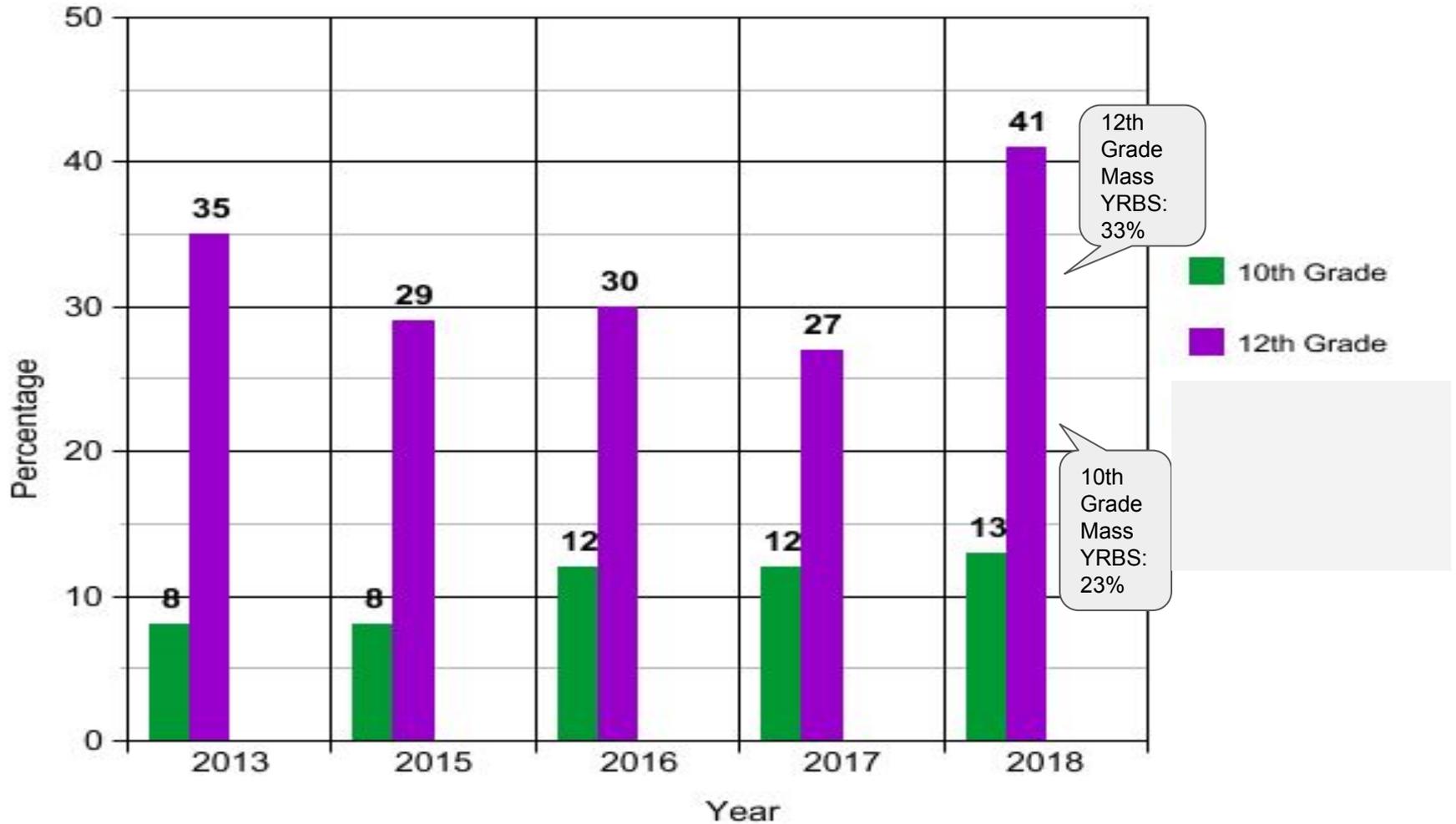


Parenting Post Legalization

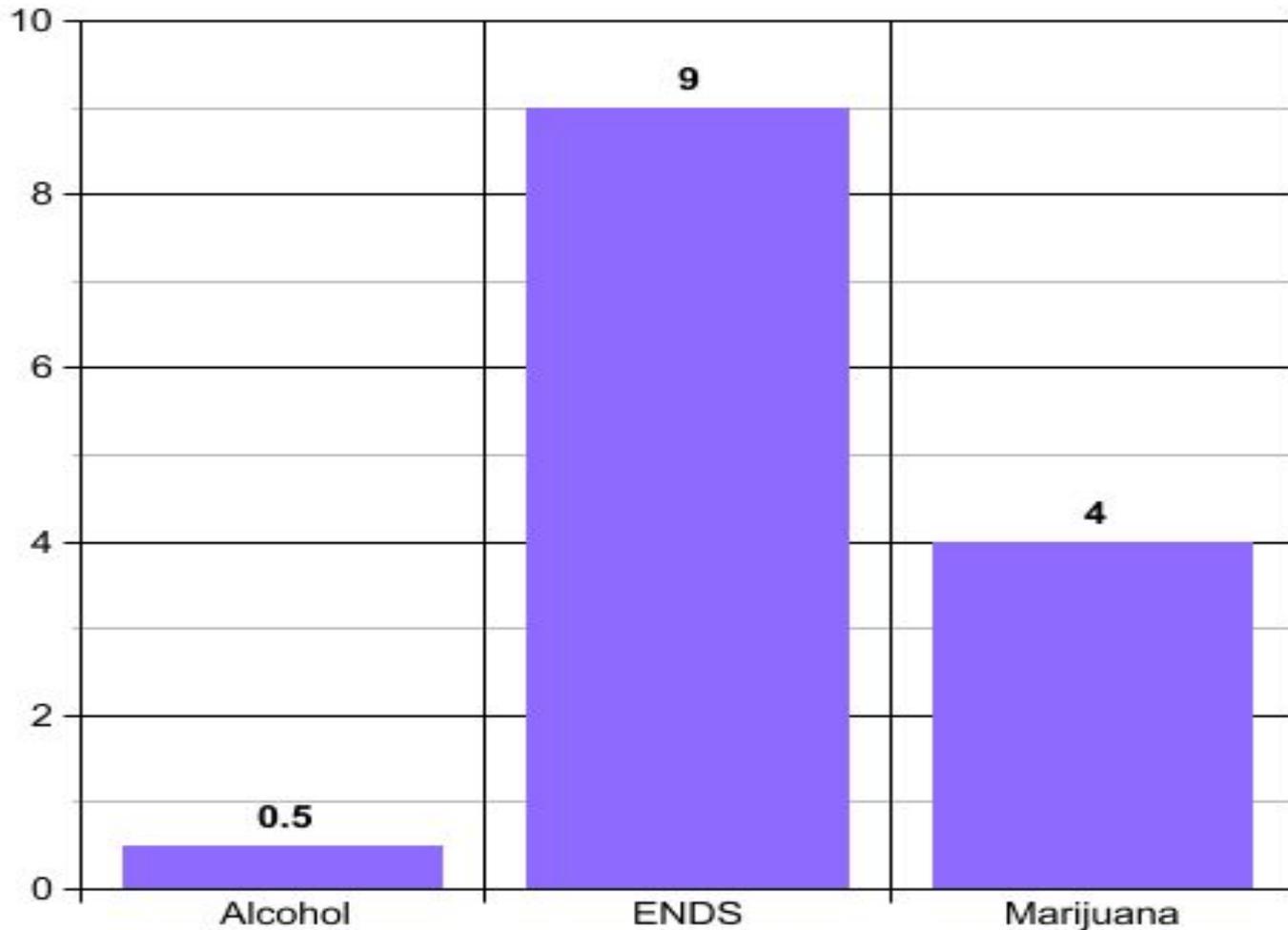
Parenting and Marijuana:

Please list any questions or concerns that you would like this evening to address...

LHS School Climate Survey: 30 Day Marijuana Use



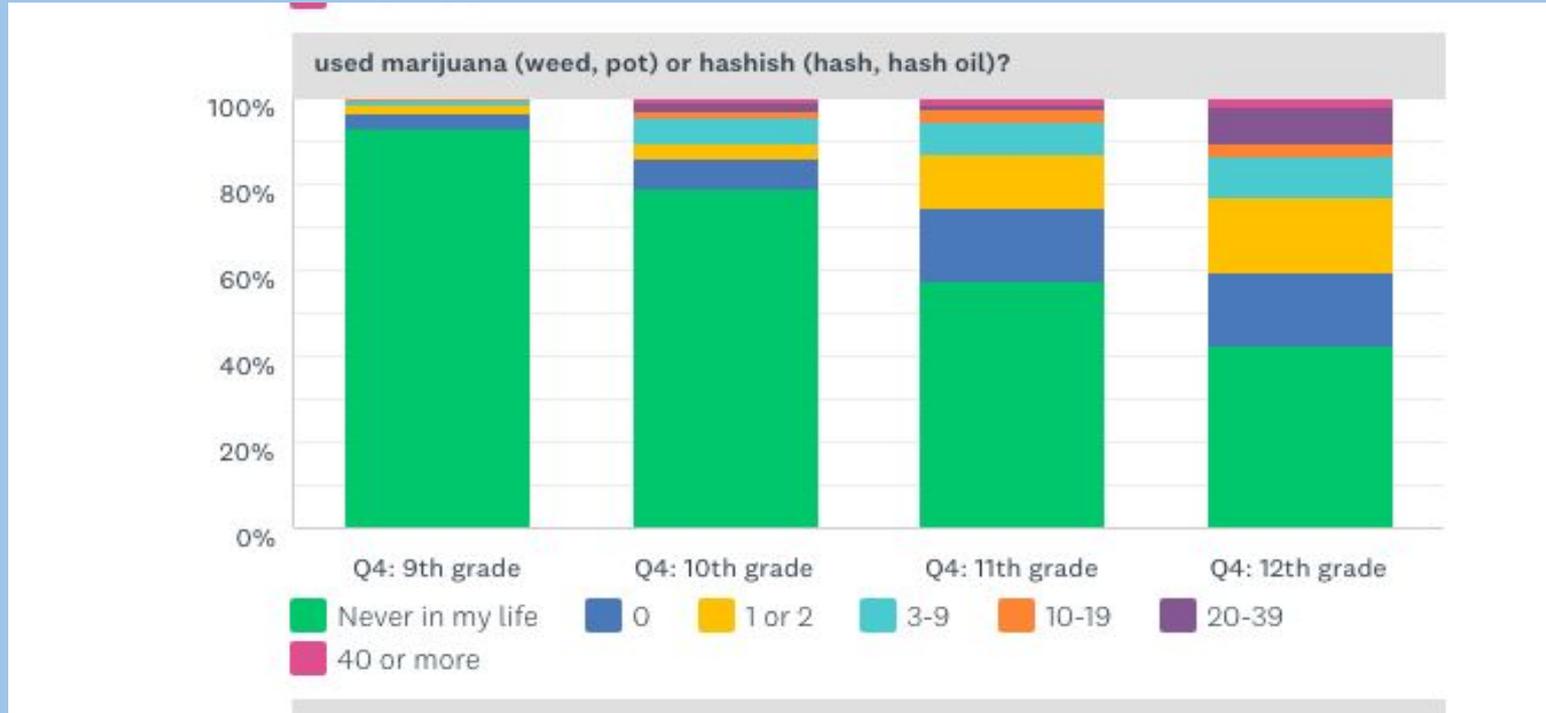
2018 LHS Daily/Frequent Substance Use



Majority of our daily marijuana users started at age 14 or younger.

