

Reefer Sanity: Seven Great Myths About Marijuana

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Outline

- National Drug Policy Overview
- Current Trends In Drug Use
- Seven Great Myths About Marijuana
- Colorado's Experience
- Legalization On The Horizon
- Smart Policy

**I Receive No Funding From Any Us National Agency,
Including The National Institute On Drug Abuse*

The most thoughtful, rigorous, and accessible discussion of marijuana to date. Sabet eschews silver bullets for smart, evidence-based solutions rooted in public health." - Dr. Robert L. DuPont founding Director, National Institute on Drug Abuse, National Institutes of Health

REEFER SANITY

SEVEN GREAT MYTHS
ABOUT MARIJUANA

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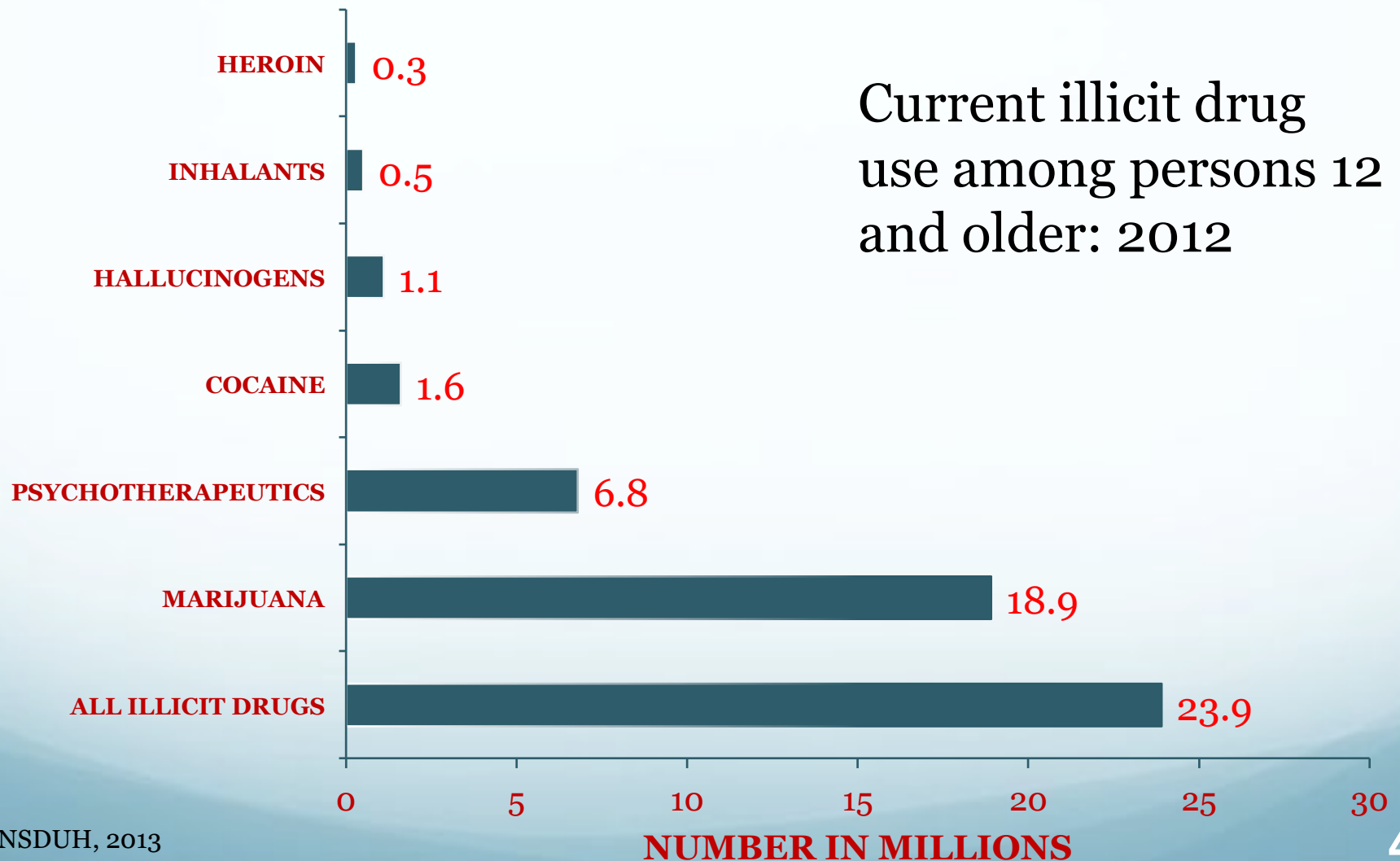
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KEVIN A. SABET, PH.D.

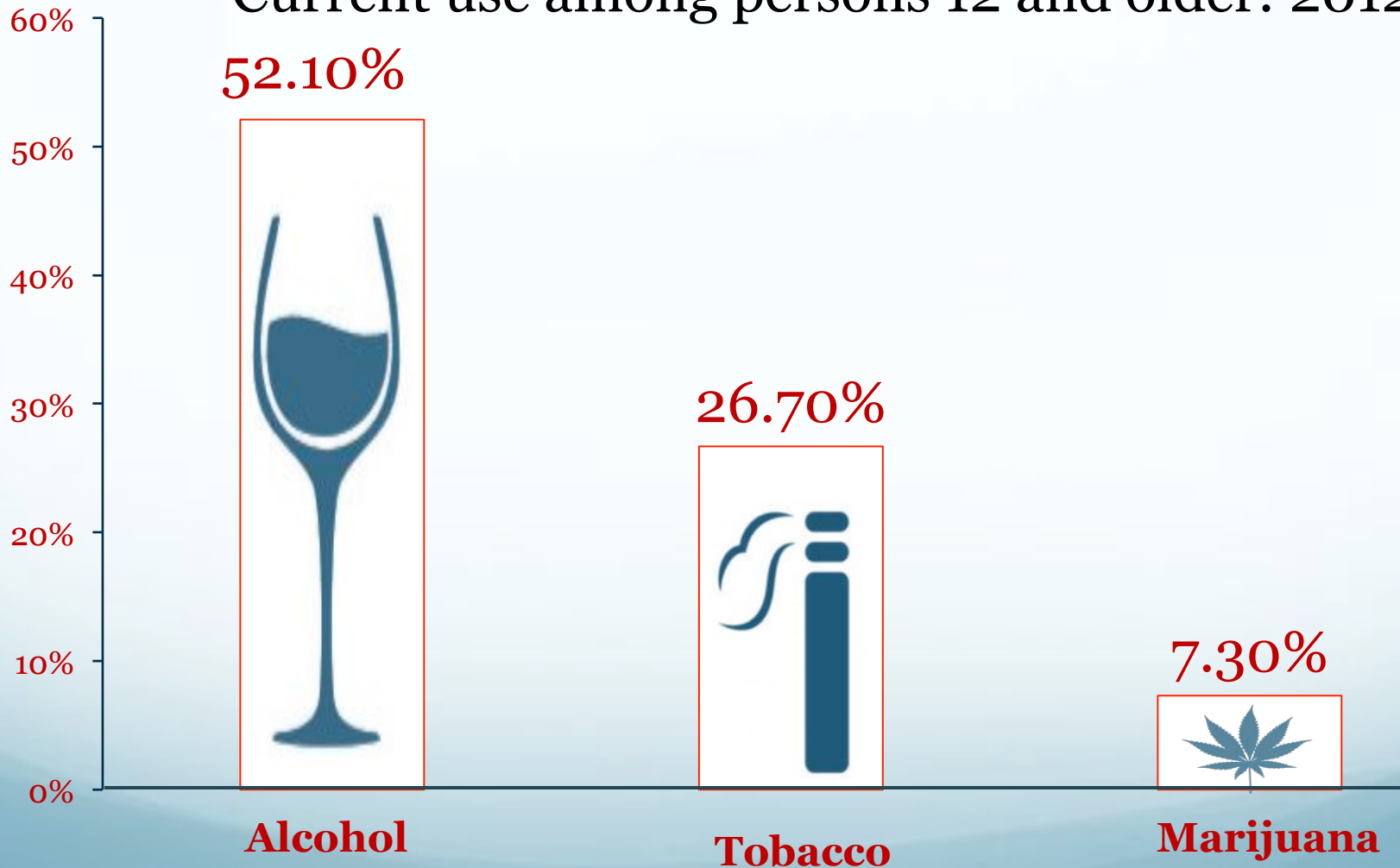
FOREWORD BY PATRICK J. KENNEDY, FORMER CONGRESSMAN

Trends in drug use



Trends in drug use

Current use among persons 12 and older: 2012

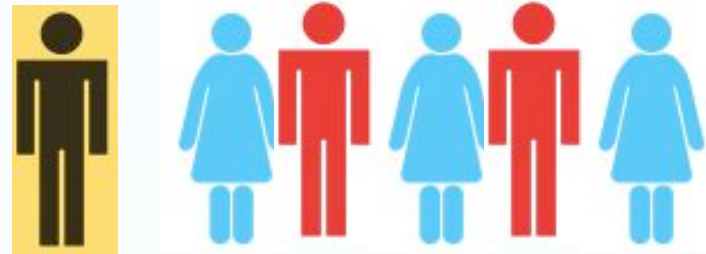


Myth 1:

Marijuana Is
Harmless and
Non-addictive

1 in 6 teens become addicted

1 in 10 adults and **1 in 6 adolescents** who try marijuana will become addicted to it.



- The adolescent brain is especially susceptible to marijuana use.
- When kids use, they have a greater chance of addiction since their brains are being primed.

126
Sedatives

175
Inhalants

282
Heroin

351
Stimulants

358
Hallucinogens

451
Tranquilizers

1,411
Cocaine

1,716
Pain Relievers

Dependence on or Abuse of Specific Illicit Drugs

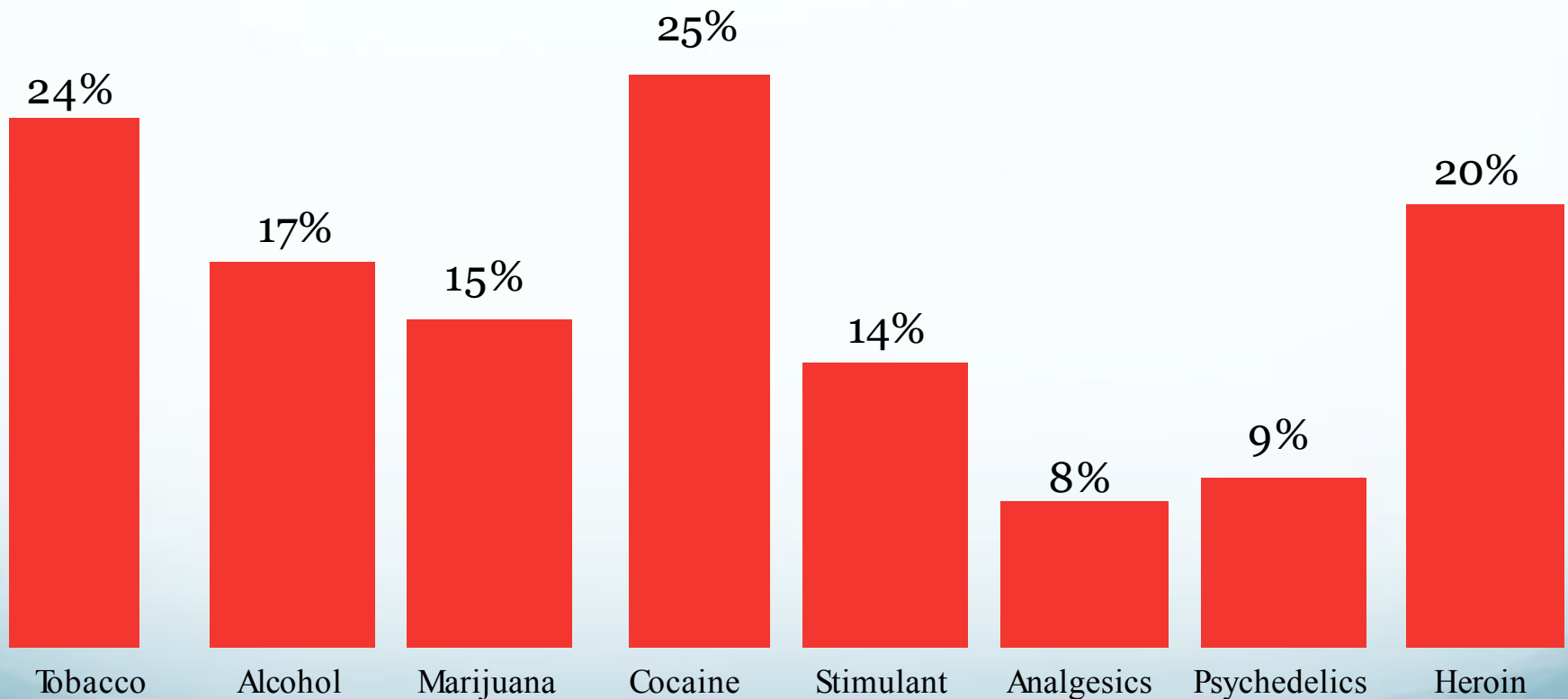
Persons 12 or Older, 2008

4,199

Marijuana

Substance Abuse and Mental Health Services Administration. (2009). Office of Applied Studies.
Treatment Episode Data Set (TEDS): 2009 Discharges from Substance Abuse Treatment Services,
DASIS.

