What is SAM?

• A 501(c)(3) non-profit, educational organization funded by volunteers & private organizations

• Our mission:
  • Educate citizens on the science of marijuana
  • Promote health-first, smart policies and attitudes that decrease marijuana use and its consequences
SAM promotes an evidence-based approach to marijuana policy that prioritizes public health

- **Non-partisan but high-profile:** founded by former Democratic Congressman Patrick Kennedy and leading Republican pundit David Frum

- **Scientific advisory board** of more than 12 leading researchers, professors, and public health/legal experts

- **Hundreds of thousands of press mentions,** including major media outlets such as:

  ![Media Logos](image-url)
Two Organizations, One Mission

**SAM Action (501 C-4)**

- SAM Action is dedicated to promoting healthy marijuana policies that do not legalize drugs
- Active at all levels of national, state, and local policy-making
- Invests dollars in and starts organizations to promote smart marijuana policies

**SAM’s mission (501 C-3)**

- SAM’s mission is to educate citizens on the science of marijuana and to promote health-first, smart policies and attitudes that decrease marijuana use and its consequences
- Brings light to and conducts research into marijuana’s negative effects
Groups SAM has collaborated with

- American Society of Addiction Medicine
- American Academy of Pediatrics
- National Business Group on Health
- American Academy of Child and Adolescent Psychiatry
- Other leading public health authorities
- Over 30 state affiliates, including:
  - Treatment centers
  - Recovery groups
  - Prevention organizations
  - Law enforcement
  - Leading medical authorities
  - Volunteer citizens
  - Business groups
Despite state votes, Marijuana is illegal – because its harmful

1. **Schedule I status**
   Cannot be changed by President; only Congress; means that raw marijuana has high potential for abuse, no medical use; FDA and DEA have affirmed this several times recently

2. **International Law**
   Marijuana is illegal under the US obligations of three int’l treaties, otherwise known as the Single Convention

3. **Illegality Important**
   Keeping marijuana illegal is a key public health strategy – legal drugs are used far more than illegal ones
SOME Components of marijuana are legal – only for medical use – under FDA regulation

1. **Marinol**
   - Synthetic THC - dronabinol or Marinol®; used for nausea related to chemotherapy, though not incredibly common (far superior non-marijuana drugs are usually used) – Schedule 3

2. **Epidiolex**
   - Natural CBD, purified from the plant, exported from the UK, approved for two kinds of rare seizures – Schedule 5

3. **Other drugs on way?**
   - FDA/DEA have allowed research into other marijuana based medications
The false dichotomy: “Legalization OR incarceration?”

People are not in prison for pot; legalization is about making people rich, not social justice.
Three separate issues that often get conflated

1. Penalizing drug users/”decriminalization”
2. Medicinal use of compounds derived from marijuana
3. Legalization of marijuana for “non-medical” use
Not This...
...But This
And This...

MEDICAL MARIJUANA

Home » Health » MMJ

Former Big Pharma OxyContin CEO Now Selling Medical Cannabis

Published 2 years ago on November 29, 2016
By Maureen Meehan
Does the Public Support Marijuana Legalization?

Record-High Support for Legalizing Marijuana

by Justin McCarthy

January 11, 2018 - Dreamers Should Stay, American Voters Say 8-1, Quinnipiac University National Poll Finds; Do Not Enforce Federal Pot Laws, U.S. Voters Say 3-1

Americans continue saying its use should be made legal. The divide between Congress and the American public over pot couldn't be more pronounced.

Sean Williams (TMFUltraLong)
Jan 14, 2018 at 11:41AM
How You Ask the Question Is Key

• Most polls pose a binary question: legalization or criminalization

• The public equates decrim and legalization

• But there is a difference

• When you introduce additional options, the polling changes significantly
Example: Marijuana Replacement Guidance

National Poll, 1000 Registered Voters, Mason Dixon, Jan 10-13, 2018

Question: Would you support or oppose enforcement of federal marijuana laws if it did not involve penalties for possession and use of small amounts of marijuana?

Support: 50%  Oppose: 42%  Undecided: 8%
NEW FDU POLL SHOWS MAJORITY OF NEW JERSEYANS OPPOSE LEGALIZING RECREATIONAL MARIJUANA

"Anyone who expected legalization to happen quickly and easily might reconsider given these findings," said Krista Jenkins to the Star-Ledger, professor of political science and director of the FDU Poll.
Example: Support for Legalization Dips Below 50% When Given Other Choices

National Poll, 1000 Registered Voters, Mason Dixon, Jan 10-13, 2018

Question: Currently, possessing and using marijuana is against federal law. Which one of the following best describes your preference on national marijuana policy?

For full legalization: 49%
Prefer some other option: 50%

<table>
<thead>
<tr>
<th>Option</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keep the current policy:</td>
<td>16%</td>
</tr>
<tr>
<td>Keep the current policy, but legalize the use of marijuana for</td>
<td>29%</td>
</tr>
<tr>
<td>physician supervised medical use:</td>
<td></td>
</tr>
<tr>
<td>Decriminalize marijuana use by removing the possibility of jail time</td>
<td>5%</td>
</tr>
<tr>
<td>for possession and also allowing for medical marijuana, but keep the</td>
<td></td>
</tr>
<tr>
<td>sale of marijuana illegal:</td>
<td></td>
</tr>
<tr>
<td>Legalize the commercial production, use and sale of marijuana for</td>
<td>49%</td>
</tr>
<tr>
<td>recreational use, as they have done recently in several states:</td>
<td></td>
</tr>
</tbody>
</table>
Example: Support for Legalization Drops 20 Points

NY state poll, 600 voted in 2016 election, Emerson College (Nov 30-Dec 2, 2017)

Question: Do you think the use of marijuana should be made legal for adults aged 21 and older?

Yes: 60%  No: 29%  Unsure: 11%

Question: Knowing that personal marijuana possession is already decriminalized and medicalized in New York, which one of the following marijuana policies do you prefer?