All Grades

Within the past 30 days, how often have you:



Students who reported use in the past 12 months complain of:

34%: feeling tired, groggy or unmotivated

18%: coughing or respiratory problems

17%: spending too much money on it

15%: procrastination

11%: problems remembering things

Marijuana Use by Adolescents Impacts:

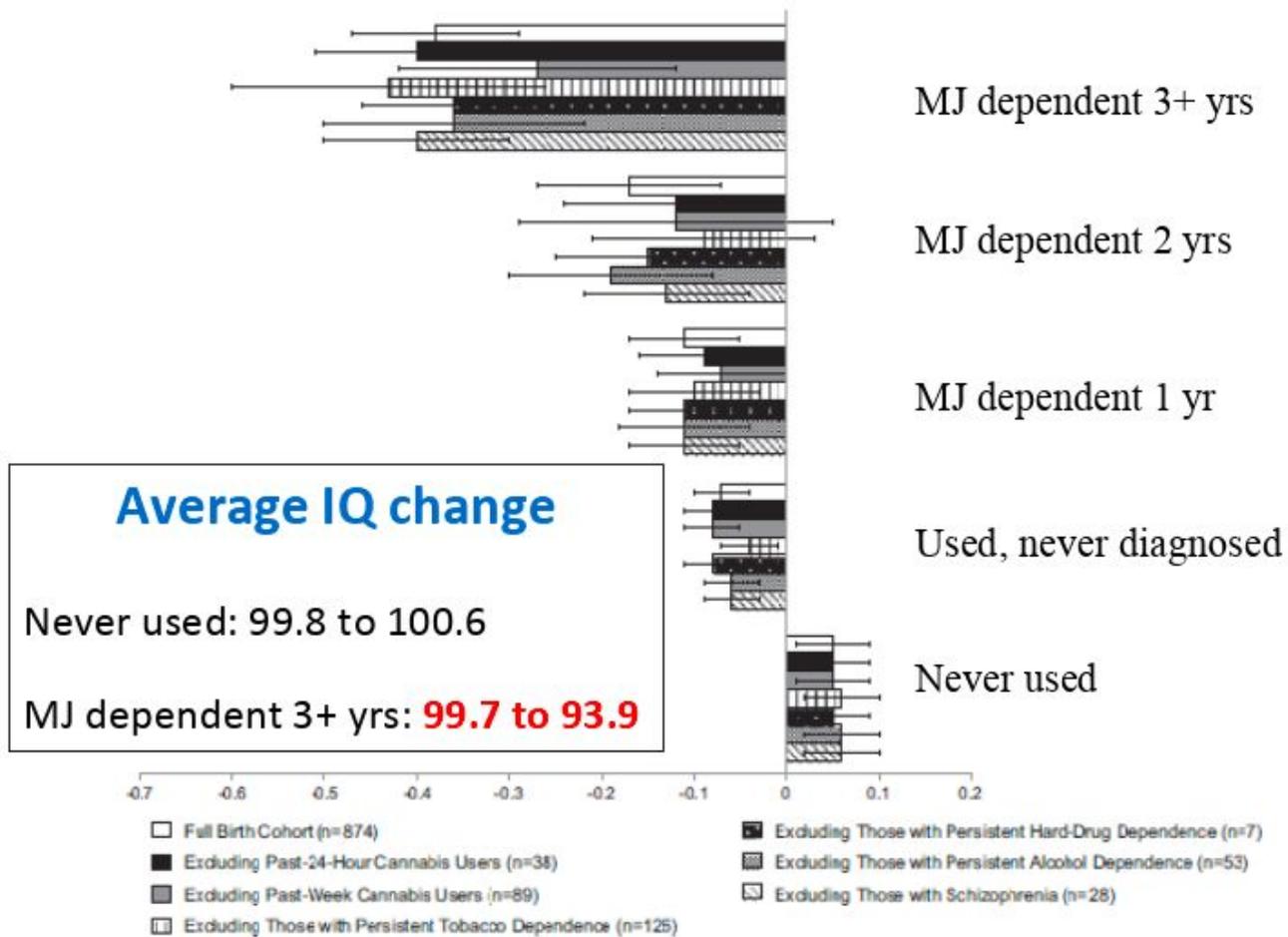
MOOD: Increased depression, anxiety (downregulation of endocannabinoids)

MEMORY: Decreased ability in attention, problem solving and especially short term memory formation (structurally reduced hippocampus AND amygdala)

Permanent 8 point drop in IQ

MOTIVATION: Impact of marijuana use is significant for what you DO NOT DO

1 in 6 teens who start using marijuana will develop a marijuana use disorder, as compared to 1 in 9 for adults.



Source: Meier et al. (2012). Persistent cannabis users show neuropsychological decline from childhood to midlife. *P Nat Acad Sci* 109(40):E2657–E2664.

Research shows...

Sleep:

- Increased NREM sleep
- more frequent awakenings through the night
- Less REM sleep **increases risk of obesity, memory problems and mood disorders.**

(Reported in Psychology Today, April 2019, numerous studies from 2014-2018)

Research shows...

Anxiety:

- May relieve anxiety in the short term
- Regular use causes down-regulation of endocannabinoid system
- Less natural ability to buffer stress/anxiety

(Dr. Sachin Patel, Vanderbilt University 2014)

Research shows...

Mental Health Correlation:

- Regular marijuana use correlates with **higher rates of depression, anxiety, suicidal ideation and psychotic disorders** (National Institute of Drug Abuse)
-
- **4-5x the risk of depression in teen girls using daily**

Sources: British Medical Journal, November 2002 and American Journal of Psychiatry December 2001

