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Cannabis Legalization and Youth: Developing Clear Messages in an Evolving Policy Climate Boulder, CO Nov 15-16, 2018

Six Lessons Learned From Cannabis Legalization in Washington State....one researchers perspective



Dr. Haggerty is the director of the UW Center for CTC and does receive payments for training and consultation services



Six Lessons from Washington State

- 1. The sky hasn't fallen....
- 2. Parent's make a difference
- 3. Public Health Messaging is critical
- 4. Defining Evidence Based Programs is difficult and essential
- 5. Communities bring it all together
- 6. There is a lot we still don't know.



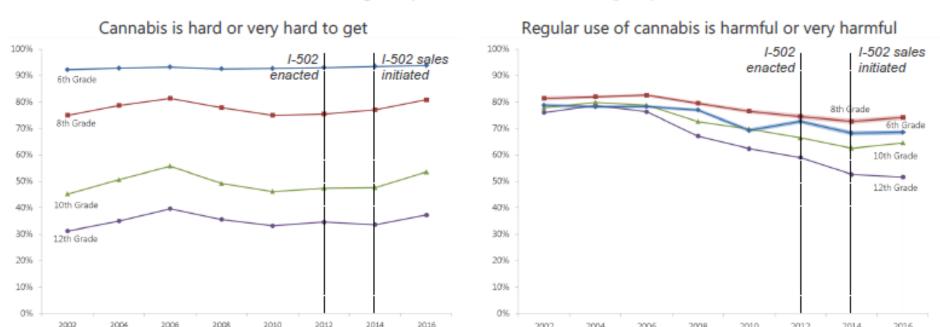
1. The sky hasn't fallen....



Washington Healthy Youth Survey Trends by Grade









WSIPP, 2017



For adults, use is increasing for those who have used in the past

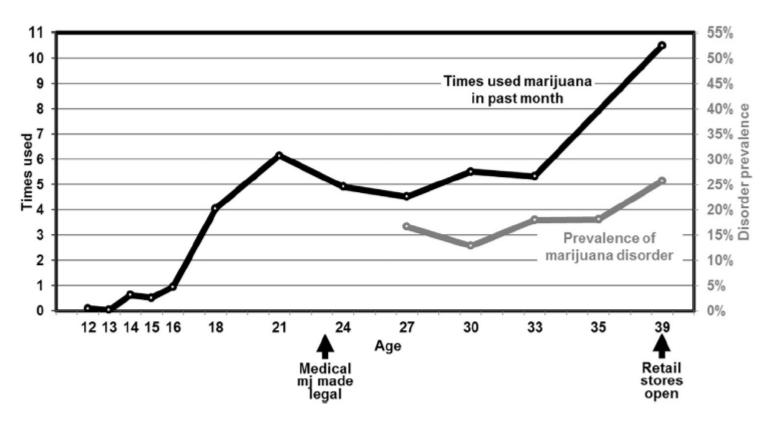


Figure 4. Change in marijuana use (left axis) and DSM-IV disorder prevalence (right axis) among those who used marijuana in the past year at age 39. Increase in use at age 39 was significantly different from age 33 at p < .05; increase in disorder prevalence at age 39 was not significantly different from ages 33 or 35. mj = marijuana.

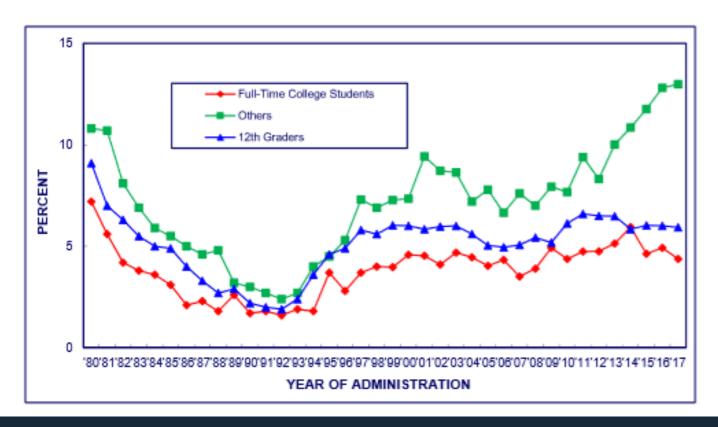


We need to focus on increase in frequency of use rather than ever use or single use in the last 30 days.

