



CANNABIS AND YOUTH INVOLVED IN THE CHILD WELFARE SYSTEM



Adolescence is a time of transition between childhood and adulthood and is marked by rapid physical, cognitive, social, and psychological changes. Brain development, particularly related to executive functioning for decision making, continues at a quick pace through young adulthood.¹ Cannabis use during these developmental stages raises concerns associated with its potential for short- and long-term effects. Professionals working with adolescents at risk of—or involved with—the child welfare system have an opportunity to intervene early and provide education and resources to promote health and well-being.

The National Center on Substance Abuse and Child Welfare ([NCSACW](#)) created this four-part tip sheet series for child welfare, substance use disorder (SUD) treatment, court, and health care professionals to provide an overview of cannabis use, and its effects during the prenatal period, in the home environment, and on adolescent development.

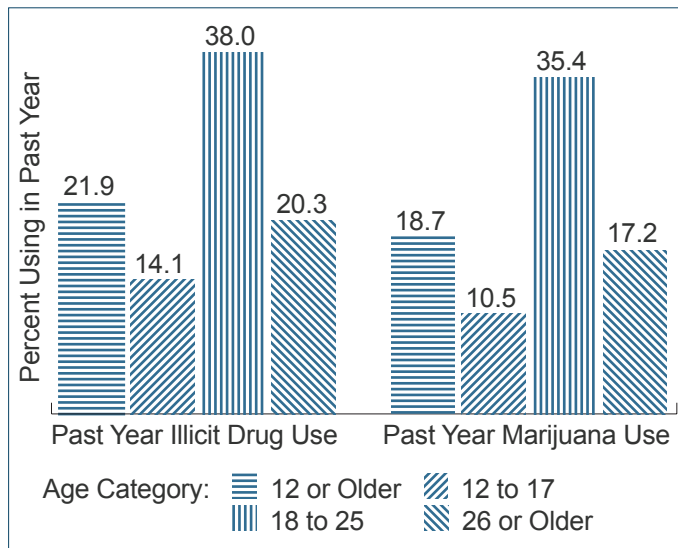

- [Tip Sheet 1—Navigating the Complexities of Cannabis Use Among Parents and Adolescents in Child Welfare Services](#) offers a broad overview for all professionals working with children, parents, and their family members. Details include the shifting legal landscape of cannabis in states, how cannabis use affects families, and practice considerations for professionals.
- [Tip Sheet 2—Cannabis Use During Pregnancy: What Professionals Working with Pregnant People Need to Know](#) provides information about the effects of cannabis use on fetal and neonatal health, how to develop a Plan of Safe Care (POSC), and offers approaches to responding to prenatal use.
- [Tip Sheet 3—Cannabis Use: Considerations for Professionals Working with Children, Adolescents, Parents, and Other Family Members Involved in Child Welfare and the Courts](#) outlines environmental safety and risk concerns for children and adolescents when parents or caregivers use cannabis. Tips include strategies and approaches professionals can use to mitigate risk and build parental capacity.
- [Tip Sheet 4—Cannabis and Youth Involved in the Child Welfare System](#) describes the risk of cannabis use on adolescent development and provides strategies to engage youth who are at risk of or involved with the child welfare system and using cannabis.

NCSACW recommend readers of this series start with Tip Sheet 1, which provides foundational and essential information relevant to the others. After reviewing Tip Sheet 1, readers may go through Tip Sheets 2-4 independently since they focus on specific populations and are designed for professionals working with those populations.

