PREVENTION IN A CHANGING MARIJUANA LANDSCAPE

AMY RONSHAUSEN
EXECUTIVE DIRECTOR
DRUG FREE AMERICA FOUNDATION, INC.





MARIJUANA POLICY - IN OUR REGION

NORTH CAROLINA

- 2014 Low THC law extracts containing less than nine-tenths of one % THC and at least five % CBD by weight for use in treating Intractable epilepsy
- Hemp law

SOUTH CAROLINA

- 2014 Low THC law extracts that contain more than 15% CBD and no more than nine-tenths of one % or less THC for use in treating Dravet Syndrome, Lennox-Gastaut Syndrome, and Refractory epilepsy.
- Hemp Law

MARIJUANA POLICY IN OUR REGION

TENNESSEE

- 2014 low THC law cannabis oil containing no more than nine-tenths of one % or less THC for treating Intractable seizures.
- Hemp

KENTUCKY

- Hemp law
- No low-THC or medical marijuana laws

MARIJUANA POLICY IN OUR REGION

MISSISSIPPI

 2014 Low THC law- extracts that contain more than 15% CBD and no more than 0.5% THC for treating Intractable epilepsy.

ALABAMA

- 2014 Low THC law permits qualified patients to use CBD if they are part of state-sponsored clinical trial and legally protects qualified patients who possess the substance outside of a clinical trial environment for treating debilitating epileptic conditions.
- Hemp

MARIJUANA POLICY IN OUR REGION

GEORGIA

- 2014 Low-THC law 20ozs of infused cannabis oils containing not more than 5%THC and an amount of CBD equal to or greater than the amount of THC "if such substance is in a pharmaceutical container labeled by the manufacturer indicating the % of THC" for treating AIDS, Alzheimer's disease, ALS, Autism, Cancer, Crohn's disease, Hospice care patients, Intractable Pain, Mitochondrial disease, MS, Parkinson's disease, PTSD, severe or end stage Peripheral neuropathy, Seizure disorder, Sickle cell disease, Tourette's syndrome.
- 2019- law to establish a regulatory commission to oversee the eventual "production, manufacturing, and dispensing" of state-regulated medical marijuana products

MARIJUANA POLICY IN OUR REGION

FLORIDA

- 2014 Low THC law
- 2016 Medical Marijuana ballot measure passed
- 2017 Implementation of MMJ law
- 2019 Hemp law passed
- 2020 possible legalization ballot measure

THE SUNSHINE STATE EXPERIENCE



- 2014 legislature passed low-THC law
- 2014 defeated A2 at the ballot box
- 2016 voters passed A2
- 2017 implementation legislation passed during special session

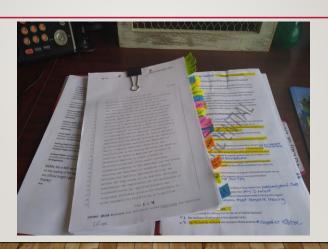






- multiple trips to Tallahassee to meet with legislators and testify at committee hearing
- 29,870 advocacy messages to legislators supporting House bill.

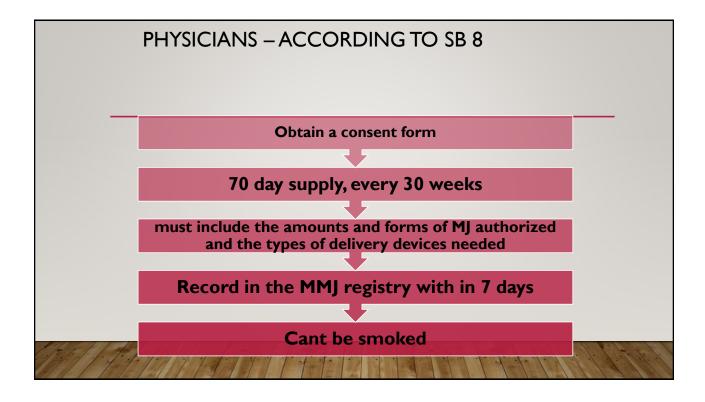
KNOW THE LAW!



