

Parent & Community Resource Guide



Creating a healthy, engaged, and unified community for our youth.

What is the Frenchtown Community Coalition?



The Frenchtown Community Coalition (FCC) is an underage substance use prevention coalition located in Frenchtown, MT. Since being established in 2008, the goals of the coalition are to: 1) establish and strengthen community collaboration to support local efforts in preventing youth substance use, and 2) Reduce youth substance use and misuse. Through extensive youth engagement and collaboration between community sector representatives, the FCC works to reduce risk factors and promote protective factors for the youth of Frenchtown.

Interested in joining the FCC? Contact us!

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Introduction

In a time where screens are the new regular and social media influencers are a constant, the phrase “it takes a village” couldn’t be more true. Youth today are seeing more advertising and misinformation about alcohol, tobacco, marijuana, and other drugs than ever before. Together, we can improve the trajectory of our youth’s health and wellness. This resource guide will provide you with information about current drug trends and ways you can talk to your children about these substances.

Why It Matters

It’s never too early - or too late - to talk with your children about the risks of underage drinking, smoking, vaping, and other drug use. Research suggests that one of the most influential factors in healthy childhood development is a strong, open relationship with a parent/guardian. Though it may not seem like it, children hear your concerns, and it’s important to discuss the risks of using alcohol, tobacco, marijuana, and other drugs with them.¹

Local Data

Through assessment and evaluation, the FCC has identified the primary substances of abuse among Frenchtown youth to be alcohol and marijuana. According to the 2020 MPNA, Frenchtown students self-reported first trying the following substances at age **15 or younger** (see graph):

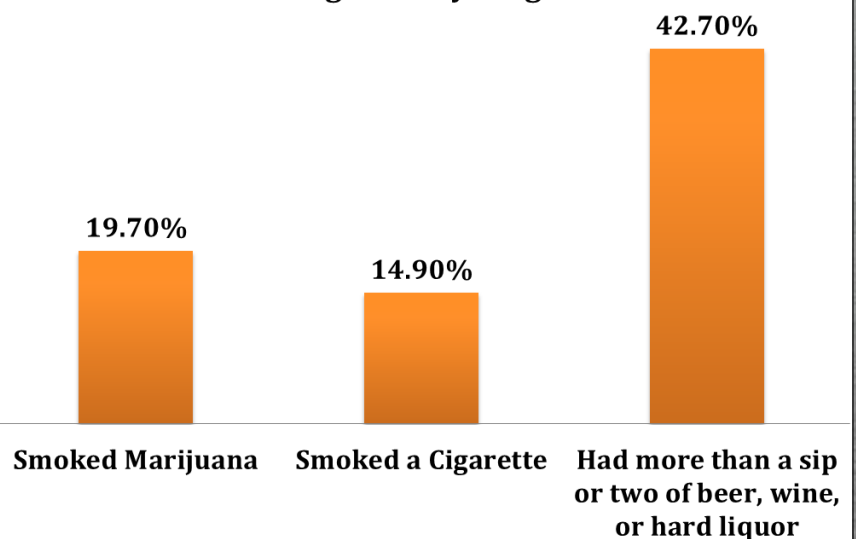
Additionally, 55.2% of students report having easy access to alcohol and 49.2% report having easy access to marijuana (MPNA, 2020).

The younger and more often teens drink or use marijuana, the more likely they are to engage in other substance use and the higher their risk of developing an alcohol use- or a substance use disorder.²

Now is the time to educate our youth and start the conversation.

How old were you when you first:

■ Age 15 or younger



References:

- ¹ SAMHSA. *Talk. They Hear You*. Retrieved from: <https://www.samhsa.gov/underage-drinking/parent-resources/keep-kids-safe-brochures>
² Partnership to End Addiction. (2011). *Adolescent Substance Use: America's #1 Public Health Problem*. Retrieved from: <https://drugfree.org/reports/adolescent-substance-use-americas-1-public-health-problem>

The Conversation Starts With YOU

According to the Substance Abuse Mental Health Services Administration, research shows that parents are the #1 reason young people decide not to drink.¹ Likewise, research out of Iowa State University reports: adolescence is a time when many children may consider experimenting with alcohol or drugs. New research shows parents can reduce that risk by maintaining a healthy and open relationship with their children.² Starting around age nine, initiate the conversation with your children about drugs and alcohol. Even if it doesn't seem like it, they really do hear you.¹

Some parents find it difficult to talk with their children about drugs and alcohol, but it is important to teach them about these substances and about your expectations if they are offered drugs. These conversations are not a one-time event. Start talking with your children when they are young; continue on as they grow older and their level of understanding changes. Your willingness to talk (and **listen**) tells them that you care about what they are interested in, and it provides you with insight into their world.³

A big part of talking is listening. For example, ask your kids what they know about marijuana. Ask if they think alcohol is dangerous. Ask what they think can happen if someone takes heroin. Their attitudes are important because if they think a particular drug is dangerous, they may be less likely to use it; if they think a drug is harmless, they may be more likely to use it. It is up to you to tell your children that tobacco, drugs, and alcohol have serious health and social effects.³

At some point, your child will likely ask if you have ever taken illicit drugs. If your answer is no, explain how you avoided the temptation and what opportunities being drug free provided you. If your answer is yes, explain why you do not want your child to use drugs even though you did. You do not need to confess everything you have ever done, but explain honestly what attracted you to drugs and why you want your child to avoid making the same mistake.³

Every two years, students at Frenchtown Middle School and High School take the Montana Prevention Needs Assessment (MPNA) survey. The following information is data from the 2020 MPNA survey:

- “My family has clear rules about alcohol and drug use.” - 81.9% of Frenchtown students in grades 7-12 responded, “YES” or “yes.” This means 18.1% of youth report not having clear rules about alcohol or drugs in their home. Make sure to talk with your children about your expectations of drug and alcohol use; make them a part of setting your family's rules.
- “During the past 12 months, have you talked with at least one of your parents (by parents, we mean your biological parents, adoptive parents, stepparents, or adult guardians—whether or not they live with you) about the dangers of tobacco, alcohol, or drug use?” - 41.2% of Frenchtown students in grades 7-12 responded, “No, I did not talk with my parents about the dangers of tobacco, alcohol, or drug use.” **Talk to your children about alcohol, tobacco, marijuana, and other drugs on a yearly basis.**

