



NAADAC Position Statement on the Legalization and Criminalization of Cannabis

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Summary

NAADAC, the Association for Addiction Professionals, supports the decriminalization of cannabis. While it recognizes that states are increasingly legalizing cannabis, at this time NAADAC cannot support measures that would widely promote the use of an addictive substance by the general public and therefore stands against legalization. NAADAC finds no benefit to legalizing cannabis use since decriminalization alone will address many social injustices – specifically within the criminal justice system – and stimulate greater social change. NAADAC has laid out various policy recommendations that should be taken into account by the states that have begun to legalize cannabis, including implementing policies protecting the underage population; requiring standardization of testing, labeling, and terminology; and implementing new or updated clean air laws to prohibit the smoking of cannabis in public spaces or worksites.

NAADAC further maintains that it is crucial – as laws and cultural norms pertaining to cannabis are constantly shifting – that cannabis be subjected to the same research, consideration, and study as any other potential medicine pursuant to the standards of the U.S. Food and Drug Administration. For a more in-depth explanation of why NAADAC advocates the importance of research, please read the NAADAC Position Statement on the Medical and Recreational Use of Cannabis (2019), which can be found at www.naadac.org/position-statements-issue-briefs.

Introduction

Across the country, states are taking varied approaches to the legalization and decriminalization of cannabis, largely in opposition to the federal government’s approach that classifies cannabis – along with heroin and cocaine – as a Schedule I drug with a high potential for prolonged use and little to no medical benefit (DEA). Legalization is the process of removing legal bans against all forms of use or possession. If cannabis is legalized, it will be freely available for purchase by the general population, much like tobacco and alcohol are today.

Decriminalization is the removal of criminal consequences for use or possession and allows cannabis to remain illegal, but the penalties for possession are much less harsh than under current laws and include imposing fines, drug education, treatment, or no penalty at all.

Background

The stigma surrounding cannabis has been intertwined with race in America since the word originated. Harvey Anslinger – a former U.S. government official from 1930 to 1962 to whom the use of the word “marijuana” is attributed – was widely known for his intense support of the criminalization of drugs, harsh and racist anti-drug policies, and early “war on drugs” propaganda (Stephen Siff, *Origins* Vol. 7, Issue 8, 2014). Accordingly, the term “cannabis” will primarily be used throughout this paper in place of the historically stigmatizing term “marijuana.”

NAADAC Supports the Decriminalization of Cannabis

NAADAC supports the decriminalization of cannabis and believes that decriminalizing cannabis will alleviate discriminatory applications of the law for cannabis users and reduce costs incurred by multiple facets of the criminal justice system. The criminal prosecution and incarceration of cannabis users is heavily disproportionate in marginalized populations, and further inhibits these offenders from access to the treatment they need (ACLU, 2020).

There is a strong racial disparity between cannabis and criminal justice involvement, as evidenced by the disproportionate number of African Americans who are prosecuted for cannabis-related criminal charges. (ACLU, 2021).

- Cannabis is linked to more than half of drug arrests in the U.S., and a hugely disproportionate number of cannabis arrests, mostly for possession, befalls African Americans despite similar rates of use between Caucasians and African Americans (ACLU 2021).
- More than six million arrests for cannabis use and/or possession occurred between the years 2010 and 2018 (ACLU 2020). African American people are more likely to be arrested for cannabis than Caucasian people in every state, including in states where cannabis is legalized (ACLU 2020).
- African Americans account for only 14% of all regular drug users but are 37% of those arrested for drug offenses and 56% of those in prison for drug offenses. African Americans serve almost as much time imprisoned for a drug offense (average 58.7 months) as Caucasian people do for a violent offense (average 61.7 months), which includes aggravated assault and murder (Betsy Pearl, American Progress, 2018).
- African Americans in prison are half as likely to receive treatment for substance use as their Caucasian counterparts (NCBI, 2016).

Decriminalization will help to dismantle the institutionalized racism that lives inside the criminal justice system and will encourage greater social and cultural equity within our society without the negative effects of legalization.

Decriminalization will also stimulate the facilitation of treatment for substance use disorders, such as cannabis use disorder (CUD), instead of punishing those living with substance use disorders. The intent of removing harsh penalties and punishments is to destigmatize cannabis use and therefore encourage greater access to treatment for those living with CUD.

