



Drug Policy Source Book

Executive Summary

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Approved by:
The Minnesota State Association
of Narcotic Investigators

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Dear Colleague,

The debate over whether drug abuse should be promoted by legalizing addictive and dangerous narcotics on a nationwide basis has taken an unsettling turn in our society. Facts are being swapped for uninformed and intentionally misinformed opinions by those who advocate for increased availability of dangerous drugs across our nation.

Empirically, enormous sums of money are being spent to misinform, mislead and de-objectify the discussion, in a bold attempt to swamp rational decision makers with pseudo-science, political pressure from a vocal minority and anti-law enforcement sources. The crying need for real numbers, real facts, and real maturity in facing down an increasingly insidious, but still aggressive, effort to promote drug availability and drug abuse is now obvious.

Raw facts are stubborn things. For those who want real numbers, real arguments against promoting drug legalization, and real facts to push back against a movement that would result in greater drug use rates, more addiction, more intoxicated driving, more drug-fueled crime and domestic violence, this resource is for you.

For those who think legalization is a good policy option, and for those who want to ignore the facts and overwhelm informed debate on whether some activities should remain criminal – such as the promotion and distribution of narcotics in an open society – this resource is also for you. In this objective compendium of data, supported by both empirical and logical argument and credible news accounts, the striking ugliness of the promotion of drug abuse becomes clear; the facts are incontrovertibly on the side of those that rightly, patiently, and rather remarkably have to defend this country's freedom from drug-crime and drug-abuse promotion. Consider just a few of the facts that can be found in this volume:

- Existing abstinence-based policies have caused a reduction in drug use rates of nearly 50% since the late 1970s. Despite what advocates of legalization and “drug policy reform” constantly argue, this fact does NOT demonstrate drug policy failure. Just the opposite. Reductions of a similar magnitude in other public health threats would be front-page news.
 - Studies clearly show that decreased perception of harm leads to increased drug use. Decriminalization – including through “medical marijuana” policies – clearly leads to decreased perception of harm, increased drug availability, and increased abuse and addiction. Contrary to arguments made by drug policy reformers, increased abuse and addiction is a recipe for increased public cost burdens.
 - No legitimate medical use for marijuana has been demonstrated, and most major health organizations do not condone or recommend medical use because marijuana has clear negative impacts on mental and physical health.
 - Marijuana use can create dose-dependency issues in ways similar to those found in people with major psychotic disorders.
 - According to researchers, marijuana use is a significant risk factor for progression of psychotic symptoms in individuals over long periods of time.
- In light of these facts, why would any policy maker who has the best interests of society at heart

choose a path of promoting more drug use?

To adopt the seemingly boring position that drug use, abuse and induced criminal behavior is wrong may seem trite and antiquated, but like protecting our children and our communities, it is also part of our society's bedrock. To walk away from the truth, namely that drug abuse and its effects are harmful to society, is tantamount to walking away from the future of the country, leaving for those who come after us more addiction, more health and social costs, and more community problems. Our children would be the generation that must correct that horrible mistake.

The promotion of legalization is both ill-informed and an undisguised attack on our Nation's traditional and essential commitment to public health and public safety; that commitment, at root, is what has made our society and makes any civilized society a place of relative security, peace and hope. In our country's case, that commitment has been true and unwavering, with the result that we live in a country that is both great and good; we owe it to those we love if not to ourselves to preserve that country, and that perennial commitment to public health and safety.

This document is not glamorous or likely to become a best-seller. Yet it is distinguished by something as unbreakable as a diamond – the truth. America's future depends on a sober and thoughtful review of these facts, by those who now aspire to make the right decisions at the state and federal levels on this critical issue. Drug abuse and addiction are like runaway blazes once they are set in a family, community or nation; ask those who have been burned by them – who have lost children, siblings, or parents. Yet abuse and addiction are as preventable and reversible as the public commitment to public health and safety that is made by our leaders.

According to statistics from the Centers for Disease Control, drug-induced deaths in America totaled 37,485 in 2009 – more than 100 Americans every day. Drugs directly caused more deaths than motor vehicle accidents or Parkinson's Disease. Sadly, that number has increased over the last decade, with more than 300,000 Americans lives cut short since 9/11. Why would any policy maker choose a path that is guaranteed to increased drug availability, abuse, addiction, and overdose deaths?

In our own way, we are all leaders, and so this set of vital facts will keep us leading on this issue –in the right direction. What follows is therefore worth the time and effort that were required to create it – because it helps spread the message about the importance of saving and preserving precious human lives. These facts do – and must– define the debate.

Supporters of abstinence-based, balanced, and protective drug policies are watching with grave concern as advocates of permissive and destructive drug policies wage well-funded legalization campaigns across the nation.

The vast majority of Americans know that the legalization of narcotics is not a healthy policy alternative. The vision of an America with dramatically increased availability of addictive narcotics is not a desirable one. It is extremely difficult to understand how increased drug use, abuse, and addiction lead to the development of a healthier, happier, and more productive society.

Yet this is exactly what advocates of drug legalization are selling.

In order to better inform the debate, a broad coalition representing the prevention, recovery, medical, and law enforcement communities has led an effort to gather and summarize the most relevant, accurate, and effective drug policy facts, statistics, and arguments. Along with the National Narcotic Officers' Associations' Coalition, the International Association of Chiefs of Police, the Drug Free America Foundation, the National Sheriffs Association, the American Society of Addiction Medicine, the National Troopers Coalition, the Fraternal Order of Police, the National Association of Drug Court Professionals, and several other organizations contributed information and sources for compilation. Thousands of individual sources were reviewed and over 800 were summarized to produce a comprehensive "Source Book".

This draft executive summary includes some of the key points from a handful of these sources. The full Source Book – nearly 1,000 pages in length – will be organized for easy electronic reference and contains helpful summaries of each section. The full Source Book will be made available electronically to stakeholders for use in drafting talking points for media appearances, letters to the editor, testimony before legislative bodies at the local, state, and federal levels, and every-day conversations with friends, coworkers, and neighbors.

I want to thank all of our coalition partners for contributing resources and feedback on this project. We will continue to work together to refine the Source Book and its executive summary and make it widely available. It has never been more important to have a real understanding of the facts about drug policy. I hope the Source Book will be helpful in creating that understanding.

