and the Virginia Department of Behavioral Health and Developmental Services (DBHDS). Feedback on the Guidelines was provided by parents, teachers, and school and division leaders through a focus group and written comment platform. The feedback helped inform the final guidelines.

Additionally, through Governor Youngkin's [Executive Order 28](#), school divisions across the Commonwealth have ensured families know when a school-connected overdose has occurred. As a part of the Executive Order 28, the VDOE released the [Parental Notification, Law Enforcement Collaboration, and Student Education to Prevent Student Overdoses](#) resource document. The document outlines parental notifications, criteria for an overdose, and collaboration with the school community and local law enforcement. Families are now able to monitor, make strong

decisions to support their children, and partner with schools in reducing student overdoses. Families and schools have updated the VDOE that this critical step has been helped to create transparency, and more importantly, awareness of the challenges our students are facing.

BACKGROUND

The opioid epidemic is both a national security concern and a serious public health emergency. The Drug Enforcement Agency (DEA) seized a record 79.5 million fentanyl pills in 2023, which greatly exceeded prior years. Laboratory testing indicates seven out of every ten pills seized by the DEA contained a lethal dose of fentanyl¹.

In Virginia, the leading cause of unnatural death is drug overdoses and has been since 2013 (VDH, 2024). Research shows that opioids – specifically fentanyl – have been the driving force behind the large increases. Fentanyl is a synthetic opioid typically used to treat patients with chronic severe pain or severe pain following surgery. Fentanyl is similar to morphine but about 100 times more potent. Under the supervision of a licensed medical professional, fentanyl has a legitimate medical use. However, fentanyl not prescribed by a doctor and illegally made and distributed can be fatal. In 2021, fentanyl contributed to 76.4 percent of all [Virginia overdose deaths](#). The total number of fatal fentanyl overdoses increased 22.8 percent from 2020 to 2021 (VDH, 2024). It was estimated that in 2021, 98 percent of fatal fentanyl overdoses in Virginia were caused by the illicit, rather than prescription, version of the drug². Of the 2,058 Virginians who died from fentanyl or heroin, 37 were youth under 20 years old. However, between the ages of 20-24 the rate of deaths increased nearly fivefold, supporting the need to bring awareness much earlier regarding the dangers of fentanyl to impact these preventable deaths. In addition, DBHDS has launched through Curb the Crisis: [Opioids and Addiction in Virginia | Curb the Crisis : Curb The Crisis](#). This resource provides information and statistics about the Opioid crisis, rescue and prevention strategies, a treatment and recovery resource locator, and support resources for families and schools.

Governor Glenn Youngkin and First Lady Suzanne S. Youngkin have led Virginia’s fight against the opioid epidemic through a multi-faceted strategy to protect the health and welfare of our children.

¹ DEA. (2023). *One Pill Can Kill*. Wwww.dea.gov. <https://www.dea.gov/onepill>.

² *One Pill Can Kill Campaign – Virginia Rules*. (2023, May 23). virginiarules.org/one-pill-can-kill-campaign/.

Death Rate per 100,000 Virginia Residents, 2023*
(All-drug)

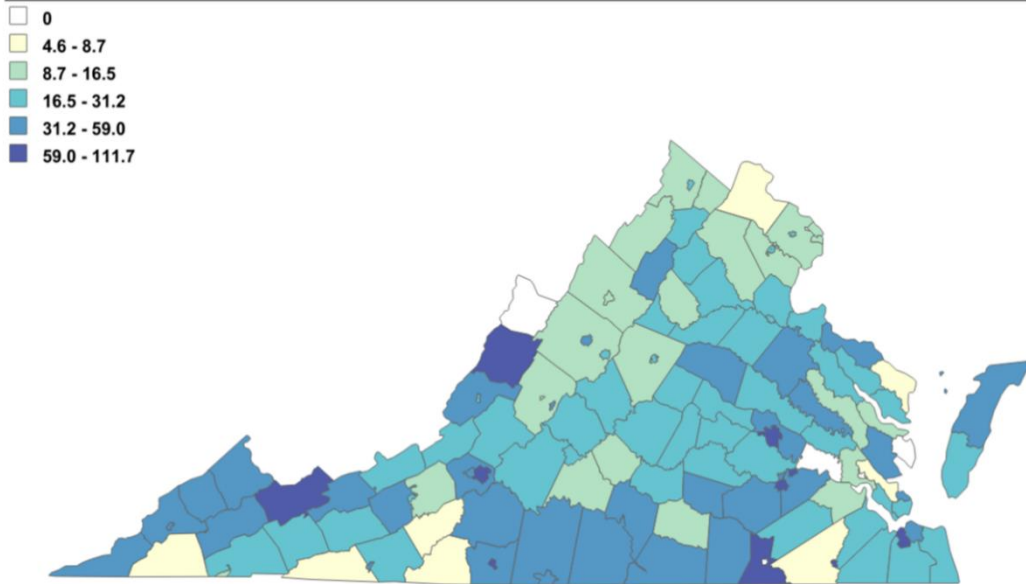
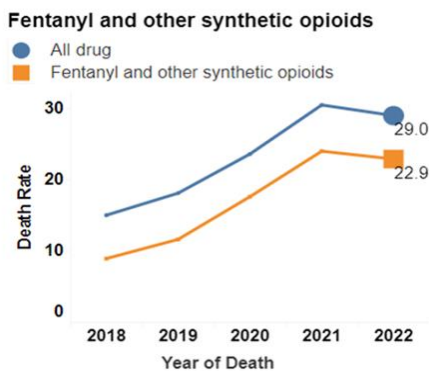


Figure 1: Virginia Department of Health (VDH) Office of the Chief Medical Examiner. (2024). <https://www.vdh.virginia.gov/content/uploads/sites/18/2024/01/Quarterly-Drug-Death-Report-FINAL-Q3-2023.pdf>.

