

Words Can Work: Talking About Marijuana

Discussion Guide

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Showing *Words Can Work: Talking About Marijuana*

Words Can Work: Talking About Marijuana is a conversation between Jeanne Blake, Creator, Words Can Work, Medical Journalist and Dr. Kevin Hill, Assistant Professor of Psychiatry, Harvard Medical School. This 20-minute video is designed to be a catalyst for a group discussion among parents and other caring adults in kids' lives. You can view the program in its entirety or in segments.

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You can read *Issues and Answers* columns at wordscanwork.com, where young people, parents, and experts share their experience dealing with drug and alcohol abuse, bullying, emotional health, and more.

Using this guide

➤ Follow these arrows to proceed easily through the discussion.

Additional information for participants

Viewers may feel a variety of emotions as they watch the video, due to their own or a loved one's drug use or abuse, dependence, or addiction. We suggest making available to viewers a list of resources within their community, including mental health counselors, Alcoholics Anonymous, Narcotics Anonymous, and Ala-teen.

Before viewing the program

Prepare participants for viewing the program by asking the following questions:

➤ **Ask participants**

- What do you think are the main reasons young people say they use marijuana?
- How do you feel about young people using marijuana?
- How does your own use of marijuana as a young adult influence how you feel about young people today using marijuana?

Segment One

👉 Introduction

There are a variety of reasons young people use marijuana. Let's listen to Dr. Kevin Hill talk about the reasons young people use marijuana – and how they to encourage young people to not use:

View *Reasons kids use, Healthy ways to cope and Scare tactics*

(Approximately 4 minutes 50 seconds)

Stop for discussion when *Marijuana and the developing brain* slide appears.

👉 Begin discussion for parents or caregivers by saying

Let's talk about the main reasons young people use marijuana and how we can help them make healthy decisions.

👉 Ask parents or caregivers

- What did Dr. Hill say are the main reasons young people tell him they use marijuana?
Offer these answers, if discussion participants do not:
 - to “de-stress” or self-medicate when they are in difficult situations
 - to ease feelings of anxiety
 - to help them sleep
- What are reasons it is dangerous to use marijuana to cope with stress, anxiety or depression?
- What are healthy ways you can encourage young people to handle stressful emotions?
- How do you talk honestly with young people about emotions they may experience?
- How do you model healthy coping skills for young people in your life?
- Why is it important that young people learn – and practice – these skills?
- Many young people think marijuana is harmless. What contributes to this perception?
- Why is it unproductive to use fear to discourage marijuana use among young people?

👉 Remind parents or caregivers

A healthy person learns to effectively deal with stress. By using drugs, you temporarily numb the feelings – you don't eliminate the stress or find solutions to a problem. So the stress usually worsens. Adapted from *Words Can Work: When Talking About Drugs*

Segment Two

👉 Introduction

One reason it's dangerous for young people to use marijuana is that their brains are still developing. Let's listen to Dr. Hill describe the effects of marijuana on the developing brain.

View *Marijuana and the developing brain* and *When to seek professional help*
(Approximately 1 minute 30 seconds)
Stop for discussion when *Open communication* slide appears.

👉 Begin discussion for parents or caregivers by saying

The effects of marijuana on the developing brain are real.

👉 Ask parents or caregivers

- How did Dr. Hill say marijuana use can affect the developing brain?
Answer: Marijuana can affect the part of the brain associated with decision-making and judgment. Studies at McLean Hospital and other institutions show that young people – whose brains are still developing – who smoke marijuana have to use different parts of their brain to accomplish the same tasks. This extra work that results from chronic marijuana use appears to be correlated with up to an 8-point decline in IQ points over time
- What have you told your child about the risks associated with using marijuana?
- How can you describe the risks associated with the use of marijuana?
- At what point – if you suspected your child of using marijuana – would you seek professional guidance for him or her?

👉 Remind parents or caregivers

Marijuana has many potential negative effects such as chronic respiratory illness, increased colds and shortness of breath, and short-term memory loss that can affect young people's ability to learn new things and pay attention. Adapted from *Words Can Work: When Talking About Drugs*

Marijuana and the Brain

Certain parts of the brain have a lot of cannabinoid receptors. These areas are the hippocampus, the cerebellum, the basal ganglia, and the cerebral cortex. As a result, marijuana affects these functions:

Learning and memory The hippocampus plays a critical role in certain types of learning. Disrupting its normal functioning can lead to problems studying, learning new things, and recalling recent events. Chronic marijuana use disorder, that begins in adolescence, is associated with a loss of IQ points, as compared with people who don't use marijuana during their teen years.³ However, two recent twin studies suggest that this decline is related to other risk factors (e.g., genetics, family, and environment), not by marijuana use itself.⁴

Coordination THC [a chemical compound found in the cannabis plant] affects the cerebellum, the area of our brain that controls balance and coordination, and the basal ganglia, another part of the brain that helps control movement. These effects can influence performance in such activities as sports, driving, and video games.

