

Opinions on Marijuana, Legalisation and Usage – Research Carried Out Among Athletes

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KEY WORDS: marijuana, nicotine, alcohol, illicit drugs, sports

ABSTRACT - The aim of this research was to establish the standpoints of active athletes towards marijuana including its usage and legalisation. The survey included 2231 respondents who provided 1241 appropriately filled out questionnaires (55.62%). The total number of respondents included 846 (66%) men and 435 (34%) women. Marijuana is used on a slightly smaller scale than alcohol and cigarettes. 53.6% of the surveyed athletes never tried marijuana, which is used daily by 6.1% of the surveyed athletes. The usage of heroin, cocaine and different stimulants is significantly smaller. Athletes predominantly believe that marijuana has both positive and negative effects, as well as medical benefits. They also approve marijuana legalisation for medicinal purposes. They think athletes do not often use marijuana. Our research confirms past research about the positive influence of sport on the usage of different legal and illicit substances. When asked what they thought about marijuana legalisation, the respondents put marijuana legalisation for medicinal purposes before legalisation for personal usage.

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KLJUČNE BESEDE: marihuana, nikotin, alkohol, prepovedane droge, šport

POVZETEK - Namen te raziskave je bil ugotoviti stališča aktivne športne populacije do uporabe marihuane in njene legalizacije. Anketo je izpolnilo 2,231 anketiranih, 1,241 anket je bilo pravilno izpolnjenih (55.62 %). Skupno je na anketo odgovorilo 846 (66 %) moških in 435 (34 %) žensk. Uporaba marihuane je nekoliko manjša od uporabe alkohola in kajenja cigaret. 53.6 % anketiranih športnikov marihuane ni nikoli poizkusilo, dnevno pa jo uživa 6.1 % anketiranih športnikov. Uživanje heroina, kokaina in različnih stimulantov je pomembno manjše. Športniki večinoma menijo, da ima marihuana tako pozitivne, kot tudi negativne lastnosti, da je marihuana lahko koristna za nekatere medicinske namene in da odobravajo legalizacijo marihuane za medicinske namene. Anketirani športniki nizko ocenjujejo potrebo po splošni legalizaciji marihuane za osebne namene. Naša raziskava potrjuje predhodne raziskave o pozitivnem vplivu športa na uživanje različnih dovoljenih in nedovoljenih substanc. Pri pomembnem družbenem in strokovnem vprašanju glede legalizacije uporabe marihuane, anketirani dajejo prednost legalizaciji marihuane za medicinsko uporabo in ne legalizaciji za osebno uporabo.

1 Introduction

According to the survey on tobacco, alcohol and other drugs, 16.1% of the Slovenian population aged between 15 and 64 tried one of the illicit drugs at least once in their life (at least 20% of men and 12.2% of women). Most of the respondents who consumed illicit drugs at least once in their life tried cannabis or hashish. Cocaine and ecstasy were used by 2.1% of people in Slovenia. 1% consumed LSD, 0.9% amphetamines and 0.5% heroin (Drev, 2013).

Drug use and abuse represent a risk for people of all ages. However, adolescents are particularly vulnerable to substance abuse (Usher, Jackson & O'Brien, 2005). In

2011, European School Survey Project on Alcohol and Other Drugs (European Monitoring Centre for Drugs and Drug Addiction, 2011) was conducted for the fifth year in a row. According to the research, 24.8% of the surveyed high school students aged 15 to 16 had already tried one of the illicit drugs. However, in comparison to the average recorded in other ESPAD countries, Slovenia stands out in the long-term use of inhalants and cannabis. 20% of high school students reported a life-long abuse of inhalants, and 23% reported a life-long abuse of cannabis (Drev, 2013).

Cannabis can have short-term and long-term health effects. The most obvious short-term health effect of cannabis is intoxication, marked by disturbances in the level of consciousness, cognition, perception, affect or behaviour as well as other psychophysiological functions and responses. Long-term health effects are those that arise from regular cannabis use – especially daily use – over a period of months, years or decades. Long-term cannabis use is a contributory cause of the following health outcomes: dependence, cognitive impairment, mental disorders (psychoses, depression, anxiety and suicidal behaviour) and adverse physical health effects such as cardiovascular disease (CVD), chronic obstructive pulmonary disease and respiratory and other cancers (WHO, 2016).

Even though cannabis is often thought of as not very addictive, it has been shown that 10% of those who ever try cannabis become daily users, while 20–30% become weekly users (Hall & Pacula, 2003). Worryingly, a study has shown that the rate of progressing to daily use is as high as 17% if cannabis use is begun in adolescence (Anthony, 2006).

