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Public Policy al Affiliation Medical Marijuana is also known as cannabis sativa and has a historical use in treating intense pain. It has been used in various regions worldwide to treat patients suffering from intense pain due to the numerous existing diseases. In America, its use has been there from as early as the 18th century, but declined towards the 1930s as a result of other pain relievers that were developed. The control and use of Marijuana had gone out of hand, forcing the federal government through a congress agreement, to develop acts that could minimize its use. This resulted to the enactment of the Marijuana tax act, and later the Drug Abuse Prevention and Control Act of 1970 that contained CSA establishing the ban for marijuana use, not even for medical reasons. In the late 1990s, states began legalizing marijuana use for medical purposes, which challenged the congress to develop other accommodating laws over the issue of medical marijuana. The last one decade has been a struggle, with every amendment being rejected, at most five times in the Hinchey-Rohrabacher Amendment (2003-2007) of the federal drug enforcement administration (DEA). Towards the end of the decade, some light has been shed for marijuana use through the approved reforms, showing a congress relaxation trend towards medical marijuana.
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History of Medical Marijuana
Marijuana has been known as a pain reliever for intensively suffering patients, but the use has raised so much controversy in the public and occupational domains, due to issues of legitimacy and morality in the society. According to historical records, the cannabis sativa plant (marijuana) has been used for healing purposes, for a wide range of ailments more than 2000 years ago, within America and beyond its boundaries. People could grow and use marijuana under the legal federal and state laws in America between the 18th century and early 1930s, from which it declined following the development of other alternative drugs (aspirin, morphine, and opium derived medication) in pain treatment (Eddy, 2010, p. 1). However, even after the congress and legal federal law classified marijuana as an unsafe drug, medical practitioners have held its benefits that are high in pain treatment, leading to several states having to legalize marijuana only for medical purposes.
Initially, state of California was the first to legalize its use, from which others followed bravely. Although there are cases of illegal users of the drug taking advantage of the medical marijuana law, the patients with conditions or symptoms such as chronic pain, cancer, diabetes, nausea, muscle spasms, seizure disorders and glaucoma among others, get to understand the benefit of marijuana as a medicinal product. According to the National Conference of State legislature (NCSL), as of 2012 a total of 18 states and Columbia district had enacted the medical use of marijuana into law (2012). Basically, the public members of the states have shown tremendous support in the marijuana use reform, for the sake of the medical use. Although some states have not reached the level of legalizing its use, Eddy states that development of favorable laws to medical marijuana has been enacted in 36 states since 1978, though they have limitation in their protection and application in the varied states (2010).
Congress Trend in the Public Policies over Medical Marijuana
Marijuana restriction through the congress move began in 1937, when the Marijuana Tax Act of 1937 was discussed and approved, forcing withdrawal of marijuana medicinal products from the market. However, its use did not stop, but intensified in the streets, being recorded high among the youths. This led to the enactment of the Drug Abuse Prevention and Control Act of 1970, which contained the Controlled Substances Act (CSA), terming Marijuana and its derivatives as schedule 1 substances, drugs of high potential abuse and illegal for medical use in U. S. as treatment (Eddy, 2010, p. 3). The act was among the 8 public laws in health sectors enacted during the 1970 period as indicated in the graph. Over the time, the CSA has remained put over illegal use of marijuana over the states, but with time the individual state laws have challenged the federal law, allowing their citizens to use it in cases of medical approval. This was made possible with the fact that the congress approved CSA, and individual states laws do not preempt each other over the marijuana issue.
California’s action towards legalizing cannabis sativa on medical use posed a great challenge in the congress, leading to the Anti medical marijuana legislation in the 105th congress of 1998, where the house discussed and passed resolutions over supporting the then existing federal drug approval process, to assess whether any drug including marijuana was safe and effective (Eddy, 2010, p. 4). What followed the act just as that of 1970 was amendments to the act, but it the 1998 Act, the congress had blocked Columbia’s initiative for medical marijuana use. Arizona had also fallen victim of the federal law, prohibiting marijuana prescription by doctors. In the last one decade, since the 108th seating of the congress, the Hinchey-Rohrabacher Amendment (2003-2007) of the federal drug enforcement administration (DEA) with benefits to medical marijuana policy has been rejected 5 times on its amendment, in 108th, 109th, and the 1st session of the 110th congresses over the span of 2003 to 2007, a period demonstrated by zero to minimal laws in the graph (Eddy, 2010, p. 4-5). Further discussions by the 110th congress have improved relaxation over restriction on marijuana, seeing the congress approve FDA amendment acts (H. R. 2900), which was a step to reauthorize FDA programs. The Medical Marijuana patient protection Act and Truth in Trials Act brought forward by Frank and Farr respectively in 111th congress, in favor of medical use of cannabis sativa in adherence to states laws, and fair trials over medical marijuana use have since been referred to the Energy and Commerce committee, but nothing is out yet over the two bills.
Figure 1. Illustration of public laws on health from 1948 to 2010. Adapted from “ Policy Agenda Project.” Adapted with permission.
Despite failure by the congress to fully approve the drug, the recent trends after the D. C appropriation Act for FY2010 was signed into law in December 2009, blocked areas like the district of Columbia, who got their medical marijuana initiative approved, and federal prosecutions to those individuals dealing with marijuana for medical reasons have been limited. The future hope of the citizens is that the congress would be convinced over legalizing marijuana for health purposes, as it seeks means to curb any irregularity in its use and distribution. It is the patient who is at stake here, as much as other factors count.
Reference List
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