Figure 2: Health Education | Virginia Department of Education. (2020). www.doe.virginia.gov. <https://www.doe.virginia.gov/teaching-learning-assessment/instruction/health-education>



On May 9, 2023, Governor Glenn Youngkin signed [Executive Order 26](#), which directed the launch of a comprehensive fentanyl-fighting strategy across public safety, education, and treatment sectors. The Executive Order came on top of the Governor’s [Right Help, Right Now](#) plan, which includes a critical goal to reduce opioid overdoses in Virginia by 20 percent. The five-part strategy included (1) enhancing public safety measures to counteract activity by illicit drug manufacturers and distributors; (2) investing in and enhancing prevention and recovery efforts; (3) educating our communities for action to address fentanyl and opioid abuse and overdoses; (4) expanding access to evidence-based treatments; and (5) comprehensively organizing our government to transform and strengthen Virginia's response to the fentanyl opioid crisis.

On November 1, 2023, as a result of nine student school-connected overdoses that occurred in one community, Governor Glenn Youngkin issued [Executive Order 28](#), which directed the

VDOE to issue guidance regarding best practices to support decision-making protocols for school leaders developing 24-hour parent notification protocols with school-connected overdoses, and re-enforcing best practices for law enforcement collaboration. A best practices [resource document](#) addressing two of those three directives was released through Superintendent’s Memorandum #144-23, dated November 17, 2023. One year later, student overdoses have [dropped dramatically](#) in Alexandria, Fairfax, Loudoun, Prince William, and Arlington counties.

In January 2024, in partnership with the Virginia Foundation for Healthy Youth and Attorney General Jason Miyares’ One Pill Can Kill campaign, First Lady Suzanne S. Youngkin launched the [It Only Takes One](#) initiative as a pilot in Roanoke, Virginia. The pilot portion had promising results with the campaign’s ad content reaching around 240,000 Roanoke adults with a teen or child in their lives. In addition, familiarity with fentanyl increased by 12% among parents who saw ad content, and they reported being 55% more likely to initiate a conversation with their children about the deadly opioid. Over 500 adults signed a pledge to talk to their teen about fentanyl before summer. Teens who saw ad content themselves were 32% more familiar with fentanyl, 46% more aware that a single pill could cause death and 24% more likely to know that fentanyl is found in illegal drugs. Perhaps most importantly, they reported a 136% increase in conversations with adults about the risks.

Most recently, Governor Glenn Youngkin and the First Lady announced the statewide expansion of the [It Only Takes One](#) initiative that will target additional communities across the Commonwealth that are high substance use areas and have been impacted by the fentanyl epidemic. In these critical areas, the First Lady will visit schools, Community Service Boards, churches, and recovery centers to spread fentanyl awareness. As part of the initiative expansion, the First Lady launched the Fentanyl Families Ambassador Program. This program empowers families affected by fentanyl to share their stories, advocate in their communities, and raise awareness of the dangers of fentanyl. Additionally, [REVIVE!](#), a large-scale training effort, ensures that more Virginians have access to the life saving opioid reversal agent, naloxone, which prevents death by overdose from opioids.

The 2024 General Assembly passed House Bill 732 and House Bill 1473, and these bills compliment the work of HB134. House Bill 732 requires the VDOE and Virginia Department of Health to develop guidelines and policies for each public school board to implement opioid antagonist training for staff; provide evidence-based education for students in grades nine through twelve; and ensure that each public and secondary school procures, places, and maintains at least two (2) unexpired doses of an opioid antagonist. In addition, House Bill 1473 required the VDOE and the Virginia Department of Health to work collaboratively to develop a fentanyl education and awareness informational one-sheet and make it available to each school board for distribution to all grade 9-12 students within the first two weeks of the 2024-2025 school year. Both support the ongoing work of the department to support school division’s

opioid abatement. Funds provided through the Opioid Abatement Authority for the Opioid Abatement Education Program enabled the VDOE to offer Botvin *LifeSkills Training* and program curriculum to Virginia teachers in the spring and summer of 2024. Botvin *LifeSkills Training* is a research-validated substance abuse prevention program proven to reduce the risks of alcohol, tobacco, drug abuse, and violence by targeting the major social and psychological factors that promote the initiation of substance use and other risky behaviors. The grant has recently been extended to provide an Opioid and Rx Drug Prevention Module to middle schools who choose to utilize Botvin *LifeSkills Training*. The grant provides a stipend to middle school teachers interested in participating in the training with the goal of increasing the number of students engaged in the research-validated program. The Department Opioid Abatement Program Manager, also funded through the grant provided by the Opioid Abatement Authority, oversees the implementation and expansion of the Botvin *LifeSkills Training* and serves as an intra- and inter-agency liaison to support teachers, parents, and students in developing an awareness of opioid awareness and prevention. The Botvin *LifeSkills Training* and Programs expand the expectations of the 2020 Health *Standards of Learning* and provides a targeted focus on drug awareness and prevention. The 2020 Health Education *Standards of Learning: Support for Opioid Awareness and Prevention Instructional Guide* provides teachers with additional support and strategies to support K-12 instruction on drug awareness and prevention with a specific focus on opioids.

DEFINITIONS

The following definitions are reference for this report and are sourced from the Center for Disease Control (CDC) and VDOE.

Analog: Drugs that are similar in chemical structure or pharmacologic effect to another drug but are not identical.

