Counseling Clients Who Abuse Marijuana

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Section 1 - Introduction

This section contains an overview of marijuana use in the United States, including statistics related to marijuana use.

Marijuana is the most commonly used illicit drugs in the United States. In their 2012 National Survey on Drug Use and Health, the Substance Abuse and Mental Health Services Administration (SAMHSA) reported that 18.9 million people age 12 and older (7.3% of those surveyed) used marijuana in the month before the survey.

It is also arguably the most controversial drug in the U.S. At the time of this writing, two U.S. states had legalized recreational marijuana within certain limits and more than 20 states plus the District of Columbia had enacted laws to legalize medical marijuana. A substantial portion of the U.S. population has long believed that marijuana is a low risk drug, especially when compared to legal drugs like alcohol which directly cause a large number of deaths. Many do not view marijuana as being a drug in the first place. Not surprisingly, marijuana use has increased among young people since 2007.

At the same time, the U.S. government still classifies marijuana as a Schedule I substance, which means marijuana is deemed to have no medicinal uses and has a high risk for abuse. Although the segment of the population that favors legalized marijuana use has been the most vocal group in recent times, there also exists a substantial segment of the population (including many researchers and clinicians) who believe that marijuana is far more harmful than is commonly believed.

Apart from the bigger picture, the role of counselors, social workers, and other helping professionals remains essentially the same, which is to help clients determine for themselves whether their marijuana use is detrimental to their well being in some fashion. This task has added importance when working with certain groups of clients such as offenders under some form of supervision and minors, who cannot and will not be able to engage in recreational marijuana use. For offenders under some form of community supervision, the consequences of any marijuana use could be severe.

There are few things more unproductive for helping professionals to do than to debate marijuana related controversies with clients. With that said, professionals need to have a basic understanding of the role of marijuana in U.S. history and the related cultural (and countercultural) issues. From there, this course provides an overview of the various ways in which marijuana can be consumed, assessment considerations, marijuana related issues for certain populations, and various counseling and intervention approaches that can be used.
Section 2 - A Brief History of Marijuana

This section provides a brief overview of the history surrounding marijuana

The history of marijuana actually involves the history of three different products deriving from the same plant. These components are hashish, marijuana, and hemp. The entire plant, known as cannabis sativa, has the components required to produce each of these products. Since two of the three are hallucinogenic drugs, and the third is one of the primary components of rope, the plant itself has generated a number of widely varied views throughout history.

Textiles made of hemp have been found in China as far back as 6000 BC. This is the variety of the plant used for its fibrous and seedy stalks, and with the least amount of tetrahydrocannabinol (commonly known as THC, which is the psychoactive substance in cannabis). The seeds can be, and still are used for food. The stalks were a primary component for cloth, paper, rope, and other such products since the beginning of recorded history. The growing of hemp has always been encouraged in civilized places. Hemp was used to produce parachutes for troops in World War II.

Hashish is composed of purified resin glands from the cannabis plant, and contains the highest proportion of THC that can be found in the plant. This drug has always been looked upon as more dangerous and mind-altering than marijuana, and has been associated with the word "assassin" - the original term was “hashashin”, meaning, in general, a dangerous killer whose mind had been altered by drugs. This person exists in early stories of tribal killers in the Middle East, and is still associated with the dangers of such places as Afghanistan. The Middle East continues to be a source for this drug. Some of the perceived dangerousness of the drug, and the perceived dangerousness of its users, came directly from the biased views of the westerners (generally, Europeans writing of their early experiences with the Middle East) who were frightened of both the tribal people and the drug. It is doubtful that using hashish has turned a benign individual into a psychopath, but the image continues to thrive. Nevertheless, the amount of THC in hashish is the highest in any form of the drug, so the potential for mood alteration is higher than that of marijuana.

Marijuana is the derivative of the cannabis plant most pertinent to our narrative here. It can be made from the leaves and stalks of the plant, similar to how the tobacco plant is chopped and made into cigarettes. The THC level in marijuana is usually less than is found in hashish, since some of the less oily sections of the plant are used. It is the plant's oily resins that contain the largest proportion of THC, which is the hallucinogen in the plant.

Marijuana has been written about through all of recorded history, and appears to have been used for a wide variety of medical purposes until it began to be seen primarily a way to alter one’s mood. Mood altering per se has been unacceptable in western culture even though it has been acceptable in tribal cultures historically and attached to spiritual or religious purposes.

When Europeans began to explore the world, they observed the use of varieties of cannabis. They also managed to organize its export/import in Europe. As is the case with most hallucinogenic drugs, the writings about its use emphasize the potential for spiritual exploration or self-knowledge as an intellectual component of use, making the experience of using the drug a pursuit of intellectual achievement rather than simply for the purpose of mood alteration.
The cannabis plant came to America upon the arrival of Europeans. It was grown in Jamestown by 1616 and used for hemp. By the 1700s, marijuana was described in medical writings as a relief product for pain and nausea. By the 1800's, the United States had a number of states that contained marijuana plantations. Between 1850 and 1915, marijuana was available in the United States through pharmacies, and was supported by doctors for pain as well as convulsive and digestive disorders.

