



# **CANNABIS FOR GROWNUPS AGE 50 PLUS**

**WOODY GOULART**

# CANNABIS FOR GROWNUPS AGE 50 PLUS

*WOODY GOULART*

**Copyright © 2023 by Woody Goulart.**

**All Right Reserved.**

No part of this publication may be reproduced, distributed, or transmitted in any form or by any means, including photocopying, recording, or other electronic or mechanical methods, or by any information storage and retrieval system without the prior written permission of the publisher, except in the case of very brief quotations embodied in critical reviews and certain other noncommercial uses permitted by copyright law.

## DEDICATION

I dedicate this book to **Samuel C. Glass, Jr.**

I have never loved or felt closer to any other person in my entire life. I am so grateful to him for decades of support and encouragement that he has given me for my nonfiction, my storytelling, and my art.

# Preface

I wrote this book because I am a grownup cannabis user—someone who has reached at least the age of 50 and who chooses to use cannabis products.

That's me pictured here. I have had life experiences that guided me to develop strong opinions about the cannabis sector in the United States. I have also experienced success after much trial and error.



I'm of the **Baby Boom generation**—born in the middle of the 20th century. I use medical cannabis products today that are legal in the state of Nevada where I live and work.

What I am not: I am not a young person trying to adapt sales pitches to older people. In my experience, it is frustrating whenever a young person tries to come across as relevant to an older person but actually fails to do. I prefer to be genuine and down-to-earth without pretending to be anything I am not.

If you have reached at least age 50, I am someone who is much like you. I have been where you have been. I feel what you feel or I have previously felt what you feel. I also think like you think because we have traveled on the same or similar journey in this life.

My goal is to help grownups age 50 and older feel confident when they choose to start using cannabis products to reduce pain and ease suffering and to bring a much-deserved level of fun and enjoyment into this life. Older people like us often find that the cannabis industry is deliberately aiming for a younger crowd than us. This book will help you find not only a sense of community with people your own age, but also a welcoming attitude that you may not encounter out there in a world which emphasizes youth.

Inside this eBook you will discover personal admissions from me along with sincere, heartfelt recommendations to help guide you in a sensible direction regarding your use of cannabis products.

I will show you clearly how there is no reason to feel lost as you approach the subject of using legal cannabis products at age 50 and up whether you consider that usage to be “medical” versus “recreational.”

**However, the emphasis in this book is intentionally upon the medicinal benefits you can find using legal cannabis products in contrast to the typical focus you may find elsewhere upon the recreational benefits (such as getting buzzed or high from cannabis.)**

*This eBook is entirely free of charge. No purchase necessary. No obligation.*

### **If You Want Personalized Medical Advice**

After you read this book, if you want personalized advice to guide you in the legal use of cannabis products for medical outcomes, the best I can do is recommend that you talk with a medical doctor.

I have direct experience being advised (as a patient) by Carmen Jones, MD. She is a medical doctor located in Las Vegas. She is an advocate for using legal cannabis products so patients can achieve less physical and emotional pain and discover a better, happier life.

No matter where you may live, Dr. Carmen Jones will interact successfully with you over the phone in complete privacy.

Learn more right now by visiting her website: <https://wildflowermedical.com/>

You also can choose to call Dr. Carmen Jones at **702-773-1144**

Thank you!

Woody Goulart  
Las Vegas, Nevada

# TABLE OF CONTENTS

[CHAPTER 1: RESTORING BALANCE](#)

[CHAPTER 2: PREJUDICES AND ENEMIES LISTS](#)

[CHAPTER 3: IT'S PERSONAL](#)

[CHAPTER 4: CHOICES FOR GROWNUPS](#)

[CHAPTER 5: THE GREEN RUSH](#)

[Chapter 6: Challenges to Federal Credibility](#)

[CHAPTER 7: HOW TO BUY LEGAL CANNABIS PRODUCTS](#)

[CHAPTER 8: U.S. Cannabis Industry](#)

[Chapter 9: Questions For You While Shopping](#)

[Chapter 10: Some Final Thoughts and Suggestions](#)

[From The Author](#)

## CHAPTER 1: RESTORING BALANCE

### RESTORING BALANCE

The current consumer experience of legally buying cannabis products in the United States requires you to sort through competing and sometimes conflicting regulations at the federal, state, and local levels. The different laws pertaining to legal cannabis sales can confuse anyone.

#### **Built-in Imbalance of Power**

People that own or manage legal cannabis sales venues across the United States today have a **built-in power** over their own employees and over cannabis consumers alike. Simply put, the core power which legal cannabis sales venue owners or managers have comes from what they know compared to what their own employees or cannabis customers know.

Knowledge is power. You have heard that many times.

There is a built-in **imbalance of power** that works to your disadvantage compared to the advantage people have who own or manage legal cannabis sales venues in the United States. You could be taken advantage of because of the fact that others know more about cannabis and about the business of legal cannabis sales you do.

Whenever owners or managers of legal cannabis sales venues have such a built-in imbalance of power, this reality is **neither illegal nor suspicious behavior** at all. This is their standard operating method: If they expect to succeed in business, owners or managers of legal cannabis sales venues must possess more knowledge about legal cannabis sales than their own employees or their customers.

There are intricate and complicated processes and procedures in place today in the cannabis sector and a wide range of regulations at the state and/or local level. Owners and managers want to preserve and maintain their very specialized knowledge about legal cannabis sales. This is key to staying in business. It is precisely why they may have attained an imbalance of power over their own employees and their customers.

Some of this may already be apparent to you. Yet, I am sure there are many more people who are encountering for the very first time this notion of being taken advantage of during **cannabis sales and/or customer service interactions** in our youth-oriented culture.



## First Contact Cannabis Sector Employees

The first contact you likely will have when you walk into any legal cannabis sales venue in the United States today will be with in-person sales/customer service employees who likely are in their 20s to 30s. This is the reality you should come to expect.

As a group, young people in their 20s and 30s are most likely to have already tried using cannabis. This is because they are exuberant, and they enjoy experimenting with aspects of life and leisure for the very first time. They also tend as a demographic group to **enjoy getting buzzed** or **getting high** from using legal cannabis products. This same group within the American population can be easily drawn to employment within recently created businesses such as legalized cannabis sales venues.

In contrast, often it is the norm that many of us who want to purchase legalized cannabis can be much older than those employees we will meet inside venues where legal cannabis product sales are happening. The age difference between cannabis consumers who were alive during the 1970s and 1980s when cannabis was illegal everywhere versus today's typically younger sales and customer service employees cannot and should not be ignored or glossed over.

There is a significant cultural difference between the two demographic groups. It is not imaginary. You should not ignore the cultural differences. Nor should you deny that there are cultural differences.

If you (as a cannabis consumer who is age 50 plus) are better prepared for the sales or customer service interaction compared to the cannabis sector employee, you can reduce your chances of being taken advantage of during the process of attempting to purchase legal cannabis products.

## Not Like Other Businesses

Here is one clear-cut example of how this works: Legal cannabis sales in the United States today is not regulated in ways that align with how prescription medications are sold to consumers at pharmacies.

The Food and Drug Administration is one particular agency of the United States federal government that years ago was given jurisdiction over what particular prescription medications can or cannot be sold to consumers at pharmacies (either through retail sales venues or via direct-to-consumer pharmaceutical product delivery services.)

Whenever you purchase prescription medications in the United States at a registered pharmacy, you can rest assured that the FDA regulates your ability to buy the meds and thereby offers you the impression that you are "protected" from harm whenever you buy prescription meds.

In contrast, certain cannabis products have medicinal value for patients today and they legally are sold in selected United States venues depending upon state and/or local regulations. Yet there is no federal regulation in place that you may perceive serve to “protect” you from harm whenever you buy legal cannabis products.

Specifically, the FDA does not regulate cannabis sales. More to the point, the Drug Enforcement Administration, another agency of the United States federal government, long ago decreed that cannabis is illegal as far as the federal government is concerned.

When you walk into a local pharmacy to buy your meds, usually you will not spend one second stopping and thinking about drug regulations. A deep and longstanding regulatory infrastructure is in place whether you think about it or not.

When you walk into a local legal cannabis sales venue to buy products that can alleviate patient pain and suffering, you have no benefit from any longstanding regulatory infrastructure.

## **Why You Know Less Than Others**

The cannabis sector is new, especially compared to longstanding and established American businesses in other sectors such as the pharmaceutical industry. What serves the financial interests of cannabis sector owners and managers (that is to say, what helps them persuade you to part with your money to purchase legal cannabis products from them) is that **you know less than they know** about legalities and processes behind today’s legalized cannabis sales.

Since in this instance knowledge definitely and certainly equals power, the built-in imbalance of power held by owners and managers of legal cannabis sales venues simply is one very natural outcome that grew directly from the absence of a standardized federal regulatory infrastructure for cannabis sales in the United States. This relatively new sector shows signs of a different kind of consumer awareness and behavior compared to other sectors.

## **The Five Phases of Cannabis Consumer Awareness and Behavior**

Dating back to when cannabis first was decriminalized in the United States when laws were changed in 1973 in Oregon, the awareness and behaviors of any cannabis consumer has developed into five phases that exist today:

- 1** **unaware**
- 2** **aware but not accepting**
- 3** **aware and accepting**
- 4** **aware, accepting, but disinterested**
- 5** **aware, accepting, willing to buy**

Once a person reaches phase five, it does not follow that they will actually spend their money to buy cannabis. The fifth phase is only about their awareness, acceptance, and willingness to buy.

But, if you want to nail down what drives any cannabis sector owner or manager to even consider using exploitative strategies and tactics, look to that fifth phase.

As I have already mentioned, the five phases do not necessarily apply to other business sectors. Consumers, for instance, never need to go through those five phases when considering whether or not to buy groceries because acquiring food is a necessity in this life. However, if you look closely at any sector that sells anything which is an option in life rather than a necessity, you can anticipate finding the five phases of consumer acceptance and behavior.

Also keep in mind that consumer awareness and behavior can slip backwards from the fifth phase (aware, accepting, willing to buy) to the fourth (aware, accepting, but disinterested.)

Advertising new and optional products and services to attract the attention of the American public is built upon the principle of moving consumers through these five phases of awareness and behavior. If you watch news programming on television, for example, you will see a lot of advertising about new prescription drugs. The purpose of such prescription drug advertising is to motivate you to “ask your doctor” about what you saw advertised.