Benzodiazepines: Sometimes called "benzos," these are sedatives often used to prevent seizures and treat anxiety disorders, insomnia, and other conditions. Examples include alprazolam (Xanax®), diazepam (Valium®), and lorazepam (Ativan®). They can be misused and have addiction potential. Combining benzodiazepines with opioids increases a person's risk of overdose and death.

Fentanyl: A synthetic opioid that is up to 50 times stronger than heroin and 100 times stronger than morphine. There are two types of fentanyl: pharmaceutical fentanyl and illegally made fentanyl. *Pharmaceutical fentanyl* is approved for treating severe pain, typically advanced cancer pain. It is prescribed in the form of intravenous use, transdermal patches or lozenges. *Illegally made fentanyl* is sold through illicit drug markets for its heroin-like effect.

Good Samaritan laws: Laws that protect people from legal consequences, who help someone in need during emergencies, including helping someone who is experiencing an overdose.

Heroin: An illegal opioid drug processed from morphine and extracted from certain poppy

plants.

Illegal drugs: A variety of drugs that are prohibited by law. These drugs can include: amphetamine-type stimulants, marijuana/cannabis, cocaine, heroin, other opioids, and synthetic drugs, such as illicitly manufactured fentanyl (IMF) and ecstasy (MDMA). This also includes the misuse and illegal distribution of prescription drugs.

Medications for opioid use disorder (MOUD): Treatment option for opioid use disorder using medications such as methadone, buprenorphine, or naltrexone.

Methamphetamine: A highly addictive central nervous system stimulant also categorized as a psychostimulant. Methamphetamine use is linked to mental disorders, problems with physical health, violent behavior, and overdose deaths. Methamphetamine is commonly referred to as meth, ice, speed, and crystal, among many other terms.

Naloxone: A medication that can reverse the effects of an opioid overdose. It may be administered as an injectable or an intranasal spray.

Opioids: Chemicals that interact with opioid receptors on nerve cells in the body and brain and reduce the intensity of pain signals and feelings of pain. This class of drugs includes the illegal drug heroin, illegally made fentanyl, and pain medications available legally by prescription, such as oxycodone, hydrocodone, codeine, morphine, prescribed fentanyl, and many others. Prescription opioids can be safe when taken for a short time and as directed by a doctor, but because they produce euphoria in addition to pain relief, they can be misused and have addiction potential.

Opioid Antagonist: A drug that blocks opioid receptors without activating them causing no opioid effect.

Opioid epidemic: A public health crisis characterized by a significant increase in opioid overdose deaths and addiction rates.

Overdose: Injury to the body (poisoning) that happens when a drug is taken in excessive amounts.

Prescription opioids: Medications used to treat moderate to severe pain in some patients. Categories of prescription opioids include:

- *Natural opioids* come from the poppy plant and include morphine and codeine;
- *Synthetic opioids* (other than methadone) are made in a laboratory, and include drugs such as tramadol and fentanyl;
- *Semi-synthetic opioids* include drugs such as oxycodone, hydrocodone, hydromorphone, and oxymorphone; and
- *Methadone* is a synthetic opioid that can be prescribed for pain reduction or for use as a

medication for opioid use disorder (MOUD). For MOUD, methadone is used under direct supervision of a healthcare professional.

Stigma: Negative attitudes and beliefs about people who use substances or have addiction, that contributes to barriers in supporting individuals and families of people living with addiction and their access to needed treatment

Substance Use Disorder(s) (SUD): A substance use disorder is a cluster of cognitive, behavioral, and physiological symptoms indicating that the individual continues using the substance despite significant substance-related problems. "Substance use disorders" is preferred over the term "addiction."

Synthetic opioids: Man-made opioids, including fentanyl and carfentanil.

Treatment: A range of interventions, including outpatient counseling, inpatient rehabilitation, and behavioral health care.

GUIDELINES AND RESOURCES FOR LOCAL SCHOOL BOARDS

The educational materials and guidelines below are a result of the deliverables requested in HB134:

- (i) age-appropriate and evidence-based education materials concerning the risks to health and safety that are posed by opioids, with a particular focus on prevention, identification of the signs of overdose, resources for supports, risks, and effects of addiction, and the risk of death that is posed by fentanyl; and*
- (ii) guidelines for school boards for incorporating the education materials developed into instructional programs for students enrolled in the local school division.*

The guidelines and resources can be used by school division personnel to inform curriculum development or select curriculum to be used in the division. Instruction concerning drugs and drug abuse, to include opioid related instruction, was added to the *2020 Health Standards of Learning* when the State Board of Education adopted revised standards.

As Opioid Instruction needs have become more critical since 2020, the following educational materials and guidelines should be used by school division instructional and instructional support personnel to incorporate instruction on the risks to health and safety that are posed by opioids into classrooms.

1. Pursuant to Va. Code [§ 22.1-206](#) each school division must include instruction concerning drugs and drug abuse as prescribed by the Board of Education. School divisions should provide age-appropriate and evidence-based education materials concerning the risks to health and safety that are posed by opioids.