FIGURE 9-3b MARIJUANA

Trends in 30-Day Prevalence of <u>Daily</u> Use among College Students vs. Others 1 to 4 Years beyond High School

(Twelfth graders included for comparison.)





AND...THC levels are going up...and we don't know what that means....





2. Caregivers can influence risk factors for adolescent cannabis use

Risk factors for youth cannabis misuse

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S D R G

Community-

Family

School

Individual/Peer

Risk Factors	Co Mej	Tey Tal	32 20	967. OG	TCE TA	Con Vo	9
Community							
Availability of Drugs	1				1		✓
Availability of Firearms	3	1	3	9)	1	3	1
Community Laws and Norms Favorable Toward Drug Use, Firearms, and Crime	1	1	\$		1		✓
Media Portrayals					1		
Transitions and Mobility	1	1		1			✓
Low Neighborhood Attachment and Community Disorganization	1	1			1	5	✓
Extreme Economic Deprivation	1	1	1	1	1		✓
Family							
Family History of the Problem Behavior	1	1	1	1	1	1	✓
Family Management Problems	✓	1	1	1	1		✓
Family Conflict	1	1	1	1	1	1	4
Favorable Parental Attitudes and Involvement in the Problem Behavior	✓	1			1		✓
School							
Academic Failure Beginning in Late Elementary School	✓	✓	✓.	✓	✓	✓	1
Lack of Commitment to School	1	1	1	1	1		1
Individual/Peer							
Early and Persistent Antisocial Behavior	1	1	1	1	1	<	✓
Alienation and Rebelliousness	✓	1		1			1
Friends Who Engage in the Problem Behavior	1	1	1	1	1		1
Favorable Attitudes Toward the Problem Behavior	1	1	1	1			1
Early Initiation of the Problem Behavior	√	1	1	1	1		1
Constitutional Factors	1	1			1	1	✓

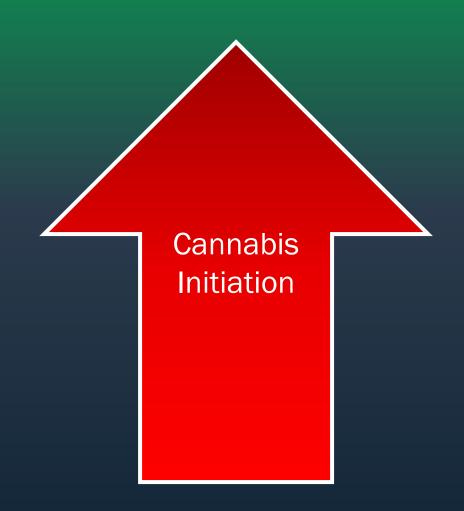
Harrop & Catalano, 2016

Catalano et al., (2018) Contemporary Health Issues on Marijuana, Oxford University Press



Our work at SDRG has shown...

- Peer or sibling use
- Prior alcohol use
- Prior cigarette use





Parent Norms are an Important Risk Factor

Children who perceive their parents as having <u>favorable attitudes toward druguse</u> were...

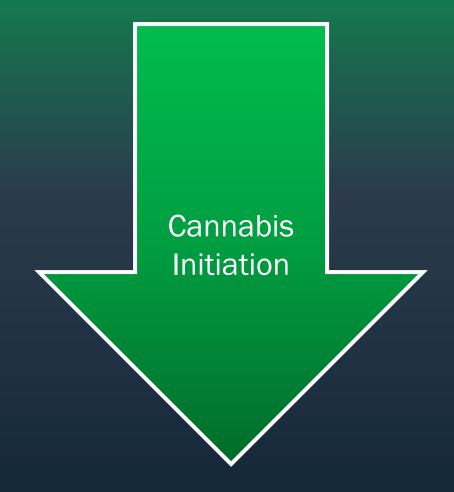
5 X more likely to have tried cannabis by 8th grade

6 X more likely to be a frequent user by 10th grade



Our work at SDRG has shown...

