

APPENDIX

Testimony Linda Dorsey - Agudosi April 14th 2018

Biography

- Graduate of Middlesex Community College
- Retired Advertising Sales Representative/Manager
- Resident of Franklin since 1993

History –

Life Changing car accident 12/2008 - had multiple surgeries as a result

Alternative treatments -physical therapy/ aqua therapy / biofeedback / acupuncture/massage/counseling.

Pain management - prescription drugs - narcotics / opiates

side effects of medications - non-functional, constipation issues / sleep disorders / fog/ hives/ skin disorders, etc.

- result - additional health issues -

additional medications prescribed for side effects .

No relief -

Recommended - spine stimulator- declined -

sought alternative treatments to improve quality of life

Medical Marijuana program started June 2015 -

Result -

Has given me better alternative to manage my pain.

New Jersey

- expansion of- Edibles/Vaporizer oils/

laboratory tested/ready to use cartridges -varieties as in plants

Adults alternative to smoking joints.

edibles in solid form

- edibles in liquid form
- Permission to grow plants, depending on your doctor's recommendation,
- cannabis from those plants for your personal use.

Purchase Quantity currently - 1/8 oz. or 1/4 oz. -

Premium Buds / mini Buds / Shake / Topical Oils/
lozenges

variety of products - should be able to purchase sample packs instead of current 1/8oz. size

example - Night time product may run out before the month -

lozenges purchase decreases limits by 1/8oz, on plants for the month (trade offs)

New Jersey allows 2 oz

Governor recommends 4 ounces - I agree we need to move in that direction

-Delivery Service... New York allows
New Jersey does not

- My mother had to drive me to Bellmawr NJ, over 120 miles round trip because lozenges not available elsewhere in State

Affordability - Insurance does not cover medication - /
cash only

****Reciprocal License**

medical patients from other states and New Jersey

Colorado - Recreational / Medical grade - did not accept
NJ license

Seattle Dispensary- allowed me to consult / varieties
different sample sizes

Testimony Before Hearing of the New Jersey Assembly

Oversight, Reform and Federal Relations Committee

by Thomas A. Coogan, Ph.D.

First I want to thank the committee members for organizing an event to hear from citizens on this topic, and for taking on the duty, on behalf of the rest of us, of sorting out the issue of whether to legalize adult use of marijuana in the state of New Jersey. You are hearing many competing voices with conflicting views (for example that that this action will add fuel to the fire of the opioid scourge, or alternately, can be part of a remedy), and we are counting on you to weigh the risk and benefits, real and exaggerated, and to set a sound policy.

I am here to describe my investigation into reports about issues that arise from legalization. I come at this not as an statistician nor as an expert in public health, but as a citizen who is interested in a momentous decision facing our legislators. The short summary of my personal research is that many attention-getting headlines of the dire consequences of legalization do not hold up under careful scrutiny. My conclusion is that many of the warnings that get accepted and repeated, reflect a search for data which will support a existing opinion, rather than letting an opinion be informed by the data, which I hope you as Legislators will do.

The framework that I will take looking into these effects is to ask what impact marijuana legalization would have, recognizing that there is already a lot of marijuana being used.

Terminology

Because the term marijuana has a history of being used a socially divisive tool, intended to demonize a foreign-sounding word, one can often tell a person's attitude toward legalization by whether they refer to marijuana or instead use the scientific term and more neutral term "cannabis". After decades of cultural mainstreaming, though, marijuana does not sound any more foreign-sounding to me than spaghetti. In discussions of this topic, I tend to use "marijuana" when talking about the current state of affairs, and to refer to cannabis in a future state under a new legal framework.

Traffic accidents

A recent (March 2018) survey of New Jersey residents by Stockton Polling Institute found that traffic safety was second, only to addiction/gateway, as the biggest concern for opponents of legalization. Prompted by the safety concerns I have heard about legalization, I have done some digging into the numbers and I hope my perspective will be helpful.

I know you are aware of the challenges, regarding dose and time of exposure, of relating impaired driving to marijuana, so you know that a simple headlines like "Marijuana is the drug most often

reported in accidents" is not very helpful: since marijuana is the most commonly used drug, we should would expect it to be the drug most frequently involved in all kinds of things.

This significance of this very well explained in a report from the National Highway Traffic Safety Administration that distinguishes the statistical concepts of adjusted versus unadjusted risk ratios. Their February 2015 report on "Drug and Alcohol Crash Risk" seemed to find a relationship between marijuana and crash risk, but more careful analysis this finding was not supported. I'll quote to you what is written in the summary, and then some explanatory comments that are in the body of the report:

" a statistically significant increase in unadjusted crash risk for drivers who tested positive for use of illegal drugs (1.21 times), and THC specifically (1.25 times). However, analyses incorporating adjustments for age, gender, ethnicity, and alcohol concentration level did not show a significant increase in levels of crash risk associated with the presence of drugs. "

" unadjusted odds ratios must be interpreted with caution as they do not account for other factors that may contribute to increased crash risk"

" For example, male drivers have a higher crash rate than female drivers. Likewise, young drivers have a higher crash rate than older drivers. To the extent that these demographic variables are correlated with specific types of drug use, they may account for some of the increased crash risk associated with drug use"

The short version of that is to say that **correlation is not causation**, and the broader lesson is that a **simple headline that says something is "marijuana associated" has to be treated cautiously**; more careful statistical evaluation is needed to draw any useful guidance from it.

Pedestrian Fatalities

A different sort of misleading headline can come from, instead of looking too broadly at data and ignoring details, from focusing too narrowly at a data set, without any context, to try to extract an interesting result.

A report just came out in February said that legalized states have more deaths of pedestrians in traffic accidents. That one caught my eye and I had some correspondence with the group that sponsored the study to try to understand it. The study was done for the Governors' Highway Safety Assoc; it compared numbers from the first 6 months of 2017 to the first 6 months of 2016, they reported 23 states had increases in pedestrian fatalities; 20 states had decreases; and 7 states remained the same. Sounds kind of random.

But then they went on to highlight that states that "legalized recreational use of marijuana between 2012 and 2016" reported collectively, an increase in pedestrian deaths, while all other states together had a decrease. Their list of states that "had legalized by 2016" did not include California, though that

state did vote to legalize at the same time as Nevada and Massachusetts, states which were on their list. In fact California had a big decrease in pedestrian deaths for those six months, and so the total for the states that voted to legalize would have been reversed: the legalized states had a decrease in pedestrian deaths; so maybe the headline would have been that people in legalized states are not out walking as much anymore.

I wrote to this organization for clarification, and their response was that California was not included because it had not implemented their law yet in 2017, though that is not the wording in the report; and if that was their criteria, they should have excluded Massachusetts, Maine, and Nevada which had not implemented legalization by the first half of 2017. Neither the original description in the report, nor their clarification, matches the sub-group of states they reported on. And as a final note, their premise doesn't make sense to being with: if 23 states had an increase in pedestrian deaths, what reason would there be to think that legal cannabis might be a unique factor in just 7 of those states?