Addictive Nature of Drugs When Different Drug Use Starts in Adolescence

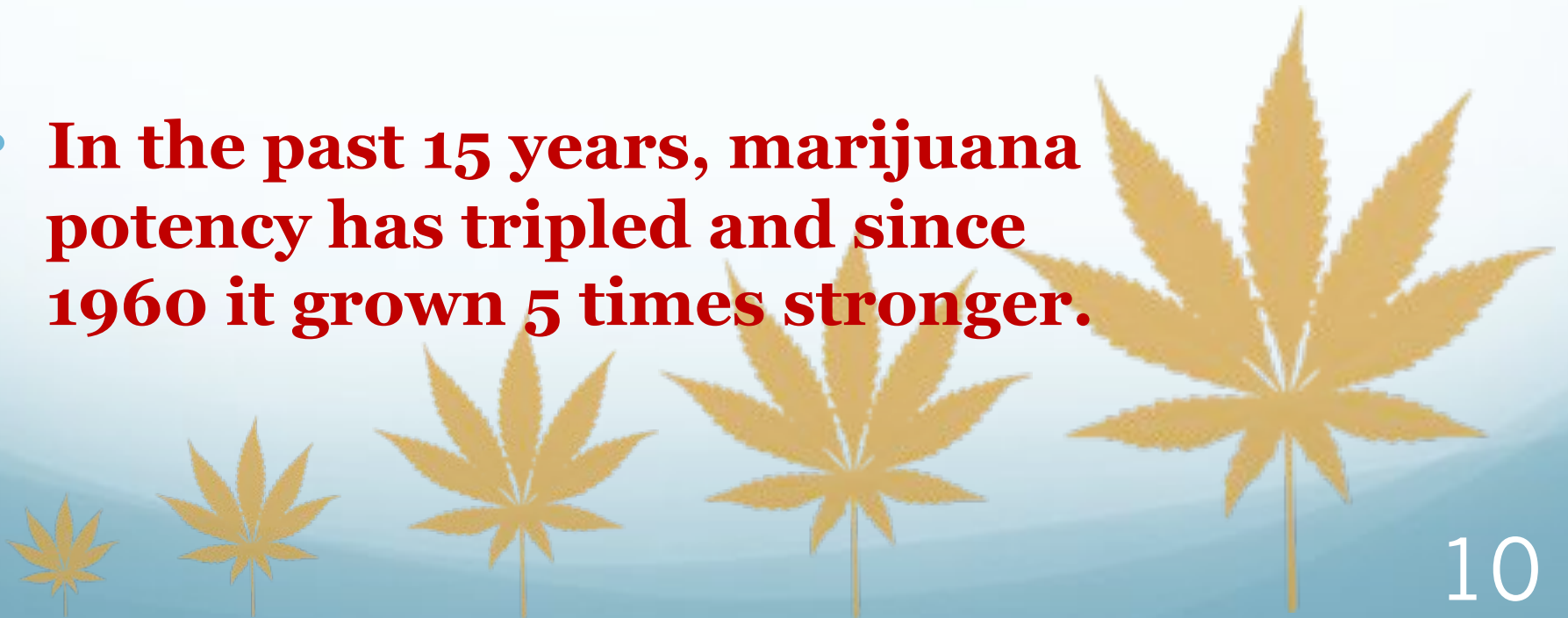


Source: Anthony JC, Warner LA, Kessler RC (1994): Comparative epidemiology of dependence on tobacco, alcohol, controlled substances, and inhalants: Basic findings from the National Comorbidity Survey. *Experimental and Clinical Psychopharmacology* 2: 244 - 268

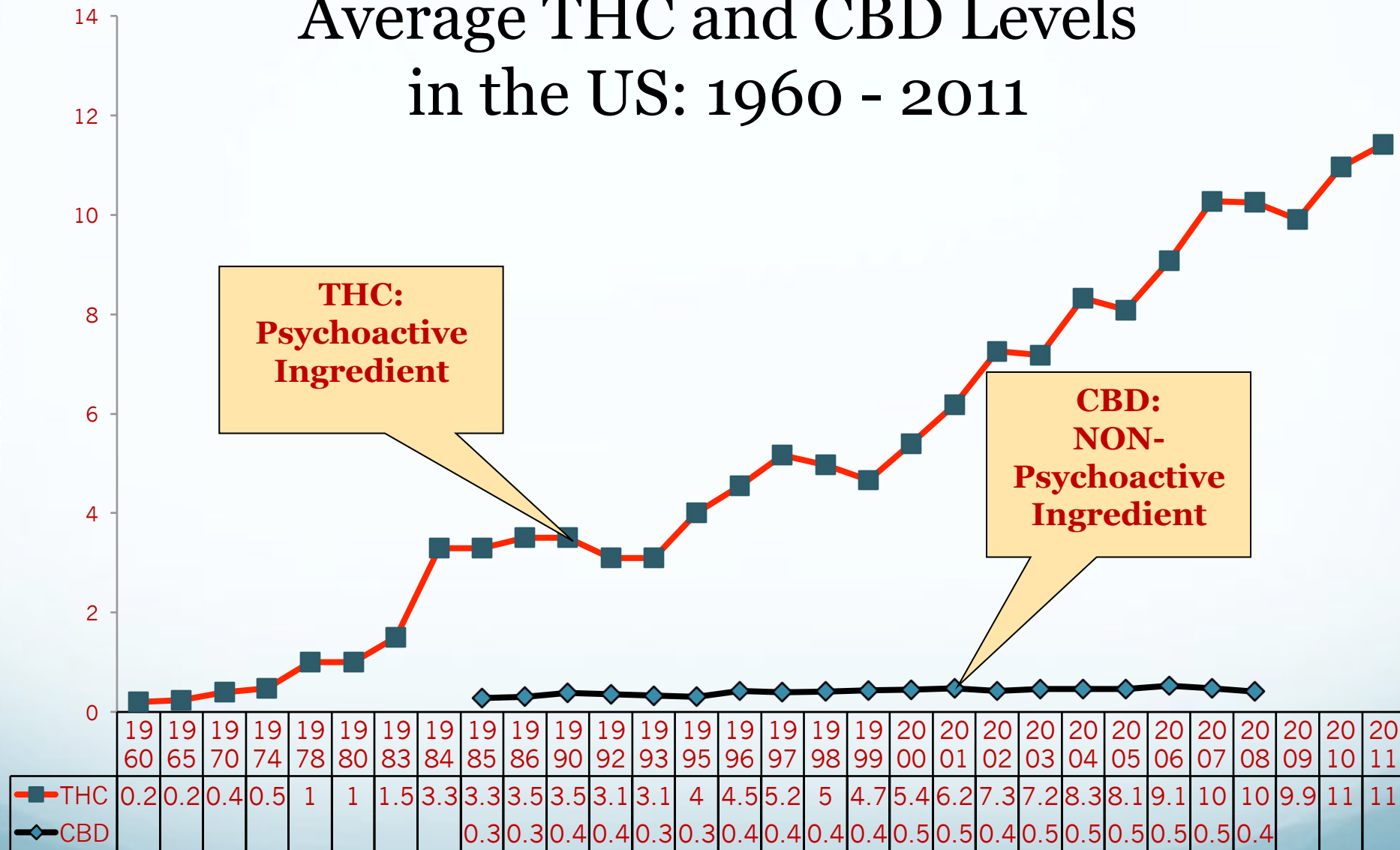
Increased Potency

Today's marijuana is not the marijuana of the 1960s.

- **In the past 15 years, marijuana potency has tripled and since 1960 it grown 5 times stronger.**



Average THC and CBD Levels in the US: 1960 - 2011



ER admission rates rising

Cannabis-related emergency hospital admission rates have been rising sharply in the US

- From an estimated **16, 251** in 1991 to over **374,000** in 2008

Harmful effects on the brain

Marijuana use directly affects the brain

- It affects parts of the brain responsible for:
 - memory,
 - learning attention,
 - and reaction time.
- These affects can last up to 28 days after abstinence from the drug



Harmful effects on mental health

- Increased risk of mental illness
 - Schizophrenia (6 fold)
 - Psychosis
 - Depression
 - Anxiety

Harmful effects on the lungs

Research shows that marijuana smoke is an irritant to the lungs.

- Results in greater prevalence of:
 - bronchitis,
 - cough,
 - and phlegm production.



Marijuana smoke is carcinogenic.

- It contains 50-70 percent *more* carcinogenic hydrocarbons than tobacco smoke.
- Evidence linking marijuana and cancer is mixed. However, marijuana smoke contains an enzyme that converts hydrocarbons into a cancer-causing form.
- Evidence on cancer is mixed.

Marijuana use has significant effects on IQ and learning

- Persistent and heavy use among adolescents reduces IQ by 6-8 points
- According to a government survey, youth with poor academic results are more than four times likely to have used marijuana in the past year than youth with an average of higher grades.

Marijuana use is linked to low productivity and job performance

- Linked with:
 - dropping out of school,
 - unemployment,
 - social welfare dependence,
 - and lower self-reported quality of life

Marijuana use is linked to low productivity and job performance

- Employee marijuana use is linked with increased:
 - absences,
 - tardiness,
 - accidents,
 - worker's compensation claims,
 - and job turnover

Myth 2:

Smoked/Eaten Marijuana is Medicine

Is marijuana medicine?

**Marijuana has medical properties,
BUT we don't need to smoke or eat it!**

We don't smoke opium to derive the benefits of morphine.

So we don't need to smoke marijuana to receive it's potential benefits.

- A distinction must be made between raw, crude marijuana and marijuana's components

Is marijuana medicine?

No: smoked or inhaled raw marijuana is not medicine

Yes: there are marijuana-based pills available and other medications coming soon

Maybe: research is ongoing

Marijuana has medicinal properties

Studies show that components or constituents within marijuana have medical value.

- For instance, *dronabinol* (also known as Marinol®) contains lab-made THC and is widely available at pharmacies as capsules to treat nausea/vomiting from cancer chemotherapy

Marijuana-based medicines

Marijuana-based medicines are being *scientifically* developed.

