

2012 Community Assessment:
San Diego County Marijuana Prevention Initiative
Summary of Findings



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Introduction

The Marijuana Prevention Initiative aims to reduce youth access to marijuana by increasing public awareness of the adverse effects resulting from youth marijuana use. A contract for Marijuana Prevention Initiative Facilitation Services was awarded in May 2012 with the County of San Diego Health and Human Services Agency (HHSA). The campaign will be community-based and utilize the Strategic Prevention Framework (SPF). The SPF executes a data-driven, five-step process including: needs assessment; capacity building at the local level; strategic plan development; implementation of data-driven and evidence-based prevention programs, policies and practices; and evaluation of program effectiveness. Sustainability and cultural competence are integral components throughout the five steps of the SPF process (SAMHSA, 2011).

One of the initial components of *Step 1: Assessment* (i.e., of the SPF process as it pertains to marijuana use prevention among youth and young adults ages 12-25) is the development of a Community Assessment report. Development of the report included obtaining and reviewing relevant data on the problem and impacts of youth access and use of marijuana in the region. Available quantitative data pertaining to youth perceptions of marijuana use also were gathered and documented. Additionally, qualitative data were gathered systematically through semi-structured interviews with County contracted regional Alcohol and Other Drug (AOD) prevention services providers. Lastly, a Community Assessment Meeting was held to share data collected to date and obtain initial feedback. Those in attendance were County staff, contracted AOD Regional Prevention Providers, and other stakeholders involved in youth marijuana use prevention.

The purpose of the Community Assessment was to begin to lay the groundwork for developing the strategic prevention campaign designed to (1) increase perceptions of harm as it pertains to youth marijuana use and (2) reduce youth use throughout the region. Data indicators and interview findings together helped to establish a baseline of community needs, resources and challenges for addressing youth marijuana use countywide. The findings, including national and county-level data, are included in the current report. Also included are interview findings and Community Assessment Meeting feedback.

Interviews with Regional AOD Prevention Providers

In addition to analyses of extant data, including results of the San Diego County Community Perception Survey administered countywide in 2011 and reviews of regional annual work plans, the Marijuana Prevention Initiative conducted a series of discussions with County contracted Regional AOD Prevention

Providers using a semi-structured interview protocol. Interviews with staff from the six County contracted Regional AOD Prevention Providers garnered information on local efforts in the areas of data sources, problematic areas, prevention successes and regional challenges. Themes common among all of the regions are presented below.

Data Sources

- The most commonly reported data source relied upon is the California Health Kids Survey (CHKS). The CHKS is a comprehensive effort to assess youth health risks and resilience, and is a standardized and validated survey/data collection tool. It consists of a required Core Module and can be easily customized to meet local needs, interests, and standards. Data from the CHKS is useful for tracking youth alcohol and substance use trends across time, as well as monitoring change over time relative to perceptions of perceived AOD harmfulness.
- Some regions utilize available data from youth marijuana treatment admissions and marijuana-involved youth arrests.
- Other community and collaborative data collection work includes observational assessments of school campuses and marijuana outlets as well as reviews of special events and outdoor venues. Lists of smoke-shops and dispensaries have been developed to monitor proliferation of these businesses and youth access.

Resources Dedicated to Marijuana Prevention

- The percentage of regional resources dedicated to youth marijuana prevention compared with other county AOD prevention initiatives varied somewhat by local need, but consistently fell below the level of resources allocated to the Binge and Underage Drinking Initiative.
- Although limited time and budget resources for youth marijuana prevention were discussed, the need for a clear and cohesive plan also was cited.

Successes

- Prevention efforts to address youth access or use of marijuana included:
 - Active community partnerships, including working relationships with law enforcement and other key stakeholders
 - Effective use of media opportunities
- Timely responses to requests for education and information from schools and other groups working with youth.
- Engaging community members concerned about the impacts of youth access and use of marijuana.
- Youth involvement in marijuana prevention efforts.
- Local community forums to inform the public about the risks and realities of youth marijuana use.
- The use of substance abuse clauses (including marijuana) in the existing social host ordinances.

Challenges

- “Very low” perception of harm associated with youth marijuana use.
- Increase in availability of marijuana.
- Normalization of youth use by peers, parents and media.
- High levels of marijuana use reported on school campuses.
- Intergenerational use, especially parent-to-child, may not be uncommon.
- Lack of data to determine where youth are gaining access to marijuana.