Keep current policy: 26%
Keep medical, repeal decriminalization: 22%
Legalize marijuana: 40%
Repeal both, make marijuana completely illegal: 11%
NEW ILLINOIS MASON-DIXON POLL SHOWS

LARGE MAJORITY OPPOSES LEGALIZING RECREATIONAL MARIJUANA

Poll finds only 23% support the legalization of recreational marijuana; 69% want other options such as maintaining current decriminalization law
Midterms

• Democratic control of the House of Representatives would put more pressure on banking and anti-enforcement amendments
• Pelosi’s son is on the board of a marijuana company
• Senate can block full descheduling, but there will be pressure for a compromise
Federal Action

- We have our own proposal, shopping for sponsors
- Successfully blocked banking/other amendments
- Rohrabacher still in place, but only broadly applies in 9th Circuit
- President Trump still doesn’t like recreational weed
What’s Happening in States

- No state has successfully commercialized recreational marijuana in 2017 or 2018
- Lawmakers are much more open to hearing the lessons of legalized states
Priority States

SAM Rhode Island
Marijuana’s effects on health
Marijuana has become significantly more potent since the 1960s

Average THC and CBD levels in the United States

THC: Psychoactive Ingredient
CBD: NON-Psychoactive Ingredient

<table>
<thead>
<tr>
<th>Year</th>
<th>THC</th>
<th>CBD</th>
</tr>
</thead>
<tbody>
<tr>
<td>1965</td>
<td>0.2</td>
<td>0.3</td>
</tr>
<tr>
<td>1970</td>
<td>0.2</td>
<td>0.3</td>
</tr>
<tr>
<td>1975</td>
<td>0.4</td>
<td>0.4</td>
</tr>
<tr>
<td>1980</td>
<td>1.0</td>
<td>0.5</td>
</tr>
<tr>
<td>1985</td>
<td>1.5</td>
<td>0.5</td>
</tr>
<tr>
<td>1990</td>
<td>3.3</td>
<td>0.5</td>
</tr>
<tr>
<td>1995</td>
<td>3.3</td>
<td>0.5</td>
</tr>
<tr>
<td>2000</td>
<td>4.0</td>
<td>0.5</td>
</tr>
<tr>
<td>2005</td>
<td>4.5</td>
<td>0.5</td>
</tr>
<tr>
<td>2010</td>
<td>5.2</td>
<td>0.5</td>
</tr>
</tbody>
</table>

Source: Mehmedic et al., 2010
Marijuana is not “just a plant” anymore – derivatives contain up to 98% THC
Cannabinoid Receptors Are Located Throughout the Brain and Regulate a Host of Brain Activity

- Brain Development
- Memory & Cognition
- Motivational Systems & Reward
- Appetite
- Immunological Function
- Reproduction
- Movement Coordination
- Pain Regulation & Analgesia

Source: NIDA
Pot use is strongly correlated with psychosis

**More Marijuana Use Correlates with Higher Rates of Schizophrenia**

Cases of schizophrenia per 1,000 people

- Number of times cannabis used (lifetime)
  - 0: 5
  - 1: 4
  - 2: 5
  - 10: 11
  - < 50: 15
  - > 50: 28

**Earlier Age of Use Correlates with Increased Schizophrenia Risk**

Risk multiple for schizophrenia-like psychosis at age 26

- By 15 years: 4.5
- By 18 years: 1.6

**Study of Swedish Conscripts (n=45570)**

**Longitudinal prospective Dunedin study (n=1037)**

Source: Andréasson et al Lancet, 1987 (left graphic); Arseneault et al BMJ 2002 (right graphic)
3. Discussion

In patient’s life, suicidal ideation presented in two different occasions, only immediately after acute cannabis intoxication. This strongly suggests the causal relationship between intoxication and suicidal ideation.

There is a convincing relationship between suicidal behavior and cannabis use, the latter awakening depressive experiences [3]. Rates of cannabis abuse are elevated among those being treated for depression [4, 5] and among those making a suicidal attempt [6]. In a sample of Italian students, the use of cannabis was associated with suicide risk [7]. In a population of French adolescents, cannabis use appeared to be an independent predictor of suicidal ideation after controlling the depressive symptoms [8]. In a cohort study of young Norwegians, cannabis by itself seemed not to lead to depression but was associated with later suicidal thoughts and attempts [9].
Cannabis Use May Be Causally Related to Depression and Suicidal Ideation

Peter Roy-Byrne, MD reviewing Agrawal A et al. Lancet Psychiatry 2017 Sep

In an analysis of twins discordant for frequent cannabis use, common predisposing factors did not fully explain these associations.

Epidemiologic studies have found associations between cannabis use and both depression and suicidality (thoughts or behaviors) but have not determined whether the associations are causal or attributable to confounding factors or common genetic vulnerabilities. To control for common genetic and family environmental factors, researchers examined the associations in 13,986 Australian twins (6181 monozygotic and 7805 dizygotic twins) drawn from three registry studies between 1992 and 2009. Within twin pairs discordant for cannabis use, persistence of the association in the cannabis-using twin would suggest that use is causally related to depression and suicidality.

In the entire sample, early cannabis use and frequent use were associated with major depression and suicidal ideation and attempt. Analyses of twin pairs who were discordant for early versus later or no use did not yield consistent findings. However, within monozygotic twin pairs discordant for frequent versus limited or no use, frequent use was associated with depression (odds ratios: compared with no or limited use, 1.68; compared with lighter use, 1.98) and suicidal ideation (ORs, 2.35 and 2.47, respectively).

COMMENT

This study suggests a causal relationship between frequent cannabis use and both major depression and suicidal ideation. This relationship may be mediated both via effects of the cannabinoid system on mood and via environmental factors related to cannabis use itself (e.g., increased trauma exposure, diminished life opportunities, other associated drug use). The analysis is limited by the possibility that not all confounders were accounted for and by arbitrary thresholds used to define early use and frequency of use. The results provide a counterpoint of caution against the increasing promotion of cannabis use as a therapeutic tool for various medical conditions.
Causal links between cannabis, schizophrenia: New evidence

Date: December 19, 2016
Source: University of Bristol
Summary: People who have a greater risk of developing schizophrenia are more likely to try cannabis, according to new research, which also found a causal link between trying the drug and an increased risk of the condition.
These can often present as a “psychotic episode” – which is a relatively sudden worsening of psychotic symptoms over a short time-frame, frequently resulting in hospitalisation.

The heaviest users of cannabis are around four times as likely to develop schizophrenia (a psychotic disorder that affects a person’s ability to think, feel and behave clearly) than non-users. Even the “average cannabis user” (for which the definition varies from study to study) is around twice as likely as a non-user to develop a psychotic disorder.

