

NEVADA KIDS COUNT

Marijuana Legalization

Background

On November 8, 2016, Nevada voters approved the Nevada Marijuana Legalization Initiative by a 10 point margin. As a result, legal sales of marijuana for recreational use of one ounce or less to adults 21 and older began on July 1, 2017 (Department of Taxation, 2017), as did taxation and regulation of the substance. Medical and recreational cultivators pay a 15 percent wholesale tax. This tax brought in more than \$974,000 in July of 2017, and it is expected to generate \$56.2 million over the next two years (Department of Taxation). Revenue from this tax helps fund Nevada schools. Marijuana consumers pay an additional 10 percent retail tax. This tax generated over \$2.7 million in July, and officials forecast that it will add \$63.5 million to state coffers over the next two years. Revenue for this tax enters the state's rainy day funds. Overall, marijuana taxes brought in \$3.68 million in July. The Department of Taxation had issued 250 licenses for recreational marijuana facilities by September with 203 of those going to stores in Clark County. The state charges an application fee of \$5,000 and a licensing fee between \$10,000 and \$30,000 (Department of Taxation).

Figure 1



Map from mapchart.net/usa.html Data from norml.org/laws

National Trends

Massachusetts, California, and Maine also voted to legalize recreational marijuana on November 8, 2016. Washington and Colorado were the first to legalize recreational sales in 2012, and Oregon and Washington, D.C. followed in 2014 (Garcia, 2017). Twenty-two other states allow medical marijuana use. Despite these state legalizations, the substance remains federally illegal, preventing marijuana vendors from using banking services. Regardless, legalization brought millions of dollars to state coffers. Between January 2014 and October 2017, Colorado generated \$596 million in revenue from legal marijuana taxes (Colorado Department of Revenue, 2017). Washington brought in \$189 million in 2016 from recreational marijuana, only \$12 million less than the state earned from alcohol taxes (Washington State Liquor and Cannabis Board, 2017). Oregon, where legal sales began in January 2016, has earned more than \$123 million in state and local taxes (Oregon Department of Revenue, 2017).

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Marijuana Poisoning

Poisoning

The chief concern with marijuana legalization has been child poisoning. Wang, Roosevelt, and Heard (2013) studied Colorado hospitals before and after the decriminalization of the drug in October 2009. From 2005 to September 2009, 0 of the 790 children under the age of 12 who went to a hospital for ingestion did so because of marijuana. Since 2009, 14 of 588 children have had a hospital ingestion-related visit. Of the 14 children, most suffered from lethargy or ataxia (loss of full body movement).

Wang *et al.* (2016) studied Colorado's marijuana legalization in 2012. In the two years prior to legal sales, there were 1.2 children's hospital visits per 100,000 individuals. In the two years after, the figure rose to 2.3. Pediatric visits related to marijuana rose from 9 in 2009 to 47 in 2015. Edibles accounted for over half of these cases in 2015. It is unclear, however, how much of this gain can be attributed to increased marijuana usage. Hospital visits might have risen because Coloradans felt more comfortable doing so after the drug became legal.

Nationally, however, marijuana represents a small proportion of poison center calls. In 2012, poison centers received only 254 calls for marijuana poisoning compared to almost 50,000 calls for ibuprofen, almost 20,000 for toothpaste, roughly 7,000 for tobacco, and more than 1,000 for alcohol (Ingraham, 2014). Still, these figures may not represent actual marijuana poisonings if people who live in areas where the substance is illegal are unwilling to call the centers for help.

Figures 2 and 3 show statistics from the Washington Poison Center's 2015 *Annual Cannabis Report*.

