Survey shows
LIBERALS READY TO CORPORATIZE CANNABIS

Medical Marijuana patient
6 YR OLD TYLER VANIER

Questions Answered
WHAT ARE CANNABINIODS?

Spreading the knowledge
PUBLIC EDUCATION AT “THE MARKET”
“Restrictions on pot-safety testing put public at risk ...”

What are Cannabinoids?

“Enough talk, time for Pot Law”

Public Education at “The Market”

Liberals are ready to Corporatize Cannabis

Who We Are ...

PA.C.E. ---- medical and non-medical cannabis advocates who promote cannabis education by participating at non-cannabis public events, through the Grassroots Advocate magazine and a weekly LIVE online radio broadcast found at LifestyleRadio.ca. We focus on the Canadian cannabis community and Canada’s cannabis news, but do occasionally go International.

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Time to put the patients first

On August 11/2016 Health Canada announced Canada's new cannabis program called the Accessing Cannabis Medical Program Regulations (ACMPR) with plans to release the final details on August 24th, the start date of the new program. For over two years now patients in the MMPR program couldn't legally grow their own medication. Patients who were covered under the MMAR injunction couldn't move, find a new designated grower or increase their dosage, but that's all about to change.

The statement that was released gave us a good hint but not all the details of what's coming. The big news is that patients will be able to grow their medicine again as it appears that the government has brought back much of the old MMAR program. This includes the 5 plants per gram indoors and 2 plants per gram outdoor limits. It will also allow patients who can't grow for themselves to designate someone to do it for them. If you want to grow inside during the winter and outside in the summer, then that too is an option you can chose. MMPR patients who want to grow will be able to switch to the new ACMPR in order to get their medication growing. I'm sure many are anticipating being able to do this. If they don't then nothing changes. MMAR injunction patients it's been advised you do nothing if you can as you're still covered by it.

On August the 24th the government will release the final details that haven't been announced yet. Some have feared that the government would restrict our plant count to 6 plants but that didn't happen so now the question some are asking is, will there be a gram limit that doctors can prescribe? I haven't seen any indication that this will happen but it's a concern for many. Some are confused by the numbers and believe you can only grow 150 grams. With the MMAR there was some confusion over patients who rent where they live. Some people say that these patients needed special permission from their landlord while others said they could grow because it was the patients “regular place of residence” which was what the program required.

For the 28,000 MMAR patients who are under the injunction I'm sure many of them are feeling pretty calm right now knowing that they can continue to grow their medication and that others will be joining them soon. It also helps to know that come August 24th those MMAR patients who lost their right to a garden will now be able to get back growing and those who want to move to a new residence can now do so once they reapply with the ACMPR.

There are some questions that remain. In the R v Smith case sections of CDSA Sec 4 and 5 were struck down by the Supreme Court of Canada thus patients won the right to help other patients without the fear of trafficking charges. But the ACMPR says "Any individual registered to produce a limited amount of cannabis for him/herself may not sell, provide or give cannabis to another person." Does that statement violate the court's decision? Will the ACMPR give Canadians a constitutional workable medical cannabis program which is something that we've been lacking or will it need some tweaking? What about the 150 possession limit, is it enough for all patients? Will the court battles end? After over 15 years of court battles and many loses for the government, we'll find out on the 24th if they realize that it's well past the time to put the patients first.
Medical marijuana patients can grow 'limited amount' of cannabis at home under new laws
By Andrew Foote Aug 11/16 cbc.ca
Canadian medical marijuana patients can grow their own cannabis or get someone to grow it for them under new, expanded rules that come into effect later this month, Health Canada announced Thursday. Patients approved for medical marijuana will be able to register with Health Canada to grow a "limited" amount of cannabis for their own medical purposes.

Feds announce new rules for medical marijuana users
By Josh Dehaas Aug 11/16 ctvnews.ca
The federal government has announced new rules for medical marijuana users that will allow patients to grow their own at home. The new regulations, which will replace the Marihuana Medical Access Regulations, also include other changes such as stricter labelling requirements for dried pot and cannabis oils.

Understanding the New Access to Cannabis for Medical Purposes Regulations
By Health Canada Aug 11/16 healthycanadians.gc.ca
The way individuals access cannabis for medical purposes is changing. As of August 24, 2016, the Access to Cannabis for Medical Purposes Regulations (ACMPR) will replace the Marihuana for Medical Purposes Regulations (MMPR). Legal access to dried marijuana for medical purposes was first provided in 1999 using unique section 56 exemptions under the Controlled Drugs and Substances Act (CDSA). The decision in R. v. Parker in 2000 held that individuals with a medical need had the right to possess marijuana for medical purposes.

Family gets go-ahead to give daughter medical cannabis oil
By Carly Stagg Jul 05/16 cbc.ca
The parents of a 12-year-old girl with severe epilepsy celebrated a quiet victory Friday night as they administered her first dose of medically-prescribed cannabis oil after a hard-fought battle. Morgan Oulton was born with multiple brain abnormalities and suffers from various forms of epilepsy. She also has autism.