Bu they were helpful in referring me to their source of data, which I dug into. To me it makes more sense to look at a bigger time span than 6 months, and to look at states that have some experience living under legalization: I looked at 2 years, from 2014 to 2016, and Washington and Colorado together had a 18% increase in pedestrian deaths in that time; which sounds like a concern, but that 18% is just slightly less than 22% increase seen in the country as a whole over those 2 years. If there is any difference between the states, legal cannabis does not seem to be it.

Though that report is entirely misleading, I suspect that that faulty headline on pedestrian deaths, and the cartoon infographic that goes with it, will be repeated many times in the course of this debate. If it does, I ask that you remember to just **strike that one off the list: there is no evidence for a pedestrian fatality effect.**

So on the one hand there is a watchout for headlines that are too general about something being "marijuana related". And on the flip side there are reports where the data chosen is so narrow, eg. a six month snapshot in seven states that really have nothing in common. It suggests to me that much of the headline statistics reflects selectively looking for data to back up an already formed opinion; as opposed a evaluating data to develop a well-informed position.

ER visits

I'd like to mention a few more concerns that have been raised based on Colorado's experience. One is that there are more Emergency Room visits being "marijuana involved". That's kind of loose phrasing is a caution. The data reported by the Colorado Department of Public Health captures all mentions of marijuana whether or not it had anything to do with the reason visit to the ER: they "categorized visits according to whether the visit indicated possible marijuana exposure; the period of retail commercialization showed a significant increase in emergency department visits, from 739 per 100,000 ER visits (before) to 956 per 100,000 ED visits (2014–2015). "

If that was reported in terms of percent increase, that would make a dramatic headline, but would obscure the real scope of the issue which is revealed in those absolute numbers, going from 700-some per 100,000 visits before legalization to 900-some per 100,000 after legalization in which "the visit indicated possible marijuana exposure". To my mind it seems at least possible that a contributing factor to the change after legalization might be **people's willingness to answer truthfully when asked about marijuana use, since after legalization they're not admitting to a crime.**

Now while it's certainly misleading to over dramatize statistics to serve an end, it would be just as serious a mistake to try to explain away any effects, for there are sure to be some unwanted outcomes of a change as significant as legalizing adult use cannabis, and so I will turn to what has been reported in legalized states.

Other Data on Traffic Risks

Many sources of information are now available which study the relationship between legalization and rates of car accidents and related fatalities. Taken together, they do not provide a single clear picture of the impact, despite the quickly-generated headlines which overstate the certainty of their findings. I will discuss my investigation of these sources:

report on "Drug and Alcohol Crash Risk" from the National Highway Traffic Safety Administration (February 2015);

the "Injury and Death" section of the report by the National Academies of Sciences, Engineering, and Medicine's on "The Health Effects of Cannabis and Cannabinoids" (January 2017);

reports from the Colorado Department of Public Safety, including Denver Police statistics (March 2016);

report from the Highway Loss Data Institute (IIHS Status Report newsletter, Vol. 52, June 2017);

study by Aydelotte et. al. of University of Texas, titled "Crash Fatality Rates After Recreational Marijuana Legalization in Washington and Colorado" published in American Journal of Public Health, (August 2017);

and a study by Hansen et. al. "Early Evidence on Recreational Marijuana Legalization and Traffic Fatalities" National Bureau of Economic Research (March 2018);

There is one common element in these studies: they all share the conclusion that "further study is warranted". In fact, in the introduction to the report from the Highway Loss report, they state that **"Though there is evidence from simulator and on-road studies that marijuana can degrade some aspects of driving performance, researchers haven't been able to definitively connect marijuana use with more frequent real-world crashes."** If it is this challenging to document a phenomenon of marijuana causing traffic accidents, perhaps the right conclusion is that the phenomenon is not a significant one.

I discussed earlier the report from the NTSB, but I don't want to give the impression that it is the last word, and that we can conclude that there is zero traffic risk. Another effort to make a very detailed and statistically well-controlled evaluation of the added risk that marijuana poses for driving was highlighted in the 2017 report by the National Academies of Sciences, Engineering, and Medicine on "The Health Effects of Cannabis and Cannabinoids". The "Injury and Death" section details a meta-analysis of twenty other studies, by Rogeberg and Elvik (*Addiction* 111; 2016). They found that marijuana was associated with 20 to 30 percent higher odds of an accident. The National Academy committee agreed with the authors in describing the magnitude of this association as "low to moderate in range". Specifically, the estimated odds of a greater chance of accident were 1.36 to 1.22 by different methods, but an adjusted analysis that accounted for alcohol intoxication found that the magnitude of these odds ratio weakened to 1.11.

This might be taken as a high end estimate compared to the NTSB which found no increased crash odds after adjusting for other risks. But is an 11% increased crash risk a high number? To remind you, that does not translate into 11% more accidents. For context, a **blood alcohol level of .05, which would not get one arrested under our law, has a 200% increased crash risk; the best statistical measures put marijuana risk between 0 and 11%.** Is that a show-stopper for legalization?

The data I have reviewed are relevant to understand the scope of the crash risk, but these figures were developed while marijuana was illegal, and so represent the risk that exists today; the real policy question that has to be weighed by legislators is: how will legalization impact that risk?

Legalization outcomes

Several informative and carefully written reports have been produced by the State of Colorado on their legalization experience, and I want to draw your attention to some findings with an emphasis on the scope of the risk, and whether it is manageable.

The Colorado Department of Public Safety reported that after their legalization, the prevalence of marijuana identified as the impairing substance by Colorado State Patrol (CSP) increased from 12% of all DUIs in 2014 to 15% in 2015. This sounds like a problem and it could make for an alarming headline. But they are reporting the percentage of DUIs which is affected by how many DUIs there are from other substances. In fact, the same report says:

"CSP found that the number of summons issued for Driving Under the Influence with marijuana as the impairing substance decreased 1% between 2014 and 2015".

The Denver Police Department did find the number of cases of driving under the influence of marijuana or marijuana-in-combination increased from 33 in 2013 to 73 in 2015. In percentage terms that would sound like a huge increase, but again the scope of the problem is relevant: **Citations for marijuana account for about 3% of all DUIs in Denver. They were 2.5% of DUIs before legalization, and 3% after.** Is that good news or bad news?

There are now other reports have looked at more recent data and include other legalized states : a study by the Highway Loss Data Institute and the report on "Crash Fatality Rates After Legalization in Washington and Colorado" by Aydelotte et. al. published in the American Journal of Public Health. These two studies took a similar approach of looking at crash data before and after legalization and compared that data to states with similar driving environments that had not legalized. The studies used different state as comparators, though, and got different results. The insurance group picked neighboring states, and the academic study picked states around the country that were similar driving environments, weather and economics. The academic study found no statistical increase in accident rate, per billion miles driven, with legalization, while the study by the insurance group reported a 3% increase. The importance, though, of the states selected for comparison, is shown a detail in the insurance group's report: Colorado had a 3 percent rise in claim frequency compared to Wyoming and a 21 percent increase compared to Utah. Which one is the right comparator?

