

Reasons to oppose Recreational Marijuana
for our Children and Adolescents 10 April 2020

Recreational marijuana has been adopted in some states of the union and it has been proposed in others, such as the State of Connecticut. Advocates for the marijuana industry, also known as the “New Big Tobacco,” distribute pro-pot, literature and send advocates to speak in favor of marijuana throughout our fifty states, to promote getting high and to expand their business opportunities regardless of the impact on our children and young people.

In addition to its impact on young people, which is discussed below, consider the disproportionate impact of the recent coronavirus on the African-American community. According to NBC News, a Center for Disease Control report on the coronavirus in April, 2020 in fourteen states from California to Utah, where the African-American community made up 18% of the population, found that African-Americans made up 33% of the cases. Could this be a reflection of being in more urban settings, considering that for a few weeks, the City of New York had over half of the corona virus cases in the United States? The NBC reported that Dr. Deborah Birx, the coordinator for the White House Coronavirus Task Force, on the “TODAY” show stated that: “We don’t think African Americans are more susceptible to getting infected.” Instead it was the pre-existing conditions that made it more significant to the African-American community! These pre-existing conditions included diabetes, high blood pressure, obesity and asthma. Chicago Mayor Lori Lightfoot pointed out in April, 2020 that nearly 70 percent of the deaths from the coronavirus in Chicago were among African-Americans even though that group only made up one third of the population. This means that it is more lethal when an African-American in Chicago comes down with the disease than members of other groups. It appears that pre-existing conditions make the coronavirus more lethal to the African-American community. So why would we want to legalize smoking marijuana? Marijuana is like a cigarette and has tars and carcinogens in it. The person who smokes marijuana holds that smoke in his or her lungs longer and is not doing his or her lungs a favor. In fact, that person is doing just the opposite and making him or herself more susceptible to the coronavirus. It is not always the virus itself that kills you, it is also how it hijacks your immune system, that tries to fight off the virus, that can kill you.

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Some people get the coronavirus and they don't even know it and have few if any symptoms. Others get symptoms in their nose and throat and that is as far as it gets with a little fever added in. The real problem starts if it moves to your lungs. It is not just the pneumonia-causing damage inflicted directly by the virus that can kill you, it is the damage caused by your body's immune response to the infection. An overreaction by your immune system can compromise your lungs ability to get oxygen out of the air and into your bloodstream. This is why many patients end up on respirators to help the body's compromised lungs get oxygen into your blood. The coronavirus can kill you through your lungs. When the African-American community already has numerous health issues that are more prevalent within the community why would the N.A.A.C.P. want to add to these underlying health issues by compromising our lungs and respiratory tract anyway? We do not need to make our lungs weaker for a virus that plans to stay around for as long as men and women shall live on the earth.

Nonetheless, The New Big Tobacco is an equal opportunity merchant of addiction and mental and physical health maladies which it promotes in spite of the science that marijuana is damaging to the brains and future of our children and young people. The risks to youth are grave! "Marijuana is addicting, has adverse effects upon the adolescent brain, is a risk for both cardio-respiratory disease and testicular cancer, and is associated with both psychiatric illness and negative social outcomes." Marijuana Use: Detrimental to Youth, *American College of Pediatricians*, April, 2018, Donald Hagler, MD, FCP, amongst others. "Evidence indicates limited legalization of marijuana [such as medical marijuana] has already elevated rates of unintended marijuana exposure among young children, and may increase adolescent use. Id. Those who had used "medical" marijuana had an earlier age of regular marijuana use, and more abuse and dependence than those who did not use "medical" marijuana. Id. The National Institutes of Health wrote on the Effects of Cannabis on the Adolescent Brain, in 2014 and described how the impact of THC, the mind-altering chemical in marijuana, on the cannabinoid receptors, which are spread out in different parts of the brain, brings the high that the persons feels but also impacts these receptors, particularly in the developing stage of a child and adolescent through age 25 or more.

