

NC Advisory Council on Cannabis

Prevention & Treatment Subcommittee

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Disclosures

- SUD Federation
- The Coalition
- Prevention Providers Association
- Community Impact NC (CINC)

“CINC does not support legalizing the cultivation, processing, distribution, possession, or sale of cannabis under North Carolina law for reasons including the potential harms to children and adolescents, as described by the American Academy of Pediatrics.”

Introduction



To work in partnership with communities to bridge gaps through direct support, evidence-based and innovative practices, and policy to minimize and prevent the harm caused by substance misuse.



The North Carolina Substance Use Disorder Federation is a consortium of substance use disorder organizations and groups that promote policies to assure quality systems of education, prevention, and the expansion of a continuum of prevention and treatment services and recovery supports to effectively meet the needs of our population.

The Federation serves as the official substance use disorders subgroup of the MHDDSAS Coalition of North Carolina (Coalition).



Member Feedback

NC Psychiatric Association
[Position Statement](#)

“Regular or high-potency use increases psychosis risk two-to four-fold, particularly among individuals with genetic vulnerability or family history.” [Cannabis Newsletter](#)





Member Feedback

Coastal Horizons

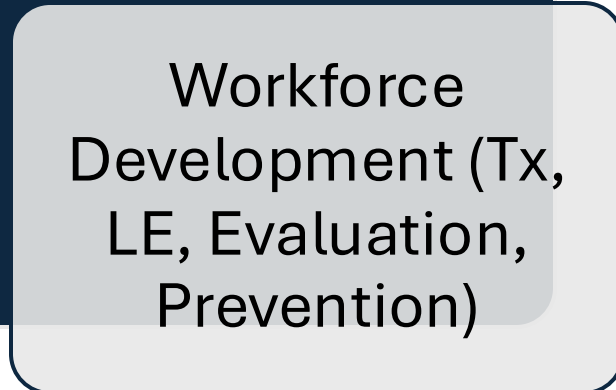
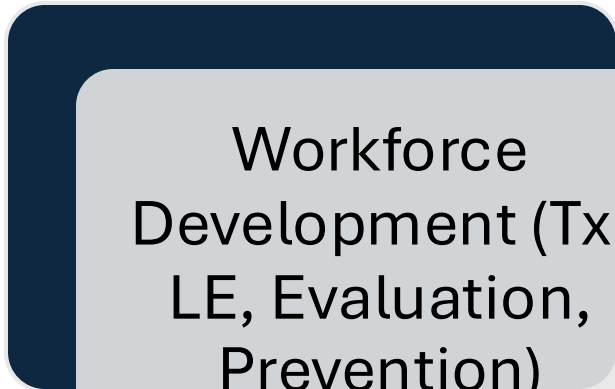
“There are no best practice treatment modalities for Cannabis Use Disorder although some treatment modalities are adaptable. Would consider the need for workforce i.e. training, funding”



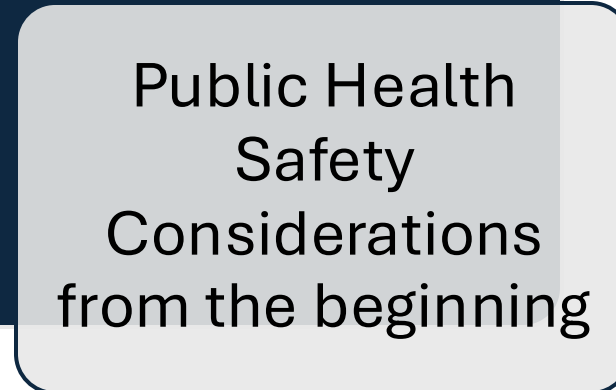
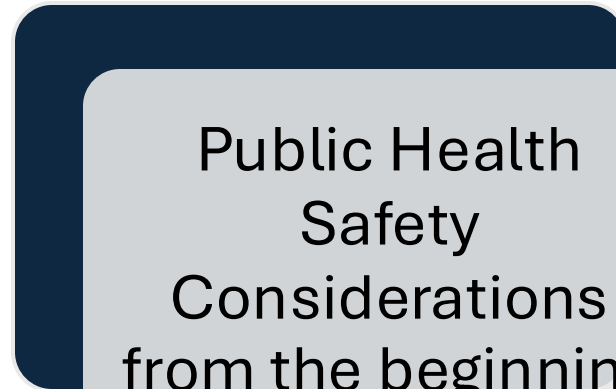
Member Feedback Themes