- Good family management
- Norms against use & perceived harm



Tips for Parents:

Developing messages for parents



A parent's guide to preventing underage marijuana use



G = Clear and Specific Guidelines

M = Monitor

C = Consequence & Problem-Solving



3. Public Health Messaging is Critical

What Parents Care About

DR LESLIE WALKER of SEATTLE CHILDREN'S HOSPITAL



I'm Dr. Leslie Walker of Seattle Children's Hospital. In November of 2012 our state voted to legalize marijuana for recreational use. It is important that we all know what was approved. It is still illegal to use marijuana in public. Just like alcohol, it's illegal to use marijuana under the age of 21. And, just like alcohol, it's illegal to drive impaired by marijuana. That's the law.

FIGURE 1. Example of message containing information about the law. *Note:* This message was presented with both visual and audio components.

Hanson, K., Haggerty, K. P., Fleming, C. B., Skinner, M. L., Casey-Goldstein, M., Mason, W. A., ... & Redmond, C. (2018). Washington State Retail Marijuana Legalization: Parent and Adolescent Preferences for Marijuana Messages in a Sample of Low-Income Families. *Journal of studies on alcohol and drugs*, 79(2), 309-317.

TABLE 2. Mean values of overall rating scores for parents and youth

Variable	Information about the law <i>M</i> (<i>SD</i> /range)	Advice/ conversation starters M (SD/range)	Consequences/ positive alternatives M (SD/range)	Harmful effects of marijuana use M (SD/range)		
Parents	7.26 ^{a,b,c,*}	7.01 ^{a,d,*}	6.95 ^{b,e,*}	6.76 ^{c,d,e,*}		
(n = 282)	(1.73/1.0-9.0)	(1.66/1.5-9.0)	(1.78/1.0-9.0)	(2.11/1.0-5.0)		
Youth	$6.63^{a,b,c}$	$5.92^{a,d}$	$6.43^{b,d,e}$	$5.98^{c,e}$		
(n = 283)	(1.79/1.5-9.0)	(1.88/1.0-9.0)	(2.01/1.0-9.0)	(2.19/1.0-9.0)		

Notes: Means with shared superscript in each row differ significantly (p < .05). *Means in the top row with an asterisk denote a significant (p < .05) difference between values in that column.



Listen to Your Selfie





You Can https://www.youcanwa.org/

Know This about Cannabis

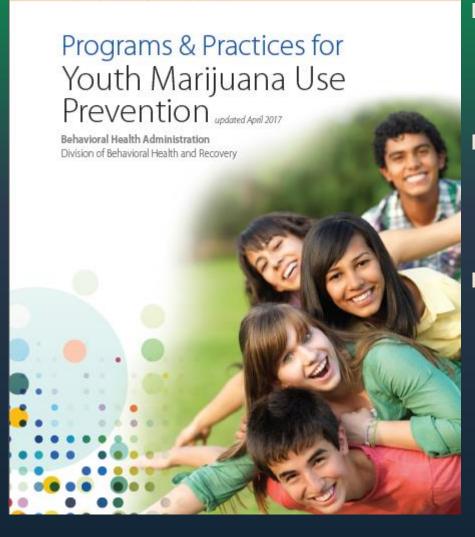




4. Determining EBPs is essential



Washington State



- 19 Evidence Based Approaches
 - 16 Blueprints programs
- 5 Promising
 - 3 Blueprints
- 12 EBP recommendations for tribal communities
 - 4 have strongest research
 - 3 have some evidence (with concerns)
 - 5 have some evidence (pre-post only)



5. Communities Bring it All Together

Creating Optimal
Enabling Contexts
for Tested,
Effective
Programs/Pratice
s/Policies Within
Public Systems



Even when communities carefully select tested, effective programs/practices/policies well-matched to their community-identified needs, we need the support of public systems to create *enabling* contexts for strong implementation.

