Following the 2002 Supreme Court ruling allowing schools to randomly drug test students in extra-curricular activities, there has been a strong increase in interest by schools on the subject, as well as active encouragement from the Office of National Drug Control Policy for schools to implement this strategy. In keeping with our role as the leader in the student assistance field, NSAA has adopted the following viewpoint.

Any decision on this subject is best made at the local level, taking into consideration a number of questions. These include:

- Does the school have an existing process for identifying and referring students who may be harmfully involved with alcohol and other drugs, such as a student assistance process?
- Has the school actively sought opinions and concerns from parents, students and community members prior to implementation?
- What will happen to students who test positive for substances? How will participation in extra-curricular activities be affected?
- Where and how long will records be kept on test results?
- Who will do the actual collection of bodily fluids?
- What technology will the school utilize, such as urine testing, oral swab, or hair follicle?

After answering these questions, if a school decides to pursue setting up a random student drug testing program, NSAA strongly believes the following should be considered:

- Drug testing should be just one part of a comprehensive strategy for helping students make healthy decision and maintain safe lifestyles.
- The testing pool should include more than student-athletes; it should include students in extra-curricular activities, driver’s education, as well as students who possess a valid parking permit at school.
- All eligible students and their parents should express written consent authorizing the school to include the students in the random testing pool. It is a local decision when during the calendar year to start the testing, and how long a student should remain in the testing pool.
- School-based or community education on the harmful consequences of substance use should be available to students who test positive.
- Community-based assessments should be available for students who test positive.
- The substances tested for should be based on what local stakeholders indicate students are using.
- Student’s confidentiality should be paramount, ensuring the results of the test are shared only with the student, parents, campus administrator and authorized (signed confidentiality statement) school personnel.
- Positive test outcomes should result in non-punitive consequences as indicated by the Supreme Court.
- Self-disclosure by a student should result in a non-punitive approach as well.
- Positive drug tests should always be verified through a more sophisticated test and reviewed by a Medical Review Officer.
- Testing should be truly random, capturing a valid percentage of the testing pool, except for subsequent drug tests for students who submit a positive test.
- Random drug testing programs should be evaluated and the outcome tracked to ensure effectiveness.
NSAA recognizes there is evidence random student drug testing is effective in reducing alcohol and other drug use within a student body. In addition, NSAA recognizes there is contradictory evidence showing random drug testing does not result in measurable reduction in substance use. This inconsistency we believe is explained by the observation that schools must have a process in place designed to help identified students receive help, such as a student assistance process. When these types of efforts to assist students are negated, random drug testing appears to fall short of expectations. When in place, such as a structured referral process, drug testing may be a valuable tool. Many schools have successfully implemented a random student drug testing program for years and NSAA encourages schools considering implementation to learn from existing efforts whenever possible.

Summary
NSAA affirms the importance of helping our students remain or become alcohol and drug free, and advocates weighing all strategies carefully before implementation. We believe that before any decision is made on random student drug testing, the pros and cons should be candidly examined and the guidelines in this paper considered. For further information on random drug testing, contact the National Student Assistance Association at (800) 257-6310, or via email at info@nsaa.us.

<table>
<thead>
<tr>
<th>TYPES of TESTS</th>
<th>PROS</th>
<th>CONS</th>
<th>WINDOW OF DETECTION</th>
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</table>
| **URINE**      | · Highest assurance of reliable results.  
· Least expensive.  
· Most flexibility in testing different drugs, including alcohol and nicotine.  
· Most likely of all drug-testing methods to withstand legal challenge.  
· Specimen can be adulterated, substituted, or diluted  
· Limited window of detection.  
· Test sometimes viewed as invasive or embarrassing.  
· Biological hazard for specimen handling and shipping to lab. Cocaine and methamphetamine are eliminated fairly quickly (48 hours).  | · Cocaine and methamphetamine are eliminated fairly quickly (48 hours)  
· Opiates are out in about 3-5 days  
· Marijuana can last from 1 week to 8 weeks depending on level of use and body fat  
· Alcohol out in about 72 hours |
| **HAIR**       | · Longer window of detection.  
· Greater stability (does not deteriorate).  
· Can measure chronic drug use.  
· Convenient shipping and storage (no need to refrigerate).  
· Collection procedure not considered invasive or embarrassing.  
· More difficult to adulterate than urine.  
· Detects alcohol/cocaine combination use.  
· More expensive.  
· Test usually limited to basic 5-drug panel.  
· Cannot detect alcohol use.  
· Will not detect very recent drug use (1 to 7 days prior to test).  | · Depends on the length of hair in the sample. Hair grows about a half-inch per month, so a 1½-inch specimen would show a 3-month history. |
| **ORAL FLUIDS**| · Sample obtained under direct observation.  
· Minimal risk of tampering.  
· Non-invasive.  
· Samples can be collected easily in virtually any environment.  
· Can detect alcohol use.  
· Reflects recent drug use.  
· Drugs and drug metabolites do not remain in oral fluids as long as they do in urine.  
· Less efficient than other testing methods in detecting marijuana use.  | · Approximately 10 to 24 hours.  
· Marijuana may only last up to 2 or 3 days in oral fluids |
| **SWEAT PATCH**| · Non-invasive.  
· Variable removal date (generally 1 to 7 days).  
· Quick application and removal.  
· Longer window of detection than urine.  
· No sample substitution possible.  
· Limited number of labs able to process results.  
· People with skin eruptions, excessive hair, or cuts and abrasions cannot wear the patch.  
· Passive exposure to drugs may contaminate patch and affect results.  
· Patch retains evidence of drug use for at least 7 days, and can detect even low levels of drugs 2 to 5 hours after last use. |

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