Because cannabis sales today are legal only in designated (not all) United States locations (and remains illegal at the federal level), it is not possible legally to advertise cannabis in the same or similar ways as prescription drugs are advertised within national television programming. Someday this may change. Even though certain cannabis products already demonstrate the same or similar medical benefits as certain prescription drugs, presently it is not possible legally to advertise the purchasing of cannabis products openly like prescription drugs are advertised.

That reality behind the legalities of American advertising should explain why there are people who are potentially taking advantage of you with regard to selling legal cannabis products to the general public today. Direct-to-consumer advertising on television is not legal for the cannabis sector. Therefore, nobody should be surprised if taking advantage of consumers with regard to selling legal cannabis products to the general public today takes place connected to the absence of direct-to-consumer advertising.

## **Training, Education, and Coaching**

Most managers in any sector will tell you that there are three core elements their employees must have—(1) specific job or industry training, (2) education that brings employees knowledge of a particular job or industry, and (3) coaching to keep the employee job performance at peak levels.

If managers do not have the right skills to provide the appropriate levels of training, education, or coaching for employees, that can set in motion one of two outcomes: First is bringing in a professional who can handle such things. Second is not providing any training, education, or coaching to employees at all and hoping the employees will do just fine on their own.

With appropriate levels of training, education, and coaching, any sales and customer service employee who works in cannabis dispensaries today certainly can gain a competitive edge over their co-workers by preparing themselves specifically to succeed when interacting in sales opportunities with customers who were alive in the 1970s and 1980s when cannabis was illegal everywhere in the U.S.

This starts at the motivation level any consumer has for wanting to purchase legal cannabis: **Is the consumer primarily interested in reducing physical**

**and/or emotional pain? Or is the consumer primarily interested in getting buzzed or getting high?**

Owners or managers in the cannabis sector may not necessarily recognize this difference between the two motivation levels. Or, while they may recognize it, they do not necessarily place a priority upon it.

Inside today's cannabis sector venues, it is true that a cannabis industry employee must WANT TO be able to sell to customers who are older than them. Success in sales to older customers will not come magically or automatically or accidentally, however. It is true that younger people (under the age of 50) can be expected to walk into a cannabis sales venue having already reached the fifth phase (aware, accepting, willing to buy.) But success in persuading the age 50 and up crowd will only come if the employee has been appropriately trained, educated, and coached within some deliberately implemented program whose purpose is to build their skills.

There are specific and particular ways in which adequately trained, educated, and coached cannabis dispensary sales employees can be consistently successful in sales interactions with customers who today are age 50 and up. You can walk in to meet such salespeople face-to-face armed with some proven strategies and tactics that will benefit you regardless of the employee's skill levels or whether they have had appropriate training, education, and coaching.

The truth is: Such young people as employees in the cannabis sector are **not necessarily aiming to take advantage** of you or anyone deliberately or willfully. They simply want a career or to make money by working in the cannabis industry. That is certainly understandable. However, because of the rush to get new cannabis sales venues up and running, it is very likely that you will encounter some cannabis sales venue employees on any given day today who have not been adequately or fully educated, trained, or coached by qualified professional.

Their lack of adequate or full learning about non-exploitive sales methods may make it seem to you that such young employees are deliberately attempting to take advantage of you. **You should give them the benefit of the doubt and not assume that they are deliberately behaving as if they want to take advantage of you.**

If you see a cannabis sector employee's aggressiveness or assertiveness during any sales or customer service interaction, watch out! Those two traits when they are present together provide you with an excellent indicator that the employee does not know any better (from lack of appropriate training, education, and coaching) so they behave as they do out of a lack of self-awareness.

If employees in retail cannabis businesses start with an emphasis upon cannabis products and/or the benefits of cannabis products, that should be **a very clear signal to you** that these employees have not been adequately or fully trained, educated, or coached.

*A focus upon **emotions** (not products or product benefits) is the best way to succeed in selling cannabis products at retail businesses and providing customer service follow-up. A focus upon emotions, however, is not as easy for employees as is a focus upon products or product benefits.*

### **Why Our Culture Has Consultative Sales**

The development of legalized cannabis product sales in the United States happened only recently. The cannabis sector, therefore, is relatively much younger compared to other sectors of United States culture which have been using consultative sales and customer service strategies and tactics for decades by now.

In fact, the use of **consultative sales** strategies and tactics in American culture in the 21<sup>st</sup> century can easily be found without much research effort at all. Consultative sales as a set of strategies and tactics has already been proven across numerous American business sectors for decades. You need look no further than to well-established sales practices being done every day for customers seeking to purchase personal vehicles, household appliances, business attire, jewelry, technology devices, and travel package deals, just to name a few.

The consultative sales approach differs from several other established American sales strategies and tactics that focus on other aspects of the sales/customer service interactions and/or the item(s) being sold. It is true that the United States cannabis sector can benefit by emulating consultative sales strategies and tactics that have already been proven within other business sectors.

**Using consultative sales strategies and tactics can prevent a cannabis sales venue owner or manager or sales or customer service employee in the cannabis sector from taking advantage of consumers.**

The first most important (and probably the least obvious) way to succeed in consultative sales or customer service interactions is to consider how a cannabis dispensary sales or customer service employee and a consumer who is age 50 and up start their in-person interaction at the

venue. If the employee succeeds in making genuine and not-forced eye contact immediately when greeting a customer who is age 50 and up, doing so will get things started on the right path.

An age gap measured in decades between individuals in American society today can easily motivate any younger person to avoid eye contact with the older person. This is perfectly natural. However, avoidance of eye contact with an older person by a younger person readily conveys **detachment**.

The younger person quickly can be evaluated inaccurately by the older person as being a **rude or disinterested youngster who is not worth dealing with at all**.

This likely will lead directly to a loss of any sales because the older person will walk away from the sale.

## **Building Rapport**

You probably have already experienced sales employees who are younger than you when you shop in a business that sells technology products. Such businesses also tend to hire employees who are in their 20s and 30s stemming from the stereotype that younger people understand technology products better than all other age groups. This age gap can lead to technology product sales employees not taking appropriate time or making sufficient efforts to build rapport with an older customer.

When you share eye contact for the first time with another person you signify the start of a possible emotional connection with them. Successful sales and customer service interactions demand that there be at least a brief positive emotional connection between the seller and the buyer. It is really that simple.

You should take the lead. This is what I recommend to you.

You should make sure direct eye contact with the sales or customer service employees happens so you will get off to a great start in your interaction in any retail cannabis business. Doing so is a nonverbal way of proving that you are a self-confident cannabis consumer that will not be taken advantage of by any salesperson. Aligning your shoulders with the shoulders of the employee may also be a plus for you in successful sales conversations.

Another rapport-building strategy is to focus the interaction upon the **needs and wants** you have as a cannabis consumer versus the needs of the sales/customer service employee.

Tell the employee why you came to visit the cannabis business today. You should not use words that contain explanations such as "...just curious..." or "...only looking around..." Doing so may encourage the sales employee not to take you seriously as a



person ready to spend money on cannabis products.

## **Age and pleasure**

The human body and mind experience pleasure regardless of how many birthdays the person has celebrated. In your conversations with sales employees, you can maintain the focus upon the need we all have to experience pleasure. While the cultural context will be vastly different—it is easy for many older Americans to remember the time when cannabis was illegal everywhere—the human experience of pleasure is universal and unifying.

You can give responses to the sales employee's questions about the kinds of pleasure you might be interested in learning more about. There is a huge range of pleasure-producing cannabis products from which you can choose to talk about.

## **Age and pain**

Older people have often had more time in life to learn that pain is to be expected as a natural aspect of daily living. Any younger person you meet in a retail cannabis outlet may not have an equivalent number of years of experience with pain, yet you should expect them to show empathy to you regarding how you want to manage your pain.

There is an increasingly large list of cannabis products that work well for pain management that you can talk with sales employees about. First, ask them a focused question that will zero in on what particular type of pain management you want. A person with emotional pain (such as depression and grief) will always be a very different kind of customer for a sales employee as compared to a person with physical pain (such as arthritis or muscle spasms.)

## **Age and fun**

To quote a Beatles song, “...**fun is the one thing that money can't buy...**”

Having fun is a mind thing. The human mind needs to allow and encourage the experiences of having fun. Having money does not necessarily enable the mind to experience having fun.

The use of specific cannabis products that promote anyone's **mental acceptance of fun** is something you can speak about with sales employees in the cannabis business.



Increasing pleasure, decreasing pain, and enabling fun are the three cornerstones of sales within the cannabis industry in the 21<sup>st</sup> century.

## **Ageism**

In American culture it's very easy to find ageism—a common prejudice, discrimination, and stereotyping of people based solely on their age.

If a sales employee knows that they "don't like" being in the presence of older people, they certainly are going to have a very difficult time succeeding in cannabis product sales. This is a reality they cannot escape.

Their preferences for people to hang out with is something they have developed over time so you should not expect such preferences to "go away" when you walk in to talk with sales employees.

Young people who have no problems being in the presence of older people will be the ones most likely to succeed in closing sales with cannabis customers who are age 50 and up. Sales employees need to be brutally honest with themselves when trying to determine if they have any problems at all being in the presence of older people who are their customers. Their long-term success in sales to older customers will be in jeopardy if ageism is allowed to affect their professional life.

## **Looking for Common Ground**

American singer/songwriter Paul Simon wrote lyrics a song of his expressing a basic cultural reality in the United States:

**"...EVERY GENERATION THROWS A HERO UP THE POP CHARTS..."**

A young person may look at who is on a list of heroes on over age 50 pop charts and it may seem to them like they are looking at "ancient history."

When it comes to American culture, first the awareness and then the appreciation must be learned. Such things as cultural awareness and cultural appreciation are just not things that any of us are born with.

If sales employees are deficient in their cultural awareness or cultural appreciation of customer who are age 50 and up, they need to accept that this means they will start off behind others of their own age whose awareness and appreciation of culture are greater than their own.

To learn cultural awareness and cultural appreciation, one must start with an open mind. If a person is stuck in ageism, they do not have an open mind. It is so simple.

Attaining and maintaining a mind that is open, however, can give a person the advantage to learn just about anything at any age.

## CHAPTER 2: PREJUDICES AND LISTS OF ENEMIES

The legal environment today out of which the cannabis sector grows has several decades of American history. It is common and quite popular for people today to use the word **marijuana**. What is common or popular, however, may not be the best for preventing being taken advantage of as a cannabis consumer.

To explain very briefly, the preferred term is **cannabis**. This specific word comes from and belongs to the field of biology. All living things on our planet have been organized into 8 categories that each have a name expressed in Latin, the ancient language from the era of the Roman Empire.

