

# MARIJUANA

## POLICY REPORT

a publication of the  
Marijuana Policy Project Foundation



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Volume 5 Winter/  
No. 1/2 Spring 1999

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- ◆ Patient Goes to Trial for MPP-Sponsored Civil Disobedience in Washington, D.C.
- ◆ Federal Guidelines on Medicinal Marijuana Research Released
- ◆ MPP Report on Marijuana Arrests and Incarceration Published

## MPP Influences Major National Medicinal Marijuana Report and Garner Extensive Media Coverage

**A**fter two years of hard work, MPP succeeded at influencing the National Academy of Sciences’ (NAS’s) Institute of Medicine (IOM) to release a remarkably favorable report on medicinal marijuana.



Katie Couric interviews MPP’s Robert Kampia on NBC’s *Today Show* on March 18.



The report, *Marijuana and Medicine: Assessing the Science Base*, released on March 17, presents ample scientific evidence that confirms marijuana’s therapeutic value for patients with certain conditions. IOM is a private, non-profit organization that was commissioned two years ago by the White House Office of National Drug Control Policy (ONDCP) to perform a “comprehensive review” of marijuana’s medical benefits and health effects.

ONDCP was hoping that the report’s findings would not be favorable. But MPP worked diligently to bring patients and doctors to IOM’s public hearings, send the study investigators useful information,

and otherwise influence IOM to make the report as favorable as possible. Indeed, all three of the patients whose case histories were featured in the report were brought to the hearings by MPP. When the report was released, MPP’s media coverage was the most extensive and positive in the organization’s four-year history.

Refuting ONDCP Director Barry McCaffrey’s long-standing claim that marijuana has no medical value, IOM Principal Investigator Dr. John Benson announced at a news conference, “[W]e concluded that there are some limited circumstances in which we would recommend smoking marijuana for medical uses.”

Some of the report’s most important findings include: (1) smokable marijuana works as a medicine for some people; (2) patients are already using medicinal marijuana despite its illegality; (3) marijuana does not present significant health risks relative to medicines that are legally available; (4) no evidence was presented in the report that indicates that prison is better for patients than marijuana; and (5) while more research

see [IOM Report](#), page 4



MPP’s Chuck Thomas sits between IOM principal investigators Stanley Watson, M.D., and John Benson, M.D., during the February 1998 IOM hearing.

# MPP and Others Attack Latest White House Drug Control Strategy

On February 8, the White House Office of National Drug Control Policy (ONDCP) released its *National Drug Control Strategy* (NDCS) for fiscal year 2000, revealing its plans to continue waging war on marijuana users.

The NDCS is an annual report prepared by ONDCP, the executive branch office that guides and coordinates the efforts of all federal drug control agencies. The strategy sets the tone and pace for all national drug control efforts, functioning primarily as a guide for Congress to use in preparing the federal drug control budget.

This year's report calls for \$17.8 billion to be spent in fiscal year 2000, with the primary focus on continuing the effort announced last year by ONDCP to cut illicit drug use and supply in half by 2007.

ONDCP claims, as it has for the past several years, that its priority is prevention and treatment. However, the report shows that the focus is actually on law enforcement, including the arrest and imprisonment of marijuana offenders. Under the latest NDCS, 66% of drug war funds would be spent on law enforcement, prisons, and other punitive programs, while 34% would be spent on drug prevention and treatment. In addition, within the funds set aside for prevention, the plan includes efforts aimed at "countering attempts to legalize marijuana," such as medicinal marijuana voter initiatives. Despite the hypocrisy of his stance, ONDCP Director Barry McCaffrey calls this "a balanced strategy."

(In addition, state and local governments typically spend a total of about twice the federal government's drug control budget, similarly skewed toward enforcement and punishment.)

Another aspect of the NDCS is the National Youth Anti-Drug Media

Campaign. Although ads created for the campaign—appearing on television and radio and in newspapers and magazines—purport to discourage adolescents from trying drugs, they are actually designed to scare the public into supporting anti-drug laws and their enforcement. The program, started last year, is slated to spend \$195 million each year through 2003.

## Drug Policy Reformers Respond with Alternative Plan

ONDCP's report met with strong criticism from MPP and other drug policy reform organizations. On March 3, MPP and a coalition of 22 other groups released a plan entitled *The Effective National Drug Control Strategy*.

The reformers' strategy calls for reversing the federal government's spending priorities on drug policy, so that two-thirds would go to prevention and treatment, and one-third would go to enforcement efforts. The reformers' strategy details several findings to back its recommendations, including:

- from 1985 to 1995, 85% of the increase in the federal prison population was because of drug convictions; and
- due to mandatory minimum sentences, drug offenders spend more time in jail than rapists—an average of 82.2 months versus 73.3 months.

Several recommendations in the reformers' strategy pertain to marijuana and MPP's goals, including:

- make efforts at all levels of government to separate the markets for marijuana from other illegal drugs;
- use facts, not scare tactics, to educate youth;
- end mandatory minimum sentencing;
- cease the costly and ineffective targeting of marijuana possession cases;

- transfer scheduling authority from the DEA to the U.S. Department of Health and Human Services;
- allow doctors greater freedom in prescribing medications for pain control;
- recognize the rights of states, doctors, and patients to make their own decisions regarding the usefulness of marijuana;
- end the *de facto* moratorium on medicinal marijuana research;
- develop a distribution system for medicinal marijuana;
- stop the misuse of forfeiture laws;
- restore voting rights to nonviolent drug offenders and allow unhindered public referenda and initiatives; and
- place less emphasis on drug interdiction ... and greater emphasis on domestic drug prevention and treatment programs.

## Reformers Draw Media Coverage

The reformers' strategy and strong criticism of ONDCP's report drew significant positive press coverage. In almost every article about the NDCS, reformers' viewpoints were represented.

On February 9, *The Boston Globe* quoted Criminal Justice Policy Foundation President Eric Sterling (who serves on MPP's Board of Directors) as saying the NDCS "is a betrayal of what the White House says it's doing, promising a balanced strategy when it is lopsided." *The Washington Post* also referred to the Drug Policy Foundation's characterization of the NDCS as "hypocritical and disappointing."

That same day, Ethan Nadelmann of The Lindesmith Center was quoted by the Associated Press as saying the NDCS is "unfortunately ... just another example of throwing billions of dollars down the bottomless pits of interdiction and failed

see [Drug Control Strategy](#), page 3

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**MPP advocates harm reduction-based marijuana policies.**

**Robert D. Kampia, director of government relations**

**Chuck Thomas, director of communications**

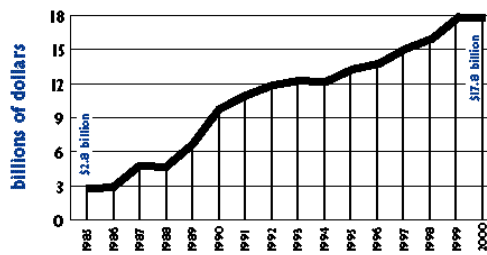
**Michael Kirshner, production manager**

## Drug Control Strategy, from page 2

prevention programs.” Kevin Zeese of Common Sense for Drug Policy was quoted in *The Los Angeles Times* as saying, “We’re disappointed with the White House policy. It’s more of the same, and more of the same isn’t working.” **END**

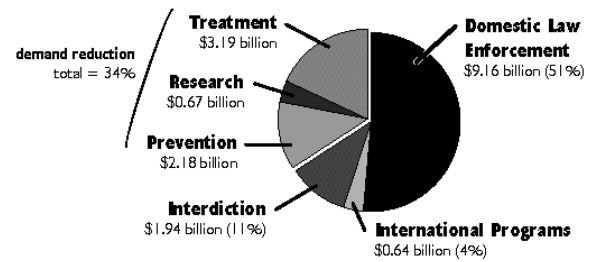
## Federal Drug Control Budget

Source: White House Office of National Drug Control Policy  
The 2000 figure is the Clinton administration’s request.



## Federal Drug Control Spending Request for 2000, by Function

Source: White House Office of National Drug Control Policy



To obtain a copy of the drug czar’s *National Drug Control Strategy*, please call the Drugs and Crime Data Center and Clearinghouse at 1-800-666-3332. For a copy of the reformers’ *Effective National Drug Control Strategy*, please call 703-354-9050 or e-mail [info@csdp.org](mailto:info@csdp.org).

## Letter Highlights Drug Czar’s Lies

In February, MPP joined 35 prominent intellectuals, journalists, public health experts, and activists in sending an open letter to Drug Czar Barry McCaffrey criticizing his “series of inaccurate and misleading statements” about various aspects of the drug war.

Although McCaffrey always claims that his White House Office of National Drug Control Policy (ONDCP) emphasizes treatment and prevention in its strategy, the office’s funding request for the year 2000 actually downplays those areas and instead increases spending on the enforcement of anti-drug laws and interdiction efforts.

The letter, drafted and coordinated by Common Sense for Drug Policy, highlighted McCaffrey’s description of medicinal marijuana as “a cruel hoax,” along with his statement: “There is not a shred of scientific evidence that shows that smoked marijuana is useful or needed.”

The letter pointed out to McCaffrey: “Exhaustive research, including numerous studies by the National Institutes of Health,

the Department of Health and Human Services, and other authoritative institutions, have concluded that marijuana possesses therapeutic value and effectively treats chemotherapy-related nausea and appetite loss. Even after the *New England Journal of Medicine* ... editorialized in support of medical marijuana, you have made no statements recognizing the scientific research backing the medicinal value of marijuana.”

In addition to MPP and Common Sense, the letter’s signatories included such notable groups and individuals as former U.S. Surgeon General Joycelyn Elders, San Francisco Mayor Willie Brown, the American Civil Liberties Union, the National Gay and Lesbian Task Force, the Center for Women’s Policy Studies, the National Black Police Association, National Women’s Health Network, the Center on Juvenile and Criminal Justice, Whitman-Walker AIDS Clinic, Black Coalition on AIDS, The Lindesmith Center, Brown University’s Dr. David Duncan, and Harvard University’s Drs. Henry Louis Gates, Alvin Poussaint, Orlando Paterson, and William Julius Wilson.

## New House Speaker Chosen

As the 1999-2000 Congress convened in January, U.S. Rep. J. Dennis Hastert (R-IL) was sworn in as Speaker of the U.S. House of Representatives. Hastert succeeds conservative drug warrior Newt Gingrich, who resigned from the post and left Congress at the close of 1998.

Although the media have portrayed Hastert as more moderate and conciliatory than the relentlessly intolerant Gingrich, a closer look reveals this is not the case—at least with regard to his views on drug policy. Soon after his election as Speaker, Hastert announced that fighting and expanding the war on drugs would be one of his top three priorities.

As chief deputy whip under Gingrich, Hastert led the Speaker’s Task Force for a Drug Free America, backing such policies as drug testing in the workplace,

increased spending for law enforcement, and tougher drug penalties—including the death penalty for those convicted of importing small amounts of marijuana and other drugs into the country. “We must be more vigilant in our policing and prosecution of anyone who participates in illegal drug activity,” Hastert said at the time.

One of the task force’s projects last year was the support of a non-binding anti-medicinal marijuana resolution (H.J.Res. 117). Although the resolution received more opposition than expected, it was approved by a 310-93 vote on September 15. (MPP led the effort against the passage of this legislation.)



U.S. Rep. J. Dennis Hastert (R-IL)

Broadening his efforts against medicinal marijuana, Hastert last fall joined U.S. Rep. Bob Barr (R-GA) in a successful move to bar the government of the District of Columbia from counting or verifying the results of Initiative 59, the District’s medicinal marijuana initiative. Hastert said it is vitally important “to prohibit the legalization of marijuana in the District of Columbia, where millions of our constituents come, year in and year out,” and “they ought to be safe.”

On legislative scorecards, Hastert has a 100% rating with the so-called Christian Coalition and a zero rating with the American Civil Liberties Union. Hastert has also received high praise from the Family Research Council, Focus on the Family, and the Eagle Forum—all organizations with extremist stances in favor of the drug war.

# MPP Gets Around

Philadelphia, Pennsylvania, December 1 — On World AIDS Day, the Philadelphia Bar Association held a public forum entitled “Legalize the Medical Use of Marijuana?: Current State of Law and Medicine.” MPP’s Robert Kampia addressed current efforts to change state and federal laws, while other panelists discussed existing medical literature, pending litigation, and first-hand experience with medicinal marijuana.

Washington, D.C., December 1—Kampia gave a presentation to the District of Columbia chapter of the Libertarian Party on the Initiative 59 campaign and resulting litigation in Washington, D.C., which MPP co-ran with a coalition of AIDS activists. (See page 8.)

Honolulu, Hawaii, December 6-11—MPP’s Chuck Thomas and several patients attended the semi-annual meeting of the American Medical Association’s House of Delegates to drum up support for medicinal marijuana law reform. Thomas also spent some time lobbying for a medicinal marijuana bill in the Hawaii legislature with the Drug Policy Forum of Hawaii. (See page 8.) He met with Hawaii Governor Ben Cayetano—who is favorable to the issue—and appeared on local television with the governor on December 10.

Washington, D.C., January 23-24—Chuck Thomas spoke on a panel at the National Conference on Civil Disobedience at American University. He discussed the legal issues involved with medicinal marijuana civil disobedience, using the two actions that MPP



“Drug Czar McCaffrey, if you’re watching, we’re coming after you next,” says MPP’s Chuck Thomas at the National Conference on Civil Disobedience, broadcast on C-SPAN.

orchestrated in 1998 as examples. Because the panel was aired on C-SPAN, Thomas took the opportunity to warn Drug Czar Barry McCaffrey that there will be more civil disobedience if he continues his war against marijuana-using patients.

Rockville, Maryland, February 3—Thomas testified before the National Advisory Council on Drug Abuse about the National Institute on Drug Abuse’s ongoing efforts to thwart medicinal marijuana research.

Washington, D.C., March 2—Thomas spoke on a marijuana policy panel at American University’s Washington College of Law.

Austin, Texas, April 1—Thomas participated in a marijuana policy debate at the University of Texas. Hundreds of students attended to hear Thomas and Drug Policy Forum of Texas spokesperson Al Robison relentlessly attack the disastrous consequences of marijuana prohibition—which a local drug war bureaucrat tried (and failed) to defend.