There have been many contradicting reports about cannabis and its association with the so-called “gateway theory”, which states that cannabis, along with alcohol and tobacco, is a gateway substance to other harder illicit drugs, such as cocaine and heroin (Fergusson, Boden & Horwood, 2006).

It has been found that the earlier people try cannabis, the more likely they are to use heroin and cocaine later in life (Kandel et al., 2002; Hall & Degenhardt, 2009).

According to the World Health Organization (WHO), 147 million people or 2.5 percent of the world population use cannabis (marijuana), making it the world's most widely cultivated, trafficked and abused illicit substance (WHO, 2018).

Cannabis is one of the three major risk factors for developing early onset schizophrenia (before the age of 18), with the other two being genetics and the period of adolescence itself. However, it is to be noted that, with an early onset of schizophrenia, the role of genetics plays a much greater role than later in life (Remschmidt, 2001; Gregorič Kumperščak, 2013). One of the explanations as to why cannabis use could trigger psychosis is the close proximity in the brain of the cannabinoid and dopaminergic systems (McGrath, 2010; Shapiro & Buckley-Hunter, 2010). Cannabis consumption can acutely cause a transient psychotic episode in healthy individuals and cannabinoids can exacerbate symptoms in individuals with an established psychotic disorder. It can also potentiate, trigger a relapse and have negative consequences on the course of the illness (D'Souza, Sewell & Ranganathan, 2009).

Epidemiologic studies of the general population and those based on the clinical assessment of schizophrenic populations have revealed a high degree of overlap between schizophrenia and addictive disorders. The abuse of psychoactive substances (including alcohol) throughout life is so frequent (50%) that the possibility of a specific link inevitably arises (Batel, 2000). Much research has suggested that the use of cannabis increases the risk of schizophrenia. In a recent study, the prevalence of schizophrenia and related disorders was 1.1% in those with cocaine use disorders and 5.2% in those with cannabis use disorders (Libuy, De Angel, Ibanez, Murray & Mundt, 2018). However, the prevalence of schizophrenia is less than 1% of the general population (Kessler, 2005; Saha, Chant, Welham & McGrath, 2005; McGrath, Saha, Chant & Welham, 2008).

In an increasing number of states and countries, cannabis stands poised to join alcohol and tobacco as a legal drug (Curran et al., 2016). Policies regarding cannabis use are rapidly changing, yet public officials have limited access to scientific information that might inform the creation of these policies. One important area in which to begin investigations is the link between recreational cannabis use and health, specifically exercise (Gillman, Hutchison & Bryan, 2015).

Prior to the Slovenian parliamentary elections in 2018, some political parties proposed the legalisation of cannabis (MMC RTV SLO, 2018; Rabuza, 2018) or addressed certain initiatives. These initiatives refer to a different cannabis statutory definition in Slovenia: the first would allow cannabis to be grown for medicinal purposes, the second would allow cannabis to be cultivated for personal use. The signatories of the Cannabis regulation declaration advocate a legislation that would enable cannabis production and processing for medicinal and research purposes and the regulation of cannabis in terms of economy and adult use (Lovrenčič, 2018). These proposals were opposed by the Slovenian Ministry of Health and medical organisations united in a Coordination of medical organisations (Medical Chamber of Slovenia, Medical Association of Slovenia, the Fides Trade Union, the Professional association of private physicians and dentists of Slovenia) (Žurnal24.si., 2018), the National Institute of Public Health and the University Medical Centre Ljubljana (Lovrenčič, 2018).

According to a smaller study (2016), the majority of the respondents believe that marijuana usage should be legal in Slovenia. The majority would legalise it completely, including recreational use (app. 46%), while about 42% would legalise it for medical purposes. 12% of the respondents thought that marijuana usage should remain illegal (Delo, 2016).

Our study examined the opinion of athletes on cannabis. The reduced use of illicit drugs among athletes and the positive effects of sports on treatment have already been examined by Naele et al. (Neale, Nettleton & Pickering, 2012) and Gabrovec (Gabrovec, 2016).

Individuals reported diverse advantages of sports both on health and in social terms, and also observed that sports and exercise helped them reduce their heroin abuse. Sports were the most commonly reported type of activity (Neale et al., 2012).

Only 15 published studies have investigated the effects of THC in association with exercise protocols. None of them showed any improvement in aerobic performance. Some subjects could not complete the exercise protocol because of adverse reactions caused by cannabis (Kennedy, 2017). Sport and exercise are cross-sectionally and longitudinally associated with a low prevalence of at-risk use of cigarettes and cannabis. Taking a substance use prevention perspective, the promotion of sport and exercise among young adults should be encouraged (Henchoz et al., 2014). An analysis revealed that being part of a competitive sports team was related to a lower probability of marijuana initiation. The analysis suggests that young people involved in sports are less likely to use marijuana over time (Lisha, Crano & Delucchi, 2014).

