The Marijuana Experiment

Considerations Of Legalization In Illinois
Marijuana History

• First recorded reference – 2737 BC by Chinese Emperor Shen Nung
  • Used as intoxicant
  • Also used as medicine – gout, rheumatism and absent-mindedness
• India – Muslims used it as intoxicant
  • Alcohol is forbidden in the Koran
• Reached Europe in 500 AD
• Hashish introduced in 12th Century Iran and Central Africa
Marijuana in the United States

- Introduced by the Spanish in 1611
  - Used as cash crop (hemp)
- 1920’s – caught on in U.S.
  - Jazz clubs and tea pads
  - Reefer songs
  - Marijuana was not considered a social threat
1936 – Reefer Madness
1930’s - Marijuana Messaging...

- Based on scare tactics
- Moral argument
- Impactful – yet short lived
- Not based on science or research
- Ushers in “Reefer Madness” era
- Uses emotion as an argument
Reefer Madness

The Movie

- Funded by a church group
- 68 minutes long
- All smoke marijuana
  - Pedestrian killed
  - Pre-marital sex
  - Attempted rape
  - Friends kill one another
  - Insanity
  - Put in criminal asylum
  - End of movie – “This could happen to your son – and your daughter, etc…”
- TELL YOUR CHILDREN!
Marijuana in the 1930’s
Opinions Changed…

Percent of Boomers (born 1946-1964) who favor legalization

In 1978, Boomer adults were 18-32 years old.

1990
Ages 26-44

2013
Ages 49-67
Woodstock Weed

- Potency about 3-4% THC
- 72% of all pot was imported
- Primarily leaves, stems, flowers and hodgepodge pieces of the plant
- Brought into the country in bricks
- Smoked – maybe pot brownies
Marijuana – 1970’s and 1980’s

• DEA created
• Schedule I drug by President Nixon
• 11 states decriminalized – Ohio was one of these states
• 1972 – War on Drugs – President Nixon
• 1976 – national parents group organizations targeted marijuana
• 1986 – Just Say No by Nancy Reagan
“When I was in England, I tried it a time or two. I didn’t inhale and I didn’t like it and never tried it again.”

—Bill Clinton (March, 1992)
California Introduces “Medical” Marijuana in 1996

- California Proposition 215
- California marijuana activist Dennis Peron
- Medicinal properties to give comfort to HIV patients
- Won with 55.5% of the vote
- Opposition said law was too vague
- Compassion won over voters
Politicians Changed…

“Look, when I was a kid, I inhaled. Frequently. That was the point.”

–Barack Obama (October, 2006)

“Marijuana is not a drug. It’s a leaf.”

–Arnold Schwarzenegger (October, 2007)
Marijuana Status (Medicinal) - 29 States and DC

- California – 1996
- Alaska – 1998
- Oregon – 1998
- Washington – 1998
- Maine – 1999
- Colorado – 2000
- Hawaii - 2000
- Nevada – 2000
- Montana – 2004
- Vermont – 2004
- Rhode Island – 2006
- New Mexico – 2007
- Michigan – 2008
- Arizona - 2010
- DC – 2010
- New Jersey – 2010
- Delaware – 2011
- Connecticut – 2012
- Massachusetts - 2012
- Illinois – 2013
- New Hampshire – 2013
- Maryland – 2014
- Minnesota – 2014
- New York – 2014
- Pennsylvania – 2016
- Ohio – 2016
- Arkansas - 2016
- Florida - 2016
- North Dakota - 2016
- West Virginia - 2017
# Marijuana Status (CBD States) - 17 States

<table>
<thead>
<tr>
<th>Alabama</th>
<th>Oklahoma</th>
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<tr>
<td>Florida</td>
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<td>Georgia</td>
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<td>Missouri</td>
<td>Wyoming</td>
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<td>North Carolina</td>
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Cannabidiol Medications

- Children with Seizure Issues
- Charlotte’s Web (Charlotte Figi) – Stanley Brothers
- Epidiolex (GW Pharmaceuticals)
- Epilepsy Foundation – Need for more testing
Who Are the Cardholders?

In states where measured, patients:

- Have less than 5% of all patients have the life threatening issues
- Over 90% use for chronic pain
- Average cardholder - 32 year old white male with no history of chronic illness and a history of substance abuse
Pharmaceutical Grade vs. Artisanal Grade

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<tr>
<th>Pharmaceutical Grade</th>
<th>Artisanal Grade</th>
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<tr>
<td>Reduces seizures from 12.4 to 5.9 daily (5% became seizure free)</td>
<td>No data</td>
</tr>
<tr>
<td>Consistent dosage</td>
<td>“Inaccurate product labeling is pervasive.”</td>
</tr>
<tr>
<td>Sterile and Pure CBD</td>
<td>17% accurately labeled, 23% higher CBD, 60% lower CBD</td>
</tr>
<tr>
<td>CBD bought online and in stores in Ohio still illegal</td>
<td>Contaminated with neurotoxic substances such as mycotoxins, organic solvents, pesticides, and heavy metals</td>
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*New England Journal of Medicine – May 25, 2017*
Marijuana and Pesticides Lawsuit