San Francisco, California, April 16—Kampia met with the editorial board of the *San Francisco Chronicle* to discuss MPP’s and others’ efforts to change state and federal laws that prohibit the medical use of marijuana. Kampia was joined by Robert Raich, a local attorney, and Dr. Mike Alcalay, a local AIDS patient who uses marijuana as a medicine.

Washington, D.C., April 27—Thomas was the guest lecturer at an American Politics and Public Law class at American University (AU). More than 30 students from different colleges nationwide took the class as part of the AU Washington Semester Program. Because a majority of these students supported MPP’s goals, Thomas encouraged them to lobby for reform in their home districts.



Chuck Thomas (left) talks to students in Austin, Texas.

## IOM Report, from page 1

should be conducted into marijuana’s medical uses, patients should be permitted to use marijuana in the meantime, for example, through an individual-patient “compassionate use” program.



Chuck Thomas speaks at MPP’s news conference, as patients Jim Harden (left) and Mike Krawitz and Cheryl Miller (right) await their turns.

## Media Work

IOM released its report at a March 17 news conference in the NAS building in Washington, D.C.

MPP brought several patients to the news conference who sat in the audience wearing bright red t-shirts with the words



Dozens of reporters assemble at MPP’s news conference.

“Medical Marijuana User” emblazoned on the front in large, white letters. Immediately following the IOM news conference, MPP and the patients held a news conference outside the NAS building. Dozens of reporters—including about 15 television crews—attended.

The patients (two of whom had their personal case histories featured in the IOM report) and MPP’s Chuck Thomas explained the significance of the report.

MPP hired a public relations firm to help pitch the story to hundreds of reporters nationwide. MPP staff members spent nearly 12 hours a day for a full week talking to newspaper and magazine reporters and appearing on radio and television programs.

see [IOM Report](#), page 5



MPP's Robert Kampia (right) discusses the IOM report on the national news program *America's Voice*.

*"We are very pleased with this report, which clearly shows there is scientific evidence that marijuana has bona fide therapeutic effects for some patients. Patients already using marijuana should be given the benefit of the doubt, and should not be arrested."*

— MPP's Chuck Thomas on the front page of *The Washington Post* (3/18/99)



Chuck Thomas debates former California Attorney General Dan Lungren (left) on the national FOX News Channel.

## IOM Report, from page 4

### Media Coverage

Nearly all of the coverage has been extremely positive. Representatives of MPP were featured on nine national TV programs, including NBC's *Today Show* with Katie Couric on March 18, Fox News Channel (debating former California Attorney General Dan Lungren) on March 16, CNN (where stories ran all day on March 17 and 18), *CBS This Morning* on March 17, and MSNBC's *Equal Time* with Ollie North (the evening of March 17).

MPP was also quoted on the front pages of *The Washington Post* and *The New York Times*, in articles in *USA Today*, *Rolling Stone* magazine, and the *Journal of the American Medical Association*, and in hundreds of other newspapers and magazines worldwide, reaching more than 50 million readers in the United States

alone. (The Associated Press and other wire services also quoted MPP.)

MPP representatives also did more than a dozen radio interviews and met with the editorial boards of *The Washington Post* and *The San Francisco Chronicle*, which resulted in favorable editorials. (Countless other newspapers also ran favorable editorials about the IOM report, with fewer than a half-dozen

negative editorials having come to MPP's attention.)

MPP's perspective (including interviews with the patients whom MPP represents) was also featured in dozens of other newspapers and TV programs.

(For a more detailed account of MPP's media coverage, please see "MPP Media Highlights" on page 12.)

### Future Plans

Of course, the ultimate goal of MPP's medicinal marijuana strategy remains the same—to change the federal and state laws that currently criminalize patients who use medicinal marijuana.

MPP plans on taking the IOM report to state and federal legislators to make the following case: "The science is in, and now the policy should reflect the science."

see [IOM Report](#), page 11



Chuck Thomas discusses the IOM report on CNN.

## IOM Report Excerpts

### What conditions can marijuana treat?

- ◆ "The accumulated data indicate a potential therapeutic value ... for symptoms such as pain relief, control of nausea and vomiting, and appetite stimulation. ... The data are weaker for muscle spasticity, but moderately promising." [ES.4, 4.42]

### Why not wait for more research before making marijuana legally available as a medicine?

- ◆ "Research funds are limited, and there is a daunting thicket of regulations to be negotiated at the federal (FDA and DEA) and state levels." [4.2]

### How dangerous is marijuana?

- ◆ "Except for the harms associated with smoking, the adverse effects of marijuana use are within the range of effects tolerated for other medications." [ES.6]
- ◆ "At this time, there is no conclusive evidence that marijuana causes cancer in humans, including cancers usually related to tobacco use." [3.42]
- ◆ "[E]pidemiological data indicate that—for the general population—marijuana use is not associated with increased mortality." [3.32]
- ◆ "[I]t does not appear to be a gateway drug to the extent that it is the most significant predictor or even the cause of heavy drug abuse; that is, care must be taken not to attribute cause to association." [3.24]

- ◆ "[A]lthough few marijuana users develop dependence, some do. But they appear to be less likely to do so than users of other drugs (including alcohol and nicotine), and marijuana dependence appears to be less severe than it is for other drugs." [3.21]
- ◆ "Earlier studies purporting to show structural changes in the brains of heavy marijuana users have not been replicated using more sophisticated techniques." [3.30]

### Does the medicinal marijuana debate send children "the wrong message" about marijuana?

- ◆ "In sum, there is no evidence that the medicinal marijuana debate has altered perceptions among adolescents about the risks of marijuana use." [3.28]

### Would changing the marijuana laws (medical or otherwise) cause an increase in use?

- ◆ "In sum, there is not strong evidence that decriminalization causes a significant increase in marijuana use." [3.26] (Decriminalization is defined as the removal of criminal penalties for all uses, even recreational.)

Page numbers in brackets refer to the IOM report's "pre-publication copy" that was released on March 17. For more detailed excerpts, please see MPP's new publication, "Questions About Medicinal Marijuana Answered by the Institute of Medicine's Report," which is available on-line at <http://www.mpp.org/science.html>.

# Congress Considers Marijuana-Related Legislation

As with the last Congress, a host of legislation has been introduced in the 1999-2000 Congress that would further expand the reach of the drug war. For example, bills are pending that would (1) require federally funded high schools to drug-test students, (2) prohibit all agencies of the federal government from conducting any "research involving the legalization of drugs," and (3) require pre-employment drug testing of all applicants for jobs with the federal government.

Almost without exception, however, the pending drug war-related bills have not been addressed thus far. (In general, the vast majority of bills introduced in Congress are not debated or voted on. Drug war legislation is no exception.)

Future issues of *Marijuana Policy Report* will review the most significant drug-related legislation—in particular, those bills that are passed out of committee and/or debated on the House and Senate floors.

This issue of *Marijuana Policy Report* reviews three of the most important positive pieces of legislation. For information on how to support these bills, please see the back page of this newsletter.

## House Likely to Vote on Forfeiture Reform Bill

On May 4, U.S. Rep. Henry Hyde (R-IL) introduced H.R. 1658 which—if enacted—would reduce the federal government's ability to take property from innocent people.

Property forfeiture laws—passed by Congress in the 1980s in the name of the "war on drugs"—have given law-enforcement officials far too much power to seize property that is alleged to have been involved in a marijuana crime.



MPP's Robert Kampia (right) with U.S. Rep. Henry Hyde, who is leading the effort to reform the federal property forfeiture laws.

H.R. 1658, which is expected to be brought up on the House floor sometime this spring, is supported by MPP and a host of organizations and members of Congress from across the political spectrum, including conservatives Rep. Hyde and Rep. Bob Barr (R-GA) and liberals Rep. John Conyers (D-MI) and Rep. Barney Frank (D-MA). As expected, this bill is being opposed by police groups and the U.S. Department of Justice.

H.R. 1658, which MPP strongly supports, would (1) force the government to prove that seized property is related to a crime; (2) protect innocent owners who were unaware that their property was being used to commit criminal activity; (3) require the government to act more quickly to resolve forfeiture disputes; and (4) provide court-appointed counsel to people who want to contest the government's forfeiture actions.

MPP has been working for years with the American Civil Liberties Union, the National Association of Criminal Defense Lawyers, and other organizations to build support for the previous incarnations of this legislation that have been introduced in Congress since 1993.

## Medicinal Marijuana Bill Introduced

On March 2, U.S. Rep. Barney Frank (D-MA) introduced a bill that would allow states to determine their own medicinal marijuana policies without federal interference. This bill is nearly identical to the medicinal marijuana bill that Rep. Frank introduced in the 1997-98 Congress.

The need for this legislation—H.R. 912—arises from the fact that

H.R. 912, U.S. Rep. Barney Frank's (D-MA) medicinal marijuana bill, had 11 co-sponsors as of May 25, 1999:

Tammy Baldwin (D-WI)  
Earl Blumenauer (D-OR)  
Tom Campbell (R-CA)  
William Clay (D-MO)  
John Conyers (D-MI)  
Peter A. DeFazio (D-OR)  
John Olver (D-MA)  
Nancy Pelosi (D-CA)  
Pete Stark (D-CA)  
Maxine Waters (D-CA)  
Lynn Woolsey (D-CA)

marijuana is classified as a Schedule I drug under federal law, which forbids doctors from prescribing it under any circumstances, regardless of state law. H.R. 912 would move marijuana into Schedule II and allow doctors in supportive states to prescribe it, just as doctors are currently allowed to prescribe other Schedule II drugs such as cocaine and morphine.

However, H.R. 912 is a states' rights bill: States that want to prohibit marijuana could continue to do so, and federal penalties would also still apply in those states. On the other hand, more compassionate states would be allowed to do whatever it takes to help patients obtain and use medicinal marijuana.

Although 34 states have enacted medicinal marijuana laws since 1978—with laws still on the books in 26 states—only Alaska, California, Oregon, and Washington state have effectively circumvented the federal prohibition of medicinal marijuana by allowing patients to grow and use marijuana under state law. These patients may still be prosecuted under federal law, however.



U.S. Rep. Barney Frank is the sponsor of the medicinal marijuana bill currently pending in the U.S. House of Representatives.

The medicinal marijuana laws in the other states have not been effective in providing patients with medical access to marijuana, because those laws actually put the state governments (as opposed to individual patients) in violation of federal law. While the federal government does not have the resources to send DEA agents into California to arrest tens of thousands of patients, it does have the ability to threaten state governments to obey federal law.

Under the law that would be created by H.R. 912, a state's choices include distributing marijuana through a state health agency, allowing licensed pharmacies to

see [Congress](#), page 22

# “Know Your Customer” Banking Rule Defeated—For Now

A federal regulation that would violate the privacy of bank customers in the name of the drug war was withdrawn by the government on March 8. Deluged by a wave of public protest, the agencies behind the “Know Your Customer” (KYC) rule abandoned their push for the regulation—at least for the time being.

The effort to thwart KYC brought together various opponents of the rule, including MPP, drug law-reform groups, the Libertarian Party, the American Civil Liberties Union, banking industry organizations, and ordinary U.S. citizens with bank accounts. MPP and a host of other organizations distributed e-mail alerts asking citizens across the country to e-mail their opposition to this rule to the federal government.

Designed to help the government catch money-laundering drug traffickers, the rule’s outrageous language would have required banks and financial institutions to set up customer profiles and notify the government if a customer “deviates” from his or her profile. It would have required banks to determine a customer’s “source of funds,” determine the customer’s “normal and expected transactions,” identify transactions considered “inconsistent with normal and expected transactions,” and report any “suspicious activity” to federal authorities.

Money laundering is a practice often used to hide illegal profits of large sums. Common methods include the use of wire transfers and bank drafts, as well as breaking down transactions into smaller amounts that do not have to be reported by financial institutions. Already, under provisions of the Bank Secrecy Act of 1970, banks are required to monitor some customers and report transactions of \$10,000 or more. However, KYC was proposed because government officials do not consider the Bank Secrecy Act to be sufficient in helping to fight the drug war.

The outcry during KYC’s public comment period was significant. The Federal Deposit Insurance Corporation (FDIC), the agency soliciting public comment as required by law, received more than 250,000 comments—about 205,000 of which arrived via e-mail. Of the com-

ments submitted, only about 50 favored KYC. FDIC Chair Donna Tanoue said the decision to withdraw KYC resulted largely from the influx of e-mail. “When consumers can get excited about an esoteric bank regulation, we have to pay attention,” she said.

The Libertarian Party, which set up an Internet site to provide information and help generate comments against KYC, was responsible for a large proportion of the e-mail messages sent to the FDIC. Tanoue said, “It’s important to note that a number of these e-mails were customized. They came from the heart.”

On March 5, shortly before the government’s decision on KYC was due, the U.S. Senate voted 88–0 in favor of a non-binding resolution that supported dropping the proposed rule.

Additionally, on February 3, U.S. Rep. Ron Paul (R–TX) introduced three bills (H.R. 516, H.R. 517, and H.R. 518) designed to block KYC and to repeal other government policies that intrude on private bank records. Calling KYC “Big Brother banking,” Paul said the proposed rule “would violate financial privacy and impose a huge unfunded mandate on the financial sector.”

## Concern Continues

When the KYC proposal was withdrawn, the FDIC issued a statement saying that the agency would “not diminish” its “long-standing support for the anti-money laundering provisions” already enacted in federal law, and the agency will seek an “appropriate balance” between privacy and the monitoring of bank accounts.

In addition to the FDIC, the agencies behind KYC include the Office of the Comptroller of the Currency, the Office of Thrift Supervision, and the Federal Reserve System’s Board of Governors. Federal Reserve official Richard Small was quoted as saying that KYC is not dead, it just needs to be “repackaged.”

MPP will continue to monitor and oppose this intrusive government proposal. To keep an eye on the government’s attempts to spy on your bank account, please visit <http://www.DefendYourPrivacy.com>.

The following is a fairly complete listing of the drug-related hearings held in Congress from January through May 4. Not included are appropriations committee and subcommittee hearings relating to the funding of the DEA, the National Institute on Drug Abuse, and other drug-related federal agencies. Transcripts of some of the following hearings will be printed by the federal government.

