

THE LEGALIZATION OF MARIJUANA

The movement to legalize marijuana is a war being waged at the ballot box of many states. The movement is sponsored by a small group attempting to dictate changes in laws surrounding the use, as well as the cultivation and distribution of marijuana. Organizations such as NORML (National Organization for Reformed Marijuana Laws); The Lindesmith Center; and, the Drug Policy Group are pushing the movement state to state. There are three key players involved in the funding of this movement: University of Phoenix founder John Sperling, New York philanthropist George Soros, and Ohio insurance executive Peter Lewis have funded efforts to revise drug laws in California, Colorado, Nevada, Oregon, and Arizona. The initiatives won in all five states. Sperling, Soros, and Lewis plan to focus their nationwide campaign on middle America. According to a drug policy adviser to Soros, the three philanthropists contributed more than \$7 million toward changing the nation's drug policies during the 1997-1998 election cycle. They each spent \$1.2 million on the California initiative alone. The bottom line is that the movement for the legalization of marijuana is based on nonfactual, misleading, and emotional information.

The opponents to the legalization of marijuana movement believe the billionaires are buying bad public policy, and that in the final analysis, it is a few of the most wealthy people in our nation funding a movement of which the affects will be felt by all. The battle against the legalization of marijuana is being waged to protect future generations of Idahoans. This document contains currently recognized facts from research conducted on the issue. The final conclusion about the legalization issue is that Idaho should not be bought by east coast interests. The interests of Idaho should be protected and maintained by those with a personal vested interest in securing a bright future for our children, free of the devastating effects of drug use.

The legalization of marijuana issue has four main components: the decriminalization of marijuana; the legalization of marijuana for medical purposes; the legalization of marijuana for agricultural purposes; and, the issue of harm reduction. All four areas of interest will be addressed in a question and answer type format.

I. THE DECRIMINALIZATION OF MARIJUANA

Question: There are people who say that drugs are a victimless crime like prostitution and gambling, and that the government has no business controlling behavior that does not harm anyone?

Answer: There are no real victimless crimes. Drug abuse impacts the family in forms of child abuse and/or abandonment, domestic violence, the incidence of violence when someone addicted commits a violent act against another for their money or their property, to satisfy their own addiction. There are also innocent victims who are murdered, raped or assaulted as a result of someone's addiction which is the result of a lack of self-control. Additionally, the innocent motorists who are victims of drugged drivers add to the impact felt by society because of drugs.

Drug addiction costs society between \$65 and \$76 billion dollars a year. Some of these costs are represented in tax dollars such as those supporting welfare programs and Medicaid for example. (The Myths of Drug Legalization, CNOA, 1998, page 1)

Our society is such that government control or involvement is a necessity. Without the government to protect people from potential risk of harm caused by other people, in such areas as drug control, there would be an increase in substance abuse and overdoses caused by drugs. Other areas where government control is needed is in the foods we eat, the use of pesticides, traffic regulations, drunken driving laws, and child labor laws. Without a "watchdog," society would be left to police itself and that has the potential for serious abuses. In 1906, the Pure Food and Drug Act was created to monitor the production of food and the drugs we used. In 1938, the Food and Drug Administration, Product Safety Division, was established as an extension of the Pure Food and Drug Act. The establishment of both of these was a direct result of the government's decision that there should be an oversight mechanism in place to protect society from the abuses of those less concerned about safe foods and drugs.

Drug abuse places others at too great a risk of harm. In essence, the police are the public; the public are the police. The police are the only members of the public who are paid to give full-time attention to duties that are incumbent on every citizen in the interest of community welfare and existence. (Sir Robert Peel, 1829). That is what we are talking about, the welfare and existence of our communities.

Furthermore, marijuana is considered a "gateway" drug, one which tends to lead users down a path towards the use of other drugs, such as cocaine and methamphetamine.

Question: Are alcohol and drugs the same?

Answer: Alcohol and drugs are not the same. People drink not necessarily to become intoxicated. However, people use drugs for the sole purpose of getting high.

Question: Would legalizing drugs reduce crime?

Answer: Not necessarily. There are approximately one million arrests for drug violations out of a total 12 million arrests annually. Of that million, only about 12 percent are sentenced to prison. Furthermore, those already using drugs would not change their behavior as a result of the removal of drug laws. There would still be those people who would victimize others for personal benefit or gain. Drug dealers and addicts would not instantly become law-abiding citizens in search of legitimate work. Their lifestyles would still center on illegal activity in order to avoid society's rules of behavior.

