

01 Background: Cannabis is the most widely used illegal drug in the UK and comes from the cannabis plant. ([NHS England](#)). The main active chemical in it is tetrahydrocannabinol otherwise known as THC.

Appearance: Different forms of cannabis are hash, grass/weed, and skunk and cannabis oil. Most people mix cannabis with tobacco and smoke it; others smoke it using a vaping pipe or pens, some use a type of pipe called a 'bong', drink it or eat it in food.

Effects/Risks: Tobacco & cannabis share some of the same chemicals that have been linked to lung diseases, lung cancer and coronary heart disease.

Mental health: Cannabis can mess with your mind and your mood and regular use can increase the risk of developing psychotic illness, such as schizophrenia.

Legal: Cannabis is a class B drug; it is illegal to have for yourself, give away or sell. Possession is illegal and the penalty is up to five years in prison

02 Why it matters: Cannabis, alcohol other associated depressant substances affect the brain and potentially impact on an individual's ability to make wise decisions.

Practitioners need to be mindful that although adults who use cannabis may have intrinsically good parenting skills— they may be unable to exercise them consistently.

A number of [local](#) and national Serious Case Reviews (SCRs) have identified learning around the use of cannabis by parents. Typically, reviews have highlighted the need to increase practitioner awareness of the risks posed to children, their confidence to effectively challenge parents during assessments and to identify 'disguised compliance' and their understanding of the 'cycle of change'.

07 What to do?

- Discuss cases in supervision
- Use SMART planning
- Keep the focus on what needs to change for the child

[Parental substance misuse](#)

[How cannabis and cannabis-based drugs harm the brain](#)

[Long term cannabis use](#)

Questions:

- Do assessments address cannabis use?
- What do you know about the types of cannabis & their effects & impact on parenting, particularly in relation to babies & young children?
- How and when are parents sourcing cannabis and who/ what risks does this potentially bring the children into contact with?
- How much is spent on cannabis? What's the impact on family budget?
- Where is the child when parents are using cannabis?
- Why/ when/ where /is the child at risk
- Are there signs of non-compliance or disguised compliance?
- Which other professionals need to be involved in order reduce risks?
- Do your personal attitudes have an impact on your assessment?
- What needs to be done to reduce the risks?

Information:

- There is evidence linking cannabis and passive smoking to sudden infant death syndrome. All parents need to be aware of the potential consequences of not adhering to [safe sleeping](#) practice.
- [Research](#) indicates that the presence of two parents who use substances is a particular risk for children.
- Studies have also found an increased likelihood and frequency of illicit drug use, inhalant use and cigarette smoking if a parent misused substances.
- Parents may minimise the effects and impact on the drug on their parenting

Information:

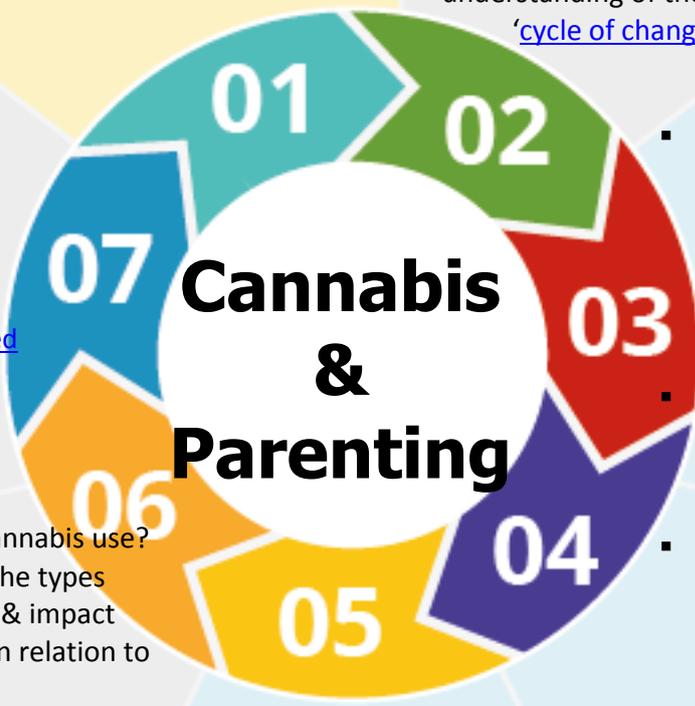
Local & National Services:
[Turning Point](#) Advice & Treatment Service

[Early Break Young People's Drug & Alcohol Service](#)

[Greater Manchester Fire Service Safe & Well Visits](#)

[NHS Advice on Stop Smoking Treatments](#)

[Lullaby Trust Safe Sleep Advice](#)



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