

CAS, TRUDEAU & MARIJUANA *

- A LAYMAN'S GUIDE

Pg 1 / 6

It's just after Canada's Oct 2015 federal election and Pierre oops, Justin Trudeau just won a majority with a promise of legalized Marijuana!! Sounds great eh? Maybe not, you can bet the CAS has found a way to cash in at your expense. Today we'll cover CAS, Trudeau and Marijuana before it hurts your family.

In this update, the results of the Dunedin Study outcomes includes drug use in a large study group over 40 years is discussed on Pge 5. At this point the Trudeau marijuana law hasn't been written.

Whenever possible try to obtain independent legal advice if you have concerns about your CAS case as soon as possible. This publication discusses 'CAS and Marijuana' under the following headings:

CAS & LEGALIZED MARIJUANA see 1) - 4)

CHILDREN & MARIJUANA see 5) - 7)

THC, GETTING HIGH & DECISION MAKING see 8) - 12)

'MEDICAL' MARIJUANA see 13) - 18)

CONSUMPTION IN VARIOUS FORMS see 19)

" FUTURE RISK " see 20) - 22)

PARENTING OR TOKING - YOU DECIDE see 23) - 27) **PREGNANCY & MARIJUANA** see 28) - 35)

THE DUNEDIN STUDY & MARIJUANA see 36) - 50)

CAS & LEGALIZED MARIJUANA:

1) The Trudeau promise to legalize marijuana, "420", "pot", "MJ", "weed", etc, may be sometime in 2018 -19. For many people that'll be the "all clear" to enjoy, get high and be mellow....or maybe not?

2) The Trudeau plan will be to control and tax marijuana as is already occurring in the USA as a new revenue stream to fund state budgets⁽¹⁾. The full details of the Trudeau plan and how it will be enacted will set out how 'legal' marijuana will be.⁽²⁾

3) Various studies tend to show marijuana is less damaging then alcohol or cigarette smoking for adults, at least within the scope of 'reasonable use' but not so much to the point of a drug addiction.

4) But if you're a *parent* it won't be that simple, CASs will still seize kids if parents use marijuana, including medical purposes as we'll see here, so be prepared.

CHILDREN & MARIJUANA:

5) Children in their physical, mental and emotional development are at risk when exposed to marijuana. There are significant risks for future mental health issues when a young developing brain is neurologically damaged by the many chemicals in marijuana.

6) Children need to be motivated to learn and not begin an early reliance on marijuana to 'check out' when stressed rather than rise to the challenge of becoming an adult. Children lack the *critical thinking* needed to make decisions that affect the rest of their lives if they develop a habit of relying on a drug 'crutch' when times get tough or they feel "stressed". Part of growing up is learning to cope by developing adult skill sets including reasoning rather than the child-like unreasoned response to stress, disappointment or disharmony.

* See Page 6 for Terms.

⌋ See Page 6 for footnotes

7) Once a child reaches the age of legal adulthood, 18, they can vote, drink, go to war, and soon smoke legal marijuana in *Trudeau's Canada*, but it's not advisable before then.

THC⁽³⁾, GETTING HIGH & DECISION MAKING:

8) The CAS position will be a parent who is 'high' will be too relaxed or 'mellow' to respond to a child's need for attention or urgent care in an emergency. This would be considered neglect.

9) The court would agree, it will not matter that marijuana will be 'legal'. The parent will be considered too impaired to be "*attentive to the child's needs*". The court can and will make a Crown Ward order – the kids will be gone.

10) Remember, alcohol is legal but consumption to the point of impairment will render a parent unable to care for children in a timely manner. It's a similar situation.

11) Being high on a regular basis can be seen as too impaired to make day to day decisions that are child appropriate, ie:, a bag of candy is great for an adult with the "munchies" but not appropriate as a child's school lunch!

12) The CAS will claim that a parent's "*self gratification*" via marijuana and a parent's claim of stress relief via marijuana will also show '*poor coping skills*' and leaves a child at risk. "Self gratification" and '*poor coping skills*' *without drugs* has already led to Crown Ward orders for years, so be careful.

