

TO: Mayor and Council Members
Marlene Best, City Manager
Shawn Hagerty, City Attorney

FROM: Annette Ortiz, CMC, City Clerk

DATE: November 10, 2021

SUBJ: UPDATED COUNCIL MEETING MATERIALS – November 10, 2021

NON-AGENDA PUBLIC COMMENT:

The attached correspondence for Non-Agenda Public Comment was received and is provided for your consideration.



From: [Rebecca Rapp](#)
To: [Clerk Info](#); [John Minto](#); [Rob McNelis](#); [Ronn Hall](#); [Laura Koval](#); [Dustin Trotter](#)
Subject: Public Comment regarding mental health and Marijuana use
Date: Wednesday, November 10, 2021 1:09:08 PM

Mayor and City council, my name is Becky Rapp, I'm writing today as I'm unable to appear in person at tonight's city council meeting. I'm a parent and youth group mentor deeply concerned for the mental health of our young people. I would like to share my experience of participating in a prevention meeting with many representatives from the San Diego school district.

I was surprised and saddened when I learned that pre-pandemic 4-5 kids per day were admitted to children's hospital for mental health evaluations. And that many of these children had been experimenting with drugs primarily marijuana.

We know based on real scientific studies that marijuana has been proven to exacerbate mental health issues. Depression and anxiety are common side effects although can lead to schizophrenia and bipolar disorder.

As you consider marijuana businesses in Santee, I'd like you to consider the message of normalization to youth and adults, and the negative and detrimental effects it can have.

Possibly council could direct staff to speak to resident's asking for their input on how to best communicate the negative and detrimental effects of marijuana on our cities young people, heading off the escalating mental health epidemic that the youth are experiencing. It would seem the sale of marijuana in our city would only exacerbate the issue.

From: [Judi Strang](#)
To: [John Minto](#); [Rob McNelis](#); [Laura Koval](#); [Ronn Hall](#); [Dustin Trotter](#)
Cc: [City Clerk](#)
Subject: The impact that marijuana storefronts will have on youth, promoting and normalizing its use, is inestimable
Date: Wednesday, November 10, 2021 1:15:05 PM

Dear City Council members, I am writing to you again as a parent advocate to draw your attention to the concern we have regarding what we see with our students' mental health needs.

Recently KPBS feature reported that at [Rady Children's Hospital](#), officials are reporting a 25% increase in mental health visits to their emergency room.

Willough Jenkins, a child psychiatrist and the inpatient medical director at Rady's reported that "Even before the pandemic mental health was in a crisis for youth — our numbers have been going up every single year so I don't see this going down. Rady's has a 24-bed inpatient mental health unit which has been full. During the pandemic, a new psychiatric emergency room, called the Copley Psychiatric Emergency Department was opened."

For those who are on the front line of students mental health, parents, PTA leaders, teachers, we need to underscore the role that marijuana plays in exacerbating mental health problems.

The impact that marijuana storefronts will have on youth, promoting and normalizing its use, is inestimable. Remember that it is these marijuana storefronts that are the source of large billboards on I-5 & I-15, the sponsor of the slick postcards to citizens indicating their bargains for the week, and sell branded merchandise that students from the local high schools are wearing to class. The last situation has been created by the marijuana storefronts unapologetically named Cookies in La Mesa..

Regards, Judi Strang,
Health Committee, Ninth District PTA
County Office of Education

Subject: WSJ 11.06-07 IASIC half page ad below!



From: Judi Strang [REDACTED]
Sent: Wednesday, October 27, 2021 11:56 AM
To: 'jminto@cityofsanteeca.gov' <jminto@cityofsanteeca.gov>; 'rmcnelis@cityofsanteeca.gov' <rmcnelis@cityofsanteeca.gov>; 'lkoval@cityofsanteeca.gov' <lkoval@cityofsanteeca.gov>; 'rhall@cityofsanteeca.gov' <rhall@cityofsanteeca.gov>; 'dtrotter@cityofsanteeca.gov' <dtrotter@cityofsanteeca.gov>
Cc: 'City Clerk' <cityclerk@cityofsanteeca.gov>
Subject: Marijuana businesses in Santee cost far more than any taxes received

Good afternoon City Council.

I am writing to you as a parent advocate in response to the recent UT article about Santee moving forward with marijuana businesses moving forward because they fear on an industry dictated initiative.

Have no fear. There is no data that says you won't be successful if the City pushes back by signing the ballot argument against at election time, if the initiative gets to that point.

Otherwise your citizens are at the mercy of out-of-town moneyed interests with slick mailers with untrue statements.

And don't be fooled about arguments that Prop 64 was a mandate for marijuana

business..IT WAS NOT. It was about personal possession and cultivation (six plants) not about the commercialization of marijuana. And it clearly included local control which is why only 25% of CA Cities allow marijuana businesses.

Meanwhile these out-of-town Marijuana business people and their attorney like the one you heard from on the 13th try to sell city council on the idea that allowing dispensaries is a revenue source for economic development for a City.

That is not true and has never been true.

The only one who makes money are marijuana businesses whose business plan is to increase use by those already using pot, and by creating new users, probably young.