- However this process needs improvement
- Research must be done on marijuana's *components*, not the raw, crude plant

Marijuana-based medicines



- Sativex[®] is in the process of being studied in the USA.
- THC:CBD = 1:1
- It is administered via an oral mouth spray
- Already approved in Canada and Europe

Average medical marijuana patients

Profile: 32-year old
white male
history of alcohol and substance abuse
no history of life-threatening illnesses

- 87.9% had tried marijuana before age 19
- 75% of Caucasian patients had used cocaine and 50% had used methamphetamine in their lifetime.



Only a small proportion of medical marijuana users report any serious illness

- In Colorado, 2% reported cancer, less than 1% reported HIV/AIDS, and 1% reported glaucoma as their reason for using medical marijuana.
- In Oregon, these numbers are less than 4%, less than 2%, and 1%, respectively.



Chronic pain

Majority of medical marijuana users report using marijuana to treat 'chronic or severe pain'

- 96% in Colorado
- 91% in Oregon
- 93% in Montana

Legalization behind the smokescreen

“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.

Behind the smokescreen

After the Compassionate Use Act passed in California in 1996, Allen St. Pierre, the director of NORML admitted in a TV interview that “*in California, marijuana has also been de facto legalized under the guise of medical marijuana*”

Medical marijuana has led to
increased use

Residents of states with medical
marijuana laws have abuse/dependence
rates almost twice as high as states with
no such laws.

Increased use can lead to increased drugged driving

- “Drivers who test positive for marijuana or self-report using marijuana are more than **twice** as likely as other drivers to be involved in motor vehicle crashes.”

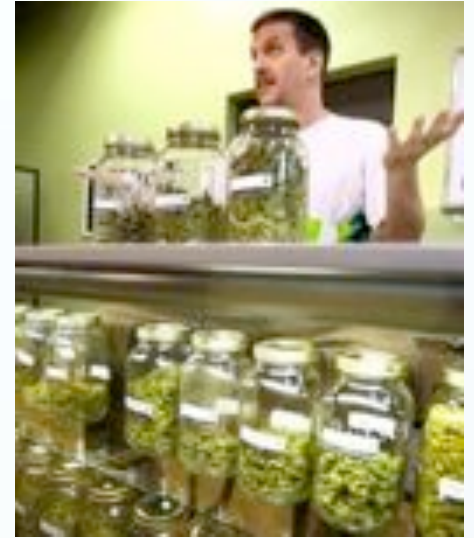


Increased use among teens

“If pot is medicine and sanctioned by the state, then it must be safe to use”

- Among youth (12-17) marijuana use rates in states with medical marijuana is 8.6% compared to 6.9% in states without such laws
- In states with medical marijuana laws, adolescents' perception of the harmful effects of marijuana have significantly decreased.
- Pacula et al found that two features – home cultivation and dispensaries – are positively associated with marijuana use and “have important implications for states considering legalization of marijuana.”

- **Dispensaries – Are these serving the sick and dying??**

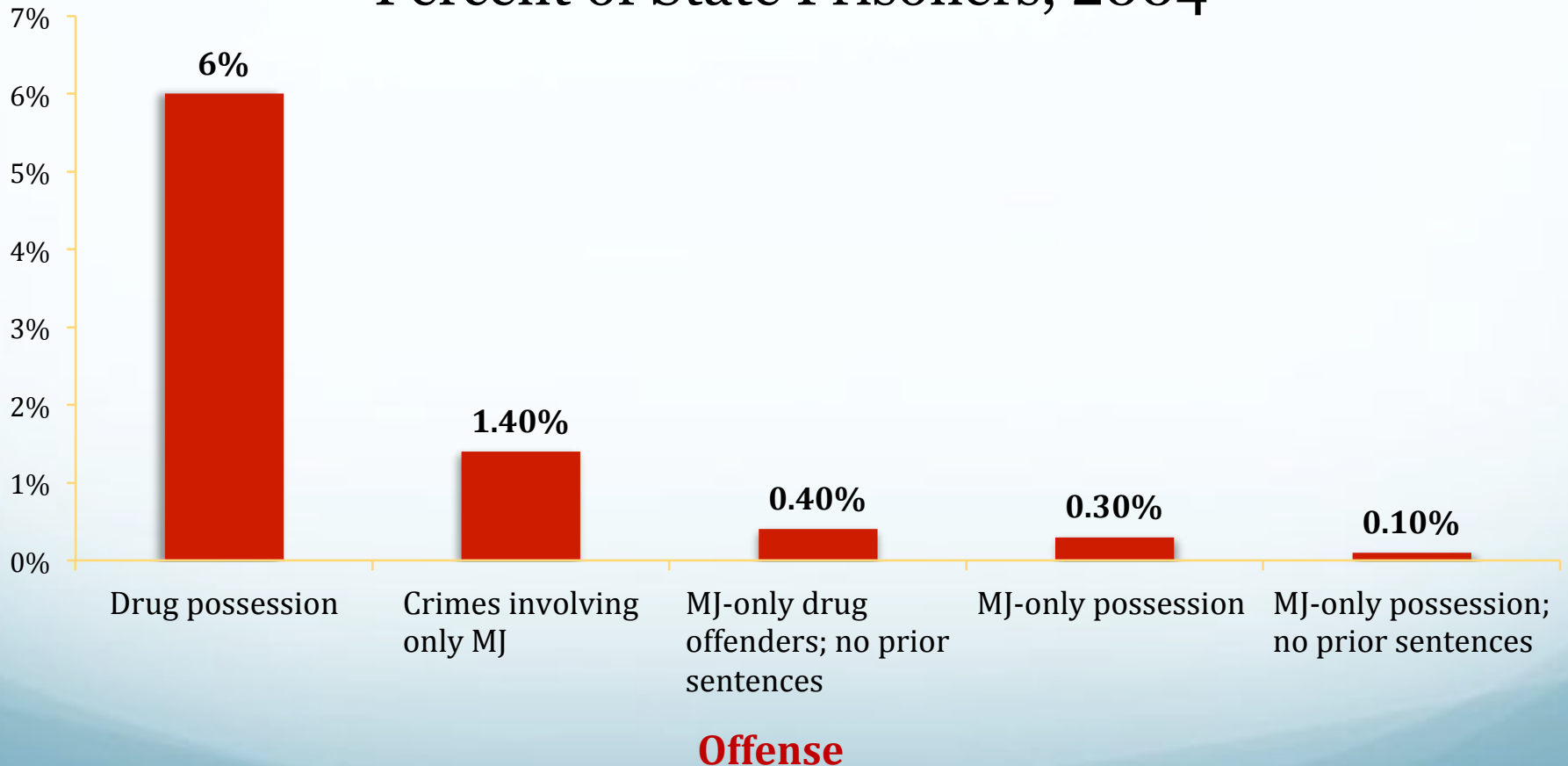


Myth 3:

Countless People Are
Behind Bars for
Smoking Marijuana

Drug Possession Offenders in State Prisons

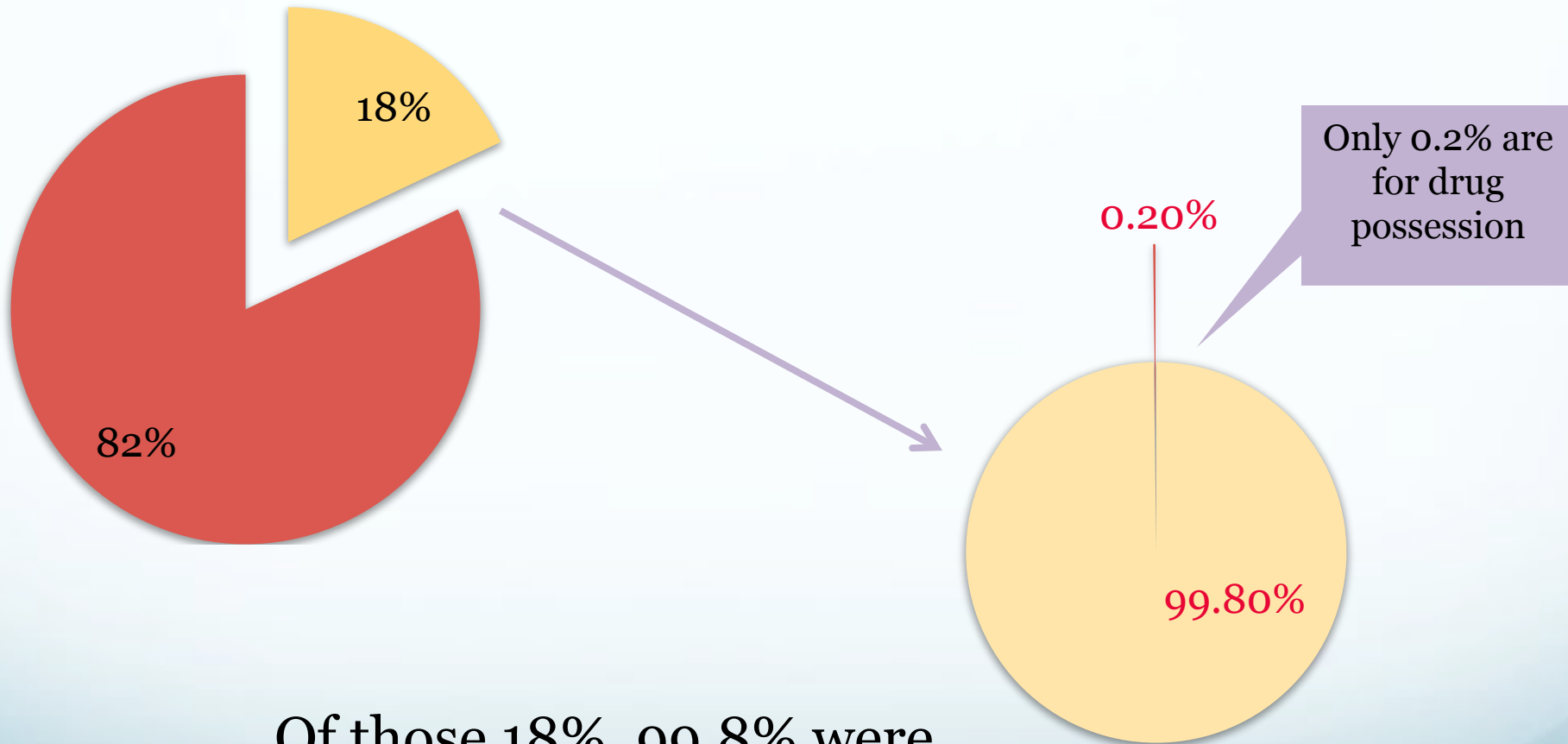
Percent of State Prisoners, 2004



Countless people are NOT behind bars for smoking marijuana

- Only 0.4% of prisoners with no prior offenses are in jail for marijuana possession
- 99.8% of Federal prisoners sentenced for drug offenses were incarcerated for ***drug trafficking***
- The risk of arrest for each joint smoked is ***1 for every 12,000 joints***

Among sentenced prisoners under state jurisdiction in 2008, 18% were sentenced for drug offenses.



Of those 18%, 99.8% were sentenced for *drug trafficking*

Myth 4:

The Legality of Alcohol
and Tobacco
Strengthen the Case
for Marijuana
Legalization

Alcohol and Tobacco: A Model?

- Use levels for alcohol and tobacco are much higher than marijuana
- Industries *promote* addiction and target kids

Schiller JS, Lucas JW, Peregoy JA. Summary health statistics for U.S. adults: National Health Interview Survey, 2011. National Center for Health Statistics. Vital Health Stat 10(256). 2012.

Centers for Disease Control and Prevention.

[Vital Signs: Current Cigarette Smoking Among Adults Aged ≥ 18 Years—United States, 2005–2010.](#)

Morbidity and Mortality Weekly Report 2011;60(33):1207–12

Alcohol and tobacco use among teens

- 50% and 44% of youth report that they can obtain alcohol and cigarettes, respectively, within a day.
- Youth are least likely to report that they can get marijuana within a day (31%); 45% report that they would be unable to get marijuana at all

What incentives do legal corporations have to keep price low and consumption high?

