THE CLFC FAMILY REUNION NEWS

THE CREATING LASTING FAMILY CONNECTIONS ® QUARTERLY NEWSLETTER

Summer Edition June, 2014

COPES Previews New Vision

On the May 30, 2014 episode of *Connections with Renee Shaw* (a statewide show on the Kentucky Educational Television), COPES' Executive Director, Ted N. Strader, shared the new vision for COPES which includes prevention and recovery services for entire families, residential living apartments and a strong focus on Fatherhood and Marriage Enhancement programming, job skills training, job placement and developing entrepreneurial opportunities for prison reentry and substance abuse recovery individuals and their families.



Connections with Renee Shaw

(#933) Ted Strader - COPES

Ted Strader, the director of the Council on Prevention and Education: Substances, Inc. (COPES) in Louisville, discusses how partnering agencies with the corrections system can help former inmates with successful re-entry into society.

Please click on the following two links to watch the promotional video and the entire show:

Promotional video (3 min): http://www.youtube.com/watch?v=7oKpl-qYup4
Entire Show (29 min): http://bit.ly/1n3N6ti

Please let us know your thoughts, feelings and feedback on the videos and the vision. Your voice is important! Please respond with your comments to <u>tstrader@sprynet.com</u>.

CLFC Developer Invited to White House for Champions of Change Event

CLFC Curriculum Series developer, Ted N. Strader, recently received his second nomination for a White House "Champions of Change" award, this time for connecting returning citizens (prison reentry populations) to employment opportunities. While he was not selected for the award, he was invited to the celebration ceremony with his peers at the White House on Monday, June 30th, 2014. As part of the event, Ted will join a select group of other nominees and supporters in honoring those receiving the award for their noteworthy contributions in job creation and retention for returning citizens in their local communities.

This White House event serves as celebration of the significant work in which thousands of us are engaged in service of reentry and recovering individuals and their families in our communities across the nation

National Webinars Lead to New Articles on Marijuana Policy and Effects

Ted N. Strader recently presented national webinars on marijuana policy, drug effects and addiction. These webinars were so well received that he was asked to write two articles that outline his views on an effective national policy on marijuana, and the short and long-term effects of marijuana.

We hope you enjoy the following article written by Ted N. Strader. We are very interested in receiving input on our position from the fields of education, substance abuse prevention, treatment and recovery, family strengthening, fatherhood, healthy marriage and prison reentry. Please respond with your comments to tstrader@sprynet.com. We hope to share some of the top comments in a future newsletter!

CLFC Brief Marijuana Policy Perspectives

For many people in the U.S. marijuana is viewed as a dangerous illegal drug and its use, sale and proliferation is considered illegal and/or immoral and destructive to individuals, families and communities. For others, marijuana use appears to be less harmful than alcohol, and therefore, they believe marijuana should be legally available for regulated sale and distribution in order to raise tax revenue and decrease the costs associated with incarceration. This "legalization" process would remove criminal justice related costs and result in saving public funds while also reducing the personal and family

devastation that incarceration can bring. We believe that there is plenty of truth on both sides of this debate.

We believe that it is more meaningful to focus on marijuana from a physical, mental and public health perspective than a legal/moral perspective. The criminalization of marijuana use (and other drug use) that involves long prison terms and incurs the tremendous costs of incarceration seem to neither serve the public good nor the wellbeing of the individual and their family. While the sale and distribution of illegal and controlled substances may indeed be seen as a criminal act, it might be helpful to view use and possession very differently.

Many Americans, including President Obama, believe that many people have suffered undue consequences in the criminal justice system for marijuana use violations. Minority populations appear to have experienced the full brunt of the criminal sanctions for a variety of reasons listed by President Obama in the New Yorker Magazine interview published in January 2014. When any illicit product reaches a certain level of demand, less advantaged individuals in any society are drawn to an opportunity to engage in such trade for benefits that overshadow the risks involved. Anyone experiencing any form of discrimination that results in social, economic, political or educational deprivation would seem naturally more vulnerable to both use, and to engage in the sale and distribution of a popular mood altering, illicit drug. Further, minority status often plays out differently in criminal justice systems. In our observation, it appears that the less you have, the less you can get away with in our (or any) criminal justice system. The disproportionate numbers of minorities experiencing prison sentences for drug related charges appears rather extreme for these and other reasons.