2 Materials and Methods

2.1 Subjects and sample

The study included a population of athletes of all ages who do sports on a recreational or competitive level. The purpose of this research was to establish the opinion of athletes on marijuana usage, legalisation and other standpoints. The web survey was undertaken by 2231 respondents, who provided 1241 appropriately filled out questionnaires (55.62%). The total number of respondents included 846 (66%) men and 435 (34%) women.

The age of the respondents: 10 to 15 years (51 respondents – 4%), 16 to 20 years (387 respondents – 30.2%), 21 to 30 years (258 respondents – 20.1%), 31 to 40 years (216 respondents – 16.9%), 41 to 50 years (189 respondents – 14.8%), 51 to 60 years (132 respondents – 10.3%), 61 years and more (48 respondents – 3.7%). The survey included 39 (3.0%) primary school students, 312 (24.4%) high school students, 213 (16.6%) university students, 45 (3.5%) unemployed, 612 (47.8%) employed and 60 (4.7%) retired individuals. Together, the respondents engaged in 34 different sports activities, of which the following were most common: athletics, volleyball, martial arts, shooting sports and cycling. 12.9% of the respondents engaged in sports activities on a daily basis, 13.6% six times a week, 15.1% five times a week, 19.4% four times a week, 17.8% three times a week and 21.3% two times a week. 44% of the respondents were involved in competitive sports and 56% in recreational sports.

2.2 Study procedures

The study used non-experimental quantitative research and a questionnaire used for data collection. The research was carried out by means of a web survey with a non-standardized questionnaire. The questionnaire was designed based on the literature on drug addiction, therapy, illicit drugs, cannabis and testing for illicit drugs (European Monitoring Centre for Drugs and Drug Addiction, 2002; Lora-Tamayo et al., 2004; Staack & Maurer, 2005; Rupnik, 2008; Auwarter et al., 2009; Gabrovec, 2015; Gabrovec, 2015) The link to the web survey was sent by the Olympic Committee of

Slovenia to sports-related associations in Slovenia, who were asked to send the survey to their athletes. The study was carried out in March 2018.

The questionnaire comprised 32 questions, divided into five sets: questions relating to the frequency of using certain types of drugs (never, once in a lifetime, in the last 12 months, in the last 30 days, in the last week, every day); questions pertaining to the drug-related situation (cannabis use among other athletes and friends as well as the estimation of harmful effects of these substances and other general opinions about legalization, positive and negative effects), the users' expectations, etc.; questions concerning the use of different types of drugs (age of first consumption); questions relating to the sports activity (which sport they practice, what the frequency of their activity is) and questions to obtain demographic data. A descriptive Likert-type descriptive scale was used (1 – strongly disagree; 2 – disagree; 3 – partly agree; 4 – agree; 5 – strongly agree).

The study analysis comprised the following: the consumption of various substances according to different time periods; different questions about related substances; establishing the existing correlations between a potential consumption of some substances and certain issues about the substances; a comparison of the average age of first use of certain types of substances according to different sports activities. We further tried to establish any connections between the frequency of cigarette smoking, alcohol consumption and cannabis smoking and the number of training sessions per week; any correlations between cigarette smoking, alcohol consumption and cannabis smoking in connection with gender; and any differences in the abuse of particular substances between the respondents and the general population.

In our research, we also tried to establish the connection between the frequency of cigarette smoking, alcohol consumption and cannabis smoking and the number of training sessions per week. The training sessions were divided into two groups according to their frequency: Group 1 (2 or 3 training sessions per week) and Group 2 (4 or more training session per week).

2.3 Statistical Analysis

The data was analysed using the statistical software IBM SPSS Version 21 and IBM AMOS Version 21 (SPSS Inc., Chicago, IL, USA). The compiled data was processed by means of descriptive statistics, correlation analysis and linear regression. Medium to high reliability was established for Cronbach's alpha (Cencič, 2009), the coefficient of reliability was 0.604 for the first set of questions, 0.795 for the second set of questions and 0.963 for the third set of questions. The significance level was calculated using the statistical significance value of $p < 0.05$.

3 Results

The consumption of various substances according to different time periods is shown in Table 1 (in %).

Table 1: The frequency of consumption of various substances (in %).