Figure 2

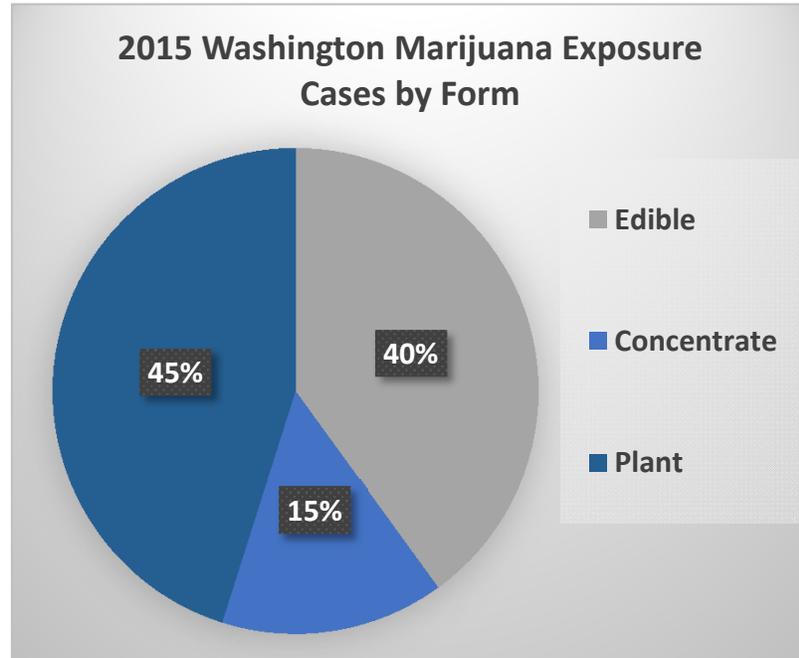
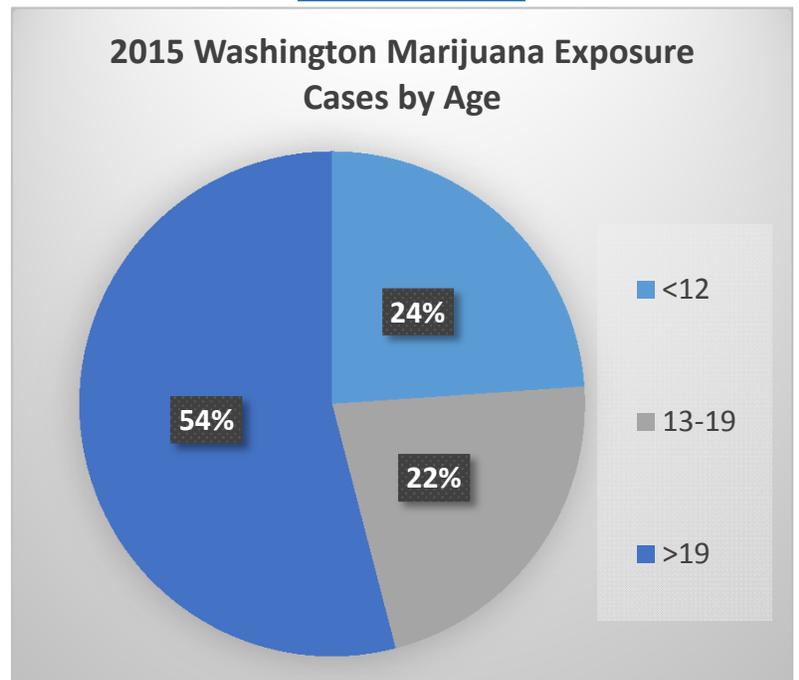


Figure 3



Figures 2 and 3 Source: <https://www.wapc.org/wp-content/uploads/WAPC-Toxic-Trends-Report-Cannabis-2015-Annual-Report-.pdf>

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Poison Prevention

Nevada requires stores to encase edible marijuana in child-resistant packaging (i.e., at least 4 millimeters thick and heat sealed). Nevada also demands metal crowns or cork-style caps for liquid forms of the substance. Similar requirements exist in every other state with recreational sales. State officials also mandate that edible marijuana products do not appeal to children. Colorado, for instance, bans them from taking the form of people, animals, or fruit and requires them to sit in opaque packaging. The state also forces sellers to stamp “THC” on baked marijuana products. As with tobacco, marijuana packaging warns potential users that there may be harms associated with smoking or eating the drug, but state laws do not required venders to specify these harms (Gourdet *et al.*, 2017).