Other: Synthetic Drug Trends

Youth access to illegal, unsafe and sometimes poisonous synthetic drugs is a regional, state and national concern. Synthetic chemical drugs known as “Spice” or “K2” and “Bath Salts” have become associated with marijuana in part because of their access in retail outlets that sell tobacco and other drug paraphernalia. Although a marijuana-like “high” is sought from “Spice,” it contains no THC, the active ingredient in marijuana. An opposite stimulant effect can be achieved with Bath Salts, but the drugs only have in common their danger, methods of abuse and their multi-layers of legal bans.

While acknowledging that its exact place in marijuana prevention is not clear, most regional providers utilized some resources for outreach and education regarding the abuse of synthetic drugs, such as Spice and Bath Salts. Challenges in this area include:

- Current local data is not available.
- Consequences of long-term use are unknown.
- Policies and law enforcement response are uneven between jurisdictions.
- Legislation is unclear or possibly conflicting.

Community Assessment Meeting

The Community Assessment Meeting, facilitated by the San Diego County Marijuana Prevention Initiative, was conducted to inform County funded Regional AOD Prevention Providers about the Initiative plans and to further inform the Countywide Initiative about regional-level efforts focusing on youth access, youth use, and perceptions of harm pertaining to marijuana.

The objectives of the Community Assessment Meeting were to introduce the Initiative, present collected data and share information. It was also an opportunity to gather feedback from the Regions to incorporate into the Assessment and the strategic prevention campaign. Following are sample results from the Community Assessment meeting:

- Proposed marijuana-related questions to be added to the California Healthy Kids Survey (CHKS), Module G were presented to meeting attendees. The CHKS is administered to middle and high school students approximately every two years and is useful for monitoring trends over time.

Meeting participants suggested rephrasing of items and several response options. This information was shared with those tasked with adding the items to the CHKS Module G.

- In response to a presentation of information/educational materials suitable for 18-25 year-olds, the development of similar materials for 12-17 year-olds was encouraged.
- A draft prevention brochure focusing on youth access and use of marijuana was reviewed. Feedback included ensuring that youth participate in the design and review of the brochure for 12-17 year olds to ensure that messages are well-framed for and received by youth.
- All agreed that engaging youth in the development of materials and in ongoing efforts to address youth marijuana access and use is important.
- The ongoing exchange of ideas and sharing of data or materials was encouraged.

As stated, profiling the needs, resources and readiness of the community marks the beginning of the Strategic Prevention Framework: Step 1 Assessment. The Community Assessment will eventually be followed by the capacity, planning, implementation and evaluation phases. Some of the next steps that have been identified through the Community Assessment also include:

- Continue to identify, obtain and share relevant data, such as:
 - Marijuana use among 12-25 year olds by Region
 - Additional sources for marijuana use and perceptions of harm for 18-25 year old San Diegans
 - Relationship between marijuana use and other risky behaviors
 - Youth knowledge of marijuana's effects on health and education outcomes
- Develop effective media advocacy to address youth access and use of marijuana
- Continue to develop Marijuana Prevention Initiative materials for dissemination to parents, youth, and other key stakeholders
- Plan and convene the first Youth Access Work Group meeting

Relevant Data

The following section of the report consists of key data indicators documenting use, attitudes and perceptions pertaining to youth marijuana use, including trends across time.