	<i>Cigarettes</i>	<i>Alcohol</i>	<i>Marijuana</i>	<i>Heroin</i>	<i>Cocaine</i>	<i>Stimulants</i>
Never	60.9	12.6	53.6	99.1	91.8	90.9
At least once	13.3	5.9	16.9	0.5	4.4	2.6
In the past 12 months	6.3	19	11.5	0.0	2.8	4.7
In the past 30 days	3	28.6	6.1	0.2	0.2	0.7
In the past week	3.7	32.1	5.9	0.0	0.5	0.5
Every day	12.7	1.6	6.1	0.2	0.2	0.7

60.9% of the respondents never smoked cigarettes, 12.7% of them are regular smokers. 12.6% of the respondents never tried alcohol. In the past week, 32.1% of the respondents consumed alcohol. Marijuana usage is on a slightly smaller scale but still comparable with cigarette usage. 53.6% of the respondents never tried marijuana, which is used daily by 6.1% of the surveyed athletes. The usage of heroin, cocaine and different stimulants is significantly smaller. Nearly 1% of the respondents already tried heroin, 8.2% of the respondents tried cocaine and 9.1% of the respondents tried different stimulants.

Furthermore, we examined the different standpoints of the respondents on marijuana. We were interested in its usage as well as their opinion on its use and legalisation, which is an important issue in Slovenia. The results are shown in Table 2.

Table 2: Questions related to marijuana

<i>Questions</i>	<i>Mean</i>	<i>Standard deviation</i>
Marijuana is easily accessible.	3.60	1.12
Marijuana is constantly present among athletes.	2.76	0.96
My friends use marijuana.	2.93	1.36
Marijuana is constantly present among young people.	3.69	0.92
Marijuana cannot lead to addiction.	2.51	1.28
Marijuana is useful for medicinal purposes.	3.84	0.95
Marijuana has both negative and positive effects.	3.64	1.00
Marijuana helps cure cancer.	2.41	1.04
Marijuana is useful for the treatment of certain symptoms of different diseases and conditions.	3.76	0.98
Marijuana production and processing for medicinal purposes should be legalised.	4.07	0.95
Marijuana production and processing for personal use should be legalised.	2.67	1.55

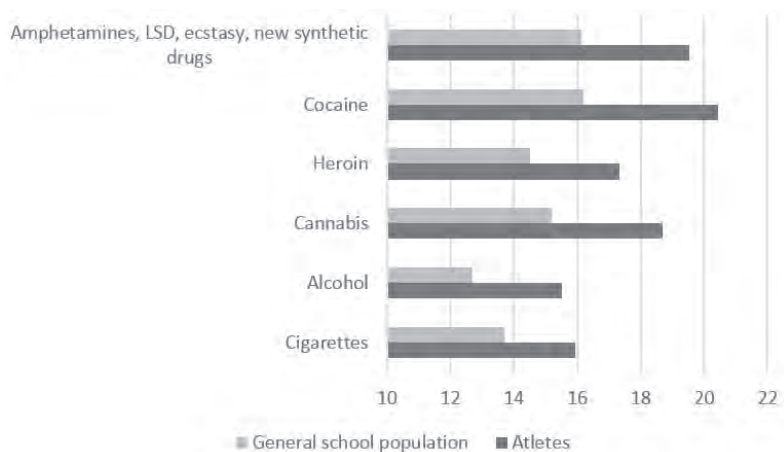
Using a scale from 1 to 5 (1=strongly disagree, 5=strongly agree), the respondents predominantly believe that marijuana should be legalised for medicinal purposes (4.07). A general legalisation for personal use is supported by a significantly smaller

number (2.67). The respondents assess that marijuana is easily accessible (3.60) and especially present among young people (3.69). A smaller number of the respondents (2.76) think that marijuana is present among athletes. Their friends use marijuana frequently (2.93). The value of 3.84 indicates the potential use of marijuana for medicinal purposes and the value of 3.64 for those who agree that it has negative and positive effects. A greater awareness and familiarity with the topic is shown by the low value related to the following statement: “I cannot become addicted to marijuana” (2.51) and “Marijuana does not help cure cancer” (2.41).

We established certain positive correlations between the statements that marijuana is useful for medicinal purposes and that marijuana is useful for treating certain symptoms and conditions ($r=0.682$; $p<0.05$). We also saw correlations between the statements that marijuana is useful for treating certain symptoms and conditions and that marijuana should be legalised for medicinal purposes ($r=0.678$; $p<0.05$). There were also correlations between using cocaine and amphetamines, LSD, synthetic drugs ($r=0.628$; $p<0.05$), the presence of marijuana among young people and using marijuana among friends ($r=0.525$; $p<0.05$), the correlations between personal marijuana use and smoking marijuana with friends ($r=0.516$; $p<0.05$).