Next, let's shift our perspective away from the legal perspective for a moment and look at marijuana use and its impact on personal and public health related issues. Many Americans have never experimented with marijuana use. Many others have. Of those who have tried marijuana, some have enjoyed the experience, while others have not. The common perception of the individuals enjoying the experience is that they see fewer negative outcomes with marijuana use than they have seen in comparison with the most widely available legal drug, alcohol. While there is an element of truth to this perception, on close inspection it is less than fully accurate.

First of all, in a fair comparison with marijuana, the comparison must be made between the type of alcohol use that focuses on intoxication. We are saying that marijuana "use" is not exactly like alcohol "use". Many Americans (and others around the world) use alcohol regularly without any interest in experiencing even mild intoxication. A single serving or two of alcohol in conjunction with a meal is what the majority of Americans choose most often to experience. This is very different than pursuing a mood altering effect with alcohol. Drinking to intoxicating levels is a totally different experience. Lots of other people in America do pursue alcohol intoxication with regularity. They very commonly think that everyone else "using" alcohol is doing so in order to experience intoxicating effects too. Fortunately, they are terribly mistaken. Unfortunately, this belief leads to lots of confusion in the public dialogue. Drinking large enough quantities of alcohol to experience intoxication is more accurately called alcohol abuse. Similar to the second type of alcohol users (the abusers who pursue mood change), the common use of marijuana involves reaching a mood altered state, intoxication. While most people use alcohol as a beverage involving non-intoxicating levels of exposure, most people who use marijuana do not use marijuana in such low doses as to not involve a "buzz".

From a health perspective, adults who do use alcohol, and consume two or fewer standard servings of alcohol per day over a lifetime, are probably more likely to experience some mild HEALTH BENEFITS rather than any negative health consequences. These possible benefits include heart health and stroke risk

reduction. These benefits can also be achieved by abstainers in other ways by eating other healthy foods like red grapes.

Now we propose a more fair comparison. In comparing people who regularly use alcohol for mood change (involving four, five or more standard servings of alcohol which is generally considered alcohol abuse) with people who regularly use marijuana for mood altering purposes, there is truth that alcohol abusers are likely to experience more noticeable and some more severe negative health consequences than the marijuana user (abuser). However, those using marijuana regularly are much, much more likely to experience negative physical, mental and emotional consequences than THE PEOPLE WHO ABSTAIN OR WHO NEVER HAVE MORE THAN ONE OR TWO DRINKS PER DAY. It is also true that some people can pursue large quantities and frequencies of either alcohol or marijuana intake and not experience obvious health consequences for fairly long periods of time. This does not mean that there are no long-term consequences. In fact there are many subtle consequences at work within a pattern of intoxication. The long-term health risks associated with either drug (alcohol or marijuana) being used for regular mood change over prolonged periods are extensive and well documented. People are risking their entire physical, mental and emotional health pursuing regular mood change with these two drugs, or any other mood-altering drugs known to humanity! Whether the drug is considered legal, illegal, prescribed or not makes no large difference.

Finally, when people do experience alcohol, marijuana or any drug problem (substance use disorder), we would prefer to see them referred to an informed health professional rather than a policeman, lawyer, jailer, or warden. Perhaps some people may also benefit from a referral to their clergy member or spiritual leader as well, but that appears to be a personal or family matter in addition to the health referral. Drug use is better prevented, treated and regulated as a health issue rather than a legal or moral issue. It is extremely helpful to separate our analysis and judgment based on specific, scientific and clearly objective factual data than on individual (or collective) and uninformed "perceptions."

For the reasons listed above, the authors believes marijuana, alcohol and all drug use policy can be best determined by focusing on individual, family and public health policy rather than moral or legal perspectives. While the authors can support decriminalization, for marijuana or other substance abuse, we do not support all-out legalization because we fully support informed substance abuse prevention. We also support early intervention and treatment for substance abuse disorders. The current aspects of the Affordable Care Act that provide insurance for everyone and parity for mental health and substance abuse treatment appear to be poised to replace the massive and costly incarceration movement of the past. We know that a health movement involving prevention, early intervention, treatment and recovery support works much more successfully than judgment, isolation and incarceration in addressing marijuana and all other substance use disorders.

Click the following link to read another article by Mr. Strader that explains the effects of marijuana and the "why" of his national policy perspective: <u>Marijuana: A Mixed Bag of Short and Long-Term Effects</u>.

We are very interested in receiving your comments about our current position. Your voice is important! Please respond with your comments to <u>tstrader@sprynet.com</u>. We intend to share some of the top comments in a future newsletter! Also, please follow us on Social Media at the following sites:

Ted N. Strader







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