



Working to Reform Marijuana Laws

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**Testimony of Justin Strekal Regarding the Regulation of Marijuana For Adult Use in the Great State of Maryland**

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Now more than ever there exists tremendous public support for ending our nation's nearly century-long experiment with pot prohibition and replacing it with a taxed and regulated adult market place. More than six in ten American adults now believe that "the use of marijuana should be made legal," according to just-released nationwide polling data provided by Quinnipiac University<sup>1</sup>. In Maryland specifically, 58 percent of registered voters now say that they support the adult use of marijuana compared to just 36 percent opposed, according to a February 2017 Goucher statewide poll<sup>2</sup>.

But voters do not desire replacing nearly a century of criminalization with a marijuana free-for-all. They are aware of the reality that marijuana possesses some level of risk and there exists the potential for abuse. In fact, it is precisely because of this reality that society ought to regulate it accordingly. By contrast, advocating for marijuana's continued criminalization does nothing to offset these risks; it compounds them.

Marijuana prohibition drives markets underground and abdicates control of these markets to those who typically operate outside the boundaries of law. Regulation, by contrast, allows for lawmakers to establish legal parameters regarding where, when, and how an adult cannabis market may operate. Legalization also provides oversight regarding who may legally operate in said markets and provides guidelines so that those who do can engage in best practices.

Such regulations already exist for alcohol and tobacco – two substances that are far more dangerous and costlier to society than is the adult use of cannabis. (Specifically, a 2009 review published in the journal *British Columbia Mental Health and Addictions* estimated that health-related costs per user are eight times higher for drinkers of alcoholic beverages than they are for those who use cannabis, and are more than 40 times higher for tobacco smokers.<sup>3</sup>) The imposition and enforcement of tobacco and alcohol regulations, coupled with public awareness campaigns highlighting these products' risks and acknowledging the distinctions between their use versus abuse, has proven effective at reducing the public's overall consumption of these substances, especially among teens<sup>4</sup>.

Unfortunately, a legal environment in which marijuana is criminalized is not conducive to imposing such common sense, evidence-based practices. A pragmatic regulatory framework that allows for the legal, licensed production and retail sale of cannabis to adults, but restricts and discourages its use among young people best reduces the risks associated with the plant's use or abuse, and provides an environment whereby consumers can best learn the skills and knowledge to readily delineate

<sup>1</sup> Quinnipiac University National Poll <https://poll.qu.edu/national/release-detail?ReleaseID=2432>

<sup>2</sup> Goucher Poll: <https://htv-prod-media.s3.amazonaws.com/files/spring-2017-goucher-poll-release-monfeb27-final-1488189327.pdf>

<sup>3</sup> Gerald Thomas and Chris Davis. 2009. Cannabis, tobacco and alcohol use in Canada: comparing risks of harm and costs to society. *Visions: BC's Mental Health and Addictions Journal* 5: 11.

<sup>4</sup> US National Institutes of Health. Cigarette and alcohol use at historic lows among teens:

<https://www.drugabuse.gov/news-events/news-releases/2011/12/cigarette-alcohol-use-historic-low-among-teens>

between the two behaviors. That is why the majority of Maryland voters welcome the opportunity to bring necessary and long-overdue regulatory controls to the marijuana market, and why they support lawmakers' efforts to move in this direction.

For decades, those opposed to amending cannabis criminalization warned that any significant change in marijuana policy would lead to a plethora of unintended consequences. Yet the initial experiences in the US states of Colorado and Washington, which voted to regulate adult cannabis sales in 2012, in addition to many other states' experiences regulating the production and distribution of marijuana for therapeutic purposes, has shown these fears to be misplaced. The liberalization of statewide marijuana laws is not predictive of higher crime rates<sup>5</sup>, nor is it associated with rises in adolescent consumption patterns.<sup>6</sup>

For example, state survey data released by the Colorado Department of Public Health & Environment found that fewer high school students in the state consumed cannabis post- legalization.<sup>7</sup> Cannabis prevalence data compiled in Washington following that state's decision to legalize adult cannabis use tells a similar story. According to data compiled by Washington's Healthy Youth Survey and published in September 2015 by the Washington State Institute of Public Policy, marijuana use fell among 8th graders, 10th graders, and 12th graders in the years since marijuana became legal. Young people's self-reported access to cannabis also remained largely unchanged during this time period, although more 8th graders now report that marijuana is "hard to get."<sup>8</sup>

State and local governments can regulate cannabis in a manner that keeps pot out of the hands of children while simultaneously satisfying the seller, the consumer and the State — and the sky won't fall. Presently, 28 states and Washington, DC permit physicians to recommend marijuana therapy. Some of these state-sanctioned programs have now been in place for nearly two decades. Four states now permit the regulated use and sale of cannabis by adults and four additional states have voted to implement similar regulatory structures in 2016. Early findings from these states are largely positive.

