

Marijuana Use Prevention

Marijuana Prevention Considerations for College Campuses: An Interview with Jason Kilmer, Ph.D.



A telephone interview was conducted on May 22, 2015 with Dr. Jason Kilmer, Assistant Professor of Psychiatry at the University of Washington. Dr. Kilmer was asked about his work in the prevention field, marijuana legislation in the state of Washington, recent trends in marijuana use on college campuses, health consequences of marijuana use, and strategies for prevention.

This document is part of a series designed to support Minnesota's Partnership For Success grantees working on marijuana use prevention on college campuses. More resources from this series can be found in the Toolbox at SUMN.org

Moving Beyond "Just Say No"

Dr. Kilmer's interest and introduction to the field of prevention started as a college undergraduate student. Dr. Mary Larimer, a graduate student at the time, presented to his class about a research project underway exploring alternatives to the "just say no" prevention approach. Such abstinence-only programs were not producing the intended impact. Kilmer became interested in exploring ways to reduce the danger and risk involved in drinking among college students. As a graduate student, Kilmer studied under Dr. G. Alan Marlatt who developed BASICS (Brief Alcohol Screening Intervention of College Students) and the Alcohol Skills Training Program; as such, Kilmer had a role in developing, implementing and evaluating BASICS.

His interest in looking at drugs other than alcohol started when there was some speculation about the extent of use of marijuana on college campuses. Dr. Kilmer spoke of the strong body of research looking at normative misperceptions of drinking, but noted a limited number of studies looking at misperceptions related to marijuana use. His research started looking at normative perceptions for marijuana use, which led to research on risk perception. Kilmer served as a co-investigator with colleague and friend Christine Lee, developing interventions to address marijuana use. He noted, "When the real world changed, especially in my state, we felt very lucky to have been ahead of the curve in starting that research. But really, the quest for effective prevention and intervention has never been more clear."





An Interview with Dr. Jason Kilmer, continued

Why is Marijuana Use a Big Deal?

Dr. Kilmer stressed that there is still so much that the prevention community needs to learn and know about marijuana, as limited research has been done to date. Even the research on medical uses of marijuana is limited. Unlike alcohol, there are few science-based strategies for reducing harm related to marijuana use. "Any steps towards less frequent use, less potent use, overall amount used, would be a step in the right direction," Kilmer noted.

Regarding the potency of today's marijuana, Dr. Kilmer shared findings from the University of Mississippi Potency Monitoring Program. They found that in the early 1990s there was about 3% to 3.5% of THC in marijuana; in comparison, they found levels of 12% THC in 2012. A recent article on the potency of marijuana sold in stores in Washington State found levels of THC content at 16%. He stressed the need for research on what it means for people to use marijuana at these potency levels, pointing out that the marijuana of today is not the marijuana of the past.

Kilmer addressed some of the misperceptions of marijuana as a safer drug. Regardless of the perception among some that marijuana is "natural," and therefore safer, Dr. Kilmer strongly recommends taking a look at the science behind THC's effect on the brain, which is widespread. There is also a perception that marijuana is safer than alcohol. He notes that we have to clearly define an unwanted effect: while we don't see the same lethal overdose risk with marijuana that we see with alcohol, there is research that shows the effects of marijuana linger much longer than the effects of alcohol. He elaborated, "In the context of a college student, we want to know what issues that student is dealing with and what ways a trace of a substance exacerbates any of those issues." As a field, Kilmer said, we need to figure out the varying potencies, all of the ways in which people are using marijuana, and their physiological effects.

Washington State Story

In November of 2012, Washington voters passed initiative 502, which set in motion a three-tiered system that brought recreational marijuana to public sale. Thirty days after the initiative passed, it became legal for people over the age of 21 to use and possess marijuana. However, Dr. Kilmer pointed out that it was still illegal to buy or sell marijuana. This created a gray area until the first store opened in July of 2014. That meant 19 months of legalization when there was no state-recognized way to obtain marijuana.





