CHILDREN & MARIJUANA: SAFE, UNSAFE, OR AT-RISK?

Jade Woodard, Colorado Drug Endangered Children
OBJECTIVES

- Review the current marijuana laws in Colorado
- Increase knowledge of the hazards to children of Marijuana Use, Distribution, & Cultivation
- Enhance ability to apply knowledge and make decisions on cases
Healthy Child Development

- Positive Caregiver Relationships
- Predictable Consistent Environment
Parental Substance Use

- Negative Impact on the Physical & Emotional Well-Being of Children
- Chaotic & Unpredictable Environments

SOURCE: Children’s Bureau (2009)
DRUG ENDANGERED CHILD

Children are drug endangered when their parent's or caregiver's substance use or involvement in the drug trade results in child abuse or neglect or interferes with their ability to provide a safe and nurturing environment.
150,000 CHILDREN IN COLORADO
LIVE WITH AT LEAST ONE PARENT WHO WAS DEPENDENT ON OUR ABUSED ALCOHOL OR ILICIT DRUGS IN THE PAST YEAR
(12% OF ALL U.S. CHILDREN).
CHILDREN WHOSE PARENTS ABUSE SUBSTANCES ARE 3X MORE LIKELY TO EXPERIENCE PHYSICAL, SEXUAL, OR VERBAL ABUSE AND 4X MORE LIKELY TO EXPERIENCE NEGLECT. ²
PARENTAL SUBSTANCE USE IS A FACTOR IN AS HIGH AS 50%-80% OF CHILD WELFARE CASES.
Every Day Effects

Children who grow up in drug environments may suffer from a wide range of problems:

- Lack of supervision
- Malnourishment
- Poor hygiene
- Exposure to violence and criminal activity
- Unsafe living environments
- Lack of structure
- Need for love, attention and connection
LONG TERM EFFECTS

Additionally, many children may continue to be affected by the long term impacts of living in drug environments. These impacts include:

- Social & emotional distress
- Developmental delays
- Health issues
- Increased risk of addiction
Children + Drugs = Risk

- All drug endangered children are at risk
- How much risk and risk for what varies

SOURCE: National DEC Core Training
Break the Cycle

- Prevention
- Intervention
- Treatment
- Recovery
MARIJUANA LAWS
Medical Marijuana

- November 2000- Colorado voters passed Amendment 20 to the State’s Constitution, effectively legalizing medicinal marijuana. The program went into effect June 1, 2001.

- Patient, Caregiver & Physicians Model
  - 6 plants/2 ounces
  - “Recommendations” not Prescriptions

SOURCE: Colorado Department of Public Health And Environment, 2012
If passed, Amendment 64 would regulate marijuana like alcohol, which means:

- **Use Responsibly**
  - **MUST BE 21+**
  - DUI and child access would remain illegal.

- **LICENSE**
  - Licensed wholesale cultivation and retail sales would be legal.

- **ID**
  - 1 oz or Less
  - 6 plants or Less

Adult marijuana possession, use, and cultivation would be legal.

Source: Marijuana Policy Project, 2012
(3) Personal Use of Marijuana. Notwithstanding any other provision of law, the following acts are not unlawful and shall not be an offense under CO law or the law of any locality within CO or be a basis for seizure or forfeiture of assets under CO law for persons 21 years of age or older:
(A) Possessing, using, displaying, purchasing, or transporting marijuana accessories or one ounce or less of marijuana.

1 Oz = 28 grams

Avg Joint = 0.5 - 1g

1 Oz = 30 - 60 joints
(B) Possessing, growing, processing, or transporting no more than six marijuana plants, with three or fewer being mature, flowering plants, and possession of the marijuana produced by the plants on the premises where the plants were grown, provided that the growing takes place in an enclosed, locked space, is not conducted openly or publicly, and is not made available for sale.
- Enclosed means a permanent or semi-permanent area covered and surrounded on all sides.
- Locked spaced means secured at all points of ingress or egress with a locking mechanism designed to limit access such as with a key or combination lock.
- If the cultivation area is located in a residence:
  - And a person under 21 years of age lives at the residence, the cultivation area itself must be enclosed and locked.
  - If no person under 21 years of age lives at the residence, the external locks of the residence constitutes an enclosed and locked space. If a person under 21 years of age enters the residence, the person must ensure that access to the cultivation site is reasonably restricted for the duration of that person’s presence in the residence.

House Bill 14-1122
(C) Transfer of one ounce or less of marijuana without remuneration to a person who is 21 years of age or older.

(D) Consumption of marijuana, provided that nothing in this section shall permit consumption that is conducted openly and publicly or in a manner that endangers others.

