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My initial thoughts:

I'm taking this

from: <u>http://healthvermont.gov/sites/default/files/documents/2016/12/ADAP_RPP_Guidance_</u> Document.pdf

With marijuana use, similar to prescription drug misuse and abuse, the body of evidence regarding effectiveness of prevention efforts is not as robust as underage drinking and binge drinking evidence. Again, reliance on theoretical support is necessary. Our Evidence-Based Work Group (EBWG) reviewed the existing literature on intervening variables and highlighted the following risk and protective factors statewide: Marijuana 1. Access

- 2. Perceived Risk—Health/School Failure
- 3. Parental Monitoring
- 4. Perceived Risk—Legal
- 5. Peer Norms

Basically, Vermont is still learning what type of prevention efforts work with marijuana prevention. As a state, Vermont, is much better with underage drinking as this has been a long-term issue. The RRP grant has some requirements. "For this grant, communities are REQUIRED to implement specific interventions and activities from the policies/systems, community, and organizations levels. Interventions and activities can also be selected from the other levels of the model if a community identifies a need and can justify how these activities will enhance their comprehensive approach and contribute to population-level change.

REQUIRED:

Local policy enhancements Specific policy focus to be determined by regional assessment. Some examples include:

- Restrict location / hours of operation of retailers selling products prohibited to minors
- Restrict advertising/promotion
- Language in regional or town plans establishing principles related to marijuana use

What I see is that the first two requirements are based on the assumption of retail marijuana dispensaries. Restricting advertising/promotion could also be applied towards our medical marijuana dispensaries.

I'm pointing this out because this is what currently exists. This grant rolled out in October of 2015. Based on the current marijuana proposal because there is no Marijuana-Tax system in place, I'm curious if there will be NEW money available for prevention efforts. Not all towns (South Burlington included) benefit from the current

RPP funding. South Burlington School District did not qualify for a School Based Substance Abuse Services. What I do know from previous experience when we were grant funded is that there is A LOT of paperwork requirements and specific requirements such as utilizing a specific research-based curriculum in health classes that don't always fit the needs of the students or the time allotted. It was a flop when we tried it at the high school. Grant funding in some ways ties people's hands as you know.

I do, however, see that there are plans in development for 2017 of targeting youth specific to marijuana. Informational materials are great but not a strong approach in my opinion. What I have seen success in is PACT here in South Burlington. Community-based efforts focused on dialogue between young people and adults around topics generated by our students. PACT is not grant funded so we have this wiggle room. People attend these community gatherings. When our SRO and I tried rolling out substance-related workshops over the past 13 years, they were NEVER attended. Workshops and parenting educational programs aren't very popular in South Burlington.

What do we need? More money for people like me in all schools. I'm also curious how enforcement will happen. How will the in-home grows be monitored. If it is to be by police, they will need much more funding. I'm sure law enforcement will need much more training for Drug Recognition Experts as there is no current road-side test for marijuana use as I understand it. I also wonder if our K-9 drug dogs are perhaps being phased out of marijuana detection like they have been in Colorado. I also know that there will need to be training for faculty and staff at schools and people to do these trainings because marijuana will become more of an issue in our schools. Our State nixed ACT 51 requirement for our educators quite a number of years ago that minimally required teachers to received drug/alcohol training every 7 years.

These are my initial thoughts on the information you sent me.

I'm continuing to reach out to D.C. school administration and to law-enforcement and will let you know what I find out. I'll be hopefully having a phone conversation today with the Commander for the School Safety Division so that I can access the School Resource Officers.