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The “alteration of the endocannabinoid system during adolescence may result in a cascade of neurochemical and neurostructural aberrations, thus leading to poorer cognitive and emotional outcomes in adulthood.” Id., Jacobus, Joanna and Tapert, Susan, and other authors. Reading through their piece is at times difficult due to the various technical medical terms and qualifying language as further study can give more data. But how we ignore these studies and their warnings for our children and could possibly support marijuana for our you is harder to accept.

Authors Jacobus and Tapert catalogued impacts from various studies. A study in New Zealand tracked people from birth to age 38 and “found a decline in intelligence quotient, particularly executive functioning and processing speed, with persistent cannabis dependence. Notably, those individuals with weekly use before age 18 demonstrated great decline in cognitive performance.” The American College of Pediatricians has found that as medical marijuana has been embraced, with limited science and with a much lower level than for other drugs approved by the F.D.A., “has led to greater availability of marijuana to youth.” By 2011, poison center calls for accidental marijuana ingestion by children more than tripled in states that decriminalized before 2003. Marijuana Use: Detrimental to Youth, p. 2. Admission to pediatric intensive care units was higher for legal than non-legal states. “The median age of children involved was 18-24 months.” Id. Jacobus and Tapert discussed whether cannabis use alters cortical and subconical grey matter tissue development? In 2010 adolescent cannabis abusers between ages 16-19 “were found to have decreased right medial orbital prefrontal cortex volume compared to non-using counterparts.” Id.

As a layman, I cannot claim to understand or know precisely what these doctors and scientists are saying about “prefrontal cortex volume,” but their research shouts that we must protect our children and young adults from this chemical. “Cannabis users did show decreased concavity of the sulci and sulci thinning in frontal, temporal and parietal lobes compared to non-users highlighting the potential for cannabis to disrupt normal brain development trajectories.” Id., p. 4-5. In a 2011 test, “amygdala volumes were compared between adolescent cannabis users and non-users. Findings suggest increased amygdala volume in female users compared to female non-users. Increased

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amygdala volume was associated with more self-reported depression and anxiety symptoms.” Id., p. 5. Or perhaps you can decipher a study in 2000 where “individuals reporting marijuana use prior to age 17 demonstrated decreased whole brain and cortical grey matter in addition to increased percent white matter volume?” Id., p. 6. Add to this the impact that alcohol can have on the adolescent brain.

When the Jacobus and Tapert report for the National Institutes of Health turned to magnetic resonance imaging, “MRI,” to create pictures of the anatomy and physiology of the body, they stated that “[c]hanges in cognitive performance after acute and longer-term cannabis use are fairly well documented. . . .” Id., p. 7. They came across decreased activation in response to a finger tapping exercise for early-onset (prior to age 16) cannabis users. Id., p. 8. And the age of onset of marijuana use made it more likely that the person would have to use other parts of his or her brain to complete a task such as “increased activation in the left superior parietal lobe” to complete a verbal working memory challenge. Id. The N.I.H. article concluded that the neurocognitive disadvantages of using marijuana in the areas of attention and memory persist beyond abstinence and suggests macrostructural brain alterations, changes in white and grey matter and abnormalities in neural functioning such as increased brain activation to compensate for one area of the brain needing help. And the sooner the initiation of marijuana use before age 17 and more frequent use are associated with poorer outcomes. Id., p. 11. You would think that poorer outcomes later in life would be sufficient to prevent the legalization of recreational marijuana? Laws that would make marijuana legal at age 21 or even 26, while our young people are still adolescents are tone deaf to this threat. The N.I.H. study closes with the exhortation that further studies are required to better understand the degree to which pre-existing conditions in a person and/or chronic marijuana use during adolescence contribute “to the development of psychiatric disorders and cognitive impairment in adulthood.” Id., p. 12. Why would any politician want to add to psychiatric disorders and cognitive impairments in any human being? It is incumbent on the N.A.A.C.P. to defend against psychiatric disorders and cognitive impairments to our children and young people, specifically, and all adults, generally!

