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NORML 2018 Candidate Packet

To: Candidates for Legislative Offices and Interested Parties

With nine states now having legalized adult-use marijuana, and 30 states authorizing medical marijuana access, issues surrounding cannabis policy have taken center stage in elections from the local level to Congress. Over 90 percent of Americans support medical marijuana access and 60 percent support legalizing and regulating marijuana in a manner like alcohol. Supporting sensible reform to our nation's marijuana laws is not just overwhelmingly popular, it is the economic, scientific, and moral thing to do.

If you are running for any elected office in 2018, **it is very likely voters will want to know your position on marijuana policy.**

This packet provides a primer on a variety of marijuana-related topics for candidates, including important statistics and talking points.

Contents:

- Polling
- Sample text for policy platform
- Suggested stump speech paragraph
- Key points on the benefits of marijuana legalization
- Key points on the benefits of medical marijuana
- Data dispelling the common myths around cannabis
- How marijuana can be used to combat the opioid crisis

To be considered for an endorsement in the November general elections, please fill out our questionnaire at: norml.org/normlpac/

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Recent Polling

- Sixty-four percent of Americans support legalization; including outright majorities of Democrats, Independents, and Republicans ([Gallup, 2017](#)).
- Seventy-six percent of Americans oppose federal intervention in state-lawful marijuana programs ([Survey USA, 2017](#)).
- Ninety-four percent of Americans support the legalization of medical marijuana ([Quinnipiac, 2017](#)).
- Twenty-two percent of Veterans consume marijuana to alleviate symptoms of a physical or mental ailment ([American Legion, 2017](#)).

Sample Stump Speech Paragraph

A crucial component to reforming our nation's criminal justice system is the reform of America's marijuana laws. Over 600,000 Americans are arrested every year for minor marijuana possession offenses. These individuals, overwhelmingly young people and individuals of color, are often saddled with a lifelong criminal record as well as the stigma and lost opportunities associated with it -- such as the loss of student financial aid or employment. We should not be squandering precious law enforcement and judicial resources to target these otherwise law-abiding citizens.

By continuing to criminally prohibit the use, production, and sale of marijuana, we are ceding control to the black market. Doing so denies states' crucial tax revenue that could fund important social services, and leaves marijuana production and distribution in the control of unregulated dealers who have no incentive to keep it out of the hands of our youth. If our 13-year experiment with alcohol prohibition in this country is deemed a failure, then how else can anyone define the 80-year long prohibition on marijuana? It is time to end this failed and morally bankrupt policy, remove marijuana from the federal Controlled Substances Act where it is currently considered on par with dangerous substances such as heroin, and allow states to set their own policies on this issue.

The majority of the American people agree that it is time to legalize and regulate marijuana, and it is time our state and federal laws reflect that reality.

Suggested Platform Language

Federal Office: Support Adult-Use Marijuana Legalization and Descheduling

The ongoing enforcement of cannabis prohibition financially burdens taxpayers, encroaches upon civil liberties, engenders disrespect for the law, impedes legitimate scientific research into the plant's medicinal properties, and disproportionately impacts communities of color. It is time for federal lawmakers to acknowledge this reality. As your voice in Congress, I will support the descheduling of marijuana from the Controlled Substances Act (CSA). Once marijuana is federally descheduled similarly to alcohol, states will possess the autonomy to set their own cannabis regulatory policies, free from federal interference.

Key Bills

HR 1227: The Ending Federal Marijuana Prohibition Act

S. 1689 / HR 4815: The Marijuana Justice Act

State Office: Support Statewide Adult-Use Marijuana Legalization

The prohibition of marijuana in our state financially burdens taxpayers, encroaches upon civil liberties, engenders disrespect for the law, and fuels the mass arrests, prosecutions, and incarceration. It also fuels a multi-million dollar black market. By legalizing and regulating marijuana we can respect individual freedoms, end the over-criminalization of already marginalized communities, more effectively keep marijuana out of the hands of our youth, and generate much needed tax revenue for important social programs in our state.

State Office: Support Medical Cannabis Access

Cannabis is an effective treatment for a wide array of ailments and it is often a safer alternative than many prescription drugs, such as opioids. Every day we permit physicians to use their discretion to authorize the use of medications that pose far greater risks than does marijuana. We should allow doctors to similarly use their discretion to recommend cannabis therapy, and the law should not unduly interfere with the doctor/patient relationship.

