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Young Adults' Perceptions of Recreational Marijuana Usage: A Phenomenological Investigation

Dr. Eric Franklin Prince
Walden University

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Walden University

College of Social and Behavioral Sciences

This is to certify that the doctoral dissertation by

Eric Franklin Prince

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

Review Committee

Dr. Sandra Caramela-Miller, Committee Chairperson, Psychology Faculty

Dr. Reba Glidewell, Committee Member, Psychology Faculty

Dr. Alethea Baker, University Reviewer, Psychology Faculty

Chief Academic Officer and Provost

Sue Subocz, Ph.D.

Walden University

2021

Abstract

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A Phenomenological Investigation

by

Eric Franklin Prince

MS, Walden University, 2017

MA, Azusa Pacific University, 2013

BA, Azusa Pacific University, 2010

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Clinical Psychology

Forensic Psychology

Walden University

March 2021

Abstract

Young adults as a whole are not making informed decisions about recreational marijuana usage. A lack of information about recreational marijuana usage is being circulated through advertising causing young adults to have false perceptions on the subject matter. Many young adults perceive marijuana as non-harmful in its totality, which contributes adverse side effects to their health. Young adult lived experiences were explored in the current study to discover, if they currently have a comprehensive understanding on the psychological and physiological outcomes associated with recreational marijuana use. The purpose of this study is to provide a better understanding of young adults concerning recreational marijuana use and to inform psychological interventions. The qualitative study was designed to explore how recreational marijuana is perceived by ten young adults and to explore their lived experiences. Dependency, social enhancer, self-medication, being stigmatized, individualized needs regarding use, adverse side effects, the need to regulate usage, positive therapeutic outcomes, relationship strains, and elevated cravings were ten overarching themes discovered. Therapeutic interventions focused on psychosomatic support and psychosocial rehabilitative efforts to prevent maladaptive social outcomes for young adults were recommended. Future research should target generalizability of results pertinent to diverse young adult populations. Findings from this study may be utilized to promote positive social change for advancing successful life outcomes, lessening mental health disparities, and preventing overall detrimental multigenerational consequences in young adults.

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Dedication

First and foremost, I would like to thank and dedicate this degree to ‘El-Shaddai (God Almighty) of Yisra‘el for his Eternal Wisdom, Love, and Guidance during this extremely challenging and tedious process. Heavenly Av (Father), it was you who gave me the determination, patience, strength, and wisdom to make it through. I will forever be humbled and appreciative. To my mother, Vicki V. Prince, thank you for teaching me to pray and for telling me I could do anything in life. I will always remember those words, Mom, and I thank you always. To my queen, Natalie, thank you for your patience during this process. You will forever be appreciated for being the great mother you are to our beautiful children. To my children, Captain Yeremiah, little “boss girl” Abby, and “super-duper” Gabriel, let this accomplishment be a clear reminder that you can do anything you put your mind to in life. Take care of your mind, and it will serve you well. To Captain Yeremiah, “to infinite and beyond, infinite and beyond!” Thank you to my pastor, Chief Apostle Y. B. Amen, PhD for his continued multilevel support and encouragement as I embarked on this difficult journey. He once told me how he would have horrible dreams where he had doctoral assignments that had not been finished and needed to be submitted for grading. He would wake up from these dreams in a panic, but soon realized after getting his bearings, it was all just a dream. Chief Restorer Shepherd, I say unto dreamland—“let the dreams begin, for they will be a relief.” Throughout this dissertation process, I continue to be sternly reminded that “Only the Brave” will accomplish great things, if they will look fear in the face, and proceed with courage.

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Chapter 1: Introduction to the Study

Young adults between ages 18 through 25 have the highest percentage rate for cannabis use disorder (CUD) among all age groups in the United States which is the primary reason for this phenomenological investigation being conducted (Emery et al., 2020; Fiala et al., 2018; Mason et al., 2018; Tucker et al., 2020), which is the primary reason for this phenomenological investigation. There are several social implications associated with this investigative inquiry. These social implications include young adults gaining critical knowledge about the various negative outcomes associated with recreational marijuana (MJ) usage and being able to make informed decisions and to ask for help when faced with serious detrimental outcomes (see Emery et al., 2020; Fiala et al., 2018; Mason et al., 2018; Tucker et al., 2020). A critical recommendation is implementing needed restrictions to protect young adults from messages advocating drug use (see Fiala et al., 2018).

Young adults who possess a medical marijuana card engage in more frequent marijuana use compared with those young adults who smoke for recreational purposes (Tucker et al., 2019a; Tucker et al., 2020). Individual sociodemographic characteristics suggest young adult medical marijuana cardholders will most likely report negative outcomes associated with marijuana (Gazibara et al., 2017; Mason et al., 2019). Young adults are also driving under the influence of marijuana and causing deadly accidents (Cavazos-Rehg et al., 2017; D'Amico, 2019; Fiala et al., 2018). Marijuana is the most commonly detected drug in vehicular crashes (DuPont et al., 2018). One in 12 young

adult marijuana users in the United States report experiencing adverse side effects (Tucker et al., 2019a; Tucker et al., 2020).

Physiological effects experienced by young adult marijuana users include altered temperament, queasiness, vomiting, muscle malfunctioning, faintness, variations in body temperature, tingling sensations, dehydration, and a metallic taste on the palate and depression (Tucker et al., 2019b; Tucker et al., 2020). Young adult recreational marijuana use has side effects consistent with impaired functioning across various health domains (D'Amico et al., 2018; Tucker et al., 2019a; Tucker et al., 2020). One recommendation from researchers is to gain understanding of how patterns of cannabis, tobacco, and nicotine co-use are correlated with negative young adult health outcomes (Tucker et al., 2019a; Tucker et al., 2020). In some cases, cannabis use among young adult has been linked with longer-term dependence and acute risks such as psychotic symptoms (Burggren et al., 2019; Fiala et al., 2018). Therapeutic satisfaction data derived from full samples has revealed how young adult participants perceived interventions (Fiala et al., 2018).

There are several strategies that have been developed and recommended to better assist young adult marijuana users in having a comprehensive understanding regarding marijuana use (Burggren et al., 2019; Fiala et al., 2018). Practitioners who administer interventions are perceived by some young adults as helpful because psychological interventions aid in reducing CUDs (Mason et al., 2018). Experts recommend more substance use prevention programs, however, to help young adults manage their cannabis use (Emery et al., 2020; Mason et al., 2018). Psychological interventions are critical for

young adults who use marijuana recreationally (Blanchard et al., 2019; Doss et al., 2017; Mason et al., 2018; Strickland et al., 2018). New, innovative, and effective psychotherapeutic interventions for young adults help them engage in these interventions when they are ready to receive assistance (Doss et al., 2017).

Compared with other age groups, young adults also perceive daily cannabis use as nonharmful (Etter, 2017; Fiala et al., 2018; Mayet & Lavagna, 2018; Tucker et al., 2020). Yet, marijuana is harmful when used excessively (Fiala et al., 2018; Tucker et al., 2020). Peer network counseling is recommended to promote interventions that help young adults in breaking addictive cycles (Mason et al., 2018). Young adult participants who did engage in peer network counseling interventions reported significantly reducing problems associated with CUDs which indicative of positive social change (Mason et al., 2018).

Background

A critical need currently exists for psychological interventions in communities with young adult marijuana users (Bouchard et al., 2018; Debnam et al., 2018; Lum et al., 2019; Mason et al., 2018). Young adults have reported a knowledge and understanding deficit associated with the ramifications of recreational marijuana usage (Fiala et al., 2018). More evidence-based interventions are recommended to lower marijuana usage rates among young adults to prevent wide ranging psychological problems (Mason et al., 2018). There are differentiating attitudes on the negative and positive impacts associated with recreational marijuana use in the United States according to (Fiala et al., 2018). Some view recreational marijuana use as beneficial, while others view it as harmful.

Marijuana usage is correlated with dualistic models (Davis et al., 2018).

Recreational marijuana smokers begin with a pleasurable passion associated with marijuana usage (Davis et al., 2018). The use for pleasure can then turn into excessive usage, or even addiction in some cases (Davis et al., 2018). Excessive use and pleasure constitutes the dualistic model as postulated by Davis et al. (2018). There is an association between excessive marijuana usage and a broad spectrum of psychological, sociological, and physiological health-related problems (Mason et al., 2018). Marijuana is not perceived by young adults to include increased urges for excessive marijuana use (Fiala et al., 2018; Pacheco-Colón et al., 2018). Excessive marijuana use is correlated with cognition deficits, physiological impairments, and low-level distress tolerance (Chopko et al., 2018; Pacheco-Colón et al., 2018). These factors severely impact young adults where they cannot logically manage stressful situations (Chopko et al., 2018; Pacheco-Colón et al., 2018). The ability for young adults to engage in recreational marijuana usage so effortlessly presents a special concern for many experts (Fiala et al., 2018). Poor outcomes have been experienced by young adults who utilize marijuana recreationally expecting therapeutic benefits (Metrik, 2018).

To address these issues, researchers recommend social structure through parental oversight (Fiala et al., 2018; Metrik, 2018; Strickland et al., 2018). Psychotherapy can assist in eliminating and preventing many psychotic-related factors associated with CUD (Strickland et al., 2018). Psychological interventions can also assist young adults in gaining a clear understanding on how marijuana use has affected their societal relationships (Fiala et al., 2018). Many young adults have reported having better

relationships posttherapy (Mason et al., 2018). Psychotherapy has also assisted young adults in reducing marijuana usage for recreational purposes causing better social outcomes (Mason et al., 2018). This is critical to implement in future interventions.

Problem Statement

Young adults who use marijuana for recreation can experience serious psychological health risks (Chopko et al., 2018; Emery et al., 2020; Tucker et al., 2020), often without a comprehensive understanding of the dangers associated with the drug. Marijuana users who use it recreationally often do not understand the negative academic, criminal, professional, and psychological outcomes associated with recreational marijuana use (Adinoff & Reiman, 2019; Banducci et al., 2018; Mason et al., 2018; Prince et al., 2018). Coadministration of cannabidiol with tetrahydrocannabinol has been found to cause anxiety, paranoia, and psychosis (Chopko et al., 2018). According to experts, young adults who utilize marijuana recreationally should seek clinical, professional counsel concerning how marijuana can be used responsibly (Centers for Disease Control and Prevention., 2018; Chopko et al., 2018).

The previous data is critical to point out because marijuana is also the most commonly detected drug in vehicular crashes (DuPont et al., 2018). Marijuana can be administered for medicinal purposes in certain medical situations, but is being used recreationally by many young adults (Metrik et al., 2018). Marijuana should be used with clinical supervision and oversight, which can provide users with an understanding of frequency and dosage (Metrik et al., 2018). Clinical and forensic research scientists have the ability to properly explain varying degrees of outcomes associated with recreational

marijuana usage (Metrik et al., 2018; Wolff-Michael & Unger, 2018). Another problematic factor associated with recreational marijuana is known as *amotivation syndrome* (Meier & White, 2018; Prince et al., 2018). Amotivation syndrome is known for negatively affecting college students' academic performances (Meier & White, 2018; Prince et al., 2018). Young adults who engage in habitual recreational marijuana use can succumb to emotional dysregulation problems (Chopko et al., 2018; Meier & White, 2018). Those who use marijuana habitually can also experience significant harmful side effects such as heavy cognition decline (Chopko et al., 2018; Meier & White, 2018). Marijuana associated with heavy recreational use has been scientifically linked with adverse outcomes in the human brain and improper mental health functioning (Chopko et al., 2018; Chye et al., 2019a; Chye et al., 2019b; Gruber & Sagar, 2017; Prince et al., 2018; Tucker et al., 2020). Inappropriate recreational marijuana use can also cause problems in professional career progression and lead to homelessness (Boychuk et al., 2018; Chopko et al., 2018; Tucker et al., 2020).

Because of the potential harms, experts recommend more education on the part of young adults before they use marijuana recreationally. Altman et al. (2019) recommended, for instance, that young adults should gain an understanding about adverse outcomes associated with tetrahydrocannabinol embedded within marijuana). Young adults who gain an understanding about recreational marijuana use can avoid serious health-related psychosocial issues, some researchers have found (Chopko et al., 2018). With a greater understanding about the negative effects associated with

recreational marijuana usage, they can have better futures (Banducci et al., 2018; Mason et al., 2018; Meier & White, 2018).

Purpose of the Study

The purpose of this qualitative research study was to explore young adults' understanding of recreational marijuana usage consequences. According to experts, young adults should be provided with a comprehensive understanding of how marijuana affects developmental stages (Chopko et al., 2018; Meshesha et al., 2018). Those who engage in marijuana usage can experience acute impairment in executive functioning, which is involved in hindering self-regulation processes (Chopko et al., 2018; Tucker et al., 2020). There is currently a gap in qualitative research on young adults' perspectives toward and understanding of recreational marijuana usage (Strickland et al., 2018). More research in this area derived from young adult lived experiences can inform psychological interventions (Strickland et al., 2018). Many young adults appreciate information and psychological interventions aimed at eliminating CUDs (Mason et al., 2018). Therapy can assist young adults in becoming less dependent on cannabis use (Banducci et al., 2018; Emery et al., 2020; Strickland et al., 2018). Psychological interventions can increase therapy session effectiveness for young adults who want help concerning this subject matter (Strickland et al., 2018; Tucker et al., 2020).

More research is needed on the effectiveness of psychological interventions that involve peer-related experiences (Banducci et al., 2018; Fiala et al., 2018; Mason et al., 2018; Strickland et al., 2018). Researchers contend that the young adult population is in critical need of creative strategies to treat and engage marijuana use. One such

intervention is peer network counseling via text messaging (PNC-txt), according to Mason et al. (2018). PNC-text is a highly effective 4-week automated, text-delivered cannabis treatment source that targets close peer relationships (Mason et al., 2018). Mason et al. found it to be very effective with 96 treatment-seeking young adults. Psychological interventions involving advertising campaigns also may assist young adults in making healthier decisions (Strickland et al., 2018). More explorative research on this subject matter may increase clinicians' understanding of how to effectively incorporate marijuana-related psychological interventions in their work with young adults (Gambetti et al., 2019; Mason et al., 2018; Strickland et al., 2018). I conducted this study to address this call for research.

Research Questions

I sought to answer two research questions (RQs):

RQ1: How is recreational marijuana perceived by young adults?

RQ2: What is the lived experience of young adults who use recreational marijuana?

Theoretical Framework

The theory of planned behavior (Ajzen, 1971, 1985, 1991; Ajzen & Fishbein, 1977; Ajzen & Madden, 1986; Ajzen et al., 1982) served as the study's theoretical framework. Applying Ajzen's (1985) theory, young adults are engaged in complex, multidimensional critical thinking when they decide whether to use marijuana recreationally. The information presented can be beneficial for potential marijuana users because it is important to promote critical thinking before making the decision to engage

in marijuana use (Fiala et al., 2018; Tucker et al., 2019a). Marijuana users can benefit by learning more responsible recreational marijuana usage techniques (Tucker et al., 2019a).

Some individuals can smoke cannabis without harm while others cannot (Koocher & Shortt, 2018; Lenton et al., 2018). Recreational marijuana users may experience adverse outcomes, because they are at clinically higher risks for psychosis (Koocher & Shortt, 2018; Lenton et al., 2018). I selected the theoretical framework based on the RQs. Negative and positive experiences associated with marijuana outcomes for overall health are critical to identify for transparency (Altman et al., 2019; Koocher & Shortt, 2018). In conducting the study, I employed an advocacy, participatory, philosophical worldview because of its focus on critical social issues and societal member empowerment (Kemmis & Wilkinson, 1998). The participants may benefit by having their voices heard when the study is presented during social change events (see Kemmis & Wilkinson, 1998). Societal awareness of the outcomes associated with recreational marijuana usage may also be increased (see Kemmis & Wilkinson, 1998). A more detailed explanation of the theoretical framework is discussed in Chapter 2.

Nature of the Study

A phenomenological research study was conducted, so young adults could describe their recreational marijuana experiences for those peers who need more information on making better decisions. Exploration of concepts may also result in enhancing therapeutic services developed by practitioners. A phenomenological approach was utilized which is defined by (Alase, 2017; Moustakas, 1994; Smith, 1996). A clearer understanding was be gained by using the interpretative phenomenological analysis (IPA)

model which provides a comprehensive lens into the subject matter (Moustakas, 1994).

There is a societal need for a comprehensive understanding about marijuana related outcomes (Alase, 2017; Moustakas, 1994; Smith, 1996). Dualistic experiences associated with marijuana are not understood by young adult recreational marijuana users who only want pleasure as an outcome (Davis et al., 2018; Emery et al., 2020). The passion for marijuana usage causes persistent use overtime, which promotes CUD and other factors which affect psychological well-being (Davis et al., 2018; Emery et al., 2020; Mason et al., 2018; Slavin et al., 2018). Assisting young adults in being aware of the various outcomes associated with marijuana usage, so they can make informed decisions, is possible. Young adults who make informed decisions will make better life choices (Strickland et al., 2018). Participant discussions during this study produced meaningful dialogue about how recreational marijuana outcomes are perceived among the young adult populaces (Mason et al., 2018; Strickland et al., 2018). I obtained a critical understanding from the meaningful dialogue of the 10 participants (Moustakas, 1994).

Dialogue allows the researcher to observe vital reoccurring themes (Alase, 2017; Moustakas, 1994). Reoccurring themes discovered from participants was analyzed to obtain critical insights into their lived experiences. There is a need for evidence-based substance use prevention programs in states with legalized recreational marijuana usage (Fiala et al., 2018; Strickland et al., 2018). Evidence-based prevention programs can assist by preventing psychosocial problematic factors (Strickland et al., 2018). Negative psychosocial issues have resulted from reckless recreational marijuana usage (Strickland et al., 2018). New information gained will be disseminated for improved preventative

treatment efforts in clinical and forensic psychological settings (Strickland et al., 2018). Young adults can be assisted in making clear informed decisions from the research data derived from their peers (Strickland et al., 2018). Clinicians can also develop interventions which aid in preventing maltreatment occurring from excessive marijuana usage (Mason et al., 2018).

Psychological interventions by way of advertisements can be used for deterring marijuana use among vulnerable young adults who are easily influenced by their peers (Fiala et al., 2018). Implementation of psychological interventions is possible because peer influence is a strong forecaster for young adult recreational marijuana use (Fiala et al., 2018; Mason et al., 2018). Cannabis use during teenage years is highly correlated with varying negative health outcomes (Banducci et al., 2018; Duperrouzel et al., 2019; Tucker et al., 2020). The recommendation from Banducci includes implementing greater efforts for reducing recreational marijuana usage through preventative psychological interventions (Banducci et al., 2018). Emergency department-based motivational brief interventions have been successful in reducing recreational marijuana use among young adults (Mason et al., 2018). Young adults seek emergency department care for cannabis use more than usual care (Mason et al., 2018). Marijuana usage among developing young adults is a growing public health problem and can be prevented using knowledge-based campaigns (Fiala et al., 2018). Information related to promoting advertising concerns regarding motives for cannabis use can reduce cannabis use in emerging adults (Banducci et al., 2018; Fiala et al., 2018).

Young adults in their developmental stages using marijuana for pleasure report having to use marijuana more often in order to achieve their objective of being high (Mason et al., 2018). Practitioners can produce effective psychological interventions, which focus on alternative cognitive behavioral strategies. Effective psychological can assist young adults in reducing excessive marijuana use for better life choices (Mason et al., 2018). A clear understanding will be established for young adults about the negative effects associated with marijuana as a result of this qualitative phenomenological study (Giorgi, 2012; Moustakas, 1994). Those researchers who employ phenomenological approaches can benefit by obtaining comprehensive information (Giorgi, 2012; Moustakas, 1994). Data for this phenomenological study was collected from descriptive, qualitative interviews deriving from the purposeful sampling of 10 participants (Moustakas, 1994; Alase, 2017).

Participants were between ages 18 and 25 who currently use, or have used recreational marijuana legally for at least six months to a year. Participants were interviewed using qualitative phenomenological strategies of inquiry (Moustakas, 1994). Inquires open up comprehensive, meaningful dialogue which support scientific researchers in understanding the current phenomena associated with young adult recreational marijuana usage (Moustakas, 1994; Yilmaz, 2013). Qualitative strategies assist researchers by helping them establish patterns and relational meanings from the study conducted (Yilmaz, 2013). Lastly, critical gaps in understanding are discussed for updates on future psychological interventions. One of several recommendations by the researchers included the critical nature of focusing efforts to reduce marijuana use

through effective prevention and intervention strategies which would be paramount to young adult marijuana users health (Emery et al., 2020; Banducci et al., 2018).

Cannabis use during young adult years is associated with a host of detrimental consequences (Emery et al., 2020; Banducci et al., 2018). Focused efforts should be increased to lower marijuana use through effective interventions and preventative efforts (Emery et al., 2020; Banducci et al., 2018). Interventions along with preventative efforts which aided in eliminating the gap associated with this current phenomenon is crucial. Another significant recommendation included public health implications where advertising restrictions can be used to protect young adults from pro-marijuana use advertising (Fiala et al., 2018). Commercial free speech afforded by the First Amendment makes advertising restrictions challenging (Fiala et al., 2018). Public policy experts note restrictions which are aimed at protecting young adults have the potential of being allowed during commercial free speech advertising although difficult (Fiala et al., 2018). The discovery of the preceding information assisted by filling the gap in research by providing young adults with the power to make informed decisions. Increased knowledge about the post effects of recreational marijuana use is key in causing young adults being aware of the hidden dangers recreational marijuana use. Key terminology provided an explanation for complex words and terms utilized.

Definitions

The subsequent functional definitions include search strategy terminology. The vocabulary researched, in some instances, may bear more than one recognized meaning.

Alcohol and other drug (AOD) treatment: Treatments for individuals needing substance use treatment through psychological therapy (Koocher & Shortt, 2018).

Amotivational syndrome: A psychiatric disorder in which cannabis use fosters apathy through the depletion of motivation-based constructs such as self-efficacy (Stein et al., 2018).

The CSA is the Consolidated Appropriations Act of 2018, which classifies marijuana as a Schedule I, or (Class 1) drug (Koocher & Shortt, 2018). Schedule I substances are defined to have no current recognized medical use in the United States and a lack of acknowledged safety regulations for use under medical supervision, and the high potentiality for abuse (Koocher & Shortt, 2018).

Family Related Drug Abuse History is an individual, or individuals within the abuser's family origin such as a father, mother, brother, or sister who lives with the individual in question and who knows the individual has a problem with substance abuse (Koocher & Shortt, 2018).

Legalization is having the same regulations on possession, consumption and sales that have been applied for alcohol (Koocher & Shortt, 2018).

Legal Status is whether or not an individual has current legal problems. The legal status related for persons will show the individual in question as the subject of a court order whether or not the person is on probation, parole, or under the investigation of an authorized law enforcement agency (Koocher & Shortt, 2018).

Neurobehavioral is the association between an individual's nervous system and behavior, which is connected to behavioral disorders. Neurobehavioral problems result

from a person's nervous system developing deficits, or damage (Koocher & Shortt, 2018; Lenton et al., 2018).

Perceived behavioral control is an individuals perceived control over a behavior, whether negative or positive, which is executed by the individual who has performed the behavior (Ajzen & Madden, 1986).

Psychological Intervention/Intervention is an action taken for improving a situation, especially a psychological, or medical disorder (Davis et al., 2018; Koocher & Shortt, 2018).

Subjective norm is a person's awareness associated with the degree on how other individuals feel, or think about the individual performing a behavior (Ajzen & Madden, 1986).

Success is completing a substance abuse treatment program for marijuana, and not using marijuana for at least six months post treatment (Lenton et al., 2018).

Treatment Outcome is the successful, or unsuccessful outcome in post treatment programs. Treatment outcomes are associated with the result which the patient(s) outcomes were, whether negative, or positive post-therapy which were provided by a clinician for the patient (Koocher & Shortt, 2018; Lenton et al., 2018).

Planned behavior Theory is the theory for health behavior and concludes with the outcome which says an individual will display an intention of performing a behavior before actually performing the behavior (Ajzen & Madden, 1986). The degree which the individual intends on committing the behavior predicts the likelihood the person will perform the behavior. The definition is influenced by three primary aspects related with

the word intention which are attitude, subjective norms, and perceived behavioral control (Ajzen & Madden, 1986).

Unsuccessful Treatment is when a patient checks out of a treatment program against medical advice (AMA) and the patient's treatment is terminated by the clinic, or hospital. Other names for marijuana include keif, kif, charas, ganja, sinsemilla, gold, hemp, *weed*, *herb*, *pot*, *grass*, *bud*, *ganja*, *Mary Jane*, blow, draw, stuff, skunk weed, skunk, reefer, rope, smoke, gage, boo, charge, jive, mootah, pod, wacky backy, locoweed, dagga, zol, green, mezz and a broad spectrum of other slang terms, such as a greenish-gray mixture of dried flowers derived from the *Cannabis sativa* plant (Hill & Saxon, 2018; Koocher & Shortt, 2018).

Assumptions

There are many people other than young adults who use marijuana recreationally (Lenton et al., 2018). Young adults were assumed to have a great need for this empirical qualitative study. High rates of problematic factors currently associated with young adults who smoke recreational marijuana (Koocher & Shortt, 2018). Young adults under 18 and older than 25 were excluded. Assumptions were made that all participants would be truthful during the interviews, especially since they were given the opportunity to utilize pseudonyms, or their initials only. Partial viewpoints were assumed to be offered, because of embarrassment, or other concerns arising during the interviews.

Deliberate dishonesty could also be a likelihood, although it was assumed not to be a substantial concern. Confidentiality agreements may help result with eliminating the desire for participants to be dishonest. It was further assumed that participants would

reveal their true experiences whether those experiences were negative, or positive.

Participants who disclosed negative experiences were expected, although it was assumed opposing positive experiences would be reported. The purpose was to explore and discover what young adults understand about recreational marijuana usage consequences. Participants who were interviewed did not have to specify whether, or not they would continue engaging in recreational marijuana usage, although they may have experienced adverse side effects. Positive experiences were assumed to be associated with recreational marijuana usage, which had the possibility of manifesting during interviews. There was also the assumption participants would discuss having used marijuana for medicinal purposes with positive results. The various assumptions did not delegitimize the acknowledged need for this qualitative research study, which targeted young adult recreational marijuana users. Young adult participation was strictly confidential. All young adults who participated in the interviews had the right to discontinue engagement in their interview at any time and were informed of this fact.

Scope and Delimitations

The scope of the study was predicated on young adults and marijuana, which is being heavily used by young adults for recreational consumption having dire impacts on their psychological and physiological health (Banducci et al., 2018; Mason, 2018). The delimitations, which limited the scope of this investigation, included the young adult populace being resistant to critical information. The young adult populace may have distorted views about recreational marijuana, which may cause them to make less than informed decisions regarding recreational marijuana. Researchers have shown marijuana

use to be a highly prevalent problem in American culture at this time among young adults. The challenge is to have effective interventions, which are informative and helpful for young adult recreational marijuana users (Banducci et al., 2018; Mason, 2018). Young adults who receive effective interventions may begin to realize the necessity for making better decisions. The research questions were established to address those problematic factors only associated with young adult experiences of recreational marijuana usage.

