

Framework for Communities to Prevent Youth Cannabis Use

Report Summary: The resource aims to equip Drug-Free Communities (DFC) coalitions with evidence-informed strategies and resources to address the unique challenges posed by youth cannabis use.

DFC coalitions play a critical role in community-based substance abuse prevention efforts. By aligning with the DFC prevention strategies, the resources outlined here provide a roadmap for coalitions to enhance their effectiveness in reducing cannabis use among youth.

How DFC Coalitions Can Use This Resource: The resources and strategies to prevent early initiation of cannabis use listed in this document align with CADCA's Seven Strategies for Community Change that DFC collations use in their work. Coalitions can use this document to access resources, toolkits, and example campaigns to support their existing and future work in preventing youth cannabis use.

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Introduction

While cannabis use has decreased among youth, data shows there are still a concerning number of youth who use cannabis, highlighting a need for continued prevention strategies. Nationally representative data from youth in grades 9-12 indicate substantial decreases in the percentage of youth who report currently using marijuana from 23% in 2011 to 16% in 2021. Data from the 2023 Monitoring the Future survey shows youth cannabis use has stayed stable at these lower rates. While these trends are encouraging, there is a continued need for implementing comprehensive youth substance use prevention strategies in an ever-changing policy landscape. Use of cannabis at an early age can impact the developing brain and result in poor school performance, increased school dropout rates, impaired driving, and risk for later depression and psychotic disorders.

Over the last two decades, there have been significant changes in laws, rules, and regulations regarding cannabis. These changes have increased the availability and accessibility of cannabis in states and communities and led to increased accessibility in a wide range of products (e.g. edibles, oils, gummies) that can be potent which may increase potential for harm, particularly for high risk populations like young people. In many states, other intoxicating hemp-derived products, such as Delta-8 and Delta-10 THC (tetrahydrocannabinol), are widely available, unregulated, and can harm young people. This is also true in states where nonmedical adult cannabis use is legal.

In 2023, 11.4% of high school seniors reported using Delta-8 THC in the past year. Delta-8 and delta-10 THC are just two examples of intoxicating products widely available in many states with no federal legal age limit to access the products. Use of any type of cannabis at an early age can harm the developing brain.

Drug Free Communities (DFC) coalitions implement seven comprehensive strategies that can be tailored by each community to prevent youth substance use. Prevention efforts increase knowledge about the potential risks of cannabis use and other products, identify and address root causes that are driving youth substance use, and implement community-wide strategies that can limit the availability and accessibility of cannabis among youth.⁴ The following sections outline how these strategies apply to preventing early initiation of cannabis use and other intoxicating hemp-derived products. The strategies, which can be new or built upon existing ones, may depend on each other to be successful.

It is important to review the evidence behind each activity to be sure that planned interventions:

- Avoid techniques previously found to be ineffective with youth.
- Address the specific needs of particular communities and populations. Coalitions can focus on the <u>risk and protective factors</u> related to cannabis use among youth.

PROVIDE INFORMATION

Create or tailor existing social marketing and public education campaigns. Think about different messages based on the audience (youth or adults). Testing message efficacy and reach are critical when disseminating public health information.

Actions to Consider:

- Identify data from the DFC Core Measures about youth cannabis use in your community and related risk and protective factors that may be helpful to share with youth and trusted adults.
- Focus on facts, not scare tactics when messaging to youth. Young people respond better when
 messages connect with their goals rather than focusing on scaring them away from substances.⁵
- Promote positive social norms when messaging to young people in your community. Most young people do not use substances.⁶
- Parents, educators, and other trusted adults need factual information about cannabis products and the potential health impacts. Educate parents and other trusted adults on the negative health effects and educational consequences of cannabis use, the types of products available in your community (hemp-derived vs cannabis), and risk and protective factors that prevent use.
- Use existing materials that can be modified for your community. Test the effectiveness of these messages with your intended audience.

Resources:

Social norms change campaigns to prevent youth use and increase adult awareness.