• First product liability claim lawsuit for marijuana
• Grower (LivWell) used pesticide (Eagle EW20 - myclobutanil)
• Not to be used in heating (banned from tobacco products)
• When heated, breaks down to "poisonous hydrogen cyanide"
• Testing not complete for what pesticides are safe for marijuana
• Attorney Alison Malsbury says “harbinger of things to come”
Marijuana as Medicine

- Over 400 components in marijuana
- Components have promise
  - THC – Aid in appetite
  - CBD – Seizures and aid in appetite
- In process
  - HU308 – Bladder control; chronic pain treatment
  - HU331 – Hypertension
- Cannabis-based medications
  - Marinol – Synthetic THC – nausea for AIDS patients
  - Sativex – pain and spasticity in patients; cancer patients
  - Epidiolex – seizure activity; children with seizure issues
  - Nabilone – synthetic CBD/THC – nausea for cancer patients
2018 States of Interest

- Illinois
- Arizona
- Maryland
- New Mexico
- Michigan
- Rhode Island
- New Jersey
- Connecticut
- Vermont
Are you experiencing?
• Lack of excitement?
• An unexplainable need to check your phone?
• Loss of consciousness?
  • Drooling?
• Inexplicable head ache?
  • Nodding?
  • Daydreaming?

Then YOU Need a Boredom Break!
POP QUIZ!

How many dispensary owners in Washington are a minority?

- 75%
- 50%
- 27%
- <1%
POP QUIZ!

How many dispensary owners in Washington are a minority?

- <1%
Marijuana can be addictive*

• In 2014, 4.176 million people in the U.S. abused or were dependent on marijuana; 138,000 voluntarily sought treatment for their marijuana use.

• 1 out of 11 users become addicted

• People who begin using marijuana before the age of 18 are 4 to 7 times more likely to develop a marijuana use disorder than adults.

• Marijuana use disorders are often associated with dependence—
  • Marijuana dependence occurs when the brain adapts to large amounts of the drug by reducing production of and sensitivity to its own endocannabinoid neurotransmitters.
  • Frequent marijuana users often report irritability, mood and sleep difficulties, decreased appetite, cravings, restlessness, and/or various forms of physical discomfort that peak within the first week after quitting and last up to 2 weeks.

*National Institutes of Health
Cannabinoid Hyperemesis Syndrome

- Identified in 2009
- Cannabis use for years and on a weekly basis
- Began young

**Symptoms**
- Severe nausea and vomiting
- Vomiting in cycle over a few months
- Colicky abdominal pain

**Short Term Fix**
- Immersion in hot water

**Long Term Fix**
- Quit cannabis use
The New Marijuana
Marijuana Edibles

- KIVA Chocolate Bars
- Dandy Candy
- Kandy Care Cotton Candy
Meet Claude…

- Black Cherry Gummy Bear
  - THC Infused
  - 100 milligrams of THC per bear
  - Colorado law – 10 mg per serving
  - Foot = one serving
Wyoming College Student

- Levy Thamba Pongi – Northwest College
- Ate one marijuana cookie – recommended serving size was 1/6 of a cookie.
- Jumped out of window
- Autopsy – marijuana intoxication was a “significant contributing factor.”
Kristine Kirk

- Husband ate a marijuana candy
- Started hallucinating
- Told wife to shoot him
- On phone with 911, he killed her
Marijuana Wax

- Highest potency of marijuana on the market and quicker high
- Created by using butane to extract "hash oil" or "butane hash oil (BHO) from marijuana plant
- Marijuana put in long tube and then heated with butane.
Waxing Creation

Issues

• Wax is to marijuana as freebasing is to cocaine
• Vapors fill room and ignite with a spark
• Risk of burns and homes blowing up
• Learn how to cook wax on YouTube
• FEMA issued bulletin in February to identify BHO production
• 32 hash oil explosions in Colorado in 2014 and 0 in 2012
• Closed Wax System – more expensive
Marijuana Transformation: The High

- Blogs have called it the “future of cannabis”
- Can Exceed 80% THC
- Hallucinations
- Immediate high – edibles take about 30-45 minutes
- Described as an intense experience, even for seasoned marijuana users
Dabbing and Vaping

Marijuana Vaporizer

Reviews
Allen St. Pierre – NORML Executive Director

"Between the fact that you can potentially pass out with a single inhalation, or you can have such property damage and potential bodily harm just producing it ... these [issues of the vape pen] definitely need to be addressed. This is a screaming call for regulation if there ever was one.“ – NPR (April 18, 2014)
User Testimony

I bought a vape recently (ascent by da vinci) tried it last night and was bad! First time I've ever had a bad experience with weed.