A third approach was taken in the Hansen study. They examined data on traffic fatalities in Colorado and Washington after legalization using a synthetic control approach. Their result was that control groups saw similar changes in marijuana-related, alcohol-related and overall traffic fatality rates despite not legalizing marijuana.

We are left again with the challenge of finding accurate statistics to describe a phenomenon, which suggests that the phenomenon, if it exists, is not a robust one and that it is just at the limit of statistical detection. **If there was a terrible rash of accidents in legalized states, it should not be hard to measure.** Until unequivocal evidence is developed, the conclusion should be that legalization has not produced a road safety crisis.

[Some more recent headlines are inserted here, with the same sort of caveats about improper conclusions: "One in six drivers (16%) involved in fatal crashes in 2014 had recently used marijuana". The logical question to provide context to that statement is: what percentage of drivers NOT involved in fatal accidents has recently used marijuana? Is 16% statistically significantly different from the rate of drives not in accidents? Depending on the test methods (which vary greatly, especially at autopsy), "recently" may be within a week. If 10-15% of the adult population had used marijuana within a week, then what percentage of people involved in fatal crashes would be expected to be show evidence of marijuana?

Another caution about methods, which seems like a fine point, is whether it is really "One in six drivers" or "One in six drivers who were tested". Frequency of testing, especially in legalized states that are vigilant about changes in risky behavior, can skew results: if more testing is done, more results are found and are reported as "percentage of all drivers". If not all drivers are tested, though, that conclusion is not valid. The Colorado State Patrol made a point of this in their report on "Marijuana-involved fatalities in Colorado", with a footnote that states that "Because testing and reporting for Delta 9 have increased, the cases of drivers testing positive for Delta 9 could be the result of improved data collection".]

"Wait an hour .."

If there is an effect of cannabis legalization on the frequency of traffic accidents and fatalities in the real world (as opposed to laboratory tests of reflexes and attention), it is a modest one. The most dire report on the effect the impact of legalization is a 3% increase in accidents, and that number is debatable. It provides a benchmark to weigh the consequences of a decision for New Jersey to legalize, and poses the question of whether that concerns is one that can be managed. Knowing what the experience of other states has been, can New Jersey do better? The Legislature can take steps to proactively remind buyers of legal cannabis about the risks of impaired driving, even adapting messages to the local market. The old warning about waiting an hour after eating to go swimming would be especially appropriate to purchases of edible products, to remember to **wait an hour after ingesting one before trying another.**

Youth effect

The concerns about an increase in irresponsible adult use are distinct from concern about the impact on teens of heavy marijuana use. Very heavy marijuana use, especially in early teen years, does impact later life success. There are reports of an impact on IQ, with a commonly quoted number of 8 point decline from heavy chronic use in teen years, though that effect is disputed by a carefully done twin study (Jackson et. al. *PNAS* February 2016) which concluded "marijuana-using twins failed to show significantly greater IQ decline relative to their abstinent siblings. Evidence from these two samples suggests that observed **declines in measured IQ** may not be a direct result of marijuana exposure but rather **attributable to familial factors that underlie both marijuana initiation and low intellectual attainment.**"

A more serious issue is teen onset schizophrenia, though there are complications around whether a pre-disposition to mental disorders also pre-disposes one to substance abuse (Carey et. al "Associations between Polygenic Risk for Psychiatric Disorders and Substance Involvement", *Frontiers in Genetics*, 2016).

But the concern is a serious one and you will have real experts who can talk to you about that, I just want to raise a common sense perspective regarding youth exposure. These concerns for youth exposure have all been documented while the drug was illegal; the policy issue before you, as with traffic risk, is: how much greater will those risks be if adult use is legalized?

Gateway

This brings up the most often cited concern: the gateway scenario that marijuana use leads to more harmful substances. This was the most frequently cited concern of opponents to legalization in the March 2018 Stockton University survey of New Jersey residents.

On a side note, if the focus of concerns about marijuana is that it is a gateway, that in reinforces the view that marijuana itself has little physical risk to the users, if the greatest concern about it is that it can lead to other substances which are harmful in themselves.

If marijuana is a gateway, then that fact must have been documented under current law, and that gateway would still exist if the Legislature takes no action; the added risk with legalization then has to be that someone who today is not willing to try marijuana, while it is illegal, but who tries it only after it becomes legal, might go on to addiction to other illegal substances.

My sense is that **there could only be a very few individuals, at most, who will go on to, for example, heroin addiction if they were not willing to try marijuana while it is illegal.** That would be unfortunate, of course, but I think that basing the state's policy on concern for that subset of people would be to put too much focus on a what would be a rather narrow gateway while at the same time there is a superhighway to addiction running through prescription opioids.

But this falls on you in your role as legislators: if the principal risk in this initiative is for teens who will become chronic users only after legalization, then it is your responsibility to weigh the concern for that group against the impact on 20,000 New Jerseyans a year given a criminal record under the current law.

Addiction

Marijuana use can unquestionably be habit-forming, and probably no one needs to refer to an academic study to know that there are individuals whose relationships and work life are impacted by overuse. Whether this meets a clinical definition of addiction I will leave to qualified witnesses. It is worth noting however, that the description of the symptoms of "marijuana withdrawal syndrome" used by both the National Institute on Drug Abuse American and the Society of Addiction Medicine is: "irritability, mood and sleep difficulties, decreased appetite, cravings, restlessness and/or various forms of physical discomfort that peak within the first week after quitting". I think it does a disservice to people who work on the frontlines of the addiction and recovery fields to describe a week of restlessness as withdrawal from an addiction and by doing so equate problem marijuana use with far more serious problems.

Calls to Poison Control

One of the headline that gets cited from the experience of states with legal cannabis is that there has been an increase volume of calls to poison control centers. These calls come from people who have accidentally ingested marijuana, or people who are concerned that they have ingested too much (usually in edible form, usually tourists).

A focus on calls to poison control, like the concern about a "gateway" as a negative consequence, in a way validates the safety of the product. These are not statistics about real harm, like a need for **resuscitation or paramedics or an ambulance; that would be of genuine concern**. If the volume of calls to poison control is one consequence to be anticipated from legalization, then that is a **consequence that can be managed**. Planning, budget and staffing is the remedy, not continuation of a failed criminal enforcement system.

Youth Message

The last concern I want to address is one that is hard to discuss because it's hard to know what to measure, and that is: what message will it send to youth if the government sanctions adult use? Today the message is that marijuana is as serious a concern as heroin, and a greater concern than either crack cocaine or crystal meth. This is absurd and no one subscribes to this view except the federal government.

When our youth seek information they usually go to their peers first; and the message from their peers will be that marijuana is in no way as dangerous as heroin. A young person that continues to investigate will likely come to the conclusion that their peers are a more reliable source of information on this topic than their government, and then the credibility of every other message from the government about drugs will be jeopardized.

If the government instead credibly lays out reasons why marijuana poses risks specifically to teens, even if it is okay for adults, then the BIG message to the youth from such a change would be that their government has decided to reverse course and start telling them the truth.

