



Drug Trends in Indian Country – Cannabis and Youth Healing to Wellness Courts (YHWCs) – Part II

October 2nd, 2025



Before We Get Started...

This project was supported by Grant #15PJDP-24-GK-02602-MUMU awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice.

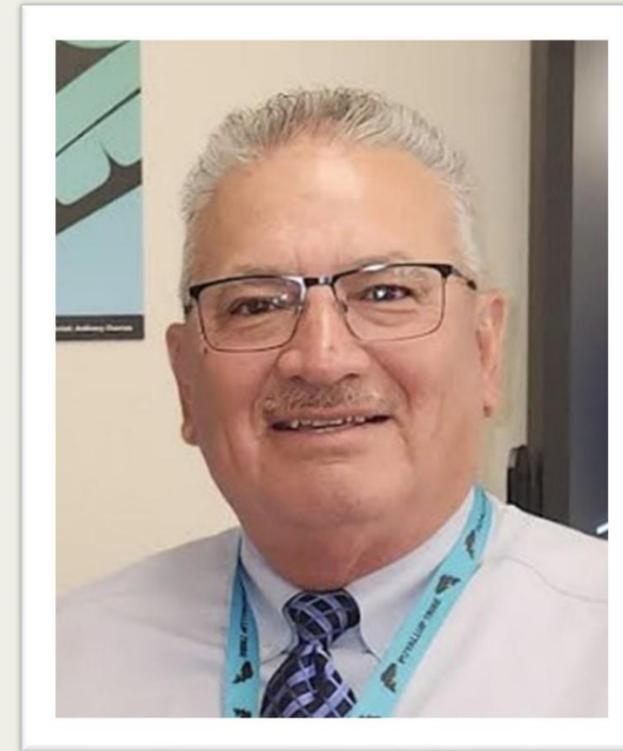
The opinions, findings, and conclusions or recommendations expressed in this program exhibition are those of the author(s) and do not necessarily reflect those of the Department of Justice.

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Presenters

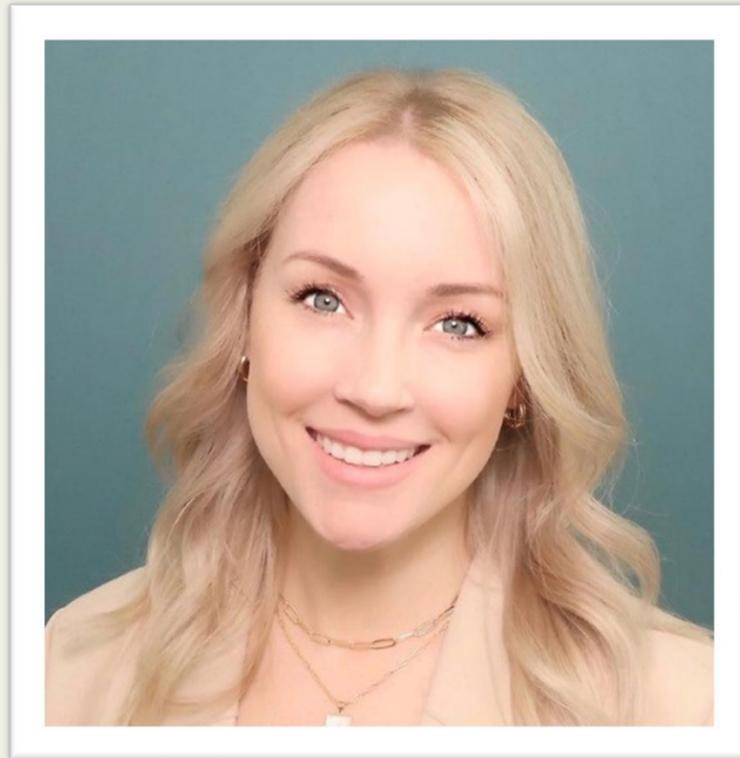


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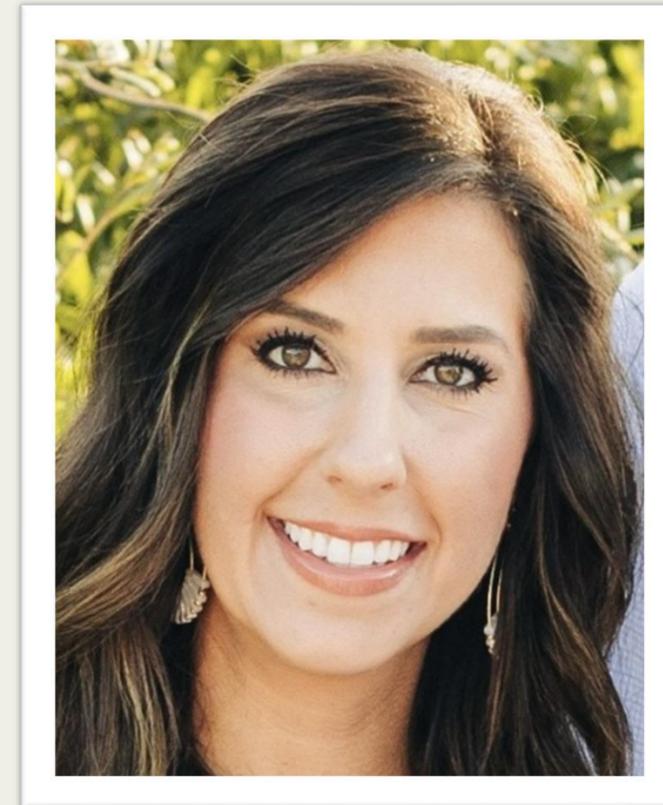


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Learning Objectives

Participants knowledge on the following will be increased:

1. The serious developmental, mental and physical health consequences of the use of marijuana/THC and related products for adolescents
2. Who, among AIANs, are using these substances
3. What to consider in testing for THC and Delta8 in YHWCs



Who is Using?