The biggest problem is the effect of drugs on the user. Legalizing drugs would increase the number of users and addicts, and likewise would increase the number of violent crimes they commit such as rape, assault, and homicide. In Philadelphia, 50 percent of the child abuse fatalities are by cocaine-using parents. Nationally, about one million child abuse cases are directly linked to substance abusers. Studies show that about half of our violent crimes are committed by drug users. (The Myths of Drug Legalization, CNOA, 1998, page 3)

The abuse of drugs is usually not the primary criminal act, there are other crimes occurring at the same time the person committing such crimes is using illegal drugs. The person is already criminal in behavior without the drug, and the presence of the drug is secondary.

Illegal substances are involved in 28% of the homicides, 25% of reported rapes, 44% of larcenies, and 45% of burglaries and thefts. Offenders themselves report the role alcohol and drugs play in their crimes; 51% of Federal inmates and 47% of all those on probation reported using alcohol or drugs at the time of their offense. And 41% of first-time offenders in State prisons have used drugs regularly, compared with 63% of those with two prior convictions, and 81% of those having five or more prior convictions. (Substance Abuse In Brief, Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services, December, 1999).

Question: What about only legalizing marijuana?

Answer: Marijuana and hashish are intoxicating substances that make the user high. The degree of mental and physical impairment depends on the THC level. THC is Tetrahydrocannabinol, which is the chemical in marijuana which causes "the high" or psychoactive effects. There are 63 cannabinoids in marijuana, and Delta 9 THC is one of them, with its make up in the plant determining its drug value. The higher the THC, the more powerful high results. At the lower end of the THC level (approximately 2-3%), the effects are aligned with a depressant to the central nervous system; at the high end of the THC spectrum (approximately 28-33%), the effects are aligned with a hallucinogenic-type effect. Also, since the 1970's, the THC content has seen a dramatic increase through hybrid and cloning methods.

Since marijuana is considered a "gateway" drug, legalization of marijuana could be viewed as an inroad toward legalization of other substances – a dangerous precedent to set.

Question: What are the effects of using marijuana?

Answer: Studies show marijuana can and does cause apathy, diminishes mental capacity, causes difficulty in concentrating, decline in performance, and decreased or lack of motivation. Studies show marijuana adversely affects the brain, reproduction process, immune system, respiratory system, cardiovascular system, and remains in the body for extended periods of time because it is fat-soluble. In addition, marijuana use often impairs normal thought process, distorts reality, reduces self-control, and releases inhibitions. Some of the release in inhibitions results in criminal activity. There is proof that marijuana increases harmful and criminal behavior on the part of the user. Many times, the user is unaware he or she is being affected unless otherwise told by others.

Scientific research reveals marijuana use does result in health consequences that not only affect the users themselves, but also research reveals that there is profound health consequences on those yet born. Furthermore, marijuana use leads to chronic and interim effects from regular use, specifically with regards to decreased testosterone, reduced sperm count and motility, altered sperm structure (with chromosomal and DNA alterations), interference with ovulation and the hormone cycle in women, suspected mutagenic alterations in DNA of germ cell chromosomes, and embryocidal toxicity and development impairment in the fetus and newborn exposed in utero or in milk supply of newborns (C. Sprague, "Marijuana Update for Concerned Parents, Physicians, Youth and Citizens of Hawaii," 44 Haw. Med. J. 24 (1985)).

The effects on the reproductive process impact both males and females alike. Marijuana use in women has been shown to alter the level of several sex hormones, with corresponding consequences for sexual functioning (Hawaii article, page 12). The concern regarding reproduction directly leads to the effects on offspring. If the user of marijuana conceives a child while still actively using, studies have shown that there are significant behavioral abnormalities in the human offspring of women using large quantities of marijuana while pregnant (Hawaii article, page 14). Research conducted has also strongly aligned the incidence of marijuana use and pregnancy with what occurs in fetal alcohol syndrome (Hawaii, page 15). Research has shown that marijuana remains in the body of pregnant women who use marijuana for up to six months while the fetus is developing.

