Cannabis and You
The biggest danger is forgetting what it really is!

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For further information on local resources contact your GP or www.edact.org and www.drugsalcohol.info

South Eastern Health and Social Care Trust

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Getting started

It is good you picked up this booklet. It is our belief that what is on these pages will be helpful.

This first section will explain how this booklet can be best used.

Who is this booklet for?

This booklet is for anyone concerned that their cannabis use is affecting them in a negative way. It will also give family members and friends information they may find helpful.

It is not a replacement for professional help if you need it. Where to get help and support is at the back of this booklet.

So how will this booklet be helpful?

What is in this booklet will help you examine your own cannabis use.

It will give you information and practical ideas that will help you make choices that are right for you.

The exercises in this booklet can be used as self-help (on your own) or with the support of someone to talk over the exercises.

We do suggest you follow the sections in the order they are laid out in within the booklet. The section at the end, A Closer Look at Cannabis is for anyone who wants to know more about cannabis and its effects.

Small steps, when put together, help get us to where we want to be

As the old saying goes, any journey starts with the first step. Picking up this booklet may be that first step for you. Reading it will be another. Putting work into the exercises will bring you further along that journey.

Whatever goal you choose, this booklet is to help you see that change is possible.

How you use the information on these pages is entirely up to you.

Whatever you decide, we wish you well in your efforts.

It is not saying change is easy or happens overnight.

What counts is that you decide on changes that are right for you and then you put in the effort to make those changes happen.
How to use this booklet

Cannabis and You is a tool to help you examine your own use of cannabis. While there is information toward the back, it is not designed as an “information leaflet”.

The sections in this booklet are set out in an order that enables you to work through any decision you want to make regarding your cannabis use.

There is no time scale that you need to work to. It may be a matter of days, weeks or even months. Work to your own pace.

The sections include:

Understanding
- Where cannabis fits into my life
- How people change

Where are you with your use of cannabis?
- Weighing it all up
- Is your cannabis use putting you at risk? A self administered questionnaire
- What does your score mean?
- Bringing your decision together

Decision time
- What do you want to do?

Looking after yourself
- If you do stop can you expect withdrawal?
- Relaxation
- Making your decision work

Making changes
- Staying stopped
- Cutting Down
- Is one method of using safer than another?

A personal action plan

Help and support

A closer look at cannabis
- What is cannabis
- Types of cannabis
- How do you know what you are getting?
- How cannabis works in the brain and body
- The impact of cannabis
- Cannabis and mental health problems

Understanding

Where does cannabis use fit into your life?

Before anyone can change something like regular use of cannabis it is helpful to understand what it does for you. What need does it meet?

- Does it help me cope?
- Does it help me feel better about myself?
- Does it help me fit in with my friends?

Look over the list below. What benefits do you see cannabis having for you?

- It is relaxing
- I feel I have more fun
- It helps when I feel lonely
- It helps me forget my problems
- I like the feel of getting high
- It helps me be more confident
- It helps me laugh and find things funny
- It helps me face my responsibilities
- It improves sex
- I don’t feel so nervous or stressed
- It helps me sleep
- It eases pain
- It stops me from thinking too much
- It helps when I’m feeling down
- It lifts me when I feel bored
- It helps me be more creative
- Other people expect me to smoke (especially at certain times: at recreational activities, weekend, etc.)
- It’s automatic. It is what I do
- It’s part of my life. I’m attached to it
How people change

If you are now thinking, “maybe I need to change the way I use cannabis”, it might help to have a closer look at how change happens. Everyone, no matter who they are, goes through five stages when changing anything like smoking, drinking or other drug use. A person’s next step will depend on what stage they are in.

Moving from one stage to the next means seeing “where you are at” and deciding what the best way forward is.

What are the 5 Stages?

Behaviour change is rarely a single event. We move gradually from being uninterested (precontemplation stage) to thinking about change (contemplation stage) to committing to make a change.

1. **Not thinking about change (Precontemplation)**
   Someone who is at the first stage is not really thinking about changing. They like what they are doing. They don’t see it as a problem.

2. **Thinking about it but not quite ready to change (Contemplation)**
   At this stage, someone is considering change. But... that is all they are doing, considering it. Although they are more aware of the consequences of what they are doing, they are not sure or ambivalent about change.

