

# A Quick Overview of Marijuana Issues

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## Cannabis Sativa aka “Marijuana” or “Hemp”

By federal law the plant, Cannabis Sativa, is defined as “marijuana” if it contains more than 0.03% of THC (the psychoactive component). It’s defined as “hemp” if it contains less than 0.03% THC.

- **Marijuana** is federally illegal and classed as a Schedule I prohibited drug.
- **Hemp** has been classified as an agricultural product. Hemp seeds, hemp flour, and hemp “seed” oil are legal food products made from the seeds of the plant. Any other products made from hemp and marketed as supplements or “medicine” come under FDA regulations.
- **Cannabis** has over 400 chemical components.
- **THC** is the addictive component that is psychoactive and gives the high sought by users. It comes from the leaves and flowering parts of the plant. It can be extracted and concentrated from the plant and used in other forms with higher concentrations.
- **CBD** is a component found in cannabis. It mostly comes from the flowering parts of the plant, either marijuana or hemp. The most popular form of CBD is CBD oil. When it’s made from hemp it’s often called “hemp oil.” **CBD oil = hemp oil.** Same thing. It is not criminal to possess or use CBD but the FDA has not approved it for sale or distribution as a supplement or medicine.
- **“Medical Marijuana”** is a made up term that is used by the marijuana industry to promote the idea of cannabis as not only harmless but actually beneficial. Legitimate “medicines” are vetted through the FDA approval process, can be prescribed by doctors, and purchased at licensed pharmacies.
- **“Recreational marijuana”** is just commercial cannabis sold without the health claims. There is no difference between “medical” or “recreational” marijuana, except for the different state regulations on sales and the tax structure. All forms of marijuana products are available from either source. One is sold on the claims of the high, the other sold on claims of health benefits.
- **“Vaping”** is the use of an electronic device originally developed as an alternate nicotine delivery system called an e-cigarette. The modern devices can be used to turn a liquid into an aerosol used to inhale many other substances such as CBD oil and THC. Almost half of teens use these devices to inhale THC.

## How Legalization has been Accomplished

Of the 30 some odd states with some type of legal marijuana (only 11 of those have recreational/commercial marijuana) all but one became law through the initiative referendum or ballot initiative process. Wyoming and 26 other states allow citizens to get issues directly on the ballot, thereby avoiding the normal legislative process of debate on an issue. The federal congress does not have this system.

Referendum states typically require 10-15% of registered voters (15% in WY) to sign a petition to get an issue on the ballot. In Wyoming, that's about 37,000 or about 7% of the total population. Most signatures are gathered for the petition using workers paid for by the marijuana industry.

In general elections voter turnout is typically around 50% (WY closer to 70%). That's about 200,000 in Wyoming who actually will vote. That's only 40% of the total population. If the issue is closely contested that means it takes only 100,001 voters to pass the issue in Wyoming. That's only 21% of the total population that makes the decision for the other 79%. It's much easier to use this process than to get something passed legislatively.

The common belief that just because a law was passed by a "majority" means the issue has wide support is an assumption without evidence. The law was actually passed by a small minority of the population as a whole and may not reflect the true support of the wider population. This minority support is evidenced by states with longer standing marijuana laws, like Colorado and California, where 70% of communities do not allow the sale or production of marijuana. In Michigan, the newest state to legalize, the rate is 80% of communities. Not a persuasive indicator of widespread support.

By using the Big Tobacco playbook and targeting states having the ballot initiative process, the industry has successfully gotten to the place we are now by first promoting the concept of "medical marijuana" (who's not compassionate?) to get laws passed. The industry then targets those same states later for full commercial marijuana by offering many unsupported promises. There is a growing resistance in trying to get laws passed through the legislative debate process in those remaining states. When legislators get input from professionals in medicine, research, drug abuse, law enforcement, etc, they are reluctant to legalize marijuana based on the popular hype alone.