2. Curriculum lessons and materials should align with the [*Health Education Standards of Learning for Virginia Public Schools*](#) and foster the motivation, skills, and self-efficacy necessary to make informed and healthy choices, avoid high-risk behaviors, and understand the science of addiction. School divisions should consider following the [*Centers for Disease Control and Prevention Healthy Schools' Characteristics of an Effective Curriculum*](#) when selecting curriculum.
3. School divisions should provide evidence-based curriculum lessons and materials that focus on reinforcing protective factors and increasing awareness of personal risk and the harmfulness of engaging in unhealthy practices and behaviors. School divisions may consider following the [*Centers for Disease Control and Prevention Healthy Schools' Characteristics of an Effective Curriculum*](#) when selecting curriculum. Resources and curriculum for division consideration are found in the Instructional Resources section below.
4. School divisions should provide high-quality and evidence-based professional learning opportunities for educators to orchestrate critical pathways for enhancing the impact, sustainability, and fidelity of effective opioid prevention curricula that include structured learning experiences for making healthy choices (goal-setting and planning skills, communication and assertive skills, and responsible decision making), and avoiding health-risk behaviors that lead to risk of addiction. Professional learning opportunities for division consideration are found in the Instructional Resources section below.
5. School divisions should create safe and supportive learning environments by cultivating practices that bring together administrators, teachers, school-based mental health professionals, parents, youth, and community partners; include clearly communicated policies and procedures that provide compassion, counseling, and support for all students and personnel; and ensure a cooperative approach among students, staff, parents, prevention specialists, agencies, and law enforcement that is responsive to the culture and communities they serve.
6. If a school division chooses to develop curriculum resources, they should follow the following steps.
 - a. Align with the *Health Education Standards of Learning* to address age-appropriate and that are posed by opioids and implement curricula that meet the following criteria.
 - b. Focus on clear health-related goals and instructional strategies and learning experiences that are directly related to the behavioral outcomes.
 - c. Is evidence-based and has learning experiences built on approaches that effectively influence health-related behaviors and goes beyond the cognitive level and addresses health determinants, social factors, attitudes, values, norms, and skills that influence specific health-related behaviors.
 - d. Foster attitudes, values, and beliefs that support positive health behaviors and

- learning experiences that motivate students to critically examine personal perspectives and generate positive perceptions about protective behaviors and negative perceptions about risk behaviors.
- e. Help students accurately assess the level of risk-taking behavior among their peers, correct misperceptions of peer and social norms, emphasizes the value of good health, and reinforces health-enhancing attitudes and beliefs.
 - f. Provide opportunities for students to validate positive health-promoting beliefs, intentions, and behaviors through functional health knowledge that is student-friendly, accurate, reliable, and credible information for usable purposes so students can assess risk, clarify attitudes and beliefs, correct misperceptions about social norms, identify ways to avoid or minimize risky situations, examine internal and external influences, make behaviorally relevant decisions, and build personal and social competence.
 - g. Address social pressures and influences and provides opportunities for students to analyze personal and social pressures to engage in risky behaviors.
 - h. Build personal and social competence, and self-efficacy by including communication, refusal strategies, assessing accuracy of information, decision-making, planning and goal setting, self-control, and self-management that enables students to build their personal confidence, deal with social pressures, and avoid or reduce high-risk behaviors. For each skill, students are guided through a series of developmental steps:
 - Discussing the importance of the skill, its relevance, and relationship to other learned skills;
 - Presenting steps for developing the skill;
 - Modeling the skill;
 - Practicing and rehearsing the skill using real-life scenarios; and
 - Providing feedback and reinforcement.
 - i. Provide opportunities for students to reinforce skills and positive health behaviors, builds on previously learned concepts and skills, and provides opportunities to reinforce health-promoting skills across health topics and grade levels.
 - m. Create sustained vertical and horizontal alignment throughout school communities to foster ongoing supports for students and educators in understanding key health concepts and skills needed to bring about meaningful changes in behavior and choices related to substance abuse related mental health.
 - o. Include a plan for evidence-based, ongoing professional development that is targeted in supporting and enhancing educators' understanding of the complex relationships of families and communities that can exist within substance abuse.
 - p. Offer meaningful strategies and supports in identifying and addressing the needs of students, educators, and school communities when discussing mental health, possible triggers for students and educators, substance abuse, and ongoing medical

treatment for substance abuse.

Instructional Guides for Incorporating Opioid-Related Information by Grade Level

The *2020 Health Standards of Learning: Support for the Instruction of Opioid Awareness and Prevention Instructional Guide* is a companion document to the *2020 Health Standards of Learning* and amplifies the Standards of Learning by defining the core knowledge and skills in practice and supports teachers in their opioid awareness and prevention instruction. Instructional supports are accessible in [#GoOpenVA](#) and support the decisions local school divisions must make concerning local curriculum development and how best to help students meet the goals of the standards. The *Support for the Instruction of Opioid Awareness and Prevention Instructional Guide* can be accessed on the Virginia Department of Education's [Health Education webpage](#).

The Instructional Guide is divided into three sections:

1. Understanding the Standard,
2. Skills in Practice, and
3. Concepts and Connections aligned to the Standard.

The local curriculum should include a variety of information sources, readings, learning experiences, and forms of assessment selected at the local level to create a rigorous instructional program. The guidelines and associated resources, in conjunction with the Opioid Awareness and Prevention Instructional Guide, can be utilized to enhance the division curriculum and equip teachers with evidence-based materials to support classroom instruction. The instructional resources listed below are embedded into each grade level in the *Resources and Activities for Consideration* section of the Opioid Awareness and Prevention Instructional Guide.

ADDITIONAL RESOURCES FOR OPIOID PREVENTION

The resources below provide opioid-related educational information and materials for school divisions to incorporate into the classroom. They are included in the *2020 Health Standards of Learning: [Support for the Instruction of Opioid Awareness and Prevention Instructional Guide](#)* in the *Resources and Activities for Consideration* section to assist teachers in choosing resources and information to guide the teaching of the potential hazards of opioids to students.

It is important for educators to understand that some students may have a current serious opioid use disorder. If you feel a student may be in need of immediate assistance, please seek guidance from a school mental health professional in line with local school policy (school counselor, school social worker, school psychologist) and/or a community-based substance abuse provider. Resources such as [Virginia 2-1-1](#) can be a good tool to locate free resources in your community.