In particular, scientists have identified a positive association between the passage of medical marijuana laws and reduced incidences of opioid abuse. Data published in the Journal of the American Medical Association reports that the enactment of medical cannabis laws is associated with significantly lower state-level opioid overdose death rates. Specifically, statewide overdose deaths from opiate decreased by an average of 20 percent one year after legalization, 25 percent by two years, and up to 33 percent by years five and six.<sup>9</sup> A separate 2015 study by RAND researchers similarly determines that opioid abuse and mortality are reduced in jurisdictions where the population possesses access to cannabis.<sup>10</sup> Clinical data also indicates that the adjunctive use of cannabis may wean patients from opiates while successfully managing their pain.<sup>11</sup> Survey data of

<sup>5</sup> Science Daily. No correlation between medical marijuana legalization, crime increase: Legalization may reduce homicide, assault rates.: <https://www.sciencedaily.com/releases/2014/03/140326182049.htm>

<sup>6</sup> Lancet Psychiatry, July 2015. Medical marijuana laws and adolescent marijuana use in the USA from 1991 to 2014: results from annual, repeated cross-sectional surveys: [http://www.thelancet.com/pdfs/journals/lanpsy/PIIS2215-0366\(15\)00217-5.pdf](http://www.thelancet.com/pdfs/journals/lanpsy/PIIS2215-0366(15)00217-5.pdf)

<sup>7</sup> US News & World Report. "Pot use among Colorado teens appears to drop after legalization." <http://www.usnews.com/news/articles/2014/08/07/pot-use-among-colorado-teens-appears-to-drop-after-legalization>

<sup>8</sup> Washington State Institute for Public Policy. I-502 Evaluation Plan and Preliminary Report on Implementation. [http://www.wsipp.wa.gov/ReportFile/1616/Wsipp\\_I-502-Evaluation-Plan-and-Preliminary-Report-on-Implementation\\_Report.pdf](http://www.wsipp.wa.gov/ReportFile/1616/Wsipp_I-502-Evaluation-Plan-and-Preliminary-Report-on-Implementation_Report.pdf)

<sup>9</sup> JAMA, October 2014. Medical cannabis laws and opioid analgesic overdose mortality in the United States, 1999- 2010. <http://archinte.jamanetwork.com/article.aspx?articleid=1898878>

<sup>10</sup> National Bureau of Economic Research. Do Medical Marijuana Laws Reduce Addictions and Deaths Related to Pain Killers? <http://www.nber.org/papers/w21345>

<sup>11</sup> I, February 2016. The effect of medicinal cannabis on pain and quality of life outcomes in chronic pain: a prospective open-label study. <http://www.ncbi.nlm.nih.gov/pubmed/26889611>

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state qualified medical cannabis patients indicate that subjects with access to the plant often substitute<sup>12</sup> it for opioids because they perceive it to possess fewer adverse side effects. As a result, Massachusetts Sen. Elizabeth Warren has requested the US Centers for Disease Control and Prevention to agency to evaluate “the use, uptake and effectiveness of medical marijuana as an alternative to opioids for pain treatment in states where it is legal.”<sup>13</sup> Regulators at the CDC have also updated their guidelines to encourage pain management specialists to no longer drug test patients for cannabis if they are undergoing opioid therapy.<sup>14</sup>

Today, neither science nor public opinion support the federal government’s contention that marijuana meets the criteria of a schedule I controlled substance – a classification which misconstrues the plant’s abuse potential as equal to that of heroin and that it lacks the therapeutic utility that science has acknowledged. Fortunately, America’s federalist system does not mandate states to be beholden to this intellectually and morally bankrupt policy. The Tenth Amendment to the U.S. Constitution provides that all “powers not delegated to the United States by the Constitution, nor prohibited by it to the States, are reserved to the States respectively, or to the people,” leading former Supreme Court Justice Brandeis to famously opine, “[A] state may, if its citizens choose, serve as a laboratory; and try novel social and economic experiments without risk to the rest of the country.”

It is time for Maryland to become a leader in sensible cannabis policy. Public sentiment and common sense demand that lawmakers move forward to enact necessary and long overdue changes in state-level marijuana policies to achieve the repeal of marijuana prohibition so that the responsible, adult use of cannabis is no longer subject to arrest and criminal penalty.

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<sup>12</sup> The Journal of Pain, March 2016. Medical cannabis use associated with decreased opioid medication use in retrospective cross-sectional survey of chronic pain patients. <http://www.ncbi.nlm.nih.gov/pubmed/27001005>

<sup>13</sup> The Guardian, “Elizabeth Warren asks CDC to consider legal marijuana as alternative painkiller.” <http://www.theguardian.com/us-news/2016/feb/12/elizabeth-warren-medical-marijuana-painkiller-opioid-abuse>

<sup>14</sup> The Blaze, “CDC recommends doctors stop testing patients for marijuana.” <http://www.theblaze.com/stories/2016/03/27/cdc-recommends-doctors-stop-testing-patients-for-marijuana/>