Medical marijuana use linked to lower prescription drug use
By CBC News Jul 06/16 cbc.ca
American states that allow their residents to use marijuana for medical purposes have seen a marked decline in prescription drug use among the elderly and disabled, according to a study published Wednesday. If every state legalized medical marijuana, the study forecast that Medicare would save more than $468 million US a year on pharmaceuticals for disabled Americans and those 65 and older.

John Conroy on the government's challenges at meeting the Allard ruling
By David Brown Jul 06/16 news.lift.co
On February 24th of this year, a Federal Court issued its ruling in the Allard case, giving the Federal Government until August 24th to either amend the MMPR or create entirely new legislation in its place. The government allowed their chance to appeal to expire after 30 days, so now, barring a last-minute request for an extension, the government has less than 2 months to render the MMPR constitutional, or at least make a best faith effort at trying to do so.
'Smoke-in' protesters just wanted to be heard
By Sarah Hanlon        Jul 15/16        torontosun.com
Multiple sclerosis sufferer Justin Loizos led a group of frustrated medical marijuana patients into a downtown intersection on Friday for a smoke session which shut down traffic. The group of about 30 protesters were diverse but united in their mission to be heard.

Old Order Mennonite family turns to medical marijuana to treat six-year-old daughter's seizures
By Hank Daniszewski             Jul 12/16    news.nationalpost.com
They don't own a car or a computer. They don't even have a phone. The mennonite family declined to comment for the story, but their daughter is much healthier with the medical marijuana treatment, the clinic that helps them procure it said. But when an Old Order Mennonite couple from northern Huron County, north of London, needed to control seizures in their six-year old daughter, they turned to a form of medical marijuana.

Pot shop raids 'waste of taxpayer money', says law prof
By Jacquie Miller       Jul 20/16   ottawasun.com
Sending police to shut down pot shops is a “blunt instrument” in the face of the widespread social disobedience that has propelled hundreds of the illegal businesses to open across Canada, says Osgoode Hall Law School professor Alan Young. “The criminal law is always an ineffective way to make a change in a community,” said Young, a specialist in marijuana law. “It's very slow, ponderous, and by the time you get a result, the legal landscape may have changed.”

Canada's medical pot companies aim to grow export business
By Laurent Bastien & Mike Hager          Jul 22/16       theglobeandmail.com
Canada's licensed medical cannabis producers are searching for opportunities to expand overseas while Ottawa works on its plan to legalize recreational marijuana next spring, with two producers recently securing licences to sell their products in Europe.

Restrictions on pot-safety testing put public at risk, scientists warn
By Greg McArthur & Grant Robertson     Jul 28/16        theglobeandmail.com
Health Canada's restrictive approach to marijuana safety testing is putting the public at risk, a growing chorus of scientists and activists warns – saying consumers are potentially being exposed to contamination in products that are widely accessible since the federal Liberals took power promising legalization.

Rogue pot shops flout Vancouver's medical marijuana bylaws and remain open
By Brian Hutchinson   Jul 28/16     news.nationalpost.com
VANCOUVER — They are ubiquitous, still. Marijuana dispensaries, ranging in style from pristine to slightly scary to plain sad, continue to offer illicit products in Vancouver, despite an expensive effort by city officials to limit their number with rules and enforcement provisions unique in Canada. The pot shop bylaws, which came into effect this year, are supposed to stop cannabis impresarios from operating with typical impunity, dealing products near schools and community centres, and at all hours.
What are Cannabinoids?
Originally published at Leafly.com

One hefty word that belongs in every medical marijuana patient's vocabulary is cannabinoid. Cannabinoids (e.g., THC and CBD) are the chemical compounds secreted by cannabis flowers that provide relief to an array of symptoms including pain, nausea, and inflammation. These work their medicinal magic by imitating compounds our bodies naturally produce, called endocannabinoids, which activate to maintain internal stability and health. To put a complex system simply, they mediate communication between cells, and when there is a deficiency or problem with our endocannabinoid system, unpleasant symptoms and physical complications occur.

When cannabis is consumed, cannabinoids bind to receptor sites throughout our brain (receptors called CB-1) and body (CB-2). Different cannabinoids have different effects depending on which receptors they bind to. For example, THC binds to receptors in the brain whereas CBN (cannabinol) has a strong affinity for CB-2 receptors located throughout the body. By aiming the right cannabinoid at the right receptors, different types of relief are achievable.

