



**Southern Providence County
Regional Coalition**

Communities. Prevention. Collaboration.



EMPOWERING PARENTS:

Marijuana's Influence on Teens



In today's digital age, children have easy access to a vast amount of information and substances, not all of which is suitable for their age development. Parents often express concern about their ability to act as gatekeepers and protect their children.

Parents, you can't control your teen when they are out of your sight, but you can help them become a person who has good values and good judgment. You can do that by modeling healthy behavior and talking openly. Give them the information they need to make healthy decisions on their own.

Research indicated that when parents talk to their kids about the dangers of drugs, establish clear rules, and consistently enforce them, their teens are less likely to use drugs. Parents play a crucial role in influencing their children's decisions, and when parents understand substances, their teens are less inclined to use drugs.

Youth marijuana/cannabis use comes with real risks that can impact a person's health and life. At the same time, the perception of how harmful marijuana use can be is declining. Young people today do not consider marijuana use a risky behavior, with 71% of high school seniors nationally reporting they do not believe regular marijuana use is harmful (National Institute for Drug Addiction, 2021). RI surveys have shown increases in new teen marijuana users occur between 8th and 10th grade.

When youth start using marijuana before the age of 18, the rate of addiction is 1 out of 6. Regular marijuana has been linked to depression, anxiety, and suicidal thoughts (NIDA, 2021).

Using substances like drugs or alcohol during this critical time can hurt teens' brains. In fact, some teens who have heightened risk factors are even more vulnerable to adverse impacts than others.

More than 9 out of 10 adults with a substance use disorder began drinking or using drugs before the age of 18 (National Drug Helpline, 2023).

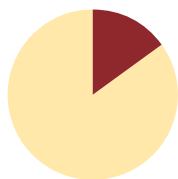
This handbook is designed to provide you with information about the risks that teenagers may encounter. It will also guide you in starting or continuing conversations with your teen about these important topics. The SPC Regional Prevention Coalition's aim is to offer you support every step of the way in navigating these discussions.



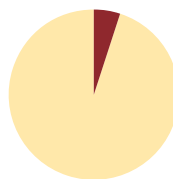
STRAIGHT TALK

The term marijuana originated as a Mexican word and unfortunately has been used to discriminate and paint negative perceptions/stereotypes of people from that culture. Cannabis is the scientific name for the plant and all products derived from it. In this guide we will use these terms interchangeably, but we strongly encourage you to avoid any biases and refrain from using the term “marijuana”.

RI has the unfortunate distinction of being one of the states with a high incidence of past month marijuana use.



15% of high schoolers



5% of middle schoolers

(2022 RI Student Survey)

What is Marijuana?

Marijuana/cannabis, one of the most often-used drugs in the U.S., is a product of the hemp plant, *Cannabis sativa*. The main active chemical in marijuana, also present in other forms of cannabis, is THC (delta-9-tetrahydrocannabinol). Of roughly 400 chemicals found in cannabis, THC affects the brain the most. It is a mind-altering chemical that gives marijuana users a high.

Cannabis itself is a green or grey mixture of dried, shredded flowers and leaves of the hemp plant.

Marijuana is most often smoked in hand-rolled cigarettes (joints), in pipes or in water pipes (bongs), in cigars emptied of tobacco and refilled with a mixture of tobacco and marijuana (blunts).








Marijuana can also be processed by butane extraction into a high THC-concentration cartridge that can be used in e-cigarettes or vaping devices, also known as “dab pens”. These cartridges often give off little to no smell and can be discreet.

Marijuana can also be consumed through edibles or THC beverages, which are often marketed through sweets such as brownies, or as seltzer waters and juices.



Why Some Teens Use

An estimated **10.1 of teens** between ages **12-17 years old** have used marijuana in the past 12 months (NCDAS, 2020). Teens use marijuana/cannabis for different reasons, which may include:

-  to relax
-  to have fun
-  to alter their perspective
-  to fit in
-  to experiment
-  to try something new
-  to feel more mature or adult

Some teens see it as not dangerous and easy to get—maybe even easier than alcohol.

Throughout this guide we will be talking about the short- and long-term effect of teen marijuana/cannabis use.

Short Term

Impaired Coordination and Motor Skills, Altered Perception, Impaired Judgment, Memory and Learning Issues, Increased Heart Rate, Anxiety and Paranoia

Long Term

Cognitive Impairment, Mental Health Issues, Academic and Social Consequences, Substance Misuse, Driving Impairment, Physical Health

EFFECTS ON EDUCATION

Marijuana can impact your teen's achievement in the classroom, on standardized tests and in the future.

