



Marijuana & Review of the CT Cannabis Law

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THE HUB

YOUR REGIONAL RESOURCE!



The Hub is the state-designated RBHAO serving Southwest (Region 1) Connecticut

We are a division of the Regional Youth Adult Social Action Partnership (RYASAP)

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MARIJUANA – CANNABIS

Marijuana refers to the dried leaves, flowers, stems, and seeds from the *Cannabis sativa* or *Cannabis indica* plant. Marijuana has two natural components (THC & CBD) that work with our body's receptors. THC is the psychoactive ingredient.

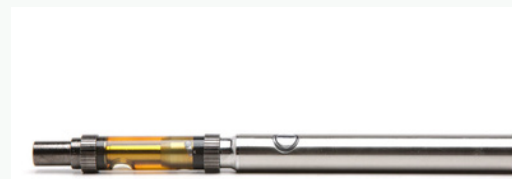


Forms include:

- Hand rolled cigarettes
- Pipes or Water pipes
- Blunts & Joints
- Vaporizers
- Edibles & Food
- Oils
- Tea



Dabbing: smoking THC-rich resins



NAMES: CANNABIS, MARIJUANA, WEED, GREEN, GRASS, HASH, POT, DANK, MARY JANE, NUG, SKUNK, BLAZE, HAY, ROPE, FLOWER, BUD

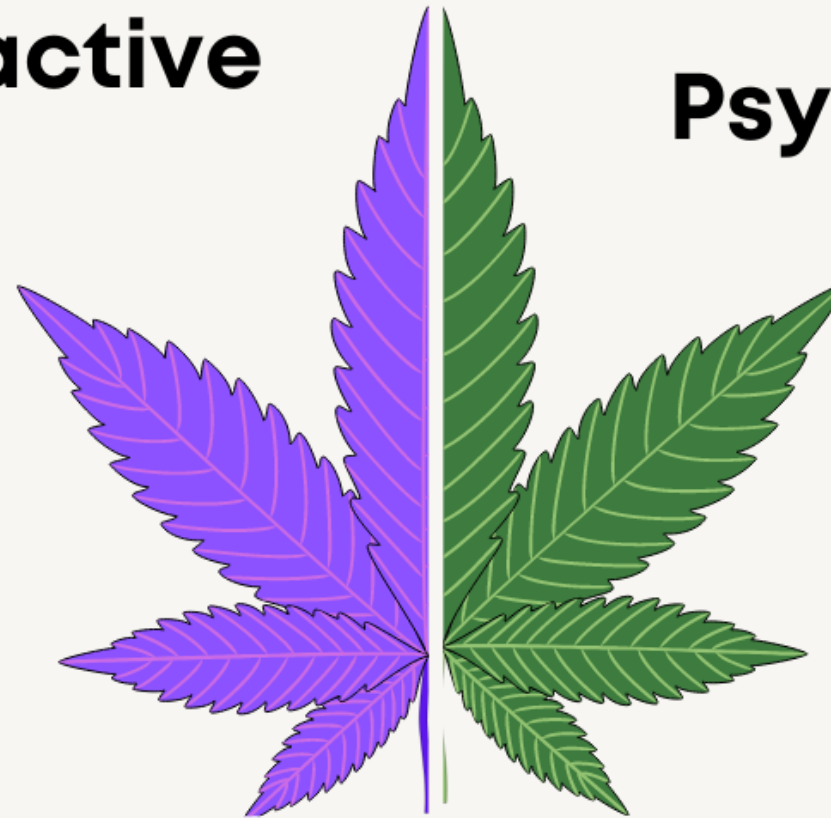


THC

Psychoactive

CBD

**Non-
Psychoactive**

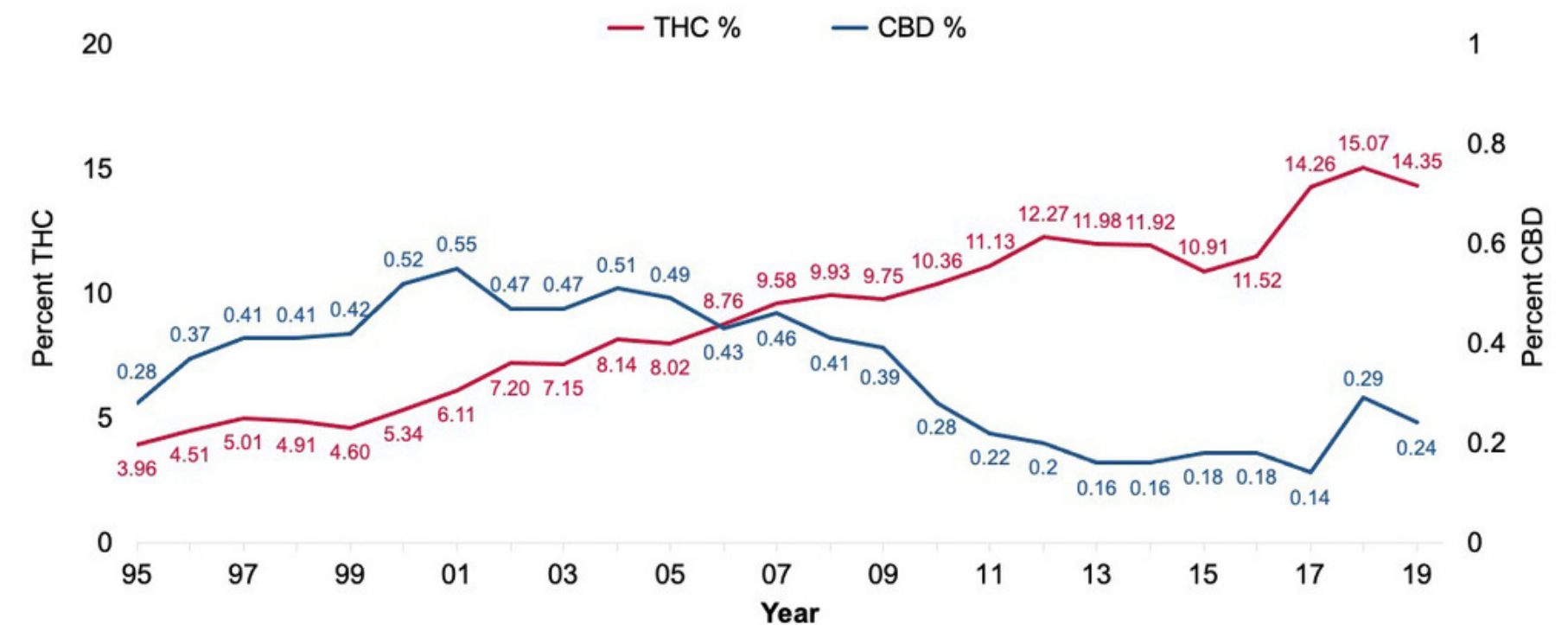


HIGH POTENCY MARIJUANA

- Marijuana in the 60s - 80s was about 1 - 4% THC. Currently, it is much stronger. About 40% stronger.
- Marijuana dispensaries carry concentrates up to 23% THC
- Concentrates (hash oil, budder, wax, shatter, etc.) contain 3 - 5 times more THC than the plant itself (up to 76% THC)



Percentage of THC and CBD in cannabis samples seized by the DEA from 1995-2019



Source: NIDA, 2020

<https://www.drugabuse.gov/drug-topics/marijuana/marijuana-potency>

DABBING

- **THC that is filtered out of the cannabis plant**
- **Processed & potent**
- **Made in labs - this is not a plant. It is a chemical**



