Madeleine: Welcome to this episode of the Any Questions University Health Center podcast where peer leaders, Ashlyn and Breannah, are gonna chat about Cannabis and harm reduction.

Ashlyn: Hey everyone. My name is Ashlyn and I am your Cannabis Trivia Host. Today we’re coming at you with bust or trust. So I’m gonna read off three different phrases about cannabis and Breanna is either going to answer bust or trust. So bust meaning that Breannah is going to bust the myth and then trust meaning that she is going to trust the myth. So, let’s start with the first question. Breannah, are you ready?

Breannah: Oh I am so ready.

Ashlyn: Okay, perfect. So our first myth is that cannabis is not addictive. What are your thoughts on this?

Breannah: There is no way cannabis is addictive. I’m trusting this myth.

Ashlyn: Well don’t be so quick. Actually this is false. It’s a very common misconception that cannabis is not addictive when in reality any substance that you put into your body can become addictive and according to the CDC, 1 in 10 cannabis users will become addicted and this jumps to 1 in 6 if use has started before the age of 18. Also cannabis use disorder is a part of the DSM or the diagnostic and statistical manual of mental disorders to capture people who are dependent on cannabis use. Okay, so great job. Next myth, you cannot overdose on cannabis. What are your thoughts?

Breannah: Well, I don’t think I’ve ever heard of someone overdosing on cannabis so I’m gonna trust this myth.

Ashlyn: Yeah and this is a tough one. I think many people think that you can’t overdose on cannabis because it may not necessarily result in death. However, overdosing just means that you are taking more of a certain substance than your body can handle which can then lead to harmful consequences. So some symptoms of an overdose could be loss of coordination, pale skin color, and rapid heart rate or chest pain. The American addiction center suggests that most people who overdose on cannabis do so when consuming it alongside another substance. Okay, so moving on. The next and final myth is that cannabis now isn’t as strong as it used to be.

Breannah: I think I have to bust this myth. I don’t know why but I think it’s the opposite. I think it’s stronger now than it was before.
**Ashlyn**: Yes, you're correct. Cannabis nowadays is actually more potent meaning that there is a higher concentration of THC in cannabis today. This is because there is a higher concentration of the flour portion of the cannabis plant in cannabis now which contains more THC than other parts like the leaves.

*[Jazzy Instrumental Transition Music]*

**Ashlyn**: Well, thank you Breannah so much for participating in this bust or trust today. Let's get into this podcast. So again, welcome to this episode of the Any Questions University Health Center podcast. My name is Ashlyn, I use she/her pronouns and I am a current peer leader within the Health Promotion and Wellness Services of the Health Center.

**Breannah**: And I'm Breannah, I use she/her pronouns and I am also a peer leader with the Health Promotion and Wellness Services of the University Health Center. And today, we are going to be talking about cannabis, weed, and marijuana but we wanna point out that today we are using the term cannabis instead of marijuana in an effort to combat the discriminatory origin of the term marijuana against the latinx community. Specifically, in this podcast we will be diving into what exactly cannabis is and the effects it could have. And then later we are going to look at different harm reduction techniques that people can utilize if they choose to use cannabis. Lastly, we will briefly talk about the intersections between systemic racism and cannabis specifically acknowledging that certain cannabis and other drug laws disproportionately impact Black Americans. But before we dive in, we wanna make a quick disclaimer. As of the recording of this podcast, cannabis is illegal at the state and federal level so therefore it is prohibited at the University of Maryland. We are from the University Health Center and our goal is to promote wellness and educate other students about how our behaviors and decisions can impact our wellness including substance use and with all of that out of the way let's dive into what exactly cannabis is and the effects that it can have on our bodies.

**Ashlyn**: Cannabis is a cannabinoid drug and these drugs are classified by joining the cannabinoid receptors of the body and the brain and these drugs have similar effects to those produced by the cannabis sativa plant and cannabis contains the psychoactive cannabinoid THC and the non cannabinoid cannabidiol CBD. It can also be used in many different forms including the herbal form which is composed of the dried leaves and flowers of a cannabis plant that can be smoked via a joint or a bong and it can also be used as hash which is a dried plant resin used in baked goods, smoked or mixed with tobacco or as hash oil which is a super concentrated form of hash that is used in food, added to the tip of a joint cigarette, or used for dabbing.