- “Enjoy Responsibly”
- Taxes today for alcohol are 1/5 of what they were during the Korean War (adj for inflation)

Will legalization diminish the power of cartels and the black market?

- Marijuana accounts for 15-25% of revenues gained from drug trafficking groups
- More money is found in human trafficking, kidnapping, and other illicit drugs

Will legalization diminish the power of cartels and the black market?

- In a legal market, where drugs are taxed and regulated (for instance to keep THC potency below a certain level or to prevent sale to minors), the black market has every incentive to remain
- Legalizing marijuana would not deter these groups from continuing to operate

‘Big marijuana’

Can we trust companies and Big Corporations
not to target youth and the vulnerable?





The “Yale MBAs Are Here”



Steve DeAngelo



Troy Dayton

ArcView with investors at the Washington Athletic Club



‘Big marijuana’

“The use of marijuana ... has important implications for the tobacco industry in terms of an alternative product line. [We] have the land to grow it, the machines to roll it and package it, the distribution to market it. In fact, some firms have registered trademarks, which are taken directly from marijuana street jargon. These trade names are used currently on little-known legal products, but could be switched if and when marijuana is legalized. Estimates indicate that the market in legalized marijuana might be as high as \$10 billion annually.”

From a report commissioned by cigarette manufacturer Brown and Williamson (now merged with R.J. Reynolds) in the 1970s.

DRAFT

1. THE IMPORTANCE OF YOUNGER ADULTS

Within five years, younger adults (18-24) will drop from 18% to 13% of the total adult population (18+). They will continue to decline in numbers until at least 1995, as the crest of the Baby Bubble pushes farther past age 25.

This shift in the population will cause smokers aged 18-24 to fall from 16% to 14% of all smokers by 1988. Even 13% would not be surprising, since smoking incidence has been declining more rapidly among younger adults than any other age group in recent years (see Appendix A).

Why, then, are younger adult smokers important to RJR?

Why, then, are younger adult smokers important to RJR?

1. VOLUME

Younger adults are the only source of replacement smokers. Repeated government studies (Appendix B) have shown that:

- Less than one-third of smokers (31%) start after age 18.
- Only 5% of smokers start after age 24.

introduction, with no cannibalization and no development/introductory costs.

As a company, Philip Morris held more than 60% of these 18-year-olds in 1983 versus RJR's 15-20%, yielding PM a .5 point in-going SCM advantage due only to "new" smokers.

- * This assumes 18-year-olds are 10% of the 18-24 group rather than a "fair share" of 14% because of population decline and the fact that some smokers start after age 18.

STATEMENT OF DAVID GOERLITZ
Former Model for Winston Cigarettes

BEFORE THE
SUBCOMMITTEE ON TRANSPORTATION AND HAZARDOUS MATERIALS
OF THE
HOUSE COMMITTEE ON ENERGY AND COMMERCE

of the models who appeared in the
even smokers. One of them, in fact,

Of course, children aren't the only targets of the tobacco industry. Once, when I asked an R.J. Reynolds executive why he and his colleagues didn't smoke, he responded point-blank that "We don't smoke the sh--, we just sell it . . . We reserve that 'right' for the young, the poor, the black and the stupid."

PROJECT:

Youth Cigarette - New concepts

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Youth Cigarette - New concepts

MARKETING INNOVATIONS' SUGGESTIONS:

APPLE FLAVOR

Apples connote goodness and freshness and we see many possibilities for our youth-oriented cigarette with this flavor. Apple cider is also a possibility.

SWEET FLAVOR CIGARETTE

We believe that there are pipe tobaccos that have a sweet aromatic taste. It's a well known fact that teenagers like sweet products. Honey might be considered.

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‘Big marijuana’

‘The 2nd Annual National Marijuana Business Conference And Expo’ – Nov. 6-8, 2013 in Seattle

- Expecting nearly 600 people including:
 - Dispensary owners and license holders
 - Professional cultivators
 - Edibles and infused product makers
 - Ancillary goods and services firms, from attorneys to security technology
 - Investors and angel investing group leaders
- Conference registration costs \$600

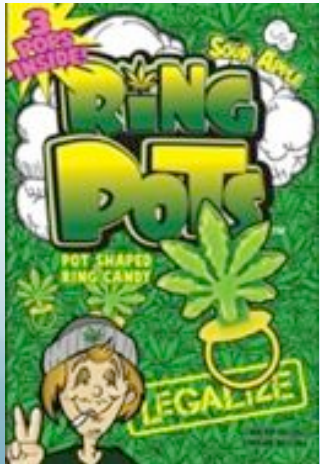
**Will Big Marijuana
become the new Big
Tobacco?**

Several vending machines and billboards
have already emerged throughout the
country



A variety of medical marijuana products and 'edibles' can be found at dispensaries:

- Brownies, carrot cake, cookies, peanut butter, granola bars, ice cream
- Many such as 'Ring Pots' and 'Pot Tarts' are marketed with cartoons and characters appealing to children:



**Alcohol and Tobacco
legalization teach us
there is no money in
this for anyone
other than
Big Marijuana**

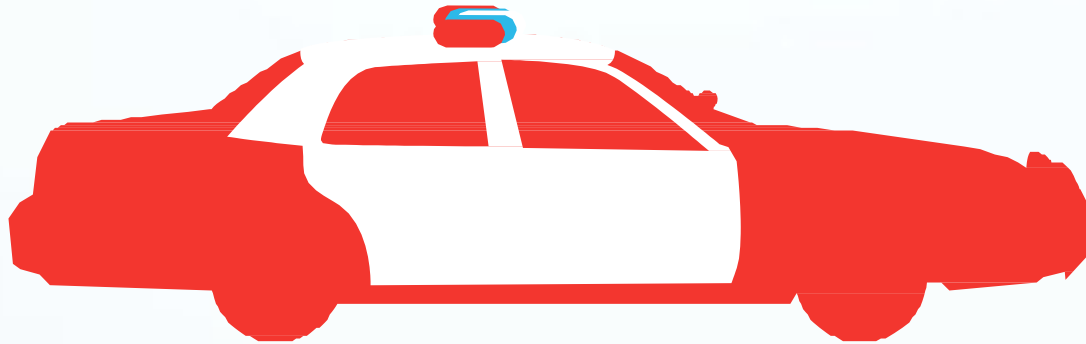
Myth 5:

Legal Marijuana Will
Solve the
Government's
Budgetary Problems

Will legalization solve budgetary problems?

- Few people are currently in jail for smoking marijuana
- Arrests and regulatory costs will *increase* with legal marijuana

“If Only We Treated It Like Alcohol...”



2.7 million

Arrests for alcohol-related crimes in
2008

(Does ***NOT*** include violence;
Includes violations of liquor laws and
driving under the influence)



847,000

Marijuana-related
arrests in 2008

Alcohol & Tobacco: Money Makers or Dollar Drainers?

- For every 1\$ gained from alcohol and tobacco tax revenues, \$10 is lost in legal, health, social, and regulatory costs



Alcohol & Tobacco: Money Makers or Dollar Drainers?

**Alcohol
Costs**

Costs

**\$185
billion**

**\$14
billion**

Revenues

**Tobacco
Costs**

**\$200
billion**

**\$25
billion**

Revenues

State estimates found at <http://www.nytimes.com/2008/08/31/weekinreview/31saul.html?em>; Federal estimates found at https://www.policyarchive.org/bitstream/handle/10207/3314/RS20343_20020110.pdf; Also see <http://www.tobaccofreekids.org/research/factsheets/pdf/0072.pdf>; Campaign for Tobacco Free Kids, see “Smoking-caused costs,” on p.2.

Myth 6:

Portugal and Holland
Provide Successful
Examples of
Legalization



**Neither Holland nor
Portugal have legalized
ANY drug**

Legalization: Experience elsewhere?

No modern nation has tried legalization, though most Western countries do not imprison people for simple marijuana possession.

- Use rates in the Netherlands, Portugal, and Italy in the last 10 years are lower for some drugs and higher for others.
- The Dutch experienced a three-fold increase in marijuana use among young adults after commercialization expanded.

Portuguese policy

In 2001, Portugal changed policy to send users with small amounts of drugs to “*dissuasion panels*”
– social worker panels who refer individuals to treatment, administer fine, etc.

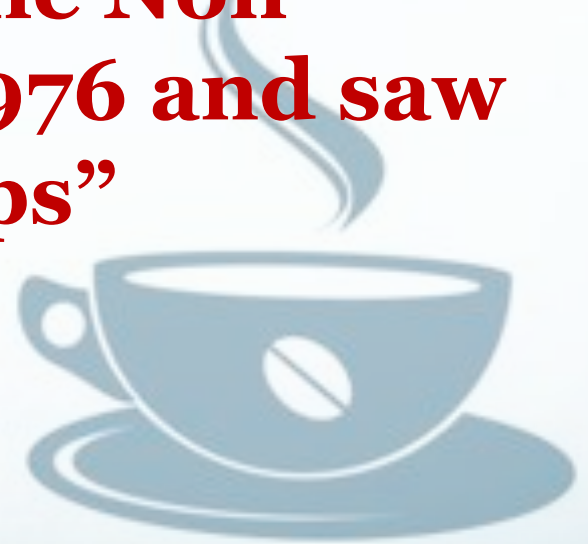
Portugal also implemented robust treatment plan

Results are mixed

- Youth use has increased since 2001
- Deaths have gone down
- The impact of the policy unclear, despite extreme rhetoric

Dutch policy

The Dutch established the Non-enforcement Policy in 1976 and saw the birth of “Coffee Shops”



Results

- Experienced a three-fold increase in marijuana use among young adults
- Before Non-Enforcement, the Dutch always had lower rates of drug use than the US.
 - Holland is now #1 country in Europe with marijuana treatment need
- Scaling back policy
 - Coffee Shops Closing
 - Cannot sell to non-residents

Myth 7:

Prevention,
Intervention, and
Treatment are
Doomed to Fail – So
Why Try?