Funding
Appropriation



Workforce
Development (Tx,
LE, Evaluation,
Prevention)



Public Health
Safety
Considerations
from the beginning

Areas For Consideration

- Workforce & Service Capacity Challenges
 - 93 of NC's 100 counties are considered Mental Health Professional Shortage Areas (NC Office of Rural Health, 2024)
 - Demand for mental health and substance use services increased post-COVID, while workforce growth has not kept pace
- Evidence-based treatment capacity for Cannabis Use Disorder remains limited, requiring targeted expansion
 - Cognitive Behavioral Therapy, Motivational Enhancement Therapy demonstrate efficacy
- State funding and resources for Substance Use Disorder services remain constrained
 - Problem Gambling Program
 - DHHS has created positions to research needs and train professionals
 - Free / Low Cost training options came from this initiative
 - Helplines providing specialized support and response

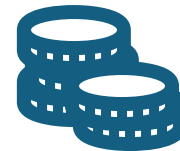
Primary Prevention



Delaying the age of first
use



Primary Prevention is the
helmets, the hand washing, and
the seatbelts of the addiction
space.



.0024% of NC State Budget



“the average return on investment
exceeded \$15 to 1”

Therapeutic Cannabis

To date, the FDA has not approved a marketing application for cannabis for the treatment of any disease or condition. The agency has, however, approved **one cannabis-derived drug product: Epidiolex (cannabidiol),**

and **three synthetic cannabis-related drug products: Marinol (dronabinol), Syndros (dronabinol), and Cesamet (nabilone).**

These approved drug products are ***only available with a prescription from a licensed healthcare provider.***

Importantly, the FDA has not approved any other cannabis, cannabis-derived, or cannabidiol (CBD) products currently available on the market.

<https://www.fda.gov/news-events/public-health-focus/fda-and-cannabis-research-and-drug-approval-process>

Therapeutic Use of Cannabis and Cannabinoids A Review

Conditions for which cannabinoids have approval from the US Food and Drug Administration include HIV/AIDS-related anorexia, chemotherapy-induced nausea and vomiting, and certain pediatric seizure disorders. (11/26/25)

[DOI: 10.1001/jama.2025.19433](https://doi.org/10.1001/jama.2025.19433)