- Using impairs the ability to concentrate and retain information. This can be especially problematic during peak learning years.
- Using is linked to lower grades.
- Research has shown that teens who use marijuana or alcohol are more likely than abstinent counterparts to drop out of high school or college (U.S. Drug Enforcement (DEA), 2020).
- Marijuana/cannabis is addictive. It can cause problems for young users when their bodies and brains are still developing, which decreases their likelihood of success.
- 1 in 6 youth who use marijuana before age 18 will develop a marijuana use disorder (National Drug Helpline, 2023).
- The earlier kids start using marijuana, the more likely they are to develop marijuana/cannabis use disorder, or another substance use disorder later in life. Adolescents who use marijuana are more likely to have difficulty with both short and long-term memory when compared to non-using peers (Jacobus, Courtney, Hodgson, & Baca, 2019).

“Not getting to class, changing majors, the B average becomes a C average—they are small things that aren't disastrous, but they can change the course of where you are heading.”

Alan J. Budney

Researcher & Professor | Geisel School of Medicine at Dartmouth
NY Times

MARIJUANA/ CANNABIS EFFECTS ON MENTAL HEALTH

Psychosis

New research is suggesting a possible relationship between early marijuana use and the onset of various mental illnesses. Coupled with genetic and environmental risk factors, early marijuana use may lead to increased rates of depression, anxiety, and can lead to cannabis intoxication and psychosis. This is especially important considering the high potency of modern marijuana.

Anxiety

While it is true that marijuana contains cannabinoids that can act on brain receptors responsible for lessening anxiety, chronic use of marijuana will "down-regulate" (or decrease the availability of) these receptors resulting in increased anxiety. This can also trigger "a vicious cycle" of increasing marijuana use that in some cases leads to addiction. (Neuron Mar 2014, Vanderbilt University)

Suicide

A 2021 study found that those who use marijuana even occasionally were more likely to express suicidal ideations, plans, or thoughts than participants who did not use any marijuana (Han, Compton, & Einstein, 2021).

Addiction

Research shows that 1 in 10 of all marijuana users become addicted. If a person begins use under the age of 18, that number rises to 1 in 6.

Marijuana is the #1 reason adolescents are admitted to substance misuse treatment in the U.S.



Marijuana/Cannabis & Other Drugs

While marijuana use itself is not associated with use of “harder” substances such as cocaine and heroin, it is often the first drug tried, and can lead to negative behavior patterns. Early marijuana use may also alter developing brains to make them more susceptible to future addiction or dependency (National Institute on Drug Abuse, 2021).

Marijuana has also been shown to lower users' pain threshold, possibly minimizing the ability to recognize injury. (National Institute on Drug Abuse (NIDA), 2021)

Around 50% of youth between the ages of 12-18 in treatment for substance use disorder are in treatment for marijuana use (NIDA, 2021). With an estimated 94% of individuals with a substance use disorder over the age of 12 in 2021 did not seek treatment (SAMHSA, 2023).



ALCOHOL VS. MARIJUANA

Pick Your Poison

MARIJUANA/CANNABIS

ALCOHOL

IMMEDIATE EFFECTS

- Impairs judgment
- Slows reaction time
- Affects coordination and motor skills
- Increases risk for accidents
- Changes behavior and mood
- Bloodshot eyes
- Increased heart rate
- Dry mouth and thirst

- Impairs judgment
- Slows reaction time
- Affects coordination and motor skills
- Increases risk for accidents
- Changes behavior and mood
- Slurred speech
- Flushed face

BRAIN

- Reduces blood flow to the brain
- Interferes with learning, memory, and attention
- May increase risk of mental health disorders, such as schizophrenia and psychosis

- May contribute to anxiety and depression

CANCER

- Linked to precancerous lung changes
- May increase testicular cancer risk in young men

- Breast
- Esophagus
- Liver
- Throat

MARIJUANA/CANNABIS	ALCOHOL
DRIVING	
<ul style="list-style-type: none"> · Impairs judgment · Slows reaction time · Affects coordination and motor skills · Increases risk for accidents 	<ul style="list-style-type: none"> · Impairs judgment · Slows reaction time · Affects coordination and motor skills · Increases risk for accidents
LIVER	
<ul style="list-style-type: none"> · No known effects 	<ul style="list-style-type: none"> · Fatty liver disease · Alcoholic hepatitis · Cirrhosis
LUNGS	
<ul style="list-style-type: none"> · Contributes to precancerous lung changes · May lead to more coughing and wheezing 	<ul style="list-style-type: none"> · May damage lungs
PREGNANCY	
<ul style="list-style-type: none"> · Low birth weight · Learning and behavior problems · Cardiovascular complications for child · Anemia and lack of oxygen to child · Issues with infant's brain development 	<ul style="list-style-type: none"> · Miscarriage · Pre-term birth · Stillbirth · Birth defects · Low birth weight · Learning and behavior problems

SOURCES

Hall, W. The Lancet, October 2009.

