

Preventing criminal justice outcomes associated with the use of cannabis

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Overview

- ❑ My perspective
- ❑ Cannabis: what is there some consensus about?
- ❑ Young people and cannabis:
 - ❑ Epidemiology
 - ❑ Cannabis and crime
- ❑ Prevention
- ❑ Supply reduction
- ❑ Intervention



What is my perspective?



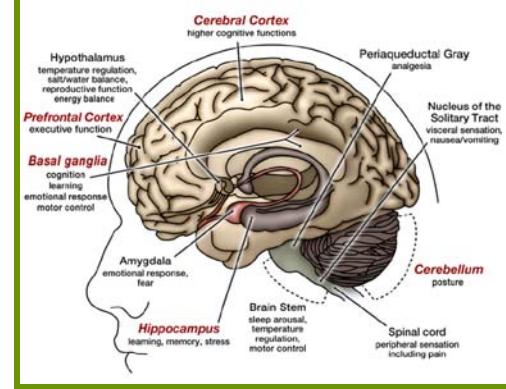
The Centre aims to reduce the use of cannabis in Australia by preventing uptake and providing the community with evidence-based information and interventions



It is a consortium of 8 research, clinical and policy development agencies from the addiction, mental health and criminal justice sectors

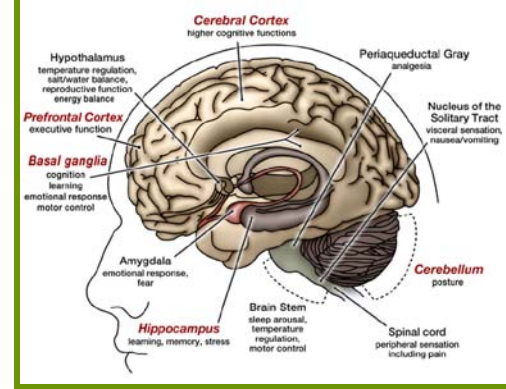


What is there some consensus about ?



- ❑ Cannabis use is highly prevalent across many cultures
- ❑ There are at least 2 endogenous cannabinoid receptor systems whose functions are probably largely unknown
- ❑ It is not a single drug but contains cannabinoids with drug opposite effects in unknown ratios that appear to be changing over time (not to mention contaminants)
- ❑ Cannabis users are typically poly drug users (tobacco and alcohol +/- ATS & cocaine)

What is there some consensus about ?

