

Empowering Youth to  
**DECYDE**



# Youth cannabis use: Considering youths' perceptions and promoting safe choices

Annual Provincial Substance Use Conference  
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## FUNDERS & PARTNERS



Health  
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# Learning Objectives

1

State the prevalence and safety considerations of cannabis use among youth.

3

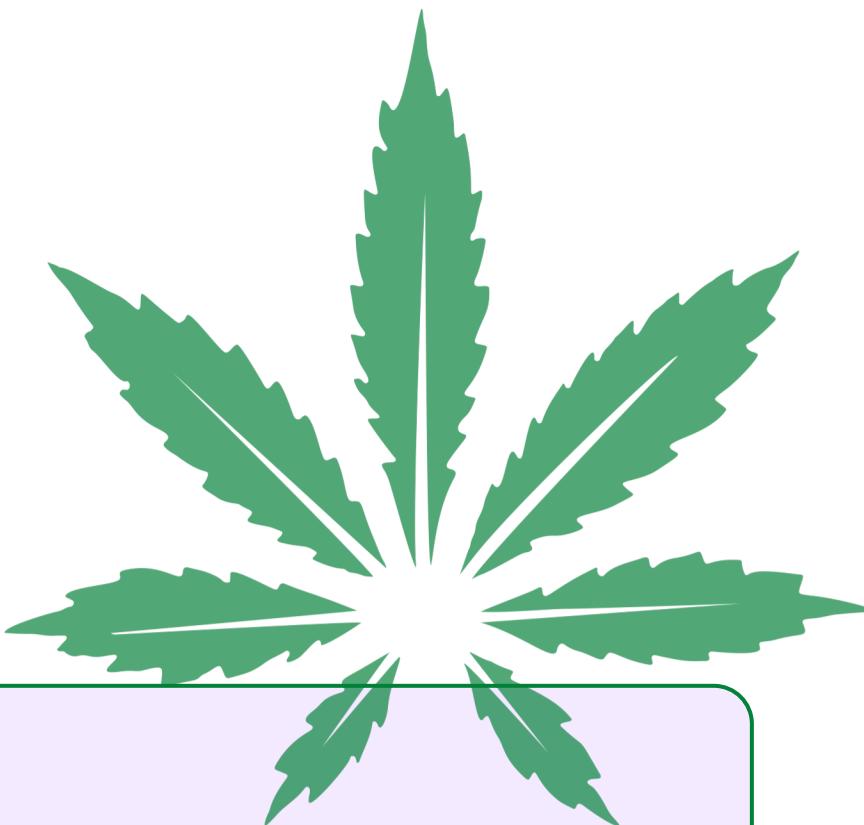
Recognize cannabis harm reduction strategies.

2

Describe youths' perspectives regarding cannabis access, driving, and health literacy.

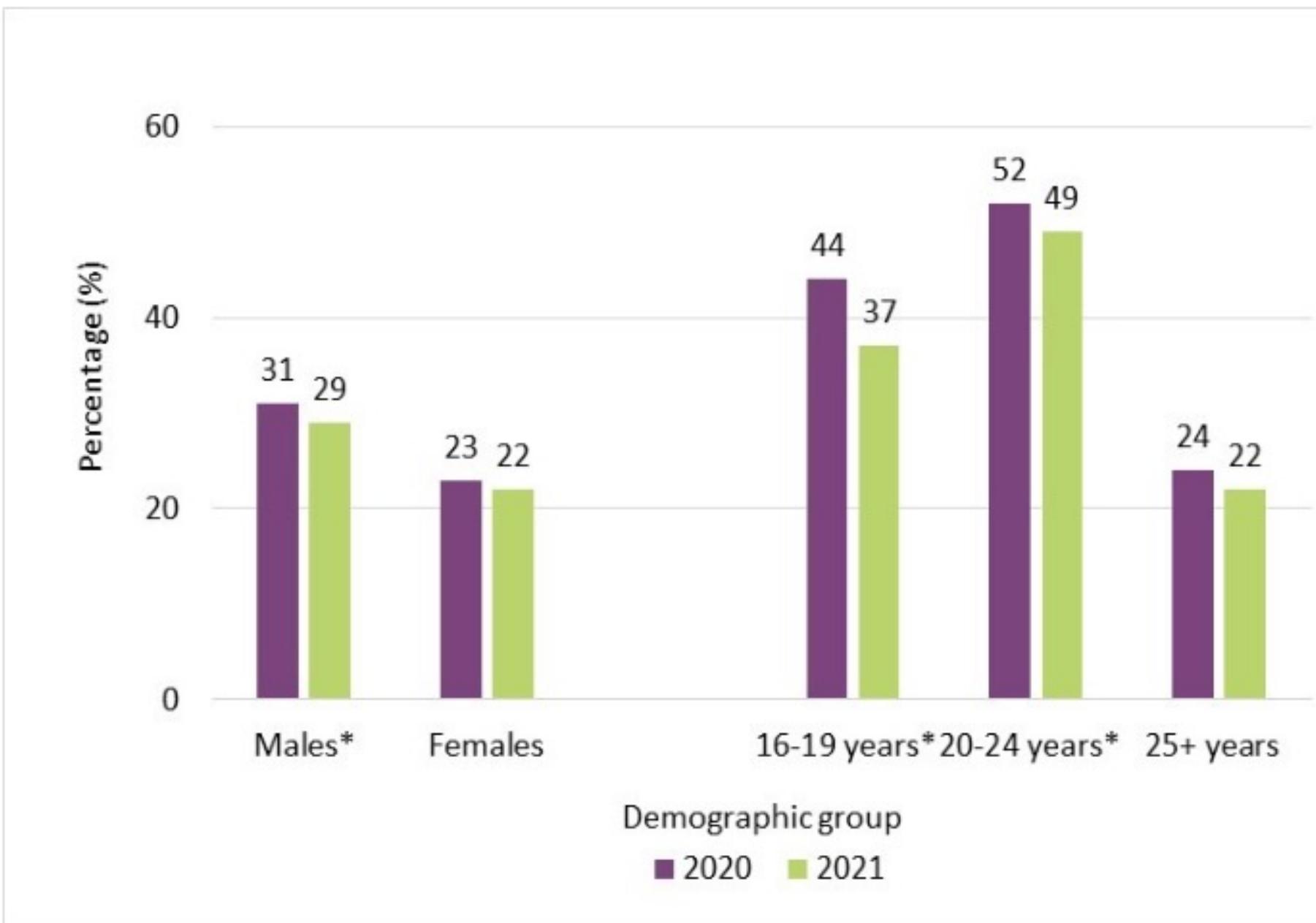
4

Discuss an educational approach to support youth cannabis health literacy.