- <u>ADAPT: Mind the Message Campaign</u> Emphasizes the positive, true norms that most youth make healthy choices.
- National Council for Mental Well-Being's <u>Getting Candid</u> Empowers providers with not only what to say in youth substance use prevention conversations, but how to say it.
- <u>Protect What's Next</u> (CO, 2015-2018) A website targeted to youth that explains the risks of marijuana use, with the tagline "Don't let marijuana get in the way of what's next."
- Responsibility Grows Here (CO, 2018-2020) A website targeted to youth that explains the risks of marijuana use, emphasizing how it can get in the way of a young person's future.
- Not a Moment Wasted (WA, 2019-current) A website targeted to youth that explains the risks of marijuana use, highlighting the health risks.
- <u>Start Talking Now</u> (WA, 2017-current) A website for parents on how to best talk to their children about alcohol and marijuana use.

Cannabis information guides for trusted adults:

- Resource Directory | Cannabis Awareness and Prevention Toolkit | Stanford Medicine
- Colorado's Rocky Mountain Public Health Training Center created a <u>series of free webinars</u> that demonstrate how to respond to questions from youth about cannabis.

- Let's Talk Cannabis Illinois | Talk Tips and Family Safety (prevention.org)
- Getting Candid: Youth Prevention Messaging Guide; <u>Implementation Tools National Council for Mental Wellbeing</u>
- "Talk. They Hear You" Campaign; Underage Drinking Campaign | SAMHSA
- Safe Storage Fact Sheet.

Equity Considerations:

Make sure all messages are <u>culturally</u> responsive and relevant to the intended audience. Social marketing campaigns should follow <u>best practices</u> which include specific norms change objectives, audience testing, and <u>cultural/linguistic appropriateness</u>.

ENHANCING SKILLS

Young people and trusted adults benefit from evidence-based information to learn decision-making and interpersonal skills that can help prevent youth substance use.

Actions to Consider:

- Access evidence-based programs for youth and adults and find out what will work in your community.
- Implement evidence-based parent education programs to increase their skills to address the risk and protective factors of substance use in adolescent lives: skills like setting limits, having open conversations, discussing risks, and exploring youth goals and interests.
- Support school and after-school programs to implement evidence-based health education programs and monitor participation and progress toward outcomes.
- Work with your schools to align their curriculum with the National Health Education Standards.
 District and school staff can use <u>CDCs Health Education Curriculum Analysis Tool</u> to analyze,
 select, or develop curriculum based on meeting adolescent health needs and community
 priorities.

Resources:

Evidence-based Parent-education Programs:

- <u>Strengthening Families for Parents and Youth 10-14</u> A family skills training program designed to help parents increase their youth's protective factors, such as pro-social peer relationships, and reduce their youth's risk factors for substance use and academic problems.
- <u>Familias Unidas -</u> A family-centered intervention that aims to prevent substance use and risky sexual behavior among Hispanic adolescents.
- <u>Guiding Good Choices</u> In five or six sessions, parents and caregivers learn specific actions that promote healthy development and reduce risky behavior in the teen years.

 <u>Positive Family Support/Family Check-Up</u> - Aims to improve parenting skills and family management practices, with the goals of improving a range of emotional, behavioral, and academic child outcomes.

Evidence-based Youth/School-Based Programs:

- Health Education Curriculum Analysis Tool (HECAT) CDC created this assessment tool to help school districts, schools, and others conduct a clear, complete, and consistent analysis of health education curricula based on the National Health Education Standards and CDC's Characteristics of an Effective Health Education Curriculum. The HECAT process can assist schools in identifying the appropriate curriculum, including selecting from those similar to the examples below.
- <u>LifeSkills Training</u> 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.
- <u>Positive Action</u> Aims to improve social and emotional learning and school climate. It consists of
 a detailed curriculum of approximately 140 short lessons throughout the school year in
 kindergarten through 6th grade and 82 lessons in 7th and 8th grade.
- <u>Good Behavior Game</u> An approach to the management of classroom behaviors that rewards children for displaying appropriate on-task behaviors during instructional times.
- <u>Caring School Community (formerly Child Development Project)</u> Promotes positive behavior through direct teaching of responsibility, empathy, and cooperation, creating settings where students feel heard, known, and cared for.
- <u>All Stars</u> Beginning in the upper grades of elementary school and continuing through high school, All Stars provides consistent and integrated tools for prevention.