I filled up the chamber toked away till there was no more vapor and felt like f--- its not doing anything then 5minutes later boom it crept up on me and I felt good giggily high but also really energised and on edge which was weird as never felt like that 15 minutes later.

got another wave but was mad intense I felt my heart beating real fast i was shaking kind of spasming lol and I felt warm which was real weird as I was cold before this. tested my heart rate on phone app was at 130bpm (felt like I'd done coke or some s--- lol, never have done btw but that's what I thought it would feel like lol)

anyway I listened to some music and watched some TV for about 20 or so minutes but couldn't f------ sit still or concentrate kept fidgeting then got another wave like a hot flush and became well to aware of my body and how hot I was and s--- and then thought f--- it I got to try slow my heart rate down and stop shaking (never uncontrollably moved before on weed) so checked my heart rate one more time before lying down in my bed was at 150!
... And In Print
What Employers Need to Know about Legalization of Marijuana

Business Impact
Legalization and employers
Employer Concerns

- Liability for injuries or damages caused by impaired employees
- Compliance with state and federal workplace policies – OSHA, DOT, “safety sensitive” positions
- Worker’s Compensation and drug free workplace
- Hiring, disciplining and firing employees
  - Discrimination?
- Guidelines for accommodations and leave requests
Employer Protection

- Employers can fire an employee for marijuana use
- Still adhere to drug free workplace
- But…
  - Numbers in Colorado show there will be an increase of adult use, so will there be enough qualified workers?
  - How can they keep workers on staff?
  - Possibility of a lawsuit
Workplace Tests

<table>
<thead>
<tr>
<th></th>
<th>2012-2013</th>
<th>2013-2014</th>
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<tbody>
<tr>
<td>US Workplace</td>
<td>5%</td>
<td>14.3%</td>
</tr>
<tr>
<td>Colorado</td>
<td>20%</td>
<td>14%</td>
</tr>
<tr>
<td>Washington</td>
<td>23%</td>
<td>16%</td>
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Quest Diagnostics Employee Drug Testing (2015)
• Positive results nationally have increased by 14% since 2013
• Double digit increases in Colorado (20%/14%) and Washington (23%/16%)
• 415,000 estimated pot users in the workforce in Colorado in 2013
• Marijuana most frequently for positive tests
• In 2013, 29 percent of college age students (ages 18 to 25 years old) were considered current marijuana users compared to 18.91 percent nationally. Colorado, ranked 2nd in the nation, was 54 percent higher than the national average.

• In 2013, 10.13 percent of adults ages 26 years old and over were considered current marijuana users compared to 5.45 percent nationally. Colorado, ranked 5th in the nation, was 86 percent higher than the national average.

• Probationers age 18 to 25 and 26+ years old testing positive for marijuana increased 49 and 87 percent respectively since marijuana was legalized in 2013.
Marijuana Use and Employers

Journal of the American Medical Association (The Efficacy of Pre-employment Drug Screening for Marijuana and Cocaine in Predicting Employment Outcome)

- Marijuana users:
  - 78% more absenteeism,
  - 85% more workplace injuries
  - 64% more discipline problems
  - 55% more industrial accidents

- Marijuana is the number one drug detected in workplace illicit-drug testing. Among the 7.1 million drug tests for the combined U.S. Workforce conducted by Quest Diagnostics, nearly 55% of positive drug tests were for marijuana, followed by 14.6% for cocaine and 9.3% for amphetamines.

- As many as 3 of 25 non-fatally injured drivers (12%) and 4 of 25 fatally injured drivers (16%) had marijuana (THC) in their bloodstream at the time of accident.

  Source: Marijuana Impairs Driving-Related Skills and Workplace Performance, National Institute on Drug Abuse
Business Concerns – Employer Wins

**Discrimination Suits**
- Michigan – Joseph Casias sued his employer
- Maine – Brittany Thomas sues Adecco
- Colorado – Brandon Coats sued Dish Network
- Rhode Island – State court ruled
However...

- **WSJ article** - "Medical Marijuana Poses Litigation Risk to Employers." (August 15, 2013) – Cost employers between $69,000 and $107,000 in costs, not including any award.
- **Oregon** – Bill to eliminate marijuana from employee drug testing
- **Avalanche Roofing and Exteriors in Colorado Springs** – “to find a roofer or a painter that can pass a drug test is unheard of.”
College and University Impact

Legalization and College Campus
Impact on Colleges

• Federally schedule I drug
• Conflict with state law
• Federal funding
• Federal financial aid
• NCAA Considerations
• Off-campus use
Grades and Retention

- Maryland School of Public Health (June, 2013)
- Study followed 1200 college students over 10 years
- College students skipped more classes, earned lower grades and dropped out more often
- Unemployment rates higher after college
- 15 times or more per month – twice as likely to have experience “discontinuous enrollment”
Marijuana use corresponds with undesirable social outcomes such as unemployment.

New Zealand study showing relationship between marijuana use and social outcomes.

- % gained university degree (by age 25):
  - Never: 36%
  - 1 to 99: 27%
  - 100 to 199: 9%
  - 200 to 299: 0%
  - 300 to 399: 11%
  - 400+:

- % unemployed (ages 21-25):
  - Never: 52%
  - 1 to 99: 41%
  - 100 to 199: 25%
  - 200 to 299: 23%
  - 300 to 399: 19%
  - 400+:

- % welfare dependent (ages 21-25):
  - Never: 57%
  - 1 to 99: 42%
  - 100 to 199: 25%
  - 200 to 299: 23%
  - 300 to 399: 21%
  - 400+:

Source: Fergusson and Boden. Addiction, 103, pp. 969-976, 2008 [New Zealand study]
Mental Health Impact

Marijuana and Mental health

Cannabis consumption at age 18 and later risk of schizophrenia

Andreason et al, 1987
Northwestern Medicine at Northwestern University

1. December, 2013 – Brain Abnormalities with Chronic Use
   • “The younger drug abuse starts, the more abnormal the brain.”
   • Of schizophrenia patients surveyed, 90% used before schizophrenia set in

2. April, 2014 – Casual Marijuana Use Linked to Brain Abnormalities
   • Changed the volume, shape and density of gray matter in brain – effects on decision making
   • “I’ve developed a severe worry about whether we should be allowing anybody under age 30 to use pot unless they have a terminal illness and need it for pain.”