Furthermore, there have been studies conducted which show how marijuana affects pregnant mice and their offspring. In female mice that consumed THC while pregnant, their offspring developed weight problems in adulthood. Under normal conditions, healthy adult male mice do not have weight problems.

Question: How many prisoners are in prison for drug violations?

Answer: About one third of prisoners are housed in prisons for drug-related violations. The criminal histories of these prisoners are not restricted to drug offenses, their histories include violent crimes and other offenses not related to drugs. These prisoners are convicted and sentenced to prison on drug-related charges instead of these other crimes only because they were caught on drug violations. First time offenders for drug violations are usually not sentenced to jail or prison. It is the repeat offender who eventually serves time. (The Myths of Legalization, CNOA, 1998, page 3).

According to the most recent statistics available from the U.S. Sentencing Commission, in 1998, only 33 individuals sentenced for federal drug crimes involving marijuana were convicted for less than 5,000 grams. During this same period, 1,299 individuals were convicted for marijuana offenses involving between 100,000 and 2,999,999 grams. (5,000 grams = 10.9 pounds = 9,965 joints; 100,000 grams = 219 pounds = 199,500 joints; and 2,999,999 grams = 6,563 pounds = 5,985,285 joints). (Barry McCaffrey, Director, ONDCP, Washington Times, 10-07-99).

Question: If drug addicts steal to support their habit, then wouldn't decriminalization would reduce crime as it relates to theft-type cases?

Answer: Many drug addicts do steal to support their habit, however, studies show only about 13 percent of those incarcerated are imprisoned for offenses related to supporting their drug habit. A study of their criminal histories reveals various crimes and a number of previous felony convictions.

Substance abuse is a primary cause of and contributor to crime. Illegal substances are involved in 28% of the homicides, 25% of reported rapes, 44% of larcenies, and 45% of burglaries and thefts. Offenders themselves report the role alcohol and drugs play in their crimes: 51% of Federal inmates and 47% of all those on probation reported using alcohol or drugs at the time of their offense. And 41% of first-time offenders in State prisons have used drugs regularly, compared with 63% of those with two prior convictions, and 81% of those having five or more prior convictions. (Substance Abuse In Brief, Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services, December, 1999).

Question: At some point in our history, weren't drugs once legal?

Answer: Yes, prior to 1914. And although data is lacking, there is good evidence that with one-third of today's population, drug addiction was greater. That is why we outlawed drugs. (The Myths of Drug Legalization, CNOA, 1998, page 4).

Question: How much does drug law enforcement cost this country every year?

Answer: Approximately \$20 billion a year. That includes all federal, state, and local expenditures on drug law enforcement, including what it costs to prosecute, defend, take to trial, and send to prison. It is less than one percent of the total federal, state, and local government expenditures. In fact, to put it in perspective, this country spends more money – or about \$24 billion a year – on food stamps than we do drug law enforcement. Our Federal government spends \$200 billion just on the interest payment to our debt, and about \$235 billion on social programs. Americans spend over \$300 billion gambling every year, \$36 billion for admissions to entertainment events, and \$62 billion for items to make us look better. (The Myths of Drug Legalization, CNOA, 1998, page 5).

The very nature of law enforcement provides us with a unique insight into the ravages caused by the abuse of narcotics and other dangerous drugs. These experiences have clearly shown us that we should not consider legalizing drugs; rather, we should increase our efforts to combat drug trafficking, encourage comprehensive drug prevention programs and help drug-addicted individuals break the cycle of addiction.

Question: Is it a fact if we legalize drugs we would at least be saving the \$20 billion spent annually on drug law enforcement?

Answer: No. There would still be governmental costs associated with the distribution, regulation, and control of legal drugs, as well as the costs associated with treatment and enforcement. The costs associated with the legalization of drugs would be three to four times more than is spent on law enforcement currently.

Question: Would there be other added costs related to legalizing drugs?

Answer: Yes. Experts estimate the cost to at least double what it is today, and some project as much as five times the amount. With increasing numbers in the user population base, there would be a correlating increase in their consumption, with a corresponding increase in crime, accidents, medical care, welfare, unemployment, Worker's Compensation claims, disability payments, and those babies born with addictions. In just the area of addicted babies, it is estimated that the hundred thousand drug-exposed babies born every year cost taxpayers \$20 billion annually. (The Myths of Drug Legalization, CNOA, 1998, page 5).