This concept is the cornerstone of cannabis as medicine, and the results are so promising that these cannabinoids have been synthesized for legal prescription use. Some synthetic cannabinoid medications include Marinol, Nabilone, and Rimonabant. While these synthetic forms are effective, research shows that herbal cannabis contains a far wider variety of therapeutic compounds. Cannabis contains at least 85 types of cannabinoids, many of which have documented medical value. Products and strains have been developed to deliver larger doses of different cannabinoids, so knowing which types best treat your symptoms is a handy piece of knowledge to bring to your next dispensary visit. The below wheel serves as a handy resource to determine which cannabinoids help treat symptoms associated with mood, eating/gastrointestinal disorders, neurological disorders, pain, sleep disorders, and other medical conditions.

THC, THCA, CBD, CBC, CBN: Some of the Chemicals in Cannabis

As the science of medical cannabis develops, we're discovering more and more that breeding cannabis for different levels of medicinal compounds—known as cannabinoids - makes the medicine better for treating specific ailments. Growers and testers are hard at work tailoring their strains to be maximally effective for treating cancer, multiple sclerosis, epilepsy, and more. But what are the cannabinoids they're looking at, and what do they do? Let's explore that question.

Scientists have identified 483 different chemical compounds in cannabis. For the vast majority of these, the medicinal effect is not yet known. Most research focuses on just a few of these compounds and their effect on the brain.

THC– (Tetrahydrocannabinol)
What it does: THC gets you “high.” It is created when the plant matter is dried and heated as a result of smoking, cooking, or extracting. THC binds to cannabinoid receptors in the central nervous system and the immune system, resulting in relaxation, reduced pain, and increased appetite.
What it treats: THC is helpful for treating many, many ailments. Studies have shown that it has medicinal benefits for ALS (Lou Gehrig's disease), Alzheimer's, anxiety, arthritis, chemotherapy side effects, Crohn's Disease, chronic pain, fibromyalgia, HIV-related peripheral neuropathy, Huntington's Disease, incontinence, insomnia, multiple sclerosis, pruritus, sleep apnea, and Tourette Syndrome, among others. THC has even been shown to kill cancerous tumors!

Patients report that THC helps reduce nausea and vomiting, which is particularly helpful for those undergoing chemotherapy. Patients suffering from AIDS often experience a lack of appetite, which THC may be helpful in counteracting. Some patients also use THC for glaucoma relief.

THCa – (Tetrahydrocannabinolic Acid)

What it does: Prior to drying, the chemical that becomes THC is known as THCa (tetrahydrocannibinolic acid). In its fresh form, THCa is non-psychoactive. A growing number of patients and caregivers, led by Dr. William Courtney of Mendocino County, are learning the benefits of juicing raw, fresh cannabis. Dr. Courtney believes THCa has medicinal properties that are lost when the plant is dried, and it can be metabolized in much larger doses than THC, making it potentially more effective. THCa is reported to have anti-proliferative and anti-inflammatory abilities, which show potential to inhibit the growth of cancerous cells. Its anti-spasmodic properties that help subdue muscle spasms may explain the success some of our patients are reporting controlling seizures.

What it treats: THCa appears to help with chronic immune-system disorders. Dr. Courtney's wife, Kristen Peskuski, found juicing cannabis to be the only effective treatment for her chronic Lupus. She had been on over forty medications and suffered terrible side effects before she discovered THCa. Read more about juicing cannabis here. Patients also have reported that THCa's anti-inflammatory effects range from arthritis to endometriosis and even menstrual cramps. Some patients report energizing effects from its use.

CBD – (Cannabidiol)

What it does: CBD (CBD Image and interest in its effects is growing. It is non-psychoactive. It has been reported to have anti-convulsive, anti-anxiety, anti-psychotic, anti-nausea, anti-rheumatoid arthritic and sedative properties.

What it treats: CBD is used to help with acne, ADD, anxiety, arthritis, cancer, chronic pain, depression, diabetes, Dravet syndrome, epilepsy, glaucoma, Huntington's Disease, inflammation, mood disorders, multiple sclerosis, neuropathic pain, Parkinson's, schizophrenia, and neurodegenerative diseases such as Alzheimer's. CBD has also been shown to stop the spread of cancer cells.
**CBN – (Cannabinol)**

What it does: CBN (cannabinol) is created when THC is exposed to light and oxygen. It's known to have some mild psychoactive effects, and it appears to increase the effects of THC. CBN's primary reported effects are as an anti-epileptic, anti-spasmodic and reliever of intraocular pressure. Recent studies suggest that CBN can be administered as an antidepressant, can be used to prevent convulsions and to sedate patients experiencing pain.

What it treats: It may make users dizzy or groggy, and is not usually sought-after for medicinal purposes. If you don't want an intense body high, keep your cannabis in an airtight container and put it in a dark spot. CBN has also shown promise for those suffering from Glaucoma, inflammation and insomnia. CBN is often referred to as a natural aspirin or non-narcotic type pain reliever (analgesic), but is estimated to be three times stronger.