# Canadian Cannabis Survey 2021

Figure 5: Past 12-month cannabis use, by sex and age group, 2020 to 2021



- Cannabis is the 2nd most commonly used substance in Canada, after alcohol
- Use in 16 years and older increased from 25% in 2021 to 27% in 2022
- Youth in grades 10–12 (58%) reported cannabis to be fairly easy or very easy to obtain

\* Significantly different compared to 2020.

# Background

- The risk for developing problematic substance use and associated harms later in life increases significantly when substance use is initiated young.
- Teenagers who use cannabis weekly or more often for a sustained period can increase their risk for SUD or MH problems later in life
- Focusing on interventions at an early age can mitigate potential behaviors and minimize long-term adverse health consequences.

DeWit et al., 2000; Patton, 2002; Hall, 2015; CCSA, 2022

Richmond-Rakerd, L. S., Slutske, W. S., Lynskey, M. T., Agrawal, A., Madden, P. A., Bucholz, K. K., Heath, A. C., Statham, D. J., & Martin, N. G. (2016).

NL

## Following rash of overdoses, N.L.'s health minister says all-party committee will work on solutions



24 N.L. residents have died due to an overdose in 2023, says Tom Osborne

[Alex Kennedy · CBC News · Posted: Sep 01, 2023 4:23 PM NDT | Last Updated: September 1](#)

[31 comments](#)



Health Minister Tom Osborne on Friday announced the creation of an all-party committee in response to calls for more provincial support for people battling substance use and addictions. (Danny Arsenault/CBC)

# What is Cannabis?



Cannabis can be used for **medical** or **non-medical** reasons.

## Most common components:

THC

CBD

### THC (tetrahydrocannabinol):

- This is a psychoactive which causes the “high,” hunger, sleepiness, paranoia and anxiety

### CBD (cannabidiol):

- A non-intoxicating component that may have a calming effect, though to be medicinal

# Effects of Cannabis



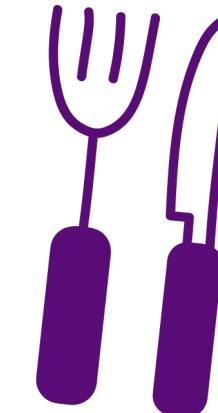
The effects of cannabis depend many factors, like mood, food intake, the amount of THC, taking other drugs, and tolerance.



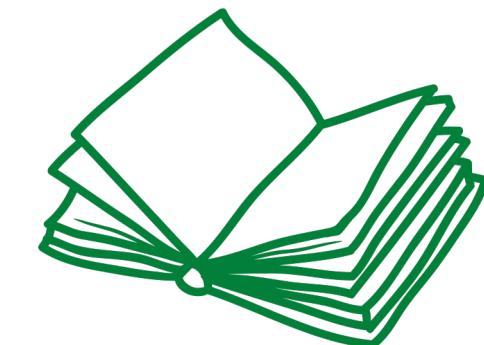
THC may make you more talkative. However, it can also cause panic and paranoia.



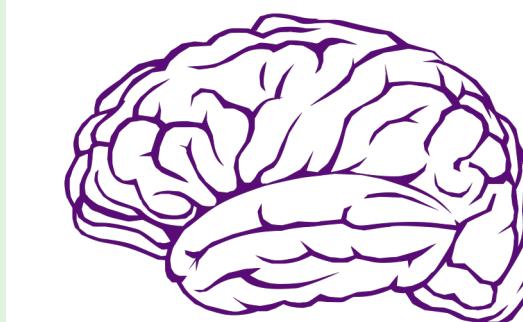
THC may causes senses to be felt differently, such as taste, touch, and hearing.



Cannabis may increase your appetite and make you feel sleepy. In rare cases, it can cause severe nausea and vomiting.



Regular use may lead to dependence or cannabis use disorder.



Regular cannabis use may worsen symptoms for individuals with a personal or a family history of psychosis.

# Harm Reduction

**Safely and securely store your cannabis products:**

- ✓ Out of children's reach
- ✓ Away from food and drink
- ✓ In child-resistant packaging or a locked container



# Canada's Lower-Risk Cannabis Use Guidelines (LRCUG)



International Journal of Drug Policy 99 (2022) 103381



Contents lists available at ScienceDirect

## International Journal of Drug Policy

journal homepage: [www.elsevier.com/locate/drugpo](http://www.elsevier.com/locate/drugpo)



Review

Lower-Risk Cannabis Use Guidelines (LRCUG) for reducing health harms from non-medical cannabis use: A comprehensive evidence and recommendations update



<https://doi.org/10.1016/j.drugpo.2021.103381>

# Safer Practices When Using Cannabis



**Not using cannabis** is the best way to stay safe. Avoid initiation until after late adolescence.



**Timing matters:** Avoid using before school, work or driving, as it impairs concentration and reaction time.



**Use occasionally.** Daily use or “binging” is more likely to impact your physical and mental health. If you noticed you can’t think as clearly, try stopping or reducing how much you use.



**Start low & go slow:** Try a small amount and wait to feel the full effects. Choose products with a lower amount of THC and an equal or higher amount of CBD.



**Moderate use:** Use in moderation to prevent brain fog and potential strain on relationships.



**Avoid smoking:** Smoking can harm your lungs, so choose alternate forms of cannabis. If inhaling, avoid “deep inhalation”.



**Don't mix (Cross-Fading):** Mixing cannabis with tobacco, alcohol, or other substances will increase impairment and the risk of serious health effects.



**Choose legal.** Get cannabis from a licensed store. Illegal and synthetic cannabis products (e.g., K2, Spice) may contain other substances such as fentanyl that can cause serious health problems (e.g., accidental overdose or poisoning).

# SUBSTANCE USE SPECTRUM

People use substances, such as controlled and illegal drugs, cannabis, tobacco/nicotine and alcohol for different reasons, including medical purposes; religious or ceremonial purposes; personal enjoyment; or to cope with stress, trauma or pain.

Substance use is different for everyone and can be viewed on a spectrum with varying stages of benefits and harms.