- **Resin**
- **Hash**
- **Sugar**
- **Crystal**
- **Wax**

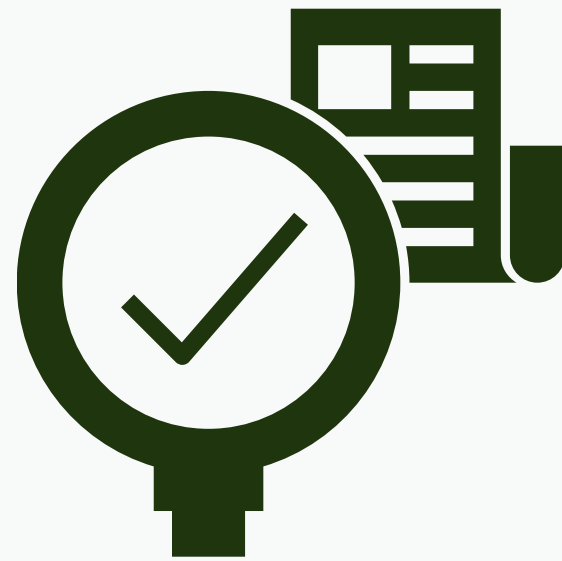


The concentrate is heated and vaporized

This is seen in dab pens, THC vapes, candy or food

FAST FACTS – YOUTH

- **Approximately 1 in 10 adults who use marijuana will become addicted**
- **Approximately 1 in 6 teens who use marijuana will become addicted**
- **In a nationwide study in 2020, college students reported record-high marijuana use and record-low drinking**
- **Studies indicate that higher THC dosage causes greater memory impairment and psychotic-like symptoms**
- **Use of high potency marijuana is associated with a moderate elevation in the likelihood of generalized anxiety disorder**
- **Chronic marijuana use reduces dopamine release in the brain, causing depression, poor memory, inattention and impaired learning performance.**



