

Cannabis & Overview of the CT Cannabis Law

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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thehubct.org - subscribe to our weekly newsletter!



CANNABIS

Cannabis: widely encompasses all products derived

from the cannabis sativa plant

Cannabinoids: Group of substances found in the

cannabis plant, including THC & CBD

Marijuana: Parts of or some products from the

cannabis sativa plant



Forms include:

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











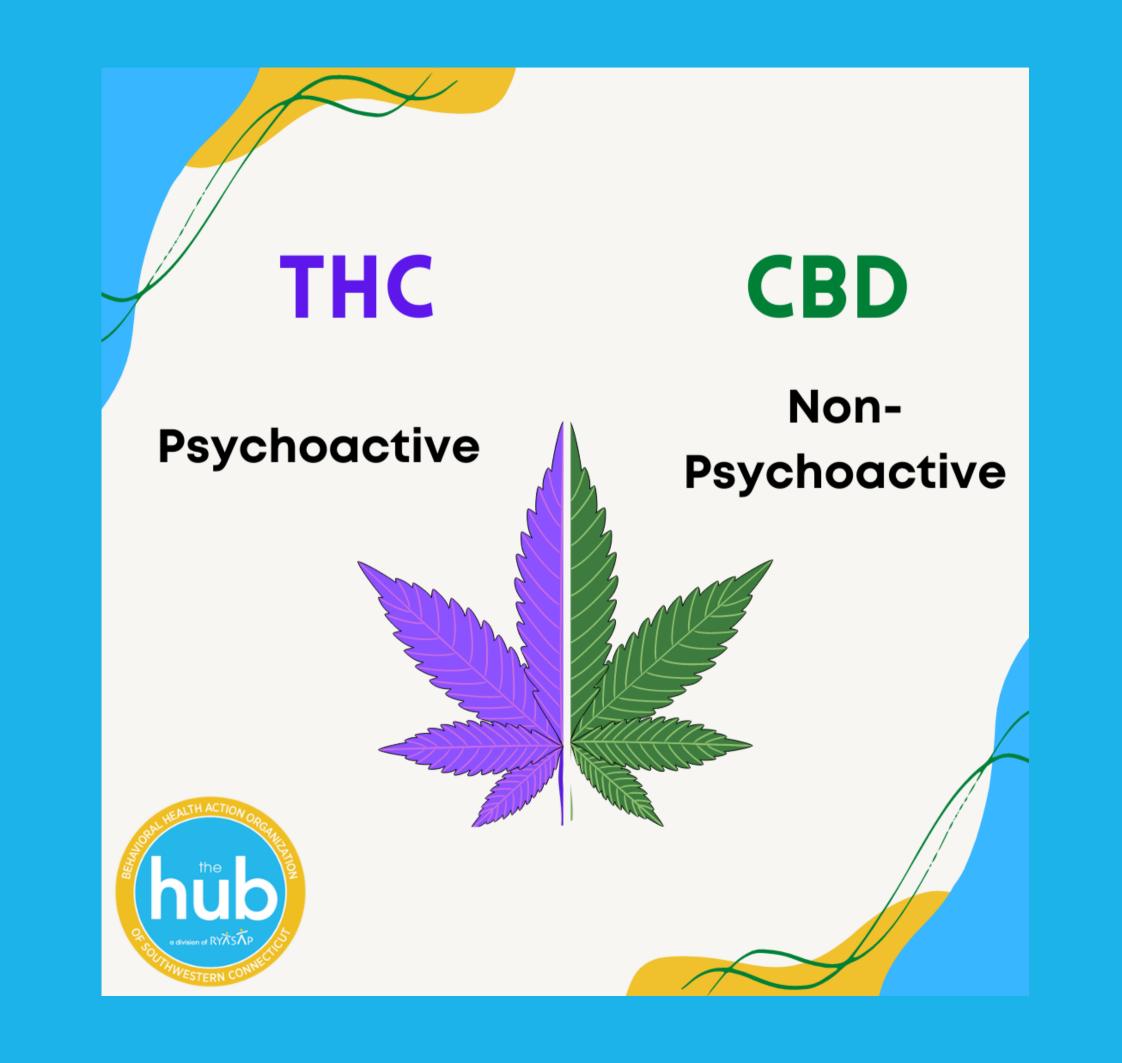






NAMES: CANNABIS, MARIJUANA, WEED, GREEN, GRASS, HASH, POT, DANK, MARY JANE, NUG, SKUNK, BLAZE, HAY, ROPE, FLOWER, BUD

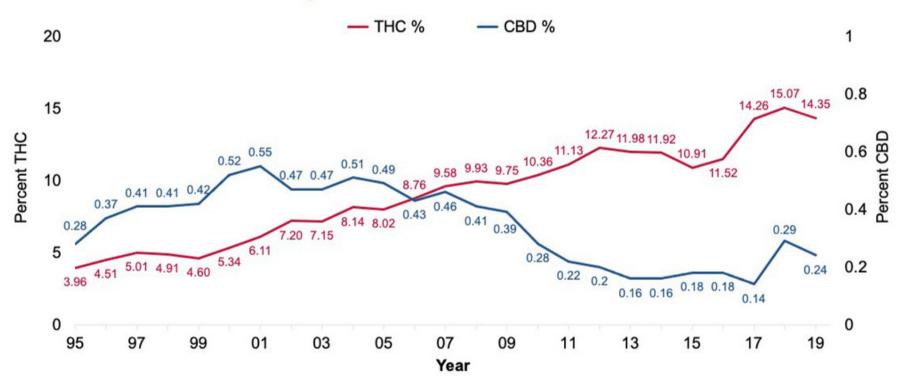




HIGH POTENCY MARIJUANA

- Cannabis (or 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)
- Some products found in stores can go up to 80-90%

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





USE AMONG YOUTH

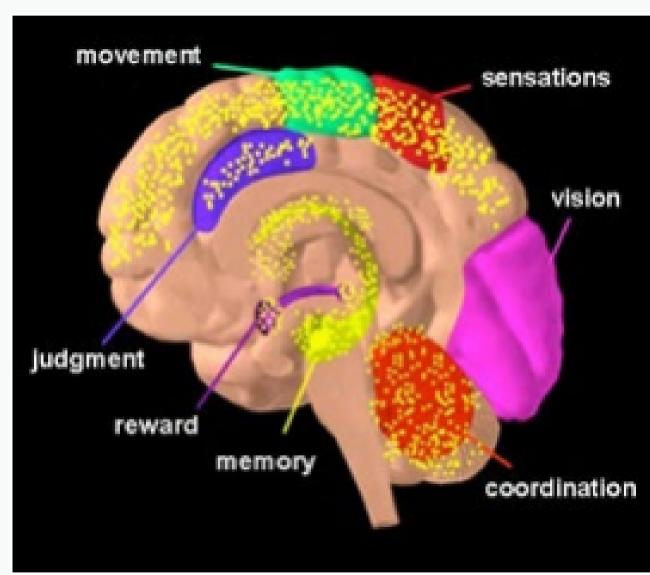
Typical root causes of teen substance use: decreased perception of risk, low perception of disapproval by parents or peers, and access

- It is more widely and easily accessible (social media)
- There is a sense that cannabis 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

Cannabis 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 Cannabis use in early years will affect brain development

FAST FACTS - LONG TERM

- Studies show that people with a history of cannabis 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 cannabis use typically precedes the use of opioids
- Driving under the influence of cannabis is associated with a 110% increase in fatal crashes
- Many people who used cannabis 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

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





MARIJUANA IN SOUTHWEST CT





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

RESOURCES AND SUPPORT

INFO ON ADULT-USE CANNABIS IN CT ON PORTAL.CT.GOV/CANNABIS

SMART RECOVERY



drugfreeCT.org

VISIT THEHUBCT.ORG FOR MORE INFO
AND SERVICES FOR SUPPORT.
INCLUDING OUR REGIONAL RESOURCE
GUIDES AND LIST OF FREE PEER
SUPPORT GROUPS!

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

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
- EMERGENY ROOM VISITS BY CHILDREN WHO CONSUME MARIJUANA EDIBLES THAT LOOK LIKE CANDY IS INCREASING