Most people cannot list all 8 categories from memory, but here they are:

- Domain
- Kingdom
- Phylum
- Class
- Order
- Family
- Genus → *the genus name for this plant family is **cannabis***
- Species

### Historical Prejudice Against Mexicans

That common and quite popular English language word **marijuana** came to United States culture many decades ago from the Mexican word **marihuana** (pronounced slightly differently compared to the English version of the word.)

Since that era a generation ago, the English version of the word consistently has conveyed deliberately negative emotional feelings in people who have a mental need to express their deeply felt prejudices. In the present day the word continues to express disapproval if not outright contempt for Mexicans and their presumed use of a plant deemed to be nefarious, dangerous, and even sinful.

White majority prejudice against Mexicans generations ago led to negative stereotypes promoting the perception of cannabis users who were little more than lazy, unproductive, and violent men from south of the border with dark brown skin. See this clipping of a newspaper editorial cartoon and you will begin to understand:



These stereotypes against Mexicans and marijuana persist into the present day. In 2015 when Donald J. Trump was a candidate for the office of President of the United States, his spoken words in public political rallies relied upon existing negative stereotyping of Mexicans. He did so deliberately, not necessarily because he genuinely hates Mexicans (who knows?) He more likely said what he said because Trump figured he could get an emotional rise out of his audiences in the United States if he spoke to their built-in prejudices against Mexicans.

Mexicans—people from south of the U.S. border—years ago became “easy targets” for prejudice. The illogical yet popular idea that “building a wall” between the U.S. and Mexico could insulate Americans from Mexicans across the international border grew and flourished because of the strong prejudice against people from Mexico.

There never was any solid reasoning or logic behind this thinking about the validity of “building a wall” to insulate the U.S. from Mexico, however. What about people who use passenger jets or buses or cars to arrive in the U.S. from Mexico? Have you even heard of a wall that can stop passenger jets or buses or cars? Not in the real world, no. The concept of “building a wall” to safeguard the U.S. from Mexicans, therefore, is a fantasy.

If you are an American citizen who feels prejudice against cannabis because of the plant's ties to Mexico or Mexicans, you should not go further in reading this information. Just stop right here, right now. Just stop.

## Historical Prejudice Against Musicians

Of course, the prejudice involving cannabis is not limited to Mexicans. The white male majority of generations ago in the United States feared that somehow white women would become seduced by black male musicians in the emerging jazz music culture where cannabis use was common. White men saw the need to protect women from such fates.

This cultural outcome in the United States is accurately known as **racial prejudice against black people** pure and simple. It really has nothing at all to do with jazz music or musicians, per se. The prejudiced white people of that time were blinded by their anger so they could not focus upon the truth that there always have been and always will be jazz musicians who are male and white who also potentially can seduce white women.

Federal laws controlling cannabis cultivation and distribution emerged from that American culture of disapproval. This explains how there remains today a strong prejudice at the federal level against cannabis and cannabis users.

Conservatives tend to oppose anyone's use of cannabis for any reason based on moral principles. Conservatives believe that they "know" cannabis usage is "wrong" (morally) and therefore cannabis can never be "right" under any circumstances. Some conservatives may also perceive that they "heard" the word of God tell them that cannabis usage is "wrong" and since God said so to them directly or indirectly, then they believe cannabis usage is "wrong" (morally) for them no matter what society may say to the contrary.

## The President's War on Drugs

Sometimes, however, conservatives toss aside "wrong" versus "right" moral considerations in favor of partisan politics. Consider President Richard Nixon as an excellent example.

While he was the 37th President of the United States (from 1969 through 1974), Nixon brought upon himself and the United States a criminal behaviors scandal known as Watergate—named after a Washington, DC hotel situated on the Potomac River. Several men broke in after dark and entered private offices at the Watergate of the Democratic National Committee. This was a breaking-and-entering crime. The motivation for doing the crime was to steal proprietary information to help Nixon defame his Democratic Party opponent and win re-election in 1972.

Nixon was re-elected in 1972. He then faced the very real threat of impeachment by the House of Representatives and conviction by the Senate resulting in his removal from office stemming from the criminal behaviors of his associates and the subsequent coverup in which he engaged. He chose instead to resign in disgrace in 1974 and return to live in his native California. Nixon then received a presidential pardon from the 38<sup>th</sup> President of the United States, Gerald R. Ford.

Simultaneously to the scandal tied to his criminal behaviors, Nixon also earned credit or blame for the current prejudice against cannabis. It was during the Nixon presidency that the so-called “war on drugs” was started by his administration in the White House.

This incorrectly named “war” has been ongoing for decades ever since. Had the “war” been winnable, the United States might have become a drug-free society. The proof about the failure of the misnamed “war on drugs” is easy to be found—especially since federal efforts to fight drug sales and use never led to “victory” by anti-drug proponents. Conservatives today tend to ignore the failure of the “war on drugs” and stick to their beliefs regarding drug use.

## Targeting Enemies

One of the top advisors to President Nixon was John Ehrlichman, who served as a trusted domestic policy adviser and coach to the president. Ehrlichman [explained for the record](#) that cannabis was added to Schedule 1 during the 1970s for partisan political reasons:

***“YOU WANT TO KNOW WHAT THIS WAS REALLY ALL ABOUT? THE NIXON CAMPAIGN IN 1968, AND THE NIXON WHITE HOUSE AFTER THAT, HAD TWO ENEMIES: THE ANTIWAR LEFT AND BLACK PEOPLE. YOU UNDERSTAND WHAT I’M SAYING? WE KNEW WE COULDN’T MAKE IT ILLEGAL TO BE EITHER AGAINST THE WAR OR BLACK, BUT BY GETTING THE PUBLIC TO ASSOCIATE THE HIPPIES WITH MARIJUANA AND BLACKS WITH HEROIN, AND THEN CRIMINALIZING BOTH HEAVILY, WE COULD DISRUPT THOSE COMMUNITIES. WE COULD ARREST THEIR LEADERS, RAID THEIR HOMES, BREAK UP THEIR MEETINGS, AND VILIFY THEM NIGHT AFTER NIGHT ON THE EVENING NEWS. DID WE KNOW WE WERE LYING ABOUT THE DRUGS? OF COURSE WE DID.”***

The effects of institutionalized prejudice against cannabis started during the Nixon years remain today long after Nixon and most of his associates died.

People who have learned to ***think for themselves*** regardless of what the federal government says do not mistake the interest in using cannabis as having originated in the United States, or, as conservatives falsely claim, that the interest in using cannabis is stimulated by unsavory, no-good people who deliberately choose a “lifestyle” that is “bad” instead of “good.”

## Why Do People Use Cannabis?

Since the simplest explanation is always the most sensible and preferred, if you genuinely want to understand why cannabis has been used by people for tens of thousands of years, look no further than the fact **cannabis causes pleasure and reduces pain**.

It is that basic.

Using cannabis is not at all about “turning away from God” and then “seeking a life of sin” (in the moral sense) and then living a life of lawbreaking as some conservatives want you to believe. These beliefs are way off target because the use of cannabis is most easily explained as people of all ages seek pleasure and try to reduce their pain.

## Deeply Woven in the Fabric of Culture

The unfortunate reality today is cannabis consumers today must be prepared to deal with a clear and present prejudice that has been deeply woven into the fabric of United States culture for nearly a century now.

You can easily find nicknames in use in the United States that prove the existence of an all-American institutionalized prejudice against cannabis. Today it is easy to find over a thousand slang terms—some obscure and others well-known—including cheeba, mota, pot, weed, and so on.

Whenever you want to use a word that remains deliberately neutral of any prejudice towards minorities yet is fully accurate, you will want to use the word **cannabis**.

## Counterculture Movement to Fight Prejudice

A strong backlash occurred in the United States during the 1960s and 1970s as a response to conservative opinions and restrictive federal laws woven deeply into the fabric of American culture. The old, original prejudice against black male jazz musicians

of the 1920s and 1930s was updated in the late 1940s. Jazz artists of the present day understand what it is like to feel the hurt caused by cultural stereotyping.

Further updating of the anti-musician prejudice in American culture during the early 1960s expanded to include folk singers as well as rock and roll stars. Another update happened in the late 20<sup>th</sup> century to include hip-hop artists. Anyone can readily identify such crystal-clear patterns of prejudice spanning many decades against artists in the music industry.

If you are a person who is unable to set aside generations old prejudices regarding cannabis and towards people of any given skin color who use cannabis, you will face an uphill struggle to defend yourself against cannabis sales and customer service exploiters. In truth, the strategies and tactics presented in this book will work only for people who are unburdened by cultural or partisan political prejudices.

### **Those Who Take Advantage of You**

There are at least two types of people within most cultures around the world today: (1) those who take advantage of you, and (2) those who do not take advantage of you. The definition of those who take advantage of you is built upon, and stems from, observable human motivations **of personal or financial gain.**

Those who take advantage of you readily can be identified in any human activities today ranging from capitalistic business enterprises to not-for-profit agencies and organizations. What makes anybody someone who takes advantage of others is the essential human motivation to acquire personal or financial gain that, in turn, drives the person's chosen behaviors in the workplace. Those who want to take advantage of you are not unique to the cannabis sector, of course.

You may have encountered such people whenever you have gone into a new car showroom, for example.

Human motivation towards personal or financial gain is not a bad thing. We all need to earn money to pay for the life we lead.

**This book is based upon the strong belief that it is bad when unsuspecting consumers are undefended and therefore are taken advantage of by others.**

You can only fight back against this type of exploitation if you know (a) how to recognize when you are being taken advantage of, and (b) how to respond to people whom you conclude are attempting to take advantage of you. Those two aspects of 21<sup>st</sup> century life are exactly what this book is all about and why you can learn so much from this book that you didn't already know.



## CHAPTER 3: IT'S PERSONAL

I consistently have found that people who become active in a given cause have developed strong beliefs and values originating from personal experience. I deliberately chose to be a **cannabis advocate** to achieve medical outcomes because of such personal experience. I want to be as transparent as possible about that here in this book.

So, okay, who am I and why did I write this book? I'm a professional life coach and trainer who lives and works in the City of Las Vegas, Nevada. I earned my doctoral degree in communications and taught full-time at the university level, so that's why I am called **Dr. Woody**. I also earned a master's degree in communications and an undergraduate degree in journalism and worked professionally as a writer and producer in the radio broadcasting business.

For many years I also successfully taught and trained adults in college classrooms and using online education apps.

I approach the subject of being a cannabis consumer based on solid real-life experience I've had plus my professional background in adapting communications and sales efforts to generations.