Furthermore, these studies found a causal link between tetrahydrocannabinol (THC - the plant chemical which elicits the “stoned” experience) and psychosis. This means the link is not coincidental, and one has actually caused the other.
“Safer than alcohol?” Not exactly…

Source: Jonathan Caulkins (using NSDUH data)
The Industry Today

1. **Kid-friendly**: comes in shapes & colors attractive to children, like candy and soda
2. **95% Potent**: often made w/ concentrates of up to 95% pure THC (joints are ~ 15% THC)
3. **$ $$ $$** Aggressive marketing: free samples, billboard advertising, and other Big Tobacco tactics
4. **Contaminants**: In 2015, CO recalled 100s of thousands of edibles containing banned pesticides
5. **Fighting regulation**: The pot industry has lobbied hard against regulation (e.g., warning labels, dosing rules, and bans on ads targeting kids)

Source: Marijuana Business Journal; other media. Icons: Marianna Nardella; Anton Gajosik; Petra Prgomet; Joey Golaw; Creative Stall; Luis Prado; Aha-Soft
Why talk POT During an opiate epidemic?
Marijuana use goes hand-in-hand with increased prescription opioid abuse

Chance of subsequent opioid abuse for marijuana users compared to control group

The Marijuana Industry Sees a Business Opportunity

States that legalized marijuana had 25% fewer opioid-related deaths.

October 2014 Medical Cannabis Laws & Opioid Analgesic Overdose Mortality in the United States, 1999-2010, Marcus A. Bachhuber et. Al. (JAMA intern Med.)

States with ice cream eaters had 25% more drowning deaths.


SAM Smart Approaches to Marijuana preventing another big tobacco
Something doesn’t add up...

In the 2014 JAMA Study:

• The raw data showed that medical marijuana states had higher rates of opioid deaths until the authors introduced four possible reasons.

• The study lumped together highly restricted states with highly permissive states.

• The study left out critical alternative explanations, like expanded Medication Assisted Treatment programs or expanded Naltrexone use.
JAMA Study

- Unpublished data (Tell Your Children, Alex Berenson, 2019) found that this correlation disappears after 2010.

- Journal of Opioid Management (2017) tried to replicate, found that Med MJ laws associated with 22% increase in age-adjusted opioid mortality

- Feb 2018 Addiction editorial: marijuana-stops-opiate connection “very weak.”
Lancet Study

1514 patients completed baseline interview

- 71 withdrew at 3-month follow-up
- 26 withdrew at 12-month follow-up
- 21 died

1396 contacted for 1-year follow-up

- 1235 completed follow-up
- 124 could not be contacted
- 37 refused

- 15 withdrew
- 22 died

1301 contacted for 3-year follow-up

- 1211 completed follow-up
- 79 could not be contacted
- 11 refused

- 16 withdrew
- 25 died

1260 contacted for 4-year follow-up

- 1217 completed follow-up
- 29 could not be contacted
- 14 refused

19 withdrew
39 died
Lancet Conclusions

- No evidence that cannabis use improved patient outcomes;
- Those who used cannabis had greater pain and lower self-efficacy in managing pain
- No evidence that cannabis use reduced pain interference or exerted an opioid-sparing effect
“Our findings disconfirm the hypothesis that a population-level negative correlation between medical marijuana use and prescription drug harms occurs because medical marijuana users are less likely to use prescription drugs, either medically or nonmedically. Medical marijuana users should be a target population in efforts to combat nonmedical prescription drug use.”
Adolescent Marijuana Use - Opioid Addiction...

Twin A started marijuana before age 17
Twin B after age 17: Twin A is 4x more at risk for opioid addiction

% Addicted to Opioids

Use Mj pre-17
Use Mj post-17

Michael T. Lynskey; Andrew C. Heath; Kathleen K. Bucholz JAMA, January 22/29, 2003—Vol 289, 427-433
EXPOSURE
Smoking cannabis during pregnancy is linked to lower birth weight in the offspring.

The relationship between smoking cannabis during pregnancy and other pregnancy and childhood outcomes is unclear.

PROBLEM CANNABIS USE
Greater frequency of cannabis use increases the likelihood of developing problem cannabis use.

Initiating cannabis use at a younger age increases the likelihood of developing problem cannabis use.

CANNABIS USE AND ABUSE OF OTHER SUBSTANCES
Cannabis use is likely to increase the risk for developing substance dependence (other than cannabis use disorder).

MENTAL HEALTH
Cannabis use is likely to increase the risk of developing schizophrenia and other psychoses; the higher the use the greater the risk.

In individuals with schizophrenia and other psychoses, a history of cannabis use may be linked to better performance on learning and memory tasks.

Cannabis use does not appear to increase the likelihood of developing depression, anxiety, and posttraumatic stress disorder.

For individuals diagnosed with bipolar disorders, near daily cannabis use may be linked to greater symptoms of bipolar disorder than non-users.

Heavy cannabis users are more likely to report thoughts of suicide than non-users.

Regular cannabis use is likely to increase the risk for developing social anxiety disorder.

TO READ THE FULL REPORT AND VIEW RELATED RESOURCES, PLEASE VISIT

NATIONALACADEMIES.ORG/CANNABISHEALTHEFFECTS
Guess which drug has gone up in CO?

OPIOID DEATHS HAVE INCREASED, NOT DECREASED, SINCE COLORADO LEGALIZED MARIJUANA FOR MEDICAL USE IN 2000

Source: Colorado Department of Public Health and Environment (CDPHE)
The Marijuana Industry
There's a Weed-Infused Wine on the Market

Only 35 calories per glass.

Each glass has only 5mg THC.

Meaning you can enjoy it at a dinner party and still be able to talk to everyone

This New Rosé Is Supposed To Be Hangover-Free — But It Will Get You High

Marijuana-infused wine is now a thing. Officially.
Coming Soon From Molson Coors: Marijuana Beer

Molson Coors' new venture is targeting the Canadian cannabis market.

Corona Owner's Marijuana Investment Reaps $700 Million

By Ubana Pateloo
June 29, 2018, 10:59 PM | Bloomberg

“I’m ready to introduce another high-impact brand to the industry again, this time with a new line of custom cannabis-infused craft beers.”

-Creator of Blue Moon
“Smoking is gross,” a high schooler said. “Juuling is really what’s up.”

**THE PROMISE OF VAPING AND THE RISE OF JUUL**

Teens have taken a technology that was supposed to help grownups stop smoking and invented a new kind of bad habit, molded in their own image.

