From: noreply@granicusideas.com

To: <u>City Clerk; citycouncil@hermosaeach.gov; Suja Lowenthal; Ann Yang</u>

Subject: New eComment for City Council Hybrid Special Meeting (Closed Session - 4:00 P.M. and Open Session - 6:00 P.M.)

Date: Tuesday, December 14, 2021 1:45:31 PM

SpeakUp

New eComment for City Council Hybrid Special Meeting (Closed Session - 4:00 P.M. and Open Session - 6:00 P.M.)

John Wallace submitted a new eComment.

Meeting: City Council Hybrid Special Meeting (Closed Session - 4:00 P.M. and Open Session - 6:00 P.M.)

Item: b. REPORT 21-0781 CONSIDERATION OF THE CITY'S OPTIONS IN LIGHT OF THE CANNABIS INITIATIVE FILED BY COLTON CHACKER WITH THE HERMOSA BEACH CITY CLERK ON NOVEMBER 17, 2021 (City Attorney Michael Jenkins and Deputy City Manager Angela Crespi)

eComment: I'm addressing the City Council as a 35+ year Double Board Certified Emergency Physician who has practiced at a local Emergency Room the last 30 years and a 25 year resident of Hermosa Beach. I'm requesting the City Council take an official position "Against" any initiative to allow "a commercial cannabis business permittee shall be required to own or to operate a cannabis business within the City" and to defend the existing City statue "known as the Hermosa Beach Cannabis Regulation and Public Safety Measure" Section 4, Chapter 5.84 Commercial Cannabis Activity Prohibited. The Population and Public Health Facts of easing access for marketed THC products for recreational use are these: There has been an increase in motor vehicle accidents since the legalization of recreational marijuana in Califo 1. Emergency Department visits for cannabis related diagnoses have increased 56% in Californai from 2016 to 2019 2. Motor vehicle accidents have increased since the legalization of recreational marijuana with Marijuana being the most common illicit drug identified in impaired drivers. The risk of an MVA increases 2 fold after smoking marijuana. 3. In San Diego, THC is the number one drug found in completed suicides for people under the age of 25, nearly 50% in San Diego teen suicides. 4. In a study from Michigan, which legalized recreational use in late 2018, published in October 2021 collecting patient data from November 2018, roughly ½ of 1214 patients had neuropsychiatric complaints such as anxiety, suicidal ideation, depression, hallucinations, mania, seizures, psychosis and paranoia. Coupling this with a behavioral health and the homeless pandemic and insufficient psychiatric treatment resources to manage these patients, has directly caused Emergency Room gridlock with regular holds of many days for multiple patients due to neuropsychiatric diagnoses in our EDs. That means less space and staff for your loved ones in

need of emergency care. 5. The mental health effects of Marijuana have led to a US Surgeon General advisory on marijuana use and the growing brain that includes the risk of early onset psychotic disorders such as schizophrenia, learning disorders, drop outs and other substance use. See below extracted directly from that document. · · 6. Potency—The increase potency of current product leads to acceleration in addiction, neuropsychiatric complaints and chronic symptoms not seen in former times. See below extracted from the Surgeon General report "Marijuana has changed over time. The marijuana available today is much stronger than previous versions. The THC concentration in commonly cultivated marijuana plants has increased three-fold between 1995 and 2014 (4% and 12% respectively)4. Marijuana available in dispensaries in some states has average concentrations of THC between 17.7% and 23.2%5. Concentrated products, commonly known as dabs or waxes, are far more widely available to recreational users today and may contain between 23.7% and 75.9% THC6. 7. Despite law that limits recreational use to adults over 21, data collected by Beach Cities Health District describes Cannabis product use in our local teens that is far ahead of other locations. Numerous case reports of personal and family tragedy exist as a direct result of high potency (HiTHC) Cannabis use in our youth. The assertion by the proponents of this initiative that it "protects the health, safety, and welfare of the residents of the City" is anti thetical to the truth. Promises of massive revenues for the City don't factor the negative societal costs, personal tragedies, un accounted costs of Emergency Care, costs to the City for increased pre hospital care calls, along with recovery treatment costs. The idea of "buffers" in our tight community of 1.5 square miles is fallacious and 500 feet ludicrous, meaning there is no buffer for exposure to adolescents causing normalization of use for juveniles. Make no mistake that this is not a local initiative but rather a targeted campaign by public and private equity for profit at the expense of our youth and adult residents. I challenge the proponents to provide data that increase ease of access to more powerful substances does not add to the complications that include neuropsychiatric and physical conditions, family tragedy, and economic loss to be shouldered by taxpayers. A "yes/no" ballot listing over simplifies and ignores the downstream problems created by mis conceptualizing this as a "personal use" only mandate. The majority of Hermosa residents in the past have always come together to preserve the uniqueness of our small beach town when threats have presented in the past. Ultimately, this is a legacy litmus test for our elected leaders and they should be held accountable for the path forward chosen and its consequences for its residents, their families and character of our town.

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