Ronald E. Brooks
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Introduction

Over the past fifteen years the debate over America's illegal drug policies has become more visible. Anti-legalization and pro-legalization advocates alike have captured the attention of the American public and policy makers while engaging each other at the federal, state, and local levels more frequently than ever before. Both sides have their arguments, their statistics, and their resources. However, in recent years the pro-legalization and decriminalization movement has become more vocal. This dangerous and troubling trend has been met by strong but relatively uncoordinated resistance from a wide range of supporters of a strong, abstinence-based drug policy.

The expansion of the legalization movement has been aided by several factors. First, large scale political change at all levels of government in the 2008 elections emboldened promoters of legalization. This factor, coupled with the massive influx of cash, advocacy, and material support from supporters of drug legalization has allowed some legalization supporters to shed their "counter-culture" image and rebrand themselves as a legitimate political interest group.

One of the most powerful tools the legalization advocates have is a unified, media-savvy approach to public relations. Their increased financial support and political access has given groups such as the National Organization for Reform of Marijuana Laws (NORML), the Marijuana Policy Project, and the Drug Policy Alliance an unprecedented springboard to promote their ideals. Unfortunately, the response to these developments by the mainstream majority and by stakeholder policy organizations they represent has been severely under-resourced and not as well-coordinated.

The Drug Policy Source Book was created to address this problem. Never before has the counter-legalization movement had a single comprehensive resource to assist in turning back decriminalization efforts. The project aims to promote collaboration among a working group of like-minded organizations, and provide a compilation of the most relevant and powerful facts, statistics, and arguments against pro-drug policy proposals. The Source Book is a summary of nearly 1,000 primary sources that can be utilized to align objectives and ideals in both long and short term advocacy efforts.

The Source Book is intended to be a continually updated resource that will be the first option for counter-legalization advocates preparing their messages for national and local media appearances, policy debates, legislative discussion, and most importantly, public outreach. The Source Book will help counter-legalization advocates overcome the challenge of inaccurate and subjective information that is widely distributed and promoted by the other side.

The core material of the Source Book comes from the close analysis of over eight hundred individual sources. This includes large scale academic research, expert position papers, domestic and international media sources, and arguments from the all sides of the debate.

The aim of this project is to allow opponents of legalization to quickly and easily access the most

recent and relevant material available pertaining to their topic of interest. By referring to authoritative resources, the anti-legalization community will be able to craft their messages around a set of facts and opinions in a more organized way.

As more groups and individuals contribute new authoritative resources over time, the Source Book's usefulness will increase. This simple organization of relevant facts and stories should improve the quality of the anti-legalization community's arguments for a safe and abstinence-based drug policy in the United States.

Drug Legalization – Economic Arguments

While many critics of drug legalization approach the topic from a qualitative or subjective angle, significant economic and quantitative research has provided ample reason for the consumption of illegal drugs to remain a criminal act. Studies have shown that the economic costs of increased drug use in society would offset any potential benefit argued by proponents of drug taxation or other revenue generating efforts. These hard facts, combined with the powerful moral and subjective arguments, serve as the backbone for the continuation of a balanced yet clear drug policy.

For example, in 2004 the Office of National Drug Control Policy released a report that reviewed the economic costs of drug abuse in the United States over the decade 1992-2002.¹ The findings illustrate the staggering costs drug use place on the American economy and individual citizens. One of the most noticeable trends is that the costs of drug abuse increased at an average of 5.3% per year from 1992-2002.² This was slightly above the average percentage increase (5.1%) of the country's gross domestic product over the same time period. The report calculated the economic costs in healthcare, crime, lost productivity, and early death related to drug abuse and reported that in 2002 use of illegal substances cost the country \$180.9 billion.³ Most notably, this figure relates strictly to illegal substances, ignoring the enormous costs suffered from legal products such as alcohol and tobacco, both of which kill thousands of Americans every year.

Still, many proponents of drug legalization argue that taxes placed on available drugs could offset many of the costs listed above. Jeffery Miron, a senior lecturer in Economics at Harvard estimates that by taxing legalized marijuana the government could earn an additional \$6 billion in revenue.⁴ If all drugs were legalized, the gains could increase to \$10 billion. Likewise the ONDCP estimates that legalizing marijuana could save the country between \$2 billion and \$10 billion a year in enforcement costs.⁵ A simple calculation demonstrates that this is a mere drop in the bucket in comparison to the 2002 total costs estimated by the ONDCP – the difference amounts to more than \$140 billion.

¹*"The Economic Costs of Drug Abuse in the United States 1992-2002." The Office of National Drug Control Policy. December 2004.*

²*"The Economic Costs of Drug Abuse in the United States 1992-2002." The Office of National Drug Control Policy. December 2004.*

³*"The Economic Costs of Drug Abuse in the United States 1992-2002." The Office of National Drug Control Policy. December 2004.*

⁴Skeel, Shirley. "What If We Legalized All Drugs?" *MSN Money*. 3 September 2008.

⁵Skeel, Shirley. "What If We Legalized All Drugs?" *MSN Money*. 3 September 2008.

Furthermore, these costs fail to account for the widely anticipated spike in drug use among American citizens and the subsequent increase in healthcare costs and lost productivity. In Denmark the decision to decriminalize marijuana in 1976 led to a doubling in usage among 18-20 year olds from 1984-1992 as the drug became increasingly prevalent among young people.⁶ As the country that has long been considered the “poster child” for drug legalization this disturbing trend should serve as a significant red flag for anyone arguing for domestic drug policy reform in America. Even more troublesome is the fact that the Dutch are only moderate users among the European community and trail well behind the United States according to the World Health Organization.⁷

Similar spikes in drug use were witnessed in the United Kingdom, which made the controversial decision in 2004 to downgrade cannabis from a “Class B” drug to “Class C.”⁸ Although penalties for dealing the drug increased, the move essentially legalized individual possession and consumption. In three years following the change in drug policy, the number of patients receiving treatment for cannabis abuse more than doubled. Over the same period, cases involving children increased by a third.⁹

If the United States were to suffer a similarly drastic increase in drug abuse following a change in drug policy the potential for skyrocketing costs could become real and economically catastrophic. Rosalie Pacula, director of the RAND Drug Policy Research Center has done extensive studies on potential legalization efforts and says that while the eventual outcome is difficult to discern, based on the effects of tobacco and alcohol abuse, drug legalization would be “very, very risky.”¹⁰ Evidence of the impact of loosened drug policies in other countries and even locally in the U.S. can be studied to determine possible impact.