References:

¹ SAMHSA. (2015.) *Talk. They Hear You*. Retrieved from: <https://www.samhsa.gov/underage-drinking/parent-resources/keep-kids-safe-brochures>

² Iowa State University. (2015). *Parents have more influence than they might realize to prevent substance use*. Retrieved from: <https://www.sciencedaily.com/releases/2015/12/151210093313.htm>

³ Drug Enforcement Agency. (2017). *Growing Up Drug Free: A Parent's Guide to Prevention*. Retrieved from: <https://www.dea.gov/sites/default/files/2018-06/growing-up-drug-free-2017.pdf>

What If I Think My Child Is Using Drugs?

Sometimes - no matter how hard parents try - their children will experiment with drugs or alcohol. If you think something is going on with your child, take steps to find out for sure.

For example, a child who starts acting withdrawn or seems tired, depressed, or mad for no reason could be experimenting with drugs. Other signs can include: changing friends, not caring about personal appearance, slipping grades, skipping classes, losing interest in favorite activities, trouble at school or with the law, changes in eating or sleeping habits, not getting along with family members, and lying or stealing.

These signs do not always mean there is a drug or alcohol problem. But you should be concerned and try to find out what is going on.

HOW TO PROCEED

Share your suspicions with your spouse, partner, or someone you trust who is unbiased and can help you sort out your feelings and help answer your questions. Before talking with your child, practice the conversation until you are sure you can remain calm. Wait until your child is sober (or has not used drugs) before starting the conversation. Start by sharing your suspicions but do not make accusations.

“Emily, I suspect you may be smoking pot occasionally. I love you and I’m concerned about you. Is there something going on that we need to talk about?” Be prepared for all kinds of reactions. Your child may accuse you of snooping, say that you are crazy, or call you a hypocrite (especially if you smoke or occasionally have a drink). Your child may express hatred and threaten to leave home. Remain calm. If your child denies there is a problem, emphasize how much you care. “I want to believe you, because young people who use drugs are at risk for many bad things. I’d be devastated if something bad happened to you while you were high.” If you have evidence your child is using drugs or alcohol, enforce the discipline you agreed on for breaking the rules. “Remember, we had a deal that no member of this family would

use drugs.” During this conversation, express your love and concern through your words and your tone. “Sweetheart, I love and care about you. I want you to be healthy, safe, and successful.” A word of caution. It is human nature to want to believe your children. If your suspicions are strong (and especially if you have hard evidence), do not pretend that everything is fine. It obviously isn’t. Also, do not blame yourself or believe that your family is beyond these challenges. Drug misuse occurs in all kinds of families. If the conversation becomes heated or out of control, express love for your child and end the discussion with a plan to resume it later. You took a big step, and you can try again another day. If your child refuses to talk or takes a turn for the worse, ask a school guidance counselor, family doctor, or drug treatment referral center for help.

SUBSTANCE USE DISORDERS

Society used to think people with a substance use disorder lacked willpower. Today, science tells us that a substance use disorder is a chronic brain disorder with the chance for recurrence (relapse) and recovery. It is a brain disorder because it changes multiple brain circuits that control decision making, impulse control, reward, stress response, learning and memory, motivation, and other functions. The changes can be long lasting and can cause people to engage in harmful and self-destructive behaviors. Substance use disorders can be treated, but long-term recovery may take several attempts, so do not give up hope!

National Helpline

SAMHSA’s National Helpline (also known as the Treatment Referral Routing Service) is a confidential, free, 24-hour-a-day, 365-day-a-year, information service for individuals and family members facing mental and/or substance use disorders. This service provides referrals to local treatment facilities, support groups, and community-based organizations.

National Helpline: 1-800-662-HELP (4357)

Full Article Referenced:

Drug Enforcement Agency (DEA). (2017). *Growing Up Drug Free: A Parent’s Guide to Prevention*. Retrieved from: <https://www.dea.gov/sites/default/files/2018-06/growing-up-drug-free-2017.pdf>

Answering Your Child's Tough Questions

As your child becomes curious about alcohol and other drugs, he or she may turn to you for answers and advice. Use this opportunity to start an open, honest conversation about drinking and drug use, and to establish or reinforce your rules about alcohol and drug use and outline the behavior you expect. Peer pressure can be powerful among youth, and having a plan to avoid underage drinking and drug use can help children make smart choices. Because some questions can be difficult to answer, it is important to be prepared. The following are some common questions and answers about underage drinking and other drugs.

Alcohol-Specific Questions

“Why is alcohol bad for me?”

Don't try to scare your child about drinking or tell him or her, “You can't handle it.” Instead, tell your child that alcohol can be bad for his or her growing brain, interferes with judgment, and can make him or her sick. Underage drinking has severe consequences, including injury or death from accidents; unintended, unwanted, or unprotected sexual activity; academic problems; and drug use. Young people who drink are also more likely to have health issues such as depression and anxiety disorders. Once children hear the facts and your opinions about them, it is easier for you to make rules and enforce them.

“I got invited to a party. Can I go?”

Ask your child if an adult will be present at the party or if he or she thinks children will be drinking. Remind your child that even being at a party where there is underage drinking can get him or her into trouble. Use this time to reinforce your rules about alcohol and remind your children of the behavior you expect. Let them know they can say “no” or text a family member a code word if they're put in a situation that makes them uncomfortable.

“Did you drink when you were a kid?”

Don't let your past stop you from talking to your child about underage drinking. If you drank as a teenager, be honest. Acknowledge that it was risky. Make sure to emphasize that we now know even more about the risks to children who drink underage. Consider telling your children relatable stories about making smart decisions when it comes to alcohol. These could be stories that show the consequences of engaging in risky behavior.

“Why do you drink?”