Judgment Since THC affects areas of the frontal cortex involved in decision making, using it can make you more likely to engage in risky behavior, such as unprotected sex or getting in a car with someone who's been drinking or is high on marijuana.

The National Institute on Drug Abuse Blog Team. (). Marijuana. Retrieved from <https://teens.drugabuse.gov/drug-facts/marijuana> on September 15, 2017.

3. Meier MH, Caspi A, Ambler A, et al. *Persistent cannabis users show neuropsychological decline from childhood to midlife*. *Proceedings of the National Academy of Sciences U S A* 2012;109:E2657-64.

4. Ibid.

Segment Three

👉 Introduction

Young people say a key reason they avoid the use of drugs, including marijuana, is open, honest communication with their parents and other caring adults in their lives.

View *Open communication* and *Ask smart questions*

(Approximately 2 minutes)

Stop for discussion when title *Is there a non-problematic way for youth to use marijuana?* slide appears.

👉 Begin discussion for parents or caregivers by saying

It's challenging to maintain open communication with kids, but as we heard – it's worth the effort.

👉 Ask parents or caregivers

- How do you create opportunities to have open, honest conversations with your child?
- Technology can make it challenging to connect and talk with young people. How do you handle these distractions to make sure you and your child have ongoing communication?
- Why is it important to ask open-ended questions to get or keep a conversation going?
- What are examples of open-ended questions you ask your child?
Suggestion: You can start with a general question such as, "What's the school teaching you about drugs?" You can then be more specific with a question like, "What would you do if you felt pressure from friends to use drugs?" Adapted from Words Can Work: When Talking About Drugs
- What do you do when your child doesn't want to talk?
"Some young people are naturally quiet, and others share their feelings openly and often. By talking regularly with your child about a range of subjects, and checking in to see how he or she feels about a particular event or experience, you'll learn to recognize your child's usual mood and behavioral pattern. Knowing your child's emotional baseline makes it easier to recognize significant changes. Likewise, frequent conversations give your child opportunities to develop skill in sharing feelings, should hard times come." Adapted from Words Can Work: When Talking About Depression

👉 Remind parents or caregivers

Taking time for open and honest conversations is a parent's responsibility. When you spend time together, listen in a way that conveys that you want to learn from your child. Make a habit of asking about his or her daily experiences and those of friends. Tuning in and showing interest will allow you to pick up signs of potential difficulties early. Adapted from *Words Can Work: When Talking About Depression*

Segment Four

👉 Introduction

Some parents deny their child may be engaging in risky behavior, such as using marijuana. Let's listen to Dr. Hill discuss this.

View *Is there a non-problematic way for youth to use marijuana?*, *Denial of risky behavior* and *If you suspect use* (Approximately 3 minutes)

Stop for discussion when *Alcohol vs marijuana* slide appears.

👉 Begin discussion for parents or caregivers by saying

"When it's too frightening to consider that a child might be doing something dangerous, parents invent reasons to ignore warning signals." Dr. Brian Johnson, Director of Addiction Psychiatry, SUNY Upstate Medical University Adapted from *Words Can Work: When Talking About Drugs*

👉 Ask parents or caregivers

- If you suspect your child is using drugs, why is it important not to brush aside feelings of suspicion, but to seek help?
Suggested answer: If a child is using marijuana, you want to rule out that he or she is self-medicating to ease anxiety or depression – or other mental health disorders, which can be worsened by regular marijuana use.
- Parents sometimes deny warning signs because it's easier than taking action. They might say, "Her grades are O.K. She is fine." How can parents resist this denial?
- If you suspected your child was using marijuana, what would you say to him or her?
Suggested answer: "I would encourage [parents] to say 'I'm worried about you.' I think you need an evaluation. That way you're not passing judgment, you're not making a diagnosis. You're just saying, "I'm concerned about the way things are going. And I wonder if there's more going on and those other things may require some treatment."
Dr. Kevin Hill
- If you suspected your child was using marijuana, where would you turn for professional help?
- If another adult knew your child was using marijuana, what action would you want him or her to take?

👉 Remind parents or caregivers

Studies show that half of middle school students and eighty percent of high school students see drugs being sold at school or classmates who are high. If parents don't talk with kids about drugs, kids are left to make decisions about what they see on their own.