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Not much time need be spent on the medical value of marijuana, as the “testing” of marijuana was not carried out with the same vigor and placebo-controlled randomized clinical trials as customarily used for drugs approved by the F.D.A. Marijuana Use: Detrimental to Youth, p. 2. The Food and Drug Administration has not approved any drug derived from the THC of marijuana, which is what gets you high, as a drug. The F.D.A. has only approved an extract from the plant with its cannabidiol (CBD). And as the potency of marijuana has been pushed from 5% THC content in the 1960s to 30% or more today the amount of beneficial CBD in the plant has been reduced. Beyond this CBD extract that has been approved for administration by prescription only, and three synthetically manufactured drugs that are made exclusively in a laboratory that share ingredients from a marijuana plant, “there has been no FDA review of data from rigorous clinical trials to support that these [FDA] unapproved products are safe and efficacious for the various therapeutic uses for which they are being used.” [fda.gov](#), “FDA and Cannabis ”Research and Drug Approval Process,” 12 April, 2020.

Even the layman can recognize that with the increased legalization of “medical” marijuana and legalization of recreational marijuana in various states that marijuana use has increased amongst young people. Our children look to see what the adults are doing. It is up to the adults to set the property example of sobriety and moderation. In 2010, 7.3 percent of the people admitted to publicly funded treatment facilities were 12-17 years old with marijuana as the leading illicit substance for adolescent emergency department admissions and autopsies. Id., p. 3. Marijuana is addictive. Between 70-72% of 12-17 year olds who enter drug treatment programs, do so primarily because of marijuana addiction. Id., p. 4. citing, Drug Facts, National Institute on Drug Abuse. www.drugabuse.gov/drugs-abuse/marijuana. published December 2012.

Depending on whom you ask, you may receive a different view on whether we should be protecting our young? The moderns and hipsters will give the green light to marijuana. Publications like “High Times,” “The New Yorker,” “Vox,” or “The Washington Post,” which paper encourages the expansion of the state and more revenues for the state, regardless of the human cost, will encourage legalization. But if you make your own search of medical literature and hospital literature, they are not

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giving a green light to marijuana for our children and young people. Just by making “medical” marijuana legal for medical purposes, increases usage by the youth for recreational purposes of getting high. Clearly, legalizing recreational marijuana for citizens 21 and older is going to make it easy for the 21-25 year old adolescents to use marijuana. But don’t kid yourself that those from 10 to 21 won’t be puffing away at higher rates. Of course they will, just as kids 10-21 use pot today in states where it is illegal. It will only increase. The “legalization” age of 21 is just a marketing tool. Our children will be using more it, just as the sun rises in the east.

And then there is the well worn path to other illicit drugs, of the gateway drug. “Marijuana is frequently a stepping stone that bridges the gap between cigarette and alcohol use and the use of other more powerful and dangerous substances like cocaine and heroin. This stage-like progression of substance abuse, known as the gateway phenomenon, is common among youth from all socioeconomic and racial backgrounds.” Marijuana Use: Detrimental to Youth, p. 2, citing, “National Institute on Drug Abuse, “Want to know more? Some FAQs about marijuana? Updated March 2014, accessed July 10, 2012. This is where we want to go? “Brain MRI studies now report that in young recreational marijuana users, structural abnormalities in gray matter density, volume and shape occur in areas of the brain associated with drug craving and dependence.” Marijuana Use, p. 5. Brain imaging found “decreases in the size of the working memory areas of the striatum and thalamus for those who had a history of cannabis use, that was more marked in those who used marijuana at a younger age and in users with schizophrenia.” Id.,