### Consumer Experience

I'm experienced with using CBD (the abbreviation for cannabidiol) as an oral spray, in pill and capsule form, in gummies, in chocolate candies, vaping, and in cream and lotion form rubbed into my skin on those occasions when I need relief for annoying aches and pains.

Initially, as a Nevada resident I got my state's Marijuana Agent Card. As an "agent," this essentially meant I passed the fingerprinting scrutiny and successfully got through the required background check to verify I am not a lawbreaker. I became listed in a state database. I have no criminal behaviors to conceal from anyone.

Initially, I also got a Nevada Medical Marijuana Patient Card. This meant I became eligible to purchase stronger dosages of cannabis products priced at a discount in Nevada. People in Nevada without a medical marijuana patient card pay higher prices and higher taxes plus the dosages available to recreational use customers are lower than the medicinal dosages commonly available.

While this distinction is true throughout Nevada, the laws where you live certainly may be different. Be sure you find out what laws apply to you where you live before you take any efforts to get a marijuana patient card since you may not actually need to hold a marijuana patient card at all.

I no longer have either a medical marijuana card or a marijuana agent card in Nevada because those cards are not relevant to me nowadays. Your situation may be different from mine, however.

When I was a young adult during the 1970s, I first experienced cannabis in “classic methods”—smoking joints, using bong, and in edible form in cookies and brownies. I also have current experience with today's contemporary mixtures of CBD + THC (the abbreviation for tetrahydrocannabinol) blended together in the manufacturing of new products intended for relieving chronic pain and smoothing out other natural physical and mental maladies that we all experience as we grow older.

Initially, I completed a variety of educational and skill-building training: Dispensary Staff & Patient Consulting training in Las Vegas and the Nevada Dispensary Association's Dispensary Agent Training to comply with Nevada NRS 453 cannabis training and employment requirements. I also was certified following training within Budtender Fight Club Las Vegas Cannabis Education Training. This kind of training is fine if you're willing to pay for it but you do not need this kind of training at all.

In the time before the late 2019 outbreak of the worldwide coronavirus pandemic, I frequently attended dispensary-affiliated public cannabis education events in Las Vegas to keep my knowledge current. These in-person public events lost popularity specifically as a result of the negative impact upon the Las Vegas local economy from the pandemic. I am not certain whether there be a second phase of popularity for such in-person public events pertaining to cannabis.

My professional background in the **best practices of professional sales in the United States** helps me to stand out from others who do sales and customer service coaching and training. I am not at all theoretical and instead I deliberately emphasize business world practicalities that anyone can put to their own use in their professional career.

I mastered **consultative sales** strategies and tactics while employed by the prestigious Washington, DC consulting firm Booz Allen Hamilton and I was employed providing professional guidance and advice using consultative sales approaches to cabinet-level agencies such as the Defense Department and the Justice Department. I also have cold-calling direct sales experience from my career in the radio broadcasting industry.

I was employed for a decade in Washington, DC at the national headquarters of the American Association of Retired Persons (AARP) where I sharpened my wide-ranging professional skills in adapting communications to be persuasive to people who have reached age 50 plus.

I created and managed the nonprofit advocacy organization's first public blog and served as a ghost blogger for executives. My strategic communications leadership function at AARP included online reputation management responsibilities using social media. From that particular employment experience in our nation's capital, I learned

what's what when it comes to adapting communications and sales successfully to work with Americans who have reached age 50 plus.

## Personal History

During the late 1970s I was accepted into a graduate school degree program at Humboldt State University where my perspective on cannabis got redirected. This California state university nearly 300 miles north of San Francisco is relatively small (under 10,000 students) and is situated in Humboldt County—famously known since the 1960s as a nexus for cannabis culture. Today this region is known as the Emerald Triangle (Humboldt, Mendocino, and Trinity Counties), often holding the distinction as the largest cannabis-producing region in the United States.

I was like countless other young people in their 20s attending college across the nation who tried cannabis for recreational purposes in those days even though it was an illegal substance. While I was attending Humboldt State University, I found that students my age using cannabis thought of it as normal as drinking beer in college.

The experience was all about “getting buzzed or getting high” in a social setting (usually with friends involved in consuming comfort food at a pot party) and I do not recall anybody in those days using the word **medical** together with the word **marijuana**.

In contrast, people who have reached the age of 50 are considered by our culture as having “grown up.” People, like me, in this 50+ age group are different from other age groups when it comes to cannabis use: We are not necessarily seeking to use cannabis on a regular basis to “get buzzed” or “get high” like we probably did before when we were young.

That’s how I got started using cannabis. My initial introduction came by way of a fellow Humboldt State University graduate student. He baked “special” brownies for a party of local students in Eureka. But he deliberately chose not to tell me about a certain undisclosed ingredient until I had finished off a couple of those delicious chocolate wonders!

For me, as a young man at age 25, having this first-time experience of eating cannabis in a dessert was simultaneously horrifying and mind-blowing. The science I did not know then is undeniable: Human lungs can ingest cannabis much faster than intestines. Cannabis in edible form takes longer for you to notice and yet the feeling buzzed or feeling high effect can remain in your body much longer compared to smoking a joint.

Looking back on those days, I’m sure there are many who knew me who were far more “laid back” as we used to say in those days and who also were more experimental

compared to me when using cannabis. I admit I came across as more than just a little old-fashioned and “stuffy” compared to them because I was **not interested in getting buzzed or getting high every day**. When I shared my fantasies with some of my friends in Eureka about becoming a professional writer and a university professor after earning my master’s degree from Humboldt State University, they literally laughed at me.

Through all that I developed a respect for people who choose cannabis for bringing pleasure to their lives. During my years in Humboldt County, California in the late 1970s I never saw one cannabis user morph into criminal activity or to addiction to hard drugs. Of course, the perception that cannabis is a “gateway” to drug addiction and violent criminal behavior has long been used as a popular fantasy of conservatives.

I believe due to the prominence of cannabis use in Humboldt County, California, signs of such any common progression from cannabis to heroin to criminal behavior (if one actually existed) would have been blatantly obvious for everyone to observe. But I never personally witnessed any of that.

While living in Northern California nearly 50 years ago I learned how easy it is for anyone to develop anti-cannabis beliefs and values without ever considering factual or scientific evidence. I grant that people have a right to believe as they choose, but I have consistently found those who maintain anti-cannabis beliefs and values typically are making a strictly personal choice that disregards both objectivity and rational thinking.

It is well-documented that the prejudice in United States culture against cannabis was born a generation ago fueled by racism. There are clear anti-Mexican and anti-black fears in the hearts of minds of white people today—just as was true during the early decades of the 20<sup>th</sup> century. But these anti-cannabis beliefs spring from a strictly personal choice to keep one’s mind closed.

I earned my master’s degree in Humboldt County, California and then immediately moved on to a doctoral degree program at Indiana University in Bloomington. Living as a graduate student in Bloomington, Indiana (a haven for open-minded people especially compared to the rest of the state) taught me many lessons about cannabis use.

My personal experience with cannabis in Indiana was with smoking a joint, using a bong, and in edible form such as a cookie or brownie. But cannabis use as I saw it was strictly a casual pursuit people sought for pleasure and relief from the pressures of graduate school studies. I did not witness any progression in Indiana in which people who used cannabis went on to lives burdened by hard drug use and criminality.

The decade of the 1970s gave rise to a national trend within the United States to decrease penalties and ultimately to decriminalize cannabis use. Then in 1996 the state of California became the first to legalize medical uses of cannabis. A quiet and steady social and cultural movement continued throughout the remaining years of the 20<sup>th</sup> century to foster increased acceptance of medical cannabis usage followed by changing of laws.

The most powerful personal experience I had that motivated me to be a cannabis advocate happened in the second decade of the 21<sup>st</sup> century. My lifelong partner (Sam) suffers from constant pain due to rheumatoid arthritis, which has no cure.

Medical use of cannabis had a legal tradition by the time I started working in the Financial District of San Francisco. An infrastructure had been created in the Bay Area to administer the sales and dispensing of cannabis for people with selected medical conditions for which there is no cure. This infrastructure enabled easy awareness, choice, ordering, and booking of delivery of medical cannabis for Sam.

For him, the medical use of cannabis changed his whole outlook on life by giving him, an adult male who was then age 54, control over reducing his daily arthritic pain for the very first time in his life.

**Seeing the joy in the eyes of a loved one who manages chronic pain with medical cannabis is an indelible personal experience.**

For you, there are numerous medical use of cannabis available today. The abundance of choices may seem overwhelming, however.

## CHAPTER 3: CHOICES FOR GROWNUPS

Buying cannabis illegally is very simply a most serious risk for everybody. If you are caught and convicted, you could be locked up. Your life will never be the same after these experiences.

In an increasing number of locations across the United States, however, legal cannabis today is regulated and taxed. This caused a cultural change in local areas across the U.S. empowering grownups to have peace of mind when they choose to use cannabis products for medical and recreational purposes.

**Do not make the mistake of thinking that merely because cannabis is legal in some places that you can buy cannabis on the black market without risk. There continues to be a life-changing risk involved in buying cannabis illegally.**

However, if live in places where cannabis is regulated and taxed and you want to manage chronic pain or other physical and emotional hurt you are experiencing, using cannabis can be a sensible choice if you approach it correctly.

If you are suffering from chronic physical or emotional conditions and you are above the age of 21, you can reasonably choose to stop listening to anyone echoing anti-cannabis advice that has been around for almost 100 years now. Once you have reached age 50 or above, you should have sufficient life experience to teach you it's time to **think for yourself** regarding cannabis usage and not listen to the naysayers.

That's the central point of this book: Choose to think for yourself about how you manage pain and suffering in your life.

Becoming a savvy cannabis consumer at age 50 plus can promote peace of mind while also reducing your pain and easing your suffering.

The very first step is to find out what the laws regarding cannabis are where you live.

Selected state and local laws make possible the existence of dispensaries selling cannabis products to the general public within a business environment.

### Where to Start

I relocated to Nevada in 2012 which was before cannabis sales and use was legalized in this state. If you are a current resident of states that have such dispensaries, arriving at the choice to use cannabis will be relatively simplified.

You should first visit [WEEDMAPS](#) online. There you can quickly look up your locally available cannabis dispensaries, supporting businesses, and credible medical advice.

Then you should go inside a local cannabis dispensary and talk face-to-face with the people who work there. It does not matter whether you use cannabis for medical or recreational purposes. The outcome is your reduction of pain and easing of suffering.