The most recent study released by the RAND corporation: “Altered State?: Assessing How Marijuana Legalization in California could Influence Marijuana Consumption and Public Budgets” reveals that legalizing the production and distribution of marijuana could sharply lower the price of the drug by as much as 80 percent and increase consumption. The RAND study cautions that the revenue from taxing legal marijuana could be much higher or lower based on a number of factors such as the level of taxation and the response by the federal government. Research has revealed that marijuana consumption goes up when prices go down, however the magnitude of the consumption increase cannot be studied as prices would likely fall to levels below those ever studied. Consumption also might rise due to non-price effects such as advertising or a

⁶Skeel, Shirley. “What If We Legalized All Drugs?” *MSN Money*. 3 September 2008.

⁷Skeel, Shirley. “What If We Legalized All Drugs?” *MSN Money*. 3 September 2008.

⁸Martin, Daniel and Hickley, Matthew. “Cannabis Downgrade Sees Health Toll Double.” *The Daily Mail*. 14 April 2009.

⁹Martin, Daniel and Hickley, Matthew. “Cannabis Downgrade Sees Health Toll Double.” *The Daily Mail*. 14 April 2009.

¹⁰Skeel, Shirley. “What If We Legalized All Drugs?” *MSN Money*. 3 September 2008.

reduction in stigma. This research makes clear that the economic benefits claimed by supporters of marijuana legalization are unfounded – the costs clearly outweigh any economic benefits.

The inherent risks of drug legalization in America are crystallized by the data presented in this section. While many argue that drug legalization is simply “wrong”, the economic costs that loom behind such a decision are often less discussed but far more compelling.

Drug Legalization – Moral and Subjective Highlights

While statistical analysis and economic studies provide convincing evidence of the futility of drug legalization, moral and subjective arguments against the legalization and use of illegal narcotics are often more personally compelling. These arguments vary along a spectrum of highly researched intellectual arguments to the personal testimony of former addicts. However, whether based in fact or in sentiment, the conclusions drawn from both arguments are the same: that drug legalization is the wrong choice for America.

One of the most popular arguments in favor of drug legalization is that personal use, particularly the smoking of marijuana, differs little from the legal use of tobacco or alcohol. Others take the analogy farther and claim that drug use can be equated to eating fatty foods, and their consumption places similar strain on individual health and economic costs.¹¹ Proponents claim that if users are educated regarding the risks associated with drug use than it is their prerogative to decide whether or not to undertake them.

Unfortunately this position drastically undermines the harm caused by drug use, abuse, and addiction. While consuming fatty foods certainly exposes the consumer to negative health risks, the foods themselves do not cognitively impair the consumer, like marijuana does. As the world has witnessed with alcohol abuse, substances that alter the user’s behavior often project the negative consequences on to their peers.¹² Parents who neglect their children due to drug addiction and victims of drugged driving accidents are clear examples of the extension of harms across society.

Some of the most powerful critiques of efforts to legalize narcotics come from former addicts or family members associated with drug addicts. In 1999, New Mexico’s Republican Governor Gary Johnson considered proposing the legalization and subsequent taxation of drugs in his state. The position drew strong disapproval, even from the younger age groups that typically take a more

¹¹Jones, Andrew. “Legalization Will Not Stop the Problems Addiction Cause” *The Daily Bruin*. 8 June 2000.

¹²Jones, Andrew. “Legalization Will Not Stop the Problems Addiction Cause” *The Daily Bruin*. 8 June 2000.

progressive stance on the issue. As David Medina, a 17-year old high school student put it, “Maybe he’s never had a family member or neighbor that has overdosed...we’ve just grown up with it.” This same sentiment can be applied across the country in urban areas or other regions with significant drug consumption problems.

There are numerous moral and subjective arguments connected to the issue of drug use and addiction. These strong and thought provoking arguments can be most effectively used to supplement those rooted in scientific research and statistical analysis.

Drugs, Crime, and Prison Statistics

A central issue when considering the relaxation of American drug laws is the role that narcotics play in criminal activity. Drug addiction among current prison inmates is growing and the number of crimes committed while under the influence of drugs has been well-known for years. The hard statistics associating drug abuse and criminality provide a strong rationale for anyone looking to defend abstinence-based drug policy in the United States. The bottom line is that narcotics fuel both personal and community destruction.

A report released in 2008 showed that half of America’s two million incarcerated citizens qualify for drug dependence or abuse under the standards described in the latest Diagnostic and Statistical Manual of Mental Disorders (DSM-IV).¹³ Another recent study of ten U.S. counties surveyed arrested persons on their long and short term drug use while also testing them for various substances.¹⁴ In all ten sites the percentages of individuals testing positive for one illegal substance at the time of arrest ranged from 49% (Washington, DC) to 87% (Chicago, IL). Further testing demonstrated that 15-40% of the subjects had evidence of more than two illegal substances in their systems when arrested. These staggering percentages further demonstrate the role that drug related impairment has on criminal activity throughout the United States.¹⁵

Unfortunately, this is a developing trend, studies conducted by the National Center on Addiction and Substance Abuse at Columbia University have shown that similar figures exist for individuals in the juvenile justice system.¹⁶ Four out of every five youths sent into the system were either under the influence of drugs or alcohol when committing their crimes, test positive

¹³“Cost Effectiveness of Substance Abuse Treatment in Criminal Justice Settings.” Robert Wood Johnson Foundation. July 2008. <<http://www.rwjf.org/pr/product.jsp?id=42474>>

¹⁴“2008 Arrestee Drug Abuse Monitoring Report (ADAM II).” Office of National Drug Control Policy. April 2009. <http://www.whitehousedrugpolicy.gov/pdf/ADAMII_Fact_sheet_2008.pdf>

¹⁵“2008 Arrestee Drug Abuse Monitoring Report (ADAM II).” Office of National Drug Control Policy. April 2009. <http://www.whitehousedrugpolicy.gov/pdf/ADAMII_Fact_sheet_2008.pdf>

¹⁶“Criminal Neglect: Substance Abuse, Juvenile Justice, and the Children Left Behind.” Center for Addiction and Substance Abuse. Columbia University. October 2004. <<http://www.casacolumbia.org/articlefiles/379-Criminal%20Neglect.pdf>>

for drugs or alcohol, are arrested for drug or alcohol related offenses, or admit to suffering from substance abuse.¹⁷