(E) Assisting another person who is 21 years of age or older in any of the acts described in paragraphs (a) through (d) of this subsection.
Local Ordinances

- Counties and municipalities have authority to ban or limit cultivation sites, product manufacturing, medical dispensaries, and retail centers.

- Some cities have limited the number of plants that can be grown in a single house — Denver's cap is 12 — and some cities have imposed other zoning or code restrictions on home-growing.

- Standard indoor growing conditions will yield about 2 ounces per plant.
Labeling Requirements

- Weight, Potency, Serving Size
- License & Batch Numbers
- Standard Symbol
- Warning Labels:
  - There may be health risks associated with the consumption of this product.
  - This product is intended for use by adults 21 years and older. Keep out of the reach of children.
  - This product is unlawful outside the State of Colorado.
  - There may be additional health risks associated with the consumption of this product for women who are pregnant, breastfeeding, or planning on becoming pregnant.
  - Do not drive or operate heavy machinery while using marijuana.
Packaging Requirements

- Packaging may not be designed to appeal to children.
- Product must be packaged in packaging meeting requirements established by the State Licensing Authority similar to the Federal “Poison Prevention Packaging Act of 1970”
- Placed in an opaque and re-sealable exit package or container at the point of sale prior to exiting the store, and the container or package meets the requirements established by the State Licensing Authority.
MARIJUANA USE
Use Rates

- Nationally, 12% of people aged 12 or over reporting use in the past year, with particularly high rates of use in young people.
- Most commonly used “illicit drug”
Colorado Adult Marijuana Use

- The average reported past month marijuana use for young adults (ages 18-25) in 2012:
  - National = **18.89 percent**
  - Colorado = **26.81 percent**
  - Colorado was ranked 3rd nationally in this age group for marijuana use in the past month (42 percent higher)

- The average reported past month marijuana use for adults (ages 26+) in 2012:
  - National = **5.05 percent**
  - Colorado = **7.63 percent**
  - Colorado was ranked 7th nationally in this age group for marijuana use in the past month (51 percent higher)

Source: 2011 NSDUH, SAMHSA
Impact on Youth

- Youth Disproportionately Affected
  - Perception of Risk & Rates of Use

- Addiction Potential
  - 1 in 6 Adolescents
  - 1 in 9 Adults
  - Physically & Psychologically Dependent

- Marijuana during adolescence toxic to brain development
  - Psychosis (2-4x)
  - Cognition
  - Verbal memory

SOURCE: Dr. Christian Thurstone, Denver Health, 2011
Colorado Youth Marijuana Use

Youth (Ages 12 to 17 Years)
Past Month Marijuana Use
National vs. Colorado

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<th>Year</th>
<th>National Average</th>
<th>Colorado Average</th>
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<td>7.60</td>
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<tr>
<td>2012</td>
<td>7.55</td>
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SOURCE: Data from SAMHSA.gov, National Survey on Drug Use and Health 2013
What is marijuana?

- Dried flower tops of the cannabis plant
- Contains over 600 chemicals, about 70 of which are cannabinoids
  - THC: Psychoactive, mind-altering effect
  - CBD: Therapeutic, sedative effect
- Hundreds of hybrid strains of varying strengths
  - THC Levels 1983: 4% average
  - THC Levels Today: 9-12% average
    - As high as 29% advertised
    - 121% increase from 1999 to 2010
Methods of Use

Inhalation
- Smoked
- Vaporized

Ingestion
- Food
- Drink

Topical
- Lotions
- Oils
Things to Know

- Topicals are NON-psychoactive
- Raw plant is NON-psychoactive
- Must heat plant material to temperature that releases active ingredients in THC
- The same product, same method of ingestion can effect a person differently at different times
- Eating cannabis is not the same as smoking it
Edibles

Edible Range = up to 100 mg
Edibles = 30 min to 4 hour onset

For comparison
5mg = 2 hits on a joint
35mg = an entire joint
130mg = an eighth ounce
Smoking = Instant Onset
Marijuana Exposure

- Rocky Mountain Poison Drug Control Center reports:
  - Significant increase in calls regarding marijuana exposures since 2006 – Colorado is triple the National Rate
  - 17.81% of marijuana-related exposures are kids ages 0 to 5, annual average for 2010-2013
Marijuana Ingestion

Marijuana Ingestion Among Children Under 12 Years-of-Age

- Common Symptoms: Respiratory Insufficiency, Somnolence
  - 7 Children in 2014 have required intensive care
  - High proportion of children under 5

SOURCE: Dr. George Sam Wang, pediatric emergency physician, Children’s Hospital Colorado, July 8, 2014
Secondhand Smoke