We have found certain positive correlations between cigarette and cannabis smoking ($r=0.538$; $p<0.01$), between alcohol consumption and the statement about alcohol consumption with friends ($r=0.583$; $p<0.01$). A high correlation can also be observed between amphetamine, cocaine and heroin consumption (from $r=0.706$ to $r=0.816$; $p<0.01$). Some of the correlations are also shown in Figure 1. The correlations between marijuana consumption in athletes and other variables (friends’ consumption of marijuana, accessibility of marijuana, young people consuming marijuana and usefulness of marijuana for medical use) are shown in Figure 1. E1 represents the observed variable.

Figure 1: Correlation between individual variables



The variables “friends consumption of marijuana”, “accessibility of marijuana”, “youth consumption marijuana” and “the use of marijuana for medical use” represent

64% of variance for “athletes’ consumption of marijuana”. “Friends consumption marijuana” and “accessibility of marijuana” are significant predictor variables (Figure 1).

Figure 2: Comparison of the average age of first use of certain types of substances.

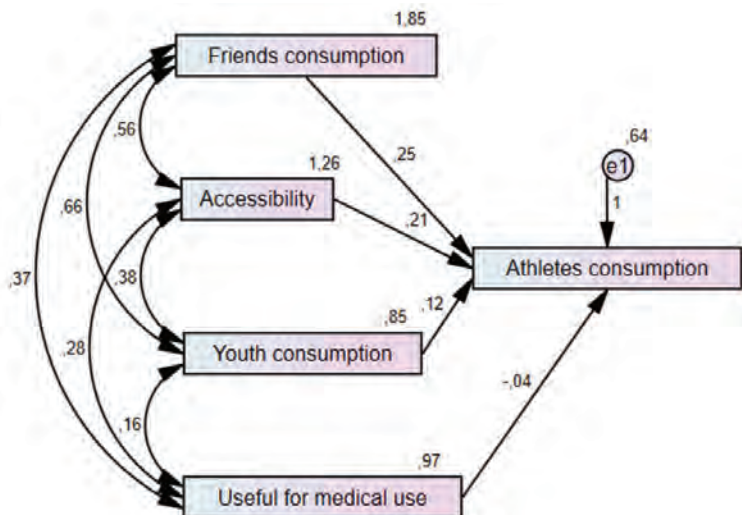


Figure 2 shows the average age of the respondents upon their first consumption of a certain substance. The respondents reported that they first tried alcohol (15.51; Std. dev.: 2.31; n=1140), then smoked cigarettes (15.93; Std. dev.: 4.68; n=813), heroin (17.33; Std. dev.: 2.00; n=9), a bit later marijuana (18.17; Std. dev.: 5.38; n=636), stimulants (18.95; Std. dev.: 5.41; n=114), amphetamines, LSD or synthetic drugs (19.53; Std. dev.: 4.53; n=90), and lastly cocaine (20.45; Std. dev.: 5.26; n=114).

4 Discussion

The paper presents the opinions on marijuana, its legalisation and usage – the research carried out among athletes in Slovenia. Only few studies of this type have been carried out so far, with most of them predominantly focused on the general population; as a result, this study casts fresh light on the field of substance use among athletes.

In recent years, marijuana usage and its legalisation for personal and/or medicinal purposes has been a commonly discussed social and political topic. This is also true for Slovenia. Some political parties promised to legalise marijuana for medicinal purposes during the pre-election period, while others proposed legalising marijuana for personal use. The professional public responded to such promises and initiatives quickly and adequately. This article does not focus on the benefits or hidden dangers of different types of marijuana usage but evaluates the standpoints of the active athletic population on marijuana, including its legalisation for different types of use.

This study established that the population of athletes uses certain legal and illicit substances to a much smaller degree than the general population (a research from EuroBarometer: Eurobarometer, 2014). Nearly one half of the surveyed population of athletes have already tried marijuana and 6.1% of them are using it on a daily basis. The difference in regular marijuana usage between our study and EuroBarometer research is almost 10%. We can attribute the effects of marijuana usage to its good accessibility and usage among friends. The most popular other substances that are being used regularly are alcohol (31.1%) and cigarettes (12.7%). Other substances, such as heroin, cocaine, stimulants, etc., are being used less commonly. Similar results have been found by the research conducted by Lisha & Sussman (Lisha & Sussman, 2010), which shows findings that confirm a higher alcohol consumption rate and a lower cigarette and cannabis rate among young athletes. The standpoints of the athletes indicate that they are reasonably well-informed of marijuana properties. They predominantly believe that marijuana has both positive and negative effects, that it offers benefits for medicinal purposes and they also approve marijuana legalisation for medicinal purposes. They think athletes do not often use marijuana. The athletes participating in the survey believe that the need to legalise marijuana for personal usage is not high. They also think that marijuana usage can lead to addiction. However, this standpoint differs from the one in the study carried out in 2016 with athletes aged from 10 to 25 (Gabrovec, 2016).