Core Indicators

Age of First Use

Use in Past 30 Days

Perception of Harm/Risk

Perception of Disapproval

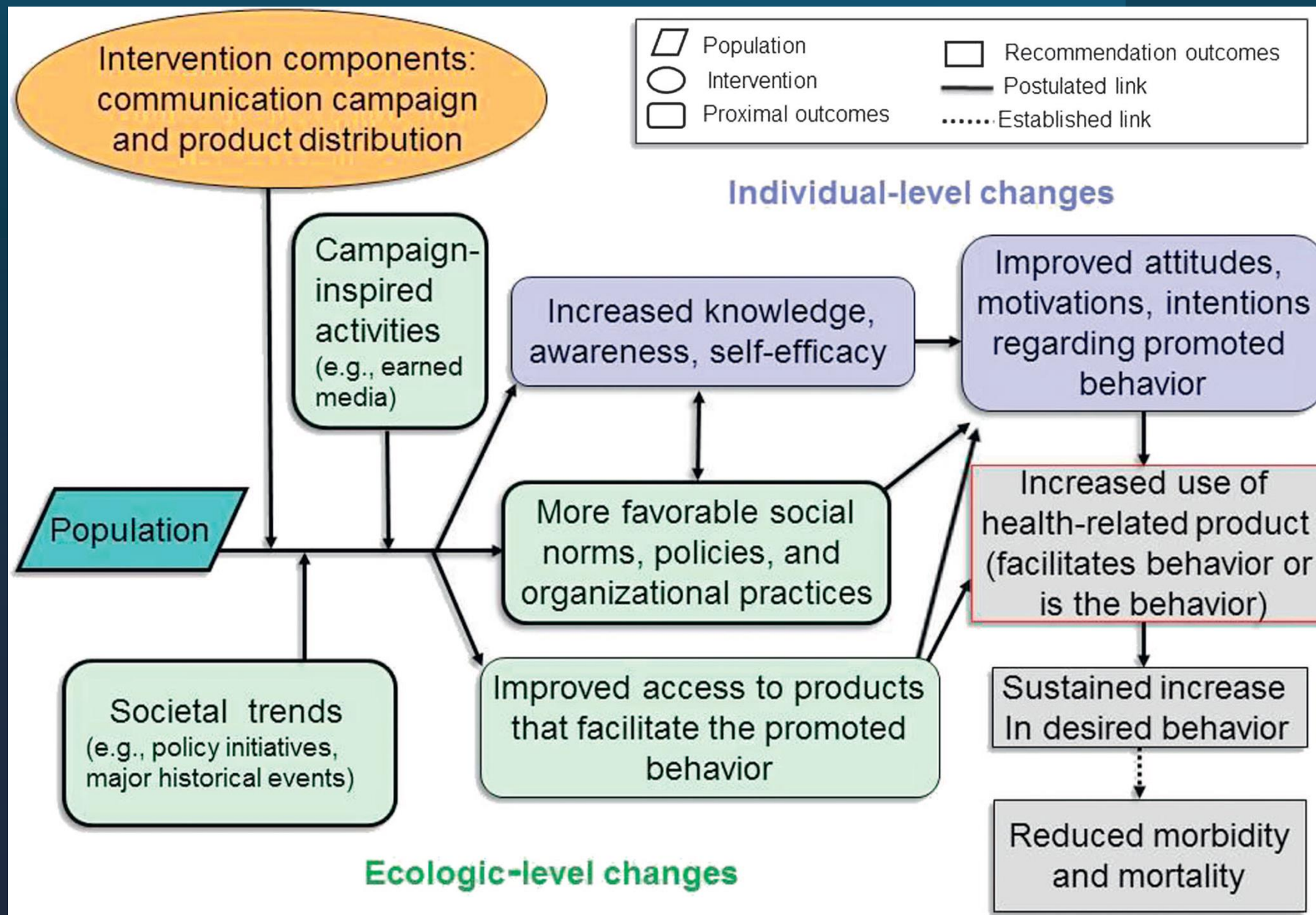
Communication Campaigns as an Evidence Based Prevention Strategy

Health communication campaigns including mass media and health-related product distribution have been used to **reduce mortality and morbidity** through behavior change.

The intervention is defined as having two core components reflecting two social marketing principles: (1) promoting **behavior change** through multiple communication channels, one being mass media, and (2) distributing a **free or reduced-price product that facilitates adoption and maintenance of healthy behavior change**, sustains cessation of harmful behaviors, or protects against behavior related disease or injury.



Mass Media Health Communication Campaigns Combined with Health-Related Product Distribution
A Community Guide Systematic Review



Policy

Public Health Safety Provisions

- Formulation, Labeling, Package, Storage
- Advertising, Promotion, Sale
- Environmental Protections
- Contaminant Limits and Testing
- Local Option
- Control and Tracking
- Retail Associate & Consumer Education

[NC Marijuana Policy Health & Safety Considerations](#)

NCDHHS appropriation for Treatment and Prevention separately and specifically. Using tax revenue percentage.

Example:

Roughly 30% of cannabis revenues ***in Illinois*** are directed to substance misuse and mental health: prevention and other services (20%); cannabis-related crime prevention (8%); public education and data collection and analysis (2%)

**Drug policy reforms
must be carefully
crafted and implemented
to avoid negative
impacts on children,
disadvantaged individuals
and communities, and
residential neighborhoods.**

Thank You!

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Additional Resources

- [The Unequal Geography of Recreational Cannabis Retailers in the U.S.](#)
- [Non-disordered Cannabis Use Among US Adolescents](#)
- [Active cannabis marketing and adolescent past-year cannabis use](#)
- [RMHIDTA Report 2020 \(Colorado\)](#)