Treatment has consistently been shown to reduce the costs associated with lost productivity, crime, and incarceration across various settings and populations (Terry-Ann Craigie et al, Brennan Center for Justice, 2021). In 2018, it was estimated that the cost to society from substance use disorders was over \$600 billion (NIDA, 2018). The cost of treating substance use disorders, including medical costs, hospitalizations, and government specialty treatment, was estimated to be \$224 billion in 2016 (Recovery Centers of America, 2016). Treatment is a preventative and cost-effective method for reducing drug use and reincarceration while also stimulating related savings in health care.

NAADAC Opposes Legalization of Cannabis

NAADAC does not support the legalization of cannabis for recreational use, largely due to the addictive nature of cannabis (NIDA, 2021). Data shows that about 10% of those who use cannabis become addicted (Nora D. Volkow, MD et al, NIDA, 2021), resulting in CUD. Further, the percentage of reports of cannabis usage and incidents of CUD is much higher among adolescents (D'Amico et al, NIH, 2016). A long, school-based study by D'Amico and colleagues found that cannabis use was associated with poorer functioning in high school students across more domains – academic performance, unpreparedness, delinquency, and mental

health – compared to alcohol use (D’Amico et al, NIH, 2016). Cannabis use among youth populations can impair cognitive development since the brain continues developing well into young adulthood and through the mid-20s (Shen, PNAS, 2020). Following cannabis legalization, the drug would inevitably become more readily available, accessible, and affordable to the entire population, specifically vulnerable populations like those with predisposed addictive disorders and our nation’s youth.

Recommendations for Cannabis Policy and Regulation

Considering the aforementioned issues and in acknowledgement of the states that have set the precedent for legalizing cannabis, NAADAC has laid out various policy recommendations:

- **Implement policies protecting the underage population.**
 - **Implement policy establishing a high point of sale tax.** Pricing is the most effective method for reducing underage consumption. Increasing alcohol and tobacco prices through taxation and price floors have been proven to significantly reduce rates of consumption and other related risky behaviors among underage consumers. (Chaloupka FJ et al, The Abell Report, 2018). A portion of the sales tax should be used for prevention efforts and substance use treatment.
 - **Limit cannabis outlet density and numbers of cannabis retail licenses/licensees.** Early studies suggest that increased cannabis outlet density promotes higher rates of consumption (Wiley Online Library, 2020), and currently dispensaries are more concentrated in neighborhoods with higher rates of poverty, ethnic minorities, and young people, mimicking findings regarding tobacco and alcohol outlet density (Carla J. Berg, PhD, et al, 2019). Reducing the number of retail locations where cannabis is sold will help to limit cannabis access and use overall.
 - **Implement Synar legislation to establish further protections for the underage population.** The Synar Act of 1992 (revised in 2020) was developed in the context of growing evidence of health problems from tobacco use by youth, as well as evidence about the ease of access youth have to cannabis retail sources. The Synar program has been successful in preventing youth tobacco use by enforcing laws prohibiting the sale of tobacco to minors. A similar program will likely provide the same outcomes with cannabis (SAMHSA, 2017).
 - **Restrict traditional and digital cannabis marketing.** Adolescents who engaged with cannabis use advertisements on social media were five times more likely to have used the drug compared to those who did not (Pamela J Trangenstein et al, 2019). By restricting traditional and digital cannabis marketing, the risks to adolescents will also be reduced (Whitehill JM et al, 2019).
- **Require standardization of testing, labeling, and terminology.** The standardization of cannabis will promote a safer and more uniform consumption of information and use by the public. Currently, there are no formal limits in terms of what is considered a high level of THC since there are various methods of consumptions that have different effects on each user.¹ Inconsistency of product labeling can lead to severe impairment such as extreme confusion, anxiety, paranoia, panic, fast heart rate, delusions or hallucinations, increased blood pressure, and severe nausea or vomiting. Impaired judgement and motor functions may lead to unintentional injury such as a vehicle crash, fall, or poisoning. There needs to be major shifts in the way legalized cannabis is presented to the public for recreational use.
- **Implement new or update existing clean air laws to prohibit the smoking of cannabis in public spaces or worksites.** The process of extracting oils from the cannabis plant requires a variety of potentially harmful chemicals, which include volatile organic compounds (VOCs) that have the potential to pollute air in the form of smog (Jason Plautz, 2019). Introducing or updating cannabis-

¹ The National Institutes of Health recently defined five milligrams of THC in blood volume after consumption as the new standard unit of measurement required for all new research studies going forward (NIH, 2021, Notice Number NOT-DA-21-049). This standard applies only to research and, at the time of publication, had not been adopted by any states or regions. A standard unit is not a limit or a recommendation for consumption; it is only a unit to measure and facilitate cannabis research.

related clean air laws can limit the amount of harm the growing cannabis industry can contribute to the environment.