## The marijuana industry has copied the successful business playbook of Big Tobacco:

- **Make the product seem harmless, even beneficial,** e.g. 9 of 10 doctors smoke Camels; Virginia Slims help lose weight, “medical marijuana” cures almost everything and it’s “natural,” etc. Confuse and conflate the difference between marijuana and hemp.
- **Normalize its use,** Celebrity endorsements, commonly and casually depicted use by TV/movie characters, on magazine covers, clothing graphics, and advertising in popular magazines and TV/radio, etc.
- **Increase access.** The smoking age for tobacco was 16 and it was universally sold in most stores, vending machines, free cigarettes given to military, etc. For marijuana access, legalize use, first get “medical” then commercial access. Promote the ability to “vape” and use edibles, etc. Increasing availability always increases use across all demographics but at a higher rate for youth.
- **Grow the youth market.** New users must be developed and addicted. Tobacco used Joe Camel, candy cigarettes and cigars, advertised a cool adult factor, etc. Marijuana uses product packaging attractive to youth, endorsements by youth idols, flavored products attractive to youth, sells surreptitious vaping devices, cultish clothing and accessories, etc.

## Major Effects on Youth

- They are 20X more likely to go on the harder drugs later in life.
- They are more likely to use tobacco and abuse alcohol.
- They are more likely not to finish high school.
- They will have less lifelong earning power.
- They have a greater than average risk of suicide.
- They have a greater risk of having a psychotic break and onset of schizophrenia.
- Some studies have shown a permanent 8 point drop in IQ among early users.
- Cannabis is addictive. 17% of users will be addicted. Even though most who use cannabis will not become addicted, almost all users of harder drugs use, or have used, cannabis.
- Youthful users are more likely to get addicted. Most research had been done with the lower THC content; but now, with the much higher content THC available, research and health statistics are showing even more problems with early age use.

# Talking Points Used to Promote Legalization by the Marijuana Industry

It's harmless. It's no worse than alcohol. I used it years ago in college, no problem. It's not addictive. It can replace the need for opioids. It's good for Veterans who suffer PTSD. It's good for depression and anxiety. It's helps with glaucoma. It will reduce prison populations filled with thousands jailed for simply using or possessing small amounts of pot. It treats seizures and cancer. It's a "natural" product. It will be a tax windfall for governments to fund education, etc. It will eliminate the black market and reduce crime. It's not a gateway drug. It will boost the economy and create jobs. Most people support it. There will be restrictions to prevent youth use. Most other countries allow it, we're just behind.

There are many others but what they all have in common is these arguments are not supported by facts, data, science, or even common sense. The power and money used by the marijuana industry has dominated the narrative espoused by the media. Unfortunately, there is little money available to counter this narrative. The studies, the research, the medical opinions, the law enforcement data, the hospital data, social data are all out there but no one has ever made a dime opposing a lucrative business.

Let's break these statements down.

## **Medical:**

The medical research has not lived up to the hype. There is no evidence or authoritative recommendation to use whole plant marijuana to treat any medical condition. The Surgeon General flatly declares that no amount of marijuana is safe for youth or pregnant women.

Doctors are not allowed to prescribe it and licensed pharmacies can't sell it. In those states with "medical cards," doctors can only stipulate that a patient has one of the conditions listed for treatment by legislators (not verified by doctors or science) so they may purchase and possess marijuana. It's the only drug we have that has to be sold in special stores.

Almost all "medical" claims for the benefits of marijuana are purely anecdotal. Marketers know that emotionally based personal stories are far more persuasive than facts.

Almost all “research” cited by proponents to support medical claims is based on small scale studies in labs, or with animals, or with very small sample populations using various components of cannabis. The researchers use language in their conclusions such as “shows promise,” “ may be effective,” “could lead to effective treatment,” “but needs more study,” “human trials needed,” “larger trials needed,” and my favorite, “more research needed.” (Translation: I haven’t finished my Ph.D. yet and I need more money to continue.)