## NON-USE

Avoiding use of substances (abstinence)

Example: No drugs, tobacco or alcohol

## BENEFICIAL USE

Use that can have positive health, social, or spiritual effects

Example: Taking medication as prescribed, ceremonial/religious use of tobacco (such as smudging)

## LOWER-RISK USE

Use that has minimal impact to a person, their family, friends and others

Example: Drinking following the low-risk alcohol drinking guidelines, cannabis use according to the lower-risk cannabis use guidelines

## HIGHER-RISK USE

Use that has a harmful and negative impact to a person, their family, friends and others

Example: Use of illegal drugs, impaired driving, binge drinking, combining multiple substances, increasing frequency, increasing quantity

## ADDICTION (Substance use disorder)

A treatable medical condition that affects the brain and involves compulsive and continuous use despite negative impacts to a person, their family, friends and others

Example: When someone cannot stop using drugs, tobacco or alcohol even if they want to

A person may move back and forth between the stages over time



# Harm Reduction Resources



**Ways You Can Stay SAFER With Drugs**

<b>Avoid using substances</b> The best way to avoid harms from drugs is to avoid using them. This is not realistic for everyone.	<b>Choose a pharmaceutical grade or legal supply</b> Illegal supplies may have additives like You can never be sure what's in so take a small amount to test and if
<b>Start low and go slow</b> Smaller doses lower your risk of overdosing or having other harmful effects.	<b>About that equipment...</b> Serious infections, including hepatitis C, can be passed through needles that have been reused or shared with others.
<b>Avoid using substances before work or school</b> Some substances can make it hard to focus and think clearly.	<b>Avoid mixing substance</b> Mixing drugs raises your risk of such as overdose. It can also put stress on your organs.
<b>Always have a buddy</b> Have someone with you in case you use too much and you need help.	<b>Always be prepared</b> Plan your transportation. Operating vehicle while high can put you at risk. Some drugs may reduce your risk for example, engaging in sexual act

**Naloxone Can Save a Life!**

Naloxone is a medication used to temporarily reverse the effects of opioids such as fentanyl or morphine. It prevents you from being charged with a controlled substance or breaching parole.

**Good Samaritan Drug Overdose Act**  
This act provides some legal protection for people who have or witness an overdose and call 911 for help.

To learn more about the signs and symptoms of opioid overdose, visit [www.gov.nl.ca/hcs/naloxonekits/](http://www.gov.nl.ca/hcs/naloxonekits/)

For more information visit us at: [www.decyde.ca](http://www.decyde.ca)

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**NALOXONE**

**WHAT YOU NEED TO KNOW**

**What is it?** Naloxone reverses opioids

Naloxone is a medication that temporarily reverses the effects of opioids. It only works for about 30 minutes, so it's important to call 911 for help after giving someone naloxone. Examples of opioids include fentanyl, morphine, codeine, hydromorphone. Keep in mind that other drugs may be with opioids.

To learn more about opioids, see our [Opioid Substance Snapshot](#)

**Where can I get a kit?**

Free Naloxone Kits are available in distribution sites throughout Newfoundland and Labrador. You may also be able to get one at a pharmacy. To find a location near you, call 811 or find the list of sites at [www.health.gov.nl.ca/health/naloxonekits](http://www.health.gov.nl.ca/health/naloxonekits)

**Overdose Signs**

- S**timulate: Do they have signs of an opioid overdose? Can you wake the person up? If they're unresponsive, call 911!
- A**irway: Make sure airways are open! Tilt the head back. If there's anything in their mouth, remove it
- V**entilate if they're not breathing! Give 1 breath every 5 seconds. Plug their nose and tilt the head back before giving breaths
- E**valuate: If they're breathing, put them in the recovery position. If they still have signs of an overdose, proceed to give naloxone!

**Are there any harms?**

**No!** You won't harm someone by giving them naloxone if they haven't used opioids. Naloxone may put the person into withdrawal. This doesn't cause any long lasting harm. Other drugs are often laced with opioids. Always give naloxone just in case!

**Can I get in trouble?**

**What does this mean?** You can't be charged for the simple possession of controlled substances, including violating and probation.

**There's a limitation!** The Act does not provide protection for outstanding warrants, trafficking and production.

**M**edicate: **injection** → → → **Nasal**: Draw up naloxone → Inject into the upper arm or thigh → Peel open package → Place the tip into the nose → Press the button

**For a video on using injectable naloxone, click here!** **For a video on using nasal naloxone, click here!**

**E**valuate: **Monitor the person until the ambulance arrives**  
Give another dose of naloxone if they're still not breathing after 2-3 minutes. If necessary, you may need to give a 3rd dose.

**Don't leave the scene** **Don't let them "sleep it off"** **Don't make them vomit** **Don't let them use more drugs** **Don't put them in the shower**

For more information visit us at: [www.decyde.ca](http://www.decyde.ca)

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## Harm Reduction

<https://decyde.ca/harm-reduction-resources/>

## Naloxone

# Work that informed



Empowering Youth to  
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Engagement with youth, citizens, stakeholders

Youth/Young Adult Research

Scoping reviews of educational materials and programs

Teacher survey/focus groups



# YOUTH ADVISORY PANEL

**CO-CHAIRS: EMILY ROWE & GRACE KELLY**



# Exploring the Impact of Cannabis Legalization on Youth & Young Adults



# OBJECTIVES



Driving and Cannabis Use



Gaps in Cannabis Education





# Cannabis & Road Safety

## Normalization of DUIC

"If you smoke and drive like it's so normalized, everyone does it. People you like do it. Your friends are doing it"

## Knowledge & Awareness

"Organizations like MADD that show the really graphic emotional videos of drunk driving, we don't really have that for cannabis... The information isn't really out there"

## Perception of Risk

"I know people who say that they think they're better drivers when they're high."

## Modes of Transportation

"When alcohol is all we really consumed regularly ... skidooing and drinking was very, very common. Now that weed is so much more accessible, it seems like it's pretty much exactly the same."

## Detection

"We see routine breathalyzers every now and then... but we don't see routine swabs for marijuana... I've never heard of someone in this area getting ticketed for driving under the influence of marijuana."



# YOUTH DESIRED CANNABIS HEALTH LITERACY

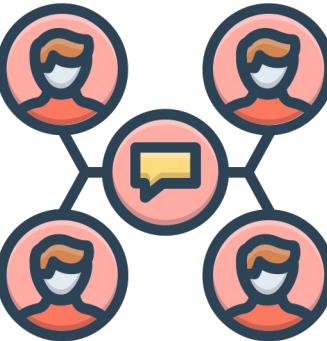




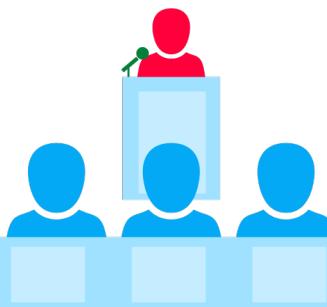
# DELIVERY OF CANNABIS EDUCATION



Frequent Education



Interactive



Facilitated by a relatable speaker



Easy, age-appropriate delivery



Equitable Access

# SCOPING REVIEW AND ENVIRONMENTAL SCAN

Health Education Journal

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Sage Journals

*Original Article*



## Canadian cannabis education resources to support youth health literacy: A scoping review and environmental scan

Emily J. Howe<sup>a</sup>, Lisa D. Bishop <sup>b,c</sup>, Bethany S. Torraville<sup>b</sup>, Emily C. Rowe<sup>a</sup>, Eden Kinzel <sup>d</sup>, and Jennifer R. Donnan<sup>b</sup>