### SENATE ARMED SERVICES SUBCOMMITTEE ON EMERGING THREATS AND CAPABILITIES

- April 27: Department of Defense’s Role in U.S. Drug Control Policy

### SENATE FOREIGN RELATIONS SUBCOMMITTEE ON WESTERN HEMISPHERE, PEACE CORPS, NARCOTICS AND TERRORISM

- March 24: Columbian Drug Threat

### SENATE JUDICIARY COMMITTEE

- March 9: Interstate Alcohol Sales and the 21st Amendment

### SENATE JUDICIARY SUBCOMMITTEE ON IMMIGRATION

- April 27: The Need for Additional Border Patrol at the Northern and Southern Borders

### HOUSE BANKING AND FINANCIAL SERVICES COMMITTEE

- April 15: Money Laundering Trends

### HOUSE COMMERCE SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS

- March 11: “Date Rape” Drugs

### HOUSE GOVERNMENT REFORM COMMITTEE

- March 18: Drug Abuse Treatment and Prevention Efforts
- March 24: Anti-Drug Efforts in Mexico

### HOUSE GOVERNMENT REFORM SUBCOMMITTEE ON CRIMINAL JUSTICE, DRUG POLICY AND HUMAN RESOURCES

- February 24: Crime and Drug Prevention Efforts in New York City
- February 25: Oversight of National Drug Control Strategy
- March 4: Oversight of U.S.-Mexico Counternarcotics Efforts
- March 18: Oversight of Agency’s Efforts to Prevent and Treat Drug Abuse
- March 24: Oversight of Mexican Counternarcotics Efforts: Are We Getting Full Cooperation?
- May 4: Panama and Counter-Drug Capabilities

### HOUSE INTERNATIONAL RELATIONS COMMITTEE

- April 14: Mark-up of Corrections to Western Hemisphere Drug Elimination Act

### HOUSE INTERNATIONAL RELATIONS SUBCOMMITTEE ON WESTERN HEMISPHERE

- March 3: Anti-Drug Efforts in the Western Hemisphere and Implementation of the Western Hemisphere Drug Elimination Act

### HOUSE JUDICIARY SUBCOMMITTEE ON IMMIGRATION AND CLAIMS

- April 14: Law Enforcement Problems on the Border Between the United States and Canada: Drug Smuggling, Illegal Immigration and Terrorism

# Thirteen States Debate Medicinal Marijuana Legislation

**F**avorable medicinal marijuana legislation has been introduced in 12 states so far during the 1999-2000 state legislative sessions. In addition, three states—Alaska, Oregon, and Washington—have considered anti-medicinal marijuana legislation this year. As of the printing of this newsletter in late May, none of these bills had been enacted into law.

## Hawaii Nearly Passes Medicinal Marijuana Bill

The effort to enact a medicinal marijuana law in Hawaii received a big boost in December when Governor Ben Cayetano promised to introduce such legislation at the beginning of this year's legislative session. This is the first time in memory that a sitting governor of any state actually introduced his or her own medicinal marijuana bill.

In mid-December, MPP's Chuck Thomas and representatives from the Drug Policy Forum of Hawaii (DPFH) met with the governor to discuss the elements of such legislation. After a series of subsequent meetings and drafting sessions, the governor's bill was introduced on January 26 in the Senate as S.B. 1038 and on January 27 in the House of Representatives as H.B. 1157.

Additionally, MPP's model bill—which is less restrictive than the governor's bills—was introduced in the Senate as S.B. 862 on January 22 and in the House as H.B. 1341 on January 28.

In addition to meeting with the governor and helping with the drafting of legislation, MPP also regularly assisted Hawaii activists with legislative strategy, sent legislative updates to its membership in Hawaii, financed an effort to recruit local patients to assist with the lobbying, and helped DPFH raise money to hire a full-



Hawaii Governor Ben Cayetano (left) and MPP's Chuck Thomas discuss medicinal marijuana legislation on KHON-TV in Honolulu.

time staff member to spearhead the campaign.

After holding a joint hearing on February 16, the House Health Committee and House Public Safety and Military Affairs Committee passed a bill that combined the best elements of the two House bills and forwarded it (in the form of H.B. 1157) to the House Judiciary

and Hawaiian Affairs Committee. After heavy lobbying by law enforcement, the committee declined to hold a hearing on the measure; it will remain in committee until January 2000 when the legislature reconvenes.

On the Senate side, the Health and Human Services Committee held a hearing on February 17 and passed S.B. 862 on February 19. This bill is pending in the Senate Judiciary Committee, where it is likely to pass in early 2000.

(Yet another medicinal marijuana bill—H.B. 189—was introduced on January 22 in the House; it would allow certain governmental agencies of Hawaii to sell confiscated marijuana to any state where medicinal marijuana is legal. This bill did not receive a hearing.)

In an effort to build further momentum on the medicinal marijuana issue, a number of non-binding resolutions were also introduced in the Senate on March 17: S.C.R. 133, S.C.R. 183, and S.C.R. 220 variously requested the state Legislative Reference Bureau to study the issue further and/or urged the federal government to change federal law.

On March 31, the Senate Judiciary Committee and the Senate Ways and [see States Debate Med-MJ, page 17](#)

## Decision Awaited on D.C. Medicinal Marijuana Vote

Medicinal marijuana advocates across the nation continue to await the results of a vote taken last November in Washington, D.C.

Last fall, MPP joined a coalition of AIDS activists to campaign for Initiative 59, a medicinal marijuana initiative similar to the initiatives approved by voters in six states on November 3. Exit polls showed that Initiative 59 passed with 69% of the vote. The official results have not been released, however, because of a federal law enacted on October 21 that blocked the results of the election.

Just 13 days before Election Day, Congress slapped democracy in the face by adding an amendment to the law allocating the year's federal funds for the District of Columbia and a host of federal agencies. The amendment, sponsored by U.S. Rep. Bob Barr (R-GA), prohibits the District government from spending any money to count or certify the results of the initiative vote.

MPP promptly appealed to the American Civil Liberties Union (ACLU) for help, and on October 30 a lawsuit was filed in federal court that would overturn Congress' initiative-blocking law. The ACLU originally planned to sue the District government, but D.C. officials decided to join the ACLU in its suit against Congress! Then, the Clinton administration's U.S.

Department of Justice joined the suit in support of Congress.

On December 18, U.S. District Judge Richard Roberts heard the case, with the ACLU and the D.C. government arguing that Barr's amendment violates the First Amendment right of D.C. residents to express their political views through an election. The judge has announced that he will issue a written opinion, but he has not yet done so.

As with other areas of federal spending, the D.C. spending bill must be approved by Congress for each fiscal year beginning on October 1. Because Barr's amendment will expire on September 30, the D.C. government will be allowed to count and announce the results of Initiative 59 this October unless the amendment's language is once again included in the D.C. spending bill or other legislation.

# Extreme Anti-Marijuana Legislation Runs Rampant in the States

Hundreds of anti-marijuana bills have been introduced in state legislatures this year—while some of these bills specifically single out marijuana, most seek to increase the penalties for all drug offenses, thereby netting marijuana offenders in the process.

In addition to the anti-medicinal marijuana bills that are described on page 8, the following is a sampling of the key harmful marijuana-related legislation that has been introduced or passed in the 50 state legislatures thus far in 1999.



## Virginia Increases Penalties for Marijuana

On March 28—after five years of battling between Virginia citizen activists and “tough on drugs” legislators and police—legislation was signed into law that adds the weight of seeds and stems to the legal definition of marijuana for the purpose of sentencing marijuana offenders. H.B. 1819 had passed the Virginia Senate on February 19 by a 39–0 vote and the Virginia House of Delegates on February 25 by a 90–8 vote.

By making it more likely that marijuana offenders will have a quantity of marijuana that will place them in a higher penalty range, the passage of H.B. 1819 will have the practical effect of creating an estimated 1,000 new felonies each year from what otherwise would have been misdemeanors.



## Iowa Increases Marijuana Penalties

On April 26, a bill was signed into law in Iowa that increased the penalty for distributing between a half-ounce and one ounce of marijuana. Under prior law, selling or delivering less than one ounce of marijuana was considered a misdemeanor, while selling or delivering more than one ounce was considered a felony punishable by up to five years in prison. Now, under the new law, only those who deliver less than a half-ounce of marijuana “which was not offered for sale” can escape the felony conviction. In other words, the sale of any amount of marijuana is now a felony in Iowa.

H.R. 705 had passed the Iowa House of Representatives on March 25 by a

90–5 vote and the Iowa Senate on April 15 by a 34–11 vote.



## Nebraska Considers “Recriminalization”

On January 7 and January 15, bills were introduced in the one-house legislature of Nebraska (L.B. 130 and L.B. 516, respectively) that would repeal Nebraska’s marijuana “decriminalization” policy.

Under current Nebraska law, people who are apprehended with less than one ounce of marijuana face a \$100 fine and no jail time. L.B. 130 and L.B. 516 would impose jail time for marijuana possession offenses.

The Judiciary Committee held a hearing on these bills on February 17, but no action has been taken. These bills are likely to be revisited when the legislature reconvenes in January 2000.



## Michigan Revisits Penalty Increases

On February 24, a bill was introduced in the Michigan Senate that would increase the penalties for marijuana possession in Ann Arbor, East Lansing, and Flint to equal the penalties for marijuana possession in the rest of the state. While personal possession of marijuana in these three locales carries fines of \$25, \$25, and \$50 respectively—with no jail time—state law calls for a maximum of one year in jail and up to \$2,000 in fines.

The Michigan Senate passed S.B. 380 by a 36–1 vote on March 25, and the measure is now pending in the House of Representatives. This measure is similar to an amendment that had been attached to Michigan’s budget bill last year but which was removed before the bill became law.



## Good and Bad Bills Pending in California

In addition to the two medicinal marijuana bills that are pending in the California legislature—please see page 18—three other bills are of interest:

- S.B. 273, which MPP opposes, would increase the fine for possessing less than one ounce of marijuana from



## New Hampshire Votes Down “Decriminalization”

On April 14, the New Hampshire House of Representatives voted 269–92 against H.B. 87, a bill that would have “decriminalized” the possession of one ounce or less of marijuana. Under current law, possessing any amount of marijuana is a misdemeanor punishable by jail. If it had been enacted, H.B. 87 would have reduced the penalty to a “violation” punishable by a fine, similar to a traffic ticket.

The House Criminal Justice and Public Safety Committee heard the bill on March 10 and then later voted it down by an 11–4 vote. (In New Hampshire and other states, legislation may pass to the floor even if the committee rejects it.) This bill is now dead.



## Nevada Considers “Decriminalization”

On March 15, a bill was introduced in the Nevada Assembly that would “decriminalize” the possession of one ounce or less of marijuana. Under current law, possessing any amount of marijuana in Nevada is a felony, while A.B. 577 would have changed this classification to a misdemeanor, punishable by up to a \$500 fine—and no jail. The Assembly Judiciary Committee approved the bill on April 9 by an 11–3 margin, and it is now pending in the Assembly Ways and Means Committee.

\$100 to \$1,000. (California is one of the 10 states that have “decriminalized” marijuana, which means that it does not impose jail time for small-time marijuana offenses.)

- S.B. 79, which MPP supports, would restrict “three strikes and you’re out” sentences to cases in which the third conviction is for a serious or violent felony, so that marijuana offenses would no longer count as third strikes. Under current California law, people who are convicted of three
- see [Anti-Marijuana Legislation](#), page 23

# Recent Research and Reports

## ■ Medical Journal Article Decries Drug War's Effects —

Some of the detrimental effects of the drug war were highlighted in the *American Journal of Public Health's* January/February issue. The article, based on extensive research conducted by Dr. Ernest Drucker of New York's Montefiore Medical Center, found the enforcement of America's anti-drug laws is "at least as dangerous" to health as the use of illicit substances.

Arrest, incarceration, and the confiscation of personal belongings have "enormous negative consequences for those caught up in the criminal justice system," according to Dr. Drucker's article. He added that imprisonment and its aftermath are "responsible for worsening many of the social and public health problems that we normally attribute to drug use *per se*."

Dr. Drucker pointed out that in 1998, the federal government spent \$10.7 billion of its \$16 billion anti-drug budget on enforcement, interdiction, and other punitive measures, rather than prevention and treatment efforts. Although Drug Czar Barry McCaffrey and other Clinton administration officials say their emphasis is on prevention and treatment, federal spending for enforcement has grown tenfold since 1981, while treatment spending has grown at half that rate.

Dr. Drucker concluded, "It is time we ... abandon our unhappy history of prohibition for more human and pragmatic policies that protect public health and support our democratic values."

MPP plans to use this journal article to bolster its arguments that marijuana prohibition causes more harm than good.

■ **Arizona's Proposition 200 Shown to Save Money** —A key provision of Arizona's Proposition 200 is showing signs of success, according to a report released by the Arizona Supreme Court on April 20, which showed that sending nonviolent drug offenders into treatment instead of prison saves the state substantial money.

Proposition 200 first appeared on the Arizona ballot in November 1996, when voters approved it by a 65–35 margin. By December 1996, the state legislature had passed three measures rolling back key provisions of the initiative. Proponents of Proposition 200 then gathered the signatures needed to place the nonviolent drug offender provision on the ballot once again and, in November 1998, voters reaffirmed their support for this policy by a 52–48 margin.

(The legislature also gutted the provision in Proposition 200 that allowed doctors to prescribe marijuana and other illegal drugs. In November 1998, Arizona voters reaffirmed their support for this provision, too, by a 57–43 margin.)

Under Proposition 200, first- and second-time nonviolent drug offenders are required to go into treatment rather than jail. Funding for the treatment programs' first year was derived from two sources: \$3.1 million came from a tax on alcohol sales, and \$3.2 million had been previously earmarked for that purpose by the state legislature.

The Arizona Supreme Court's extensive review found that in its first year, the new approach saved taxpayers \$2.5 million. The savings was calculated by comparing the cost of keeping a prisoner in jail (\$50 per day) with the cost of treatment in combination with probation (\$16 per day).

The Supreme Court found that of 2,622 people diverted from jail into treatment and probation, 77.5% have subsequently tested drug-free and 75% paid the required co-payments for their treatment. The report also said that the new approach to drug offenders "over time will reveal not only fiscal and crime reduction benefits, but an increase in quality of life conditions of this population, such as productivity and wages, and decreased health system costs."