**CBC – (Cannabichromene)**

What it does: CBC (CBC the anti-inflammatory and anti-viral effects of cannabis, and may contribute to the overall analgesic effects of medical cannabis. CBC may have potential to inhibit the growth of cancerous tumors due to its interaction with anandamide, an endocannabinoid known to fight breast cancer. Studies suggest CBC works best in conjunction with CBD and THC to create a synergistic effect.

What it treats: A 2011 study in the British Journal of Pharmacology found that CBD and CBC stimulated descending pathways of antinociception and caused analgesia by interacting with several target proteins involved in nociceptive control. It helps in fighting bacteria as an anti-fungal also as an anti-inflammatory, pain relief, anti-biotic, depression and brain growth. Research also suggests that CBC is an inflammation and pain inhibitor, which has been successful for treating migraines and stimulating bone growth.

We look forward to reporting on Leaf Of Cannabis properties as they are discovered. As always, we want to reiterate that these chemicals are most effective when combined. Whole-plant treatment gives patients benefits that have yet to be identified and isolated, and by separating chemicals, you could be losing important medical benefits.

By all means, try strains with varying levels of these compounds to see how they affect your particular ailments, but make sure you're using the whole plant.
How Cannabis Has Given An Ontario Boy A 'New Lease On Life'

By Marc Davis  Jul 04/16  huffingtonpost.ca

It's a remarkable transformation. Even a shocking one. Especially considering the unlikely remedy.

Six-year-old Tyler used to be tormented by hundreds of painful seizures a day. Which would leave him absolutely exhausted at bedtime. Even so, his doting mother would still have to pin him down to his mattress until he fell asleep. Otherwise, his small, frail body would continue to thrash about, robbing him of any rest and respite.

"Now he sleeps through the night, because he's having far fewer seizures," says single mother, Angele Vanier, 32. "It's amazing how much progress he's made over the past several months. He has a new lease on life."

Tyler is one of Canada's youngest medical marijuana patients. He suffers from cerebral palsy. And he has a seizure disorder called Lennox Gastaut Syndrome. This debilitating paediatric form of epilepsy typically worsens as a child ages and can even become life-threatening. Tyler's mother turned to cannabis in desperation, after seeing media stories about how it has helped other children in the U.S. with similarly debilitating conditions. She now administers him one gram of cannabis a day -- half in the morning and the rest in the evening -- in the form of a paste that she makes by cooking the cannabis with coconut oil. And it's been a godsend, she says.

Until a few months ago, Tyler used to experience clusters of up to 80 seizures at a time, with each event lasting up to five minutes, or longer. Now his seizures are far fewer and of much shorter duration.

Living on social assistance, Vanier used to struggle each month to come up with the $400 a month she needed to legally buy cannabis from a federally-approved licensed producer in Ontario - one her doctor had originally referred her to. "As a single mom, the cost became a big deal for me to manage," she says.

So she recently switched her legally-designated provider to another licensed producer, Alberta-based Aurora Cannabis. It offers "compassionate pricing" at $5 per gram for financially-challenged customers. Now Vanier only spends about $200 a month. Even at the much lower cost, the province of Ontario still refuses to pay for her son's medicine because cannabis has not gone through the standard federal approval process for conventional prescription drugs. However, it's been legally available to patients in need throughout Canada since 2001 following a landmark ruling from Canada's Supreme Court.

Vanier says her son's herbal medicine should therefore be financed by the Ontario health-care system. The government already pays for the range of anti-epileptic drugs that Tyler has relied on since infancy. But they're far more expensive and, in Tyler's case far less effective, Vanier adds. Even though Tyler still requires prescription pharmaceuticals, Vanier has been able to steadily reduce his dosages now that the medical cannabis is working so well, she says. This is a big breakthrough, Vanier declares. And in spite of the out-of-pocket costs, what she refers to as an "herbal medicine of last resort" is proving to be worth every penny, she says.
In fact, Tyler's doing fantastic on his cannabis treatment," she adds. "The alternative is more 'meds' that come with side effects and can become ineffective over time because Tyler builds up a tolerance to some of them."

Since he started to be administered cannabis, Tyler has become far happier, more energetic and physically stronger, she says. Prior to that, his medications would make him weak, tired, irritable and depressed. "Most importantly, his light is bright again. He's so much happier and aware of what's going on around him." What's particularly beneficial to Tyler is that the specific strain of cannabis that she is buying -- which is called Temple -- is non-psychoactive, meaning that he doesn't get "stoned," she says.

The Temple strain contains virtually no THC, the mood-altering substance in marijuana, but features an extremely high concentration of another substance known as cannabidiol, or CBD.

"This high-CBD content in Temple allows Tyler to be far more alert than he used to be (than on a previous, different strain with a much higher THC content)," she says. "This way, he's far more relaxed. And it helps him sleep better, too."

The U.S. federal government is financing several dozen clinical trials into the efficacy of CBD as a treatment for a diversity of medical conditions. They include Parkinson's disease, epilepsy, opiate addiction, Crohn's disease, schizophrenia and cancer.