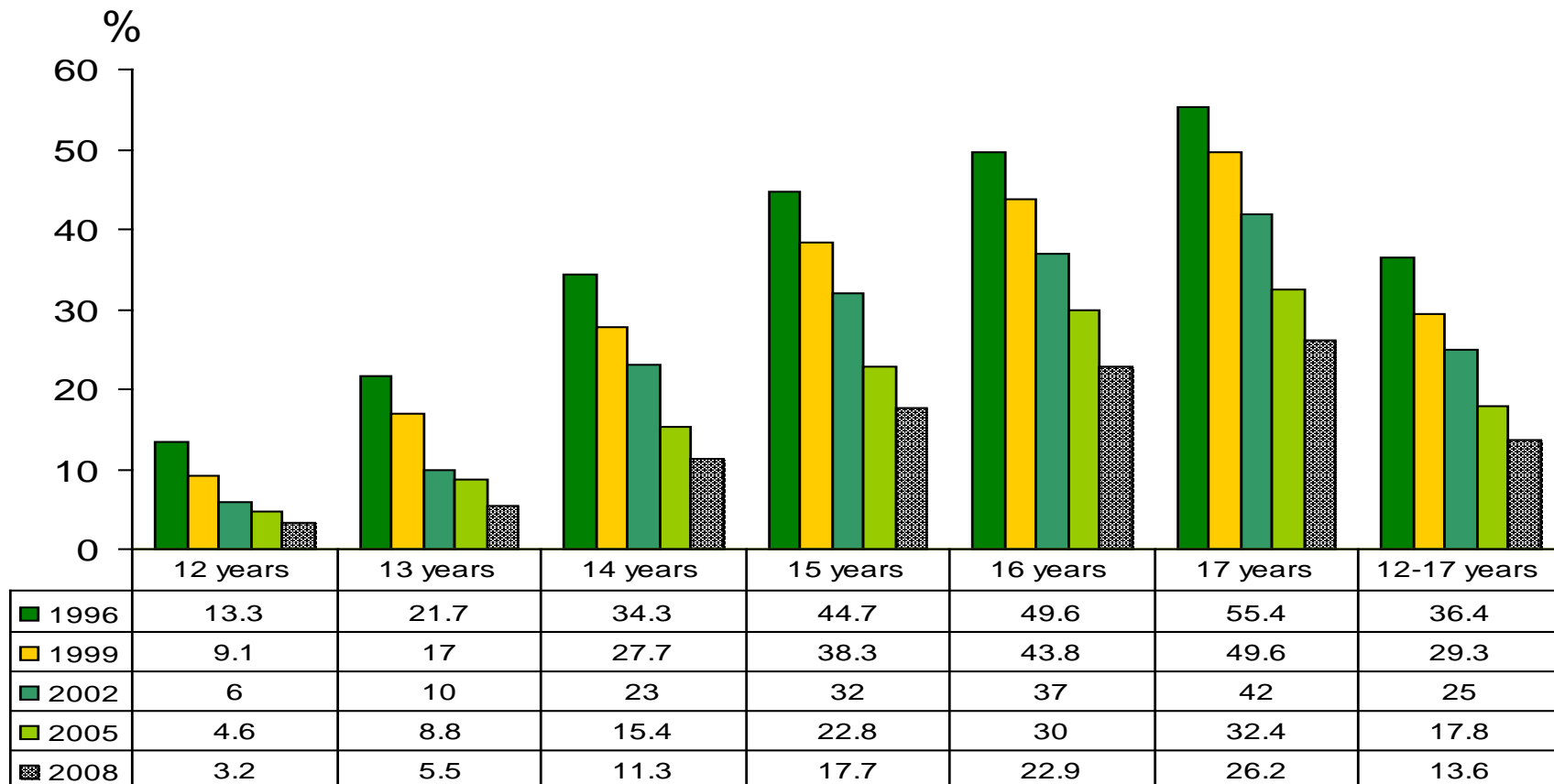


- ❑ Cannabis use (along with alcohol and methamphetamine use) is associated with psychotic disorders at onset and markedly worsens the prognosis if use continues
- ❑ Adolescence (especially before age 16 yrs) is the period of temporal proximity of the onset of cannabis (and other drug) use and psychosis and appears to be a vulnerable period for other negative outcomes such a poor educational achievement and other drug dependence

How many adolescent cannabis users?

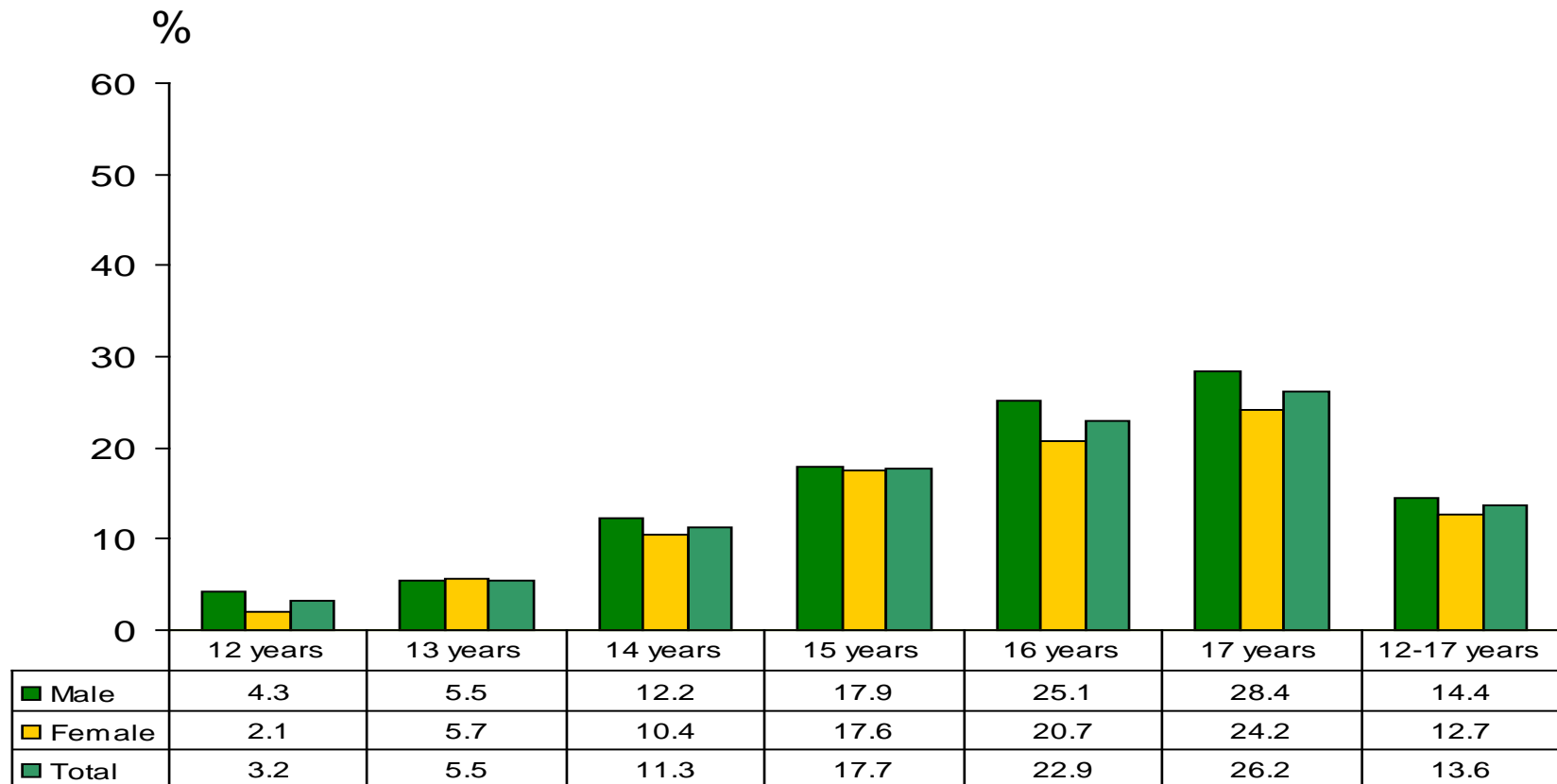
Lifetime cannabis use, Australian secondary school students, 1996-2008