<https://doi.org/10.1177/00178969231191085>

# A Survey of NL Educator Perspectives

In 2022-23, the DECYDE team talked to 170 educators across NL to learn about:

1

Their **attitudes** toward harm reduction

2

**Types of support** needed to deliver harm reduction education

3

**Preferences for training** and receiving curriculum



# Results: Harm Reduction

**92%** believed harm reduction was an effective approach

**100%** agreed students need honest information about substance use to reduce harms

**68%** believed they would be able to recognize if a student was under the influence of cannabis

**77%** of educators would be comfortable supporting a student who had consumed cannabis

**However...**

**However...**

**However...**

**However...**

**16%** felt that teaching students about safer substance use would encourage substance use

**46%** thought that youth who use substances should be expected to pursue abstinence

**61%** felt uncertain how to properly respond to student cannabis use

**8%** thought their teacher training would allow them to intervene and prevent cannabis-related harms



# Results: Professional Learning



Of the 170 educators we spoke to:

**98 %**

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THOUGHT THAT  
TEACHERS REQUIRE  
TRAINING FOR REDUCING  
CANNABIS-RELATED  
HARMS

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**89 %**

---

WERE PERSONALLY  
INTERESTED IN  
RECEIVING HARM  
REDUCTION TEACHER  
TRAININGS

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# SUMMARY



There are gaps in current substance use education programs targeting youth



Education need to be equitable, support youth's autonomy & reduce stigma

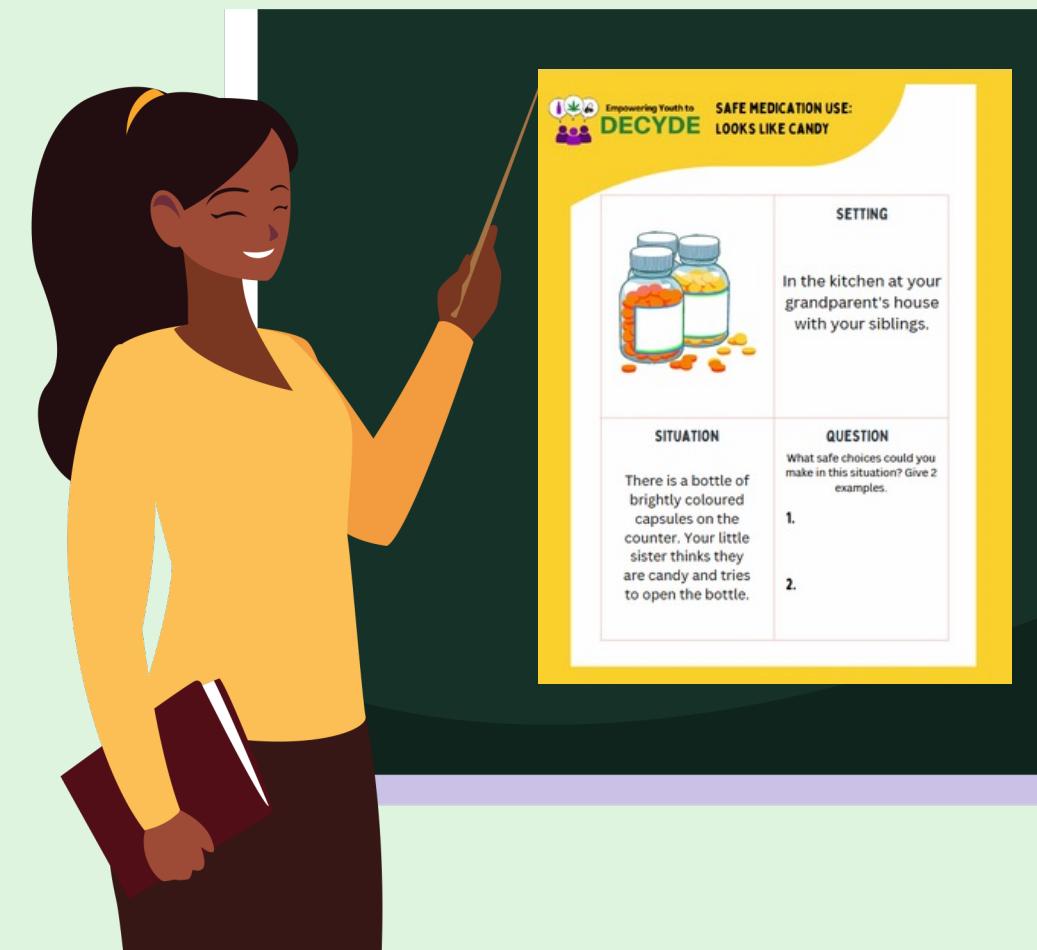


Need delivery of interactive, empirically grounded education, including through social media



Teachers desire professional learning on harm reduction and substance use education

# Drug Education Centred on Youth Decision Empowerment **(DECYDE)**



# WHAT IS DECYDE?



**DECYDE** is an education strategy created by the Cannabis Health Evaluation and Research Partnership Team (CHERP) at Memorial University.



## Our Vision

To empower youth to make safe and informed choices regarding their substance use health.



## Our Mission

To provide evidence-based, harm reduction, and trauma-informed substance use information and resources for educators, youth, and parents/guardians.



## Knowledge Corner

- Harm Reduction Resources
  - Adverse Childhood Experiences/Trauma Informed Practices
  - Compassion Fatigue
  - Harm Reduction & Naloxone

## Knowledge Corner

Knowledge Corner includes external resources for extra support to members of the general public, educators, as well as important support resources.

# COMPONENTS OF DECYDE



## Educator & Harm Reduction Resources

Evidence-based educator resources that provide information on topics relating to substance use, mental health, and stigma. They can also be used by the general public.



## Lesson Plans

Comprehensive lesson plans aligned with grades 4-12 health curriculum. Each lesson outlines associated learning outcomes and fully developed lesson plans, including interactive activities, videos, and answer keys.



## Substance Snapshots

A summary of information for various substances. These snapshots are meant to support educators in their classroom, as well as to be used by the general public.



## Support Resources

List of external support resources including mental health and substance use resources, group support, helplines, and school-based supports for educators and students.



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# Educator & Harm Reduction Resources

Evidence-based educator resources that provide information on topics relating to substance use, mental health, and stigma. They can also be used by the general public.

## Adverse Childhood Experiences (ACEs)

ACEs are stressful or traumatic events which may occur between birth and 17 years of age. 2 out of 3 people have experienced at least 1 ACE. Both the prevalence and risk of chronic health conditions increase as the number of ACEs increase.