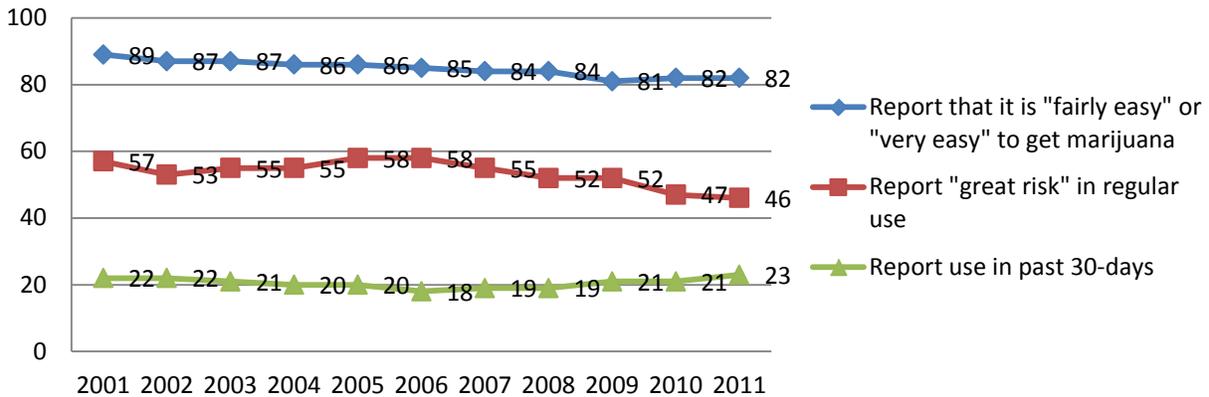
National Data

Across the nation, the percentage of 12th graders who admit to marijuana use in the past 30 days has been increasing since 2007 (see **Figure 1**). At the same time, fewer students have reported great risk in regular marijuana use. In 2011, less than half of high school seniors perceived great risk in regularly using marijuana.

Compared to 2001, there were fewer 12th graders reporting that marijuana is “fairly easy” or “very easy” to get in 2011. Curiously, more students reported that marijuana was “fairly easy” or “very easy” to get in 2006 than in 2011, yet past 30 day use was lower in 2006 than in 2011.

Figure 1: 12th graders' marijuana use, access, and perceived risk

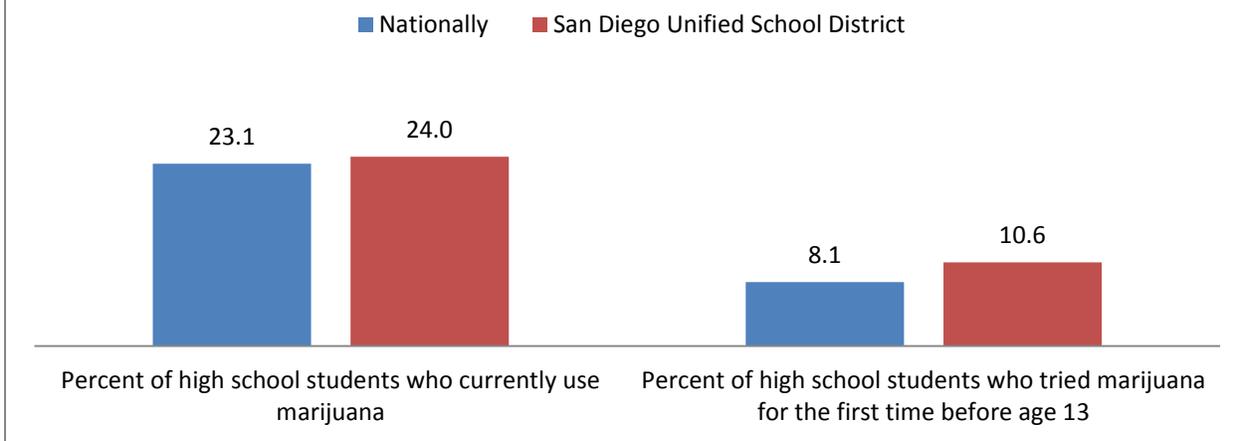
Source: University of Michigan, Monitoring the Future Survey



As **Figure 2** indicates, San Diego youth marijuana use was only 0.9% more than it was nationwide in 2011. Adolescent first-time use before age 13 was 2.5% higher among San Diego students.

Figure 2: Current use and age of first use

Source: Center for Disease Control, Youth Risk and Behavior Survey, 2011



Local Data

Trends in San Diego County youth marijuana use resemble national trends. As **Figures 3 and 4** show, lifetime and past 30 day use have increased steadily over the past four years. However, marijuana use was not as high in 2011 as it was in 1999. Youth marijuana use was at a 10-year peak in 1999, and it subsequently decreased until the mid-2000s.

In contrast to trends in marijuana use among older students, use among 7th graders has not changed substantially over the past 10 years. Since 1999, past 30 day use has remained between 4-6%, and lifetime use has remained between 7-10%.