3. March 2015 - Teen cannabis users have poor long-term memory in adulthood
   • Daily users – Hippocampus changes that influenced memory (18% worse on long term memory tests)
   • Two years marijuana free and did not change results
Marijuana and Mental Health?

- Since 2002, almost a dozen studies have shown that regular use of marijuana carries a **significant increased risk** of developing psychotic illnesses like schizophrenia.
- Higher risk for:
  - Those with a family history of the disorders
  - Those with a psychosis-prone personality
  - Those who start using in early adolescence.
- Risks increase with potency and frequency of use.
Meta-analysis was conducted by Australian researchers in 2011 for the *Archives of General Psychiatry*

- used 83 studies to assess the impact of marijuana use on the early onset of psychotic illness.

The findings were clear and consistent: “The results of meta-analysis provide evidence for a relationship between cannabis use and earlier onset of psychotic illness…[The] results suggest the need for renewed warnings about the potentially harmful effects of cannabis.”
Marijuana use corresponds with undesirable social outcomes such as unemployment

New Zealand study showing relationship between marijuana use and social outcomes

- % gained university degree (by age 25)
  - Never: 2%
  - 1 to 99: 9%
  - 100 to 199: 11%
  - 200 to 299: 19%
  - 300 to 399: 27%
  - 400+: 36%

- % unemployed (ages 21-25)
  - Never: 21%
  - 1 to 99: 23%
  - 100 to 199: 25%
  - 200 to 299: 42%
  - 300 to 399: 41%
  - 400+: 52%

- % welfare dependent (ages 21-25)
  - Never: 25%
  - 1 to 99: 23%
  - 100 to 199: 25%
  - 200 to 299: 42%
  - 300 to 399: 41%
  - 400+: 57%

Source: Fergusson and Boden. Addiction, 103, pp. 969-976, 2008 [New Zealand study]
• Higher potency weed may be linked to increase in likelihood of psychotic episode.

• Weekly user of high potency weed (15% THC) content were 3 times more likely to be diagnosed with a psychotic episode.

• Daily use – 5 times more likely
Impact on the Community

Legalization and community concerns

*Note: marijuana is still a Schedule I substance under federal law

states with:
- legalized marijuana
- decriminalized marijuana possession laws
- legal medical marijuana
- medical marijuana & decriminalized marijuana possession laws
Marijuana Youth Use Rates

Ages 12-17 past month use

NSDUH State Estimates
Average Past Month Use – Age 12-17 (2013-2014)

- Non-Medical Marijuana States: 5.99%
- Medical Marijuana States: 8.52%
- Legalized Marijuana States: 11.31%

Source: Rocky Mountain HIDTA
Youth Marijuana Use

Past Month Usage by 12 to 17 Years Old, 2013/2014

- Legalized Recreational/Medical Marijuana State
- Legalized Medicinal Marijuana State
- Non-Legalized Medicinal Marijuana State

SOURCE: SAMHSA.gov, National Survey on Drug Use and Health 2013 and 2014

NOTE:
* Oregon and Alaska voted to legalize recreational marijuana in November 2014
** States that had legislation for medical marijuana signed into effect during 2014
Drug Related Expulsions - Colorado

Source: Rocky Mountain HIDTA
Traffic Fatalities Since Legalization

Washington – Driving While High

Colorado – Traffic fatalities where operator tested for marijuana

Washington Traffic Safety Commission

Rocky Mountain HIDTA Report, 2016
Teen drivers

Liberty Mutual/SADD survey (USA Today Reporting)

- 19% admitted to driving after smoking marijuana
- 36% - marijuana smoking no distraction while driving
- 34% who admitted to smoking while high said it made them a better driver
Homeless Influx Into Denver?

- Homeless shelters say increase because of medicinal and legal pot.
- Older – medicinal; younger – recreational
- Up to estimated 30% relocated for marijuana (Denver’s Salvation Army Crossroads Shelter)
- Denver’s Saint Francis Center – “300 new faces per month” – many were drawn because of legal marijuana
- Urban Peak – youth-oriented homeless program – up 328 homeless young adults.
  - 1/3 cite legal marijuana for moving to Denver
Marijuana Taxes

- Colorado’s Governor’s Office - $107 million in taxes
- Tourists account for 90% in resort towns
- 50% of all sales in Denver
- Colorado - estimated 40% of marijuana sold on black market
- Oregon – 70% of marijuana is sold on the black market
- SAM Costs Report – Rhode Island legalization would cost 26% more than tax revenue raised.
The total overall costs of substance abuse in the U.S., including productivity, health and crime-related costs:

• $185 billion for alcohol
• $193 billion for tobacco

Federal ($9 billion) and state ($5.5 billion) alcohol taxes raise $14.5 billion.