## Public Opinion Polls

■ **Majority Support Medicinal Marijuana** —A survey conducted in March by the Gallup Poll Service found that 73% of adult respondents would vote for "making marijuana legally available for doctors to prescribe in order to reduce pain and suffering." Twenty-five percent said they would vote against such a measure, and 2% offered no opinion. When asked about voting "for the legalization of marijuana," 29% said they would, while 69% said they would not and 2% offered no opinion.

Gallup polled 1,018 adults on March 19-21; the margin of error is plus or minus 3%.

■ **New Yorkers Support Drug Law Reform** —Poll results appearing in April's *New York Law Journal* showed that 69% of registered New York voters would prefer that judges have discretion over sentencing in drug cases instead of having sentences "set strictly by state law." Mandatory sentencing laws were favored by 26%, and 5% were undecided. In addition, 85% of respondents said those convicted once on drug charges should be required "to undergo drug treatment," while 10% advocated jail for first-time convictions and 5% were undecided.

The poll of 909 registered New York state voters was conducted on March 17-21 by the Quinnipiac College Polling Institute; the margin of error is plus or minus 3.3%.

■ **Drug War Seen As Unwinnable** —In March, the conservative Family Research Council (FRC) released the results of an annual survey on attitudes about drug policy issues. The poll found that 52% of respondents believe the drug war is unwinnable "regardless of what the president and Congress do," while 44% believe the drug war could be won "if the president and Congress were serious" about it.

In terms of anti-drug policies, 10% backed law-enforcement methods, 44% supported prevention and treatment efforts, and 34% favored interdiction. When asked about the treatment of pain, 56% said doctors "should be able to legally prescribe as much pain medication as is necessary even if that runs the risk of addiction," while 35% disagreed and 6% said it depends on the situation.

FRC has been actively fighting MPP's medicinal marijuana efforts for the past two years. To these ends, they also asked a series of heavily slanted medicinal marijuana questions in their survey—and the results were still largely favorable to medicinal marijuana law reform. So they only told the news media about the very few areas where the public has some concerns about medicinal marijuana. Fortunately, most media outlets are aware of FRC's underhanded tactics and ignored the results.

see [Research and Reports](#), page 11

The survey of 1,000 registered voters nationwide was conducted February 8-10 by The Polling Company.

■ **Minnesotans Support Medicinal Marijuana** —A majority of Minnesotans support legal access to medicinal marijuana, according to a new poll. The statewide survey found 65% of respondents in agreement with the statement that “when a

patient has a debilitating illness and a doctor recommends marijuana as a medicine for that patient,” the doctor and the patient should be “protected from civil and criminal penalties.” Twenty percent disagreed with the statement, and 15% said they were unsure.

The poll was conducted on March 10-12 by Mason-Dixon Research; the margin of error is plus or minus 3.5%. **END**

## IOM Report, from page 5

MPP is taking a four-pronged approach:

1. MPP is working with patients, doctors, and AIDS groups to persuade the Clinton administration to provide immediate legal protection to seriously ill people who have an urgent medical need for marijuana. (Indeed, a month before the IOM report was released, several major AIDS organizations sent Drug Czar Barry McCaffrey a letter calling for medicinal marijuana policy changes.)
2. MPP will use the report to persuade state legislators to pass legislation that removes criminal penalties for medicinal marijuana use and cultivation.
3. MPP will use the report to change the opinions of members of Congress who



Chuck Thomas appears on the national MSNBC news program *Newsfront*.

4. MPP will make sure that the U.S. Department of Health and Human Services changes its policies to make it

easier for scientists to obtain marijuana for research purposes. This should ultimately lead to FDA approval of marijuana as a prescription medicine.

For more details on what MPP did to influence the IOM report, please see page 2 of the Spring 1998 issue of *Marijuana Policy Report* or <http://www.mpp.org/mpp-iom.html>. **END**



Chuck Thomas and pain-patient Mike Krawitz (right) discuss the IOM report on the national FOX News Channel.

## Prohibitionists Still Fight Medicinal Marijuana

Despite IOM's favorable findings, MPP's opponents refuse to give up. The nation's leading prohibitionists at first pretended to like the report and misrepresented its findings, but within a few days they criticized the report and affirmed their support for the existing laws. For example:

- The White House Office of National Drug Control Policy (ONDCP) endorsed the continuing arrest of medicinal marijuana users, according to the April 16 issue of *Psychiatric News*, the newspaper of the American Psychiatric Association. ONDCP Deputy Director Donald Vereen told the newspaper, “It doesn't matter what the excuse is ... you are going to get arrested just as fast.”
- The report is a “thinly veiled effort” to promote marijuana legalization, according to U.S. Rep. Bob Barr (R-GA) in an Associated Press article that appeared in the *Atlanta Journal* on March 19.
- According to a March 22 *USA Today* article, U.S. Rep. John Mica (R-FL) called the Institute of Medicine report “the biggest waste of money in the entire war on drugs.”
- According to a March 18 UPI article, U.S. Rep. Bill McCollum (R-FL) said the report may encourage people to smoke marijuana for non-medical uses.
- “Officials with the Department of Health and Human Services almost immediately responded by saying they

would not dispense marijuana to individual patients until more clinical research showed it was safe,” according to a Knight-Ridder article that ran in the *Nashville Tennessean* on March 21.

- According to the “For the Record” feature in *The Washington Post* on March 19, U.S. Attorney General Janet Reno was grilled at a March 18 news conference by a reporter who asked if medicinal marijuana users should continue to be arrested. Though Reno was asked essentially the same question three different times, she never gave a straight answer.
- A March 18 article in the *Boston Globe* quotes Partnership for a Drug-Free America Executive Vice President Steve Dnistrian saying that “the report's findings could send the wrong message about marijuana to children.”
- Continuing to promote the same unfounded assertion, Phoenix House President Mitchell Rosenthal said that IOM's recommendations are “going to make marijuana use by adolescents a more likely event,” in a March 19 *New York Times* article.
- Long-time international anti-marijuana activist Gabriel Nahas, M.D., issued a news release on March 25 criticizing the IOM report for numerous “serious omissions.” Nahas then argued that “the IOM principal investigators were very attentive to the opinions of a Mr. Chuck Thomas who heads the Marijuana Policy Project.”

# MPP Media Highlights

Public education about the marijuana issue is essential to bringing about more compassionate and practical marijuana policies. The most efficient way to educate the public is through the mass media. In the past few months, MPP has had even more success than usual. Examples follow.

## PRINT MEDIA

○ MPP scored its biggest media hit ever when the Institute of Medicine (IOM) released its landmark report on medicinal marijuana. (See page 1.) MPP's perspective on the report reached at least 50 million people. Almost all of the articles were very favorable, with headlines typically making proclamations such as "Study Finds Marijuana is Medicine." Representatives of MPP were often quoted before government officials or even the IOM spokespersons themselves. Highlights include:

*The New York Times* quoted MPP's Chuck Thomas on the front page (3/18) saying, "This report has proved [Drug Czar] McCaffrey wrong." The article was extremely positive, also quoting some of MPP's patients. It was picked up by dozens of other newspapers nationwide, including *The Houston Chronicle*, *Plain Dealer* in Cleveland, *Denver Post*, *Sun-Sentinel* in Fort Lauderdale, *Times-Picayune* in New Orleans, *Courier-Journal* in Louisville, Kentucky, *Daily News* in Los Angeles, *Atlanta Journal*, and *Telegram & Gazette* in Worcester, Massachusetts.

The next day, a *New York Times* follow-up article (3/19) examined the government's medicinal-marijuana distribution program (which has been closed since 1992 to all but eight people who were already enrolled at the time). Thomas was quoted saying, "Why allow eight patients to have legal access to marijuana but criminalize thousands of other patients in very similar circumstances who have the same conditions, virtually identical medical histories?" The article was picked up by about a dozen other newspapers nationwide, including *Dallas Morning News* (3/21), *Atlanta Journal-Constitution* (3/21), *Detroit Free Press* (4/1), *Orange County Register* in California (3/21), and *Commercial Appeal* in Memphis (3/22).

*The Washington Post* quoted Chuck Thomas on a front-page article (3/18) about the IOM report, saying, "We are very pleased with this report, which clearly shows there is scientific evidence that marijuana has bona fide therapeutic effects for some patients. Patients already using marijuana should be given the benefit of the doubt, and should not be arrested." The article was picked up by several newspapers worldwide, including *St. Petersburg Times* and *Tampa Tribune* in Florida, *International Herald Tribune* in Paris, and *Anchorage Daily News* in Alaska.

Two weeks later, *The Washington Post* Health Section did a feature article about the IOM report, mentioning MPP and quoting one of MPP's patients (3/30).

A *USA Today* front-page article (3/18) declared, "Medical marijuana nears mainstream." Several of MPP's patients were interviewed and appeared in photos. Chuck Thomas was quoted saying that "the study has recommended that we find a way to provide smoked marijuana to seriously ill patients. And we agree." A smaller synopsis, also quoting MPP, appeared in the European version of *USA Today*, published in Zurich, Switzerland. A *USA Today* follow-up story (3/22) focused on the IOM report's refutation of the "gateway" theory that marijuana causes people to use hard drugs. Thomas was paraphrased blaming prohibition for the rare instances in which marijuana users try other drugs: "If there

*"Here is the science, it was commissioned by the bad guys, and it shows that marijuana is good medicine."*

— MPP's Robert Kampia in *The Los Angeles Times* (March 18)

is anything that drives teen-agers to hard drugs, it is the likelihood that they'll have to buy it from drug dealers."

*The Los Angeles Times* (3/18) quoted MPP's Robert Kampia discussing the report: "Here is the science, it was commissioned by the bad guys, and it shows that marijuana is good medicine."

In an *Atlanta Journal* article (3/19), prohibitionist U.S. Rep. Bob Barr (R-GA) criticized the IOM report, arguing that "the panel was heavily influenced by the Marijuana Policy Project."

A *Philadelphia Inquirer* article (3/18) about the report mentioned MPP and quoted one of MPP's patients. The newspaper also ran an article a few days earlier (3/15) discussing the medicinal marijuana issue and noting that the IOM report was forthcoming. That article quoted Chuck Thomas saying, "The tens of thousands of patients who are right now using marijuana are criminals. This may be a war, but we have got to remove the sick and wounded from the battlefield." The *Orange County Register* also ran the article.

A *Rolling Stone* article (5/13) was extremely favorable, saying that the IOM report "not only embarrasses drug czar Barry McCaffrey but also may help to undermine the \$17 billion War on Drugs." MPP is credited for bringing the patients to the IOM hearings, and Chuck Thomas is quoted: "It took it out of the realm of just scientific data to show the human dimension."

The magazine *New Scientist* (3/27) quoted Chuck Thomas saying, "All of the major myths that the government has been espousing for the past few decades to justify putting patients in jail have been shot down by this report."

An Associated Press (AP) article (3/18) quoted Chuck Thomas saying that the IOM report "shoots down" claims that marijuana has no medical benefits. It appeared in dozens of newspapers nationwide, including *Investor's Business Daily* in Los Angeles, *Times Herald Record* in Middletown, New York, and *Honolulu Star-Bulletin*. It also ran internationally, such as in *The Examiner* in Ireland.

A Hearst wire service article (3/18) quoted Chuck Thomas saying that the IOM report "shows that marijuana is a relatively safe and effective medicine for many patients." It appeared in several newspapers nationwide, including *Columbus Dispatch*, *St. Paul Pioneer Press* in Minnesota, and *Times Union* in Albany.

A Knight-Ridder wire service article (3/18) mentioned MPP and quoted one of MPP's patients. It appeared in several newspapers nationwide, though only three included the MPP mention: *Tennessean* in Nashville, *Akron Beacon Journal* in Ohio, and *Journal Times* in Racine, Wisconsin.

A Gannett News Service article (3/18) quoted Chuck Thomas saying, "There is now enough evidence that patients should ... not be arrested." It appeared in several newspapers nationwide. MPP was also quoted by Scripps Howard News Service (3/18) and Medical Tribune News Service (3/27).

The *Village Voice* in New York (3/30) detailed MPP's efforts to influence the media coverage of the IOM report in its "Press Clips" column. The author wrote that "the coverage grew ever more glowing in the hands of a clever spinmeister, Chuck Thomas, the director of communications for the Washington, D.C.-based Marijuana Policy Project."



MPP's Chuck Thomas discusses the IOM report on *CBS This Morning*.



MPP's Robert Kampia medicinal marijuana Marcia Clark on CNBC news program

*"[T]he study has recommended that we find a way to provide smoked marijuana to seriously ill patients. And we agree."*

— MPP's Chuck Thomas in *USA Today* (March 18)

MPP was also quoted or mentioned in articles about the IOM report in the *Journal of the American Medical Association* (4/28), *The Scientist* journal (5/10), *Christian Science Monitor* (3/22), *Boston Phoenix* (3/25), *Hartford Courant* in Connecticut (3/18), a bad editorial in the *Telegram* in Clarksburg, West Virginia (4/14), a good editorial in the *Columbus Dispatch* in Ohio (4/2), *Business Line* (*The Hindu*) (3/21), *South China Morning Post* (3/19), and countless smaller publications worldwide.

MPP's Robert Kampia had a letter-to-the-editor about the report published in *The Washington Post* (5/8) in response to a prohibitionist's op-ed several days earlier which distorted the IOM report's findings. In addition, several MPP members got MPP's sample letter-to-the-editor (which MPP distributed via e-mail) printed in their local newspapers in March and April.

MPP also gave interviews and patient referrals to several publications that wrote IOM articles based on MPP's information but did not specifically mention or quote MPP. Such publications include *Newsweek* (3/29), *U.S. News & World Report* (3/29), *Healthweek* (3/29), *Virginia Pilot* (3/19), and the American Psychiatric Association's newspaper *Psychiatric News* (4/16), which quoted a deputy director of the White House Office of National Drug Control Policy actually admitting that he believes that medicinal marijuana users should be arrested!

MPP also convinced a reporter to grill U.S. Attorney General Janet Reno at a March 18 news conference about whether or not she thinks that patients should be arrested. The exchange, which appeared in *The Washington Post* (3/19), shows Reno trying to avoid the question.