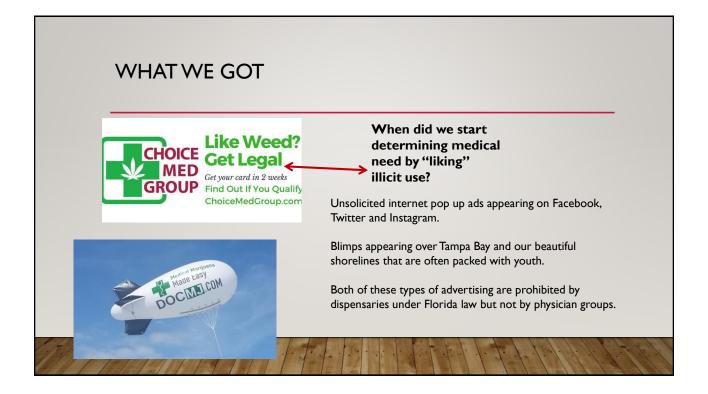




PHYSICIANS – ACCORDING TO SB 8 No direct \indirect interest dispensary or lab. 2 hour annual course Exam while physically in same room <18, second physician must concur Only low-THC for pregnant patients Review the PDMP for patients Rx history







WHAT WE GOT

A Tampa Bay Times examination of the 1,432 doctors in the program reveals Florida's has turned into a magnet for physicians with troubled pasts.

- · 2.8 times as likely as other doctors to have been disciplined by the Board of Medicine
- 2.4 times as likely to have been charged with a crime
- 108 of them were responsible for \$69.4 million in malpractice judgments and settlements, some for maiming or killing patients.

http://www.tampabay.com/investigations/2018/05/04/floridas-medical-marijuana-program-is-attracting-troubled-doctors-its-like-the-wild-wild-west/

WHAT WE GOT

Doctor busted after doing medical marijuana exams via closed circuit TV, cops say



"Two men went to Pembroke Pines
High Life Medical Marijuana Center on
different days, each telling a doctor
seen only on a computer monitor that
he wanted a medical marijuana card so
he'd have a legal excuse when
workplace drug tests busted him."

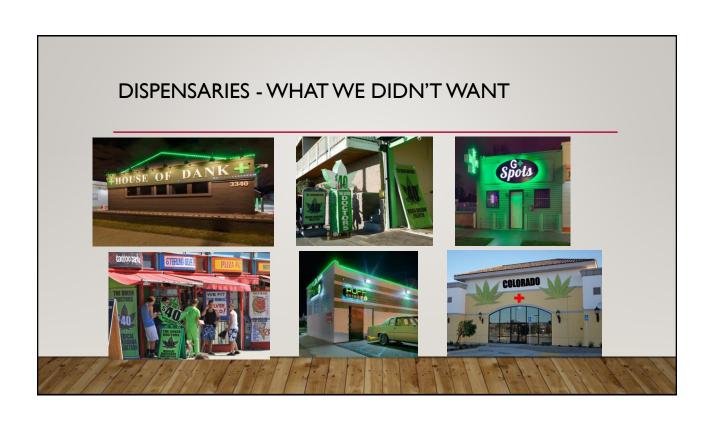
Source: https://www.miamiherald.com/news/local/community/broward/article221716510.htm

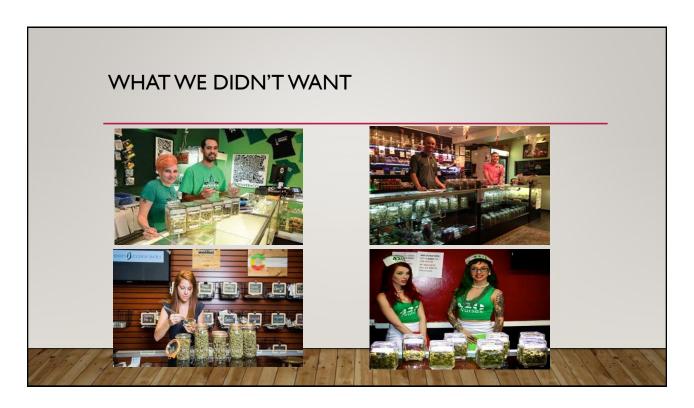
WHAT WE GOT

- · Lawsuit to allow smoked marijuana
 - · Court found law to ban smoked marijuana was against voter intent
- Governor's ultimatum to legislature: come up with rules for smoking or state will drop the appeal
- Passage of bill to allow for the use of smoked marijuana as a medicine

PHYSICIANS – AREAS OF ADVOCACY

- Require Florida Board of Medicine to adopt rules for physicians recommending marijuana for pain
- Require the Florida Surgeon General to draft best practices for recommending mmj as well as standard of care guidelines for ongoing use





DISPENSARIES AND CULTIVATION IN OTHER STATES

- Oregon
 - 18,099 grow sites for 45,210 patients
- Colorado
 - 495 MMJ Centers
 - 725 MMJ Cultivation licenses
- California
 - 2,756 dispensaries