' MEDICAL ' MARIJUANA:

13) Marijuana for '*stress management*' relies almost entirely on the "THC" content ⁽³⁾. However, when the marijuana runs out or the cash to buy it, you're back to square-one. It's a 'zero-sum' game. Coping with stress and making life decisions creatively and constructively before resorting to marijuana has a lasting benefit, it used to be called 'life skills'.

14) Even if you have a detailed doctor's file that "proves" marijuana for 'stress management' is the best or only solution for you, then a CAS will produce a doctor and *Expert Opinion* that will handily prevail at your expense. CAS expert witnesses have decades of experience of getting the outcomes the CAS wants. Remember, the court's presumption ⁽⁴⁾ lies with the CAS, the proof required from a parent to disprove a CAS claim is far higher than the low threshold the CAS has to meet where a parent does not know how to properly argue the 'corroboration' and 'statutory duty to investigate' the CAS usually refuses or fails to perform.

15) Marijuana for '*pain management*' relies on higher levels of **CBD**, (Cannabidiol), not THC to be effective. CBD is known to have significant therapeutic benefits but should not be confused with cannabitol, cannabiniol or 113 other active chemicals in marijuana.

16) If you're serious about medical use of marijuana, ask your doctor to prescribe marijuana with high levels of CBD with the lowest possible THC levels AND in *caplet form*. Then obtain your medical marijuana from a government approved source, obtain letters from the source confirming that the specific marijuana has the low THCs and pain relieving qualities you require. Retain copies of your orders to show that is the only marijuana you order. These records are known legally as '*contemporaneous records*' ⁽⁵⁾, they are critical in a CAS case, without them you can lose the case.

CAS, TRUDEAU & MARIJUANA - A LAYMAN'S GUIDE

17) Be aware that 'medical' marijuana prescriptions have been widely abused so far with shady 5 minute "medical assessments". A CAS can easily discredit the Doctor you use particularly when you use a doctor who is not your long term OHIP family doctor or the depth of records and alternative treatments is sketchy or suddenly goes straight to a medical conclusion of marijuana treatment.

18) Most family Doctors are NOT experienced as expert witnesses and court procedures and can be easily discredited at your expense – and your children. A flimsy prescription not fully supported by other treatments *first* will be quickly dismissed.

CONSUMPTION IN VARIOUS FORMS:

19) Marijuana is available in various forms, each with risks that can be exploited by the CAS and nasty neighbors or in-laws, etc:⁽⁶⁾

FORM:	RISK TO CHILD	OTHER RISKS	BENEFITS
Smoked	second hand smoke	complaints, smell	too few to outweigh risks
Brownies, etc low THC, high CBD	accidental consumption	accidentally confused with regular food	low smell / no smell
Caplets low THC high CBD	least risk when locked away / out of sight	not an "attractive nuisance" ⁽⁷⁾	best medical delivery best legal alternative

"FUTURE RISK":

20) The toughest legal test for a parent to beat is the 'future risk' under the CFSA when having marijuana in the home for any reason including medical purposes.

21) Only genuine '***pain management***' marijuana in the *least* damaging form has any chance of getting past a CAS and the court - low THC, high in CBD and in caplet form, etc, this helps reduce exposure to kids and misuse. Remember, it's for a medical need not entertainment.

22) A parent who *insists* on smoking marijuana when alternative medicines for a medical need would work as well would need a top rate legal argument and submissions by a *very good* lawyer to get past the abusive, dishonest CASs and courts that stubbornly believe CAS claims. Don't risk your family this way. Some believe they have a "right" to use marijuana, it can cost you a family.

PARENTING OR TOKING - YOU DECIDE:

23) Most parents want to raise their kids in the 'here and now' and would not want to be impaired in any way. So marijuana for medical reasons has to be in the most medical form possible with the lowest possible THC.

24) A parent that *insists* on smoking marijuana for 'medical reasons' will be accused of "*self gratification*" and using it for entertainment, the courts are already clouded by presumption in favor of the CAS and will agree to take your children. Period. It's already happened. Once marijuana is legalized the number of CAS cases will soar. Guaranteed. CASs are already planning to cash in.

25) Parenting is full of ups and downs and joys too that are earned by the life skills we demonstrate daily and pass on to our kids. When marijuana dominates day to day life, our kids will get the message that coping with life by toking 2 to 5 times a day is OK. They'll start their adult lives resorting to marijuana from the get-go with no other back up skills when the cash or marijuana run out.

