

MEDICAL MARIJUANA – CITY OF POINT ARENA ORDINANCE NO. 226

Action Network thanks the Point Arena City council for being pro-active and trying to get ahead of what may be full legalization of recreational marijuana use by adults in the future, but we feel that this opportunity to safeguard the health and wellbeing of our youth has not gone far enough, given the grave and proven risks to our youth by marijuana use.

Areas of concern with Ordinance as written, as it affects Youth access to Marijuana

- 1. Ordinance allows up to THREE dispensaries within the City limits. There is already a Dispensary in Anchor Bay. Less than 10 miles away, and now one in Gualala, 13 miles away. Why does this Ordinance allow for so many in a City of less than 500 people?***
- 2. Edibles: Action Network strongly objects to the City Ordinance allowing the manufacture of edible Medical marijuana products within the city limits. Edibles are the favored method of using marijuana amongst Youth. We do not need any increased access to these harmful (to Youth) products.***

Action Network's Across Ages and Cultures Prevention Coalition (AAC) works with all sectors of the community to prevent and reduce substance abuse amongst our Youth. We have an active Youth Sector with 15+ members that meets weekly in the City of Point Arena to work on Youth drug and alcohol abuse problems.

Overview:

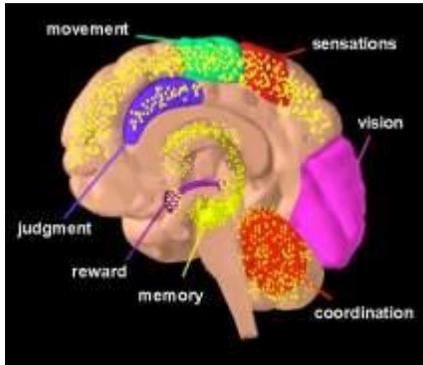
While Medical Marijuana use by ADULTS has proven to be beneficial, the use of any marijuana, whether by smoking or ingesting it, has been unequivocally proved harmful to young adult's brain development. The AAC is very troubled by the City's Ordinance No. 226 that creates vastly increased potential access for Youth to marijuana, and especially the provision that allows the manufacture of marijuana edibles. There is a direct connection between retail outlets of marijuana and increased use by youth in states that have legalized pot.

Increased Access Leads to more Marijuana Use by Youth:

The latest HHS Survey of States, the most comprehensive federal government drug use survey conducted in all 50 states (and the District of Columbia), shows that Colorado now leads the country in past-month youth marijuana use after legalizing marijuana in 2012, moving up from fourth place in the 2011-12 Study. "Now that Colorado has legalized and widely commercialized marijuana, their children use marijuana regularly more than children in any other state," said Dr. Kevin Sabet, President of Smart Approaches to Marijuana (SAM) and a former White House drug Advisor.

How does Marijuana affect the brain?

Marijuana has both short- and long-term effects on the brain.



THC acts on numerous areas (in yellow) in the brain.

Short-term effects: When a person smokes marijuana, THC quickly passes from the lungs into the bloodstream. The blood carries the chemical to the brain and other organs throughout the body. The body absorbs THC more slowly when the person eats or drinks it. In that case, the user generally feels the effects after 30 minutes to 1 hour.

THC acts on specific brain cell receptors that ordinarily react to natural THC-like chemicals in the brain. These natural chemicals play a role in normal brain development and function.

Marijuana over activates parts of the brain that contain the highest number of these receptors. This causes the "high" that users feel. Other effects include:

- altered senses (for example, seeing brighter colors)
- altered sense of time
- changes in mood
- impaired body movement
- difficulty with thinking and problem-solving
- impaired memory

LONG-TERM EFFECTS

Marijuana also affects brain development. When Marijuana users begin using as teenagers, the drug may reduce thinking, memory, and learning functions and affect how the brain builds connections between areas necessary for these functions.

Marijuana's effects on these abilities may last a long time or even be permanent.

For example, a study showed that people who started smoking marijuana heavily in their teens and had an ongoing cannabis use disorder lost an average of eight IQ points between ages 13 and 38. The lost mental abilities did not fully return in those who quit marijuana as adults. Those who started smoking marijuana as adults did not show notable IQ declines (Meier, 2012).

What are the Risks of Youth using Marijuana?

(From USA today article – July 27 2014)

What are the risks to children?

A. Emergency room doctors are treating more small children for accidental overdoses of marijuana. Doctors at Children's Hospital Colorado in Aurora have treated 12 children for marijuana overdoses just since January, when recreational use became legal in Colorado. Doctors treated eight children in all of 2013. Of those treated this year, seven needed intensive care. Children also may be exposed when their mothers use pot during pregnancy or breastfeeding. A number of women now say that they're trying marijuana for morning sickness or other uses while pregnant. Other parents bring their children to the doctor, reeking of marijuana smoke. Doctors report that parents say, "It's legal, so there's nothing wrong with it."



