



## PROTECTING OUR YOUTH: MONITORING MARIJUANA

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Marijuana is all over the news today. From legalization debates in California to localities considering restrictions on “pot shops,” discussions about marijuana use are increasing among adults, young people, and the legislative bodies facing the difficult task of defining Medical Marijuana in our local communities. The health and safety of our nation’s youth should be at the core of these conversations. As we encourage our children to “be all they can be,” we work to make sure their surrounding environments provide support, the value of education, a positive work ethic, and the means by which to achieve their greatest potential.

The National Institute on Drug Abuse and numerous other research bodies are discovering more and more about long term physical, emotional and social impacts of drug use. Marijuana is very much on the national agenda for this research and learning.

Current facts about marijuana:

- marijuana is a green, brown, or gray mixture of dried, shredded leaves, stems, seeds and flowers of the hemp plant or Cannabis Sativa.
- it is the most often used illegal drug in the United States.
- marijuana is a mind altering or psychoactive drug which contains THC (delta-9-tetrahydrocannabinol) as well as 400 + other chemicals.
- it is stored in the fatty tissues of the body. Traces of THC can be detected by standard urine tests several days after smoking. In heavier users, THC can be detected months after smoking marijuana.
- Marijuana users have many of the same respiratory problems that tobacco smokers have such as chronic cough and more frequent chest colds.
- Marijuana smoking affects the brain and leads to impaired short-term memory, perception, judgment, and motor skills

Effects of marijuana on each person depend on the:

- type of cannabis and amount of THC it contains
- way the drug is taken (smoked, eaten)
- experience and expectations of the user
- setting where the drug is used
- if it is being used in combination with other drugs and/or alcohol.

Marijuana is sometimes mixed into foods or brewed into tea but it is most often smoked rolled into a loose cigarette called a joint, in a pipe or water pipe called a bong, or placed in a hollowed out cigar called a blunt. In Calhoun County, marijuana use now surpasses cigarette use among youth. According to the Michigan Profile for Healthy Youth (MiPHY) 2010 Survey:

- 5.7% of 7<sup>th</sup> graders report ever trying marijuana vs 25.1% of 9<sup>th</sup> and 38.4% of 11<sup>th</sup> grade students. 9.1% of 7<sup>th</sup> grade youth report ever smoking cigarettes vs 22.3% of 9<sup>th</sup> and 31.8% of 11<sup>th</sup> grade survey participants.
- 4.7% of 7<sup>th</sup> graders indicated using marijuana within 30 days of survey administration vs 14.4% of 9<sup>th</sup> and 19.7% of 11<sup>th</sup> graders. 3.9% of 7<sup>th</sup> grade youth said they used cigarettes in the last 30 days vs 9.8% of 9<sup>th</sup> and 16.3% of 11<sup>th</sup> graders surveyed.

Research has found that drug use rates are lower when youth perceive substances as “risky” or believe their peers view use of those substances to be “wrong.” As marijuana becomes legalized for medical use, these perceptions change. Youth do not relate to long term consequences, but that does not mean we should not share what they could be. Chances are they may live with, be related to or know someone who is addicted to marijuana. While teens do not generally believe marijuana to be addictive, recent research points to the psychological addictiveness, physical costs of use, and potential legal consequences.

The passage of Medical Marijuana legislation has generally resulted in confusion about the effects and consequences of marijuana use. It is important to temper street knowledge with that gleaned from scientific study. “One reason many Baby Boomers underestimate the dangers of marijuana is many of those who grew up in the 1960s and 1970s tried marijuana a few times and then quit using it with ease. Today's marijuana smokers, however, are inhaling a drug with much higher potency. In fact, marijuana potency has more than doubled since 1983, according to a report released by The White House in 2008” (Treatment Solutions Network) This increased potency increases negative side effects and addiction rates with youth beginning use at younger ages while their bodies and minds are still developing.

Marijuana use, especially regular to chronic use, has many potential consequences:

- impacts on short-term memory, the recall of recent events
- increased challenges in handling complex tasks
- skewed perceptions and reaction time. Marijuana use impairs driving ability by decreasing alertness, hampering one’s ability to track effectively, affecting judgment of distance, decreases quick recovery from bright lights, may hinder reaction to sounds and signals, and increases risk for auto crashes.

- altered judgment may result in riskier sexual behavior involvement which could lead to teen pregnancy, exposure to sexually transmitted infections or HIV.
- lower motivation to succeed (in school), may be harder to study and learn
- athletic performance is affected with one's timing, movements, and coordination
- may play a role in cancer risk
- increased problems of the respiratory system
- weakening of the immune system
- marijuana may instigate or exacerbate mental illness
- use may result in loss of a job, school problems, involvement in crime.

Parents experience difficulty in knowing what to say when they, themselves, experimented with marijuana in the past. While youth are influenced by their parents behaviors and what they are taught (studies show that parents are the single most powerful influence on their children's decisions about drug use), research also affirms that parents who are involved and talk to their kids about drugs are more likely to keep their kids away from drugs.

We all want what is best for our children. Unless you choose to be honest when your child asks about your past, you risk losing credibility with them, however, you do not need to provide every detail of your past. Use their questioning as an opportunity to talk so they can learn from you about your experiences. Even if you made mistakes in the past, be clear you do not want your child to repeat them. Focus on encouraging them to make wise choices and the likelihood that they will increase.