Of the 2.4 million youths arrested for crimes, over 1.9 million were involved in substance abuse or addiction. This chronic issue provides an even more powerful message when the types of crime are examined.¹⁸ The report noted that drug or alcohol abuse is implicated in 64% of violent offenses, 72% of property offenses, and more than 81% of assaults, vandalism, and disorderly conduct. This data clearly demonstrates that juvenile delinquency is strongly associated with substance abuse and the consumption of illegal drugs.¹⁹

In addition, the myth that there are large numbers of people sitting behind bars for nothing more than simple possession of marijuana has gained considerable currency in recent popular opinion. The idea is that “thousands of people languish in jails and prisons across America, serving long sentences for nothing more than simple possession of marijuana.”²⁰

However the facts reveal a different story. The report “Who is really in Prison for Marijuana?” produced by the Office of National Drug Control Policy (ONDCP) reveals that in 2001, of all drug defendants sentenced in federal court for marijuana crimes, the overwhelming majority were convicted for trafficking, according to the U.S. Sentencing Commission. Only 2.3 percent—186 people—received sentences for simple possession, and of the 174 for whom sentencing information is known, just 63 actually served time behind bars.

Drug use harms the user and it harms the community, and because of this, criminal penalties have been put in place to control the possession and use of illicit substances. Built into the criminal justice system is an appropriate measure of discretion that responds to the gravity of the offense. Those who persistently violate the country’s drug laws face criminal penalties, which may include time behind bars. For offenders whose involvement in lawbreaking is minor, the sanctions are slight and often involve a referral to treatment rather than incarceration.²¹

¹⁷ “Criminal Neglect: Substance Abuse, Juvenile Justice, and the Children Left Behind.” Center for Addiction and Substance Abuse. Columbia University. October 2004. <<http://www.casacolumbia.org/articlefiles/379-Criminal%20Neglect.pdf>>

¹⁸ “Criminal Neglect: Substance Abuse, Juvenile Justice, and the Children Left Behind.” Center for Addiction and Substance Abuse. Columbia University. October 2004. <<http://www.casacolumbia.org/articlefiles/379-Criminal%20Neglect.pdf>>

¹⁹ “Criminal Neglect: Substance Abuse, Juvenile Justice, and the Children Left Behind.” Center for Addiction and Substance Abuse. Columbia University. October 2004. <<http://www.casacolumbia.org/articlefiles/379-Criminal%20Neglect.pdf>>

²⁰ “Who is really in Prison for Marijuana?” Office of National Drug Control Policy, <http://www.ncjrs.gov/ondcppubs/publications/pdf/whos_in_prison_for_marij.pdf>

²¹ “Who is Really in Prison for Marijuana?” Office of National Drug Control Policy, <http://www.ncjrs.gov/ondcppubs/publications/pdf/whos_in_prison_for_marij.pdf>

Despite these statistics, a false characterization continues to be promoted that depicts the criminal justice response to marijuana violations as unduly harsh, exclusively punitive, and disproportionate. This characterization must be countered by the truth, which is this: Americans are not routinely being sent to prison in large numbers just for possessing small amounts of marijuana. Our criminal justice system, on the whole, is fair and equitable, and despite frequent claims to the contrary, there is very little chance that anyone in this country, particularly a first time offender, will be sent to prison for merely puffing a “joint.”²²

The role illegal drugs play in American criminal activity is disturbingly high. Given the rates at which criminals are also involved in drug taking, the prospect of increasing access to currently illegal substances would serve to exacerbate this growing concern. With the excessively high connection between drug abuse, addiction, and criminality, the arguments for decriminalization of illegal narcotics are clearly short-sighted.

Environmental Impact of Drugs

In a society that is placing increased emphasis on environmental conservation initiatives, an often forgotten issue associated with the illegal drug industry is the devastating effect it can have on the environment. The waste produced from covert growing operations and drug production is often carelessly disposed to hide the nature of the operation. The resulting impact has proved to be a major concern for environmentalists and drug prevention advocates alike.

Marijuana growing operations in particular have proved harmful to the environment. In California, a 90,000 acre forest fire known as the La Brea fire was started by a marijuana growing operation deep in the forest.²³ The only area spared from the disaster was the space where 30,000 marijuana plants were being constantly irrigated. Over the past year law enforcement agents have seized over 2.7 million marijuana plants being grown illegally. Of those seized, more than 80% of those discovered were being grown on federal or state land.²⁴

Aside from clearing federal land for the purpose of growing marijuana, the operations themselves place a negative impact on the environment. Streams are often diverted for the purpose of irrigation; fertilizers and pesticides used on the crops are washed into water sources; and growers often use traps or poisons to keep indigenous wildlife away from the operation.²⁵

²² “Who is Really in Prison for Marijuana?” Office of National Drug Control Policy, <http://www.ncjrs.gov/ondcppubs/publications/pdf/whos_in_prison_for_marij.pdf>

²³ McKinley, Jesse. “In California Forests, Marijuana Growers Thrive.” *The New York Times*. 21 August 2009. <<http://www.nytimes.com/2009/08/22/us/22pot.html>>

²⁴ McKinley, Jesse. “In California Forests, Marijuana Growers Thrive.” *The New York Times*. 21 August 2009. <<http://www.nytimes.com/2009/08/22/us/22pot.html>>

²⁵ McKinley, Jesse. “In California Forests, Marijuana Growers Thrive.” *The New York Times*. 21 August 2009. <<http://www.nytimes.com/2009/08/22/us/22pot.html>>

In one particular California growing operation, despite being indoors, may have caused over \$1 million in environmental damage. When the operation was raided, police discovered that the men involved had been dumping hundreds of gallons of diesel fuel into a pit near their operation, uphill from the Eel River.²⁶

Outside the United States, drug production efforts have a detrimental effect on environmental conservation. The Colombian government estimates that four square meters of rainforest have to be cleared to produce a single gram of cocaine. Over the past twenty years, drug production has led to the destruction of 2.2 million hectares (5.44 million acres).²⁷ This devastating impact to one of the world's most rich ecosystems, a haven to thousands of plant and animal species, provides a compelling argument for governments to fight against this severe threat to the environment.