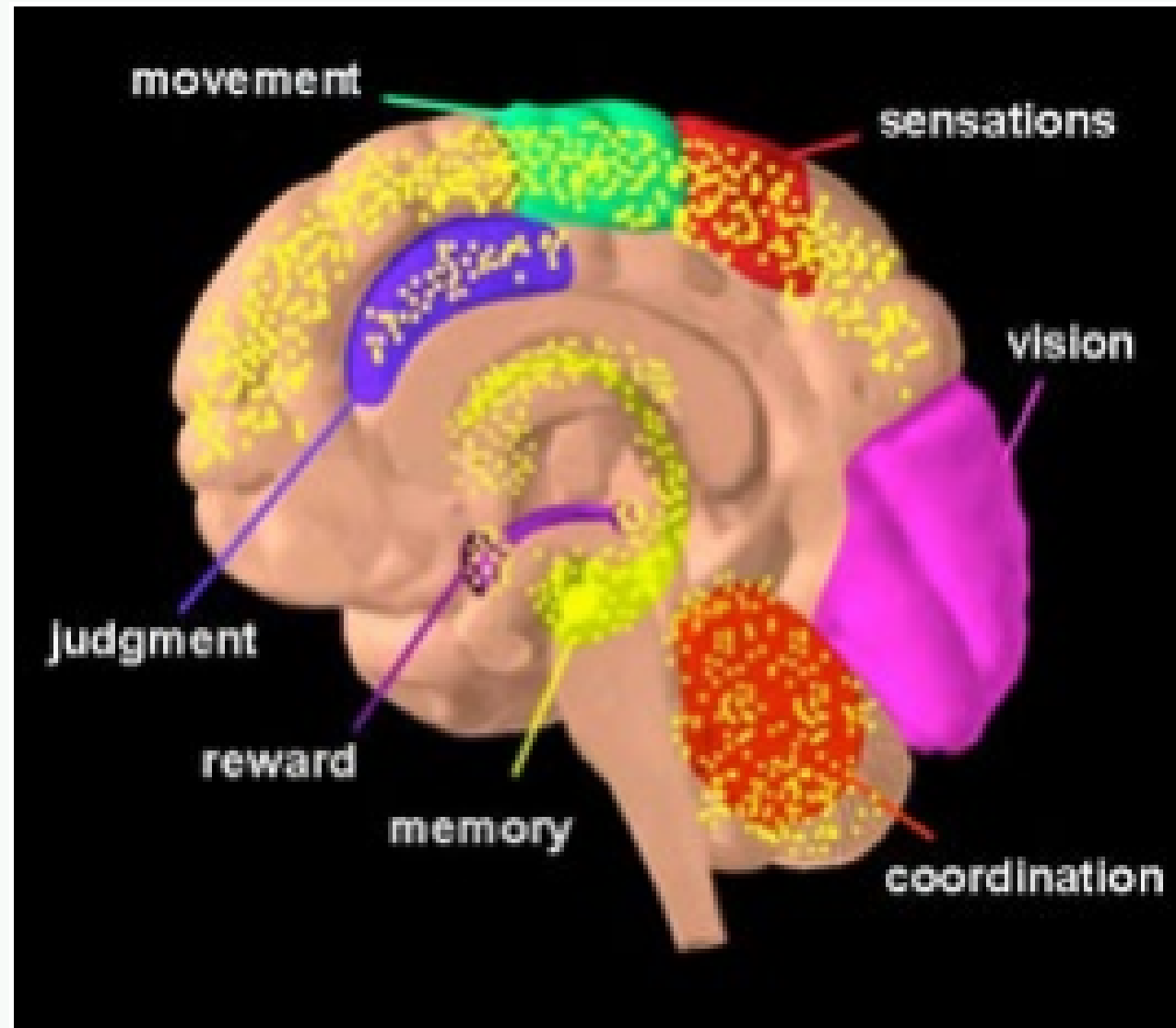
USE AMONG YOUTH

Typical root causes of teen substance use: decreased perception of risk, low perception of disapproval by parents or peers, and access

- It is more widely and easily accessible (social media)
- There is a sense that marijuana is safe and reduces stress (anxiety, social pressure, etc.)
- Some permissive parents/guardians. Perception that it is "safer than other drugs or alcohol"



USE AND BRAIN DEVELOPMENT



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

Image by NIDA

Marijuana over activates parts of the brain that contains specific brain cell receptors that naturally react to THC-like chemicals

- Alters senses
- Alters sense of time
- Creates changes in mood
- Impaired body movement
- Difficulty with thinking and problem-solving
- Impaired memory
- Hallucinations (depending on dosage)
- Delusions (depending on dosage)
- Psychosis (high risk with regular use of high potency marijuana)

**The human brain does not fully mature until our mid to late 20s
Marijuana use in early years will affect brain development**

FAST FACTS – LONG TERM

- **Studies show that people with a history of marijuana use have a 2.76 times greater likelihood of initiating opioid use than non-users and a 2.52 times greater likelihood of transitioning to opioid misuse or dependence than non-users. These findings suggest that marijuana use typically precedes the use of opioids**
- **Driving under the influence of marijuana is associated with a 110% increase in fatal crashes**
- **People who used marijuana heavily in their teens and continued through adulthood saw a permanent 8-point drop in IQ**
- **Leads to lower life satisfaction, poorer mental health/physical health & more relationship problems. Less academic and career success.**
- **Other long-term physical & mental effects: breathing problems, increased heart rate, problems with pregnancy, intense nausea and vomiting, hallucinations, paranoia, worsening of mental health symptoms (anxiety, schizophrenia)**
- **Vaping can lead to serious lung illnesses and death**



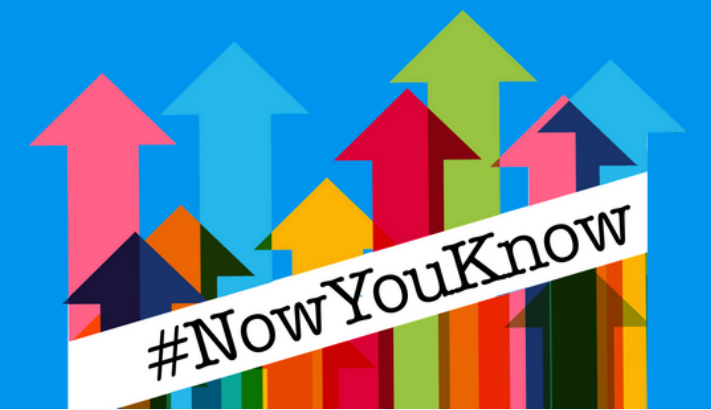
MYTHS

- **Marijuana is natural and therefore, harmless**
- **It is not addictive**
- **There are no long-term effects of marijuana use**
- **Marijuana is a treatment for all mental health disorders**
- **Marijuana is a safe drug (and safer choice) for teenagers**
- **Marijuana is better than alcohol**