What happens inside the dispensary is you can quickly learn what you need in your local area if you want to buy cannabis products for your personal use:

- What (if any) government-issued identification card do you need for the dispensary to be able to legally sell you cannabis products?
- What (if any) state residency requirements are there? Can you legally cross state lines to buy and/or consume cannabis products?
- What (if any) legal restrictions are there in the local area governing times and venues where you can buy and/or consume cannabis products?
- What (if any) detailed information about the cannabis products are available on the product container or packaging or printouts?

A 21<sup>st</sup> century trend is the development and marketing of Las Vegas, Nevada as a **particular and specific destination** for visitors from elsewhere who want to try using cannabis products. Some business leaders in the cannabis sector have expressed the desire to transform Las Vegas into a North American equivalent to Amsterdam which has embraced the status of a legal venue for enjoying cannabis.

Las Vegas visitors can easily find ways to enjoy cannabis while staying here in this Mojave Desert playground for grownups. Even though California has legalized cannabis sales, people nonetheless travel from the Los Angeles area to Las Vegas regularly to purchase and enjoy cannabis here because Las Vegas, if nothing else, is a pleasure-oriented place for adults to savor.

Where you live may have certain selected cannabis products such as **CBD (cannabidiol)** available for purchase in a retail settings.

Availability may include your local CVS or Walgreens or the corner convenient store.

You may find CBD available for purchase at the local gym juice bar or at the corner convenience store that is also a gas station. You will easily find CBD for sale legally online.

The expansion of CBD sales across the United States has happened remarkably quickly following the 2018 passage of what's known as [The Farm Bill](#).

A synthetic variation of THC (**TetraHydroCannabinol**) may also be legally available where you live. It's called **Delta-8**. You can ask about Delta-8 directly from either online sales outlets or in-person inside retail establishments.

Yet, you will want to be smart and carefully read product information before you make any cannabis product purchase. Ask the retailer to show you the full descriptions of the cannabis product rather than just taking a glance at the product container or packaging.

If all you see is merely a brand name along with a few short words such as *calm* or *alert* or *sleep*, that's not sufficient reason for you to purchase the cannabis product with confidence or peace of mind.

Even if you were pointed towards specific cannabis products by someone you respect (a registered nurse, for example), you need to read the available disclosure information about the specific cannabis product before you spend any money on a purchase.

If you're told at the retail location that no such disclosure information is available, that's a red flag. It means it's time to walk away and shop somewhere else—preferably at licensed dispensary.

Cannabis culture in the United States presently is being marketed as:

- easy
- fun
- relaxing
- cool
- analgesic (pain relieving)
- defiant
- liberating

Do not let the enticing marketing of cannabis culture distract you. The reason why marketing and advertising work is they redirect your attention away from one thing over to some other thing.

The need is for you to attain a savvy awareness about what's in cannabis products you may want to buy, and what specific effects are intended by the cannabis products (such as reducing pain, helping you sleep better, reducing your anxiety, and so forth.) Cannabis marketing with clever wording and appealing imagery is no substitute for facts found in cannabis product information.

### **If You Want Personalized Medical Advice from a Medical Doctor**

After you read this book, if you want personalized advice to guide you in the legal use of cannabis products for medical outcomes, the best I can do is recommend that you talk with a medical doctor.



I have direct experience being advised (as a patient) by Carmen Jones, MD. She is a medical doctor located in Las Vegas. She is an advocate for using legal cannabis products so patients can achieve less physical and emotional pain and discover a better, happier life.

No matter where you may live, Dr. Carmen Jones will interact successfully with you over the phone in complete privacy.

Learn more right now by visiting her website: <https://wildflowermedical.com/>

You also can choose to call Dr. Carmen Jones at **702-773-1144**

## CHAPTER 4: THE GREEN RUSH

In California in 1848 an unexpected social and cultural movement called the Gold Rush captivated the dreams of adventurous people who hurried in large numbers to the West Coast to cash in on a risky, yet promising, gold mining industry. Over a century and a half later, an equally unexpected social and culture movement named the Green Rush was born.

As with gold mining, the cannabis industry of today is similarly both risky and promising. It is attracting adventurous people seeking to take social and economic advantage of new legislative trends decriminalizing the use of cannabis.

Cannabis remains listed within [Schedule 1](#) of the United States Drug Enforcement Administration (DEA) along with heroin, LSD, ecstasy, and peyote. The reality is there are no established proofs in either the scientific or medical sectors of our nation today genuinely or logically equating cannabis to heroin, LSD, ecstasy, or peyote.

Meanwhile, the use of cannabis can be traced back in world history many thousands of years. In 1964 an Israeli organic chemist and professor ([Raphael Mechoulam](#)) at Hebrew University in Jerusalem was the first to discover and name THC in the cannabis plant. Medical research on the effects of cannabis upon human beings has been conducted in Israel since that discovery. Medical doctors in Israel can legally prescribe cannabis for certain patients.

CBD does not work in the human body to cause feelings or being “high” or spaced-out. That is what THC does. Many people in the United States incorrectly lump CBD together with THC and think of them as one. There you will use the word **marijuana** to demonize and amplify well-documented and longstanding cultural prejudices without considering science or historical facts concerning CBD and THC separately.

In the 1800s, an Irish physician and medical researcher ([William B. O'Shaughnessy](#)) led the way for expanding worldwide understanding of specific therapeutic effects of the cannabis plant. During the 1940s, the identification in Great Britain of CBD in the cannabis plant expanded scientific knowledge several steps further. Eventually, the phrase the “medicine plant” would come into common usage outside the scientific world as a shortcut for describing the beneficial uses of cannabis.

While advances were being made in Europe and in Israel, due to our federal government's criminalization of cannabis dating back to the 1920s, medical research to determine the healing effects of cannabis upon human beings in the United States has been restricted. Research is done, not unexpectedly, to validate the risks (rather than the benefits) of cannabis use to serve a conservative agenda.

It is worth noting is that it's common to discover how medical schools in the United States avoid the very subject of cannabis. [The medical doctor you regularly see may know nothing about marijuana](#).

At the federal level, to date the highest-ranking government official to take a clear anti-cannabis stance based upon traditional conservative ideology was former Republican Senator Jeff Sessions of Alabama. He was the 84<sup>th</sup> Attorney General of the United States. Before he was fired in 2017 by President Donald Trump, Sessions [expressed his conservative views](#) against using cannabis using the strength and credibility of his role as Attorney General.

Sessions claimed he was “astonished” by suggestions that medical marijuana could be a cure for the epidemic that’s ravaging the United States telling reporters in Richmond, VA that medical use of the drug has “been hyped, maybe too much.”

In his [speech before federal, state and local law enforcement attendees](#) Sessions said the only way to end the opioid and heroin crisis was through tactical criminal enforcement, better treatment options and stronger prevention efforts, not by offering addicts something that’s “only slightly less awful,” like legal marijuana.

“I realize this may be an unfashionable belief in a time of growing tolerance of drug use. But too many lives are at stake to worry about being fashionable. I reject the idea that America will be a better place if marijuana is sold in every corner store. And I am astonished to hear people suggest that we can solve our heroin crisis by legalizing marijuana—so people can trade one life-wrecking dependency for another that’s only slightly less awful,” Sessions said. “Our nation needs to say clearly once again that using drugs will destroy your life.”

Such traditional conservative viewpoints ignore the failure of the “war on drugs” as well as the point that using cannabis can reduce your pain and ease your suffering.

To align yourself with traditional conservative anti-cannabis ideology, you must make the decision that your chosen ideology is more important to you than reducing pain and easing suffering for yourself or your loved ones.

In 2019 conservative commentator Ann Coulter, an excellent writer whom I believe has a very appealing sense of humor that makes her worth reading, wrote with about what she called “high crimes” in [her blog](#), urging her conservative readers to fearing the concept of horrifying homicidal violence brought on by cannabis use. Colter chose not to write about the fact that **using cannabis reduces pain and eases suffering**—the simplest and strongest motivation any person has for considering the usage of legalized cannabis products.

Our nation has seen this deliberate arousing of fear or alarm about cannabis use for a generation now. Be sure to watch the 1936 film [Reefer Madness](#) and you will immediately understand.

In United States culture public opinion about using cannabis is **trending away** from conservative viewpoints rooted in the old-fashioned, early 20<sup>th</sup> century prejudice that only “bad” people use cannabis because they enjoy being sinners and turning away from Almighty God.

In 2018 a [public opinion survey](#) conducted in the states where medical marijuana is legal found that cannabis consumers age 40 plus cite pain relief as their primary reason for using it. Other reasons included relaxation, better sleep, and treating or managing a health problem. Only a small percentage (six percent of those surveyed) reported that they use cannabis “to get high or stoned.”

That same year a [coalition of major civil rights organizations urged Congress](#) to remove cannabis from the DEA’s Schedule 1.

Nowadays you can choose to believe whatever or whomever you want regarding cannabis. Conservatives, as a group of people, are the most likely to be anti-cannabis. If you are a conservative and you want to consider cannabis, you will face difficulties in being accepted by your fellow conservatives. It may be best to keep your cannabis interests to yourself if you are a conservative or if you hang out with conservatives. Don’t bring upon yourself the anti-cannabis disdain that is alive and well out there right now where you live.

However, I hope you arrive at your own conclusions by learning how to **think for yourself** and do not align yourself with high-ranking federal officials or bloggers who advocate against cannabis use based on traditional conservative ideology and a century or so of cultural prejudice.

It remains a fact that certain specific cannabis products (such as CBD) genuinely alleviate people’s pain and suffering despite persistently negative connotations cannabis continues to have in American society.

## CHAPTER 6: CHALLENGES TO FEDERAL CREDIBILITY

Led by California, various states have started to change their laws regulating cannabis. This has set in motion an immediate tension between federal versus state law enforcement priorities and outcomes.

In Washington, DC, the United States Food & Drug Administration (FDA) has well-known and well-accepted standards and federal regulations for foods and drugs sold in the United States. We have all seen those labels on packaged foods and prescription drugs, for instance.

Cannabis products are not included in those FDA standards and federal regulations and will never be as long as the Drug Enforcement Administration (DEA) has cannabis on their list of what they consider to be bad drugs.

Because of the position these two important agencies of the federal government take on cannabis, the social, legal, and cultural landscape is very tangled.

If you intend to become a savvy cannabis consumer, you first must get comfortable navigating what is arguably a very twisted social, legal, and cultural landscape.

You first need to learn how you can be successful in using your mind.

### Mind Voice

Each of us has the capacity to use what I call our **mind voice**. The mind voice we each have within us happens to use these four elements we all have—brain + mind + conscious thoughts + subconscious thoughts and memories.