The Developing Brain and Cannabis (Marijuana)

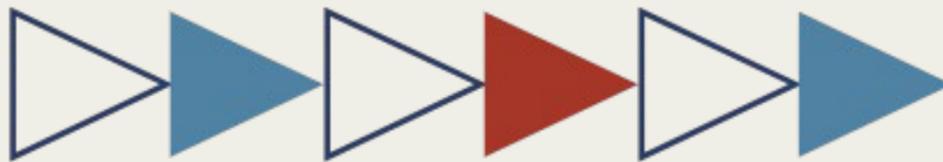
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Polling Question #1



Input will be anonymous.

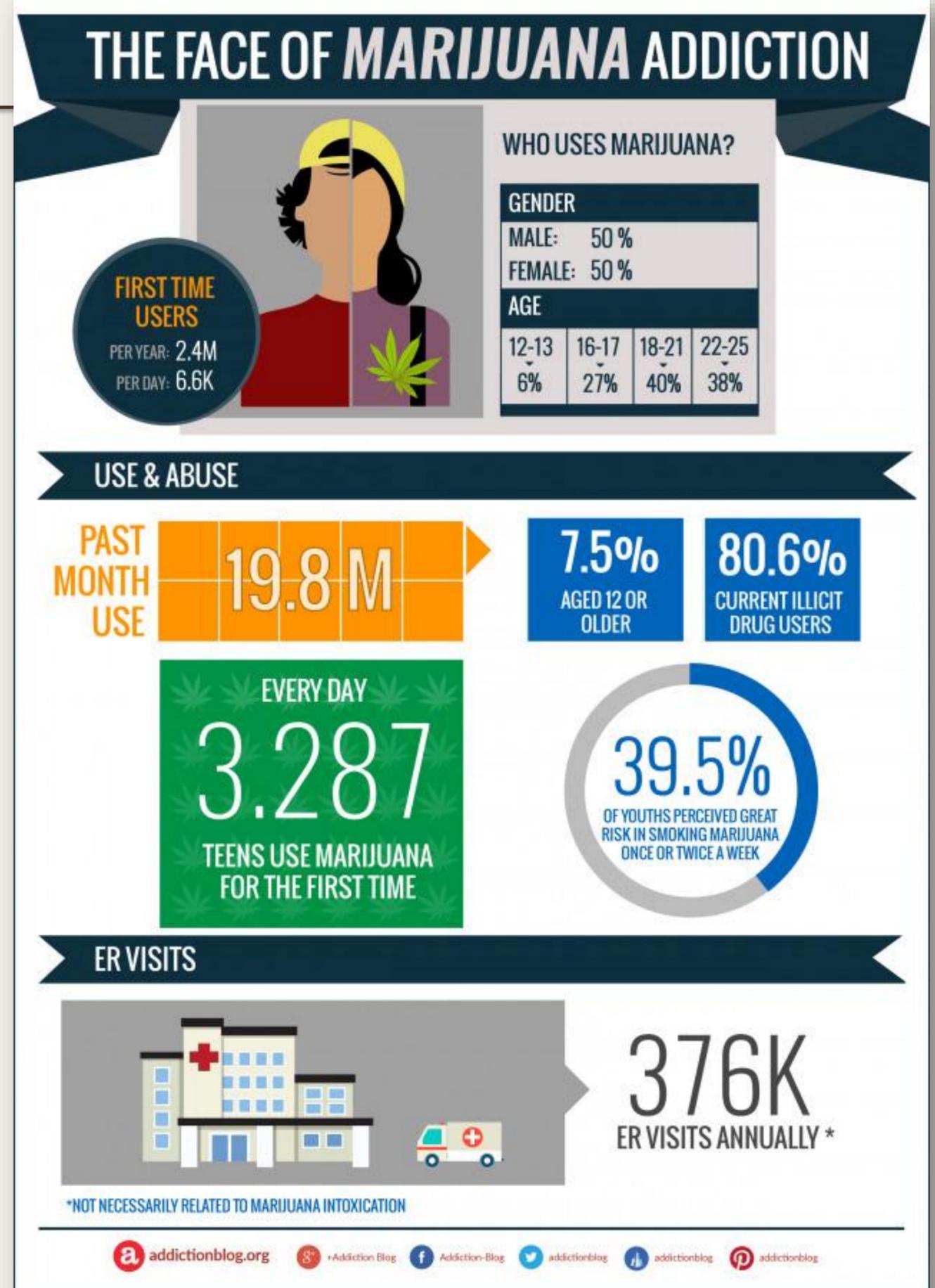


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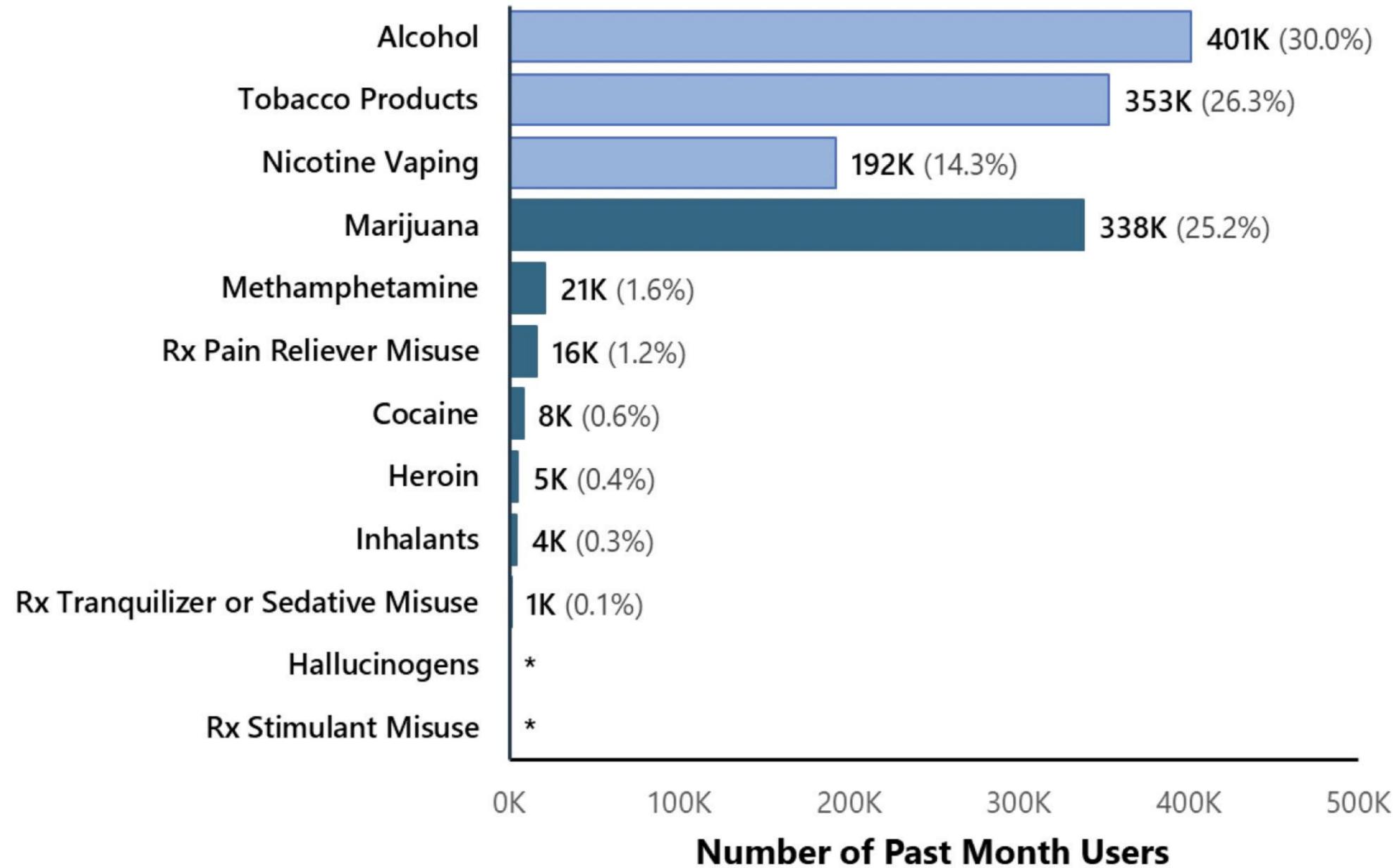
Who is Using?

Cannabis is the most commonly used addictive drug after tobacco and alcohol. According to the Centers for Disease Control and Prevention, research suggests that 3 in 10 people who use cannabis may have some form of cannabis