Prevention Programs and Resources, K-12

- [Botvin LifeSkills Training \(LST\)](#) is a research-validated substance abuse prevention program proven to reduce the risks of alcohol, tobacco, drug abuse, and violence by targeting the major social and psychological factors that promote the initiation of substance use and other risky behaviors. This comprehensive and exciting program provides adolescents and young teens with the confidence and skills necessary to successfully handle challenging situations.
- [Curb the Crisis](#) features information about where to seek treatment for opioid misuse for yourself or a loved one. Alongside the latest research and data on the opioid crisis, it also contains information on referral and treatment services in Virginia.
- [The Drug Abuse Resistance Education \(D.A.R.E.\)](#) is a drug abuse prevention education program designed to equip elementary, middle and high school children with knowledge about drug abuse, the consequences of abuse, and skills for resisting peer pressure to experiment with drugs, alcohol, and tobacco.
- The [National Coalition Against Prescription Drug Abuse \(NCAPDA\)](#) is a 501(c)3 non-profit, volunteer-based organization established to prevent prescription drug/opioid-related *Substance Use Disorder (SUD)* and overdose deaths through community education, policy change, and legislative action at the local, state and federal levels.
- [Operation Prevention](#), created by the Drug Enforcement Agency (DEA) and Discovery Education, provides no-cost online tools that support every member of the community with the power of prevention. Information is provided on life-saving conversations with English & Spanish language resources for students in grades 3-12, plus additional resources designed for educators, families, and professionals.
- The [One Pill Can Kill for Teens](#) campaign from United States Drug Enforcement Administration offers an opportunity for the media, parents, teachers, educators, and community organizations to raise awareness about counterfeit prescription drugs.
- [Preventing and Reducing Youth and Young Adult Substance Misuse: Schools, Students, Families](#) from the U.S. Department of Education provides resources and training on how schools can help youths with substance misuse and create safe learning environments.
- [Too Good for Drugs](#) is a universal K-12 prevention education program designed to mitigate the risk factors and enhance protective factors related to alcohol, tobacco, and other drugs (ATOD) use.
- The [Educator Supports](#) section of the recently released [School Performance and Support Framework](#) includes a [Removing Non-Academic Barriers](#) section on the impact that cell phones and social media can have on mental and physical health.
- On July 9, 2024, Governor Glenn Youngkin issued [Executive Order 33](#) to help bring cell phone-free education to Virginia schools. This order was due in part to the mental health impact that cell phones and social media are having on our youth. VDOE has

published [final guidance](#) for school divisions on policies and procedures to be implemented to establish cell phone-free education and remove cell phones from Virginia’s public school classrooms.

- [Social Media: Drug Trafficking Threat](#): Drug traffickers advertise on social media platforms like Facebook, Instagram, Snapchat, TikTok, Twitter and YouTube. These advertisements are in disappearing, 24-hour stories and in posts, which are promptly posted and removed. This brochure from the Drug Enforcement Agency and One Pill Can Kill Campaign provides information on how it works, where it’s happening, and what you can do.

Opioid Prevention Programs and Resources: Middle School

- [GoOpenVa](#) is a Virginia-based platform that is both a repository for openly licensed resources and a community for sharing innovative ideas for teaching. It provides educators and partners with the ability to create and share high quality learning experiences for Virginia students. It includes multiple instructional resources for middle school students, including:
 - [Drug Abuse Board Game \(2022\)](#); and
 - [Lessons on Reducing Risky Behaviors \(2023, 2024\)](#).
- The [Just Think Twice Website](#) from the DEA’s website includes facts and information about fentanyl and other opioids, as well as a variety of other substances for middle school students.
- [Opioids: What You Need to Know](#) is the National Institute on Drug Abuse’s lessons focused on what opioids are, their potential dangers, and how to use opioids safely. It includes an adapted version for grades 4-6 .
- [PreVenture \(2022\)](#) is an evidence-based prevention program for youth ages 12-18 that uses personality-focused interventions to promote mental health and reduce the risk of substance use.
- [This is Not About Drugs \(2022\)](#) (TINAD) is a youth education program for students in grades 6-12 addresses youth substance use with an emphasis on opioids (prescription pain medication, fentanyl and heroin).
- The [Tips for Teens: The Truth About Opioids Fact Sheet](#) from the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration provides facts about opioids and describes short- and long-term effects and lists signs of opioid use. The fact sheet helps to dispel common myths about opioids.
- The [Opioids and Adolescent Health Resource Guide](#) (2023) created by the U.S. Department of Health and Human Services and the Family and Youth Services Bureau, examines the U.S. opioid crisis and its impact on adolescent health. It provides an overview of opioid use, the factors driving it, available treatments, and offers guidance for youth-serving professionals on how to address this issue.

- [Virginia Rules](#) is an educational program especially designed to help instructors, parents, and students understand the laws that apply to Virginia teens in their everyday lives. Information includes violations and penalties regarding possession, sale, distribution, or manufacturing of opioids in the school setting. It features lessons designed for middle and high school students.