1996-2008 ASSAD Surveys



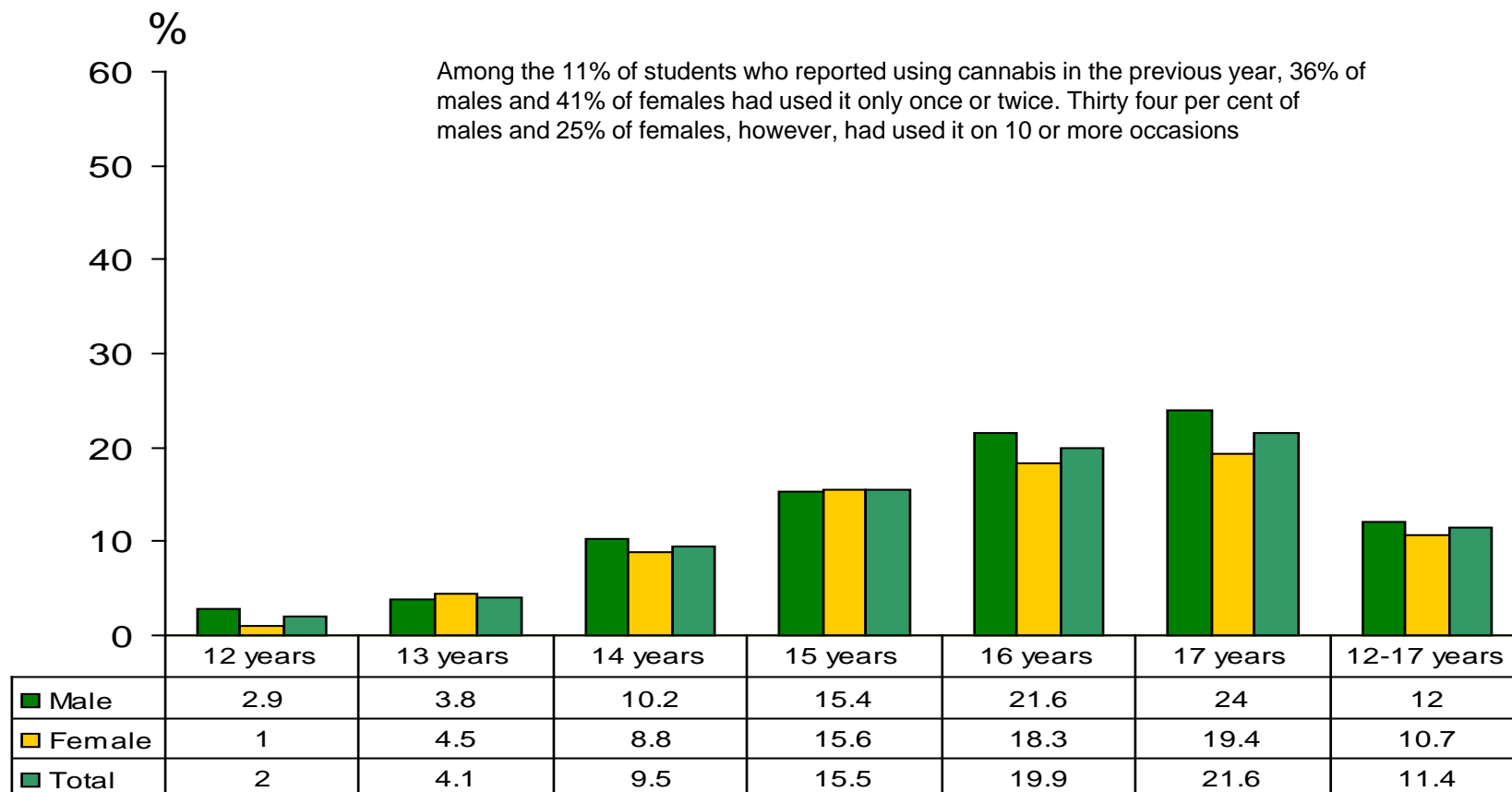
Lifetime cannabis use, Australian secondary school students, 2008