The resulting press headline when these studies are found is “Studies Show Marijuana Cures \_\_\_\_.” In those same studies there is usually a sentence stating that despite their preliminary promising results the researchers don’t advocate the use of whole plant marijuana for treatment. The headline is widely promoted but the details of the findings are not.

More specifically marijuana is contraindicated for treatment of psychological problems. Marijuana can induce psychotic breaks, increase paranoid delusions, increase anxiety and suicidal ideation. It’s specifically not recommended for PTSD or depression.

Although marijuana has been shown to reduce intraocular (eye) pressure found in glaucoma, the pressure rebounds with greater intensity if treatment is stopped, hastening blindness. It is not recommended for use.

Pain management and reducing opioid use. If one has the kind of pain that needs opioids, marijuana won’t touch it. Studies have shown some pain reducing benefits, primarily from the THC component, but it’s no more effective than common NSAIDs (tylenol, etc.). In every state that approved medical marijuana there was an increase in opioid abuse.

There have been a couple of FDA approved drugs made from the THC and CBD components of cannabis that are used for alleviating nausea and appetite loss associated with chemo and AIDS (Marinol). Also for treating seizures in two rare forms of childhood epilepsy (Epidiolex). The hyped headline used when these drugs were approved: “Marijuana Drug Approved to Treat Cancer and Seizures.”

One of the dangerous aspects of people believing the hyped medical benefits of marijuana is that they may forego proven and effective medical treatments in favor of self medicating with marijuana and its products.

**“I used it years ago in college, no problem.”:**

Up until about ten years ago marijuana contained 1-3% THC. Today, certain strains contain over 30% THC, with extracts having up to 98% THC. This marijuana is an entirely different drug today and researchers are just beginning to gather data on higher THC effects. Anyone who's had experience with cannabis that's much over 5 years old has little relevant experience with today's products.

**“It will eliminate or reduce the black market.”:**

The black market has grown in every state with some form of legal marijuana. The black market can supply all the same products. In many states black market sales exceed the legal market.

- Only around 3 percent of marijuana farmers in California have obtained licenses, said Hezekiah Allen, the executive director of the California Growers Association.
- Licensed sales of marijuana are likely to reach \$3.4 billion this year, according to Tom Adams of BDS Analytics, a company that tracks retail cannabis sales.
- That's not much more than the \$3 billion of sales when only medical marijuana was available.
- The problem is that regulated marijuana, which is subject to testing, taxes and many other regulations — as it will be in Canada — costs significantly more than pot grown and sold on the black market.
- California, by far the country's largest producer of cannabis, still supplies the rest of America with millions of pounds of black-market marijuana.
- California must also reckon with lower tax revenues than anticipated.

Foreign cartels from Mexico and China have moved into “legal” states to blend in among the legal growers and distributors. “Legal” licensed operators have also been found engaging in illegal sales and exporting to prohibited states. Marijuana from Colorado has been found in all fifty states. Last year Washington produced twice as much legal marijuana as could possibly be used by its own population.

The cartels also engage in human trafficking to run their illegal operations and use their former smuggling routes to import other drugs such as heroin and fentanyl. The cartels also engage in associated criminal activities. The assumption that criminals will obey laws and regulations defies common sense. Legalization has just made it easier for criminals to conduct their business.

**“It will stop prisons being filled with thousands jailed for possession of small amounts.”:**

On the federal level there were 92 people sentenced for cannabis possession out of a total of nearly 20,000 drug convictions. That means only 0.5% of people incarcerated on drug offenses were there because of marijuana possession. Even when lumped together, the number of people in the prison system for drug possession (all drugs) equals 3.4% of the total prison population. The biggest portion of prisoners (at 54.4%) are serving time for violent crimes.

Of nearly 600,000 people arrested each year for marijuana possession, relatively few of those arrested are sent to prison. Almost no one in the US is jailed for possessing a joint or a few grams of marijuana. The charges in most instances are the equivalent of a traffic ticket for a first offender.