Make a distinction between alcohol use among children and among adults. Explain to your child your reasons for drinking: whether it is to enhance a meal, share good times with friends, or celebrate a special occasion. Point out that, for adults, drinking in moderation is not harmful to their bodies, and if you choose to drink, it is always in moderation. Tell your child that some people should not drink at all, including underage children.

“What if my friends ask me to drink?”

Helping your child say “no” to peer pressure is one of the most important things you can do to keep him or her alcohol-free. Work with your child to think of a way to handle this situation, whether it is simply saying, “No, I don't drink,” or “I have a game tomorrow,” or “I have to go to work tomorrow.”

“You drink alcohol, so why can't I?”

Remind your child that underage drinking is against the law and for good reason. Point out that adults are fully developed mentally and physically, so they can handle drinking. Children's minds and bodies, however, are still growing, so alcohol can have a greater effect on their judgment and health.¹

Answering Your Child's Tough Questions

Marijuana-Specific Questions

“Why is marijuana bad for me?”

Tell your children that marijuana use in any form is not safe for the growth of their brain. Explain that if children smoke marijuana, they could have issues with attention, concentration, and learning, which could cause them to do poorly in school, and creates a lack of balance and coordination, which could increase injury risk when playing sports or driving. Once children hear the facts and your opinions about them, it is easier for you to make rules and enforce them.

“I got invited to a party. Can I go?”

Ask your child if an adult will be present at the party or if he or she thinks children will be trying marijuana. Remind your child that even being at a party where there is drug use can get him or her into trouble. Use this time to discuss the risks of marijuana and remind your children of the behavior you expect. Let them know they can say “no” or text a family member a code word if they're put in a situation that makes them uncomfortable.

“Did you try marijuana when you were a kid?”

An estimated 1.2 million youths aged 12 to 17 tried marijuana for the first time in 2017— that's approximately 3,300 kids each day.² Don't let your past stop you from talking to your child about marijuana use. If you tried marijuana as a teenager, be honest. Acknowledge that it was risky. Make sure to emphasize that we now know even more about the risks of marijuana use for children.

Consider telling your children relatable stories about making smart decisions when it comes to marijuana. These could be stories that show the consequences of engaging in risky behavior.

“If marijuana is legal in my state, why can't I use it?”

If marijuana is legal in your state, young people may also have more exposure to the drug. State laws allowing medical or recreational marijuana use for adults could prompt more youths to believe that the drug is safe. It's important to have a conversation with your children and remind them about the drug's potential harms, and that recreational marijuana is still illegal for those under 21.³

“What if my friends ask me to try marijuana?”

Talk with your children about having an “exit plan” if they are offered marijuana. Peer pressure can be powerful among youths, and having a plan to avoid drug use can help children make smart choices. Talk with your children about what they would do if faced with a decision about drugs, such as texting a code word to a family member or practicing saying “no” in a safe environment. Work with your child to think of a way to handle this situation, whether it is simply saying, “No, I don't smoke,” or “I have a game tomorrow,” or “I have to go to work tomorrow.”

References:

- ¹ U.S. Department of Health and Human Services. (2007). *The Surgeon General's call to action to prevent and reduce underage drinking: A guide to action for educators*. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General.
- ² Substance Abuse and Mental Health Services Administration. (2018). Key substance use and mental health indicators in the United States: Results from the 2017 National Survey on Drug Use and Health (HHS Publication No. SMA 18-5068, NSDUH Series H-53). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration.
- ³ Gorman, A. (2017). In the age of legalization, talking to kids about marijuana gets tougher. Shots: Health News From NPR. Retrieved from: <https://www.npr.org/sections/health-shots/2017/11/10/563051543/in-the-age-of-legalization-talking-to-kids-about-marijuana-gets-tougher>.

Full Article Referenced:

Substance Abuse and Mental Health Services Administration. (2020). *Answering Your Child's Tough Questions*. Retrieved from: <https://www.samhsa.gov/underage-drinking/parent-resources/answering-your-childs-tough-questions>

Underage Drinking

ALCOHOL & YOUTH

Alcohol is the most widely used substance of abuse among America's youth, and drinking by young people poses enormous health and safety risks.¹

Why is underage drinking dangerous?

A young person's body cannot cope with alcohol the same way an adult's can.¹ Drinking is more harmful to teens than adults because their brains are still developing- and will continue to develop through their mid-twenties. Drinking during this critical growth period can lead to lifelong damage in brain function, particularly as it relates to memory, motor skills (ability to move), and coordination. Delaying the initiation of drinking alcohol until the age of 21 greatly minimizes the negative and long-term impact of alcohol on the brain.² Underage drinking can also lead to academic problems in school, legal problems, physical and sexual abuse, suicides, vehicle crashes, and abuse of other drugs.²



Don't assume your kids know how to handle temptation. Instead, educate them about the risks and alternatives to temptation so they can make healthy decisions.⁴

Why do so many young people drink?

As children mature, it is natural for them to assert their independence, seek new challenges, and try taking risks. Underage drinking is a risk that attracts many developing adolescents and teens. Many want to try alcohol, but often do not fully recognize its effect on their health and behavior.³ Other reasons young people drink alcohol include:

- Peer Pressure
- Increased independence, or desire for it
- Stress
- Easy access

According to research, young people who begin drinking before age 15 are four times more likely to develop alcohol dependence than those who begin drinking at age 21.¹

References:

¹ Foundation for a Drug-Free World. *The Truth About Alcohol*. Retrieved from: Drugfreeworld.org

² Parenting Montana. *Why Teens Shouldn't Drink Alcohol*. Retrieved from: <https://parentingmontana.org/why-kids-shouldnt-drink-alcohol/>

³ National Institute on Alcohol Abuse and Alcoholism. (2020). *Underage Drinking*. Retrieved from: www.niaaa.nih.gov/sites/default/files/Underage_Fact.pdf

⁴ DEA. (2017). *Growing Up Drug Free: A Parent's Guide to Prevention*.