**Breannah**: Cannabis can have a number of effects on the person using it. Some examples of short term effects are as follows: feelings of relaxation, increased appetite, increased sociability, spontaneous laughter and excitement, dry mouth, and altered sense of time. If cannabis is used in large amounts, effects like memory impairment, slower reflexes, bloodshot eyes, increased heart rate, and anxiety, and/or paranoia can be seen as well. In the long term people have seen effects like increased tolerance and dependency, and chronic bronchitis or other lung diseases if the cannabis is constantly inhaled via smoking. There have also been multiple studies that have found altered brain development in an individual who used cannabis particularly if they started in
their adolescence. It particularly affects the development of neural connections which can lead to developmental effects to the hippocampus which is responsible for memory and learning and the prefrontal cortex which is responsible for executive functioning and decision making. And we want to acknowledge that this is just a short list of some effects users generally have seen but cannabis can have a wide variety of effects on a person. So now that we generally have an idea of what cannabis is and what effects it could have on a person let’s dive into some of the harm reduction techniques that can be used if you choose to engage in cannabis related activities. So first of all what is harm reduction?

Ashlyn: Yeah great question. So, harm reduction is simply reducing harm. Technically it’s defined as a set of practical strategies intended to reduce the negative consequences of high risk behaviors such as alcohol or drug use. Harm reduction can be as simple as wearing your seatbelt in the car right? So we habitually put on our seatbelts when we get into the car because we know that this reduces harm. And we want to emphasize that this is not necessarily equal harm elimination and this approach can center abstinence as the end goal but it doesn’t have to. So, let’s get into some harm reduction techniques. Breannah, can you take us through harm reduction techniques for cannabis use?

Breannah: Yeah, I can definitely do that. So one thing that immediately comes to mind is cleaning products before and after use. This might not seem as obvious but cleaning your products like a bong or a bubbler can lessen the chances of you inhaling something nasty like mold. You can also set a schedule for yourself if you choose to use cannabis including taking a tolerance break or a t-break to reset your body’s tolerance. This could look like only using on specific days of the week. For example, you could designate Friday night as your time to use cannabis and if you also like to drink alcohol you could designate Saturday as your time to do so in order to not mix substances. When you mix substances, the effects that you feel from one drug can be intensified by the other drug being used. Another thing that could happen is that the two drugs can have opposite effects on your body essentially pulling you in two different directions. This could mask the effects that one drug has on your body so you may think that you’re not as affected by the drug as you are and this can be super dangerous. That’s pretty much all that I can think of right now. Ashlyn, do you have anything you want to add?

Ashlyn: Yeah, for sure. I would say that just keep in mind that unregulated substances can come with unregulated risks. So since cannabis is not legal everywhere THC concentrations are not regulated so THC concentrations can vary depending on where your cannabis comes from and also since it’s not regulated cannabis can be laced with other drugs including fentanyl which can be fatal in certain doses. I would also suggest that you should become aware of the cannabis policies and laws that exist in the states that you are choosing to use in. So since federal laws trump state or local laws at state universities and since cannabis is a scheduled drug at the federal level, this means that cannabis is illegal for anything outside of research. So for example, in Maryland certain people are able to use cannabis medicinally which is with a prescription and under the guidance of a licensed physician but this does not apply to students at UMD since any university receiving federal funding must abide by the substance use laws at the federal level.
Breannah: Although harm reduction techniques can ultimately reduce harm and have a positive effect on wellness, cannabis laws still affect Black people in the United States at much higher rates than White people. We know that a short podcast episode like this one is not going to do the topic justice but we just want to give a brief overview of some of the systemic racism that exists in this country that has contributed to these disparities. We realize that before we can do the work necessary to fix these issues we must address the root cause of these issues.

Ashlyn: That’s a really good point and one super glaring statistic that I found is that in 2018, Black people were 3.36 times more likely to be arrested for Cannabis possession than White people although Black people only make up about 13 percent of the U.S. population. So why exactly is this the case?