2008 ASSAD Survey

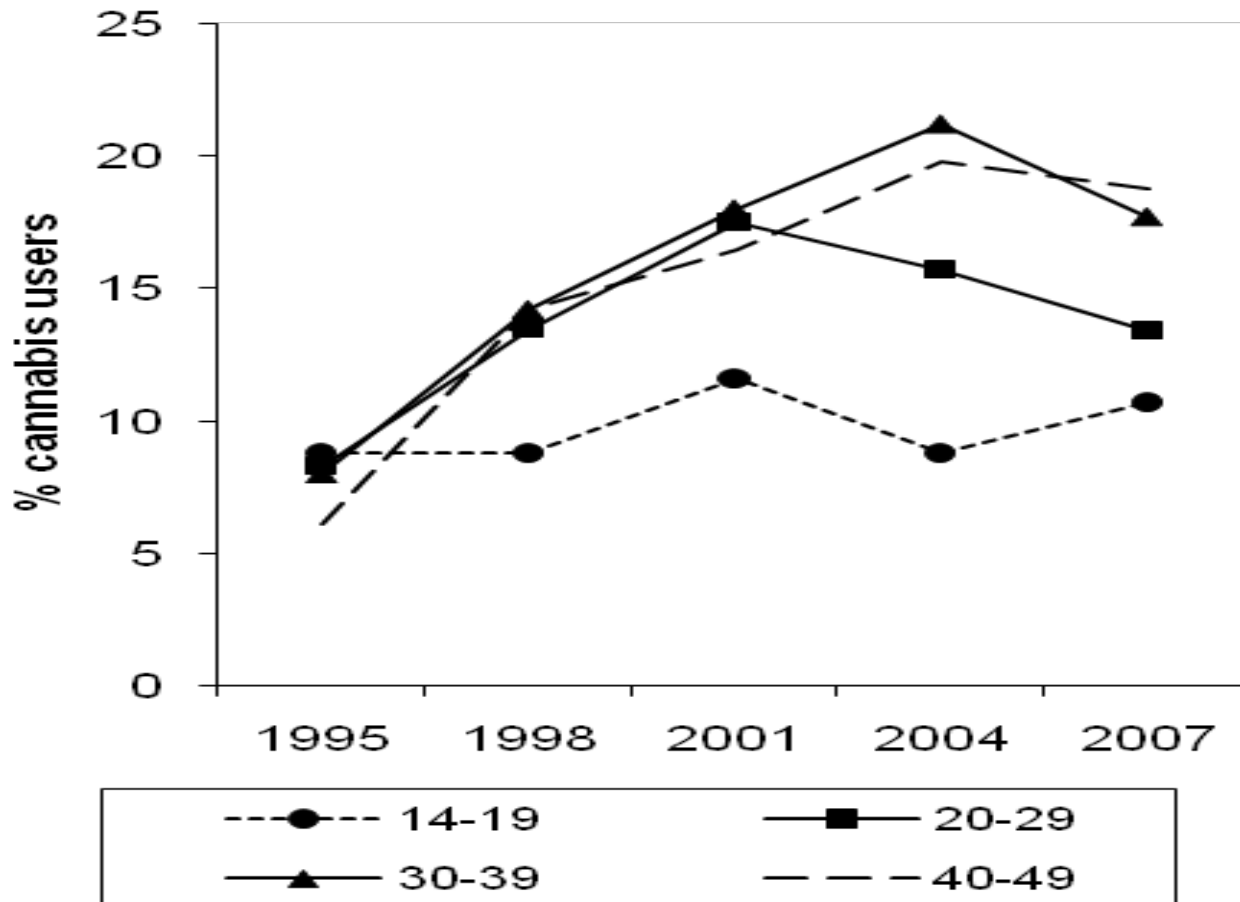


Used cannabis in past year, Australian secondary school students, 2008

2008 ASSAD Survey

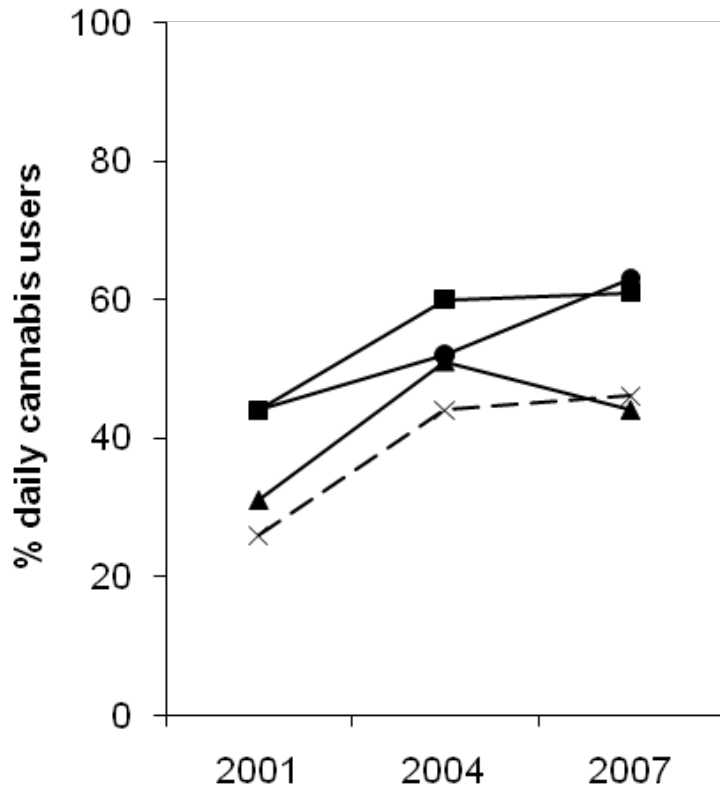


Percentage of daily users by age group in Australia 1995-2007



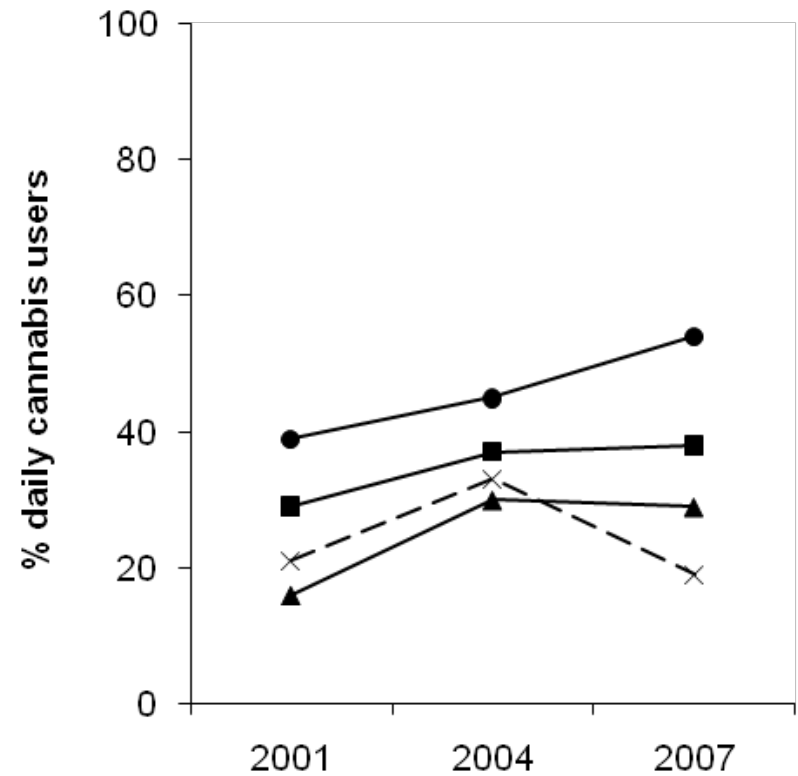
Indicators of problem use among Australian daily smokers