Proponents of legalization will likely point to these statistics and argue that if marijuana or other drugs could be cultivated in a legal manner then proper measures could be taken to ensure safe and sustainable growth. However, careful regulation of production by the federal government will require significant costs and offset any revenue gained through the taxation of drug sales.

Aside from the major societal effects on public health, safety, and the economy, the continued growth of the illegal drug trade is a major detriment to some of the country's most fragile ecosystems. Alongside the criminal nature of drug trafficking and the violence it directly supports, the destruction of these precious ecosystems is yet another reason why drug traffickers and those who run illicit growing operations must be prosecuted to the full extent of the law.

Marijuana Research – Behavioral Studies

Aside from the long and short term health consequences of smoking marijuana, scientific research and extensive experience have shown that cannabis abuse leads to several negative behavioral changes. By definition, a drug is used to alter the user's mental or physiological state. Drugs of the legal variety that have been carefully vetted and approved by proper regulatory bodies can yield tremendous benefits for those who truly require them. On the other hand, use of illegal drugs such as marijuana, heroin or cocaine can lead to extremely detrimental side effects.

26 "Drug Operation Near Eel River Caused Environmental Damage." *The Associated Press*. 18 January 2008

27 "Cocaine Killing Colombian Rainforests." *Pushing Back*. 20 November 2008.

Despite being described as the “most harmless” of all illegal drugs, extensive use of marijuana can lead to disastrous long term consequences, in large part due to its ability to alter user behavior. For example, despite the pro-legalization argument that marijuana is not an addictive substance by nature, several research efforts have shown that this may not be the case. This is especially relevant as levels of THC – the psychoactive chemical in marijuana – continue to rise dramatically. In the 1970s average THC content was less than 3%. Average potency has skyrocketed to near 10% today, and in some cases is as high as 30%.

Studies compiled by Cambridge University have demonstrated that over 3% of marijuana users develop addictive behavior within the first two years of trying the drug.²⁸ Additionally, approximately 10% of all users will eventually become addicted to the substance. Other studies by the University of Maryland’s Center for Substance Abuse Research demonstrated that since 2003 the number of adults seeking treatment for marijuana addiction more than doubled, rising from 7% in 2003 to 16% in 2006.²⁹ Over the same three year period, individuals seeking treatment for alcohol abuse dropped from 57% to 41%. Even among all illegal drugs only the highly addictive opiates such as heroin were cited more often than marijuana by adults seeking drug abuse therapy.³⁰

Long term studies of marijuana users have also revealed disturbing trends regarding changes in user behavior. Academic research has revealed a strong correlation between marijuana use and clinical depression. For example, a 15-year long study published in 2001 showed that cannabis use increased reported depression four times more often than those who abstained.³¹ In addition to depression, drug use is also strongly associated with increases in suicidal thoughts and the condition of anhedonia (being unable to derive pleasure from activities that are typically considered pleasurable).³²

Other potential side effects of long term marijuana use include loss of memory and short term learning capacity. In a clinical study conducted by the University Hospital of Patras, Greece, Dr. Lambros Messinis studied learning, memory, and behavioral patterns among marijuana users. He divided a group of 64 drug users into long and short term users and compared them to a control

²⁸ Helliker, Kevin. “As Marijuana Use Rises, More People Seeking Treatment for Addiction.” *The Wall Street Journal*. 2 May 2006.

²⁹ Helliker, Kevin. “As Marijuana Use Rises, More People Seeking Treatment for Addiction.” *The Wall Street Journal*. 2 May 2006.

³⁰ Helliker, Kevin. “As Marijuana Use Rises, More People Seeking Treatment for Addiction.” *The Wall Street Journal*. 2 May 2006.

³¹ Buckmaster, Luke and Thomas, Matthew. “Does Cannabis Use Lead to Mental Health Problems? Findings from the Research.” *Parliament of Australia, Parliamentary Library: Social Sciences Section*. 7 June 2007.

³² Buckmaster, Luke and Thomas, Matthew. “Does Cannabis Use Lead to Mental Health Problems? Findings from the Research.” *Parliament of Australia, Parliamentary Library: Social Sciences Section*. 7 June 2007.

group who had used marijuana in the past, but sparingly.³³ Dr. Messinis' experiment tested the users on verbal fluency, memory, and learning and revealed that long term users, those who smoked marijuana on a daily basis for approximately ten years, tested poorly in comparison to those who were not regular users of the drug.³⁴

Other behavioral concerns for marijuana use exist in the short term as well. Following the United Kingdom's controversial decision to downgrade marijuana from a Class B drug to Class C, studies revealed disturbing trends about the activities drug users were willing to undertake after using the substance. The study examined the behavior of 100 regular users and 90 casual users of cannabis.³⁵

The study, conducted by Britain's Economic and Social Research Council found that 74% of users surveyed had driven after using the drugs and 25% had attended work. The study also found troublesome statistics regarding sexual activity.³⁶ Over 10% of those surveyed admitted that if engaging in sexual activity after drug use, they were less likely to use a condom or other contraceptives. Finally, over 40% of the participants agreed that use of marijuana made them more likely to use other substances such as cocaine or ecstasy.³⁷

As demonstrated by the facts presented above, the use of marijuana can lead to dangerous and debilitating behavioral consequences in both the long and short term. The scientific data clearly shows that users of marijuana can develop addictive behaviors to the drug or suffer from memory loss and decreased learning capacity in the long term. Additionally, the use of marijuana has been linked to depression, suicidal thoughts. These affects are compounded by the societal risks posed by drug users driving or attending work while under the influence of illegal substances.

When considering life in a country that severely struggles to live with its two legal and equally dangerous, substances of alcohol and tobacco, the risks posed by decriminalized marijuana present a clear danger to American citizens. The behavior altering properties of smoked cannabis have no defined medicinal benefit and only serve to jeopardize the health and well being of those who choose to avoid the illegal and dangerous use of drugs.

³³ Dell'Amore, Christie. "Memory Up in Smoke with Long Marijuana Use." *United Press International Health Correspondent*. 13 March 2006.

³⁴ Dell'Amore, Christie. "Memory Up in Smoke with Long Marijuana Use." *United Press International Health Correspondent*. 13 March 2006.

³⁵ "Cost of Cannabis 'Overlooked'" *BBC News Service*. 27 January 2004.

³⁶ "Cost of Cannabis 'Overlooked'" *BBC News Service*. 27 January 2004.