Drinking & Driving

It is **illegal** for someone under the age of 21 to drive with a BAC greater than 0.02 g/dl.¹ Knowingly possessing or consuming alcohol to an intoxicating level when under the age of 21 can result in a minor in possession charge.¹

Driving while under the influence of legal or illegal substances is also known as Drugged Driving. Alcohol, marijuana, and other drugs impair the ability to drive because they slow down coordination, judgment, and reaction times. Using two or more drugs at the same time, including alcohol, can amplify the impairing effects of each drug a person has consumed. Impaired drivers cannot accurately assess their own impairment—which is why no one should drive after using any impairing substances. Remember: if you feel different, you drive different.²

What is binge drinking?

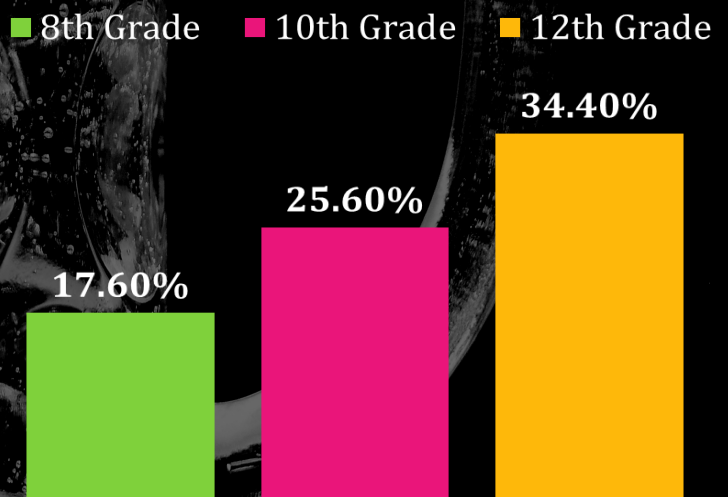
Binge drinking is defined as a pattern of drinking that brings a person's blood alcohol concentration (BAC) to 0.08 g/dl or higher.³ For a typical adult, this pattern of excessive alcohol use corresponds to consuming 4 or more drinks (female), or 5 or more drinks (male) in about two hours. Research shows that fewer drinks in the same timeframe results in the same BAC in youth; only 3 drinks for girls, and 3 to 5 drinks for boys, depending on their age and size.⁴

Binge drinking is associated with many health problems including: unintentional injuries such as car crashes and alcohol poisoning, physical violence, and sexual assault.³

Drinking games, such as Beer Pong, can lead to binge drinking. Most drinking games focus on the volume of drinks, in a short amount of time; and it doesn't take much competition to turn an evening's fun into a binge drinking tragedy.⁵

Frenchtown Data: On the 2020 MPNA survey, 45.9% of Frenchtown students in grades 7-12 believe if they drank some beer, wine, or liquor **without their parents' permission**, they would **NOT** be caught by their parents. Be aware of factors that may increase the risk of underage drinking, such as: significant social transitions like graduating to middle school or high school; getting a driver's license; social and emotional problems, including depression; parties; and a family history of alcoholism.⁶ If you learn your child is drinking, do not feel bad that you did not see the warning signs. The most important thing is to act now to find the best available services to help your child stop using alcohol.⁶

Past 30 Day Use: Alcohol



Montana Prevention Needs Assessment (MPNA) Survey 2020

Pictured above: Past 30 Day Alcohol Use among Frenchtown High School/Middle School students.

References:

¹ Parenting Montana. *Underage Drinking: What Does the Law Say?* Retrieved from: parentingmontana.org/underage-drinking-what-does-the-law-say

² National Highway Traffic Safety Association. *Drug-Impaired Driving*. Retrieved from: <https://www.nhtsa.gov/risky-driving/drug-impaired-driving>

³ CDC. *Alcohol and Public Health: Binge Drinking*. Retrieved from: [cdc.gov/alcohol/fact-sheets/binge-drinking](https://www.cdc.gov/alcohol/fact-sheets/binge-drinking)

⁴ NIAAA. (2020). *Binge Drinking*. Retrieved from: [niaaa.nih.gov/sites/default/files/publications/BingeDrinking.pdf](https://www.niaaa.nih.gov/sites/default/files/publications/BingeDrinking.pdf)

⁵ Recovery Connection. (2012). *Drinking Games: Binge Drinking Alcohol in Disguise*. Retrieved from: <https://www.recoveryconnection.com/drinking-games-binge-drinking-alcohol-in-disguise/>

⁶ SAMHSA. *What You Can Do to Prevent Your Child From Drinking*. Retrieved from: <https://www.samhsa.gov/underagedrinking/parent-resources>

E-Cigarettes & Vaping

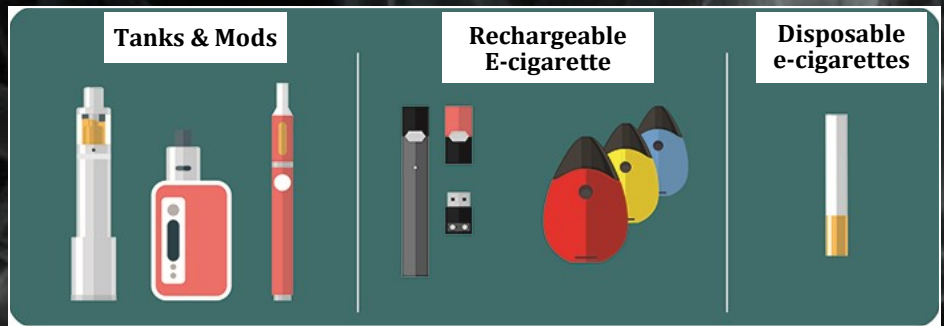
WHAT IS VAPING?

Vaping is the act of inhaling and exhaling the aerosol* (often called vapor) produced by an e-cigarette or similar battery-powered device.

What are E-Cigarette, or Vaping, Products?

