

**Prevention Research Subcommittee Meeting  
June 16<sup>th</sup>, 10:00am – 2:00pm PST  
Washington State**

**Attendees: 40 participants**

**WSU:** Brittany Cooper, Jessica Willoughby, Stacey Hust, Laura Hill, Elizabeth Weybright, Gitanjali Shrestha, Clara Hill, Kelley Pascoe, Erica Austin, Ramona Leber, Jennifer Leach, Louise Parker, Eric Harrison

**UW:** Kevin Haggerty, Blair Brooke-Weiss, Jason Kilmer, Margaret Kuklinski, Jennifer Bailey, Monica Oxford, Julia Dilley, Beatriz Carlini, Jennifer Duckworth

**HCA DBHR:** Sarah Mariani, Alicia Hughes, Sandy Salivaras-Bodner, Jennifer Hogge, Tyler Watson

**DBHR-WSU Fellows:** Emma Neller, Sophia Hilsen, Krista Timm, Destiny Eversull

**DSHS RDA:** Barb Lucenco, Irina Sharkova, Grace Hong

**DOH:** Trevor Christensen

**WA LCB:** Sara Cooley Broschart, Trecia Ehrlich

**WSIPP:** Eva Westly

**Seattle Children's:** Liz Wilhelm

**KC BHRD:** Margaret Soukup

**Snohomish County Human Services:**

**Facilitated by** Kevin Haggerty and Brittany Cooper

Agenda Item	Discussion	Implications/Action	Responsible Party
<b>Reflections: Prevention in the Current Context</b>	The group broke into small groups to talk a bit about this question.	<b>Do we need to bring this topic back to next meeting in some way?</b>	
<b>Eva Westly, WSIPP</b>	<b>Planning for the mid-way report on cost-benefit findings to be released in 2022.</b> Final report to be released in 2032 2017 preliminary findings highlighted	Eva and Kevin will talk about child abuse/neglect to discuss policy and measuring changes in this area	Eva

Agenda Item	Discussion	Implications/Action	Responsible Party
<p><b>Latest plans for WSIPP's I-502 Evaluation</b></p>	<ul style="list-style-type: none"> <li>• (between state analysis comparing WA to other states without legalized marijuana) <ul style="list-style-type: none"> <li>○ See slides – no preliminary evidence of increase in treatment admissions for cannabis use disorder in WA</li> </ul> </li> <li>• Within-state analyses (in areas with more cannabis sales, how did that impact outcomes in that area?) <ul style="list-style-type: none"> <li>○ No preliminary evidence that the amount of legal cannabis sales in an area is related to youth cannabis use for 8, 10, or 12<sup>th</sup> graders</li> <li>○ BUT did see increase in adult use in those areas with more cannabis sales</li> <li>○ No relation between amount of cannabis and criminal outcomes</li> </ul> </li> </ul> <p>For 2022 will add additional outcomes – will prioritize between-state analyses; assess disparities/subgroup differences</p> <p>Learning from this group</p> <ul style="list-style-type: none"> <li>• Help identify most relevant research questions, subgroup analyses, policy issues</li> <li>• Help identifying which indicators to focus on</li> <li>• Stakeholder interviews</li> <li>• Looking at mental health outcomes in relation to I-502? Yes, will add suicide. Yes, this is a good thing to add.</li> <li>• Do look at health care costs which show usage of mental health care. Depression/anxiety, others? Schizophrenia, psychosis. Child abuse/neglect and measures, which are changing.</li> </ul>		
<p><b>Jason Kilmer, UW</b></p>	<p>There's more than one way to communicate a message ...</p> <p>Young adults have highest rates of marijuana use</p>	<p><b>Jason will send PDF of slides to share with this group</b></p>	