By comparison with the Slovenian study (Drev, 2013), less than 20% of the respondents smoked cigarettes or cannabis or consumed alcohol at any point in their lives; however, when this does occur, it occurs at a far later age. Compared to a German study (Wanjek, Rosendahl, Strauss & Gabriel, 2007), a mere 5% difference can be observed between the general population and recreational athletes. Positive effects of sport activity relative to the use of illicit drugs and other substances have already been established by Arvers, et al. (Arvers & Choquet, 2003) as well as our research from 2016 (Gabrovec, 2016). The study also confirms that athletes consume certain substances later than the general population, if/when they do. This research is subject to limitation and mainly relies on a self-report study.

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Mnenja o marihuani, legalizaciji in uporabi – raziskava med populacijo športnikov

Raziskava o uživanju tobaka, alkohola in drugih drog je pokazala, da je 16.1 % prebivalcev Slovenije v starosti med 15 in 64 let enkrat v življenju poizkusilo eno od prepovedanih drog (od tega 20 % moških in 12.2 % žensk). Od teh, ki so enkrat v življenju poizkusili kakšno drogo, je večina poizkusila marihuano ali hašiš. Kokain, pa tudi ekstazi je poizkusilo 2.1 % anketiranih. 1.0 % jih je poizkusilo LSD, 0.9 % amfetamine in 0.5 % heroin (Drev, 2013).

Čeprav se za marihuano meni, da od nje ne moramo postati odvisni, raziskave kažejo, da 10 % tistih, ki marihuano poskusijo, postanejo dnevni uporabniki, med tem ko 20–30 % postane tedenskih uporabnikov (Hall in Pacula, 2003). Zaskrbljujoče je, da kar 17 % mladostnikov, ki poskusijo marihuano, postanejo dnevni uporabniki (Anthony, 2006). Raziskave kažejo tudi na to, da osebe, ki v zgodnji mladosti poskusijo marihuano večinoma kasneje postanejo odvisni še od heroina in kokaina (Kandel idr., 2002; Hall in Degenhardt, 2009).

Marihuana je ravno tako eden od treh rizičnih faktorjev za razvoj zgodnje shizofrenije (pred 18 letom starosti), med tem, ko sta druga dva genetika in obdobje adolescence. Pri zgodnji shizofreniji ima genetika večjo vlogo kasneje v življenju (Remschmidt, 2001; Gregorič Kumperščak, 2013). Ena od razlag zakaj lahko marihuana sproži psihozo, je bližina kanaboidnega in dopaminskega sistema v možganih (McGrath, 2010; Shapiro in Buckley - Hunter, 2010). Uživanje marihuane lahko sproži začasno psihotično epizodo pri zdravih posameznikih, lahko pa tudi poslabša simptome pri osebah z že razvito psihotično epizodo. Marihuana lahko tudi potencira, sproži relaps in ima negativne posledice na potek bolezni (D'Souza, Sewell in Ranganathan, 2009).

Politike, ki se nanašajo na marihuano, se hitro spreminjajo, vendar imajo javni uslužbenci in politiki omejen dostop do relevantnih znanstvenih informacij, ki bi jih lahko bolje informirale pri kreiranju teh politik. Pomembno področje raziskovanja bi moralo biti v povezavi med rekreativno uporabo marihuane in javnim zdravjem, posebej telesno aktivnostjo (Gillman, Hutchison in Bryan, 2015).

Pred parlamentarnimi volitvami v Sloveniji v letu 2018 so nekatere politične stranke predlagale legalizacijo uporabe marihuane (MMC RTV SLO, 2018; Rabuza, 2018) ali predstavili določene pobude. Pobude so se nanašale na drugačno zakonsko opredelitev konoplje pri nas: po prvi naj bi se omogočilo gojenje medicinske konoplje, po drugi bi dovolili gojenje in uporabo konoplje za osebne namene, podpisniki deklaracije o načelih za regulacijo konoplje pa se zavzemajo za zakonodajo, ki bi omogočala njeno pridelavo in predelavo v medicinske in raziskovalne namene ter regulacijo konoplje za gospodarstvo in uporabo pri odraslih (Lovrenčič, 2018).

