

Five Corners conducted a survey of veterans and veteran caregivers with 802 respondents. The information on the following pages comes from a national PulsePoint IVR survey conducted from October 8th - October 10th, 2017.

About IVR Surveys – IVR surveys, also known as “robo-polls” employ an automated, recorded voice to call respondents who are asked to answer questions by punching telephone keys. Advantages include the low cost, the almost immediate collection of data, and the convenient processing of data. They also reduce interviewer bias to zero by eliminating the live human interviewer. Every survey respondent hears the same question read the same way. The demographic categories of race, age, gender, and political party identification are self-reported to ensure a valid and accurate analysis<sup>1</sup>.

### Methodology

The sample was obtained from a national data firm consisting of self-identified veteran households. Because IVR surveying is prohibited by FCC rules from calling cell phone numbers, only VOIP and home phone numbers can be called. The growing trend of minority and younger households without land lines can result in a coverage error. As one moves from a household population toward a likely or chronic voter population, the percentage of listed cell phones in the voter file is reduced and the percentage of land lines increases. Veterans who are cell phone only who would be eligible to participate are excluded from IVR polls. However, because we were calling a list of self-identified veteran households, cell phone dialing wasn't required.

Analysis of telephone survey respondents versus non-respondents on variables from a national voter file suggests that survey participation is not strongly linked to partisanship. Affiliation with a particular political party does not appear to affect the likelihood that a person will participate in telephone polls, though those who participate in polls tend to vote more often than people who are less likely to take surveys<sup>2</sup>.

1,360 respondents with 802 self-identifying as a veteran (513) or a caregiver (289). We administered the survey using IVR survey technology and recorded responses on 13 questions. We conducted a randomized dial of households across the nation based on the parameters described below. The margin of error is +/- 3.43% at a 95% confidence level. This means that at a 95% confidence level the “true” figures would fall within this range if the total survey universe were sampled. The margin is higher for any demographic subgroup of the sample, such as age or gender.

<sup>1</sup> <http://www.uno.edu/campus-news/2016/documents/UNO2016SenateRunoffPoll.pdf>

<sup>2</sup> <http://www.pewresearch.org/2017/05/15/what-low-response-rates-mean-for-telephone-surveys/>

Telephone poll estimates for party affiliation, political ideology and religious affiliation continue to track well with estimates from high response rate surveys conducted in-person, like the General Social Survey. This provides strong evidence that decisions to participate in telephone surveys are not strongly related to political, social or religious attitudes. So even at low response rates, telephone surveys that include interviews via landlines and cellphones, and that are adjusted to match the demographic profile of the U.S., can produce accurate estimates for political attitudes<sup>3</sup>.

Independent analyses from publications such as the Wall Street Journal<sup>4</sup>, National Council on Public Polls<sup>5</sup>, American Association of Public Opinion Research<sup>6</sup> and The Pew Research Center all show automated, recorded voice surveys used to record candidate preferences have an accuracy level comparable to live interviewer surveys.

Veteran Likelihood. We began with a list of self-reported veteran households. We then filtered out any records from states that have restrictions on the use of recorded phone calls. Furthermore, we only completed surveys for respondents who confirmed that they were either a veteran, or a family member/caregiver of a veteran. We did not survey professional caregivers.

Home Phone Ownership. Due to the mode of administration of the survey, the sample is limited to individuals who own home phones.

Additional Sample Demographics. We recorded the age, gender, and political leaning of each respondent based on self-reporting.

Weighting. Unlike a typical political poll that needs to be weighted by demographics of the electorate, we surveyed self-identified veteran households where age, gender, and race wasn't always available nor are there consistent statistics across states.

## Findings

Support for medical cannabis, and research on medical cannabis is high across veterans and caregivers, all age ranges, gender, political leanings and geography.

- 92% of all respondents support medical research.
- 82% of all respondents support legalizing medical cannabis.

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<sup>3</sup> <http://www.pewresearch.org/2017/05/15/what-low-response-rates-mean-for-telephone-surveys/>

<sup>4</sup> WSJ, 11/6/2008 "...interactive voice response polls, or IVRs, were as accurate [in the 2008 elections] as live-interview surveys, and more thorough..."

<sup>5</sup> NCPP 12/18/2008 "For [2008] telephone surveys using live interviewers, the average error was 2.0 percentage points. It was 1.8 percentage points for IVR..."

<sup>6</sup> AAOPR 4/2009 "The use of either computerized telephone interviewing [CATI] techniques or interactive voice response [IVR] techniques made no difference to the accuracy of estimates [in 2008 primary election polls]."

Veterans and Caregivers both overwhelmingly support the federal legalization of cannabis to treat a mental or physical condition.

- 81% of veterans support federally-legal treatment.
- 83% of caregivers support federally-legal treatment.

Both groups also support research at extremely high levels.

- 92% of veterans support research into medical cannabis.
- 93% of caregivers support research into medical cannabis.

The support for research and legalization is spread across the country, in states where medical cannabis is currently legal and in states where it is not.

- 60% of respondents do not live in states where medical cannabis is legal.
- 40% of respondents live in states where medical cannabis is legal.

This is also a bipartisan issue.

- 88% of self-identified conservative respondents support federally legalized medical cannabis.
- 90% of self-identified liberal respondents support federally legalized medical cannabis.
- 70% of self-identified non-partisan respondents support federally legalized medical cannabis.

Support crosses age ranges as well.

- 100% of respondents aged 18-30 support federally legalized medical cannabis.
- 96% of respondents aged 31-45 support federally legalized medical cannabis.
- 87% of respondents aged 46-59 support federally legalized medical cannabis.
- 79% of respondents aged 60+ support federally legalized medical cannabis.

Usage is also an important factor.

- 1 in 5 veterans uses marijuana to alleviate a medical or physical condition.
- Approximately 40% of caregivers know a veteran that was using marijuana to alleviate a medical or physical condition.
- The majority of veterans surveyed that are using cannabis are over the age of 60.

It is also clear from the survey that veterans are accessing cannabis to assist them in states with and without medical marijuana programs.

This survey shows that the veteran community – veterans and their caregivers – support researching and the federal legalization of medical cannabis. The results do not correlate to a personal connection to the issue, either knowing a veteran who uses cannabis to treat a mental or physical condition or being a veteran who uses cannabis for treatment. The support does not align with one particular political party or agenda. It is also spread across age ranges, states, service branches and gender.

### **Recommendations**

There are a number of ways to present this information to the public.

- Press conference highlighting how widespread the support is for medical usage and further research. Highlight individual veterans who are willing to speak out, and potentially include other veterans' organizations.
- When meeting with individual, targeted members, bring supportive veterans from their states/districts, or attach testimonials from veterans in their districts.
- Keeping this as a bipartisan issue, not affiliated with one Party or elected official. This issue transcends political parties.