Equity Considerations:

Make sure all youth and parent education resources are responsive and relevant to the intended audience. Offer live interpretation of workshops in relevant languages for local parents/guardians or provide instructions for foreign language subtitles and translation of web-based resources.

PROVIDE SUPPORT

DFC coalitions can work with community partners to prevent youth from starting to use cannabis and increase access to services in schools, after school programs, and other places youth frequent.

Actions to Consider:

- Conduct an environmental scan to identify populations or locations throughout the community where youth do not have access to caring adults and activities.
- Collaborate with schools, rec centers, libraries, or nonprofits in those locations or who serve those youth to identify ways that the DFC Coalition can support expanded access to, funding for,

- and reducing barriers to programs identified as effective to increase connections to caring adults and activities.
- Collaborate with a local youth coalition in planning and implementing alternative drug and alcohol-free events for teens.
- Connect youth to caring adults and activities: Work with community organizations and schools to
 provide an alternative activity to using cannabis products, including after-school programming,
 sports, mentorship programs, and public transportation so that youth can affordably access
 libraries, recreation centers, and employment.

Resources:

Adverse Childhood Experiences Prevention Resource for Action (cdc.gov)

Equity Considerations:

Make sure your environmental scan includes the structural barriers to access experienced by marginalized communities and their access to providers that are culturally and linguistically appropriate for their needs. Make sure access to supports are not concentrated for only certain types of youth but are available to youth that may need supports most.

MODIFYING/CHANGING POLICIES AND LAWS, CHANGE CONSEQUENCES, & CHANGE PHYSICAL DESIGN

Youth are accessing cannabis products in many states, regardless of whether the state has legalized adult use. ⁷Cannabis policies at the national, state, and local level each affect how youth can gain access to—and the potential consequences for—using cannabis. Please note that evidence on the impact of these policy strategies to prevent youth marijuana use is limited. The policies highlighted below are based on evidence from alcohol and tobacco studies showing that reducing access and availability can effectively reduce youth substance use. ⁸

Actions to Consider:

- Review state and local regulations around cannabis sales and conduct an environmental scan to see where cannabis products, including Delta 8 products, are available or sold within the community.
- Learn more about whether hemp-derived psychoactive products like Delta 8 or 10 THCⁱ are <u>legal</u>, <u>banned</u>, <u>or regulated in your state</u>, and work with your community partners to influence change.
 It is important to monitor new products beyond Delta 8 or 10 THC as they emerge on the market.

¹ While Delta 8 and Delta 10 are currently common THC products, there is a continuously evolving market of intoxicating hemp derived products that it is important to stay up to date on in terms of accessibility to youth.

- Train youth to educate store owners on the availability and advertising of hemp-derived products in their stores and the impact on youth.
- Create a reward program to acknowledge businesses that willingly participate in reducing availability or advertising of cannabis products to underage youth in the community.
- Educate the community and decision makers about youth sensitivity to price increases on substances and the potential effective prevention programs that could be supported by tax increases, if decision makers are considering such policies.

All DFC Coalitions can consider:

Limiting the availability and accessibility of Delta 8 products. If Delta 8 products can legally be sold in your area, a DFC Coalition may want to educate policymakers about how the following strategies may prevent youth use:

- implementing age restrictions on purchasing,
- restricting youth access to locations where these products are sold, and
- limiting advertising of these products to youth.