3. **Getting ready to change (Preparation)**
   Someone in the preparation stage has made the decision to change and are getting ready to change. It is a mindset shift. They make a committed, determined decision. The person gets a plan of “how” they are going to do it.

4. **Making change happen (Action)**
   In this stage, someone begins to make those changes, perhaps using short-term rewards to keep themselves motivated and often turning to family, friends and others for support.

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How much are you using?

In the past few months, how much cannabis would you use over a typical week? Fill in / write your use in the box below.

|-----|-------|-----------------|----------------|------|

Was this more or less than you were using this time last year?

What was good about that week?

What was not so good?
5. Maintenance (keeping the change going)
Someone in the maintenance stage keeps the decision to change going.

Dealing with Relapse
Along the way to changing, relapse is always a possibility. Although relapse can be discouraging, relapses can be an important opportunity to learn from and decide to try again. The key is to look back over your efforts and develop a plan for the next time. People who relapse may need to learn how to anticipate high-risk situations more effectively (like being around people who use cannabis).

Does it help to know what stage you are? The people who developed the stages of change think so. On the next page, think through the stages, where you are and why.

(Source: Prochaska, JO and DiClemente, C 1982)
Where are you with your cannabis use?

Weighing it all up

Making a decision about something like cannabis use requires stepping back and taking a good hard look at your use, what does it do for you and how it’s affecting you. If it was all bad, you wouldn’t be using it at all.

This will involve:
• What does it do for you?
• What problems is it causing?
• Why change? What will be better?

What does it do for you?

From page 4, what are the main things you get out of using cannabis?

1. 
2. 
3. 
4. 
5. 

Now go back over your list. Think about each benefit and be honest with yourself: Does it still help me do this?

What problems would you like to avoid?

• Feeling anxious / stressed
• Conflict with people I care about
• Mental confusion. I can’t think clearly, or I can’t make up my mind about things
• Feeling bad about myself
• Feeling paranoid

STAGE OF CHANGE

Does not see a problem
(Precontemplation)
I am ok with what I am doing
• Increase your awareness of the risks and problems of cannabis use. (Read the section A closer look at cannabis.)
• Challenge positive attitudes toward substance use
• Get other interests

Thinking about it (Contemplation)
Has thought about change but that is all. Unsure about change.
• Identify reasons to change
• Discuss fears or concerns of not changing
• Build your belief that you can change if you want to
• Consider what is important to you

Getting ready
(Preparation / Determination)
Gets committed to change, makes a plan
• Determine how best to make the changes they need
• Make a plan
• Get support (see help and support section)

Action keeping the decision going
• Take steps towards changing
• Work on preventing relapse
• Build other interests, hobbies
• Find other ways to relax, socialise
• Build your skills of coping, decision making
• Make changes in your lifestyle and friends

Relapse

Get back on track
Learn from what happened
Build your confidence so you can try to change again
Talk to people who have successfully changed
Get support (see help and support section)

For further reading have a look at Changing for Good by James Prochaska, James Norcross, and Carlo DiClemente (1994: Avon Books). It is a good resource for helping people change a range of things like smoking, drinking and other health issues.
• Feeling lost. I feel I don’t have any sense of spiritual connection with the world
• Memory loss
• Depression
• Having problems remembering important things
• Destroying my ability to work well
• Messing up my sleep
• Irregular menstrual cycle
• Legal problems
• Financial worries: too much money spent
• I am worried about my physical health
• Feeling as if I have no choice
• Difficulty keeping a job
• Not doing as well as I could at school or work
• Losing self-esteem
• Feeling like everything is hopeless
• Feeling irresponsible or immature
• Feeling lazy, no motivation
• Getting into trouble with the police

Any other problems you want to avoid?

______________________________________________________________

______________________________________________________________

______________________________________________________________

Reasons for changing

• I’ll stop feeling nervous and tense
• I’ll be more productive
• I’ll be able to show my good qualities more often
• I’ll have more energy
• I’ll feel stronger emotionally
• I’ll feel more relaxed
• I’ll be able to think more clearly and my memory will improve

Continue your reasons for changing your cannabis use by rewriting the three most serious problems from the previous section.