use disorder, meaning they are unable to stop using cannabis even though it is causing health and social problems in their lives. For people who begin using cannabis before the age of 18 and who use cannabis often (daily/near daily), the risk of developing cannabis use disorder is even greater.



NOTE: Statistics represent most significant data points and may not fully represent all 100% points of users totals.

Past Month Substance Use: Among AIAN People Aged 12 or Older



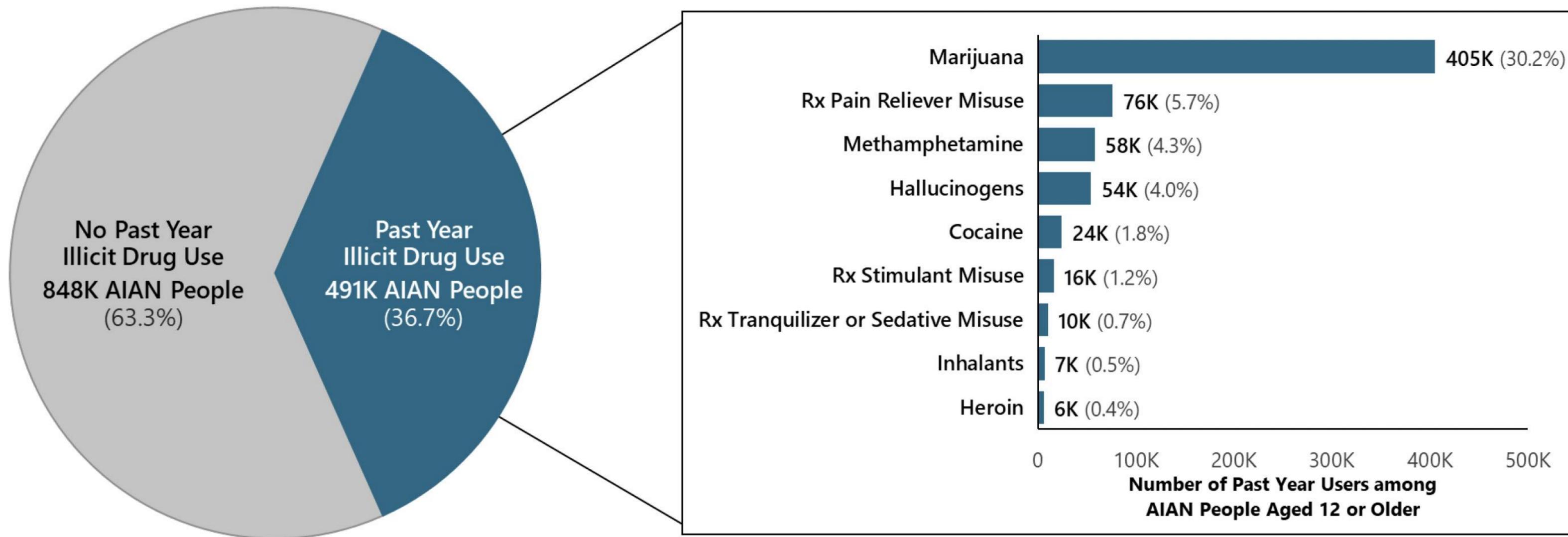
*Low precision; no estimate reported.