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**CIGALIKE**

**VAPE PEN**

**BOX MOD**

**VAPE POD**

---

**The New York Times**

**BAT Pulls Ahead in U.S. Vaping Battle, Shares Jump**

British American Tobacco plans to test its new Eclipse tobacco heating device in the United States this year, allowing it to pull ahead of Philip Morris in the world’s biggest vaping market.
The top 10% of the population make up 75% of the alcohol industry’s U.S. sales

Avg. 10 drinks a day
Source: Colorado Department of Revenue: Market Size and Demand for Marijuana in Colorado
JAMA Psychiatry journal: Marijuana use and addiction has skyrocketed since 2001

![Graph showing past year use and addiction (use disorder) from 2001-2002 and 2012-2013]

Source: JAMA Psychiatry. Oct 2015. Prevalence of Marijuana Use Disorders in the United States, Between 2001-2002 and 2012-2013, Deborah S. Hasin, PhD; Tulsie D. Saha, PhD; Bradley T. Kerridge, PhD; Ris. B. Goldstein, PhD; MPH; S. Patricia Chou, PhD; Haitao Zhang, PhD; Jeesun Jung, PhD; Roger P. Pickering, MS; W. June Ruan, MA; Sharon M. Smith, PhD; Boji Huang, MD, PhD; Bridget F. Grant, PhD, PhD
Repeating History?
We are living in 1918...
What have we learned?
20% OFF any purchase over $20
EXP: 1/31/15

STICKY BUDS
10% OFF a purchase of $50 or more when you bring in your friends and family.

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Longmont, CO
303.682.8876
HOLIDAY WHOLESALE PRICING!

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4332 S. Broadway
Englewood
303.484.9327
WWW.NKMNJ.COM

$35 LIVE 10 Grams for $99
Over 30 Selections
Valid until 12/23/15

$25 GRAMS
Over 18 Selections
2oz limit - Expires 12/23/15

WAX $20
Over 30 Selections
2oz limit - Expires 12/23/15

JACK FROST PULL and SNA SHATTERS $20 Grams
Five gram limit $25 after

SUPER BOMB
TOP SHELF FLOWERS!
$150 at 4 x $25 1/8s
2oz limit - Expires 12/23/15

SUPER DEAL!!
10 JOINTS $20
or 50 joints $150
or 200mg WAN GUMMIES $15
* Limit 5 each/per day
70% of marijuana dispensaries in Colorado recommended THC products to pregnant women.

- Medical dispensaries were more likely to recommend marijuana products than retail dispensaries: 83% and 60% respectively

- Marijuana’s effects on developing babies could include low birth weight, and other developmental problems – including fatal anencephaly

Source: Denver Health (2018)
Leaving the @CO_Symphony Gala at The Fillmore, I’m accosted on the sidewalk by a remarkably high woman. Lady nearby turns and says “And that’s The Most Colorado Thing You’ve Seen Today!” 👏 #heynext #9News

10:15 PM - 28 Apr 2018
BUSINESS COMPARISON 2017


- Licensed Marijuana Dispensaries
- Starbucks
- McDonalds
Results of Legalization

Commercialization

- CO now #1 first-time youth use rate in the country
- Rampant advertising/commercialization
- A thriving underground market – white, grey, and black.

Promotion of Special Interests

- THC caps have failed (State of CO)
- Limit on # and location of stores have failed (Denver)
- Money diverted to general fund (eg WA)
One in four 12th graders would try marijuana, or increase their use of the drug *if marijuana were legalized.*
Marijuana-related emergency room visits have also surged since legalization. According to the Colorado Department of Public Health and Environment, the annual rate of marijuana-related emergency room visits increased 35% between the years 2011 and 2015 (CDPHE, 2016).

The burden on the emergency departments stemming from the type of patient care required and the resulting financial implications have been large for hospitals in Colorado (Finn, 2015).

Annual regional poison center human exposure calls related to marijuana from January 1, 2000 through December 31, 2015, divided by age groups. *Counts significantly increased from previous year with a p value <0.003. Unknown age includes calls with ages recorded as teens, 20s, unknown adult (≥ 20 yrs), unknown child (≤19 yrs), and unknown age. Human marijuana exposure calls to RPC were determined by the presence of the generic code Marijuana – 0083000 from the National Poison Data System or marijuana exposure mentioned in RPC case notes.

COLORADO HOSPITALIZATION RATES RELATED TO MARIJUANA


MARIJUANA EMERGENCY ROOM VISITS HAVE ALSO INCREASED AMONG CHILDREN AND ADOLESCENTS (CHA, 2016).
MARIJUANA RELATED EMERGENCY ROOM VISITS IN CO BY AGE

Adolescents 9-17
- 2010-2013: 1,576
- 2014-Sep 2015: 1,893

Children <9
- 2010-2013: 1,011
- 2014-Sep 2015: 1,055

*Rates are per 100,000

Source: Colorado Hospital Association 2011-Sep 2015 as reported in Monitoring Health Concerns Related to Marijuana in Colorado: 2016, Per 100,000
MARIJUANA AS A PERCENT OF ALL DUI AND DUIDS IN COLORADO

Source: Colorado State Patrol, CSP Citations for Drug Impairment by Drug Type, as reported by HDTA

COLORADO STATE PATROL NUMBER OF DRIVERS UNDER THE INFLUENCE OF DRUGS (DUIDS)

Source: Colorado State Patrol, CSP Citations for Drug Impairment by Drug Type, as reported by HDTA
• Marijuana-impaired driving fatalities have more than doubled
• **One in five drivers** are under the influence of marijuana. That is up from one in ten prior to legalization.
• 64.2% of respondents who reported using marijuana and driving **stated that they didn’t think that it impaired their ability to drive at all.**
• Drivers who admit to driving within three hours of using marijuana are also more likely to drink and drive, not wear a seat belt, and binge drink
Workplace & Economy
In the general workforce, marijuana positivity increased 4% from last year while it increased nearly 8% in the safety-sensitive workforce.

Source: Quest Diagnostics (2018)
Increases in positivity rates for marijuana in the general U.S. workforce were most striking in states that have enacted recreational use statues since 2016. Those states include: Nevada (43%), Massachusetts (14%) and California (11%). These three states also saw significant increases in marijuana positivity in federally-mandated, safety-sensitive workers: Nevada (39%), California (20%), and Massachusetts (11%). Federally-mandated, safety-sensitive workers include pilots, rail, bus and truck drivers, and workers in nuclear power plants, for whom routine drug testing is required by the DOT.
Introduction

As the marketing organization for the city, VISIT DENVER measures, records and reports hundreds of data points. The attached presentation highlights the safety trends and feedback we receive and closely track from convention and leisure visitors over the span of several years. VISIT DENVER realizes that homelessness is not a crime, and that it is just one component of the many issues having an impact on Denver and surrounding cities. However, it is important to note that visitors often do not recognize or distinguish the differences between panhandlers, travelers, homeless, and others but rather provide overall feedback based on personal safety and sense of security when visiting Denver.

