Prevention Guide **MONTANA**



Marijuana and Developing Teen Brain

Driving Under the Influence of Marijuana

Identification of Effective Programs, Policies and Practices

The Good News

The majority of Montana high school students (60%) have never used marijuana



2019 Montana Youth Risk Behavior Survey

The Bad News

52%

In Montana, marijuana is the most commonly used drug among ages 12-17 who visit treatment centers for drug misuse or abuse. Over half of youth are being seen primarily for cannabisrelated issues.

2019 Montana DPHHS Medicaid Claim Treatment Data

The National Institute on

Drug Abuse... warns marijuana is linked with a range of lung conditions.

Same carcinogens as tobacco and in some cases a higher concentration. Smoke is typically inhaled more deeply and held longer than tobacco smoke, quadrupling the amount of tar deposited in the lungs.

Healthy Mind and Cognitive Impairment

Mixing any intoxicating chemical into the soft layer of a developing brain can forever alter the way it works.

Marijuana use affects the hippocampus creating deficits in verbal learning, verbal working memory and attention.

More frequent marijuana use is associated with discontinuous enrollment, skipping more classes, and lower GPA

of users become

dependent on

other substances, the

later the start, the less

likely the risk of

(Arria, et al., 2013, 2015)

Risk of Psychiatric Disorders

Individuals who used marijuana 10 or more times before the age of 18 were 2-3 times more likely to be diagnosed with schizophrenia.

12% of psychosis cases could be averted if cannabis use was prevented.

Additional studies encourage attention to cannabis use related to depression and suicide.

Marta Di Fori, et al. Lancet Psychiatry, 2019 Degenhart, et al. 2010 Sarafini et al. Frontiers in Psychiatry, 2013

Academic Failure

Substance-using students, compared with non-users, are at increased risk of academic failure, including dropout.

Marijuana has a stronger negative relationship to academic outcomes, such as grade point average and risk for dropout than alcohol does.

Those who began using marijuana in their teens showed a poorer ability to learn and remember new words by the time they reached middle age than people who started later.

DuPont et al. 2013.

Journal of the American Medical Association, 2016

Driving Under the Influence of Marijuana

Montana Law Annotated 61-8-401 Driving while under the influence of alcohol or drugs (DUI)

- The basis for the charge is evidence that a person's ability to safely operate a vehicle has been diminished by alcohol and/or drugs.
- Drugs include methamphetamine, marijuana (even if the driver is a registered card holder), illicit drugs, or any other drug, or any combination of drugs and alcohol that impair safe operation.
- With sufficient evidence that you are under the influence of drugs and/or alcohol, you can be convicted of DUI even if your BAC is below 0.08.

Montana Law Annotated 61-8-411 Operate a vehicle with excessive marijuana concentration



- With blood levels of 5 ng/ml of Delta-9-Tetrahydrocannabinol or more, a driver is presumed to be too impaired to drive safely. Effective October 1, 2013.
- With sufficient evidence of impairment, a person can be convicted of DUI with a THC level below 5 ng/ml.
- Applies to all commercial and non-commercial drivers, including individuals registered as cardholders with Montana's Marijuana Program.

Identification of Effective Programs, Policies and Practices

Developing and implementing effective marijuana policies necessitates building upon evidence-based practices and community values/opinions, flexibility and working with a variety of public agencies and private sector partners.

Montana Evidence-Based Work Group

To be included on the list of approved evidencebased programs for Montana substance use prevention, program effectiveness must be supported by one of the following:

Tier 1) Inclusion in a Federal registry of evidence-based interventions

Tier 2) Publication in a peer-reviewed journal

Tier 3) Documentation based on work group guidelines.

Effective & Promising Evidence-based Programs and Practices for Marijuana Prevention

Programs

- · American Indian Life Skills
- · Communities that Care
- Family Matters
- Good Behavior Game
- Guiding Good Choices
- Botvin Life Skills
- Lions Ouest for Adolescence
- Prime for Life
- Positive Action
- Project Northland
- Project Towards no Drug Abuse
- Prevention Plus Wellness
- Strengthening Families

Practices

- Mentoring Programs –
 Big Brothers Big Sisters
- Parent Engagement
- Media Campaign



Policy and Environmental Change

Talking with Municipalities:

- Zoning ordinances: banning the location of a dispensary within a certain distance of schools or parks, which are both locations where youth are found.
- Advertising/signage restrictions: restriction of public advertising or advertising within view or a certain distance from schools or parks.
- Local Tax Policies-prevention dollars from local taxes. Funds could purchase evidence-based curriculum to reduce youth marijuana use.

Schools:

- School policy review or development: does it include a referral program for education or treatment for students caught using marijuana?
- School policy development
- Choosing evidence-based programs, policies
- and practice

Coalitions:

- Promoting awareness of focus problems
- Social Norms Campaign
- Advocating for community policies