Figure 3: San Diego County students reporting use in their lifetime

Source: California Healthy Kids Survey

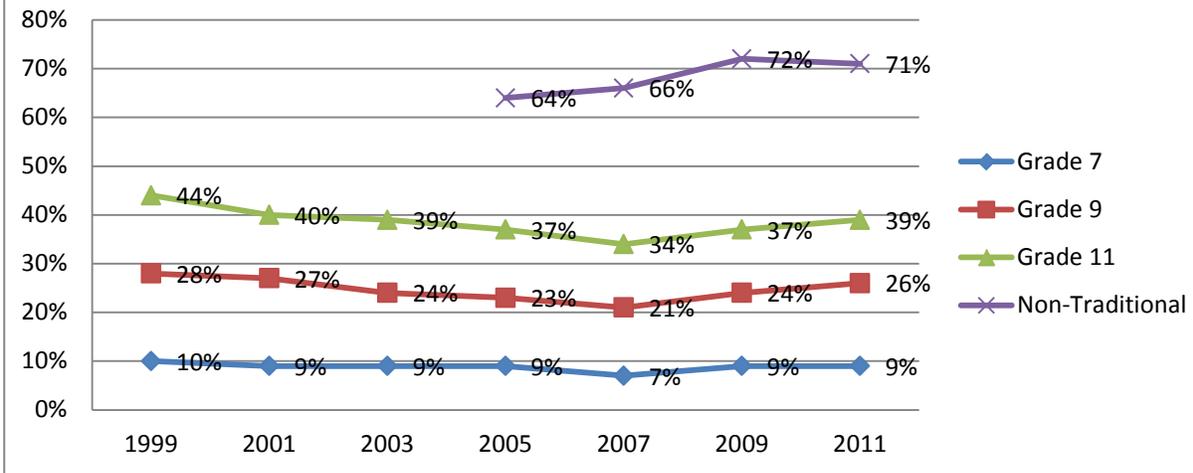
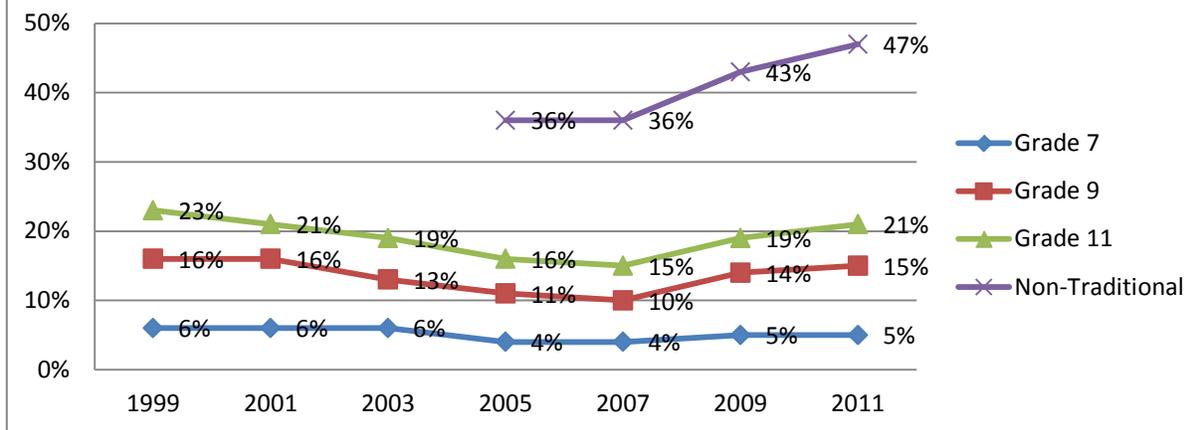
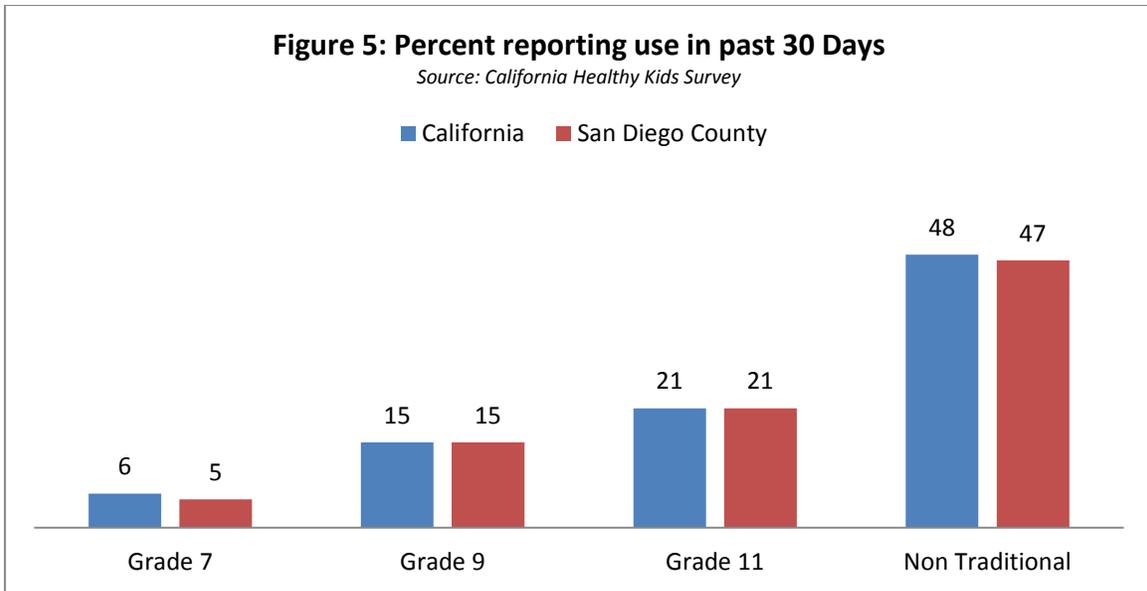