MARIJUANA IN SOUTHWEST CT



MARIJUANA REMAINS THE MOST COMMONLY USED DRUG (AFTER ALCOHOL) IN CT & NATIONALLY

MARIJUANA USAGE HAS BEEN CONSISTENTLY HIGHER IN CT THAN THE NATIONAL AVERAGE

YOUTH & YOUNG ADULTS



- FROM 2018 - 2019, YOUNG ADULTS IN CT WERE USING AT HIGHER RATES (**43.9%**) THAN THE NATIONAL AVERAGE (**35.1%**)
- IN 2019, 21.7% OF CT HIGH SCHOOL STUDENTS USE MARIJUANA
- SW CT HAS **EXTREMELY LOW PERCEPTION OF HARM** FOR MARIJUANA AMONG **YOUTH**
- MAJORITY OF YOUTH **VAPE** MARIJUANA - WHICH HAS HIGH POTENCY THC
- STATES WHICH LEGALIZED MARIJUANA SEE **HIGHER RATES OF USAGE AMONG THOSE AGES 12 - 17**
- EMERGENCY ROOM VISITS BY **CHILDREN** WHO CONSUME MARIJUANA EDIBLES THAT LOOK LIKE CANDY IS **INCREASING**

FAST FACTS

- MARIJUANA CONCENTRATES ARE BEING SEEN AT THE **HIGHEST RATES IN HISTORY (40-80% THC)**
- MOST VAPERS ARE **VAPING MARIJUANA**, INGESTING EXTREMELY HIGH POTENCIES OF THC
- **WOMEN ARE MORE LIKELY TO VAPE** THEN MEN
- IN 2019, MARIJUANA WAS THE PRIMARY DRUG IN **12%** OF TREATMENT ADMISSIONS IN CT

RESOURCES AND SUPPORT

INFO ON ADULT-USE CANNABIS IN CT ON [PORTAL.CT.GOV/CANNABIS](https://portal.ct.gov/cannabis)

[SMART RECOVERY](#)

drugfreeCT.org



VISIT [THEHUBCT.ORG](https://thehubct.org) FOR MORE INFO AND SERVICES FOR SUPPORT. INCLUDING OUR REGIONAL RESOURCE GUIDES AND LIST OF FREE PEER SUPPORT GROUPS!

