**Medical Cannabis Initiatives on the Ballot in Four States**

**ARKANSAS.** Two medical cannabis initiatives were on the ballot in Arkansas, Issue 6 and Issue 7. Both were challenged in the courts, with only Issue 6 surviving. Issue 6, known as the Arkansas Medical Marijuana Amendment of 2016, would recognize 17 qualifying conditions, establish a Medical Marijuana Commission, provide tax revenue to schools and the state’s general fund, and allow for regulated dispensaries and cultivation facilities, although local communities could ban their operation. This is an amendment to the state constitution, so it cannot be overturned by the legislature.

The state Supreme Court on Oct. 13 turned away a request from the state Chamber of Commerce and the Arkansas Farm Bureau to block Issue 6. On Oct. 27, the court in a 5-2 decision invalidated Issue 7 because of questions over whether volunteers who were collecting several thousand signatures should have been reported as paid canvassers because they might have received compensation if funds were donated.

The Arkansas Democratic Party’s platform supports legalizing medical cannabis.

**FLORIDA.** A voter initiative that would amend the Florida constitution to expand qualifying conditions, allow caregivers and license dispensaries is back on the Florida ballot. Two years ago a similar measure narrowly failed to achieve the 60% supermajority Florida election law requires for constitutional amendment. Since then the Florida legislature has passed a restrictive medical cannabis bill, but limitations in the program design and delays in implementation have frustrated patients. Endorsements for Amendment 2 include the Miami Herald, the Sun Sentinel and the Epilepsy Foundation.

**MONTANA.** Montana voters get a chance to undo the damage done by state lawmakers who have gutted the initiative citizens originally passed in 2004. The Montana Medical Marijuana Initiative, also known as I-182, would amend Senate Bill 423 to remove the three-patient restriction on providers and allow them to employ people to “cultivate, dispense, and transport medical marijuana.” It would also add chronic pain and PTSD to the state’s qualifying conditions and remove the state review of doctors who issue more than 25 recommendations a year. If the measure passes, annual inspections of medical cannabis facilities by the state would replace unannounced law enforcement inspections.

**NORTH DAKOTA.** The North Dakota Medical Marijuana Legalization Initiative, also known as Initiated Statutory Measure 5, would establish a regulated dispensary system for qualifying patients and allow for personal cultivation. The broad list of recognized conditions could be further expanded by petitioning the state health department. Qualifying patients registered with the state would be allowed to possess up to three ounces of cannabis. Registered caregivers would be allowed to provide medicine for up to five patients.

**Louisiana Lawmakers Push Program Forward**

The Louisiana House of Representatives voted two to one to accelerate implementation of the state’s medical cannabis program and expand the list of qualifying conditions to include seizure disorders, HIV, muscular dystrophy, multiple sclerosis and other conditions. The vote on Senate Bill 271, which is sponsored by a Republican pharmacist, sends it back to the Senate to approve changes made by the House. Gov. John Bel Edwards supports the bill. Advocates estimate it will take another two years before patients can access medicine.

**Illinois Extends and Expands Pilot Program**

Illinois lawmakers last month extended the state’s pilot medical cannabis program for four more years. Despite opposing the program, Gov. Bruce Rauner signed the bill and added PTSD and terminal illnesses to the list of qualifying conditions. The state also issued new forms for physicians that permit them to simply certify their patients as having a qualifying condition without directly recommending medical cannabis as a treatment. Patient ID cards are now good for three years, and patients with terminal illnesses now qualify for free registration. Illinois has struggled to meet program projections due to regulatory barriers, but reported sales of $2.9 million for July were a record. The changes are expected to increase participation.
ASA Activist Profiles: Four Advocates Turned Candidates

Many medical cannabis activists have acquired the political skills to be effective political advocates, and some are now putting those skills to work campaigning for safe access initiatives and candidates. Some are even running for elected office themselves, including these four accomplished women.

Kari Boiter, a long-time medical cannabis advocate and patient, received ASA’s Advocate of the Year award in 2013 for her work supporting patients in Washington State who had been arrested and their families. She returned to her home state of Montana to fight for safe access, where she worked as Executive Legislative Assistant to a member of the Montana state legislature, who is retiring. After being approached to run herself, she decided it was another chance to make a difference. Kari is challenging the Republican incumbent in District 44 of the Montana state legislature, who is retiring.

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Melissa Fults of Arkansas is yet another accomplished medical cannabis activist turned candidate. A grandmother of three who runs a small goat farm, Melissa is not what most consider a typical cannabis activist. Yet for the past five years, she has been actively leading the fight to pass a medical cannabis initiative in Arkansas, and she is now the 2016 Democratic candidate for District 27 of the state House of Representatives. Melissa’s interest in pursuing office is more than just to push cannabis legislation, “The people in our district—my family, my friends and my neighbors—need a representative who more accurately reflects them and shares their concerns for our future and that of future generations,” she says. “We have to change direction, seek solutions for the real problems Arkansans face daily, and, most importantly, get back to helping others succeed.”

Kari, Janet, Christine and Melissa are all change-makers who, when they saw where their government was failing the people, stepped up to change it. If your state has an election, make sure you know where the candidates in your district stand on the issue of medical cannabis before you vote.

ASA has made it easy for you with Vote Medical Marijuana. Vote Medical Marijuana allows you to view your federal legislator’s voting record on cannabis bills before you place your vote November 8th.

Cannabis Safe Access Reduces Opiate Risks

A new study in the American Journal of Public Health suggests access to medical marijuana is reducing use of prescription opioids such as the painkillers OxyContin and Percocet. Columbia University researchers looked at traffic fatalities in 18 U.S states from 1999-2013 and discovered that there were fewer fatal crashes with drivers under the influence of opioids after states passed medical cannabis laws.

“We would expect the adverse consequences of opioid use to decrease over time in states where medical marijuana use is legal, as individuals substitute marijuana for opioids,” lead author June H. Kim said in a statement.

This new report follows a 2014 Johns Hopkins study that found states with medical cannabis laws immediately saw a 25 percent reduction in opioid overdose deaths.