A 2012 study in New Zealand of 1,000 individuals started at age 13 and then at set times thereafter all the way through age 38. Their IQ was tested again at age 38. “Participants who used cannabis heavily in their teens and continued through adulthood showed a significant drop in IQ between the ages of 13 and 38 - an average of eight points for those who met criteria for cannabis dependence. Those who started using marijuana regularly or heavily after age 18 showed minor declines. By comparison, those who never used marijuana showed no declines in IQ.” Id., This meant that even those who stopped using marijuana showed that if they used marijuana when they were

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young, while the brain was rewiring, pruning and organizing itself, it has a long lasting negative effect on the brain. Id. Or there is the citation to a study with 3,385 patients that found that “[f]or each five years of past marijuana use, verbal memory decreased significantly. “ Id. Then when the results of three studies in Australia and New Zealand were combined into a 2014 study found that those who had early cannabis use, the probability of graduating from high school dropped. The likelihood of obtaining a university degree dropped. The odds of attempting a suicide between 17 and 25 increased between monthly and daily users of marijuana. The more marijuana was used before age 17 the higher the likelihood of depression and welfare dependency by ages 27-30. Id., p.6.

At the same time, it should not surprise the reader that for mental illness, those who were marijuana dependent, mental illness is higher for users than non-users: and the same goes for anxiety disorder, depression, dysthymia, mania, hypomania, panic with agoraphobia, panic without agoraphobia, social phobia, specific phobia and generalized anxiety. The depression risk increases seven-fold. There was a nine-fold increased risk of suicidal ideation when marijuana was combined with other drugs. And a five-fold increase in depression and anxiety resulted for young women. Id., p. 7. Please consider that again: a five-fold depression and anxiety increase for women. Not 10% or 30% but 500%! And politicians want to legalize this? Why do the proponents of marijuana legalization seek to ignore marijuana’s relation with these mental psychoses?

Just like cigarettes, marijuana has many of the same compounds as cigarettes and hurts your lungs when smoked like a cigarette. That means chronic cough, respiratory infections and bronchitis, emphysema and lung cancer. In fact marijuana has more tar and carcinogens than tobacco and pot smokers hold the smoke in their lungs longer to achieve more of a high. For all of the pro-drug images of how cool it is to smoke pot, you rarely see someone rolling even the simplest filter into a joint. Yet the typical Marlboro cigarette has a filter and the smoker does not let the smoke linger in their lungs as long as a joint, yet the Marlboro cigarette is anathema to the moderns while the joint is hip. Now that is great marketing by the New Big Tobacco and a mental disconnect by the rest of us!

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Consider the concluding words of the American College of Pediatricians: “The [College] opposes [marijuana’s] legalization for recreational use and urges extreme caution in legalizing it for medicinal use.” *Id.*, p. 9. The College quoted the American Academy of Child and Adolescent Psychiatry (AACAP) saying that ‘marijuana’s deleterious effects on adolescent brain development, cognition, and social functioning may have immediate and long-term implications, including increased risk of motor vehicle accidents, sexual victimization, academic failure, lasting decline in intelligence measures, psychopathology, addiction, and psychosocial and occupational impairment.” *Id.* “*The College urges parents to do all they can to oppose the legalization of marijuana . . . Children look to their parents for help and guidance in working out problems and in making decisions, including the decision not to use drugs. Therefore, parents should be role models, and not use marijuana or other illicit drugs.*”

The College added an addendum to their report in 2017 which looked back at data collected in Colorado after marijuana had been legalized in Colorado. First there was “medical” marijuana. Then there was recreational marijuana from 2013 on. “The statistics reveal that between 2013 and 2014 there was a 45% increase in marijuana-associated impaired driving, a 32% increase in marijuana-related motor vehicle deaths with a 92% increase from 2010 to 2014, as well as 29% and 38% increases in emergency room visits and hospital admission secondary to marijuana use. By 2012, *marijuana use in Colorado was 55% above the national average among teens and young adults, and 86% higher among those over age 25.*” *Id.*, p. 10. The proposal to start the marijuana poisoning of our young people at age 21 is a myth. It starts long before that. Even if you were to start recreational marijuana at age 27 to give a one year buffer to the brain development period, teens and pre-teens will use more of it when there is a legalized environment.