1. __________________________________________________________
2. __________________________________________________________
3. __________________________________________________________

Rank your reasons for changing in order of importance to you.
Write them here:

1. __________________________________________________________
2. __________________________________________________________
3. __________________________________________________________
Is your cannabis use putting you at risk?

Are you unsure whether you should change your use of cannabis? Could what you are using be putting you at risk in some way? Here is a quick, easy and confidential way to find out.

CUDIT Form

Have you used any cannabis over the past 6 months?  Yes  No

If YES, please answer the following questions about your cannabis use.

Please circle the response that is most correct for you in relation to your cannabis use over the past 6 months.

1. How often do you use cannabis?
   Never  |  Monthly or less  |  2-4 times a month  |  2-3 times a week  |  4 or more times a week

2. How many hours were you “stoned” on a typical day when you had been using cannabis?
   1 or 2  |  3 or 4  |  5 or 6  |  7 to 9  |  10 or more

3. How often were you “stoned” for 6 or more hours?
   Never  |  Less than monthly  |  Monthly  |  Weekly  |  Daily or almost daily

4. How often during the past 6 months did you find that you were not able to stop using cannabis once you had started?
   Never  |  Less than monthly  |  Monthly  |  Weekly  |  Daily or almost daily

5. How often during the past 6 months did you fail to do what was normally expected from you because of using cannabis?
   Never  |  Less than monthly  |  Monthly  |  Weekly  |  Daily or almost daily

6. How often during the past 6 months did you need to use cannabis in the morning to get yourself going after a heavy session?
   Never  |  Less than monthly  |  Monthly  |  Weekly  |  Daily or almost daily

7. How often during the past 6 months did you have a feeling of guilt or remorse after using cannabis?
   Never  |  Less than monthly  |  Monthly  |  Weekly  |  Daily or almost daily

8. How often in the past 6 months have you had a problem with your memory or concentration after using cannabis?
   Never  |  Less than monthly  |  Monthly  |  Weekly  |  Daily or almost daily

9. Have you or someone else been injured as a result of your use of cannabis over the past 6 months?
   No  |  Yes

10. Has a relative, friend or a doctor or other health worker been concerned about your use of cannabis or suggested you cut down over the past 6 months?
    No  |  Yes

Permission to use the Cannabis Use Disorders Identification Test (CUDIT) given by Professor Simon Adamson Dept of Psychological Medicine, Christchurch School of Medicine, Christchurch, New Zealand.
**What does your score mean?**

The CUDIT questionnaire was developed by researchers in New Zealand to evaluate a person’s use of cannabis. Your CUDIT score shows whether your use of cannabis should be considered a problem. Higher scores typically reflect more serious problems.

**Quick scoring of the CUDIT**

For questions 1 - 8 your responses are scores at:

- **Never** – 0
- **Less than monthly** – 1
- **Monthly** – 2
- **Weekly** – 3
- **Daily or almost daily** – 4

(Question 2: 1 or 2 [0], 3 or 4 [1], 5 or 6 [2], 7 to 9 [3], 10 or more [4])

Questions 9 and 10 the scoring for No - 0    Yes - 4

The maximum score in the CUDIT is 40

Now, add up all your scores. If your total score is 5 or more, your drug use is, at the least, putting you at some risk for cannabis-related problems. (50% of people scoring 5 and above experience some difficulty). If your score is 8 or above, you are more than likely to be experiencing some difficulty.

If your score is 23 or more, you are running the risk of serious dependence.

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**Bringing your decision together**

When people make any decision, they often weigh up the pros and cons to help them make the decision that is right for them. This is particularly useful when someone is in the “thinking about change” stage (contemplation).

In the left column, write down some GOOD things about cannabis use. In the right column, write down all the BAD, unpleasant, or difficult things about your cannabis use. Next, give a score of importance to each item: 1 slightly important 2 moderately important 3 Very important 4 Extremely important.
Looking over what I have written, the best goal for me is to:

- Cut down on my cannabis use
- To stop using cannabis completely

I will start on this day

If cutting down, I will have ___ cannabis free days and not use more than ___ days.

