Anchoring Change

A national initiative to transform school-based substance use prevention, education, and intervention in Canada

Standard Alignment Brief

Alignment with the Blueprint for Action

How the Pan-Canadian Standard for School-Based Substance Use Prevention, Education, and Intervention Aligns with and Complements the Blueprint for Action

At-a-Glance

The new pan-Canadian standard *School-Based Substance Use Prevention, Education, and Intervention: A Multi-Tiered* and Developmental Approach for Kindergarten to Grade 12 Schools in Canada (the Standard) and the *Blueprint for Action* share the same vision: preventing substance-related harms among youth through comprehensive, evidence-informed, equity-oriented school-based approaches. They are complementary resources designed to work together.

The **Blueprint for Action** (2021) established a conceptual foundation and call to action, introducing a model that integrates the Comprehensive School Health framework with upstream prevention, harm reduction, stigma reduction, and equity-oriented approaches.

The **Standard** (2026) translates that vision into a structured, actionable framework—organized by developmental stage, tier of support, and responsible role—that schools can adopt, adapt, and continuously improve over time. It provides the implementation architecture the Blueprint envisioned.

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Anchoring Change is a national initiative designed to transform how schools across Canada address substance use through coordinated, evidence-informed prevention, education, and intervention. Its approach is grounded in developmental and prevention science, student well-being, and the practical realities of education systems.

The initiative is led through a collaborative partnership between Wellstream: The Canadian Centre for Innovation in Child and Youth Mental Health and Substance Use at the University of British Columbia, the Canadian Centre on Substance Use and Addiction (CCSA), the Canadian Association of School System Administrators (CASSA), Physical and Health Education (PHE) Canada, and the Students Commission of Canada.

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Purpose of This Document

This brief is designed for education leaders, school health professionals, policy makers, and other interest holders who are familiar with the Blueprint for Action and want to understand how the new Standard relates to it. Specifically, this document:

- **Maps the shared foundations** and values between the two resources
- **Highlights the distinct contributions** the Standard makes to the landscape
- **Illustrates how** the Blueprint, its associated Physical and Health Education (PHE) Canada resources, and the Standard can be used together
- **Supports adoption conversations** by positioning the Standard within Canada's existing school health ecosystem

About the Two Resources

The Blueprint for Action (2021)

Published by the Public Health Agency of Canada, the *Blueprint for Action: Preventing Substance-Related Harms Among Youth Through a Comprehensive School Health Approach* emerged from a national forum of over 50 school interest holders. It presents a conceptual model that combines the Comprehensive School Health framework with four evidence-based intervention approaches (upstream prevention, harm reduction, stigma reduction, and equity-oriented approaches) and outlines Principles for Action to guide implementation. PHE Canada subsequently developed a suite of supporting resources, including e-learnings, workshops, and policy guides, to help educators and schools engage with the Blueprint for Action model.

The Pan-Canadian Standard (2026)

Developed through a partnership between Wellstream: The Canadian Centre for Innovation in Child and Youth Mental Health and Substance Use at the University of British Columbia, the Canadian Centre on Substance Use and Addiction (CCSA), the Canadian Association of School System Administrators (CASSA), PHE Canada, and the Students Commission of Canada, under the management of CSA Group, the Standard provides a structured set of clauses organized across three developmental stages (K-Grade 5, Grades 6-9, Grades 10-12), three tiers of support (universal, targeted, intensive), and integrated within a Health Promoting Schools – also known as Comprehensive School Health - framework. Each clause assigns responsibility to school policy makers, administrators, or staff and uses normative language ("shall," "should," "may") to distinguish the potential for impact of the various recommendations.

Shared Foundations

The Standard and the Blueprint are rooted in the same evidence base and philosophical commitments. Table 1 maps the core principles and approaches they share.

Table 1. Shared Foundations

Shared Foundation	In the Blueprint for Action	In the Standard
Comprehensive School Health / Health Promoting Schools	Core organizing framework; four components (teaching & learning, social & physical environment, policy, partnerships & services) structure all intervention planning	Guiding framework; four components (teaching & learning, environments & relationships, policy, partnerships & services) linked to clauses at every tier and stage
Upstream prevention and protective factors	One of four intervention approaches; Key message: "the best prevention measures often have nothing to do with substance use at all"; emphasizes school connectedness, relationships, extracurriculars, mental health promotion	Operationalized through Tier 1 clauses at every developmental stage; emphasizes belonging-based prevention, coached or mentored physical activity, nurturing interests, social and emotional learning
Harm reduction / Harm minimization	One of four intervention approaches; defined as pragmatic, non-punitive, meeting youth "where they are at"; examples include lower-risk use guidelines, Good Samaritan policies	Embedded as a guiding principle; operationalized through non-exclusionary incident responses (Tier 2), safety planning, developmentally appropriate substance poisoning awareness, and an explicit harm-minimization orientation across all tiers
Stigma reduction	One of four intervention approaches; addresses systemic, public, and self-stigma; calls for person-first language, safe zones, and curricula countering misconceptions	Woven throughout via destigmatization in Tier 1 education, non-punitive Tier 2/3 responses, strengths-based policies, and the guiding principle to preserve dignity and normalize help-seeking