8
MEDICAL
DISPENSARIES
ARE IN CT

2
ARE IN SW CT
STAMFORD
WESTPORT

11,995
SW CT RESIDENTS HAVE A MEDICAL
MARIJUANA CERTIFICATE

22 % OF CT RESIDENTS HAVE A CERTIFICATE

Find resources and get involved at TheHubCT.org



LEGAL ADULT USE

**LEGAL MEDICAL USE
ONLY**

ADULT-USE CANNABIS IN CT

Legislation Public Act 21-1

Senate Bill 1201 - AN ACT CONCERNING RESPONSIBLE AND EQUITABLE REGULATION OF ADULT-USE CANNABIS

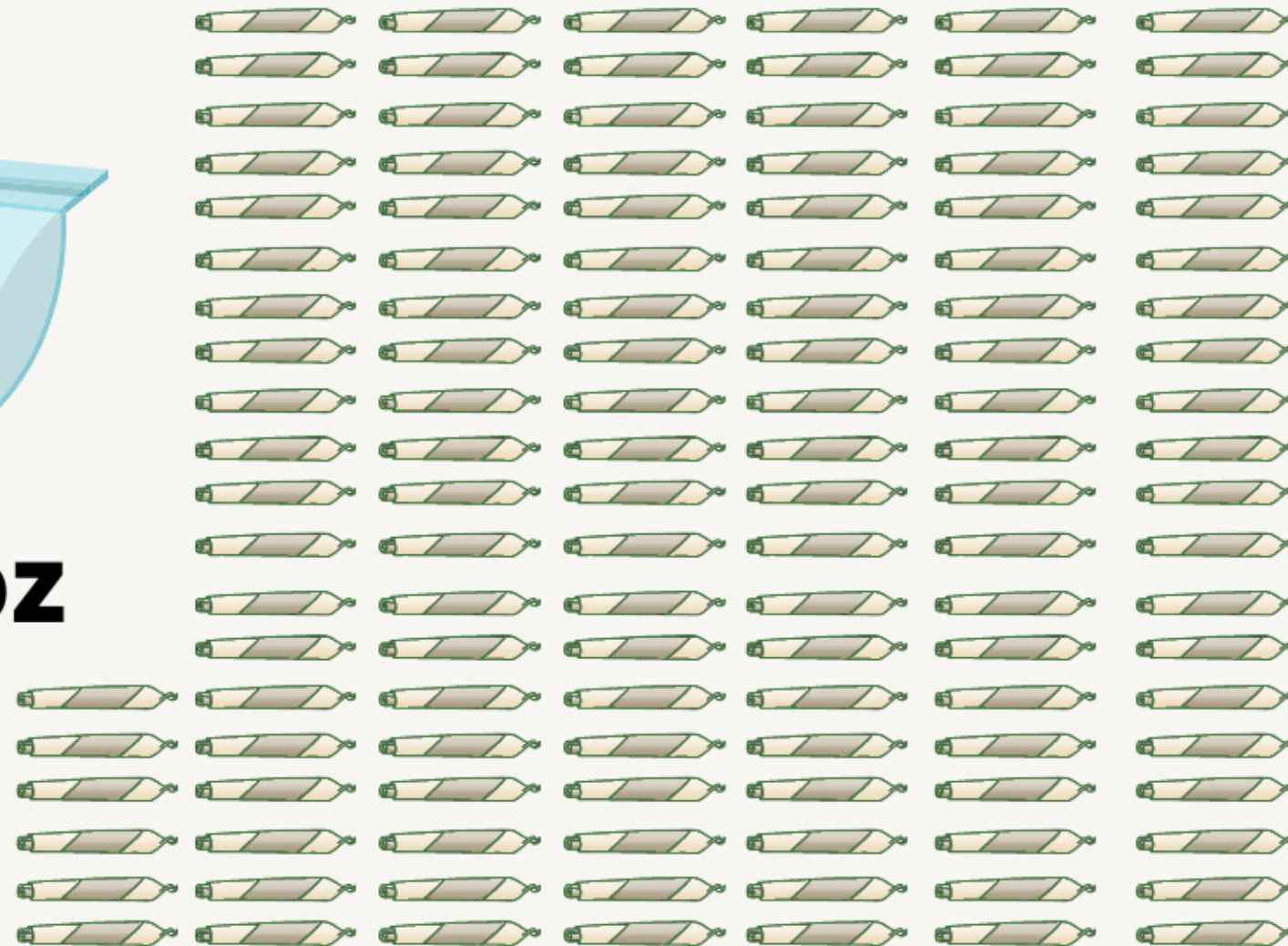
- As of July 1st, 2021, residents over the age of 21 can legally possess and consume marijuana up to 1.5 oz
- CT residents may also store up to 5 oz in a locked container at home or transport it in a locked glovebox or trunk
- Retail sales are not expected to begin until late 2022
- July 1st, 2023: Residents can cultivate up to three mature and three immature cannabis plants in their primary residence, if the plants are kept secure from anyone else. 12 plant limit per household

IT IS NOW LEGAL TO POSSESS 1.5 OZ OF MARIJUANA...



1.5 oz

=



**roughly 126 cigarette
sized joints**



ADULT-USE CANNABIS IN CT

- **Generally limits purchase to one ounce for consumers and five ounces for qualifying patients/caregivers per day**
- **Prohibits certain advertising practices by cannabis establishments (targeting under 21 or claiming therapeutic effects, advertising near schools)**
- **Modifies the state's driving under the influence (DUI) and boating under the influence laws**
- **Cannabis product will be lab tested and regulated with strict packaging and labeling standards**
- **Generally, you cannot use cannabis anywhere you can't smoke or vape tobacco (prohibited in state parks, beaches, and waters)**



