I was surprised to hear that Commissioner Chen is not familiar with the question behind the statistic. Here is the link to the YRBS survey (question 98).

http://healthvermont.gov/research/yrbs/2015/documents/questionnaire_vth.pdf

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"The plain and simple truth is that alcohol fuels violent behavior and marijuana does not... alcohol contributes to literally millions of acts of violence in the United States each year. It is a major contributing factor to crimes like domestic violence, sexual assault, and homicide. Marijuana use, on the other hand, is absent in that regard from both crime reports and the scientific literature. There is simply no causal link to be found." –former Seattle Police Chief Norm Stamper, from the foreword to Marijuana is Safer: So Why Are We Driving People to Drink? (2009, Chelsea Green Publishing).

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On Thu, Apr 7, 2016 at 8:27 AM, Matt Simon <msimon@mpp.org> wrote:

Dear Members of the House Judiciary Committee,

For decades, efforts to discourage youth marijuana consumption have focused on one primary goal: maximizing teens' perception of great risk associated with marijuana. In the 1980's, teens were routinely told, for example, that marijuana kills brain cells and has no legitimate medical uses. Here's another warning that was sometimes heard in the 1980's:

"There are well-known endocrine effects of marijuana. Specifically it interferes with the expression of testosterone, leading to gynecomastia (breast enlargement) and possibly testicular atrophy in males, heavy users being the most susceptible to these effects."

There was never a shred of actual evidence to support the "gynecomastia" claim, and frankly, I never expected to hear it again in public discourse. Sadly, the above quote is not from the 1980's. It's from a 2016 op-ed published by a Vermont pediatrician in Times Argus!

The merits of this approach in the 1980's, before the development of the internet, were perhaps debatable. However, today it is very easy for young people to fact-check the messages they are receiving about marijuana. This can easily lead to a situation in which educators and parents lose credibility on these issues in the minds of youth.

I also think it's very important to look at the specific wording of the YRBS survey question that is the source for much of this "risk" discussion (screenshot attached). You may be surprised to see that the question is multiple choice and includes "slight risk," "moderate risk," and "great risk" as options.

First, I think we should acknowledge that "great risk" is a subjective term (as is "regularly"). Most kids know marijuana isn't as dangerous as they may have been told, and that it isn't nearly as risky as heroin (or for that matter binge drinking), but that doesn't mean they think the risks are zero. It seems to me that the perception of "moderate" risk (as opposed to "great" risk) may be more than enough to deter most adolescent use — especially when we consider the tragic increase in fatal overdoses associated with opiates, which are obviously "great risk."

For some reason, the YRBS report itself does not explain that "moderate risk" was an option for respondents. I do not understand why YRBS answers are presented the way they are (screenshot attached), but I hope you will agree that including the "moderate risk" answers would present a more complete picture of what teens are thinking. (The options obviously aren't simply "great risk" on one hand and "harmless" or "safe" on the other.)

More generally, I believe policymakers face an important question moving forward: Should the goal of marijuana education be to increase teens' perception of risk? Or should it be to increase teens' understanding of marijuana? On that score, I hope you will decide to lean toward the latter and away from the former.

Thank you again for your time and continue consideration of these important issues.

Sincerely,

Matt

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