The cultivation of non-psychoactive, CBD-rich/low-THC strains is a big step towards many peoples' acceptance of cannabis as a legitimate form of medicine. This is according to Dr. Jonathan Page, an adjunct professor of botany at the University of British Columbia in Vancouver.

A world-renowned expert on the chemistry of marijuana, Page says CBD-rich oil is gaining greater acceptance among parents and doctors as an appropriate treatment for paediatric seizure disorders, including epilepsy.

Vanier is one of these parents. And she's grateful to have found a natural medicine with minimal side effects, that isn't becoming less effective over time.

"Offering Tyler a better quality of life is what anyone would want for their child," she explains.

Vanier has a fundraising campaign to offset the cost of paying for Tyler's herbal medicine. It can be found at https://www.gofundme.com/TLeducReLeaf
Canna-Berry Sherbet

eatyourowncannabis.com

Time Required: 3 Hours 15 Minutes  
Yields: About 1 Quart Sherbet

What You Need:
1½ quart ice cream freezer container  
food processor or blender  
fine strainer  
large bowl  
5 cups fresh blackberries, washed  
2 cups sugar  
2½ cups Cannabis Almond Milk  
1 tablespoon lemon juice

Steps:  
Blend blackberries and sugar together in food processor until smooth. Pour the pureed berries through strainer and into a bowl. Discard seeds. Mix Cannabis Almond Milk into the blackberry puree. Stir in lemon juice. Pour berry/milk mixture into ice cream freezer container; freeze for at least 3 hours.

Cannabis Almond Milk

eatyourowncannabis.com

This recipe works best when the almonds you are using have been soaked in water for 8 hours (overnight is OK). Drain the water and rinse almonds before using in the recipe below.

Time Required: 2 hours

What You Need:
food processor  
½ cup raw almonds  
3 cups water, distilled  
cannabis, coarsely ground (recommended 1-4 grams)  
cheesecloth or tight strainer

Steps:  
Blend the almonds and water in a food processor until it resembles milk. Strain the almond milk through a cheesecloth or strainer. Add the strained milk to a saucepan and bring to a light boil. Add the ground cannabis and reduce heat. Simmer for 2 hours, stirring frequently.

Remove from heat. Chill and serve, or use as a replacement for milk in any recipe.  
For Original Recipe Visit http://www.leafly.com
New marijuana task force should recommend immediate decriminalization
By Marcus Sibley      Jul05/16  montrealgazette.com
The Liberal government has appointed a nine-member task force that will develop recommendations for a comprehensive plan on marijuana legalization and regulation. The move to research and invest in sensible marijuana reform comes at a time when minor possession offences continue to be enforced and police raids on unlicensed pot shops have expanded across the country.

Enough talk, time for pot law
By Ian Mulgrew   Jul 05/16     princegeorgecitizen.com
The Liberal government is making a hash of marijuana legalization by embarking on a needless consultation exercise led by a task force of well-meaning volunteers. Four U.S. states made cannabis legal in 2012 and others are vocally following suit. Canada, which has had a legal medical scheme for more than 15 years, has had calls for legalization for half a century. The 1969 Le Dain Commission of Inquiry into the Non-Medical Use of Drugs, set up by Prime Minister Justin Trudeau's dad, recommended after three years' study that the country decriminalize cannabis.

Local cannabis group against capping THC levels in legal weed
By Anna Dimoff       Jul 08/16           cbc.ca
Should there be a maximum allowed level of THC when marijuana is legalized? No, according to the B.C. Compassion Club Society. Capping the limit of THC in commercially available pot will be one of the topics covered at the Vancouver Cannabis Hemp Conference held at the Westin Bayshore this weekend. "It's time for us to stop demonizing THC.

Ottawa might try to prohibit homegrown pot
By Robert Benzie           Jul 04/16     thestar.com
Prime Minister Justin Trudeau's Liberal government warns legalized recreational marijuana will be a strictly controlled substance — so much so that even homegrown weed may be prohibited. Federal Health Minister Jane Philpott said the government is “taking a public health approach to the matter of the legalization and regulation of marijuana,” treating it like tobacco.

Canadians will need nearly 2 square kilometres of recreational marijuana
By Special to Lift         Jul 12/16         news.lift.co
As Canada moves towards establishing a system to regulate marijuana for recreational use, supplying the demand for such a product will be a significant task. While the government can certainly lean on existing licensed producers under the Marijuana for Medical Purposes Regulations (MMPR), the current approved space of over 1 million sqft would still only represent a portion of the expected future non-medical/recreational demand.