Tem pobudam je nasprotovalo Ministrstvo za zdravje, različne zdravstvene organizacije, združene v koordinacijo medicinskih organizacij (Zdravniška zbornica Slovenije, Združenje zdravstvenih zavodov, zdravniški sindikat Fides, združenje zasebnih zdravnikov in zobozdravnikov (Žurnal24.si., 2018)), pa tudi Nacionalni inštitut za javno zdravje in Univerzitetni klinični center Ljubljana (Lovrenčič, 2018).

V manjši javnomnenjski raziskavi (2016) večina anketiranih meni, da bi morala biti marihuana v Sloveniji legalna. Večina bi marihuano popolnoma legalizirala (46 %), za medicinske namene bi jo legaliziralo 42 %, medtem ko 12 % anketiranih meni, da mora marihuana ostati nelegalna (Delo, 2016).

V naši raziskavi smo raziskali mnenja športnikov o marihuani. Manjšo uporabo prepovedanih drog med športniki in pozitivne učinke športa pri zdravljenju odvisnosti so že potrdili Naele idr. (Neale, Nettleton in Pickering, 2012) in Gabrovec (Gabrovec, 2016).

V našo raziskavo smo vključili športnike vseh starosti, ki se s športom ukvarjajo tekmovalno ali rekreativno. Namen raziskave je bil raziskati stališča športnikov do uporabe marihuane, njene legalizacije in njihovega poročanja o jemanju nedovoljenih substanc. Za pridobivanje podatkov smo uporabili spletni anketni vprašalnik. Skupno je na vprašalnik odgovarjalo 2.231 oseb, a je vprašalnik pravilno izpolnilo le 1241 anketirancev (55.62 %). Na vprašalnik je odgovorilo 846 (66 %) moških in 435 (34 %) žensk.

Skupno so se anketirani ukvarjali s 34 različnimi športnimi panogami. Med najpogostejše sodijo: atletika, odbojka, borilne veščine, športno streljanje in kolesarjenje. 12.9 % anketiranih se s športom ukvarja vsak dan, 13.6 % šestkrat tedensko, 15.1 % petkrat tedensko, 19.4 % štirikrat tedensko, 17.8 % trikrat tedensko in 21.3 % dvakrat tedensko. 44 % anketiranih se s športom ukvarja tekmovalno in 56 % se jih s športom ukvarja rekreacijsko. Kot metodo raziskave smo uporabili neeksperimentalno kvantitativno raziskovanje.

Spletni anketni vprašalnik smo oblikovali glede na izhodišča literature o odvisnosti od prepovedanih drog, zdravljenju odvisnosti, o marihuani in testiranju na prepovedane droge (European Monitoring Centre for Drugs and Drug Addiction, 2002; Lora - Tamayo idr., 2004; Staack in Maurer, 2005; Rupnik, 2008; Auwarter idr., 2009; Gabrovec, 2015; Gabrovec, 2015). Spletno povezavo do anketnega vprašalnika je panožnim športnim zvezam posredoval Olimpijski komite Slovenije. Anketiranje je potekalo marca 2018.

Vprašalnik je vseboval 32 vprašanj, ki so bila razdeljena v pet sklopov: vprašanja glede jemanja prepovedanih substanc (nikoli, enkrat v življenju, v zadnjih 12 mesecih, v zadnjih 30 dneh, zadnji teden, vsak dan); vprašanja, ki se nanašajo na jemanje drog (uživanje marihuane med športniki in prijatelji, pričakovan škodljiv učinek teh substanc, in druga vprašanja glede legalizacije, pozitivnih in negativnih učinkov); pričakovanja uporabnikov glede jemanja posameznih substanc; vprašanja glede uporabe različnih drog (prva uporaba); vprašanja glede športne aktivnosti (vrsta športa in pogostost treninga) in demografska vprašanja. Uporabili smo Likertovo lestvico (1-5).

Analiza rezultatov raziskave je zajemala: uživanje različnih substanc glede na različna časovna obdobja; različna vprašanja glede prepovedanih substanc; obstoj povezave med uživanjem nekaterih substanc in različnimi mnenji o substancah in primerjava povprečne starosti prve uporabe nekaterih drog z različnimi športnimi aktivnostmi. Dodatno smo poskušali poiskati povezavo med pogostostjo kajenja cigaret in marihuane, uživanja alkohola in pogostostjo treninga; povezave med uživanjem različnih substanc in spola in če so kakšne razlike med uživanjem posameznih substanc med športno in splošno populacijo.