Difficulty controlling use



● 14-19 ■ 20-29
▲ 30-39 ✕ 40-49

Use 10+ cones/day



● 14-19 ■ 20-29
▲ 30-39 ✕ 40-49



Prevalence among indigenous communities

- ❑ The rates of recent cannabis use among Indigenous Australians is around double that of the general population
- ❑ There are new and growing concerns about cannabis use and associated problems among some remote Indigenous communities in particular



An indigenous community

- ❑ In the 'Top End' of the Northern Territory, cannabis use was not detected in a 1980s survey in the region, a rapid rise in its use was evident from the mid-1990s due to expansion of local trafficking.
- ❑ In 2001, it was estimated that between 60%-73% of males and 16%-27% of females (aged 13-36 years) in eastern Arnhem Land (NT) communities were using cannabis with around three-quarters of these using it at least weekly and 44% smoking it daily (Clough, 2007)

Police perceptions of use

Police perceptions of cannabis use among local Aboriginal and Torres Strait Islander people (n=792)

Police perceptions:

- ❑ cannabis very commonly or commonly used
88% of urban and non-urban police
- ❑ 'problem' use of cannabis
77% of urban and non-urban police

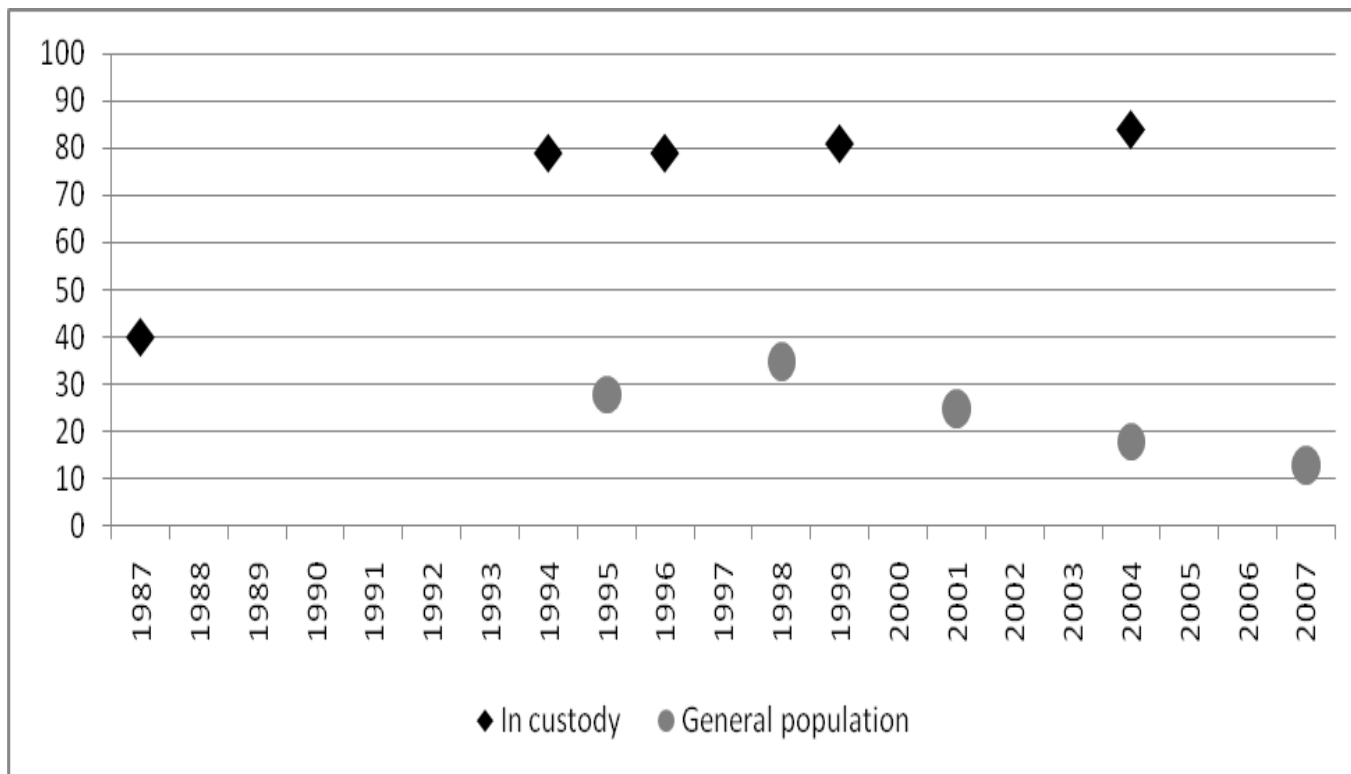
Putt & Delahunty (2006)

Recent youth cannabis use in selected Pacific Island States/Territories

PICT	Year	N	Male %	Female %
Australia	2007	1549	8.0	6.3
American Samoa	2007	3625	15.2	5.6
Cook Islands	2006	258	6.5*	6.5*
Guam	2007	1610	25.6	20.5
Marshall Islands	2007	1522	14.1	3.2
New Zealand	2007	9107	16.5	14.8
Northern Mariana Islands	2007	2292	37.5	26.3
Palau	2007	732	43.7	33.0
Solomon Islands	2008	592	44.7*	44.7*
Tonga	2008	387	16.5*	16.5*
Vanuatu	2008	301	43.2	17.1

Adolescents in the CJS: Patterns and problems

Current cannabis use: comparison between general population and juvenile detention samples (%)



** data of young people in custody does not represent Australian wide figures (1987 = Vic; 1994, 1999 = NSW; 1996 = QLD; and 2004 is Australia);

Cannabis harms and adolescence

Problems associated with adolescent cannabis use

- Early adolescent cannabis use (<16 years) is associated with increased risk of:
 - substance use disorders (x2 dependence)
 - mental health problems (x5 psychosis)
 - truancy and drop-out (x3 – 17% PAR)
 - juvenile offending

