

Understanding Cannabinoids

While cannabinoids are no longer included on the NCAA list of banned substances, the NCAA does not condone the use of cannabis by student-athletes. Instead, removing cannabinoids from the banned substance list was part of a shift to emphasize harm-reduction strategies within a comprehensive approach to preventing, identifying and managing problematic cannabis use at the campus level. The NCAA Committee on Competitive Safeguards and Medical Aspects of Sports extensively studied this issue and its recommendation to remove cannabinoids from the NCAA list of banned substances was informed by subject-matter experts, including medical providers and scientists, substance misuse experts and membership practitioners.

The updated NCAA Drug-Testing Manual addresses cannabinoids like other non-performance enhancing drugs such as alcohol and recognizes that a campus-based **harm reduction approach** may be more effective in preventing, identifying and managing problematic cannabis use.

POTENCY

Cannabis products have become significantly more potent over the past decade, with THC content rising from 1.5% in the 1970s to 21% in 2018.² Use of **high-potency products and high-potency routes of administration** (e.g., edibles, dabs, concentrates) **increases the risk of addiction and psychosis**.

LEGALIZATION AND SOCIAL IMPACT

Legalization, marketing and increasing prevalence of cannabis use impact the social environment in which student-athletes are making decisions about cannabinoid use. Education on modern cannabis and its risks is crucial.

IMPACT ON HEALTH AND PERFORMANCE

Cannabis use can harm student-athletes' mental and physical health and impair performance. Early use, frequent use and/or use of high-potency products is associated with more harmful health and performance outcomes. Cannabis use is not scientifically supported for treating mental health issues and may negatively affect restorative sleep. Its effectiveness for pain management remains inconclusive.

SCREENING AND HARM REDUCTION

Open communication, education, screening tools (e.g., CUDIT-R) and drug testing at the campus level for student-athletes are harm-reduction strategies that may provide more effective pathways for the prevention, identification and management of problematic cannabis use. Schools should have a plan for positive screenings and/or drug tests.

CANNABINOID INSIGHTS

The cannabinoids class includes cannabis (marijuana); therefore, the NCAA no longer tests for substances chemically/pharmacologically related to the cannabinoids class, which would include THC (the psychoactive substance in cannabis) at NCAA championships or any other NCAA Division I, II or III drug-testing event.

Cannabinoids - The cannabis plant contains over 100 chemicals (THC, CBD, CBG, CBL, CBN, etc.). Two of the most commonly discussed:

- **THC** - The primary psychoactive component that produces a 'high'.
- **CBD** - A chemical found in cannabis and has no psychoactive effect (high).

Marijuana is one of many non-scientific terms for the cannabis plant.

Hemp vs. cannabis - Hemp is a cannabis plant that contains less than 0.3% THC. Cannabis contains a higher amount of THC.

Reported use of **synthetic cannabinoids** has risen significantly since 2017 among student-athletes. This includes the delta variants (e.g., delta-8, delta-9).¹



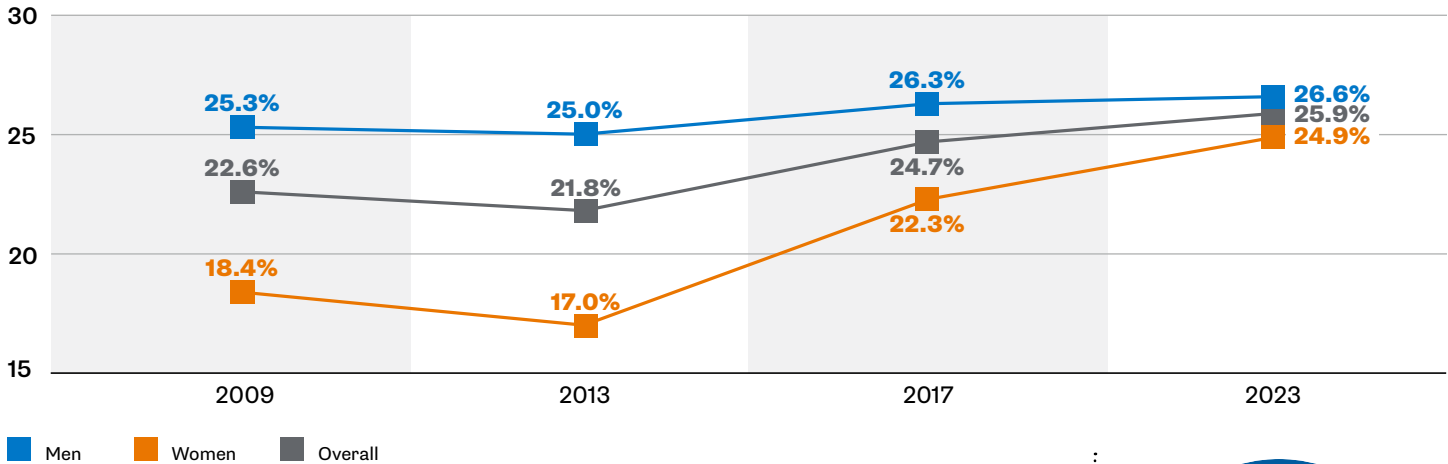
¹ NCAA Research. (2024, January). *Current findings on student-athlete substance use*. NCAA.org. https://ncaaorg.s3.amazonaws.com/research/wellness/Jan2024RES_HW-SubstanceUseRelease.pdf