Federal and state tobacco taxes raise $25 billion.
Colorado – Not just pot?
Colorado Director of Marijuana Coordination

- Andrew Freedman – Colorado Marijuana Czar
- Interview with Boston Herald Radio (June, 2015)
- “You do not legalize for taxation. It is a myth. You are not going to pave streets. You are not going to be able to pay teachers. The big red herring is the whole thing that the tax revenue will solve a bunch of crises. But it won’t.”
- The tax dollars brought in largely go toward the “cost of legalization.”
People are not put in prison for small time marijuana use today. Ohio Prison statistics reveal that less than 1% of inmates are behind bars for marijuana possession.

Racial Disparity
• Not an issue exclusive to marijuana
• Drug Policy Alliance review of Colorado – Post legalization – African Americans are still arrested at a higher rate than whites for marijuana crimes.
Racial Disparity and Marijuana

YOUTH POT ARRESTS

Source: Colorado Dept. of Public Safety (March, 2016)
Denver Crime – Since Legalization in 2014

Percent change from 2014 to 2016 (2016 data extrapolated from NIBRS reports from Jan to Sept). Source: Denver Police Department
Marijuana-Related ER Visits

Poison Control Calls in CO

- All Ages
- Ages 0-8
Legalization = Commercialization

• With legalization comes market for stronger, more intense high
• Very little research done on higher potency weed
• Little to no regulation on high-concentrate pot products
Questions?
Resources and Contact Information

Tony Coder

tony@learnaboutsam.org
tcoder@DrugFreeActionAlliance.org

www.Medicalmarijuana.ohio.gov
www.learnaboutsam.org
www.drugabuse.gov/drugs-abuse/marijuana
www.cdc.gov/marijuana
www.drugfreeactionalliance.org/marijuana
AN INTRODUCTION TO ADVOCACY

Community-based Transformation Through Effective Activism
ADVOCACY

Does public health have a role?
ADVOCACY IS A FOUR-LEGGED STOOL

- Direct Lobbying
- Grassroots Advocacy
- Media and Public Relations
- Campaign Contributions
WHAT IS ADVOCACY?

Advocates …

- build relationships with others
- plead the cause on behalf of others / are persuasive
- give information to legislators, elected officials, and decision-makers in the hope that leaders will be influenced to support those viewpoints
- identify problems that need to be addressed, contact legislators, and encourage them to guide the bill through the legislative process
- Advocacy is a process and not an event
THE “GOOD” DEFINITION

• Advocacy is arguing in favor of something such as a cause, idea or policy. One can engage in advocacy by meeting with a legislator on an important issue, writing an editorial for a newspaper, raising awareness for a cause at a community event, or even promoting an issue while having dinner with friends. Advocacy occurs when an individual engages in dialogue about an issue they care about. It can occur in many forms --- speaking out, letter writing, protesting, voting and even wearing a t-shirt that makes a statement.

- Cal State Fullerton Political Science Department
SHOULD NON-PROFITS ADVOCATE?

Chronicle of Philanthropy

- Over 1 million non-profits in the U.S.
- Non-profits account for 7.2% of the Gross Domestic Product
- 2% of all non-profit funding goes to advocacy
WHO IS TELLING THE STORY?

AP Story – September 18, 2016

- Opioid epidemic and pharmaceutical lobbying
- $880 million in lobbying with 1350 lobbyists over past decade
- $14 million spent at statewide level in 2014 alone
- Never testify – all done in private meetings
- 38 pot lobbyists in Colorado
LOBBYING – WHAT CAN I DO?

 большим

Any **person** can lobby

Non-profits **can** lobby – but…

- No federal funds – use non-restricted funds
- Matching monies to obtain federal funds can’t be used
- Use unrestricted funds for lobbying activities
ADVOCACY VS. LOBBYING

**Advocacy**
- Education about issues
- Sharing information generally about issue
- Response on issue
- Discussion on problem
- 501c3 – tax deductible

**Lobbying**
- Specific position on legislation
- Call for Action on legislation
- Communication with legislator to state view of legislation
- 501c4 – tax deductible
SITUATIONS

Advocacy

• Telling your member of Congress how a federal grant your organization received has helped your constituents.
• Educating a member of Congress about the effects of a policy (but not a specific piece of legislation) on your constituency.
• Inviting a member of Congress to visit your organization so that he/she may see firsthand how federal funding or a policy affects day-to-day operations and the difference it makes.

Lobbying

• Asking your member of Congress to vote for or against, or amend, introduced legislation.
• Emailing a “call to action” to your members urging them to contact their member of Congress in support of action on introduced legislation or pending regulations.
• Preparing materials or organizing events in support of lobbying activities.
• Supporting a specific candidate (never allowed for a non-profit)
ADVOCACY OR LOBBYING

- House Bill 73 – Prevention curriculum to be put in schools.
- Prevention funding and then bill introduced
- Work with legislator on bill draft
- House Bill 73 – Asked by a legislator to testify
- Ballot initiative
- Campaign to reduce underage drinking
- House Bill 73 – Board member speaks out on bill
- Have your legislator conduct an investigation
AVENUES OF ADVOCACY – HOW CAN I ADVOCATE FOR SOMETHING?

- Need for a local ordinance
- Statewide program
- Legislative or community leader
- Business
- General public
- Traditional media
- Social media
METHODS OF ADVOCACY

- Email, fax, or letter
- Telephone call
- Social media
- In-person meeting
Most representatives/senators /businesses have an active social media presence

- Average citizens are more likely to visit Facebook or Twitter than a specific website devoted to an issue.