Some people choose to refer to this as **Neuro-Linguistic Programming** (NLP) an approach to communication, personal development, and psychotherapy created during the 1970s by Richard Bandler and John Grinder. I prefer instead to keep using the more simple and easier-to-remember phrase of **mind voice**.

I urge you get my book *Mind Voice: All You Need to Start Using Your Mental Powers* available as an [eBook](#).

One simple secret is this: You own the space in your head between your ears, so it is yours to control as you can. Your mind will do whatever you tell it is true. Until you choose to take control of your own mind and tell it specific truths that you value in your life, there may be consequences in your life that you do not want for yourself or your loved ones.

# What you or others put into your mind can change your success or failure in this life.

You can choose to disregard this wisdom and your life will continue on in the same direction (or lack of direction) you're on right at this moment. Your levels of pain and suffering will also continue.

Or, you can choose to change what your Mind Voice is telling you inside your head every day of your life and bring yourself a better and happier life with less pain and suffering.

It's a quite simple choice between only two options: (1) Use your Mind Voice, or (2) Do nothing and stay exactly as you are right now.

## A Mind Power Skill You Should Learn

I recommend that you should work to become **someone who can successfully hold conflicting and contradictory truths in your mind without allowing one truth to eliminate the validity of another truth.**

Few people are born with such a critical thinking skill; this skill needs to be learned.

That kind of critical thinking skill will certainly come in handy when you consider this puzzle:

It is totally true cannabis is considered by the United States federal government's Drug Enforcement Administration as a drug with no accepted medical use and a high potential for abuse, yet it is also totally true cannabis products cause specific effects in human beings such as reducing pain, helping you sleep better, reducing your anxiety, and so forth.

Are you someone who will allow one such conflicting and contradictory truth eliminate the validity of the other truth?

Opponents of cannabis usage in the United States typically cite the lack of FDA approval for cannabis along with its DEA Schedule 1 status. The core reason these two facts are frequently presented together by opponents of cannabis usage is to persuade you to steer clear of cannabis usage because traditional conservative ideology considers using cannabis morally wrong.

You are expected by the opponents of cannabis usage to ask this simple question: Why would anyone want to use a substance that is not FDA approved and that is also considered by the DEA to be the equivalent of heroin, LSD, ecstasy, and peyote?

Out here in real life where you can choose to live, however, what seems to some people like a simple question is not really simple at all.

For instance, we in the general public usually do not necessarily learn about conflicting or contradictory truths pertaining to prescription drugs that may seem to be the exact opposite of cannabis--approved by the FDA and not equated by the DEA to heroin, LSD, ecstasy, and peyote.

If you want to, you can make what seems like a simple choice to believe **whatever is approved by the FDA is good and whatever is disapproved of by the DEA is bad.**

Holding onto such a belief is simple and easy, yes.

However, maintaining such a simple and easy belief can prove to be genuinely harmful to you and to your loved ones. I speak from personal experience on this issue.

Let's take a look at one vivid example that may seem to be fictional but is 100% true.

A drug named zestoretic (also called lisinopril) is an FDA-approved prescription drug which was developed from the [poisonous venom of a Brazilian snake](#). If you get bitten by this particular snake, you probably will die since the snake's venom causes a rapid drop in blood pressure leading to death.

Based on real-life business realities, a drug manufacturer concluded that a prescription drug which drops blood pressure would sell well in the United States. You can imagine the drug manufacturer probably guessed correctly that most Americans would never want to take the time to learn the medication was developed from the poisonous venom of a Brazilian snake. Most people will see only a helpful pill and not think about any snakes. Most people who take that prescription drug will not die, but some who took it have died.

Patients whose medical doctors prescribe lisinopril probably also would care more that the patient's blood pressure is being treated by taking a pill than they would ever care about some obscure Brazilian snake they probably never heard of.

The prescription drug lisinopril is FDA-approved and is not equated by the DEA with heroin, LSD, ecstasy, and peyote. Yet, there have been [fatalities associated with lisinopril](#).

Medical doctors continue to prescribe lisinopril to reduce a patient's blood pressure but they now are urged (in product labelling) to be aware of the possible outcome of death for some patients taking this particular medication.

In turn, all patients who choose to still take this medication now are urged (in product labelling) to report immediately to a hospital emergency room if they experience any

unexplained shortness of breath or swelling of the throat or tongue. The reason for that warning is simple: If untreated within a couple of minutes at the hospital ER, the cause of such symptoms might be traced to a blocked airway in your throat that **cuts off the oxygen supply from your lungs and kills you.**

Here's where we arrive when logically evaluating whether or not to use lisinopril prescribed by a trusted medical doctor:

- It is approved by the FDA – yes.
- It is not equated by the DEA with heroin, LSD, ecstasy, and peyote – yes.
- It can produce an allergic reaction in your body that can cause swelling in your throat which if it goes untreated kills you within about 2 minutes – yes.

Sam and I relocated back to Las Vegas in 2015 after living for 18 months in the San Francisco Bay Area where I worked for an international financial services company. Sam continues to use medical marijuana to reduce his pain and ease his suffering from arthritis since cannabis usage is now legal in Nevada.

Neither Sam nor I ever previously heard of that particular poisonous snake from Brazil. Then in 2018, Sam had an allergic reaction that hospital ER medical professionals in Las Vegas concluded was an unexpected consequence of his taking lisinopril to reduce his high blood pressure.

The reason Sam was in the hospital ER was a sudden, unexplained shortness of breath and swelling of his throat that blocked his airway. We rushed to get emergency treatment at 3:00 in the morning on Thanksgiving Day. There was but a two-minute window of opportunity for the professionals in that hospital ER to unblock his airway or Sam would have died.

His life was saved by the skilled professionals in the hospital ER, but Sam remained in a coma and in critical condition. His condition subsequently got worse. **He suffered respiratory failure, two cardiac arrests, and kidney failure that required multiple dialysis sessions.**

He spent 10 long weeks of combined critical care and acute care before Sam was able to be released and return home. **All of these outcomes in the real world started with Sam taking an FDA-approved prescription drug named lisinopril to which he developed an allergy.**

As Sam's husband and caregiver, I came to realize that although a qualified medical doctor prescribed an established and reputable drug in an effort to cause a known beneficial effect for Sam as a patient, there were unintended and nearly fatal consequences.



This does not happen to everyone who takes lisinopril. It does happen to some who take lisinopril. You should decide for yourself and for your loved ones if taking lisinopril is worth the risk.

What medical professionals concluded was Sam's allergic reaction to lisinopril did not "happen overnight." He took the prescription drug for years without any blockage of his airway.

To Sam and me, these painful experiences forced our conclusion that it may take time for a cumulative effect of lisinopril to become evident in a patient who will otherwise benefit from the medication up until the occurrence of potentially fatal consequence.

These overall experience I had with Sam's 2018 medical emergency on Thanksgiving Day persuaded me to believe contemporary medicine as practiced in the United States today **cannot genuinely or accurately be called "an exact science."**

Sam had already accepted the personal responsibility for managing all risks while taking medical marijuana. Previously he had relied upon traditional medicine (such as prescription drugs) from establishment medical practitioners but only found genuine relief for the very first time once he switched to medical marijuana when he was in his 50s.

I also face comparatively minor medical issues compared to Sam's rheumatic arthritis. I had continually asked my primary care physician for advice on how to treat my chronic lower back pain and the effects of a nerve disorder known as essential tremors. My primary care physician did not give me any reasonable options to mitigate my back pain or tremors. In effect, my physician told me to "just learn to live with it."

I was left to think for myself and decide upon actions to take without the benefit of a medical doctor's counsel. I concluded that my best option was to switch to using medical marijuana.

Now is a good time to reiterate something I wrote previously on these pages:

If you want to, you can make what seems like a simple choice to believe **whatever is approved by the FDA is good and whatever is disapproved of by the DEA is bad.** But that is making the wrong choice. And I know of someone who almost died because he chose to rely upon the FDA. Your experiences may differ, but why take any chances?

I **DO NOT** advocate that you stop trusting the medical doctor you go to for maintaining your health and prescribing any medications you may need. But you do not need to suffer bravely if your doctor cannot or won't help you find solutions within traditional Western medicine to address your persistent symptoms. I urge you to stop taking lisinopril no matter because of the risk of possible death from respiratory failure.

I **DO** advocate that you stop paying any attention to cannabis opponents who keep repeating the facts that cannabis lacks FDA approval and is deemed by the DEA to have no medical use.

I **DO** advocate that you think for yourself and do not place complete or blind faith in the FDA or the DEA or the American medical establishment when you consider the known benefits of cannabis for medical use.

I have attempted to show here using my own real-life experiences as a caregiver for a loved one how it is entirely possible for any person who relies upon FDA approved prescription drugs nonetheless to suffer unintended (and potentially fatal) consequences from taking that drug. Sam and I concluded that his 2018 allergic reaction to lisinopril proved to be a far greater health risk when compared to his decision to start using medical marijuana to ease symptoms of arthritis.

When I saw what happened to Sam early on that Thanksgiving morning, I felt as though the FDA and the American medical establishment had failed him and me.

You would be wise to accept the truth that United States federal government (FDA) approval and a well-established American medical community do not together eliminate 100% of the potential risks in your medical treatment nowadays. Nor do they have a complete and trustworthy set of solutions from which you can choose.

You may need to venture out on your own and turn to cannabis products.

You may deeply desire to believe a full or high degree of elimination of risk is possible if you trust the FDA and the medical establishment, but I'm telling you there nonetheless are tangible risks. Full or blind trust in the FDA and the medical establishment can be unwise and one unintended consequence may be that you die.

All this adds up to a clear reality for you: What this means is we each need to reach a **personal acceptance of responsibility** as both Sam and I have done.

The goal is to minimize risks in traditional Western medical treatment by switching to selected cannabis products to bring you relief from suffering that you're not getting by trusting traditional medical standards and procedures.

You may sincerely want to put your faith in the FDA, the established American medical community, and the DEA when it comes to cannabis. But doing so will not give you any guarantees that your traditional medical treatments will provide all that you need to feel well and be free of pain and suffering.

You may also be angry (like me) when things go wrong for you or for your loved ones despite the FDA and the American medical community trying their best to make good decisions. The painful truth is they may not have the exact answers you want or need. You may get angry when you think about the fact that Israel has access to medical research regarding the healing benefits of cannabis but the United States does not.

Once you accept personal responsibility for managing your own risk in selecting your medical treatment, doing so will open up the possibilities for you to become a savvy cannabis consumer so you can derive specific benefits from cannabis in your medical treatment.