But even if the government of New Jersey takes no action, the **messages coming from Massachusetts and California and Colorado and Canada will surely reach the youth of New Jersey**, particularly in this hyper-information age. To base the laws of the state on the policy of "Let's not tell the children", does not seem wise.

Decriminalization

If the message to young people is a major concern, then decriminalization, which is suggested as a compromise between the current system and regulated adult use, could do more harm than good. A public policy that sends a **loud and clear "No harm, no foul" message**, without making any meaningful

distinction between teen and adult use, would not be as effective as a policy which still makes an age distinction in the permissible use.

Final consideration

The final assessment of the wisdom of legal cannabis should be sought among the citizens of the states which have taken that step. Though they had to deal with challenges, I think most predictions are that if voters in Colorado, Oregon or Washington could vote again based on their years of experience, legalization would win by bigger majorities. One of the changed votes would like be Governor Hickenlooper of Colorado, who had originally opposed legalization. His views are influential, and the governor of Illinois has said that one reason for his continued opposition to legalization is the Colorado governor telling him, privately, to "wait a while and study what's going on here. 'Cause it ain't all good."

Publicly, Governor Hickenlooper has a different message. After two successful terms in Colorado, supervising implementation of the voter initiative, he is now travelling to Iowa and similar politically meaningful states and telling the world that "**Certainly the worst things that we had great fear about (legalization) – spikes in consumption, kids, people driving while high – we haven't seen any of that.**"

Thank you to Chairman Danielson and the members of the Oversight, Reform and Federal Relations Committee of the NJ State General Assembly for the opportunity to speak today and share the concerns of the entire membership of the NJSACOP. And, welcome to Middlesex County. I am sure that to get here today you travelled upon one or more of 39,000 public roadways in our State. In fact, on a regular work day, there is cumulatively over 200 million miles travelled on our public roadways per day.

I am Chief John Zebrowski of the Sayreville Police Department, I am also an Executive Vice President of the NJSACOP and the Chairman of the NJSACOP Working Group and, as such, have the distinct honor to be in front of you today. The Working Group is comprised of seasoned and learned Chief Executives of Law Enforcement from around the State of New Jersey whose purpose is to study the subject, investigate the available research, focus the discussion as it relates and affects the law enforcement community and to remain vigilant for the over 1200 active and retired members of the association. Most importantly, we are here to provide the necessary support to our individual communities as our lawmakers make an informed decision on this important issue.

Let me begin by telling you that I do not hold myself up as a clinical expert on the Legalization of Marijuana. Rather, I am speaking to you as an experienced law enforcement officer with over 30 years enforcing laws related to impaired driving and whose community is a connecting point for many points of interest, and major transit hubs including New York City. On any given day, the access point of the NJ State Parkway from State Highway 9 is crowded with commuters averaging over 100,000 vehicles a day. We

are also the home to such busy highways as the NJ State Parkway, with State Highways 9 and 35 running through my town adding another 400,000 travelers per daily commutes and providing direct access to the NJ Turnpike and Rt. 18. We have experienced our share, and more, of horrific crashes, traffic congestion, snarl ups, delays, as well as, pedestrian and cyclist fatalities. So, I feel appropriately qualified to discuss the issues and concerns related to impaired driving, and in this case "drugged driving" and its affect upon the motoring and non-motoring public.

I am not alone in this experience. NJ has some of the most heavily traveled and congested roadways in the United States. Our efforts to thwart drunk driving have met with a great deal of success as the incidents of drunk driving and crashes due to drunk drivers have been relatively low and stable over the last decade or so. But, drugged driving is not the same as drunk driving. And, our collective understanding of the impairments due to drugged driving is limited. As for marijuana, the physiological and metabolic effects from its consumption are more complex from that which comes from consuming an alcoholic beverage.

Let's begin with this point, marijuana is not a benign drug. Impairment due to drugged driving has certain comparable similarities to impairment due to drunk driving but it's the differences that will make the roadways less safe and the ability to enforce drugged driving laws much more difficult.

Alcohol is unique among impairing drugs in that there is a documented correlation between blood levels and levels of impairment. That doesn't exist for other drugs and it has been shown to be non-existent for THC in marijuana. Currently it is not possible to identify a valid impairment standard for marijuana or any other drug equivalent to the .08% BAC limit for alcohol.

Although blood alcohol content can be accurately measured and correlated with behavioral impairment, it is not the case with marijuana, in part because alcohol is water soluble, whereas marijuana is stored in the fat and is metabolized differently, making a direct correlation with behavior difficult to measure. Since THC is fat soluble, it is quickly removed from blood as it is soaked up by the brain and other highly perfused fatty tissues in the body.

Exacerbating the problem is the matter of how to best create, implement and enforce the laws prohibiting impaired driving. This is particularly concerning in NJ, the most densely populated state where the risk of catastrophic consequences related to a drugged driving incident is exponentially more probable.

The members of the Working Group have researched the issue in an effort to better understand how the legalization of recreational marijuana will affect our communities. And that research, thus far, validates our concerns and strengthens our collective resolve that the State of New Jersey should not legalize the use of recreational marijuana. We

understand that this research remains formative as much of it is related to the relatively short period in which marijuana has been legalized in certain states.

We feel that it is much better to postpone any decision until independent and comprehensive research has been completed using a better sampling of size and time. But, given the statistics that are available today it is clear and indisputable the use of recreational marijuana negatively impacts both the motoring, pedestrian and special needs community and that innocent people in states where recreational use of marijuana has been legalized are at a greater risk of harm, injury and death due to the increased numbers of impaired drivers.

Let's look at what we do know:

- The % of traffic deaths related to marijuana doubled in Washington State in the year retail marijuana sales were allowed.
- In CO, marijuana is now involved in more than one of every five deaths on the road.
- A recent review of literature on drug impaired driving found that being under the influence of marijuana nearly doubles the risk of a driver being involved in a motor vehicle crash resulting in death.

- Over the first six months of 2017, pedestrian fatalities rose sharply from a year earlier in states that had legalized recreational marijuana.
- Combining marijuana with alcohol appears to increase impairment dramatically, beyond the effects of either substance alone.

To this point, it has been a collective and successful effort from law enforcement, legislators, advocates and our community members making the superhighways, our heavily travelled arteries and each local roadway safer with motor vehicle crash rates due to drunk driving at all time low levels. This is not the time to reverse that course. It is imperative we do not underestimate the adverse impact legalizing recreational marijuana will have on traffic safety within our communities.

I, along with each member of the NJSACOP, invite and look forward to forming lasting partnerships for the purposes of better defining this specific issue and providing clarity where there is misunderstanding. We appreciate opportunities, such as this, to help frame and focus the discussion on specific concerns. Most importantly, we want to encourage and engage our individual communities into action and in opposition to legalizing the use of recreational marijuana.

Again, on behalf of the NJSACOP I would like to thank you for this opportunity to speak out.



Clubs of New Jersey

**Testimony before the Assembly Oversight Committee
Tracy Noble, Manager of Public & Government Affairs, AAA Mid-Atlantic
April 14, 2018**

Thank you Chairman and members of the committee for facilitating this important discussion. My name is Tracy Noble and I am the spokesperson for the AAA Clubs of New Jersey. Collectively, AAA represents more than two million New Jersey motorists.