Marc Emery: Justin Trudeau’s Reefer Madness
By Marc Emery             Jul 17/16          straight.com
The “discussion” paper about legalizing marijuana is out from the Liberal government. When I first heard of the “legalization” task force, I envisioned Order-of-Canada quality people touring the country, listening to Canadians, acknowledging the terrible prohibition mistakes of the past, and pledging to find a new way forward past prohibition into the era—it's 2016, after all!—of autonomous adult choice in the matter of cannabis and our bodies.
Wynne wants to spark up a conversation with fellow premiers about legalized pot
By Robert Benzie                Jul 20/16         thestar.com
WHITENORSE—On the subject of the Liquor Control Board of Ontario, Wynne clarified what she has been saying about the provincial booze monopoly's involvement in the recreational marijuana market. “It may not even be sold out of the LCBO. Because I've had people say to me we don't want to have marijuana and alcohol sold out of the same places,” she said, emphasizing she envisions the agency's cannabis role being in “regulation and distribution and monitoring it in some way.”

Canada's very first Cannabis Shopping Mall now open in Victoria BC
By Spliff         Jul 20/16         spliffmag.ca
This unique space is a one stop shop with unique offerings for today's cannabis consumer. Locals called on to help name bong shop to win heady glass art and months membership to the cannabis lounge. The team behind the Great Canadian Canna Mall team in Victoria, BC is proud to announce the grand opening of Canada's very first shopping mall dedicated to all things cannabis.

Marijuana task force faces 'fascinating journey' in crafting legal framework
By Daniel LeBlanc        Jul 18/16      theglobeandmail.com
Mark Ware was working with patients suffering from a painful blood disease in the late 1990s when he noticed that many of them were self-medicating. The sickle cell anemia research clinic where he was working was in Jamaica, and the pain reliever of choice for a growing number of his patients was cannabis. The episode put the British-born, Jamaica-raised doctor on the path that has made him a world-renowned expert on the use of cannabis in pain management.

Four Ways Justin Trudeau's Task Force Is Getting Legalization Wrong
By James McClure             Jul 05/16     civilized.life
On June 30, federal cabinet ministers held a press conference on Parliament Hill to introduce the task force that will advise the government on regulating recreational marijuana use. During the event, Bill Blair - Parliamentary Secretary to the Minister of Justice and Attorney General of Canada - promised an "open and transparent engagement process" for legalizing.

Let lounges sell pot like bars sell alcohol, forum told
By Mike Smee           Jul 25/16  cbc.ca
"Our lounges have proven for almost 15 years to be responsible, socially caring environments to their customers and communities. By regulating and licensing our existing cannabis lounges, the City of Toronto will be solving the issue of public consumption & street distribution of small amounts of cannabis, in our streets and public spaces."

Task Force Offers Hints of What Legal Pot Will Look Like in Canada
By Jacob Sullu         Jul 05/16          reason.com
Delivering on a campaign promise, Canadian Prime Minister Justin Trudeau plans to introduce legislation next spring that will legalize the production, distribution, and possession of marijuana for recreational purposes. In the meantime, a government-appointed Task Force on Marijuana Legalization and Regulation is supposed to hammer out the details, addressing the questions posed by a discussion paper it published last week.
KEEPING PACE

Public Education @ the market
By Al Graham

For many years as a cannabis advocate I have spent an unknown amount of time talking to and educating people at non-cannabis events or locations. My first opportunity was years ago with Treating Yourself Magazine during the International Home and Garden Show in Toronto. It was an experience that I enjoyed so much then that I still enjoy doing today, unfortunately it's no longer at the home show or any other large show that TY was a vendor at in the past.

Throughout the years educating at non-cannabis locations has been something PACE has always strived to do. It didn't matter if it was in a small café, being on the news to participating in a film festival, PACE was there. Educating the uneducated or slightly educated is something that I have felt as one of the most important parts in fighting for cannabis law reform. Once you get the people to look at it differently, then slowly the government will follow, as we are now seeing here in Canada and throughout the USA (except for the DEA!).

Now that we are seeing change it's not time to stop and say “mission accomplished” as a former US president said and the war continues for years afterward. Nope it's time to keep educating and spreading the truth because there will be many that will fight to bring back prohibition. The last thing we want to do is stop.

With PACE our public education continues today at the CannaDaze booth inside The Hidden Treasure Chest Flea Market in Trent Hills Ontario. Yes it's a cannabis booth but like with TY we are in an environment where people don't expect to see you there. Doing this was has allowed us to reach out to people who may never walk into a cannabis store but would walk into a flea market without thinking about it.

CannaDaze is a licensed retail business that provides people within the small municipality with everything to grow and consume cannabis but the cannabis itself. This includes seeds, growing equipment as well as medicating accessories such as vaporizers and bongs.

Wayne Matheson and his friend Erick Wooselyhave had the CannaDaze booth in this location while Wayne awaits renovations and inspections at his new store location. Once the store opens he plans on having Erick maintaining the booth at the marketas a way to continue reaching these people plus to help promote the store.
While at the market PACE distributes the Cannabis Digest Newspaper and past issues of Treating Yourself Magazine. We also hand out our Cannabis Therapy Links brochure as well as our news and information sharing magazine Grassroots Advocate. While not everyone takes the information, I believe you'd be surprised on how many people do. As with the big Toronto shows many people stop at the booth, who are people that many believe would never stop. Why, because they don't look like the typical stoner promoted on tv and in movies.