Conclusion

In conclusion, NAADAC supports measures to decriminalize cannabis but opposes measures to legalize cannabis. NAADAC strongly urges the federal government and individual states to consider the recommendations discussed in this paper, solicit the opinions and recommendations of addiction professionals who treat and study CUD, and craft thorough cannabis policy before implementing any change to the criminal or legal status of cannabis. Strict regulation and control of substances would help ease the burden that would be placed on vulnerable populations if cannabis is legalized. An initial approach that errs on the side of caution and links regulatory strategies similar to tobacco and alcohol to clear public health goals and outcomes is in the best interest of youth, at-risk adults, minorities, and regular cannabis consumers. This will also create a sustainable, regulated system that achieves a balance between the health of our communities and the economic prosperity of this inevitably growing industry.

References

- About the Synar Amendment and Program.* (2017). SAMHSA. <https://www.samhsa.gov/synar/about-synar>
- Active Cannabis Marketing and Adolescent Past-Year Cannabis Use.* (2019). NCBI. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6878135/>
- American Civil Liberties Union. (2020). *A Tale of Two Countries: Racially Targeted Arrests in the Era of*. <https://www.aclu.org/report/tale-two-countries-racially-targeted-arrests-era-marijuana-reform>
- American Civil Liberties Union. (2021). *Marijuana Arrests by the Numbers.* <https://www.aclu.org/gallery/marijuana-arrests-numbers>
- Comparing Black and White Drug Offenders: Implications for Racial Disparities in Criminal Justice and Reentry Policy and Programming.* (2017). NCBI. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5614457/>
- Drug Scheduling.* (2021). DEA. <https://www.dea.gov/drug-information/drug-scheduling>
- Economic Cost of Substance Abuse in the United States, 2016.* (2020, October 28). Recovery Centers of America. <https://recoverycentersofamerica.com/economic-cost-substance-abuse/>
- The Emerging Marijuana Retail Environment: Key Lessons Learned from Tobacco and Alcohol Retail Research.* (2018). NCBI. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5845833/>
- Ending the War on Drugs: By the Numbers.* (2018, June 27). Center for American Progress. <https://www.americanprogress.org/issues/criminal-justice/reports/2018/06/27/452819/ending-war-drugs-numbers/>
- Growth of legal pot farms drives smog worries.* (2019). Science.Org. https://www.sciencemagazinedigital.org/sciencemagazine/25_january_2019/MobilePagedArticle.action?articleId=1458885#articleId1458885
- The Illegalization of Marijuana: A Brief History.* (2014). Origins: Current Events in Historical Perspective. <https://origins.osu.edu/article/illegalization-marijuana-brief-history>

- Is drug addiction treatment worth its cost?* (2020, June 3). National Institute on Drug Abuse. <https://www.drugabuse.gov/publications/principles-drug-addiction-treatment-research-based-guide-third-edition/frequently-asked-questions/drug-addiction-treatment-worth-its-cost>
- Is marijuana addictive?* (2021, April 13). National Institute on Drug Abuse. <https://www.drugabuse.gov/publications/research-reports/marijuana/marijuana-addictive>
- NOT-DA-21-049: Notice of Information: Establishment of a Standard THC Unit to be used in Research.* (2021). NIDA. <https://grants.nih.gov/grants/guide/notice-files/NOT-DA-21-049.html>
- Pedersen, E. R. (2021, March 1). *Examining Associations Between Licensed and Unlicensed Outlet Density and Cannabis Outcomes From Preopening to Postopening of Recreational Cannabis Outlets.* Wiley Online Library. <https://onlinelibrary.wiley.com/doi/abs/10.1111/ajad.13132>
- Public Health Policy in Maryland.* (2018). The Abell Foundation - Working To Enhance The Quality Of Life In Baltimore And In Maryland. <https://abell.org/publications/public-health-policy-maryland>
- Shen, H. (2020, January 7). *News Feature: Cannabis and the adolescent brain.* PNAS. <https://www.pnas.org/content/117/1/7>
- Understanding Rates of Marijuana Use and Consequences Among Adolescents in a Changing Legal Landscape.* (2017). PubMed Central (PMC). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5686234/>
- (2021, September 7). *Conviction, Imprisonment, and Lost Earnings: How Involvement with the Criminal Justice System Deepens Inequality.* Brennan Center for Justice. <https://www.brennancenter.org/our-work/research-reports/conviction-imprisonment-and-lost-earnings-how-involvement-criminal>