The issue before you is complex and impacts many public policy areas. I am here today to raise grave concerns regarding the impact the legalization of recreational marijuana use will have on the safety of our roadways, including but not limited to:

- A significant increase in drugged driving and marijuana-involved fatal crashes.
- A lack of tools to measure impairment based on the presence of THC.
- A lack of understanding by the general public about the impairment capabilities of today's marijuana and the impact that it has on driving ability.

AAA continues to investigate the full impact that legalization has had in other states and we strongly believe that before New Jersey, or any state considers legalizing recreational marijuana, we need to take a collective pause.

- We know that drugged driving is on the rise and more prevalent than the public may realize.
- According to the 2013-2014 National Roadside Survey from the National Highway Traffic Safety Administration (NHTSA), drug use among night-time weekend drivers has increased nationwide by 25 per cent since 2007, when the last survey was conducted. The drug showing the greatest spike was marijuana, with an increase of 48 percent.
- This is particularly concerning since research has shown that marijuana can have significant effects on driver behaviors behind the wheel.
- Here in New Jersey, Drug Recognition Experts (DREs) conducted 1,141 DRE evaluations in 2016 and 2017 where the lab confirmed the presence of cannabis in the toxicology testing. Legalization of the drug would almost certainly increase impaired driving arrests and traffic fatalities.
 - Cannabis: 628 DRE Evaluations
 - Carboxy THC: 350 DRE Evaluations
 - Delta 9 THC: 75 DRE Evaluations
 - Other Cannabis: 88 DRE Evaluations.
- Marijuana impairs psychomotor skills and cognitive functions, including reaction time, distance perception, lane tracking, motor coordination, and attention span.

- In a recent AAA Clubs of New Jersey poll, conducted by National Research last November, 89% of New Jersey drivers surveyed consider someone driving after using illegal drugs a serious threat to their safety. And 79% believe that driving under the influence of marijuana is a dangerous behavior.
- In a new report by the Governors Highway Safety Association, The seven states and D.C. that legalized recreational marijuana use between 2012 and 2016 experienced a collective 16.4% increase in pedestrian fatalities for the first half of 2017, while all other states saw a combined 5.8% decrease.
- Legal marijuana on our roadways poses several new concerns, and a majority of respondents (69%) do believe that drivers who are under the influence of marijuana should be held to the same standard and penalized in the same manner as drunk driving.
- However, because no testing procedures currently exist to reliably predict driver impairment due to the consumption of marijuana, most states are not fully prepared to handle an increased spike in drugged driving. That is largely because there is no easy roadside test for law enforcement to determine whether a driver is impaired by marijuana.
- Unlike with alcohol, the presence of certain amounts of THC, the active ingredient in marijuana in the bloodstream, does not correlate with driver impairment.
- In order to address this issue, New Jersey must first define impairment beyond defining the measure of a substance in a driver's system.
 - In New Jersey, the DUI law begins with a definition of a BAC of .08. As we are seeing more and more other impairing substances on our roadways, it would be better to define what impairment looks like. In Colorado, impairment is defined as consuming a substance "that affects the person to a degree that he or she is substantially incapable, mentally or physically, to exercise clear judgment, sufficient physical control, or due care in the safe operation of a vehicle."
- Additionally, the New Jersey open container law needs to treat burnt marijuana and open containers of edibles or oils within the reach of the driver the same as an open container of alcohol.
- We also need to expand the terms of implied consent. New Jersey's implied consent law currently requires drivers to submit to a breathalyzer if there is probable cause to believe the driver has been driving while intoxicated. In order to provide for new technology and quicker collection while drugs are in the driver's system, implied consent should be expanded to include oral fluids and urine. Implied consent must also extend to a field sobriety test and a DRE evaluation if necessary.
- While there is currently no technology that is equal to the breathalyzer, there are new and emerging technologies that could be incorporated into pilot programs to help find ways to test for impairment. When asked in our survey, 85 percent of respondents supported efforts to create roadside tests to determine presence and impairment. By leveraging New

Jersey's innovation centers, we can help make our roads safer by encouraging and funding research on this issue.

- Legalization of marijuana will include a revenue stream from taxation, a significant portion of which should be dedicated to the Division of Highway Traffic Safety for education programs to ensure the public is aware of the dangers of impaired driving. There should also be an education campaign about the effects of marijuana in all its forms.
- Additionally, a significant portion of funding should also be dedicated to the Division of Highway Traffic Safety to implement more DRE and Advanced Roadside Impaired Driving Enforcement (ARIDE) trainings and to fund the creation of more shared DRE services. Often referred to as "call out programs," they allow municipalities to reach out to surrounding towns and state troopers to find an available DRE to conduct evaluations.
- It has taken many years to change attitudes about drinking and driving, and we must now begin the same process of educating the public about drugged driving.
- Part of the public's misperception comes from a lack of understanding of how marijuana has changed over the years. The potency of today's marijuana is exponentially stronger than what was on the streets in the 1960's, 70's and 80's. Active THC was 3 to 5%. Today, THC in marijuana buds = 15-25%, and 80-90% active THC in edibles and extracts. This significant increase in potency makes the impact on driving ability far more severe and often unexpected to the user.
- As an advocate for the safety of motorists, AAA is troubled by the safety implications of individuals using marijuana and getting behind the wheel.
- Quality data and research regarding the scope of the problem and its solutions are woefully lacking. More importantly, there is insufficient scientific data to provide motorists with guidance on the use of the drug in a way that does not impact their ability to drive safely.
- Legalizing marijuana before we are prepared to manage the potential roadway safety consequences, and provide law enforcement officers with all the training and resources they need to address this issue, is dangerous.

Thank you for your time and consideration of AAA Clubs of New Jersey's perspective on this critical public safety issue.

2/1

Dear Members of the Assembly Oversight, Reform and Federal Relations Committee.

I am speaking as a child and adolescent psychiatrist who has seen the devastation caused by increasingly potent, sometimes adulterated marijuana (MJ) and synthetic cannabinoids. I have spoken on this topic at local, national, and international professional meetings. In all the discussion of increasing the availability of medical marijuana, decriminalization, or legalization for recreational purposes in New Jersey, the effects of such legislation on youth has received negligible attention. My argument is not about the extent to which MJ should be legalized. It is about the need to attend to the special vulnerability of adolescents and young adults, referred for purposes of brevity as youth, to the effects of MJ, particularly the markedly elevated proportion of tetrahydrocannabinol (THC), that does the most damage to the developing brain through age 25 years. The interpretations of cherry-picked data to predict exaggerated benefit or harm from further legalization have gone well beyond the existing research base and are contradictory to the point of being useless to guide a coherent and beneficial policy for New Jersey citizens. This is especially true regarding the minimal attention paid to the impact of such legislation on youth, whose brains are especially vulnerable to the short- and long-term effects of cannabis. These effects include altering brain development, neurocircuits and functioning, precipitating psychosis and earlier onset of schizophrenia, and decreasing overall cognitive capacity. Adverse effects are especially critical for pregnant teenagers who are more likely to use MJ than older pregnant women; MJ has documented adverse effects on the fetus and thus should be absolutely avoided during pregnancy. You are strongly urged to consider diversion of MJ to youth as a major factor to address in any legislation or regulations when increased access to adults are being deliberated.