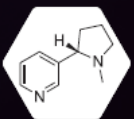
E-cigarette, or vaping, products produce an aerosol by heating a liquid that usually contains nicotine, (the addictive drug in regular cigarettes, cigars, and other tobacco products), cannabis (THC, CBD), flavorings, chemicals, and other substances.¹

E-cigarettes are known by many different names and come in various shapes, sizes, and device types. Some e-cigarettes are made to look like regular cigarettes, cigars, or pipes. Some resemble pens, USB drives, and other everyday items. Larger devices such as tank systems, or “mods,” do not resemble other tobacco products.¹



Many harmful chemicals have been found in e-cigarette aerosols.¹ The most familiar are:

- Nicotine: A drug that is highly addictive in moderate doses. In high doses, Nicotine is poisonous. Interestingly enough, plants make it to keep insects from eating them.
- Formaldehyde: Used in embalming to disinfect and temporarily preserve human remains.
- Rubidium: Chemical used to give fireworks their bright colors.
- Propylene glycol: Found in antifreeze products.
- Acetone: Commonly found in nail polish remover and as a paint remover.
- Ethylbenzene is often used to make other chemicals, it's found in pesticides, synthetic rubber, varnishes, and ink.



NICOTINE



VOLATILE ORGANIC COMPOUNDS



CANCER-CAUSING CHEMICALS



HEAVY METALS SUCH AS NICKEL, TIN, AND LEAD



ULTRAFINE PARTICLES



FLAVORING SUCH AS DIACETYL,
A CHEMICAL LINKED TO A
SERIOUS LUNG DISEASE

*The puff of air that e-cigarette users expel is an aerosol, NOT a vapor. A vapor is a chemical that has evaporated. An aerosol is a mixture of liquid particles suspended in a gas and can contain many chemicals.¹

Reference:

¹ CDC. *Electronic Cigarettes*. Retrieved from: https://www.cdc.gov/tobacco/basic_information/e-cigarettes/index.htm

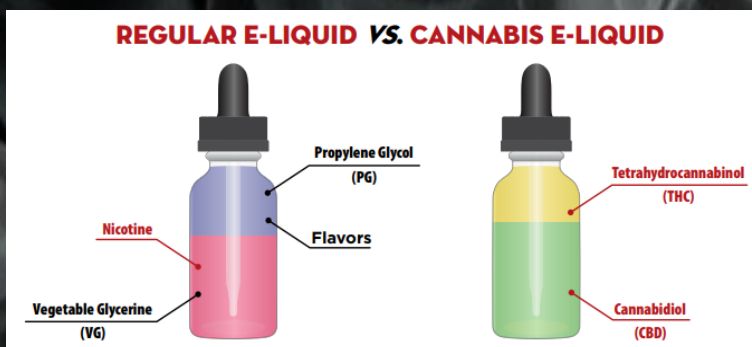
According to the CDC, vaping is not safe for youth, young adults, pregnant women, or adults who do not currently use tobacco products.¹ Vaping is dangerous because:

- Nicotine is highly addictive
- Nicotine can harm adolescent brain development, which continues into the early to mid-20s
- Besides nicotine, e-cigarette aerosol can contain substances that harm the body. This includes cancer-causing chemicals and tiny particles that reach deep into the lungs.
- Defective e-cigarette batteries have caused fires and explosions
- Children and adults have been poisoned by swallowing, breathing, or absorbing e-cigarette liquid.

Virtually all e-cigarettes contain nicotine– even the ones labeled “nicotine free.” This is because there are no regulations about how e-cigarettes or e-juice are made. There is no way to know exactly what is in an e-cigarette.²

E-Liquid

E-liquid is the liquid that is converted into an aerosol by an e-cigarette, or vaping, product. It is typically a mixture of water, food-grade flavoring, a choice of nicotine levels or cannabis (THC, CBD), propylene glycol, and vegetable glycerin. Propylene glycol and vegetable glycerin are humectants used in e-liquid to produce aerosols that simulate combustible tobacco cigarette smoke.¹



Dabbing & Dab Pens



Dabbing is the process of using a form of marijuana called a “dab,” which is concentrated cannabis, that allows the user to inhale a high concentration of THC. THC extracted into an oil can be evaporated into a sticky goo or wax that is smoked or, more popularly, vaporized. That goo can be further refined into a hard glass-like substance often called “shatter.” This concentrated form of marijuana is heated quickly on a very hot surface, vaporized, and then inhaled through e-cigarettes (also known as “dab” pens) or an apparatus called a “dab rig” or an “oil rig”.³

Many marijuana concentrate users prefer e-cigarettes/vaporizers because it is smokeless, sometimes odorless, easy to hide or conceal, and produces an instant high.³

References:

¹ CDC. *Electronic Cigarettes*. Retrieved from: https://www.cdc.gov/tobacco/basic_information/e-cigarettes/index.htm

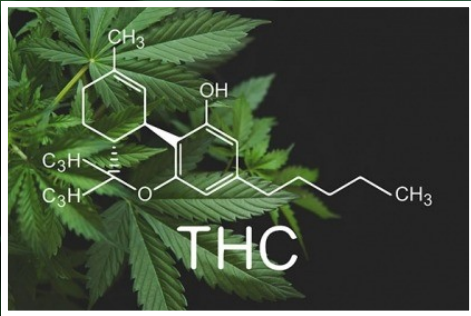
² American Lung Association. *E-cigarettes & Vaping: What Teens Should Know*. Retrieved from: <https://www.lung.org/quit-smoking/helping-teens-quit/what-teens-should-know>

³ Foundation for a Drug-Free World. *Dabbing and Mooking*. Retrieved from: <https://www.drugfreeworld.org/course/lesson/the-truth-about-marijuana/dabbing.html>

Marijuana

MARIJUANA IS ADDICTIVE.

About 1 in 10 marijuana users will become addicted. For people who begin using before the age of 18, that number rises to 1 in 6.¹



What is Marijuana?