For those who are serving time for a possession offence, this charge was usually a plea bargain downward from a higher charge. Especially in the state systems, those listed with charges for simple possession also have charges of possession for sale, or possession in the commission of another crime, or having a firearm while in possession, or a DUI while in possession. The associated crime was why they were jailed, not the possession. Almost all jailed for marijuana “offenses” involve selling, possession of large amounts, illegal transportation for sale, money laundering, etc.

Those states that have made a big deal out of decriminalization and expunging past “marijuana convictions,” fail to point out that decriminalization is usually specified as being a civil penalty for first time offenders with small amounts under 1oz. Decriminalization is not the same as legalization. There is usually no change in prosecuting other marijuana related offences. The same is true for expunging records of those with “marijuana offences.” Expungement usually applies only to former convictions for possessing or using small amounts, not other marijuana convictions.

**“It will be a tax windfall for struggling governments and enhance education, etc.”:**

The tax “windfall” promise has proven to be completely false. In all states with legalization, estimated tax revenues have fallen far short of estimates. One ironic reason is the burgeoning black market that takes from legal sales and contributes no licensing or tax revenues.

- The ballot measure legalizing marijuana in Colorado promised annual tax windfalls of a billion dollars. Yet in the first two quarters of last year, the state reported just \$135 million in cannabis tax revenues. Last year Colorado celebrated receiving over \$1 billion in tax revenues. They failed to mention it was collected over 6 years, averaging just \$200 million a year. That made up only 0.9% of the state budget. A report conducted by Quantitative Research Evaluation and Measurement found that for every dollar raised in tax revenue, the state spends about \$4.50 to mitigate the consequences of marijuana legalization.
- Even conservative cost estimates show that marijuana legalization would cost Rhode Island approximately \$61.2 million in 2020, over 25 percent above the \$48.3 million pro legalization activists have projected. (Even without considering such costs, those projected revenues would account for just one-half of one percent of the Governor's proposed FY2018 budget of \$9.2 billion.
- In conjunction with the Connecticut chapter of Smart Approaches to Marijuana, SAM released a comprehensive report on the projected costs of legalization in Connecticut — finding that legalization would cost the state \$216 million, far outweighing even the rosier tax projections.
- In 2018, SAM found that legalization would cost the state of Illinois \$670.5 million, far outweighing estimated tax revenue projections of approximately \$566 million.

In most cases the costs of regulating the industry and paying for increased social costs exceeds the tax revenue generated. In any case, most marijuana tax revenues account from less than 1% to 3% of all tax revenues, hardly a “windfall” to save state budgets. Moreover, in states where 70-80% of communities prohibit the sale or production of marijuana, those communities do not receive a portion of the tax but still suffer unfunded adverse effects.

**“There will be restrictions to prevent youth use.”:**

Colorado, Washington, Nevada, and Massachusetts posted increases in youth use over the previous year according to state-level data from the National Survey on Drug Use and Health (NSDUH). The most authoritative study on drug use conducted by the Substance Abuse and Mental Health Administration (SAMHSA), finds that marijuana use in "legal" states among youth, young adults, and the general population continued



its multi-year upward trend in several categories. Additionally, use rates in "legal" states continue to drastically outstrip the use in states that have not legalized the drug.

NSDUH highlights include:

- Past-month marijuana use among young people aged 18-25 in "legal" states has increased 8 percent in the last year (30.94% versus 28.62%).
- Use in this age group is 50 percent higher in "legal" states than in non-legal states (30.94% versus 20.66%).
- Past-month youth use (aged 12-17) in states with commercial sales continued its recent upward trend.
- Since last year, "legal" Washington experienced the largest surge in past month youth use with an 11 percent increase (9.94% versus 8.96%).
- Colorado experienced a four percent increase (9.39% versus 9.02%).
- Massachusetts overtook Colorado as the top-ranking state for overall first-time use, which is now number two.
- Past-month youth use in "legal" states is 40% higher than in non-legal states (8.92% versus 6.26%).
- Past-year youth use in "legal" states is roughly 30% higher than in non-legal states (15.82% versus 12.10%).