Also, drug addicts are considered disabled and qualify for Social Security Insurance payments. The current cost is about \$1.7 billion a year. (The Myths of Drug Legalization, CNOA, 1998, page 5).

Question: What is the current situation regarding marijuana use among our youth?

Answer: Current use of marijuana in the 12 to 17 year old age group has seen a decline, falling by 26 percent (from 9.4% in 1997 to 7.0% in 1999). This decline in the use of marijuana, the most popular of all drugs among youth, occurring among current users, that is those with well-developed patterns of use, is remarkably good news. D.A.R.E. programs have assisted in this decline. (Youth Drug Use Continues to Fall Dramatically: Household Survey Shows 2-year 21% Decline For Youth, Executive Office of the President, September 07, 2000, page 1). However, marijuana use rose 28 percent (from 12.8% in 1997 to 16.4% in 1999) in the 18-25 year old age group.

Question: What is the overall situation with the use of marijuana regardless of age?

Answer: There were 2.3 million new marijuana users in 1998, 11 percent fewer than the 2.6 million in 1997. The average age at first use rose, up to 17.3 years in 1998, slightly higher than in the previous four years. (Youth Drug Use Continues to Fall Dramatically: Household Survey Shows 2-year 21% Decline For Youth, Executive Office of the President, September 07, 2000, page 2).

II. MEDICINAL USE OF MARIJUANA.

Question: What about legalizing marijuana for medical purposes?

Answer: There is still not enough evidence available to indicate marijuana is a "harmless" drug. Research has been limited on the use of marijuana, and there is no evidence that marijuana use is effective for medical treatment given that there are other alternatives available, like the use of Marinol, which is the pill for THC. However, Marinol has some serious side effects, and as a result, it is seldom used. Also, Marinol costs between \$200 - \$250.00 for a thirty-pill prescription. (Fred Meyer Pharmacy, December 2000). It should be noted Marinol does not have the same side effects as smoking marijuana would, primarily because when marijuana is lighted, it contains 2,000 chemicals, including benzene, which is also a known human carcinogen.

Furthermore, a marijuana cigarette has twenty-one times more nicotine and tar than a cigarette made from tobacco. Marijuana is not a pure substance; it is made up of more than 400 chemicals, many of which have not been studied either alone or in combination with each other, which makes marijuana a very unstable substance.

THC (Delta-9-tetrahydrocannabinol) is the main psychoactive ingredient in marijuana, and due to cultivation methods, the THC has increased dramatically compared to the THC in the marijuana of the 1970's. In the 1970's, the average THC level in one joint approximated 2-3 %, whereas today, the THC level found in marijuana is as high as 28 - 33 %. In the 1970's, marijuana was considered a depressant to the central nervous system. Today, marijuana borders the hallucinogenic arena because of the amount of THC developed through cloning and hybrid methods. (THC Levels: 1960's to Present)

One of the more negative notable traits of marijuana is that it is fat soluble, and the effects of marijuana can persist long after use, sometimes as long as six weeks after use. On average, marijuana users have 30% more fat than non-marijuana users.

Question: If marijuana is legalized for medicinal purposes, who will control the THC content?

Answer: The legalization of marijuana for medicinal purposes does not just focus on the issue of the THC content. Who will grow the marijuana, cultivate it, and sell it to specified consumers, at the same time controlling the distribution? Who will oversee the so-called prescription process while at the same time recognizing the legitimate consumers? All of these processes cost money.

The issue of the legitimate marijuana grower versus the illegitimate grower must be addressed. Who will be responsible for the enforcement issue relative to this potential problem?

Furthermore, if marijuana is legalized for medicinal purposes, there is no requirement for a so-called prescription, no quality control or testing standards, and no control over strength, dosage, or frequency of use, such as those for prescription drugs. Patients have no control over dosage received through smoked marijuana because potency can vary from plant to plant. There are other health factors associated with smoking as a delivery system in the furtherance of medicating patients.