Cannabis use amongst police detainees

- ❑ Most common illicit drug detected
- ❑ From 1999 to 2007 the Drug Use Monitoring in Australia program indicated that 50-60% of police detainees detected positive (UDS)
- ❑ Towards the end of 2007, a sample reported 53% reported use in the past 12 months, with more than 2/3 reporting weekly+ use

Cannabis & acquisitive crime

- NZ Police stations (Wilkins & Sweetsur, 2010)
- n=2125 detainees
- spending on cannabis predicted involvement in acquisitive crime (OR 2.5 if purchased in previous 30 days)
- cannabis was associated with property crime but not with illicit drug dealing

Adolescent cannabis use and crime

NSW Secondary school students (Baker, 1998):
cannabis users significantly more likely to engage
in numerous crimes

NSW Juvenile detainees (Salmelainen, 1995):
significant relationship between rate of property
offending and cannabis use independent of other
risk factors

Cannabis & crime: a causal link?

Causal link or association?

- Cause each other or common cause?
- Norwegian longitudinal study of 1353 individuals from 13 to 27 years:
 - robust association between cannabis use and later registered criminal charges
 - largely drug specific crimes

(Pedersen & Skardhamer, 2009)

Causal link or association?

- BUT the methodology and analytic strategy has been criticised and others concluded the same study did show that cannabis users, at aged 20 years, were at significantly greater risk of being charged with criminal offences other than drug related compared with non-users (6.5% vs 1.1%)

(Bretteville-Jensen & Rossow, 2011)

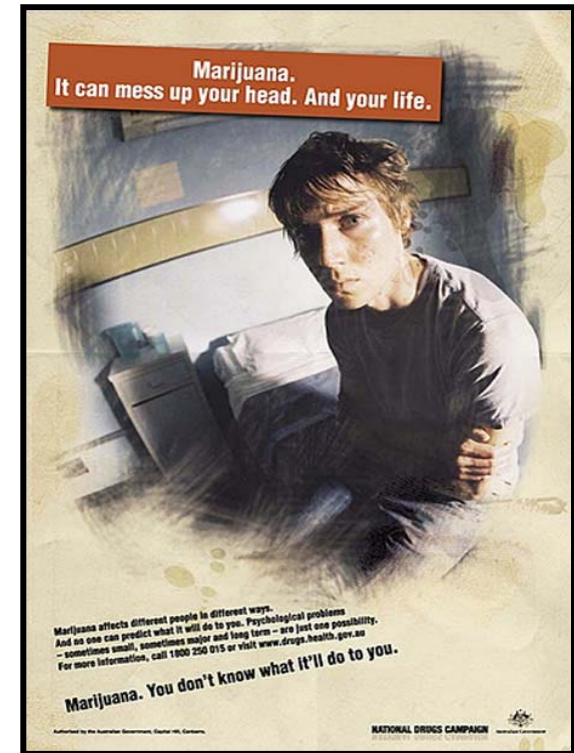
Community prevention approaches

Community prevention

Current cannabis prevention education

- ❑ cannabis use can affect educational attainment
- ❑ no longer only focussing on physical effects
- ❑ much greater emphasis on psychological and social impacts
 - ❑ legal consequences/driving
 - ❑ effects on relationships and employment

This has been reflected in the mass media campaigns conducted by both Federal and state governments

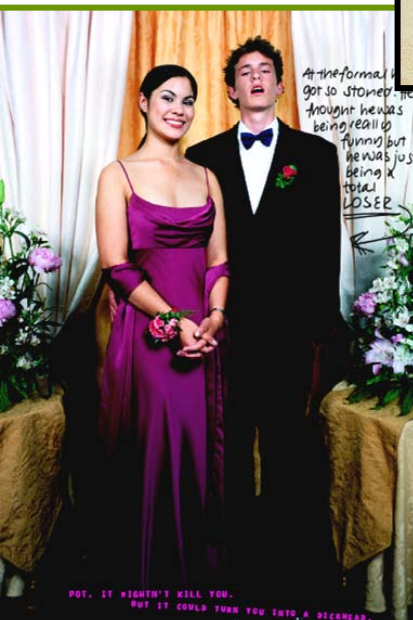
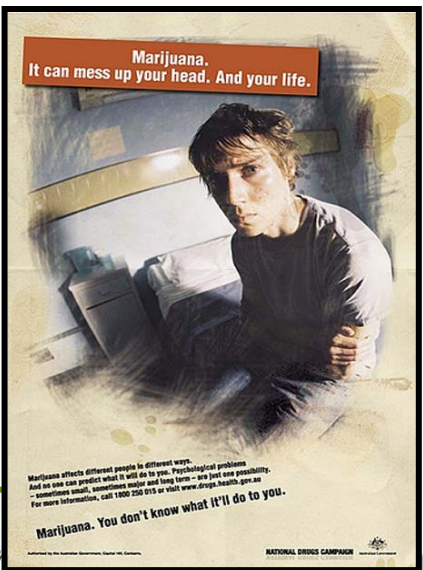


In the 2007 survey, more than 23,000 people aged 12 years or older provided information on their drug use knowledge, attitudes and behaviours. T

Cannabis



nccpic
national cannabis
prevention and
information centre

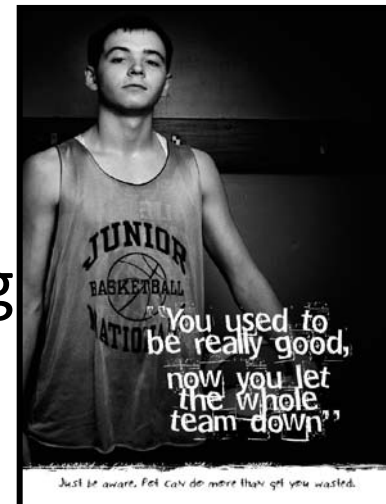


School-based prevention

School-based prevention: cannabis

MODELS

- ❑ *Social influence*: motivates against use and helps identify and resist pro-drug influences
- ❑ *Information*: education on harmful effects to influence attitudes and thus behaviour
- ❑ *Affective*: emphasise the personality and values of the young person, assuming deficits in self esteem, communication, decision making or assertiveness