Jurisdictions that have legalized (or may soon legalize) adult use can consider the following policy strategies:

Adapted from Preventing Marijuana Use Among Youth (2021) - SAMHSA

Strategy	Characteristics	Considerations
Regulation of the price of marijuana	ne price of THC content, or price).	Ideally, tax revenue at the state or local level can fund effective prevention strategies that also reduce substance use treatment costs in the future. Tax revenue can increase: -the number of school mental health professionals
		-effective health and life skills education in schools
		-Funding for mentor and after-school programs
		-social norms change campaigns focused on youth prevention
		-capacity for more local/regional data reporting about adult or youth cannabis use and access, including the Behavioral Risk Factor Surveillance System and the Youth Risk Behavior Survey

Strategy	Characteristics	Considerations
(continued)	(continued)	(continued)
Regulation of marijuana retail outlets	-Limiting number and locations of retailers through licensing or zoningLimiting hours/days of saleBanning those under the age of 21 in retail storesRegulating where marijuana and related products can be sold.	Cannabis license regulations are often crafted at the state level, but with local license authority. DFC Coalitions may be able to advise their local governments on these requirements for license by asking: -Can cannabis businesses operate locally? How many licenses can be issued? -What types of cannabis businesses are permitted (e.g., grow, edibles or oil production, retail sales, delivery services, social use clubs)? -Will you designate allowable locations far from schools and parks for sale? -Will you prohibit public using cannabis near schools and parks?
Limitations on marijuana advertising and marketing	-Banning or limiting marijuana advertising on radio and billboards -Banning or limiting marijuana advertising visible to youth	Advertising restrictions are often set at the state level, but local DFC coalitions may be involved in educating state policy makers to consider restrictions that protect children and youth.
Regulation of marijuana product manufacturing and packaging	-Banning marijuana products with added synthetic flavors and odorsBanning THC-infused edibles likely to attract children and youth, such as candies, cookies, and beveragesBanning THC-infused alcohol and tobacco productsRequiring plain product packaging and/or transparency on product labels, including THC and CBD content and ingredientsRequire prominent graphic marijuana warning labels with varied and rotating messaging.	In jurisdictions where cannabis is legalized, regulators and public health agencies work together to prevent unsafe products from being sold by ensuring cannabis is tested thoroughly in laboratories, packaging clearly communicates the amount of THC, and that unsafe products can be removed through a product recall system. Product safety restrictions are often set at the state level, but local DFC coalitions may be involved in educating state policy makers to consider restrictions that protect children and youth.

Resources:

- <u>Getting it Right from the Start</u> A group that provides technical assistance to jurisdictions that are currently regulating cannabis, considering legalizing or decriminalizing cannabis, and to community partners.
- <u>Public Health Law Center</u> Provides information on legalization and regulation of marijuana.

- National Conference of State Legislators <u>Cannabis laws by state</u>.
- Network for Public Health Law <u>Cannabis Legalization and Regulation</u>.
- How Four States Incorporated Public Health into Cannabis Policy.
- Delta 8 laws by state: Where delta-8 THC is legal in the United States.

Equity Considerations:

Zoning discussions should consider whether cannabis licenses are inequitably concentrated in low socioeconomic areas and in communities of color.

For any policy recommendations, it is important to consider how past drug enforcement policies have driven inequities by race in outcomes, including incarceration. Work with your community to identify how future policies and funding decisions could help address or further exacerbate those inequities.⁹

CHANGE CONSEQUENCES, ENHANCE ACCESS/REDUCE BARRIERS, & SCREENING AND REFERRAL TO TREATMENT

DFC Coalitions can work with their required sectors to address strategies that will impact all young people in the community. This can include activities with schools, parents, healthcare, and other community-based organizations to prevent youth cannabis use and harms.

Actions to Consider:

- Review existing school policies around consequences for youth substance use, including a
 graduated consequence approach like those outlined in multi-tiered systems of supports,
 alternatives to suspension, and/or diversion.
- Create and present a proposal to support changing school or district policies and funding to
 provide evidence-based intervention and treatment options for students found using or in
 possession of cannabis products at a school or board meeting. This can serve as an alternative to
 zero tolerance policies, where appropriate.¹²
- Create webinar trainings for parents around safe storage of cannabis products, including examples of effective use of lock boxes¹³ and where to find them in the community.
- Identify community-based mental health, counseling, and crisis services that can serve youth who are using cannabis.
- Engage youth in creating posters and messaging that encourage use of and access to school- and community-based mental health, counseling, and crisis services. Encourage youth to test their

messaging with other teens and adjust their materials to reflect the messages that resonate most with their peers.