Source: https://mjbizdaily.com/chart-latest-california-marijuana-market-data-845m-annual-sales-2756-dispensaries/ Colorado Department of Revenue https://www.colorado.gov/pacific/enforcement/med-resources-and-statistics Oregon https://www.oregon.gov/oha/PH/DISEASESCONDITIONS/CHRONICDISEASE/MEDICALMARIJUANAPROGRAM/Documents/ed-

WHY WE CARE ABOUT THE NUMBERS

- Past month use is higher in states that allow distribution of medical marijuana through store front dispensaries.
- The density of local dispensaries is associated with a greater number of hospitalizations with a primary or secondary marijuana abuse/dependence code.
 - An additional I dispensary per sq. mile in a zip code was associated with a 6.8% increase in the number of hospitalizations with a mj abuse/dependence code.

Sources: Pacula, R.L.; Powell, D.; Heaton, P.; Sevigny, E.L. Assessing The Effects Of Medical Marijuana Laws On Marijuana And Alcohol Use: The Devil Is In The Details. Cambridge, MA: National Bureau of Economics Working Paper Series; 2013. Christina Maira, Bridget Freisthler; William R. Ponicki, and Andrew Gaidus. The impacts of marijuana dispensary density and neighborhood ecology on marijuana abuse and dependence. Drug Alcohol Depend. 2015 September 1; 154: 111–116. doi:10.1016/j.drugalcdep.2015.06.019

DISPENSARIES – ACCORDING TO SB 8

Cultivation and Dispensaries

- 17 cultivation centers in the state. After 100,000 registered patients issue another 4 and 4 more each time another 100,000 is reached. We are now allowed 21 cultivation centers. We are very close to allowing 25.
- Each licensee can operate up to 25 dispensaries. Upon reaching the 100,000 threshold another 5. Cap expires in 2020. They can now have 30 each, we are close to 40 each.
- 630 dispensaries in the state

DISPENSARIES – ACCORDING TO SB 8

Employees 21 or older &pass a background check

Trained on legal dispensing requirements

edibles = permit to operate as a food establishment

May not display products in the waiting area

24 hour delivery but cannot dispense from MMTC premise between the hours of 9pm and 7am

Implement a DFWP policy

WHAT HAPPENS WITHOUT REGULATIONS?

Of the 346 highway interdiction seizures in 2016, there were 36 different states destined to receive marijuana from CO. Most common destinations identified were Illinois, Missouri, Texas, Kansas and Florida.

States to which Colorado Marijuana was Destined, 2016 (Total Reported Incidents per State)



Source: RM HIDTA The Legalization of Marijuana: The Impacts Vol 5 October 2017 Accessed online at https://rmhidta.org/files/D2DF/2017%20Legalization%200%20Marijuana%20in%20Colorado%20The%20Impact2.pdf April 2018

WHAT HAPPENS WITHOUT REGULATION?

From legalization in 2012 through the first three months of 2017, seized marijuana from WA was found to be destined for 38 other states (80% of the US)

States to Which Washington State Marijuana Was Destined 2012-2017

Source: NWHIDTA Marijuana Impact Report 2017

MJ PRODUCTS – ACCORDING TO SB 8

No more than 200 mgs of THC, single serving no more than 10mgs

THC potency limit of 15%

Cannot be attractive to kids

Individually sealed in plain opaque wrapping marked only with the MJ universal symbol.

MJ PRODUCTS - A2

MJ Products and Edibles

- Packaged in compliance with the US Poison Prevent. Act
- Labeling to include:
 - MMTC, batch and harvest #, date dispensed, recommending physician, patient name, product name (cant be associated with products marketed to kids) and dosing form, recommended dose, warning label that is illegal to transfer, and universal symbol.
- On edibles, a warning to keep away from kids
- Product Insert include:
 - Clinical pharmacology, indications and use, dosage and administration, dosage forms and strengths, contradictions, warnings and precautions and adverse reactions.



WHAT WE GOT



From their website: The strain is a slightly sativa dominant hybrid made up of 84% THC and 0.76% CBD, which may be helpful for MMJ patients that have chronic anxiety or stress, loss of appetite, or inflammation.