The national trend to legalize marijuana for both medical and recreational purposes has been accompanied by a decrease in the perception of harm associated with marijuana use by youth in eight through 12th grades. Decreased fear of harm has been clearly associated with increasing use. Moreover, adolescents living in medical marijuana (MMJ) states with a plethora of dispensaries are more likely to have tried new methods of cannabis use, such as edibles and vaping, at a younger age than those living in states with fewer dispensaries (*Drug and Alcohol Dependence, August, 2017*). New Jersey has the lowest reported monthly usage of marijuana by those ages 12 through 17 years compared to all states with MJ authorized for medical purposes. Arguably this may be related to limited availability of medical MJ, but New Jersey has amongst the strictest regulations to limit potency through ceilings on THC content and amount of marijuana that can be purchased and in one's possession at any given time. Fortunately, the national rates of daily or monthly use have not yet reached the levels present in the 1990's. Strong efforts similar to those successfully implanted to drive MJ and other drug use down in the later 1990's are needed to keep use by youth below those levels.

We ask for special consideration to be given to the unique issues related to youth in your deliberations. Society has once dealt successfully with the MJ use by youth problem through intensive public education focused on the issue. Current prevention efforts have been successful in lowering the use of all substances of abuse but MJ. There are many means to do this with MJ. Given the adverse effects of THC on the developing brain, New Jersey must consider keeping the THC levels low enough to reduce adverse effects while promoting further research into the effects of any further legalization of cannabis. Warning labels is one manner of prevention and there are many more, including limiting the ability of for-profit organizations in ads covertly targeting youth. The attached New Jersey Council of Child and Adolescent Psychiatry Position paper expands on this matter. Thank you for the opportunity to share these views. Questions and comments are welcomed.

Theodore A. Petti, MD, MPH
56 Monroe Ave.
Edison, NJ 08820

April 14, 2018



LAW ENFORCEMENT ACTION PARTNERSHIP

ADVANCING JUSTICE AND PUBLIC SAFETY SOLUTIONS



Officer Nick Bucci (Ret.)
New Jersey State Police
Seaside Park, NJ

Dominick "Nick" Bucci is a retired New Jersey State Trooper who spent 25 years confronting street level drug dealers and international drug smugglers. His work involved over 1,000 arrests and convictions.

Unfortunately, he found that for every drug dealer he took off the street, there was another one waiting to take over their operation. After a fatal shoot-out between a young man suspected of drug dealing and two undercover officers, Bucci's perspective on the drug war

changed permanently.

Bucci retired from the State Police in 1991 and has rededicated himself to ending drug prohibition and believes that police, prosecutors, and judges are best positioned to see the injustices and ineffectiveness of the criminal justice system.

As a Deacon at his local church, he works to assist countless people who struggle to gain employment after serving their time for drug-related convictions.

The Law Enforcement Action Partnership is a nonprofit organization composed of police, prosecutors, judges, and other criminal justice professionals who use their expertise to advance drug policy and criminal justice solutions that improve public safety. With 150 speakers across the United States, LEAP representatives reach millions of Americans each year through educational programs and media interviews.

For event bookings, contact Speakers@LawEnforcementAction.org

For media, contact Media@LawEnforcementAction.org

www.LawEnforcementActionPartnership.org

Formerly known as Law Enforcement Against Prohibition

April 14, 2018

New Jersey Senate Oversight Committee Hearing
Testimony on the Legalization of Marijuana

Thank you for giving me the opportunity to give testimony on marijuana legalization from a law-enforcement prospective.

First, I would like to applaud you advancing the conversation in New Jersey and holding this historic hearing.

This is a great step in the right direction.

After a 25-year career with the New Jersey State Police, I retired as a Lieutenant. I have dedicated much of my life to fighting crime and protecting the safety of New Jersey residents up and down our state.

I enforced our marijuana laws from the day President Richard Nixon declared an all-out War on Drugs in 1971. I spent 22 of my 25 years of service working as a narcotics detective.

As somebody who made many arrests for marijuana possession, I have come to the conclusion that our marijuana laws are a failure; do not improve public safety and that New Jersey should move towards legalizing and regulating marijuana for adults.

I retired in 1991, and the last thing I remember just before retiring was the death of a young man from Brick Township, New Jersey during the execution of a search warrant, whose crime was the possession of about 5 pounds of marijuana.

Twenty four years have passed since that day and the memory still haunts me.

I took an oath of office when I joined the State Police to protect and serve the people of New Jersey, and when I look back at my career; the most rewarding memories are from the time I spent as a road trooper helping people. As a narcotics detective, I can't help but feel that I let the people down.

That is the main reason that I joined *Law Enforcement Action Partnership*.

I want to make up for the support I gave to this failed war and the hundreds of lives I had a negative impact on by making countless marijuana arrests.

LEAP is an international nonprofit educational organization representing well over one 150 thousand police, judges, prosecutors, prison officials, federal agents, and supporters in 80 countries. We advocate for marijuana legalization because it will vastly improve public safety and free up resources for the justice system to focus on dangerous criminals.

Drug warriors, those who cheerlead our focus on dedicating enormous criminal justice resources to arrest and prosecute people who use drugs are always concerned about the message that marijuana legalization at the state level sends to young people.

The message those folks apparently want to send our children and teens about marijuana use is this:

“We’re not going to create an age barrier to marijuana and make it harder to get; we’re going to leave it in the hands of drug dealers who don’t care about your well-being, health, or safety. We don’t want you to use drugs, but we’re going to continue ensuring that it’s easy to experiment with marijuana. We are going to continue putting you are at risk of being exposed to other drugs, robbed, or injured by street dealers.”

It's hard to find anyone today who says that they're concerned about the message we send to young folks because we re-legalized alcohol or who are concerned about our messages about cigarettes, even though those two legal drugs are very dangerous. We have reduced tobacco and alcohol use through regulation and education, and we can absolutely do the same with marijuana.

LEAP understands that alcohol prohibition created gang wars over who would control that very lucrative illegal market. Innocent people and good cops died in that fight, and they are dying in this fight, too.

For 30 years, our high-school children have told us it is easier for them to buy marijuana than to buy beer and cigarettes, because when they buy illegal, unregulated drugs, no one asks them how old they are. Shouldn't we try to make it at least as hard for them to buy marijuana as it is to buy beer and cigarettes?

Nearly all studies show that countries or states that have modified their repressive drug laws experience a decline in drug use by teenagers. The Netherlands decriminalized marijuana use for adults 40 years ago, and marijuana use there is nearly half as prevalent as it is in the U.S.

A key part ending this failed drug policy is legalizing marijuana, thereby taking the marketplace away from the control of drug gangs and regulating distribution, just as we do with alcohol and cigarettes.