Consequences of Legalization

Economic

- The legal market for adult and medical use of marijuana accounted for 149,304 jobs in 2017, a 22 percent increase since 2016. Equating to 26,490 new jobs added over a 12 month period. (Source: *Leafly.com*)
- In 2016, Colorado alone generated over \$1.4 billion in combined recreational and medical marijuana sales. This accounted for nearly \$200 million in tax and fees revenue, which was mostly designated for new school construction projects in the state. The state is expected to exceed \$225 million in tax and fees revenue for 2017. (Source: Colorado Department of Revenue)
- Oregon collected a total of \$108.6 million in state and local taxes between Jan. 4, 2016, and Aug. 31, 2017. That revenue was divided between multiple agencies and programs: the state school fund receives 40 percent, or \$34 million; mental health, alcoholism and drug services receive 20 percent, or \$17 million; Oregon State Police receive 15 percent, or \$12.75 million, and the Oregon Health Authority receives five percent, or \$4.25 million. (Source: Oregon Department of Revenue)
- Nevada generated \$3.8 million in tax and fee revenue in just the first month of legal recreational marijuana sales. (Source: Nevada Department of Taxation)
- Legal cannabis markets are estimated to reach sales of \$24.5 billion by 2021. (Source: ArcView Market Research)

Social and Racial Justice

- Even with a growing number of states reforming their marijuana laws, over 650,000 individuals nationwide were charged for marijuana related offenses in 2016. (Source: FBI Uniform Crime Report 2017)
- Despite similar use rates to their white counterparts, African Americans are more than four times as likely to be arrested for marijuana offenses nationwide. (Source: The ACLU Report: The War On Marijuana is Black and White, 2013)
- After legalization, Colorado experienced nearly a 50 percent decline in the number of traffic searches of black drivers and Washington State experienced a 33 percent decline. (Source: The Marshall Project and The Center For Investigative Reporting, 2017)

Medical Marijuana

Marijuana has been part of humanity's medicine cabinet for almost as long as history has been recorded.

Of all the negative consequences of marijuana prohibition, few are as tragic as the denial of medicinal cannabis to the tens of thousands of patients who could benefit from its therapeutic use.

Currently, 30 states and the District of Columbia have implemented a medical cannabis program and an additional 16 states have enacted more limited medical cannabis laws for access to CBD to treat qualifying conditions such as intractable epilepsy.

Modern research suggests that cannabis is a valuable aid in the treatment of a wide range of clinical applications. These include pain relief -- particularly of neuropathic pain (pain from nerve damage) -- nausea, spasticity, and movement disorders. Marijuana is also a powerful appetite stimulant, specifically for patients suffering from HIV, the AIDS wasting syndrome, or dementia. Emerging research suggests that marijuana's medicinal properties are neuroprotective and may protect the body against some types of malignant tumors.

Changes in the legal status of marijuana at the state level have not negatively impacted workplace safety. In fact, a pair of studies from 2016 find that the legalization of medical marijuana access is associated with greater workforce participation and with fewer workplace absences. Most recently, the National Academies of Sciences just-released marijuana and health report found “insufficient evidence” to support an association between cannabis use and occupational accidents or injuries.

Currently, more than sixty U.S. and international health organizations support granting patients immediate legal access to medicinal marijuana under a physician's supervision.

Common Myths About Legalization

Despite what opponents of marijuana legalization claim, the legalization and regulation of marijuana for medical or recreational use is NOT associated with an increase in automobile accidents, traffic fatalities, youth use rates, crime, or workplace injuries.

Drugged Driving

- Fatal traffic accident rates in legal marijuana states are no different than those in states where cannabis remains illegal. (Source: *American Journal of Public Health*, 2017)
- "We (the state of Colorado) have not experienced any significant issue as a result of legalization. ... We have actually seen an overall decrease in DUI's since legalization. So, the short answer is: There has been no increase since the legalization of marijuana here." (Comments from Larry Wolk, Chief Medical Officer of the Colorado Department of Public Health, October 23, 2017)
- "[O]n average, medical marijuana law states had lower traffic fatality rates than non-MML states. Medical marijuana laws are associated with reductions in traffic fatalities, particularly pronounced among those aged 25 to 44 years. ... It is possible that this is related to lower alcohol-impaired driving behavior in MML-states." (Source: *American Journal of Public Health*, 2017)

Youth Use

- "For adults and adolescents [in Colorado], past-month marijuana use has not changed since legalization either in terms of the number of people using or the frequency of use among users. Based on the most comprehensive data available, past month marijuana use among Colorado adolescents is nearly identical to the national average." (Source: Colorado Department of Public Health and Environment, *Monitoring Health Concerns Related to Marijuana in Colorado*, 2017)