- Potential issue with any smoked substance – tobacco, marijuana, methamphetamine, crack, etc.
- No clear understanding today of the extent and potential impact of second-hand cannabis smoke exposure beyond the fact that it exists
- Child may test positive as a result of secondhand exposure

What is the impact on health, safety, or well-being of the child?
Vapor Pens

- Tobacco or Marijuana
- Dry Product or Concentrate
- Reusable or Disposable
- Flavored, Portable, Discrete
Marijuana Intoxication

- Impairs short-term memory
- Impairs attention, judgment, and other cognitive functions
- Impairs coordination and balance
- Increases heart rate
- Altered perception of time
- Occasionally - anxiety, fear, distrust, or panic
- High Doses - acute psychosis, which includes hallucinations, delusions, and a loss of the sense of personal identity

SOURCE: NIDA, 2014
Marijuana’s Effects on the Brain

HYPOTHALAMUS
Controls appetite, hormonal levels and sexual behavior

NEOCORTEX
Responsible for higher cognitive functions and the integration of sensory information

BASAL GANGLIA
Involved in motor control and planning, as well as the initiation and termination of action

HIPPOCAMPUS
Important for memory and the learning of facts, sequences and places

VENTRAL STRIATUM
Involved in the prediction and feeling of reward

CEREBELLUM
Center for motor control and coordination

AMYGDALA
Responsible for anxiety, emotion and fear

When marijuana is smoked, its active ingredient, THC, travels throughout the body, including the brain, to produce its many effects. THC attaches to sites called cannabinoid receptors on nerve cells in the brain, affecting the way those cells work. Cannabinoid receptors are abundant in parts of the brain that regulate movement, coordination, learning and memory, higher cognitive functions such as judgment, and pleasure.
Long Term Effects

Chronic and/or Heavy Marijuana Use

- Addiction - about 9% of users; 17% of those who start as teens; and 25-50% of daily users***
- Altered brain development***
- Poorer educational outcomes - dropping out of school***
- Cognitive impairments - lowers IQ in those who were frequent users during adolescence***
- Diminished life satisfaction and achievement - subjective and objective indicators***
- Chronic bronchitis symptoms
- Risk of chronic psychosis (schizophrenia) in vulnerable individuals

***Strongly associated with early onset during adolescence

SOURCE: NIDA, 2014
Poly Substance Use

According to the 2010 National Survey on Drug Use & Health:

- 31.8% of heavy alcohol users reported current illicit drug use
- 22.6% of current cigarette smokers reported current illicit drug use
- 66.2% of current cigarette smokers reported past month alcohol use
- 39.9% of current marijuana users reported current illicit drug use

Concurrent use of more than one substance may mask or alter affects of each substance or may result in conflicting cues

SOURCE: National Institute on Drug Abuse (NIDA), 2011
Dealing & Trafficking

Presence of:
- Weapons
- Money
- Packaging
- Paranoia

Exposure to:
- Potential for Violence
- Potential for Burglary
- Organized Crime
- Unpredictable Environment
- Unknown Adults

SOURCE: Detective Darren Bloom, Longmont Police Department, 2011
Growing & Cultivating

Presence of:
- Growing Rooms
- Processing Rooms
- Hash Oil Labs

Hazards:
- Electrical
- Chemical
- Air Quality
- THC
- Mold & Fungus

SOURCE: Detective Darren Bloom, Longmont Police Department, 2011
Hash Oil Labs

SOURCE: Detective Darren Bloom, Longmont Police Department, 2011
Hash Oil Lab Explosions

- Occurring on a regular basis (weekly)
- 31 from Jan to April 2014 (20 in 2013)
- 10 people treated for 2\textsuperscript{nd} & 3\textsuperscript{rd} degree burns
Resources

- Fire Department
- Law Enforcement
- Code Enforcement
- Public Health Department
- Others?
RISKS TO CHILDREN
Marijuana Use During Pregnancy

Substance exposed newborns are at an increased risk of:

- Premature delivery
- Low birth weight
- Neurological & Congenital problems
- Sudden Unexpected Infant Death
- Developmental delays
- Neglect or abuse (2–3 times higher)
- Mental health & substance abuse problems as adolescents & adults

No Known Safe Amount of Drugs or Alcohol During Pregnancy

***Except those taken as prescribed by Prenatal Care Provider

SOURCE: National Institute on Drug Abuse (NIDA), 2011
Marijuana & Pregnancy

- Lipiophilic Molecule – easily crosses the placenta and into breastmilk
- 4-5% use marijuana during pregnancy (estimates range from 2.5 to 27%)
- 60% of cannabis users continued to use ~10 joints/week throughout pregnancy (60-70% of the level of use the year before)
- Many women reporting cannabis use for nausea and vomiting during pregnancy

Source: Dr. Laura Borgelt, 2014
Prenatal Marijuana Exposure

Insufficient Evidence
- Not enough evidence to say whether prenatal exposure can affect psychotic disorders.

