Marijuana's Hidden Costs: A Prevention Policy Initiative

Prevention defined in simple terms: *Stopping substance misuse and abuse before it starts.*

Stepping in before substance misuse and abuse begins because addiction is a pediatric-onset disorder: 9 in 10 adults with a substance use disorder initiated substance use before age 18. For youth, substance use is connected which means the use of any one substance (alcohol, nicotine, THC) increases the risk of using others. The most effective prevention addresses risk and protective factors. The more protective factors youth experience, the more resilient and the less likely they're inclined to harmful choices. More risk factors often result in opening the door to unhealthy coping mechanisms which increase the risk of addiction and the predictable strain on mental health, legal and jail services that addictive behavior leads toward.

Many Montana communities know what the best prevention practices and programs are for their youth because their coalitions have already done the legwork based on data (identifying prevalence of risks and protective factors with community youth) to develop the best approach. What prevention professionals need is reliable, responsible funding for a stable workforce to implement services and programs with fidelity and consistency.

2025 MAP Legislative Priorities

1. **HEART Funding must go toward primary prevention and intervention and it has not as of the beginning of 2024 despite being mandated by statute**. MAP will continue the effort to increase the HEART funding from $6 million to 11% of revenue generated from the marijuana tax. Healthy youth brain development is aided by strong, informed parenting, persistent educators, and connected community partners. The money generated by marijuana sales must be invested in evidence-based intervention programs for youth and adults to forestall the type of trouble Billings is experiencing which could very easily spread to the rest of the state. Youth have a clearer pathway to become Montana's future leaders and responsible taxpayers when they grow up in a substance free environment i.e. limited or no exposure to smoking, drinking, use of legal or illegal substances (marijuana, fentanyl, methamphetamine, etc.).
2. **Marijuana specific policy priorities beginning with enforcing current laws that are not being enforced including but not limited to; prohibition of advertisements aimed at young people on social media, print media, billboards, TV, radio, podcasts and other digital media.** Address access and availability issues and ensure the density of dispensaries in Montana's communities are not out of control since studies have linked higher densities to more use among youth. Promote dispensary worker education program and mitigate environmental concerns including the astronomical amount of water grow labs need. Implement mandatory reporting for public health data, including drugged driving, poison controls related to THC, hospitalizations and ER visits linked to marijuana, marijuana-induced psychosis, potency trends, environmental effects, worker THC testing rates, and impacts on children and youth.
3. **HB 872/Commission and General Funding**. With a unified voice MAP partners will ask for general funds to go to primary prevention to counteract the impression that there is little input to policy makers from so-called silent prevention professionals. MAP partners will present public and written comments before and during these meetings to promote community driven, evidence-based prevention solutions. Encourage a more robust prevention work force at the state level. Emphasize prevention from the whole continuum approach, not just crisis intervention, law enforcement, etc.
4. **Engaging Youth (Karen's pilot program in Billings to inform parents and have prevention taught in Health classes).** Promote this across Montana since the youth themselves will have tremendous impact as proponents.
5. **Remain flexible to contend with emerging issues and/or shifting priorities.**

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