Furthermore, can you think of any physician who would prescribe smoking as a viable treatment for any disease or illness, or for the symptoms associated with a disease or illness? The answer is emphatically no! According to Doctor Janet Lapey, executive director of Concerned Citizens for Drug Prevention, Inc., the American Medical Association, American Cancer Society, National Multiple Sclerosis Society, and Food and Drug Administration, and others have testified that marijuana had not been found to be a safe and effective medicine. She also cites 1992 studies by the National Eye Institute, National Cancer Institute, National Institute of Neurological Disorders and others, there is no evidence that marijuana is effective, particularly compared with other treatments. (The Myths of Drug Legalization, CNOA, 1998, page 8).

Question: If marijuana were legalized, would this country profit from that?

Answer: The tax earned on marijuana would not be enough to cover the abuse created in our society. Statistically, over half of the people in this country use alcohol and only five percent use drugs. Yet, drug abuse already cost our society between \$65 and 76 billion dollars annually. The cost of alcohol abuse is already double that. Legalizing marijuana would only be a cost driver to what is already being expended on those currently abusing drugs. Dr. Mitchell Rosenthal, a renowned expert on drug abuse, points out that only 10 percent of drinkers become alcoholics, whereas up to 75 percent of regular illicit drug users become addicted (The Myths of Drug Legalization, CNOA, 1998, page 12).

The cost of tobacco abuse in this country was never nullified by the cost of the tobacco settlements in the 1990's. For all intents and purposes, the settlements were basically a smoke screen to mitigate the damage caused by the tobacco industry's promoting of a product known to them to cause cancer and other serious health issues long before the public was made aware of these health concerns. Is marijuana any different? The answer is no! (The Myths of Drug Legalization, CNOA, 1998, page 1). Also, tobacco does not change behavior, however, marijuana does in fact change a persons behavior.

Also, research shows that for every dollar spent on drug abuse prevention, communities can save four to five dollars in costs for drug abuse treatment and counseling. (The National Household Survey on Drug Abuse, the Monitoring the Future Study and the Drug Abuse Warning Network, 1998).

Question: Is there evidence to suggest that the inhalation of marijuana for medicinal purposes is as harmful as the inhalation of tobacco in the form of cigarettes?

Answer: There is evidence which indicates that the carcinogens in marijuana are much stronger than those in tobacco. Also, numerous studies have found that marijuana causes pre-cancerous changes similar to those of tobacco. Smoking marijuana results in four times the amount of tars and carbon monoxide, and it damages pulmonary immunity. Although marijuana does not obstruct airflow, per se, it impairs oxygen diffusion capacity, one of the measurements of lung function. (Hemp is Marijuana: Should Farmers Grow It?, Robert L. Maginnis, page 4).

In 1998, surveys found the first increase in the perceived risk of marijuana among young teens since 1991 (The National Household Survey on Drug Abuse, the Monitoring the Future Study, and the Drug Abuse Warning Network). The abundance of information now projected onto this age group about the risks of smoking tobacco has also assisted in this reduction.

III. INDUSTRIAL MARIJUANA

Question: Should we legalize marijuana to help the small farmer with financial problems?

Answer: Legalizing marijuana becomes problematic from an enforcement standpoint, as well as a revenue standpoint. It is impossible to visually detect the difference between legal marijuana and illegal marijuana. This becomes a problem for law enforcement in detection methods. The problem regarding revenue is how to control the cultivation of industrial marijuana nationwide. What entity would be responsible for controlling this, and what costs would the government need to absorb in order to achieve this?

If you legalize industrial marijuana, you legalize marijuana because their similarities are closer than their differences. Chemists have difficulty discerning between industrial marijuana, ditch weed, and marijuana. How is the average law enforcement officer expected to make the distinction if a chemist in a lab, in a controlled environment cannot easily make that distinction?

Further, there is natural disbursement with all crops. Ditch-weed is derived from air-born seeds, which grow on hillsides and in ditches, and it is already a problem in states which legally grew industrial marijuana for military purposes, such as rope, in the 1930's and 1940's.

In 1998, Canada legalized industrial marijuana, restricting the THC to no more than 0.3%. Canada, by 1999, experienced a decline in demand and prices for industrial marijuana, and as a result, has concluded that legalizing industrial marijuana did not provide the economic results which were desired. (Hemp is Marijuana, Should Farmers Grow It? , Robert L. Maginnis, page 8).

Question: Is there a demand for industrial marijuana in the United States?