Resources:

- <u>Zero tolerance policies</u> A report by the American Psychological Association (APA) reflecting the lack of evidence for zero tolerance policies.
- Multiple Responses, Promising Results: Evidence-Based, Nonpunitive Alternatives to Zero Tolerance (childtrends.org)
- <u>Evidence-based</u> treatment options for youth who use cannabis daily or frequently.
- <u>Teen Marijuana Check-Up</u> A program designed to attract voluntary participation from nontreatment seeking teenagers who are using marijuana at higher levels and are at risk of developing substance use disorders.
- <u>Adolescent Assertive Continuing Care</u> Stresses rapid initiation of services after discharge from residential, intensive outpatient, or regular outpatient treatment in order to promote recovery and prevent relapse.
- <u>Functional Family Therapy for adolescents with substance use disorder</u> Strength-focused family counseling model designed primarily for at-risk youth who have been referred by the juvenile justice, mental health, school, or child welfare systems.
- <u>Multidimensional Family Therapy</u> Helps youth and their family communicate effectively, function better day-to-day, and grow closer and stronger.

Equity Considerations:

Collaborate with partners to implement strategies from <u>SAMHSA's Community Engagement: An Essential Component of an Effective and Equitable Substance Use Prevention System</u> that engages with different populations in the community and elevates voices of those populations most impacted by substance use.

DATA THAT CAN INFORM YOUR PREVENTION STRATEGIES

DFC Coalitions may need more nuanced information than outcome metrics provide to inform the prevention strategies they select. Local data about protective factors against substance use in communities and opportunities to enhance and expand access to those factors for all youth can help coalitions identify the most appropriate prevention/intervention opportunities.

Some common protective factors for youth substance use include 14:15

- Interpersonal skills that help youth achieve social and personal goals
- Capacity to adapt to change and handle stressful life events in healthy ways
- Developmentally appropriate opportunities to be involved with their family, school, and community
- Community, family, and peer attitudes and norms that discourage substance use

- Living in a community with low exposure and access to substances
- Experiencing economic stability through opportunities in their communities

To gather this more nuanced information, DFC Coalitions can:

- Conduct focus groups with parents or youth to explore the prevalence of these factors in your community.
- Look for additional local data sources (e.g., local public health community needs assessment, school district parent survey) to explore these factors.

NOTE:

If your coalition needs support accessing outcome metric data, CDC DFC project officers may be able to advise on how other coalitions are accessing data to report on cannabis related metrics in communities like yours across the country.

Coalitions can use this data to prioritize intervention points that the coalition is most equipped to address.

Coalitions should <u>communicate</u> findings with the community to increase trust and investment in prevention efforts.

Equity Considerations:

Examine whether access to protective factors or exposure to risk factors varies in your community by race or ethnicity, sexual orientation and gender identity, or neighborhood socioeconomic status.

Statistics You Can Use

- Youth cannabis use has declined from 23% in 2011 to 16% in 2021 (YRBS).
- Young people perceive that the risk of cannabis is low. Among 8th and 10th grade students in the U.S., the proportion who view experimental use of marijuana as risky was near the lowest level recorded at 21% and 17%, respectively (Monitoring the Future)
- Cannabis is a potentially addictive drug. Recent reports have shown that 3 in 10 people who use cannabis were found to have a cannabis use disorder. They are unable to stop using cannabis even though it is causing health and/or social problems in their lives (CDC).
- The human brain develops until about the age of 25. Cannabis use directly affects brain function—specifically the parts of the brain responsible for memory, learning, attention, decision making, coordination, emotions, and reaction time (CDC).
- Long-term or frequent cannabis use has been linked to increased risk of psychosis or schizophrenia in some users (CDC).
- As teens are learning to drive and gain independence, driving after cannabis use increases their risk
 of a crash and injury to themselves and other passengers or pedestrians. Driving, biking, or using
 high speed scooters under the influence of cannabis products can cause injury by increasing risk of
 crashes. (Epidemiol Rev. 2012)