- Information from friends and family is more trustworthy than what is presented on the news (Wilford, 2012).

Follow similar rules to email and phone contact – People get into trouble on social media

- Focus on the issue and don’t get political
- Social media encourages two-way communication
- Understand social media platforms
- Present a measured view; social media is often viewed as reactionary and emotional
RIP Nelson Mandela. Your "I Have A Dream" speech was so inspiring. An amazing man. ❤️

I find it ironic that Detroit is known as the #motorcity and yet no one here knows how to fueling drive
SHOULD NON-PROFITS LOBBY?

Companies and organizations spent $3.22 billion on lobbying in 2015.
LOBBYING FOR 501(C)(3)

1) “Insubstantial Part” test (huh?)
   - Since 1934, the IRS dictates that “no substantial part of a charity’s activities… be carrying on propaganda or otherwise attempting to influence legislation. “Insubstantial” is not further defined.
   - Unfortunately, this has led many nonprofits to tiny amounts of lobbying.

2) Section 501(h) election
   - Simple IRS form (one pager) that gives a more clearly defined accounting of lobbying activity. (Form 5768)
   - Provides clear definition of lobbying expenditures
   - No federal funding to be used.
LOBBYING FOR 501C3 NON PROFITS

- NO FEDERAL FUNDS CAN BE USED FOR LOBBYING!!!

- Section 501(h)
  - 20% of the first $500,000 of exempt purpose expenditures, plus
  - 15% of the next $500,000 of exempt purpose expenditures, plus
  - 10% of the next $500,000 of exempt purpose expenditures, plus
  - 5% of the remaining exempt purposes expenditures
  - up to a total cap of $1 million.
WHAT ARE YOU SAYING?

Building a Strategic Communication Plan
What are we learning?

• Is communication important? Why?
• Do I need a communication plan?
• Why can’t I just “wing it?”
• How do I create the strategic communication plan?
• Evaluating and maintaining the plan
COMMUNICATION:

• Tells the story that you want to tell
• You control your message
• Shares information with others about you and your organization
• Can create public awareness
• Can create a sense of connection with the organization and the subject area
• Platform to show that you are a good community partner
• Takes the technical aspect out of it for general public consumption
'We have a matter that’s not performing to design, O southwestern Texas city.'
- James Lovell
“Houston, we have a problem.”
- James Lovell
Apollo 13 Control Commander
• To be perfectly honest, woman, I could care less
• You may proceed in creating the time between sunrise and sunset
• You may now greet my miniature companion
• There isn’t a site that is like that of one’s birthplace

• Frankly, my dear, I don’t give a damn
• Go ahead – make my day
• Say hello to my little friend
• There’s no place like home
General Motors
• Lesson in communication
• 13 people killed
• Review of 41 million documents over 15 years
• GM would not issue recall for 11 years

Because of two words…
“CUSTOMER CONVENIENCE”

• Switch did not meet specifications

• Was listed as “customer convenience” issue
  ✓ No sense of urgency in those words

• If listed as “safety defect,” things would have changed.

• Powerpoints designed by GM:
  ❖ “issue, condition or matter” instead of “problem”
  ❖ “Defect” became “does not perform to design”
WHY CAN’T I JUST “WING IT?”

- Strategic Communication Plan
- Helps “Big Picture” Approach
  - What Are You Doing?
  - Why Are You Doing What You are Doing?
  - How Are You Doing It?
  - Who are You Talking To?
- Evaluate Status Quo – Where Are You Going?
- Look At It Yearly – Evaluate the Plan
  - Most need to change every 3-5 years
PLAN VERSUS STRATEGY

COMMUNICATION PLAN

• Check off List
• Grocery Shopping
  • Listing of foods
  • Check off each one

STRATEGIC COMMUNICATION PLAN

• What are you trying to achieve?
• Grocery Shopping
  • Menu for the week
  • Health concerns
  • Dietary goals
CREATING A STRATEGIC COMMUNICATION PLAN

1. Determine Goal
2. Identify and Profile Audience
3. Establish Partnerships
4. Develop Messages
5. Select Communication Channels
6. Choose Activities and Materials
7. Implement the Plan
8. Evaluate and Make Mid-Year Corrections
DETERMINE YOUR GOAL

- Establish a set of clear and measurable goals for communication
- Goals should be specific and measurable
- Keep to a minimal number of goals

Goals

1. 
2. 
3. 
GOAL – THINGS TO CONSIDER

1. This will take time and possibly money
2. Make sure you have the right folks at the table
3. Single goal could be multiple messages
4. If you spend more than a meeting or two on this, perhaps choose an alternative.
DETERMINE YOUR GOAL

Examine your organization

1. Values of your organization
2. Goals of your organization
   - Describe yourself in five words
4. Are you prevention or health promotion? (Journal of AMA)
   - Preventing – averting the occurrence of disease
   - Health Promotion – not absence of disease but comprehensive positive attitude toward health
5. What issue is most important to your organization right now?
Goals in your Community

1. Who is most affected by your coalition goals?

2. Who makes decisions about issues in your community?
   a) Leadership buy-in is important in communication

3. What is the overall goal in working with your community?
   a) Community change

4. What tangible outcomes would you like to achieve through your communication efforts?
   a) Tangible – I can hold it, see it, etc.
DETERMINE YOUR INTERNAL PLAN