Should we ignore the science? If one is shown brain scans by an MRI machine should we ignore it if the data is unfavorable to legalized marijuana? M.D. Chambard Charles, wrote on January 14, 2019 on the impact of just one or two joints on the developing brain. That study involved the brain scans of forty-six 14-year old girls and boys from Ireland, England, France and Germany. One or two joints increased volume

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on MRI images in numerous brain regions involved in emotion-related processing, learning and forming memories. “Even a little marijuana may change teen brain, study finds.” The article cited a study published in the Journal of Neuroscience. At age 14, “cortical regions are going through a process of thinning [which is] a ‘sculpting’ process that makes the brain and its connections more efficient.”

Why not take the concerns of Doctor Elizabeth Stuyt, a board certified Addiction Psychiatrist and Senior Instructor for the University of Colorado Health Science Program, Department of Psychiatry, to heart? Her paper in *Missouri Medicine*, in November/December, 2018 is a cautionary tale for the proponents of legalizing recreational marijuana as it addresses the experience of Colorado, where such an error for our youth has already been enacted. Dr. Stuyt starts off by warning that THC, the active component of marijuana that impacts your cannaboid receptors in your brain, used to be at about 2%. Now the New Big Tobacco has developed strains of marijuana that are much more potent. By 2017, “the most popular strains found in dispensaries in Colorado had a range of THC content from 17-28% such as found in the popular weed called ‘Girl Scout Cookie.’” The Problem with the Current High Potency THC Marijuana from the Perspective of an Addiction Psychiatrist, p.1. Think about that. The New Big Tobacco has named a high potency drug the “Girl Scout Cookie!” This is no laughing matter. Just as society has been alarmed at vaping products that were named to sound and taste like bubble gum to hook our young on vaping, the New Big Tobacco is making their high potency drug sound like a delicious candy to appeal to our children. More on the targeting of our children later with the likes of high, potency, edible brownies and chewable gummies. This 17-28% concentration of THC applies to the leaves that are smoked. The New Big Tobacco has worked overtime to up the concentrations of THC even higher up to 95% in oils, shatter, dab and edibles. The purpose is to get you high and to outdo their competitors. “We promise you a higher high!” “We promise you a quicker high! Buy now.” Marijuana users can develop a tolerance for marijuana and marijuana that touts a higher potency can conceivably offer a bigger altered state of mind. That is competition of the marketplace. Wouldn't you be concerned that this can lead to greater drug addiction by children and adults? Is addiction a social good?

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Dr. Stuyt found in the 2014 “Monitoring the Future Study” that marijuana was the number one drug abused by eighth and twelfth graders. Colorado lead the nation in first time use by children 12-17, “representing a 65% increase in adolescent use since legalization. Id., p. 2, citing, “Rocky Mountain High Intensity Drug Trafficking Area, Marijuana in Colorado: the impact, 2017 . . .” She points out that “[i]t is well documented that when drugs are perceived as harmful, drug use decreases as we have seen with adolescent use of tobacco. citing, “University of Michigan, 2013 Monitoring the Future Survey, . . .” There is significantly less perception of harm by marijuana primarily because Colorado has normalized it as a society and allowed the perception that it is ‘organic’ and ‘healthy’ and that there is nothing wrong with it.” The Problem with the Current High Potency THC Marijuana, p. 2. Again, that is great marketing by the New Big Tobacco. And they are coming to a neighborhood near you if they are not already there to hook your kids.