Again, thank you for allowing me to offer my perspective as a former state trooper and as a current member of *Law Enforcement Action Partnership*.

Dominick F Bucci

New Jersey State Police

Retired

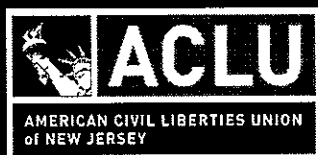


MAY 2017

Unequal & Unfair

New Jersey's War on Marijuana Users

A REPORT BY THE AMERICAN CIVIL LIBERTIES UNION OF NEW JERSEY



Acknowledgments

The data analysis for this report was conducted by Will Bunting and Becca Cadoff. The primary author was former ACLU-NJ Public Policy Director Ari Rosmarin. The methodology of the report was conceived of by Will Bunting and Lynda Garcia, whose 2013 report, *The War on Marijuana in Black and White*, changed the course of the marijuana policy discussion in the United States and laid the groundwork for this report.

The report was edited by ACLU-NJ Communications Director Allison Peltzman and former ACLU-NJ Executive Director Udi Ofer.

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Thank you to the steering committee of New Jersey United for Marijuana Reform, a remarkable, unlikely group of passionate and dedicated reformers whose work to legalize marijuana in New Jersey will make history.

The ACLU-NJ offers additional gratitude to the ACLU's Campaign for Smart Justice, the Fund for New Jersey, the Vital Projects Fund, and David Cushing for their ongoing support of the ACLU-NJ's work to reform New Jersey's failed marijuana laws.

The American Civil Liberties Union of New Jersey is the state's leading organization dedicated to defending and advancing civil liberties and civil rights. Whether in the courts, legislatures, or in communities, the ACLU-NJ fights on a daily basis for racial justice, criminal justice reform, drug law reform, and reforms to policing practices, among other causes. With tens of thousands of members, activists, and supporters, the ACLU-NJ works in every corner of our state to defend the principle that every individual's rights must be protected equally under the law, regardless of race, religion, gender, sexual orientation, age, disability or national origin.



New Jersey United for Marijuana Reform is a partnership of public safety, medical, civil rights, faith, political and criminal justice reform organizations and individuals committed to changing New Jersey's laws to legalize, tax, and regulate marijuana for adults. NJUMR believes it's time to move away from our failed approach to marijuana, and build a safe, controlled and regulated system. It works to reform New Jersey's marijuana laws because fairness and public safety demand nothing less. Learn more at www.njmarijuanareform.org.

Unequal & Unfair: New Jersey's War on Marijuana Users
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Table of Contents

5	Executive Summary
10	Methodology
15	Timeline of New Jersey’s Marijuana Prohibition Laws
16	The Consequences of a Marijuana Arrest
18	Cost Savings
20	Marijuana Possession Arrests In New Jersey
20	- <i>The Numbers: State of New Jersey</i>
26	- <i>The Numbers: Counties</i>
34	- <i>The Numbers: Legislative Districts</i>
40	- <i>The Numbers: Municipal Police Departments</i>
52	Recommendations
58	Appendix

Executive Summary

The Problem

New Jersey's marijuana laws are failing us.

Law enforcement has unsuccessfully tried for more than 80 years to arrest marijuana use out of existence, but support for making it legal is greater than it's ever been. Each year, New Jersey police make increasingly more marijuana possession arrests, yet the state has little to show for it. Prohibition has failed. It's time for common sense.

New Jersey's arrest practices for marijuana possession illustrate the failure of marijuana enforcement. They have a devastating impact of aggressive, costly, racially disparate punishment for use of a drug that for adults is less dangerous than alcohol.

For the first time ever, the analysis in this report takes a deep dive into New Jersey's marijuana possession arrest practices. What it finds is deeply troubling: New Jersey is making more arrests for marijuana possession than ever in a manner that is more racially disparate than ever.

Indeed, our marijuana arrest problem is getting worse, not better.

Key findings of the report include:

- **New Jersey is making more arrests for marijuana possession than ever before.** In 2013, New Jersey law enforcement made 24,067 marijuana possession arrests, 26 percent more than in 2000, when police made 19,607 arrests. Between 2000 and 2013, New Jersey police made nearly 280,000 total marijuana possession arrests.
- **Police make a marijuana possession arrest in New Jersey on average every 22 minutes.** This plays out with varying frequency around the state. Cape May was the county with the highest per capita arrest rate in 2013, and the 28th Legislative District, represented by Senator Ron Rice and Assembly members Ralph Caputo and Cleopatra Tucker, was the district with the highest per capita arrest rate that year. Seaside Park in Ocean County had the highest per capita arrest rate of any community in the state.

- **Racial disparities in New Jersey marijuana arrests are at an all-time high.** The racial disparity in marijuana possession arrests reached an all-time high in 2013. That year, Black New Jerseyans were three times more likely to be arrested for marijuana possession than whites, despite similar usage rates. In 2000, Blacks were 2.2 times more likely to be arrested than Whites, an increase of 34 percent. In 2013, Blacks were 11.3 times more likely to be arrested than whites in the 21st Legislative District. And in Point Pleasant Beach, Blacks were 31.8 times more likely to be arrested for marijuana possession than whites in 2013 — the highest racial disparity of any municipality included in the study.
- **New Jersey wastes more than \$143 million per year to enforce our marijuana possession laws.** Adding up the cost of police, courts, and corrections, New Jersey expends tremendous resources to implement and enforce marijuana prohibition. Indeed, throughout the past decade, New Jersey has spent more than \$1 billion to enforce these laws. These are resources that could be invested in treatment, education, prevention, or other community needs.
- **Nine out of ten marijuana arrests are of users, not dealers.** In 2013, marijuana possession arrests made up 88 percent of total marijuana arrests statewide. In other words, nearly nine out of 10 arrests made for marijuana were not of dealers or kingpins, but rather New Jerseyans who possessed the lowest amount counted by New Jersey law. In Monmouth County, this number reached 95 percent. It was 97 percent in the 8th Legislative District. In 14 New Jersey communities included in the study, 100 percent of arrests were for low-level possession in 2013.

These findings are particularly troubling when one understands the potential collateral: jail, loss of one's job, a criminal record for at least three years, driver's license suspension, up to \$1,255 in fines and fees, and potential consequences for one's immigration status, financial aid eligibility, access to public housing, and the ability to adopt children.

Indeed, many New Jerseyans' lives have been disrupted or damaged by marijuana arrests. This report features but a few of them. In one, Lee, a Newarker in his late 40s, was home with his wife one evening and saw officers on their porch, looking for a suspect. He asked if they needed help, and the officers barged in, forcing Lee and his wife on the floor. Lee told officers that they had a small amount of marijuana — less than an ounce. They arrested him for marijuana possession, traumatizing him and his wife in the process.

STORIES OF ENFORCEMENT

Lee's story:

A Full-On Raid for Less Than an Ounce of Marijuana

It was Halloween night, and Lee's four children, between 5 and 11 at the time, were all at a family party. With the house to themselves, Lee and his wife were going to have a romantic evening.

It didn't go according to plan.