In addition to all of the good articles, shortly after the IOM report was released several dozen publications wrote editorials supporting legal medical access to marijuana. Only about six newspapers that editorialized on the topic took an unfavorable position. MPP met with the editorial boards of *The Washington Post* and *San Francisco Chronicle*, and provided useful information to the *USA Today*. All three boards subsequently wrote favorable editorials.

When the annual government-funded teen drug use survey was released last December, Chuck Thomas was quoted in an AP article (12/19) criticizing the government's drug war for failing to prevent teens from using marijuana.

The article, with Thomas' quote, appeared in more than 100 newspapers nationwide, including the *Houston Chronicle*, *Star Tribune* in Minneapolis, *San Diego Union-Tribune*, *Arizona Republic* in Phoenix, *Denver Post*, *St. Louis Post-Dispatch*, *Milwaukee Journal Sentinel*, *Sun-Sentinel* in Fort Lauderdale, *Indianapolis Star*, *Daily Oklahoman* in Oklahoma City, *Richmond Times-Dispatch*, *Daily News* in Los Angeles, *Democrat and Chronicle* in Rochester, New York, *Seattle Post-Intelligencer*, *Post and Courier* in Charleston, South Carolina, and *Lincoln Journal-Star* in Nebraska.

The most recent *Marijuana Policy Report* noted that an AP article (11/22) which quoted MPP discussing marijuana arrest data was picked up in "several" publications nationwide. Since then, MPP discovered that the article actually appeared in nearly 100 publications, including many big-city newspapers.

Chuck Thomas was quoted in a Hawaii AP article (12/12) discussing the governor's promise to introduce medicinal marijuana legislation. "No way will it protect anyone other than seriously ill patients,"

**"The tens of thousands of patients who are right now using marijuana are criminals. This may be a war, but we have got to remove the sick and wounded from the battlefield."**  
 — MPP's Chuck Thomas in *The Philadelphia Inquirer* (March 18)



Kampia discusses the IOM report with the nationwide program Rivera Live.



MPP's Chuck Thomas (center) answers a question from Oliver North on his national MSNBC news program *Equal Time*.

**"McCaffrey is a liar. McCaffrey says, 'Oh, our new strategy is prevention.' But it isn't. It's the same old policy."**  
 — MPP's Chuck Thomas in *Newsday* (March 18)

Thomas said. "The bill we designed is loophole-free." The article appeared in several of Hawaii's largest publications.

Chuck Thomas was the main source for a *Newsday* column (3/25) about Drug Czar Barry McCaffrey's dishonesty. Thomas was quoted saying, "McCaffrey is a liar. McCaffrey says, 'Oh, our new strategy is prevention.' But it isn't. It's the same old policy." The column was picked up by at least a dozen publications at the end of March, including the *Sunday Star-Ledger* in Newark, New Jersey, *Plain Dealer* in Cleveland, *Maine Sunday Telegram* in Portland, and *Savannah Morning News* in Georgia.

The Penn State *Daily Collegian* featured a front-page profile (3/18) of Chuck Thomas and Robert Kampia, both Penn State alumni.

Chuck Thomas had a letter published in the *Playboy* "Forum" section (February) criticizing the federal government's medicinal marijuana research policies.

Kampia was quoted in a *USA Today* feature article (3/11) about several states' new medicinal marijuana laws, and he was mentioned in a *Philadelphia Inquirer* article (12/1) about a Philadelphia Bar Association medicinal marijuana panel on which he participated.

MPP was mentioned in a *Rolling Stone* article (12/24) on the medicinal marijuana ballot initiatives that passed in November 1998.

MPP was also mentioned or quoted in the *Village Voice* (12/15), *New York Press* (12/16), *Street News* (January), *Daily Aztec* in San Diego (2/1), *The Lancet* (3/13), *Utne Reader* (March/April), *POZ* (April), and *Whole Earth* (April-June).

**RADIO AND TELEVISION**

The March 17 release of the IOM report prompted a record number of national television appearances by MPP staffers:

Robert Kampia debated the issue on NBC's *Today Show* with Katie Couric (3/18), on *America's Voice* (3/22), and on MSNBC's *Rivera Live* (3/25) with former California Attorney General Dan Lungren.

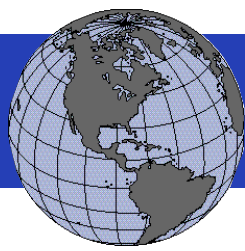
Chuck Thomas and a couple of MPP's patients appeared on CNN throughout the day on March 17 and 18. Thomas also appeared on Fox News Channel debating Dan Lungren (3/16) and on CBS *This Morning* (3/17), MSNBC's *Newsfront* (3/17), Fox News Channel (3/17), and MSNBC's *Equal Time* with Oliver North (3/17).

The patients who MPP brought to the news conference appeared on numerous other television programs on CNN, NBC, and Conus—a syndicated TV service that airs on hundreds of local television stations nationwide.

Kampia and Thomas also did dozens of radio interviews after the IOM report was released. For example, Thomas appeared on the nationally syndicated show *The Hill Reporter* (3/30) debating ultra-prohibitionist Joseph Califano—the former U.S. Secretary of Health, Education and Welfare who now runs the powerful drug war advocacy group Center on Addiction and Substance Abuse.

Chuck Thomas debated long-time prohibition advocate Sue Rusche on Jack Shapiro's nationally syndicated "Medi-Politics" radio show (12/13).

On December 10, Chuck Thomas and Hawaii Governor Ben Cayetano discussed medicinal marijuana legislation on KHON-TV in Honolulu.



## Canada to Study Medicinal Marijuana

Canadian Health  
Minister Allan Rock  
announced on March 3

that he has authorized the development of clinical trials to study marijuana as a treatment for AIDS, cancer, multiple sclerosis, and glaucoma. Saying that “there’s all kinds of anecdotal evidence” but “no scientific evidence” to substantiate marijuana’s medical efficacy, Rock stated, “Clinical trials will help us develop that evidence in a calm, rational way.” He added, “I think Canadians support, on a compassionate basis, if someone is dying, access to a substance that could alleviate their symptoms.” Rock made his comments one day before the House of Commons began debate on medicinal marijuana legislation, which will come to a vote in June.

In addition to studying its medical uses, Rock said he wants officials to determine a method for providing a safe supply of medicinal marijuana for patients. He also indicated that while the trials are underway, the government may grant permission on a case-by-case basis for patients to have legal access to marijuana. However, Rock did not give a time frame for development of the clinical trials.

## Canadian Police Chiefs Back Marijuana “Decriminalization”

In late April, the Canadian Association of Chiefs of Police (CACP) released a report recommending that the government “decriminalize” the possession of small quantities of marijuana, as well as other illicit substances. Under the proposal, an individual convicted of possession could sign a guilty plea, pay a fine, and avoid a criminal record.

Julian Fantino, one of the police chiefs involved in drafting the report, emphasized the differences between “decriminalization” and “legalization.” Taking small drug possession cases out of the court system would help police because the cases seldom yield convictions and they are “just draining our resources,” he said. The report also recommends increased spending on prevention, education, and treatment efforts.

The plan, already approved by the CACP board of directors, will be voted

on by the group’s entire membership in August. It will then be presented to the Solicitor General, as well as the ministries of Justice and Health.

Shortly after the release of the CACP report, legislation was introduced in the House of Commons to “decriminalize” marijuana. Under the measure, marijuana offenders would be ticketed and fined, with the proceeds funding education and prevention programs.

On May 6, the Royal Canadian Mounted Police also announced that they “fully support” CACP’s proposal.

## Medicinal Marijuana Policy Debated in England

An intense debate over medicinal marijuana is taking place in England. A bill introduced in Parliament on February 23 would make it legal for doctors to prescribe marijuana as a medicine. Although the bill is unlikely to become law, it reflects support for medicinal marijuana among several British lawmakers.

On November 14, 1998, a committee appointed by the House of Lords unanimously recommended that marijuana be reclassified as a Schedule 2 drug, which would allow doctors to prescribe it as a medication. Currently, marijuana is classified in Britain under Schedule 1, which bars its use as a medicine.

Highlighting the findings that marijuana is often effective for sufferers of multiple sclerosis and pain, the chair of the committee, Lord Perry, said the government should “show compassion to patients who currently risk prosecution to get help,” and the “law should not stand in the way.” The report encouraged research on medicinal marijuana but said there is already enough evidence to reschedule marijuana.

Reflecting a favorite tactic of drug warriors in the United States, the British government’s Home Office Minister George Howard immediately rejected the recommendations, saying marijuana should not be rescheduled without being “tested for safety, efficacy, and quality through a clinical process.”

During a House of Lords debate on December 3, Perry vociferously criticized the government’s position. He called for

see [Around the World](#), page 15

## South Australia Cuts Legal Marijuana Limit to Three Plants

Lawmakers in Australia are moving to cut the personal-use limit for marijuana possession from 10 plants to three. Since 1987, residents of South Australia caught growing 10 plants or fewer have been fined up to \$150, with no conviction recorded. However, the government is dropping the limit to three plants, citing marijuana growing methods that vastly increase the output of a single plant.

While the new law may hurt people who are growing between four and 10 plants for their personal use, South Australia is still much more tolerant than any of the 50 American states. Indeed, only Ohio has removed criminal penalties for cultivation—and that is for growing less than 100 grams (approximately four ounces, or one or two medium-sized plants). Growers in the other 49 states can be arrested and given lengthy prison sentences.

## Majority of Canadians Support Medicinal Marijuana

Seventy-eight percent of Canadians support legalizing medicinal marijuana, according to poll results released on April 7 by Decima Research, Inc.

## Canadian Lawmakers to Vote on Medicinal Marijuana

The Canadian House of Commons is preparing for a June vote on whether medicinal marijuana should be made legally available. Member of Parliament Bernard Bigras, sponsor of the legislation, said Canada’s prohibition on medicinal marijuana “is totally devoid of understanding and compassion toward the chronically ill, who want nothing more than to live in dignity.” Speaking during a House of Commons debate on March 4, he added, “We must now assume our responsibility as elected representatives to pass concrete measures ... to allow the medical use of marijuana by those who need it.”

the government to “give more mature consideration to our recommendations,” adding that the committee “includes quite a number of very distinguished scientists and doctors.” Members of the committee from both of Britain’s major political parties joined in offering support for the recommendations.

Also, on March 30, the government’s chief anti-drug official came out in favor of allowing doctors to prescribe marijuana if its therapeutic effects were proven by research. (This position mirrors U.S. Drug Czar Barry McCaffrey’s position.) Anti-Drugs Coordinator Keith Hellawell told a Parliament committee, “There appear to be many qualities within the herb that are likely to have impact on different suffering.” While this position is oftentimes seen as a “softening” of the government’s hard-line stance, the anti-drug officials’ call for more research is actually a tactic that is intended to stall legislation to remove criminal penalties for medicinal marijuana-using patients.

### Two Marijuana Studies to Begin in England

Two English scientists are preparing for clinical studies on the therapeutic properties of marijuana. A study involving 600 multiple sclerosis patients will be conducted by Dr. John Zajicek, while Dr. Anita Holdcroft will research the effects of marijuana on post-operative pain in 300 patients.

The trials, designed and approved by the Royal Pharmaceutical Society of scientists and government officials, are expected to begin this summer and last approximately two years. If the studies’ findings are conclusive, they may be accepted by the World Health Organization (WHO), which could then recommend that doctors be allowed to prescribe marijuana to patients. The British ban on medicinal marijuana is often attributed to WHO’s rejection of its medical benefits.

GW Pharmaceuticals, the company licensed by the British government to grow 5,000 marijuana plants for research, has developed a marijuana inhaler device that might be used in the studies. Capsules, injections, or other methods of administration might also be used.

While MPP believes that a wide variety of cannabinoid-based medicines and delivery systems should be made available to patients, MPP is concerned that the development of such drugs will detract from the move to remove criminal penalties for patients who use marijuana.

### Prince Charles Supports Medicinal Marijuana

Prince Charles of Wales recently drew a flurry of media attention after discussing medicinal marijuana with a multiple sclerosis sufferer. Making his annual holiday visit to a treatment center on December 23, 1998, the Prince talked with MS patient Karen Drake. Afterward, Drake told reporters that the Prince “asked me if I had tried taking cannabis, saying he understood that under strict medical supervision it was one of the best things for it.”

### Israel Sets Guidelines for Medicinal Marijuana

The Israeli government is creating guidelines for doctors to prescribe marijuana. In January, Dr. Boaz Lev of the Israeli Health Ministry appointed a panel of six physicians, jurists, and public officials to define the conditions for which marijuana may be prescribed—and to design a system of oversight.

Under Israeli law—like the laws in the United States—the possession, cultivation, and sale of marijuana is illegal and punishable by jail. Unlike U.S. law, however, doctors are allowed to prescribe it for patients with a special permit. The medicinal marijuana is then administered from supplies confiscated by police. (This has never been permitted in the United States.)

The Israeli government’s new approach is intended to end the *ad hoc* awarding of special permits. “We don’t want people to have to break the law to get treatment when no other drug is effective,” said Dr. Lev, but officials also want to ensure that marijuana is “not abused for non-medicinal use.”

### German Drug Czar Supports Medicinal Marijuana

On March 22, the head of Germany’s anti-drug effort offered support for the use

of marijuana as a medicine. Health Minister Christa Nickels announced that marijuana is “a potentially successful therapy in the treatment of AIDS, MS, and cancer sufferers,” and it is “more cost-effective than synthetic substitutes.” She added that making marijuana “a freely accessible drug is a different question.”

### Drug “Decriminalization” Defeated in Switzerland

On November 29, 1998, voters in Switzerland rejected a constitutional amendment that would have “decriminalized” the production, use, and sale of all illegal substances, including marijuana. The measure failed to gather majority support in any of the Swiss states, resulting in an overall vote of 28% in favor and 72% against.

The group that gathered the 100,000 signatures to put the measure on the ballot—led by doctors, lawyers, and drug policy experts—said it would end the criminal drug trade and save hundreds of millions of dollars currently spent on law enforcement and incarceration. However, the government waged an ardent campaign against the measure, claiming it would invite an influx of criminals and drug users into Switzerland.