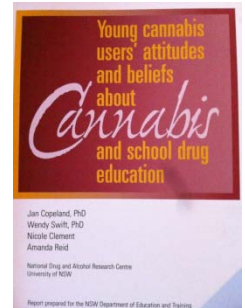


School-based prevention: cannabis

❑ Generally poor reputation among health sector
BUT

❑ Recent meta-analysis (Porath-Waller, Beasley & Beirness (2010)
of 15 studies reported that they had a positive
effect on reducing cannabis use *with* controls

- ❑ More comprehensive than only social influence (all 3 model elements included)
- ❑ > 14 sessions (intensity not length)
- ❑ Facilitated by non-teachers (motivation, credibility & training issues)
- ❑ Interactive style
- ❑ High school more effective than Middle school (younger than 14 years)



School-based 1st aid



ncpic
national cannabis
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information centre

- ❑ MAKINGtheLINK is a curriculum-based program for schools to promote help-seeking for cannabis use and mental health problems
- ❑ By seeking help early, young people are less likely to develop long term consequences as a result of mental health and substance use issues
- ❑ Young people are reluctant to seek professional help and tend to keep their problems to themselves or turn to their friends, parents or teachers for support – people who often don't know what to do

<http://ncpic.org.au/workforce/teachers/making-the-link/>



CJS responses

Police strategies

- ❑ A significant proportion of offenders who have contact with police are experiencing cannabis related problems
- ❑ Police can play a role in community education and referral to treatment
- ❑ Police strategies might involve partnerships with local agencies such as schools, health services and community groups

Policing of street level cannabis markets

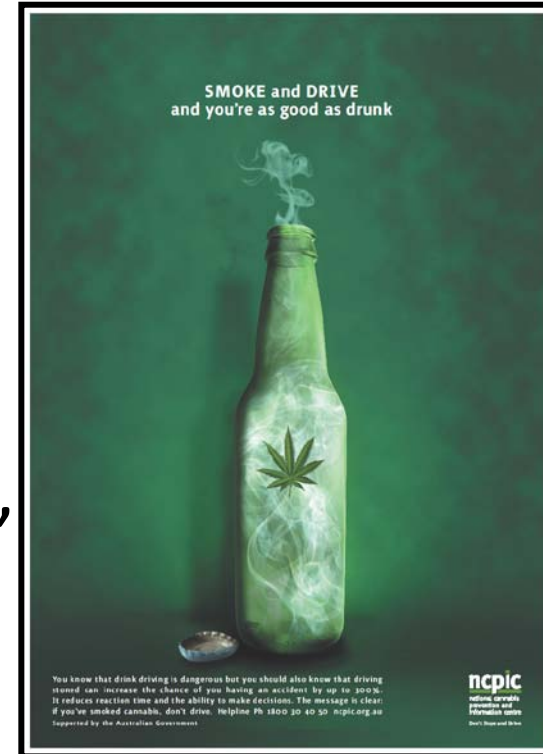
- ❑ Cannabis markets are typically closed:
 - ❑ Proactive e.g.
 - ❑ Problem oriented policing
 - ❑ Third party policing
 - ❑ Drug diversion: police based
 - ❑ Drug nuisance abatement strategies

Willis, 2010

Roadside drug testing

- ❑ Increased accident risk of x2-3 times
- ❑ Targeted roadside testing now in all jurisdictions
- ❑ Testing positive for illicit drugs more likely to be male, professional drivers, dependent or early onset users & not believe use affects driving

Butler (2007)



Police diversion



- ❑ Redirection of offenders away from criminal justice processes
- ❑ Vary across jurisdictions between caution to assessment and treatment
- ❑ AIC evaluation positive (across levels of offending and intervention complexity)
- ❑ Barrier to police uptake: lack of outcome feedback on referrals and uncertain of effectiveness

Court diversion

- ❑ Drug-using offenders brought before the court
- ❑ Vary markedly between jurisdictions (type of offences, timing (pre or post sentence), type of intervention etc)
- ❑ Clear benefits for program completers regarding drug use and reoffending
- ❑ Cost benefit analyses yet to be rigorously conducted

Weed it out

- Indigenous people, elected representatives and leaders in both Cape York and the Torres Straits Communities have embraced crime prevention strategies and are working with Law Enforcement Agencies to reduce availability of cannabis in their communities
- The frequency of Crime Stoppers and Crime Intelligence Reports being received from these communities has risen substantially displaying public confidence in the project
- JCU with NCPIC will continue to provide demand reduction activities and evaluate (funded by NH&MRC)

Health Interventions

Interventions

- Screening, assessment and interventions for cannabis related problems in adult CJS (1^o prevention) and juvenile CJS (2^o prevention)
- Evidence-based interventions within diversion schemes that offer individual, group, family and community-wide interventions tailored to need

Adolescent Cannabis Check-up

In the initial session, assessment data are collected concerning the participant's substance use and its role in their life.

This includes areas such as: quantity and frequency of use; positive and negative consequences of use; the individual's life goals; readiness for change; and support networks.

This information is used to prepare a Personalised Feedback Report (PFR) that is reviewed with the participant in the feedback session conducted approximately one week later.