Risks of Adolescent and Young Adult Cannabis Use

Cannabis is the most frequently used illegal drug during adolescence.² Both NCSACW and the Substance Abuse and Mental Health Services Administration (SAMHSA) define adolescence as ages 12-17 and young adults as 18-25.³

Figure 1. Past Year Illicit Drug Use and Past Year Marijuana Use: Among People Aged 12 and Older; 2021³

2.7 MILLION ADOLESCENTS
ages 12 – 17 reported marijuana* use in 2021


11.8 MILLION YOUNG ADULTS
ages 18 – 25 reported marijuana* use in the prior year (see Figure 1)

1.3 MILLION ADOLESCENTS
ages 12 – 17 and

5.7 MILLION YOUNG ADULTS
ages 18 – 25 are diagnosed with a marijuana use disorder.⁴

Contributing factors to developing a cannabis use disorder (CUD) can include experiencing adverse childhood experiences (ACEs). An ACEs score of one or more significantly increases the risk of young adults developing a CUD.⁵ Research shows that youths entering foster care have high [ACEs](#) that increase with each additional foster care placement.^{6,7}

SAMHSA created [Preventing Marijuana Use Among Youth](#), a comprehensive guide that highlights programs and policies to prevent marijuana use among youths aged 12 to 17. The guide includes an overview of the current approaches and challenges to prevent and reduce marijuana use.



“Developing brains, such as those in babies, children, and teenagers are especially susceptible to the harmful effects of marijuana and tetrahydrocannabinol (THC).”^{10,11,12}

Cannabis use can [affect decision-making, sequential memory, and impulse control abilities](#)—all of which are refined during the adolescent developmental period. Specifically, the brain functioning processes responsible for planning, prioritizing, and decision-making continue to mature up to and after age 20.^{8,9}

To add to the concern, the cannabis products available today are stronger and more available than ever.^{13,14} Marketing strategies of products, such as the use of bright colors, enticing flavors, cartoon caricatures, and mimicking the packaging and labeling of popular candies are employed to appeal to adolescents. Cannabinoid sales have proliferated with growing accessibility online and at local retail outlets—including the expansion of unregulated cannabinoid products, such as products manufactured from [hemp-derived cannabidiol \(CBD\)](#).¹⁵ As cannabis accessibility has increased, there is a growing concern with youth’s perception of the risk of cannabis use. When there is a lower perceived risk of using a drug, there is a higher likelihood that a youth will use the substance.¹⁶ According to the [National Survey Results on Drug Use \(1975-2022\)](#), there has been a steady decline on the proportion of 12th graders who perceived regular cannabis use as a significant risk of harm.¹⁷

*The term “marijuana” is used if the cited source specifically uses the term. We use the term “cannabis” to refer to all products from the plant Cannabis sativa.

Risks of youth cannabis use include:

- Challenges with attention, concentration, problem-solving, learning, and memory
- Poor academic and job performance
- Lack of balance and coordination
- Poor judgment and decision-making
- Reduced life satisfaction
- Relationship problems¹⁸
- Increased risk of mental health disorders, including psychosis
- Potential for developing a SUD, including a CUD¹⁹

Engaging Adolescents—Talking to Youths

Engaging adolescents in a discussion about cannabis use provides an opportunity to apply [prevention strategies](#) and implement interventions, including a family-centered approach. Youth engagement is multifaceted and requires:



1. Establishing a trusting relationship²⁰

Fostering an environment of trust encourages meaningful dialogue that empowers young people to make informed choices while actively shaping their path to overall health and resilience. Using [open and non-judgmental communication](#) that validates each adolescent's culture, gender identity, and role within society remains essential to creating a secure space where they can freely express their experiences and perceptions. This approach is pivotal for understanding their diverse perspectives, experiences, and motivations, and helps establish a trusting relationship with professionals working with youths and their family members. Engagement and development of trust is particularly important for youths with diverse sexual orientation, gender identity, and gender expression. The [National Center for Youth with Diverse Sexual Orientation, Gender Identity & Expression \(SOGIE\) Center](#) offers resources and technical assistance for providing culturally responsive care across systems to children, youths, and their family members.