Table 1. Shared Foundations		
Shared Foundation	In the Blueprint for Action	In the Standard
Equity-oriented approaches	One of four intervention approaches; highlights cultural safety, trauma- and violence-informed practice, and addressing disproportionate harms for Indigenous, LGBTQ2S+, and other priority populations	Embedded as a guiding principle (EDID); integrated into clause language (e.g., culturally responsive screening, engaging Elders/cultural supports, UDL, decolonization); applied across all tiers and developmental stages
Youth / student voice and engagement	Emphasized in Principles for Action; youth described as "vital players" and "experts"; calls for meaningful engagement in program design	Embedded as a guiding principle; operationalized through student partnership, youth leadership in health, and co-design clauses (Tiers 1–2 in Grades 6–12)
Evidence-informed practice	One of five Principles for Action; calls for moving away from "the status quo" and evaluating initiatives on an ongoing basis	Foundational to all clauses; defined in terminology ("informed" rather than "based" to value practitioner judgment and community context); clause-level evidence base documented
Avoidance of abstinence-only and punitive approaches	Key message 4: "Many traditional approaches… have limited effectiveness and can produce unintended negative consequences"; critiques zero-tolerance policies	Codified as specific clauses: "School staff shall avoid abstinence-only prevention approaches"; strengths-based policies "shall minimize exclusionary practices (e.g., suspensions, expulsions)"

What the Standard Adds

> While the Blueprint established the conceptual model and call to action, the Standard addresses the implementation gap that school leaders have consistently identified. Canadian research (Jenkins et al., 2024) and educator calls to action (BCSTA, 2023) highlight that educators report feeling ill-equipped and under-resourced to address student substance use, and that policies and practices vary widely across jurisdictions. The Standard responds to these challenges with the following distinct contributions outlined in Table 2.

Table 2. What the Standard Adds	
Feature	**What This Means for Schools**
Full K–12 developmental scaffolding	Three developmental stages (K–Grade 5, Grades 6–9, Grades 10–12) with age-appropriate clauses; the Blueprint for Action focused primarily on secondary school contexts.
Multi-tiered system of supports (MTSS)	A three-tier structure (universal, targeted, intensive) that provides clear guidance for students across the full spectrum of need, from schoolwide prevention through to individualized intervention and referral to care.
National standard developed through rigorous CSA Group process	Developed through a CSA Group consensus process that provided a mechanism for engaging interest holders from across Canada in content development, and for enhanced engagement with others, including through public review in French and English.
Specific, actionable clauses with assigned responsibilities	Each clause specifies who is responsible (school policy makers, administrators, or staff) and uses “shall,” “should,” or “may” to distinguish the potential for impact of each recommendation.
Implementation continuum	A developing-building-sustaining model recognizing diverse starting points and supporting gradual, context-dependent progress rather than immediate compliance
School belonging as a central mechanism	Belonging-based prevention is a named clause at every developmental stage, grounded in the research base identifying school belonging as one of the strongest protective factors for substance use health across life stages
Student voice as a guiding principle	Moves beyond engagement as an activity to position student voice as a principle shaping how all clauses are interpreted and applied, with specific clauses for student partnership and youth leadership in health
Screening and early identification protocols	Specific clauses for universal screening (Tier 1) and targeted screening (Tier 2) with requirements for cultural responsiveness, informed consent, and follow-up resources

Using Them Together

The Blueprint for Action, accompanying PHE Canada resources, and the Standard form a coherent ecosystem for school-based substance use prevention in Canada. Rather than replacing earlier work, the Standard builds on and operationalizes the vision that the Blueprint established.

Here is how school communities might use all three:

Build Understanding

The Blueprint for Action remains an excellent entry point for school communities beginning to rethink their approach to substance use. Its narrative format, real-world examples, and accessible language make it an effective tool for building buy-in among staff, families, and community partners. PHE Canada's e-learnings and workshops provide structured professional learning to deepen that understanding.

Assess and Plan

The Blueprint's 4×4 planning matrix (intervention approaches × CSH components) remains a useful tool for assessing current activities and identifying gaps. The Standard then provides the developmental and tiered architecture to organize these activities into a coherent, scaffolded system, helping schools move from brainstorming to structured action.

Implement Systematically

The Standard's clause-level specificity, including designated responsibilities, normative language, and a developing-building-sustaining implementation continuum, provides the operational guidance school systems need to move from vision to practice. The Standard is designed to meet schools where they are, recognizing that many schools will find existing practices already align with elements of the framework.

Sustain and Improve

The Standard's partnered governance structure and implementation monitoring and evaluation tools ensure that the framework will evolve with emerging evidence and changing substance use landscapes. The Blueprint's Principles for Action, including health equity, compassionate approaches, multi-sectoral partnerships, and evidence-informed practice, remain essential touchstones for evaluating whether implementation is living up to its intent.

A Shared Trajectory

The Blueprint for Action called for Canadian school communities to think differently about how they approach youth substance use. The Standard answers that call with a structured, consensus-built, national framework for transforming that recognition into consistent, compassionate, and effective practice. Together with the Blueprint and PHE Canada's related resources, the Standard equips school systems to move from aspiration to action, supporting healthier outcomes for all students.

References

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Learn More:

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