Assess Internal Communications

1. Members of staff or board
2. How do we communicate now?
3. Common Voice
4. Did I read about it before I knew about it?
   a) Loop everyone in
IDENTIFY AND PROFILE YOUR AUDIENCE

• Break down the audiences that you are targeting
  • Primary – What group’s (audience) knowledge, attitudes, behaviors must be changed to meet your goal?
  • Secondary – Who is affected if you achieve your goal?
  • Tertiary – Others who can influence primary and secondary audiences (Establish Partnerships – Capacity Building)
IDENTIFY AND PROFILE YOUR AUDIENCE

Understand who they are
- Education level
- Language barriers
- Influencers
- Credible communicators
- Motivations
- Culture
Your audience’s attitudes on your issue
- Are they in agreement with you on the issue?
- Does your audience support you?
  - If not, where did the audience get their attitude?
- Do they help participate in your goal?
- What are they talking about?
- Why would they buy-in?
- Who is credible to them?
- What are the benefits?
SECONDARY AUDIENCE CONSIDERATION

- Identify secondary audience
- Will this be a benefit?
- How do I communicate that this issue affects them?
- How do I make them part of the communication process?
EXERCISE IN GOAL DETERMINATION

Identify Goal
Identify Messages
The New Kindler, Gentler Philip Morris

- Released report in 2000
- Studied Czech Republic
- Impact of smoking on society
- Message was, “Cost benefits of smoker’s early mortality, along with cigarette tax revenue, outweighed social costs of smoking.”
- Argument – Smoker’s early deaths saved the state money through healthcare and other costs to the state.
PRO-MARIJUANA MESSAGING

• Public Health Messaging Concept (RTAB)

1. Recipient – People – the suffering, sick and dying.
2. Threat – Cancer, glaucoma, MS, HIV, etc.
3. Action – Use marijuana to deal with ailments. It’s safer than prescriptions.
4. Benefits – Safe, natural, non-addictive, can’t OD.
Marijuana Messaging

Marketing

- Natural – It grows from the ground. Not a man-made opioid.
- Medicinal – Shrinks tumors and treats migraines. There are actual health benefits.
- Doctors would love to have the ability to prescribe it.
- No one has ever died of an overdose.
In the late 19th and early 20th Century, tobacco marketers used these tactics.

- Natural – Tobacco was a natural product. It was from the ground.
- Medicinal – Health benefits of smoking included asthma, head colds and all diseases of the throat.
- Doctors Use it. The product must be ok.
- No one has ever died of an overdose.

Is History Being Repeated?
Messages will be:

- A set of statements to convey key information
- Basis of talking points
- Basis for Radio and print PSA’s, posters
- May suggest topics for fact sheets, articles, etc.

Messages will not:

- Include all the detail and supporting data
- Be complicated
MESSAGES AND MORE

MESSAGE

• Marijuana legalization makes highways more dangerous.
• Underage drinking is a key factor in campus sexual assaults.

MORE

• Traffic deaths have tripled over the last 10 years where an individual has marijuana in his/her system.
• Sexual assaults occur on campus largely because of underage drinking and lax supervision at fraternities and sororities.
MESSAGE CONSIDERATIONS

- Clarity – Assure public understanding and lose technical terms
- Consistency – Messages should be constant and dependable
- Main Points – Repeated and never hidden
- Tone and Appeal – Depends upon audience
- Credibility – messenger
- Public Need – what is most important to audience?
WHAT IS MY MESSAGE?

Message Breakdown

• Is it based on emotional or a rational argument?
  ➢ Which story carries more “umph?”

• Is the message repeated?
  ➢ The more times a message is repeated, the more believable it becomes.

• Messages are best when using emotion first and then backing it up with stats

• Who else endorses this belief?
  ➢ What do other people I admire/respect think?
AUDIENCE CONSIDERATIONS

• What are the anticipated barriers of the audience?
• What changes in attitude do you want to motivate in your audience to meet your goal?
• What changes in behavior of your audience are you trying to achieve?

Audience Analysis

How to find out what your audience believes... BEFORE you speak.
High Involvement vs. Low Involvement

**HIGH INVOLVEMENT**
- High involvement product – cars and shampoo
- Bought into the position
- The argument really matters to them on a personal level
- Possible large financial or time commitment involved

**LOW INVOLVEMENT**
- Low involvement product – gum and tissues
- Does not regularly think about the subject
- Does not think it affects them personally
- Little to no reason to buy in
HIGH INVOLVEMENT

• About 30% are high involvement
• That means 70% are low involvement
• Low involvement tend to go with the crowd
• Emotion is strong influencer
• Brand recognition or the number of times something is heard
• Stories or stories plus stats are the best way to persuade
DEVELOPING MESSENGERS

• Choosing representatives from across perspectives
• Balancing the Coalition Message with each personal perspective
• Training, coaching, support, and a cup of encouragement
TOP COMMUNICATORS OF 2012

Michelle Obama
- Uses personal stories
- Exposes vulnerability
- Remains clear and confident in her message

Marco Rubio
- Uses personal stories
- Confident and authentic
- Uses humor in messages
FRANCESCO SCHETTINO