Opioid Prevention Programs and Resources: High School

- [Classroom Resources, Lessons, and Activities \(2024\)](#) contains lessons, activities, and drug facts from the National Institute of Health to educate teens about the effects and consequences of drug use.
- [EverFi \(2023\)](#) has a newly updated digital youth-led course that educates students in grades 8-12 about the potential dangers of misusing prescription medications, including fentanyl. The course, developed in partnership with Truth Initiative, explores the impact misuse can have on teens' physical and mental health, relationships, communities, and futures.
- [GoOpenVa](#) is a Virginia-based platform that is both a repository for openly licensed resources and a community for sharing innovative ideas for teaching. It provides educators and partners with the ability to create and share high quality learning experiences for Virginia students. It includes multiple instructional resources for high school students, including:
 - [Prescription Drug Safety Lessons \(2023\)](#);
 - [Dangers of Opioids \(2020, 2023\)](#); and
 - [Lessons on Reducing Risky Behaviors \(2021, 2023\)](#)
- [Substance Use Disorders and Opioid Addiction in School Communities \(2023\)](#) is a nine module training series from the Virginia Department of Education that provides school divisions and relevant stakeholders with important information on opioid overdose prevention, effective approaches, and access to care.
- The [Substance Use Prevention Resources for Youth and College Students](#) site provides substance use prevention resources from the Substance Abuse and Mental Health Services Administration (SAMHSA).
- The [Virginia Fentanyl Awareness One-Sheet \(2024\)](#) is a result of the 2024 General Assembly passing [HB1473](#) requiring the Virginia Department of Education and the Virginia Department of Health to work collaboratively to develop a fentanyl education and awareness informational one-sheet and make this resource available to each school board for distribution to all grade 9-12 students within the first two weeks of the 2024-2025 school year.
- The [Fentanyl Facts](#) and [Fentanyl One-Pager \(2023\)](#) were released by the National Coalition Against Prescription Drug Abuse ([NCAPDA](#)) and share statistics related to opioid involved overdoses and deaths and information on what Fentanyl is and the

dangers it poses.

- The [Virginia Foundation for Healthy Youth's Fentanyl Prevention Lesson & On Demand Webinar of Best Practices, 2024](#), was initially developed by practitioners from the Warren County Community Health Coalition. It has been revised by the Virginia Foundation for Healthy Youth with support from researchers at Virginia Tech, Virginia Commonwealth University, and East Tennessee State University.

Overdose Reversal Training

There are several resources available that provide the training to respond to a known or suspected opioid overdose emergency. Training includes recognizing the signs and symptoms of an opioid overdose, the appropriate care to provide based on the person's breathing and level of responsiveness, and how to administer Naloxone/Narcan to reverse the effects of an opioid overdose. School divisions should create and follow local policy for training and response protocol for suspected overdose during school and at school-related activities.

- The [REVIVE! Teen Module \(2024\)](#) from the Department of Behavioral Health and Developmental Services (DBHDS) is designed to help young people (teens) understand the real risks of opioids. The module aims to break the stigma around opioid overdoses and start conversations about prevention and preparedness in an event of an opioid overdose.
- [REVIVE! \(2022\)](#) is the Opioid Overdose and Naloxone Education (OONE) program for the Commonwealth of Virginia. REVIVE! provides training on how to recognize and respond to an opioid overdose emergency using naloxone.
- The [American Red Cross](#) provides courses that include opioid overdose response and naloxone administration as part of their first aid, CPR, and AED training programs.
- [The DOPE Project](#) and [The Next Distro](#) provide grassroots-level training and resources on opioid overdose prevention and naloxone distribution. These organizations often tailor their training to the needs of specific communities.
- [Project Lazarus Training Resources](#) offer community-based overdose prevention programs, including training on naloxone administration and comprehensive opioid safety education.
- The [Get Naloxone Now](#) online resource offers free, interactive training programs on recognizing and responding to opioid overdoses, as well as how to administer naloxone.
- The [National Institute on Drug Abuse \(NIDA\)](#) provides educational materials and resources on naloxone and opioid overdose, including research-based information and guides for responders.

VIRGINIA DEPARTMENT OF EDUCATION OPIOID ABATEMENT EDUCATION PROGRAM

An additional opportunity for teachers to incorporate opioid-related instructional information into the classroom has been through the Opioid Abatement Education Program (OAEP) grant, which was awarded to the VDOE from the Opioid Abatement Authority in 2023 and is a statewide effort to support the Governor's *Right Help, Right Now* plan. The OAEP addresses the current opioid epidemic by educating K-12 students, parents, school employees, and student-athletes about the dangers of drug use and how to prevent opioid misuse, abuse, and addiction. The program goal is to provide all students across the commonwealth with [Botvin LifeSkills Training](#), an evidence-based substance abuse prevention programming that not only provides awareness and education but is also proven to significantly reduce the risk of opioid use, misuse, and abuse.

Students who have received Botvin *LifeSkills Training* curriculum are equipped with life skills that allow them to better navigate the specific societal factors, pressures, and circumstances that surround them during the current opioid epidemic. A goal of the grant is to annually train 200 K-12 teachers and school staff in Botvin *LifeSkills Training* delivery and support them as they implement the curriculum with fidelity to students throughout the school year. The OAEP is entering into the second year and there are opportunities for all Virginia K-12 teachers, school-based mental health professionals, and school administrators to become Botvin-trained. Further information on program details and opportunities can be found on the VDOE's Opioid Abatement Education Program [webpage](#).

VIRGINIA DEPARTMENT OF EDUCATION DISSEMINATION PLAN

The Guidelines for Incorporating Opioid Related Instruction into Classrooms and the related resources and instructional materials will be made available through multiple platforms and disseminated to school divisions to support the integration of opioid related resources into division curriculum to educate youth about opioid awareness and prevention. Strategies will include but not be limited to the following three methods of dissemination:

1. Broad Awareness and Information Sharing Campaign

The document will be made available to school division personnel and other stakeholders through the [Virginia Education Update Newsletter](#), Teacher Direct Newsletter, Office of Behavioral Health and Student Safety Newsletter, and posted in multiple areas on the Department [website](#). VDOE staff, along with state agency partners, will conduct a series of webinars to introduce the guidelines and provide strategies to stakeholders for incorporating opioid-related instruction into classrooms. In addition, through the Opioid Abatement Education Program, the resources and strategies in this report will be infused with current [Botvin LifeSkills Training](#) being provided to teachers across the Commonwealth to deliver evidence-based opioid abuse prevention programming that not only provides awareness and education but is also proven to significantly reduce the risk of opioid use, misuse, and abuse.

