Countering Pro-Marijuana Influences in the Community – Findings from a Service to Science Evaluation Enhancement

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NCPC Region

NCPC serves the North Coastal cities of Carlsbad, Oceanside and Vista in San Diego County, which consists of a primarily suburban population of over 350,000.

NCPC efforts focus on community level changes to impact substance abuse issues including access, availability, and community norms.

Vista Community Clinic serves as the fiscal agent for NCPC grants and contracts. Primary funding is from the County of San Diego, HHSA, Behavioral Health Services through the federal SAPT block grant prevention funding.
Negative Effects of MJ Use**

- D - Dependence
- D - Driving
- U - Underachievement
- M – Mental illness
- B – Bad to worse
  (Gateway ?)

From presentation by Dr. Kai MacDonald, MD, FAPA
Health Sciences Assistant Clinical Professor, Department of Psychiatry and Family and Preventative Medicine, UCSD
**November 2005** – San Diego County Board of Supervisors decided to face legal action rather than set up a state-ordered medical identification card and registry program. CA Supreme Court refused to hear appeal in 2008.

**May 2009** – The US Supreme Court refuses to hear case filed by San Diego and San Bernardino Counties challenging Prop 2015

**May 2009** – Oceanside City Council adopts temporary ban on dispensaries

**July 2009** – San Diego County Health Department begins issuing Medical Marijuana ID cards

**March 2011** – San Diego City Council approved zoning regulations for dispensaries; proponents opposed restrictions and collected signatures to place issue on ballot

**October 2011** – Federal prosecutors crack-down on dispensary operators.
January 2012 – City of Poway bans dispensaries

November 2012 – Voters reject dispensary ballot initiatives in the cities of Del Mar, Solana Beach, Imperial Beach and Lemon Grove

May 6, 2013 – The CA Supreme Court ruled local governments can use land use and zoning powers to prohibit storefront dispensaries.

March 2014 – The city of San Diego approves ordinance to regulate dispensaries with a max of 4 per council district (36 max in city).

June 2014 – Oceanside City Council upholds its ban on dispensaries.

October 2014 – The city of San Diego approves its first dispensary.

November 2014 – Voters reject dispensary ballot initiative in the city of Encinitas.

June 2015 – The city of San Diego approves it’s 8th dispensary; total expected to be 11-14 rather than 36 due to zoning restrictions.
Health Advocates Rejecting Marijuana (HARM) Campaigns

1. Smoke shops and drug paraphernalia
2. Street fairs and outdoor venues
3. Retailer campaign
4. Dispensaries (i.e. ‘pot shops’)
5. Media normalization
Restricting Smoke Shops Campaign

• In 2003, Oceanside adopted an ordinance classifying smoke shops as adult businesses which limited the areas where they could locate.

• In 2009, law enforcement and San Diego County District Attorney conducted operations to eliminate the sale of drug paraphernalia, seizing over 35,000 pipes.

• Following that operation, this newly opened smoke shop in Vista closed down.
Street Fairs & Outdoor Venues Campaign
Street Fairs & Outdoor Venues Campaign

• In 2006, Oceanside Chamber of Commerce became the first to implement street fair vendor policy stating:
  “The sale of tobacco, tobacco/drug paraphernalia, or any item that promotes the use of illicit substances is prohibited.”

• Now adopted by over 20 street fairs, as well as the San Diego County Fair, this policy impacts over 2 million people who attend these events.
Ongoing Monitoring Necessary

Vendor at a Día de los Muertos event at Mission San Luis Rey in Oceanside
Pro-drug messages are not just found on t-shirts, but also on sandals, belts, hats, shoes, pins and underwear.
Community and coalition leaders advocate to keep pot shops out of our communities.
Community and coalition leaders keep pot shops out of our communities.

Marijuana Dispensaries Campaign
Media Normalization efforts addressed many topics, such as radio stations’ promotion of marijuana at 4:20, a Jack-in-the-Box drive-through commercial, and a dispensary advertising section in our local daily paper.
Service to Science Evaluation Enhancement

- Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) Initiative designed to enhance the evaluation capacity of local innovative programs and practices.
- Included one year of technical assistance.
- Received funding in 2013 to conduct evaluation enhancement.
- Partnered with the Department of Sociology at California State University San Marcos (CSUSM) and Policy Solutions Group.
Evaluation Effort

- Longitudinal quantitative analysis of CA Healthy Kids Data (CHKs), comparing NCPC region with other areas of CA.
- Qualitative components conducted as Participatory Action Research to contextualize the findings.
- Creation of summary documents to share findings.
  - http://northcoastalpreventioncoalition.org/programs/marijuana-prevention/
    (scroll to bottom of page)
Quantitative Data - CHKS

Descriptive Statistics:
• A total of 153,274 students.
  – From grades 7-11
  – Age 10 – 18 (average age just over 14)
  – 52.2% female, 47.8% male
• 118 schools in 12 districts
• Comparison districts were matched on:
  – Racial composition by district
  – School characteristics (% FRPM eligible, % ELL and % Special education)
Dependent Variables

• **Marijuana Usage in Last 30 Days**
  – Respondents were asked if they had used marijuana in the last 30 days, measured as “yes” or “no”

• **Marijuana Usage Over Lifetime**
  – Respondents were asked if they had ever used marijuana at any point, measured as “yes” or “no”

• **Ease of Access to Marijuana**
  – Respondents were asked how difficult marijuana was for students to get (“very easy”, “fairly easy”, “fairly difficult” or “very difficult”).
  – Variable was measured between those that found it accessible (easy & very easy) and those that found it difficult to obtain (difficult & very difficult)
Comparison Years

• Comparison ranges created since data not available for each year:
  • Baseline to Midpoint (98/99-04/05)
    – Reasoning: Earliest pre-program year of data to the year after all programs had been implemented
  • Midpoint to Endpoint (04/05-09/10)
    – Reasoning: Administration years
  • Baseline to Endpoint (98/99-09/10)
    – Reasoning: Earliest pre-program years to latest year of administration
Key Findings: Past 30-Day Use Baseline to Endpoint
Key Findings: Lifetime Use Baseline to Endpoint

Program
South 8.00%
Mid 3.70%
North 1.50%

0.50%
Key Findings: Marijuana Access
Baseline to Endpoint
Lessons Learned

• Look at your local community for opportunities to have impact
• Policies don’t always have to be laws (street fair vendor and retailer policies are voluntary)
• Monitor enforcement and/or compliance with policies. Be the ‘eyes and ears’ of your community
• Evaluating community-based changes is challenging
Let’s Be Blunt – YouTube Video

https://www.youtube.com/watch?v=2_a7VcoiecE

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