Dr. Stuyt has not been the first to point out that there are significant consequences for long-term or heavy marijuana use beginning in adolescence. “The prefrontal motor cortex or the ‘seat of judgement’ is the last to fully develop and can take up to 25-30 years to fully develop.” Id., p. 2. And the marionettes of the New Big Tobacco would like our young people to fully engage legally at age 21 of this damaging behavior. When you had 2% THC content in marijuana in 1960 that might be one thing but when you have 20% plus THC content in the marijuana planted and harvested in California and Oregon and then shipped illegally to your state, the health of our children should be a leading concern. THC addiction, according to Dr Stuyt, involves “increased anger, irritability, depression, restlessness, headache, loss of appetite, insomnia and severe cravings for marijuana.” citing, Bonnet, U., Preuss, UW, “The cannabis withdrawal syndrome: current insights,” Sub. Abuse Rehab 2017; 8:9-37.

If this does not concern the reader then 9% of those who experiment with marijuana become addicted should concern the reader as well as 17% of those who start using marijuana as teenagers will become addicted. Dr. Stuyt citing, Volkow, ND et al. “Adverse Health Effects of Marijuana Use,” New England Journal of Medicine, 2014; 370: 2219-2227.

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The post traumatic stress syndrome justification is also suspect. There is no evidence that marijuana successfully treats PTSD but there is evidence that it makes it worse according to Dr. Stuyt. Benzodiazepines, alcohol and marijuana provide temporary numbing of the individual but does not resolve the trauma. And the more you use, the more likely you can become addicted and end up with withdrawal symptoms if you wish to scale back. The 2014 report that looked at over 2,000 adolescents in New Zealand and Australia and maximum frequency of marijuana use found a seven time increase in suicide attempts in daily marijuana users versus non-users. Sillies, F. et al., "Young adult sequel of adolescent cannabis use: an intergrative analysis," *Lancet Psychiatry* 2014; 1:286-293, cited in, "The Problem with the Current High Potency THC Marijuana," Stuyt, E. MD. A Veterans' Administration study of 3,233 veterans found that cannabis use-disorder was significantly associates with both current suicidal contemplation and lifetime history of suicide attempts compared to veterans with no lifetime history of cannabis use disorder. Id., p.4. And what does Colorado have to tell us? "According to the Colorado Department of Public Health and Environment, marijuana is by far the most frequently encountered drug on toxicology screen of suicides among adolescents ages 10-19." "Health Watch No 94-Adolescent Suicide in Colorado. 2008-2012."

How much more data do we need to consider about the harmful effects of marijuana on our youth?. Dr. Stuyt expands upon how marijuana impacts the development of the adolescent brain: "[e]xposure to cannabis during adolescence disrupts glutamate which plays an important role in synaptic plugin in the pre-frontal motor cortex; disrupting normal brain development." citing, Lubman et al., "Cannabis and adolescent brain development," *Pharmacology and Therapeutics*, 2015. This impacts cognition and IQ of people who are exposed to marijuana either by ingesting it themselves or in utero. "In spite of this, nearly 70% of dispensaries in Denver, Colorado, recommend cannabis products to treat nausea *in the first trimester of pregnancy.*" emphasis added, Dickenson, B. et al., "Recommendations from cannabis dispensaries about first-trimester cannabis use," *Obstetrics and Gynecology*, 2018; 131; 1034; 1038. cited in, "The Problem with the Current High Potency THC Marijuana, p. 3. How much

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more misguided and rapacious can the New Big Tobacco be, than to suggest pregnant women smoke it during pregnancy? You don't even have to be a doctor or scientist to know that is wrong!

Dr. Stuyt has succinctly framed the issue: “[i]f states continue to commercialize marijuana as has been done in Colorado, we are destined to see many more people requiring treatment for addiction, depression, anxiety, suicidal ideation and psychosis.” *Id.*, p. 5. “Brain development isn't complete until age 25. For the best chance to reach their full potential, youth shouldn't use marijuana.” “Monitoring Health Concerns Related to Marijuana in Colorado: 2016.”