Q. Why are young people more vulnerable to the risks of smoking marijuana?

A. Their brains are still developing. The brain isn't fully mature until about age 25. That may help explain why people who use pot frequently, beginning as teens, often have significant declines in their IQ as adults, as reported in a June 2014 article in *The New England Journal of Medicine*. Marijuana impairs critical thinking skills for days after people sober up. That means that teens who use marijuana on weekends may not be able to learn properly when they return to school. Like alcohol, marijuana impairs judgment, so that teens may take more risks – from speeding to sex – that can endanger their lives.



Q. Is marijuana a "gateway drug" that leads to use of more dangerous substances?

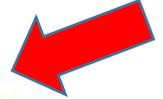
A. It's unclear, but numerous studies show that people who use marijuana are more likely to later abuse other drugs.

2015 PRIDE SURVEY RESULTS

2015 PRIDE Survey of all local Schools shows difference between local teen marijuana use and National Average:

Table 1.2: Annual Use – 2015-2016 vs 2014-2015 – DFC Drugs

DRUG/Location	6th	7th	8th	9th	10th	11th
Marijuana						
2015-2016	4.0	15.4	53.3	37.1	50.0	62.5
2014-2015 NS	2.2	5.1	8.2	16.4	24.2	27.6
diff	1.8	10.3	45.1	20.7	25.8	34.9

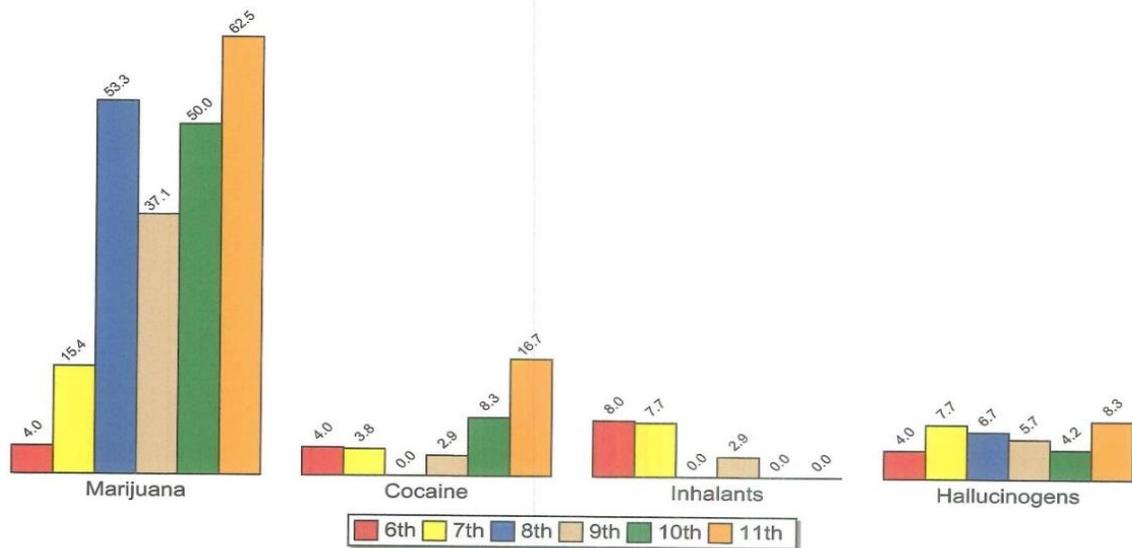


The figures above show the difference between our local Youth's "Annual Usage" of Marijuana and the National Average (NS). We already have much higher teen usage than most other areas in the Country. We do not need INCREASED access to Marijuana here!

Here are some sobering statistics also from the 2015 PRIDE Survey: Marijuana is by far the drug of choice already for our Youth.