Answer: The U.S. Department of Agriculture conducted research to determine the demand in the U.S. They used imported marijuana products to determine its demand, and what they found was the total amount of actual acreage that would be needed to support the need for marijuana-based products here in the U.S. is about 4,600 total acres. That equals about nine average sized farms. (Industrial Hemp in the U.S.: Status and Market Potential, January 21, 2000).

Also, there are the leftovers from industrial marijuana. When making products with industrial marijuana, only the stalk and seeds are used. Industrial marijuana is still marijuana, and while the levels are low, it contains THC at the levels which were found in the 1970's (2-3%). Who will be responsible for disposal of the remainder of the plant, which is not used in the production process? All of this costs money.

Furthermore, will industrial marijuana find its way to the illegal market? Will kids know the difference between industrial marijuana and marijuana? No, the difference has to be determined by chemical analysis.

Based on the information available, there does not appear to be an economically based argument to support the legalization of the cultivation of industrial marijuana. There are still many unanswered questions, such as whether the profits generated from legalized hemp outweigh the costs associated with the regulation of it. No one has answered this question.

Question: Does the THC found in marijuana products pose a health risk to consumers?

Answer: Yes, the marijuana products may not be safe because even small amounts of THC may cause developmental problems. Those most at risk are children exposed in the womb or through breast milk, or teenagers whose reproductive systems are developing.

Most health research on cannabis has been based on smoked marijuana. The psychological harms, which result from smoking marijuana, include marijuana-induced psychotic-like states lasting for a week or more. Marijuana use may trigger latent psychopathology of many types. In some people, chronic marijuana use can produce an acute psychosis in which confusion, amnesia, delusions, hallucinations, anxiety, agitation, and hypomanic symptoms predominate. Marijuana use can also impair cognitive thinking; it is associated with impaired performance; and, recent studies have found subtle defects in cognitive tasks in heavy marijuana users after a brief period of marijuana abstinence. Marijuana affects psychomotor performance; it disrupts body functions such as body sway, hand steadiness, rotary pursuit, driving and flying simulation, divided attention, as well as sustained attention. A study of experienced airplane pilots showed those who smoked marijuana, even twenty-four hours after a single marijuana cigarette, exhibited impaired performance on flight simulator tests. There is an amotivational syndrome associated with marijuana use. This describes young people who drop out of social activities and show little interest in school, work, or other goal-directed activity.

In addition, smoking marijuana causes four times the risk of a heart attack in the first hour after ingestion for people over 50 years of age. Also, the incidents of head and neck cancers occur fifteen years earlier in marijuana smokers than in tobacco smokers.

IV. HARM REDUCTION(THE MOVEMENT TO TEACH OUR KIDS RESPONSIBLE DRUG USE)

Question: What is the definition of harm reduction?

Answer: Harm reduction is a movement towards the legalization of drugs, including marijuana, with the premise that if we can help them reduce the harm caused by drug use, we can escape the consequences of drug use. This is a fallacy. Unfortunately, there are some European cultures that promote the Harm Reduction program in their school systems as opposed to the DARE program.

Another fallacy is that drug abusers can be taught responsible drug use. The reality is that once an addict, always an addict, and there is no going back. Most drug abusers cannot be taught to use less, since the objective of drug use is to get high, and

subsequent drug use is to get even higher.

Question: Are there any positive aspects of Harm Reduction?

Answer: No. It is not the harm of the drug itself; it is the misinformation being supplied to people contemplating getting involved in drugs. The message is that people can be taught to use drugs responsibly, however, the drug itself will dictate use. Also, drugs make you emotionally unavailable, which causes dysfunction in the family unit, lost time from work, or not being able to work at all, a distortion of reality, which distorts responsibility, and many other social ills, in the form of crime.

Question: Is the D.A.R.E. program doing what it was intended to do...educating the youth in order to reduce the number of youth that become involved in the use of drugs?

Answer: Yes, the D.A.R.E. programs are working nationwide. There has been a decrease in the number of 12-18 year olds that have tried or are users of drugs. This decline can be attributed partially to the D.A.R.E. programs, as well as the amount of information being conveyed to this age group about the consequences associated with the use of drugs.

Question: If Harm Reduction were taught in the classrooms in a format similar to the D.A.R.E. program, what might be the results?

