

CANNABIS USE AMONG YOUNG PEOPLE

WHAT PARENTS AND CAREGIVERS CAN DO

The Partnership uses the term cannabis to refer to the plant and all types of derived products such as vape cartridges, edibles, smokable “weed” or “pot”, oils and tinctures. We are not using the term marijuana on most of our resources because this term has a complicated past that was slanderous towards certain people. It is, however, important that the language we use in some instances is accessible to the audience that we are trying to reach and we understand that marijuana is a commonly utilized term for products that contain the form of THC (Delta 9) that provides a euphoric affect or intoxication.

Cannabis is a commonly used substance among New Hampshire youth. It is seen by many as a harmless substance in part because its use is so widespread, and it is easy to access. Research shows when teens and adults believe there is little risk in using cannabis, then rates of use increase.¹ According to the NH Youth Risk Behavior Survey data, perception of harm towards cannabis has gone down from 21.7% in 2013 to 10.3% in 2019. However, when caring, informed loved ones talk with young people about the real consequences of cannabis use, they influence their attitudes and beliefs around use and prevent problems.

OTHER NAMES OF CANNABIS:
 bud • blunt • chronic • dab • dope
 ganja • grass • joint • pot • reefer
 sinsemilla • skunk • trees • wax • weed

One factor driving this perception is the changing landscape around the country where states have increased legal access to recreational or therapeutic forms of cannabis. In New Hampshire, cannabis has been decriminalized down to a misdemeanor for adults. Also, those with a qualifying medical condition can receive certification or a card from their healthcare provider to purchase up to two ounces of cannabis at a time from a certified alternate treatment center for therapeutic use. Recreational cannabis use (or any substance use) and adolescence do not mix, because the brains of adolescents are developing well into their 20's. Healthy experiences form important connections in the brain necessary for learning, problem solving, memory and other tasks.² Using substances early in life when the brain is

Cannabis has roughly 400 chemicals. The main active chemical is delta-9-tetrahydrocannabinol (THC), which is what causes you to feel high. Another major component is cannabidiol (CBD). Studies on “THC free” products find that many actually contain a measurable amount of THC.⁹

still undergoing major growth and development can make tasks like communication, learning, regulating emotion and mood, and processing information more difficult. Cannabis use can also increase distorted perception (sights, sounds, time and touch), loss of motor coordination, increased heart rate and anxiety, especially when combined with other substances. Young people who regularly use and those with a family history of certain mental health issues are more vulnerable to the negative effects of use. Cannabis use can worsen mental illness and can lead to addiction in some people.³

Studies also show a growing relationship between cannabis use and suicide. In Colorado, for example, as the suicide rate increased so did the influence of cannabis. Between 2004 and 2018, the percentage of deaths by suicide who had cannabis in their system increased from 5.5% to 22.8% while the number of suicides in the state nearly doubled over the same time period.⁴ In New Hampshire, cannabis has been a factor in over half of all fatal car crashes.⁵

Another major concern of use among youth is the increased availability of high potency cannabis. Numerous studies confirm the increased potency of THC in products available today.⁶ Higher potency products pose significant risks related to psychosis and hallucinations, paranoia, anxiety and emergency room visits, especially for young people.⁷ In rare situations, the regular use of high potency cannabis can trigger severe vomiting requiring medical treatment and complete cessation.⁸

FORMS OF CANNABIS:
 smoking a joint or cigarette, pipe or bong, vaping using a device, or eating edibles that are often packaged to look like cookies, pizza, gummy bears or baked goods.

HOW YOU CAN HELP

Never underestimate the influence you have over your child's actions and attitudes. As a parent or caregiver, the best thing you can do is talk to your child about cannabis use and share your concerns.

Talk regularly and routinely about not using substances unless they are recommended by a health care professional for a physical or behavioral health problem.

Stress your main concern is their health and safety and you are available to help if needed.

Explore with your child why their peers and

other young people use cannabis. Share the consequences and your expectations. Stay calm and avoid lecturing during these conversations.

Talk with your child about healthy forms of coping. Many young people say they use cannabis to relieve their stress and anxiety.

Explain to your child that the marketing of cannabis use in movies, media and music is not an accurate depiction of the harm it can cause.

Learn more about the risks so you can provide honest direct answers when talking with your child about cannabis use.

- 1 Accessed June 7, 2021: Partnership to End Addiction, Marijuana: What You Need to Know to Help Protect Children, Teens and Young Adults.
- 2 Accessed June 7, 2021: Public Policy Statement on Cannabis, <https://www.asam.org/advocacy/find-a-policy-statement/view-policy-statement/public-policy-statements/2020/10/13/cannabis>
- 3 Accessed June 7, 2021: Part 1: The Connection Between Substance Use Disorders and Mental Illness | National Institute on Drug Abuse (NIDA)
- 4 https://www.medpagetoday.com/psychiatry/addictions/92253?xid=nl_secondopinion_2021-04-25&eun=g1266987d0r
- 5 Accessed June 7, 2021: Issue Brief: Marijuana Use in NH, <https://nhcenterforexcellence.org/resources/issue-briefs/>
- 6 Chandra S, Radwan MM, Majumdar CG, Church JC, Freeman TP, ElSohly MA. New trends in cannabis potency in USA and Europe during the last decade (2008-2017). *Eur Arch Psychiatry Clin Neurosci*. 2019 Feb;269(1):5-15. doi: 10.1007/s00406-019-00983-5. Epub 2019 Jan 22. Erratum in: *Eur Arch Psychiatry Clin Neurosci*. 2019 May 23; PMID: 30671616.
- 7 ElSohly MA, Mehmedic Z, Foster S, Gon C, Chandra S, Church JC. Changes in Cannabis Potency Over the Last 2 Decades (1995-2014): Analysis of Current Data in the United States. *Biol Psychiatry*. 2016;79(7):613-619. doi:10.1016/j.biopsych.2016.01.004
- 8 Jonathan A. Galli, Ronald Andari Sawaya, Frank K. Friedenberg *Curr Drug Abuse Rev*. Author manuscript; available in PMC 2013 Feb 20. Published in final edited form as: *Curr Drug Abuse Rev*. 2011 Dec; 4(4): 241-249.PMCID: PMC3576702
- 9 Accessed June 7, 2021: <https://mothertobaby.org/>

RESOURCES AND SUPPORT

The Partnership @drugfreeNH

drugfreenh.org: A safe place to gather and learn about local strategies and activities to prevent substance misuse.

Never Use Alone

Neverusealone.com or call 1-800-484-3731: To talk with a lifesaving point of contact while using substance, call Never Use Alone. No judgment, no shaming and no preaching.

The Doorway

thedoortway.nh.gov or call 2-1-1 (or 1-866-444-4211): A statewide service that supports any NH resident, of any age, with a substance or alcohol concern or issue.

NH Alcohol and Drug Treatment Locator

nhtreatment.org: A searchable database with treatment agencies and individual practitioners offering substance use disorder services.

2-1-1 NH

211NH.org: A comprehensive source of information about local resources and services to help you take care of yourself.



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