

DOH FACT SHEET FOR I-502 Implementation

Purpose:

Marijuana Prevention and Education has three mandates, outlined by Initiative 502:

1. Develop marijuana use public health hotline, providing referrals to substance abuse treatment, which uses an evidenced based public health approaches and does not solely advocate an abstinence only approach.
2. Develop community grants program that supports coordinated prevention/intervention strategies geared to reduce youth marijuana use and/or abuse.
3. Develop media based education campaigns separately targeting youth and adults with scientifically accurate information about the health and safety risks posed by marijuana use.

Background:

The state of Washington is confronted with the legalized recreational use of marijuana for adults 21 and over, through Initiative 502. The general consensus among health, safety and substance abuse professionals is that under-age marijuana use and use of marijuana by pregnant and breastfeeding mothers is dangerous and addictive, smoke (of any kind) is harmful to a person's health, and driving while under the influence of marijuana is not safe.

Disclosure:

The implementation efforts of I-502 will be continuously informed by the eight (8) federal marijuana enforcement priorities outlined by the U.S. Department of Justice on August 29, 2013:

1. Prevent the distribution of marijuana to minors;
2. Prevent revenue from the sale of marijuana from going to criminal enterprises, gangs and cartels;
3. Prevent the diversion of marijuana from states where it is legal under state law in some form to other states;
4. Prevent state-authorized marijuana activity from being used as a cover or pretext for the trafficking of other illegal drugs or other illegal activity;
5. Prevent violence and the use of firearms in the cultivation and distribution of marijuana;
6. Prevent drugged driving and the exacerbation of other adverse public health consequences associated with marijuana use;
7. Prevent the growing of marijuana on public lands and the attendant public safety and environmental dangers posed by marijuana production on public lands; and
8. Prevent marijuana possession or use on federal property.

Key Stakeholders & Interests:

- Federal agencies/offices:
 - Center for Disease Control and Prevention, CDC
 - Substance Abuse Mental Health Services Administration, SAMHSA
 - Office of National Drug Control Policy, ONDCP
 - National Institute on Drug Abuse, NIDA
- State agencies/offices:
 - Liquor Control Board, LCB
 - Department of Social Health Services, Division of Behavioral Health & Recovery, DSHS-DBHR
 - Office of Superintendent of Public Instruction, OSPI

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- University of Washington (UW), Social Development Research Group, SDRG
 - UW Alcohol & Drug Abuse Institute, ADAI
 - WSU Communications (Laura Hill)
 - Washington Traffic Safety Commission, WTSC
 - Reduced Underage Drinking Coalition, RUaD
 - State Prevention Enhancement Policy Consortium, SPE
 - Washington State Commission on Hispanic Affairs, WA State Commission on African American Affairs, and the WA State Commission on Asian Pacific American Affairs
 - Department of Revenue
 - Department of Agriculture
- Community/ County level interests:
 - Washington Substance Abuse and Violence Prevention Coalition, WSAVP
 - Washington Coalition of Coalitions, C of C
 - Community Prevention and Wellness Initiative Coalitions, CPWI
 - Seattle Children's Hospital
 - Harborview Medical Center, Injury Prevention

Populations Served:

Although we serve the entire state, we will target our messaging to specific populations:

- Youth (ages 12-20)
- Adults, including parents of youth, breastfeeding mothers, and pregnant women
- Priority populations with high prevalence of marijuana use (based on race, ethnicity, geography, sex etc.)

Achievements:

In December, 2013, DOH dedicated program funding to hire one full time staff, to provide marijuana education and manage I-502 implementation. At this time, DOH is working collaboratively with a number of the listed "key stakeholders" to identify and leverage current resources to meet the mandates of I-502. One example of this collaboration is with the Division of Behavioral Health and Recovery (DBHR), and the use of their existing state Recovery Helpline (at no cost to DOH), as the identified marijuana resource and referral line. Once funding emerges, DOH will evaluate its effectiveness and develop a public health hotline specific to marijuana callers, if needed.

Another example of our collaboration (with folks such as the Liquor Control Board, Washington Traffic Safety Commission, Reducing Underage Drinking and Marijuana Use Coalition, DBHR, Seattle Children's Hospital, and a number of other state and community level partners) is the development of education and information materials/messaging.

We find it is necessary and our responsibility to release information to the public prior to retail market beginning sales. The messages we have developed are geared to educating communities, parents and youth regarding the laws of I-502, the safety risks associated with youth marijuana use/abuse and risks associated with driving while under the influence of marijuana. They include information pamphlets for parents, an educational DVD for teens, a fact card, and PSAs for the public.

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Funding Source:

- Anticipated funding for I-502 implementation will be allocated through dedicated marijuana education fund that will accumulate through excise taxes, license fees, penalties, forfeitures, and all other moneys, income or revenue received by the state liquor control board, from marijuana related activities.
- After primary disbursements to key agencies, DOH will receive 10% of the remaining balance for the creation, implementation, operation, and management of marijuana education and public health programs, which are outlined above.

2014-2015 State Budget Tobacco and Marijuana Proviso: \$1.5 million

One time funding is provided for tobacco, marijuana, and e-cigarette prevention activities aimed at youth and populations with a high incidence of smoking. For activities aimed at youth, the Department of Health (DOH) must partner with the Office of Superintendent of Public Instruction (OSPI) to fund effective tobacco, marijuana, and e-cigarette prevention programs at middle and high schools. For activities aimed at populations with a high incidence of smoking, the DOH must contract with community based organizations that serve populations that have a high incidence of smoking tobacco, marijuana, or e-cigarettes. Future biennia funding of tobacco and e-cigarette prevention programs will be based on the Washington State Institute of Public Policy report on prevention activities due December 31, 2014.

- DOH will fund nine (9) regional Educational Service Districts (ESDs) to staff a .5 FTE to assist school districts throughout WA State to enhance, develop and/or implement evidence based smoke-free and substance use policies that specifically address the use and possession of tobacco, marijuana (recreational and medical) and e-cigarettes.
- DOH will fund grants to community based organizations (specifically serving communities of color or other underserved populations) that have a high incidence of smoking tobacco, marijuana and e-cigarettes. We have been working with key diverse partners for several years and will contract with 4 such entities that have the expertise and experience in working in these communities.
- In consultation with an external media and communications firm, create a scalable communications plan to guide the upcoming education campaign for youth and adults. The communications firm will research existing messaging campaigns and communications strategies. They will facilitate meetings with stakeholders to decide on messaging, target audiences, and venues to reach those audiences.

Point of Contact:

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