There are several key takeaways from the information provided:

• The downtown environment is the #1 complaint from meeting planners, far surpassing any other categories. The severity of this issue has increased and as of 2014 nearly 50% of meeting planners negatively commented on homeless, youth, panhandling, safety, cleanliness, and drugs including public marijuana consumption.
• Denver ranks very high on walkability, affordability, facilities, and other factors. However, Denver as a “safe city” ranks significantly lower according to interviews with key convention planners conducted by an independent third-party.
• Denver is losing visitors and valuable convention business as a result of these overall safety (or perception of safety) issues. Unfortunately, word is beginning to spread among meeting planners about the safety challenges Denver is facing. As the marketing organization for the city, we fear not being able to brand Denver away from this growing reputation.
Drug use is forcing CO employers to hire out-of-state employees

• “Jim Johnson [construction company GE Johnson’s CEO]...said his company has encountered so many job candidates who have failed pre-employment drug tests because of their THC use that it is actively recruiting construction workers from other states.”

The phenomenon has recently received coverage in the *New York Times*

**Hiring Hurdle: Finding Workers Who Can Pass a Drug Test**

By JACKIE CALMES  MAY 27, 2016

In Colorado, “to find a roofer or a painter that can pass a drug test is unheard-of,” said Jesse Russow, owner of *Avalanche Roofing & Exteriors*.

But data suggest employers’ difficulties also reflect an increase in the use of drugs, especially marijuana — employers’ main gripe — and also heroin and other opioid drugs much in the news.
And on CNN...

As more Americans fail drug tests, employers turn to refugees

In Colorado, where marijuana is legal, some businesses have told Fay, "they see employees smoking pot on their lunch break and then going back to work."

One oil and trucking company in Colorado did random drug screening at one of their locations last year and found 80 percent of their employees failed, Fay said. (Colorado's Supreme Court has ruled that companies may fire employees who smoke pot, even if legally.)
Social Justice
BLACK MARKET ACTIVITY
SINCE LEGALIZATION
CRIMES AND OFFENSES IN PUBLIC SCHOOLS, 2015-2016

<table>
<thead>
<tr>
<th>Offense</th>
<th>N</th>
<th>%</th>
<th>Cumulative %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana (#1)</td>
<td>1561</td>
<td>23%</td>
<td>23%</td>
</tr>
<tr>
<td>Assault</td>
<td>834</td>
<td>12%</td>
<td>36%</td>
</tr>
<tr>
<td>Disorderly Conduct/Fighting</td>
<td>814</td>
<td>12%</td>
<td>48%</td>
</tr>
<tr>
<td>Public Peace</td>
<td>666</td>
<td>10%</td>
<td>58%</td>
</tr>
<tr>
<td>Dangerous Drugs</td>
<td>420</td>
<td>6%</td>
<td>64%</td>
</tr>
<tr>
<td>Larceny/Theft</td>
<td>341</td>
<td>5%</td>
<td>69%</td>
</tr>
<tr>
<td>Liquor/Alcohol</td>
<td>297</td>
<td>4%</td>
<td>73%</td>
</tr>
<tr>
<td>Trespass</td>
<td>260</td>
<td>4%</td>
<td>77%</td>
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<tr>
<td>Obstruct</td>
<td>206</td>
<td>3%</td>
<td>80%</td>
</tr>
<tr>
<td>Harassing Communication</td>
<td>203</td>
<td>3%</td>
<td>83%</td>
</tr>
<tr>
<td>Other/Unclear</td>
<td>194</td>
<td>3%</td>
<td>86%</td>
</tr>
<tr>
<td>Weapon Offense</td>
<td>141</td>
<td>2%</td>
<td>88%</td>
</tr>
<tr>
<td>Tobacco</td>
<td>127</td>
<td>2%</td>
<td>90%</td>
</tr>
<tr>
<td>Damage Property</td>
<td>120</td>
<td>2%</td>
<td>92%</td>
</tr>
<tr>
<td>Traffic Offense</td>
<td>91</td>
<td>1%</td>
<td>93%</td>
</tr>
<tr>
<td>Sexual Assault/Offense</td>
<td>76</td>
<td>1%</td>
<td>94%</td>
</tr>
<tr>
<td>Warrant</td>
<td>57</td>
<td>1%</td>
<td>95%</td>
</tr>
<tr>
<td>Criminal Mischief</td>
<td>47</td>
<td>1%</td>
<td>96%</td>
</tr>
<tr>
<td>Runaway/Missing Person</td>
<td>41</td>
<td>1%</td>
<td>97%</td>
</tr>
<tr>
<td>Interference with Educ Inst</td>
<td>39</td>
<td>&lt;1%</td>
<td>97%</td>
</tr>
<tr>
<td>Truancy</td>
<td>36</td>
<td>&lt;1%</td>
<td>98%</td>
</tr>
<tr>
<td>Burgary</td>
<td>33</td>
<td>&lt;1%</td>
<td>98%</td>
</tr>
<tr>
<td>Menacing</td>
<td>26</td>
<td>&lt;1%</td>
<td>99%</td>
</tr>
<tr>
<td>Arson</td>
<td>25</td>
<td>&lt;1%</td>
<td>99%</td>
</tr>
<tr>
<td>Robbery</td>
<td>20</td>
<td>&lt;1%</td>
<td>99%</td>
</tr>
<tr>
<td>Curfew</td>
<td>16</td>
<td>&lt;1%</td>
<td>100%</td>
</tr>
<tr>
<td>Family/Child Offense</td>
<td>12</td>
<td>&lt;1%</td>
<td>100%</td>
</tr>
<tr>
<td>Vehicle Theft</td>
<td>8</td>
<td>&lt;1%</td>
<td>100%</td>
</tr>
<tr>
<td>Fraud/Forgery</td>
<td>5</td>
<td>&lt;1%</td>
<td>100%</td>
</tr>
<tr>
<td>Kidnapping</td>
<td>5</td>
<td>&lt;1%</td>
<td>100%</td>
</tr>
<tr>
<td>Invasion of Privacy</td>
<td>2</td>
<td>&lt;1%</td>
<td>100%</td>
</tr>
<tr>
<td>Total</td>
<td>6727</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Source: Colorado Department of Public Safety, 2017