Figure 4: San Diego County students reporting use in the past 30 days

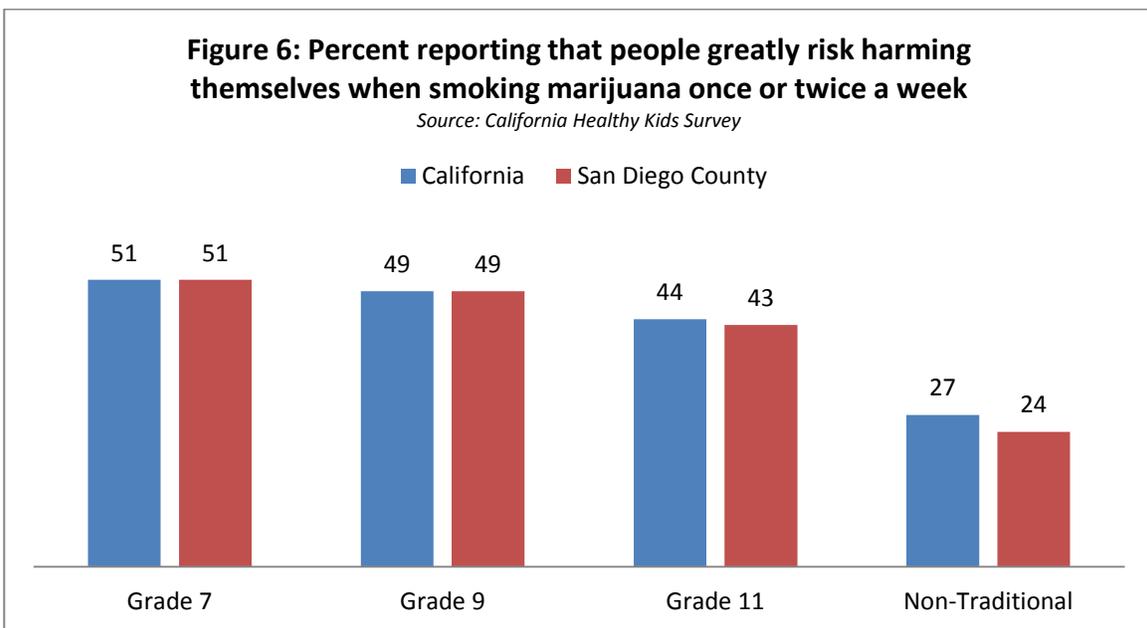
Source: California Healthy Kids Survey



As can be seen in **Figure 5**, youth marijuana use in San Diego County is on par with youth use across California. Among 11th graders, approximately 1 in 5 report using marijuana sometime in the past 30 days. Almost half of non-traditional students report using marijuana in the past 30 days.

