

KNOW THE LAWS

POSSESSION – An individual may possess up to 1.5 oz of cannabis

DUI – Driving under the influence of cannabis is against the law. It is against the law for both drivers and passengers to consume cannabis in a vehicle while it is operating.

STORAGE – Individuals in Connecticut may also store up to 5 oz in a locked container at home or transport it in a locked glovebox or trunk.

GROWING – Medical marijuana patients and all adults 21+ can grow up to 3 mature and 3 immature plants at home (up to 12 total plants per household).

TRAVEL - Driving across state lines with cannabis is illegal and can lead to federal criminal charges.

MINORS - It is illegal for adults to provide cannabis to minors.

EMPLOYMENT - Some jobs may prohibit an employee from using cannabis, even when they are off the clock.

What to Know: Smoking & Vaping

In general, you won't be able to smoke or vape cannabis anywhere you can't smoke or vape tobacco. Cities and towns may enact ordinances to regulate whether and where cannabis can be consumed in public. At home, landlords may prohibit smoking and vaping, but they generally may not prohibit possession or consumption of other forms of cannabis. Cannabis use will be prohibited in state parks, and on state beaches and waters.

HEALTH RISKS

Cannabis is often viewed as harmless when compared to other drugs. However, cannabis can cause many physical and mental issues. Such issues can include:

- Problems with memory and focus
- Increased aggression
- Poor lung health (from smoking or vaping cannabis)
- Risky behavior
- Weaker coordination and thinking skills
- Schizophrenia and other long-lasting mental disorders
- Marijuana Use Disorder

If you use cannabis, tell your doctor. Some medications have harmful interactions with cannabis that can put your health at risk.

Mental Health

Studies link marijuana use to depression, anxiety, suicide planning, and psychotic episodes. If you are using cannabis to help you deal with stress or anxiety, talk with your doctor. For some people, cannabis use can make mental health worse.

Some cannabis products have very high potencies of THC (tetrahydrocannabinol). THC is the psychoactive compound in cannabis that creates a high. The Centers for Disease Control & Prevention (CDC) also report that daily or near daily use of high-THC cannabis products can cause disorientation, anxiety, and even psychosis.

IF A CHILD INGESTS CANNABIS, GET HELP IMMEDIATELY. CALL POISON CONTROL AT 1-800-222-1222

IF A PET INGESTS CANNABIS, CALL ANIMAL POISON CONTROL AT 1-888-426-4435

IF YOU THINK YOUR CANNABIS USE IS DISRUPTING YOUR DAILY LIFE, OR CAUSING PROBLEMS AT WORK OR AT HOME, OR IF YOU CRAVE CANNABIS, YOU CAN CALL THE HOTLINE TO FIND OUT ABOUT HEALTHCARE AND SUBSTANCE USE SERVICES IN YOUR COMMUNITY. 1-800-563-4086

TREATING CANNABIS USE DISORDER

Cannabis use disorders appear to be very similar to other substance use disorders, although the long-term clinical outcomes may be less severe.

On average, adults seeking treatment for cannabis use disorders have used cannabis nearly every day for more than 10 years and have attempted to quit more than six times. People with cannabis use disorders, especially adolescents, often also suffer from other psychiatric disorders, and may also use or be addicted to other substances, such as cocaine or alcohol. Studies indicate that effectively treating the mental health disorder with standard treatments involving medications and behavioral therapies may help reduce cannabis use, particularly among those involved with heavy use and those with more chronic mental disorders.

The following behavioral treatments have shown promise.

Cognitive Behavioral Therapy

A form of psychotherapy that teaches people strategies to identify and correct problematic behaviors in order to enhance self-control, stop drug use, and address a range of other problems that often co-occur with them.

Contingency Management

A therapeutic management approach based on frequent monitoring of the target behavior and the provision (or removal) of tangible, positive rewards when the target behavior occurs (or does not).