The vote spread surprised some observers. In 1997, the Swiss voted 71% to 29% to preserve a government-run heroin maintenance program for addicts.

### Swiss Panel Recommends Marijuana “Legalization”

A government-appointed commission in Switzerland recommended on April 23 that the sale and use of marijuana be made legal for citizens of that country. The recommendation will be considered by the Swiss government, which has been engaged in an ongoing debate on marijuana policy.

The commission found that marijuana prohibition is ineffective and the government is therefore suffering a “growing loss of credibility” on the issue. Under the commission’s proposal, marijuana sellers would be required to be licensed. Purchasers would be required to prove Swiss citizenship in order to discourage a flood of tourists seeking legal access to marijuana. **END**

# In Brief

## Brownie Mary Dies

On April 10, the activist known as “Brownie Mary” died at age 77 in San Francisco. In the mid-1980s, Mary Jane Rathbun started baking and selling marijuana-laced brownies to help relieve the city’s many AIDS sufferers. Dennis Peron, who worked with Brownie Mary to found the San Francisco Cannabis Buyers’ Club and publish *Brownie Mary’s Marijuana Cookbook*, said, “I think she made 134 dozen a month during the hey-day, 1984 to 1990.”

Brownie Mary, who also volunteered in the AIDS ward of San Francisco General Hospital, was arrested three times for her activities. She agreed to perform hundreds of hours of community service as a result—and spent the time working with AIDS patients. Addressing one of several memorials held in her honor, San Francisco District Attorney Terence Hallinan called Brownie Mary a hero, adding, “She will one day be remembered as the Florence Nightingale of the medical marijuana movement.”

## Hearing Sought on Rescheduling Marijuana, THC Pill

An effort to have marijuana reclassified—led by long-time marijuana activist Jon Gettman—is stalling the federal government’s plans to change the status of Marinol. A pill form of marijuana’s main active ingredient, THC, Marinol is often prescribed to patients as a substitute for marijuana.

Shortly after the 1998 elections, when voters in six states and the District of Columbia approved medicinal marijuana initiatives, the Drug Enforcement Administration (DEA) and Marinol’s maker, Unimed Pharmaceuticals, proposed that the pill be moved from Schedule II to Schedule III under federal law.

Schedule III drugs are those with accepted medical uses and a lower potential for abuse than those in Schedule II, which makes Schedule III drugs more readily available than those in Schedule II. While Marinol has been in Schedule II for more than a decade, marijuana has remained in Schedule I, which includes drugs that are considered

to have no medical benefit and a high potential for abuse.

The DEA argues that rescheduling Marinol would make it more available for patients, thus answering the call of voters who supported medicinal marijuana. However, Gettman asserts that leaving marijuana in Schedule I while moving Marinol to Schedule III would be contradictory, as the THC contained in Marinol is the same as that found in marijuana.

Although drug warriors often claim that Marinol is an adequate substitute for medicinal marijuana, many patients who benefit from marijuana are unable to gain relief with the pill. For instance, AIDS and cancer patients’ treatments often make it impossible to keep pills down. In addition, Marinol contains only THC and none of the other cannabinoids



Eric Sterling, who serves on MPP’s Board of Directors, criticizes the use of informants on the PBS documentary *Snitch*.

found in marijuana. Consumed without marijuana’s other cannabinoids, the THC often proves ineffective, sometimes producing uncomfortable side-effects.

The DEA’s plans for rescheduling Marinol have been held up by a request for a public hearing. The hearing, requested by Gettman, is required by law before the rescheduling can proceed. In March, the DEA tried to convince Gettman to withdraw the request, but the DEA’s appeal was rejected. A hearing has not yet been scheduled.

Gettman has filed a separate rescheduling petition, seeking to have marijuana removed from Schedule I and Marinol from Schedule II. The petition points out many inconsistencies in the government’s approach to marijuana and Marinol.

## Drug Informants Examined in Documentary

On January 12, PBS television offered an intense, disturbing look at the use of

informants in the drug war in its documentary *Snitch*. MPP board member Eric Sterling was featured prominently in the Frontline program, which highlighted the ways in which informants and the judicial system are manipulated by law enforcement operating under harsh anti-drug policies.

Sterling, who is working to change federal mandatory minimum sentencing laws, served as counsel to the U.S. House Judiciary Committee when the mandatory minimum laws were enacted in 1986.

## California Residents Terrorized by Marijuana Surveillance Program

On January 18, northern California citizens whose lives have been disrupted by low-flying helicopters searching for marijuana participated in a public hearing on the Campaign Against Marijuana Planting (CAMP) program. Area residents testified that CAMP pilots making surveillance flights over Humboldt, Mendocino, and Trinity counties often fly at altitudes of 200 to 500 feet, killing birds, causing animals to stampede, violating environmental laws, frightening homeowners, and creating enough commotion to close down schools and businesses.

Even CAMP officials have acknowledged that they fly below the legal limit of 500 feet, violating the law and citizens’ privacy.

Officials from the federal agency in charge of CAMP refused to participate in the hearing. Retired appeals court Judge William Newsom presided over the hearing and is expected to release his findings after a review of the testimony. Humboldt, Mendocino, and Trinity counties comprise California’s “Emerald Triangle,” known as the richest marijuana-growing region in the United States.



Rolling Stone, 12/24/98

Means Committee held a joint hearing on these resolutions; all three passed the Judiciary Committee on April 6 and the Ways and Means Committee on April 14. On April 15, S.C.R. 133 and S.C.R.183 passed the Senate floor by a voice vote.

Unfortunately, these resolutions did not receive a hearing or a vote in the House. Three related measures—H.C.R. 100 (introduced on March 16), H.C.R. 151 (introduced on March 17), and H.R. 92 (introduced on March 16)—also did not receive a hearing or a vote in the House before the legislature adjourned for the year.

### Inaction in Maine Leads to Initiative in November

On May 3, the Maine House of Representatives rejected by a voice vote L.D. 2109, a bill that would allow patients with their doctors' approval to possess, use, and grow marijuana for medicinal purposes. The bill would also protect the patients' designated caregivers. The Maine Senate also rejected this measure by a voice vote the next day.

This measure was sent to the legislature when the medicinal marijuana initiative in Maine was found to have garnered a sufficient number of signatures to place it on the ballot in November 1999. Under Maine law, an initiative must first appear before the legislature and—if it does not pass the initiative exactly as written—then the voters are given an opportunity to pass or reject the initiative.

As a result of the legislature's inaction, Maine is expected to become the sixth state to enact a medicinal marijuana law by the ballot box. The other five states are Alaska, Arizona, California, Oregon, and Washington state. (Similar initiatives are pending in Colorado and Nevada, and the initiative in the District of Columbia is still under litigation.)

### Alaska's New Law Challenged

Alaska's medicinal marijuana law went into effect on March 4, four months after 58% of Alaska voters passed Measure 8 at the ballot box. The law allows patients who have their doctors' approval to possess, use, and grow marijuana for medicinal purposes if they have identification cards issued by the Alaska Department of

Health and Social Services. According to the new law, the state registry of patients must be set up by June 1. A patient who is arrested without having been issued an ID card can raise the defense of "medical necessity" in court.

On the same day this law took effect, S.B. 94 was introduced in the Alaska Senate, which would gut the new law. After a grassroots uprising against the bill, a watered-down version of S.B. 94 was re-introduced on April 21 that still includes some damaging provisions, such as (1) requiring patients' primary caregivers to have their names listed in the state's registry along with the names of the patients, (2) giving the police increased access to the state registry, and (3) not allowing the "medical necessity" defense for patients who do not have ID cards—which would make the "medical necessity" provision virtually meaningless.

The amended version of S.B. 94 passed the Senate Health, Education and Social Services Committee on May 4 by a 2-1 vote, with two senators voting "no recommendation"; the measure is now pending in the Senate Finance Committee.

On April 27, an identical bill to the second version of S.B. 94 was introduced in the Alaska House of Representatives. H.B. 213 was passed by the House Health, Education and Social Services Committee on May 5, with two representatives voting "yes," three voting "no recommendation," and two voting to "amend." This bill is now pending in the House Judiciary Committee.

### Oregon Implements New Law

On December 3, the first part of Measure 67—which was approved by 55% of Oregon voters one month earlier—went into effect, allowing patients who have their doctors' approval to use the "medical necessity defense" in court if they are arrested for cultivating or possessing personal-use quantities of marijuana.

And, on May 1, the second part of the initiative went into effect when the Oregon Health Division released its regulations for issuing registration cards to qualified medicinal marijuana users and

## Medicinal Marijuana Legislation Introduced in 1999



their caregivers. Under this provision of the law, patients and caregivers who possess these state-issued ID cards are exempt from prosecution for possessing or cultivating medicinal marijuana.

With this, Oregon is the first state in the nation to issue ID cards to medicinal marijuana users. MPP is aware of only one other jurisdiction in the nation that has implemented this kind of program—the government of the small town of Arcata in northern California.

On March 2, H.B. 3052 was introduced, which would gut three key provisions of the new law: (1) By eliminating the "medical necessity defense" provision of the law, this bill would only provide legal protection to patients and caregivers who actually possess state-issued registration cards. (2) The bill would eliminate the requirement that police return marijuana seized from people who turn out to be medicinal marijuana users; opponents of the law are concerned that this provision would require the police to violate federal law. (3) It would prevent people from serving as the primary caregiver for more than one patient.

After holding a hearing on April 7, the House Judiciary Committee passed H.B. 3052 on April 29. Then, on May 13, the Oregon House of Representatives passed the bill by a 49-8 vote. As of mid-May, this bill was pending in the Senate Judiciary Committee.

MPP opposes H.B. 3052 because: (1) Patients who do not obtain registration cards from the state—whether because of lack of knowledge about the program or because of obstructionism by the state

see [States Debate Med-MJ, page 18](#)

government—should not automatically be subject to jail time. (2) The plant-return provision of the initiative was intended to discourage police from making overzealous raids on bona fide patients, as sometimes occurs in California since Proposition 215 passed in November 1996. (3) Allowing caregivers to grow marijuana for more than one person not only helps patients—in that it will likely make the acquisition of such marijuana more affordable and convenient—but it will also decrease the number of growers whom law-enforcement officials will likely want to monitor.

In the meantime, on March 24, a non-binding resolution was introduced that would urge the federal government to change federal law so that it will no longer interfere with Oregon and other states with medicinal marijuana laws. H.J.M. 10 would have the practical effect of stating the Oregon legislature's support for H.R. 912, the medicinal marijuana bill currently pending in the U.S. House of Representatives.

After holding a hearing on April 23, the House Judiciary Committee passed H.J.M. 10 on May 5. Then, on May 7, the Oregon House of Representatives voted down the resolution by a 26–33 margin. The resolution is dead for the year.

### Washington State Debates Amending New Law

Two bills have been introduced in Washington state that would clarify or limit Initiative 692, the new medicinal marijuana law that took effect on December 3, one month after Washington voters passed the measure with 59% of the vote.

The provisions in question are as follows: (1) While the new law requires patients to obtain written documentation from their physicians, it will not necessarily be clear to the police whether or not people who are apprehended for marijuana possess legitimate documentation. (2) While the law allows patients to possess and grow a “60-day supply” of marijuana, it does not specify who determines how much marijuana constitutes a 60-day supply for a given patient.

S.B. 5704, introduced by a strong supporter of medicinal marijuana on February 3, would direct the state

Department of Health to write rules to clarify these provisions of the new law. This bill was heard before the Senate Health and Long-Term Care Committee on February 24, was later passed out of committee, and was passed by the full Senate on March 17 by a 33–12 vote. On April 25, the House of Representatives passed a resolution which sent the measure back to the Senate Rules Committee, where it will remain until the legislature reconvenes in early 2000.

Another plan, S.B. 5771, which is supported by a coalition of police groups and opposed by MPP, would go further by changing the law itself to make it more restrictive. Among other things, the bill would (1) require physicians to report to the state government each time they advise a patient about the medical uses of marijuana, (2) require the doctor who recommended the marijuana to determine what a 60-day supply is, (3) allow employers to fire employees who use medicinal marijuana, even if such use is not shown to hurt their work performance, and (4) limit the protections of Initiative 692 to only those patients who waive confidentiality of their medical record, thereby giving law-enforcement officials access to the patients' medical records. This bill was introduced on February 8 in the Senate Health and Long-Term Care Committee but did not receive a hearing or a vote.

In addition to the above two bills, S.J.M. 8005, a non-binding resolution introduced on January 18, would urge the federal government to reschedule marijuana so that it can be prescribed by physicians nationwide. This resolution was introduced on March 2 in the Senate Health and Long-Term Care Committee but did not receive a hearing or a vote.

### California Removing Obstacles to Proposition 215

The election of Bill Lockyer (D) as the new attorney general of California has brought with it a flurry of activity to implement the intent of Proposition 215, the medicinal marijuana law that was passed by 56% of California voters in November 1996.

In December 1998, even before taking office, Lockyer listed the implementation of Proposition 215 as the tenth priority in a list of 12 key issues that he will tackle as attorney general.

After taking office in January, he began to work with the attorneys general in the other five states where voters have passed medicinal marijuana ballot initiatives—Alaska, Arizona, Nevada, Oregon, and Washington state—in an attempt to make California's law work as well as possible, despite the federal government's continued prohibition of the medical use of marijuana.

In a meeting with San Francisco authorities on March 19, Lockyer said that he would not interfere with the distribution of medicinal marijuana. “If local law enforcement is supportive of implementation of Proposition 215 and their policies don't provoke outside prosecution, I have no intention of intervening,” Lockyer said following the meeting, according to the Associated Press. As with his other actions thus far, this policy is a dramatic departure from that of his predecessor Dan Lungren (R), who vigorously prosecuted the operators of medicinal marijuana dispensaries across California in 1996 through 1998—both before and after Proposition 215 passed.

Later in March, Lockyer met with Drug Czar Barry McCaffrey and U.S. Attorney General Janet Reno to discuss the conflict between federal and state law. “Both were very clear that medical marijuana use violates federal law,” Lockyer said after the meeting. In fact, McCaffrey reportedly said that Lockyer would be “risking arrest” if he moved forward with medicinal marijuana research without first obtaining federal approval for such research.