26) Many of the best careers still have strict conditions on drug use that will lock out parents and kids before they ever have a chance if they turn to marijuana as soon as times get tough. Many countries deny entry or jail visitors who use marijuana or who have trace amounts on their person or in travel items. Drug sniffing dogs and test swabs analyzed in an ion scan machine can delay family travel.

27) The long and short of it is, what's most important to you? *Parenting or toking?* The CAS and the courts often won't let you have both. Once the kids are gone, you'll deeply regret not taking a different path to handle the marijuana issue.

PREGNANCY & MARIJUANA:

28) If a CAS is tipped off that a mother uses marijuana while pregnant, they'll issue a hospital alert to apprehend the baby. Marijuana will affect the baby's development as seriously as alcohol fetal syndrome this includes low THC medical use, you'll need to find other treatment options while planning to conceive and through pregnancy. Hospitals now include marijuana in blood test panels.

29) Data from Colorado USA, where recreational marijuana is legal, found that more and more babies are born with significant levels THC in their blood stream. It turns out any marijuana consumption, legal, illegal or medical has serious affects on developing human embryos thru to birth.

30) Nursing mothers who consume marijuana for any reason will have high levels of THC in their milk that will also affect a nursing baby.

31) US mothers consuming legal recreational marijuana were 'surprised' to hear that marijuana would seriously affect their children believing that being 'legal' made marijuana use OK. Like legal alcohol consumption, use at the wrong time can be dangerous or illegal, while over-consumption can be dangerous any time.

32) US data shows that consuming illegal / legal recreational marijuana has detrimental effects to the developing brain not only as a child, but into the teen years and well into the mid-twenties! Downer, eh?

33) All the more reason to make a life style decision, which is more important: to toke? or to parent? In the beginning the US experience with legal recreational marijuana was looking good in the short term. Long term data is showing up that it's not true and the ripple affect of widespread use will result in legislative changes, some counties in Colorado are considering rolling back legal marijuana production.⁽⁸⁾

34) In Canada, various CAS agencies in all provinces already have numerous legal arguments ready to take children where marijuana is in the home. The courts will always side with the "best interests of the child" to live free of drug risks. Some parents claim they have been allowed to have marijuana at home with their children, this tolerance will be short lived once the total consequences of widespread recreational marijuana becomes apparent.

35) Remember, CASs already take plenty of children because of *legal alcohol* in Canada.

THE DUNEDIN STUDY & MARIJUANA:

36) The Dunedin Study, (aka *Dunedin Multidisciplinary Health & Development Study*) is the largest life-long study in the world of children born in 1972 with data collected and analyzed for more than 40 years.

37) As part of the Dunedin Study, DNA typing, family histories, medical records, legal records, development and life outcomes were cross referenced and compared looking for common factors to answer the question: “*nature or nurture*” and the seemingly uneven outcomes for people and society.

38) It turns out the “nature or nurture” question is a combination of both.

> MARIJUANA & SCHIZOPHRENIA:

39) The study included collection of extensive medical and lifestyle data including drug use. A pattern emerged that justified DNA typing that found a significant risk.

40) Schizophrenia has a natural occurrence rate of 1% in the population. The study found a common DNA trend in those that used marijuana and developed schizophrenia that was the *COMT risk gene*. When marijuana use occurs in the teen years the risk for schizophrenia goes up 10 Times!

41) Schizophrenia often becomes permanent requiring life long medical treatment or a sharp decline in life prospects where funding or treatment is not available to marijuana users.

42) With high THC potency the schizophrenia risk has grown. Where a medical use is for pain, seeking marijuana with higher levels of CBD and lower levels of THC can balance risk to benefits.

43) It's up to each person to decide how to balance risks, child rearing, the impending pot law and aggressive CAS cases. CASs have been using “future risk” in court and lack of “*parenting availability*” during and after drug use as well as risk of criminal conviction and imprisonment for other related activities to preemptively take children.

> MARIJUANA & INTELLIGENCE:

44) Originally it was presumed intelligence is set and stays steady through most of a person's life.

45) Large data sets from the study showed that marijuana use in the teens and into later years caused a 8 point IQ test score drop. On the face of it, it seems small. But data across multiple occupations showed that an 8 point drop is similar to being either a manager compared to a menial laborer! Certainly this is not a happy outcome for some people, but it's worth remembering no drug as active as marijuana can be without side effects.