Limitations

The scientific community has emphasized qualitative research studies encompassing lesser populations than quantitative research studies. The data collected was limited because only participants 18 to 25 years of age were interviewed. Adolescents and fully grown adult populations were not explored. Those young adult populations who have engaged in marijuana for the past 6 months to a year were interviewed. The participants were chosen based on their personal recreational marijuana usage experiences. Those selected participated in semistructured individual interviews. The comprehensiveness, significance and understanding in the marijuana epidemic was derived from qualitative empirical investigations using young adults only. The discussions uncovered detailed information about young adult recreational marijuana usage provided by the 10 research participants. Further limitations included participants possibly engaging in self-reporting biases. Biased behaviors allow the possibility to affect the accurateness and trustworthiness of participant replies which is why biased behaviors were not allowed. My biases included believing marijuana usage is negative across all

spectrums. The only other researcher bias included the belief recreational marijuana can lead to cognitive decline for all individuals who participate in recreational marijuana usage.

Significance

The purpose was to explore and discover the significance of what young adults understand about recreational marijuana usage consequences. All the young adults who participated provided me with new, rich, in-depth information. The results will promote positive change as young adult gain more opportunities to make informed decisions increasing individual, community and global levels. The information derived from the detailed information of the participants life experiences. The qualitative information gained provided a comprehensive look at how recreational marijuana usage has affected the participants positively, or negatively. Psychological interventions and substance use prevention programs utilized by clinicians will be updated with this information (Mason et al., 2018; Tucker et al., 2019a). The significance of this project aligns with the problem statement, because it reflects a current societal situation (Tucker et al., 2019a). Recreational marijuana usage has in fact caused negative health outcomes in young adult populations (Tucker et al., 2019a).

Those individuals who participated in the interviews contributed by providing necessary descriptive information about their lived experiences. Information from dissertation will be disseminated at poster conferences for promoting positive social change. It will also assist in helping emerging leaders who need more data on recreational marijuana usage (Fiala et al., 2018; Mason et al., 2018). The data obtained from the

interviewee's will be circulated among college students giving them the opportunity to have better futures. Young adult college students will be empowered after receiving this information from varying academic sources. It is important to help college students have higher success rates in their academic studies for a more abundant future (Buckner et al., 2018). Clinicians in psychological medical settings will gain critical insight in treating marijuana users who have had adverse outcomes (Strickland et al., 2018).

Summary

Recreational marijuana usage among young adults is a problem in American culture (Slavin et al., 2018; Tucker et al., 2019b). Young adults who use marijuana for recreational purposes are not being provided with enough information to make logical, informed decisions for their well-being (Ajzen, 1971; Koocher & Shortt, 2018). More information on recreational marijuana usage can assist young adults by helping them understand how it effects their developmental lifespans (Koocher & Shortt, 2018; Mason et al., 2018). Young adults who provide information about marijuana usage can reveal how using marijuana affected their lives. All the information gained during the interviews can assist young adults in a myriad of ways for healthier lives (Fiala et al., 2018; Koocher & Shortt, 2018; Mason et al., 2018). Behavioral health clinics and other organizations can make collaborative efforts to increase young adult understanding about marijuana and the side effects which may surface post usage (Koocher & Shortt, 2018; Mason et al., 2018). Clinicians who engage in disseminating scholarly information from research studies can prevent harm and assist young adults in having better lifespans (American Psychological Association [APA], 2013, 2017; Koocher & Shortt, 2018; Mason et al., 2018). Several

recommendations have been made from various researchers, which can assist in promoting positive changes in the lives of young adult recreational marijuana users.

The data derived from the comprehensive interviews also provide an opportunity for informing young adults about the varying post effects caused by recreational marijuana usage. Practitioners can cultivate innovative strategies, which inform the public about the dangers associated with recreational marijuana usage. The results have the potential to promote positive social change within communities on global levels as young adults gain critical opportunities to make informed decisions (Bosk et al., 2019). The data disseminated across multiple spectrums is designed to assist young adults by helping them make informed decisions. which has not been done previously (Bosk et al., 2019). Young adults can be educated through effective, fun, psychological interventions (Bosk et al., 2019).

The young adults who took part in this project have the possibility of assisting their peers with having better lives (Koocher & Shortt, 2018). Information about the various outcomes associated with marijuana will create better insight for weighing the pros and cons in terms of cannabis usage (D'Amico et al., 2019a). The objective was to provide young adults with a comprehensive understanding about CUDs brought on through recreational marijuana usage. Detailed information on CUDs from young adults are not provided for young adults in current literature (D'Amico et al., 2019a; Emery et al., 2020). Young adults could very well say societal pillars failed them. The very existence of this thought is something, which should never come into fruition. The fight for securing better futures for young adults is now. Scientific researchers have the power

to significantly aid in this fight. It starts with research studies such as this, along with other practitioners who seek education for young adults. Providing more information on this subject matter can prevent negative outcomes, which have the potentiality to harm young adult societal members. Further recommendations include the cultivation of innovative psychological interventions, which can prove helpful to young adults by assisting them in understanding the dangers correlated with recreational marijuana usage (Koocher & Shortt, 2018).

Another recommendation includes making the adverse outcomes correlated with recreational marijuana usage public knowledge for young adults instead of only stating the benefits (Koocher & Shortt, 2018). A phenomenological approach which involves young adults who partake in open discussions is an effective strategy (Fiala et al., 2018; Koocher & Shortt, 2018; Mason et al., 2018). The data I gather may provide young adults with insight they can use to more informed decisions about recreational drug use (see Fiala et al., 2018; Tucker et al., 2019a). More detailed information concerning how recreational marijuana affects psychological processes, and physiological processes will be discussed in Chapter 2.

Chapter 2: Literature Review

Introduction

Marijuana is easily available for young adults in the United States with serious detrimental outcomes when used without the ability to make intelligent informed decisions or careful oversight and regulation (Bouchard et al., 2018; Debnam et al., 2018; Lum et al., 2019). Because of parental substance use and easy access to drugs for young adults in the home (Bouchard et al., 2018; Debnam et al., 2018), some experts have called for supervised socialization among young adults, because unsupervised, unstructured socialization has a chance of leading to drug abuse (Bouchard et al., 2018). There are significant distortions associated with how young adults view recreational marijuana use and potential outcomes (Bouchard et al., 2018). I conducted this study to explore young adults' lived experiences associated with recreational marijuana usage.

I used the theory of planned behavior to contextualize the lived experiences of young adult recreational marijuana users. Young adults who engage in the concepts of planned behavior may exhibit intelligent decision-making regarding recreational marijuana usage (Ajzen, 1971; Ajzen, & Fishbein, 1977). There is minimal information on how young adults perceive marijuana (Burggren et al., 2019), and it is not understood why young adults do not view recreational marijuana usage as problematic. The use of newly discovered intervention strategies may aid in the understanding of how young adults perceive recreational marijuana usage (Sarin, 2019). Comprehensive accounts of this phenomenon are lacking in previous research studies regarding young adult lived experiences of marijuana usage (Burggren et al., 2019). Researchers studying young adult

lived experiences of how they perceive recreational marijuana usage have thus far focused on only a few primary domains. These domains include studies concerning concurrent marijuana usage or marijuana utilization with other substances (Sarin, 2019).

Existing research similarly includes clarifications for all ages and not just young adults. The young adult population has research deficits on the subject matter and has a need for additional research, which may improve their psychological well-being (Berg et al., 2017). The need for young adults to have a comprehensive understanding of marijuana or cannabis use has been documented across numerous research articles (Berg et al., 2017; Gruber & Sagar, 2017). There are currently very few young adults utilizing safe recreational marijuana-related practices according to current research studies (Gruber & Sagar, 2017; Ward et al., 2018). Recommendations for safe practice by experts are explored for young adults who use various types of marijuana (Lankenau et al., 2018).

Practitioners are employing mental health services for problematic events post marijuana usage because young adults rarely engage in psychological counseling interventions until recreational marijuana usage becomes a serious problem (Stein et al., 2018). Psychological services include mental health programs and other psychosocial programs that can aid young adults who face marijuana-related problems (Stein et al., 2018). In the United States, marijuana is one of the most commonly used substances with 138.3 and 22.2 million existing users aged 12 and above (Stein et al., 2018). The peak rates of utilization are young adults between 18 and 25 years of age, where 19.6% report marijuana utilization, with men partaking in higher rates than women (Stein et al., 2018).

Despite the significant rates of substance use, few marijuana users pursue specialty treatment or psychological interventions (Stein et al., 2018). Various researchers have described the urgency for young adults to understand recreational marijuana usage (Stein et al., 2018). Others have noted that young adults face damaging consequences associated with a lack of psychological services (Seth et al., 2017).

Structural and communal-level psychological interventions and effective, positive policy-level intervention variations assist in improving access to resources for young adults (Seth et al., 2017). Psychological interventions within communities can improve young adults' overall health and living situations (Seth et al., 2017). In this chapter, I review the existing literature on the study phenomenon.

Literature Search Strategy

To find literature, I searched online library databases from Walden University that included ERIC, PsycINDEX, PsycARTICLES, PsycCRITIQUES, PsycEXTRA, SAGE, SCIENCE Direct, SocINDEX, Taylor and Francis Online, and last, the Thoreau Multi-Database Search. I also used the search engines Google and Google Scholar to investigate peer-reviewed journal articles. Independent terms were utilized, and Boolean phrases were incorporated for the items searched. I used ProQuest Central's comprehensive multidisciplinary research database to find literature on marijuana usage and young adults, marijuana use disorders, young adult cannabis use, teenage cannabis use disorder, marijuana use disorder among young adults, and marijuana and psychological risk factors. The investigation revealed explicit deficiencies in the lack of understanding as it relates to young adults and recreational marijuana usage. There are serious problematic

outcomes occurring with the young adult populace deriving from them engaging in recreational marijuana usage (Sagar & Gruber, 2018). Appendix A contains more information on the library databases and search terms I used to find the literature.

The recommendation for further scientific psychological research is suggested (Sagar & Gruber, 2018). The current research studies on the subject matter suggest there is a direct correlation of young adults having poor perceptions about recreational marijuana usage which result in poor outcomes (Duperrouzel et al., 2019; Sarne, 2019; Stein et al., 2018). As a result of this fact, the recommendation is to better educate young adults concerning recreational marijuana use (Stein et al., 2018). Psychological services for young adults having marijuana related problems and young adult drug rehabilitation were subsequently added to the search criteria. Marijuana abuse and young adult research results significantly represented young adults who experienced negative psychological outcomes post recreational marijuana usage (Burggren et al., 2019).

A reoccurring theme emerged from the numerous searches, which was that young adults need to be explored for how they perceive recreational marijuana usage (Duperrouzel et al., 2019). ProQuest databases yielded the same results upon completion of the literary review. Various articles supported the need for more research on the subject matter and articles which were both empirical and peer-reviewed providing critical and relevant facts. All studies within the past two years describing young adults and marijuana usage were heavily considered for this investigation. Peer-reviewed psychological journals and cannabis related database journals from 2017 to 2019 contained a moderate number of articles.

A search for young adults and weed, as well as young adults who smoke pot resulted in a critical need for more research on this subject matter where current research was severely outdated (Burggren et al., 2019). Specifics include young adult drug prevention programs which offer psychological support services, psychosis testing, and cognition development training were identified. It was also established that young adults and cannabis searches resulted in studies frequently about various types of drugs and disease. These studies were conducted to provide information on young adult problems with sex, alcohol and other drug related problematic factors. Searches for how young adults perceive recreational marijuana usage returned zero articles. Only one article came close to the search on how young adults perceive recreational marijuana usage and it involved young teens, or adolescent perceptions on marijuana (Friese, 2017).

Psychological databases involving young adults and drug related outcomes were reviewed to gain an understanding of negative outcomes post marijuana utilization. Studies fluctuated in areas including memory impairment, psychosis, cognition decline, and even pregnancy related adverse outcomes. Eventually, negative outcomes were avoided as an emphasis, due to complications involving association, or relationship with other substances. The central focus was to discover a broad explanation of young adult views of recreational marijuana usage and why these views currently exist in their minds (Duperrouzel et al., 2019).

The purpose was to explore and discover what young adults understand about recreational marijuana usage consequences. Other objectives included exploring and discovering young adult viewpoints and clearly cataloguing their lived experiences

regarding recreational marijuana use. The empirical research and data collection have not been entirely developed in the current literature (Duperrouzel et al., 2019). The research in this area is minimal aside from the research studies which have been reported. Past researchers who evaluated young adults and marijuana usage have only done so from specific study perspectives, rather than allowing young adults the opportunities to provide their own perspectives (Duperrouzel et al., 2019). The young adult perception as it relates to recreational marijuana usage has not been revealed as a significant inquiry for researchers until now.

It has been overtly pointed out in the advancement of research and academic literature that there is a recommendation for such considerations (Burggren et al., 2019; Duperrouzel et al., 2019). Research limitation parameters were broadened beyond the primary topic regarding young adult marijuana views to provide more in-depth information on the subject matter. These modifications resulted in the identified connections between young adults and understanding their views on the subject matter (Burggren et al., 2019; Duperrouzel et al., 2019). Peripheral scholarship was utilized for rationalizing the research supportive of declarations made in this review. The adjustments were essential to solidify the groundwork for this current phenomenological investigation. A case was made for the necessity to research this subject matter concerning opinions for young adult who utilize recreational marijuana.

Theoretical Foundation

The culture of young adults provided the foundation for this investigation regarding how young adults perceive recreational marijuana usage (Becker et al., 2017).

The engagement in recreational marijuana usage has been documented to impede young adults' abilities to properly function on cognitive levels (Chye et al., 2019a; Chye, et al., 2019b). Young adults are lead into varying dangerous forms of functional impairment where they are at risk for activating psychological disorders and psychosis (Chye et al., 2019a; Chye et al., 2019b). Young adult populations who engage in consistent recreational marijuana use are at increased risk for impaired judgement and poor reasoning skills during social situations (Chye et al., 2019a). The problem remains, young adults using marijuana for recreation can experience serious psychological health risks (Chopko et al., 2018). Young adults who use marijuana are doing so, without a comprehensive understanding (Prince et al., 2018; Tucker et al., 2020).

Some young adults may adopt concurrent drug use habits to impress peers for social popularity causing severe psychological hardships (Sideli et al., 2019). In other cases, child maltreatment are causes for engaging in recreational marijuana usage which opens the door for social related problems when they become older (Mills et al., 2017). There may prove to be a connection with young adult marijuana usage and peer influence which will show why many young adults engage in recreational marijuana use (Mills et al., 2019; Sideli et al., 2019). There is a high attrition rate for young adults who engage in the marijuana culture during social events (Kioumarsis et al., 2017; Lankenau et al., 2017a; Lankenau et al., 2019b; Reed et al., 2019). There are young adults who engage in recreational marijuana usage for reasons associated with college peer pressure (Stormshak et al., 2019). The college social scene associated with peer influence is a key reason why young adults engage in recreational marijuana use (Stormshak et al., 2019).

Young adult self-social preservation instincts may prohibit them from perceiving the dangers associated with recreational marijuana usage (Stormshak et al., 2019).

There are also negative college entry initiation pressures associated with recreational marijuana usage along with the lack of therapeutic interventions, which is why more younger adult therapy is highly recommended by researchers (Gunn et al., 2018; Stormshak et al., 2019; Tucker et al., 2020). It is those young adults who will most likely join in on marijuana utilization when it is present in influential social settings (Gunn et al., 2018; Stormshak et al., 2019). The perceived social and individual stigmatism has been formerly endorsed as the catalyst, which causes young adults to avoid mental health services (Gunn et al., 2018; Heley et al., 2019; Stormshak et al., 2019). It is also the ignorance of peers who perceive their friends as weak for seeking psychological assistance which further shuns ideas of seeking psychological interventions for better health (Gunn et al., 2018). The young adult recreational marijuana social culture can have harmful impacts on those who are unaware of the problematic factors marijuana may cause (Gunn et al., 2018). Just as equally important young adults may be unaware of how much peer pressure can influence them to engage in marijuana usage (Stormshak et al., 2019).

Marijuana related relationships and social opinions have been pronounced as creating potentially risky behavioral outcomes in social spheres (Gunn et al., 2018; Stormshak et al., 2019). Young adults who become deeply involved in the recreational marijuana culture are less likely to disengage from other risky substance abuse situations (Gunn et al., 2018). These actions foster damaging social relationships and detrimental

thought processes (Gunn et al., 2018; Zullig & Valois, 2016). Young adult alleged inappropriate social behavior may disrupt individual decisions to engage in any needed psychological interventions (Gunn et al., 2018; Zullig & Valois, 2016). Comparable findings indicate young adult recreational marijuana usage is a social culture which propels psychosocial pressures yielding negative outcomes (Gunn et al., 2018; Tucker et al., 2020).

In one peer reviewed journal article researchers examined correlations between views of impairment from substance use and social self-efficacy (SSE) in a sample of young adults ($n = 4,122$) as postulated by (Zullig & Valois, 2016). The authors for this study showed one-way analysis of covariance (ANCOVA) where post hoc tests were utilized for assessing relations between opinions of harm from marijuana, and SSE while making sure to control the effects of grade, sex, race, and socioeconomic status (Zullig & Valois, 2016). The effect sizes were calculated from the post hoc comparisons to provide estimations for practical importance in the study (Zullig & Valois, 2016). The results indicated reduced opinions for harm where marijuana was significantly associated with lower SSE (Tucker et al., 2020; Zullig & Valois, 2016). Young adults who have marijuana related relationships are known to engage in other destructive drug using behavior (Gunn et al., 2018; Zullig & Valois, 2016). It is also likely for young adults in their first 2 years of college to perceive recreational marijuana usage as appropriate (Zullig & Valois, 2016).

The outcome will be young adult excessive recreational marijuana usage (Zullig & Valois, 2016). There are young adults who may not embrace psychological

interventions, due to being skeptical about mental health services for reasons of being stigmatized (Al Omari et al., 2020). A thoughtful recommendation includes assisting young adults by helping them to be grateful for psychological services (Al Omari et al., 2020; Tucker et al., 2020). The young adult populace for whom the psychosocial interventions are intended for should recognize the necessity for the services and have a desire to participate (Al Omari et al., 2020). The psychological services presented have been discovered to produce vital outcomes in young adult developmental milestones (Al Omari et al., 2020). Young adults may not at first relate to psychosocial interventions provided by those who have no personal experience with recreational marijuana usage (Al Omari et al., 2020; Chopko et al., 2018). It is when young adults are presented with clinical information some become irritated and do not want to engage in services provided (Al Omari et al., 2020; Chopko et al., 2018). Some young adults may perceive psychological services as unrelatable for reasons associated with the lack of peer participation, or because the redirection coming from authoritative figures (Al Omari et al., 2020; Chopko et al., 2018).

Practical information as a recommendation regarding the positives of perceived psychological services were found in previous studies (Al Omari et al., 2020). The explanations included suggestions of young adults viewing psychological services as not being cool which affected their decision making (Al Omari et al., 2020). These factors are documented as having circulated among various age groups in the young adult populations (Al Omari et al., 2020). Young adult recreational marijuana usage involving psychological interventions usage have a low perceived value (Al Omari et al., 2020).

The data recently collected from young adults who have been interviewed yield some empirical evidence which addresses how they perceive psychological interventions. The recommendation is to increase the literacy of young adults by presenting them with educational services such as mental health first aid curricula (Al Omari et al., 2020). The implementation of this recommendation will deepen their knowledge; help modify their attitudes, and lastly assist practitioners in reducing young adult stigmas toward individuals who seek mental health therapy (Al Omari et al., 2020).

There are reemerging themes which exist among young adults belonging to popular marijuana social groups (Gunn et al., 2018; Tucker et al., 2020; Zullig & Valois, 2016). Regression analysis was utilized for purposes of allowing other potential factors which may affect young adult usage (Berg et al., 2017). The results encompassed predictive validity of market segments in relation to substance use (Berg et al., 2017). Substance use profiles which relied on unadjusted rates of use such as from young adults were at particularly high-risk segment for using a range of substances (Berg et al., 2017). Across segments, young adults had the highest unadjusted rates for alcohol, marijuana, cigarettes, and hookah usage (Berg et al., 2017). The institutions researched during this phenomenological investigation encompassed 18 to 25-year-old student populaces of less than 3,000 (Berg et al., 2017).

The total student populace of the age range at those schools were included in researchers recruitment having a response rate of 22.9% ($N = 3,574/15,607$) according to (Berg et al., 2017). Young adult' inclinations, or delayed dispositions for pursuing support from mental health programs has serious effects on the totality of young adult

psychological health (Al Omari et al., 2020; Gunn et al., 2018; Zullig & Valois, 2016).

Young adult psychological wellness is a field gaining broad awareness in research, prevention, and mental health therapy (Larsen et al., 2019). The young adults responded to multiple quantitative surveys and open-ended questions (Larsen et al., 2019). The academic findings were offered in a descriptive format for effectiveness and clarity for various institutions who would be open to using similar formats to assist young adults in making better choices through informed decisions (Larsen et al., 2019).

The data collected encompassed findings suggesting young adults displayed a statistically noteworthy increase in effective coping strategies. It occurred when they were provided knowledge about their psychological health in regard to feeling isolated (Larsen et al., 2019). It is however critical to point out that the findings included minimal, but noteworthy declines in stigma and varied unawareness regarding mental health awareness and application (Larsen et al., 2019). It is recommended that educational institutions provide resources to reflect this enquiry and further cultivate responses provided by young adults for additional health education and psychological intervention strategies in school settings (Larsen et al., 2019). It will also aid in filling gaps in the literature where young adults are not being exposed to information which would assist them in making informed decisions which can include drug use (Emery et al., 2020; Larsen et al., 2019).

Literature Review Associated With Key Concepts

The research regarding young adult mental health services largely covers two main domains which are services provided and consumption. The mental health services

literature provided is primarily associated with two types. The areas of interest are mental health services and the outcomes of marijuana post young adult consumption. Mental health services can be further explained to young adults who require treatment, or who are recommended for therapy by their physicians once they engage in traditional health care (Larsen et al., 2019). Mental health services include showing young adults how psychotherapy can benefit them for future success (Larsen et al., 2019). The latter includes mental health counseling to provide coping strategies for psychological distress (Larsen et al., 2019).

Psychoeducation services embrace strategies which involve applying mental health tactics to young adult culturally distressing situations (Larsen et al., 2019). Illustrations of young adult psychosocial education services include those which aid in improving psychosocial stressors (Larsen et al., 2019). Many young adults are faced with varying types of stressors when trying to steer clear of recreational marijuana usage. The research concerning marijuana consumption is commonly focused on the need for having psychological services (Al Omari et al., 2020). There are currently vital complications for young adults when mental health services are underutilized (Larsen et al., 2019). These psychological services are composed of both quantitative and qualitative investigations (Larsen et al., 2019). Young adult perspectives were minimal, but were considered under this section. Young adults were not reflected adequately, due to the reality of limiting factors concerning their recreational marijuana perspectives (Al Omari et al., 2020; Gunn et al., 2018).

Psychological Health Services Provided to Young People

The initial contact young adults will have with psychological professionals will be in some cases during their secondary years of learning, meaning during their 12th grade educational experiences between ages 18 and 19 (Larsen et al., 2019). The young adults who make use of mental health therapy will have to interact with school counselors and the treating psychologists who will assist them in multiple ways (Larsen et al., 2019). The Mental Health Support Team (MHST) MHST is a team model established as partners with employees at Bodin Upper Secondary School in Norway which included 18 and 19 year old young adults in the 12th grade (Larsen et al., 2019). The scientist practitioners at Nordland Research Institute where the MHST team was developed began providing psychological services in the school's student services department (Larsen et al., 2019).

The MHST team began reorganizing the existing resources within the school to work more methodically with identifying and following up with young adult students between ages 18 and 19 who are at risk for mental health problems, due to being socially isolated when they do not succumb to peer pressure which causes loneliness (Larsen et al., 2019; Stormshak et al., 2019). In conducting a comparative analysis to research, it was discovered that young adults ages 18 and older, constantly feel the pain of peer pressure brought on by their counterparts who want them to engage in recreational marijuana in academic social settings (Stormshak et al., 2019). Each school team comprises a number of counselors, vocational school nurses and follow-up school staff (Larsen et al., 2019).

The MHST works both indicative and selective, where the staff focuses on particular students with known mental health complications, or other students who are at risk of becoming dropouts (Larsen et al., 2019). The MHST investigates and provides follow up services for students who have patterns of high absence from school, due to mental health disorders and other psychological problems (Larsen et al., 2019). The MHST systematizes and reorganizes student services through the school staff who works in key locations (Larsen et al., 2019). An ‘one open door’ strategy is used to increase the accessibility of services for students, teachers, and staff-members (Larsen et al., 2019). The purpose is to focus on improving the quality of the school (Larsen et al., 2019). The aiding in facilitating mental health services will commence to both the lower and upper secondary school students (Larsen et al., 2019). The MHST also maps young adult students psychological health and well-being during the fall and conducts follow-up discussions with students whose scores indicate signs of struggling (Larsen et al., 2019).

It is due to the close follow-up of at-risk students which ensures personalized assistance is available for each student (Larsen et al., 2019). The MHST recommendation is to pay close attention to the early discovery of truant behavior and to provide interventions and follow-ups when young adults shows signs of nonattendance (Larsen et al., 2019). The MHST teams provide recommendations for providing both cross and multidisciplinary services to facilitate collaborative efforts with school guidance counselors (Larsen et al., 2019). The counselors work between lower and upper secondary schools who have young adults between the ages of 18 and 19 in their programs (Larsen et al., 2019). The recommendation is to further provide assistance to

the teaching staff and act as supervisory aids in their work with at-risk young adult students (Larsen et al., 2019).

Psychological health clinics are necessary for suicide ideation reduction and prevention post substance abuse which causes cognition decline according to psychologists in the field (Goldstone, & Bantjes, 2018). Young adults are inclined to abandon their recreational marijuana needs, which have brought on various poor health results for positive interventions related to psychology (Goldstone, & Bantjes, 2018). Mental health practitioners who implement a problem-solving approach have been more successful in treating young adults (Goldstone, & Bantjes, 2018; Tucker et al., 2020). Professionals can develop and engage in productive actions prior to young adult marijuana usage for support of young adults (Goldstone, & Bantjes, 2018). It is unknown how many young adults are affected by this problem (Goldstone, & Bantjes, 2018; Gunn et al., 2018). Recent national estimates in Norway among young adults between the ages 18 and 19, and in some cases young adults who reach the age of 24 show that 29% of girls and 10% of boys reported significant levels of depressive symptoms, due to poor mental health (Goldstone, & Bantjes, 2018; Gunn et al., 2018).

It is an indicator for critical psychological services in and out of school for drug related factors and other critical factors (Larsen et al., 2019). It is also reported 7% of young adult males and 16% of young adult females in the beginning year of upper secondary school report needing psychological services (Larsen et al., 2019). Research shows clear associations between mental health problems where drugs may be involved while being absent and even attending school among students in upper secondary

education (Larsen et al., 2019). The elements for positive change show working to create a good psychosocial environment, which fulfills the students' need for belonging, competence and autonomy can lead to productive mental health and reduced stigmatizing in and out of school settings (Larsen et al., 2019). Cognition functionality, stable memory and rational thinking is critical in academia (Al Omari et al., 2020).

Early intervention action strategies such as talk-therapy are considered effective psychosocial distress constructs which have proven to be effective for psychosis in young adults (Boychuk et al., 2018). The recommendation for intervention programs and their practitioners are to provide effective mental health treatment for young adults (Boychuk et al., 2018; Emery et al., 2020). Innovative intervention programs combined with updated mental health support services, meaningful education courses, and other revised young adult related initiatives may prove worthwhile in assisting young adults in preventing First Episode Psychosis (FEP) brought on by drug induced use (Boychuk et al., 2018; Emery et al., 2020). Forecasters for varying health related outcomes in young adults were reflected from their past substance use and family history of substance use (Boychuk et al., 2018; Tucker et al., 2020).