Rx = Prescription.

Note: The estimated numbers of current users of different substances are not mutually exclusive because people could have used more than one type of substance in the past month.

2023 National Survey on Drug Use and Health: Among the American Indian or Alaska Native (AIAN) Population Aged 12 or Older

Past Year Illicit Drug Use: Among AIAN People Aged 12 or Older

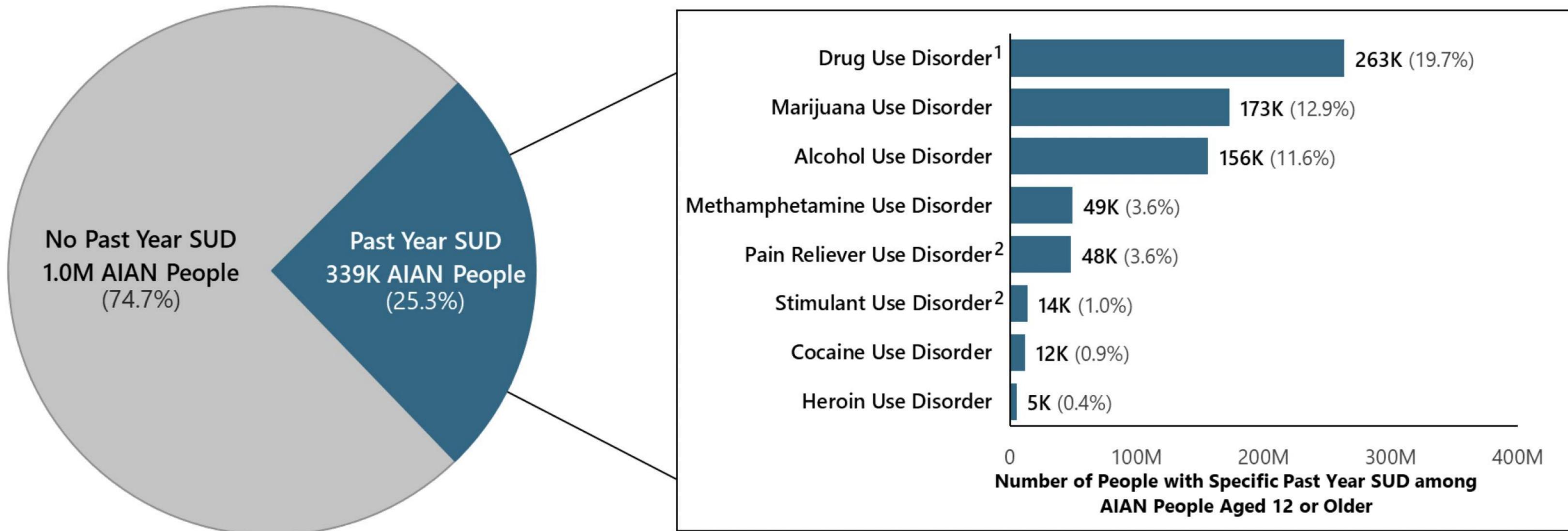


Rx = Prescription.

Note: The estimated numbers of past year users of different illicit drugs are not mutually exclusive because people could have used more than one type of illicit drug in the past year.

2023 National Survey on Drug Use and Health: Among the American Indian or Alaska Native (AIAN) Population Aged 12 or Older

Past Year Substance Use Disorder (SUD): Among AIAN People Aged 12 or Older



Note: The estimated numbers of people with substance use disorders are not mutually exclusive because people could have use disorders for more than one substance.

¹ Includes data from all past year users of marijuana, cocaine heroin, hallucinogens, inhalants, methamphetamine, and prescription psychotherapeutic drugs (i.e., pain relievers, tranquilizers, stimulants, or sedatives).

² Includes data from all past year users of the specific prescription drug.

2023 National Survey on Drug Use and Health: Among the American Indian or Alaska Native (AIAN) Population Aged 12 or Older

Adolescent Cannabis Use

In 2022:

- 30.7% of US high school 12th graders reported using cannabis in the past year
- 6.3% reported using cannabis daily in the past 30 days

Past-year vaping of cannabis declined from 2020 to 2021 and remained steady in 2022 following large increase in 2018 and 2019

However, many middle and high school students still reported past-year cannabis vaping in 2022:

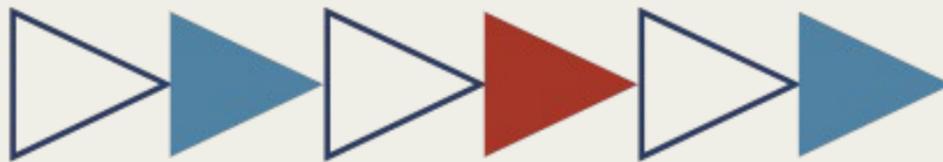
- 6% of eighth graders
- 15% of 10th graders
- 21% of 12th graders



Polling Question #2



Input will be anonymous.