2) Creating an environment for regular and open communication involving parents, caregivers, and other family members²¹

Engaging with parents, caregivers, and other family members can help young people as they learn how to reduce risk behaviors. A family-centered approach provides an opportunity to offer services to the family and create an environment with open communication with parents, caregivers, and other family members.²² Youths, parents, caregivers, and family members are experts in their own lives and need to be part of their case and treatment planning. Authentic [youth engagement](#) involves partnering with youths during all aspects of case planning. This approach promotes well-being, healthy development, and positive outcomes, such as building skills, increasing protective factors, and overall empowerment.²³



3) Providing education and access to resources

To further enhance adolescent engagement, providing materials and resources that give accurate, age-appropriate information empowers youth to make informed decisions and effectively navigate situations involving cannabis. In addition, using [peer networks](#) and other supports systems can reinforce positive behaviors and nurture an environment that encourages adolescents to seek assistance when necessary.²⁴ Encourage adolescents to develop a plan with family members when unsafe situations arise, such as getting in a car with someone under the influence.

Comprehensive Prevention

Interventions to prevent or reduce adolescent substance use—including cannabis—are most effective when professionals working with youth: 1) understand the risks and needs of adolescents in the local community, and 2) work together to build a comprehensive integrated approach. An integrated approach considers individual factors like self-efficacy, current behaviors and genetics, home and school environmental factors, and other [social determinants of health](#) that influence adolescent use.²⁵

Practice Considerations for Child Welfare Workers, SUD Treatment Providers, Court Professionals, and Health Care Providers

Collaboration among professionals benefits parents, children, adolescents, and other family members. Building collaborative relationships with all professionals working with child welfare-involved adolescents takes time but often results in better referrals, effective services, and ultimately, better outcomes for all family members.



CHILD WELFARE WORKERS

Child welfare workers can prevent or reduce adolescent and young adult cannabis use by: 1) knowing the [common signs of use](#) while also educating and providing adolescents, parents, and their family members with [resources](#); 2) strengthening protective factors; 3) building trusting relationships with adolescents; 4) using [active listening](#) and open-ended questions; 5) using a [standardized screening tool](#) with all adolescents to identify drug and alcohol use; 6) connecting adolescents to clinical assessment and [treatment services](#) when needed; and 7) collaborating with providers and family members to coordinate case planning.

Use a [transition plan](#) as a tool to engage young adults transitioning out of care due to age restrictions in discussions on substance use, including cannabis. Provide them with information on

- State laws and the rules of their independent living program (ILP), college campus, or dorm (e.g., cannabis is legal in the state, but its use is prohibited in the dorm room).
- How engaging in cannabis use can affect things like scholarships, housing, and loss of employment.
- Healthy coping skills to reduce or [prevent](#) cannabis use.
- How to [access treatment](#) and resources if needed.



SUD TREATMENT PROVIDERS

Adolescent cannabis use may not result in a CUD, but when CUD is diagnosed, providers can help young people reach and sustain recovery through: 1) using [evidence-based treatment interventions](#) known to be effective for CUD, such as cognitive behavioral therapy and family-based treatment that engages and meets the needs of adolescents, parents, and caregivers;²⁸ 2) identifying and providing treatment referrals for co-occurring disorders (e.g., anxiety, depression, attention deficit hyperactivity disorder); and 3) helping parents and caregivers learn how they can support the adolescent's treatment and reinforce behaviors to promote health and well-being.

SAMHSA's [Screening and Treatment of Substance Use Disorders Among Adolescents](#) provides information to clinicians treating adolescents with a SUD.



Youth Thrive
An initiative of CSSP

is a research-informed approach from the Center for the Study of Social Policy that can help identify and promote protective factors in adolescents and young adults. Factors include youth resilience, social connections, knowledge of adolescent development, concrete support in times of need, and cognitive and social emotional competence.²⁶

SAMHSA's national youth substance use prevention campaign "[Talk. They Hear You.](#)"[®] prepares parents and caregivers to engage youths in conversations about substance use. The project "[aims to reduce underage drinking and other substance use among youths under 21 by providing parents and caregivers with information and resources they need to address these issues with their children early and often.](#)"²⁷ The campaign has a "[Talk. They Hear You.](#)"[®] [campaign overview video](#) and [podcast](#). Parents and caregivers can also use the campaign's [app](#) to help turn everyday situations into opportunities to talk with adolescents about alcohol and other drugs. [Screen4Success](#) helps parents and caregivers better understand the health and wellness of their children. It asks questions about substance use, mental and physical health, general well-being, and family life, while also providing an easy way for adults to identify areas of additional need.