In 1915, California became the first state to ban marijuana, and several other states followed suit. However, it remained legal elsewhere during Prohibition. But over time, marijuana was banned in more and more places worldwide. In 1936, "Reefer Madness" hit the national screens, popularizing the idea that marijuana use led directly to craziness. In 1937, Congress passed the Marijuana Tax Act, which criminalized the drug. This was after the testimony of a doctor, William Woodward, who clearly stated "The American Medical Association knows of no evidence marijuana is a dangerous drug." By 1941, marijuana was no longer recognized as having a medicinal use.

Marijuana possession, sale, and use began to have harsh criminal penalties. Mandatory sentencing began in 1951, with opposition to the idea strong. Controversy continued for twenty years, with some prominent people beginning to speak out against extreme criminalization. Carl Sagan proposed in his writing that marijuana may have been the first agricultural crop, leading to modern civilization. President Carter, in the late 1970s, proposed the drug laws imposing mandatory sentences be revised. Since this time, controversy has continued, with states passing their own legislation, often in opposition to federal law. Sentencing for possession changes from mandatory incarceration to monetary fines.

There is more state-by-state support for medical marijuana, with many in the medical community speaking out in support of some appropriate medical uses. Marijuana is the contemporary drug that has the most varied laws about its appropriate use, which vary depending on where one lives. At this time, 21 states and the District of Columbia have legalized medical marijuana, but all have different laws in terms of how much can be possessed and what the penalties are if legal restrictions are exceeded. Some states have passed these laws by a vote of the State House or Senate, while some have passed through voters. Some states will accept documents from other states showing the individual is a legitimate patient. Some states are now issuing State ID cards, which, if shown, make the person less likely to be arrested than would a physician's statement or a note from a dispensary. The trend is beginning to resemble licensing.

It seems unlikely marijuana will become completely illegal again, but it has limited legality at least for now. Those who use it, no matter how medically viable this might be, are subject to criminal justice suspicion. The question of appropriate use of this drug continues to generate enthusiastic debate.

Section 3 – How Marijuana Is Used

This section describes both common and less common methods for consuming marijuana.

Prescribed Pill as a Marijuana Equivalent: This is described further in Section 5.

Smoking/Vaporizing: Much like tobacco, the marijuana plant is often chopped into small pieces and rolled into a paper, then lighted and smoked. However, other methods of smoking are also common, such as using a pipe, called a "bong." Generally, the marijuana used is like that rolled into a cigarette.
A more elaborate smoking device is the hookah, which can be used to either smoke or vaporize the product. In this device, the marijuana must be combined with something resin-like. Users report that hash, which generally comes in the form of a paste or solid, is often used in hookahs rather than the marijuana generally smoked as a chopped weed. Some users report using a hookah is less dangerous than smoking because the product can be vaporized, thus decreasing smoke damage. A hookah device apparently can either produce smoke or vapor, depending on how it is used. Theoretically, the toxic products of combustion are deleted from the consumption experience when those are eliminated by vaporizing. Then the user gets only cannabinoids, rather than potential toxic byproducts.

Like cigarettes, it is not the primary substance, but the binding products, that are believed to be potentially poisonous and the most detrimental to health. Less elaborate vaporizers, similar to those used for cigarettes, can be purchased to use with marijuana.

**Eating:** Marijuana can be added to food, and is often cooked into sweets such as brownies or candy. The effects are said to take longer to ensue, but last longer than smoking. Evidently, combining marijuana with butter or other fatty products increases the ability of the bloodstream to absorb it. Hashish is reportedly eaten raw or mixed with water, but cooking is said to result in more efficient and noticeable results. The efficacy of fatty products for absorption is why so many dessert kinds of products are used for eating.

Special cooking products are available referred to as "cannaoils" or "marijuana oils." These are cooking oils to which marijuana has been added, and evidently any cooking oil will do for starters. Plant material is combined with pre-heated oil and cooked, often using a double boiler. Marijuana can be added to butter using much the same method, heating both and combining the two using a double boiler, cheesecloth, tea strainer, or other device.

**Drinking:** Since *marijuana resin is soluble in alcohol*, it can be included in alcoholic drinks. Evidently a favored way to do this is to create brandy or other liqueur-type drinks that have added marijuana. Marijuana can also be added to tea, but users are advised to be careful if they also add milk, which makes marijuana more easily absorbed into the body system. Milked tea will produce far more noticeable effects than tea without milk in it. Drinking tea with marijuana is advertised by those who favor its use as a great way to relax and improve sleep.

**Tinctures/Compress/Spray:** Evidently, tinctures are available at most marijuana dispensaries. This is a product in which the cannabinoids have been concentrated into a liquid in alcohol. There are also recipes available for those who want to make the product at home. Users favor tincture because there are no deleterious effects on the lungs, and a little bottle of fluid is less likely to be noticed by law enforcement than a questionable cigarette. A drop is placed on the tongue, and the effects are said to be felt within around fifteen minutes and have a fairly rapid peak. The same general response is reported with mouth spray. Compresses are generally a liquid form of cannabis placed on/in a cloth, and rubbed on the selected spot. This is reported to reduce pain in the spot where it is applied.

**Seeds:** Marijuana seeds are marketed as a source of nutrients, increasing energy for the day, and decreasing the likelihood for some illnesses. Seeds are reported to contain the "essential amino acids", and it is suggested they be added to salads or other dishes, much like other kinds of seeds. However, publications that market seeds usually add a warning that users should be careful about how much they consume, and should check with health professionals before using.