2. Teachers and Administrators

The document and associated resources will be made available through [#GoOpenVa](#) and integrated into a professional learning course currently being designed in Canvas. The use of these resources will be referenced in VDOE-led professional development addressing substance use and prevention in the *2020 Health Standards of Learning*.

3. Specialized Instructional Support Personnel

Specialized Instructional Support Personnel (SISP), including school counselors, school social workers, school psychologists, and school nurses can support the incorporation of opioid-related instructional materials into the classroom by working with teachers to supplement existing curriculum on substance abuse through classroom lessons, learning experiences, school campaigns on opioid and drug prevention, individual and group counseling activities, and working with community partners on prevention and referral pathways to ensure our students and their families in most need of services are accessing them where and when they need them. The document and associated resources will be shared with SISPs through newsletters, professional development events, and state association announcements.

APPENDIX A: HEALTH EDUCATION STANDARDS OF LEARNING FOR VIRGINIA PUBLIC SCHOOLS

The following are *2020 Health Education Standards of Learning* that foster the motivation, skills, and self-efficacy necessary to make informed and healthy choices specific to substance use prevention and mental wellness/social and emotional health, avoiding high-risk behaviors, understanding the science of addiction, and promoting life skills that enable students to manage situations that could lead to substance misuse.

The format for the health standards is *Grade Level.Strand.Standard*.

Example:

K.1.i Identify medicine as a pill or liquid that can be taken to feel better when sick but can cause harm if misused.

K = Kindergarten

1 = Strand 1 – Essential Health Concept

i = Standard i - Identify medicine as a pill or liquid that can be taken to feel better when sick but can cause harm if misused.

K-10 Substance Abuse Prevention Strand

K.1.i Identify medicine as a pill or liquid that can be taken to feel better when sick but can cause harm if misused.

K.1.j Describe how medicine and other substances can be helpful or harmful and recognize poison warning labels.

K.2.i Describe consequences of taking medications unsupervised.

K.2.j Identify the meaning of safety signs, symbols, and warning labels and understand the dangers of white powder and other unknown substances.

K.3.i Discuss why medicines should only be taken under the supervision of a parent/guardian.

K.3.j Identify adults to ask for help and assistance with harmful and unknown substances.

1.1.g Identify that medicines can be both helpful and harmful.

1.2.g Explain the harmful effects of misusing medicines and drugs.

1.3.g Create safety rules for medications in the home.

2.1.e Describe the harmful effects of medicine, alcohol, and tobacco, including poor concentration; impaired balance, vision, and memory; shortness of breath; cancer; lung and heart disease; and changes to the way a person feels, thinks, and acts.

2.2.e Recognize that tobacco smoke and nicotine products (e.g., electronic smoking devices) are harmful to one's health and should be avoided.

2.3.e Explain why it is dangerous to sniff, taste, or swallow unknown substances.

2.1.f Identify refusal skills.

2.2.f Describe the use of refusal skills based on good decisions.

2.3.f Demonstrate refusal skills in situations that involve harmful substances with peers and adults.

- 2.1.g Explain differences between prescription and nonprescription medications.
- 2.2.g Identify why medicines should only be taken under the supervision of an adult and the importance of childproof caps on medicines.
- 2.3.g Conduct an assessment of harmful substances in the home with a parent/guardian.

- 3.1.h Describe proper and improper use of prescription (e.g., taking medication prescribed for someone else) and nonprescription medications.
- 3.2.h Explain the consequences of disregarding medical recommendations for prescription and nonprescription medications.
- 3.3.h Create a health message about the proper use of prescription and nonprescription medications.
- 3.1.i Identify body systems affected by the use of alcohol, tobacco, nicotine products (e.g., electronic smoking devices), inhalants, and other drugs.
- 3.2.i Analyze the harmful short- and long-term effects of alcohol, tobacco, nicotine products, common household inhalants, and other drugs on body systems.
- 3.3.i Encourage others to use refusal skills to avoid alcohol, tobacco, nicotine products, inhalants, other drugs, and unknown substances.

- 4.1.h Compare the short- and long-term consequences of the use of alcohol, tobacco, nicotine products, marijuana, inhalants, and other drugs.
- 4.2.h Examine factors that can influence an individual’s decision to use or avoid alcohol, tobacco, nicotine products, marijuana, inhalants, and other drugs.
- 4.3.h Determine the importance of resistance/refusal skills in saying no to alcohol, tobacco, inhalants, and other drugs.

- 4.1.i Identify effective verbal and nonverbal communication skills to resist/refuse alcohol, tobacco, nicotine products, marijuana, inhalants, and other drugs.
- 4.2.i Describe the effects of peer pressure on use of alcohol, tobacco, nicotine products, marijuana, inhalants, and other drugs.
- 4.3.i Demonstrate effective refusal skills for situations involving peer pressure to use harmful substances.

- 5.1.i Analyze the effects of the use of alcohol, tobacco, nicotine products, marijuana, inhalants, and other drugs on relationships with family, peers, and other individuals.
- 5.2.i Describe effective communication skills to request assistance in situations where alcohol, tobacco, nicotine products, marijuana, inhalants, and other drugs are being abused.
- 5.3.i Encourage others not to use alcohol, tobacco, nicotine products, marijuana, inhalants, or other harmful drugs.

- 5.1.j Explain the connection between mental health and substance use.
- 5.2.j Describe how to get help and assistance with mental health and substance use concerns.
- 5.3.j Identify prevention resources and strategies for avoiding alcohol, tobacco, inhalants, and other drugs.