## Looking after yourself

### If you do stop, can you expect withdrawal?

If you have been using frequently and heavily, you may have become dependent. Studies from around the world would find that 8 - 10 % of cannabis users would go on to develop a dependency.

Using cannabis on a regular basis can result in people feeling the need to continue using in spite of continued problems.

### Cannabis withdrawal

In the past, cannabis was seen as a drug that would not produce a withdrawal like alcohol or heroin. Newer evidence is emerging that heavy cannabis users may experience unpleasant symptoms like when people stop smoking cigarettes.

These withdrawal symptoms can include:

- Anxiety
- Increased irritability
- Depression
- Difficulty sleeping
- Vivid and disturbing dreams
- Mood swings

## Decision time: What do you want to do with your cannabis use: stay the same, cut down, or quit?

The aim of the previous pages was for you to take a closer look at what your own cannabis use is costing you.

The goal you set is entirely up to you. There is additional information to help you no matter what you decide. Making a decision and making a commitment to work toward your goal is an important step.

But what are you going to do?

If you stay the same, that is your call. Both quitting and cutting down takes effort. What might help you with that decision?

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<td>I know I am not going to quit.</td>
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<td>I have tried to cut down before and it just did not work.</td>
<td>Using will not interfere with my quality of life or well being.</td>
</tr>
<tr>
<td>The consequences of me continuing to use are just too much [health, relationships].</td>
<td>The level of my use has benefits that outweigh the consequences.</td>
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<td>I am worried I am dependent. I want to have more control in my life and cannabis is controlling me.</td>
<td>I can set a limit or say no at times.</td>
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<tr>
<td>I have a family history of mental health problems. I am in trouble with the law or have financial problems.</td>
<td>I do not have a history of mental health problems in my family.</td>
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Relaxation
Learning to relax and calm yourself in stressful times can be helpful when trying to change your cannabis use. Here are two calming exercises you may find useful.

Deep Breathing 7/11
A simple but powerful technique that is easy to learn. It has immediate beneficial effect.
From deep in the pit of the stomach breathe in for a quick 7 seconds and then breathe out for 11 seconds. Do this 5, 6, 7 times and see the reaction.
Inhaling triggers one part of our nervous system which creates arousal and exhaling stimulates a relaxation response. By breathing out more than breathing in you trigger the relaxation response over the arousal response.

Clenched Fists
This is a simple technique from Yoga. It works on a simple principle. If you tense muscles and then relax them, they are always more relaxed after you have just tensed them.
First, make your hands into tight fists... as tight as possible. Notice the tension in the muscles of the fingers. Become aware of the hardness of your fingernails in the palm of your hands. Notice the skin stretched across the knuckles and how your wrists have become rigid.
In a moment... begin to relax your hands. When you do... really concentrate on the change between tension and relaxation. When you are really concentrating, relax those hands and fingers. The relaxed feeling is now going up your arms to your shoulders. In a few minutes it will spread to your whole body. You don’t have to say anything or do anything. Let the relaxation flow.

What else do people do to help them relax?
Yoga: relaxes both the mind and body
Hot bath: a good soak in a hot tube can be very relaxing
Focus on reading, a film: takes your mind off things
Exercise: a good walk or work out releases endorphins that relax the body

With any of the ways that help people relax, the important thing is when you find ways that work, keep using them.

The bottom line: If you find cutting down is not working for you, consider stopping all together. Help is available to help you do this. (see help and support section)
Making your decision work

Stopping or cutting down your cannabis use takes commitment and continuous effort.

What can get in the way?

Some people find making a change like this not as easy as they thought because:

- It’s a habit you have got used to
- It’s hard to say no when offered
- It’s far too easy to get
- Don’t know what else to do with your time or to have fun
- It is always on your mind

Knowing your high risk spots

People have more success changing when they have a plan. Knowing your high risk spots helps you prepare how you are going to deal with the pressure to turn back from the goal you set. What would put you under more pressure?

