Environmental Prevention Strategies Discussion:

Lessons Learned from the Field

What Works –
Youth Marijuana Prevention
Symposium

Federal Way Community Center Federal Way, Washington July 10, 2013

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Prevention Considerations

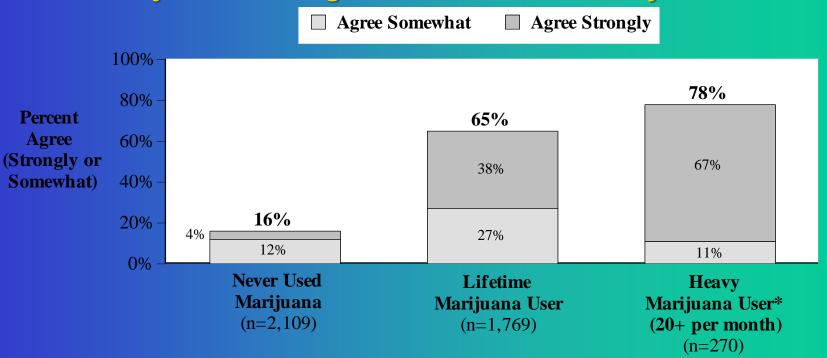
Messaging

Enforcement

Availability

Legalization Will Increase the Likelihood of Using Among Two-Thirds of Teens Who Already Use

"If Marijuana Was Legal I Would Be More Likely to Use It"



NOTE: Data are from the 2012 Partnership Attitude Tracking Study in-school survey of 3,884 students in grades 9 through 12, conducted from February to June 2012. The margin of error is +/- 2.1 percentage points.

SOURCE: Adapted by CESAR from The Partnership for a Drug-Free America and the MetLife Foundation, *The Partnership Attitude Tracking Study (PATS): Teens and Parents*, 2013. Available online at http://www.drugfree.org/newsroom/research-publication/full-report-and-key-findings-the-2012-partnership-attitude-tracking-study-sponsored-by-metlife-foundation. For more information, contact Cassie Goldberg at 212-973-3524 or cassie goldberg@drugfree.org.

Marijuana Use is Not Without Risk and is Not Without Harm

Marijuana is a psychoactive substance.

Regular users of <u>any</u> psychoactive substance are at risk for developing a physical and psychological tolerance and a physical and psychological dependence on the drug i.e., addiction.

Several studies have indicated that app. 10% of regular, long-term marijuana smokers will develop an addiction.

Youth Messaging

- Marijuana use negatively effects motivation, memory, attention and learning.
- Marijuana is currently #1 drug cited by youth entering inpatient drug treatment in WA.
- Among WA citizens arrested for marijuanarelated charges 2000-2011, 42% (58,175) were under 21 years of age – and will remain subject to arrest under I-502.
- The 5 nanogram limit for DUID will not apply to those under 21 years of age

Access at home



With the demise of legal sanctions against use, some parents may choose to begin using marijuana, acting as an important new source of exposure for their adolescents. Parental use of marijuana in the last year is associated with their adolescent's use during the same period.*

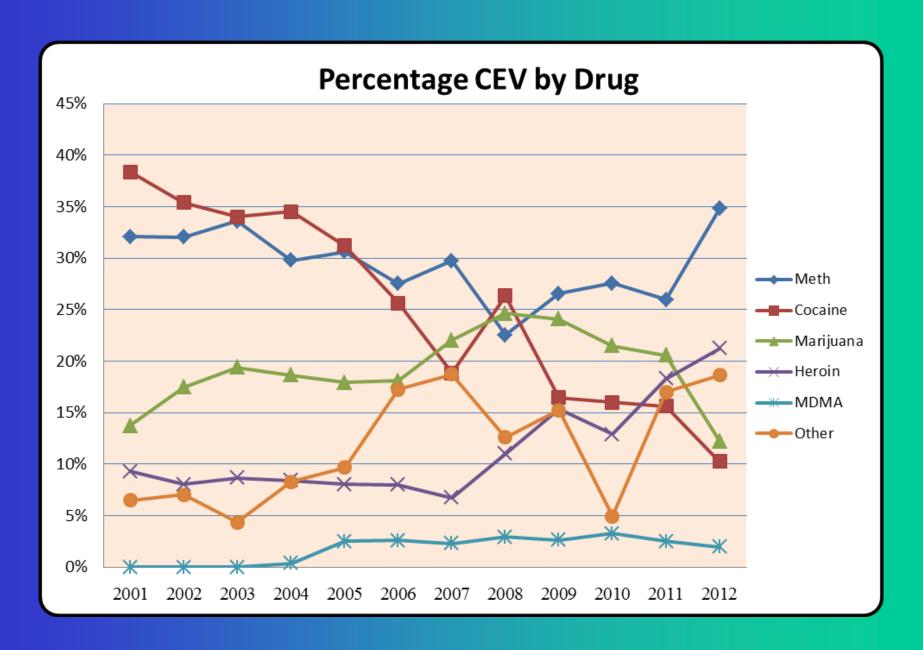
Threat Indicators

"Critical Events" registered with the NW HIDTA by 61 L.E.A.s in 1998:

