

Alcohol and Drug Policy Council
Prevention Subcommittee

Meeting Summary

Meeting Date/ Location:	Monday, August 16 th , 1:30PM-3:30PM, Microsoft Teams Meeting	
Participants in Attendance	<p>In Attendance: A. Lyon; B. Kanehl; I. Gillespie; R. Anderson; Szalkiewicz, S; Stonger, J; Zambetti, C; Meredith, C; Lake, D; Thangada, S; Rao, S; Rickles, N; Marriot, R; Ungemack, J.</p> <p>New Members:</p> <p>Guests: Tara Rajan, Fellow, Office of the Governor; Gillian Schauer, Consultant; Jessica White (GPP); Abby Alter; Melissa Sienna</p>	
TOPIC	DISCUSSION	ACTIONS / DECISIONS
1. Welcome /Review of Minutes	The meeting started at 1:31PM with introductions of members and guests, and a review and acceptance of the minutes.	Minutes were approved as they stand
2. Presentation on Cannabis Use and Resources	<p>Tara Rajan, Fellow with the Office of the Governor, presented on implications of cannabis legalization based on data from other states who have legalized adult use – largely CO, OR, WA, AK. Data is preliminary and should be interpreted with caution. Results that show increases in use may be an artifact of an increase in testing after legalization, and people may become more transparent about their use.</p> <p><u>General Trends:</u> MJ usage will increase. There is a marginal impact on poison control centers. Hospital and emergency department visits increase. Chronic use is associated with impairments in attention, verbal memory, and decision-making. Chronic use also is associated with mental health disorders particularly psychotic disorders. MJ use negatively impacts driving ability, may impact DUIs, crashes and fatalities. Impact of adult MJ use on crime rates is mixed with CO, AK reporting increases in illegal growing, while states report violent crime is unchanged. MJ use is associated with other co-morbidities such as other drug use, and an increase in homelessness particularly among populations with access and proximity to MJ.</p> <p><u>Mental Health Impacts:</u> Early use is associated with worse outcomes, other SUDs, and MH conditions including generalized anxiety.</p> <p><u>Adolescents & Children:</u> Chronic use is associated with impaired cognition, altered brain development, decreased school performance, increases in future SUDs, and attention impairments. The results are mixed with respect to changes in adolescent use after legalization – some states report increases, some report decreases. Normalizing of cannabis use is documented among adolescents who perceive less harm, view MJ as safe and having numerous health benefits and hold a belief that everyone is using. Permissive attitude and risk may translate to increase sales to</p>	<p>PPT on this presentation was shared via email on 8/16/2021.</p> <p>Requests were made for the joint Yale/UConn White Paper to be shared with this subcommittee and the Full Council</p>

	<p>minors. Child unintentional pediatric exposure to cannabis increased 30% in state that have legalized adult use cannabis.</p> <p><u>Communities of Color:</u> Paucity of data. Disparities in cannabis related arrests, largely for illegal selling, wide among white and black adults. Communities of color often are under-represented in the formal cannabis industry.</p> <p><u>Key Takeaways:</u></p> <ul style="list-style-type: none"> • Public Health messaging to avoid chronic use • Materials to address misconceptions/social norms re: cannabis risks to prevent problematic use • Child resistant packaging and safe storage, as well as protection from second-hand smoke • Prevent under-age sales • Ensure health care professionals are trained in cannabis emergencies • Social Equity Council – ensure communities of color not adversely impacted. <p>Information on potential drug interactions: Medicinal Cannabis—Potential Drug Interactions (nih.gov)</p>	
<p>3. Cannabis Media Campaign Considerations</p>	<p>Gillian Schauer presented on what other states have done to educate the public about cannabis. Science is nascent at this point, there is little known about the health effects of cannabis. Evaluation data is correlational, not causal, which presents a challenge to messaging when the scientific foundation is weak. She suggested that messages be rooted in meta-analyses and cited these two reports as source documents:</p> <p>Nati'l Academy of Sciences 2017 Report: Health Effects of Marijuana and Cannabis-Derived Products Presented in New Report National Academies</p> <p>Impacts of Marijuana Legalization in CO, 2021: Impacts of Marijuana Legalization in Colorado: A Report Pursuant to C.R.S. 24-33.4-516, July 2021 (state.co.us)</p> <p><u>States Generally Followed a Similar Sequential Approach</u></p> <ol style="list-style-type: none"> 1) Educate public about the law to avoid misunderstandings 2) Focus on impacts – like DUI 3) Messaging for kids and trusted adults specifically 4) Special populations (heavy use, pregnant women, early initiation, etc.) <p>States used a variety of media (TV, digital, etc) and there is a wide range of budgets. California spent \$1-\$2M on an all digital campaign, Colorado spent \$5M on their “Good to Know” campaign – and this is probably the level that is needed for an effective campaign.</p> <p><u>Youth-focused campaigns</u> lessons learned: Careful messaging is critical, avoid: preachy tones, scare tactics, biased point of view.</p>	<p>PPT on this presentation was shared via email on 8/16/2021.</p>

	<p>Parents, Trusted Adults, Mentors lessons learned: should be connected to the youth campaign about how to talk to kids about cannabis. Need to identify the messages that resonate with the public especially when you have Medical MJ, adult use, and CBD available (avoiding mixed messages). So far, evaluation have been focused on only short-term outcomes, so evidence of impacts are limited. Suggestions: Infant Risk may be a resource for breastfeeding mothers, connecting to the FASD/SEI initiative at Wheeler Clinic and including this activity within the roll out of the five-year strategic plan.</p> <p><u>Best Practices:</u></p> <ul style="list-style-type: none"> • Start as soon as legal, before stores open • Continue beyond market opening (short campaigns don't work well) • Integrate into a comprehensive cannabis and PH program • Use data-driven campaigns, and know the limits of the data • Use trusted messengers (e.g., bud tenders) • Focus on most immediate PH needs first • Translation into other languages is often insufficient • Build & leverage healthcare and community partnerships to reach hard-to-reach populations • Use a formative process – 1) Identify the 'right message' for the pop/sub-pop; 2) media buy – be sure people see it; 3) Coordinate the messaging with other stakeholders so there isn't confusion 	
<p>4. Workgroup & Member Updates</p>	<p><u>Workgroup update: Cannabis</u></p> <p>Carol is looking to convene a diverse group of stakeholders to fulfill the mandate in Sec 65 of the Cannabis legislation including crafting recommendations to the ADPC, developing a Request for Information (RFI) for a media consultant and choosing the consultant; and preparing a report to the legislature.</p> <p>An invitation to participate will be extended to the membership at the Full Council on 8/17/2021.</p> <p><u>Member Updates:</u></p> <p>August 31st: International Overdose Awareness Day – events around the state. Be on the lookout for venue changes from in-person to virtual.</p> <p>September 9th: ATTC Cannabis Workshop. Registration via CT Clearinghouse.</p> <p>December 10th: Save the Date for the Media & Stigma workshop</p>	<p>Please email Carol Meredith if interested in helping to work on cannabis media campaigns and policies etc.</p>
	<p>The meeting adjourned at 3:14pm.</p> <p><u>Next Prevention Subcommittee Meeting:</u> Monday, September 20th 1:30 – 3:30pm</p> <p><u>Next Full ADPC Meeting:</u> Tuesday, August 17th 10:00am-12:00pm</p>	