Colorado has the highest youth rate at 17%, twice the national average. Prior to legalization Colorado was one of the lowest in the nation.

### **“It’s not a gateway drug.”:**

Although only 17-20% of marijuana users will become addicted and are at a much greater risk of using other drugs that doesn’t mean everyone will be addicted to other drugs. The younger the user the more likely they will try other drugs. Youth who start smoking or vaping nicotine are at a much greater risk of using marijuana. Almost all other substance abusers also use or have used marijuana. By users, marijuana is the second most abused drug after alcohol worldwide.

### **“The US is just behind more enlightened countries where marijuana is legal.”:**

Only three countries in the world, out of 195, have legalized marijuana. Canada is one of these but has many provincial variations and restrictions. A small number of countries have decriminalized possession and use of small amounts, but do not allow public use or sales. Decriminalization usually means civil fines instead of incarceration.

Decriminalization is not the same as legalization. Some countries with weak

governments can't or don't enforce their laws and some others just tolerate personal use of small amounts but enforce growing and sales prohibitions.

**“It's harmless.”:**

Let's look at our neighbor Colorado since legalization:

- Marijuana-related traffic deaths have increased 151 percent compared to all Colorado traffic deaths, which have increased 35 percent.
- Past-month marijuana use among Coloradans age 12 and older is 85 percent higher than the national average.
- Marijuana-related ER visits have increased 52 percent since Colorado legalized pot.
- Hospitalizations related to marijuana jumped 148 percent.
- Violent crime increased 18.6 percent; property crime increased 8.3 percent.
- Children in Colorado treated with unregulated cannabis oil have had severe dystonic reactions, other movement disorders, developmental regression, intractable vomiting, and worsening seizures.
- 65 percent of local jurisdictions throughout the state have banned both medical and recreational marijuana.

You be the judge.

A few last points here.

Language is important. On a cultural level, the legal pot industry is reaching for some respectability through language.

- Public relations people urge reporters to refrain from using the words marijuana or pot. They prefer cannabis.
- Pot that is grown outdoors is “sun grown.”
- A joint sold in a retail store is a “pre-roll.”
- Niche brands market their buds as “heirloom flowers.”
- Cannabis is marketed as “natural.”
- And of course the emphasis on “medical.”

There's also corruption within the industry that no one mentions:

- After losing a primary bid in the race for California governor, Antonio Villaraigosa, the former Los Angeles mayor, joined the board of a large cannabis company.

- John Boehner, former Speaker of the House, and an “anti-drug advocate,” joined the board of a cannabis investment firm. He promotes investing in cannabis stocks.
- A National Families in Action report reveals three billionaires—George Soros, Peter Lewis, and John Sperling—who contributed 80 percent of the money to medicalize marijuana through state ballot initiatives during a 13-year period, with the strategy to use medical marijuana as a runway to legalized recreational pot.
- Report shows how billionaires and marijuana legalizers manipulated the ballot initiative process, outspent the people who opposed marijuana, and convinced voters that marijuana is medicine, even while most of the scientific and medical communities say marijuana is not medicine and should not be legal.
- A medical marijuana industry has emerged to join the billionaires in financing initiatives to legalize recreational pot.
- When a Colorado group wanted to get a ballot initiative to restrict the maximum amount of THC allowed in products, they found that people in the marijuana industry had hired all the professional firms specializing in signature gathering not to work for the group.

**Author statement:**

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This paper is just a brief overview of some of the many issues surrounding marijuana. The statements, opinions, and conclusions are my own but are all based on primary sources that can be referenced. Most of the information here runs counter to the pro-marijuana industry organizations such as NORML and the Marijuana Policy Alliance. Those in the marijuana industry highly recommend their own products and effectively dominate the media and public narrative with unsupported propaganda.

If there are any questions about sources or more references please contact me at:  
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