

CONNECTION LEARNING HEALTH SYSTEMS HUB-WIDE DATA SNAPSHOT TALKING ABOUT CANNABIS



The data below were collected from the Connection Learning Healthcare System Hub, which consists of Coordinated Specialty Care programs in Maryland and Pennsylvania.

We explored communication about cannabis use between young people with first episode psychosis receiving Coordinated Specialty Care and family members due to important cannabis x psychosis risks. In separate semi-structured interviews, CSC participants (n = 15) and parent participants (n = 16) discussed experiences talking about cannabis use, what was useful and not, concerns, preferences, and how such conversations could be more positive and productive. Four prominent themes emerged:

01 Respect for Developing Autonomy

CSC participants want parents and treatment teams to respect their viewpoints and autonomy concerning cannabis.

CSC participants need to feel that their experiences, perspective, and values are heard and appreciated.



CSC participants decisions about changing or quitting cannabis use must be made for themselves, not in acquiescence to others' pressure.

"There can be an air of judgmental-ness, I think, or the worry that I might become out of control...It can feel like there's not a whole lot of trust.[But] I definitely liked how she [current provider] took a neutral stance...She was like, 'this is your decision to make. I can't make this decision for you...it's about you figuring this out for yourself.'"

02 Good Information about Cannabis and Its Effects

Information about the effects of cannabis on thinking, mood, behavior, health, and psychosis.



CSC participants want unbiased information (benefits, harms, and risks) delivered non-judgmentally to make their own informed decisions.

Parents feel unsure of how to respond to assertions that cannabis is health-promoting, not addictive, or helpful for anxiety.



CSC participants and parents also advocated having CSC participants and parents in the same conversation with informed providers so they receive the same information simultaneously, ensuring equity of information access and reducing debates about the facts.

03 Good Communication Process

CSC participants and parents say good communication is essential for constructive conversations about cannabis.



Use of a caring, accepting, nonjudgemental tone; listening and discussing rather than telling, instructing, or persuading.

Providers as helpful liaisons between CSC participants and parents when cannabis conversations were tense.



"They [providers] should provide a safe haven for those conversations to happen...like in my program, they'll invite the parent in and create a neutral environment to talk about issues like this."

04 Conversations Complicated by Changing Norms

Acceptance of cannabis leads CSC participants to see it as health-enhancing + legalization as evidence of its harmlessness.



Parents worry children are not open to their concerns. CSC participants said their family members dismissed the ways cannabis helps them.

At the same time, several CSC participants described quitting or reducing cannabis use once they understood their particular risks, despite changing social norms.



...it's his friends, people at his job, I feel like it's in the music, it's in the songs, it's popular, it's becoming more and more acceptable, and it's being legalized. So for me it's just kind of like it's harder to make the argument to stop."