Marijuana businesses in Santee would cost far more than any taxes received > in staff time and enforcement re problems to neighborhood. Also marijuana businesses are very litigious re decisions City Councils and staff make all along the application and vetting process.

Marijuana businesses bring promotions that are attractive to youth, and visible pot shops that normalize its use for young people.

This is an unwise and unhealthy idea.

Regards, Judi Strang,
Health Committee, Ninth District PTA
County Office of Education

From: [Kelly McCormick](#)
To: [City Clerk](#)
Subject: Non-Agenda Public Comment for City Council Mtg.
Date: Wednesday, November 10, 2021 2:11:38 PM

This is Kelly McCormick. I am a Public Health Educator with a focus on youth tobacco, alcohol, and drug prevention.

I would like to share a [study](#) published this week in the Journal of the American Medical Association, which found that pregnant women in the US who were heavy marijuana users had a much higher prevalence of poor medical and psychiatric outcomes compared to pregnant women who did not report such use.

The study included data on nearly 21-million prenatal hospitalizations, with 1.2% involving Cannabis Use Disorder – characterized by heavy, frequent use of the drug.

Women who were heavy users had a significantly higher prevalence of almost every medical and psychiatric outcome examined in the study, including depression, anxiety, and nausea.

Researchers also found the prevalence of Cannabis Use Disorder among pregnant women increased by 150% in eight years.

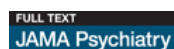
Studies like these underscore the need to educate all women of reproductive age on the adverse health impacts MJ use can have on both their health and that of their infants.

In the words of epidemiologist Sharif Mohr, there is an urgent need for policy makers to regulate MJ packaging and advertisements – to deter from false notions that MJ is safe for use during pregnancy and while breastfeeding.

Thank you for your consideration.

Kelly McCormick
Public Health Educator
San Dieguito Alliance

FULL TEXT LINKS



> [JAMA Psychiatry](#). 2021 Nov 3. doi: 10.1001/jamapsychiatry.2021.3193. Online ahead of print.

Association of Comorbid Behavioral and Medical Conditions With Cannabis Use Disorder in Pregnancy

Angélica Meinhofer ¹, Jesse M Hinde ², Katherine M Keyes ³, Claudia Lugo-Candelas ⁴

Affiliations

PMID: 34730782 DOI: [10.1001/jamapsychiatry.2021.3193](#)

Abstract

Importance: Prenatal cannabis use continues to increase, yet studies of the demographic, psychiatric, and medical characteristics associated with cannabis use in pregnancy are limited by size and use of self-report, and often do not consider cannabis use disorder (CUD) or concomitant substance use disorders (SUDs). Understanding the factors associated with CUD in pregnancy is paramount for designing targeted interventions.

Objective: To examine the prevalence of co-occurring psychiatric and medical conditions of US pregnant individuals hospitalized with and without CUD by concomitant SUDs.

Design, setting, and participants: The study analyzed restricted hospital discharge data from the 2010 to 2018 Healthcare Cost and Utilization Project State Inpatient Databases in 35 states. Data were analyzed from January to August 2021. Weighted linear regressions tested whether the prevalence of psychiatric and medical conditions differed between individuals with and without a CUD diagnosis at hospitalization. Inpatient hospitalizations of pregnant patients aged 15 to 44 years with a CUD diagnosis were identified. Pregnant patients aged 15 to 44 years without a CUD diagnosis were identified for comparison. Patients were further stratified based on concomitant SUD patterns: (1) other SUDs, including at least 1 controlled substance; (2) other SUDs, excluding controlled substances; and (3) no other SUDs.

Exposures: CUD in pregnancy.

Main outcomes and measures: Prevalence of demographic characteristics, psychiatric disorders (eg, depression and anxiety), and medical conditions (eg, epilepsy and vomiting).

Results: The sample included 20 914 591 hospitalizations of individuals who were pregnant. The mean (SD) age was 28.24 (5.85) years. Of the total number of hospitalizations, 249 084 (1.19%) involved CUD and 20 665 507 (98.81%) did not. The proportion of prenatal hospitalizations involving CUD increased from 0.008 in 2010 to 0.02 in 2018. Analyses showed significant differences in the prevalence of almost every medical and psychiatric outcome examined between hospitalizations with and without CUD diagnoses, regardless of concomitant SUDs. Elevations were seen in depression (0.089; 95% CI, 0.083-0.095), anxiety (0.072; 95% CI, 0.066-0.076), and nausea (0.036; 95% CI, 0.033-0.040) among individuals with CUD only at hospitalization compared with individuals with no SUDs at hospitalization.

Conclusions and relevance: Considerable growth was observed in the prevalence of CUD diagnoses among individuals hospitalized prenatally and in the prevalence of depression, anxiety, nausea, and other conditions in individuals with CUD at hospitalization. This study highlights the need for more screening, prevention, and treatment, particularly in populations with co-occurring CUD and psychiatric disorders. Research on the determinants and outcomes associated with CUD during pregnancy is needed to guide clinicians, policy makers, and patients in making informed decisions.

Related information

[MedGen](#)

LinkOut - more resources

Full Text Sources

[Silverchair Information Systems](#)