46) The study showed that moderate marijuana use only in later adult life was not *as* detrimental.

> COPING & VIOLENCE:

47) While not part of the drug theme, but part of the CAS theme, we note the study looked at common histories and with DNA genotyping that discovered the *MAOA gene* as either a high risk *short allele* or the better *MAOA long allele gene*. The study found that a good upbringing from birth to 11 years of age helped reduce the risk of the *MAOA short allele gene* that would enable poor coping or violent behavior. The takeaway is that poor coping and violence is easily inherited but can be reduced by a favourable upbringing.

CAS, TRUDEAU & MARIJUANA - A LAYMAN'S GUIDE

Pg 6 / 6

48) CASs won't be DNA testing anytime soon after botching Motherisk tests and the coming scandal in rigged PCAs, but they will use criminal records, coping skills and domestic Police Occurrence Reports against parents.

49) Where parents develop improved coping skills for daily multi tasking for children's needs, it's also helpful for heading off domestic conflict that can lead to an avoidable Police report that can be used against parents who otherwise did well for years. All background checks include Police Occurrence Reports *even where there was no arrest or conviction*.

50) Remember, CASs already use poor coping to obtain Crown Ward orders when it is shown in the actions of a parent or "discovered" in a PCA⁽⁹⁾. Either way, CASs then use it as part of the "future risk" in the CFSA and the new law, Bill 89 that will be proclaimed in spring 2018. By way of this guide, you have a 'heads up' while the government refuses to give parents a fair chance for the last 100 years.

* LEGAL NOTE :

This is paper is based on actual use and a guide only for the reader, your needs may vary. It's up to each person to assess their own circumstances. Extra steps in your proceeding may occur due to complexity, number of parties, bad faith acts, abusive litigation. Canadacourtwatch.org cannot be responsible for use, misuse or misfortune in a proceeding. This guide is not 'legal advice' but the experience of fellow respondents subjected to the criminal acts of your local corrupt, Perjuring, child abusing CAS!! Each recipient is required to assess their situation to the best of their ability, outcomes depend on the relative strength / weaknesses /errors of each party's case, exhibits, affidavits, submissions, case law, etc. Interactions of other Laws, Acts, Regulations and Case Law up to the recipient. No claim for errors or omissions. CFSA s 45(8) applies. Lawyers don't like 'layman's guides' and may lie to cast doubt and increase your dependence on their services even though the content here is fact-checked and based on direct experience of many people!!

(1) Colorado USA, reaps a total 29% sales tax in addition to local sales tax. Washington state has a 44% effective tax. Governments now look at heavy taxes on marijuana as a significant income source. (as of 2015)

(2) Limits on marijuana impairment will be similar to drunk driving, etc. Private growing, limits on possession for personal use, no public use, etc, tba.

(3) 'THC' is " delta-9-tetrahydrocannabinol " and is responsible for the drug high.

(4) Parents are allowed "rebuttable presumption" where a parent must *conclusively* disprove endless and meritless CAS claims. Courts claim 'balance of probabilities' but actually expect far more then that from parents.

(5) "Contemporaneous records" are routine transactional records from 3rd parties like schools, doctors or police, etc, before a CAS case began, they are not contrived or produced as part of a case that can include a slanted agenda. Contemporaneous 3rd party records are often taken at face value.

(6) Remember, neighbors, in-laws and other people are still a significant source for dishonest CAS cases, marijuana smoke and the smell is bound to piss off the 'squares'. If you *really* need medical marijuana, don't smoke it, consume it as a low THC, high CBD edible or caplet, kept locked away from kids.

(7) "attractive nuisance" is the legal term for objects that are visible and accessible that prompt temptation to take, use or steal. ie: a laptop in plain view inside a car is sure to be stolen (+ one broken window!).

(8) Oct 30 2016, program *60 Minutes*.

(9) "PCA" - Parenting Capacity Assessment by CAS "Drs".

Rev 3 - June 21 2017 written by: no_ethics_at_CAS Copyright 2017 www.canadacourtwatch.ORG

For comments, corrections or suggestions, email:

no_ethics_at_the_cas@yahoo.ca or info@canadacourtwatch.ORG