ADULT-USE CANNABIS IN CT

- **Illegal to use cannabis while driving or as a passenger in a motor vehicle**
- **Illegal for underage individuals to possess or attempt to buy**
- **Illegal for retailers to sell to customers under 21**
- **Illegal for property owners to allow those under 21 to possess or consume**
- **Prohibiting (some exceptions) that a positive drug test (solely THC) be the sole basis for a school to penalize a student**
- **Bans higher education institutions from revoking financial aid or student loans or to expell a student solely for using or possessing small amounts**



AS IT RELATES TO YOUTH

- **Class A Misdemeanor: sell or provide cannabis to a person under 21**
- **\$1,000 fine to an individual allowing someone under 21 to loiter at a cannabis store (first offense). Subsequent offenses as a Class B Misdemeanor**
- **Class D Misdemeanor: person under the age of 21 to lie about their age or use a fake ID to buy cannabis**
- **Parents and other adults may commit a crime if they allow minors to use or possess cannabis on their property**



ADULT-USE CANNABIS IN CT

SOCIAL EQUITY COUNCIL

Promote and encourage full participation in the cannabis industry by people from communities disproportionately harmed by cannabis prohibition

The council is required to establish criteria and review social equity applications



FUNDING

Portions of the revenue obtained from retail sales of cannabis will be directed to support substance misuse prevention, treatment, and recovery services

DPH, DMHAS & DCF will launch new programs and initiatives regarding prevention, treatment, and recovery related to cannabis

OTHER NOTABLE POINTS

- **A standardized serving of cannabis cannot contain more than 5 milligrams of THC per unit of sale**
- **Recommendations of packaging & labeling**
- **Advertising**
- **Electronic tracking system cannot collect information on an individual consumer, qualifying patient or caregiver purchasing cannabis**
- **Cannot use cannabis in a place that endangers the health or wellbeing of another person (schools, parks, vehicles, etc.)**

State Retail Cannabis Tax Revenue Distribution

<i>Funds and Accounts</i>	<i>FY 22</i>	<i>FY 23</i>	<i>FYs 24- 26</i>	<i>FYs 27- 28</i>	<i>FYs 29+</i>
Cannabis Regulatory and Investment Account	100%	-	-	-	-
General Fund	-	100%	15%	10%	-
Social Equity and Innovation Fund	-		60%	65%	75%
Prevention and Recovery Services Fund	-		25%	25%	25%