Motivational Enhancement Therapy

A systematic form of intervention designed to produce rapid, internally motivated change; the therapy does not attempt to treat the person, but rather mobilize his or her own internal resources for change and engagement in treatment.

Growing Research on Medication for Marijuana Use Disorder

Currently, the FDA has not approved any medications for the treatment of marijuana use disorder, but research is active in this area.

Because sleep problems feature prominently in marijuana withdrawal, some studies are examining the effectiveness of medications that aid in sleep. Medications that have shown promise in early studies or small clinical trials include the sleep aid zolpidem (Ambien), an anti-anxiety/anti-stress medication called buspirone (BuSpar), and an anti-epileptic drug called gabapentin (Horizant, Neurontin) that may improve sleep and, possibly, executive function.

Other agents being studied include the nutritional supplement N-acetylcysteine and chemicals called FAAH inhibitors, which may reduce withdrawal by inhibiting the breakdown of the body's own cannabinoids. Future directions include the study of substances called allosteric modulators that interact with cannabinoid receptors to inhibit THC's rewarding effects.

**For 24/7 substance use treatment
call 1-800-563-4086**

MARIJUANA RISKS

Marijuana is the most commonly used illegal substance in the U.S. and its use is growing. Marijuana use among all adult age groups, both sexes, and pregnant women is going up. At the same time, the perception of how harmful marijuana use can be is declining. Increasingly, young people today do not consider marijuana use a risky behavior.

But there are real risks for people who use marijuana, especially youth and young adults, and women who are pregnant or nursing. Today's marijuana is stronger than ever before. People can and do become addicted to marijuana.

Approximately 1 in 10 people who use marijuana will become addicted. When they start before age 18, the rate of addiction rises to 1 in 6.

Marijuana Risks

Marijuana use can have negative and long-term effects:



Brain health: Marijuana can cause permanent IQ loss of as much as 8 points when people start using it at a young age. These IQ points do not come back, even after quitting marijuana.



Mental health: Studies link marijuana use to depression, anxiety, suicide planning, and psychotic episodes. It is not known, however, if marijuana use is the cause of these conditions.



Athletic Performance: Research shows that marijuana affects timing, movement, and coordination, which can harm athletic performance.



Driving: People who drive under the influence of marijuana can experience dangerous effects: slower reactions, lane weaving, decreased coordination, and difficulty reacting to signals and sounds on the road.



Baby's health and development: Marijuana use during pregnancy may cause fetal growth restriction, premature birth, stillbirth, and problems with brain development, resulting in hyperactivity and poor cognitive function. Tetrahydrocannabinol (THC) and other chemicals from marijuana can also be passed from a mother to her baby through breast milk, further impacting a child's healthy development.



Daily life: Using marijuana can affect performance and how well people do in life. Research shows that people who use marijuana are more likely to have relationship problems, worse educational outcomes, lower career achievement, and reduced life satisfaction.

Marijuana and Pregnancy

Marijuana use during pregnancy can be harmful to a baby's health and cause many serious problems.

Marijuana Addiction

Contrary to popular belief, marijuana is addictive. Research shows that:

- 1-in-6 people who start using the drug before the age of 18 can become addicted.
- 1-in-10 adults who use the drug can become addicted.

Over the past few decades, the amount of THC in marijuana has steadily climbed; today's marijuana has three times the concentration of THC compared to 25 years ago. The higher the THC amount, the stronger the effects on the brain—likely contributing to increased rates of marijuana-related emergency room visits. While there is no research yet on how higher potency affects the long-term risks of marijuana use, more THC is likely to lead to higher rates of dependency and addiction.

Rise of Marijuana Use

Today, marijuana use is on the rise among all adult age groups, both sexes, and pregnant women. People ages 18-25 have the highest rate of use.

Marijuana and THC remain illegal at the federal level, even though many states have legalized its use. In states where legal, marijuana is a fast-growing industry with sales to individuals over 21 in retail stores, wineries, breweries, coffee shops, dispensaries, online, as well as grown at home.