The owners of the market Sharon and Al have been very supportive to date and have had to answer many concerns by market goers. While they didn't know us before we arrived they have learned that the booth is run by regular everyday people who are also patients. They have heard and seen us share our stories and help those in need whether it was with information or finding a doctor. I have written many times in the past about the experiences of the people who have helped out at The National Women Show and other shows. How it felt to help educate others to knowing that you have helped a person to become a legal patient. Plus I've also written about the expression on people's faces when they see an unexpected cannabis booth appear out of nowhere. Being at this market is no different; it's just on a smaller scale. The experience can become addictive as all you want to do is help others in becoming a legal patient to educating them.

Wayne and Erick were never able to experience the big city shows but with the experience at the Hidden Treasure Flea Market they now know exactly what I mean.

As with most of the TY shows there is no cannabis on site and as Al the owner says “we follow the rules” which are the same rules all the other vendors are required to follow. One of them is that there is no medicating on the property which we have no problem with as we just go across the road.

The Hidden Treasure Flea Market is like a lot of other markets, people selling their nick knacks to whatever isn't bolted down at home. Because of this you can have people selling similar items but CannaDaze is the only booth offering cannabis themed products. The booth is also one of the largest in the market and it's centralized. This has led to many people coming to us for help with something they spotted or if they have a question.

When the booth space became available last November (2015) Wayne jumped at getting the indoor space and since then CannaDaze has grown. Wayne who started his business as a cannabis advocate holding a rally and a dream of someday having a store is so close to his dream he that he can touch it. It's unfortunate that renovations and inspections are holding him back but the market has been a big help with the growth of CannaDaze. This includes the experience of hearing people share their stories to getting to know people within the area, it's been a big help, not only for us but also for many patients.

PACE would like to say “thank you” to CannaDaze for providing us with a space to educate people and a “thank you” also goes to the market owners Al and Sharon.

That is for having the trust in all of us and for allowing cannabis education and a business to be part of your market.
Surveys Show Liberals Ready To Corporatize Cannabis
By Ted Smith  Originally published at CannabisDigest.ca  Note: condensed to fit

Federal Task Force Question: How should governments approach designing laws that will reduce, eliminate and punish those who operate outside the boundaries of the new legal system for marijuana?

By ensuring a flourishing illegal market in illegal cannabis products with tight regulations, the Liberals appear to be pleasing both law enforcement and big business while showing a complete disdain for personal freedoms and contempt for proper public consultation. From potential rules limiting cultivation, strains with high THC, products with high THC, storefronts, public consumption and personal possession, the federal government seems intent upon continuing to pour resources into the enforcement of cannabis laws while carving out a very limited legal regime for corporations to safely control. Branding compassion clubs and dispensaries as criminals no different than organized criminal organizations is a convenient strategy to simplify the situation to justify using a heavy handed approach to implementing legalization.

When the task force begins this discussion by stating legalization will require strengthening the law, it strongly suggests nothing has been learned about the failures of prohibition and that the government intends upon corporatizing cannabis while increasing enforcement. By creating a hyper-restrictive regime, the government appears ready to continue fighting the bulk of the Canadian cannabis industry in an attempt to quickly replace the illegal suppliers with large corporations.

The task force is not clear what it means when it twice states there should be a strengthening of the law. Since the public is protected from the government making laws that are arbitrary or grossly disproportionate by the Canadian Charter of Rights and Freedoms, it is hard to imagine the lawyers working with the task force supporting laws that have greater punishment than the current ones under prohibition. The term strengthening the law seems to indicate the task force will be seeking to increase punishments for cannabis related criminal activities, as if the current punitive Controlled Drugs and Substance Act is not enough.

Laws regarding search and seizure, surveillance, seizure of assets, and driving under the influence are already pushing the boundaries of Charter scrutiny, so it is hard to imagine the Liberals will attempt to strengthen those laws without risking embarrassment before the courts. For decades under prohibition, various government have constantly strived to develop the strictest laws possible to stamp out the use of cannabis and it is counterintuitive for the government to think that they have to further strengthen those laws while it legalizes cannabis for large corporations.

Establishing a successful legalization regime will require regulations that encourage both consumers and producers to stop breaking the law and comply with the law. However, if the laws are intentionally prohibiting the production and sale of products the public is already accustomed to having access to despite the prohibition of cannabis, then the government will ensure the continued presence of organized crime in this industry.