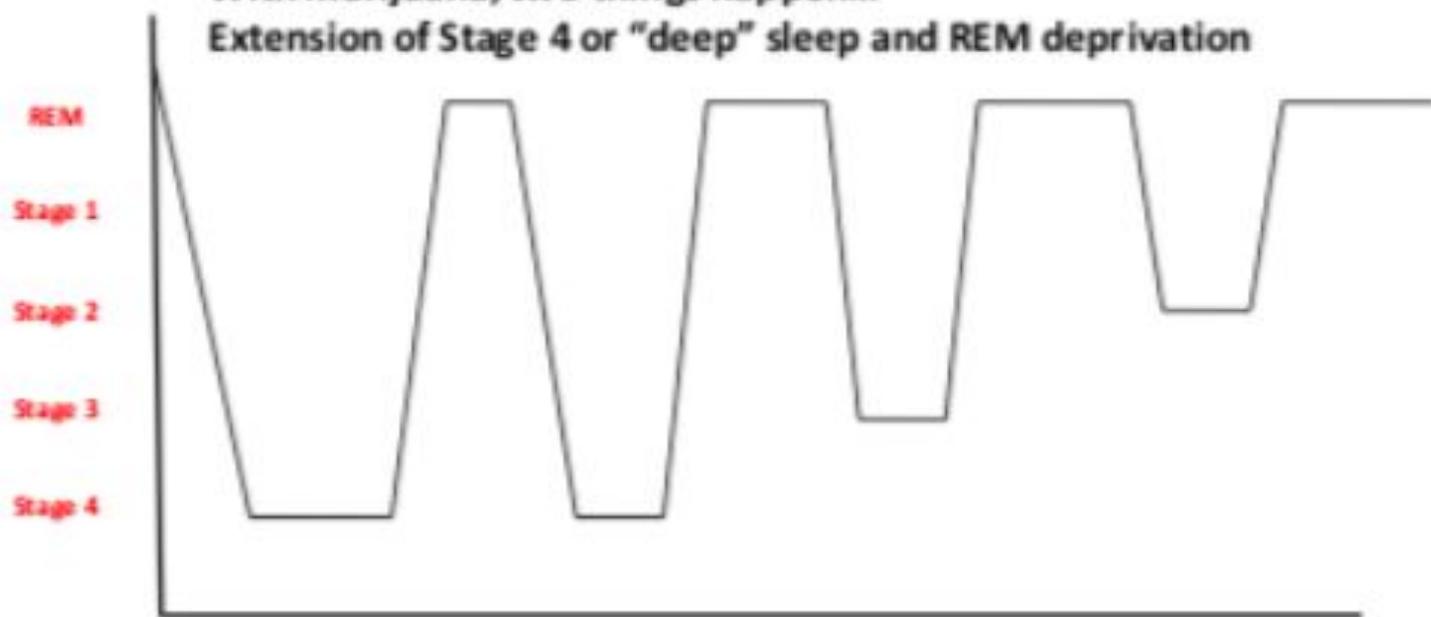
- **Doubles** the risk of developing a psychotic disorder

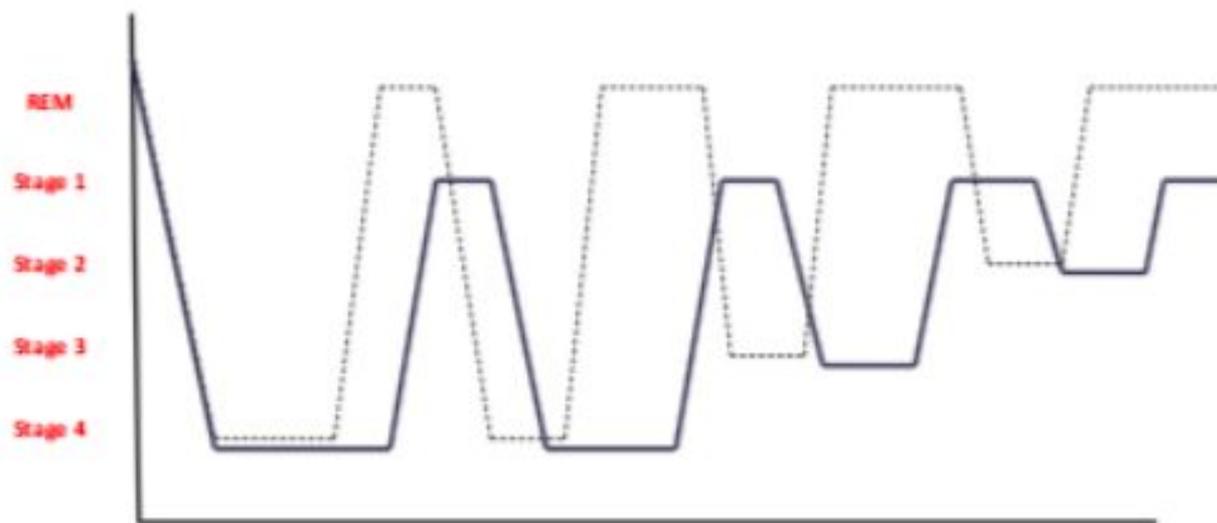
(2011 Kupper et. al. British Medical Journal)

(2011 Large et. al. Archives of General Psychiatry)

With marijuana, two things happen...

Extension of Stage 4 or "deep" sleep and REM deprivation





Next day, increase in:
•Daytime sleepiness
•Anxiety
•Irritability
•Jumpiness

Angarita, et al, 2016

Withdrawal: Cannabis

Diagnostic Criteria

292.0 (F12.288)