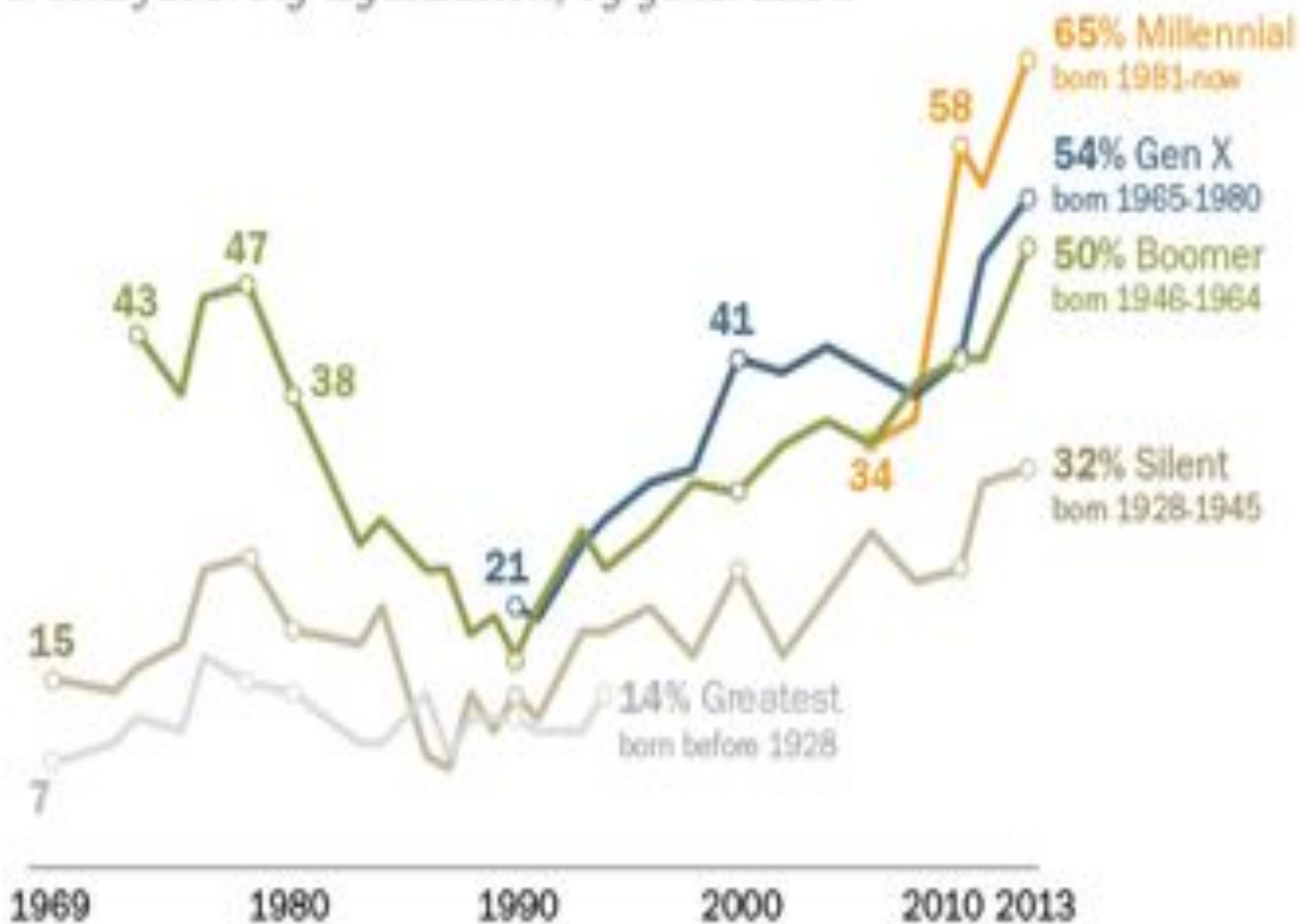
Policy Implications

Why is This Our Field's Chief Policy Issue Today?

It is the discussion that...

- ✓ Completely changes our work environment
- ✓ Has the potential to overpower our best researched, most perfectly executed programs and strategies
- ✓ Is funded with more money, resources, and political **clout than all groups in the field combined**
- ✓ Has very little opposition

Percent favoring legalization, by generation



Generational lines shown when significant sample is available.

George Soros

- *Spent over \$250 Million on Legalization*
- *International focus*



Peter Lewis

- Between \$50-\$70 M on legalization
- Focuses on the US



- Primarily responsible for US-led initiatives – fully funds the MARIJUANA POLICY PROJECT

Over \$50 Million

John Sperling University of Phoenix



They've secured legislative champions at all levels – local, state, federal, international.

They've gotten the attention of editorial boards and media – including print, television and social media.

Case of Sanjay Gupta:
**“Gupta Changes His Mind On
Weed”**

**They've mobilized major
grassroots and student
supporters.**

**They are present and active
in every single academic,
think-tank, UN, and other
international and domestic
discussion on drug policy.**

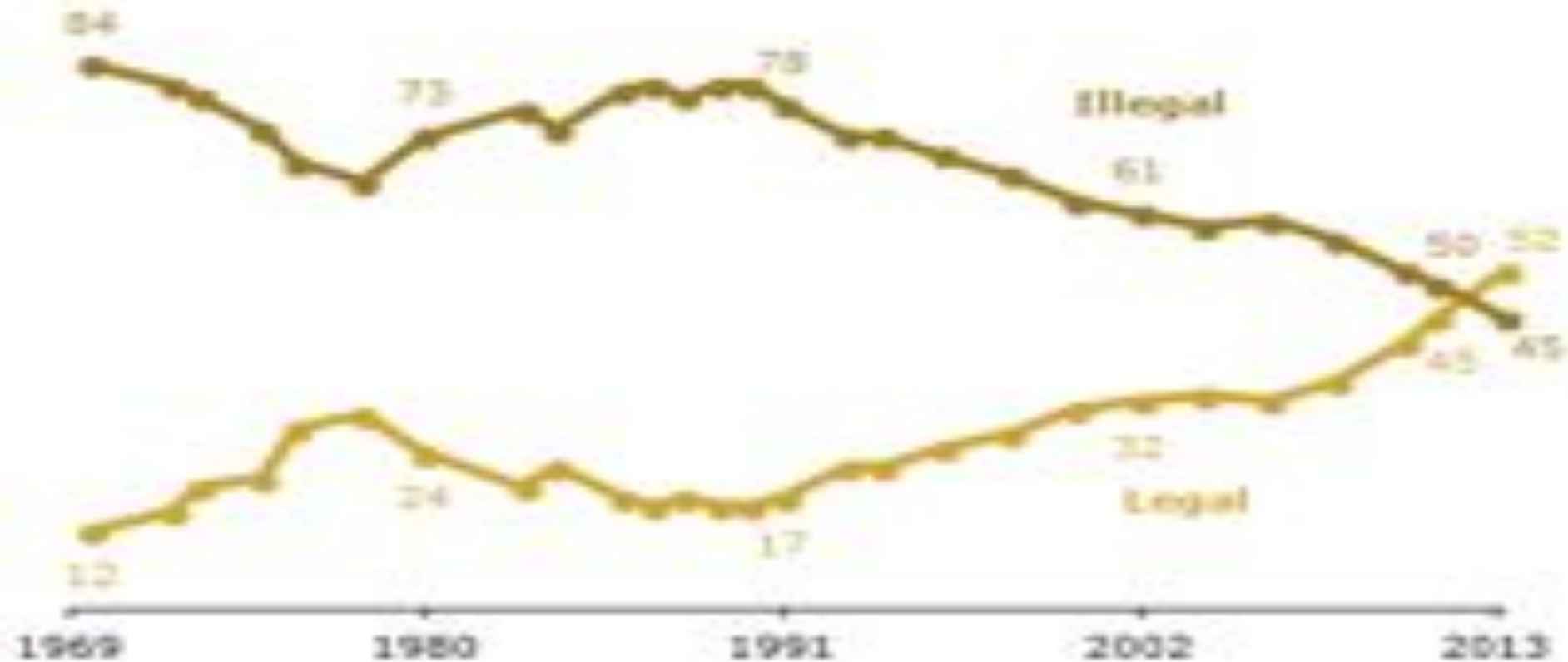
Most of all: They have captured the “sensible” ground, boxing us in as extremists, old fashioned, and moralistic.

What has been the result of their framing of this issue?

Support for Marijuana Legalization in the United States Has Reached Unprecedented Levels

Views of Legalizing Marijuana: 1969-2013

% saying marijuana should be ...



PEW RESEARCH CENTER March 13-17, 2013.
1973-2008 data from General Social Survey; 1969 and 1972 data from Gallup.

National Policy

After 50 years of a movement to legalize marijuana, 2 states have now done it – Colorado and Washington

Marijuana Still Illegal Under Federal Law and Laws of 48 states

DOJ Guidance from Holder

**Holder did not endorse
legalization**

He said that the government would *defer* its right to challenge states in court “***right now***”

DOJ Guidance from Holder

He laid out major areas of importance, including:

- ***youth use increases***
- ***drugged driving/health consequences***
- ***advertising for youth***

**But has this
already
happened?**

Colorado post-2009

- Passed medical marijuana in 2001
- But no dispensaries until the mid-2000s
- Between 2006 and 2012, medical marijuana cardholders rose from **1,000 to over 108,000**
- The number of dispensaries rose from **0 to 532**



Increased teen use

Marijuana use among Colorado teens is currently:

- **fifth** highest in the nation
- **50% above national average**



Colorado

10.7%

7.6%

National average

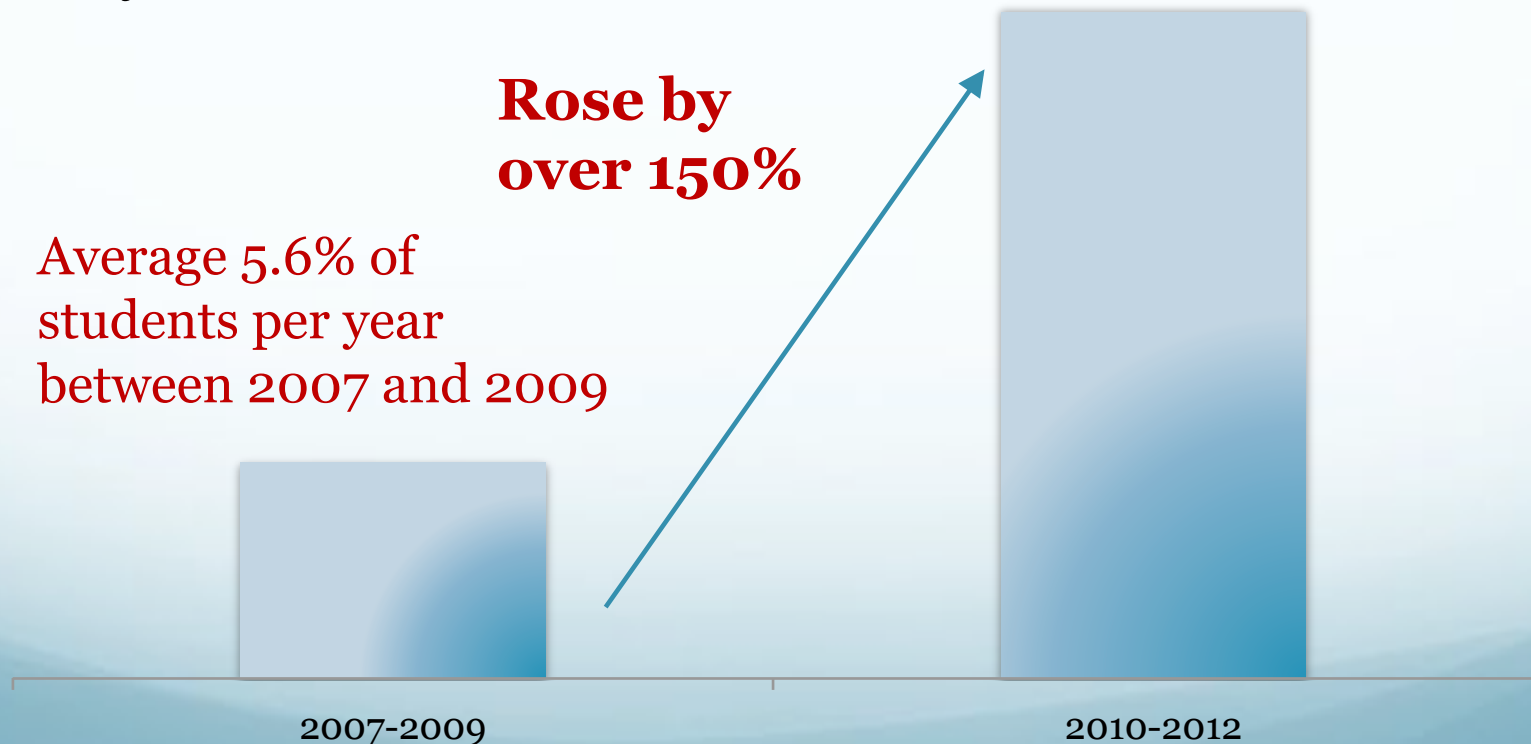
Distribution to minors

Drug-related referrals for high school students testing positive for marijuana increased

Average of 17.3% per year between 2010 to 2012

Rose by over 150%

Average 5.6% of students per year between 2007 and 2009

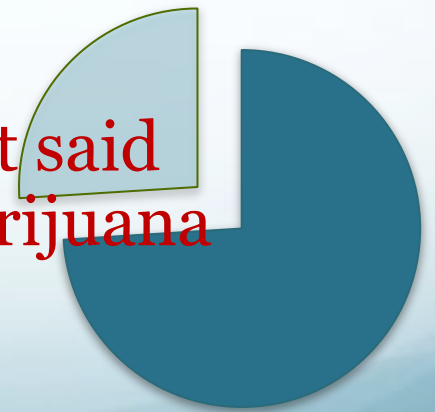


Distribution to minors

In 2007, tests positive for marijuana made up 33% of the total drug screenings, by 2012 that number **increased to 57%**