The critical component for positive outcomes with young adult recreational marijuana usage was being able to engage in effective intervention strategies (Boychuk et al., 2018; Emery et al., 2020). Calculations of acute stress disorders were previously completed by former researchers and peer support was the central factor for reducing drug use (Boychuk et al., 2018). Lack of peer related social support when trying to stop drug usage was central for reasons associated with continued drug use by young adults

(Boychuk et al., 2018). Mental health tests and psychological examinations were discovered to provide significant information on young adults related to psychosocial health factors (Boychuk et al., 2018). There have been some reductions in symptomology associated with the accessibility of utilizing psychotherapeutic early intervention services (Boychuk et al., 2018; Emery et al., 2020).

The psychotherapeutic services provided must be somehow made known to young adults (Boychuk et al., 2018). Young adults who are able to engage in successful outcomes from intervention services the programs should be accessible for them early on (Boychuk et al., 2018). Proposals for advanced research are provided for the encouragement of young adults facing psychological health problems to get them engaged in psychotherapeutic interventions (Boychuk et al., 2018). Young adults may be skeptical about receiving mental health services in the beginning (Boychuk et al., 2018). There are young adults in both the civilian populace, as well as the military populace (Boychuk et al., 2018). Both of these populations are unsure about psychotherapy and challenge the benefits which occur post therapy (Meshberg-Cohen et al., 2017).

Young adult veterans in distress are more often than not, being reluctant to seek psychological health treatment, even when mental health programs are presented to them (Meshberg-Cohen et al., 2017). The authors of this study provided evidence, which shows when substances are abused by young adult veterans, it may further undermine psychotherapy being sought out by other veterans (Meshberg-Cohen et al., 2017). It is due to associations with negative mental health therapy views (Meshberg-Cohen et al., 2017). The authors for this study investigated young adult service member attitudes

towards seeking mental health therapy in a sample of veterans who were given a diagnoses of posttraumatic stress disorder (PTSD), both with and without comorbid substance use disorders (SUD) as postulated by (Meshberg-Cohen et al., 2017). Overall, 143 male's from the war: Operation Enduring Freedom (OEF) and the war: Operation Iraqi Freedom (OIF) included young adult veterans who filed service-related benefit claims for PTSD, and completed the Attitudes Towards Seeking Professional Psychological Help-Short Form (ATSPPH-SF) and other standard psychological evaluations (Meshberg-Cohen et al., 2017).

The treatment attitudes were compared among veterans (n=34) and (n=109) with and without (n=109) SUD using ANCOVA, to control demographic covariates (Meshberg-Cohen et al., 2017). Post-hoc ANCOVA performed a comparative analysis on the two ATSPPH-SF subscales: Openness to Seeking Treatment, and Value/Need in Seeking Treatment (Meshberg-Cohen et al., 2017). Overall, ATSPPH-SF scores were similar to those reported in other samples of young adult males (Meshberg-Cohen et al., 2017). The authors discovered when controlling for demographic covariates, veterans with comorbid SUD's had considerably less favorable attitudes towards seeking help than those veterans without comorbid SUD (Meshberg-Cohen et al., 2017). It is an indicator of poor judgment and lack of rational thinking, which is associated with the prefrontal cortex area of the brain (Meshberg-Cohen et al., 2017).

In the subscale inquiries the appraisal of psychological treatment was substantially lower among veterans with SUDs, as well as the mental ability to be open to mental health therapy (Meshberg-Cohen et al., 2017). Young adult veterans who engage

in drug use have been shown to have a lack of appreciation for mental health treatment (Meshberg-Cohen et al., 2017). The data reflects beliefs of problems resolving on their own, or the perspective of young adults who assume mental health treatment is ineffective and has misgivings (Meshberg-Cohen et al., 2017). These problems also arise from the belief about SUDs not being able to be cured by psychotherapy (Meshberg-Cohen et al., 2017). A wise approach and recommendation is suggested where practitioners are asked to engage young adult views about recreational marijuana usage and to explain how mental health therapy is a valuable force for treating SUD's (Meshberg-Cohen et al., 2017).

The literature and developmental material provided have frequently come from the scientific communities point of view on psychology (Mason et al., 2018; Meshberg-Cohen et al., 2017). The lived experiences associated with young adult recreational marijuana usage is missing from psychological practitioners arsenal (Mason et al., 2018). Online psychoeducation literature search engines such as Elton B. Stephens Company (EBSCO) and Education Resources Information Center (ERIC) offer assistance for working with young adults to overcome challenges involving detrimental drug use. The young adult lived experience were absent in almost all the peer journal articles reviewed for this literature review. Proposals promising reliability presenting with stability and varying recommended psychotherapy programs illustrate valid challenges for assisting young adults who engage in recreational marijuana usage. In some cases young adults are expected to engage in recreational marijuana usage during college where refusing so, may prevent them from accessing certain social circles (Gunn et al., 2018).

The ineffectiveness of psychotherapeutic interventions were alleged, because serious rapport development existed among young adults and practitioners (Meshberg-Cohen et al., 2017). There is a certain level of belief in practitioners along with a certain level of trust and commitment, which should be cultivated with young adults as a recommendation (Meshberg-Cohen et al., 2017). Young adult hardships prove there is a need for psychological therapeutic interventions, because some young adults have sought out substance abuse help on various occasions (Meshberg-Cohen et al., 2017). Young adult intervention programs have been recommended as a powerful force, which can work with mental health services (Becker et al., 2019). These services have the potentiality to promote young adult engagement in mental health therapy (Becker et al., 2019). Young adult are not cognizant of the danger signs using recreational marijuana can have on them, which is why they should seek mental health therapy (Becker et al., 2019).

It is when psychological therapy is administered by credentialed practitioners a more effective peer response program can be cultivated (Becker et al., 2019). The objective of the Becker article was to also provide meaningful psychological intervention programs for further study which are steady and reliable for young adult participation which can be enhanced by professionals (Becker et al., 2019). The aftermath of designer recreational marijuana is rising in popularity, but not without the impact associative devastation and detriment to young adults mental health (Becker et al., 2019). Improved mental health interventions related to recreational marijuana usage are recommended to improve overall young adult development (Becker et al., 2019). There is also the robust

possibility to protect young adults from other detrimental outcomes such as lung disease and neural pruning destruction (Becker et al., 2019).

Young adults should be continuously cognizant of the dangers associated with marijuana or cannabis use (Becker et al., 2019). The usage of marijuana in moderation has demonstrated to lessen young adult psychological decline regarding psychosis and other problematic outcomes (Becker et al., 2019). These facts present additional elements of young adult sociocultural situations which affect collaboration and receptiveness to mental health services (Becker et al., 2019). Psychological services from practitioners who have substantial amounts of young adult clients may be more accepted by young marijuana users (Becker et al., 2019). The lack of young adults participating in mental health facilities constitutes a significant problem associated with negative psychological health occurrences (Habeger et al., 2018). Those guardians who are not knowledgeable about mental health service in schools place their families at risk for more mental health problems (Habeger et al., 2018). It is this problem which reduces young adult interest in mental health therapy, which is why the recommendation is to increase parental and guardian knowledge concerning the matter (Habeger et al., 2018).

Utilization and Necessity

There are many young adults who report being impartial when it comes to seeking help from psychologists, or other practitioners (Becker et al., 2019; Habeger et al., 2018). The challenge for most mental health agencies and psychological practitioners then becomes the ability to provide reliable services for young adults, which will without controversy be boosted by their peers (Becker et al., 2019; Habeger et al., 2018). In

various cases young adult recreational marijuana usage has caused the young adult population problematic social factors. These adverse psychosocial factors include academic decline, cognitive deficiencies, driving impaired, family discord, health complications, career losses and other adverse factors which continue to be integral in contributing with young adult deprivation (Blair et al., 2019; Burggren, 2019; Cavazos-Rehg et al., 2017; DuPont et al., 2018; Wadsworth & Hammond, 2019).

The aforementioned disparities young adults have succumbed to have caused a need for critical mental health interventions from practitioners in psychology (Bosk et al., 2019; Cavazos-Rehg et al., 2017). These negative social factors were associated with post recreational marijuana usage and needed effective psychological therapeutic strategies (Chopko et al., 2018; Strickland et al., 2018). Adverse outcomes have the potentiality to be avoided, or reduced contingent upon interrelated factors of the individual user (Tucker et al., 2019a). There are psychological health services available for those young adults who have experienced episodes of psychological deterioration and it is highly recommended these services be implemented immediately (Seth et al., 2017). Early mental intervention is important for effective resolution for suspected mental health issues (Mason et al., 2018). The presence for problematic episodes post marijuana usage by traditional use and through vaping have been verified to be acute (Boccio et al., 2020; Holmlund et al., 2019). As a result, young adults may display an instant negative response post usage and have the immediate need for mental health services which range in type the of care provided (Mason et al., 2018; Stromshak et al., 2019).

There has been a tremendous need for mental health services for young adults who succumb to drug related psychopathy such as anxiety, depression, disordered eating, schizophrenia, and even lower self-esteem (Blanchard et al., 2019; Tucker et al., 2020). There are effective mental health programs which can provide cognitive behavioral therapy (CBT), which involves cognitive restructuring and reappraisal for varying positive adaptive outcomes causing the elevation of positive emotions (Blanchard et al., 2019). These programs should contain both psychological services and other educational health related exercises for mental health development (Cavicchioli et al., 2019; Snowdon et al., 2019). Mental health resources can be beneficial when psychological services provided by psychologists include reasonable objectives for young adults (Blanchard et al., 2019; Cavicchioli et al., 2019). There has been minimal study in this area which makes understanding young adult views of recreational marijuana use a burden to say the least (Blanchard et al., 2019; Cavicchioli et al., 2019). An appropriate way for understanding young adult related views concerning marijuana would be to create critical assessments for young adults who use marijuana (Al Omari et al., 2020; Cavicchioli et al., 2019). It is the poor health and negative social related outcomes related to young adults which promote the need for serious psychological interventions across varying young adult cultures (Becker et al., 2017; Tucker et al., 2020).

The current structural neuroimaging studies show growing evidence of abnormalities in hippocampus volume and gray matter density of cannabis users (Nader, & Sanchez, 2017). The authors show altered patterns of brain activity are connected with cannabis use in young adults where psychological incongruity exist

post recreational marijuana (Nader, & Sanchez, 2017). Human behavior is fluid in nature as supposed to being stationary, and therefore more research is warranted for advancing understanding regarding this subject matter (Smart, & Pacula, 2019). The recommendation is for practitioners to embrace innovative concepts as well as conforming with state-of-the-art methods for solving the current cannabis usage problem (Smart, & Pacula, 2019). The current scientific methodologies which have been applied to understanding young adult recreational marijuana usage have been limited, especially with those from disadvantaged populations (Adinoff, & Reiman, 2019).

The current research has also, more often than not, failed to incorporate inclusive investigative research on the subject matter (Adinoff, & Reiman, 2019). It is the forthcoming comprehensive scientific research which will significantly contribute to understanding this widespread phenomenon (Adinoff, & Reiman, 2019; Sellbom, & Tellegen, 2019). Existing psychological research parameters can serve as scientific measures to point out and uncover detailed young adult thought processes concerning marijuana usage (Adinoff, & Reiman, 2019; Burggren et al., 2019). There can also be psychological assessments and daily observations in both clinical and forensic settings to gain distinct adequate responses from young adult patients concerning their views of recreational marijuana (Gambetti et al., 2019). It is the widespread data on this subject matter which will better assist young adults in understanding the need to be aware of marijuana related outcomes (Adinoff, & Reiman, 2019; Burggren et al., 2019). Probable impacts on the trajectory of brain morphology and cognitive responses are recommended for research to be comprehensive (Adinoff, & Reiman, 2019; Burggren et al., 2019).

Young adult psychological wellbeing is definitively affected via the implementation of mental health programs (Tucker et al., 2019a). Young adults experiencing declining psychological health have noticed tremendous psychosocial related stressors and other adverse side effects from marijuana use (Tucker et al., 2019a). Acknowledgement of destructive lifestyles have provided awareness into young adult responses to psychological emergencies (Gunn et al., 2018; Tucker et al., 2019a). Human behavioral cognizance is paramount in understanding why recreational marijuana and cannabis abuse should be avoided (Chopko et al., 2018). The recommendations aid in backing more psychological services, which can eliminate adverse outcomes for young adult users who apply the knowledge from the information provided (Al Omari et al., 2020).

Mental Health Intervention Programs

Mental health intervention programs are equally critical in supporting young adult recreational marijuana users for overall psychological health (Holmlund et al., 2019; Okamoto et al., 2018). Adverse effects from marijuana use continue to develop simultaneous psychological, physiological detriment in young adults when they repudiate mental health services (Cavicchioli et al., 2019). Young adult marijuana user hospitalizations also continues to soar as a result of cannabis, vaping, and marijuana use (Boccio et al., 2020; Cavicchioli et al., 2019). Young adults in the United States are in serious need for mental health services which can aid them in achieving healthier lives (Cavicchioli et al., 2019). There are very few young adults who understand the varying detrimental post effects of cannabis use on the human body (Al Omari et al., 2020).

There are scientific researchers who have completed studies which recommend young adult mental health services with effective protocols via telephone motivational interviewing, which can aid in young adults reducing their substance use (Jiang, Wu, & Gao, 2017). Qualitative methodologies are employed to describe reoccurring themes for the phenomenon providing both articles and peer reviewed journals as credible sources (Moustakas, 1994). The objective is to show the current literature on the subject matter (Duperrouzel et al., 2019). The scientific community applied scientific methodologies to provide rationale regarding appropriate mental health services (Matsea et al., 2017).

The actors specified this was done to address issues noted by health care professionals associated with the traditional health care fields and in mental the health care field (Matsea et al., 2017). These challenges have been documented principally, due to the concern for the small portion of literature on the subject matter regarding young adult views of recreational marijuana usage (Burggren et al., 2019). The actors who specified these thoughts were severely limited for reasons of scientific information lacking and failing to address concerns associated with young adult opinions regarding recreational marijuana usage (Burggren et al., 2019). A positive feature related to this inquiry of study are correlated with providing detailed psychological constructs (Burggren et al., 2019; Matsea et al., 2017). These constructs address areas related to mental health programs and service appraisals for young adults (Burggren et al., 2019).

These appraisals aid in creating a reference guide concerning classifications of existing mental health services (Blanchard et al., 2019; Snowdon et al., 2019). These mental health services are available to young adult recreational marijuana users who need

therapy (Blanchard et al., 2019; Snowdon et al., 2019). The depth of mental health services provided are moderately slim considering the demands for mental health services needed world-wide for young adults (Matsea et al., 2017; Mason et al., 2018). The information collected encompassed a tremendous lack of comprehensive services for young adults (Matsea et al., 2017; Mason et al., 2018). The mental health services discussed address repeated adverse themes associated with marijuana usage (Strickland et al., 2018; Tucker et al., 2019a). The adverse themes included cognition delay, education decline, and psychological detriment (Blanchard et al., 2019). The recommendation is for researchers to conduct future research involving current psychological ailments brought on by substance abuse (Blanchard et al., 2019; Cavicchioli et al., 2019).

Clinicians in both clinical and forensic mental health programs have incorporated varying modalities, which can be used for emotional regulation from the theoretical orientation CBT for all ages (Blanchard et al., 2019). The types of modalities include cognitive behavioral therapy (CBT), and dialectical behavioral therapy (DBT), for young adult mental health advancement (Blanchard et al., 2019; Cavicchioli et al., 2019). The mental health services provided are both useful and suitable and can be obtained through inpatient and outpatient clinical settings which is a further recommendation for those seeking assistance regarding this matter (Blanchard et al., 2019). The clinical settings include Intensive Out-Patient (IOP) workshops, group therapy sessions, individual sessions, Partial Hospitalization Programs (PHP) for young adult psycho-education skill acquisition (Blanchard et al., 2019; Snowdon et al., 2019).

It is beneficial to learn these mental health skill sets during sessions with clinicians, which is a strong recommendation from researchers (Blanchard et al., 2019; Snowdon et al., 2019). The mental health programs and ensuing psychoeducation services have positively modified young adult behaviors for the better in many cases (Blanchard et al., 2019; Cavicchioli et al., 2019; Snowdon et al., 2019). The psychoeducation services from trained psychologists is highly critical for young adults gaining coping strategy skill acquisition for better lives (Snowdon et al., 2019). The assistance from professionally trained psychologists are paramount in this endeavor and will aid mental health programs significantly (Blanchard et al., 2019; Cavicchioli et al., 2019; Snowdon et al., 2019). Two of the five application themes researched currently were psychological health programs for young adults and their families, and the existing benefits (Blanchard et al., 2019; Cavicchioli et al., 2019; Snowdon et al., 2019). Three have been acknowledged as influential mental health programs stressing a need for psychological procedures which are barely used by those in need (Blanchard et al., 2019; Cavicchioli et al., 2019; Snowdon et al., 2019).

The ability for psychologists to understand the human mental state and model vital interactive discussions will afford them and other practitioners invaluable resources for fostering coping skill acquisitions for young adults (Cavicchioli et al., 2019; Snowdon et al., 2019). The difficulty lies in procuring openness with young adults who do not understand the value of psychological services (Al Omari et al., 2020; Cavicchioli et al., 2019; Snowdon et al., 2019). The recommendation is to be more down-to-earth and practical with young adults (Al Omari et al., 2020; Cavicchioli et al., 2019; Snowdon et

al., 2019). A strong hinderance for professional psychologists is getting young adults to overcome stigmas associated with psychotherapy (Al Omari et al., 2020). Stigmas for young adult marijuana users with mental health problems have diminished the likelihood for healthy treatment plans provided by mental health professionals (Al Omari et al., 2020). The need for psychotherapeutic interventions for young adults is competitively documented (Al Omari et al., 2020; Blanchard et al., 2019; Cavicchioli et al., 2019; Snowdon et al., 2019).

The adverse outcomes of cannabis abuse can be academically destructive and socially dangerous, potentially polarizing drug free communal settings for the worse (Meier & White, 2018; Prince et al., 2018). Therapeutic informed mental health service success is dependent upon young adults consulting with psychologists to become cognizant of mental health protocols. Stigmas associated with young adult recreational marijuana culture has the potentiality to alienate mental health services in a multitude of ways (Al Omari et al., 2020). A way of countering this problem is to invest in exciting innovative mental health programs specifically designed for young adult recreational marijuana users (Boyчук et al., 2018). The available research concerning psychotherapeutic services and young adult views of recreational marijuana usage is minimal (Cavicchioli et al., 2019). The former studies concerning psychotherapeutic interventions which assist young adult recreational marijuana users are often linked to other drug abuse situations. Mental health services provided by psychologists have been discovered to be progressively advantageous, due to assisting young adults in sustaining psychological wellness (Strickland et al., 2018). There are several capacities where

psychoeducation constructs would positively affect young adult continued lifespans (Snowdon et al., 2019).

There is a need for psychological health programs to elevate young adult complete mental health welfare, life achievements, and psychological fortitude (Blanchard et al., 2019; Cavicchioli et al., 2019; Koocher & Shortt, 2018). There is also a need for supplementary psychological disciplines outside of clinical and forensic settings to aid in the fight for young adult wellness. One supplemental field can include more educational psychology efforts, which could be involved for the attainment of critical success regarding this matter (Koocher & Shortt, 2018). The sustainment of psychotherapy should be set in place for continued positive behavioral awareness and modification to avoid drug abuse for young adults (Koocher & Shortt, 2018). Practitioners in the field of psychology utilize varying approaches to support overall mental health (Blanchard et al., 2019; Cavicchioli et al., 2019; Koocher & Shortt, 2018). There are psychologists who recommend traumatic reactive mental health services, because there are stigmas associated with utilizing mental health services (Al Omari et al., 2020).

Apprehensions surrounding young adult related stigmas have the potential to be addressed during group therapy sessions (Al Omari et al., 2020). The mental health services must firstly be offered and observed by a skilled psychologist (Larsen et al., 2019). Psychologists have the ability to effectively assist young adults who are in need of mental health services post adverse events associated with drug abuse (Larsen et al., 2019). There are cases where young adults have stated they are reluctant to engage in

existing mental health services, because they fear being stigmatized by peers (Larsen et al., 2019; Stromshak et al., 2019; Tuliao, & Holyoak, 2019). There are however several factors utilized in the United States which provides young adults with the prospect of engaging with psychological programs when needed without degrading stigmatism (Fiala et al., 2018). It is the negative thinking and the lack of information which prevents individuals from engaging in mental health services (Tuliao, & Holyoak, 2019).

A contemporary substitute to former psychological therapy would be attending mental health services via tele psych which can be done in the comfort of one's own home (Doss et al., 2017). Mental health programs provided by tele psych licensed professionals are a powerful alternative to conventional psychological services (Doss et al., 2017). It is mental health services such as tele psych services, which provide patients with privacy and security (Doss et al., 2017). Young adults and their families may benefit from tele-psych services when they are not willing to utilize services provided in traditional clinical settings (Doss et al., 2017). Young adults can learn to identify and eliminate any specific implied bias about mental health therapy by learning from their friends who received mental health care (Tuliao, & Holyoak, 2019). The mental health therapy services would begin with young adults attending psychoeducation programs with other peers who have been through similar therapy sessions (Tuliao, & Holyoak, 2019).

Young adults will be provided assistance in order to identify biases which hinder therapy for themselves and their peers (Tuliao, & Holyoak, 2019). Clinicians provide professional practices which are competent and effective to the populations they serve

(APA, 2013, 2017). The young adult populace is no different and the devotion of psychological practitioners is essential to their growth and development. An appropriate amount of care, consideration and knowledge from psychologists should be implemented during therapeutic sessions to assist the young adults (Tuliao, & Holyoak, 2019). It is because of these factors, many young adults have a fighting chance at getting critical psychological assistance, which can save countless lives (Tuliao, & Holyoak, 2019). There must be a wise approach when making attempts to sway young adults into mental health therapy, even when it is for their own success (Tuliao, & Holyoak, 2019). Individuals with mental illnesses and substance use disorders (SUD) are underrepresented in clinical cases for complex reasons, which need to be explored (Tuliao, & Holyoak, 2019).

There is an opportunity to increase young adult participation in mental health therapy which will create momentous positive outcomes for many young adults (Tuliao, & Holyoak, 2019). There should be effective mental health programs involving psychologists which provide preventive treatments for young adult populaces (Fiala et al., 2018; Koocher & Shortt, 2018). There are measurements for parental figures to recognize certain post marijuana adverse effects (Fiala et al., 2018; Koocher & Shortt, 2018). One measurement features parental figures being aware of certain adverse problems which include young adult diminished capacity (Fiala et al., 2018; Koocher & Shortt, 2018; Mason et al., 2018). It is vital for the young adult populace to effectively communicate with parental figures and professionals as soon as they begin observing psychological decline (Chopko et al., 2018; Meier & White, 2018). The ability to

effectively communicate when young adults begin experiencing adverse mental health outcomes is essential for recovery (Tucker et al., 2019a). Appropriate mental health services, both in and out of schools can significantly contribute to reducing drug related problems by providing effective intervention strategies for young adults (Gunn et al., 2018; Stormshak et al., 2019). In some cases, young adults may find support by bringing friends with them to mental health facilities for assistance and encouragement (Fisher et al., 2019).

There are opportunities for school psychologists to aid in improving the educational base for skill development (Fisher et al., 2019). School programs and other social services can assist young adults by providing them with literature on marijuana, cannabis, and vaping (Boccio et al., 2020; Stein et al., 2018). Young adults who engage in recreational marijuana usage through vaping and other various means have a greater chance of experiencing unknown psychological adverse effects which can be deadly (Boccio et al., 2020; Mays et al., 2017). Young adults who vape for marijuana usage in some cases become more susceptible to greater addictive behaviors (Boccio et al., 2020; Mays et al., 2017). It is imperative for young adults to be aware and understand certain problematic outcomes when vaping and cannabis usage is used abundant and frequent (Boccio et al., 2020; Mays et al., 2017). The young adult populace can begin to understand their negative behaviors which bring about detrimental social related outcomes which can be eliminated by effective prevention strategies, which may be explored by them (Mays et al., 2017).

There are various phases involved in assisting young adults with being able to recognize the need for effective mental health therapy. A few of these phases involve effective marketing, therapy groups, and showing them they are cared for (Berg et al., 2017). Clinical and forensic psychologists have a significant opportunity to aid in this endeavor (Berg et al., 2017; Metrik et al., 2018). It is the scientific community along with the practitioners in which it founded upon who will provide critical mental health skill acquisition for willing young adults (Berg et al., 2017; Heley et al., 2019; Metrik et al., 2018). The thorough obtainment of information regarding recreational marijuana related outcomes will afford young adults the opportunity to shape their realities (Larsen et al., 2019). Those young adults who refuse mental health therapy and information provided for their benefit may be at higher exposure for mental health risks (Larsen et al., 2019; Meshberg-Cohen et al., 2017).

A few risks originate from hidden man-made sub-strands (Xu & Cao, 2019). Fentanyl substances are occasionally embedded in various types of drugs, which young adults use (Vohra et al., 2019). Fentanyl taken even in moderate doses can cause immediate death, decreased consciousness, respiratory depression, and miosis where five patients required ICU admissions (Vohra et al., 2019). There is critical information to be obtained about man made synthetics also known as chemical derivatives, which are now being embedded in various types of drugs including marijuana (Vohra et al., 2019). Sub-strands are effecting young adult recreational marijuana users in varying ways (Orsolini et al., 2019; Vohra et al., 2019; Xu & Cao, 2019). These types of cases vary widely in regard to young adult demographics for amounts utilized, the method of consumption,

and sinus congestion rates (Vohra et al., 2019). As a drug, the effects of fentanyl can include analgesia, anxiolysis, euphoria, drowsiness, and feelings of relaxation (Suzuki & El-Haddad, 2017).

Recommendations include conducting more studies to gain vital insight into clinical management of patients who have been poisoned with fentanyl (Vohra et al., 2019). Practitioners in psychology have a duty to do no harm as mandated by APA's (2013, 2017) guidelines for psychologists. Psychologists have the opportunity through research to change ignorant viewpoints on the subject matter which will ultimately prevent adverse psychosomatic outcomes linked with young adults (Vohra et al., 2019; Xu & Cao, 2019). Those who are not professionals such as parental figures can watch for unusual behavioral patterns in their children who utilize recreational marijuana (Friese, 2017). One particular unusual behavioral pattern includes young adult deviancy (Becker et al., 2019). There are other negative behavioral patterns which may be observed including being obsessive about engaging in recreational marijuana usage (Davis & Arterberry, 2019). Those young adults who do not have parental oversight may engage in elevated marijuana usage and experience adverse effects which are associated with poor mental health (Davis & Arterberry, 2019). Man-made strands embedded in marijuana do not discriminate against who they effect for the worse (Vohra et al., 2019).

Mental health problems deriving from marijuana use because of man-made strands are a serious current problem and have contributed to several deaths as late as the year 2019 as postulated by (Vohra et al., 2019). Those individuals who engage in recreational marijuana use containing hidden synthetic strands are also at greater risk for

comorbid diagnoses and will at some point need mental health services (Friese, 2017; Vohra et al., 2019). There are benefits in receiving professional, up-to-date mental health services for young adults who need psychological assistance (Davis & Arterberry, 2019). These benefits encompass advanced information for elevated mental health (Davis & Arterberry, 2019). It is the misperception regarding marijuana which significantly devalues and inhibits the need for effective psychological programs (Davis & Arterberry, 2019; Friese, 2017).

