

11.32 Substance Use Disorder Education and Prevention

Resolution passed 1990; amended 2019; amended 2023

Whereas, Washington State PTA recognizes that substance use disorders will continue to be a significant threat to the well-being of families, children and youth, and that the use of multiple substances during adolescence increases the likelihood of substance use disorder and health risks in adulthood; and

Whereas, the energy drink market in the United States is over \$20 billion annually and growing, and the potential dangers to adolescents who consume energy drinks include dehydration, heart complications, liver damage, kidney failure, dental erosion, anxiety, insomnia, and more, and research has shown that teens who consume energy drinks are more likely to use alcohol, tobacco, amphetamines, prescription stimulants, and other illegal drugs; and

Whereas, children and youth in homes with substance use disorders are commonly involved with child welfare and foster care systems, creating long-term challenges; and

Whereas, Healthy Youth Survey data continue to show that substance use can start in middle school and as students get older, it becomes more common for them to use multiple substances, with the most common combination being alcohol and cannabis; and

Whereas, since legalization in 2012, the perception of harm of cannabis use among high school students in Washington state has decreased significantly; according to the National Institute on Drug Abuse, up to thirty percent of people who use cannabis may have some degree of cannabis use disorder; youth who begin using cannabis before the age of 18 are four to seven times more likely to develop a cannabis use disorder than adults; and because hemp-derived tetrahydrocannabinol (THC) products, the primary mind-altering chemical in cannabis, are available for youth to purchase online with limited restriction; and

Whereas, many teens believe prescription drugs are safe for recreational use because they are prescribed by a doctor, and many individuals over the age of 12 who misuse prescription opioids get them from family or friends; and

Whereas, evidence-based substance use disorder education programs based in schools and communities have been successful at decreasing substance use in youth; and

Whereas, an American Psychological Association study on zero-tolerance school discipline policies concluded that zero-tolerance policies did not deter future substance use, but did have negative effects on child development, decreased student education outcomes and increased racial disparities and referrals into the juvenile justice system; and

Whereas, to help prevent fatal opioid overdoses among children and youth, overdose-reversal medication is now required in high schools in districts with more than 2,000 students; and

Whereas, Washington State PTA supports alternatives to expulsion and suspension, including restorative justice and other programs that focus on prevention, treatment and rehabilitation.



Therefore, be it

Resolved, that Washington State PTA and its local PTAs and councils shall continue to advocate for legislation, policies and funding that prevent the use of harmful substances through, but not limited to:

- evidence-based education, abuse-prevention, and harm reduction programs for students, families, caregivers, and community members regarding the methods, symptoms, effects and dangers of alcohol, tobacco/nicotine products, cannabis products, and any drug abuse, including "off-label" use of prescription and non-prescription drugs
- the allocation of tobacco settlement funds to health programs aimed at prevention, intervention, and control of tobacco product use by children and youth
- school staff training for early identification, intervention, and follow-up care for students
- availability of overdose-reversal medication in all schools
- protections for children and youth from being exploited by advertising/marketing campaigns, labeling and packaging, and youth-appealing products among industries that sell energy drinks, alcohol, stimulants, tobacco/nicotine products, cannabis products, and other addictive drugs
- reduction in youth access to unregulated hemp-derived THC products
- resources and education for families, schools, and school districts about the dangers of energy drink consumption by children and youth; and be it further

Resolved, that Washington State PTA and its local PTAs and councils work for increased awareness of existing regulations and laws that protect children and youth from these hazards to their health and well-being, including prohibitions on advertising, marketing or knowingly providing to minors any information that would be harmful, or selling or providing materials to minors that are illegal, including, but not limited to alcohol, tobacco and vaping products, cannabis products, drugs and other substances; and be it further

Resolved, that Washington State PTA and its local PTAs and councils advocate for programs and projects that offer positive alternative activities to drug use and abuse for children and youth; for collaborative and holistic services that support families, children, and youth; for school districts to review their policies and procedures around disciplinary consequences of alcohol and substance use by students; and for expansion of alternatives to suspension, expulsion or incarceration, including alternative discipline and restorative justice programs, for students with substance use disorders; and be it further

Resolved, that Washington State PTA and its local PTAs and councils work in cooperative relationships with school districts, state and local government agencies, child welfare organizations, education support organizations, professional medical and advocacy organizations and the general public to deliver the most current evidence-based research curriculum regarding substance use disorders, promote substance and drug use disorder education, outreach, prevention and treatment; and to expand programs that reduce access of children and youth to prescription drugs, such as safe storage and take-back programs, and restrictions on internet pharmacy sales of opiates and other addictive prescription drugs.