One hundred three (103) law enforcement agencies reported 6727 qualifying incidents in 554 public schools during the 2015-16 academic year, from August 1, 2015 through July 31, 2016.
IMPACTS OF LEGALIZATION ON COMMUNITIES OF COLOR

Furthermore, juvenile marijuana-related arrests have increased among African-American and Hispanic teens in Colorado after legalization. Between 2012 and 2014, the percentage of Hispanic and African-American arrests for teens under 18 years old increased 29% and 58%, respectively (CDPS, 2016). With the advent of legalization, communities of color are subject to disproportionate targeting by marijuana facilities. In Los Angeles, the majority of dispensaries have opened primarily in African-American communities (Thomas & Freisthler, 2017). An overlay of socioeconomic data with the geographic location of pot shops in Denver shows marijuana stores are located primarily in disadvantaged neighborhoods.

MARIJUANA-RELATED JUVENILE ARRESTS IN CO BY RACE/ETHNICITY, 2012-2014

Source: Colorado Department of Public Safety (March 2016)
MARIJUANA BUSINESSES IN DENVER ARE CONCENTRATED IN NEIGHBORHOODS OF COLOR

Locations of pot businesses (dots represent businesses; neighborhoods shaded by income; lighter = lower-income)

Denver neighborhoods colored by race/ethnicity: green = White; orange = Latino; purple = Black; red = Asian; blue = Other
Similar trend in Los Angeles

• In 2013, Los Angeles voters approved Proposition D, a regulatory measure that said 135 dispensaries were allowed to be in operation and set zoning restrictions prohibiting dispensaries from operating in certain areas. -Dispensaries opened in areas with a higher proportion of Black residents and closed in Census tract areas that had a higher percentage of commercially zoned land.
• “Results suggest that likely as a result of changing regulations, dispensaries may be attempting to conceal their presence and locate in areas that will not advocate against their presence.”
Crime around marijuana stores?

- Legal marijuana shops are linked to higher levels of property crime in nearby areas, according to a nearly three-year study in Denver.
- Adjacent areas saw about 84 more property crimes per year than neighborhoods without a nearby marijuana store.
- It is the number and density of outlets that is important, not whether they are medical or recreational.
- “There are definitely negative public health consequences, including increased crime,” the study author concluded.
Oregon and Medical Marijuana

“Results of multi-level analyses indicated significant positive associations between rates of marijuana patients and growers per 1000 population and the prevalence of past 30-day marijuana use, controlling for youth demographic characteristics.

These findings suggest that a greater number of registered marijuana patients and growers per 1000 population in Oregon counties was associated with a higher prevalence of marijuana use among youth from 2006 to 2015, and that this relationship was partially attributable to perceived norms favorable towards marijuana use.”
Stores and Property Values

“Data from King County, Washington, we find a 1.7% decrease in the value of properties within a 0.5 mile radius of an entrant (or a $6,700 decline in property values).” See http://www.columbia.edu/~dkt2109/thomas_tian_2017.pdf

More studies on dispensaries and use

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4161654/
EXAMINING THE RELATIONSHIP BETWEEN THE PHYSICAL AVAILABILITY OF MEDICAL MARIJUANA AND MARIJUANA USE ACROSS FIFTY CALIFORNIA CITIES

https://www.sciencedaily.com/releases/2017/06/170627105316.htm
A new study has found that adolescents living in medical marijuana states with a plethora of dispensaries are more likely to have tried new methods of cannabis use, such as edibles and vaping, at a younger age than those living in states with fewer dispensaries.

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4536157/
The impacts of marijuana dispensary density and neighborhood ecology on marijuana abuse and dependence. This study looks at marijuana dispensary density and the effect on communities.

Tax Revenue?
Why pot taxes can’t solve Colorado’s budget problem

By CHRIS STIFFLER
In CT, estimates of just a few costs outweigh projected revenues by over 90%
Marijuana As Medicine
The old stereotype
The new image
Legalization advocates have admitted that “medical” marijuana is a pretext for legalization

“**We will use [medical marijuana] as a red-herring to give marijuana a good name.**”

—Keith Stroup, head of NORML, to the *Emory Wheel*, 1979

Advocates have pushed their agenda through “medicine by popular vote” rather than the rigorous scientific testing system devised by the FDA.
Is marijuana medicine? It depends on how you look at the question

<table>
<thead>
<tr>
<th>NO</th>
<th>YES</th>
<th>MAYBE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smoked or ingested raw marijuana is <strong>not</strong> medicine</td>
<td>There are <strong>marijuana-based pills available to treat illness</strong>, and other such medications coming soon</td>
<td>Additional research is <strong>ongoing</strong> into the medical properties of marijuana-derived compounds</td>
</tr>
</tbody>
</table>
Marijuana edible displays
Do all US states treat marijuana the same?

**No:** Some states have decriminalized, some have legalized, some have medicalized, some have done nothing

**Key Point:** Medical marijuana programs are all different

**West Coast versus East Coast distinction**
Is the true goal of “medical” marijuana compassionate care or increased access to pot?

The “average” user isn’t sick

The average “medical” marijuana user is not whom you’d imagine:

- White male
- 32 years old
- No history of life-threatening disease
- History of drug and alcohol abuse

Illnesses used to justify “medical” marijuana are rare

Fewer than 5% of “medical” marijuana card holders are cancer, HIV/AIDS, or glaucoma patients

What about “Schedule 1?”

Smoked, whole marijuana is in S-1, which means it doesn’t have medical use.

*Marinol is S-3*

YOU CAN RESEARCH S-1 drugs, and this happens every day.