Marijuana is the dried leaves and flowers of the *Cannabis sativa* or *Cannabis indica* plant. Stronger forms of the drug include high potency strains— known as sinsemilla, hashish (aka “Hash”), and extracts including hash oil, shatter, wax, and budder.²

Marijuana is addictive. Marijuana contains a psychoactive chemical called tetrahydrocannabinol (THC).² Due to THC’s chemical structure being similar to anandamide - a naturally occurring brain chemical - THC is able to attach to cannabinoid receptors on neurons (neurons: cells of the nervous system that carry ‘messages’ throughout the brain) and activate them. This process alters the brain’s communication and normal functioning.^{1, 2}

Marijuana use decreases academic and athletic performances. THC attaches to receptors in the brain that are vital for memory formation (Hippocampus, Orbitofrontal Cortex), balance, coordination, and reaction time (Basal Ganglia, Cerebellum). This causes increased difficulty in learning, distorted thinking, hallucinations, loss of motivation and energy, anxiety, and depression.^{1,3}

Marijuana goes by many names. Common terms include: Weed, Pot, 420, Grass, Dope, Ganja, Cannabis, Mary Jane, Blaze, Reefer, Hash, Herb, Boom, and Skunk.

“I want you to know you were right. You told me marijuana would hurt my brain. It ruined my mind and my life, and I’m so sorry. I love you.”

-Johnny Stack to his mother, 3 days before he died by suicide.

Regular marijuana use can lead to significant problems including Cannabis Use Disorder and increased risk of psychosis, paranoia, and schizophrenia.⁵ Learn more about Cannabis-Induced Psychosis and Johnny Stack’s story at: Johnnysambassadors.org

Natural doesn’t mean safe. Like marijuana, tobacco is a plant that has been smoked for thousands of years. Around 1950, modern medicine established the truth about tobacco: it can cause diseases like lung cancer and is highly addictive. Now, no one would argue that tobacco is safe, let alone good for you. But it is “natural.”⁴ Similarly, marijuana is a “natural” substance that can negatively impact an adolescent’s health and brain development.

NATURAL ≠ SAFE

References:

¹ SAMHSA. *Know the Risks of Marijuana*. Retrieved from: www.samhsa.gov/marijuana

² CDC. *Marijuana and Public Health*. Retrieved from: www.cdc.gov/marijuana/health-effects.html

³ NIH. *Marijuana*. Retrieved from: Teens.drugabuse.gov/drug-facts/marijuana

⁴ NIH. (2013). *Can It Be Bad If It’s Natural?* Retrieved from: <https://teens.drugabuse.gov/blog/post/can-it-be-bad-if-it-s-natural>

⁵ American Academy of Child & Adolescent Psychiatry. (2019). *Marijuana and Teens*. Retrieved from: https://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/Marijuana-and-Teens-106.aspx

Marijuana Edibles

“Edibles” are food products made or infused with marijuana or marijuana oils. Edibles come in many forms including: brownies, cookies, candy, suckers, chocolate, and beverages. Marijuana edibles range from 40-80% THC.¹ Unlike inhaled cannabis, edibles must be digested first before being absorbed. Due to the delayed high (which takes 15-90 minutes to feel after consumption), teens may overconsume edible marijuana because they cannot feel the effects immediately. This can lead to increased overdosing in teens.^{2,3}



Distillate

Refined cannabinoid oil that is typically free of taste, smell, and flavor. It is the base of most edibles and vape cartridges.



Budder/Badder

Concentrates whipped under heat to create a cake-batter like texture



Shatter

A golden, translucent, and brittle concentrate made with a solvent.

Marijuana Extracts

Smoking extracts and resins from the marijuana plant, with high levels of THC, is on the rise. There are several forms of extracts, such as: 710 (“OIL” flipped backwards) hash oil, budder, wax, dabs, and shatter. These resins have 3 to 5 times more THC than the plant itself. Smoking or vaping it (also called dabbing) can deliver dangerous amounts of THC.⁴

Synthetic Cannabinoids

Synthetic cannabinoids are a class of synthetic molecules that bind to cannabinoid receptors in the brain and body (the same receptors to which THC and CBD attach).⁵ Essentially, they are human-made mind-altering chemicals that are either sprayed on dried, shredded plant material so they can be smoked; or sold as liquids to be vaporized and inhaled in e-cigarettes and other devices.⁶ These products are also known as herbal or liquid incense. These chemicals are called *cannabinoids* because they are similar to chemicals found in the marijuana plant. Because of this similarity, synthetic cannabinoids are sometimes misleadingly called synthetic marijuana (or fake weed), and they are often marketed as safe, legal alternatives to that drug. In fact, they are not safe and may affect the brain much more powerfully than marijuana; their actual effects can be unpredictable and, in some cases, more dangerous or even life-threatening.⁶ Manufacturers sell these products in colorful foil packages and plastic bottles to attract customers. They are marketed under names such as: K2, Spice, Joker, Black Mamba, Kush, Kronic, Scooby Snax, Mr. Happy, and AK-47.⁶



References:

- ¹ Alcohol & Drug Abuse Institute. *Learn About Marijuana: Marijuana Edibles*. Retrieved from: www.learnaboutmarijuanawa.org/factsheets/edibles
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- ⁵ CDC. *E-Cigarette, Or Vaping, Products Visual Dictionary*. Retrieved from: cdc.gov/tobacco/basic_information/e-cigarettes/pdfs/ecigarette-or-vaping-products-visual-dictionary-508.pdf
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Commonly Used Substances

According to the Drug Enforcement Agency (DEA), the following are substances commonly used by youth:

Drug Name	Description
<p>MDMA (Ecstasy/Molly)</p> 	<p>MDMA is a synthetic drug (human-made) that acts as a hallucinogen and a stimulant (like meth). MDMA is often a colored pill or capsule (Ecstasy), but can be a powder (Molly), crystal, or liquid. MDMA can contain other ingredients such as “bath salts.” MDMA causes changes in perception, including: euphoria and increased sensitivity to touch, energy, sensual and sexual arousal, and need for stimulation. Additionally, MDMA causes the following psychological effects: anxiety, depression, paranoia, sleep problems. In high doses, MDMA can interfere with the body’s ability to regulate temperature, potentially causing hyperthermia which can result in liver, kidney, cardiovascular system failure, and/or death.</p>
<p>Cocaine</p> 	<p>Cocaine is an addictive stimulant made from the leaves of the coca plant. As a street drug, cocaine looks like a white crystal powder. Cocaine powder is usually snorted through the nose or rubbed into gums. Others dissolve the powder and inject it into the bloodstream. Some people inject a combination of cocaine and heroin, called a Speedball. Popular nicknames for cocaine include: Blow, Coke, Crack, Rock, and Snow. Street dealers may mix Cocaine with other drugs such as the stimulant amphetamine, or synthetic opioids, including fentanyl. Cocaine causes blood pressure and heart rate to rise, makes pupils look bigger, and makes users feel more awake and less hungry. It may also cause sudden stroke or death.</p>
<p>Heroin</p> 	<p>Heroin is an opiate (narcotic) drug processed from morphine and extracted from certain poppy plants. Heroin comes in a white or brownish powder, or a black sticky substance known as “black tar heroin.” Often mixed (cut) with other drugs or substances, especially fentanyl in recent years, users typically do not know how much heroin and other substances are being used, creating the likeliness of overdose. Heroin can be injected, smoked, or sniffed/snorted. Because it enters the brain so rapidly, heroin is particularly addictive and can cause respiratory depression (hypoventilation—slow and ineffective breathing) and slowed heart function.</p>
<p>Kratom</p> 	<p>Kratom is a tree native to Southeast Asia. Consumption of its leaves produces both stimulant effects (in low doses) and sedative effects (in high doses), and can lead to psychotic symptoms, and psychological and physiological dependence. These leaves are crushed and then smoked, brewed with tea, or placed into gel capsules. At low doses, Kratom consumption can lead to addiction. Individuals addicted to Kratom exhibited psychotic symptoms including hallucinations, delusion, and confusion. Kratom’s effects on the body include: tachycardia, anorexia, insomnia, hepatotoxicity (liver injury caused by drugs), seizures, and hallucinations.</p>
<p>Methamphetamine (Meth)</p> 	<p>Meth is a highly addictive stimulant that affects the central nervous system. Meth is swallowed, snorted, injected, or smoked. Regular meth is a pill or powder. Crystal meth resembles glass fragments or shiny blue-white “rocks” of various sizes. Chronic meth users can exhibit violent behavior, anxiety, psychotic features including paranoia, aggression, visual and auditory hallucinations, mood disturbances, and delusions (such as the sensation of insects creeping under the skin), and severe dental problems known as “Meth mouth.” High doses can elevate body temperature to dangerous levels and cause convulsions and even cardiovascular collapse and death.</p>

Medication Safety

Medications are the leading cause of child poisoning. Each year, nearly 60,000 young children - or about four busloads per day - are seen at emergency rooms because they got into medicine. Here are some tips to prevent medication poisoning and overdoses.

1. Keep medicine up and away, out of reach and sight of children, even medicine you take everyday.

Kids are naturally curious and can easily get into things, like medicine, if they are kept in places within their reach.

2. Remember child resistant packaging is not child-proof.

While a child-resistant medicine container can slow down a child trying to open it, it is not child-proof. So put medicine away after every use, even if you need to give another dose in a few hours.

3. **Keep medicine safety on your child-proofing checklist.** As your child learns new skills and becomes more mobile, anticipate that you may need to continue to assess and change where you keep medicine.

4. **Save the Poison Help number in your phone: 1-800-222-1222.** Specialists at poison control centers provide free, confidential, expert medical advice 24 hours a day. They help with position emergencies and can also answer questions about medicine.

5 Things to Know about Kids and Medicine



5. **Share medicine safety information with family and friends.** When kids are with other caregivers or visiting another home, it is important that adults know how to keep kids safe around medicine.

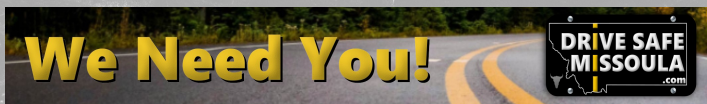
Locate a Drug Disposal Location Near You:
[Frenchtowncommunitycoalition.com/local-resources](https://www.frenchtowncommunitycoalition.com/local-resources)



By: Steve Schmidt, Drive Safe Missoula Coordinator

Why We Need You

The vision is to get zero deaths and zero serious injuries on Montana’s roadways. To accomplish this vision, **we need you!**



Your family, friends, other drivers, pedestrians, bikers, construction workers, and first responders **need you!**

We all **need you** to get to where you are going safely.

We **need you** to drive in control, buckled up, and without being under the influence of alcohol, drugs, distractions, and technology.



We Do Not Drive Down This Road Alone

I share the road with you and your family, and you can trust that I will drive safely to help ensure that you and your family make it home safely. I will drive buckled up, in control, and free from the influence of substances, technology, and other distractions. I do this for you because we share this road together.

And... **Thank you** for doing your part by driving safely and helping ensure that my family makes it home.



Do you DUIT? Cause, Your Kids are Watching!

Long before I was a parent, I heard the statement, “When it comes to raising children, more stuff is caught than taught.”

What does that mean exactly?

Let us imagine it’s time to teach your child how to drive, and you tell them, “Don’t use your phone while driving! No texting! No searching for music! Just drive!”



Yet, your child has spent the last ten years of their life sitting in your car’s back seat watching you use your phone while driving. If this is the case, your words are meaningless. You can “teach” your child not to use their phone, but they have already “caught” the behavior and will do as you do. If you try to scold them for using their phone, they will say, “Yeah, but you use your phone while driving.”

Let’s set the example and model the behaviors we want our kids to adopt. Do not Drive Under the Influence of Technology (DUIT). Then you can say, “Yeah, but you don’t see me using my phone, do you?”

If You Feel Different, You Drive Different

Driving Under the Influence, commonly referred to by its initials, DUI, comes in many forms.

Most people naturally assume a DUI is Driving Under the Influence of Alcohol; however, a DUI can be many things:

- Over-the-Counter Medications
- Prescription Medications
- Other Drugs such as Marijuana
- A combination of substances (i.e., Alcohol and Marijuana)

Essentially, if something inside your body influences how you feel, it will also influence how you drive. Thankfully, most people in Missoula County do not drive when they are under the influence of a substance.