When I’m with other people who are drinking or using drugs
When I feel tense
When I have to meet people
When I think that just one would cause no harm
When I feel depressed
When I’m not at work or school that day
When I feel happy
When I have money to spend
When I feel frustrated with my life
When I feel tired
When I feel disappointed that other people have let me down
When I remember the good times I was using
Other high risk times
My main high risk points are?
Making changes

Staying stopped

Some people find they get stuck thinking about using or they experience cravings. A craving is when you have constant thoughts about the drug or feel agitated or unsettled.

Most urges to use are like waves. They build to a peak and then crash, they are gone. If you wait a while, the wave will pass. Try imagining that you are a surfer riding the "wave" of craving until it goes away.

This technique is consistent with a slogan in recovery, 'This Too shall pass'.

The good news is that over time cravings tend to get weaker and last for a shorter time. Here are some strategies that people have found helpful. Finding what works for you may take a bit of effort.

1. **Think about the good things about not using**: Look back over the things you have identified in this booklet. It helps to pay attention to these positive things rather than focusing on what you seem to be giving up. Add more items of your own to the list of benefits. You might also carry a card listing the benefits whenever you catch yourself being persuaded to use.

2. **Think about the bad side of using**: Make a list of unpleasant experiences associated with using. Try to think of an image of a specific thing that tells you, "I just don't want that." Make a list of the negative effects of using on the reverse side of the card listing the benefits of not using. At moments of temptation, take out the card and read it over slowly three or four times.

3. **Distractions** – Think about something unrelated to using. Doing something you enjoy or you want to get done will get your mind off using.

4. **Self-reinforcement** – Remind yourself of your success so far. Do you want to give that up?

6. **Decision delay technique** – Put off the decision to use for 15 minutes. The craving will probably pass.

7. Leave or change the situation - If it is putting you under too much pressure get up and leave.

8. **Call someone** – Who in the past has been helpful? Keep in mind it is ok to ask for help.

If you do get cravings, notice when they start. Noticing them is the first step in dealing with them. Are there certain situations which put you under more pressure?

Which of these would work for you?

Remember cravings are normal and they pass over time.

**Cravings can be like a stray dog that keeps appearing at your back door. The more you feed it, the more likely it will come back.**
Is one method of using safer than another?

Researchers and educators have looked at ways of using that reduce the harm for cannabis smokers. Any smoking is harmful to the lungs, throat and heart. How you decide to take cannabis can have an influence on how much harm you do to these areas of the body. While debates do go on as to which is more harmful, any effort to reduce the harm is worth considering if you decide to keep using.

Inhaling: Avoid holding smoke in your lungs. You won’t get more stoned but you will increase the amount of toxins in your lungs. Most of the THC is absorbed in seconds so holding the smoke in only increases the absorption of nasty chemicals into your lungs.

Seeds and stems: Throw away the seeds and stems when smoking herbal cannabis as they contain little to no THC and can be harsh on the throat.

Use of tobacco: Avoid mixing cannabis with tobacco. Tobacco is addictive and exposes you to more tar and other carcinogens. The lungs are just not made to take in all that hot, toxic smoke. Smokers who mix their cannabis with tobacco find they are smoking more than they intend to because of the addiction to nicotine. There is a campaign by some people behind harm reduction to encourage people to find other ways and avoid the use of tobacco.

Bongs: A bong or water pipe is seen as less harmful because the water inside the bong cools cannabis which burns very hot. The water in the bong also removes some of the heavy tar elements. Do not use plastic bottles, rubber hose or plastic stems, or aluminium as these give off harmful fumes when hot.

Pipes: If you use a pipe choose one made of glass or stainless steel or brass - wooden and plastic pipes can give off noxious fumes.

Filters: If you are using a piece of cardboard as a ‘tip’ or ‘roach’ use unprinted card as the print emits toxic fumes.

Vaporizers: Using a vaporizer to use cannabis stops you taking in smoke. There are some who believe this is the least harmful way of using cannabis.

Cutting Down

Some people think cutting down is harder than stopping. Both goals take a lot of effort and determination.
If you intend to continue smoking, some methods and techniques may reduce the risks of your cannabis use.
An important thing to say is these ideas can help reduce the risk. All drug use carries some risk. The best way to make sure you are as risk free as possible is not use. The legal risks of using an illegal drug are still there as are many of the risks to your mental and physical health.