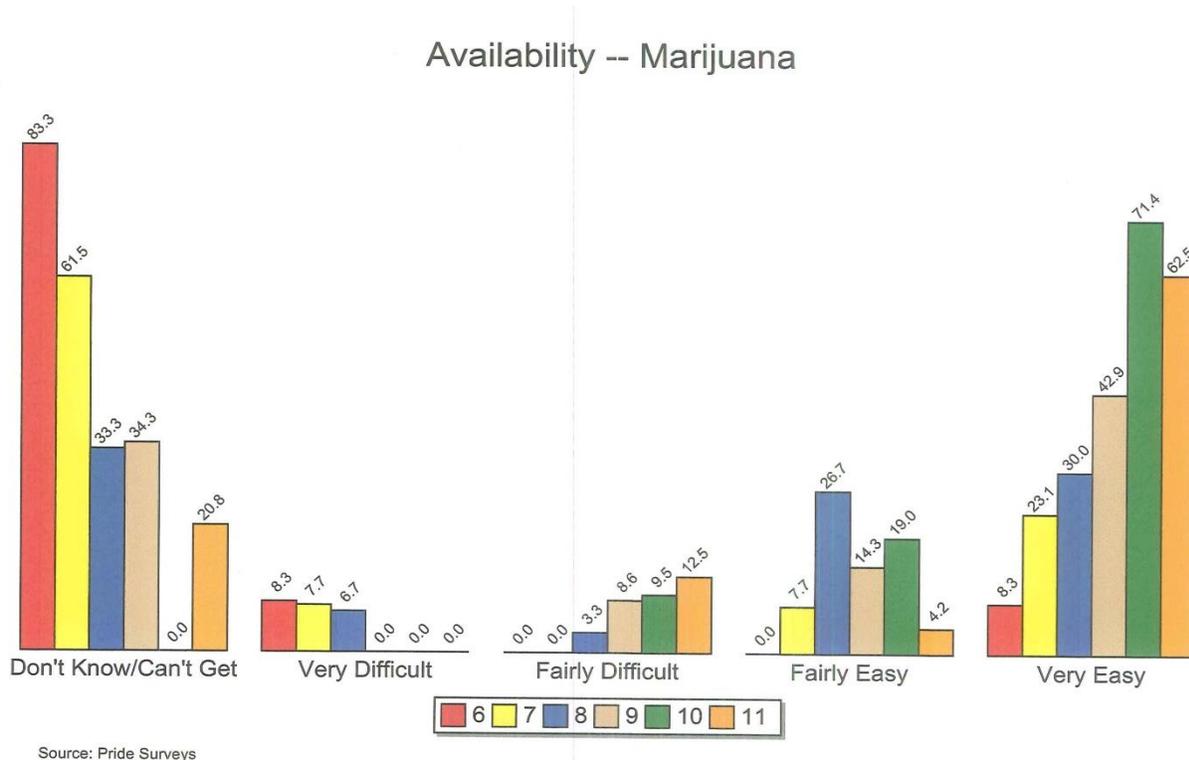
Pride Surveys Report: 2015-16 Action Network

Annual Use of Marijuana, Cocaine, Inhalants and Hallucinogens



Source: Pride Surveys

Availability of marijuana – Presently: Over 60% of 10th and 11th Graders already say Marijuana is “Very Easy” to get:



Edibles – Risk to Youth:

From the 2014 *Monitoring the Future Survey* by the National Institute on Drug Abuse:

1. **Marijuana use continues to exceed the use of cigarettes and although the use of others drugs such as prescription drugs, alcohol and tobacco is decreasing, marijuana edible use is increasing..**
2. **According to this report there are more youth that consume these edible products in states where marijuana is legal under the guise of medicine versus those who reside in states where it is not legal.** The statistics show 40% of young people have used an edible product in medi-pot states versus 26% in states where marijuana is not legally available as a so-called medicine
3. **The rise in emergency room visits relating to marijuana poisonings in states where marijuana is legal is also alarming.** This is due to the increasing availability of marijuana edibles infused with extremely high levels of the psycho-active ingredient THC

- 4 **Some of the new, edible marijuana products – from cookies to chocolates – can be 10 times stronger than traditional joints.** Because smoked marijuana affects people so quickly — reaching the brain in only 7 seconds – users often feel satisfied after a few drags, so that they don't actually smoke very much. But because a cookie's full effects may not set in for an hour or more, people may end up consuming far more THC than they intended to.
- 5 **Edibles are easy to conceal, difficult for parents to monitor.** See below for examples of how similar “real candy and cookies’ look to THC laced products. Once a product is out of its wrapping paper it is almost impossible to know whether it is kid-safe.
- 6 **Dangers of unwitting consumption:** Small children are especially vulnerable to harm from marijuana edibles in the home. Likewise, adults can and do unwittingly consume laced ‘brownies’ and ‘candies’ and end up in the hospital.

"Edibles" vs. regular food: It's hard to tell the difference

In the series of images below, here are pictures of marijuana edibles (pictured right) next to regular candy and treats (pictured left). Can you tell which is which?



Can you tell the difference?



Can you tell the difference?



Can you tell the difference?



Can you tell the difference?



The National Institute on Drug Abuse (NIDA) provides information on what marijuana is and what it does to the body.

Sources: National Institute of Health/National Institute on Drug Abuse, New England Journal of Medicine, Colorado Department of Public Health and Environment, and Colorado's "Don't Be a Lab Rat" campaign aimed to increase the perception of risk among youth regarding underage marijuana use.