For more information, please visit:



Hidden in Plain Sight

Hidden in Plain Sight is an interactive display that educates parents, guardians, and community members of the red flags that may indicate drug or alcohol use in a young adult or teenager's bedroom. Can you spot the 'red flags' that are hidden in plain sight?



The FCC is always adding new items to the Hidden in Plain Sight display. Find us at FTSD's Parent-Teacher Conferences to play! Keep an eye out for other opportunities on our Facebook page: @FrenchtownCommunityCoalition

Hidden in Plain Sight kits (pictured above) are available for purchase. Contact ReaganMecham@ftbroncs.org for more information.

Hidden in Plain Sight



420, 4:20 and 4/20 are code for marijuana or a time to get high. April 20th has become a “counter culture” holiday where participants come together and celebrate cannabis use. Posters, t-shirts, hats, stickers and other items are designed with 420 themes. Those owning these items consider marijuana a big part of their life and identify themselves as part of the 420 community.



Dabs, honey, OIL, wax, 710, budder, and shatter, are slang names for marijuana concentrates. These concentrates, in which the highly potent THC (Tetrahydrocannabinol) is extracted from the plant, are an oil or wax-like substance that resembles honey or butter and has THC levels ranging from 40-80%. E-cigarettes or vaporizers are often used to ingest these concentrates.



Bottle openers have not been necessary to open soft drinks or any other nonalcoholic beverage since the late 70s. Bottle openers also come incorporated into jewelry, shoes and belts. If you see one, ask why, check it for use, and use it as an opportunity to discuss the dangers of underage drinking and your clear expectations about not drinking until age 21



Marijuana edibles are becoming more and more common as the medicinal and recreational marijuana industries grow. Brownies, cookies, candies, and lollipops are just some of the edible products being sold at dispensaries in our area. When marijuana is consumed orally it is metabolized more slowly. Often teens will get impatient that they are not feeling the effect and they will consume more. This can cause a delayed, intense reaction and may result in a need for emergency room care.



Drinking games such as beer pong lead to excessive drinking. Consequences of underage drinking include injury and death from accidents, unintended or unwanted sexual activity, academic problems, impaired social development, drug use, and health issues such as depression and anxiety.



Electronic cigarettes or e-cigarettes are battery operated devices designed to deliver flavored nicotine to users in an aerosol instead of smoke. As of 2014 more teens use e-cigarettes than traditional cigarettes. These devices are also used to ingest marijuana concentrates. The evidence is mounting that e-cigs are dangerous for youth and may be a first step for youth to then start using traditional tobacco products as well.



This optical mouse has a hidden digital scale inside. Scales are used to weigh small amounts of drugs and small zip lock bags are used to package them.



Glass pipes are a popular marijuana smoking device coming in a range of colors and designs. Many like this elephant could easily be mistaken for a cute knick-knack on a teen’s shelf. The pipe will be brown and stained unless it is meticulously cleaned after each use. Whether it appears to be used or not, any device designed for smoking drugs should prompt an immediate conversation with your kids.

Hidden in Plain Sight



Flasks to hide alcohol come in all shapes and sizes — including these lotion bottles. A quick internet search will help you learn about other types of concealed flasks such as a hairbrush, flip flops, wearable items, and even tampon cases. Parents should be aware of these when they are checking bags at parties or to recognize them lying around their kid's room.



A spliff is a homemade filter used to mask the smell of marijuana smoke. They are frequently made out of an empty paper towel or toilet paper roll and dryer sheets. Nearly 2000 YouTube videos demonstrate how to make these devices



A book with a hidden compartment may be used to store drugs and paraphernalia. There are numerous containers on the market with false bottoms or middles that can be used to store drugs. Take a look online to see wide variety of products that can serve this purpose.



Homemade smoking devices for marijuana can be easily made out of many objects, including aluminum cans. There are many how-to videos and guides found online to make these smoking devices. Other common materials used include apples, aluminum foil, and water bottles.



Regular marijuana smokers create kits to help them hide the signs of use. These kits might include: eye drops, mints to freshen their breath, perfume to hide odors, and hand sanitizer to mask odors on their hands. Mints and gum are used to mask the smell of alcohol, marijuana and cigarettes. Eye drops are used to hide blood shot eyes caused by excess drinking and marijuana use.



Many household items, such as propellant cleaners, paint, aerosol foods, markers, and glues contain chemicals that produce a mind-altering experience when inhaled. Inhalants are breathed in through the nose or mouth and may cause “sudden sniffing death” and permanent brain damage.



Dryer sheets and air freshener sprays can be used to mask the smell of marijuana or cigarette smoke in the air or on clothing.



Sports drinks or other colored and flavored drinks can be mixed with clear alcohol and brought undetected into the home or an event.

**You don't have to go through this alone.
Help is only a call, text, or click away.**

National Suicide Prevention Lifeline: 1-800-273-TALK (8255)

Crisis Text Line: Text "MT" to 741-741

Domestic Abuse Hotline: 1-800-799-SAFE (7233)

Child Abuse Hotline: 1-866-820-5437

Montana Human Trafficking Hotline: 1-833-406-STOP (7867)

National Human Trafficking Hotline: 1-888-373-7888 (or) Text: 233733

Montana Warmline: 877-688-3377 (or) <http://montanawarmline.org>

Mental Health & Behavioral Health Support:

<http://covid19.missoula.co/mental-and-behavioral-health>

Alcoholics Anonymous Hotline: 1-833-800-8553

Montana Narcotics Anonymous Helpline: 1-800-990-6262

Montana Tobacco Quit Line: 1-800-QUIT-NOW (784-8669)
(or) montana.quitlogix.org

My Life, My Quit (Age 18 and under): 1-855-891-9989 (or) mylifemyquit.com

The LGBT National Hotline: (888) 843-4564 (or) <https://www.glbthotline.org>

SAMHSA's National Helpline (for mental and/or substance use disorders):
1-800-662-HELP (4357)



For more information visit:

FrenchtownCommunityCoalition.com

Email: FTCC@ftbroncs.org

Phone: 406-626-2772