### **Few things in real life are completely free of risk.**

When you accept that fact, you are ready to reorient your own thinking about cannabis products.

Depending upon where you live, many of you have legal access to the achievement of tangible medical benefits from using cannabis products.

I hope that you never have to experienced what I did when I placed my faith in the FDA and the American medical establishment.

I sincerely believe turning to selected cannabis usage to treat physical and emotional pain can be far less risky than placing your faith completely in the FDA and the American medical establishment.

The myriad of conflicting standards and legalities in places where cannabis usage has been legalized means you also need to become aware about employment and career risks if you use cannabis.

In Nevada there are employers who concluded logically that pre-employment drug testing can hurt a company's ability to hire employees. [Caesars and other employers](#) dropped their testing for cannabis use in screening applicants to prevent thinning out the available pool of qualified applicants for work. What followed next was [Nevada became the first state to ban pre-employment testing for marijuana use](#).

## CHAPTER 7: HOW TO BUY LEGAL CANNABIS PRODUCTS

I believe it is well worth your time before you jump in and attempt to buy cannabis products legally that you read [Marijuana: The Unbiased Truth about the World's Most Popular Weed](#) written by medical doctor Kevin P. Hill. This is a remarkable book for its honesty and balance as Dr. Hill carefully examines cannabis from both a legal and medical perspective with a special focus on recognizing the potential for cannabis addiction and for unintended consequences as well.

My agenda is entirely different from Dr. Hill's. I will state it clearly and directly for you: **If you are willing to accept personal responsibility for the outcomes, I enthusiastically urge you to turn to legally available cannabis products to address certain medical conditions from which you are suffering.**

It is up to you to evaluate in a clear-cut way whether cannabis usage benefits outweigh risks for you. No reputable medical doctor today is willing to advise you on this important cannabis benefits-versus-risks question unless you happen to live in Israel.

Other than telling you not to use cannabis at all, you should never expect a medical doctor in the United States to tell you precisely what you should do specifically if you choose to use cannabis to address any medical conditions you have. You have a right to feel angry that you are on your own in evaluating whether the benefits outweigh the risks of cannabis usage. You have a right to feel angry that you have to make that choice because of federal laws of the United States.

But you are not alone if you have many questions about what medical benefits there might be for you, especially if you have already experienced how terribly awkward it can be to talk to your primary care physician about your consideration of cannabis usage.

The National Council for Aging Care in Washington, DC has produced a [website for senior citizens](#) which contains accurate and pertinent details about how medical marijuana can help you.

Their site is an excellent starting point if you are just starting to inform yourself about cannabis. There you will find useful cost comparisons showing the differences between retail cannabis products and prescription drugs.

You will also find a list of the symptoms and illnesses the chemicals inside of cannabis plants can help quell or make easier to live with.

Washington, DC, Guam, Puerto Rico, U.S. Virgin Islands, and an increasing number of

states have enacted new laws regarding cannabis affording protection from criminal penalties. If you are a legal-age adult and you live in any of those locations, from a legal standpoint you can confidently buy and consume cannabis products.

The list of the remaining states who have yet to change their laws pertaining to cannabis keeps changing, but you can see up to date and reliable data if you visit [the National Conference of State Legislatures website](#) for current information affecting what is legal today for you based on where you live.

My specific recommendation to you is that you consider purchasing cannabis products only if you first become a savvy cannabis consumer who understands the medical outcomes from using cannabis.

It's a given that I expect you to **accept personal responsibility for the outcomes** of your cannabis usage and not expect a medical professional to help convince you that your cannabis usage is completely free of risks. The absence of risk does not exist, so you should not expect to find a medical professional to lie to you about that reality.

As I previously wrote in this book, from my experience as a patient I can recommend that you consider [Dr. Carmen Jones, MD of Las Vegas](#) for trustworthy advice and recommendations about medical outcomes from cannabis.

I also expect you to become comfortable examining factual data available in print or text format which explains in certain detail what the specific cannabis product you're interested in is and what can do in your body.

If you are someone who already reads labels on packaged food items, you are at an advantage compared to those who never consider what's there on food labels. Cannabis products do not come with have consistent or easy-to-read labels like packaged food, however.

Every state does not have the identical cannabis product labeling or disclosure as does Nevada. But I encourage you at least to **request at the point of purchase** this detailed kind of product labeling and disclosure before you buy any cannabis product for the very first time from any legal retail cannabis business.

Note that you do not need to become an expert when it comes to all such details in a given cannabis product. There is a fundamental level of knowledge that you should have, however, that is quite easy to spell out:

- Learn the crucial differences between **CBD** versus **THC**. (See the section below.)

- Know the differences between cannabis delivery formats (such as capsules/pills, oral sprays, gummies, candies, deserts, vaporized, smoking, rubbing on your skin, etc.)
- Be comfortable with terpenes and how they work in a general sense (such as learning which scent and which effects come from which terpenes.)
- Recognize the extraction method used (because some methods leave toxic residue.)
- Know how to divide the dollar amount for the cannabis product by the net weight of the cannabis product to get an approximate cost per unit. Example: \$30 for 2.35 grams of product equates to about \$12.77 per gram.

This should be obvious, but I will state it directly:

**You should only purchase cannabis products from legal and licensed retail sellers and never from “a dealer” who sells black market drugs.**

If you choose to purchase cannabis products at a gas station or convenience store or CVS or Walgreens, you first should request to read the disclosure information before you make a purchase. If you are not given such disclosure information to read, you should take that as a clear signal that you really need to walk away from that retail environment without purchasing the cannabis product.

You can increase your comfort level with reading and evaluating cannabis product labels and disclosures if you go online to read about this type of information. I recommend the glossary of terms provided on <https://cannahemp.com/discover-cbd/> as a trustworthy source for your ongoing education into cannabis products.

It’s perfectly acceptable for you to ask a cannabis product salesperson in a retail setting any questions that can help you get exactly what you’re looking for. You could, for example, ask: “I want something that has a pine or citrus scent. What do you suggest?” Or “I’m looking for a relatively low amount of THC compared to the level of CBD. Do you have any recommendations on that?”

You may also want to become aware of [nicknames and street name of cannabis](#) currently in use today.

## CBD versus THC

I have already mentioned that CBD is widely available. The easy availability of CBD, however, should not convince you that using CBD is what is the best for your individual needs.

There really are only a couple of essential cannabis industry terms (abbreviations) that you need to know and use correctly in conversation. I have cited these previously in this book. Let me restate them for you here.

CBD is the abbreviation of **cannabidiol**.

THC is the abbreviation of **TetraHydroCannabinol**.

THC is the chemical element famously known for giving a buzz and/or making you feel intoxicated or "high." THC is heavily restricted by federal law which limits where cannabis products containing THC can be purchased legally. CBD—which cannot get you buzzed or high—is very widely available in the United States compared to THC.

In the cannabis industry there is a mechanism commonly known as **the Entourage effect** to define and explain what happens when CBD is combined together with THC. This concept uses the French word *entourage*. Unfortunately, the French word can and does convey multiple meanings and there is no agreement about which meaning is the best meaning.

For example, there was a well-known television series shown on HBO called *Entourage* which used the particular meaning of “a circle of one’s attendants or associates.” That particular definition is completely useless for understanding **the Entourage effect** in the context of the cannabis industry.

The intent behind the use of the phrase **the Entourage effect** within the cannabis industry has always been to describe **synergy**—whenever two or more substances produce a combined effect that is greater than the sum of their separate effects.

One of the best commonly available examples of **the Entourage effect** is this:

*Think of the entourage effect as an orchestra. Individual musical instruments such as the violin or piano are certainly great to listen to on their own. But when combined together in an orchestra, they produce a cohesive sound that’s more harmonious and pleasant than any instrument by itself. ([Source](#))*

You may ask, as I do, why didn’t the cannabis industry go with **the synergy effect** instead of **the Entourage effect**? I suppose there is no answer to this question.



**When the cannabis industry produces products for public sale that combine CBD with THC, the outcome is a particular synergy of effects that is not possible for consumers to receive from using CBD alone or from using THC alone.**

It's important to understand that THC is not legal in as many places compared to CBD. This leads directly to an undeniable reality: Anyone who happens to live in a place where THC cannot legally be sold cannot get **the combined Entourage effect involving CBD and THC.**

When you go shopping for cannabis products that are legal where you happen to live, you should know the difference between CBD versus THC. You should also know that sometimes **the Entourage effect** as a phrase is used to refer to CBD plus non-THC elements such as *terpenes*—often found in cannabis plants producing diverse aromas and enabling aromatherapies.

I recommend that you do online searching for specific cannabis products (such as CBD) that potentially can benefit your individual needs (such as helping you sleep, easing emotional distress, and so forth) accompanied with aromas from which you can choose.

I also recommend that you examine the possible use of [Delta-8 synthetic THC](#) for medical outcomes. This product can be sold legally in most but not all U.S. locations. I discovered that Delta-8 easily can make me feel “high” or “loaded” so I personally am very careful about the dosage of Delta-8 that I may choose to use.

Once you discover particular cannabis products mentioned online that are listed as providing benefits for your individual needs, you can then turn to a local business where cannabis products can be legally sold and distributed. Each person is different from every other person. Your needs are your needs alone. This is not “one size fits all” when it comes to using cannabis products to relieve physical and emotional pain and suffering.

This is why you need to understand what your own individual needs are and then search online to learn about which cannabis products are listed as providing benefits for you versus others.



## CHAPTER 8: U.S. Cannabis Industry

**WHEN IT COMES TO BEING A SAVVY CANNABIS CONSUMER, AND PROTECTING YOURSELF AGAINST BEING TAKEN ADVANTAGE OF, YOU DO NOT NEED TO KNOW EVERYTHING ABOUT ALL THE PLANT SCIENCE OR ALL THE PRODUCT DEVELOPMENT AND MANUFACTURING METHODS.**

Some additional learning is necessary, however. Nobody can quickly become someone who knows what's what in the cannabis industry. I think it is useful if you, a potential or current cannabis consumer, understand what's going on behind the scenes in retail sales efforts.

The terminology in the cannabis industry can be overwhelming at first to sales employees and consumers alike. This fact contributes to the built-in imbalance of power over you that legal cannabis sales venue owners or managers or their employees may have over you as a consumer.

For example, successful cannabis sales professionals need to learn words such as **terpene** that may not now be familiar to them or be in their everyday conversation. You can achieve similar awareness of words and phrases that you do not yet know.

Browse the [Marijuana Dictionary](#) as a good starting point and [WIKILEAF](#). Attaining an appropriate level of **cannabis product knowledge** nowadays requires the investment of time and study.