Implementation and Urgency

There is an urgent need for the implementation of mental health services regarding young adult recreational marijuana users (Gunn et al., 2018; Heley et al., 2019). While many young adults are aware psychological services exist, very few actually engage in the treatment offered (Gunn et al., 2018). Young adults who have strong support groups such as supportive family and friends have higher utilization rates when it comes to mental health counseling services (Gunn et al., 2018; Heley et al., 2019). There are federal resources which offer supportive educational mental health programs (Bosk et al., 2019; Centers for Disease Control and Prevention, 2018; Holmlund et al., 2019). These programs are specifically designed to prevent drug abuse in young adults (Bosk et al., 2019; Centers for Disease Control and Prevention, 2018). The National Registry of Evidence-based Programs and Practices have provided many intervention services which aid in supporting psychological health (Holmlund et al., 2019). The urgent need to provide prevention programs have caused an influx in varied

approaches for substance abuse reduction, which includes cannabis and vaping (Boccio et al., 2020; Holmlund et al., 2019; Okamoto, Helm, Ostrowski & Flood, 2018).

Effective School-Based Drug Resistance Programs

The effectiveness of school-based, substance abuse intervention program have been validated in several schools across America and assist young adults in making informed decisions for better lives (Okamoto et al., 2018). One quantitative academic journal looked at a control groups with young adults receiving a school-based intervention strategy called the “Ho‘ouna Pono” curriculum (Okamoto et al., 2018). The intervention strategy implemented by researchers used nonconfrontational drug resistance strategies such as avoid, explain, and leave, where a six-month follow up was conducted (Okamoto et al., 2018). The intervention showed young adults associated with their control group had significantly lower drug use than those young adults not in the control group who had learned resistance strategies (Okamoto et al., 2018). The intervention strategy assisted by helping young adults making informed decisions, due to having more knowledge about drug use (Okamoto et al., 2018). Young adults who develop drug resistance strategies are better able to cope than those having less information in peer pressure related situations which are highly stressful (Okamoto et al., 2018).

One of the broadest school-based drug prevention programs in America is the ‘Drug Abuse Resistance Education’ (D.A.R.E) program, which has been updated (Day et al., 2017). There are many young adults who partake in this program during high school such as 18 year old 12th graders who are on their way to college (Day et al., 2017). The D.A.R.E program is also offered to young adults who prepare to graduate from high

school (Day et al., 2017). The D.A.R.E program has assisted many young adults in high school in the 12th grade who were 18 and older by providing them with critical data about how it can affect their well-being going into college (Day et al., 2017). The over-arching objective associated with the D.A.R.E curriculum is to provide young adults with an understanding on how marijuana and cannabis abuse can cause adverse outcomes (Day et al., 2017). The strength in which D.A.R.E and the ‘plus’ program currently offer is the fact it is now evidence based, and back by scientific research (Day et al., 2017).

Young adults are provided in many cases with a comprehensive curriculum involving a 10-point lesson plan (Day et al., 2017). The 10-point lesson plan focuses on self-awareness and management, accountable decision making, empathy for others, interpersonal relationship skills, and dealing with responsibilities and challenges (Day et al., 2017). The updates have been significant in assisting the young adults with critical skill acquisition for making healthier decisions. To contrast and compare the two programs, the new D.A.R.E initiative is far more effective than the old D.A.R.E program as a result of being evidence based (Day et al., 2017). The old program was limited in scope and sequence as it pertained to drugs and alcohol prevention factors (Day et al., 2017). The more advanced D.A.R.E Program has been updated with several innovative interventions which aid in the prevention of young adult recreational marijuana usage (Day et al., 2017). There is a need for helpful psychological services which provide effective interventions which have plainly been acknowledged as a need in diverse communities (Day et al., 2017; Gunn et al., 2018; Heley et al., 2019). There is also an essential need for evidence-based intervention programs developed by clinical and

forensic psychologists to prevent young adults from destroying their lives (Berg et al., 2017; Metrik et al., 2018).

Summary

In summary, the research involving the views of young adult recreational marijuana usage significantly includes mental health services and professional psychological intervention program recommendations (Berg et al., 2017; Metrik et al., 2018; Tucker et al., 2019a). Psychological intervention programs are in some cases, both mandatory and nonmandatory dependent upon the behavioral response of the young adult post usage (Boychuk et al., 2018; Tucker et al., 2019a). Those researchers who have conducted studies on this subject have validated a need and recommended young adults for mental health assistance who have psychological ailments post recreational marijuana use (Boychuk et al., 2018; Tucker et al., 2019a). Various researchers who have conducted research on this subject matter indicate a need for psychological intervention programs, which have been deemed necessary, although they are being underutilized by young adults (Boychuk et al., 2018; Tucker et al., 2019a; Tucker et al., 2019b).

The research targeting young adults views regarding mental health programs in terms of stigmas are a real concern (Al Omari et al., 2020). The problems identified cause many young adults to have a warped sense of recreational marijuana and the potentiality for causing adverse effects (Altman et al., 2019). Young adult psychological health is a critical component for not only their academic success, but to their overall achievements (Buckner et al., 2018; Meier & White, 2018; Prince et al., 2018; Strickland et al., 2018). Professional psychological interventions are paramount for young adults who desire

engagement in effective programs, which can help them avoid costly mistakes (Mason et al., 2018). Such services should be included and offered by professional licensed clinical and forensic psychologists (Mason et al., 2018; Strickland et al., 2018). Effective mental health programs offered by practitioners contribute to less mental health decline (Berg et al., 2017; Metrik et al., 2018). Lifespan gratification is measured by the declaration of one's ability to achieve their objectives successfully (Becker et al., 2019).

Reductions concerning life related stressors and having positive academic and professional experiences are associated with decreases in mental health related problems (Berg et al., 2017; Metrik et al., 2018). There is also a reoccurring theme in the literature which suggest reductions of mental health problems assists humans significantly with interpersonal relationships (Fiala et al., 2018; Mason et al., 2018). Enhanced communal interpersonal relations exist when society has stable sociopsychological functioning and effective mental health services (Fiala et al., 2018; Mason et al., 2018; Tucker et al., 2020). I addressed one of these research gaps by targeting previously acknowledged recommendations about how young adults may perceive recreational marijuana usage (Duperrouzel et al., 2019; Sarne, 2019; Stein et al., 2018; Tucker et al., 2020). Young adult marijuana perceptions are negatively influenced, due to the lack of psychological interventions and the influx of false claims on the subject matter (Burggren et al., 2019; Tucker et al., 2020). There is additional research required to fully comprehend the totality of the impacts on young adult recreational marijuana users. The more research that is conducted on this subject matter; the better the chances young adult recreational marijuana users will have to make informed decisions. The method of using qualitative

interviews will assist with understanding the phenomenon which will be further discussed in Chapter 3 (Sagar & Gruber, 2018).

Chapter 3: Research Method

Introduction

Researchers have used qualitative methodologies to better understand societal problems that arise from young adult recreational marijuana use (Alase, 2017; Moustakas, 1994). There is currently increased recreational marijuana usage among young adults globally (Stormshak et al., 2019). One of the methodologies utilized for exploring the lived experiences of young adult marijuana users is one-on-one phone interviews (Alase, 2017; Moustakas, 1994). Researchers have asked young adult marijuana users about their current recreational marijuana use and what their lived experiences were post usage of the substance to formulate a substantial comprehensive understanding of this phenomena (Alase, 2017; Moustakas, 1994).

The information gained from this inquiry may prove useful for practitioners developing programs to assist young adult recreational marijuana users. In this chapter, I will explain the methodology I used to investigate the research problem. I will explain the role of the researcher and discuss concerns related to trustworthiness, including the ethical procedures I used to safeguard the participants. Chapter 3 is a presentation of methodological procedures used in accordance with the phenomenological investigation purpose. An understanding on the procedural specifics is also provided for clarity. Key components include how the purposeful sampling is conducted, the way participants were interviewed through phone conferences, and the utilization of informal dialogue methods. I also review the coding strategies that I used after collecting data (see Alase, 2017).

Research Design and Rationale

The RQs were as follows:

RQ1: How is recreational marijuana perceived by young adults?

RQ2: What are the lived experiences of young adults who utilize recreational marijuana?

The primary purpose was to explore the lived experiences of young adult recreational marijuana users. To do so, I used a qualitative interviewing methodology. Information was collected from participants who engaged in individually conducted semistructured recorded interviews by phone or video conferencing (Alase, 2017). Interview questions were specific to young adults' experiences about their social connections and personal thoughts about recreational usage (see Alase, 2017; Moustakas, 1994). Participants' lived experiences associated with recreational marijuana usage were the basis of the thematic conclusions (see Alase, 2017; Moustakas, 1994).

Qualitative research should be carefully and thoroughly structured (Alase, 2017; Moustakas, 1994). Qualitative research emphasizes the importance of issues, which are specific and related to approaches, viewpoints, and experiences of participants (Alase, 2017). Achieving personally significant, descriptive rich data is critical (Alase, 2017). The theoretical lens used by a researcher assists in providing a perspective that centers and grounds the study (Moustakas, 1994). Concentrated consideration was provided to guide certain inquiry questions along with unique approaches to collect, analyze and interpret the data collected for the study (Alase, 2017). The theoretical lens for this investigation was theory of planned behavior (Ajzen, 1971; Ajzen & Fishbein, 1977) to

contextualize the verbalized experiences and decision-making of young adult recreational marijuana users. The understanding of young adult recreational marijuana usage regarding behavior is considerably reduced when there is not enough data that contributes to how psychological health detriment occur (see Ajzen, 1985, 1991; Ajzen & Madden 1986; Ajzen et al., 1982; Sarin, 2019). The attainment of knowledge concerning young adult marijuana research is epistemologically tainted when research efforts are not comprehensive and planned (see Ajzen et al., 1982; Ajzen, 1985; Ajzen & Madden, 1986; Ajzen, 1991). The phenomenological qualitative research design has been highly effective in providing ontological meaning for verifying significance concerning objective experiences (Moustakas, 1994).

Phenomenological research is also highly comprehensive and detailed which aids with gaining in-depth understanding of the subject studied (Moustakas, 1994). The use of open-ended questioning provides a way to extricate rich, valuable data from participants (Moustakas, 1994). The tactic of semi-structured phone interviews was used for gathering data pertinent to the research questions. Question techniques can be used to conduct effective phone interviews (Alase, 2017). By obtaining robust descriptions, a researcher may provide highly credible data that brings about positive social change (Alase, 2017).

The interview questions were strategically structured and implemented in order for sub-questioning to provoke further deeper data manufacturing from the participants interviewed (Saldana, 2016). The content of this investigation was qualitatively based on the literature derived from semistructured phone interviews in order to further sequester relaxed, thoughtful responses from participants (see Alase, 2017). Participants provided

meaningful descriptions of how their futures are currently being shaped by the phenomenon of recreational marijuana usage (Alase, 2017; Moustakas, 1994; Saldana, 2016). Efficient, effective questioning was devised for the utilization of skillful data collection during phone interviews with young adult participants (Moustakas, 1994).

The responses provided from participants were recorded in a reasonable time period to make the most out of the time allotted. Conducting the interviews this way demonstrates consideration for all parties involved (Alase, 2017). Effective methods such as the types of information gathering techniques selected for this inquiry are known to retain valid and reliable outcomes in many qualitative studies (Alase, 2017). The information reflected from the participant responses were provided along with any deviations which were appropriately explained (Alase, 2017; Moustakas, 1994). The benefits of conducting telephone interviews included reduced costs because no travel was involved. I also had the opportunity to reach participants in diverse and distant geographic areas.

Role of the Researcher

The profession of psychology holds psychological practitioners to high ethical standards (APA, 2013, 2017). Psychologists have a strong influence on the individual view of humanity, the balancing of human rights, culturalism, religious affairs, and critical constructs that affect society as a whole (APA, 2013, 2017). The international sphere correlated with psychological influence is wide-ranging (APA, 2013, 2017). Psychological influence reaches deep into collective public principles that significantly impact human biases and views on violence and matters relevant to lawful and unlawful

behavior (APA, 2013, 2017). The interviews related to young adult recreational marijuana users required sensitivity and regard for the participants' expression of their opinions (see APA, 2013, 2017).

Young adult recreational marijuana users have the right to retain their genuinely gained viewpoints on the problematical issues correlated with recreational marijuana use outcomes. The participants selected as interviewees did not have personal, or professional affiliations with the interviewer. The geographical areas targeted for recruitment were predicated on appropriate criteria and had no associations with the interviewer. Appropriate knowledge concerning the purpose for the study, the scope of research questions and autonomy for individuals partaking in this investigative inquiry were provided prior to any interviews being conducted. The ethics concerning privacy laws were firmly supported and maintained and data was not requested from recruitment sites.

Participants were advised via e-mail, or text of the number of questions which would be raised. An explanation was also provided to all participants about the possibility of additional questions being asked during the recorded phone call. The added questions assisted me in clarifying data provided by the participants. The participants were informed in advance concerning the recording of interviews for accurateness. I also assigned confidentiality agreements with each interviewee and requested verbal agreements before starting any interviews. During the scheduling of interviews, interviewees were required to provide suitable times when there is the least likely chance of the interview being interrupted. It is when scheduled time slots are not feasible for all

interviewees that times were rescheduled when interviews could be conducted without disruption.

During the phone interviews, I posed open-ended questions to the interviewees. The questions asked during the interview were repeated or explained at any time at the interviewees request. During the interviews participants were asked whether, or not there is something they would like to contribute concerning the questions, because of the advocacy participatory approach utilized. At the close of the interviews, I asked all the participants whether or not there were any other questions, or information which could be added. Interviews were closed out after the participants concluded their answers with further information. Interviewees were informed throughout the interviewing process that participation was voluntary and could be halted at any point in time when what they are disclosing could cause emotional distress and there arised a potential need to disengage from the interview. All interviewees were further informed that questions could be avoided by them at any time, and for any reason for the best interest of the interviewee. The interviewees level of psychological stress, and reactions to the interview questions were observed cautiously and no problems arised during the interviews.

Methodology

The methodology for this study assisted me in discovering information, which I framed around the advocacy participatory worldview approach using qualitative inquiries (see Kemmis & Wilkinson, 1998). Researchers have used this approach in an effort to foster social empowerment through social change (Kemmis & Wilkinson, 1998). The

advocacy participatory philosophical approach is based on a theoretical framework that provides a meaningful context for the targeted populace (Kemmis & Wilkinson, 1998).

Participant Selection Logic

The identified populace along with purposeful sampling for this inquiry were young adult marijuana users who shared lived experiences which are both negative and positive. Additional methods were to utilize qualitative information from one-on-one interviews to gather data from the young adult participants. There were 10 one-on-one interviews conducted via recorded telephone conferences from participants who resided in one of two large metropolitan areas. The interview times slots were no longer than 45 minutes to an hour per participant.

Interviews were conducted at the best time for the interviewees to maximize scheduling effectiveness and efficiency. More details of the one-on-one telephone interviews and the research methodology have been outlined in this section (see also Appendix B for the interview protocol). I used the web to search for and find the participants from both online and non-online groups outside of his peer group to obtain the 10 participants for the research study. The web served as a comprehensive tool providing me with access to discover participants in locations, which would otherwise take valuable time and energy to reach. It is through the internet that a host of elements were reduced. Factors related to financial aspects, vulnerable populations, and travel times have been carefully considered.

Qualitative researchers emphasize units of analysis (Alase, 2017). Units of analysis include varying programs, events, specific people, or certain groups which can

be observed, or interviewed (Moustakas, 1994). Investigative strategies were utilized for purposeful sampling techniques during the selection of interviewees. The usage of purposeful sampling included the size the sample was, along with the objectives and resources applied. Purposeful sampling was critical for this investigation, because it provided a certain level of control to incorporate multiculturalism with the participants involved (Alase, 2017). As a backup, a participant recruitment site such as Contact Design was considered to be utilized for the possibly obtainment of any participants who were not able to be obtained during the initial recruitment phase. The recruitment site was not utilized, due to the successful obtainment all 10 participants by the researcher. Purposeful sampling also promoted participants to be forthcoming during the interviews with information-rich data associated with the phenomenon of interest (Alase, 2017). The subjects were young adult recreational marijuana users who are interested in joining this investigative study. The number of participants interviewed was 10, which is an efficient number to reach saturation, according to Alase (2017). The sampling frame is comprised with an adequate number of purposefully selected participants.

Purposive sampling of 10 participants can provide an adequate amount of data necessary to produce thoroughly focused sampling, which achieves saturation for thematic conclusions (Alase, 2017; Moustakas, 1994). Methodical targeted sampling is a qualitative methodology utilized to thoroughly explain data for a comprehensive analysis of recurring, developing themes as postulated by (Alase 2017). Interviews were conducted until saturation was researched (Moustakas, 1994). In qualitative studies, it is critical to indicate the number of interviews being conducted with participants before new

ideas surface as a theme during theory-based interviewing (Francis et al., 2010). The focus of the interviews was discovering the lived experiences of young adult recreational marijuana users. The participant sample selected was predicated on the following criteria which was the prospective participants age and association with recreational marijuana usage. The participants were young adults between the ages 18 and 25. The participants cultures and genders encompassed both men and women from diverse cultural backgrounds who had real life experiences with recreational marijuana usage for six months to a year (Tucker et al., 2020).

The data collection included appropriate application of interview protocols, and interview transcripts along with recorded interviews. The data collection also included my use of reflective journaling from all interviews as a backup to the recorded interviews. The sole party who developed how the interviews with the participants would be conducted was the main research investigator of this study. All established interview protocols were created by researching and reviewing relative IPA research studies previously conducted (Alase, 2017). I sought conceptual measurement scales that are pertinent to the IPA qualitative protocol to strengthen this investigation. There are significant commonly utilized procedures for building rapport.

These well-known methods were incorporated and analyzed for all interview procedures concerning the selected participants (Cheah et al., 2019). The established interview procedures provided substantial opportunities to record participant responses as well contribute to all documented interpretations of the data collected (Alase, 2017). The interviewees corroborations through their lived experiences enriched the accuracy of this

inquiry and galvanized other interviewees which can further support deeper rapport building with the participants selected for the study (Alase, 2017; Moustakas, 1994). Transcriber recordings have been utilized in the past with previous contemporary IPA research studies (Moustakas, 1994). Researchers who engage in transcriber recording have the capability to review critical interviews which provide plethora's of information (Moustakas, 1994). It is when researchers appropriately gain consent to audio record participants while respecting participant anonymity that there are better opportunities to encourage diversity among participants geographically diverse in nature (Alase, 2017).

Researchers who engage in retrospection via recorded transcriptions derived from analysis software and from reflective journaling commonly discover how to develop qualitative IPA research studies (Larsson et al., 2019). Doing so leads to effective bracketing and the improvement of data analysis which aids in eliminating the existence of any biases on behalf of the researcher (Alase, 2017; Larsson et al., 2019). The research questions presented have been constructed to investigate the phenomena concerning the lived experiences of young adult recreational marijuana usage (Alase, 2017). Researchers have used the methodology of IPA for decades to look at phenomena through the lens of selected participants (Alase, 2017; Moustakas, 1994).

The well-known data collection tools applied for IPA are comprised of note taking and interview transcriptions which provide comprehensive data to analyze (Moustakas, 1994). The inspection of transcriptions were evaluated to trace participant replication, explanation, description, and fluctuations in speech during the interviews (Alase, 2017). The IPA methodology assists in gathering participant responses with the

capability to make meaning of their lived experiences involving the phenomena at hand (Alase, 2017; Moustakas, 1994). Inclusion criteria for all participants include participants being literate and being able to understand basic English. The participants do not need a high school diploma, or a college education, nor can they be actively engaged as a patient in a hospital setting. All participants in order to meet the inclusion criteria must be coherent during the time of the interview and must be a United States citizen. Participants do not need a parental figure, or a legal guardian due to selecting participants not of the vulnerable population.

The participants needed to possess a valid state issued ID card from whatever state they were being interviewed in for age related purposes as part of the inclusion criteria. If participants did not have a valid state id card, the participant could present his, or her passport to verify their age to show that they were age appropriate. Exclusion criteria was based on all IRB definitions related to vulnerable populations, which were written and clearly explained (Lapid et al., 2019). The exclusion criteria, although brief, included participants not having a way to receive the consent forms through regular postal mail, or not having an email to send, or receive the necessary documents to partake in this investigative analysis. It was also mandatory for all participants to state their consent during the recording of the interviews. The failure to verbally state consent during the audio recording were grounds for being excluded. Recruitment involves use of flyers and online advertising (Alase, 2017). Flyers placed at consenting locations, to social media advocacy groups, and support groups can yield effective results (Alase, 2017). Appendix C contains the tool that I used to screen prospective participants.

Instrumentation

In this qualitative study collective journal was collected utilizing various approaches (Alase, 2017, Patton, 2002). A few of these approaches include observations, semi structured and structured interviews, which may also consist of one-on-one telephone interviews. A phenomenological investigation was implemented utilizing one-on-one telephone interviews where the objective was to qualitatively collect data from young adults concerning their views on recreational marijuana usage. Telephone interviews allowed me to speak with the interviewees in areas without disturbances.

Procedures for Recruitment, Participation, and Data Collection

The participants were 10 young adults with recreational marijuana histories of 1 year or less. Each participant was selected due to having used marijuana for no longer than 1 year in order to have thematic regularity and promote a higher chance of long term memory recall (Macleod et al., 2018; Vrijssen et al., 2018). Recruitment procedures involved soliciting individuals in public places. I explained to participants the protocol and had them read the consent form and the flyer for the study. The participants who consented to being a part of this project made contact from the information provided on the flyers they accepted.

All participants made initial contact through telephone, simply by calling, texting, or through email which complimented their needs. The total amount of respondents was comprised of 14 people who took interest over time. The four that were not chosen were individuals who were excluded, due to being disqualified for simply not showing up for their appointments for the interview. The 10 interviewees who were selected went

through a successful screening process where they were deemed appropriate to be involved in the interviews. The semi-structured interviews were conducted utilizing an, which lasted 30 minutes to an hour. One face-to-face interview took place in a private office to maintain privacy for the participant. All other nine interviewees conducted their interviews via audio recorded teleconferences at a time that was best for them in their chosen areas for maximum comfortability.

The interviews took place for a maximum time period of 45 minutes. In the event of additional time being needed during the interviews three was more time allotted based on the consent of the interviewer. After the interviewees provided their final responses, I asked all 10 participants if they would like to add any further information. Depending on the response provided by the interviewee, I asked the interviewee for the permission to follow up with any additional questions. The one-on-one interviews were audio-taped and transcribed. The interviewees were invited to provide their perspectives on recreational marijuana usage. After all interviewing is completed the data analysis portion of the study began.

Data Analysis Plan

The data analysis was completed by audio-taping the interviews conducted with the participants. A transcriptionist transcribed the audio recordings while notes were simultaneously taken during the interviews by the researcher. The transcripts were reviewed upon completion. Manuel transcribing was performed for the organization of data. A security component was implemented to collect and store the data in a single secured file (Alase, 2017). The computer for storage has a highly secure password

protected security feature which allowed the information accumulated to be controlled and accessible within the secured file (Alase, 2017). Coding by hand produces themes from the data, but is an arduous task. The task of discovering the themes was made less arduous due to the usage of time management to explore and the discover the emergent themes. It is when the data are repetitiously investigated that themes emerge showing patterns, which can be observed in both scope and sequence (Alase, 2017; Patton, 2002). The procedures for analyzing the data were meticulous to reduce any biases.

The reason for this is due to processing and detecting coded themes, categorizing the data collectively from groups, and assessing paragraphs in the transcriptions at high rates of speed, both efficiently and effectively (Alase, 2017; Patton, 2002). The phenomenological approach analyzes data in a non-judgmental way which unbiased and fair (Alase, 2017; Patton, 2002). The information was carefully spread out in order to examine the data effectively, which is another effective way of being unbiased in scientific research (Alase, 2017; Patton, 2002). It is because of this analytical process; every interviewees perspective will have the same influence without one perspective being more influential than the other. The data was thoroughly organized into carefully constructed clusters (Patton, 2002). Manual transcribing and coding was utilized to effectively analyze the data collected.

Issues of Trustworthiness

In conducting research it is critical for the researchers to be trustworthy (Lundman, 2004). Vigilance was a key component in ensuring internal and external validity. Internal validity should always be the outcome of reliable truthful data for peer

and non-peer evaluation purposes which is a strong recommendation for researchers (Lundman, 2004). Reliable methods were implored during the research study to implement accuracy, truthfulness, and procedural effectiveness in qualitative research, which was executed by utilizing a peer reviewer from Walden University for professionalism in research (Alae, 2017; Lundman, 2004, Patton, 2002). Effective methods were engaged consistently for the procedural strategies, which yielded vigorous data gathering (Alase, 2017; Patton, 2002). It is through these methods that accurate accounts deriving from the findings were reliable and accurate. There was no information which was not included, or unnecessarily included when the findings were reported as this is a part of being truthful as a researcher.

Credibility

The credibility of the data discovered has been formed by utilizing research methodologies associated with prior research studies which support dependability (Alase, 2017). Any concerns related to this inquiry are dealt with in detailed fashion for the illustration of honesty (see Alase, 2017). Any biases of the researcher were handled by engaging in adaptable thinking (Larsson et al., 2019). Ethical dilemmas were addressed by providing all participants with informed consent documents, being transparent, and by aligning with traditional measures which involve ethics, competency, confirmability, and transferability in scientific research (APA, 2013, 2017; Wolff-Michael & Unger, 2018).

Intercoder Reliability

All aspects of intercoder reliability were implemented promptly during this study. Multiple researchers will provide oversight throughout the execution of data analysis

(Belotto, 2018). It was the intercoder method which generated supervision for dependability relevant to all coding discoveries (Belotto, 2018). Thematic analysis were cultivated and explored in order to abide by strict techniques to generate consistent data interpretation (Belotto, 2018). The repetitious analysis and interpretation of the researcher associated with participant engagement shed light on thematic schemes that enriched intercoder reliability during the findings (Belotto, 2018). The primary rationale for implementing intercoder reliability as a method was to be consistent with previous research methods, which highly contributed to objective discoveries (Belotto, 2018). Repetitious intercoding coding was the responsibility of the researcher where the data was scrutinized multiple times to observe reoccurring themes (Belotto 2018).

Effective utilization of data sources was applied to incorporate all the perspectives from the interviewees (Alase, 2017; Patton, 2002). Recommendations and feedback were sought by the main investigator from dissertation committee members to aid in the development of highly reliable research outcomes. Member checking was utilized to evaluate discourse from the study for any biases which could have presented itself during the completion of this investigation (Alase, 2017; Patton, 2002). The interviewees were presented with copies of the transcript after the completion of their interviews and when the transcript was available (Alase, 2017; Patton, 2002). Other factors this researcher included under the umbrella of being trustworthy were to extensively review external validity factors that developed from oversimplification (Alase, 2017; Patton, 2002). The review of external validity factors include heavily considering strategies involving being able to effectively transfer data in a reliable and confirmable way during data

transcription (Alase, 2017). It was vital to utilize effective methods for appropriate data collection dissemination (Alase, 2017).

Ethical Procedures

The Walden University Institutional Review Board (IRB) approved my proposal before I found and conducted interviews with participants. Awaiting approval before conducting research is critical, because the IRB protects all participants against human right violations. It is also critical because the IRB process verifies that the study is free from any potential risks associated with physical, mental, social, financial, or legal detriment to the interviewees in the study which was conducted (Alase, 2017). In order to prevent ethical issues from occurring when conducting qualitative research studies, informed consent forms were provided to all participants, so they would have a complete understanding of the nature of the study. All interviewees were informed by the principle investigator of this research study that their responses would be secretive and not associated with them in any way through the use of initials.