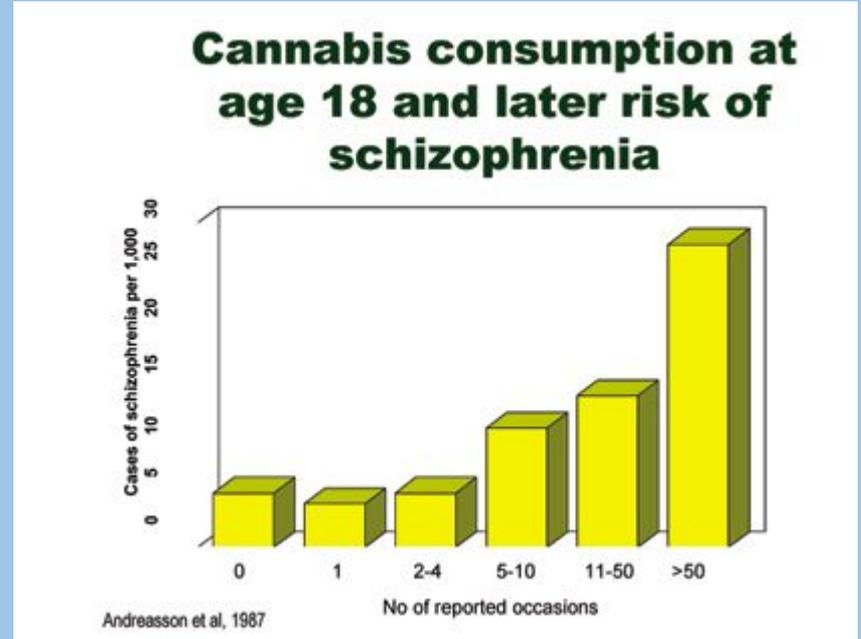
- A. Cessation of cannabis use that has been heavy and prolonged (i.e., usually daily or almost daily use over a period of at least a few months).
- B. Three (or more) of the following signs and symptoms develop within approximately 1 week after Criterion A:
 - 1. Irritability, anger, or aggression.
 - 2. Nervousness or anxiety.
 - 3. Sleep difficulty (e.g., insomnia, disturbing dreams).
 - 4. Decreased appetite or weight loss.
 - 5. Restlessness.
 - 6. Depressed mood.
 - 7. At least one of the following physical symptoms causing significant discomfort: abdominal pain, shakiness/tremors, sweating, fever, chills, headache.
- C. The signs or symptoms in Criterion B cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- D. The signs or symptoms are not attributable to another medical condition and are not better explained by another mental disorder, including intoxication or withdrawal from another substance.

Marijuana and Psychosis

Higher potency has resulted in higher incidences of psychotic episodes.

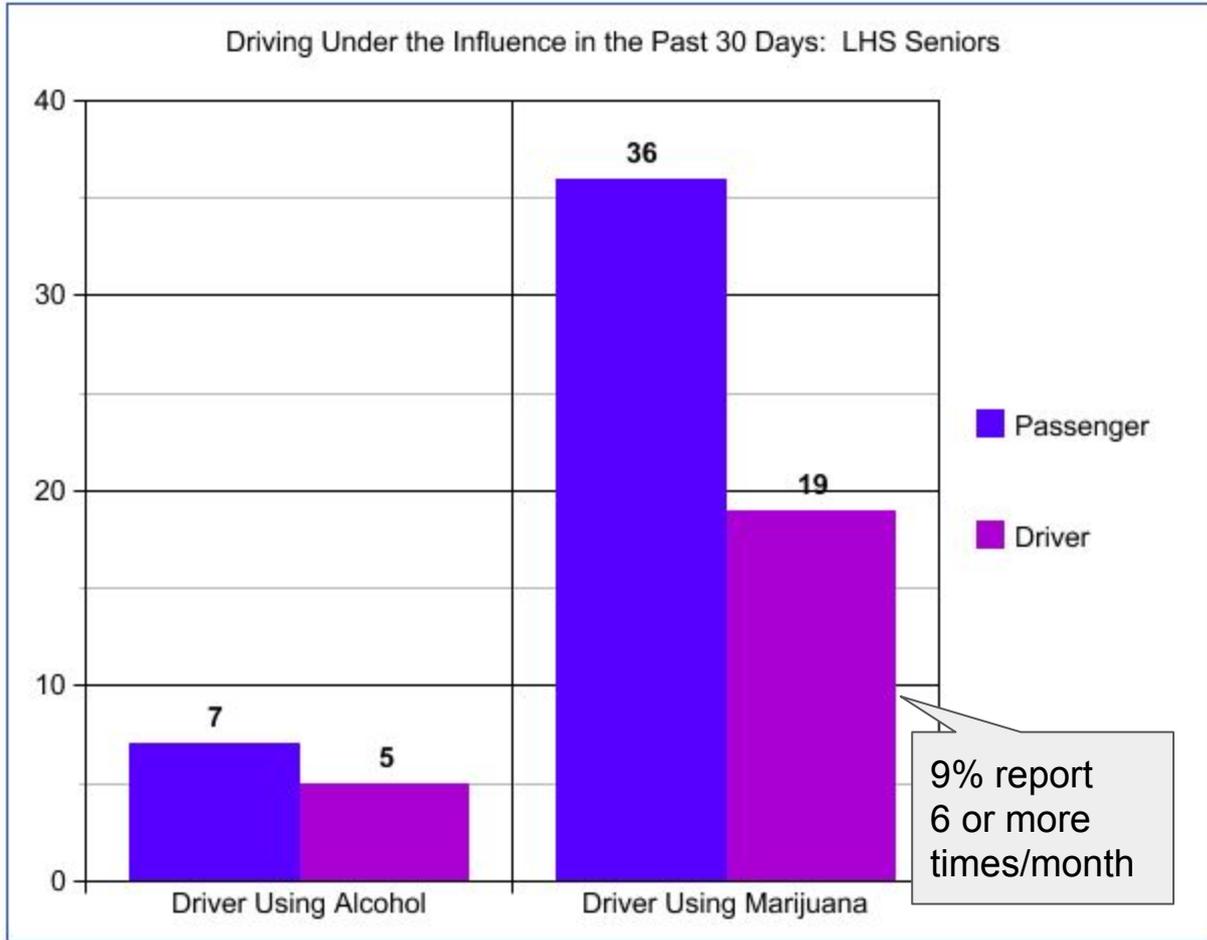
Side note: There are also risks from synthetics marketed falsely as THC cartridges for dab pens.

Reports of seizures and psychotic breaks.