National Implementation Resource Network

The Challenge for Community Prevention: Different Communities, Different Needs

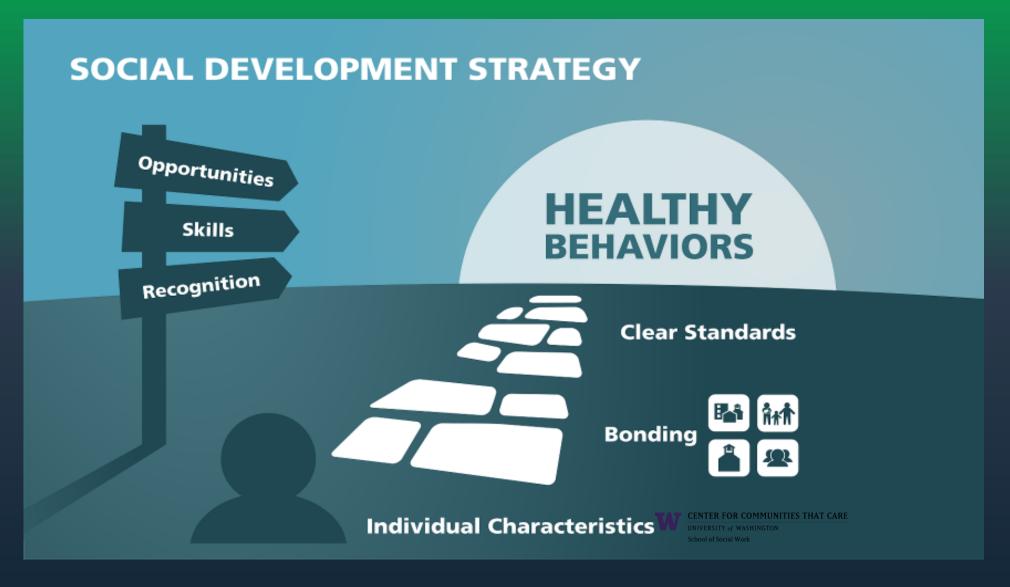


Communities that Care Builds Prevention Capacity and Infrastructure

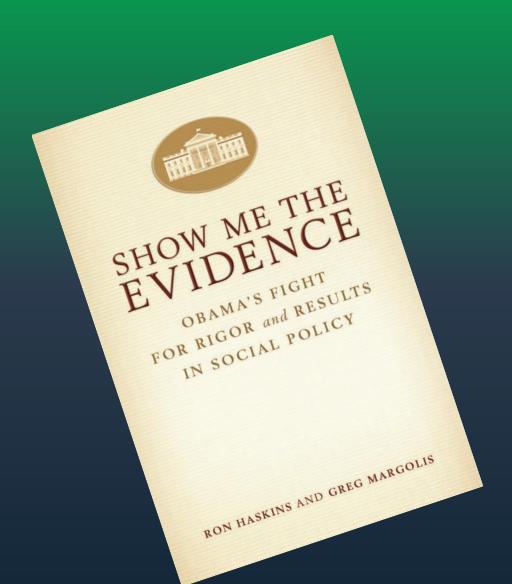


- Build a coalition of diverse stakeholders
- Assess and prioritize risk, protection, and behavior problems with student surveys
- Address locally prioritized risk and protection with tested, effective preventive interventions
- Support/sustain high fidelity implementation of interventions delivered at scale

Promoting Well Being using the Social Development Strategy







What is the evidence that CTC has a collective impact?



Randomized Trial of Communities That Care 2003-2017

24 incorporated towns in 7 states

- ~ Matched in pairs within state
- Randomly assigned to CTC or control condition



4407 students followed through age 23

- ~ All 5th graders in public schools
- ~ Surveyed annually from grade 5

Supported by grants from the National Institute on Drug Abuse, National Cancer Institute, the Center for Substance Abuse Prevention, National Institute on Child Health and Human Development, National Institute of Mental Health, National Institute on Alcohol Abuse and Alcoholism



CTC Reduced Behavioral Health Problems After 3 Years (Grade 8)



tobacco - 33%

alcohol - 32%

antisocial behavior - 25%

binge drinking - 37%

Significant community-wide reductions in drug use and delinquency compared to control communities by end of grade 8.