Initiative 502 legalized a system of producing, processing, and retailing marijuana, and decriminalized possession of one ounce of marijuana. Kilmer pointed out that the system of producer, process, and retail licenses is very similar to the system for alcohol production and sales. Washington has strict regulations in terms of advertising, in that retailers' signs can only be a certain size, and stores can't be within a certain distances of places like schools. However, some things weren't addressed in the initiative. Dr. Kilmer noted that advertisements are showing up in newspapers and magazines distributed in Washington. Research has shown that alcohol advertising impacts youth use, but "What's the impact of this completely uncharted territory of marijuana advertising?" he asked.

Despite the passing of initiative 502, the University of Washington made clear that this did not change campus policies; use and possession of marijuana continues to be illegal on campus. The university has to follow federal guidelines. Failure to do so can result in loss of federal funding, including grants and financial aid. Dr. Kilmer cautioned that means there's the potential for exposure to mixed messages; on campus it's illegal for people of any age to use or possess, but just across the street from campus it is legal to possess. "We have to be mindful of mixed messages students are getting, and emphasize the consistent enforcement of policies on our campuses," Kilmer stressed. That means looking at which policies are in place, both on campus and statewide.

How Do Students Use Marijuana?

Dr. Kilmer noted that researchers at the University of Washington are trying to collect data on the scope of different routes of administration among 18 to 25 year-olds. In the past, marijuana was generally consumed by smoking a joint or smoking with a bong. They are trying to learn more about use of vaporizers, edibles, marijuana infused drinks, and hash oil dabbing. He shared, "It's important to keep in mind that different routes of administration result in very different effects." Individuals smoking marijuana through a vaporizer feel the effects very quickly. However, with edibles there is a significant lag, which can lead to over-consumption before the effects kick in.

Regarding perceived risk of harm, Dr. Kilmer noted that some students have said they use marijuana instead of tobacco because they don't want to get lung cancer, not realizing there is carcinogen exposure from marijuana use as well. He also questioned what new risks students introduce themselves to by using edibles. Historically in the prevention field, practitioners look to see

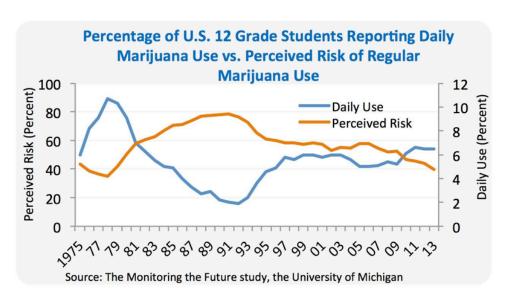




what the research says and then respond. Kilmer shared, "This is a case where the real world is getting so far ahead of what the science indicates that we're playing catch up as an academic community." This makes it challenging for prevention practitioners to make purely science-based recommendations and guidelines.

What Should the Prevention Community Do?

Dr. Kilmer recommends the prevention community try to anticipate needs as early as possible, and as much as possible. In Washington, they tried to make sense of the arguments being made in favor of marijuana. There was a sense that the "war on drugs" was not being completely effective. Also, there was a discrepancy in arrest rates, and who made up the prison population for marijuana-related charges. Therefore, Initiative 502 was approached as a social justice issue. Another argument being made was that adults should have the right to choose what they wanted to use. Arguments were also made about possible revenues from taxing the sale of marijuana. Kilmer noted that arguments against legalizing recreational marijuana were generally around implications for medical marijuana users. The initiative had some very strict driving under the influence guidelines; individuals reporting medical use felt this would make it impossible for them to ever be able to drive without breaking the law.



What the prevention community in Washington was trying to do, Kilmer shared, was to look very hard at what this meant for marijuana use in their state. He noted that the Monitoring the Future study out of the University of





Michigan issued a statement that "essentially warned Washington and Colorado to be mindful of the impact it was having on youth." The study has over 30 years of data showing that each year perceived harm from using marijuana goes down, the very next year use of marijuana by youth increases. Similarly, every year that perceived harm goes up, the very next year use by youth goes down. Consequently, he said, when the majority of adults in a state vote for recreational use, it sends a message to youth about adults' sense of harm.

In conclusion, Dr. Kilmer stated, "The alcohol field has identified so many prevention and intervention successes, particularly for use by college students. The body of literature for marijuana is very, very different. For marijuana, we don't have these multiple randomized control trials showing an impact." There's a need to identify what works, and to educate people about marijuana use and policies in order to put effective prevention into place.