Jeanette Marie Tetrault, MD, FACP Assistant Professor of Medicine, Yale University School of Medicine.

National Institute on Drug Abuse: "DrugFacts: Marijuana."

Li, M-C. Epidemiologic Reviews, October 2011.

National Institute on Alcohol Abuse and Alcoholism:

"Alcohol's Effects on the Body." National Council on Alcoholism and Drug Dependence Inc.: "Drinking and Driving."

National Institute on Alcohol Abuse and Alcoholism: "Examples of Alcohol's Effect on Organ Function."

March of Dimes: "Alcohol During Pregnancy."

Badowski S., Smith C. "Cannabis use during pregnancy and postpartum". Canadian Family Physician Journal. 2020.

WHAT DOES MARIJUANA/ CANNABIS LOOK LIKE?




With the negative effects of cigarette smoking becoming more known, **Big Tobacco** has adapted over the years through finding new ways to appeal to younger customers, first through vaping nicotine, and now through marijuana. Tobacco/vaping companies are purchasing stakes of cannabis companies – they are all in this together!

In 2021, the marijuana industry sold **\$22.9 billion** worth of marijuana, the majority, **\$10.9 billion**, being credited to flower form, and vape pens (\$5.1 billion).

After the legalization of marijuana in Rhode Island in 2022, adult-use marijuana sales are expected to reach \$50 million by the end of 2023.

Corporate marijuana stakeholders present marijuana as beneficial, safe, and relaxing, while downplaying and denying adverse health effects. The marijuana industry has been able to grow rapidly in Rhode Island, with recent legalization bringing the number of dispensaries in the state from three in 2022 to seven by the end of summer 2023.

A circular graphic with a dark red background and a light green leaf pattern, located on the left side of the text block.

Marijuana can be easily marketed through the internet and through social media with minimal regulations and little to no ability to employ repercussions and billboards are everywhere in RI that also attract youth.

WHAT ARE MARIJUANA/ CANNABIS EDIBLES?

Marijuana concentrates, with a high concentration of THC, can also be mixed into a wide variety of foods such as candy, baked goods, and even sauces. These are called edibles.

Edibles, once created for medical marijuana users who did not want to smoke, are finding their way to youth due to their appealing forms and packaging. In states with legalized marijuana, marijuana infused edibles are easily disguised because they look like well-known chips or candies, but what's inside could harm children, teens or young adults.



Marijuana infused products are easily disguised, often undetectable providing a discreet means of bringing them to school, workplaces and other public places for consumption or distribution.





Edible Risks

- Sold in packaging like familiar, kid friendly products with vastly different serving sizes.
- Childproof packaging is not always truly childproof, especially after seals have been broken. In 2021, an estimated 3,054 instances of children under the age of 6 accidentally ingesting cannabis edibles (Tweet, Nemanich, and Wahl, 2021).
- Effects can be delayed up to two hours, often leading to increasing consumption before effects fully begin.
- Not FDA or USDA approved.
- No safety or health standard testing.
- Largely unregulated (THC levels can vary widely).

Inhaling vs. Ingesting Cannabis/Marijuana

It is important to understand there are two very significant differences between inhaling and ingesting marijuana:

- Because of the way in which the body processes marijuana, ingesting it typically produces much stronger and longer-lasting effects.
- Whereas the effects of inhaling marijuana are immediate and peak within 10-15 minutes, ingesting marijuana can take up to two hours to take effect and can peak for a couple hours after that.



IMPAIRED DRIVING

Use of any mind-altering drug (like marijuana/cannabis) makes it highly unsafe to drive a car and is illegal—just like driving after drinking alcohol.

Marijuana negatively affects a driver's:

- attentiveness,
- perception of time,
- distance and speed, and
- ability to draw on information from past experiences.

DANGER:

Teens do not view driving under the influence of marijuana or alcohol to be dangerous.

A 2017 survey of teens in states where recreational marijuana is legal found that **33%** thought driving under the influence of marijuana was legal. Additionally, **27%** of their parents thought it was legal, too (Liberty Mutual Insurance, 2017).

Teens believe using marijuana and driving is significantly less dangerous than driving under the influence of alcohol (Liberty Mutual Insurance, 2017).

About **17% of Rhode Island high schoolers** have been a passenger when someone was driving under the influence of Marijuana (Rhode Island Student Survey, 2022).