Sales and customer service professionals in the cannabis industry frequently visit websites such as [Leafly.com](#) on a regular basis. You should do so, too.

You definitely will want to study [24 ways to consume marijuana](#) and [methods of cannabis consumption](#) for solid perspectives on the numerous options for consuming cannabis products.

Coverage in the online and print media given to the rapidly changing cannabis legal and cultural landscape makes it simple to keep up on the latest trends and issues. You can learn quickly in-depth intelligence about the U.S. cannabis industry if you will pay attention to this full dozen list of credible sources:

- [Broccoli Magazine](#)
- [Cannabis Business Times](#)
- [Cannabis Now](#)
- [Culture Magazine](#)
- [DOPE Magazine](#)
- [High Times](#)
- [Marijuana Business Magazine](#)
- [Mary Magazine](#)
- [MJ Biz Daily](#)
- [PUSH Magazine](#)
- [SKUNK Magazine](#)
- [Vegas Cannabis Magazine](#)

## CHAPTER 9: QUESTIONS FOR YOU WHILE SHOPPING

You will feel empowered if you anticipate questions you might be asked by a sales or customer service employee once you have walked into a retail cannabis business.

Here are some specific questions—all of which come from the perspective of those who do not take advantage of you—that you can anticipate being asked by sales and customer service employees in a retail setting.

*“What did you think when you first found out the laws were changing here in [state name] to allow the cannabis industry to operate here?”*

*“When you walked in here today, what was the one thing you had previously read or heard about cannabis that you wanted to find out more about?”*

*“I want to help clear up any notions about cannabis that are untrue, so tell me—did you come in today having heard things about cannabis that didn’t ring true to you?”*

*“What would you say is the ‘biggest misconception’ you’re aware of regarding cannabis today?”*

*“What’s your main impression about this place now that you’ve been inside and looked around?”*

*“What’s a ‘favorite memory’ you can share with me about using cannabis?”*

*“What memories do you have about you and your friends using cannabis?”*

Sales employees may try to get you to give them more details (regardless of what you are talking about at the moment.) They may ask you: *“Can you tell me more about that?”*

Or perhaps they might ask this version of the same question to elicit a more detailed response: *“Can you be a little more specific about that?”*

Sales employees should not ask these “...tell me more...” type of follow-up questions more than twice during any interaction you have with them or you may end up like you are being interrogated pressured.

### **More questions...**

*“If other people influenced you to try cannabis, can you share how that went?”*

*“Let’s say you’ve used cannabis and had a positive outcome from it. Tell me what that was like.”*

If you talk about experiencing something negative or painful, sales employees should respond with empathy using replies like this:

*“That must be hard.” Or: “That sounds really challenging.” Or: “No wonder you feel the way you do about that.”*

But they should not then jump directly from that kind of empathy response to immediately talking about cannabis as their recommendation to alleviate pain.

These two questions show sales employees have **empathy** as a person and indicate they care about you as a customer:

*“How do you stay grounded when things in life get to be so overwhelming?”*

## CHAPTER 10: SOME FINAL THOUGHTS AND SUGGESTIONS

Here's one legitimate question you may be thinking about right now: **Is it possible to avoid dealing with face-to-face, in-person cannabis sales employees when shopping for cannabis products?**

It would, indeed, be so convenient if you could choose to bypass human beings completely whenever you want to buy legal cannabis products.

The automated audio prompt (such as on a phone call or using [Amazon Alexa](#)) would go something like this:

**“If you want to buy a joint, say or press ‘one’ now. If you want to buy edibles, say or press ‘two’ now.”**

In the cannabis business the level of any employee's achievement drive along with their on-the-job performance could conceivably make or break them. Cannabis products are likely to become more readily available in the United States if we presume there will continue to be growth in the number of states willing to change laws decriminalizing and taxing products created from this important plant life. In turn, a higher level of competitiveness can be expected eventually to lead to more scrutiny than today placed upon the selling of cannabis products to customers.

We live in a competitive culture that rewards businesses for cutting costs and increasing profits. The use of non-human resources for customer-contact work should be expected to increase in the years to come based upon observable trends thus far in the 21<sup>st</sup> century.

Depending on possible and necessary changes to state and local laws, cannabis businesses that sell to retail customers may sooner than later automate the initial customer-contact experience if only to **cut down on the need for hiring humans** to sell cannabis products in dispensaries in person. Yes, much of the work that cannabis sector sales and customer service employees do today could easily be taken over by a non-human artificial intelligence. This suggests that human sales and customer service personnel in the cannabis sector are each especially vulnerable to being replaced by non-human processes at some point in the future.

Existing technology already enables businesses of the present day to choose to switch from humans who answer inbound phone calls and online chat sessions instead to

using very realistic, human-sounding voices generated by artificial intelligence and/or apps. This once was science fiction. Now it is an everyday business reality.

It is easy to imagine laws being changed that would enable a near-future customer experience in cannabis product shopping in which a human customer interacts verbally (no keyboard) with a non-human presence via technology. The human customer interacts with a simulated voice or text bot that is programmed to ask questions, make comments, and so forth. This kind of programming of such automated customer service response is already within reach of today's business technology.

You should anticipate a basic four-step scenario in the cannabis sector such as this:

- The interaction between a human customer and the Alexa-type voice or text bot takes place as the first step.
- Software produces a summary and order detail list in text format that gets electronically delivered to a human being who works on the fulfillment of customer orders.
- The human fulfillment agent has a required follow-up in a one-to-one conversation by phone or Skype that takes place with the customer who confirms the order and makes an electronic payment.
- Delivery of the paid order directly and personally to the customer is made by a human being using ground transportation.

It should be easy to see how non-human cannabis sales and customer service would reduce the incidences of consumers being taken advantage of. Is it possible for a human being to be taken advantage of by a non-human asset? This existential question is best left to philosophers and science fiction writers. However, if you are interested in this subject, you should consider referring to the warnings about this presented numerous times in movies by [James Cameron](#).

## **Legalization of Cannabis at the Federal Level**

It is trendy nowadays to predict that cannabis eventually will be legalized at the federal level in the United States. If this were to take place, it certainly would have a huge ripple effect as a culture-changing event.

There already is one similar sweeping cultural change that we can consider as a possible guide: Liquor sales initially were made federally illegal (in 1919 by the 18<sup>th</sup> Amendment to the U.S. Constitution) and then the law was subsequently repealed (in

1933 by the 21<sup>st</sup> Amendment.) Especially thanks to the internet, today it is relatively easy for anyone to do research into what happened over 100 years ago with liquor prohibition. Then, it is entirely possible to suggest or envision similar outcomes that may follow cannabis legalization at the federal level based on what actually happened over many decades stemming from prohibition of liquor sales.

Today we are living in what can accurately be called an era of **federal cannabis prohibition**. It is not outrageous to believe “repealing” that federal cannabis prohibition will happen. To learn more, I suggest that you read about American history and specifically the 18<sup>th</sup> and 21<sup>st</sup> Amendments.

It is logical to expect the same (or similar) societal outcomes associated with repealing liquor prohibition if federal legalization of cannabis becomes the law of the land. For example, if cannabis were no longer criminalized at the federal level, the black market for cannabis would be impacted. Many changes in operations can be expected, especially at the pricing level and “dealer” strategies and tactics. But it is [a fact today](#) that [the cannabis black market is still thriving despite legalization](#). Taking cannabis off Schedule 1 at the DEA should not be expected to reduce either black market sales of cannabis in the United States or organized crime’s involvement.

In addition, there would be new federal tax revenue coming in from cannabis if it is federally legalized. It’s sensible, however, to look at [what happened in California](#) regarding tax revenues falling short of initial estimates and high expectations. To expect only positive outcomes in new federal tax revenues coming in from federally legalized cannabis sales would be unrealistic and fanciful.

The stigma against cannabis usage likely would change (but not diminish entirely) once law-abiding citizens are given the very real opportunity to make their own decisions about federally legalized cannabis usage. Recent [social research](#), for example, discovered that the stigma against using cannabis remains strong in people in the United States who regularly attend church and report that religion is very important in the daily decisions. Is this same demographic group also more likely to endure physical and emotional pain?

Perhaps most significantly is what might happen in the corporate world. We should anticipate major corporations in the United States and Canada would become owners and/or operators of legal cannabis cultivation, development, production, distribution, and sales. It should not surprise anyone to see pharmaceutical and/or liquor companies getting involved in a federally legalized cannabis sector.

In turn, the current business model featuring individual cannabis dispensary sales venues at the local market level (such as “mom and pop” cannabis businesses or other small- and medium-size cannabis businesses) would likely be wiped away altogether and quickly. The familiar (if not comforting) local venues likely would be replaced instead by institutionalized franchise cannabis sales outlets that fall under the ownership and control of corporations on a national and/or international level.

Consider the possible outcome, for instance, of federal laws allowing Starbucks-type franchises for nationwide cannabis product sales and consumption in the United States. In the state of Nevada [starting in 2023 there likely will be establishments where people can gather to consume cannabis products](#). Given that Las Vegas is already known commonly as “Sin City,” it follows that the legal use of cannabis by adults gathered inside Las Vegas establishments is a safe bet. However, the long-term success of such establishments will depend upon whether the state of Nevada has policies and procedures in place to contain COVID-19 and the variants.

Investors should be careful when considering putting money into the cannabis sector in anticipation of eventual federal legalization. Public trading of cannabis stocks [remains risky](#) as are [mergers and acquisitions](#) of cannabis companies that typically promise optimistic financial growth. Growing wealthy by investing in the cannabis sector is possible for you but is not the only outcome you should expect from such an investment.

The impact upon public health and societal order following a possible federal legalization of cannabis is [drawing some attention now](#). It is not knowable today whether increased cannabis use following federal legalization will have a net positive impact upon life in the United States.

To recommend that people not use cannabis at all because of all risks (known and unknown), however, just goes against my thinking completely.

After all the research I have done and after all the personal stories I have seen and heard about people’s lives being changed in positive ways because they started using cannabis, I continue to recommend each person should accept personal responsibility and think for themselves.

Merely because the federal government decides that something is considered “bad” for you (versus “good” for you) does not remove each person’s own basic need to accept personal responsibility for what they do in this life. Learn to **think for yourself**.

## FROM THE AUTHOR

Thank you so much for your interest in my writing about cannabis products that can help you as someone who is age 50 and up.

I hope you will keep this eBook as a trusted source of information and advice concerning cannabis products to derive medical benefits.

Thanks again!

Woody Goulart  
Las Vegas, Nevada