Mixed Evidence
- Research does not all agree about if there is a measurable effect on birth defects, premature birth, or on the growth or behavior of newborns and young children.

Limited Evidence
- The research is not strong, but it all agrees that there can be harmful effects such as increased risk of SIDS and more depression in school-age children.

Moderate Evidence
- There is even better research — and it all agrees — that marijuana exposure in pregnancy can result in learning problems as early as 3-6 years of age, also attention and behavior problems, and even more difficulty with thinking, problem solving and school success as children become teenagers.
- The research also agrees there can be decreased growth by 6-12 years of age.

Source: CDPHE Review of Available Research, 2014
Colorado Children’s Code 19-1-302(1)(g)

- (1) A child is neglected or dependent if:
  - (g) The child tests positive at birth for either a schedule-I controlled substance, as defined in section 18-18-203, C.R.S., or a schedule-II controlled substance, as defined in section 18-18-204, C.R.S., unless the child tests positive for a schedule-II controlled substance as a result of the mother’s lawful intake of such substance as prescribed.

- Tetrahydrocannabinol (THC) = Schedule I
  - Schedule I defined as no current accepted medical use and high potential for abuse. (CRS 18-18-203)
Key Messages During Pregnancy

**EDUCATE**
- Marijuana use – both inhaled and edible forms – should be avoided
- **Would you take an experimental drug during pregnancy that could lead to these types of outcomes?**

**UNDERSTAND**
- If using for medical reasons – women should talk with their doctor about the safest effective treatment for their nausea, vomiting, chronic pain
- If using for recreational reasons and cannot stop – seek help 1-800-CHILDREN or 1-866-LAS FAMILIAS

**PLAN**
- If baby tests positive at birth, plan for child welfare involvement
- If use will resume after birth, discuss breastfeeding and caretaking plans
Marijuana Use While Breastfeeding

- AAP states breastfeeding is contraindicated for women using marijuana
  - THC is excreted in breast milk
  - Lipophilic stored in fat – particularly concerning for breastmilk and ingestion by infants

- Clinical data suggests marijuana use during breastfeeding is dangerous for the infant
  - Decrease in Infant Motor & Psychomotor Development
  - Impact varies regular vs. occasional use
  - Infants should be closely monitored

- Infants test positive in urine screens for 2-3 weeks

Impact on Children

- Exposure/Ingestion

- Impaired Caregivers
  - Lack of Supervision
  - Lack of Necessities
  - Abuse or Neglect

- Injurious Environment
  - Access to Marijuana/Edibles
  - Access to Paraphernalia
  - Exposure to Violence, Criminal Activity
  - Cultivation Aspects
Gathering Information

Ask the Parent

- Tell me more about your use. How often? For what purpose? What are you like when you use?
- Where are your children when you use?
- How do you store your marijuana?
- What steps have you taken to protect your children?

Ask Yourself

- Do I believe that the conditions in this home could reasonably result in harm to a child?
Factors to Consider

- Age & Vulnerability of the Child
- Children’s Medical & Developmental Needs
- Accessibility of the Substance
- Sober Caregivers
  - Level of Impairment
  - Use Patterns
  - Presence of Other Caregivers
- Environmental Aspects
  - Second Hand Smoke
  - Cultivation Aspects
  - Distribution Risks
  - Living Conditions
  - Domestic Violence
Involving Child Welfare and/or Law Enforcement

- Mandatory Reporting
  - To have reasonable cause to know or suspect that a child has been abused or neglected.
  - To have observed conditions which would reasonably result in abuse or neglect.
  - Testing Positive at Birth

- Illegal Activity
  - Drug Distribution
  - Manufacturing
Key Messages

• Every child needs a safe, sober, appropriate caregiver – parent, grandparent, babysitter, etc.
• Provide appropriate supervision, nutrition, emotional connection
• Crisis Ready – able to respond and ensure child health, safety, and well being in any situation

Safe Sober Caregiver

Drug & Paraphernalia Storage - lock box, child proof packaging, *stash your stash*

Environmental Factors – homes free from drug dealing, meth labs/chemicals, unsafe mj grows, hash oil labs, violence, strangers, criminal activity

Safe Healthy Home
Referring Families to Support

Educate parents on where to find help

- 1-800-CHILDREN or 1-866-LAS FAMILIAS
- 211
- Family Resource Centers

http://www.cofamilycenters.org/
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