(Image Above: [Source: Cannabis and schizophrenia. A longitudinal study of Swedish conscripts, Lancet, 1987](#))

3% of Seniors Report Drinking “While Driving Around”

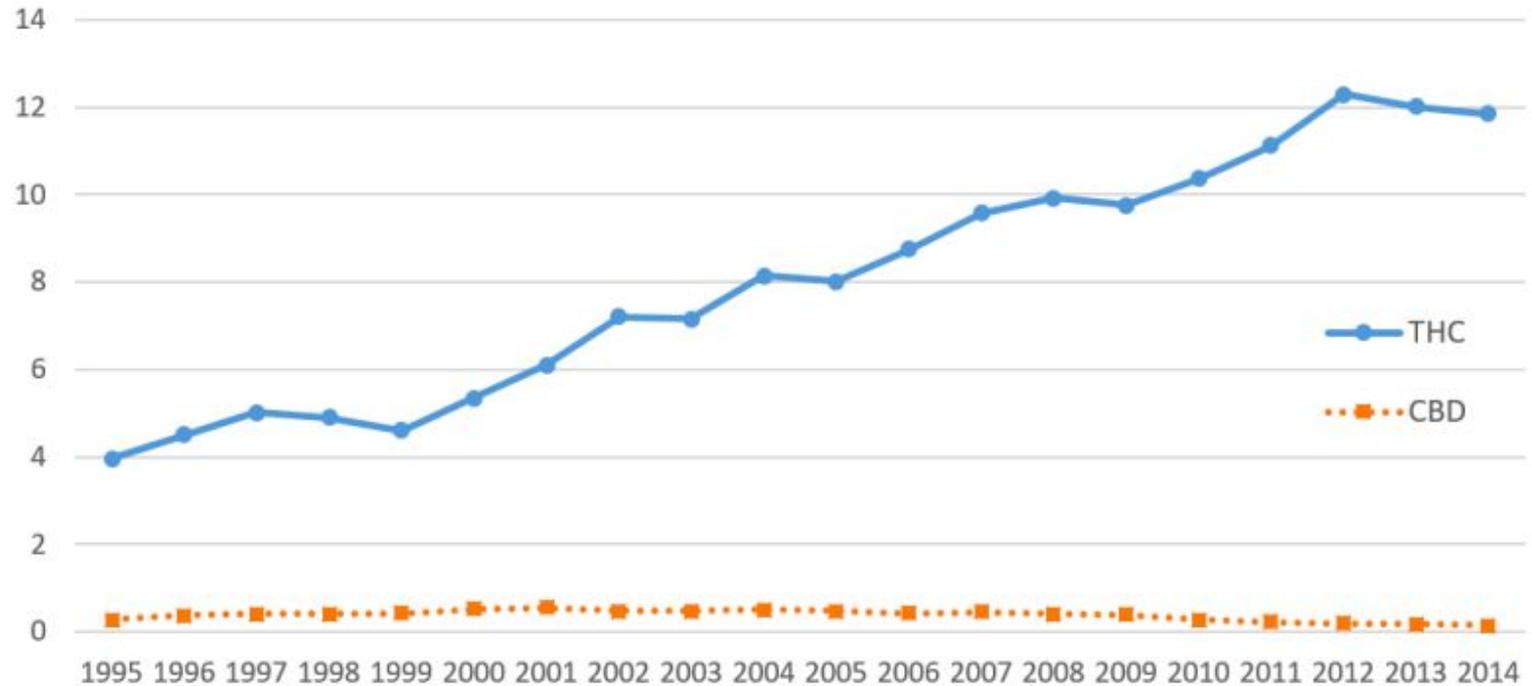


16% of Seniors Report Using Marijuana “While Driving Around”

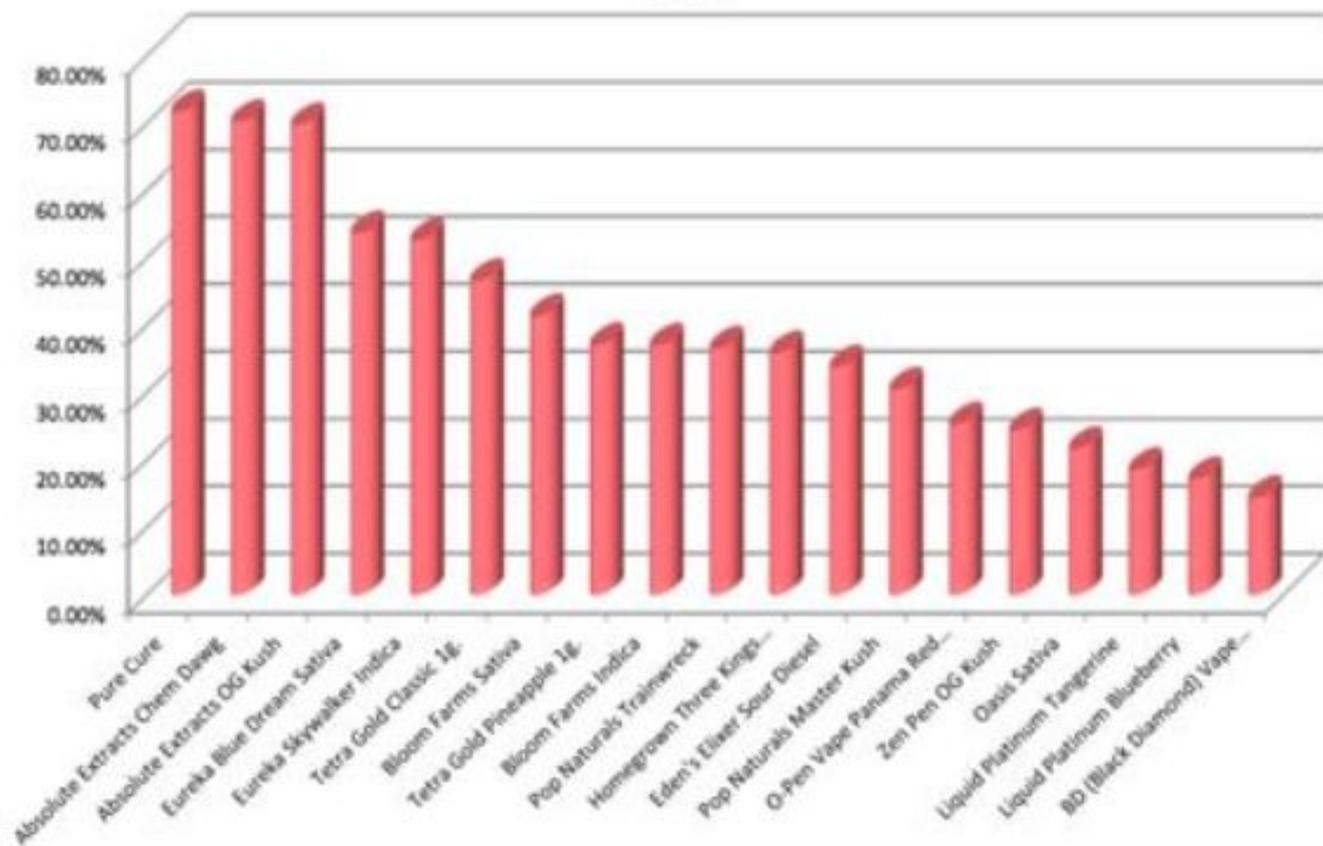
DOUBLE RISK Of FATAL CRASH
British Medical Journal, 2012

What's new?