Self control tips
These are some tips that you might find useful to help you cut down your cannabis use:
1. Set limits on the day, time, and amount you plan to use.
2. Plan ahead for particular situations. This can help you have a plan for dealing with pressure to use cannabis when you really don’t want to.
3. To reduce the risk of overdoing it, try to space out the days between using cannabis.
4. Keep a diary of how much you are using. This helps you be aware when you are using more than you said you would.
5. The more you break up the pattern of use the easier it is to control cannabis and reduce the risks.
6. If you are trying to cut down, avoid things that remind you of cannabis. Certain places, people, events or times might make you think of cannabis and want to take it.
7. Try to identify all the things you associate with using cannabis and make an effort to avoid them until you feel OK about not smoking. Plan to do something else at the time of day you usually have a joint.
8. Spend time with people who will support your efforts to cut down or don’t use.
9. Find alternatives to using cannabis.
10. Reward yourself in other ways than smoking, for the success you have made.

What else do you think might work for you?
Eating Cannabis: Eating Cannabis may reduce some risk but increase others. Some people eat cannabis by mixing it with food, or adding it to drinks. The thinking behind this is that it reduces damage to the lungs through smoking. There is a downside though. The effects from eating cannabis last longer. When cannabis is eaten it can take an hour or two to feel the effects, so avoid eating more in one session. Avoid using stronger cannabis if you are not used to it. Start with smaller test amounts since a gram can be like a mushroom or LSD trip and leave you high longer than you anticipated. Cannabis bought on the street may also have chemicals in it that just are not good for you. NEVER eat cannabis without cooking it.

A message for people who are HIV positive or with cancer: During the handling and curing of cannabis plants, it is possible for fungi and bacteria to contaminate the cannabis. This poses a low level risk for most smokers but for those with compromised immune systems (HIV/AIDS, CANCER); it can be a serious health hazard. The best way to combat this is to heat your cannabis in an oven heated 66 -93 degrees Celsius for about 10 minutes to kill any fungi or bacteria.

Important things that need to be said:
• Never use cannabis and drive. You may think you are capable, but it lowers your reaction times and puts you and others at serious risk.
• Avoid mixing drugs including alcohol. It makes things more unpredictable.
• Using any drug while pregnant can harm the unborn baby

A personal action plan

Once you stop using or are trying to cut down, you may be left with habits, routines and needs in your life which will require thought and planning in order to change.

A personal action plan is a way to promote physical, mental health as well as your goal with cannabis. While no single living plan works for everyone there are several guidelines which apply to most people. These include moderation, flexibility and routine.

Moderation
Moderation in pacing change can be important. It means taking things in moderation and don’t overdo it. Moderation also includes avoiding unnecessary stress. “Easy does it” is sound advice. While you can’t eliminate stress entirely, it helps to build coping skills and support.

Flexibility
Your action plan is not carved in stone. It is a set of options and needs that will change over time as you change. Try not to think of options as obligations that must be carried out precisely. Not fully meeting obligations is likely to just make you feel guilty. Guilt erodes your self-esteem which is precisely what your action plan is meant to build.

Routine
Now is the time to ensure there is structure to your life that is enhanced by eating regular meals, establishing a regular bedtime and exercising regularly. Developing regular, healthy eating habits is crucial not only for nutritional reasons, but it also stabilises mood, supplies energy and provides set periods when you can socialise and relax.

A routine that includes a half hour or so to relax helps promote a healthy night’s rest. Regular exercise is also essential to condition your body.

Areas of Need
Other agencies that provide support for adults include:
Dunlewey Substance Advice Centre – Tel: 028 90 611162
Northern Ireland Community Addiction Service (NICAS) – Tel: 028 90 664434

If you are 17 or younger, you can contact CHILL.
Opportunity Youth – Tel: 028 9043 5810, or
Contact Youth – Tel: 028 90 320092

A life skills programme, Life Matters which addresses substance misuse is available for 17 or under. It is delivered by:
ASCERT – Tel: 028 9260 4422
Opportunity Youth – Tel: 028 9043 5810

Agencies within the Eastern Board area delivering drug awareness programmes and training:
ASCERT – Tel: 028 9260 4422
Falls Community Council – Tel: 028 9020 2030
FASA – Tel: 028 9080 3040
CODA Tel: 028 90 46 92 61

A more in-depth directory of services across the Eastern Board (covering both prevention and treatment) is available to download from www.edact.org (click the relevant button on the home page).