Other Concerns

Pregnancy

Nationally, marijuana use by pregnant women rose from 2.4 percent in 2009 to 3.9 percent in 2014. Nevada does not require marijuana tests for pregnant women (Harasim, 2017). Other states, like Alabama, can test women against their consent and arrest them. The effect of marijuana on child development remains unclear. A 2000 study from Pittsburgh found that children of parents who smoked during pregnancy showed decreased reading comprehension and lower math tests scores (Goldschmidt, Day, & Richardson, 2000). In 1994, however, a study of Jamaican children found that those whose mothers smoked marijuana during pregnancy outperformed those who did not in stability, alertness, and self-regulation (Dreher, Nugent, & Hudgins, 1994). Regardless, pediatric associations recommend refraining from marijuana during pregnancy (Harasim, 2017).

Driving Under the Influence

In Colorado, marijuana DUIs make up a larger proportion of DUIs than they did before legalization. Total DUIs, however, have declined since stores began selling the drug. Colorado State Police credit the increase in marijuana DUI citations to the force’s enhanced ability to recognize stoned driving rather than an increase in the number of stoned drivers (Lochhead, 2017).

Public Consumption

Colorado, like other states, banned public marijuana smoking. This occurred regardless, leading to complaints from downtown tourists and residents. Denver police cited 760 people in the 2014 and 2015 for public marijuana consumption. Because of the public consumption ban, many buyers opt for edible marijuana. This form can be more dangerous, however, as people unwittingly take large doses. Others worry about marijuana’s effect on tourism. Organizations have warned that the city’s large homeless population might discourage the holding of conventions. Overall, however, the tourism industry has been increasing since marijuana became legal (Lochhead, 2017).

Teen Marijuana Usage

Colorado conducts a biennial survey of about 17,000 teens. According to this survey, teen marijuana usage has been falling since 2009. In 2009, 25 percent of teens used the drug. In 2015, this figure dropped to 21 percent. In other words, legalization did not seem to increase teen usage (Lochhead, 2017).

Miscellaneous Facts

- There is no chemical difference between recreation and medical marijuana.
- Most marijuana users do not move on to harder drugs.
- Seventeen percent of teens and 9 percent of adults who use marijuana will become addicted. This is close to the same rate as alcohol.
- Due to its illegality, research regarding marijuana is limited. The Adolescent Brain Cognitive Development study, which began in 2015, studies the long-term effects of youth marijuana smoking.
- There are no reported deaths from marijuana overdose.

Facts from Web MD: <https://www.webmd.com/mental-health/addiction/recreational-marijuana-faq>

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Taxes

Where does the tax revenue go?



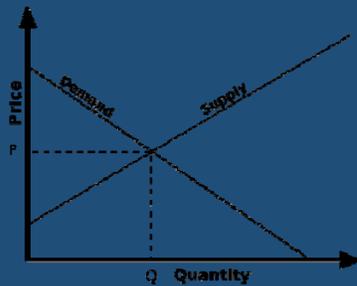
EDUCATION



PUBLIC HEALTH



POLICE



ECONOMIC DEVELOPMENT



ENVIRONMENT



RAINY DAY FUND

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State Uses of Revenue

The Colorado Department of Education (CDE) expects \$90 million in tax revenue from recreational marijuana in the 2017-2018 school year. The first \$40 million will fund school construction. Other money disbursed to schools will include \$4.4 million to early literacy, \$11.9 million toward school health, \$2 million to anti-bullying programs, and \$30 million to the general fund for schools (CDE, 2017).

Washington expects over \$730 million from legal marijuana tax revenue from 2017-2019. More than 60 percent of this revenue will fund public health programs (including Medicaid), substance abuse prevention, and community healthcare. The remaining \$211 million goes toward the state's general fund, with \$30 million of that going to local governments. Lawmakers are currently debating some of these funds to education (Santos, 2017).

Oregon received \$87.5 million in its first year of recreational marijuana sales. It sent \$34 million to public schools, \$17 million to mental health and drug addiction services, \$12.75 million to the Oregon State Police, and \$4.25 million to the Oregon Health Authority (Crombie, 2017).

California expects to generate a billion dollars in its first year of recreational marijuana sales. The state will send \$10 million to public universities to study the effects of the legalization, \$3 million to the highway patrol, and \$10 million to economic development. The remaining funds will be split as follows: 60 percent will go to drug education, prevention, and treatment; 20 percent will go to the state's environmental fund; and the final 20 percent will go to state law enforcement (Williams, 2016).

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