³⁷ "Cost of Cannabis 'Overlooked'" *BBC News Service*. 27 January 2004.

Marijuana, Mental Illness and Health – Adults

As mentioned in the previous section, the use of marijuana leads to a host of medical problems. There is overwhelming evidence that marijuana is harmful to health in a number of ways. Some opponents of the war on drugs argue that alcohol is more harmful to one's health yet the reality is that we don't know the full extent of the effects of marijuana on the human body. Research scientists studying the effects of marijuana often conclude that there needs to be more experimental studies into the effects of marijuana to determine precisely how harmful it is.

Research correlates marijuana use and adverse health effects, including a strong association between chronic smoking of marijuana and abnormalities of cells in the respiratory system, increased risk of cancer, lung damage, chronic bronchitis and increased risk of pulmonary disease.³⁸

Additionally studies suggest that cannabis has been linked to the onset of cancer. In one study, 26 percent of testicular cancer patients smoked marijuana (15 percent who used daily or weekly) at the time of diagnosis, compared with 20 percent of men without cancer (10 percent who used daily or weekly). Marijuana users had 2.3 times the risk of having a type of testicular cancer known as a nonseminoma as those who were not.³⁹ In addition, there is evidence that smoking marijuana may be just as bad if not worse than smoking cigarettes in terms of contracting bladder cancer.⁴⁰

Furthermore, it has been found that marijuana increases the likelihood of heart attacks. The risk of a heart attack jumps nearly fivefold during the first hour after smoking marijuana, posing a particular threat to middle-aged users of the drug, according to a study released in 2001. The likelihood of suffering a heart attack was 4.8 times greater in the first hour after smoking marijuana when compared to periods of non-use of the drug. In the second hour after smoking the drug the risk was 1.7 times greater.⁴¹

It has been found that the use of marijuana affects fertility in both women and men. Women who smoked marijuana during the year before a fertility procedure had 25 percent fewer eggs and about one fewer embryo transferred, compared with women who did not smoke marijuana during that year, according to research published in the American Journal of Obstetrics and Gynecology. Similarly, marijuana smoking by men during the year before the procedure was

³⁸ James, William. "Marijuana Harmless? Hardly, Says Drug Czar" *Tallahassee Democrat*, 3 August 2007.

³⁹ Stinchfield, Kate. "Could Smoking Pot Raise Testicular Cancer Risk?" *CNN*, 8 February 2009.

⁴⁰ Baker, Toni. "Marijuana Use Linked to Early Bladder Cancer" *January Issue of Urology*, 26 January 2006.

⁴¹ Dunham, Will. "Higher Risk: Study Finds Marijuana Increases Heart Attack Risk," *Reuters News Service*, 11 June 2001.

associated with approximately one less embryo transferred, the report indicates.⁴²

In addition, cannabis has a detrimental effect on the immune system. Forty five researchers found that cannabis smokers had fewer immune-enhancing natural killer cells and lymphocytes, and higher levels of a protein that may promote tumor growth.⁴³

One of most worrying effects of smoking marijuana is on mental health and well-being. Numerous studies have pointed to the fact that the chemical compounds or cannabinoids in marijuana lead to mental health illnesses ranging from depression to psychosis to schizophrenia. The British Medical Journal in its January, 2005 issue revealed that smoking cannabis once or twice a week almost doubled the risk of developing psychotic symptoms later in life.⁴⁴ A major study conducted in Australia indicated that women who use cannabis daily run seven times the risk of suffering depression and anxiety.⁴⁵ Additionally, a British study found that a staggering 80% of patients newly diagnosed with schizophrenia and other psychiatric illnesses are heavy users of cannabis.⁴⁶

The results from another study published by the American Psychology Association provide evidence for early-stage sensory processing deficits in cannabis use. This finding, along with the observed increased rates of schizotypy in cannabis users, strengthens support for a cannabinoid link to schizophrenia spectrum disorders.⁴⁷

The health effects of marijuana are not fully known but what is known clearly shows that is harmful to health in a number of ways. The absurdity of marijuana legalization becomes clear when considering the impact on personal health and the healthcare system in general.

Marijuana, Mental Illness and Health – Children

There is a strong indication that marijuana use during pregnancy has a damaging effect on the fetal brain which continues to affect the child's learning abilities in later life. Marijuana is the most widely used drug among women of a reproductive age. Studies have found that children of

⁴² Boggs, Will. "American Journal of Obstetrics and Gynecology," February 2006.

⁴³ Davis, Jeanie Lerche and Michael Smith, MD, "Cannabis May Suppress Immune System" WebMD Health, April 2003.

⁴⁴ "Doctors Link Marijuana to Mental Illness", American Psychology Association, January 18, 2005

⁴⁵ Johnson, Martin. "Big Risk To Female Cannabis Smokers," New Zealand Herald, February 7, 2002.

⁴⁶ Hickley, Matthew. "Cannabis Link to 80 Percent of New Mental Cases." The Daily Mail. January 29, 2008

⁴⁷ Patrick D. Skosnik, Ph.D. Giri P. Krishnan, B.S. Erin E. Aydt, B.S. Heidi A. Kuhlensmidt, B.S. Brian F. O'Donnell, Ph.D., "Psychophysiological Evidence of Altered Neural Synchronization in Cannabis Use: Relationship to Schizotypy, American Journal of Psychiatry," 1 September 2006.

marijuana-smoking mothers more frequently suffer from permanent cognitive deficits, concentration disorders, hyperactivity, and impaired social interactions than non-exposed children of the same age and social background.⁴⁸

A study in rats suggests that children born to mothers who use marijuana during pregnancy may suffer a host of lasting mental defects. As well as affecting memory and learning, exposure to marijuana during pregnancy has a strong effect on visual mapping and analysis in human children.

According to another study, natural marijuana-like chemicals may direct key brain cells to make improper connections while in the womb, according to a new study. Researchers report that the molecules, called cannabinoids, serve as guideposts for young cells in the attention and decision-making parts of fetal mouse brains. The finding may help explain studies showing that the children of mothers who smoked marijuana during pregnancy are slower to process information than their peers. Tetrahydrocannabinol (THC), the active ingredient in marijuana, might knock the cell-guiding machinery off course by over-stimulating the brain.⁴⁸

In addition to the mental health effects on the fetus, there is evidence that maternal recreational drug use and marijuana use during pregnancy were associated with increased risk of neuroblastoma in offspring.⁵⁰ Neuroblastoma is a type of malignant cancerous tumor that develops from nerve tissue that occur in infants and children.