Where can you get help outside the Eastern Heath Board area? Contact your local Drug and Alcohol Coordination Team or visit www.drugsalcohol.info

Northern Drugs and Alcohol Coordination Team 028 25 311111
Southern Drugs and Alcohol Coordination Team 028 37 412481
Western Drugs and Alcohol Coordination Team 028 82 253950
Eastern Drugs and Alcohol Coordination Team 028 90 434248

Help and support?
To learn more about drugs and alcohol issues in the Northern Ireland context visit: www.drugsalcohol.info

Narcotics Anonymous is a fellowship of men and woman who support each other to remain drug free. There are groups that meet throughout Northern Ireland. To find a group nearest to you, you can phone their helpline at 07810 172 991 or visit www.nanorthernireland.com

If you are over 18, you can contact your local Addiction Service through your GP.
What is in cannabis?

There are around 400 chemicals in the cannabis plant. Many of these chemicals exist nowhere else other than in cannabis. It’s the chemicals known as cannabinoids that give the plants its mind altering effects. There are at least 66 different cannabinoids.

The main cannabinoids in cannabis are:

**THC** (Delta-9-tetrahydrocannabinol) is the more commonly known.

**CBD** (Cannabidiol).

Both are in all cannabis plants to a degree.

Cannabis Sativa generally has more THC, while Cannabis Indica has more CBD.

CBD alone does not seem to be intoxicating, but it appears to modify the euphoric the effect of THC and adds a sedative quality.
Types of cannabis

Cannabis comes in three forms

Herbal Cannabis
Herbal cannabis is grown outdoors or indoors often with artificial lights and nutrients or hydroponically. Hydroponics is growing a plant indoors in water.

Its leaves and flowers are cultivated and dried. The leaves have less THC, typically 0.5% - 4%. The flowering heads have 3-4 times this concentration. Premium prices are paid for intact flowering buds.

THC contents are increased by preventing pollination of female plants by male plants leading to the development of extensive flowering tops. Commercial seed developers have developed a number of varieties of plant such as “Skunk”, and “Northern Lights” suited for indoor growth. The cannabinoids level of these plants varies. “Skunk” is a term for a specific strain of the plant, but in Northern Ireland the term can be used for any strong herbal cannabis.

If damp when stored or stored improperly, cannabis can appear in poor condition with mould and decomposition present. Some moulds can be dangerous if smoked or eaten. Some users have concerns that fertilisers, pesticides and hormones which are used to increase yield contribute to headaches and other unexpected side effects.

Cannabis resin
Different names for the type of cannabis resin usually come from what country it is from. Lebanon, Nepal, Afghanistan are some of the sources of cannabis resin.

Resin is made by separating the sticky resin from the buds and leaves, drying it and moulding it into blocks. Different countries have different methods for doing this. Whatever the method, it leaves the potential for other material to be added to increase profits.

Cannabis Oil
Cannabis oil is dark liquid made by separating the resins from the plant material. It contains a high level of THC. It is rarely found in Northern Ireland.

How do you know what you are getting?

There are no labels you can read are there? When sold commercially as in the coffee shops in the Netherlands, you can choose off a menu. You hear names such as Haze, Northern Lights or Skunk.

When bought off the streets in Northern Ireland it is often pot luck.

In the vast majority of cases, you will have no idea what you are buying.

Is it always natural?
This is an area of concern. There has always been bad quality cannabis in almost every country of the world. There is no consumer protection or return policy with any cannabis people buy.

“Soap bar” or other types of resin can contain substances that have been added to boost profits, help the bonding, change the colour and increase the drug effect. Bees wax, boot polish, animal excretement, turpentine, ground coffee, milk powder, pine resin, barbiturates, ketamine, aspirin, glues & dyes have been found in some resin.

These additives can have an unpredictable and unpleasant effect on a person using it.