**Did you know?**

- 3x more likely to have difficulty finding work
- 2x more likely to develop an alcohol use disorder
- 2x more likely to try drugs before the age of 14

**Stigma**

"Stigma is when someone sees a person or group of people in a negative way because of a perceived characteristic or shared attribute" (CCSA, 2022)

People who use substances or have lived experience of using substances are often stigmatized.

Youth learn from everyone around them, including teachers, family, and peers. You can set an example by modelling non-stigmatizing and inclusive language.

**Impacts of Stigma**

Stigma is a barrier to asking for help. Youth may fear being shamed or judged, which may lead them to isolate themselves.

Stigma may make youth feel uncomfortable engaging in classroom discussions or speaking to teachers, worrying what others may think.

Stigma may cause youth to conceal their substance use or use alone. This can increase their risk of drug poisoning or prevent them from seeking help.

**Forms of Stigma**

- Structural Stigma**: Occurs when society devalues people who are part of a certain group. This causes inequalities, including a lack of educational opportunities or they may not be taken seriously when seeking help.
- Social Stigma**: Occurs during interactions with others. This includes using negative attitudes and negative language. It can lead to negative attitudes, behaviours, and lead to discrimination.
- Self-Stigma**: Occurs when a person believes the negative things said about them. Fitting in with their peers is extremely important to youth. Internalizing negative beliefs can have a lasting impact.

**Spectrum of Substance Use Health**

Non-Use → Infrequent Use → Lower-Risk Use → Higher-Risk Use → Addiction

Substance use can be seen on a spectrum. People can move back and forth along the spectrum in their lifetime.

## Trauma Informed Practices (TIPs)

TIPs are strategies that adults can use to create an environment where **every youth feels safe**. When adults understand how trauma affects a youth's behaviours and emotions, they can be better supported.

Trauma is often caused by **adverse childhood experiences (ACES)**. For more information on ACEs, visit [www.decyde.ca](http://www.decyde.ca)

Remember, traumatic experiences are **individual**. We should not judge what we think is traumatic to the child.

## Caregiver High Risk Substance Use and Substance Use Disorder (SUD)

An estimated 21% of Canadians, about 6 million people, will meet the criteria for addiction in their lifetime.

1 in 4 students are exposed to higher risk substance use in the home.

Caregivers with higher risk substance use come from diverse backgrounds with varying academic, social & emotional strengths.

**Supporting children who have a caregiver with SUD**

- Use person-centered language
- Use a trauma-informed lens
- Understand the stigma associated with SUDs

For more information, check out our [Stigma and Trauma-Informed Practices \(TIPs\) Infographics](#)

**Schools are a protective factor**

- Provide **stability** and **structure** for youth in chaotic home environments.
- Increase youth's **protective factors** such as enhancing their communication skills, building on their strengths, learning positive coping skills, and developing a feeling of self-worth and autonomy.
- Strive for a **compassionate**, **trusting**, and **safe** environment.
- Can increase access to **internal resources** like the school counselor and educational programs, and may be able to connect families and students to supports outside of the school.

**Four Take-Home Messages**

- Addiction is a disease
- It's not your fault
- You are not alone
- It's OK to talk

For examples and common Q&A's that students may have about caregivers drinking alcohol, click this link: [\[link\]](#)

## COMPASSION FATIGUE

An occupational hazard in helping professions

Some helpers' roles evolve and expand in response to increasing emotional, cognitive, and behavioural needs of those who need it. They often need to respond to emotional and behavioural crises in their work, and hear about the traumas that individuals are facing. As a result, those working with vulnerable populations are at a higher risk for experiencing occupational hazards, such as compassion fatigue.

### WHAT IS COMPASSION FATIGUE?

Compassion Fatigue is caused by empathy. It is the natural consequence of stress resulting from caring for and helping traumatized or suffering people. It refers to the profound emotional and physical exhaustion that takes place when helpers are unable to refuel and regenerate. Compassion fatigue affects the most caring of individuals and has been described as "the cost of caring" for others in emotional pain.

### EARLY WARNING SIGNS

Early recognition and intervention is important; without intervention compassion fatigue may negatively impact personal, social and occupational functioning and increase risk for burnout

<b>Morale</b>	-Decreased confidence -Apathy -Loss of interest
<b>Relational</b>	-Withdrawn or isolated from loved ones -Distrust of loved ones
<b>Behavioural</b>	-Increased irritability -Easily startled -Neglect self care