Medical marijuana is easily diverted to youth

- Teens who know somebody with a medical marijuana license are more likely than those who don't to report 'fairly' or 'very' easy access to marijuana
- **74%** of Denver-area teens in treatment said they used somebody else's medical marijuana an average of 50 times

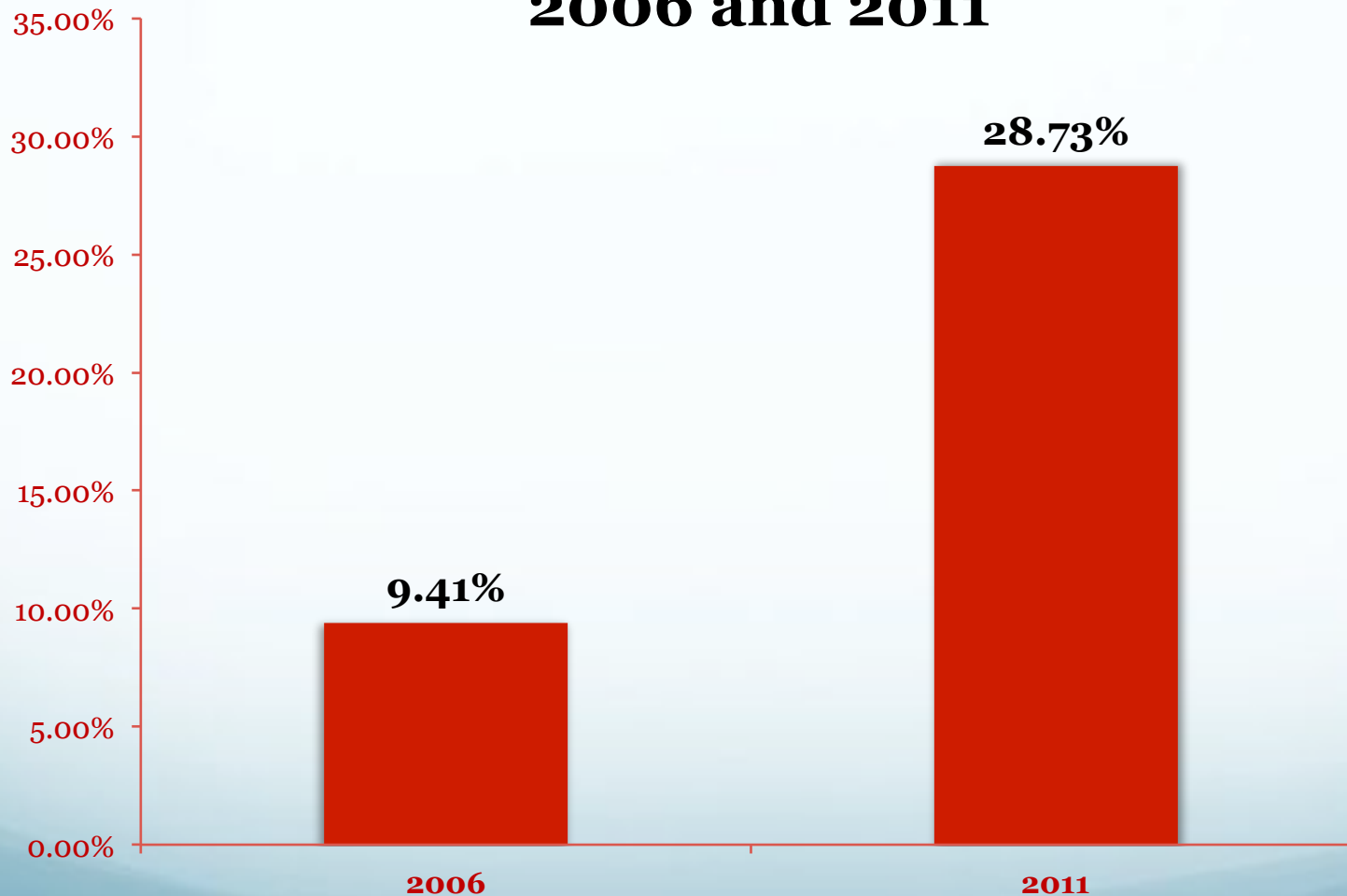


Denver high schools

- 29% of Denver high school students used marijuana in the last month
- If Denver were an American state, it would have the **HIGHEST** public high school current use rates in the country



Percent difference between national and Colorado past-month teen marijuana usage averages – 2006 and 2011

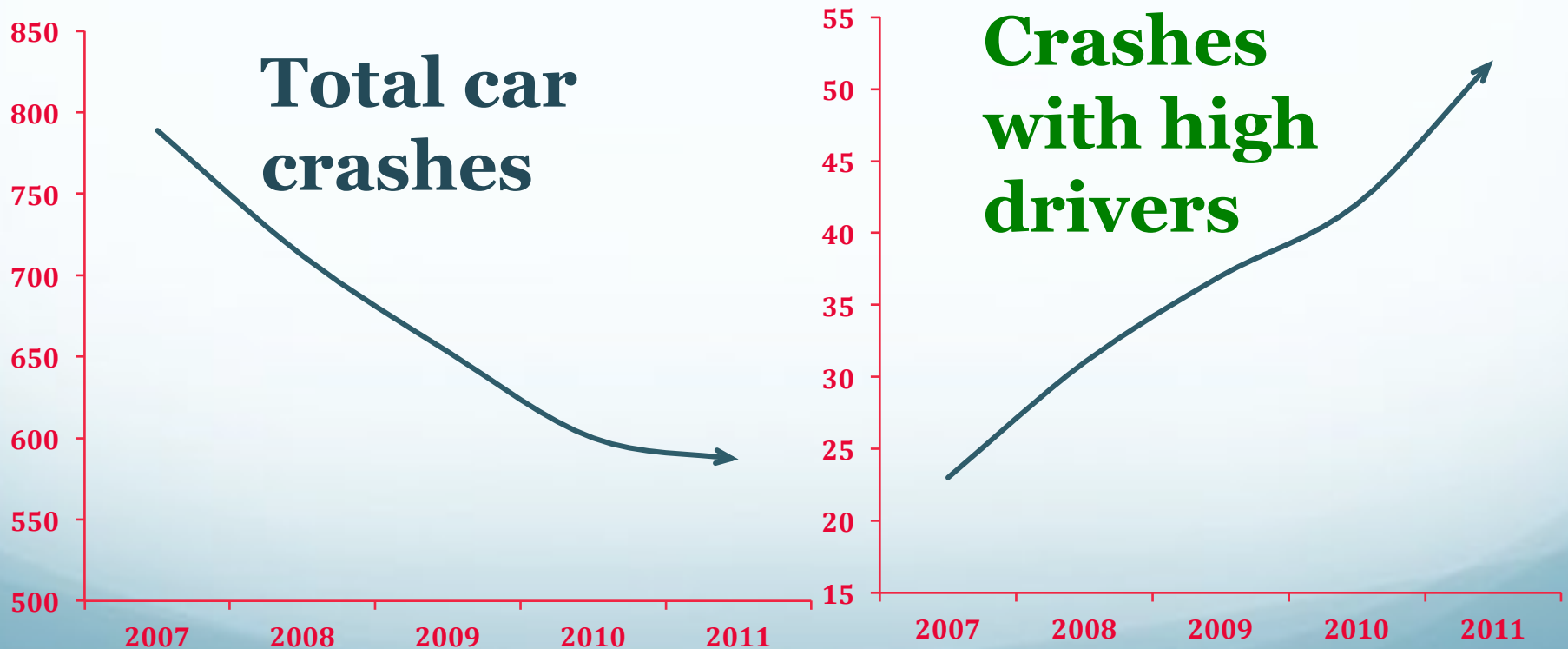


Increased traffic fatalities



In Colorado, fatalities involving drivers testing positive for marijuana rose by **112%**.

While the total number of car crashes ***declined*** from 2007 to 2011, the number of fatal car crashes with drivers testing positive for marijuana rose sharply.



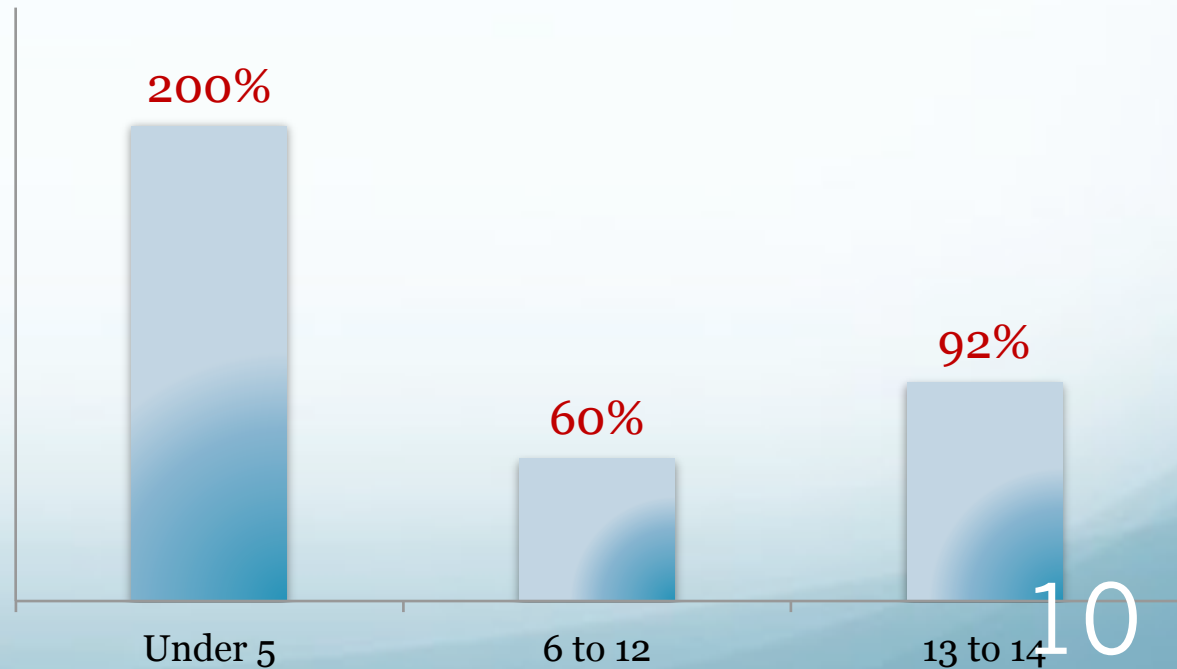
Increased ER admissions

In 2011, marijuana-related incidents accounted for 26 percent of the total ER visits, compared to 21 percent nationally

Increased ER admissions

Rise in marijuana-related ER visits from 2006 and 2012:

- 200% for kids under 5
- 60% for kids 6-12
- 92% for kids 13-14



Diversion of marijuana

As the price for marijuana plummets in legalization states, we can expect cheap marijuana to be sold in non-legalization states for a handsome profit.

- According to the El Paso Intelligence Center (EPIC) National Seizure System, in 2012, there were 274 Colorado marijuana interdiction seizures destined for other states compared to 54 in 2005.

Poor regulation

Two independent reports released in August 2013 document how Colorado's supposedly regulated system is **not well regulated at all**

Poor regulation

The Colorado State Auditor concluded that:

- The state had not “established a process for caregivers to indicate the significant responsibilities they are assuming for managing the well-being of their patients,” and that the state “cash fund” was out of compliance.

