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Australian Curriculum Assessment and Reporting Authority
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Comment on Foundation to Year 10 Draft Australian Curriculum: Health and Physical Education

The McCusker Centre for Action on Alcohol and Youth welcomes the opportunity to provide comment on the Foundation to Year 10 Draft Australian Curriculum: Health and Physical Education.

The McCusker Centre for Action on Alcohol and Youth is an independent organisation committed to reducing harms from alcohol among young people. The work of the McCusker Centre aims to raise awareness of the magnitude of alcohol-related harms among young people, the approaches we know can work, other options and the need to act without delay.

We strongly support well-resourced Health and Physical Education (HPE) in the school curriculum and believe HPE should be given the same level of priority as the curriculum areas contained within Phase one and Phase two of the Australian Curriculum. As it currently stands, we are concerned that HPE may not be considered a priority within a crowded curriculum, and that young people may miss out on education in a range of important health-related areas that are and will continue to present challenges within Australian society for generations to come.

The notional time allocation for HPE of 80 hours per year for all aspects of HPE is appallingly inadequate to cover the necessary range of topics in sufficient detail. Further, it is of great concern that time allocated to HPE will be left to jurisdictional authorities or individual schools to decide, and it will be possible for schools to choose to spend even less time on HPE than the already insufficient 80 hours per year.

The absence of emphasis on alcohol and other drugs in the school curriculum sends a signal to young people, parents and the wider community that this is not an important issue. Parents are entitled to expect that their children will be provided with quality HPE covering a range of important issues including alcohol and other drugs.

In the following points we outline further that alcohol is a cause of substantial harm and community concern, and urge that alcohol be positioned as a priority issue within the HPE Curriculum.

1. Independent market research commissioned by the McCusker Centre for Action on Alcohol and Youth in 2012 shows that 94% of West Australian adults are concerned about alcohol use among young people, and 98% are concerned about alcohol-related violence in WA.¹ Alcohol education in the school curriculum has exceptionally strong support in the community; 94% of West Australian adults support regular, well-resourced alcohol and drug education for all school students (with only 2% opposed).²
2. In 2011, the Commissioner for Children and Young People WA commissioned a consultation with nearly 300 WA 14-17 year olds regarding alcohol use and their views on strategies to reduce alcohol-related harm.³ A high level of support was shown for improved school alcohol education. Many of the young people who participated in the consultation believed school alcohol education was important and would be more likely to have an impact if it started at a young age.
3. The HPE Curriculum should reflect alcohol as a priority issue. Alcohol contributes substantially to drug harms, is the most commonly used drug by young people and adults, and is widely available and promoted in Australia. Alcohol-related harms affect the drinker, including through falls, injury, chronic disease, and legal problems; alcohol-related harms also affect others, including through road crashes, assault injuries, being put in fear, property damage, child neglect, and Foetal Alcohol Spectrum Disorders. Alcohol-related harms place a major burden on policing and health resources; however, harm from alcohol is preventable.
4. There are significant concerns in the community about drinking patterns among young people. Australian children and young people are drinking at earlier ages, and drinking to get drunk. Eighty percent of the alcohol consumed by young people aged 14-24 years is consumed at levels that put them or others at immediate risk, for example, from falls, assault injuries, road crashes and burns.⁴ Forty-three percent of 16-17 year old WA school students who consumed alcohol in the past week report that they drink to get drunk.⁵ More than one-third (36.2%) of WA 12 to 17 year old school students who had consumed alcohol in the past week reported drinking at levels considered to place adults 'at risk' of short term harm in 2011.⁶ The proportion of students drinking at risky levels significantly increased between 1993 and 2011.
5. In addition to the concerning range of short term risks associated with excessive alcohol consumption, there is growing evidence that alcohol is implicated in a range of longer term consequences including harm to brain development. The impact of alcohol on the developing brain

¹ Independent market research commissioned by the McCusker Centre for Action on Alcohol and Youth, November 2012. Available from: www.mcaay.org.au.

² Independent market research commissioned by the McCusker Centre for Action on Alcohol and Youth, April 2012. Available from: www.mcaay.org.au.

³ Commissioner for Children and Young People WA. Speaking out about reducing alcohol-related harm on children and young people: The views of Western Australian children and young people. Perth: Commissioner for Children and Young People WA; 2011.

⁴ Chikritzhs T, Catalano P, Stockwell T, Donath S, Ngo H, Young D, et al. Australian alcohol indicators, 1990-2001: Patterns of alcohol use and related harms for Australian states and territories. Perth: National Drug Research Institute and Turning Point Alcohol and Drug Centre Inc; 2003.

⁵ Bridle R, J M, King T, Christou A. Australian School Student Alcohol and Drug Survey: Alcohol Report 2011 – Western Australian results. Drug and Alcohol Office Surveillance Report: Number 8. Perth: Drug and Alcohol Office; 2012.

⁶ Bridle R, J M, King T, Christou A. Australian School Student Alcohol and Drug Survey: Alcohol Report 2011 – Western Australian results. Drug and Alcohol Office Surveillance Report: Number 8. Perth: Drug and Alcohol Office; 2012.

marks a new area of evidence which suggests that heavy alcohol use may impact on a young person reaching their full potential.

6. It is encouraging that the draft HPE Curriculum supports developmentally appropriate education relating to the health context 'Alcohol and drugs' across the years of schooling, starting in the Year 3 to Year 6 band.
7. Alcohol should be addressed in the HPE curriculum in the appropriate level of detail to reflect alcohol's contribution to drug-related harm in Australia and the extent of community concern about alcohol and the related harms. We encourage greater attention to alcohol within the HPE curriculum to provide some confidence that young people will be equipped to manage the alcohol-related risks they will face in a range of contexts.
8. The context for learning referred to as 'Alcohol and drugs' could be usefully amended to read 'Alcohol and other drugs' to reflect that alcohol is a drug, albeit a legal drug that is widely accepted in Australia.
9. Alcohol is an important independent topic within the HPE Curriculum and also has substantial links to the other contexts for learning outlined in the draft HPE Curriculum, including mental health and wellbeing, relationships and sexuality, and safety. The draft HPE Curriculum could more clearly reflect the strong links between the contexts for learning.
10. It is encouraging that the draft HPE Curriculum supports developmentally appropriate education regarding practical strategies for students to help their friends in the event they experience problems with alcohol. We consider this to be an important area of learning as students would indirectly learn how to look after themselves. This area of learning is outlined in the draft curriculum for Year 7 and 8 (section 5.7, page 61) and could be followed through in to Year 9 and 10.

Well-resourced, regular alcohol education in school is a necessary part of the comprehensive approach needed to prevent alcohol-related harm among young people and the wider community. We believe that Health and Physical Education, including a major focus on alcohol and drug education should be included in the first two phases of the curriculum.

We urge that the HPE Curriculum reflect alcohol as a priority issue, on the basis of immediate and longer term harms to young people, harms to others, justified levels of community concern about drinking patterns among young people, and the extent of support for school alcohol education.

Yours sincerely,

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