The proponents of legalized recreational marijuana turn a blind eye to the lack of testing for impaired driving when marijuana is used in conjunction with other substances such as alcohol. We already know of the carnage that litters our streets from drunk driving. Now we would add to that by encouraging more marijuana use. The combination of marijuana and alcohol in amounts that, on their own, might not lead to impaired driving, but when combined do result in impaired driving, kills people indiscriminately. Yet, we cannot test for this combination. For the New Big Tobacco, it does not matter if your children end up wrapped around a tree at the intersection of THC and alcohol so long as they make their money and the state collects its taxes.

Another sophistry being used to push legalization is that fewer African-Americans would be incarcerated for marijuana related offenses. A significant step has been taken in this direction by the decriminalization of the possession of small quantities that are more likely for personal use versus the larger quantities that a dealer might have, whom society is still trying to dissuade from the practice. Nonetheless, as pointed out in *Vox*, there are still arrests for possessing under the age of 21, unlicensed sales and public consumption. “After legalization, black people are still arrested at higher rates for marijuana than white people,” German Lopez, 29 Jan. 2018. According to Mr. Lopez, the arrests in Colorado in 2016 for marijuana went down 51% for whites, 33% for Hispanics and 25% for African-Americans. While the arrest rate for blacks had gone down it was still almost three times that for whites per 100,000 people. Some of this is explained that there may be a higher police presence in minority communities and

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therefore the infractions are more readily observed and that in a more compact urban environment, there may be fewer places to discretely smoke recreational marijuana which is not supposed to be a public event.

And then there is the “vibrant black market” for untaxed marijuana. Untaxed marijuana in states that have legalized marijuana is cheaper than taxed marijuana. People want to buy the cheaper product and that guarantees the continuation of illegal drug sales that the taxing authorities are not going to sit by and allow to go unpunished. The state wants your money. The state doesn’t care if they poison our children. The moment you deprive the state of taxes on the sale of illegal marijuana, is the moment the state will come and arrest you. An article by author Mike Adams, “California Officials Say Marijuana Legalization Causing More Violent Crime,” 28 March 2018. Mr. Adams quoted California Sonoma County Agricultural Commissioner Tony Linegar as stating that: “Marijuana is so valuable men are willing to kill for it.”

In the earlier part of this memo, citations were made to the increase in paranoia, anxiety and suicide tendencies from adolescent exposure to marijuana. What about its relation to violent crime? One of the sophistries used to justify recreational marijuana was the reduction in crime that it promised. Ostensibly, this was focused on the crime of dealing and distributing an illegal drug. The argument was not, per se, focused on the lives diminished and lost through chemical abuse and addiction. Putting those concerns aside, where has violent crime gone with the legalization of recreational marijuana? According to Jason Johnson of *The Hill*, he wrote on February 19, 2019, on crime in Colorado, Washington State and the District of Columbia: “homicides have generally increased in pro-marijuana jurisdictions In Denver, the homicide rate has steadily climbed from 36 in 2013 to a peak of 67 in 2018. Seattle had 19 homicides in 2013, then the rate increased every year except 2016, reaching a peak in 2018 of 31 cases. Even the District of Columbia has experienced a resurgence of violence - reaching 160 homicides in 2018 after seeing a historically low 116 homicides in 2017.” “Is marijuana legalization driving increases in violent crime?” He reiterated the point that legalization of marijuana does not eliminate the illegal sale of marijuana. Licensed and taxed marijuana is invariably more expensive than illegal marijuana. So you make the use of

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marijuana higher by making it legal so the demand goes up. You make the penalty for possessing illegal marijuana lower and the prices for illegal and untaxed marijuana is lower which creates an even bigger market that people will compete to fill. Since that is an illegal market, illegal means of competition are employed which leads to more dead and/or incarcerated young men and women, but it would seem to be mostly men.