• Was silent and evasive
• Frantic and disheveled
• Lied about the situation

TODD AKIN

• Legitimate rape comments – insensitive and no basis
• Failure to admit miscue
• Polarizing comments
<table>
<thead>
<tr>
<th>Coalition Spokesperson</th>
<th>Represents</th>
<th>Key Perspective</th>
<th>Needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police Chief Green</td>
<td>City/Enforcement</td>
<td>Impact on others; cost to city; safety</td>
<td>Likes bullet points and reporter info; great with parents!</td>
</tr>
<tr>
<td>Cindy Brown</td>
<td>South Neighborhood, Parents</td>
<td>Stories of neighborhood changes; has teen who was in trouble</td>
<td>Nervous with big crowds; needs script, coaching</td>
</tr>
<tr>
<td>Toby Gold</td>
<td>Bar Owner</td>
<td>Responsible business is profitable; cooperation from hospitality</td>
<td>Will not speak against other businesses; use only as an example of good owner</td>
</tr>
</tbody>
</table>
ESTABLISH PARTNERSHIPS THROUGH MESSAGE

Choosing partners

• Determine Your Needs
• Identify Potential Partners
• Prioritize Your Contacts
• Make Your Proposal Strategic
• Face to Face Follow-Up
• Make Your Community Partners Part of Your Team
PLANNING

1. Select Communication Channels
2. Choose Activities and Materials
COMMUNICATION CHANNELS

- Direct Mail
- Website Social Media
- Radio/TV
- Donor Events
- Face-to-Face Meetings
- Mobile Phone, Apps
DIALING UP THE CORRECT CHANNEL

Five Questions:

- Does it deliver the message to the right audience?
- Does it focus the message appropriately?
- Does it enhance the message’s credibility?
- Can we adapt the message to this channel?
- Does this channel fit in our budget/resource plan?
- Are the people we want to influence/engage in this channel?
SOCIAL MEDIA IS A MUST IN ADVOCACY

- Immediate
- Broad Influence
- Easy
- Free
- Customer Feedback
- Leaders are here
- Brand Loyalty
According to the 2011 Social Media Marketing Industry Report, 78% of marketers saw increased traffic with just six hours a week invested in social media.

Information from friends and family is more trustworthy than what is presented on the news.

Average citizens are more likely to visit Facebook or Twitter than a specific website devoted to an issue.
CHOOSE ACTIVITIES AND MATERIALS

Sample Activities

• News Conference
• Editorial Board Meetings
• Radio Call-In Shows
• Benefit Event
• One-on One Meetings
• Speeches and Presentations
• Web and Social Media Presence
MATERIALS TO SUPPORT ACTIVITIES

• News Releases
• Fliers and Brochures
• Op-Eds
• Letters to the Editor
• Posters
• PSA’s
• Video Presentations (YouTube) – Keep It Short
• Promotional Items
CONSIDERATIONS

• Appropriateness to Audience
• Timing
• Costs/Resources
• What Does the Community Think?
• Cultural Appropriateness
• Geographic Considerations
IMPLEMENTATION

“All Right, Mr. Demille, I’m Ready for My Close-Up”…Gloria Swanson in Sunset Blvd. (1950)
CREATE YOUR TIMELINE

- List All Activities
- Under Each Activity – List Steps
- Assign a Budget Estimate
- Assign a Staffing Needs Estimate
- Assign a Date
<table>
<thead>
<tr>
<th>Target Date</th>
<th>Communication Activity</th>
<th>Audience Stakeholder</th>
<th>Method Channel</th>
<th>Key Messages (Know, Feel, Do)</th>
<th>Member Responsibility</th>
<th>Budget</th>
</tr>
</thead>
</table>
| 10/1/17     | 1. Press Conference  
            2. Make calls to press  
            3. Create press release  
            4. Media Advisory  
            5. Identify speakers  
            6. Location        | 1. Media  
            2. Bar Owners   | 1. Radio/TV  
            2. Social Media  | 1. Importance of underage drinking prevention  
                                      2. Beverage Server Training  | 1. Speak  
                                      2. Media Education    | $150 for location |
EVALUATION

So, How Did We Do?
EVALUATE AND MAKE MID COURSE CORRECTIONS

• How can you measure whether you are meeting your communication goals?
  • Internal surveys
  • Online surveys
  • Web hits
  • Social Media “feedback” – likes, retweets, etc.
  • Newspaper clippings
  • TV/radio appearances or mentions
EVALUATION CONSIDERATIONS

• Look at timeline
  ➢ Too aggressive or too weak
  ➢ Timing

• Determine Strengths and Weaknesses
  ➢ Message right for audience reached
  ➢ Message too technical
  ➢ Call to Action
• Identify Obstacles
  ➢ Media/Social media Interest
  ➢ “Face” to the issue
  ➢ Compelling arguments
  ➢ Location
• Create and implement new approaches
  ➢ It’s ok to make changes
    ✓ Consult with communications technical assistance
  ➢ It’s ok to attach to another story – Steubenville
  ➢ Gather new messengers
The communication plan is success…

• What are the next steps?
• How do we capitalize on the success?
• Are there additional communication opportunities?
• Use newfound partners in communication strategy
• Groom ongoing media partnerships
CREATE YOUR COMMUNICATION PLAN

Can Your Message Change the Community?