WHY WE CARE ABOUT MMJ PRODUCTS

- National Poison Data System from 2005 to 2011
 - Decriminalization was associated with
 - increased reports of unintentional exposures in young children.
 - 30% increase per year of MJ related call to poison control
 - transitioning to decriminalization had an average increase of 11.5% per year.
 - MJ-related calls to poison control centers in non-legal states showed an average increase of only 1.5% per year from 2005 to 2011

Source: Wang GS, Roosevelt G, Le Lait MC, Martinez EM, Bucher-Bartelson B, Bronstein AC, Heard K. Association of unintentional pediatric exposures with decriminalization

of marijuana in the United States. Annals of Emergency Medicine. 2014;63(6):684-689. http://dx.doi.org/10.1016/j.annemergmed.2014.01.017.

WHY WE CARE ABOUT MJ PRODUCTS

- Use of edibles is more prevalent in medical marijuana states, particularly those more dispensaries per capita.
- 29.8 % of adults who had ever used marijuana reported consuming it in edible or beverage form.







Source/ Borodovsky/JT. Crosier BS, Lee DC, Sargent JD. Budhey AJ, Smoking, vaping, eating: Is legalization impacting the way people use cannable? The international Journal on Drug Policy, 2016;36:141-147: http://dx.doi.org/10.1016/j.drugpo.2016.02.022. Schauer GL, King BA, Bunnell RE, Promoff G, McAfee TA. Toking, vaping, and eating for health or fur: Marijuana use patterns in adults, US, 2014. American Journal of Preventive Medicine. 2016;50(1):1-8.

PUBLIC SAFETY – ACCORDING TO SB 8

- Cannot use MMJ in plain view of or in a place open to the general public, in a school bus, vehicle, aircraft, boat, or on the grounds of a school (EXCEPT FOR LOW-THC)
- MMJ law does not exempt a person from prosecution for an offense related to impairment or intoxication resulting from the medical use of marijuana.
- Does not limit the ability of an employer to establish, continue, or enforce a drug free workplace program or policy. This section does not require an employer to accommodate the medical use of marijuana in any workplace or any employee working while under the influence of marijuana. This section does not create a cause of action against an employer for wrongful discharge or discrimination

PREVENTION – ACCORDING TO SB 8

WHAT WEWERE ABLE TO GET IN THE FL LAW

- \$500,000 (nonrecurring from General Revenue Fund) to DOH to implement a
 "statewide cannabis and marijuana education and illicit use prevention
 campaign."
- \$100,000 (recurring funds) to train additional law enforcement officers as DREs.
- \$750,000 (nonrecurring from General fund) to the Coalition for Medicinal
 Cannabis Research and Education at Moffitt to conduct medical marijuana research.

PREVENTION- WHAT WE GOT

• \$5 million (nonrecurring from the HWY Safety Operating Trust Fund) to Dept. of Hwy Safety & Motor Vehicles to implement a statewide impaired driving education campaign.



AREAS OF ADVOCACY

Public Safety

- Adopt open container law for MJ like alcohol
- Possession at Colleges and Universities?
- Expand distance from schools from 500ft to 1500ft

Dispensaries

- · Allow for local control on zoning
- Single state approved logo
- Remove automatic expansions (proof of need)

Prevention and Education

Recurring state funds for prevention campaign.



WHERE DOES PREVENTION FIT?



WHAT WE NEED - COLLECTION OF DATA

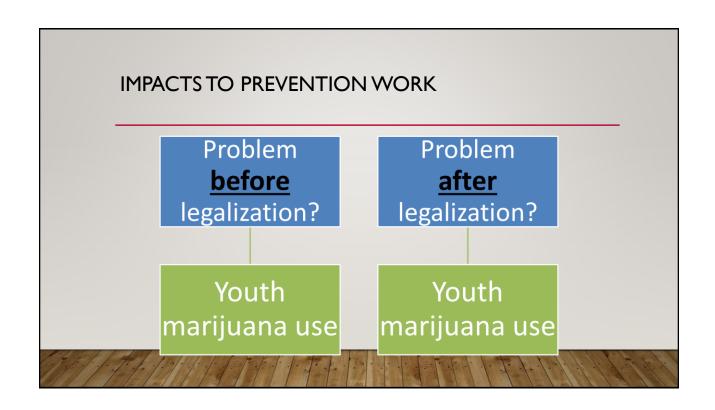
- How will/do marijuana laws impact
 - Traffic fatalities
 - Workplace accidents
 - School suspensions and expulsions
 - Treatment admission rates
 - Youth use rates
 - Water and electricity consumption