All interviewees were informed about cancellation options given to them prior to the interview. The option allowed any interviewee to terminate participation from the study without concern for negative consequences, if they became uncomfortable at any time. Interviewees were informed of the total process before the interviews commenced, which accompanied consent forms for participant reviews and the attainment of understanding. The participants were also informed of how their participation could make a difference in terms of positive change. The interviews commenced via telephone, which allowed participants to select secure and silent settings for optimal interviewing. The

interviewees and I both made decisions for the time and day that the interviews were to be conducted. No incentives for the attainment of participants were offered. I notified the participants beforehand that I would not allow the recordings to be accessible for any other party outside of the research committee. The proposal was approved through the IRB for protection of the participants in the study. Each participant was provided beforehand with a consent form detailing the nature and intricacies of this investigative study. Lastly, a section of the consent form guaranteed anonymity for all participants involved in the study.

Recruitment Protocol

The main purpose associated with the APA principles for conducting research are currently and have always been to take human participants, autonomy, integrity into regard (APA, 2017). I dealt with problematic ethical issues during recruitment to eliminate any instances of harm to the participants under study (see Alase, 2017). All procedures, methodologies, and approaches during interviews with participants were utilized with the consent and authorization of the participant with strict dedication to IRB human protection protocols (Alase, 2017). Those participants from vulnerable populations were excluded for varying ethical reasons and to ensure harm prevention (Lapid et al., 2019).

Summary

Qualitative phenomenological research methodologies were implemented to gather perspectives derived from the one-on-one interviews. The interviews took place with young adult recreational marijuana users located in one of two large metropolitan

areas (Alase, 2017; Moustakas 1994). The one-on-one interviewing strategy afforded me the opportunity to ask critical questions about the participants' recreational marijuana usage in private settings (see Alase, 2017; Emery et al., 2020; Moustakas 1994). The one-on-one interviewing method allowed the interviewees and me to discuss recreational marijuana usage in a way that was open, transparent, and without interruption (Alase, 2017; Emery et al., 2020; Moustakas 1994). Asking questions during the interviews in a nonbiased, ethical way maintains the protocol for ethics in scientific research (Alase, 2017; Wolff-Michael & Unger, 2018).

I interviewed the 10 participants via cell phone for the convenience of all parties involved. The interviews lasted until I determined that saturation had been reached for all questions. The original timeslot was 45 minutes to 1 hour for each interview. The questions I asked were open-ended so the interviewees could speak freely about their lived experiences (see Alase, 2017; Moustakas 1994). The interviews were audio-taped for backup and transcribing purposes. I transcribed and coded the data manually to discover reoccurring themes and gain a comprehensive account of the data without biases. Chapter 4 will consist of vivid details on the exploration. The investigation was thorough and rigorous, which increased transparency for all documented research procedures (Alase, 2017; Flocco, 2020; Moustakas 1994). The data from the locations, the demographics, data collection, analysis, and results are carefully clarified to improve credibility. A discussion of the results will be provided in Chapter 4 of the study.

Chapter 4: Results

Introduction

The purpose of this study was to explore the perceptions of young adult recreational marijuana users resulting from their lived experiences. The participants for this study were from several U.S. states where marijuana is legal for both recreational and medicinal purposes. The legalization era formed their lived experiences before this study was conducted. I constructed the first research question to gain an understanding on how young adults in the study perceived recreational marijuana usage before, during, and after they engaged in use. The second research question was constructed to gain a comprehensive understanding about participants' lived experiences regarding recreational marijuana usage.

Setting

The Walden University IRB granted approval (number 07-10-20-0489919) giving me permission to initiate research. The committee chair, second committee member, and university research reviewer also approved the study. Completion of recruitment was achieved in consenting public locations using public speaking strategies. Semi-structured interviews were conducted through audio recorded phone calls were approved methods for data collection from the IRB of Walden University. Only one participant was interviewed in person as a result of the COVID-19 pandemic. Because of the current COVID-19 pandemic, I had to modify data collection strategies. Only one participant engaged in a face-to-face interview. Interviews primarily took place through telephone conferences. Those participants who were eligible were selected via self-disclosure and

voluntary responses to the public announcements made in various places. The recruitment criteria announced was for those individuals who were 18 to 25 years of age and who engaged in recreational marijuana use for 1 year or less in states where marijuana was legal.

I sought to explore the lived experience of young adult recreational marijuana users. The interviewees had various experiences with recreational marijuana usage and had varying perspectives, which they did not mind sharing during the interviews. The inquiry into the lives of the interviewees required the use of highly confidential protocols where only the participants' initials were used. All identifiable information was concealed, which safeguarded participant names for confidentiality. Interviewee initials were coded and labeled as Participant 1 (P1) through Participant 10 (P10) for added protection and increased participant anonymity. Direct quotes were utilized to code and eliminate any data contamination and to be fully supportive of thematic conclusions (see Boletto, 2018). All participants selected were young adults who had recreational marijuana experiences totaling 1 year, which provided them with various perspectives on the subject matter.

The young adults who engaged in the interview process varied by geographic location. The recruitment methods allowed me to engage individuals from various states where recreational marijuana is legal. The identification of specific states was intentionally excluded to properly safeguard participant anonymity for the highest confidentiality. A small sample size of participants were utilized to represent the greater populace of those young adults who had recreational marijuana experiences. The

participant interviews were comprised of 10 current recreational marijuana users from major metropolitan areas. Those who were interviewed did not reveal any private information during the course of the interviews conducted. The participants were interviewed via telephone in states where marijuana has been made legal to use for recreational purposes. All research interviewees selected environments that allowed them to undergo their interviews in private settings to maximize the effectiveness of the interview.

Demographics

Participants were 18 to 25 years old and used marijuana recreationally over the course of a year. The interviewees who participated were both male and female from differentiating cultures and ethnic backgrounds within the United States. All participants confirmed their age before participating as interviewees, due to the minimum age requirement for interviewees being 18 and the maximum requirement being 25 years of age. The participants selected had differentiating levels of education, and every individual selected indicated that they could read at the fifth-grade level. Potential participants were 18 to 25 years old and spoke fluent English. The participants varied by nationality, ethnicity, socioeconomic status, and personal belief systems, which were not identified as pertinent demographical factors. The necessary demographic data range were participant applied codes, initials, gender identity, appropriate age range, (see Table 1). I use initials in the table to avoid any perceived breaches in confidentiality.

Table 1*Participant Demographics*

Code	Initial	Gender	Age (years)
P1	DB	Male	22
P2	JB	Female	23
P3	JB	Male	23
P4	ZM	Female	21
P5	AM	Female	21
P6	RL	Male	23
P7	KB	Female	20
P8	RR	Male	25
P9	CY	Male	23
P10	MD	Male	23

Data Collection

Interviews took place primarily through telephone conferences as a direct outcome to safeguard participants during the national quarantine mandates. There were no modifications on how data was collected as described in Chapter 3. The data discovered was comprised of participant participation being that of the participants choice with no incentive, but rather that of their own freewill to participate in a participatory advocacy research study. All interviews were conducted as arranged with the exception of one interview, which was postponed, due to a conflict with scheduling.

The postponed interview took place two days after the originally planned interview and was centered around the participants predilection.

All prospective participants were advised of what the interviews would encompass during the initial discussions. Every potential candidate for the study was given an informed consent form, which consisted of a consent to audio record copy based on the individuals immediate preference. All participant consent was obtained in person, over the phone, or through their selected email before the participants were screened to ensure that procedures were ethically followed. The interviews were scheduled and then initiated after a discussion concerning how the participants wanted to engage in the interview. The participant were given the opportunity to determine when and where they wanted there interviews to take place. In order to provide participants with the most comfortable situation I allowed the complete discretion on how the interviews were conducted. Semistructured interviews are very helpful in providing participants with the ability to be comfortable which maximizes engagement and brings about responses that are comprehensive and thoughtful in qualitative studies.

It was done to promote participant comfortability and privacy about how the interview would take place to maximize dialogue with the participants and ensure for a safe and ethical interview. The interviewee's were thoroughly explained the consent form and protocols for the interview before any audio recordings were engaged in for the study. All qualified individuals were provided assurance that their preferences for receiving the informed consent copies and summary of results would be done according to their choosing. process intentional criteria sampling was implemented to guarantee

thematic reliability and avoid any potential contamination of the data, which could occur, due to a participant having short, or long term memory biases (Ames et al., 2019; Vrijssen et al., 2018).

The integration of purposeful sampling resulted in a comprehensive analysis of the phenomenon at hand, which was predicated on the individual participants having direct experience with the phenomena in question (Ames et al., 2019). After the recruitment stages were completed the audio portion began. The audio recordings were completed via audio one-on-one interviews with a semi-structured conversational approach (see Appendix B). The data analysis portion began directly after the finalized interviews.

Data Analysis

The strategy of taking observational reflective notes was utilized during the recordings to enhance reflexiveness and provide comprehensive auditability. Doing so was helpful in triangulating the data for thematic inclusion for all the participant interviews. The interviews were word-for-word manually transcribed and underwent multiple reviews post the audio recordings for precision and accurate documentation. Memos were recorded during each review to ensure accuracy and provide an extra layer of clarification. The participants were given the opportunity to expound on their thought processes to promote transparency and clarity (Flocco, 2020). It was done by asking sub-questions to the participants, which heavily assisted in promoting a more comprehensive understanding of participant responses (Flocco, 2020). The interviewee's answered all

questions provided in the protocol and were given the option to include supplementary information.

All participants were thoroughly engaged with no interruptions. I provided the participants the opportunity to provide final thoughts at the end of their interviews (Griffin, 2018; Ravenhill & Visser, 2019). IPA techniques involving hermeneutical approaches assisted me in understanding the ideographic nature of the interviewees' experience (see Griffin, 2018; Ravenhill & Visser, 2019). I focused on the interpretive interactions that I had with the participants (see Larsson et al., 2019). After participants completed their responses, the audio recordings were halted. The participants were debriefed and given time to reflect and ask any questions they felt the need to ask before closing out the interview. The transcripts for the interviews were analyzed and categorized utilizing a Microsoft Word chart to code the data.

Doing so aided me in having an organized visual chart to manage effectively, which would be sent to the second intercoder. The Microsoft Word coding charts containing the interview transcripts were then sent to an intercoder for independent analysis relating to preliminary observational reflections. The development of participant commonality, dialogue repetitiveness, and significant thematic phrases were noted through at least three to four cycles of coding to construct categorical data from the information provided. It provided the groundwork for discovering overarching themes from the data throughout the cases presented by the participants. The grouping of participant experiences were vigorously documented throughout the data analysis process, which enhanced reliability and validity, reduced any biases, and produce a

comprehensive examination for the peer reviewer. The transcripts along with the preliminary findings were sent to the individuals for member checking with a valid response rate of 100%.

All 10 participants verified their explanations and the precision of their transcripts. Only one of the participants had the need to provide additional information post their interview for inclusion relating to the data triangulation. Detailed descriptive code lists were constructed for interpreting all reasoning related to the interviewee's specific accounts for answering the research questions. A systematic inductive approach was utilized to discover emerging categorical data. The data was categorized by means of code frequency, criticality, and the importance of each participants ability to comprehensively answer the research questions asked during the interview (Lauterbach, 2018; Noon, 2018). Categorical data was then synthesized for establishing the thematic findings and compared for accurate results as it relates to the quotes from the participants.

The second intercoder and I rigorously selected and grouped the data into categories independently of one another based on semantic meaning related to the research questions provided for the participants. The initial intercoder agreement was 87% and then amended to 97% unanimity after several discussions with the second intercoder. The results for each agreement post discussions and rationales were thoroughly documented. Categorical agreement between myself and the intercoder was applied during the triangulation of data to further develop and advance thematic conclusions for all cases involved. The thematic data was recorded, consolidated, and matched to thematic data across all participant cases to establish the conclusionary

results. The documented outcomes were sent for peer review to confirm the credibility and accuracy for the interpretations discovered. Participants quotes were refined and compared for thematic conclusions for establishing the findings. The results and major quotes have been illustrated in detail, which is followed by a thorough comprehensive analysis for any areas of identified discrepant cases.

Evidence of Trustworthiness

The data triangulation and sampling methods, which are frequently utilized for improving rigor resulted in substantial data saturation, and enhanced credibility of the results (Aldiabat & Le Navenec, 2018). It was both member checking and verification through observations that assisted in establishing the participant transcripts for initial findings for review (Griffin, 2018; Peart et al., 2019).

Credibility

The peer review and second intercoder utilization was completed via a fellow doctoral graduate to increase the overall credibility of results (Belotto, 2018). The utilization of direct interviewee quotes during development of categorical data was used to enhance overall interpretational accurateness of the data presented. All interviews were recorded and transcribed verbatim to certify overall accuracy of interpretations (Ravenhill & Visser, 2019). The documentation was compiled to provide a comprehensive explanation that was beneficial to the movement of the data units for thematic conclusions, which were presented for the peer reviewer. I believe that the effort I put forth enhanced overall credibility for the results. There was one discrepant case discovered and provided from the direct quotes. It was purposefully incorporated within

the thematic analysis to ensure credibility. Clarification of discrepant cases and the invalidation of such evidence has the ability to illustrate thick examined information for data appropriateness during qualitative research methodologies (Vasileiou et al., 2018).

Transferability

Transferability was assessed through the analysis of descriptive rich data utilizing popular semi-structured interviewing strategies to interpret meaning (Daniel, 2019; Lauterbach, 2018; Noon, 2018; Ravenhill & Visser, 2019). The transferability was increased through the thorough documentation of observations made during attentive listening of participant responses (Aldiabat & Le Navenec, 2018). Contextual and setting information was thoroughly done utilizing a procedural checklist to promote transferability (see Appendix D). Audit trials were assembled to exemplify strict protocol to the data collection process and to determine sound interpretation of relevance in replication (Aldiabat & Le Navenec, 2018; Peart et al., 2019).

Dependability

Audit trials increased dependability through conscientious documentation of all processes for enhanced comprehensibility (Peart et al., 2019). Accurate data transcription and thought preservation highly resulted in clarified analytical procedures serving as an audit tool for dependability during the research for all participant responses. The findings were highly dependable, due to the validation and proper implementation of participant quotes, which are represented by reoccurring themes derived from the data provided (Lemon & Hayes, 2020). The second intercoder and I used common IPA techniques to carefully document the data provided for dependability.

Confirmability

The research results were predicated on the interviewee's responses. The use of quotes were explained through tedious clarification to produce confirmability in relationship to thematic findings. The peer review was a highly effective strategy which assisted in limiting bias and protected the participant data from contamination (Aldiabat & Le Navenec, 2018). The peer reviewer during all analysis phases assisted by interpreting the data, which resulted in ensuring all participant data was backed up and confirmed to be accurate (Peart et al., 2019). It was the repetitious reviewing of data by multiple researchers, which limited biases from tainting the data and confirmed credible thematic results (O'Connor & Joffe, 2020). The intercoder discussions led to harmonious agreements promoting reflexiveness and resemblance for the interpretations of themes during the data dissemination procedures (O'Connor & Joffe, 2020).

Reflexiveness data was improved through meticulous documentation and the usage of audit trails which made it accessible for a thoughtful peer review (Peart et al., 2019). All interviewee accounts formulated the basis of results where member checking produced a 100% confirmation rate (Aldiabat & Le Navenec, 2018). Constructive reviews were established and completed with the interviewee's who conducted follow-up member checking for the highest confirmability (Griffin, 2010). It was the validation of observations during the interviews, which produced significant credibility for the interpretation of results (Griffin, 2018; Ravenhill & Visser, 2019).

Results

The latent themes discovered for this study were based on categorical data, which resulted from the analysis of overarching thematic data across the participants' interviews (see Table 2). Latent themes were also based on categorical data regarding participant-identified personal and social parameters such as requiring regulation, having destructive habits post recreational marijuana usage, marijuana being therapeutic, having relationship strains, and dealing with elevated cravings among other negative and positive factors (see Table 3). All quotes presented derived directly from participant interviews. The quotes were then coded to construct the categories from the themes which emerged.

Table 2*Themes Related to Participants' Perceptions of Recreational Marijuana Usage*

Themes	Participant-Identifiers	Participant Quotes
1. Habitual or Dependent (P1, P2, P3, P4, P5, P6, P7, P9, P10)	P4	"I personally believe that weed is kind of addictive"
2. Social Enhancer (P1, P2, P4, P5, P6, P7, P10)	P10	"It makes me more sociable, though, it's easier for me to talk to people"
3. Self-Medication (P1, P2, P3, P6, P7, P9, P10)	P1	"I was diagnosed with autism, it kinda makes me feel like normal"
4. Individualized Need (P1, P2, P4, P5, P6, P7, P8)	P2	"It can be scary sometimes, so it's not for everybody"
5. Stigmatizing (P1, P2, P3, P7, P10)	P7	"It's just like it has a bad, bad stigma around it"

Participants' Perceptions of Recreational Marijuana Usage

Overarching thematic data is produced by integrating quotes taken directly from the participants selected for the interviews completed. There were five themes which

emerged from the participant responses to RQ1: habitual or dependent, social enhancer, self-medication, stigmatizing, and individualized needs. RQ1 was constructed to explore the thoughts of young adults and gain a comprehensive understanding of their lived experiences. There were five themes which surfaced based on the interviewee's responses to RQ2 adverse side effects, the need to regulate usage, positive therapeutic outcomes, relationship strain and lastly, elevated cravings. RQ2 was constructed to gain an understanding of how using marijuana recreationally is affecting young adult participants on psychological, physiological, and sociological levels.

Theme 2.1: Habitual or Dependent

Nine respondents (P1, P2, P3, P4, P5, P6, P7, P9, P10) perceived it as a daily activity, admitted dependency, mentioned addictive properties, or showed signs of dependency. Some of the participants reported regularly partaking in daily usage, although it impacted some of their relationships both positively and adversely. The usage of marijuana also caused unstable anxiety levels, contributed to financial hardships and lastly, caused problems with employment. It was also used as a social enhancer where seven of the participants (P1, P2, P4, P5, P6, P7, P10) perceived marijuana usage to be highly contingent to maintain, or for the development of social competency such as (fitting in, being vulnerable and easing social anxiety).

Theme 2.2: Social Enhancer

Seven participants (P1, P2, P3, P6, P7, P9, P10) reported use for alleviating a variety of physical, mental, and behavioral difficulties (anxiety, reduce stress, relax muscles, depression, mood regulation, anger, focus, impulse control, etc).

Theme 2.3: Self-Medication

Seven participants (P1, P2, P3, P6, P7, P9, P10) reported use for alleviating a variety of physical, mental, and behavioral difficulties (anxiety, reduce stress, relax muscles, depression, mood regulation, anger, focus, impulse control, etc).

Theme 2.4: Stigmatizing

Five participants (P1, P2, P3, P7, P10) reported a stigmatizing effect when questioned. Participants feel that society places negative connotations on marijuana use, which may negatively impact employment, or relationships.

Theme 2.5: Individualized Needs

Seven participants (P1, P2, P4, P5, P6, P7, P8) were adamant that marijuana is based on individual need and considerations are contingent upon age, mental health challenges, strain type, reason for use, and individualized research.

Theme 2.6: Adverse Side Effects

Nine participants (P1, P2, P3, P4, P5, P7, P8, P9, P10) reported paranoia and various negative symptomology while using marijuana and cautioned it's use for young individuals still developing. One participant asserted individuals who partake will remain developmental congruent to the age where use began. Participants also mentioned it may result in addiction, social withdrawal, legal problems, problematic short-term memory, antisocial behavioral patterns, aggression, lack of motivation, lethargy, increased appetite, poor health implications, and diminished ability to reach goals.

Theme 2.7: The Need to Regulate Usage

All participants (P1, P2, P3, P4, P5, P6, P7, P8, P9, P10) were forthcoming saying marijuana should be used in moderation and that it could be dangerous without controls or regulation. Many respondents expressed fear of street use due to the possibility of contaminated product. Marijuana use was reported as safer if under very controlled conditions and the individual did not use too much, reaching negative psychoactive impacts. Limited depth perception was a side effect mentioned, resulting in additional danger with operating machinery. Participants also cautioned use during certain activities and mentioned that persons should follow rules, regulations, and be cautious during use to avoid serious harm.

Theme 2.8: Therapeutic Outcomes

Eight participants (P1, P2, P3, P4, P5, P6, P7, P9) respondents ascertained that marijuana was very therapeutic, resulting with enhanced social abilities, focus, spiritual experience, physical activity, pain reliever, lessened depression, stabilized over reactivity, creativity, calmed racing thoughts, and reduction of anxiety. Some respondents described only positive properties for medical reasons but cautioned saying it may not be experienced universally.

Theme 2.9: Relationship Strain

Six participants (P1, P2, P3, P7, P8, P10) reported initial strain in their relationships and prolonged relationship challenges, which was due to stigma, aversive behavioral events on marijuana, or nonacceptance.

Theme 2.10: Elevated Cravings

Half of the participants (P1, P3, P5, P8, P10) discussed cravings for food, sex, or water. It may have some negative implications for increased financial burdens increased likelihood towards risky sexual activity, or negatively impacting physical health. The participants discussed maturity and responsibility being a key factor in being able to regulate marijuana usage. The young adult participants explained how there is a serious need for first time recreational marijuana users to do their own research before engaging in use of the substance. A few of the participants stated they would not stop smoking marijuana because they enjoyed recreational marijuana. The same participants stated they would reduce the amount of time, energy, and money they put into marijuana and focus on other tasks, if they could do it all over again. Participants 3,5 and 7 also stated recreational marijuana use has taken a serious toll on them by reducing productivity levels. One participant specifically stated he has lost a substantial amount of time with his family, due to hanging out with his friends and smoking weed.

All participants agreed that recreational marijuana use makes them more receptive to being in highly crowded social events, which would ordinarily cause them significant anxiety and stress. These participants reported being able to enjoy more social functions as a result of engaging in recreational marijuana usage right before the event, or during the event, if it was permissible. The adverse effect for the participants was the fact they experienced becoming dependent on recreational marijuana usage to assist them in reaching relaxed states to enjoy themselves during social functions. Various participants experienced negative emotions of sadness, or full blown depression, due to the isolating

effect of being stigmatized. All of the participants put significant value in the ability to be responsible when deciding to use marijuana recreationally. At least two participants responded saying they wanted all young adults to know recreational marijuana is not for everyone. The same participants firmly voiced their opinion saying recreational marijuana usage has to be carefully selected, because there are various strands being distributed, which can cause serious side effects. P7 recalled and reported having known several people who died, due to recreational marijuana usage, because it was laced with fentanyl. P7 further stated these were known associates of hers who died young.

Subthemes derived from the participants experiences regarding recreational marijuana usage were difficulty in quitting, having strained relationships and the need to be able to regulate how much they engaged in recreational marijuana usage. P1, P2, P4, P5, P6, P7 and P8 conveyed having been scared at times, due to various unexpected physiological responses, which alarmed them. P1, P2, P3, P4, P5, P6, P7, P8, P9 and P10 reported it was vital to understand when your limit has been reached when smoking recreational marijuana. P1, P2, P3, P4, P5, P6, P7, and P9 all reported during their interviews varying beneficial elements for medicinal uses, such as reducing muscle spasms, alleviating various types of pain, being able to relax after a hard day and the reduction of social anxiety.

All of the participants discussed how recreational marijuana usage can negatively affect the mentality and developmental processes of some individuals (Shulman et al., 2019). The reoccurring theme from the participants was recreational marijuana usage has both therapeutic factors and harmful factors, which vary person to person. P1, P3, P5, P8,

and P10 described their experiences as having to learn how to control the negatives while enjoying the positives outcomes, which they say make their lives better. All participants stated their reasoning for engaging in recreational marijuana usage in the beginning was because they observed their peers using it and wanted to fit in to certain social circles directly associated with their peers. Every participant was asked what they would like other young adults to know at the end of their interview. All participants stated potential marijuana users should not seek to engage in recreational marijuana use just because they observe their friends doing it.

The participants were adamant to inform their unknown counterparts about the dangers of engaging in recreational marijuana usage, and the need to be responsible when deciding to do so. The participants were asked would they change anything about recreational marijuana usage, and they all stated they would be more responsible about in which they use. One participant said he would never engage in recreational marijuana use, if he knew the totality of effects in the beginning. The same participant stated using marijuana recreationally caused him to not react, due to producing a significant calming effect during stressful encounters. At the same time many of the participants reported not wanting to experience some of the post effects. Additional post recreational marijuana effects included poor health effects and diminished capacity to reach their goals. Many of the participants were resolute stating recreational marijuana should be based on each individual needs, reporting marijuana as also having therapeutic effects, which resulted in enhanced social abilities and the ability to focus more on some occasions.

The participants further reported having deeper spiritual experiences, being able to engage in more physical activities, and using marijuana as a pain reliever where depression could be alleviated. Several participants explained gaining the ability to identify with others in situations, or social settings, which were normally difficult for them. It was stated by participants how they could identify both positive and negative experiences associated with their emotional patterns, and thought processes. Participants recalled being able to utilize marijuana to ease their racing thoughts and being able to get along better with others. One participant stated he would normally react to negative situations. The participants reported having experiences which were both negative and positive which affected them psychologically, physiologically, and socially. The participants experiences with recreational marijuana usage were predicated on young adult participants ability to successfully identify factors, which affected them internally and externally in varying situations. The participants experiences reflected psychological, physiological, and sociological maladaptation's. These maladaptive factors included stigmatization where considerable barriers presented themselves on some occasions.

Table 3

Themes Related to Participants' Perceptions of How Recreational Marijuana Affects Their Lives

Themes	Participant-Identifiers	Participant Quotes
1. Requires Regulation (P1, P2, P3, P4, P5, P6, P7, P8, P9, P10)	P2	“You have to be careful, you can’t be using over a certain limit”
2. Adverse Side Effects (P1, P2, P3, P4, P5, P7, P8, P9, P10)	P9	“I’ve seen people get high and then they go and rob somebody”
3. Therapeutic (P1, P2, P3, P4, P5, P6, P7, P9)	P1	“Good properties for medical uses, like muscle spasms, stroke patients, people that deal with pain, it helps you relax...”
4. Relationship Strain (P1, P2, P3, P7, P8, P10)	P10	“my uhh, relationship with my dad has deteriorated because of my marijuana use”
5. Elevated Cravings (P1, P3, P5, P8, P10)	P5	“The weed makes you get the munches, and then just eat crazy!”

Participants' Perceptions of the Impacts of Recreational Marijuana Usage

I produced overarching thematic data by integrating quotes directly taken from the participants selected. There were four themes which emerged from participant responses to RQ1 social enhancer, self-medication, stigmatizing, individualized needs. RQ1 was constructed to explore the thoughts of young adults and gain a comprehensive understanding of their lived experiences. There were five themes which surfaced based on the interviewee's responses to RQ2 adverse side effects, the need to regulate usage, positive therapeutic outcomes, relationship strain and lastly, elevated cravings. RQ2 was constructed to gain an understanding of how using marijuana recreationally is affecting young adult participants on psychological, physiological, and sociological levels.

Theme 3.1: Habitual or Dependent

Nine respondents (P1, P2, P3, P4, P5, P6, P7, P9, P10) perceived it as a daily activity, admitted dependency, mentioned addictive properties, or showed signs of dependency. Some of the participants reported regularly partake in daily use, although it impacted some of their relationships. The usage of marijuana also caused unstable anxiety levels, contributed to financial hardships and lastly, caused problems with employment. It was also used as a social enhance where 7 Participants (P1, P2, P4, P5, P6, P7, P10) perceived use highly contingent upon maintaining or developing social competency (fitting in, being vulnerable, easing social anxiety)

Theme 3.2: Self-Medication

Seven participants (P1, P2, P3, P6, P7, P9, P10) reported use for alleviating a variety of physical, mental, and behavioral difficulties (anxiety, reduce stress, relax muscles, depression, mood regulation, anger, focus, and impulse control).