Scheduling is a matter of extreme confusion.
Approved Cannabinoid Products

- **Marinol® and its generics**: synthetic THC in sesame oil; schedule III; nausea/vomiting in cancer chemotherapy and AIDS wasting;

- **Cesamet® (nabilone)**: a synthetic THC analogue; schedule II;

- **Epidiolex® (cannabidiol)**: used to treat Lennox-Gastaut Syndrome, Dravet Syndrome

- **Sativex®**: a botanical extract, 1:1 CBD to THC; approved in 28 countries (ex US) for spasticity in MS.
Treatment-Resistant Childhood Epilepsy: Spectrum of Rare Disorders

Many different types of epilepsy syndromes, seizures and causes, including:

- **FIRES**
- **TUBEROUS SCLEROSIS COMPLEX**
- **DOOSE SYNDROME**
- **DUP15q SYNDROME**
- **RASMUSSEN SYNDROME**
- **LENNOX-GASTAUT SYNDROME**
  - 3 to 4% of childhood epilepsy
- **DRAVET SYNDROME**
  - Up to 5% of all childhood epilepsies in first year of life
- **CDKL5**
- **ANGELMAN’S SYNDROME**
- **STXBP1/OHTAHARA SYNDROME**
- **WEST SYNDROME (INFANTILE SPASM)**
- **GLUT 1 TRANSPORTER DEFICIENCY**
- **AICARDI SYNDROME**

Products in Development

• **Epidiolex®** (GW Pharma): Dravet Syndrome (DS)/ Lennox Gastaut Syndrome (LGS) (2 studies in each, **FDA APPROVAL**; awaiting **DEA**
  - also Tuberous Sclerosis Complex (TSC);
• **Synthetic CBD** (Insys): DS/ LGS (Phase 1b/2a), Infantile Spasms;
• **Synthetic CBD** (transdermal) (Zynerba): complex partial seizures; Phase 1.
Safer than alcohol?
Safer than alcohol?

• Is alcohol legal because its safe?

• Marijuana’s effects last longer

• Abusers report far more problems at home, work, and school

• People rarely substitute pot for booze—they mix them instead

• Lots of people drink; very few use marijuana—despite what you see on TV
Current Regulatory Failures

- No Potency Caps
- Black Market (and Cartels)
- Increased Access for Minors
- Pesticides and Contaminants
- Recommended to Pregnant Women
Marijuana is not “just a plant” anymore – derivatives contain up to 99% THC
99% THC is already on sale in our country.
Product Innovation in Delivery Systems
Old Initiation: free dabs
Ready-To-Use Products Surpassed Flower For The First Time In History

Product Category Sales Trends

Gen Z highest users of concentrates

CONCENTRATES

Concentrates are highly potent extracts made from cannabis flower that come in many varieties. If flower is like wine, then concentrates would be the fine scotch—potent, with intense flavor and aroma. The highly refined nature of concentrates makes them a favorite among people who are looking for purity, maximum taste, and instant effect.

What percentage of customers ordered them in 2017?

<table>
<thead>
<tr>
<th>Generation</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>GEN Z 1996–Later</td>
<td>34%</td>
</tr>
<tr>
<td>MILLENNIAL 1985–1995</td>
<td>19%</td>
</tr>
<tr>
<td>GEN X 1965–1984</td>
<td>16%</td>
</tr>
<tr>
<td>BABY BOOMERS 1946–1964</td>
<td>15%</td>
</tr>
</tbody>
</table>

What about edibles/drinkables?

- Delay in effect encourages additional consumption (the first time)
- Additional consumption may result in an expensive visit to the ER
- THC metabolizes into 11-hydroxy THC in the stomach
- CBD metabolizes into THC in the stomach
- Much more psychoactive, much more dangerous mental health impacts
Foreign cartels embrace home-grown marijuana in pot-legal states

Foreign gangs are finding that black-market marijuana is profitable even in states that have legalized cannabis.

“Legal” growers, illegal activity

“From my side, I have yet to see one (grow) that’s legit. The whole mantra for pro-marijuana legislation was that it would be legal, regulated and taxed. What you’re seeing here is none of that.” – Sheriff’s Deputy Ray Gerhart, El Paso County, CO

“Seed-to-Sale” Tracking Has Many Loopholes

“One pattern of noncompliance stood out: The much-touted “seed-to-sale” tracking of every marijuana plant has some flaws...

“But plenty of pot still ends up missing. How the METRC system works, by law, is supposed to be a bit of a mystery...

“Within that gray area is where cheaters can list perfectly good marijuana product as too damaged to sell, then sell it anyway.”
Sales to Minors

Licensees Across Oregon Fail to Stop Sales to Minors
OLCC Marijuana Retailer Minor Decoy Checks Continue

January 10, 2018

For more information:
Mark Pettinger, Marijuana Program Spokesperson, (503) 872-5115
www.marijuana.oregon.gov
Increased Availability to Minors

A 9-Year-Old Accidentally Shared Her Grandpa's Marijuana Gummies With Her Fifth-Grade Class

Edible marijuana at Hollywood school sends 14-year-old girl to hospital

By Ian Margol - Reporter, Andrea Torres - Digital Reporter/Producer

One arrested; gummy bears sicken Chula Vista students

BY: Jessica Chen, Mark Saunders
POSTED: 2:53 PM, Apr 27, 2017
UPDATED: 12:05 AM, Apr 28, 2017
States are failing to regulate pesticide use

5 Investigates put the purity of medical marijuana to the test, working with consumers to purchase samples bought off the shelves. Investigative reporter Kathy Curran uncovered gaping holes in the state regulation of marijuana safe and contaminant-free.

Contaminated marijuana still reaching consumers in Oregon

Updated Jun 18, 2017: Posted Jun 17, 2017

Gallery: Cannabis product testing for pesticides

https://www.wcvb.com/article/5-investigates-what-s-in-your-weed/19581415
States are failing to regulate pesticide use

Pesticides and Pot: What's California Smoking?

An NBC4 I-Team investigation found evidence suggesting that pesticides could be present in a lot of marijuana legally sold in California

By Joel Grover and Matthew Glasser
Published at 10:57 PM PST on Feb 22, 2017 | Updated at 1:37 PM PST on Nov 8, 2017

Steep Hill Labs found 41 out of 44 samples, 93 percent, tested positive for pesticides, at levels high enough that those products would've been banned for sale in some other states that currently regulate the use of pesticides in marijuana products.