Segment Five

👉 Introduction

Many parents say they prefer their child use marijuana than drink alcohol. Let's listen to Dr. Hill.

View *Alcohol vs marijuana, Telling the truth* and *Is marijuana a gateway drug?*

(Approximately 3 minutes 15 seconds)

Stop for discussion when *Who's at greatest risk?* slide appears.

👉 Begin discussion for parents or caregivers by saying

The marijuana today is many times more powerful than the marijuana of 30 years ago.

👉 Ask parents or caregivers

- Why do you think many adults say they'd prefer young people use marijuana than alcohol?
- If your child asked whether marijuana was as dangerous as alcohol, what would you say?
- How can you convey to your child that some drugs may be more dangerous than marijuana without appearing to condone its use?

Suggested answer: "Marijuana may not be as dangerous as alcohol. But there are different degrees of danger. Because marijuana is not as dangerous as some other substances doesn't suggest it's not dangerous at all." Dr. Kevin Hill

- What did you take away from Dr. Hill's response to whether marijuana is a "gateway" drug?

Note: *As Dr. Hill suggested, this is a complex question. Regardless, there are many proven reasons to encourage young people to avoid using marijuana. According to the National Institute of Drug Abuse (NIDA) the majority of people who use marijuana do not go on to use other, "harder" substances. But some research suggests that marijuana use is likely to precede use of other illicit substances – and addiction to other substances. It's important to note that other factors such as a person's social environment are also critical in a determining one's risk for drug use. So further research is needed to explore this question.*

👉 Remind parents or caregivers

Open, honest conversations with young people – over time – build your credibility as a reliable source of information. By consistently having conversations about important topics, young people are more likely to trust you and bring you their questions and concerns.

Segment Six

👉 Introduction

Not every young person who uses marijuana will get into trouble with it. Dr. Hill says some youth are at a higher risk for developing other problems, including marijuana use disorder or marijuana addiction, when they use marijuana.

View *Who's at greatest risk?*, *Building resilience* and *Delay use until age 21?*

(Approximately 2 minutes 50 seconds)

Stop for discussion when *What's dabbing* slide appears.

👉 Begin discussion for parents or caregivers by saying

It's important for all parents to be vigilant about the potential use of substances.

👉 Ask parents or caregivers

- Who did Dr. Hill suggest may be at increased risk for developing a problem with marijuana?
Suggested answer: "Young people with a family history of addiction are at increased risk. Also, it's important for parents to encourage open, honest communication with young people who are experiencing increased psycho-social stress i.e. challenging relationships or disappointment in school, sports, etc." Dr. Kevin Hill
- How would you explain that a child has increased risk if your family has history of addiction?
Suggested answer: When addiction is in your family, it's important to have ongoing conversations about increased risk. Parents can say, "Some families are at a higher risk for diabetes or heart disease. Our family is at increased risk for addiction. It's important that you remember that drug use is always risky. It would be extra risky for you." Adapted from Words Can Work: When Talking About Drugs
- How do you build resilience in your child?
- How do you model resilience to your child when you experience disappointment or stress?

👉 Remind parents or caregivers

It's important to remind young people that life has its ups and downs. When you share openly and honestly about how you handle your own disappointments, you help your child build healthy coping.

Segment Seven

👉 Introduction

Marijuana is ingested in other ways than by being smoked. Let's listen as Dr. Hill describes them.

View *What's dabbing?* and *Edible marijuana*
(Approximately 1 minute 15 seconds)
Stop for discussion when screen goes black

👉 Begin discussion for parents or caregivers by saying

Both dabbing and eating marijuana can provide a more concentrated dose of THC, the main psychoactive substance found in the cannabis [marijuana] plant.

👉 Ask parents or caregivers

- What did you learn about the risks associated with “dabbing” from Dr. Hill’s response?
Note: These extracts can deliver extremely large amounts of THC to the body. Dabbing comes with a slew of negative side effects, including a rapid heartbeat, blackouts, feeling like something is crawling under the skin, loss of consciousness and psychotic symptoms, including paranoia and hallucinations. Another danger is in preparing these extracts, which usually involves butane (lighter fluid). A number of people have caused fires and explosions and been seriously burned by using butane to make extracts at home. Adapted from NIDA and The National Center on Addiction and Substance Abuse
- What are the potential risks associated with the use of edible marijuana?
Suggested answer: People often don’t understand this difference between smoking and eating marijuana. It takes longer to feel the effect of edibles. As a result, they might consume a lot more of the drug than intended. This can have profoundly negative effects due to receiving a dose that is much larger than they intended, such as paranoia, anxiety, or extreme drowsiness

👉 Remind parents or caregivers

There are a variety of ways marijuana can be consumed. To be a credible source of information for your child, it’s important to stay informed.