Figure 1. Average Concentration (%) of THC and CBD in Cannabis Samples Seized by DEA 1995-2014



THC Potency Testing of Vape Pen Cartridges from SC Labs Public Data



Portrayed as a Positive Good:

10 MAJOR HEALTH

1 TREATS MIGRAINES

Doctors in CA report that they have been able to treat over 300,000 cases of migraines with medical marijuana.

2 PREVENTS ALZHEIMER'S

THC found in marijuana works to prevent Alzheimer's by blocking the deposits in the brain that cause the disease.

3 SLOWS TUMOR GROWTH

The American Association for Cancer Research has found marijuana works to slow tumor growth in lungs, breasts, and the brain.



4 RELIEVES SYMPTOMS OF CHRONIC DISEASES

Research shows marijuana can help relieve nausea associated with Irritable Bowel Disease and Crohn's.

5 TREATS GLAUCOMA



The use of marijuana has been shown to reduce intraocular eye pressure in glaucoma patients.

BENEFITS OF MARIJUANA

6 PREVENTS SEIZURES

Marijuana is a muscle relaxant, and contains "antispasmodic" qualities which have shown to be very effective in the treatment of seizures.

7 HELPS THOSE WITH ADD&ADHD



Marijuana is not only a perfect alternative for Ritalin, it treats the disorder without the negative side effects of the pharmaceutical.

8 TREATING MULTIPLE SCLEROSIS

Works to stop neurological symptoms and muscle spasms caused by multiple sclerosis by protecting nerves from damage caused by the disease.

9 CALMS THOSE WITH TOURETTE'S AND OCD

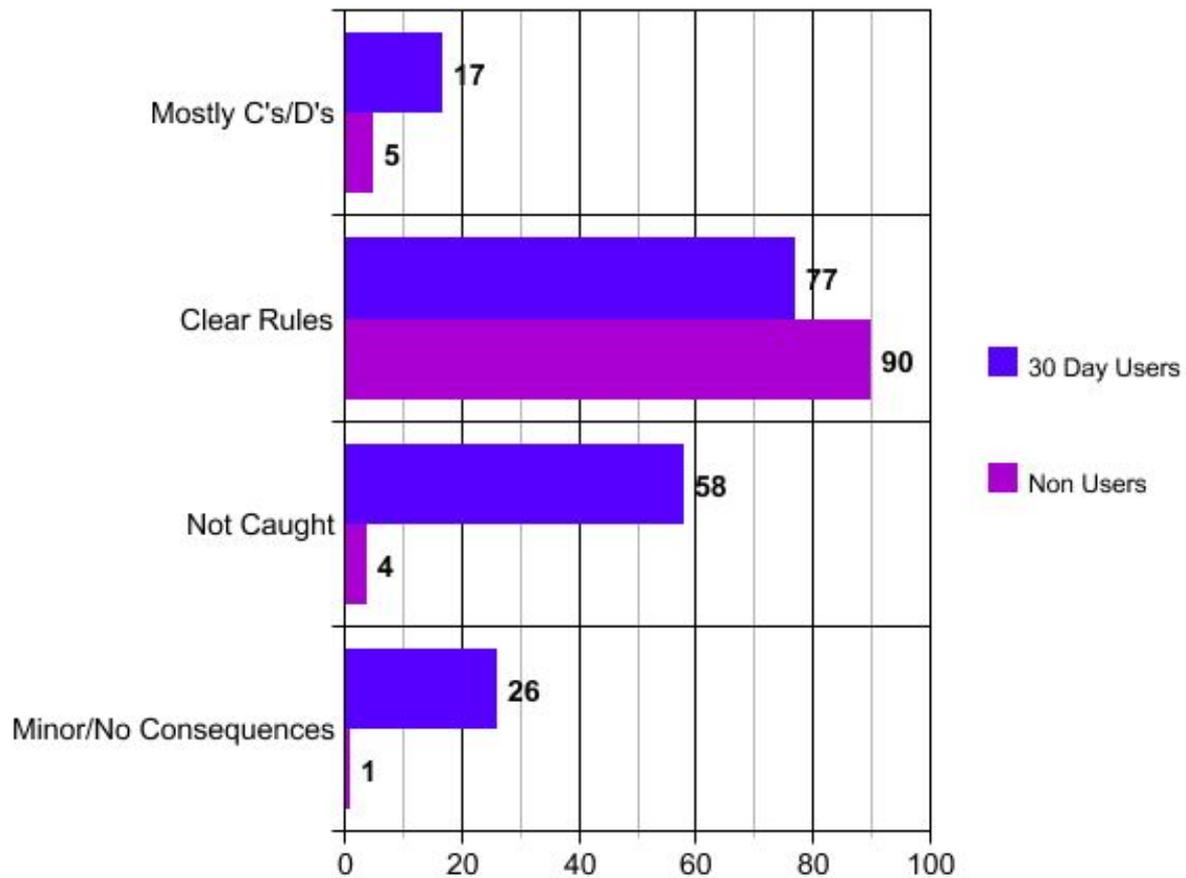
Marijuana slows down the tic's in patients with Tourette's, and relieves the obsessive neurological symptoms in patients with OCD.

10 HELPS RELIEVE PMS

Anecdotal evidence shows that marijuana may relieve pain in severe cases of PMS.