Agenda Item	Discussion	Implications/Action	Responsible Party
<b>6-year findings from Young Adult Health Survey</b>	<p>In WA, collected as much info as possible BEFORE the opening of the first retail store</p> <p>See Jason’s slides</p>		
<b>Jessica Willoughby and Stacey Hust, WSU Cannabis in the media: Associations with intentions and use among adolescents and young adults</b>	<p><b>Cannabis in the media</b> Technology and digital media as tools for prevention. Researching on where can we intervene?</p> <ul style="list-style-type: none"> <li>• 2015 law to NOT advertise to children</li> <li>• The law in WA was changed in 2017 to not show marijuana leaves and be restricted to address, name of store. (Bia)</li> </ul> <p>Surveyed adolescents 13-17 in June 2018 ~ 300. Zip codes, perceived distance to marijuana retailers, how much advertisement they saw</p> <ul style="list-style-type: none"> <li>• Perceived proximity to retailers associated to intentions to use</li> <li>• Greater exposure to advertisements – stronger intentions to use</li> </ul> <p>Posting of marijuana related content on social media – 31%; pictures; memes; videos What’s associated with these postings?</p> <ul style="list-style-type: none"> <li>• Norms, empathy, parent side of things (perceived approval and monitoring; closeness)</li> <li>• If they thought their friends were using marijuana, or if they thoughts their parents were ok with marijuana use, they were more likely to post on social media.</li> <li>• Parental closeness did make a difference (eg eating dinner together). Parental media monitoring did NOT make a difference</li> </ul>	<p>This has implications for communities trying to do advocacy work as well. They often have concerns around cannabis advertising to youth in their communities.</p> <p>Sarah question: media influence on young men and not adult men. Does this suggest these ads are targeting adolescents? Twitter platform may be trying to target an adolescent audience.</p> <p>Haven’t seen content analyses on exact appeals focused on younger audiences</p> <p>In alcohol ads – objectification of women is related to intentions to use or riskier sex</p> <p>Sarah M: Specific brands/retailers that are egregious, let us know. We can go to Atty General, Consumer Protection.</p> <p>Brittany: I'm also wondering what information we should be giving parents about how to help their adolescents in the social media space.</p> <ul style="list-style-type: none"> <li>• Being close to your child is helpful, but being overly protective isn’t.</li> </ul>	

Agenda Item	Discussion	Implications/Action	Responsible Party
	<ul style="list-style-type: none"> <li>Internal/external factor, e.g. my peers are doing this so I should post about it</li> </ul> <p>Second study – young adults’ intentions and use. Recruited students via WWU statewide system</p> <ul style="list-style-type: none"> <li>Exposed to pro-marijuana messages on social media had effect on intentions to use and to use</li> <li>Anti-marijuana messages weren’t as strong/direct</li> <li>Sex expectancies can make a difference in our use</li> <li>When young boys (13-17) believe that marijuana helps with sex, it leads them to intend to use marijuana</li> <li>Didn’t find same connections with young men – a negative relationship between pro-sex messages and actual intentions/behaviors</li> <li>Not the case for girls</li> </ul> <p>Other research questions</p> <ul style="list-style-type: none"> <li>In-depth interviews (rather than focus groups)</li> <li>18 participants, 10 women, 8 men (college students)</li> <li>Showing ads and getting feedback from respondents</li> </ul>	<ul style="list-style-type: none"> <li>Media literacy. Open conversations about the content. Parents need a skill set, need to be trained on how to talk about media with their children.</li> </ul> <p>Sarah M requested Jessica and Stacey do a quick review of the Start Talking Now site and anything to be added to their content.</p> <p>Jason: On college campuses, sexual assault prevention programs that address consent typically focus on alcohol, but have historically not focused on cannabis. To my knowledge, the only state that has made cannabis and consent a clear component of their campaign has been a group in Colorado. Please see here if of interest:  <a href="https://beforeplay.org/marijuana-and-consent/">https://beforeplay.org/marijuana-and-consent/</a></p>	
<b>Updates on March Action Items</b>			
<b>High Potency Cannabis</b>	<p>How in scientific community do we want to organize or what do we want to say about high potency cannabis?</p> <p>Bia has pulled together a small workgroup to discuss this; have had 2 meetings. See Bia’s slides</p>	<p>Bia send slides from this update to share with this group (send to Blair) Include: Denise Walker, Michael Neffi, Alicia Hughes, Sara Broschart, Jason Kilmer, Liz Wilhelm, Trecia Ehrlich (when willing to include regulators)</p> <p>Next meeting: June 30<sup>th</sup></p>	Bia & Kevin