Breannah: Well, we need to look back on the war on drugs which was declared by Richard Nixon in 1971 which was an attempt by the U.S. government to vilify and disenfranchise Black Americans according to John Ehrlichman, Nixon’s aide. This had nothing to do with Cannabis itself and everything to do with control over the lives and assets of Black people. One of the most notorious laws that came out of the war on drugs era was mandatory minimum sentencing which means that a certain charge brought against someone can guarantee a minimum prison sentence regardless of the judge’s discretion. This means that some nonviolent drug offenses could lead to a minimum of several years in prison especially if it is someone’s second or third offense. One of the most notable features from mandatory minimums was the striking difference in sentencing between powder cocaine and crack which comes in a rock form. Although these two substances have essentially the same chemical composition, the possession of 5 grams of crack led to an automatic five year sentence while it took the possession of 500 grams of powder cocaine to trigger the same sentence. Since about 80 percent of crack users were Black this led to a disproportionate increase in incarceration levels of Black nonviolent drug offenders. So how exactly does this relate to cannabis use harm reduction?

Ashlyn: So these laws have characterized Black people in this country in an extremely false way. In 2014, the Washington Post quoted “Black people are far more likely to be arrested for selling or possessing drugs than White people even though White people use drugs at the same rate and White people are actually more likely to sell drugs.” So because of these assumptions of criminality that law enforcement and the general public had about Black Americans for decades we saw that in 2018 Black people were 3.36 times more likely to be arrested for Cannabis possession than White people. So even though the harm reduction techniques that we suggested could definitely be helpful on an individual level, implicit biases, discriminatory laws, and the mass incarceration of Black Americans fueled by the war on drugs still exist. Mass incarceration can affect access to public housing, employment opportunities, voting, mental health, the spread of infectious disease, poverty rates, and susceptibility to future incarceration but the list goes on. So while using cannabis itself can pose risks and can definitely affect someone’s wellness it’s super important to acknowledge that systemic racism also impacts wellness and is super relevant in this conversation. So before we wrap up this episode, we just want to share some cannabis and other substance use resources that UMD students have access to.
Breannah: Yeah and the Health Center has so many resources for students. One resource that the University has is E-Check up to Go, an anonymous online tool that allows students to examine their personal usage of both alcohol and cannabis as well as compare it to both UMD students and nationwide. This could be helpful if you noticed that your cannabis use has changed or if you were concerned about your personal use no matter the frequency. You can also sign up for a consultation with Madeleine Moore, the Alcohol and Other Drugs coordinator to address any specific questions that you may have about substance use including more harm reduction strategies and up to date information about substance use topics. This is also a great option for folks who are interested in discussing ways to reduce their use of cannabis but would rather visit someone with an education background rather than a counseling background at least for the first visit. You can email mmoore56@umd.edu or m-m-o-o-r-e-5-6@umd.edu in order to set up a consultation. The Health Center is also home to the Substance Use Intervention and Treatment office or SUIT which provides a wide array of different services including counseling, assessment, and referrals, and substance assessment and intervention programming. This is where our incredible team of Substance Use counselors are housed and counseling is a great option for folks who want to explore the root causes of their cannabis use, discuss goals to reduce or eliminate their use or who simply prefer speaking with someone with a counseling background. For more information on the resources available at the Health Center check out our website health.umd.edu.

Ashlyn: Terps for recovery is a student organization on campus that seeks to provide a community on campus for students in recovery or those who wish to recover. They run several events throughout the school year ranging from recreational events, activities around the holidays and other periods where relapse may be more likely to occur as well as interactive panels about addiction or recovery. And then last but not least, the Counseling Center can also be a great resource for you if you want to address any mental health concerns that may be impacting your substance use. The Counseling Center does not currently have any substance use specific resources but if mental health is your main concern the Counseling Center is a great resource. And so we want to end this episode of Any Questions by acknowledging the impacts that the war on drugs has had on Black and Brown folks in the United States. We also want to acknowledge that cannabis use isn’t one size fits all and that our experiences and needs may affect how much we use cannabis if we decide to use at all. We also think it’s important to make clear however that much like any drug there are risks that comes with using cannabis and there is no quote, unquote, “safe amount” of it. All cannabis use comes with some sort of health risk. So however, being aware of the short and long term effects of cannabis as well as the harm reduction strategies we touched on can help reduce the risk that comes with cannabis and can help you use it in safe ways.

Madeleine: Thanks for listening to this episode of Any Questions, be sure to tune in to our next episode where Ashlyn and Breannah will be back to discuss Disability Justice. Until then, be well.

[Jazzy Instrumental Outro Music]