

Vice President Joe Biden
CC: Stefanie Feldman, Vivek Murphy, David Kessler

Dear Vice President Biden and colleagues,

We write on behalf of the Smart Approaches to Marijuana (SAM) Science Advisory Board to commend your unwavering commitment to a well-reasoned approach to marijuana policy. We are the leading non-partisan, national organization offering a science-based approach to marijuana policy, co-founded by former Congressman Patrick Kennedy, senior editor of *The Atlantic* David Frum, and Dr. Kevin Sabet, a three-time White House drug policy advisor most recently aiding Gil Kerlikowske from 2009-2011.

We, the Science Advisory Board, have vast experience in the fields of science, medicine, addiction, and policy, that drive each of us to promote science in discussions on marijuana.

Science must lead conversations regarding marijuana reform. Many people lack an understanding of the harms of marijuana, though a plethora of research confirms your contention that the drug is harmful. Highly regarded researchers found that:

- Marijuana is [addictive](#) and appears to be a component cause of a host of mental illnesses, ranging from [anxiety](#) and [depression](#) to [schizophrenia](#) and [psychosis](#), and even [suicidality](#), especially when use is initiated in youth.
- Marijuana use *is* associated with future substance misuse and addiction—individuals using marijuana, for example, are more likely to [misuse prescription opioids](#). Though the majority of those using marijuana won't go on to other drugs, more than 95% of those using heroin and cocaine started with marijuana.
- On its own, marijuana use can severely [impact brain development](#) in young people, leading to lower IQ and to worse mental health, academic, and professional outcomes.
- Encouraged by a for-profit industry, more pregnant women than ever are using marijuana, with potentially [severe consequences](#) for newborns.
- Marijuana can also cause [cardiovascular harm](#), and may cause certain kinds of [cancer](#).
- In states that legalized marijuana, marijuana-related traffic fatalities are significantly elevated. A study published last month found that widespread legalization could result in nearly [7,000 more traffic deaths](#) annually, due to impaired driving.

In the context of the opioid crisis, your policies regarding substance use disorders and their treatment are evidence based and in line with what we hope for the future of healthcare. Ensuring that substance use disorders are covered by health insurance, that treatment access and prevention are expanded, that illicit drug trafficking is mitigated, that drug enforcement is fair, increasing treatment rather than incarceration, are all goals we share. “Recreational” marijuana must be considered within this context.

Marijuana use disorder is growing rapidly in this permissive policy environment and must be taken seriously and incorporated into drug treatment programs. Illegal marijuana trafficking, which greatly increased in recent years, must be stopped. Racially biased marijuana policing must be reformed. And the marijuana industry, which promotes gummies, candies, and high-powered vapes and concentrates containing potency of up to 99% THC, must be stopped from taking advantage of vulnerable populations. In Denver alone, there is one pot shop for every 43 residents of color in minority neighborhoods. Without these considerations, similarly tragic outcomes await our nation.

Our nation's drug policy must be centered around prevention, treatment, international cooperation, smart and fair enforcement, and community building. The push to create a commercial marijuana industry is not only ignorant of public health, but also of social inequity. Legalization as it is, is not social justice—witness who is actually making money in states like Colorado. Criminal justice reform can and must proceed absent the creation of a new addiction-for-profit industry. This is why decriminalization and expungements are the proper step forward, not commercialization of this generation's next Big Tobacco. Communities historically impacted by biased policing through marijuana enforcement must be built up through targeted criminal justice reform, not [billionaire-backed pot shops](#).

We on the Science Advisory Board at SAM regard your efforts with the utmost respect. We applaud and appreciate your science-based approach that is equally cognizant of legitimate concerns regarding social justice and marijuana-policing. We hope you will continue to uphold these important standards and thank you for your steadfast commitment to public health.

Sincerely,

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Addendum: Recent Peer-Reviewed Research Articles

- Prevalence of Cannabis Withdrawal Symptoms Among People With Regular or Dependent Use of Cannabinoids. (2020). <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2764234?resultClick=1>
- Vaporized Cannabis Extracts Have Reinforcing Properties and Support Conditioned Drug-Seeking Behavior in Rats. (2020). <https://doi.org/10.1523/INEUROSCI.2416-19.2020>
- Birth and early developmental screening outcomes associated with cannabis exposure during pregnancy. (2020). <https://doi.org/10.1038/s41372-019-0576-6>

- Mapping cannabis potency in medical and recreational programs in the United States. (2020). <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0230167>
- New trends in cannabis potency in USA and Europe during the last decade (2008–2017). (2020). <https://doi.org/10.1007/s00406-019-00983-5>
- The contribution of cannabis use to variation in the incidence of psychotic disorder across Europe (EU-GEI): a multicentre case-control study. (2019). [https://doi.org/10.1016/S2215-0366\(19\)30048-3](https://doi.org/10.1016/S2215-0366(19)30048-3)
- Association between medical cannabis laws and opioid overdose mortality has reversed over time. (2019). <https://doi.org/10.1073/pnas.1903434116>