# Educator & Harm Reduction Resources



## Adverse Childhood Experiences (ACEs)

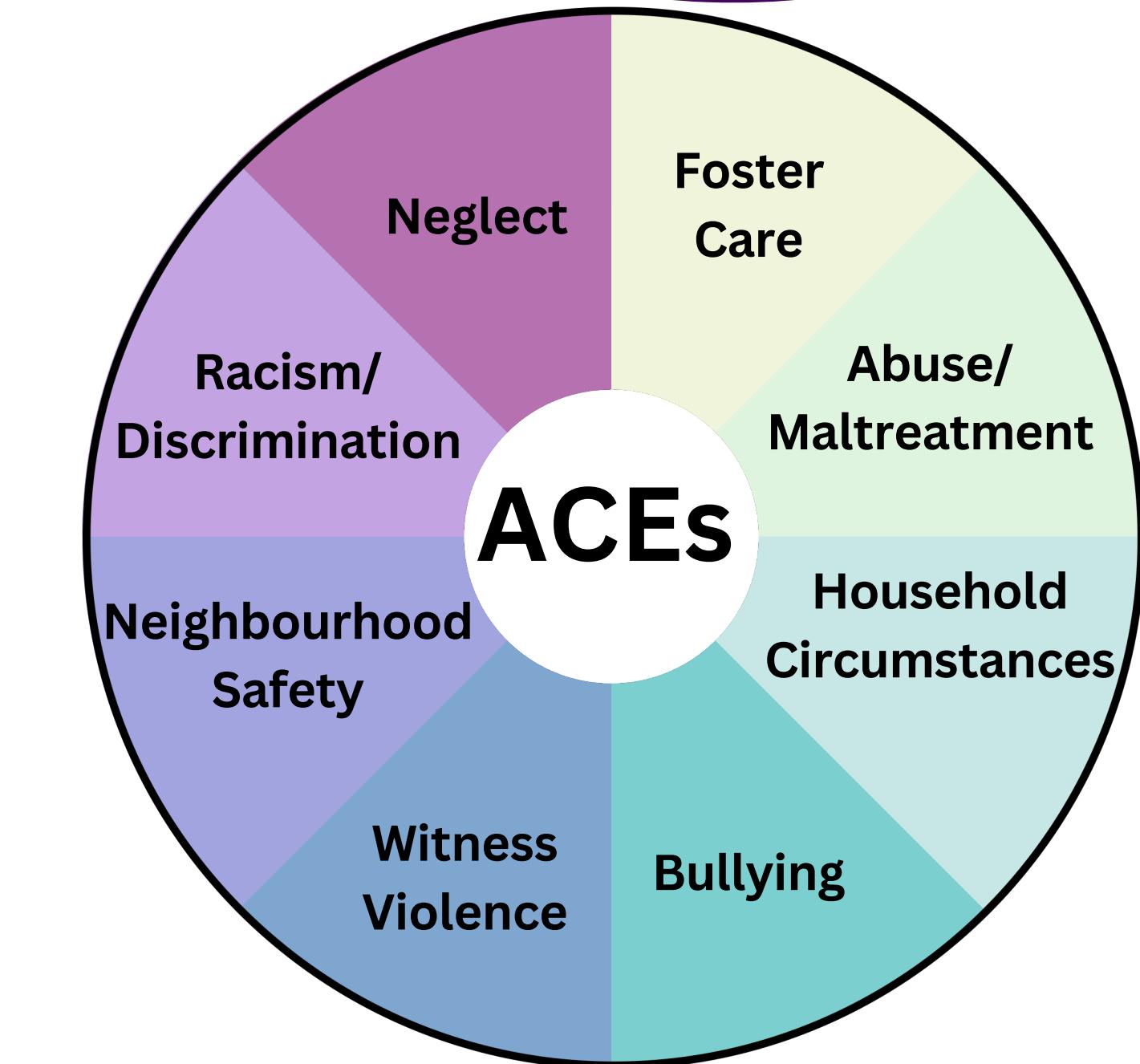
- **Adverse childhood experiences** (ACEs) are stressful or traumatic events, including abuse and neglect.
- Toxic stress impairs neurodevelopment, increasing the risk of resorting to **unhealthy coping mechanisms**.
- The more ACEs a child has, the higher their risk of developing:
  - Chronic disease (e.g., diabetes, high blood pressure)
  - Learning difficulties
  - Suicidal tendencies
  - **Substance Use Disorder (SUD)**





You can minimize the effect  
ACEs have on a child's  
learning

Traumatic experiences are **individual**.  
We should not judge what we think is  
traumatic to the child.



# Trauma-Informed Practices (TIPs)

- **TIPs** are strategies that adults can use to create an environment where **every youth feels safe**.
- When people understand how trauma affects youth's behaviours and emotions, they can avoid accidentally creating an environment that causes the child to feel unsafe or uncomfortable.



## Examples of TIPs:

- Provide supportive feedback (e.g., encourage youth to keep trying)
- Use restorative practices instead of zero-tolerance policies
- Transparent and predictable rules
- Foster positive self-concept (e.g., recognize accomplishments, celebrate uniqueness)



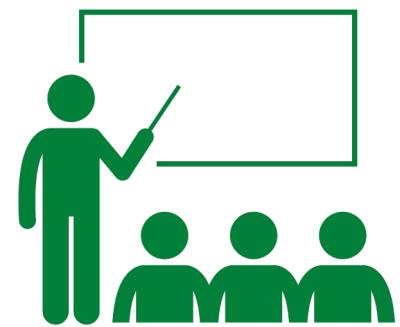
## Stigma

**Stigma** is a barrier to asking for help. Youth may fear being **shamed** or **judged**, which may lead them to **isolate** themselves.



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**Stigma** may make youth feel **uncomfortable** engaging in discussions or speaking to adults worrying what others may think.



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**Stigma** may cause youth to conceal their substance use or use alone. This can increase their risk of drug poisoning or prevent them from seeking help.



### How people can help decrease stigma



**Use Person-First Language:** set a positive example



**Support Youth:** have open conversations



**Foster Self-Care and Self-Acceptance:** help youth develop confidence



# Compassion Fatigue



The work of helping requires those in various professions to open their hearts and minds to those they work with . This very process is what makes these workers vulnerable to being profoundly affected by their work and yet it is an essential skill to maintain in order to be effective, ethical and compassionate.



## Tips for coping with compassion fatigue

- Focus on Making healthy choices
- Practice self compassion
- Stay grounded
- Remember, it's ok to say NO
- Avoid unhelpful coping
- Find time for self-care



Early recognition and intervention is important; without intervention compassion fatigue may negatively impact personal, social and occupational functioning and increase risk for burnout and other mental health conditions.

### Additional Support:

Employees often have access to multiple supports including an employee assistance program, which offers short-term counseling and referrals



# Caregiver Substance Use

Caregivers with SUDs are highly **stigmatized** by multiple systems (e.g., healthcare, education, legal, social). As a result, they are more likely to experience **discrimination** and **health inequities**.

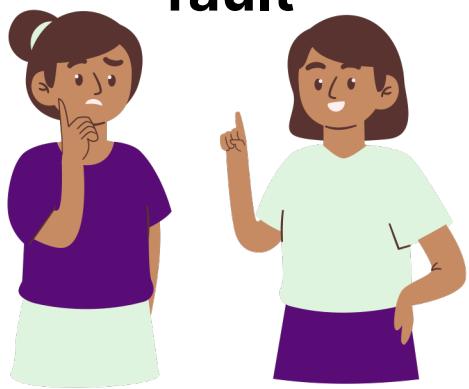
Children of caregivers with SUDs frequently experience **stigma** and **challenges** by association.