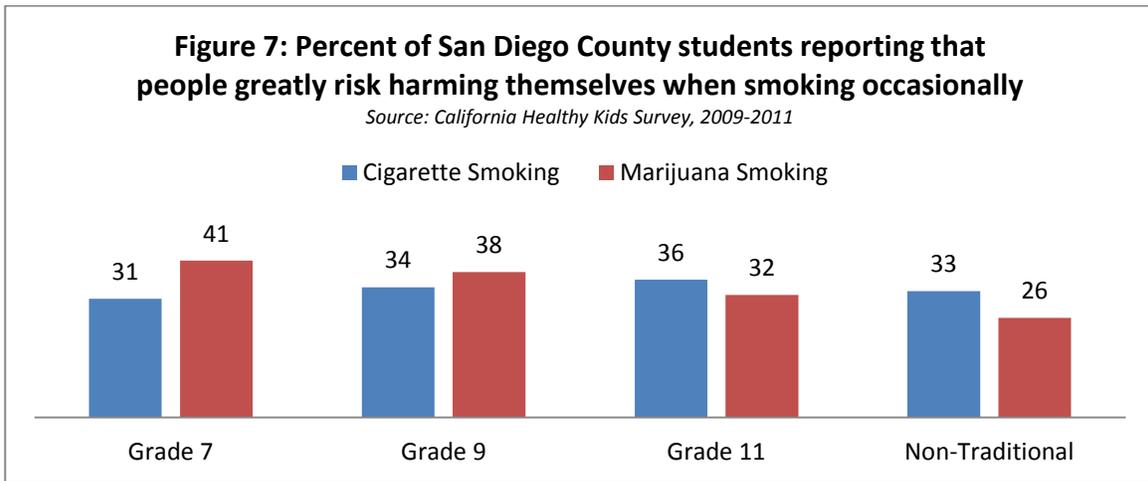


San Diego County students and students across California also share similar perceptions of the risks of smoking marijuana once or twice a week (see **Figure 6**). Almost half of 7th graders across California and in San Diego County do not perceive a great risk in smoking marijuana once or twice a week. Both in San Diego County and across California, older students perceive less risk in smoking marijuana than younger students. Only 43% of San Diego County 11th graders report that people greatly risk harming themselves when smoking marijuana once or twice a week.



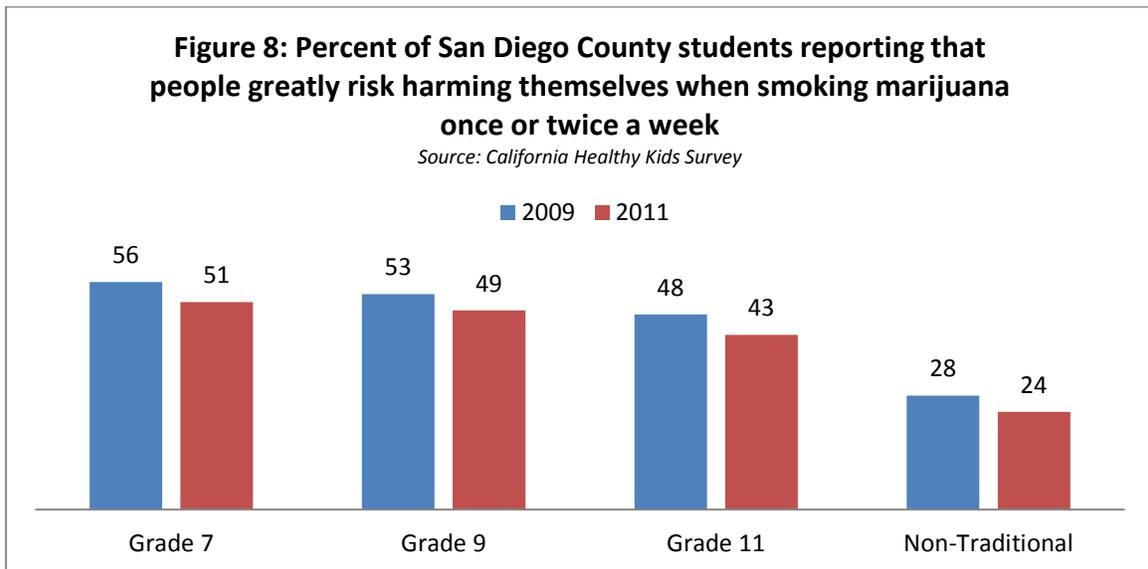
As can be seen in **Figure 7**, older students also more frequently report harm in occasionally smoking cigarettes compared to occasionally smoking marijuana. Among 11th graders, 32% report that people

greatly risk harming themselves when smoking marijuana occasionally, yet 36% report that people greatly risk harming themselves when smoking cigarettes occasionally.