Marijuana: Comparing 30 Day Marijuana Users to Non Users



Challenging Situations:

- You find a dab pen in your teen's backpack
- You learn that the parents of one of your teen's friends like to smoke a bowl after dinner on the weekends (your teen spends time there)
- Your teen is sleeping more than usual after school, grades are dropping, and her bank account has been draining
- You notice your teen's eyes are bloodshot and dilated
- Your child's research project is on marijuana cultivation
- What advice would you give your teen about being the designated driver?
- You are at a public event with your kids and people around you start lighting up

Parenting Strategies:

From the Partnership for Drug Free Kids' "Marijuana Talk Kit"

More info at:
https://closecommunity.org/marijuana-talk-kit-for-parents-of-teens/marijuana_talk_kit/

START HERE / *How do I talk with my teen about marijuana?*

Talking to teenagers is difficult to begin with. Talking to them about drugs and alcohol is even harder. As a parent, you are often met with resistance. The good news is there are ways to engage your teen that promote open and positive communication.

Get in the right frame of mind

Here are some effective tools to set the stage for a conversation about substances:

- **Keep an open mind.** If you want to have a productive conversation with your teen, one thing to keep in mind is that when a child feels judged or condemned, she is less likely to be receptive to your message. We suggest that, in order to achieve the best outcome for you and your teen, try to preserve a position of objectivity and openness. We understand that this is challenging and may take practice.
- **Put yourself in your teen's shoes.** For instance, consider the manner in which you yourself would prefer to be addressed when speaking about a difficult subject. It might be helpful to think about how you felt when you were a teenager.
- **Be clear about your goals.** It may help to write them down. Once you know what you would like to get from the conversation, you can look back at these afterward and review what went right, what went wrong, what goals were met, which ones were saved for a later date and whether you were able to deliver them effectively.
- **Be calm and relaxed.** If you approach your teen with anger or panic, it will make it harder to achieve your goals. If you are anxious about having a conversation with her, find some things to do that will help relax you (take a walk, call a friend, meditate).

Sample goals

-  Begin an ongoing conversation about my teen's use
-  Gain insight into the pressures she may be facing with drugs
-  Express concern and support
-  Gauge how she feels about marijuana in general

- **Be positive.** If you approach the situation with shame, anger, scare tactics or disappointment your efforts will be counter-productive. Instead, be attentive, curious, respectful and understanding.
- **Don't lecture.** Keep in mind that if you spoke with her about drugs when she was younger, she already knows that you disapprove of her use. To lecture her about this will most likely lead to her shutting down, tuning you out, anger or worse — it could be misinterpreted as you disapproving of her instead of her actions, which can lead to shame and, in turn, more substance use. Throwing your weight around in order to stop something from happening (“You can’t, because I’m your parent and I said so”) is highly ineffective. Avoid pulling rank if you get frustrated.
- **Find a comfortable setting.** Announcing a sit-down meeting (“We need to have a talk after dinner”) will usually be met with resistance, while a more spontaneous, casual approach will lower her anxiety and maybe even your own. Perhaps this means taking a walk with her or and sitting in the yard or park. Look for a place that feels less confined but not too distracting.
- **Be aware of body language.** If your teen is sitting, you want to be sitting as well. If she is standing, ask her to sit down with you. Be mindful of finger-pointing and crossed arms; these are closed gestures, while uncrossed legs and a relaxed posture are open gestures.

You matter

“Even though your son or daughter might not acknowledge it, you still matter. If a student gets in trouble on campus, we can put them on probation, we can throw them out of housing, but what college students consistently report is that the worst thing we can do to them, the absolute death penalty, is call you.”

—Dr. Donald A. Misch, Medical Director at the University of Colorado, Boulder

Try active listening

Active listening is a skill that takes practice and is highly effective.* Here are some examples of how you can exercise active listening with your teen.



Try asking open-ended questions.

These are questions that elicit more than just a "yes" or "no" response from your teen.

Try: "Tell me more about..."



Be positive.

Find the positives in a situation, no matter how hard it may seem.

Try: "Thank you for your honesty. I really appreciate it."



Let your teen know you hear her.

Reflect back what you are hearing from your teen — either verbatim, or just the sentiment.

Try: "I'm hearing that you feel overwhelmed, and that smoking pot relaxes you. Is that right?"



Sum up and ask questions.

Show her you're listening the entire time and ask for her input.

Try: "Did I get everything? Do you have anything more to add?"



Ask permission.

Ask your teen if it's okay to speak with her about her concerns, and whether it's okay that you offer some feedback.

Try: "Are you okay with me asking you this? Do you mind if I give you some advice?"



Offer empathy and compassion.

Insert understanding and show your teen you get it.

Try: "I hear that smoking pot helps your anxiety. I'm sorry you're feeling anxious; I know that's a really difficult feeling. Can we think of some other activities that can help you relax?"

Parenting Strategies:

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More info at:

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START HERE / How do I talk with my teen about marijuana? (continued)

Words to avoid when talking about marijuana (or any issue with your teen)

AVOID	INSTEAD, USE
BUT You did well on your report card but I know you can work even harder.	AND You did well on your report card and I know you can work even harder.
SHOULD You should stop smoking pot.	WANT I want you to stop smoking pot, and I'm here to help you.
BAD Smoking pot is bad for you.	HARMFUL Smoking pot is harmful for your health and brain.
STUPID Smoking pot is a stupid choice.	UNHEALTHY Smoking pot is unhealthy for you, and that's why I'm concerned.
DISAPPROVE I disapprove of you hanging out with that group of friends.	CONCERNED I am concerned about your group of friends and worry that they may not be the best influence.
DISAPPOINTED I am disappointed in you for breaking curfew.	WORRIED I am worried about your decision to come home past curfew.
CAN'T You can't come home at 11 p.m. on weeknights.	DON'T WANT I don't want you to come home this late at night anymore.

Be patient

Remember to be clear about your goals, be positive and offer compassion. These skills take practice, so if the talk doesn't go the way you hoped it might, remember that you will have other opportunities to try them. Have more than one conversation, which will give you many opportunities to get it right and improve upon what didn't go so well the last time.