This evidence further demonstrates the danger associated with increased marijuana use through the relaxation of drug laws.

Marijuana, Mental Illness and Health – Adolescence

The scientific literature points to the fact that there is an irrefutable link between the consumption of cannabis and the mental and physical health of teenagers. In addition to the numerous effects on physical and mental health the use of cannabis in late adolescence and early adulthood

⁴⁸“How Smoking Marijuana Damages the Fetal Brain”, *Science Daily*, May 29, 2007.

⁴⁹ “Marijuana-Like Chemicals Guide Fetal Brain Cells”. *ScientificAmerican.com*, 24 May 2007.

⁵⁰ Bluhm EC, Daniels J, Pollock BH, Olshan AF, “Maternal Use of Recreational Drugs and Neuroblastoma in Offspring: A Report from the Children’s Oncology Group (United States) Department of Epidemiology”, *University of North Carolina at Chapel Hill Children’s Oncology Group (United States)*, June 2006.

emerged as the strongest risk factor for later involvement in other illicit drugs.⁵¹

In terms of the physical effects on teenagers, it has been discovered that drug use in general, including marijuana use, has increased the risk of having a stroke.⁵²

The adolescent brain is particularly vulnerable as it undergoes some of the most critical stages in development. The use of marijuana during these development stages can have a detrimental effect on the teenage brain ranging from cognitive impairment to schizophrenia. Research shows cannabis may precipitate psychosis, anxiety and schizophrenia in vulnerable people. There is compelling evidence that cannabis may aggravate depression and increase the risk of suicide, especially for adolescent girls. As mentioned previously, regular marijuana users experience higher rates of aggression and violence than others.⁵³

Chronic, heavy marijuana use during adolescence is associated with poorer performance on thinking tasks, including slower psychomotor speed and poorer complex attention, verbal memory and planning ability. Moreover, recent findings suggest females may be at increased risk for the neurocognitive consequences of marijuana use during adolescence, as studies found that teenage girls had marginally larger prefrontal cortex (PFC) volumes compared to girls who did not smoke marijuana.⁵⁴

Research has shown that teenagers who smoke cannabis daily are more than 150 per cent more likely to develop schizophrenia than those who do not. "It's past the bounds of theory now, there's enough evidence to indicate that marijuana use in young people has a causal role in the development of schizophrenia," said Professor Vaughan Carr, the head of the Neuroscience Institute of Schizophrenia and Allied Disorders at Newcastle University.⁵⁵

This research concurs with another study in Pittsburgh: heavy marijuana use, particularly in adolescence, appears to be associated with an increased risk for the later development of schizophrenia, and the course of illness is worse for people with schizophrenia who use marijuana," said David A. Lewis, M.D., corresponding author of the study and UPMC Endowed Professor in Translational Neuroscience, Western Psychiatric Institute and Clinic, University of Pittsburgh

⁵¹ Fergusson, David M., Joseph M. Boden, L. John Horwood, "The Developmental Antecedents of Illicit Drug Use: Evidence from a 25-Year Longitudinal Study of Drug and Alcohol Dependence," 30 August 2008.

⁵² Malek, Ali, MD, *Drug Abuse Linked to Brain Hemorrhage in Young Adults*, USF Dept. of Health, 20 February 2006.

⁵³ Martin, John. "Pot Lobby Takes another Hit" *Chilliwack (Australia) Times*, 5 December 2006

⁵⁴ "Marijuana Use Takes Toll on Adolescent Brain Function, Research Finds," *Science Daily*, 15 October 2008.

⁵⁵ Maley, Jacqueline. "Cannabis Link to Teen Psychosis," *The Sydney Morning Herald*, March 2, 2005.

School of Medicine.⁵⁶

According to another study carried out by Dr. Gabriella Gobbi, a psychiatric researcher from the Research Institute of the McGill University Health Centre, daily consumption of cannabis in teens can cause depression and anxiety, and have an irreversible long-term effect on the brain. “Teenagers who are exposed to cannabis have decreased serotonin transmission, which leads to mood disorders, as well as increased norepinephrine transmission, which leads to greater long-term susceptibility to stress.”⁵⁷

It is evident that the use of marijuana can have damaging effects on a young person’s life. In one study the researchers found that the Early High Users lagged behind all other groups in earnings and education when resurveyed at age 29. Early High Users and Stable Light Users did not usually go to college, while Steady Increasers completed on average one year of college, Occasional Light Users almost two years of college, and Abstainers, almost three years of college. “The bad news is that if you start marijuana use by age 13, even if you eventually decrease your usage, you are likely to have a lower income and lower level of schooling by age 29,” said Dr. Ellickson who led the study.⁵⁸

The evidence is quite clear that the effects of marijuana use on vulnerable adolescent brains are detrimental to their physical, mental, long and short term well being.

Marijuana Research – Toxicology Studies

Numerous academic studies highlight the toxicity of marijuana. Research has shown that smoking marijuana is more toxic than smoking cigarettes. Marijuana is also far more potent than it was twenty years ago, and despite the fact that many have argued that it helps to relieve pain, research has shown that it has been ineffective in treating pain.

In addition the health effects of marijuana discussed above, chronic cannabis use is associated with psychiatric, respiratory, cardiovascular, and bone effects. It also has oncogenic, teratogenic, and mutagenic effects all of which depend upon dose and duration of use.⁵⁹

⁵⁶ “Schizophrenia Linked to Dysfunction in Molecular Brain Pathway Activated By Marijuana”, *ScienceDaily*, June 8, 2008.

⁵⁷ “Cannabis Damages Young Brains More than Originally Thought, Study Finds.” *ScienceDaily*, December 21, 2009

⁵⁸ Eisner, Robin, “Marijuana Abuse: Age of Initiation, Pleasure of Response Foreshadow Young Adult Outcomes, *National Institute on Drug Abuse*” January 2005.

⁵⁹ Reece, Albert Stuart, “Chronic Toxicology of Cannabis Clinical Toxicology,” 5 July 2009.