MEDICAL DISPENSARIES ARE IN CT

ARE IN SW CT
STAMFORD
WESTPORT

11,995

SW CT RESIDENTS HAVE A MEDICAL MARIJUANA CERTIFICATE

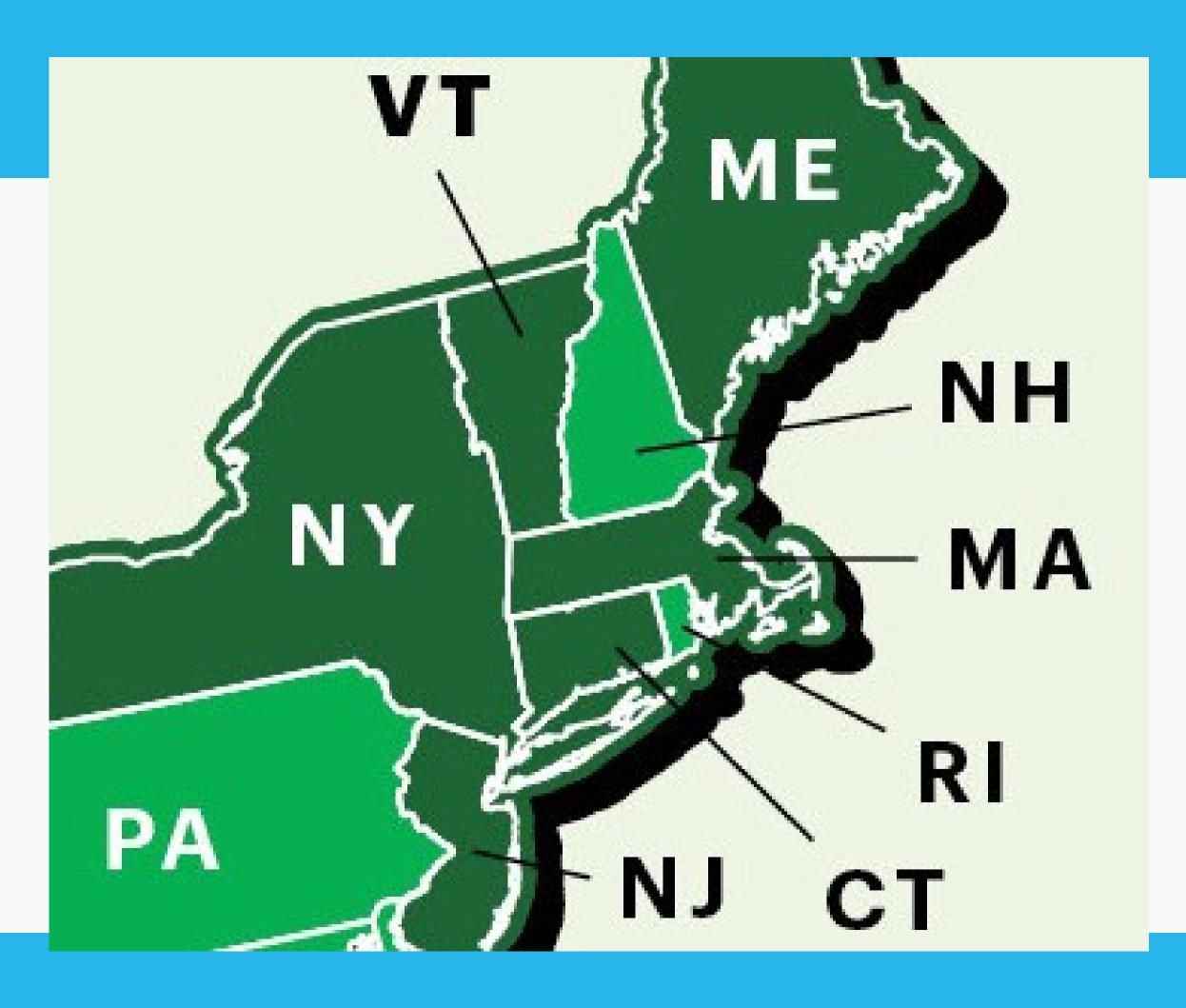
22 % OF CT RESIDENTS HAVE A CERTIFICATE

KEEP UPDATED!

THE HUB WILL BE RELEASING OUR 2022 REGIONAL NEEDS PRIORITY REPORT SOON!

THIS WILL INCLUDE UPDATED INFORMATION & DATA ON CANNABIS IN SOUTHWESTERN CT.