CANNABIS CONSUMPTION

Smoking - Marijuana is smoked via a joint (marijuana rolled in paper), a blunt (marijuana in a hollowed out cigar), a bong (a glass or plastic bowl and stem used with water to create smoke), a bubbler (a mini bong), or a hookah pipe. Bongs and pipes are sometimes made out of common objects like soda bottles or cans, and even fruits or vegetables.

Vaping - Increasingly, young people are using smokeless devices to vape liquids or cartridges that contain THC. Vaping does not produce the same telltale smell as smoking, making use easier to conceal. Vaped marijuana also tends to be more potent with higher concentrations of THC.

Dabbing - Dabbing is similar to vaping. A waxy concentrate of marijuana, known as hash oil (or by other names like dabs, wax, butter), is placed on a glass pipe or bong heated with a blowtorch or other device. The heated wax, typically more potent than smoked marijuana, creates a vapor that users then inhale. Dabs can have as much as 90% THC concentration.

Edibles, oils and beverages - Dried cannabis or oil concentrates can be used on their own or baked into many types of food, including snacks and candy products. The added risk associated with edibles is that it is easy to consume more THC than intended. Some sugary seltzer drinks are also spiked with THC – yet another way for youth to consume THC discreetly and in high doses.

Tinctures, capsules and sprays - Often intended for medical use, tinctures are liquids extracted from the cannabis plant using alcohol. They are highly potent and used by placing drops under the tongue for fast absorption. THC can also be swallowed in capsules known as “cannabis caps” or weed pills. They are made by filling medication capsules with marijuana oil, wax or another extract. Liquids, infused with either THC or cannabidiol (CBD), can be discreetly sprayed under the tongue for fast absorption.

FIND HELP

FindTreatment.gov

The confidential and anonymous resource for persons seeking treatment for mental and substance use disorders in the United States and its territories.

988 Suicide & Crisis Lifeline

24-hour, toll-free, confidential support for people in distress. Prevention and crisis resources for you or your loved ones.

Call or text 988.

FindSupport.gov

Find Support is an online guide that helps people navigate through common questions when they are at the start of their journey to better behavioral health.

SAMHSA's National Helpline

24/7 free and confidential treatment referral and information about mental and substance use disorders, prevention, and recovery.

Call 1-800-662-HELP.

Drug-Free Workplace Helpline

Confidential help for employees and their families to resolve substance misuse and drug testing issues.

1-800-WORKPLACE (967-5752)

FOR 24/7 SUBSTANCE USE TREATMENT CALL 1-800-563-4086

WARNING SIGNS OF PROBLEM USE

Warning Signs of Problem Use

If you think you or someone you know may be developing a cannabis problem, there are some warning signs you can look out for:

- Using more marijuana than intended
- Craving marijuana
- Giving up activities with friends and family in favor of using marijuana
- Needing to use more marijuana to get the same high
- Trying but failing to quit using marijuana
- Using marijuana even though it causes problems at home, school, or work
- Using marijuana in high-risk situations, such as while driving a car
- Experiencing withdrawal symptoms when stopping marijuana use
- Spending a lot of time using marijuana
- Continuing to use marijuana despite social or relationship problems
- Continuing to use marijuana despite physical health, psychological problems, and/or financial impact

Marijuana Use Disorder

Some people don't know that cannabis is addictive, but marijuana use disorder is very real. Some people who use marijuana will develop Marijuana Use Disorder, meaning that they are unable to stop using marijuana even though it's causing health and social problems in their lives.

- One study estimated that approximately 3 in 10 people who use marijuana have Marijuana Use Disorder.
- A 2023 study found that over one-fifth of people who use cannabis struggle with dependence or problematic use.
- Another study estimated that people who use cannabis have about a 10% likelihood of becoming addicted.
- The risk of developing Marijuana Use Disorder is greater in people who start using marijuana during youth or adolescence, and who use marijuana more frequently.