Soap bar is made from only a very small percentage of resin and up to 80% non-resin cannabis plant material. It is bound together with bee’s wax or pine resin and condensed milk as the mixture is too dry and powdery to be bound any other way. As the mixture is very green due to the high percentage of plant material, it is then coloured with instant coffee or henna to give it that sandy brown colour. In order to give it a slightly resinous look, turpentine is then added.
Recent concerns with contaminated cannabis
It is not uncommon for even herbal cannabis to be altered. There is a recent risk of serious damage to the lungs from inhaling a form of fibre-glass balls which has been sprayed onto some herbal cannabis to increase its weight. “Grit weed” as it is known can be hard to detect. The glass balls are too small to feel with your fingers. Rubbing the bud with a wet finger then putting that finger in your mouth allows the user to feel the glass balls grind in your teeth. It has caused people serious breathing problems. Symptoms include a burning sensation or the coughing up of blood. If these symptoms are present, medical help is strongly advised.

Never use Grit Weed

How cannabis works in the brain and body
When cannabis is smoked, it is absorbed through the lungs and into the bloodstream. It is detected in the blood within one or two minutes of inhaling. It is then distributed throughout the body reaching the brain and also concentrated in the body’s fat stores. Cannabis can still be detected days, even weeks after use as it is stored in fat cells.

The THC connects to specific cannabinoids receptors in the brain and influences how those nerve cells work. The cannabinoids receptors are found in parts of the brain which control:

- Pleasure
- Movement
- Memory
- Stress response
- Thought
- Concentration
- Sensory and time perception

If you have used cannabis, you know the range of different effects at different times. Some of these can seem contradictory: relaxed, calm, anxious, restless, quiet, talkative, giggly, subdued, sleepy, animated, and distorted perception. The effects of different drugs are caused by the release of chemicals called neurotransmitters. While most drugs affect 1-3 neurotransmitters, cannabis affects at least half a dozen, including serotonin, dopamine and endorphins. This explains why cannabis has such a wide range of effects on the mind: trippy, stimulating, pain killing, relaxing, etc.

At low and moderate levels of THC, the user may experience enhanced appreciation of sound, colour and tactile stimulation. At higher levels mild hallucinations are common.

There are also a range of side effects: dryness of the mouth, reddening of the eyes, cough, husky voice, intense desire to eat. Users can also have a range of less pleasant effects: anxiety, paranoia, dizziness, nausea, disorientation. “Whities”, while unpleasant are not usually dangerous.

What impacts on the drug effect for the user?
The effects of taking cannabis can be highly variable and subjective. It can be influenced by:

- Amount taken
- Strength and type of the cannabis
- Method of use (smoked or eaten)
- Mental state of the user
- Other substances used, like alcohol
- The expectations and experience of the user
- The setting of use

The strength of cannabis will change under certain circumstances. For example, cannabis does not stay fresh and exposure to air reduces the THC level. As THC breaks down (a process known as oxidization) the THC is replaced by CBN (Cannabinol) which leaves the user feeling more messed up than stoned. This can also happen when processing the herbal cannabis to resin.
The relationship between cannabis use and mental health problems

You expect that the use of cannabis will give you a pleasant short term effect. Users can get a reaction they are not expecting.

Even one off use of cannabis can cause a sense of panic and increased anxiety. Experts are closely examining if cannabis increases the risk of serious mental health difficulties.

What is known so far:
- Does it cause schizophrenia? Available evidence suggests that people who use cannabis in their teens have an increased risk of developing schizophrenia when compared to non cannabis users. Whether it causes schizophrenia for people who are not at risk of this condition is still being investigated.
- Some people with mental illness use cannabis to relieve their symptoms. It can actually make the condition worse and more difficult to manage.
- People who use cannabis are also more likely than others to experience episodes of depression.
- After a session of heavy cannabis use, people can experience a short term psychotic episode that can last from several hours to two or three days. In these episodes there is a loss of contact with reality, disordered thought, paranoia and sometimes hallucinations. Such an episode is caused by the direct effects of cannabis on the brain. Many of the people who experience these kinds of episodes have a vulnerability of developing a mental health disorder or actively have a disorder.

Having a family history of mental illness increases the likelihood of experiencing negative mental health effects when cannabis is used regularly. Is there a history of mental health problems somewhere in your family?