Poor regulation

The Colorado State Auditor concluded that:

- 50% of ALL recommendations made by only TWELVE physicians



10

4

Poor regulation

The city of Denver Office of the Auditor concluded that:

- The city of Denver “does not have a basic control framework in place for effective governance of the...medical marijuana program.”
- The medical marijuana records are “incomplete, inaccurate, inaccessible.”
- And that many dispensaries are operating without licenses.

4/20 Rally in Denver



4/20 Rally in San Francisco



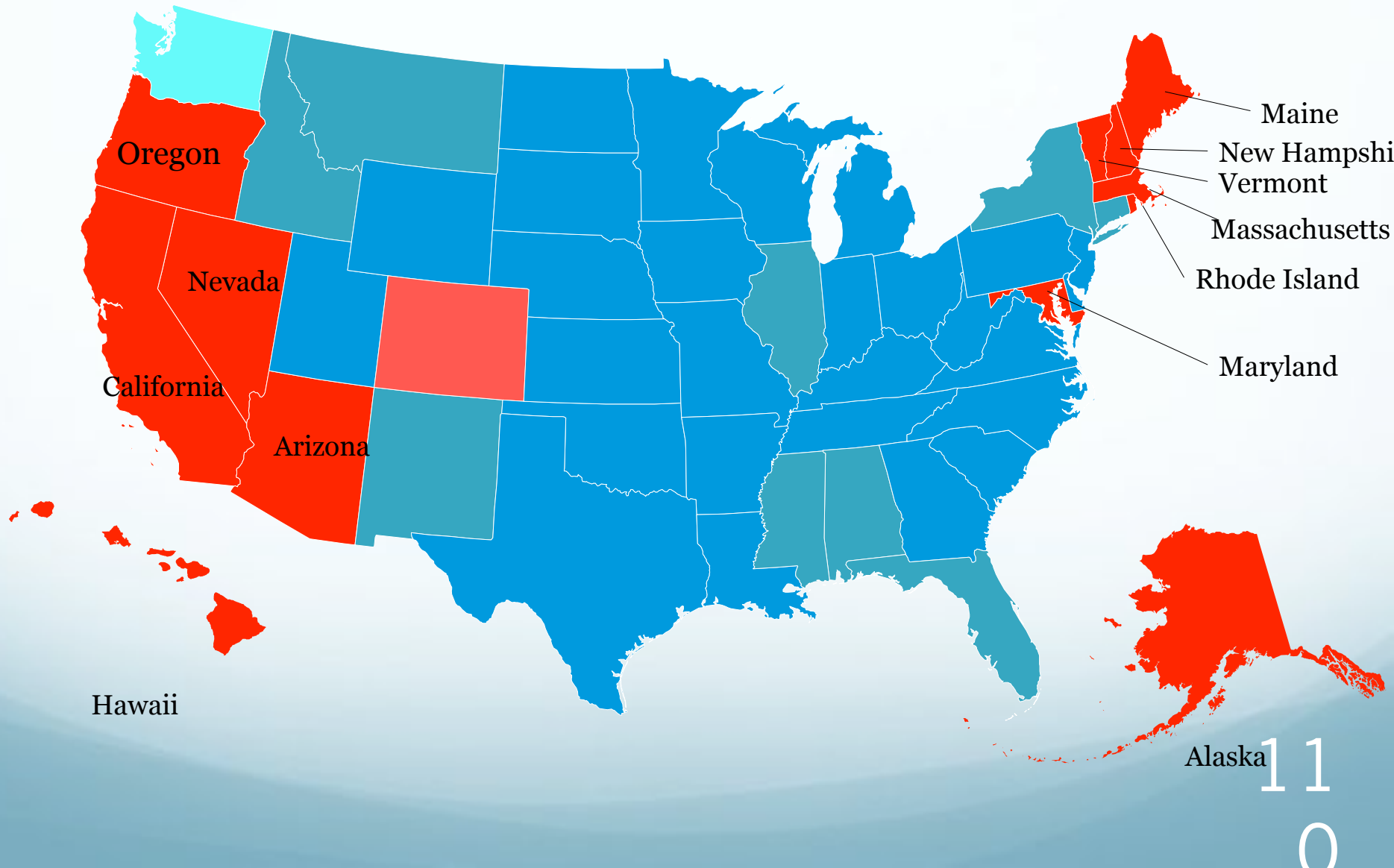
Responsible Regulations?

- Heavily influenced by CO's massive medical marijuana industry
- Allowing character packaging, edibles, candies
 - Can grow much more than you sell
- Advertising allowed in “Adult Periodicals”

Legalization on the horizon

With the DOJ's announcement that it will not enforce the CSA, the reform group, Marijuana Policy Project (MPP), announced its plan to get legalization on the ballot in 10 states by 2017

These states include:



Alaska



- MPP is currently supporting a petition – the “Campaign to Regulate Marijuana” – to place legalization on the 2014 ballot
- If passed:
 - The manufacture, sale, and possession of up to one ounce of marijuana becomes legal for adults over 21.
 - Creates establishments such as: marijuana retail stores and marijuana infused-product manufacturers

Initiatives supported by MPP are in place to put legalization on the ballot by 2016 and 2017 in:

- Arizona
- California
- Maine
- Nevada
- Hawaii
- Maryland
- New Hampshire
- Rhode Island
- Vermont

Also on the horizon...



If passed...

In all of these states, if the proposed amendments are passed, the retail **sale** and **production**, and **possession** of marijuana will become legal

So What Are Our Choices?

All or nothing?

Legalization (“Regulation”) vs. Incarceration (“Prohibition”)



Smart approach

**Not about legalization vs.
incarceration**

**We can be against legalization but also
for health, education, and common-
sense**



Chair, Patrick J. Kennedy

Launched January 10th, 2013 in Denver

Over 5,000 press mentions

Public Health Board of Trustees

10 state-wide affiliates

Project SAM

1. To inform public policy with the science of today's marijuana.
2. To have honest conversations about reducing the unintended consequences of current marijuana policies, such as lifelong stigma due to arrest.
3. To prevent the establishment of Big Marijuana that would market marijuana to children — and to prevent Big Tobacco from taking over Big Marijuana. Those are the very likely results of legalization.
4. To promote research of marijuana's medical properties and produce pharmacy-attainable medications.

**SAM is a national group
with state and local
partners**



SAMIA (SAM Interstate Alliance)

State partners who work on state/local issues

Can be separate 501 (c) (4) or PAC or simply an informal entity

“We cannot promote a comprehensive system of mental health treatment and marijuana legalization, which increases permissiveness for a drug that directly contributes to mental illness.”

- Patrick J. Kennedy, former congressman





"A world of legal drugs will be a world in which the fates of the top one third of Americans and the lower two thirds will diverge even more than they already do. We have opened more roads to self-harm. Must we now open another?"

- David Frum, Daily Beast columnist

“The unregulated tobacco industry is a worldwide public health disaster. We should learn from our mistakes, not repeat them with marijuana.”

**- Kimber Richter,
tobacco researcher, University of Kansas**



Smart Approach

Addressing current policy:

- People should not be stigmatized for their past use
- No sense in incarcerating users
- People need job and economic opportunities; by being blocked from them they will re-enter the illicit market

Non-legalization reforms

- Robust community-based prevention programs
 - community coalitions
- Criminal justice intervention programs
 - Probation reforms
 - Drug treatment courts
- Non-drug interventions
 - Housing
 - Education
 - Healthcare

What Can You Do?

- We need a movement!
- People need to hear your voice!

RECRUIT CHAMPIONS



**Who are the grasstops leaders
that you need to turn into
champions?**

- **Legislators at every level of government**
- **Executive branch leaders, at every level of government**
- **Media luminaries in every medium**
- **Business leaders**
- **Other key influentials (faith leaders, civic leaders, foundation leaders, other)**

Why Do You Need to Engage Them?

- To get on their policy radar screens
- To get them and their organizations to formally support our positions

How To Interest Grasstops Leaders:

- Figure out how the marijuana legalization issues affect them and their constituents/members.
- Discuss these issues in a way that will appeal to them, their mission and their members.

How to Get Grasstops Support

- Must identify the leaders of the organization
- Must figure out how to get to them
- Must meet with them BEFORE the other side does
- Must make our case so that is salient, compelling and resonates with them and their members
- Must work with them to **FORMALLY** and **PUBLICLY** support your position
- Must do all the work for them

How to Frame Our Messages to Win Back The Public



Changing the Frame:

- From negative to positive
- From “old” to “new”

Old Message

Marijuana legalization will increase
drug use and workplace related
consequences.

Facts:

According to the American Council for Drug Education in New York, employees who abuse drugs are:

- 10 times more likely to miss work
- 3.6 times more likely to be involved in on-the-job incidents
- 5 times more likely to file a workers' compensation claim.

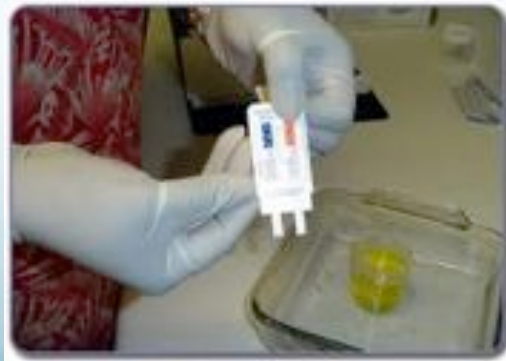
Fact:

6.5% of high school seniors
smoke marijuana every day¹,
rendering them virtually
unemployable.

¹ Johnston, L. D., O'Malley, P. M., Bachman, J. G., & Schulenberg, J. E. Monitoring the Future national survey results on drug use, 2012. Volume I: Secondary school students. Ann Arbor: Institute for Social Research, The University of Michigan.
Available: <http://www.monitoringthefuture.org/data/10data.html#2011data-drugs>

New Frame:

If your community cares about jobs and employability, you need to care about reducing marijuana use.



Old Message

Marijuana use is bad for memory,
motivation and learning

Facts:

- A recent study found that those who used cannabis heavily in their teens and continued through adulthood showed a permanent drop in IQ of 8 points.
- Marijuana use negatively effects motivation, memory, AND learning.¹
- Youth with an average grade of D or below were more than four times as likely to have used marijuana in the past year than youth with an average grade of A.²
- The more a student uses marijuana, the lower their grade point average is likely to be and the more likely they are to drop out of school.³

¹ National Institute on Drug Abuse, "Marijuana: Facts Parents Need to Know." 2011. Available: www.nida.nih.gov/marijbroch/parents/001.php

² Office of Applied Studies, Substance Abuse and Mental Health Services Administration (SAMHSA). SAMHSA's National Household Survey on Drug Abuse Report—Marijuana Use among Youths. July 19, 2002. Available at www.samhsa.gov/oas.nhsda.htm.