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Cannabis, Cannabinoid Products and the Developing Brain

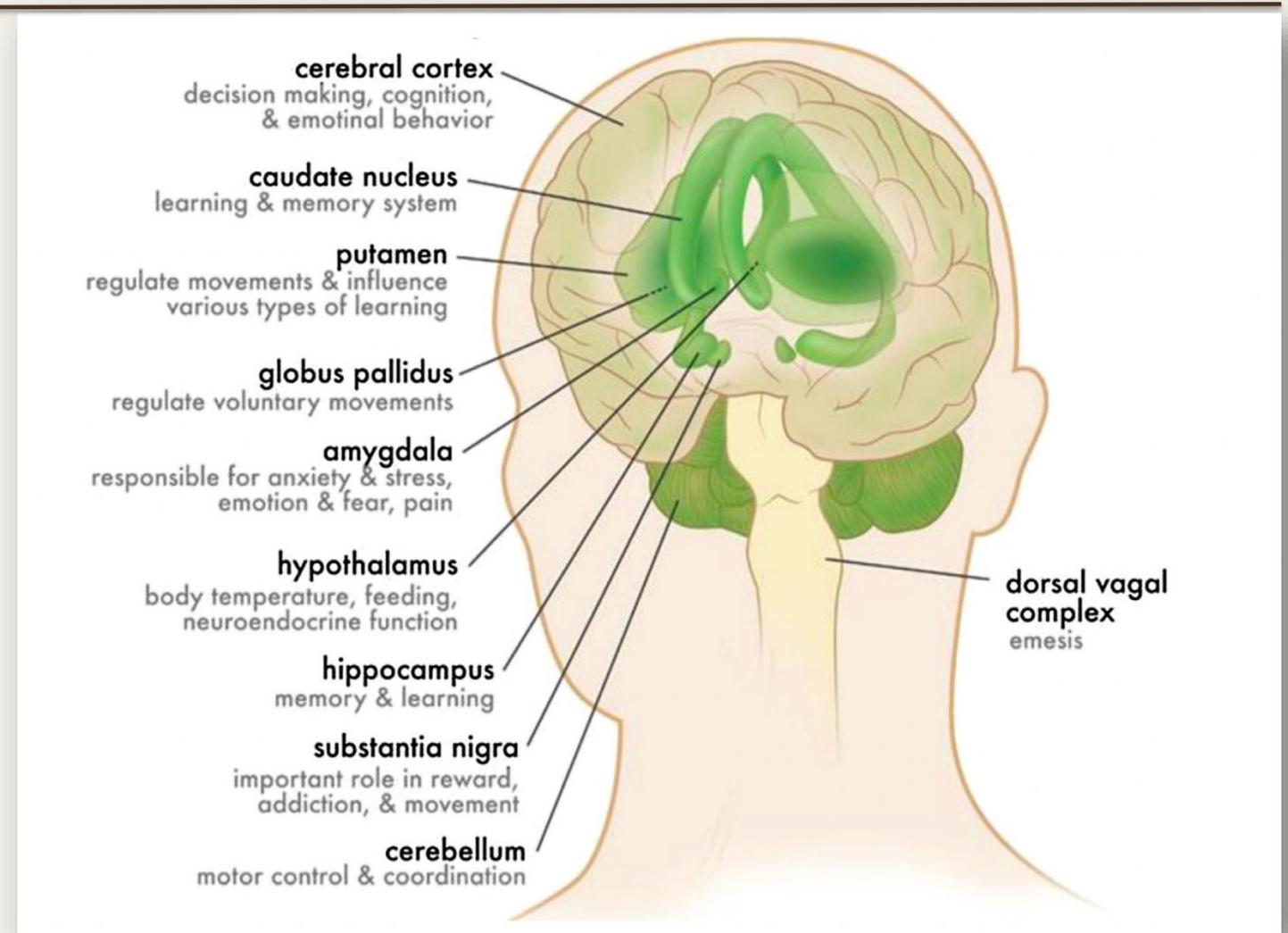
The potential of THC to impact neurodevelopment is thought to be mediated through its direct effects on *the endocannabinoid system*

Cannabis exposure during neurodevelopment may alter this system:

- whether through exposure in early life (prenatal or childhood) OR
- adolescent use

Such exposure could thus impact the development of neural pathways that:

- mediate reward
- emotional regulation
- multiple cognitive domains including executive functioning and decision making, learning, abstraction, and attention
- all processes central to substance use disorder and other psychiatric disorders



Distribution of CB1 receptors in the brain.

Adolescent-Onset Cannabis Use and Increased Prevalence and Severity of Mental Health Disorders

Growing concerns regarding adolescent-onset cannabis use relates to its association with the increased prevalence and severity of mental health disorders, including:

- Psychosis
- Depression
- Anxiety
- Bipolar disorder
- Other substance use disorders
- Suicidal behavior including suicide attempts

Significant attention has focused on the co-occurrence of cannabis use and psychosis:

- Cannabis use, including frequency, potency, and earlier age of onset, as risk factors for psychosis
- A recent study showed that CUD was a major risk factor for schizophrenia, particularly among young males

The relationship between cannabis use and mental health is likely bidirectional



Cannabis Use Disorder (CUD)