•	Cocaine:	1	2	8	
	Oodiiioi				

- Methamphetamine 79
- Heroin
- Marijuana:
- Other: __<u>6</u>

273

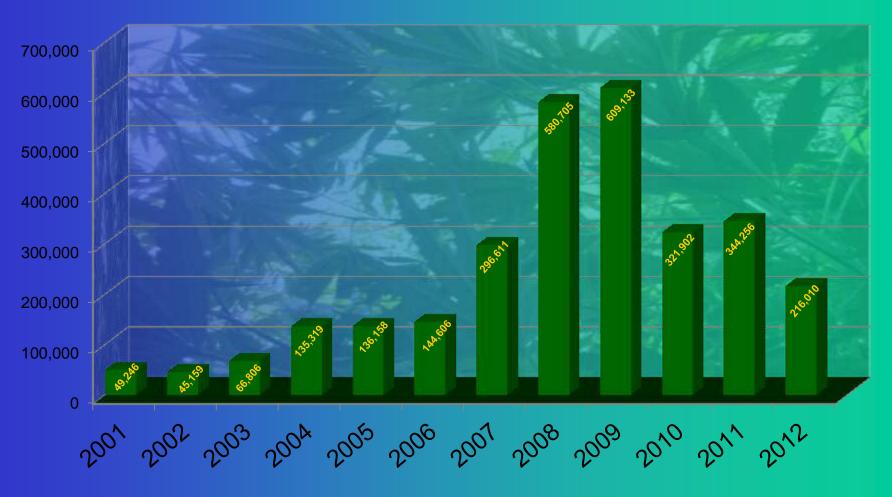


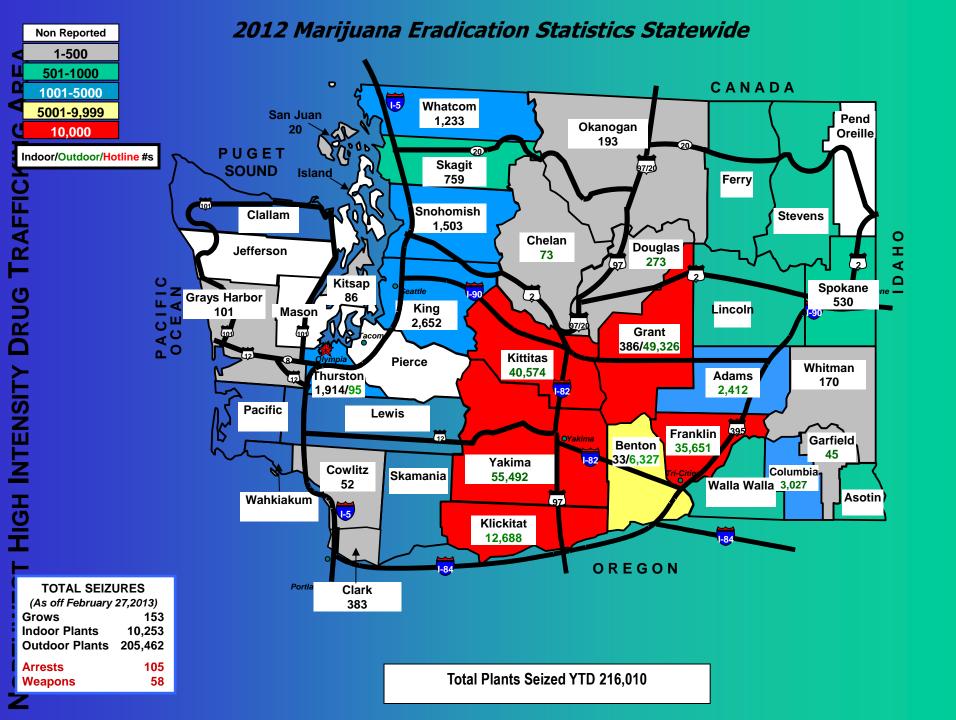
Threat Indicators

"Critical Events" registered by 156 L.E.A.s in 2011 & 2012:

2011	2012
1,342	1,753
1,062	615
945	1,070
807	516
478	605
129	98
<u>401</u>	<u>380</u>
5,164	5,037
	1,342 1,062 945 807 478 129 401

Comparison Total Plants Seized by Year





WA State Medicinal Marijuana Law Chapter 181, Laws of 2011 (effective 7/22/11)

- A health care professional must now examine the patient and document need
- A health care professional cannot have a business consisting solely of authorizing use
- Qualifying patients may still assert an affirmative defense
- Patients' parental rights and organ transplant rights are protected
- Allows up to 10 patients and designated providers to establish
 collective gardens of up to 45 plants and 72 ounces of "useable
 cannabis"
- Providers may serve only one patient in a 15-day period
- Drug-free workplaces, correctional facilities and supervision authorities are not required to permit marijuana use
- The WSIPP is to conduct a cost benefit analysis; UW and WSU can conduct research on medical use
- Local governments can adopt zoning, licensing requirements and business taxes for community gardens
- Dispensaries are no longer allowed
- A registry of authorized patients is not required

Seattle Medical Marijuana "Access Points"



QUESTIONS?

Contact Information/Resources

Tel: 206.352.3603

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"M-Files": www.mfiles.org

Marijuana "Toolkit": www.wasavp.org

ONDCP: whitehousedrugpolicy.gov