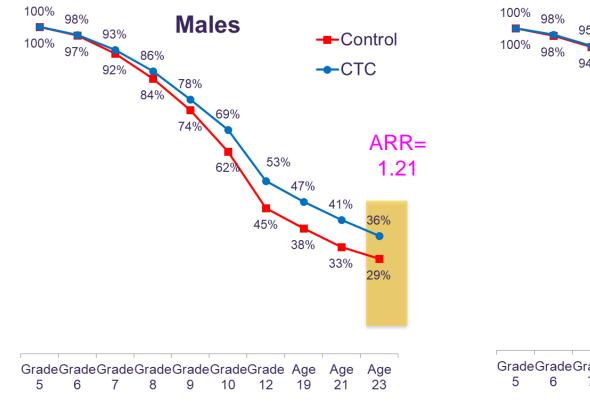
Hawkins et al. (2009). Arch Pediatr Adolesc Med.163(9):789-798.

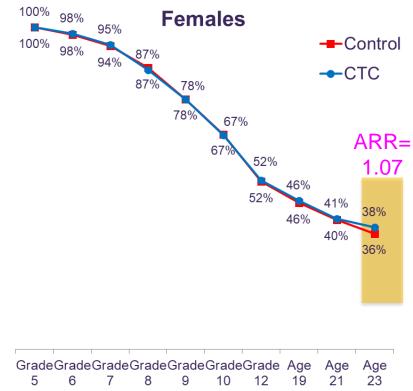
Effects on Youth Outcomes

	Age 11 Grade 5	Age 12 Grade 6	Age 13 Grade 7	Age 14 Grade 8	Age 16 Grade 10	Age 18 Grade 12	Age 19	Age 21	Age 23
	2004	2005	2006	2007	2009	2011	2012	2014	2016
Risk	Donalis a		✓	ns	✓	ns			
Protection	Baseline			✓	ns				
Delayed Initiation and Sustained Abstinence									
Antisocial Behavior			✓	✓	✓	✓	✓	✓	✓
Violence					✓	✓	ns	✓	✓
Gateway Drugs#	9					✓		✓	✓
Alcohol	Baseline			✓	✓	✓	ns	ns	✓ males
Cigarettes	Ba			✓	✓	✓	√ males	✓ males	✓ males
Marijuana				ns	ns	ns	ns	✓ males	ns
Any Drugs+			ns			✓	√males	ns	✓
		Reduced F	revalence of	Recent Beha	vior (Past-mont	h/Past-Year)			
Antisocial Behavior				✓	✓	ns	ns	ns	ns
Violence					✓	ns	ns	ns	ns
Alcohol	eline			✓	ns	ns	ns	ns	ns
Binge Drinking	Baseline			✓	ns	ns	ns	ns	ns
Cigarettes					✓	ns	ns	ns	ns
Smokeless Tobacco				✓	ns	ns	ns	ns	ns
✓ = significant CTC effect	ns = not significant	empty cells = CTC effect not tested							



Sustained Effects: % who have never Used Marijuana





Among baseline (grade 5) non-initiators (91% of sample)

ARR=Adjusted Risk Ratio *p < .05 Among baseline (grade 5) non-initiators (92% of sample)





6. A few things we still don't know....

- Health and behavior consequences of incredibly high doses of THC and the impact on parenting behaviors
- The costs of *moderate* cannabis use, impact on parenting
- Is alcohol sneaking through the back door
- Impact of evidence based programs in a legalized cannabis context
- The synergistic effect of community supported evidence based program, policies and practices to prevent youth cannabis use
- What *industry will do* to reduce regulation and how communities can advocate for strong regulation

COMMUNITIES THAT CARE

Building Community Engagement and Capacity to Prevent Youth Behavior Problems



ABIGAIL A. FAGAN • J. DAVID HAWKINS RICHARD F. CATALANO • DAVID P. FARRINGTON The book is coming...
December 3rd, 2018

For more information visit www.communitiesthatcare.net



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