Agenda Item	Discussion	Implications/Action	Responsible Party
	<p>Main goal – Consensus Statement on Health Risks of High Concentration Cannabis (THC)  A report, plus visuals (PPT, infographics, short videos)  By end of summer</p> <p>Assigned tasks to workgroup members to research aspects of this issue  Created a drop box to collect these articles</p>	<ul style="list-style-type: none"> <li>• Agree on definitions</li> <li>• Start compiling evidence</li> <li>• Add collaborators for stronger product</li> </ul>	
<p><b>Discuss purpose and mission of the PRSC</b></p>	<p>Brittany shared proposed revised Mission &amp; Goals:</p> <p>To provide a forum for prevention researchers, policymakers, and practitioners to identify and address emerging and evolving substance misuse prevention and mental health promotion service &amp; research needs in Washington State by:</p> <ol style="list-style-type: none"> <li>1. Supporting DBHR’s evaluation of prevention services;</li> <li>2. Assisting DBHR in (a) defining the criteria for determining that a service is evidence-based; and (b) establishing a protocol for review and acceptance to a list of evidence-based services;</li> <li>3. Advocating for state funding of evidence-based prevention services;</li> <li>4. Establishing collaborations to initiate new research and share existing research on substance misuse prevention and mental health promotion in order to improve DBHR’s prevention services.</li> </ol> <p>Irina: add concept of social justice, social determinants of health, health disparities, address health equity  Add, “and effective prevention services” so not just EPB</p>	<p><b>Focus on Representative Membership:</b>  ensure following are included</p> <ul style="list-style-type: none"> <li>• Seattle Children’s researchers</li> <li>• OSPI</li> <li>• Mental health folks (not clear yet who)</li> <li>• Consider bringing in researchers from other states, esp those with legalized marijuana</li> <li>• Members of the Cannabis industry?</li> </ul> <p><b>Structure</b></p> <ul style="list-style-type: none"> <li>• Plan meetings a year in advance so everyone has plenty of notice on topics</li> <li>• Put agendas in body of invite email to alert folks to content</li> <li>• Between meetings: listserv, working groups as needed</li> <li>• Strengthening and maintaining Zoom capacity will allow for more</li> </ul>	<p>Kevin and Brittany and DBHR</p>

Agenda Item	Discussion	Implications/Action	Responsible Party
	Sarah suggesting: Promote implementation science through the collaborative knowledge exchange of researchers and DBHR and other state agencies and organizations.	meaningful remote participation across the state and possibly beyond.	
<b>Round Robin</b> Intent: give folks a quick summary/snippet in your substance abuse prevention life that others may be interested in knowing.			
(22 folks in attendance for this part of the meeting)	<p>SDRG newly published article in JAMA on multi-generational impact of Raising Healthy Children. Benefits of the intervention of parents, on their children 20 years later. Less likely to have externalizing problems; better academic/study skills; less developmental delays at ages 1-5</p> <ul style="list-style-type: none"> <li>Citation: Hill, Karl G., Bailey, Jennifer A., Steeger, Christine M., Hawkins, J. David, Catalano, Richard F., Kosterman, Rick, Epstein, Marina, Abbott, Robert D. (2020). Outcomes of childhood preventive intervention across 2 generations: A nonrandomized controlled trial. JAMA Pediatrics, Advance online publication. doi:10.1001/jamapediatrics.2020.1310.</li> </ul> <p>Bia: ADAI update. Finalizing analysis of marketing violations that cannabis industry did since 2014.</p> <p>Alicia DBHR: hosting Virtual Prevention Summit Nov 3-4 Currently hiring next round of fellows to start Oct 1<sup>st</sup>. DBHR has been hosting webinars/virtual presentations.</p> <p>SPR is free – see link in Action column</p> <p>DBHR: Applying for a CDC grant with DOH related to implementation of a survey on ACES. ACES Index work at DOH. If they get the grant, this is a group they'd want to help advise on this</p>	<p>Let Alicia know if you have presentations/webinar to share with the DBHR community</p> <p>Here's the link for SPR conference registration:  <a href="https://www.preventionresearch.org/2020-annual-meeting/">https://www.preventionresearch.org/2020-annual-meeting/</a></p> <p>Kevin recommend and share good quick paragraphs with Alicia for the grant DBHR is currently writing now: Look at ACES and Adverse Community Experiences? Healthy equity and SDoH. Also Adverse COVID Experience</p> <p>Should we include questions about Positive Childhood Experiences?</p> <p>Others who have items to suggest to add to this surveillance task on ACES etc, send along to Alicia.</p> <p>Connecting program availability. Gender Orientation Training for foster caregivers, available through The Alliance for</p>	