- Delta 8, Delta 10, and other hemp-derived CBD products are widely available (e.g., at gas stations, convenience stores, or smoke shops). They are not evaluated by the FDA and can be intoxicating. In 2023, 11% of 12th-grade students in the U.S. reported using Delta 8 THC in the past year. Delta 8 THC use was higher in the South and Midwest U.S. and in states without adult-use marijuana legalization or Delta 8 THC regulations (JAMA, 2024).
- Cannabis products should be locked, out of sight and out of reach of children. Parents and
 caregivers are also encouraged to help their children recognize cannabis product packaging. Edibles
 or food and drink products infused with cannabis include a greater risk of poisoning. Cannabisinvolved ED visits among young persons increased from 2019-2022 especially among children
 aged ≤10 years and 11–14 years (MMWR)
- Overall tax revenue from cannabis does not drastically grow state revenue. Across multiple states
 that legalized and taxed cannabis sales, cannabis tax revenue ranged from 0.3% to 1.7% of their
 total state budgets, indicating cannabis is not an efficient solution for many states' ongoing budget
 challenges (<u>Tax Policy Center</u>).

There are researched beneficial effects of medicinal cannabis use, such as preventing nausea in chemotherapy patients, preventing seizures, and alleviating PTSD symptoms. ¹⁶ Prevention programs should be careful not to stigmatize all use. Medical cannabis use, under the close care of a physician, may be appropriate for some people and for treating or alleviating specific health conditions.

The Colorado Department of Public Health and Environment (CDPHE) conducts a <u>systematic review of cannabis research</u> and reports on the <u>strength of evidence behind cannabis and different health effects</u>. <u>The research gaps</u> described by this systematic review highlight the amount of work that needs to be done to further examine the health effects of cannabis on youth and other populations. The National Academies of Sciences Engineering and Medicine (NASEM) also created a report in 2017 that summarized the evidence around cannabis and health effects. ¹⁷ Both the CDPHE literature review and the NASEM report are trusted sources for accurate representations of evidence on cannabis and health effects.

Additional Resources

- SAMHSA's Preventing Marijuana Use Among Youth Issue Brief.
- SAMHSA's Center for the Application of Prevention Technologies <u>Using Fear Messages and Scare Tactics in Substance Abuse Prevention Efforts.</u>
- <u>Blueprints for Healthy Youth Development Registry of Evidence Based Programs</u> (searchable by cannabis outcomes)
- The Surgeon General's Report on <u>Facing Addiction in America</u>
- CADCA's <u>Practical Theorist: Cannabis, the Current State of Affairs</u>
- About Cannabis | Cannabis and Public Health | CDC

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³ Cannabis and teens. Centers for Disease Control and Prevention. February 15, 2024. Accessed June 27, 2024. https://www.cdc.gov/cannabis/health-effects/cannabis-and-teens.html.

⁴ Substance Abuse and Mental Health Services Administration (SAMHSA). Preventing Marijuana Use Among Youth. SAMHSA Publication No. PEP21-06-01-001. Rockville, MD: National Mental Health and Substance Use Policy Laboratory. Substance Abuse and Mental Health Services Administration, 2021.

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¹¹ Magier M, Patte KA, Battista K, Cole AG, Leatherdale ST. Are School Substance Use Policy violation disciplinary consequences associated with student engagement in cannabis? *International Journal of Environmental Research and Public Health*. 2020;17(15):5549. doi:10.3390/ijerph17155549

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¹³ 1. Cannabis safeguards. Cannabis Safeguards. February 28, 2023. Accessed June 27, 2024. https://www.cdph.ca.gov/Programs/CCDPHP/sapb/cannabis/Pages/Cannabis-Safety-Measures.aspx.

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