## Four Take-Home Messages

Addiction is a disease



It's not your fault



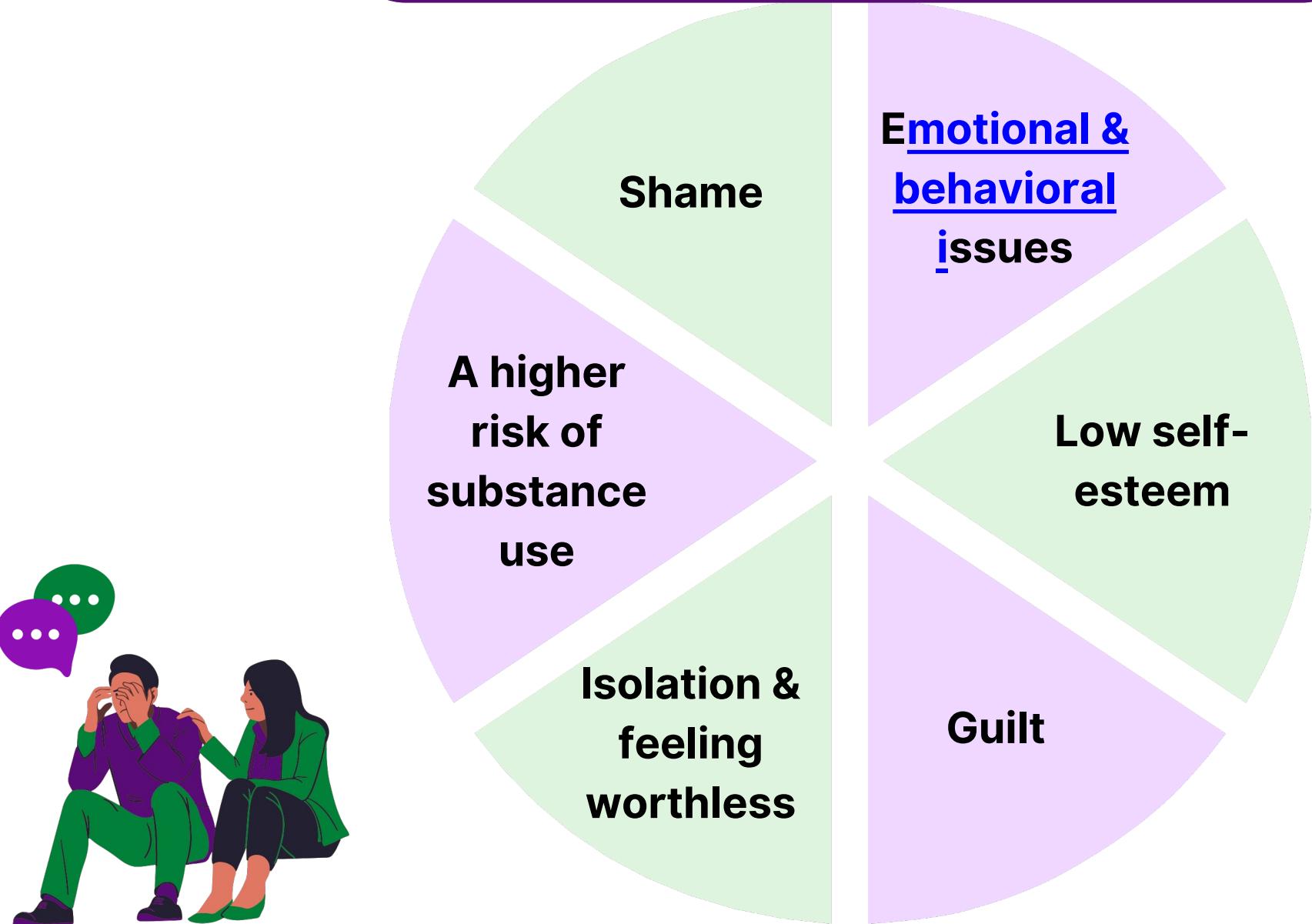
You are not alone

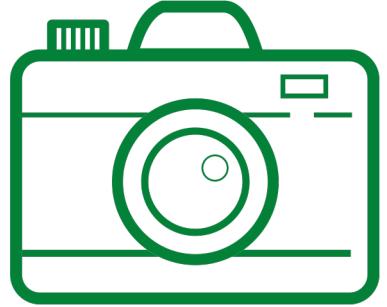


It's OK to talk



## Challenges for children





# SUBSTANCE SNAPSHOT

**SUBSTANCE SNAPSHOT**

**EDIBLE CANNABIS**

**CANNABIS DABBING**

**CANNABIS**

**SYNTHETIC CANNABIS**

**Page 2**

**What is it?** Cannabis is psychoactive

**How is it used?** Edible cannabis can be both regulated and unregulated (homemade). Some examples include carbonated beverages, teas, gummy, candies, cookies, and chocolate.

**What are the effects?** THC: The main psychoactive chemical in cannabis. It causes the 'high'. CBD: The non-intoxicating component that may have some calming effect.

**What is it?** Cannabis is psychoactive

**How is it used?** Electronic vape pen: May be disposable or able to be reloaded with concentrates. Dabbing rig: A glass rig similar to a bong. Concentrates are placed in it and heated with a lighter.

**What are the effects?** The effects of cannabis depend many factors, like mood, food intake, the amount of THC, other drugs, and tolerance.

**What is it?** Cannabis can be psychoactive

**How is it used?** Oral: Edibles (e.g. gummies, drinks, chocolates) Capsules, tablets, oils Inhaled: Vape, smoke, dab

**What are the effects?** Compared to legal cannabis, illegal cannabis is not quality controlled! The amount of CBD and THC is often incorrect or misleading.

**Did you know?**

**How to stay safer**

- 1 Not using cannabis is the best way to stay safe, but that may not be realistic for everybody.
- 2 Timing matters: Avoid using before school, work or driving, as it impairs concentration and reaction time.
- 3 Avoid synthetic! Synthetic cannabis is unregulated and much more potent. It has a higher risk of dependence and dangerous side effects.
- 4 Start low & go slow: Try a small amount and wait to feel the full effects. Choose products with a lower amount of THC and an equal or higher amount of CBD.
- 5 Moderate use: Use in moderation to prevent brain fog and potential strain on relationships.
- 6 Be mindful of inhalation: Avoid inhaling smoke deeply or holding your breath, this can harm your lungs.
- 7 Don't mix (Cross-Fading): Mixing cannabis with tobacco, alcohol, or other substances will increase impairment and the risk of serious health effects.
- 8 Choose legal. Get cannabis from a licensed store. Illegal and synthetic cannabis products (e.g., K2, Spice) may contain other substances such as fentanyl that can cause serious health problems such as accidental overdose or poisoning.

**Characteristics of Legal Cannabis**

- Displays a standard cannabis symbol
- Plastisol printing
- Indicates the amount of THC and CBD
- Has a yellow box with a Health Canada warning in English and French
- Has a excise stamp representing the province/territory it's meant to be sold in

**Learn more about ways you can stay safe when using cannabis: [Canada's lower-risk cannabis use guidelines](#)**

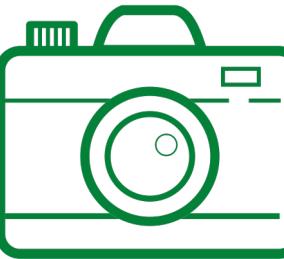
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Produced by: University of New Brunswick, Saint Mary's University, and Memorial University of Newfoundland.

Empowering Youth to DECYDE



# SUBSTANCE SNAPSHOT

Page 1

**SUBSTANCE SNAPSHOT**

**CANNABIS**

**WHAT YOU NEED TO KNOW**

**What is it?** Cannabis can be psychoactive

Cannabis is a complex plant that contains several components. The main chemicals are THC (psychoactive) and CBD (calming). Cannabis can be stimulating, hallucinogenic, or cause drowsiness. It can be used for its psychoactive properties but also may be used for medical reasons (e.g., pain).