Theme 3.3: Stigmatizing

Five participants (P1, P2, P3, P7, P10) reported a stigmatizing effect when questioned. Participants felt society places negative connotations on marijuana use, which may negatively impact employment, or relationships.

Theme 3.4: Individualized Needs

Seven participants (P1, P2, P4, P5, P6, P7, P8) were adamant saying marijuana is based on individual need and considerations are contingent upon age, mental health challenges, strain type, reason for use, and individualized research.

Theme 3.5: Adverse Side Effects

Nine participants (P1, P2, P3, P4, P5, P7, P8, P9, P10) reported paranoia and various negative symptomology while using marijuana and cautioned it's use for young individuals still developing. One participant asserted individuals who partake will remain developmental congruent to the age where use began. Participants also mentioned it may result in addiction, social withdrawal, legal problems, problematic short-term memory, antisocial behavioral patterns, aggression, lack of motivation, lethargy, increased appetite, poor health implications, and diminished ability to reach goals.

Theme 3.6: The Need to Regulate Usage

All participants (P1, P2, P3, P4, P5, P6, P7, P8, P9, P10) were forthcoming expounding on how marijuana should be used in moderation and that it could be dangerous without controls or regulation. Many respondents expressed fear of street use due to the possibility of contaminated product. Marijuana use was reported as safer if under very controlled conditions and the individual did not use too much, reaching negative psychoactive impacts. Limited depth perception was a side effect mentioned, resulting in additional danger with operating machinery. Participants also cautioned use during certain activities and mentioned young adults following their own rules, regulations, and being cautious during use to avoid serious harm.

Theme 3.7: Therapeutic Outcomes

Eight participants (P1, P2, P3, P4, P5, P6, P7, P9) respondents ascertained their concerns voicing marijuana was very therapeutic, resulting in enhanced social abilities, focus, spiritual experience, physical activity, pain reliever, lessened depression, stabilized over reactivity, creativity, calmed racing thoughts, and reduction of anxiety. Some respondents described only positive properties for medical reasons, but cautioned their peers strongly saying it may not be experienced universally.

Theme 3.8: Relationship Strain

Six participants (P1, P2, P3, P7, P8, P10) reported initial strain in their relationships and prolonged relationship challenges due to stigma, aversive behavioral events on marijuana, or nonacceptance.

Theme 3.9: Elevated Cravings

Half of the participants (P1, P3, P5, P8, P10) discussed cravings for food, sex, or water. It may have some negative implications for increased financial burdens increased likelihood towards risky sexual activity, or negatively impacting physical health.

Summary

I investigated the participants' experiences and perceptions of recreational marijuana usage using an IPA approach. Participants direct quotes were utilized to validate thematic conclusions, which aligned with participants-oriented IPA approaches (Alase, 2017; Lingard, 2019). RQ1 was constructed to explore was constructed to explore the thoughts of young adults and gain a comprehensive understanding of their lived experiences. RQ2 was developed to gain an understanding of how using marijuana recreationally is affecting young adult participants on psychological, physiological, and sociological levels. The underlying thematic data representing the participants experiences showed recreational marijuana usage as being a daily activity, which is engaged in for various factors.

The subthemes were established based on the participants capability to discover meaning from their experiences with recreational marijuana usage whether those experiences were negative or positive. Subthemes resulted from the participants recalled experiences regarding psychological, physiological, and sociological outcomes as it pertained to their public and private identities where they were affected on a wide spectrum. These spectrums included whether they were accountable, or not accountable during periods of recreational marijuana usage. Whether or not family, or friends

supported them when they decided to begin engaging in recreational marijuana usage.

How marijuana caused either therapeutic benefits, or adverse side effects, which impacted the participants in a mild, or severe way. A great deal of the participants viewed recreational marijuana usage as a way to increase their own peace of mind, but stated doing so, did not come without certain unwanted side effects such as limited depth perception, problematic short-term memory, antisocial behavioral patterns, aggression, lack of motivation, lethargy, and increased appetite.

Some of the side effects produced were however, positive post engaging in recreational marijuana use such as the ability to stabilize over reactivity, enhanced creativity, assisted them in being able to calm racing thoughts and reducing stress and anxiety. Lastly, the essential concepts which were extricated from the data are briefly encapsulated and linked to the theoretical framework, which guided this phenomenological investigation. There were some stigmatizing effects which impacted their ability to be hold on to meaningful relationships with those who did not partake in recreational marijuana usage on some occasions. There were however positive prosocial outcomes, such as being able to connect with others socially such as consenting family and various social spheres without having social anxiety, due to calming effects produced when using marijuana recreationally. Final findings located in Chapter 5 has been cultivated to provide an analysis of the data researched for this study. Those things discovered were established based on participant willingness to share their meaningful experiences. Several associations were produced as result of the interviews conducted with the participants. The limitations of this study will also be addressed for transparency

in research. Implications and recommendations will be provided to assist practitioners in future research on this subject matter.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

The objective for this investigation was to explore the lived experiences of young adult recreational marijuana users. I used a phenomenological design, IPA, to explore the interviewees' lived experiences (see Emery et al., 2020; Fiala et al., 2018; Noon, 2018). The investigation was conducted to illustrate outcomes post recreational marijuana usage. In Chapter 5, I discuss the results in relation to literature.

Key findings resulting from this phenomenological investigation encompassed five overarching themes for RQ1 and five themes for RQ2. RQ1 themes included habitual or dependent, social enhancer, self-medication, stigmatizing, and individualized needs. Themes demonstrate experiences related to varying outcomes for young adult recreational marijuana users which were both negative and positive. RQ2's overarching themes consisted of adverse side effects, the need to regulate usage, positive therapeutic outcomes, relationship strain, and last, elevated cravings.

The young adults interviewed during this investigation shared their experiences on both personal, professional, and social levels (see Emery et al., 2020; Fiala et al., 2018; Mason et al., 2018; Tucker et al., 2020). I discussed the social implications of the study during the investigative inquiry with the participants. A key social implication is that participants may gain critical knowledge about the varying negative and positive outcomes associated with recreational marijuana usage. The experiences of the young adults interviewed may provide critical information to assist other young adults (Emery et al., 2020; Fiala et al., 2018; Mason et al., 2018; Tucker et al., 2020). A vital

recommendation from both experts and participants included implementing much needed restrictions to protect young adults from pro-use messages, which do not provide the totality of possible outcomes for new recreational marijuana users (Emery et al., 2020; Tucker et al., 2020).

Interpretation of the Findings

Participants reported experiencing physical effects that included altered temperament, increased appetites, both elevated and reduced anxiety, reduced stress, muscle relaxation, increased and reduced depression, mood dysregulation, mood regulation, the increased ability to focus, and at times paranoia. These findings are consistent with the literature. Researchers have found that young adult recreational marijuana use has side effects consisting of impaired functioning across various health domains (D'Amico et al., 2018; Tucker et al., 2019a, 2020). In some cases, cannabis use among young adult has been linked to long-term dependence, or habitual use that posed acute risks such as psychotic symptoms (Burggren et al., 2019; Fiala et al., 2018). Therapeutic satisfaction was also a factor where the young adult interviewees stated recreational marijuana use assisted them in being able to enjoy social functions that were normally not enjoyable in large gatherings.

The participants also perceived daily cannabis use as being nonharmful in the beginning (see Etter, 2017; Fiala et al., 2018; Mayet & Lavagna, 2018; Tucker et al., 2020). There were at least seven interviewees who discussed marijuana being harmful when used disproportionately where outcomes involved CUD (Fiala et al., 2018; Tucker et al., 2020). According to participants, a substantial need currently exists to provide new

young adult marijuana users with a better understanding (see Bouchard et al., 2018; Debnam et al., 2018; Lum et al., 2019; Mason et al., 2018). Participants reported a lack of knowledge and understanding concerning deficits being associated with the consequences of recreational marijuana usage (Fiala et al., 2018). There were differentiating attitudes on the negative and positive impacts associated with recreational marijuana usage.

There were two participants who said they would not engage in recreational marijuana use if they could do it all over again. Participants reported recreational marijuana usage being correlated with dualistic models, stating that marijuana usage started with an enjoyable desire but then became a dependency (see Davis et al., 2018). The participants did not know the scientific terminology but were able to explain what science has already discovered in nonscientific terms. All participants expounded on how recreational marijuana use for pleasure turned into excessive usage and even addiction (see Davis et al., 2018). It is when the pleasure for recreational marijuana use turns into excessive use that the dualistic model is manifest (Davis et al., 2018). The interviewees explained a connection being observed with excessive marijuana usage and a broad spectrum of psychological, sociological, and physiological health-related challenges, which should be avoided if possible (Mason et al., 2018).

Marijuana is also not perceived by young adults in the beginning to involve increased urges for recreational use (Fiala et al., 2018; Pacheco-Colón et al., 2018). I discovered during the interviews that marijuana use is associated with cognition deficits, and low-level distress tolerance on varying occasions, which can be backed by other experts (see Chopko et al., 2018; Pacheco-Colón et al., 2018). On some occasions,

interviewees discussed being able to handle stressful situations where other times they were not able to do so (Chopko et al., 2018; Pacheco-Colón et al., 2018). The ability for new recreational marijuana users to engage in recreational marijuana usage so easily presented a special concern for several of the participants (Fiala et al., 2018). Poor outcomes have been experienced by young adults who utilize marijuana recreationally expecting therapeutic benefits (Metrik, 2018).

All of the participants recommended more social structure through parental supervision for new recreational marijuana users (see Fiala et al., 2018; Metrik, 2018; Strickland et al., 2018). Participants reported how they perceived their recreational cannabis use after having gone through a years' worth of hardships (see Mason et al., 2018). Participants discussed needing some form of psychological intervention, which could have assisted them in gaining a better understanding of how marijuana use would affect their societal relationships (see Fiala et al., 2018). Many young adults reported having better relationships with their non-using family members and some friends before engaging in recreational marijuana usage (Mason et al., 2018). Participants voiced how it was difficult for them to reduce their recreational marijuana usage, although negative in some cases, because of powerful positive outcomes they experienced (Mason et al., 2018).

The young adult participants reported using marijuana recreationally and experiencing serious physiological health risks such as acute heart palpitations on some occasions depending on the batch of weed they received to use (Chopko et al., 2018; Emery et al., 2020; Tucker et al., 2020). The participants stated that in the beginning of

their recreational use they did not have a comprehensive understanding concerning the side effects post usage (see Prince et al., 2018). All participants reported that many new young adult users do not understand the negative academic, criminal, professional, or psychological outcomes associated with recreational marijuana use (Adinoff, & Reiman, 2019; Banducci et al., 2018; Mason et al., 2018). The participants stated that recreational marijuana use caused anxiety in some cases, delusional paranoia, and detachment from reality also known as psychosis unbeknown to the participants (Chopko et al., 2018). Many of the participants discussed vehicular crashes due to driving under the influence (DuPont et al., 2018). All of the participants discussed how recreational marijuana utilization can be administered for medicinal purposes in certain situations. The participants expounded saying in some cases that it helped them with being able to relax after a hard day at work (Chopko et al., 2018; DuPont et al., 2018; Metrik et al., 2018). I discovered that all the participants learned a great deal during their recreational marijuana experiences which were comprised of both benefits and problematic situations.

Limitations of the Study

Transferability in many cases can be a limitation for qualitative studies, reduced by the utilization of the methodology created to produce rich data (Daniel, 2019). Semistructured interviewing strategies used by researchers, which are compatible to traditional IPA methodologies can lessen problems with transferability (Daniel, 2019; Lauterbach, 2018; Noon, 2018; Ravenhill & Visser, 2019). It is when the information becomes saturated and there is a production of rich descriptions based on the interviewees experiences that transferability is increased (Noon, 2018; Peart et al., 2019).

The sampling portion is comprised of purposeful criteria from detailed selections to observe the IPA methodology, which aids in increasing transferability (Peart et al., 2019).

All the participants engaged in recreational marijuana usage and discussed in detail what they experienced in detail. The participants had diverse geographic locations throughout the United States. The participants recreational marijuana usage varied by way of how and when they would use the substance. This did not impact the interpretational data, or cause potential problems as it related to transferability. The demographics did not have a bearing on the participant experiences, nor was there an encompassing gender identity, culture, geographic location central to the focus of this investigation. The cautious documentation for auditability and peer review provided thorough replicability within other contexts (Aldiabat & Le Navenec, 2018; Peart et al., 2019). The completion of rich contextual data was collected during the interviews, and all setting information was documented to increase the transferability of this study.

In some cases, researcher biases can result in data contamination during a study. To prevent this from occurring, the researcher and participant should engage in an interpretive analysis for preventive measures (Alase, 2017). Researcher biases are also alleviated through careful documentation and reflexivity during the peer review process (Aldiabat & Le Navenec, 2018). The use of an intercoder proved to improve confirmability with a final agreement rate of 98 % after completing independent analyses checks and discussing the rationale for all results. All thematic findings were compared to the interviewee transcripts, which guaranteed alignment with participants reasoning to lessen possible biases in conclusions. The phenomenological investigation was centered

around participants being able to understand and interpretate their direct experiences, which assisted the exploration scientifically (Alase, 2017). Direct quotes were utilized to validate the findings being established on all participants understanding regarding this phenomena under study.

The effectiveness of qualitative research is significantly dependent upon the accuracy of participant long term memory. All interviewees were purposefully chosen using the strictest standards to sustain accuracy of memory recollection. Interviewees ages and recreational marijuana use length limitations were set to deter memory biases, or unintentional errors based on poor memory recall, which could possibly contaminate results. Implementation of wise strategies when recruiting participants is critical. The diplomatic strategies utilized assisted in producing reciprocal understandings for strong commitments toward the interviews (Aldiabat & Le Navenec, 2018). The participant were forthcoming, due to the diplomatic strategies utilized and willingly expressed their behaviors post recreational marijuana usage in detail. It was assumed all participants shared their experiences honestly as a result of the safety measures put in place, which concealed their identities. In some cases qualitative methodologies may have limitations, which occur within participant reporting which manifest during the production of findings interviews (Aldiabat & Le Navenec, 2018; Noon, 2018).

In qualitative studies generalizability may be an inherent limitation (Noon, 2018). The research conducted was established using a methodological emphasis on rich data, which required less significant datasets for greater evaluation and discovery (Garwood & Hassett, 2019; Mayet & Lavagna, 2018). In order to uncover phenomena without

generalization qualitative studies are utilized which produce deep contextual meaning (Flocco, 2020). Evaluation of combined untapped phenomena is the principal aim where comparative data saturation strategies were utilized to report methodological limits (Alase, 2017; Aldiabat & Le Navenec, 2018).

Recommendations

Qualitative research studies are advantageous and can be used to describe uncharted phenomenon (Alase, 2017; Flocco, 2020). New researchers who conduct future studies can focus efforts on generalizability and greater participant sample sizes. The investigating researchers who do so, may be able to gain more insight into maladaptive situations resulting from recreational marijuana use as it pertains to young adults and others. The current study can be reproduced with other substance use affected populaces to increase validity of results for varying individuals. Interventions can be created based on further phenomenological investigative endeavors, particularly those which target diverse populations within clinical and forensic frameworks. Investigative efforts on durations of recreational marijuana usage and the outcomes for diverse age groups would be beneficial to cultivate appropriately designed psychological interventions.

Practitioners should be mindful of young adults development requirements, and their backgrounds where they account for diversity in research. Young adults who engage in recreational marijuana usage have multi-layered experiences having significant impacts post usage, which significantly disrupts, or even assist with developmental changes (Bouchard et al., 2018; Debnam et al., 2018; Koocher & Shortt, 2018). Young adult recreational marijuana users often experience constant challenges both personally

and with psychosocial relationships, which are essential for fostering lifelong growth and developmental milestones (Bouchard et al., 2018; Debnam et al., 2018). Developmental milestones have been recognized as having significant influences on how young adults progress in society (Bouchard et al., 2018; Fiala et al., 2018). Maladaptive behavioral patterns may differentiate in young adult recreational marijuana users, which should be identified to adjust therapeutic interventions.

Young adults with various social connections may experience negative impacts from their peers (Stormshak et al., 2019). Therapeutic interventions created with emphasis on the nature and value of social relationships can enhance overall program effectiveness (Stormshak et al., 2019). Practitioners who develop programs and provide well thought out interventions have the ability to promote societal opportunities which lessen substance use and assist in building positive social relationships is recommended for positive social change (Stormshak et al., 2019; Koocher & Shortt, 2018). Those practitioners implement interventions based on the theory of planned behavior can assist in eliminating maladaptive behavioral patterns resulting from recreational marijuana usage (Ajzen, 1971; Ajzen, & Fishbein, 1977). Practitioner insights on how successful psychological interventions intervene in young adults lives who engage in recreational marijuana use can be further advanced for better outcomes (Bouchard et al., 2018; Koocher & Shortt, 2018; Stormshak et al., 2019).

Young adults who display reckless behavior patterns post recreational marijuana usage may result in significant future relationship challenges (Fiala et al., 2018; Mason et al., 2018; Tucker et al., 2020). The recommendation for positive change is to create

therapeutic interventions, which can alleviate negative behavioral outcomes based on the reduction of recreational marijuana usage through effective psychological interventions (Day et al., 2017; Mason et al., 2018). Young adults are at a significant risk for experiencing negative psychological acute and chronic irreparable symptomology (Mason et al., 2018). The recommendation from researchers is to prevent these types of occurrences through fair advertising and better therapeutic interventions which reach the developing minds of young adults (Day et al., 2017; Mason et al., 2018). Practitioners can combat marijuana use problems, which occur post usage through interventions designed to reduce varying mental health problems such as cognition decline (Meier & White, 2018; Prince et al., 2018).

Therapeutic interventions created with the primary focus of lessening maladaptive behavioral outcomes is another recommendation (Day et al., 2017; Meier & White, 2018; Prince et al., 2018). Findings in this phenomenological investigation resulted in significantly clarifying the importance of linking young adults with critical psychological interventions for better mental health outcomes, which was a reoccurring recommendation (Day et al., 2017; Meier & White, 2018). Young adults have faced prolonged psychological problems after engaging in recreational marijuana use with their peers, which is why researchers recommend improved oversight from their parental figures (Bouchard et al., 2018; Debnam et al., 2018; Lum et al., 2019). The young adult participants who engage in recreational marijuana use expressed a need to inform new young adult users of the challenges, which can occur when engaging in recreational marijuana use for the first time. The recommendation was to provide

potential young adult users with a comprehensive understanding through literature on the pros and cons of recreational marijuana usage before they decide to use the substance.

There were several benefits associated with recreational marijuana usage, such as it being used as a mood enhancer for difficult social functions and for physiological therapeutic outcomes which may involve muscle spasms. The participants who were interviewed still highly recommended new users taking the time to become more knowledgeable about recreational marijuana use, so they could have better life outcomes. Positive academic and therapeutic connections may be identifiable to young adults so they can engage in prosocial support groups for successful networking. The recommendation from the participants interviewed is for parents to elevate responsible awareness among potential recreational marijuana users who may purchase varying types of strands without understanding the consequences. Academic and psychosocial rehabilitative programs can incorporate effective prosocial interventions for young adults who are willing and want mental health services both now and in the future. Forthcoming investigative endeavors should focus on implementing innovative interventions, which shed light on how to avoid detrimental outcomes resulting from recreational marijuana usage by new young adult users (Day et al., 2017; Meier & White, 2018).

Implications

It is the unknown strand and overuse of recreational marijuana use, which propagates detrimental symptomology and causes negative health impacts among young adults (Fiala et al., 2018; Mason et al., 2018; Tucker et al., 2020). Young adults who engage in reckless recreational marijuana use forfeit the medicinal benefits from the

healing properties (Mason et al., 2018; Metrik et al., 2018). The wide ranging effects of recreational marijuana use transcend geographical boundaries and all age groups, which include young adults (Day et al., 2017; Mason et al., 2018; Meier & White, 2018; Metrik et al., 2018). The findings may be utilized to clarify detrimental qualities identified in young adult recreational marijuana user experiences. Those young adults who engage in recreational marijuana use without regulation oversight, and without a clear understanding of the varying sub strands, do so at their own risk.

The conclusions can be employed to guide future scientific research studies, and inform policies regarding recreational marijuana use for young adults. Developing appropriate protocols for the marketing and advertising of recreational marijuana use geared towards young adults is imperative (Day et al., 2017; Mason et al., 2018; Meier & White, 2018; Metrik et al., 2018). Marijuana advertisers must share the totality of outcomes with potential young adult marijuana users in order for them to understand both the benefits and dangers associated with recreational marijuana use (Day et al., 2017; Mason et al., 2018; Meier & White, 2018; Metrik et al., 2018). Young adults who have more knowledge concerning recreational marijuana usage will make informed decisions, which can help their futures (Day et al., 2017).

The phenomenological investigation explored recreational marijuana usage within a clinical and forensic context, which shed a serious, comprehensive light on the subject matter. The investigation subsequently further promoted a need for more research on the subject matter to feel the gap in literature. The discovery of problematic factors regarding marijuana use resulted in a need for young adults to have an enhanced understanding of

how recreational marijuana use negatively impacts their mental health and behavior. In some situations poor mental health can lead to serious crimes being committed, such as driving under the influence causing deadly outcomes as in the case: Las Vegas vs. Zaon Collins. Zaon Collings was a 19 year old who was charged with a felony DUI on December 30th of 2020 after killing another driver on the road.

The participants interviewed for this study expressed a serious need for young adults to be informed of the consequences before they engage in recreational marijuana use, which can promote positive societal change. Maladaptive outcomes were demonstrated through substance abuse resulting in depression, paranoia, social angst, social isolation and sometimes even in aggression. One participant voiced how on occasion he has seen other young adults rob people for their weed. Young adults experienced both psychological highs and lows often resulting in maladaptive coping outcomes. Young adults described having negative cognitive patterns where their behavior resulted in detrimental outcomes such as an amotivation syndrome, and poor judgement. The majority of young adults who participated in this investigative study experienced increased spending, which led up to financial disparities.

All young adult participants who were interviewed expressed the need to be more responsible with spending habits based on problems with habitual recreational marijuana use. Participants also felt they suffered due to feeling stigmatized, and losing close social connections with family members. Young adults from disadvantaged environments are identified by researchers as having higher common risk factors post recreational marijuana usage and the results from this investigation can validate these assertions

(Altman et al., 2019; Day et al., 2017; Koocher & Shortt, 2018; Lenton et al., 2018).

Young adults can successfully disengage from reckless recreational marijuana use and abstain from maladaptive behavior, which cause criminal outcomes, due to effective interventions. Participants also clarified feelings of having positive experiences with recreational marijuana use, which needs to be understood for better outcomes. Young adult participants also expressed successful outcomes, which were associated with stress reduction, reduced social anxiety, muscle spasm control, and the increased ability to relax, which needs to be explored further.

Positive Social Change Implications

Results from this study can be applied to therapeutic intervention advancements, which focus on young adult recreational marijuana users who have experienced varying adverse outcomes (Koocher & Shortt, 2018). Young adult users who experience adverse outcomes may lack an understanding on how to get help which is why this study is critical for positive change. Young adults can experience feelings of isolation, which can be reduced by disseminating similar information found in this study (Koocher & Shortt, 2018). The research discovered from this study will add to what practitioners currently have on the subject matter. The data collected will also only advance practitioners therapeutic interventions for more successful outcomes when dealing with young adults. A significant percentage of young adults experience unknown side effects, or symptomology, which they cannot explain (Koocher & Shortt, 2018).

Positive social change occurs when new information is discovered, appropriately evaluated, and disseminated to the target audiences (Day et al., 2017; Koocher & Shortt,

2018). New psychological interventions for the young adult population under investigation can be strategically tailored to maximize young adult acceptance rates. Effective therapeutic services presented by researchers have the ability to be well received even from young audiences. Young adults are able to grasp the concept of dangers which exist with substance abuse and should be given the opportunity to be aware of both therapeutic aspects and risk outcomes for positive social change. Recreational marijuana use has damaging transgenerational effects. The negative ramifications can be reduced through advanced knowledge, updated interventions, effective marketing campaigns and the cultivation of young adult receptiveness toward positive change (Lenton et al., 2018).

It is important to assist in developing young adult mental health and discuss the positive side of cannabis use, which is another aspect of this study (Koocher & Shortt, 2018). There are therapeutic advantages which must be discussed for positive social change. Young adults who engage in recreational marijuana use for medicinal purposes need to understand how to use marijuana responsibly. There are healing properties worth looking into, which are correlated with therapeutic outcomes and need to be addressed (Tucker et al., 2019a; Tucker et al., 2020). The healing properties discovered in cannabis can contribute to positive physical and mental health outcomes when implemented carefully through the proper medical and promote wellbeing (Tucker et al., 2019a; Tucker et al., 2020). Participants discussed during the interviews cannabis use having assisted them with negative mood swings.

The problem comes in when young adults engage in cannabis use without supervised oversight, which can overshadow many of the positive therapeutic outcomes (Metrik et al., 2018; Wolff-Michael & Unger, 2018). Young adult recreational marijuana users must understand concepts pertaining to frequency and dosage (Metrik et al., 2018; Wolff-Michael & Unger, 2018). Deficits of this understanding may further magnify negative outcomes and reduces the positive experiences in young adult recreational marijuana use populations. The understanding of frequency and dosage as it relates to recreational marijuana usage can prevent many dangerous outcomes and increase therapeutic benefits (Metrik et al., 2018; Wolff-Michael & Unger, 2018). Young adults who have experienced detrimental post outcomes from recreational marijuana use and have not succumb to negative irreversible health outcomes, currently have the opportunity to modify their behaviors for positive health outcomes.

The results were gathered and integrated into this research study to assist in cultivating positive social change through new effective psychological interventions, which can reduce the lack of knowledge for young adults. Innovative psychological interventions created by clinical and forensic scientific researchers can assist in enhancing young adult mental health, and increase social change on productive levels.

The lessons learned from this phenomenological investigation was those young adults who have to combat negative side effects from recreational marijuana use normally do not seek help and are susceptible to adverse outcomes. Young adults who engage in recreational marijuana use experience a plethora of outcomes, which are both negative positive. The occurrence of adverse outcomes may result in necessary cognitive based

interventions and medical help (Metrik et al., 2018). The clinical forensic study conducted proves there is a need for more literature on the subject matter, which will contribute significantly to positive social change for the young adult population.

It is critical to note social change initiatives from this study will benefit other societal members as well by lessening their chances of being hit by a young adult driver who is under the influence. Positive change outcomes deriving from this study will extend to young adults and other societal members in multitude of beneficial ways. There are currently vehicular accidents happening to innocent people based on young adults engaging in reckless recreational marijuana usage (Metrik et al., 2018). An opportunity has been discovered which can aid in minimizing harmful outcomes by disseminating the data discovered in this research study (Metrik et al., 2018). The information discovered during this study can prove useful in igniting psychological intervention support systems for young adults who engage in recreational marijuana use. Practitioners attend poster conferences to discover the latest information available. The study conducted will be disseminated with the goal of motivating clinicians and practitioners in developing highly effective therapeutic intervention which reach young adult recreational marijuana users. The young adults who are identified as at-risk can be provided with opportunities to engage in constructive interventions, which are enjoyable and provide them with the opportunity to grow and develop successfully.