Perhaps most importantly, Lockyer convened a statewide task force on February 2 that was given the mission of creating a legal framework for the distribution of medicinal marijuana in California while minimizing the chances of unleashing a federal backlash. While the use, possession, and personal cultivation of medicinal marijuana is legal under state law, some courts have found that those who distribute medicinal marijuana—such as medicinal marijuana dispensaries—are in violation of both state and federal law.

After a series of meetings this spring, the task force—composed of 22 law-enforcement officers, health officials, and medicinal marijuana advocates—is developing recommendations and legislative language that would further protect

see [States Debate Med-MJ](#), page 19

patients. This legislation is expected to be inserted into S.B. 848, one of the two medicinal marijuana bills currently pending in the California legislature:

- On February 25, S.B. 848 was introduced which “would require the state to develop and implement a plan for the safe and affordable distribution of medicinal marijuana.” This bill passed the Senate Health and Human Services Committee on April 7 by a 6–2 vote, as well as the Senate Appropriations Committee on May 17 by a 8–3 vote, and is currently pending before the full Senate.
- Also on February 25, S.B. 847 was introduced which would provide \$1 million to conduct clinical trials into marijuana’s medical value across the state. This bill passed the Senate Health and Human Services Committee on April 7 by a 6–1 vote, as well as the Senate Appropriations Committee on May 17 by an 8–3 vote, and is currently pending before the full Senate.



### Bill Held Over in Minnesota Until Next Year

On February 15 and February 22, S.F. 780 and H.F. 936 were introduced in the Minnesota Senate and House of Representatives, respectively. If enacted, these identical bills—which are based on MPP’s model bill—would remove criminal penalties for the personal possession and cultivation of marijuana by people who suffer from serious illnesses who have recommendations from their doctors.

On March 16, the Senate Health and Family Security Committee held a hearing which included strong testimony by supportive patients and doctors from across the state. Unfortunately, the spokesperson for Governor Jesse Ventura (Reform Party) was instrumental in stalling the bill, testifying that the governor would have problems supporting S.F. 780 because it would still put patients in violation of federal law.

(Patients who use medicinal marijuana in Minnesota—or California, for that matter—are already in violation of federal law. The goal of passing state legislation should be to protect these patients from state-level prosecution.)

Because it was clear that medicinal marijuana legislation could not be passed this year, the Senate bill was put on hold until next year without a vote. This summer and fall, advocates in Minnesota will negotiate with the Ventura administration on an acceptable compromise that would allow Minnesota to remove its criminal penalties for the medicinal use of marijuana, while also minimizing the extent to which patients will be exposed to federal anti-drug laws.



### Bill on Hold in New Hampshire

On March 10, the Criminal Justice and Public Safety Committee of the New Hampshire House of Representatives held a hearing on H.B. 202, a bill that seeks to remove criminal penalties for the use, possession, and cultivation of marijuana for medicinal purposes. Because the House floor passed a motion by a voice vote to have the committee look into this further, it is likely that H.B. 202 will be re-addressed when the next legislative session begins in early 2000.



### Massachusetts Considers Bill to Expand Existing Law

On January 6, legislation was introduced in the Massachusetts House of Representatives that would expand the state’s medicinal marijuana therapeutic research program (which is still inactive due to federal obstructionism) to include additional disease groups, including AIDS. H.B. 2128 is pending in the Joint Health Care Committee.



### Bill Pending in New York

On April 28, A.B. 8082 was introduced in the New York Assembly. This bill would allow patients and their caregivers to possess or cultivate up to eight ounces of marijuana with a doctor’s certification, as well as permitting the distribution and sale of marijuana by the state Health Department or nonprofit organizations certified by the state. No action has been taken thus far on this bill.

A.B. 8082 is identical to the medicinal marijuana bill that was introduced in New York during the 1997-98 legislative session; that bill did not receive a vote.



### Resolution Proposed in Vermont

On March 31, in response to the Institute of Medicine’s landmark report on medicinal marijuana earlier in the month, J.R.H. 72 was introduced in the Vermont House of Representatives.

This resolution would direct the Vermont Commissioner of Health to adopt rules to implement Vermont’s medicinal marijuana law which was enacted in 1981. This law permits physicians to prescribe marijuana for medicinal purposes; unfortunately, because it is a federal crime to prescribe marijuana, Vermont’s law has remained merely symbolic. (The states with workable medicinal marijuana laws used the word “recommend” or other such terms, rather than “prescribe,” in order to get around federal law.)

J.R.H. 72, which is pending in the House Health and Welfare Committee, seeks to protect medicinal marijuana-using patients as best as possible given the continued federal prohibition of medicinal marijuana.



### Bill Dies in Arkansas

On December 28, the first medicinal marijuana bill in many years was introduced in the Arkansas House of Representatives. H.B. 1043, which was similar to the initiatives that passed in Alaska and Oregon this past November, would have permitted patients with state-issued ID cards to possess, use, and grow marijuana for medicinal purposes. After a short hearing on April 6, the House Committee on Public Health, Welfare and Labor killed H.B. 1043 with only one vote in favor—the representative who introduced the bill.




### Bill Dies In Wyoming

S.F. 20, which would reschedule marijuana from Schedule I to Schedule II under state law should the federal government reschedule marijuana to Schedule II under federal law, was introduced on January 18. On March 3, the Senate Judiciary Committee rejected the bill by a 3–2 vote. **END**

# U.S. Supreme Court Decisions




The U.S. Supreme Court sessions run from October of one year through June of the next. The following five decisions thus far this session (and three instances in which the U.S. Supreme Court declined to issue a ruling) are relevant to marijuana policy, although the cases may not directly involve marijuana. MPP does not take a position on any issue other than marijuana, but some cases are included because the legal precedents they set are also likely to affect people victimized by marijuana laws.

 **Minnesota v. Carter**, December 1, 1998,  
Docket No. 97-1147


In an important ruling on the Fourth Amendment protections against unreasonable search and seizure, the court ruled 6–3 that short-term visitors to a home do not share the same protections afforded residents and overnight guests in that home.

In this case, a police officer received an anonymous tip and peered through an apartment window to observe two men bagging illegal drugs. The men later argued that the officer's observation, which led to their arrest, violated the Fourth Amendment because the officer was peeking through the apartment window without a search warrant.


The court ruled against the two men, however, stating that they were not entitled to Fourth Amendment protections due to the nature and duration of their visit. Writing for the majority, Chief Justice William Rehnquist said the men were in the apartment for business purposes, and “the Fourth Amendment does not hold as vigorously in business” matters as in social matters. In a strongly-worded dissent, Justice Ruth Bader Ginsburg wrote that the decision “undermines not only the security of short-term guests, but also the security of the home resident herself.”

 **Knowles v. Iowa**, December 8, 1998,  
Docket No. 97-7597

The court ruled unanimously that a police officer cannot search a motorist and his vehicle if the officer has pulled over the driver to issue a ticket for a minor traffic violation, such as speeding, unless there is probable cause. By overturning the lower court's decision, the U.S. Supreme Court affirmed its 1973 ruling that police can conduct a search upon arrest—but not when a ticket is issued. The ruling contrasted with decisions issued in recent years that have tended toward broadening the scope of allowable police searches.

 **West Covina v. Perkins**, January 13, 1999,  
Docket No. 97-1230

The court unanimously ruled that when police officers seize property in a criminal investigation, they are not required to inform the property owner about the state's rules for reacquiring the seized goods.

 **Lynn v. West**, January 13, 1999,  
Docket No. 96-1371


By declining to take this case, the U.S. Supreme Court let stand a lower court's ruling that North Carolina's tax on illicit drugs is unconstitutional. The ruling determined that the tax law

violates the constitutional ban on double punishment for the same crime. The U.S. Supreme Court's action will cast into doubt similar laws in other states.

 **Riggs v. California**, January 19, 1999,  
Docket No. 98-5021

By declining to take this case, the court refused to review California's “three strikes and you're out” mandatory minimum sentencing law. In this case, a man convicted of shoplifting by a California state court was sentenced to 25 years-to-life in prison because he had two prior felonies. If the shoplifting had been his first offense, he would have been fined or sentenced to up to six months in jail. Three members of the California state court encouraged the man to appeal his case to a federal court, as no state or federal court has yet dealt with the issue of whether “three strikes” laws violate the Eighth Amendment's ban on cruel and unusual punishment.


MPP opposes “three strikes” laws, because people are often given life sentences even if one or more of their three felonies is a relatively minor marijuana offense, such as growing a couple of plants for their own use.

 **Anderson Community School Corp. v. Willis**, March 22,  
1999, Docket No. 98-1183

By declining to take this case, the court let stand a ruling that schools cannot drug-test all of the students who violate disciplinary rules, including those seeking to reenter school after completing a suspension. The ruling said such drug tests violate students' Fourth Amendment protections against unreasonable search. However, in other cases the court has indicated school districts can drug-test students who participate in extracurricular activities, as well as students who appear to be under the influence of drugs at school.

 **Mitchell v. United States**, April 5, 1999,  
Docket No. 97-7541


Overturning a lower court's ruling, the U.S. Supreme Court ruled 5–4 that a defendant who has pleaded guilty to a crime still has a constitutional right to avoid self-incrimination during the sentencing phase of the trial.


 **Wyoming v. Houghton**, April 5, 1999,  
Docket No. 98-184


In this significant 6–3 ruling, the court said a police officer who stops a car and has reason to suspect that it contains illegal drugs or guns may search the entire car, including the belongings of the car's passengers, even if the passengers are under no suspicion themselves. Under this ruling, officers can conduct a warrantless search of items in a car, such as purses, bags, and packages, but officers cannot search a passenger's person or pockets.


## Other Court Decisions


State courts and federal district and appeals courts make numerous decisions related to marijuana policy. However, these decisions do not have a direct effect on everyone in the country because judges in other states and districts are not bound by the precedents set by them. MPP does not detail all of these cases, but the following are particularly interesting.

 **U.S. v. Singleton**, July 1, 1998, Docket No. 97-3178  
The Tenth U.S. Circuit Court of Appeals found that prosecutors are not allowed to promise leniency or other rewards to a witness in exchange for testimony incriminating another defendant. Under the ruling, such testimony would be inadmissible and the defendant incriminated by the testimony would be entitled to a new trial. The decision is based on the view that promising a lesser sentence in exchange for testimony violates federal laws against bribery. The U.S. Department of Justice is asking the Tenth Circuit's full panel of 11 judges to rehear the case.


 **Nebraska v. Fitch**, July 24, 1998  
The Nebraska Supreme Court ruled that a warrant can only be issued for a nighttime search when compelling reason can be shown for not conducting the search in daylight.


 **Oregon v. Smith**, July 24, 1998  
The Oregon Supreme Court ruled that police do not need a warrant to use drug dogs to sniff the exterior of a person's property—in this case, a locked storage unit.

 **California v. Reyes**, September 21, 1998  
The California Supreme Court ruled that police are not required to have “reasonable suspicion” of wrongdoing before searching the premises of a parolee, as long as the officer does not exhibit “arbitrary or oppressive conduct.” An appeal to the U.S. Supreme Court is likely.


 **O’Neill v. The State of Louisiana**, November 20, 1998, Docket No. 98-2807  
A federal judge struck down a Louisiana law requiring random drug testing of elect-


ed officials, saying that the law violates Fourth Amendment protections against unreasonable search and seizure. The state of Louisiana is appealing the decision to the Fifth U.S. Circuit Court of Appeals.

 **California v. Rigo**, January 21, 1999  
A California appeals court ruled that Proposition 215, the state's medicinal marijuana law, does not protect patients from prosecution if they receive their doctors' approval after being arrested on marijuana charges. (Patients are indeed protected if they get their doctors' approval before being approached by law-enforcement officers.)


 **U.S. v. Dickerson**, February 8, 1999, Docket No. 97-4750  
The Fourth U.S. Circuit Court of Appeals found that an obscure 1968 federal law overrides the historic 1966 U.S. Supreme Court decision in *Miranda v. Arizona*. According to the *Miranda* ruling, an arrested person's confession of guilt cannot be used as evidence against him or her if the arresting officer failed to advise the person of the right to remain silent and consult an attorney before questioning.


In the new case, the court ruled that the *Miranda* ruling is superseded by a 1968 federal law which says that voluntary confessions are admissible as evidence even if an arrested person had not been read his or her rights. Citing the U.S. Supreme Court's consistent support for *Miranda* rights, the U.S. Department of Justice and the defendant have both appealed for a rehearing by the Fourth Circuit's full panel of 11 judges.


 **Massachusetts v. McCarthy**, February 10, 1999  
The Massachusetts Supreme Court ruled that officers can use a search warrant only for the locations specified in the warrant—not for searching any other areas.

 **Wisconsin v. Secrist**, March 2, 1999, Docket No. 97-2476  
The Wisconsin Supreme Court ruled that odor is sufficient cause for a police officer to make an arrest for drug possession. This case involved a man who

stopped to ask an officer for directions and was arrested after the officer detected the scent of marijuana smoke coming from the man's car. The officer subsequently searched the car and found marijuana, which the man was convicted of possessing.

 **People v. Brown**, April 22, 1999  
The California Supreme Court upheld a lower court ruling that police officers who improperly seize medicinal marijuana must return it to the patient from whom it was confiscated. The decision forced Mendocino County police to return a half-pound of marijuana to a patient who possessed it in accordance with Proposition 215, the state's medicinal marijuana law.

 **U.S. v. McCormick et al.**, April 23, 1999  
California's Federal Magistrate Judge James McHahon ruled that an experimental new drug test cannot reliably distinguish between marijuana and Marinol, a legal pharmaceutical containing THC, an active ingredient in marijuana. The case involves a medicinal marijuana user who is out on \$500,000 bail while awaiting his trial in September. After he failed a drug test, prosecutors sought to revoke the defendant's bail on the basis of marijuana use. Fortunately, the defendant has a legal prescription for Marinol, so he remains free on bail.

 **Colorado v. Kriho**, April 29, 1999  
A Colorado appeals court overturned the conviction of a juror who was held in contempt of court because she did not reveal her opposition to anti-drug laws when she was selected as a juror in a drug case. While serving on the jury, the woman had caused a mistrial by arguing to her fellow jurors that they should not convict a person for possessing drugs, not because there was insufficient evidence, but simply because the law itself was—in the juror's opinion—unjust. (Such acquittals are known as “jury nullification.”) By overturning her contempt charge, the appeals court opened the door for other anti-prohibitionists to practice jury nullification.

distribute marijuana, allowing private farms to grow marijuana, distributing confiscated marijuana, growing marijuana on state property, allowing local governments to grow marijuana, or anything else the state wants.