Cannabis comes as a dried flower, concentrated oil/wax, capsules, tablets, or mixed in food or drinks.

For information on different types of cannabis, check out our website [here](#).

**How is it used?**

**Oral:** Edibles (e.g. gummies, drinks, chocolates) Capsules, tablets, oils

**Inhaled:** Vape, smoke, dab

**THC:** The main psychoactive chemical in cannabis. It causes the 'high'.

**CBD:** The non-intoxicating component that may have some calming effect.

**What are the effects?**

The effects of cannabis depend many factors, like mood, food intake, the amount of THC, taking other drugs, and tolerance.

THC may make you more talkative. However, it can also cause panic and paranoia.

THC may causes senses to be felt differently, such as taste, touch, and hearing.

Cannabis may increase your appetite and make you feel sleepy. In rare cases, it can cause severe nausea and vomiting.

Regular use may lead to dependence and addiction. It may be hard to stop using cannabis, even if you know it's negatively affecting you.

Regular cannabis use may worsen symptoms for individuals with mental health disorders or a family history of such conditions.

September 2023 Empowering Youth to DECYDE

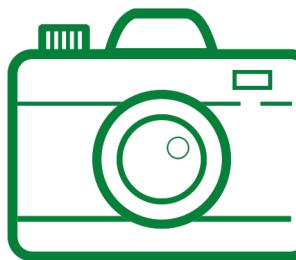
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Identification of the substance, and its drug classification category

Common names or slang terms for the substance

Description of the various ways the substance may be used/consumed

Outlines the various effects of the substance



# SUBSTANCE SNAPSHOT

# Description of the warning signs to look for, and when to seek emergency help

# Interesting fact or statistic about the substance

SUBSTANCE  
SNAPSHOT

Page 2

# CANNABIS

## When do you seek emergency help?

"Greening out:" A term given to cannabis overdose or poisoning (taking too much cannabis).

**Signs:** Signs of taking too much cannabis include intense anxiety, panic, dizziness, intense nausea or vomiting. Additionally, some individuals may experience shortness of breath, rapid heartbeat, chest pain, or hallucinations.

**Get help right away!** Cannabis overdoses or poisonings can be very distressing and lead to serious injury.

### Did you know?

Compared to legal cannabis, illegal cannabis is not quality controlled! The amount of CBD and THC is often incorrect or misleading.

There also may be other substances (e.g. ketamine, fentanyl) added.

### Characteristics of Legal Cannabis

- Displays a standard cannabis symbol
- Plain, child-resistant packaging
- Indicates the amount of THC and CBD
- Has a yellow box with a Health Canada warning in English and French
- Has a excise stamp representing the province/territory it's meant to be sold in

Learn more about ways you can stay safe when using cannabis: [Canada's lower-risk cannabis use guidelines](#)

For more information visit us at:

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### How to stay safer

- 1 **Not using cannabis** is the best way to stay safe, but that may not be realistic for everybody.
- 2 **Timing matters:** Avoid using before school, work or driving, as it impairs concentration and reaction time.
- 3 **Avoid synthetic!** Synthetic cannabis is unregulated and much more potent. It has a higher risk of dependence and dangerous side effects.
- 4 **Start low & go slow:** Try a small amount and wait to feel the full effects. Choose products with a lower amount of THC and an equal or higher amount of CBD.
- 5 **Moderate use:** Use in moderation to prevent brain fog and potential strain on relationships.
- 6 **Be mindful of inhalation:** Avoid inhaling smoke deeply or holding your breath, this can harm your lungs.
- 7 **Don't mix (Cross-Fading):** Mixing cannabis with tobacco, alcohol, or other substances will increase impairment and the risk of serious health effects.
- 8 **Choose legal.** Get cannabis from a licensed store. Illegal and synthetic cannabis products (e.g., K2, Spice) may contain other substances such as fentanyl that can cause serious health problems such as accidental overdose or poisoning.

[Click here](#) for a list of cannabis retailers in Newfoundland and Labrador.

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© 2018 DECYDE. All rights reserved. This document is the intellectual property of DECYDE. It is intended for use by educators in their delivery of drug education. It is not for direct student use unless deemed developmentally appropriate. It is not to be reproduced without written permission from DECYDE. It is illegal to possess or use cannabis for non-medical purposes. It is illegal to sell cannabis to anyone under the age of 19. It is illegal to drive while under the influence of cannabis.

**DECYDE** Developing Healthy Lives  
**MEMORIAL** UNIVERSITY

# Harm reduction tips to consider when using a particular substance

## **Disclaimer and references**



# Teacher Portal

## Lesson Plans

### Grade 4

The DECYDE Grade 4 Program consists of a series of fully developed lessons which are intended to be taught in sequence. However individual lessons or activities can be standalone depending on timing and the needs of your class. Each lesson consists of a lesson plan, activities, answer keys and supplementary information to aid teachers in the delivery of substance use health education.

#### Lesson 4.1: Safe Medication Use

Students determine how to use medications safely and begin to develop their decision-making skills.

[Click here](#) to visit Lesson 4.1: Safe Use of Medication.

#### Lesson 4.2 : Non-Medical Drug Use

Students continue to work on their decision-making skills while distinguishing between medical and non medical drug use.

[Click here](#) to visit Lesson 4.2: Non-Medical Drugs Use.

#### Lesson 4.3: What Influences Drug Use?

Students analyze various influences related to drug use and reflect on their goals.

[Click here](#) to visit Lesson 4.3: What Influences Drug Use?

### Individual lessons

- The learning objectives of each lesson **align with the NL Health Curriculum** and map to relevant outcomes in **English Language Arts** and **Social-Emotional Learning**

Each lesson plan contains:

### Activities

- Case scenarios
- Group activities
- Discussions
- Projects
- Quizzes

### Supplementary references for the educator:

- Skills-Based Health Education
- FACE Decision-Making Model
- ACEs and TIPs
- Substance Snapshots

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Health  
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# Thank you!

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visit us at:  
**www.DECYDE.ca** +💡+



**Our vision:** To empower youth to make safe and informed choices regarding their substance use health.

**Our mission:** To provide evidence-based, harm reduction, and trauma-informed substance use information and resources for educators, youth, and parents/guardians.

DECYDE is an education strategy created by **CHERP** (Cannabis Health Evaluation and Research Partnership team) at Memorial University. CHERP is an interdisciplinary team of researchers who aim to understand the impacts of cannabis legalization in Newfoundland and Labrador, and how we can support individuals in making safe and informed choices.

### Share Your Feedback

We want to hear from you! Please take a few moments to complete a short survey to share your thoughts about our website and substance use resources.

[Complete the Survey](#)



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