² American Academy of Family Physicians. (2021). *What's New on This Topic?* https://www.aafp.org/pubs/aafp/issues/2021/1200/p598/jcr:content/root/aafp-article-primary-content-container/aafp_article_main_par/aafp_tables_content_enlarge.html

USE NORMS

Cannabis Use by Sport Gender (Inhaled or Ingested Within the Last Year)

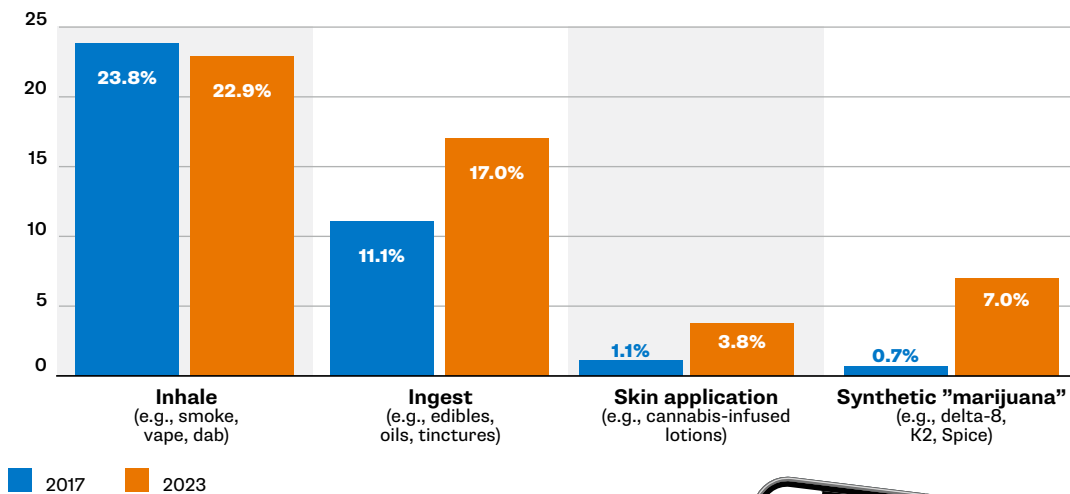
Most student-athlete respondents in a 2023 NCAA survey reported that they had not used cannabis within the last year.



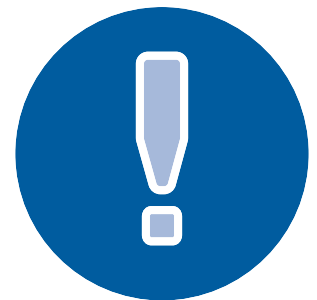
Note: Marijuana use includes those who reported inhaling (e.g., smoke, vape, dab) or ingesting (e.g., edibles, oils, tinctures) "marijuana or other cannabis products." The use of cannabis applied to skin (e.g., cannabis-infused lotions) or synthetic marijuana (e.g., delta-8, K2, Spice) are not included in these rates. Sources: NCAA Student-Athlete Substance Use Studies (2009, 2013, 2017) and NCAA Student-Athlete Health and Wellness Study (2023).

Cannabis Use by Method

Use by methods of inhalation (e.g., smoke, vape, dab) has remained steady since 2017, while use by ingestion (e.g., edibles, oils, tinctures) has increased (from 11% to 17%). Synthetic marijuana (e.g., delta-8, K2, Spice) use also has increased from less than 1% to 7%.



Sources: NCAA Student-Athlete Substance Use Study (2017) and NCAA Student-Athlete Health and Wellness Study (2023).



If you feel that you or someone you know is using cannabis in a way that interferes with daily functioning, talk to a trusted administrator, counselor or licensed mental health professional about resources available on your campus or outlined in your mental health action plan.



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