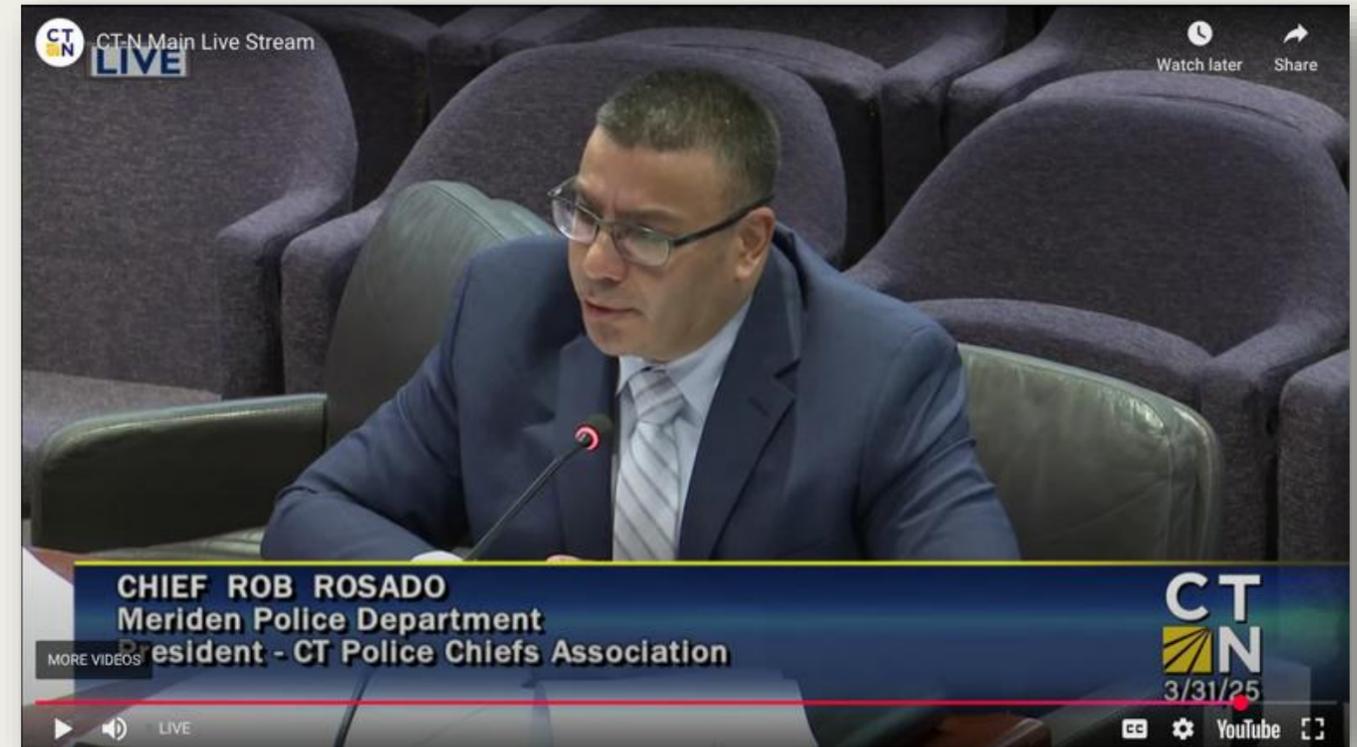
Cannabis use disorder (CUD) is a mental health condition characterized by a problematic pattern of cannabis use that leads to significant impairment or distress:

- CUD is defined as a condition where individuals continue to use cannabis despite experiencing negative consequences in their lives
- A cannabis use disorder can range from mild to severe
- The disorder is recognized in the DSM-5 and is associated with use of cannabis products that contain tetrahydrocannabinol (THC)

Cannabis Use Disorder (CUD) (cont.)

Cannabis Intoxication

- Refers to behavioral and psychological changes that occur with recent use of cannabis
- Impaired motor coordination, euphoria, anxiety, sensation of slowed time, impaired judgement and social withdrawal are symptoms of cannabis intoxication
- Physical signs include:
 - Bloodshot eyes
 - Dry mouth
 - Tachycardia
 - Increased blood pressure
 - Changes in appetite



Meriden Police Chief Roberto Rosado, president of the Connecticut Police Chiefs Association, testifies during a public hearing Monday. CT-N

The state legislature is considering a bill that would change that, along with studying ways to set a limit for the amount of tetrahydrocannabinol (THC) drivers can have in their blood before they are considered impaired.



Testing for Cannabinoids and Delta-8 THC

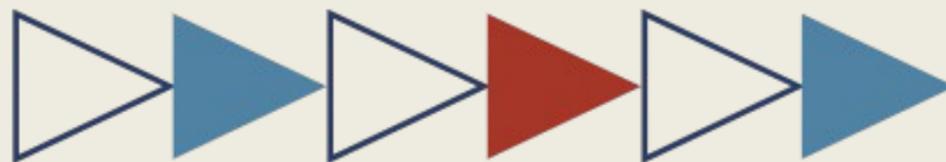
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Polling Question #3



Input will be anonymous.



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National Drug Court Institute (NDCI) Cannabinoid Detection Guidance for Urine Testing (as of 2006)

The purpose of drug testing for cannabis in drug courts is to:

- identify continued or renewed drug use
- in this case, smoking cannabis
- to ensure rapid therapeutic interventions

The “cannabinoid detection window” is a scientifically supportable, evidence-based effort to establish a reasonable and practical standard for determining the length of time cannabinoids will remain detectable in urine following the smoking of marijuana



National Drug Court Institute (NDCI) Cannabinoid Detection Guidance for Urine Testing (as of 2006) (cont.)