More information on talking to adolescents about cannabis use: [Marijuana Talk Kit](#).



COURT PROFESSIONALS

Judicial officers, attorneys, Court Appointed Special Advocates (CASA)/Guardians ad Litem (GAL) are all in positions to help adolescents, parents, and family members heal and thrive by ensuring they have access to a broad range of services that meet their unique needs. Court professionals can promote adolescent well-being by: 1) knowing how cannabis affects behavior and development, 2) using a strength-based and non-stigmatizing approach in interactions, 3) implementing a universal [adolescent screening tool](#) in juvenile court programs, 4) asking if the adolescent was screened for substance use (including cannabis) and received a referral for an assessment and treatment when indicated, 5) providing access to additional services and resources if needed, and 6) collaborating with providers working with adolescents across systems.



HEALTH CARE PROVIDERS

The American Academy of Pediatrics recommends universal screening of adolescents for substance use. The National Institute on Drug Abuse provides two brief [online](#) validated adolescent screening tools that pediatric primary care providers can incorporate in their practice: *Screening to Brief Intervention (S2BI)* and *Brief Screener for Tobacco, Alcohol, and other Drugs (BSTAD)*.²⁹ Research shows approximately half of adolescents do not receive one-on-one time with their health care provider³⁰ even though individualized time can provide them with a chance to: 1) ask questions, 2) talk about their concerns or issues openly, and 3) receive needed education on various topics like substance use and preventive health.³¹ Providers can deliver and reinforce accurate information about cannabis use during one-on-one conversations.

Summary

Adolescents and young adults are particularly vulnerable to the effects of cannabis use. Professionals working with adolescents and their family members can establish a collaborative approach to: 1) coordinate services across systems that enhance prevention efforts, 2) identify risk behaviors early, and 3) provide rapid access to treatment resources when identified to improve adolescents' overall health and well-being.

NCSACW Resources

- [Working with Adolescents: Practice Tips and Resource Guide](#) provides information to community agencies serving adolescents at risk of misusing or abusing substances.
- [Meeting the Moment: How Child Welfare and Substance Use Disorder Treatment Professionals Can Address the Needs of Adolescents at Risk of Suicide and Mental Health Concerns](#) discusses strategies to help the increasing number of adolescents at risk of suicide and mental health concerns.

Additional Resources

- [Treatment Improvement Protocol \(TIP\) 39: Substance Use Disorder Treatment and Family Therapy](#) provides guidance to treatment providers on how to include family members in SUD treatment.
- [Substance Use Prevention Resources for Youth and College Students](#) offers downloadable publications, tipsheets, and mobile apps for youths, teens, and young adults.
- [Preventing, Identifying, and Treating Substance Use Among Youth in Foster Care](#) outlines ways to identify substance use, how to support youth in care who currently use or are at high risk for using substances, and strategies for prevention.
- [Engage, Involve, Empower: Family Engagement in Juvenile Drug Treatment Courts](#) provides a comprehensive set of recommendations for successful engagement of families in the juvenile drug treatment court.
- [Monitoring the Future](#) survey measures drug and alcohol use related attitudes among adolescent students nationwide.
- [Marijuana Use and Teens](#) provides a brief overview of marijuana use by teens.
- [United States Surgeon General's Advisory: Marijuana Use and the Developing Brain](#) gives information on the effects of marijuana on brain development and resources for families and professionals.
- [What You Need to Know About Marijuana Use and Teens](#) provides facts and information on how marijuana can affect a teen's life.

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