



ILCAAAP

Illinois Church Action on Alcohol & Addiction Problems

Marijuana Alert - October 17, 2022



Houston, We Have a Cannabis Problem

It's time to respond to our next major drug epidemic.

KEY POINTS

- **There's a huge gap between the perceived dangerousness of cannabis use and its actual dangerousness.**
- **Cannabis use is now a major driver of mental health problems, especially among the young.**
- **Political and commercial pressures are actively suppressing the mounting research on cannabis harms.**

For years, the opioid crisis has been the leading concern when it comes to substance use. There's certainly good reason for this emphasis, but as a result, the harms associated with other drugs have successfully been able to avoid the spotlight.

In my view, cannabis use is now the biggest contributor to mental health and substance use problems that, up until quite recently, nobody was talking about. While it may not be the most toxic substance on earth, it is arguably the one where the largest chasm exists between its actual dangers (which are substantial) and its perceived dangers (which to a lot of people are zero).

Similar to the science of global warming, research demonstrating the risks of cannabis has been steadily growing over the years to the point of being overwhelming. Perhaps the scariest risks have to do with psychosis and psychotic

disorders, particularly with the ultra-potent products now dominating the market, but there is also plenty of evidence for other things such as suicide, anxiety, PTSD, harms to a developing fetus, and progression to so-called “harder” drugs such as opiates and methamphetamines. In contrast to the stereotype of cannabis users as silly and docile, research shows links between its use and violence with cannabis being a significant part of the lives of a disturbing percentage of mass shooting perpetrators.

Advocates and defenders of cannabis are quick to become amateur statisticians and protest that “correlation does not mean causation,” ignoring the fact that research comes from all types of studies including longitudinal studies that follow individuals over time, experimental and randomized trials, animal studies, and many other designs. Sure you can cherry-pick a few studies that argue the opposite, just like the climate deniers, but such positions are looking weaker as the body of research swells.

As a child psychiatrist, this research is well reflected in what I and many of my colleagues have been seeing for years in outpatient clinics, emergency rooms, and inpatient psychiatric floors. All too often I see adolescents whose “just weed” consumption quickly turns into nosediving grades, endless cycles of being high or feeling panicked, and suspiciousness that grows to paranoia that then leads to frank psychosis, and frequent angry or violent outbursts. The harm to youth coming from cannabis also often comes indirectly from the parents. In addition to the increasingly documented harms associated with prenatal exposure, cannabis has been identified in some reports as the most common parental substance used in cases of child neglect fatalities, surpassing alcohol which is more prevalent and opiates, which gets much of the press when it comes to substances and the child welfare system.

One might well expect that all this new knowledge is giving more people pause before lighting up, but use is actually increasing due in large part to the political energy to legalize cannabis. With this new political agenda has come intense lobbying activity intent on ignoring and, when that doesn't work, dismissing the accumulating scientific data. Those willing to speak out about cannabis concerns are quickly shouted down as “prohibitionists” or pawns of the pharmaceutical industry. This accusation is incredibly ironic, given that most critics of cannabis have absolutely no ties to drug companies while multi-billion dollar companies, often tobacco companies looking for new “markets,” jump into the cannabis business. READ

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