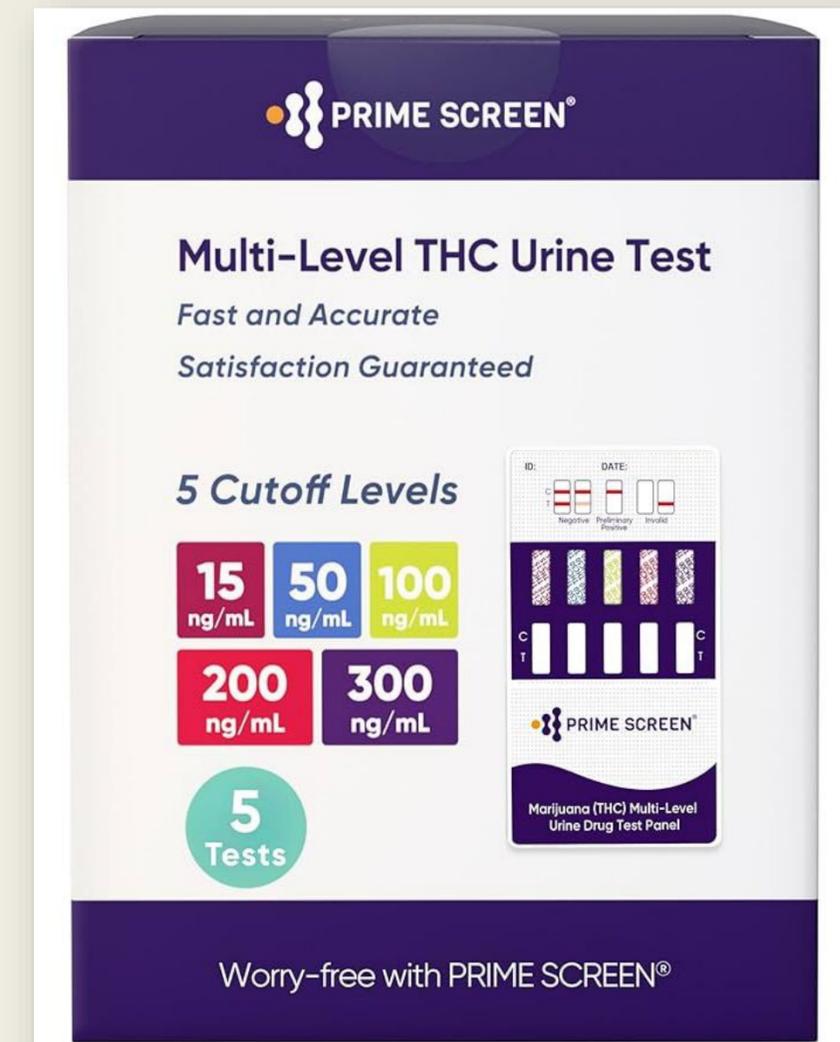
The Scientific Baselines

For “chronic users”

- At the 50 ng/mL cutoff concentration level
 - It would be unlikely for a chronic user to produce positive urine drug test result for longer than **10 days after the last smoking episode**
- At the 20 ng/mL cutoff concentration level
 - It would be uncommon for a chronic marijuana smoker to produce a positive urine drug test result longer than **21 days after the last smoking episode**

For “occasional marijuana users”

- At the 50 ng/mL cutoff concentration level
 - It would be unusual for the detection of cannabinoids in urine to extend beyond **3-4 days following the smoking episode**
- At the 20 ng/ml cutoff concentration level
 - Positive urine drug test results for the single event of marijuana use would not be expected for longer than **7 days**



National Drug Court Institute (NDCI) Cannabinoid Detection Guidance for Urine Testing (as of 2006) (cont.)

The goal of testing is to:

- establish a given time period (detection window limit)
- after which a client should not test positive for cannabinoids
- as a result of continued excretion from prior usage

The goal is NOT to:

- ensure that a monitored client is drug free

JDTCs (YHWCs) should use reasonable and pragmatic cannabinoid detection benchmarks:

- To provide objective criteria for court decisions
- To protect clients from inappropriate or unsupportable consequences



National Drug Court Institute (NDCI) Cannabinoid Detection Guidance for Urine Testing (as of 2006) (cont.)

Many programs have a **30-day “detoxification period”** or **“grace period”** in the initial entry phase

- Assists with later differentiating between abstinence and continued or renewed use
- Allows new clients a defined time frame for their bodies to eliminate stores of drugs that may have built up over the years of substance abuse
- Without the fear of court sanctions associated with a positive drug test
- After 30 days, testing continues, and continued cannabinoid positive urine drug tests indicate marijuana usage and should provoke a court response to reinforce program expectations



National Drug Court Institute (NDCI) Cannabinoid Detection Guidance for Urine Testing (as of 2006) (cont.)

Otherwise, drug courts use one of two alternatives:

They use a scientific baseline:

- individuals who continue to produce cannabinoid positive results
- beyond the established detection window maximums
- are subject to sanction for failing to remain abstinent
- during program participation

They use an actual individual's baseline:

- alternatively, a drug court participant is deemed to have reached their abstinence baseline
- when two consecutive urine drug tests yielding negative results for cannabinoids have been achieved
- where the two tests are separated by a several day interval
- any positive drug test result following the establishment of this baseline indicates new drug exposure



What About the New Kinds of Tests (Saliva and Breathalyzer)?

Can drug courts use saliva tests effectively, to test for cannabis, for drug court purposes?

Saliva tests can be effectively employed by drug courts to detect recent cannabis (marijuana) use, particularly THC

However, there are important limitations to consider:

- Short detection window
- Sensitivity for certain drugs
- Potential for contamination and false positives
- Variability in results
- Not ideal for heavy users



Can drug courts use a breathalyzer, to test for cannabis, effectively for drug court purposes?

- While breathalyzer technology for detecting cannabis (specifically THC) in breath is under development
- It currently faces significant limitations that may hinder its effectiveness for drug court purposes

National Drug Court Institute (NDCI) Guidance for Testing and Delta-8 THC (as of 2021)

Now comes delta-8 tetrahydrocannabinol (THC)

- Products are infused with delta-8 THC
- Legal (at least initially)
- A less intense high
- False impression that it will not be detected in drug testing
- Most commercially available delta-8 products are produced in a laboratory by extracting and concentrating delta-8 from the hemp flower



Edible products advertised as containing delta-8 THC offered for sale at a smoke shop in Seattle in 2022. Teens can overdo it with products like these, health officials warn.