- 6.1.h Differentiate between proper use and misuse of prescription and nonprescription medications.

- 6.2.h Evaluate the influence of media and marketing techniques on prescription, nonprescription, and unregulated medication choices.
- 6.3.h Describe where to access accurate information on the proper use of prescription, nonprescription, and unregulated medications.

- 6.1.i Recognize social influences/influencers on both the reduction and promotion of the use of alcohol, tobacco, nicotine products, and other drugs.
- 6.2.i Identify the benefits of a smoke and tobacco/nicotine-free environment.
- 6.3.i Examine the changes in school and community policies and laws regarding tobacco/nicotine-free environments.

- 6.1.j Define addiction and substance use disorder.
- 6.2.j Describe characteristics of substance use disorder.
- 6.3.j Describe the types of support available at school and in the community for substance use disorders.

- 6.1.k Identify different types of opioids.
- 6.2.k Differentiate between legal and illegal drugs that fall into the opioid category.
- 6.3.k Describe the dangers of opioids in the home and the community impact of the national opioid epidemic.

- 6.1.1 Explain the importance of accepting responsibility for personal actions to avoid risk-taking behaviors related to substance use.
- 6.2.1 Analyze family and peer pressure as influences on the use and nonuse of opioids, alcohol, tobacco, inhalants, and other drugs.
- 6.3.1 Identify mental and health professionals and explain their role in preventing the use/abuse of prescription opioids and other drugs.

- 7.1.k Explain the link between addiction to alcohol, tobacco, and other drugs; chronic disease; and engaging in risky behaviors.
- 7.2.k Understand that addiction is a compulsive physiological need for and use of a habit-forming substance.
- 7.3.k Identify ways to participate in school and community efforts to promote a drug-free lifestyle.

- 7.1.1 Define prescriptions, controlled substances, nicotine vaping products, hemp, and marijuana-derived cannabidiol (CBD) products, and explain their uses.
- 7.2.1 Explain the purpose of the Food and Drug Administration (FDA) and differentiate between FDA-approved and non-FDA-approved substances.
- 7.3.1 Create strategies to identify types of advertising techniques used in a variety of media, including social media that may influence adolescents' decisions concerning alcohol, tobacco and nicotine products, and other drugs.

- 7.1.m Identify the types of behavior associated with drug use and abuse that reflect positive norms (e.g., drug use is not cool, drunken driving is stupid, most teens do not use drugs).

- 7.2.m Identify short term, social and negative consequences of engaging in risky behaviors, including the use of alcohol, tobacco, nicotine products, marijuana, and other drugs.
- 7.3.m Identify and demonstrate strategies and skills for avoiding alcohol, tobacco, inhalants, and other harmful substances (e.g., effective refusal skills).

- 8.1.i Describe the short- and long-term health issues and effects on the brain related to the use of alcohol, tobacco, nicotine products, and other drugs, including inhalants, marijuana, cocaine, stimulants, methamphetamines, opiates, steroids, and performance-enhancing drugs.
- 8.2.i Analyze the social, economic, and family and peer pressure influences on the use of tobacco, nicotine products (e.g., e-cigarettes), alcohol, marijuana, and other drugs.
- 8.3.i Design persuasive advertising to eliminate drug use.

- 8.1.j Research the signs, symptoms, and causes of addiction and the impact of substance use disorder on relationships and behavior.
- 8.2.j Have and express positive norms regarding why most teenagers do not use alcohol, tobacco, prescription opioids, or other drugs (e.g., do not think use and abuse are acceptable or appropriate).
- 8.3.j Create a campaign that emphasizes the importance of prevention and early identification of drug use disorder.

- 9.1.h Explain how alcohol and other drugs increase the risk of injury.
- 9.2.h Evaluate the effects of alcohol and other drugs on human body systems, brain function, and behavior, and describe health benefits associated with abstaining from alcohol, tobacco, or other drugs.
- 9.3.h Promote ways to encourage reporting peer substance use to trusted adults (e.g., parents, teachers, coaches, doctors).

- 9.1.i Analyze the consequences of binge drinking.
- 9.2.i Develop a set of personal standards to resist the use of alcohol, tobacco, and other harmful substances and behaviors.
- 9.3.i Develop a personal plan to prevent substance use.

- 9.1.j Explain facts about opioids and why teens are more vulnerable to heroin and prescription opioids.
- 9.2.j Analyze and draw inferences about behaviors connected to addiction and mental health.
- 9.3.j Research consequences of drug abuse, including stealing to support a drug habit, arrest, prosecution, and jail.

- 10.1.g Research trends and factors that contribute to teen use/abuse and non-substance use of alcohol, tobacco, nicotine products (e.g., e-cigarettes), opioids, and other drugs and their impact on the community.
- 10.2.g Explain reasons why teenagers use or avoid drugs or alcohol and how positive role models can influence that decision.
- 10.3.g Demonstrate assertive communication skills to resist pressure to use alcohol, tobacco, and other drugs.

- 10.1.h Evaluate the causal relationship between tobacco, alcohol, inhalant, and other drug use and chronic disease.
- 10.2.h Evaluate the protective factors needed to reduce or prevent risk-taking behaviors, acts of violence, and substance use.
- 10.3.h Educate others about the dangers of electronic cigarettes through a brochure, social media campaign, or school club.

- 10.1.i Identify unsafe behaviors that may result in unintentional injury while riding in or operating a vehicle.
- 10.2.i Explain the role of the environment, individual behavior, social norms, legislation, and polices in preventing motor vehicle-related injuries.
- 10.3.i Encourage responsible teen driving behaviors, and practice using refusal and negotiation skills to avoid riding in a car with someone who has been using alcohol or other drugs.