Blake Works Inc.

Blake Works Inc. produces evidence-based media (DVDs, the Words Can Work series of booklets, discussion guides, training materials, and wordscanwork.com) to help adolescents, young adults, and families talk about the challenges kids face growing up. Blake Works Inc. is certified as a Woman Owned Business.

Jeanne Blake is the host and producer of *Words Can Work: The Truth About Marijuana* and the president of Family Health Productions and Blake Works. She is a science and medical journalist and an affiliated faculty member at the Division on Addiction, The Cambridge Health Alliance at Harvard Medical School. She serves as a trustee at McLean Hospital, Harvard's largest

Blake speaks to parents and youth-serving professionals in corporate and community settings.

DVDs with discussion guides available at wordscanwork.com

Alcohol: True Stories Hosted by Matt Damon (20 minutes)

Underage drinking can have devastating consequences. Young people tell their powerful stories to encourage peers to avoid underage drinking. *For grades 5 through 12, parents, and other caregivers.*

Boys on Bullying (20 minutes)

Bullying causes depression, anger, and isolation. These teens tell how they handled their situations through support from friends, parents, or other caring adults. *For grades 5 through 12, parents, and other caregivers.*

Depression: True Stories (20 minutes)

Young adults and their families talk about living with depression and the importance of early diagnosis and treatment. *For grades 6 through college, parents, and other caregivers.*

Drugs: True Stories (30 minutes)

Joel's abuse of alcohol and marijuana led to addiction to prescription pills. He, his parents, and sister discuss their denial and how Joel eventually began his recovery. Trevor tells how he avoided drugs and stays drug-free. H. Westley Clark, M.D., C.A.S., Center for Substance Abuse Treatment, and Howard J. Shaffer, Ph.D., C.A.S., Division on Addiction, Harvard Medical School, answer FAQ. *For grades 5 through college, parents, and other caregivers.*

In Our Own Words: Teens and AIDS (20 minutes)

Teens infected with HIV through unprotected intercourse discuss denial, condoms, postponing sex, and alcohol's affect on decision-making. *For grades 5 through 12, parents, and other caregivers.*

The Power of Girls: Inside and Out (20 minutes)

Strong connections help young people make healthy choices. These girls discuss how they dealt with bullying, eating disorders, early sexual activity, and deep loss by talking with friends, parents, or other caring adults. *For grades 5 through 12, parents, and other caregivers.*

Raising Healthy Kids: Families Talk About Sexual Health (2 DVDs - 20 minutes)

Parents and young people tell how they discuss sexual health. Experts offer insight and skills to help families start and continue these conversations. *For parents and other caregivers.*

Program #1 For Parents of Young Children (20 minutes)

Program #2 For Parents of Preadolescents and Adolescents (20 minutes)

Steroids: True Stories Hosted by Curt Schilling (20 minutes)

Former Boston Red Sox pitcher Curt Schilling tells how Craig abused steroids. Craig, his parents, and sister describe their five-year "nightmare." Nate, 18, builds his strength naturally. Roberto Olivardia, Ph.D., Harvard Medical School, answers FAQ. *For grades 6 through college, parents, and other caregivers. A portion of the proceeds is donated to Curt's Pitch for ALS.*

Words Can Work booklets by Jeanne Blake available at wordscanwork.com reinforce key messages.

Words Can Work: When Talking About Alcohol

Young people and parents tell how they discuss underage drinking. Experts offer facts, strategies, and the words to help young people and families talk about alcohol use.

Words Can Work: When Talking About Bullying

Young people and parents tell how they handle and discuss bullying. Experts offer facts, strategies, and the words to help young people and families talk about bullying.

Words Can Work: When Talking About Depression

Young people and parents discuss living with depression and other mental health disorders. Experts offer facts, strategies, and the words to help young people and families talk about these topics.

Words Can Work: When Talking About Drugs

Young people and parents tell their stories about drug abuse, addiction, and the benefits of staying drug-free. Experts offer facts, strategies, and the words to help young people and families talk about drug use.

Words Can Work: When Talking With Kids About Sexual Health

Young people and parents discuss puberty, values, relationships, postponing sex, and birth control. Experts, including former Surgeon General David Satcher, M.D., offer facts, strategies, and the words to help young people and families talk about these topics.

Classroom activities/discussion points for *Words Can Work* booklets can be downloaded from wordscanwork.com.

Order at wordscanwork.com

Quantity discounts available

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