³ Johnston, L. D., O'Malley, P. M., Bachman, J. G., & Schulenberg, J. E.. University of Michigan, 2011. *Monitoring the Future Study*

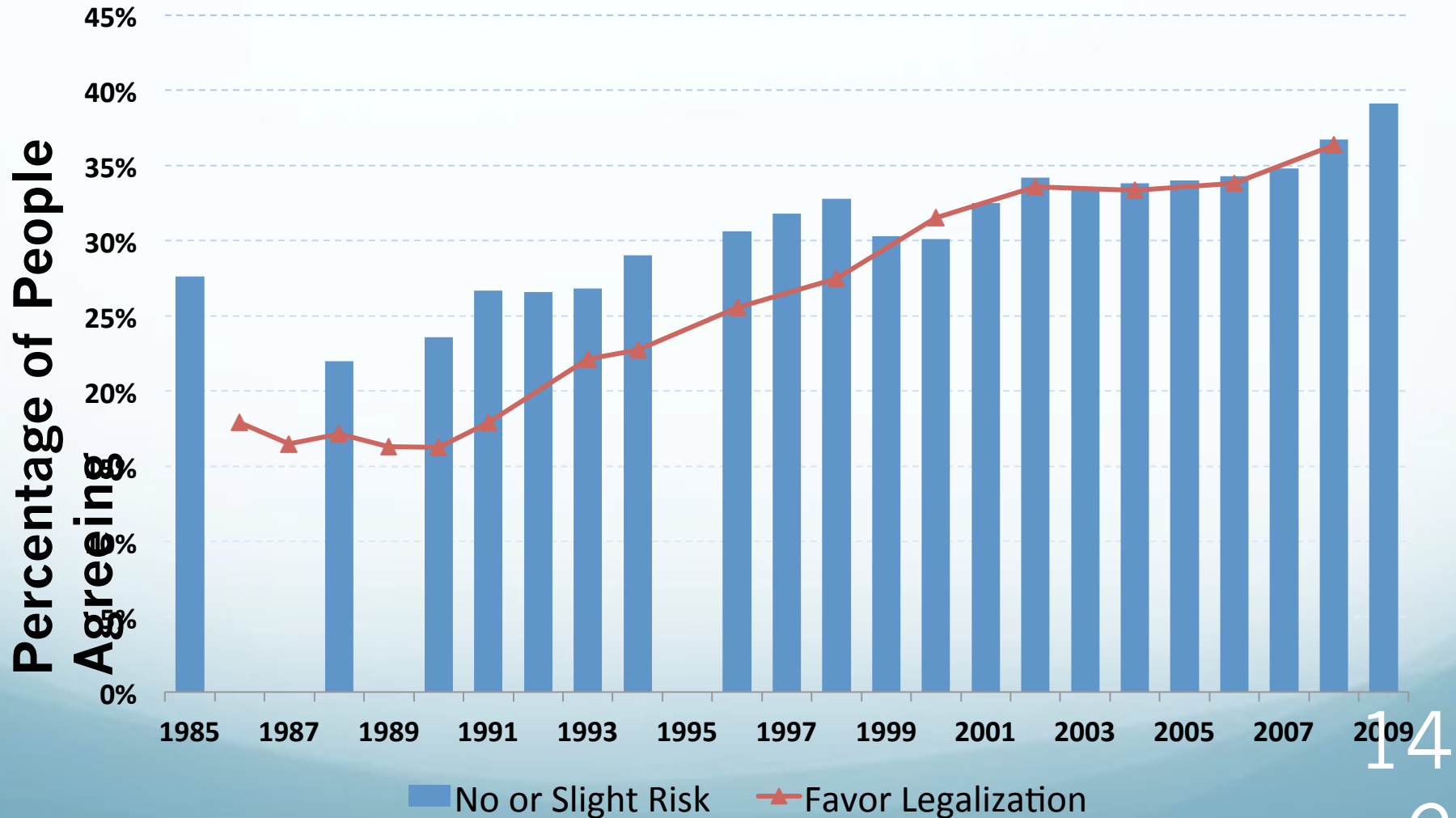
The New Frame

If you care about academic performance, you
need to care about youth marijuana use.

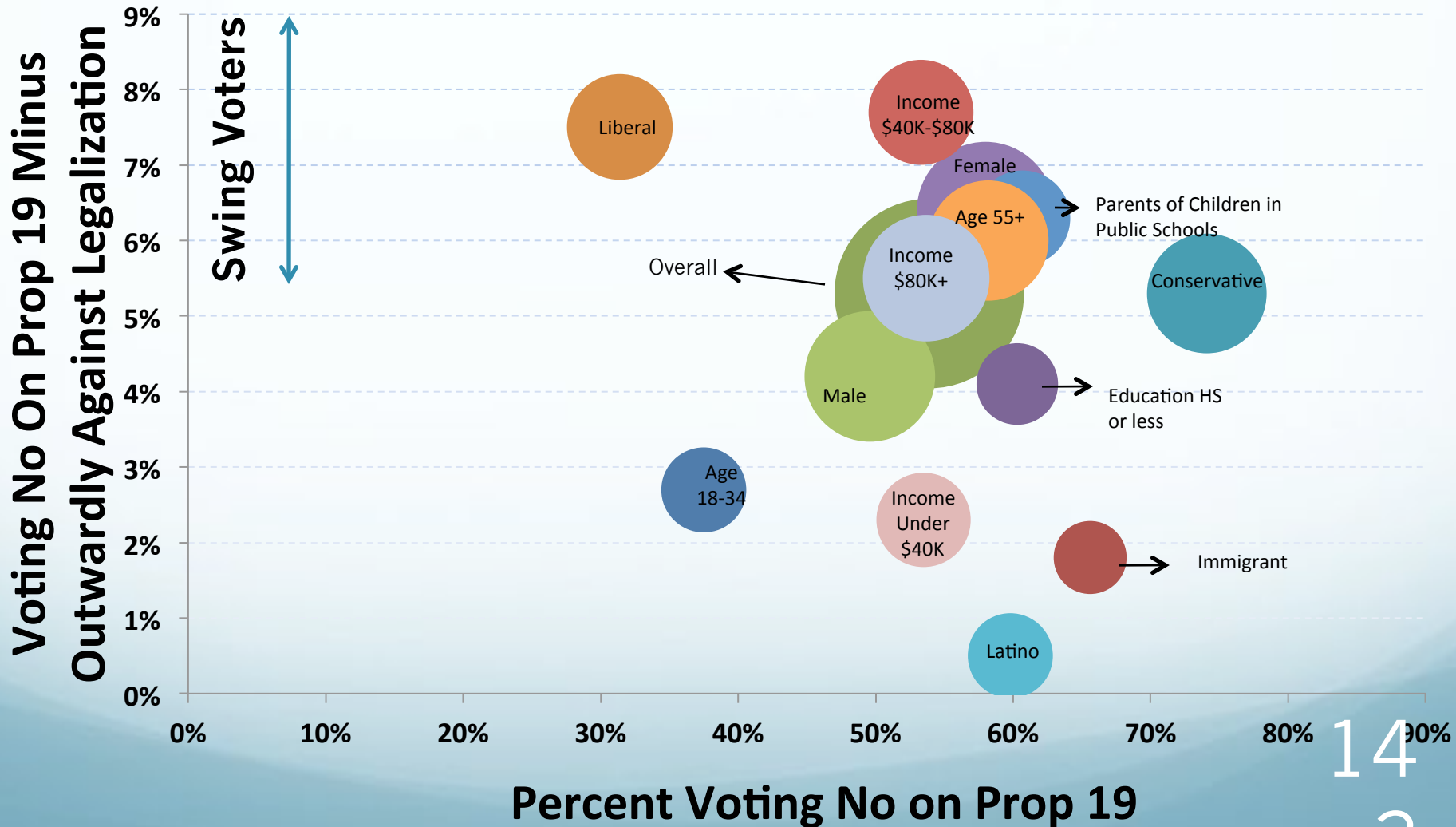


**Connecting the dots for
elected officials is crucial if
we want results!**

Trends in support of legalization correlate with perceived risk of use

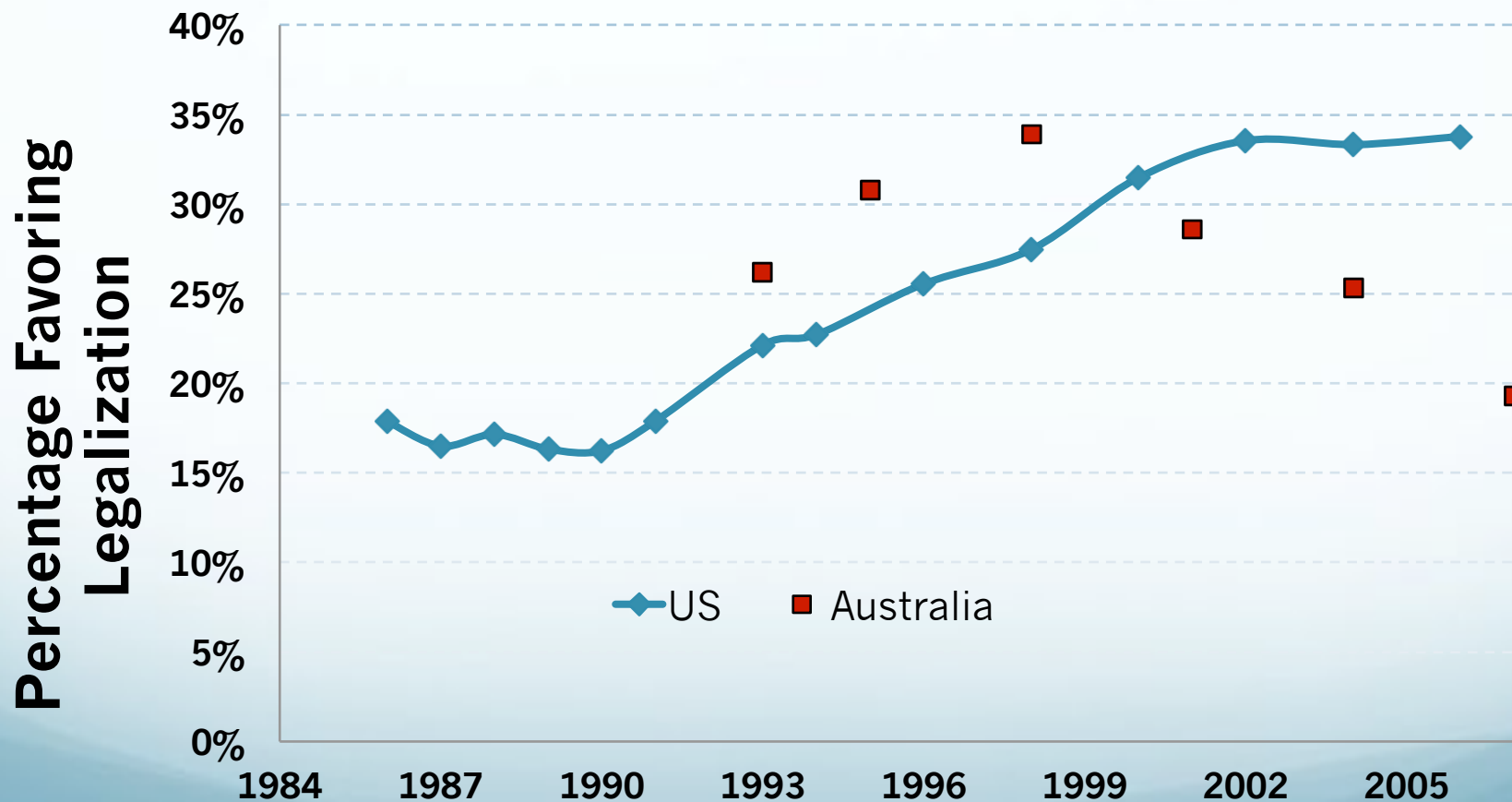


Which demographic groups did not like Prop 19 (in CA)?



International comparison of legalization

Support of Legalization - US vs. Australia



‘Big Marijuana’

Can we trust companies and Big Corporations
not to target youth and the vulnerable?





The “Yale MBAs Are Here”



Steve DeAngelo



Troy Dayton

Drug Policy Alliance

“We're at a tipping point where it's starting to feel like marijuana legalization is no longer a question of if -- but when. But what about the other drugs? My colleagues and I at the Drug Policy Alliance are committed to ensuring the decriminalization of all drug use becomes a political priority.”

Now he does not just mean to remove arrests for small amounts... he says: *“Many of the reasons why marijuana legalization makes sense can be applied to drugs more generally”* --which appears to mean that this is about legalization/full retail sales of all drugs.

-HuffPost

Key Messages We Need to Use

- Highlight Big Tobacco – Big Marijuana Argument**
- This is about legalizing all drugs – not just marijuana**
- Top health authorities in US do not want legalization**
- By increasing use, legalization will hurt workforce development and learning outcomes.**

**We Need to Join
Together to Prevent the
Most Catastrophic
Policy Our Field Has
Seen in More than 100
Years!**