Crime

- "There is evidence in this table that the legalization of recreational cannabis enacted in Washington caused a decrease in crime rates. The point estimates for rape, assault, robbery, burglary and theft are all negative. This conclusion is reinforced by the statistical significance of the drop in rapes and thefts. ... Our estimates reveal that the legalization decreased ... both ordinary alcohol and binge alcohol. ... These effects on consumption suggest that one of the mechanisms underlying the reduction in crime may be a substitution away from other drugs ... such as alcohol, which makes consumers more aggressive than if consuming cannabis." (Source: *Crime and the Legalization of Recreational Marijuana*, IZA Institute of Labor Economics Discussion paper, 2017)
- "[T]he introduction of medical marijuana laws (MMLs) leads to a decrease in violent crime in states that border Mexico. The reduction in crime is strongest for counties close to the border (less than 350 kilometres) and for crimes that relate to drug trafficking. In addition, we find that MMLs in inland states lead to a

reduction in crime in the nearest border state. Our results are consistent with the theory that decriminalization of the production and distribution of marijuana leads to a reduction in violent crime in markets that are traditionally controlled by Mexican drug trafficking organizations." (Source: Is legal pot crippling Mexican drug trafficking organizations? The effect of medical marijuana laws on US crime, 2018. *The Economic Journal*)

Impact on the Workplace

- "There is no or insufficient evidence to support ... a statistical association between cannabis use and ... occupational accidents or injuries." (Source: The National Academies of Sciences, Engineering, and Medicine, 2017)
- Employees who test positive for marijuana in workplace drug tests are no more likely to be involved in occupational accidents as compared to those who test negative. "This study fell short of finding an association between marijuana use and involvement of workplace accidents. ... This study cannot be taken as definitive evidence of absence of an association between marijuana and work related accidents but the findings are compelling." (Source: Marijuana use and workplace safety: An examination of urine drug tests, *Journal of Addictive Diseases*, 2014)
- "Utilizing the Current Population Survey, the study identifies that absences due to sickness decline following the legalization of medical marijuana. ... The results of this paper therefore suggest that medical marijuana legalization would decrease costs for employers as it has reduced self-reported absence from work due to illness/medical issues." (Source: The Effect of Medical Marijuana on Sickness Absence, *Health Economics*, 2016)
- The enactment of medical marijuana laws is associated with a "9.4 percent increase in the probability of employment and a 4.6 percent to 4.9 percent increase in hours worked per week" among those over the age of 50. "Medical marijuana law implementation leads to increases in labor supply among older adult men and women." (Source: The impact of medical marijuana laws on the labor supply and health of older adults: Evidence from the Health and Retirement Study, NBER Working Paper No. 22688, 2016)
- Marijuana decriminalization is associated with increased probability of employment, particularly for young males, and an average increase of 4.5 percent in weekly earnings. African American males experienced the greatest average wage increase. "This data provides suggestive evidence that marijuana decriminalization laws improve extrinsic labor market outcomes. ... This result is consistent with existing literature that suggests black adults, especially men, stand to benefit the most from removing these penalties." (Source: Marijuana decriminalization and labor market outcomes, ESSPRI (Economic Self-Sufficiency Policy Research Institute, University of California, Irvine) Working Paper, 2016)

Marijuana and Opioids

With our nation in the midst of a serious opioid crisis, recent research has revealed that access to marijuana is one proven strategy for helping curb the harms caused by opioid abuse.

Cannabis access is associated with reduced rates of opioid use and abuse, opioid-related hospitalizations, opioid-related traffic fatalities, opioid-related drug treatment admissions, and opioid-related overdose deaths.

Below are excerpts of important medical research highlighting these effects:

- “States with medical cannabis laws had a 24.8 percent lower mean annual opioid overdose mortality rate compared with states without medical cannabis laws.” (Source: *Journal of the American Medical Association Internal Medicine*, 2014)
- “We used an interrupted time-series design (2000-2015) to compare changes in level and slope of monthly opioid-related deaths before and after Colorado stores began selling recreational cannabis. ... Colorado's legalization of recreational cannabis sales and use resulted in a 0.7 deaths per month reduction in opioid-related deaths. This reduction represents a reversal of the upward trend in opioid-related deaths in Colorado.” (Source: Recreational cannabis legalization and opioid-related deaths in Colorado, 2000-2015, *American Journal of Public Health*, 2017)
- Compared to non-users, medical cannabis enrollees "were more likely either to reduce daily opioid prescription dosages between the beginning and end of the sample period (83.8 percent versus 44.8 percent) or to cease filling opioid prescriptions altogether (40.5 percent versus 3.4 percent)." Enrollees were also more likely to report an improved quality of life. "The clinically and statistically significant evidence of an association between MCP enrollment and opioid prescription cessation and reductions and improved quality of life warrants further investigations on cannabis as a potential alternative to prescription opioids for treating chronic pain." (Source: Association between medical cannabis and prescription opioid use in chronic pain patients: A preliminary cohort study, *PLOS One*, 2017)
- "Medical marijuana policies were significantly associated with reduced opioid pain reliever-related hospitalizations but had no associations with marijuana-related hospitalizations. ... Medical marijuana legalization was associated with 23% (p=0.008) and 13% (p=0.025) reductions in hospitalizations related to opioid dependence or abuse and OPR overdose, respectively; lagged effects were observed after policy implementation." (Source: Medical marijuana policies and hospitalizations related to marijuana and opioid pain reliever, *Drug and Alcohol Dependence*, 2017)