Adolescent's interventions: overview

Non-treatment seeking

- ❑ Adolescent Cannabis Check-up: Significant reductions in level of use, dependence and abstinence rates at 3 months post treatment similar to CBT among treatment seekers (Martin & Copeland, 2005 & 2008)

Treatment seeking

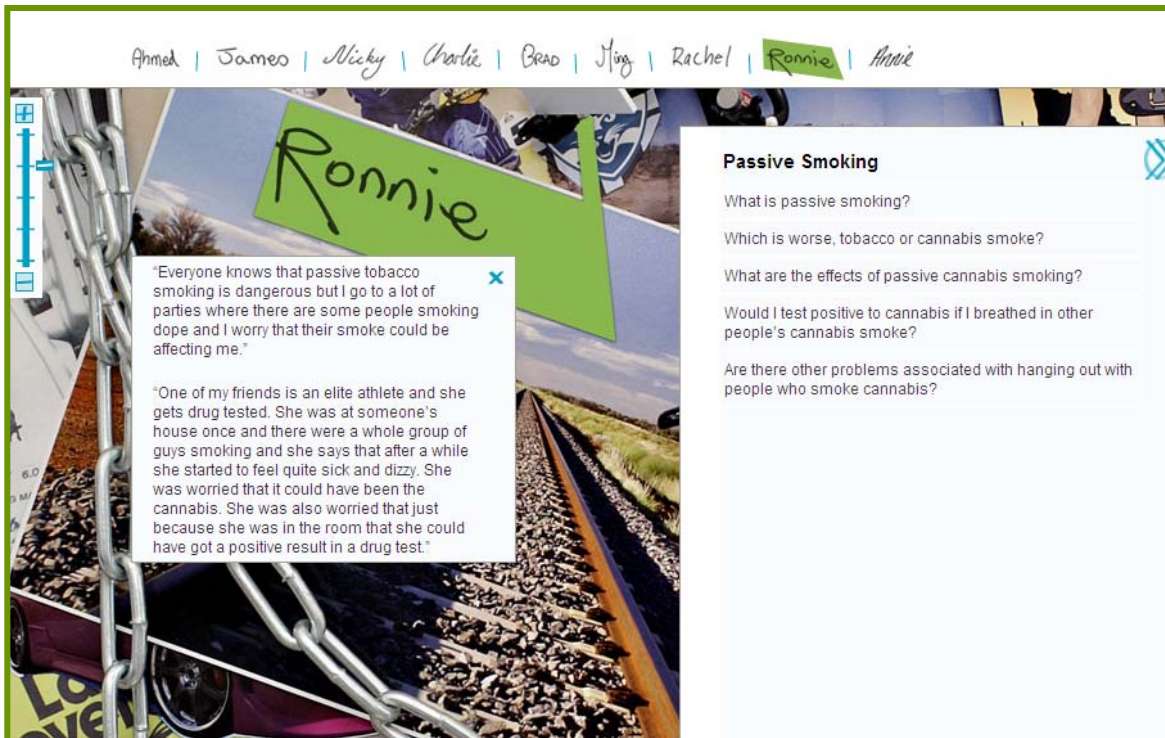
- ❑ Brief CBT as used in ACCU
- ❑ CBT and any intervention in the Cannabis Youth Treatment Experiment of Dennis et al. 2004 (up to 30 sessions with community reinforcement and family therapy)
- ❑ Intensive multidimensional family therapy (Liddle et al., 2001) for adolescents with CUD and complex psychosocial problems
- ❑ No trial of residential rehabilitation for cannabis use disorder *per se*

NCPIC activities?

- the NCPIC website – www.nctic.org.au
- a free national Cannabis Information and Helpline
- development of pamphlets, resources and community engagement activities
- development of interventions and measurement tools
- free national clinical training:
specific youth sector materials
ACCU training & materials



NCPIC website – Young People



Designed to give a 'feel' of a Facebook page – each of the nine young people have their personalities illustrated by the images on their wall

- different ethnic groups, genders and ages are reflected, with questions that young people wanted answered

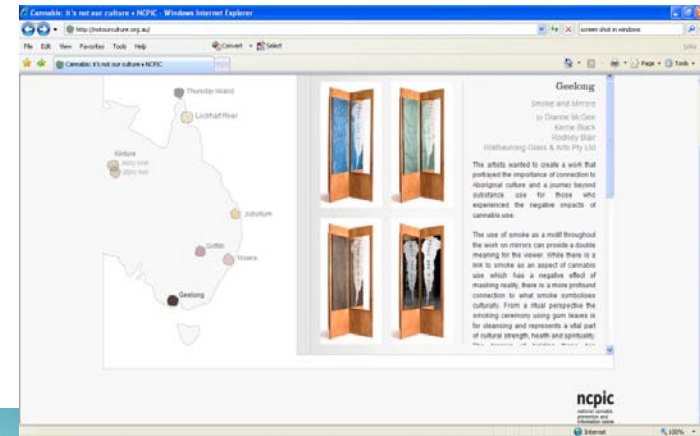
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“Cannabis: it’s not our culture”

- a national art project with 7 communities
- an indigenous health workers website with a range of resources
- ongoing small grants scheme



Responses

- ❑ Supply control, combined with demand reduction within communities, and diversion programs
- ❑ Family & school-based interventions: universal and targeted
- ❑ An understanding of the role of culture /gender and their place in interventions with structural determinants and community engagement
- ❑ Interventions for early and late stage dependence and mental health co-morbidities
- ❑ Pharmacotherapies for the management of withdrawal and craving (oral THC; *Sativex*, OT)

Contact information



ncpic
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prevention and
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- ❑ J.Copeland@unsw.edu.au
- ❑ 1800 304050
- ❑ Website: www.ncpic.org.au