"It appears pesticides are very widely used" on California's marijuana crops, said Dr. Don Land, a UC Davis chemistry professor who is Steep Hill's chief scientist. "It was surprising that so many (samples) had so much contamination."
Non-publicized Recalls of Marijuana Products (In CO)

Denver Public Health Recalls of Marijuana products --

2018

• February 16, 2018 - Lightshade Labs LLC Voluntarily Recalls Medical and Retail Marijuana Due to Presence of Yeast/Mold in Pre-Roll Products

2017

• December 5, 2017 - Infuzionz LLC Voluntarily Recalls Marijuana Product Due to Non-Food Grade Ingredients
• October 26, 2017 - Little Brown House Dispensary LLC/Delta-9 Delights LLC Voluntarily Recalls Marijuana and Marijuana Products Due to Pesticide Residues
• August 21, 2017 - Left Bank LLC Voluntarily Recalls Marijuana Products Due to Non-Food Grade Ingredients
• August 10, 2017 - Kiiske LLC/Metro Denver Telluride Health Center LLC Voluntarily Recalls Medical Marijuana Due to Pesticide Residues
• July 27, 2017 - Buddies Wellness LLC Voluntarily Recalls Medical Marijuana Due to Powdery Mildew and Mite Contamination
• July 24, 2017 - Buddies Wellness LLC/La Bodega Voluntarily Recalls Medical Marijuana Products Due to Pesticides
• April 14, 2017 - Mountain Medicines Recalls Medical Marijuana Infused-Products due to Pesticide Residues
• April 7, 2017 - Information Regarding Cannabidiol (CBD) Products Sold or Manufactured in Denver
• April 3, 2017 - Herbal Options LLC/Rocky Mountain Ways LLC Voluntarily Recalls Medical Marijuana and Marijuana Concentrates Due to Pesticide Residues
• January 19, 2017 - GMC LLC Voluntarily Recalls Medical and Recreational Marijuana and Products Due to Pesticide Residues

2016

• November 9, 2016 - Medicinal Wellness Center LLC Voluntarily Recalls Marijuana and Concentrates Due to Pesticide Residues
• October 24, 2016 - Tree of Wellness Voluntarily Recalls Medical Marijuana and Products Due to Pesticide Residues
• August 22, 2016 - La Contes Clone Bar and Dispensary Voluntarily Recalls Medical Marijuana and Marijuana Products Due to Pesticide Residues
• June 21, 2016 - Wash Park Boutique LLC Voluntarily Recalls Medical Marijuana and Products Due to Pesticide Residues
• June 14, 2016 - Big Toe Voluntarily Recalls Marijuana and Products Due to Pesticide Residues
• June 8, 2016 - The Tea Pot Voluntarily Recalls Medical Marijuana and Products Due to Pesticide Residues
• June 6, 2016 - Pineapple Exchange Voluntarily Recalls Medical Marijuana Products Due to Pesticide Residues
• June 1, 2016 - JVT Enterprises Voluntarily Recalls Medical Marijuana Products Due to Pesticide Residues
• May 13, 2016 - Avicenna Products Voluntarily Recalls Medical Marijuana Products Due to Pesticide Residues
• February 11, 2016 - CO Foods Voluntarily Recalls Marijuana Products Due to Pesticide Residues
• January 29, 2016 - Caregivers for Life Voluntarily Recalls Marijuana Products Due to Pesticide Residues
• January 27, 2016 - Orana Labs Voluntarily Recalls Marijuana Products Due to Pesticide Residues

2015

• December 30, 2015 - Mountain High Suckers Voluntarily Recalls Marijuana Products Due to Pesticide Residues
• December 21, 2015 - EdiPure Recalls Additional Marijuana Products Due to Pesticide Residues
• December 16, 2015 - RevTeC Voluntarily Recalls Marijuana Products Due to Pesticide Residues
• December 11, 2015 - Advanced Medical Alternatives Recalls Additional Marijuana Products Due to Pesticide Residues
• December 8, 2015 - EdiPure Recalls Additional Marijuana Products Due to Pesticide Residues
• December 3, 2015 - Advanced Medical Alternatives Recalls Marijuana Products Due to Pesticide Residues
• December 1, 2015 - EdiPure Recalls Marijuana Products Due to Pesticide Residues
• November 18, 2015 - Gaia’s Garden Recalls Additional Marijuana Products Due to Pesticide Residues
• November 17, 2015 - Lab710 Concentrates Recalls Marijuana Products Due to Pesticide Residues
• November 3, 2015 - Gaia’s Garden Recalls Marijuana Products Due to Possible Pesticide Residues
• October 30, 2015 - Green Cross Recalls Marijuana Products Due to Possible Pesticide Residues
• October 21, 2015 - Nature’s Cure Recalls Marijuana Products Due to Possible Pesticide Residues
• October 14, 2015 - Two Denver Cultivation Facilities Recall Marijuana Products Due to Possible Pesticide Residues
• September 25, 2015 - Consumer Advisory Issued for Autopilot Capsules Manufactured by Rx Green
• September 18, 2015 - Two Denver Businesses Recall Marijuana Products Due to Possible Pesticide Residue
• September 10, 2015 - Mahatma Concentrates Recalls Marijuana Product Due to Possible Pesticide Residues
• July 27, 2015 - Consumer Advisory Issued for Nature’s Herbs Olive Oil
• July 17, 2015 - Advisory: The Growing Kitchen Issues Recall of Mary Mint Tincture
70% of marijuana dispensaries in Colorado recommended THC products to pregnant women.

- Medical dispensaries were more likely to recommend marijuana products than retail dispensaries: 83% and 60% respectively

- Marijuana’s effects on developing babies could include low birth weight, and other developmental problems – including fatal anencephaly

Source: Denver Health (2018)
LESSONS LEARNED FROM MARIJUANA LEGALIZATION IN FOUR U.S. STATES AND D.C.

MARCH 2018

Reviewed by researchers from:
University of Colorado at Denver
Harvard Medical School
Boston Children’s Hospital
University of Connecticut
Yale University
University of Kansas
and more

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“We were gaining momentum. But now that's flipped and we're more on the defensive.” – Rep. Dina Titus (D-NV), one of the biggest marijuana supporters in Congress.
A final word from Volkow et al in the NEJM:

“Repeated marijuana use during adolescence may result in long-lasting changes in brain function that can jeopardize educational, professional, and social achievements.

“However, the effects of a drug (legal or illegal) on individual health are determined not only by its pharmacologic properties but also by its availability and social acceptability.

“In this respect, legal drugs (alcohol and tobacco) offer a sobering perspective, accounting for the greatest burden of disease associated with drugs not because they are more dangerous than illegal drugs but because their legal status allows for more widespread exposure.”
Resources

Drugabuse.gov
LearnaboutSAM.org
MarijuanaReport.org
Contact us
www.learnaboutsam.org
info@learnaboutsam.org