

Bias Against Recovery in PA Cannabis Certification Program

There is a recent story that originated out of Spotlight PA by reporter Ed Mahon that keeps intruding in my thoughts as quite disturbing, [Prior misconduct rarely an obstacle for doctors in Pennsylvania's medical marijuana program](#). Before delving into the details and why it is one that I find so troubling, first I would note that I am not opposed to cannabis use. It does have medial benefits although some of those have been overstated. Many people can use it recreationally and in moderate ways. If Cannabis became legal recreationally in PA within well regulated boundaries that limit access to young people and proactively address addiction risks, I would support it. The devil is in the details.



There are a number of challenges to get to that point, including the industry itself. Much like the alcohol and tobacco industry, the cannabis industry knows of the [Pareto Principle](#) or 80/20 rule, that 20% of the customers are responsible for 80% of purchases. Heavy users are where the money is made. Young users, because their brains are still developing, are at higher risk for heavy use which is why industries of addiction subtly or not so subtly market to kids even as they often claim that they are not. I reference that here to ensure that this occurs, government must thoughtfully focus on these facets to ensure the common well being of its citizens.

What Mr. Mahon's thoughtful and well researched story shows is a system in which the harms associated with Cannabis are being relegated to an afterthought or perhaps a barrier to getting cannabis into the hands of as many people as possible. As the story reveals, the physician who is barred from the certification process is the one who is now in recovery from it and now sees risks as well as benefits.

I wish I could say I was surprised, unfortunately I am not. Years ago, when the medical cannabis program was initially implemented and PA took the controversial stance not supported by the research that cannabis was an effective treatment for an opioid use disorder, several of us raised concerns to the government no one in recovery was part of the Cannabis Certification program. As far too often occurs, we got ignored as we saw that they were setting up that would create harm for some in the name of help for others.

While I know many people who use cannabis and that the use presents no problem for them or safety risk to those around them, I have seen devastation wrought by heavy, long-term cannabis use as well as accidental death from accidents. We must have a government that balances access and risks.

The unblemished truth is that many people in our society openly look down on us. As I have noted in past writings, my organization, [PRO-A](#) did a large survey on perceived stigma nationally with [RIWI](#) and [Elevyst](#). Our report, [HOW BAD IS IT, REALLY? Stigma Against Drug Use and Recovery in the United States](#) examined perceived stigma nationally and found that 71% of Americans believed that society sees people who use drugs problematically or are in recovery to be outcasts or non-community members. These biases are everywhere. They exist in every department of state government, in every department in the federal government, in every department of every county government and across our society.

The message is clear that we do not matter. The message is that only bad people get addicted and people in recovery are not to be trusted. It is a message transmitted to how we are treated, how services are funded and how we are excluded in matters that impact our lives. It is not a new message, but it would be great to see Administrations at all levels of government mindfully include us and to address the biases that create these harms to us and the larger society.

I hope that this story is a wake-up call for state government and beyond.

Sources

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