V analizo smo vključili tudi povezavo med pogostostjo uporabe cigaret, alkohola in marihuane s številom treningov športnikov med tednom. Razdelili smo jih v dve skupini; Skupina 1 (dva do tri treningi tedensko), Skupina 2 (štirje treningi tedensko in več).

Rezultati naše raziskave so pokazali, da 60.9 % anketiranih nikoli ni kadilo cigaret in 12.7 % redno kadi cigarete. 12.6 % anketiranih ni nikoli poskusilo alkoholnih pijač. V zadnjem tednu je alkohol uživalo 32.1 % anketiranih. Uživanje marihuane je nekoliko manjše, a primerljivo s kajenjem cigaret. 53.1 % anketiranih ni marihuane poskusilo nikoli v življenju, dnevno marihuano uživa 6.1 % anketiranih športnikov. Uživanje heroína, kokaina in ostalih drog je pomembno manjše. Heroin je v življenju poizkusil 1 % anketiranih, 8.2 % kokain in 9.1 % je enkrat v življenju poskusilo različne stimulanse.

Zanimala so nas različna stališča o marihuani. Zanimala nas je predvsem uporaba in mnenje o legalizaciji, kar je pomembno družbeno vprašanje v Sloveniji. Na lestvici stališč od 1 do 5 (1 = močno se ne strinjam, 5 = močno se strinjam), anketirani večinoma menijo, da bi marihuana morala biti legalizirana za medicinske namene (4.07). Popolno splošno legalizacijo marihuane podpira manj anketiranih (2.67). Anketirani menijo, da je marihuana lahko dostopna (3.60) in še posebej prisotna med mladimi (3.69). Menijo, da marihuana ni pogosta med športniki (2.76), čeprav njihovi prijatelji pogosteje uživajo marihuano (2.93). Da ima marihuana tako slabe kot dobre lastnosti, meni več anketiranih (3.64). Večjo osveščenost o marihuani kažejo tudi s tem, da se ne strinjajo s trditvijo, da marihuana ne povzroča odvisnosti (2.51) in da marihuana zdravi raka (2.41).

V raziskavi smo ugotovili pozitivno povezanost med trditvami, da je marihuana koristna za medicinske namene in da je koristna za zdravljenje nekaterih simptomov in stanj ($r = 0.682$; $p < 0.05$). Ugotovili smo povezavo med trditvami, da je marihuana koristna za zdravljenje nekaterih simptomov in stanj ter tem, da bi morali legalizirati marihuano za uporabo v medicinske namene ($r = 0.678$; $p < 0.05$). Povezanost smo ugotovili tudi med uporabo kokaina in amfetaminov, LSD ter sintetičnimi drogami ($r = 0.628$; $p < 0.05$); prisotnostjo marihuane med prijatelji in prisotnostjo marihuane med športniki ($r = 0.525$; $p < 0.05$); med samouporabo marihuane in uživanjem marihuane med prijatelji ($r = 0.516$; $p < 0.05$).

Pozitivno povezanost smo ugotovili tudi med kajenjem cigaret in uživanjem alkohola ($r = 0.260$; $p < 0.01$), med kajenjem cigaret in kajenjem marihuane ($r = 0.538$; $p < 0.01$), med samouporabo alkohola in uživanjem alkohola med prijatelji ($r = 0.583$; $p < 0.01$). Pozitivna povezanost prav tako obstaja med uživanjem alkohola in kajenjem cigaret med prijatelji ($r = 0.603$; $p < 0.01$). Visoko povezanost pa najdemo med uživanjem heroína in kokaina ter amfetaminov (od $r = 706$ do $r = 816$; $p < 0.01$).

V zadnjih letih je uporaba in legalizacija marihuane za osebne in/ali medicinske namene pogosto obravnavana družbena in politična tema. Tako je v zadnjem obdobju tudi v Sloveniji. Nekatere politične stranke so v predvolilnem obdobju volilcem obljubljale legalizacijo marihuane za medicinske namene, spet druge legalizacijo marihuane za osebno rabo (MMC RTV SLO, 2018; Rabuza, 2018). Na omenjene obljube in pobude se je strokovna javnost hitro in primerno odzvala.

Namen te raziskave je bil ugotoviti stališča aktivne športne populacije do uporabe marihuane in njene legalizacije za medicinske ali osebne namene. Cilj raziskave smo dosegli. Naša raziskava potrjuje predhodne raziskave o pozitivnem vplivu športa na

uživanje različnih dovoljenih in nedovoljenih substanc. Pri pomembnem družbenem in strokovnem vprašanju glede legalizacije uporabe marihuane, anketirani dajejo prednost legalizaciji marihuane za medicinsko uporabo in ne legalizaciji za osebno uporabo.

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