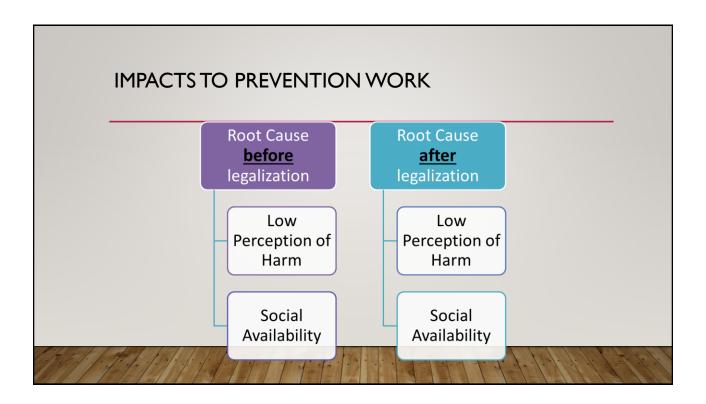


PRESENT AND SHARE THE DATA

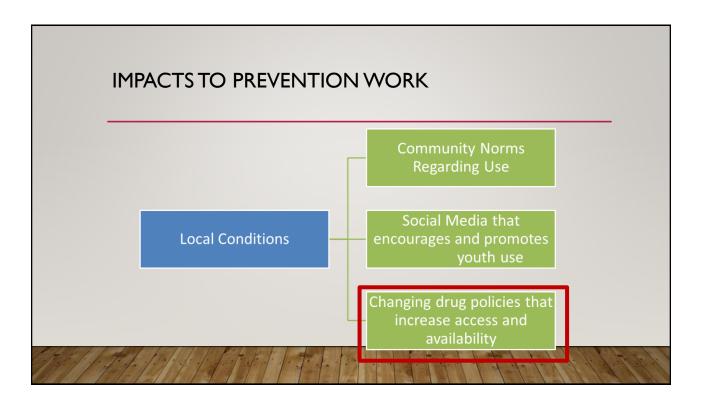
- Educational forums
- One pagers
- Infographics
- Policy papers
- Social media







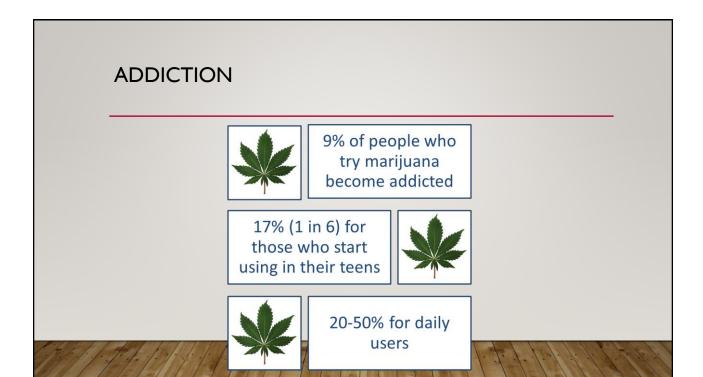




IMPACTS TO PREVENTION WORK

Change Access/Barriers	Who will do what? By when?	Resources Needed	Who Should Know?
A. Restrict	provide	Legislative	all members of
edibles,	information to	information	the legislature,
marketing, THC	legislators	from other	policy decision
content	during session.	states with	makers and
		similar laws,	influences
		known	
		community	
		impacts of such	
		laws	





IMPACTS TO PREVENTION WORK Who will do **Who Should** Change Resources **Access/Barriers** what? By Needed Know? when? **B.** Dispensary Volunteers will Data on the Local bans or zoning meet with local community lawmakers, restrictions government impacts related policy decision makers and members and to dispensaries, volunteers to testify at influences designated testify and write hearings letters

IMPACTS TO PREVENTION WORK

- Know what your surrounding counties and cities are doing
 - Is your lack of action putting you at risk for being the only available real estate left for dispensaries?
 - Track ordinances, provide models, search media, keep a running list of local government action



MARIJUANA KNOW THE TRUTH





- 30 second movie theater ad ran for 10 weeks in 22 states
 - 13 million impressions
- In lobby ads
 - II million impressions
- Cross-platform digital campaign for 5 weeks
 - 55 million impressions

MJ KNOW THE TRUTH TELLY AWARD FOR SOCIAL RESPONSIBILITY





ADDITIONAL RESOURCES



Amy Ronshausen aronshauen@dfaf.org

- www.dfaf.org
- marijuanaharmlessthinkagain.org
- learnaboutsam.org
- nationalfamilies.org
- No2Pot.org
- Rmhidta.org