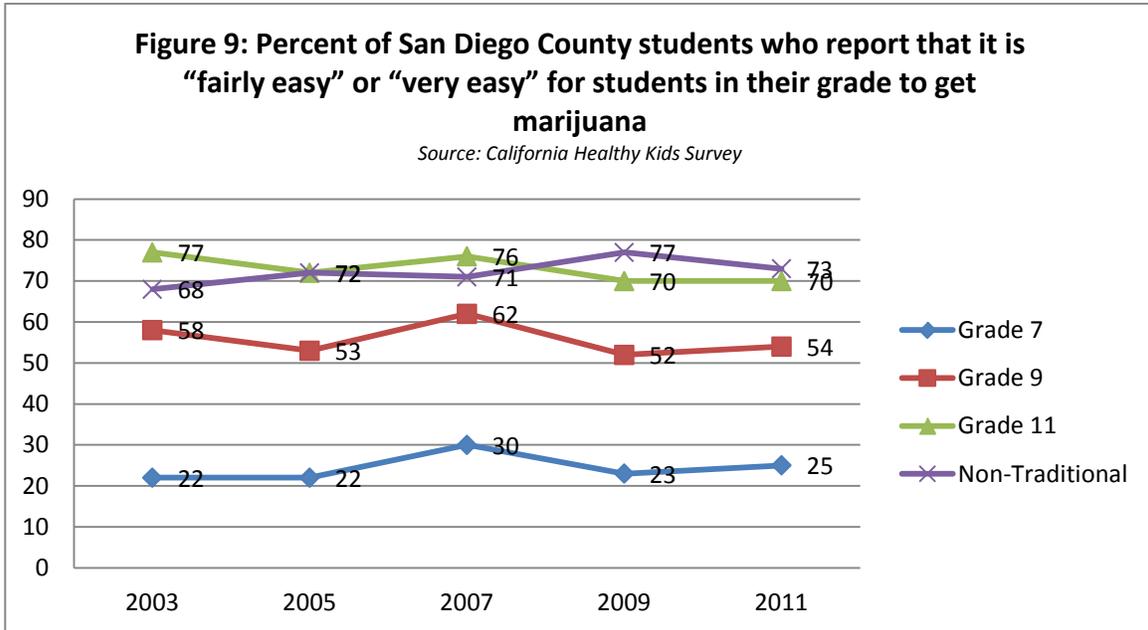
Similar to their peers across the nation, San Diego County students perceived frequent marijuana use as less harmful in 2011 than in 2009. In 2011, between 4-5% fewer students reported that people greatly risk harming themselves when smoking frequently.

Figures 7 and 8 also highlight different perceptions of occasional and frequent marijuana smoking. Compared to occasional marijuana smoking, approximately 10% more 7th, 9th, and 11th graders perceive great risk in smoking marijuana once or twice a week.



Similar to national trends in ease of access, San Diego County trends in youth perceptions about ease of access point to a curious relationship between marijuana use and ease of access. In 2011, fewer

students reported that marijuana was “fairly easy” or “very easy” to get than in 2007 (see **Figure 9**). However, more students reported using marijuana in 2011 than in 2007. In 2011, 70% of San Diego County 11th graders reported that it is “fairly easy” or “very easy” for students in their grade to get marijuana.



Looking Ahead

While much was learned through the processes and methodologies employed in executing the initial county-level Community Assessment, continuous work lies ahead. More local data are needed, strategic partnerships with common prevention goals must be formed and sustained, best practices and evidenced-based interventions and strategies must continually be reviewed and implemented to help shape and inform the San Diego County Marijuana Prevention Initiative, and effective youth marijuana prevention activities must continue within each of the County’s six regions in order to achieve the goals set forth for the Initiative.