In the opening sentence the government even goes so far as to suggest it would be possible to “eliminate criminal involvement.” Given how clear it is that the government cannot easily keep organized crime out of the construction industry in Quebec, it is absurd for this task force to use the same rhetoric that failed so bitterly in the war on drugs. Using tough language like this might sound soothing to law enforcement and the public, but it is not a realistic assessment of the situation.
What will truly cut down on illegal activity is to simply legalize what people in the industry are already doing and add some basic requirements to generate more information about the products to the consumers. Otherwise, these strict laws will ensure a flourishing illegal trade in cannabis products that will keep both law enforcement and gangs busy. Only by making it easy for any interested party to join in the production and sale of cannabis, thereby helping drop the price to \( \frac{1}{4} \) to \( \frac{1}{3} \) the current retail prices, will the government eliminate organized crime from the cannabis industry because there will simply be no money in it for them anymore.

Money is what attracts nasty gangs of organized criminals to the cannabis trade. Money, period. If you take the massive potential profits being made under prohibition away, replacing it with thousands of openly operating small family businesses across the country in a competitive environment, there will be no more gangs growing cannabis than there are growing apples.

The task force has suggested that it is not in the public interest to allow people to grow their own and that it looks to increase the punishment for doing so under legalization. Perhaps the task force has not been made aware of the Feb 24 decision by the Federal Court of Canada in the Allard injunction, as it is very clear in that judgement that the government’s claims about the inherent dangers of growing cannabis are dramatically blown out of proportion.

As for driving while impaired, the police are already trained in roadsides tests that can determine whether an individual is able to perform basic manual tasks that determine whether a person is functioning well enough to drive. Some people are unable to drive after inhaling just a small amount of cannabis, while others like me have a high tolerance and drive more slowly, taking fewer risks after a few tokes. Fears of increased problems from drivers under the influence of cannabis in places like Colorado, where it has been legal for a couple of years, do not appear to have manifest in reality.

Instead of fearing the normalization of cannabis, if this task force truly wants to develop reasonable regulations that will be respected and adhered to, it needs to accept the fact that cannabis is a regular part of the daily life of many Canadians from all walks of life. It is discriminatory for the task force to suggest there is any need to avoid the normalization of cannabis and it is absurd for them to think that cannabis will stay in some sort of taboo part of society, not really accepted but not entirely shunned either. If the role of this task force is to legalize cannabis, then creating rules so it does become a normal part of society should be a priority not the fear.

Any plans to legalize that do not allow businesses to give customers and patients the opportunity to consume their herb is half-baked. Many people cannot consume in their homes and without a public venue where they can discreetly smoke they will be forced to the sidewalks and parks where others may be unwillingly exposed to second-hand smoke. Patients in particular need access to safe inhalation sites where they can use their medicine without worry of the weather or harassment from others.

Moreover, if the task force had any idea how much revenue could be generated by allowing cafes, restaurants and bakeries to sell cannabis products, much like wine is available in most places that serve food, there would be no debate about lounges. Specialty shops offering unique foods, drinks, herbs and medicinal products would attract tourist from around the world, especially in British Columbia where we are as famous for BC Bud as France is for wine. These value-added services and products would foster a robust cannabis economy, much more than simple mail order ever could.

For this task force to suggest that allowing cannabis lounges would minimize the normalization of cannabis is laughable. It points to their clear bias. It also exposes their incredibly poor logic. If this task force wants any hope of achieving its goals, it better completely change course.

Note: Condensed to fit. The complete blog can be found at http://cannabisdigest.ca/surveys-show-liberals-ready-to-corporatize-cannabis/
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  - (844) 876-2747
- Natural Health Services
  - http://naturalhealthservices.ca/
  - (844) 262-0942

**British Columbia**
- Medicinal Cannabis Resource Centre Inc.
  - http://www.mcrci.com/
  - (604) 566-9391
- Greenleaf Medical Clinic
  - http://greenleafmc.ca
  - (877) 513-4769

**Ontario**
- Marijuana For Trauma
  - http://mftontario.ca/
  - (613) 965-6780
- Body Stream
  - https://www.bodystream.ca/
  - (800) 730-8210
- Cannabinoid Medical Clinic
  - http://www.cmclinic.ca
  - (647) 406-4902

**New Brunswick**
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  - (855) 638-0420

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  - http://www.traumahc.com/
  - (902) 462-2957
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  - http://santecannabis.ca
  - (514) 419-4131

**Canada Wide Listing**
- Canada Wide Listing
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**Compassion Centers**

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  - (250)381-4220
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  - https://thecompassionclub.org/
  - (604) 875-0448

**Ontario**
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- Toronto Compassion Center
  - http://tccentre.org/
  - (416) 668-6337
- The Care Center
  - http://www.thecarecenter.ca/
  - (416) 855 3008
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  - http://truecompassiontoronto.com
  - (647) 977-1995

**Saskatchewan**
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  - (306) 735-7537

**Nova Scotia**
- Farm Assists
  - https://thefarmassists.com
  - (902) 266-4769

**Ontario Vapor Lounges ...**

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<tbody>
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<td>Vape on the Lake</td>
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