

Normalizing Marijuana Gets a Pass on Following the Science

Posted to Politics November 30, 2022 by Stephen F. Gambescia



More state legislators are poised to legalize "recreational" marijuana beyond its medicinal use. Surprisingly, few healthcare and public health groups or leaders are pushing back on what will likely be our next public health crisis.

While opinion polls show that the public is open to cannabis use for medicinal purposes and even for recreational use, it is still considered by federal authorities to be a Schedule I substance, given its high potential for abuse and because it has no medicinal value. We don't hear about national or local surveys to learn about what the public knows about the risks and benefits of chronic marijuana use.

I reviewed the official language used in the acts, constitutional amendments, or voter initiatives of 33 states to see how these state legislatures explained the nature and extent of quality patient care as a rationale for legalizing medical marijuana. Quality markers for patient care ask if the treatment is (a) safe, (b) effective, (c)

evidence-based, (d) standard practice, and (e) patient-centered. I found that their language gives no assurance of quality patient care, except for the last marker: patient-centered.

We should know that medical marijuana laws were passed out of compassion for people suffering from diseases and conditions such as cancer, PTSD, Alzheimer's and AIDS. In fact, several of the acts are titled the "Compassionate Care Act." It is understandably unpopular to be against something that will help ease or placate conditions or diseases that plague people, but this does not change the fact that no medical body has endorsed its widespread use, and the federal agencies charged with drug control have not lifted their concerns for the dangers of this substance.

The accelerating movement to "normalize" the use of cannabis is based on a sociocultural movement, not biomedical evidence, wherein the risks outweigh any benefits. While the "fight to normalize marijuana use" has been with us for decades and has intensified, public information about its use — good, bad or indifferent — is scant.

For example, a review of nearly eight years and five months of the Health section of The Philadelphia Inquirer found that of the 444 issues reviewed, only 19 issues had an article about the health risks or benefits of the use of cannabis. Of all of the articles published, only one-half of 1 percent addressed the use of cannabis to readers in this fourth-largest media market in the United States.

Furthermore, expecting this nascent industry to act responsibly to "control" the substance, especially as it relates to getting minors to use it, is naïve. We have had decades of experience with youth onset to forbidden fruits (tobacco, alcohol, vaping), and we know that the public health and school systems are no match for these illness industries' marketing tactics.

Promises of "good health" have already begun just by looking at the names of retail outlets for cannabis that smack of innuendo, such as Curaleaf, Restore, Remedies and Beyond Hello. Taglines accompany the marketing efforts to see these products, with messaging as mild as don't worry to be happy, to actual remedies that cure (what ails you). Get ready for full-page print ads in newspapers, billboards, radio ads, teasers at public transit stops, and all the way to trade shows telling us: When used as intended ingesting cannabis is society's new elixir.

In the future, public health and healthcare advocates will be damming the corporation, given that Big Marijuana has poisoned our people. They will complain that they are exhausted from treating those "drowning" downstream, from the

injurious effects of marijuana use. We can avoid the next public health crisis in this country before legislatures, investors, marketers and the cottage industry retail outlets push people into the marijuana swamp.

If "following the science" is the new mantra for reasonable and responsible public health and healthcare policy, it should be curious why health-related organization leaders have not challenged those who are simply following the money if legislators normalize the use of marijuana in our country. The normalizing of the marijuana movement is getting a pass on following the science.

About the Author



Stephen F. Gambescia

Stephen F. Gambescia is professor of health services administration at Drexel University in Philadelphia. He is also author of the book "Every Child, No Matter How Many, Is Special." He wrote this for InsideSources.com.