Theoretical Implications

The Theory of Planned Behavior (TPB) was utilized to ground the current investigation in exploring how young adults perceived their lived experiences with

recreational marijuana usage. An explorative investigation was conducted concerning young adult maladaptive psychological outcomes experienced, due to recreational marijuana use. Participants who engaged in the study were young adults who had real lived experiences with recreational marijuana use. The participants interviewed who are recreational marijuana users often experience adverse side effects, mixed with therapeutic side effects (Metrik et al., 2018). Young adult populations are at increased risk for developing adverse chronic symptomology, which will affect their future psychosomatic health, relations, and wellbeing (Mason et al., 2018; Slavin et al., 2018; Wolff-Michael & Unger, 2018). The results were collected from examining the interviewees lived-experiences of recreational marijuana usage, which often resulted in problematic self-induced side effects.

Some adverse side-effects included dependence, behavioral disturbances, strained relationships, difficulty obtaining jobs and amotivation syndrome (Meier & White, 2018; Prince et al., 2018). The therapeutic side effects involved tension reduction, reduced anxiety at social functions, muscle relaxation, and diminished mood swings. TPB is predicated on how humans engage in planned behavior, and how beliefs are linked to human behavior patterns. Participants articulated pre-conceived thoughts such as fitting in and being cool as having heightened their desire to engage in recreational marijuana use. Participants described recreational marijuana use as an activity which allowed them to fit in socially and being able to relate to their peers, so they would not be outcasts.

Participants voiced experiencing peer related stigmatism, family pressure for engaging in recreational marijuana use and adverse effects. Participants also voiced

thinking they wished they would have known more about side-effects of recreational marijuana before engaging in use of the substance. Some of the participants expressed they would not engage in recreational marijuana use again, if they could go back in time. Many of the young adults interviewed, voiced their concerns about becoming dependent on recreational marijuana use over time. The participants discussed how they did not know marijuana use would become a habitual problem when they first engaged in recreational use of the substance. All participants recalled having complications with negative outcomes, which impacted the development of prosocial relationships, their finances, and the way they felt about themselves personally.

The investigation resulted in providing vital information regarding recreational marijuana usage associated with the lived experiences of young adults. Young adults articulated, if they knew better, they would have done better. The findings can be used to explain the adverse outcomes of recreational marijuana use, which can have long term effects on young adult development. The current studies on marijuana lack young adults providing their true lived experiences on the subject matter (Meier & White, 2018; Prince et al., 2018). Research on young adult recreational marijuana use and their lived experiences necessitate further investigation to improve practitioners and societal members understanding about this current phenomenon.

Practice Implications

Future research efforts on this subject matter should be focused on assisting young adults with prior knowledge concerning recreational marijuana use. Research on recreational marijuana use and young adults lived experiences are heavily unexplored

(Mason et al., 2018; Slavin et al., 2018; Wolff-Michael & Unger, 2018). Research on the theory of planned behavior as it relates to young adults and recreational marijuana is critical for assisting them in making informed decisions, due to beliefs being associated with behavioral patterns (Ajzen, 1971; Ajzen, & Fishbein, 1977). There is a need for research scientists to understand psychological health problems associated with recreational marijuana use in order to advance positive social change. The current phenomenon is a problem for both clinical and forensic psychologists, because ultimately, young adult behaviors will affect society at large. Research endeavors with larger samples of the young adult populace will produce more generalizable results. This study can be applied to guide future research efforts and inform clinical and forensic practices concerning strategic interventions for young adult recreational marijuana users.

The common lived experiences discovered from participant accounts demonstrated interventions should be constantly updated to maximize young adult efficacy regarding this subject matter. All participants described how they experienced a lack of psychological and physiological harmony within themselves post recreational marijuana usage. Participants also described therapeutic benefits, which assisted them with being functional, also resulting in unwanted side effects. Psychosocial rehabilitation is imperative during this time and should be promoted heavily in educational, crisis intervention training, for the psychological advancement of young adult life skills (Day et al., 2017). The lived experiences expressed by young adult participants support the current immediate need for psychological interventions (Day et al., 2017). Therapeutic

interventions should be developed by researchers and target adverse outcomes related to post recreational marijuana use when they are discovered (Day et al., 2017).

The need exists for multifaceted educational tactics and multi-dimensional psychological interventions, which improve success rates for psychosocial rehabilitation regarding young adults recreational marijuana users (Day et al., 2017). All participants expounded upon the urgent necessity for potential recreational marijuana users to identify the varying outcomes of the substance engaging in use. Psychologists, researchers, and educators can be the catalyst for promoting positive social change regarding this phenomenon. The study conducted has shown this to be true as evidenced by projects such as D.A.R.E (Day et al., 2017). Evidence-based group therapy programs stemming from psychological practitioners practices can be an advantageous resource for young adult recreational marijuana users who need assistance.

Psychosocial rehabilitative efforts should be carefully developed to lessen psychological, physiological, and sociological adverse effects on the young adult population under investigation for this study. Further research recommendations are provided to advance and promote effective strategies to deter and prevent young adults from succumbing to further detrimental outcomes. Appropriate intervention programs must be designed wisely, so young adults will be more willing to engage in the critical services provided. Researchers who conduct additional research on this subject matter using greater sample sizes can inform future related policies regarding the need for more psychosocial rehabilitative interventions (Day et al., 2017). Young adult recreational marijuana users can benefit tremendously from these services, both now and in the future

(Prince et al., 2018; Slavin et al., 2018; Strickland et al., 2018; Wolff-Michael & Unger, 2018).

Conclusion

Societal pillars who promote positive social change have always advanced societal outcomes by implementing effective interventions, which have played a critical role in successful young adult development (Day et al., 2017; Stormshak et al., 2019). Young adults who engage in recreational marijuana use has on many occasions resulted in impaired mental health, increased amotivation syndrome and adverse milestone development (Fiala et al., 2018; Strickland et al., 2018). Young adults who engage in recreational marijuana usage may become dependent on using marijuana and begin to experience mental health decline and physical health ailments (Strickland et al., 2018). The primary reason for this happening is due to young adults engaging in recreational marijuana use with a lack of understanding about cannabis side effects (Blanchard et al., 2019; Cavicchioli et al., 2019). TPB was developed to increase critical thinking for societal members and assist them by helping them make informed decision on critical matters (Ajzen, 1971; Ajzen, & Fishbein, 1977; Ajzen et al., 1982; Ajzen, 1985; Ajzen, & Madden, 1986; Ajzen, 1991).

Participants who are assisted with the power to make informed decisions change any prior beliefs for the better, which in turn modifies their behavior for successful outcomes in many situations. Young adults who experience substantial adverse side effects, due to reckless recreational marijuana use are at increased risk for experiencing both acute and chronic adverse mental health outcomes (Blanchard et al., 2019;

Cavicchioli et al., 2019). Young adults who would normally engage in recreational marijuana use may not do so, if they are provided effective TPB strategies, which are presented during effective intervention programs (Day et al., 2017; Fiala et al., 2018). Young adults who are in their critical stages of development require healthy attachments and positive psychosocial interventions to develop into fully functional adults (Day et al., 2017). Young adult to engagement in effective open communication with their parents, guardians, and practitioners when they have questions concerning recreational marijuana use is paramount. Young adults who are presented with these opportunities can avoid costly life mistakes resulting in more successful life outcomes for better futures and positive social change (Chopko et al., 2018; Day et al., 2017; Meier & White, 2018).

The opportunity for young adults to effectively communicate with parental figures and practitioners is essential for their growth and development (Tucker et al., 2019a). Practitioners who provide effective mental health services, both in and out of schools have the capability to drastically lessen drug related problems among young adults (Gunn et al., 2018; Stormshak et al., 2019). In many cases, young adults can gain support by seeking mental health facilities for assistance and encouragement (Fisher et al., 2019). There are opportunities for psychologists to aid in improving the educational base for skill development as well as assist through hospitals and in their private practices (Fisher et al., 2019). Educators and practitioners who implement strategic evidence-based school programs, such as crisis interventions can assist young adults by providing them with literature on marijuana use (Fisher et al., 2019). Effective literature on recreational marijuana use can aid young adults in having a better understanding concerning the post

effects of marijuana and assist them in making vital informed decisions (Ajzen, 1971; Fisher et al., 2019). Doing so, will significantly contribute to positive social change on a global level (Boccio et al., 2020; Stein et al., 2018).

References

- Adinoff, B., & Reiman, A. (2019). Implementing social justice in the transition from illicit to legal cannabis. *The American Journal of Drug and Alcohol Abuse, 45*(6), 673-688. <https://doi.org/10.1080/00952990.2019.1674862>
- Ajzen, I. (1971). Attitudinal vs. normative messages: An investigation of the differential effects of persuasive communication on behavior. *Sociometry, 34*, 263-280. <https://doi.org/10.2307/2786416>
- Ajzen, I. (1991). The theory of planned behavior. *Organizational Behavior and Human Decision Processes, 50*(2), 179-211. [https://doi.org/10.1016/0749-5978\(91\)90020-T](https://doi.org/10.1016/0749-5978(91)90020-T)
- Ajzen, I., & Fishbein, M. (1977). Attitude-behavior relations: A theoretical analysis and review of empirical research. *Psychological Bulletin, 84*, 888-918. <https://doi.org/10.1037/0033-2909.84.5.888>
- Ajzen, I., & Madden, T. J. (1986). Prediction of goal-directed behavior: Attitudes, intentions, and perceived behavioral control. *Journal of Experimental Social Psychology, 22*(5), 453-474. [https://doi.org/10.1016/0022-1031\(86\)90045-4](https://doi.org/10.1016/0022-1031(86)90045-4)
- Ajzen, I., Timko, C., & White, J. B. (1982). Self-monitoring and the attitude-behavior relation. *Journal of Personality and Social Psychology, 42*, 426-435. <https://doi.org/10.1037/0022-3514.42.3.426>
- Alase, A. (2017). The interpretative phenomenological analysis (IPA): A guide to a good qualitative research approach. *International Journal of Education and Literacy Studies, 5*(2), 9-19. <https://doi.org/10.7575/aiac.ijels.v.5n.2p.9>

- Aldiabat, K. M., & Le Navenec, C. (2018). Data saturation: The mysterious step in grounded methodology. *Qualitative Report*, 23(1), 245-261.
<https://nsuworks.nova.edu/tqr/vol23/iss1/18/>
- Al Omari, O., Wynaden, D., Alkhaldeh, A., Al-Delaimy, W., Heslop, K., Al Dameery, K., & Bani Salameh, A. (2020). Knowledge and attitudes of young people toward mental illness: A cross sectional study. *Comprehensive Child and Adolescent Nursing*, 43(4), 1-13. <https://doi.org/10.1080/24694193.2019.1670752>
- Altman, B. R., Mian, M., Slavin, M., & Earleywine, M. (2019). Cannabis expectancies for sleep. *Journal of Psychoactive Drugs*, 51(5), 405-412.
<https://doi.org/10.1080/02791072.2019.1643053>
- American Psychological Association. (2013). Specialty guidelines for forensic psychology. *American Psychologist*, 68(1), 7-19.
<https://doi.org/10.1037/a0029889>
- American Psychological Association. (2017). *Ethical principles of psychologists and code of conduct*. <https://www.apa.org/ethics/code/index.aspx>
- Ames, H., Glenton, C., & Lewin, S. (2019). Purposive sampling in a qualitative evidence synthesis: A worked example from a synthesis on parental perceptions of vaccination communication. *BMC Medical Research Methodology*, 19(1), 1-9.
<https://doi.org/10.1186/s12874-019-0665-4>
- Banducci, A. N., Felton, J. W., Bonn-Miller, M. O., & Lejuez, C. W. (2018). An examination of the impact of childhood emotional abuse and gender on cannabis use trajectories among community youth. *Translational Issues in Psychological*

Science, 4(1), 85-98. <https://doi.org/10.1037/tps0000142>

- Becker, M. P., Collins, P. F., Schultz, A., Urošević, S., Schmalzing, B., & Luciana, M. (2017). Longitudinal changes in cognition in young adult cannabis users. *Journal of Clinical and Experimental Neuropsychology*, 40(6), 529-543. <https://doi.org.ezp.org/10.1080/13803395.2017.1385729>
- Becker, S. J., Marceau, K., Hernandez, L., & Spirito, A. (2019). Is it Selection or Socialization? Disentangling Peer Influences on Heavy Drinking and Marijuana Use Among Adolescents Whose Parents Received Brief Interventions. *Substance Abuse: Research and Treatment*. <https://doi-org.ezp.waldenulibrary.org/10.1177/1178221819852644>
- Belotto, M. J. (2018). Data analysis methods for qualitative research: Managing the challenges of coding, interrater reliability, and thematic analysis. *The Qualitative Report*; Fort Lauderdale, 23(11), 2622-2633.
- Berg, C. J., Haardörfer, R., Getachew, B., Johnston, T., Foster, B., & Windle, M. (2017). Fighting Fire With Fire. *Social Marketing Quarterly*, 23(4), 302-319. <https://doi:101177/1524500417718533>
- Blair, R. J. (2019). Modeling the Comorbidity of Cannabis Abuse and Conduct Disorder/Conduct Problems from a Cognitive Neuroscience Perspective. *Journal of Dual Diagnosis*, 1-19. <https://doi.org.ezp.waldenulibrary.org/10.1080/15504263.2019.1668099>
- Blanchard, B. E., Stevens, A., Cann, A. T., & Littlefield, A. K. (2019). Regulate yourself: Emotion regulation and protective behavioral strategies in substance use

behaviors. *Addictive Behaviors*, 92, 95-101. [https://doi:10.1016/j.addbeh.](https://doi:10.1016/j.addbeh.201812.020)

201812.020

Boccio, C. M., Jackson, D. B., & Leal, W. E. (2020). Nicotine and marijuana among flavor-only vaping youth: New evidence from Monitoring the Future. *Addictive Behaviors*, 102. <https://doi.org.ezp.waldenulibrary.org/10.1016/j.addbeh.2019.106186>

Bosk, E. A., Paris, R., Hanson, K. E., Ruisard, D., & Suchman, N. E. (2019). Innovations in child welfare interventions for caregivers with substance use disorders and their children. *Children and Youth Services Review*, 101, 99-112. <https://doi:10.1016/j.childyouth.2019.03.040>

Bouchard, M., Gallupe, O., Dawson, K., & Anamali, M. (2018). No place like home? Availability, opportunity, and substance use in adolescence. *Journal of Youth Studies*, 21(6), 747-764. <https://doi:10.1080/13676261.2017.1420760>

Boychuk, C., Lysaght, R., & Stuart, H. (2018). Career Decision-Making Processes of Young Adults With First-Episode Psychosis. *Qualitative Health Research*, 28(6), 1016-1031. <https://doi.org.ezp.waldenulibrary.org/10.1177/1049732318761864>

Burggren, A. C., Shirazi, A., Ginder, N., & London, E. D. (2019). Cannabis effects on brain structure, function, and cognition: considerations for medical uses of cannabis and its derivatives. *The American Journal of Drug and Alcohol Abuse*, 1-17. <https://doi.org.ezp.waldenulibrary.org/10.1080/00952990.2019.1634086>

Cavazos-Rehg, P. A., Krauss, M. J., Sowles, S. J., Zewdie, K., & Bierut, L. (2017). Operating a motor vehicle after marijuana use: Perspectives from people who use

high-potency marijuana. *Substance Abuse*, 39(1), 21-26.

<https://doi:10.1080/08897077.2017.1365802>

Cavicchioli, M., Movalli, M., Vassena, G., Ramella, P., Prudenziati, F., & Maffei, C.

(2019). The therapeutic role of emotion regulation and coping strategies during a stand-alone DBT Skills training program for alcohol use disorder and concurrent substance use disorders. *Addictive Behaviors*, 98, 106035.

<https://doi:10.1016/j.addbeh.2019.106035>

Centers for Disease Control and Prevention. (2018). 1995–2017 Middle school youth risk behavior survey data. Retrieved from <https://nccd.cdc.gov/youthonline/>

Chopko, B. A., Papazoglou, K., & Schwartz, R. C. (2018). Mindfulness-Based

Psychotherapy Approaches for First Responders: From Research to Clinical Practice. *American Journal of Psychotherapy*, 71(2), 55-64.

<https://doi:10.1176/appi.Psychotherapy.20180015>

Chye, Y., Christensen, E., & Yücel, M. (2019). Cannabis Use in Adolescence: A Review of Neuroimaging Findings. *Journal of Dual Diagnosis*, 1-23.

<https://doi.org.ezp.Waldenulibrary.org/10.1080/15504263.2019.1636171>

Chye, Y., Christensen, E., Solowij, N., & Yücel, M. (2019). The Endocannabinoid

System and Cannabidiol's Promise for the Treatment of Substance Use Disorder.

Frontiers in Psychiatry, 10. <https://doi:10.3389/fpsy.2019.00063>

D'Amico, E. J., Parast, L., Shadel, W. G., Meredith, L. S., Seelam, R., & Stein, B.D.

(2018). Brief motivational interviewing intervention to reduce alcohol and marijuana use for at-risk adolescents in primary care. *Journal of Consulting and*

Clinical Psychology, 86(9), 775-786. <https://doi:10.1037/ccp0000332>

- Daniel, B. K. (2019). What constitutes a good qualitative research study? Fundamental dimensions and indicators of rigor in qualitative research: The TACT framework. *European Conference on Research Methodology for Business and Management Studies; Kidmore End: 101-108,IX. Kidmore End: Academic Conferences International Limited*. 16-17. <https://doi:10.34190/rm.19.113>
- Day, L. E., Miller-Day, M., Hecht, M. L., & Fehmie, D. (2017). Coming to the new D.A.R.E.: A preliminary test of the officer-taught elementary keepin' it REAL curriculum. *Addictive Behaviors*, 74, 67-73.25
- Davis, A. K., & Arterberry, B. J. (2019). Passion for Marijuana Use Mediates the Relations between Refusal Self-Efficacy and Marijuana Use and Associated Consequences. *Journal of Psychoactive Drugs*, 51(4), 343-350. <https://doi:10.1080/02791072.2019.1596334>
- Davis, A. K., Arterberry, B. J., Bonar, E. E., Bohnert, K. M., & Walton, M. A. (2018). Why do young people consume marijuana? Extending motivational theory via the dualistic model of passion. *Translational Issues in Psychological Science*, 4(1), 54-64. <https://doi:10.1037/tps0000141>
- Debnam, K. J., Saha, S., & Bradshaw, C. P. (2018). Synthetic and Other Drug Use among High School Students: The Role of Perceived Prevalence, Access, and Harms. *SUBSTANCE USE & MISUSE*, 53(12), 2069–2076. <https://doi.org.ezp.waldenulibrary.org/10.1080/10826084.2018.1455699>
- Doss, B. D., Feinberg, L. K., Rothman, K., Roddy, M. K., & Comer, J. S. (2017). Using

technology to enhance and expand interventions for couples and families:

Conceptual and methodological considerations. *Journal of Family*

Psychology, 31(8), 983-993. <https://doi.org/10.1037/fam0000349>

Duperrouzel, J. C., Granja, K., Pacheco-Colón, I., & Gonzalez, R. (2019). Adverse Effects of Cannabis Use on Neurocognitive Functioning: A Systematic Review of Meta-Analytic Studies. *Journal of Dual Diagnosis*, 1-15. <https://doi-org.ezp.waldenulibrary.org/10.1080/15504263.2019.1626030>

DuPont, R. L., Holmes, E. A., Talpins, S. K., & Walsh, J. M. (2018). Marijuana-Impaired Driving. *Oxford Clinical Psychology*. <https://doi.org/10.1093/med-psych/9780190263072.003.0008>

Emery, N. N., Carpenter, R. W., Treloar Padovano, H., & Miranda, R., Jr. (2020). Why don't they stop? Understanding unplanned marijuana use among adolescents and young adults. *Psychology of Addictive Behaviors*. <https://doi.org.ezp.waldenulibrary.org/10.1037/adb0000561>

Etter, J. (2017). Gateway effects and electronic cigarettes. *Addiction*, 113(10), 1776-1783. <https://doi.org/10.1111/add.13924>

Fiala, S. C., Dilley, J. A., Firth, C. L., & Maher, J. E. (2018). Exposure to Marijuana Marketing After Legalization of Retail Sales: Oregonians' Experiences, 2015–2016. *American Journal of Public Health*, 108(1), 120-127. <https://doi.org/10.2105/ajph.2017.304136>

Fisher, S., Wheeler, L. A., Arora, P. G., Chaudry, J., & Barnes-Najor, J. (2019). Ethnic identity and substance use in multiracial youth: the moderating role of support

networks. *Substance Use & Misuse*, 54(9), 1417-1428. <https://doi:10.1080/10826084.2019.1573834>

Flocco, S. F., Caruso, R., Barello, S., Nania, T., Simeone, S., & Dellafiore, F. (2020).

Exploring the lived experiences of pregnancy and early motherhood in Italian women with congenital heart disease: An interpretative phenomenological analysis. *BMJ Open*, 10(1), 1–9. <https://doi:10.1136/bmjopen-2019-034588>

Francis, J.J., Johnston, M., Robertson, C., Glidewell, L, Entwistle, V., Eccles, M.P., &

Grimshaw, J.M. (2010). What is an adequate sample size? Operationalizing data saturation for theory-based interview studies. *Psychology and Health*, 25(10), 1229-1245. <https://doi:10.1080/08870440903194015>

Friese, B. (2017). “Is Marijuana Even a Drug?” A Qualitative Study of How Teens View

Marijuana Use and Why They Use It. *Journal of Psychoactive Drugs*, 49(3), 209-216. <https://doi:10.1080/02791072.2017.1290854>

Gambetti, E., Zucchelli, M. M., Nori, R., & Giusberti, F. (2019). Psychological

assessment in abuse and neglect cases: The utility of the MMPI-2. *Professional Psychology: Research and Practice*, 50(6), 384-394.

<https://doi:10.1037/pro0000272>

Gazibara, T., Prpic, M., Maric, G., Pekmezovic, T., & Kisic-Tepavcevic, D. (2017).

Medical Cannabis in Serbia: The Survey of Knowledge and Attitudes in an Urban Adult Population . *Journal of Psychoactive Drugs*, 49(3), 217-224.

<https://doi:10.1080/02791072.2017.1292434>

Giorgi, A. (2012). The descriptive phenomenological psychological method

[Monograph]. *Journal of Phenomenological Psychology*, 43(1), 3-12.

<https://doi:10.1163/156916212X63293>

Goldstone, D., & Bantjes, J. (2018). Mental health care providers talk about their experiences preventing suicide in people with substance use disorders in South Africa: implications for clinical practice. *International Journal of Psychiatry in Clinical Practice*, 23(1), 40-48. <https://doi:10.1080/13651501.2018.1438628>

Griffin, G. (2018). "It's not just a matter of speaking...": The vicissitudes of cross-cultural interviewing. *Qualitative Research Journal*, 18(2), 105-114.

<https://doi:10.1108/qrj-d-17-00050>

Gruber, S. A., & Sagar, K. A. (2017). Marijuana on the Mind? The Impact of Marijuana on Cognition, Brain Structure, and Brain Function, and Related Public Policy Implications. *Policy Insights from the Behavioral and Brain Sciences*, 4(1), 104-111. <https://doi.org.ezp.waldenulibrary.org/10.1177/2372732216684851>

Gunn, R. L., Norris, A. L., Sokolovsky, A., Micalizzi, L., Merrill, J. E., & Barnett, N. P. (2018). Marijuana use is associated with alcohol use and consequences across the first 2 years of college. *Psychology of Addictive Behaviors*, 32, 885-894. [10.1037/adb0000416](https://doi:10.1037/adb0000416)

Habeger, A. D., Van Vulpen, K. S., & Simmons, T. F. (2018). Perceptions of rural school mental health services: a focus group study. *Journal of Child & Adolescent Mental Health*, 30(1), 1-10. <https://doi:10.2989/17280583.2017.1419250>

Hecht, M. L., & Miller-Day, M. (2017). "keepin' It REAL": A Case History of a Drug Prevention Intervention. *Oxford Research Encyclopedia of Communication*.

<https://doi:10.1093/acrefore/9780190228613.013.370>

- Hecht, M. L., Shin, Y., Pettigrew, J., Miller-Day, M., & Krieger, J. L. (2018). Designed Cultural Adaptation and Delivery Quality in Rural Substance Use Prevention: an Effectiveness Trial for the Keepin' it REAL Curriculum. *Prevention Science, 19*(8), 1008-1018. <https://doi:10.1007/s11121-018-0937-y>
- Helm, S., & Okamoto, S. K. (2019). Gendered perceptions of drugs, aggression, and violence. *Journal of Interpersonal Violence, 34*, 2292– 2312. <https://dx.doi.org/10.1177/0886260516660301>
- Heley, K., Kennedy-Hendricks, A., Niederdeppe, J., & Barry, C. L. (2019). Reducing Health-Related Stigma Through Narrative Messages. *Health Communication, 1-12*. <https://doi-org.ezp.waldenulibrary.org/10.1080/10410236.2019.1598614>
- Holmlund, T. B., Cohen, A. S., Fugelli, P., Bergasager, D., Foltz, P. W., Johansen, H. D., Sigurdson, R., Cheng, J., Bernstein, J., Rosenfeld, E., & Elvebag, B. (2019). Moving psychological assessment out of the controlled laboratory setting: Practical challenges. *Psychological Assessment, 31*(3), 292-303. <https://doi:10.1037/pas0000647>
- Hill, K. P., & Saxon, A. J. (2018). The Role of Cannabis Legalization in the Opioid Crisis. *JAMA Internal Medicine, 178*(5), 679. <https://doi:10.1001/jamainternmed.2018.0254internmed.2018.0524>
- Jiang, S., Wu, L., & Gao, X. (2017). Beyond face-to-face individual counseling: A systematic review on alternative modes of motivational interviewing in substance abuse treatment and prevention. *Addictive Behaviors, 73*, 216-235. <https://doi:>

10.1016/j.addbeh.2017.05.023

- Johnson, E. I., Kilpatrick, T., Bolland, A. C., & Bolland, J. (2019). Household Member Arrest and Adolescent Substance Use: The Mediating Roles of Parenting and Youth Psychological Distress. *Criminal Justice and Behavior*, *46*(8), 1088–1105. <https://doi.org/10.1177/0093854819858121>
- Kemmis, S., Wilkinson, M. (1998). *Participatory Action Research and the Study of Practice*. Atweh, S. Kemmis, & P. Weeks (Eds.), *Action Research in Practice: Partnerships for Social Justice in Education* (pp.21-36). New York: Routledge.
- Kioumarsis, A., Reed, M., & Lankenau, S. (2017). Medical marijuana dispensaries in Los Angeles: Access and service among young adults. *Drug and Alcohol Dependence*, *171*, e104. <https://doi:10.1016/j.drugalcdep.2016.08.291>
- Koocher, G. P., & Shortt, D. (2018). Addressing legal marijuana use in psychological practice. *Practice Innovations*, *3*(4), 261-270. <https://doi:10.1037/pri0000077>
- Kusturica, M. P. (2018). Medical students' knowledge and attitudes regarding medical cannabis. *Intrinsic Activity*, *6* [Supplemental Material]. 1, A7.1. <https://doi:10.25006/ia.6.S1-a7.1>
- Lankenau, S. E., Ataiants, J., Mohanty, S., Schrage, S., Iverson, E., & Wong, C. F. (2017). Health conditions and motivations for marijuana use among young adult medical marijuana patients and non-patient marijuana users. *Drug and Alcohol Review*, *37*(2), 237-246. <https://doi:10.1111/dar.12534>
- Lankenau, S. E., Tabb, L. P., Kioumarsis, A., Ataiants, J., Iverson, E., & Wong, C. F. (2019). Density of Medical Marijuana Dispensaries and Current Marijuana Use

among Young Adult Marijuana Users in Los Angeles. *Substance Use & Misuse*, 54(11), 1862-1874. <https://doi:10.1080/10826084.2019.1618332>

Lapid, M. I., Clarke, B. L., & Wright, R. S. (2019). Institutional review boards: What clinician researchers need to know. *Mayo Clinic Proceedings*, 94(3), 515-525. <https://doi:10.1016/j.mayocp.2019.01.020>

Larsen, T. B., Urke, H., Tobro, M., Årdal, E., Waldahl, R. H., Djupedal, I., & Holsen, I. (2019). Promoting Mental Health and Preventing Loneliness in Upper Secondary School in Norway: Effects of a Randomized Controlled Trial. *Scandinavian Journal of Educational Research*, 1-14. <https://doi.org.ezp.waldenulibrary.org/10.1080/00313831.2019.1659405>

Larsson, V., Holmbom-Larsen, A., Torisson, G., Strandberg, E. L., & Londos, E. (2019). Living with dementia with Lewy bodies: An interpretative phenomenological analysis. *BMJ Open*, 9(1), 1-10. <https://doi:10.1136/bmjopen-2018-024983>

Lauterbach, A. A. (2018). Hermeneutic phenomenological interviewing: Going beyond semi-structured formats to help participants revisit experience. *The Qualitative Report; Fort Lauderdale*, 23(11), 2883-2898. Retrieved from <https://nsuworks.nova.edu/tqr/vol23/iss11/16/>

Lenton, S., Frank, V. A., Barratt, M. J., Potter, G. R., & Decorte, T. (2018). Growing practices and the use of potentially harmful chemical additives among a sample of small-scale cannabis growers in three countries. *Drug and Alcohol Dependence*, 192, 250-256. <https://doi:10.1016/j.drugalcdep.2018.07.040>

Lemon, L. L., & Hayes, J. (2020). Enhancing trustworthiness of qualitative findings:

Using Leximancer for qualitative data analysis triangulation. *The Qualitative Report*, 25(3), 604–614. Retrieved from Proquest Central.