Compared to smoking cigarettes, according to research published in France, smoking three cannabis joints will cause you to inhale the same amount of toxic chemicals as a whole pack of cigarettes.⁶⁰

Researchers in Canada concur that marijuana smoke contains significantly higher levels of several toxic compounds -- including ammonia and hydrogen cyanide -- than tobacco smoke and may therefore pose similar health risks. The scientists found that ammonia levels were 20 times higher in the marijuana smoke than in the tobacco smoke, while hydrogen cyanide, nitric oxide and certain aromatic amines occurred at levels 3-5 times higher in the marijuana smoke.⁶¹

In terms of the chemicals in marijuana, tetrahydrocannabinol (“THC”), the psychoactive ingredient in marijuana, was found to be at its highest concentration level ever – 8.5 percent – in 2006, according to the University of Mississippi Potency Monitoring Project, a research program funded by the National Institute on Drug Abuse (“NIDA”). The 2006 THC level was the highest since annual analysis began in 1976 and more than three times higher than the THC level recorded in 1986 (2.8 percent).⁶²

Many have claimed that smoking marijuana has helped to relieve chronic pain. However, an authoritative study has shown that marijuana is ineffective in treating pain. “From comparisons with previous clinical data, the lack of pain relief from the cannabis dosage and oral administration in this study cannot be considered the result of inadequate dosage or insufficient gastrointestinal absorption,” said Dr. Kraft, lead researcher in the study. “The high levels of THC detected in the blood of our subjects as well as the occurrence of typical THC side effects argue for sufficient availability, and thus we draw the conclusion that THC was not effective in treating acute pain.”⁶³ While research continues in this area, and while some companies have successfully isolated helpful cannabinoid compounds, it is clear from studies that the combination of chemicals in smoked marijuana is harmful and not helpful.

Despite claims to the contrary, the medical and scientific fact is that crude marijuana is NOT medicine. The American Society of Addiction Medicine, whose members are medical doctors in clinical practice and research settings, officially rejects “smoking as a means of drug delivery since it is not safe.”⁶⁴

⁶⁰ “Cannabis More Toxic Than Cigarettes”, *Study The Age (Australia)*, *Australian Foreign Press*, 27 March 2006.

⁶¹ “Marijuana Smoke Contains Higher Levels of Certain Toxins than Tobacco Smoke”, *Science Daily*, 18 December 2007.

⁶² “Marijuana Three Times as Strong Today as It Was Twenty Years Ago”, *Institute for a Drug Free Workplace*, Mark A. deBernardo, 5 July 2007.

⁶³ “Oral Cannabis Ineffective In Treating Acute Pain, Study Finds”, *Science Daily*, 25 June 2008.

⁶⁴ “Public Policy Statement on Medical Marijuana”, *American Society of Addiction Medicine*, April 2010.

Support for Balanced Drug Policies – Statistical Arguments

The statistics of the effects of drugs on American society provide some of most powerful arguments against the pro-legalization movement. This section contains some of the most compelling statistical arguments that show why an abstinence-based and balanced drug policy is critical.

One of the most staggering facts is that according to the Centers for Disease Control, 3,000 Americans die monthly from drug overdose. An estimated 2,800 die weekly if drug-related causes are included.⁶⁵ Moreover, as previously discussed, it appears that crime and the use of drugs are inextricably linked. In early 2003, Florida had a total of 88 inmates in state prison for possession of marijuana out of an overall population of 75,236 (0.12 percent). And of those 88, 40 (45 percent) had been in prison before. Of the remaining 48 who were in prison for the first time, 43 (90 percent) had prior probation sentences and the probation of all but four of them had been revoked at least once.⁶⁶

In one state alone, a study estimates the economic cost of alcohol and drug abuse in Maine was \$618 million in 2000. Lost productivity from substance abuse was estimated at \$97.4 million in the study. Medical care costs attributable to substance abuse were set at \$113 million in the study, and another \$19.3 million was identified as the cost of providing substance abuse treatment in 2000. The cost to the criminal justice system was estimated at \$128.4 million. More than a third of all the assault arrests in 2000 were related to alcohol or drug abuse.⁶⁷

If all the arguments against permissive drug use are not compelling enough, we cannot ignore history. The drug-tolerant era (1960-1980) in America brought a doubling of the murder rate, a 230% increase in burglaries, a ten-fold increase in teen drug use, and a 900% rise in addiction rates. The peak years for teen drug use and murder were the same years that drug incarceration rates hit an all-time low point. From 1980 through the end of the century (with tougher drug laws), Murder rates fell by over 25 percent, burglary rates dropped 41 percent, teen drug use reduced by more than a third, and heavy cocaine and heroin use levels fell.⁶⁸

As previously discussed, legalizing drugs would generate some revenue since we would be able to tax more goods. However, when looking at the cost to benefit ratio of drugs that have already

⁶⁵ Morgan, Roger, "Californians for Drug-Free Schools," January 22, 2007.

⁶⁶ McDonough, James. "Commentary: War on Drugs Insight", 11 November 2003.

⁶⁷ "Cost of Alcohol, Drug Abuse Examined", Bangor Daily News, 2 Monday 2004.

⁶⁸ "Drug Enforcement Works", Washington State Narcotics Investigators Association, Spring 1998.

been legalized (alcohol and tobacco), we can clearly see that legalization does more harm than good. Despite any revenue made, “in 2004 and 2005, 39% of all traffic-related deaths were related to alcohol consumption and 36% of convicted offenders ‘had been drinking alcohol when they committed their conviction offense’.. When it comes to cigarettes, adult smokers ‘die 14 years earlier than nonsmokers.’”⁶⁹ There is strong evidence that legalizing drugs that cognitively impair has a detrimental effect on society.

On a positive note, in recent decades, tougher stances on drugs have reduced usage and therefore the demand for drugs, 840,000 fewer teenagers are using illicit drugs now than they were 5 years ago.⁷⁰

The numerous authoritative studies, facts, statistics, and arguments put forward in this paper thoroughly demonstrate why the United States should not permit the loosening of illegal drug policies. If we as a society now spend so much energy and so many resources persuading people to stop smoking, why would we now send a signal that smoking marijuana is acceptable?⁷¹

⁶⁹ Hawkins, John. “In Defense of the Drug War” 29 January, 2007.

⁷⁰ Tandy, Karen. Remarks of Karen P. Tandy, IACP Second General Assembly, 16 October 2007.

⁷¹ James, William. “Marijuana Harmless? Hardly, Says Drug Czar” Tallahassee Democrat, 3 August 2007.