Agenda Item	Discussion	Implications/Action	Responsible Party
	<p>HYS – guidance this past week is that schools will return in fall. Planning for in-school and on-line administration, on the way to fully on-line. We need schools to register by the end of June.</p> <ul style="list-style-type: none"> <li>• Alicia, re health equity issues, is the HYS looking at broadband access issues for students to answer the survey or for added stress due to learning from home? State broadband study showed Stevens Cnty is especially problematic for access.</li> <li>• Erica - thanks for bringing that up. We are actively looking for ways to address these healthy equity issues. At this time, we are not planning on having students take the survey from home. And those that have signed up for the e-survey have the capability to do so, so hopefully we do not have that barrier. In terms of adding questions, the survey was already finalized and starting to print, so we aren't sure it's possible at this point, however there may be some items we can use as a proxy at this time, so we are exploring that!</li> </ul> <p>NWPTTC updates:</p> <ul style="list-style-type: none"> <li>• Kevin and Brittany co-presented on a national webinar in partnership with SPR. Intentional attempt at connecting the PTTC network with prevention researchers.</li> <li>• Webinar on Health Equity in Prevention – Sept 3 first of 2 sessions</li> <li>• Leadership Academy – going virtual. 2 4-hour live Zoom gatherings with lots of interactive components on Sept 24-25</li> <li>• Follow up with 2 90-minute sessions in October</li> <li>• Working with Liberating Structures</li> </ul>	<p>Connecting/Foster Families:  <a href="https://allianceforchildwelfare.org/content/connecting-sexual-orientation-and-gender-identity-expression-sogie">https://allianceforchildwelfare.org/content/connecting-sexual-orientation-and-gender-identity-expression-sogie</a></p> <p>Liz Wilhelm flyer? Info may go up onto the King County Public Health website</p>	

Agenda Item	Discussion	Implications/Action	Responsible Party
	<ul style="list-style-type: none"> <li>• Opportunity for prevention field to leverage virtual learning opportunities</li> </ul> <p>Virtual trainings happening from SDRG:</p> <ul style="list-style-type: none"> <li>• GGC</li> <li>• CTC Facilitator Training</li> </ul> <p>Connecting Program for Foster Care Givers – becoming available via The Alliance</p> <p>Prevention WINS is hosting a webinar on June 29th 1pm presented by our UW Public Health Capstone student titled Helping Them Quit. This is her work gathering and analyzing resources for adolescent nicotine vaping cessation and increasing provider knowledge and access to these resources.</p>		
<b>Next steps</b>	<p><b>September meeting topic suggestions:</b></p> <ul style="list-style-type: none"> <li>• Health Equity and Prevention / Health Disparities and Prevention</li> <li>• COVID and Prevention – Erica Austin on misinformation/media; telehealth; substance use changes</li> <li>• On-going studies related to COVID</li> <li>• Carrie McCarty at Seattle Children’s on changes in adolescent substance use during COVID</li> <li>• Bia: COVID: making cannabis and alcohol more available. Legal substance use during pandemic; mental illness. Market becoming essential business and the impact on use</li> <li>• Sept or Dec meeting thought: prep for upcoming leg. session. Back to points about expanding alcohol</li> </ul>	<p><b>Next meeting time/date: Weds, September 23, 2020</b></p> <p>Everyone – let Kevin and Brittany know of other researchers to invite to this group!</p> <p>Brittany and Kevin will meet to decide on agenda for September.</p> <p><b>4 hours too long?</b></p> <p>From Ramona Leber: Four hours of good information is GREAT! Ending early is OK, too.</p>	<p>Kevin and Brittany; support from Blair and Patricia</p>

Agenda Item	Discussion	Implications/Action	Responsible Party
	<p>policy, being ready to respond to new legislation, what we should be prepared for, research, etc. ?            Session starts in January. September would be ideal.            Want consensus statement ready at that time.</p> <p>Researchers of color to discuss health disparities and COVID?            Julie mentioned Oladunni Oluwoye, just nominated to be part of WSU prevention science faculty</p> <p>Other ideas</p> <ul style="list-style-type: none"> <li>• Eric – virtual mentoring</li> <li>• I REACH group at WSU – native populations</li> <li>• Foster youth/families</li> <li>• Connecting</li> <li>• Fostering Higher Ed – Amy Salazar</li> <li>• Kim Erins – youth coming out of justice system</li> </ul>	<p>From Sarah Mariani, HCA: works for me. i like the combo presentations and discussion</p> <p>From Eva Westley: The break is nice :) and it's helpful to see the agenda to know when popping in/out is ok. I like the variety of presentations!</p> <p>From jabailey: I think it's tough for an online meeting, yeah. I think 3 hours would be easier for me to maintain focus.</p> <p>From Erica Austin: Agree with other's comments</p> <p>From Liz Wilhelm: I think it's a good length, with the lunch break. There just are so many competing web meetings every day that we may lose people due to those other meetings.</p>	