Lingard, L. (2019). Beyond the default colon: Effective use of quotes in qualitative research. *Perspectives on Medical Education*, 8(6), 360–364.
<https://doi:10.1007/s40037-019-00550-7>

Lum, H. D., Arora, K., Croker, J. A., Qualls, S. H., Schuchman, M., Bobitt, J., ... Kaskie, B. (2019). Patterns of Marijuana Use and Health Impact: A Survey Among Older Coloradans. *Gerontology and Geriatric Medicine*, 5, 233372141984370. <https://doi:10.1177/2333721419843707>

Lundman, G.B. (2004). Qualitative content analysis in nursing research: conceptions, procedures, and measures to achieve trustworthiness. *Nurse Education*, 24(2), 105-112. <https://doi:10.1016/j.nedt.2003.10.001>

Macleod, S., Reynolds, M. G., & Lehmann, H. (2018). The mitigating effect of repeated memory reactivations on forgetting. *Science of Learning*, 3(1), 1–8.
<https://doi:10.1038/s41539-018-0025-x>

Mason, M. J., Zaharakis, N. M., Moore, M., Brown, A., Garcia, C., Seibers, A., & Stephens, C. (2018). Who responds best to text-delivered cannabis use disorder treatment? A randomized clinical trial with young adults. *Psychology of Addictive Behaviors*, 32(7), 699-709. <https://doi:10.1037/adb0000403>

Matsea, T., Ryke, E., & Weyers, M. (2017). Assessing mental health services in a rural setting: Service providers' perspective. *International Journal of Mental Health*, 47(1), 26-49. <https://doi:10.1080/00207411.2017.1377805>

- Mayet, A., & Lavagna, C. (2018). Electronic cigarettes: harm reduction tool or new substance use behavior? *Addiction, 113*(10), 1786-1788. <https://doi:10.1111/add.14220>
- Mays, D., Villanti, A., Niaura, R. S., Lindblom, E. N., & Strasser, A. A. (2017). The Effects of Varying Electronic Cigarette Warning Label Design Features On Attention, Recall, and Product Perceptions Among Young Adults. *Health Communication, 34*(3), 317-324. <https://doi:10.1080/10410236.2017.13720504>
- Meier, M. H., & White, M. (2018). Do young-adult cannabis users show amotivation? An analysis of informant reports. *Translational Issues in Psychological Science, 4*(1), 99-107. <https://doi:10.1037/tps0000150>
- Meshberg-Cohen, S., Kachadourian, L., Black, A. C., & Rosen, M. I. (2017). Relationship between substance use and attitudes towards seeking professional psychological help among veterans filing PTSD claims. *Addictive Behaviors, 74*, 9-12. <https://doi:10.1016/j.addbeh.2017.05.024>
- Meshesha, L. Z., Utzelmann, B., Dennhardt, A. A., & Murphy, J. G. (2018). A behavioral economic analysis of marijuana and other drug use among heavy drinking young adults. *Translational Issues in Psychological Science, 4*(1), 65-75. <https://doi:10.1037/tps0000144>
- Metrik, J., Gunn, R. L., Jackson, K. M., Sokolovsky, A. W., & Borsari, B. (2018). Daily patterns of marijuana and alcohol Co-use among individuals with alcohol and cannabis use disorders. *Alcoholism: Clinical and Experimental Research, 42*(6), 1096-1104. <https://doi.org/10.1111/acer.13639>

- Mills, R., Kisely, S., Alati, R., Strathearn, L., & Najman, J. M. (2017). Child maltreatment and cannabis use in young adulthood: a birth cohort study. *Addiction, 112*(3), 494–501. <https://doi-org.ezp.waldenulibrary.org/10.1111/add.13634>
- Moustakas, C. (1994). *Phenomenological research methods* [Monograph]. Thousand Oaks, CA: Sage Publications, Inc.
- Nader, D. A., & Sanchez, Z. M. (2017). Effects of regular cannabis use on neurocognition, brain structure, and function: a systematic review of findings in adults. *The American Journal of Drug and Alcohol Abuse, 44*(1), 4-18. <https://doi:1080/00952990.2017.1306746>
- Noon, E. J. (2018). Interpretive phenomenological analysis: An appropriate methodology for educational research? *Journal of Perspectives in Applied Academic Practice, 6*(1), 75-83. <https://doi:10.14297/jpaap.v6i1.304>
- O'Connor, C., & Joffe, H. (2020). Intercoder Reliability in Qualitative Research: Debates and Practical Guidelines. *International Journal of Qualitative Methods, 19*, 1–13. <https://doi:10.1177/1609406919899220>
- Okamoto, S. K., Helm, S., Ostrowski, L. K., & Flood, L. (2018). The validation of a school-based, culturally grounded drug prevention curriculum for rural Hawaiian youth. *Health Promotion Practice, 19*(3), 369 – 376. <https://dx.doi.org/10.1177/1524839917704210>

- Orsini, M. M., Milroy, J. J., Wyrick, D. L., & Sanders, L. (2018). Polysubstance Use Among First-Year NCAA College Student-Athletes. *Journal of Child & Adolescent Substance Abuse*, 27(3), 189-195. <https://doi:10.1080/1067828x.2018.1444524>
- Orsolini, L., Chiappini, S., Corkery, J. M., Guirguis, A., Papanti, D., & Schifano, F. (2019). The use of new psychoactive substances (NPS) in young people and their role in mental health care: a systematic review. *Expert Review of Neurotherapeutics*, 19(12), 1253-1264. <https://doi:10.1080/14737175.2019.1666712>
- Pacheco-Colón, I., Limia, J. M., & Gonzalez, R. (2018). Nonacute effects of cannabis use on motivation and reward sensitivity in humans: A systematic review. *Psychology of Addictive Behaviors*, 32(5), 497-507. <https://doi:10.1037/adb0000380>
- Patton, M.Q. (2002). *Qualitative & research: Evaluation methods*. (3rd ed.). Thousand Oaks: Sage Publications.
- Peart, A., Lewis, V., Barton, C., Brown, T., White, J., Gascard, D., & Russell, G. (2019). Providing person-centred care for people with multiple chronic conditions: Protocol for a qualitative study incorporating client and staff perspectives. *BMJ Open*, 9(10), 1-9. <https://doi:10.1136/bmjopen-2019-030581>
- Prince, M. A., Conner, B. T., & Pearson, M. R. (2018). Quantifying cannabis: A field study of marijuana quantity estimation. *Psychology of Addictive Behaviors*, 32(4), 426-433. <https://doi:10.1037/adb00003704>
- Quimby, D., Dusing, C. R., Deane, K., DiClemente, C. M., Morency, M. M., Miller, K. M., Richards, M. (2018). Gun Exposure Among Black American Youth Residing

in-Income Urban Environments. *Journal of Black Psychology*, 44(4), 322–346.

<https://doi.org/10.1177/0095798418773188>

Ravenhill, J. P., & Visser, R. O. (2019). “I don’t want to be seen as a screaming queen”:

An interpretative phenomenological analysis of gay men’s masculine identities.

Psychology of Men & Masculinities, 20(3), 324-336. doi:10.1037/men0000163

Reed, M., Kioumarsis, A., Ataiants, J., Fedorova, E. V., Iverson, E., Wong, C. F., &

Lankenau, S. E. (2019). Marijuana sources in a medical marijuana environment:

dynamics in access and use among a cohort of young adults in Los Angeles,

California. *Drugs: Education, Prevention and Policy*, 1-10. <https://doi:10.1080>

[/09687637.2018.1557595](https://doi:10.1080/09687637.2018.1557595)

Rothman, E. F., Stuart, G. L., Temple, J. R., & Heeren, T. (2018). Alcohol, Marijuana,

and Dating Abuse Perpetration by Young Adults: Results of a Daily Call Study.

Violence Against Women, 24(10), 1187–1206. <https://doi.org>

[/10.1177/1077801218781959](https://doi.org/10.1177/1077801218781959)

Sagar, K. A., & Gruber, S. A. (2018). Marijuana matters: reviewing the impact of

marijuana on cognition, brain structure and function, & exploring policy

implications and barriers to research. *International Review of Psychiatry*, 30(3),

251-267. <https://doi-org.ezp.waldenulibrary.org/10.1080/09540261.2018>

[.1460334](https://doi-org.ezp.waldenulibrary.org/10.1080/09540261.2018.1460334)

Saldana, J. (2016). *The coding manual for qualitative researchers* (3rd Ed.). Thousand

Oaks, CA: Sage Publications, Inc.

Sarne, Y. (2019). Beneficial and deleterious effects of cannabinoids in the brain: the case

of ultra-low dose THC [Monograph]. *The American Journal of Drug and Alcohol Abuse*, 1-12. <https://doi:10.1080/00952990.2019.1578366>

Seth, P., Jackson, J. M., DiClemente, R. J., & Fasula, A. M. (2017). Community trauma as a predictor of sexual risk, marijuana use, and psychosocial outcomes among detained African-American female adolescents. *Vulnerable Children & Youth Studies*, 12(4), 353–359. <https://doi.org.ezp.waldenulibrary.org/10.1080/1745128.2017.1325547>

Sellbom, M., & Tellegen, A. (2019). Factor analysis in psychological assessment research: Common pitfalls and recommendations. *Psychological Assessment*, 31(12), 1428-1441. <https://doi:10.1037/pas0000623>

Shulman, S., Seiffge-Krenke, I., Ziv, I., & Tuval-Mashiach, R. (2019). Patterns of romantic pathways among 23-year olds and their adolescent antecedents. *Journal of Youth and Adolescence*, 48(7), 1390-1402. <https://doi:10.1007/s10964-018-0951-1>

Sideli, L., Quigley, H., La Cascia, C., & Murray, R. M. (2019). Cannabis Use and the Risk of Psychosis and Affective Disorders. *Journal of Dual Diagnosis*, 1-21. <https://doi:10.1080/15504263.2019.1674991>

Silins, E., Swift, W., Slade, T., Toson, B., Rodgers, B., & Hutchinson, D. M. (2017). A prospective study of the substance use and mental health outcomes of young adult former and current cannabis users. *Drug and Alcohol Review*, 36(5), 618–625. <https://doi.org.ezp.waldenulibrary.org/10.1111/dar.12512>

Slavin, M. N., Farmer, S., Luba, R., & Earleywine, M. (2018). Expectancy-moderated

effects of cue-induced marijuana craving among university students.

Translational Issues in Psychological Science, 4(1), 43-53. [https://doi.org/10.1037/tps](https://doi.org/10.1037/tps0000149)

0000149

Smart, R., & Pacula, R. L. (2019). Early evidence of the impact of cannabis legalization on cannabis use, cannabis use disorder, and the use of other substances: Findings from state policy evaluations. *The American Journal of Drug and Alcohol Abuse*, 45(6), 644-663. <https://doi-org.ezp.waldenulibrary.org/10.1080/00952990.2019.1669626>

Smith, J. A. (1996). Beyond the divide between cognition and discourse: Using interpretative phenomenological analysis in health psychology. *Psychology & Health*, 11(2), 261-271. <https://doi:10.1080/08870449608400256>

Snowdon, N., Allan, J., Shakeshaft, A., Rickwood, D., Stockings, E., Boland, V. C., Courtney, R. J. (2019). Outpatient psychosocial substance use treatments for young people: An overview of reviews. *Drug and Alcohol Dependence*, 205, 107582. <https://doi:10.1016/j.drugalcdep.2019.107582>

Stein, M. D., Caviness, C. M., Morse, E. F., Grimone, K. R., Audet, D., Herman, D. S., Anderson, B. J. (2018). A developmental-based motivational intervention to reduce alcohol and marijuana use among non-treatment-seeking young adults: a randomized controlled trial. *Addiction*, 113(3), 440–453. <https://doi.org.ezp.waldenulibrary.org/10.1111/add.14026>

Stormshak, E. A., Caruthers, A. S., Gau, J. M., & Winter, C. (2019). The impact of recreational marijuana legalization on rates of use and behavior: A 10-year

comparison of two cohorts from high school to young adulthood. *Psychology of Addictive Behaviors*, 33(7), 595–602.

<https://doi.org.ezp.waldenulibrary.Org/10.1037/adb.0000508>

Strickland, J. C., Cloutier, R. M., Ecker, A. H., & Buckner, J. D. (2018). Advances in psychological research on marijuana. *Translational Issues in Psychological Science*, 4(1), 1-5. <https://doi:10.1037/tps0000152>

Teike, D., & Sneed, K. J. (2018). Building and restoring relationships using the art of invitation: An exploratory phenomenological study. *Social Work and Christianity; Botsford*, 45(4), 3-21.

Tucker, J. S., Pedersen, E. R., Seelam, R., Dunbar, M. S., Shih, R. A., & D'Amico, E. J. (2019). Types of cannabis and tobacco/nicotine co-use and associated outcomes in young adulthood. *Psychology of Addictive Behaviors*, 33(4), 401-411. <https://doi:10.1037/adb0000464>

Tucker, J. S., Rodriguez, A., Pedersen, E. R., Seelam, R., Shih, R. A., & D'Amico, E. J. (2019). Greater risk for frequent marijuana use and problems among young adult marijuana users with a medical marijuana card. *Drug and Alcohol Dependence*, 194, 178-183. <https://doi:10.1016/j.drugalcdep.2018.09.028>

Tucker, J. S., Shadel, W. G., Seelam, R., Golinelli, D., & Siconolfi, D. (2020). Co-use of tobacco and marijuana among young people experiencing homelessness in Los Angeles County. *Drug and Alcohol Dependence*, 207. <https://doi.org.ezp.Waldenulibrary.org/10.1016/j.drugalcdep.2019.107809>

Tuliao, A. P., & Holyoak, D. (2019). Psychometric properties of the perceived stigma

towards substance users scale: factor structure, internal consistency, and associations with help-seeking variables. *The American Journal of Drug and Alcohol Abuse*, 1-9. <https://doi:10.1080/00952990.2019.1658198>

- Vasileiou, K., Barnett, J., Thorpe, S., & Young, T. (2018). Characterizing and justifying sample size sufficiency in interview-based studies: Systematic analysis of qualitative health research over a 15-year period. *BMC Medical Research Methodology*, 18(1), 1-18. <https://doi:10.1186/s12874-018-0594-7>
- Vohra, V., Hodgman, M., Marraffa, J., Barba, K., & Stoppacher, R. (2019). Fentanyl- and fentanyl analog-related deaths across five counties in Central New York between 2013 and 2017. *Clinical Toxicology*, 1-5. <https://doi-org.ezp.waldenulibrary.org/10.1080/15563650.2019.1613548>
- Vrijzen, J. N., Dainer-Best, J., Witcraft, S. M., Papini, S., Hertel, P., Beevers, C. G., Becker, E. S., Smits, J. A. J. (2018). Effect of cognitive bias modification-memory on depressive symptoms and autobiographical memory bias: Two independent studies in high-ruminating and dysphoric samples. *Cognition and Emotion*, 33(2), 288–304. <https://doi:10.1080/02699931.2018.1450225>
- Wadsworth, E., & Hammond, D. (2019). International differences in patterns of cannabis use among youth: Prevalence, perceptions of harm, and driving under the influence in Canada, England & United States. *Addictive Behaviors*, 90, 171-175. <https://doi:10.1016/j.addbeh.2018.10.050>
- Ward, K. C., Lucas, P. A., & Murphy, A. (2018). The Impact of Marijuana Legalization on Law Enforcement in States Surrounding Colorado. *Police Quarterly*, 22(2),

217-242. <https://doi:10.1177/1098611118819902>

- Williams, A. R., Santaella-Tenorio, J., Mauro, C. M., Levin, F. R., & Martins, S. S. (2017). Loose regulation of medical marijuana programs associated with higher rates of adult marijuana use but not cannabis use disorder. *Addiction, 112*(11), 1985-1991. <https://doi:10.1111/add.13904>
- Wolff-Michael, R., & Unger, H. (2018). Current perspectives on research ethics in qualitative research. *Qualitative Social Research; Berlin, 19*(3), 1-12. <https://doi:10.17169/fqs-19.3.3155>
- Xu, J., & Cao, X. (2019). Young Adults' (Mis)use of Prescription Opioid Drugs: An Exploratory Study. *Health Communication, 1-8*. <https://doi:10.1080/10410236.2019.1636343>
- Yilmaz, K. (2013). Comparison of quantitative and qualitative research traditions: Epistemological, theoretical, and methodological differences. *European Journal of Education, 48*(2), 311-325. <https://doi:10.1111/ejed.12014>
- Zullig, K. J., & Valois, R. F. (2016). Perceptions of Harm From Substance Use and Social Self-Efficacy Among Early Adolescents. *Journal of Drug Education, 46*(3-4), 96-112. <https://doi.org/10.1177/0047237917735043>

Appendix A: Consent Form

CONSENT FORM

Young Adults' Perceptions of Recreational Marijuana Usage: A Phenomenological Investigation.

Researcher: Eric Franklin Prince

You are invited to take part in a research study about Young Adults' Perceptions of Recreational Marijuana Usage: A Phenomenological Investigation. This study is being conducted by Eric F. Prince who is a doctoral student at Walden University under the mentorship of Dr. Sandra Caramela-Miller. Eric Prince invites young adults ages (18 to 25) who have had legal experiences with recreational marijuana usage for 6 to 12 months (while 18 or older) to participate in this study. I am only recruiting in states where recreational marijuana use is legal. This form is part of a process called "informed consent". This form is provided for the purpose of giving the potential participant understanding of this study before he or she decides whether or not to take part in this research study.

Background Information

The purpose of this study is to explore and describe ways recreational marijuana usage has impacted the lives of young adults 18 to 25.

Procedures

If you agree to be in this study:

1. The format of interviews will be based on your preference of instant messaging, phone call, or video meeting. You will be debriefed and have an opportunity to ask questions following the interview. The interview process will be audio recorded and may take 45 minutes to 1 hour of your time.
2. Follow up communication will based on your preference (phone, text, video meeting, or email) and may take an additional 10 to 20 minutes of your time. This will allow you the opportunity to confirm whether or not your experiences were accurately depicted.

Here are some sample questions.

1. Provide a description of how recreational marijuana has impacted your life.
2. What would you like other young adults to know before they engage in recreational marijuana use?

Voluntary Nature of the Study

This study is voluntary. You are free to accept or turn down the invitation. No one at Walden University will treat you differently if you decide not to be in the study. If you decide to be in the study you can still change your mind later. You may stop at any time. The researcher will follow up with all volunteers to let them know whether or not they were selected for the study.

Risks and Benefits of Being in the Study

Being in this type of study involves some risk of the minor discomforts that can be encountered in daily life, such as fatigue, stress or becoming upset. Being in this study would not pose risk to your safety or wellbeing.

Payment

There is no payment for participating in this research study. The personal benefit will be that you were a part of an advocacy participatory study, which allows participants/subjects to contribute to the research by providing their true lived experiences and perspectives concerning real world phenomena. In this case the phenomena of young adult recreational marijuana use.

Privacy

Reports coming out of this study will not share the identities of individual participants. Details that might identify participants, such as the location of the study, will not be shared. The researcher will not use your personal information for any purpose outside of this research project. Data will be kept secure by storage in password protected computers and replacing identifiable details of information with pseudonyms. Participant names, and other identifiable information will be removed or altered with alias information to protect participant identity. Participants will be made aware that only the researcher and the faculty have access to the data provided. Data will be kept for a period of at least 5 years, as required by the university.

Contacts and Questions

You may ask any questions throughout the research process for your understanding. Walden University's approval number for this study is **07-10-20-0489919** and it expires on **July 9, 2021**.

Counseling information for those who may need support!

The community crisis stabilization number (617) 371-3000 for participants who may become distressed during the interview. This support is free to all the participants. The community crisis stabilization hotline offers 24 hour support, and is not geographically restricting.

Please print or save this consent form for your records.

Obtaining Your Consent

If you feel you understand the study well enough to make a decision about it, please indicate your consent by:

Consent will be audio recorded or a screenshot of the text, or IM will be taken to protect the research participant.

Appendix B: List of Search Terms and Databases

1. Databases utilized in the literature search: ERIC, PsycINDEX, PsycARTICLES, PsycCRITIQUES, PsycEXTRA, SAGE, SocINDEX, Taylor and Francis Online, and lastly, the Thoreau Multiple Disciplinary Database.
2. Search Engines utilized to investigate and locate scholarly works: Walden University Library, Google, and Google Scholar search engines via the World Wide Web.
3. Key Terms and combinations used in all specified databases: *Marijuana usage* and young adults, *marijuana use disorders*, *young adult cannabis use*, *teenage cannabis use disorder*, *marijuana use disorder among young adults*, and *marijuana and psychological risk factors*.
4. Terms used and specific to the Criminal Justice Database: *driving while drugged*, *drug related vehicular accidents*, and *young adults with mental health disorders*.
5. Terms specific to Thoreau Multi-Database without study parameters for dates: *A-motivation theory*, *the D.A.R.E program*, *mental health care reform*
6. Boolean operators were used to merge research terms for searches: and, or not.
7. Study parameters: peer-reviewed, full text journal articles, published online between 2017 and 2020.

Appendix C: Consent to Audio Record

INFORMED CONSENT FORM (AUDIOTAPE)

Consent Form for Audio taping and Transcribing Interviews

Study Title: Young Adults' Perceptions of Recreational Marijuana Usage: A Phenomenological Investigation

Researcher: Eric F. Prince, Walden University, Under the Direction of Dr. Sandra Caramela-Miller

The research study involves the audio taping of your interview with Eric F. Prince. Neither your name nor any other identifying information will be associated with the audiotape or the transcript. Only the research team will be able to listen to the tapes. The tapes will be transcribed by the researcher Eric F. Prince and erased once the transcriptions are checked for accuracy. Transcripts of your interview will be reproduced in whole or in part for use in presentations, or written products that result from this research study. Neither your name nor any other identifying information (such as your voice) will be used in presentations or in written products resulting from the study. Immediately following the interview, you will be given the opportunity to have the tape erased, if you wish to withdraw your consent to taping, or participation in this research study.

By signing this form you are consenting to:

- having your interview recorded.
- to having the tape transcribed.
- use of the written transcript in presentations and written products.

This consent for taping is effective five years from the date signed. On or before that date, the tapes will be destroyed.

Thank you for your assistance in with this research study!

Participant's Signature _____ Date _____

Appendix D: Interview Protocol

RQ1: How do young adults perceive recreational marijuana usage?

1. What is a typical day for you before during and after smoking?
2. Provide a description of how recreational marijuana has impacted your life.
3. What is a bad day for you concerning marijuana?
4. Describe a good day for you concerning recreational Marijuana.
5. What would you like other young adults to know before they engage in recreational marijuana use?
6. Would you change anything about your recreational marijuana use and why?

RQ2: How does recreational marijuana affect the lives of young adults?

7. Describe the benefits you have experienced with recreational marijuana usage.
8. Provide a description of the challenges you have faced using marijuana recreationally.
9. What would your concerns be about using marijuana recreationally?
10. Provide a few final words for potential recreational marijuana users?

Thank you for participating in this research study, your contributions are highly appreciated. Do you have anything else you would like to add to your responses?

Appendix E: Screening Tool

1. How old are you now?
2. Are you fluent in English?
3. Do you have a fifth-grade reading level or higher?
4. Do you require a legal guardian?
5. Do you feel comfortable with discussing your experience with recreational marijuana usage?
6. May I view a copy of either a state issued identification card, an official birth certificate, passport, or driver's license through Skype, face-to-face (if applicable), or send a copy through postal mail, to verify that you are over 18 years old?
7. Are you comfortable with doing an audio recorded interview or Skype instant messenger interview?

Appendix F: Procedural Checklist

1. Obtain permissions for advertising at a public space (see Consent if applicable):
2. Obtain permissions for advertising on online support/advocacy groups:
3. Voluntary Response Details (document date, time, medium):
4. Was Consent provided at initial contact (how was consent provided and obtained):
5. Screening at initial consent:
6. If questionable, how was age verified (face-to-face or postal mail):
7. Scheduled interview, preference of medium, preference for confirmation (Date, time, preference for medium, preference for receiving informed consent copy):
8. When and how was informed consent copy sent:
9. When and how confirmation was sent (list any responses or lack of response):
10. Was an interview rescheduled:
11. Did consent get communicated prior to interview administration?
12. When/how did interview take place and how long did it take (starting from discussing informed consent, conducting the interview, debriefing, establishing follow-up preference, and ending with postal mail or email preferences for summary of results)?
13. Were participants debriefed (explain study purpose and answer questions)?
14. Was follow-up preference established (write details for follow-up preference):
15. Was follow-up established (details):
16. What was the result of follow-up (were results verified or altered)?

17. Was a 1-2-page summary of results sent to participants?
18. Any additional concerns brought up in the process (including participant withdrawal or reportable events)?
19. If applicable, were any events reported to the IRB within one week? What was the resolution?

Appendix G: Principal Investigator (PI): Eric Franklin Prince NIH Certificate of
Completion



Appendix H: Citi Certificate of Completion



Completion Date 04-Feb-2020
Expiration Date N/A
Record ID 35248874

This is to certify that:

Eric Prince

Has completed the following Citi Program course:

Student Researchers (Curriculum Group)
Student Researchers (Course Learner Group)
1 - Basic Course (Stage)

Under requirements set by:

Walden University



Verify at www.citiprogram.org/verify/?wb6c42bbf-4bf3-43b2-bac5-2e76ecac8fdd-35248874