

Marijuana and the Schools and Universities

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When October 17, 2018 rolls around using Marijuana will be a legal leisure activity for Canadians over the age of 18. But what will be the implications for our schools and universities?

Some years ago, when the age of majority was changed from 21 to 18 for Canadians one of the worries was that an eighteen-year-old could easily purchase beer or other alcoholic drinks and pass them down to sixteen or seventeen years old school students. It was feared that the effect of changing the age of majority was to put younger and younger young people at risk for alcoholism or traffic accidents. So far as I know this did not particularly occur. There does not appear to be an alcohol problem affecting the early teens in the schools across Canada.

It does not follow that we can neglect the possibility that marijuana, which soon can be legally purchased by an eighteen-year-old, will be passed along to younger teenagers in Canadian schools. But one supposes that the proper response to the possibility is for the schools of the country to make it a point to educate their charges on the uses and dangers of marijuana, both as a medically useful substance and as one that poses some dangers if taken in a large dose in any of its forms. For example, driving an automobile may be of special concern if the many television programs that discuss how the police are going to handle drivers influenced by the excessive use of marijuana is any indication.

So far as I know there have been as yet no comprehensive studies concerning the effects on judgment and coordination of marijuana ingestion either by breath or digestion. But this is the sort of thing that the universities might consider important to consider for future research. There are interesting anecdotes that suggest that the effects on athletic performance are not necessarily negative in spite of its being classified in recent police discussions in similar terms to alcohol. For example, in the 1998 Winter Olympics in Nagano a young British Columbia man, Ross Rebagliati, won the first snowboard cross championship in spite of his testing positive for tetrahydrocannabinol as it was not on the list of banned substances. It has since been added. But the

important point is that it has never been thought of as a performance enhancing substance.

The University of Calgary has recently produced a salutary eBook called “Cannabis Legalization: A policy Primer” that purports to inform members of the university community about the health risks of using it, the medical potential of the many substances that it contains, the role of advertising and communication in its sale and delivery and the international context in which legalization in Canada will occur. For example, on the latter point Canadians who cross into the United States, even if they cross into a state that has legalized the substance, they may find themselves turned back at the border if they have apparently used the substance or even if they own shares in an American company that sells some form of cannabis in the United States. The substance is illegal federally though here and there legal in some states.

The most important considerations in the Canadian province of Alberta where this journal originates can be seen at the Alberta government’s website “Cannabis legalization in Canada” where it outlines four key concerns of the government, namely: keeping cannabis out of the hands of children, protecting public health (including using cannabis were appropriate for the treatment of diseases and disorders), promoting safety on roads, in workplaces and in public spaces (parallel to the government’s treatment of alcohol) and limiting the illegal market for cannabis (which is presently a problem in most countries of the world including Canada).

Perhaps the most important consideration is the removal of criminal penalties for using it as a recreational drug. The difficulty with the criminalization of substances that people want to consume in general is that such penalties mean that it can only be obtained from the criminal market, often run by gangs. These gangs can have various origins—including motorcycle organizations, secret societies and other cultural groups associated with countries of origin-- but when they can make a great deal of money selling illegal drugs they often turn to other dangerous activities including gang wars, gun running and contract killings among other things.

About many of the interesting matters to be studied when cannabis is legalized in Canada are many medical questions. So far there is no evidence that cannabis offers any special risk in heart disease, lung cancer or head and neck cancer in spite of the fact that like cigarettes it is often smoked. This is very good news. On the other hand we have

some sense that taking too much may lead to impaired driving, apparently potentially disturbing interactions with a number of other drugs occurs (including anti-Parkinson's substances like levodopa and anti-epileptics like carbamazepine), perhaps testicular cancer is correlated with its use, and it may affect memory and other psychological functions and perhaps lower the birthweight of babies whose mothers used it during pregnancy. These are all considerations for university institutions, especially those with medical schools and their research activities, to be actively engaged in studying.

There has been much speculation that someone beginning with cannabis, perhaps a school child or teenager, might progress to other drugs. The problems with this "gateway" argument is that many factors might be involved in such progress however one began including social, family and genetic factors or circumstances. Again the proper approach is to keep the drug out of the hands of the criminal underworld, control it in the context of family and state, and study its use in context while making the educational side of its use clear and importantly available in our schools and post-secondary institutions.

There are some medical benefits to using cannabis that are being taken advantage of already including mitigating the effects of chemotherapy in cancer treatments by minimizing the nausea and vomiting associated with it. As well chronic pain sufferers have shown considerable benefits to cannabis use and the spasticity in Multiple Sclerosis and paraplegia is often minimized. These are remarkable benefits to great sources of human suffering and are to be cheered whenever they occur. While these are not especially educationally or research related discoveries as they seem to be undoubted benefits, nonetheless there is much that can be done as regards spreading the general knowledge of these positive attributes of use of this centuries old substance that has been used by our species for a very long time.

We can look forward to our progressive governments acting responsibly in spreading the knowledge we already have widely in our schools and other educational institutions and in carefully protecting us from misinformation and dangers while supporting research of the kind that we need in this regard.

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