In 2020, out of **12.6 million people nationwide** who drove under the influence of drugs, **11.7 million people** were under the influence of marijuana (2020 National Survey on Drug Use and Health: Detailed Tables).

Drivers under the influence of marijuana are 2x as likely to cause a serious or deadly crash.

(AAA NewsRoom, 2021)

“It is important that [marijuana/cannabis] users be aware that they are not always accurate regarding their self-perception of impairment. In addition, experienced users should not assume they're less impaired simply because they have more familiarity with the product—[they may] still be a risk on the road.”

Thomas Marcotte

Professor of Psychiatry | University of California-San Diego
United Press International



More than 9% of U.S. drivers between the ages of 16-20 admit to driving under the influence of marijuana, though that number is likely higher.

(HealthyChildren.org, 2020)

E-CIGARETTES & VAPING

What Are E-Cigarettes?

E-cigarettes are devices that use a battery to heat a liquid to create an aerosol that is breathed into the lungs. They go by other names such as vapes, e-cigs, e-hookahs, hookah pens, vaporizers, disposables, or mods.



Why Are They Dangerous?

E-cigarettes can contain a variety of chemicals that can cause cancer, birth defects or other health problems. Nicotine liquid comes in fruit and candy flavors that appeal to children who may taste or drink the e-liquid. Nicotine liquid is poisonous if swallowed, absorbed by the skin or gets in the eyes. It is not safe to vape indoors, as e-cigarettes pollute the air with tiny particles that can get trapped in the lungs.

There are currently no regulations for e-cigarettes in terms of labels or content. Many nicotine liquids are made in China, and some say they do not contain nicotine when, in fact, they may (Icdic.gov). E-cigarettes are often used with a high potency marijuana called wax, shatter, dab, or honey oil.

Vaping Marijuana/Cannabis

Vaporizing marijuana can lead to toxic levels of ammonia causing lung irritation, nervous system effects and asthma attacks (Colorado Department of Public Health. In comparison to teens who use other forms of marijuana, those who vape marijuana are more likely to develop breathing and respiratory problems.

In fact, a study at the University of Michigan found that those who vaped marijuana were **2x more likely** to report “wheezing and whistling” in their chest (Boyd, McCabe, Evans-Polce, & Veliz, 2021).

In 2022, an estimated **27.5% of high school seniors** nationwide reported ever vaping marijuana. Out of that 27.5%, 14.8% reported last 30-day use, and 2.1% reported daily use (Monitoring the Future Survey, 2022).



How to Convince Your Teen Not to Use

If your teen says...

"Marijuana is just a plant; how harmful can it be?"

You say...

You know how bad tobacco is; smoking marijuana is even worse for your health. It contains over 400 carcinogens. It can also hurt your future as marijuana use in any form makes it harder to concentrate and retain information.

If your teen says...

"Marijuana is not addictive."

You say...

It is addictive. More teens are admitted for treatment for marijuana use disorders than any other drug.

If your teen says...

"You smoked weed when you were in high school and your brain is fine."

You say...

This isn't about my past; it's about your future. Marijuana is much more potent nowadays and teens are in many more risky situations than the teens of my generation were, including driving cars.

If your teen says...

"I know straight 'A' students who smoke weed."

You say...

Most kids who smoke weed don't make straight "A's". Research shows that teens with an average grade of "D" or below are 4x more likely to use marijuana than straight "A" students.

If your teen says...

"Marijuana makes me feel good."

You say...

There are many better ways to feel good that are healthy and legal.



Two-thirds of youth ages 13-17 say losing their parents' respect is one of the main reasons they don't smoke marijuana or use other drugs. (Parents. The Anti-Drug, 2012)

If your teen says...

"Marijuana must be okay; it's used as medicine."

You say...

So are many other drugs that you know would be harmful for you to take as a healthy teenager. The Federal government still classifies marijuana as an illicit drug that has no medical benefits. Until more research is done, we really don't yet know whether smoking marijuana has any benefits that could outweigh the huge risks of its use. There is a pill form of marijuana, which is available by prescription for certain very ill patients. That certainly doesn't mean it is something that is right for you.

If your teen says...

"It's legal."

You say...

For adults over 21 and occasional use.

FACTS FOR PARENTS

Setting rules and enforcing them can make all the difference in teens' lives.

- Youths who are not regularly monitored by their parents are 4x more likely to use drugs.
- Parents are the most powerful influence on their kids when it comes to drugs.
- Research shows that the more educated a parent is about marijuana, the less likely their teen will be to use it (NIDA, 2021).