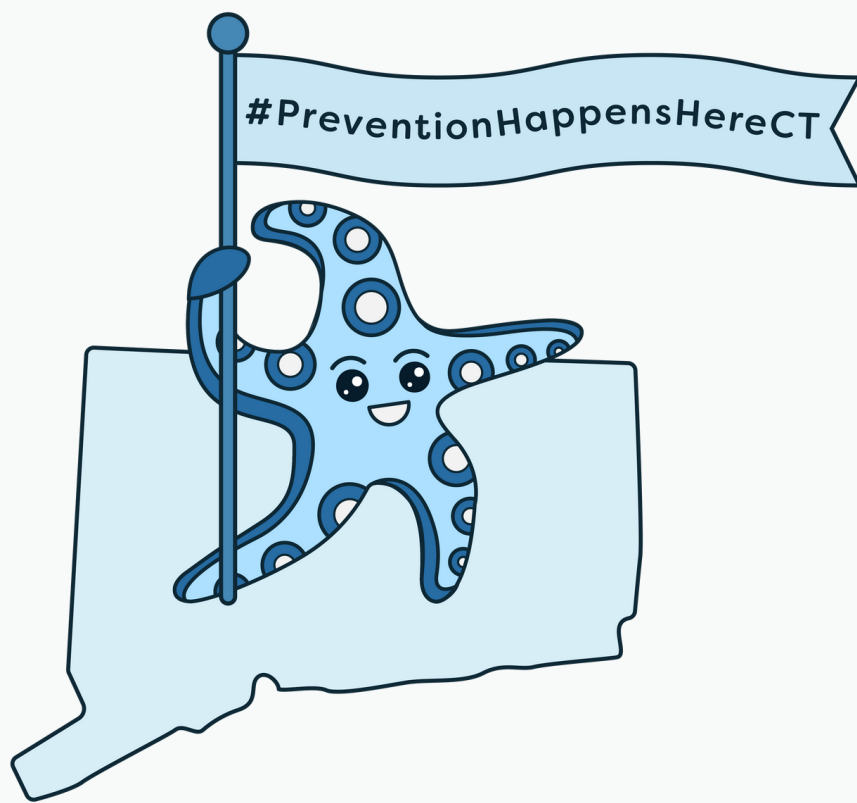
PUBLIC HEALTH CONCERNS

- **Potency caps**
 - Exemption of pre-filled vapes
 - Science of threshold
- **Underage possession**
 - vs alcohol
 - Social Host Law
- **Health warning labels**
- **Advertising**
- **Law enforcement**
- **Compliance**
 - Environmental scan findings
 - DUI
 - Possession
- **Budget for prevention**

CURRENT TOWN ACTIONS

Can be found here

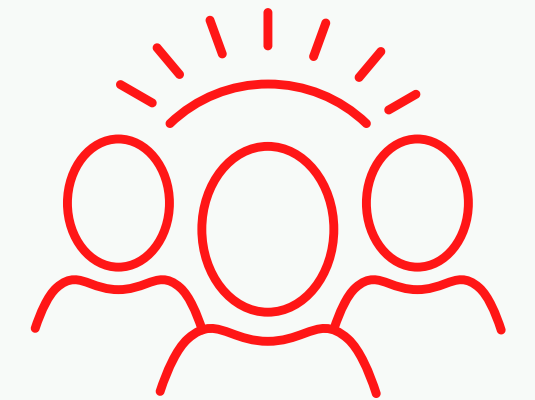
WHAT CAN WE DO?



- **Advocacy & attend public hearings to change rules, regulations, and policy provisions**
- **Look for provisions that will impact risk and protective factors**
- **Target institutions in their policy change or partner with them!**
- **Utilizing SPF to guide prevention work (assess)**
- **Adult-use will shift and affect youth-use: target both**

WHAT CAN WE DO?

- Create or strengthen penalties for youth possession
- Advertising: limit placements, larger print, reduce flashy colors or suggestive images - strengthen product warning labels
- Minimize opportunities for marijuana dispensaries on wheels & delivery services
- Strict distinction in edibles
- Compliance checks to sales to minors
- Restrictions for online/social media availability
- Strengthen laws and enforcement around drugged driving
- Zoning laws & signage (ex: prohibited use at 1000 ft around schools)
- Ensure funding for prevention, mental health treatment, and substance use treatment
- OPT OUT of commercialization and retail establishments
- Provide education and skills to communities (schools, parents, families, youth, etc.)



Alternatives to Suspensions

- **Out of school suspensions are ineffective**
- **Zero tolerance policies**

SAMHSA'S 7 STRATEGIES FOR COMMUNITY CHANGE

- 1. Providing Information**
- 2. Enhancing Skills**
- 3. Providing Support for Prevention Activities**
- 4. Enhancing Access/Reducing Barriers**
- 5. Changing Consequences (Incentives/Disincentives)**
- 6. Changing Physical Design/Making Environmental Changes**
- 7. Modifying/Changing/Developing Policies**

Found [here](#)

RESOURCES

- [CT.gov - Cannabis Law](#)
- [U.S. Surgeon General's Advisory: Marijuana Use and the Developing Brain](#)
- [Substance Abuse and Mental Health Services Administration \(SAMHSA\): Know the Risks of Marijuana](#)
- [Centers for Disease Control and Prevention \(CDC\): What are the health risks of Marijuana](#)
- [Department of Mental Health and Addiction Services: Prevention and Health Promotion Division](#)
- [PTTC Network Cannabis Prevention & Education Toolkit](#)
- [You Think You Know Counterfeit Drug Campaign](#)
- [The Hub's Marijuana Page](#)
- [2020 Regional Priority Report \(Region 1\) with Marijuana Epidemiological Profile](#)

RESOURCES

- [Drugfree.org toolkit: Talk to your kids about marijuana](#)
- [Justthinktwice.gov](#)
- **CT Access Line for Drug Treatment: 1-800-563-4086**
- [Smart Approaches to Marijuana - one-page factsheets/toolkit](#)



THANK YOU!!

REFERENCES

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