Add to the increased traffic fatalities from marijuana and alcohol being used together and more emergency room visits from high-potency pot, corruption of marijuana regulators also factors in where huge sums of money is flowing beneath the noses of human beings. Where there is money and human nature, there is human temptation. "According to the Colorado Department of Public Safety, arrests in Colorado of black and Latino youth for marijuana possession have increased 58% and 29% respectively after legalization." Hunt, Jeff, "Marijuana devastated Colorado, don't legalize it nationally," 7 Aug. 2017. In addition, according to Mr. Hunt, many of the marijuana businesses are concentrated in neighborhoods of color. Leaders from these communities who had spoken in favor of legalization now find themselves speaking out about the negative impacts of these businesses. Be careful what you wish for. He quoted Dr. Harry Bull, Superintendent of the Cherry Creek Schools, one of the largest public school districts in Colorado: "So far, the only thing that the legalization of marijuana has brought to our schools has been marijuana." And that is what you want for your children?

The State of Connecticut, for example, has a Governor, New Lamont, and an Attorney General, William Tong, who stand idly by like marionettes for the New Big Tobacco as the excess marijuana from California and Oregon is trucked across the United States to be sold in states across the union that do not have legalized recreational marijuana such as Connecticut to poison our youth. This governor and attorney general do nothing in this area to protect our children. California and Oregon only use one-sixth to one-seventh of the marijuana that is grown there, the rest is shipped across the nation. Imagine that? Where the narco drug lords of Mexico and Venezuela have to dig tunnels under the U.S. border or to make low-profile submarines to try to get their drugs into the United States, California and Oregon drug merchants

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grow it right here in the lower 48 and just ship it across state lines to a town near you. And perhaps your governor and attorney general do nothing to stop this illegal trade, but instead of enforcing the laws of their state, they try to legalize this drug?

There was a time the 1970s and 1980s where air pollution from industrial production in mid-Western states was blowing across the country and dropping on New York State and New England states in the form of "acid rain." This acid rain was high in sulfur and was impacting the health of lakes and other bodies of water. These states actually notified the Environmental Protection Agency that they would sue the E.P.A. for not getting the sulfur contents down in the emissions from states like Illinois, Michigan and Indiana. Perlez, Jane, "5 States Warning E.P.A. of a Suit over Acid Rain," *The New York Times*, 19 Jan. 1984. Hopefully, your governors and attorney generals do more to keep highly, potent, California and Oregon marijuana away from your children than the governor and attorney general of Connecticut?

In view of the science that cannabis is harmful to the adolescent brain through age 25 we should not shirk our responsibility to exhibit responsible behavior as adults. We at the National Association for the Advancement of Colored People should oppose legalized, recreational marijuana. We should be on the alert for schemes by the New Big Tobacco to promote set-asides for minority communities to get licenses, loans and business training on how to get our young people hooked on their drug. We are smart enough to know that the promises of the New Big Tobacco that we can have the altered states of marijuana but avoid the addiction and ruined lives and futures for our children and young people. The state will not stand idly by whilst young men trade in illegal, untaxed marijuana to an even larger marijuana consuming public. They will be sent to jail. This is not marijunana from 1960, it is ten times stronger. It is more potent. Edibles are offered to our children in brownies and gummies. Shame on the New Big Tobacco for having a drug called "Girl Scout Cookie!" There is presently no test for determining impaired driving that combines alcohol and marijuana. We need fewer dead people and not more dead people. It is a refutation of the gift of life which we should be grateful for every day in sobriety when we peddle getting high. The question that needs to be asked: "Do you support the legalization of recreational marijuana for your children and

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grandchildren?" That is a simple question and a simple vote. How would Justice Thurgood Marshall or W.E.B. Dubois have opined on the N.A.A.C.P. pitching marijuana? Is that what the N.A.A.C.P. should be doing? Please oppose recreational marijuana for our children and young people. Thank you.

Respectfully submitted:

Peter Thalheim

Member, Executive Committee of the Stamford Branch of the N.A.A.C.P.

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