What do I do if I find my teen is using marijuana/cannabis or other drugs or breaking other family rules?

- Keep calm.
- **Communication is key!** When dealing with behavior problems it is important to communicate your disapproval of the behavior without making your teen feel rejected or like they are a bad person.
- **Talk about your genetics.** If substance use is in your family, inform your children that genetics are responsible for about half of the chance of developing a substance use disorder.
- Enforce the consequences that your family set for breaking the rules.
- Seek professional help if necessary.
- Contact Student Assistance Services at your teen's school: **risas.org**
- For more information on marijuana and other drugs, visit: **spcprevention.org**

WATCH LIST FOR PARENTS

Keep an eye out for:

- Changes in friends.
- Negative changes in schoolwork, missing school, or declining grades.
- Increased secrecy about possessions or activities.
- Use of incense, room deodorant, dryer sheets, or perfume to hide smoke or chemical odors.
- Subtle changes in conversations with friends, e.g. more secretive, using "coded" language.
- Change in clothing choices: new fascination with clothes that highlight drug use.
- Increase in borrowing money.
- Evidence of drug paraphernalia such as pipes, e-cigs, rolling papers, etc.
- Bottles of eye drops, which may be used to mask bloodshot eyes or dilated pupils.
- New use of mouthwash or breath mints to cover up the smell.

Most marijuana use begins in adolescence, the age group most likely to suffer from negative effects. In 2022, an estimated 8.3% of eighth graders, 19.5% of tenth graders, and 30.7% of twelfth graders have used marijuana in the last year.

(Monitoring The Future Survey, 2022)

Visit spc-hips.com to explore a Teenager's Mock Bedroom for learn signs of possible substance use.



RHODE ISLAND CANNABIS/ MARIJUANA LAWS

In May of 2022, Rhode Island legislators voted to approve the Rhode Island Cannabis Act, making the purchase and possession of marijuana legal for adults over the age of 21. Up to one ounce of marijuana can be on one's person, and up to 10 ounces at home, and up to three mature marijuana plants in the home.

This bill allowed for medicinal cannabis dispensaries to open their doors to recreational customers allowing up to 33 licenses to be distributed. By the end of 2023, the number of dispensaries in Rhode Island is expected to rise to at least seven, triple the number existent in April 2022.

Federal Law prohibits medical marijuana except for a prescribed pill form of the drug. The Rhode Island Cannabis Act does not alter federal statutes and regulations prohibiting the possession and use of marijuana. The Food and Drug administration (FDA) does not support the medical use of smoked marijuana for treatment and therefore has not approved it as a medicine that can be prescribed by physicians. According to the Institute of Medicine (IOM), smoking marijuana is an unsafe delivery system that produces harmful effects.

For adults over 21, delivery or sale of marijuana to a minor remains illegal, with a maximum fine of \$10,000 and penalty of 2-5 years imprisonment.

Youth must also perform community service and/or complete a drug awareness class.

It is illegal to drive under the influence of any marijuana.

TALK. THEY HEAR YOU.

There is no quick or simple solution for preventing teen drug use. But research shows parents have a big influence on their teens, even when it doesn't seem that way. Talk openly with your children and stay actively engaged in their lives.

- Despite common belief, repeated marijuana use can lead to addiction, which means that people can have trouble quitting, even if it is having a negative impact on their lives.
- Research suggests that about 30 percent of people who use marijuana have some level of marijuana use disorder even if they are not yet addicted.
- People who begin using marijuana before the age of 18 are more likely to develop a marijuana use disorder than adults.
- Among youth receiving substance use disorder treatment, marijuana accounts for the largest percentage of admissions—almost 50 percent among those 12 to 17 years old.

Excerpts from Marijuana: Facts Parents Need to Know (NIH Publication No. 14-4036), National Institute on Drug Abuse, Revised 2021.



Check out these “Talk. They Hear You.” fact sheets to help you start—and **keep up**—the conversation about the dangers of drinking alcohol and using other drugs at a young age.

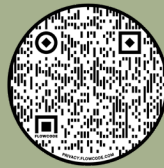
spcprevention.org/talktheyhearyou

samhsa.gov/talk-they-hear-you/parent-resource

Our Mission

The Regional Coalition is a union of concerned volunteers who dedicate themselves to the betterment of the citizens of Southern Providence County (SPC). The coalition advocates for change through planning, development and implementation of effective prevention strategies by raising awareness of substance abuse and promoting safety and wellbeing.

spcprevention.org



**Southern Providence County
Regional Coalition**

Communities. Prevention. Collaboration.

Patricia Sweet

Director of the SPC Regional Prevention Coalition | SPCRegion1@gmail.com