If Congress were to pass H.R. 912, some states—including Arizona, Connecticut, Louisiana, Vermont, Virginia, and Wisconsin—would then be able to permit doctors to prescribe marijuana under their current laws. And with the fear of federal threats removed, many other states would probably move to pass new, effective laws.

H.R. 912 is currently pending in the House Commerce Subcommittee on Health and Environment, which is unlikely to hold a hearing on this legislation during this Republican-controlled Congress.

Rep. Frank had introduced a different medicinal marijuana bill in the 1995-96 Congress that proposed spending \$5 million annually on a new federal program to distribute marijuana to patients with doctors' prescriptions through pharmacies nationwide. Eighteen House members signed on to that bill before it died in December 1996.

The new medicinal marijuana bill, which would neither spend federal money nor start any new programs, currently has 11 co-sponsors. A total of 40 sitting members of Congress—four of whom are now in the U.S. Senate—have co-sponsored federal medicinal marijuana legislation since the first such bill was introduced in 1981.

MPP will continue to build support for H.R. 912, with the goal of persuading at least 30 House members to co-sponsor the bill by the end of the 1999-2000 Congress.

### Bill Introduced to Repeal Penalties for College Students

A provision of the Higher Education Act (HEA)—which was passed by Congress and signed by President Clinton on October 7, 1998—denies or delays eligibility for federal financial aid for any student convicted of any drug offense, no matter how minor.

In effect, this means that students convicted of possessing marijuana will be ineligible to receive federal aid for college, while students who commit violent crimes such as rape and murder may still receive such aid.

### House Commerce Subcommittee on Health and Environment

H.R. 912, the federal medicinal marijuana bill, is pending in this subcommittee.

#### Republicans

1. Michael Bilirakis, FL, Chairman
2. Fred Upton, MI
3. Cliff Stearns, FL
4. James C. Greenwood, PA
5. Nathan Deal, GA
6. Richard Burr, NC
7. Brian P. Bilbray, CA
8. Ed Whitfield, KY
9. Greg Ganske, IA
10. Charlie Norwood, GA
11. Tom A. Coburn, OK
12. Rick Lazio, NY
13. Barbara Cubin, WY
14. John B. Shadegg, AZ
15. Charles W. "Chip" Pickering, MS
16. Ed Bryant, TN

#### Democrats

1. Sherrod Brown, OH
2. Henry A. Waxman, CA
3. Frank Pallone, Jr., NJ
4. Peter Deutch, FL
5. Bart Stupak, MI
6. Gene Green, TX
7. Ted Strickland, OH
8. Diana DeGette, CO
9. Thomas M. Barrett, WI
10. Lois Capps, CA
11. Ralph M. Hall, TX
12. Edolphus Towns, NY
13. Anna G. Eshoo, CA

The Higher Education Act reads, in part, as follows: "A student who has been convicted of any offense under any federal or state law involving the possession or sale of a controlled substance shall not be eligible to receive any grant, loan, or work assistance under this title during the period beginning on the date of such conviction and ending after" one year for a first offense, two years for a second offense, and permanently for a third offense for simple possession.

Students who are convicted of "sale" will be held ineligible for two years for the first offense and permanently for the second offense. Presumably, the cultivation of one or more marijuana plants—which is considered a felony under federal law and most state laws—will be considered "sale" for the purposes of this law.

On March 10, a bill was introduced that would repeal this provision of the HEA. H.R. 1053, introduced by U.S. Rep. Barney Frank (D-MA), has 15 co-sponsors and is pending in the House Education and the Workforce Subcommittee on Postsecondary Education, Training and Life-Long Learning.

In a letter to all House members on March 12, Rep. Frank argued that because "sentencing courts [already] had the discretion to decide on a case-by-case basis the appropriate sanctions to impose on individuals convicted of a drug offense," there is no need to impose a blanket prohibition on federal financial aid for all students. The U.S. Department of Education issued a similar analysis on August 7, 1998, before the HEA passed.

Opposition to the new law—and support for Rep. Frank's bill—is based on four main issues:

1. To the extent that students convicted of drug offenses are at risk, restricting their access to education is a counter-productive approach.
2. The law singles out drug offenders—the vast majority of whom are convicted of nonviolent "simple possession" offenses—as the only class of offenders to automatically lose eligibility for financial aid.
3. The law will impact only those students of low to moderate means, as the educational opportunities of wealthier students will be largely unaffected.
4. Drug law enforcement is practiced most aggressively against racial minorities, making it likely that the law will have a racially discriminatory impact (as the drug laws already do).

While it is unlikely that H.R. 1053 will be heard in committee or voted on in the Republican-controlled Congress, the growing momentum behind this bill could make it possible to attach it as an amendment to any number of broader bills that Congress might consider in the months to come. **END**

As the 1999-2000 Congress convened, MPP helped form the National Coalition for Effective Drug Policies. This coalition, which focuses on presenting Congress with more rational alternatives to the war on drugs, is composed of the ACLU and other major players on Capitol Hill.

# MPP Challenges Government's Spin on Teen Drug Survey

MPP turned the tables on the government when the annual federally-funded Monitoring the Future survey of teen drug use rates was released on December 18, 1998.

The government's drug warriors always interpret the survey's results to suit their goals of getting more money for enforcement and enacting tougher penalties for marijuana users.

The survey found that teen drug use rates generally did not increase between 1997 and 1998, while some indicators showed a slight decrease. Because the rates had been rising since 1991, White House Office of National Drug Control

Policy Director Barry McCaffrey boasted that his efforts had "turned the tide of youth drug use."

McCaffrey's goal is to drum up public support for his drug war. MPP believes that it is important to erode the public's support for McCaffrey's policies, because ultimately a well-funded drug war leads to millions of marijuana users being arrested and jailed.

Upon the release of the Monitoring the Future survey, MPP sent news releases to all major national media outlets, explaining that McCaffrey's drug war is actually failing to prevent young people from using drugs.

The Associated Press responded to MPP's news release, writing the following in an article that was picked up by more than 100 newspapers nationwide:

"Still, nine in 10 high school seniors say it's easy to get marijuana, and the number using is still high, said Chuck Thomas of the Marijuana Policy Project, which supports relaxation of drug laws. Nearly one in four eighth-graders and almost half of high school seniors reported smoking marijuana at least once. 'What they're doing is not working,' Thomas said."

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## Anti-Marijuana Legislation, from page 9

felonies—where the third conviction is any felony, such as selling a small amount of marijuana or growing one marijuana plant—are sentenced to life in prison without parole.

- S.B. 1261 would set up a state commission to study the impact of drug prohibition on violence. MPP supports this legislation because it believes that such a commission would find that if there is any violence associated with marijuana, it is caused by the criminal market created by prohibition, rather than by the use of marijuana itself.

### Illinois Moves to Criminalize Marijuana Information on Internet

On March 12, the Illinois House of Representatives voted 114-0 to make it a misdemeanor to transmit "information about cannabis by the Internet knowing that the information will be used in furtherance of illegal activity."

H.B. 792 was criticized for (1) its vagueness, (2) its disregard for First Amendment free speech protections, (3) the fact that it criminalizes the distribution of information via the Internet but not other communications media, and (4) that it would treat the distribution of marijuana information more harshly than

the distribution of information on violent activities, such as how to make bombs, which would continue to be legal.

After H.B. 792 was attacked by people on all sides of the drug policy reform debate, the Senate declined to address the bill.

### South Dakota Tables Mandatory Minimums

On March 4, the South Dakota House of Representatives voted 40-29 to table S.B. 210, a bill that would have imposed a 10-day mandatory minimum sentence in state prison for all marijuana violations, no matter how minor. S.B. 210 had passed the Senate on February 19 by a 22-11 vote.

The original version of the bill that was introduced by the governor would have imposed a 30-day mandatory minimum prison sentence for marijuana violations.

### Oklahoma Threatens Death

On February 1, a bill was introduced in the Oklahoma House of Representatives that would give life in prison without parole or the death penalty for anyone at least 18 years of age who is convicted of "using or soliciting the use of services of a person less than 18 years of age to distribute, manufacture, dispense, transport ... or cultivate" marijuana or other illegal drugs.

If enacted, this poorly worded bill (H.B. 1012) would impose the ultimate penalty even on an 18-year-old who discusses with a 17-year-old the possibility of growing marijuana.

The House of Representatives passed this bill on March 8 with a unanimous 100-0 vote, but the Senate did not address it before the legislature adjourned for the year. H.B. 1012 is being held over in the Senate Appropriations Committee, where it might be revived next year.

### South Carolina Launches War on Urine

On January 12, S. 277 was introduced in the South Carolina Senate, which would make it a felony punishable by up to five years in prison to sell or purchase urine for the purpose of defrauding a drug test.

On March 10, the Senate passed by a voice vote a greatly expanded version of S. 277 that would make it a misdemeanor punishable by up to three years in prison to "sell or give away urine," "adulterate a urine or other bodily fluid sample," or "possess ... or sell adulterants" for the purpose of defrauding a urine test. This measure passed the House Judiciary Committee on May 6 and is now pending on the floor of the House of Representatives. **END**

# Support Three Bills in Congress

Please strengthen MPP's lobbying efforts by completing these important projects! (If you don't know the names of your U.S. representative or two U.S. senators, call the congressional switchboard operator at 202-225-3121.)

U.S. Rep. \_\_\_\_\_ [name] \_\_\_\_\_ U.S. Senator \_\_\_\_\_ [name] \_\_\_\_\_  
 U.S. House of Representatives United States Senate  
 Washington, D.C. 20515 Washington, D.C. 20510

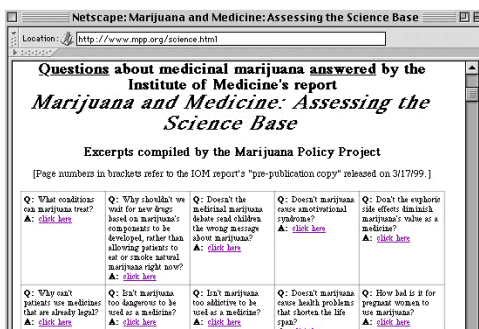
- 1 Please read the article on page 6 that describes the three key positive marijuana-related bills currently pending in the U.S. House of Representatives.
- 2 Choose one of the three bills and draft a letter to your U.S. representative explaining why you support the bill. (Please do not discuss more than one bill in each letter. If you do, you are less likely to receive a focused response from your U.S. representative.) At the end of your letter, please write something like: "Will you please let me know if you will support H.R. \_\_\_\_? I look forward to your response."
- 3 Write a similar letter to your two U.S. senators. Because none of the three bills is pending in the U.S. Senate, the conclusion of the letter should be slightly different: "Will you please let me know if you will support legislation in the Senate that is similar to H.R. \_\_\_\_? I look forward to your response."
- 4 Please fax or mail MPP copies of any responses you receive.

## Contact Your State Legislators

To find out the name of your state (not federal) representative and state senator, look in the government pages of your phone book or call your local library, courthouse, or mayor's office.

- 1 Please read the articles on state legislation on pages 8 and 9 of this newsletter. If there is an article on your state, you might want to base your letter around that legislation, regardless of the status of the legislation. (Letters that articulate an opinion about specific bills in a state are more likely to receive a focused response than letters that address a broad issue, such as "reforming the marijuana laws.")
- 2 Write separate letters to your state representative, state senator, and governor asking each of them to "support legislation that would allow adults to grow marijuana for their own personal use" and/or "support legislation that would remove criminal penalties for medicinal marijuana use."
- 3 Please fax or mail MPP copies of any responses you receive.

<http://www.mpp.org>



Each of the publications listed to the right is available for free on MPP's Web site. Please e-mail [mpp@mpp.org](mailto:mpp@mpp.org) for a list of URLs (Web addresses).

select publications

### Brochures

- ◆ Do you want to help protect medicinal marijuana users?
- ◆ How the Federal Government Is Blocking Medicinal Marijuana Research
- ◆ Marijuana Abuse Prevention Facts
- ◆ Marijuana Prohibition Facts
- ◆ Medicinal Marijuana Briefing Paper
- ◆ Medicinal Marijuana Facts
- ◆ Medicinal Marijuana: What's Happening?
- ◆ Questions About Medicinal Marijuana Answered by the Institute of Medicine's Report
- ◆ Quotes from the NIH Workshop on the Medical Utility of Marijuana (1997)

### Reports

- ◆ Analysis of "Possess A Joint, Lose Your License" Laws
- ◆ Marijuana Arrests and Incarceration in the United States: Preliminary Report
- ◆ Marijuana Prohibition Has Not Curtailed Marijuana Use by Adolescents
- ◆ Responses to Anti-Medicinal Marijuana Arguments
- ◆ State-by-State Medicinal Marijuana Laws

Letters-to-the-editor are an extremely effective way to influence public opinion on an issue and let public officials know what concerned citizens want. Please write a letter to the editor of your local newspaper that resembles (or mimics) the following letter.



To the editor:

On March 17, the National Academy of Sciences' Institute of Medicine released a remarkably favorable report on medicinal marijuana. Some of the report's major findings include:

1. Smokable marijuana works as a medicine for some people.
2. Patients are already using medicinal marijuana despite its illegality.
3. Marijuana does not present significant health risks relative to medicines that are legally available.
4. No evidence was presented in the report that indicates that prison is better for patients than marijuana.
5. While more research should be conducted into marijuana's medical uses, patients should be permitted to use marijuana in the meantime, for example, through an individual-patient "compassionate use" program.

Unfortunately, it has been more than three months and the laws remain the same: Patients can still be arrested and jailed for using this medicinal plant.

But help may be on the way: U.S. Rep. Barney Frank recently introduced a bill (H.R. 912) that would allow states to create their own medicinal marijuana laws without federal interference.

This bill would ultimately protect thousands of patients who are already using medicinal marijuana. I urge all readers to ask U.S. Rep. \_\_\_\_\_ to support it.

Sincerely,  
 YOUR NAME