Gene Johnson/AP

npr

Delta-8, an unregulated form of THC, is popular among high school students

March 14, 2024 7:00 AM ET

By Rhitu Chatterjee

National Drug Court Institute (NDCI) Guidance for Testing and Delta-8 THC (as of 2021)

Participants using delta-8 will screen positive for cannabinoids in a urine test

The use of delta-8 does not allow a treatment court to effectively and reliably monitor for abstinence from a prohibited substance, such as marijuana

The best approach:

- treatment courts should ban the use of all delta-8 products
- because of the probability that they will interfere with the evaluation of abstinence monitoring strategies
- just like with products containing alcohol and poppy seeds



What We Hope You Have Learned Today:

1. According to the 2023 National Survey on Drug Use and Health: *Among the American Indian or Alaska Native (AIAN) Population Aged 12 or Older:*
 - In the past month, over 25% reported using marijuana
 - Marijuana was the top illicit drug reported used in the past year by over 30% of those surveyed
 - Nearly 13% reported a past year marijuana use disorder

*we know nationally, the higher percentages of users are older adolescents and young adults
2. THC exposure, use, and smoking/vaping is harmful to children and adolescents and some harms may be permanent
3. Testing for cannabinoids is tricky
 - YHWCs test for THC metabolites, NOT to collect evidence, but to identify continued or renewed drug use and to ensure rapid therapeutic interventions, including the application of incentives and graduated sanctions
 - The commonly used urine tests DO NOT test for current use (e.g., did they use today?), rather they help establish a “cannabinoid detection window,” after which a client should not continue to test positive, and if they do, they should be subject to sanctions (or at least, NO incentives)
 - YHWCs should prohibit the use of legal Delta-8 THC products as youth will test positive for THC metabolites (the test can’t tell the difference)
4. Your testing protocols should be included in your YHWC policies and procedures and handbooks
5. Your testing staff should be trained in trauma-informed testing protocols

Register for Part III

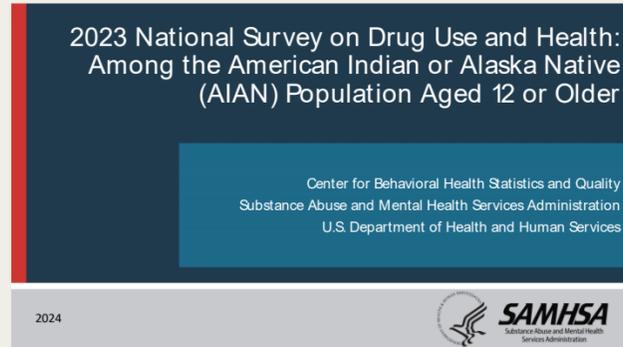
Participants will learn about the debates surrounding legalized recreational and medical marijuana and how legalization can affect youth in YHWCs, both positively and negatively. They will also explore the important effects of legalization on eligibility rules, policies, and procedures in YHWCs.



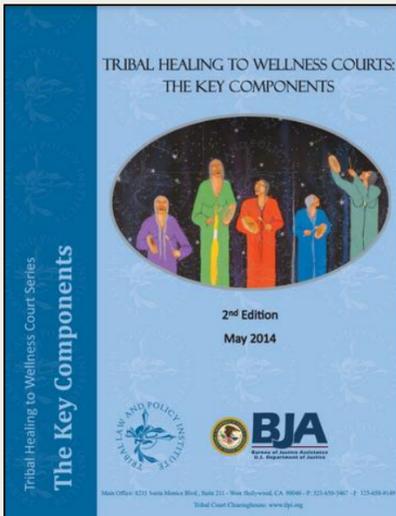
October 23, 2025

12pm PT, 1pm MT, 2pm CT, 3pm ET

YHWC Resources



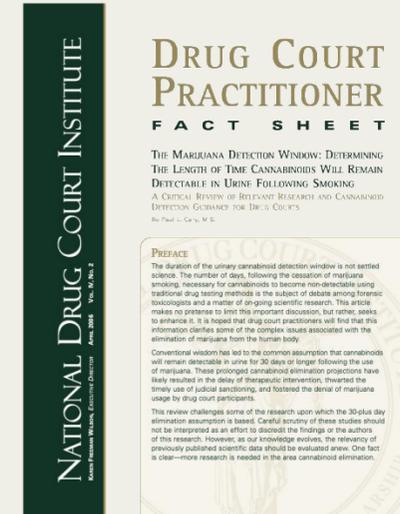
2023 National Survey on Drug Use and Health: Among the American Indian or Alaska Native (AIAN) Population Aged 12 or Older



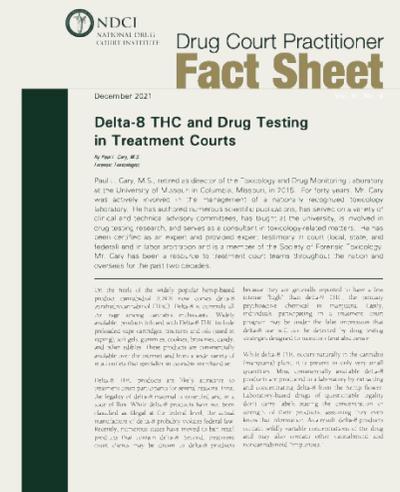
The Tribal Healing to Wellness Court Key Components (2014)



The National Tribal Health Agenda (2016)

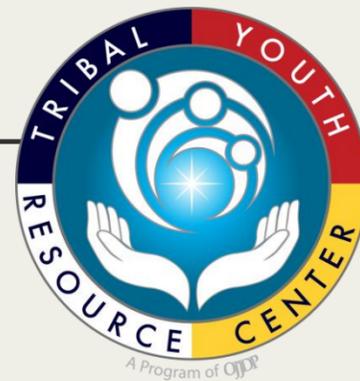


Drug Court Practitioner Fact Sheet
The Marijuana Detection Window: Determining the Length of Time Cannabinoids Will Remain Detectable in Urine Following Smoking (2006)



Drug Court Practitioner Fat Sheet
Delta-8 THC and Drug Testing in Treatment Courts (2021)





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