VISIT THEHUBCT.ORG TO SUBSCRIBE TO OUR NEWSLETTER & RECEIVE UPDATES



LEGAL ADULT USE

LEGAL MEDICAL USE ONLY

ADULT-USE CANNABIS IN CT

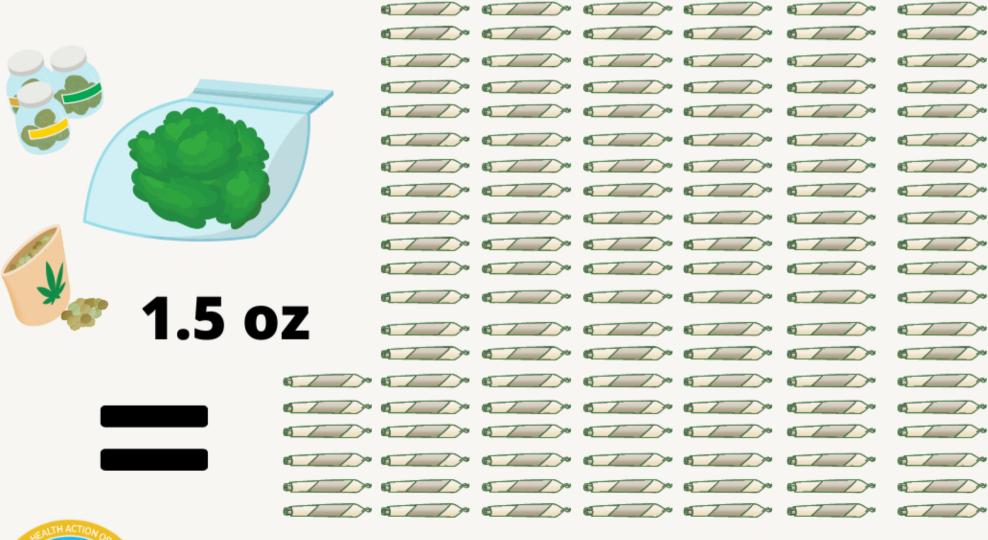
Legislation Public Act 21-1

<u>Senate Bill 1201 - AN ACT CONCERNING REPONSIBLE AND EQUITABLE</u>

<u>REGULATION OF ADULT-USE CANNABIS</u>

- 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...





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)



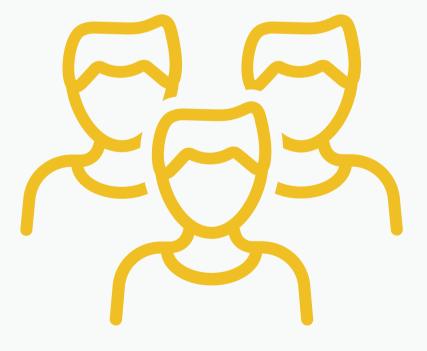
ADULT-USE CANNABIS IN CT

- 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. This will not start until 2024 or later.

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

State Retail Cannabis Tax Revenue Distribution

Funds and Accounts	FY 22	FY 23	FYs 24- 26	FYs 27- 28	FYs 29+
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%

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.)

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
- Compliancy
 - Environmental scan findings
 - o DUI
 - Possession
- Budget for prevention

CURRENT TOWN ACTIONS

Can be found <u>here</u>

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 dispenaries 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.)

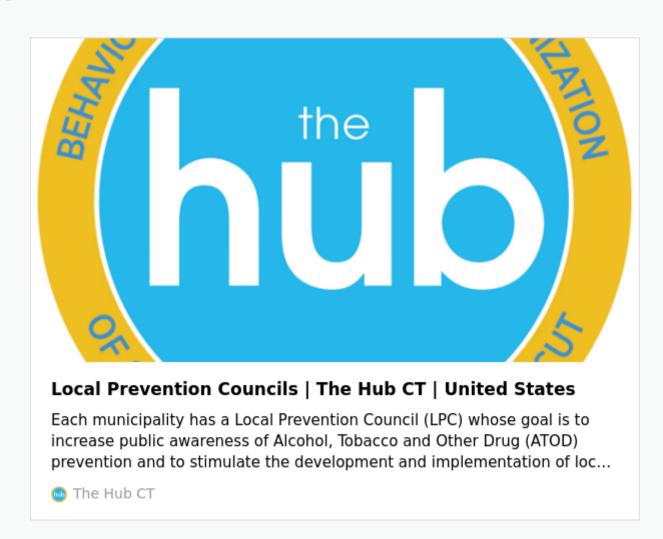




Alternatives to Suspensions

- Out of school suspenscions are ineffective
- Zero tolerance policies

Get Involved with your Local Prevention Council to learn more!



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>U.S. Surgeon General's Advisory: Marijuana Use and the Developing Brain</u>
- <u>Substance Abuse and Mental Health Services Administration (SAMHSA): Know the Risks of Marijuana</u>
- Centers for Disease Control and Prevention (CDC): What are the health risks of Marijuana
- <u>Department of Mental Health and Addiction Services: Prevention and Health Promotion</u>
 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

- <u>Drugfree.org toolkit: Talk to your kids about marijuana</u>
- 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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