Answer: We would see a significant increase in the number of youth "experimenting" with all types of drugs. As informed as these youth would be, according to the Harm Reduction philosophy, these youth would be experimenting with drugs that have a high addiction rate. We would then have to address the issue of dealing with a youth group who are addicted to harmful drugs and the issue of responsible drug use would be moot since we would now be dealing with the issue of addiction.

Furthermore, increased drug availability and use will worsen our crime problem. Preliminary findings in a 1996 National Institute of Justice study, which compiles statistics on the levels of drug use among arrestees, indicated that a median 68% of arrestees test positive for at least one drug at arrest and the same study conducted in 1995 revealed 31% of both male and female arrestees reported they were under the influence of drugs or alcohol at the time they committed crimes. That year's report also indicated 28% of inmates arrested for homicides were under the influence of drugs when they committed that crime. (A Police Chief's Guide to the Legalization Issue, July 1997, page 4).

In 1986, during the midst of the crack epidemic, violent crimes reached a level of 617 violent crimes per 100,000 people. As we experienced continued escalation of drug-related violence, this figure rose in 1993 to 746 violent crimes per every one hundred thousand inhabitants. It is only through strict enforcement and education programs like D.A.R.E. that we will experience a decline in violent crimes. (A Police Chief's Guide to the Legalization Issue, July 1997, page 4).

Furthermore, it is only after a period of aggressive and consistent law enforcement, anti-drug education, and a societal shift of public opinion away from drugs, the number of regular users of illegal drugs was reduced by 50% between 1985 and 1995 (from 23.3 million to 12.8 million). (A Police Chief's Guide to the Legalization Issue, July 1997, page 4).

Question: If D.A.R.E. were removed from the school curriculum, what do you think the results would be?

Answer: The results would be drastic. We would see an increase in the number of elementary-aged school children start experimenting with drug use, and as these children progressed with age, their substance abuse would progress with them. It has been determined that the program works at the elementary school level because these children are receptive to the information that is being taught in the program, and these same children are developing life-long impressions about certain things in life, including drug use.

Instead of maintaining a proactive stance against drug abuse, we would become reactive, specifically in now having to deal with addicts at a younger age who are still developing mentally and physically. The issue, too, is in the fact that once an addict, always an addict. It is doubtful that we would want to introduce a nine or ten year old to substance abuse, and then have to spend the next sixty to seventy years treating that individual for their addiction. It is a sounder investment to incorporate D.A.R.E. into the school curriculum and avoid the scenario being played out with a reactive role.

Question: Is the D.A.R.E. program effective at the elementary school level?

Answer: The D.A.R.E. program is effective at the elementary school level, especially because it has been determined that 5th and 6th graders are most receptive to the anti-drug message since it is at this age that drug experimentation is being considered.

As a result of the success of the program, the program has been extended into the junior high and high school levels, where it has been found that substance use and abuse tends to increase in the 12-18 year old age categories.

CONCLUSION

Based on the research conducted, there are no definitive answers to support the legalization of marijuana, in any form. To the contrary, there is more evidence to suggest we have a long way to go to determine whether the use of marijuana has a viable place in our society. The Food and Drug Administration, the American Medical Association, as well as countless other well-respected, well-organized groups have determined there is no recognized medical necessity surrounding the use of marijuana. The results of volumes of research indicate there are other alternatives to the use of marijuana in the treatment of the affects of chemotherapy, the appetite suppression condition surrounding the AIDs Wasting Syndrome, glaucoma, or any other medical condition known to humankind. The effort for the legalization of marijuana involves only five percent (5%) of the population base, yet there are organizations and individuals who want laws changed that will affect the remaining 95% of the population base that are not proponents of the legalization movement. The issue is not about who has the most money to sponsor drug legalization initiatives. The issue is about keeping our children and our society free from the evils inherent in the use of controlled substances by maintaining a strong position of zero tolerance when it comes to the issue of legalizing drugs.

Future generations are relying on you to make the right decision. Do you want to see fetuses damaged due to parental use of marijuana? Do you want your children and grandchildren taught to use drugs responsibly? The possibility seems ridiculous, but it can happen. It is a battle of wills. You hear about the war on drugs and how it is considered a lost cause --- that is millionaire money talking. The fact is we need you and your community to stand up and say "not in Idaho." We need to believe in doing the right thing for our children and our children's children. We have not given up, the plan is working. It just takes time and commitment. It will take you to say Idaho cannot and will not be bought by East coast special interests.

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