Lee, a professional wedding singer and lifelong Newarker in his late 40s, noticed a bright light in the alleyway of his home in Newark, not far from the border with Irvington. After asking through a cracked window if everything was all right, police officers responded that they were chasing someone in the alley.

Seconds later, police in riot gear bashed in his door. Lee immediately told the officers, who had brought rifles and dogs, about the three small baggies of marijuana in the bedroom. Together, they totaled less than an ounce.

The officers threw him and his wife, an employee of the public schools, onto the floor and handcuffed them, both wearing only underwear. The police tore a door from the hinges and ripped open pillows — even though the pillows had zippers, Lee said. Leaving a trail of holes in the walls, the officers arrested Lee for marijuana possession.

"It was traumatizing. It was embarrassing," Lee said about the impact of the search and arrest on him and his wife.

His children asked the next day why their rooms were torn apart.

"I told them the police came to search for something," Lee said. "I try not to lie to them. If they had been there when the police came, I don't know what would have happened."

To fulfill his sentence of community service, he spent a few days cleaning at New Hope Baptist Church, the house of worship where Whitney Houston's funeral was held.

"It's ridiculous," he said when asked about the criminalization of marijuana possession. "I'm a functioning member of society. I support my family. I don't see it as any different from coming home and having a beer."

"There are a lot of people who smoke marijuana, and there are a lot of people in non-urban communities who use marijuana," Lee said. "But they're not the ones getting arrested."



Lee, at the church where he performed community service for less than an ounce of pot

A Solution Within Reach

Stories like Lee's put a human face on the nameless data points in this report, showing the unnecessary devastation that lurks behind each of the more than 24,000 marijuana arrests each year. And it's stories like his that have led civil rights leaders, elected officials, law enforcement professionals, doctors, religious leaders, and the majority of New Jerseyans to support the call to legalize, tax, and regulate marijuana for adults in New Jersey.

Their voices are found throughout this report, including those of Richard Smith, President of the NAACP New Jersey State Conference; Lt. Dominick Bucci, a retired New Jersey State Police narcotics detective; Dr. David Nathan, a Clinical Associate Professor at the Rutgers Robert Wood Johnson Medical School and Distinguished Fellow of the American Psychiatric Association; Rev. Craig Hirshberg, former director of the Unitarian Universalist Legislative Ministry; Leo M. Bridgewater, a U.S. Army veteran of Operation Iraqi Freedom; and Lazaro Cardenas of the Latino Action Network.

With nearly 60 percent of New Jerseyans supporting the legalization, taxation, and regulation of marijuana for adults, according to a 2015 Rutgers Eagleton poll, these leaders are not alone.

Police make an average of 66 new marijuana possession arrests every day. New Jersey cannot afford to wait any longer to put an end to our broken system of marijuana prohibition. New Jersey communities—particularly communities of color—continue to bear the brunt of our failed policies. The time to end this injustice is now.

Key recommendations from the report include:

- **New Jersey should legalize, tax, and regulate marijuana for adults.** It's time for a law to end marijuana prohibition and replace it with a safe, legal, regulated marijuana system. New Jersey should build a system that ends criminalization and mitigates the past harms of our marijuana laws; keeps marijuana out of the hands of young people; bolsters the New Jersey economy; keeps "Big Marijuana" from dominating the marketplace; and reinvests in the health, safety, and economic well-being of New Jersey communities, including those disproportionately impacted by our failed enforcement of prohibition.
- **The State should require police departments to properly record Hispanic/Latino arrest data.** The absence of data on the number of Hispanics/Latinos arrested likely leads to an artificially lower black-white racial disparity. The Legislature or Attorney General should require police departments to keep track of the number

of Hispanic/Latino arrests for marijuana possession to properly assess the law's impact on the Hispanic/Latino community.

- **The New Jersey Attorney General should investigate causes of racial disparities in arrests.** With consistent government data showing that whites and Blacks use marijuana at largely the same rates, the growing racial disparity in arrests for marijuana possession in New Jersey demands further scrutiny to determine the *cause* of such disparities. This investigation could also shed light on persistent racial disparities throughout the New Jersey criminal justice system, not just in marijuana arrests.

By moving forward to finally end our broken system of marijuana prohibition, New Jersey would not be taking a radical or unprecedented step. States across the country and nations around the world are rapidly moving toward legalization. Reform of our marijuana laws is a civil rights priority and a key component of reforming our broken criminal justice system.

Methodology

This report relies on the Federal Bureau of Investigation's Uniform Crime Reporting Program (FBI/UCR Program) and the United States Census' annual county population estimates by age, sex, and race to document arrest rates per 100,000 people for marijuana possession by race. This report is the first to examine and document these data for New Jersey law enforcement agencies and to aggregate marijuana arrest UCR data by legislative district.¹

This report provides a purely descriptive analysis. In other words, the data is used to describe the problem of racial disparities in marijuana possession arrests, and not to identify why such disparities exist.

To calculate the arrest rates of whites and Blacks on marijuana possession charges in a given jurisdiction, the number of arrests for whites and for Blacks for marijuana possession is divided by the white and Black population, respectively, in the given jurisdiction (e.g., the county or legislative district). The corresponding ratios are each then multiplied by 100,000 to obtain the arrest rate per 100,000 people for each.

In this report, the measure of racial disparity in a given jurisdiction in terms of arrests for marijuana possession is calculated as the ratio of the Black arrest rate to the white arrest rate. So, for example, a racial disparity measure (or ratio) of three implies that the rate at which Blacks are arrested for marijuana possession is three times the rate at which whites are arrested for marijuana possession.

The marijuana possession arrest data presented in this report were obtained from the FBI/UCR Program. This program annually collects data from state and local law enforcement agencies. In particular, the two main FBI/UCR data sets used in the report are:

- Uniform Crime Reporting Data [United States]: Arrests by Age, Sex, and Race [Alternative Title: ASR], 2001-2013.
- Uniform Crime Reporting Data [United States]: County-Level Detailed Arrest and Offense Data, 1995-2013.

¹ The methodology of analysis in this report closely tracks that conducted in the 2013 ACLU report *The War on Marijuana in Black and White*. For a more detailed explanation of the methodology conducted here, see AMERICAN CIVIL LIBERTIES UNION, *THE WAR ON MARIJUANA IN BLACK AND WHITE* 29 (2013), available at <https://www.aclu.org/files/assets/aclu-thewaronmarijuana-rel2.pdf>.

Both series are publicly available through the Inter-University Consortium for Political and Social Research (ICPSR) at the University of Michigan.

Annual county population estimates by age, sex, race, and ethnicity were drawn from the United States Census:

- U.S. Census Bureau, Annual County Resident Population Estimates by Age, Sex, Race, and Hispanic Origin: April 1, 2000, to July 1, 2010.
- U.S. Census Bureau, American Community Survey Demographic and Housing Estimates, 2009-2013 American Community Survey Five-Year Estimates.

Finally, the fiscal cost analysis utilizes the aforementioned arrest data and draws supplemental data from the Justice Expenditure and Employment Extracts, 2012:

- Bureau of Justice Statistics, Criminal Justice Expenditure and Employment Extracts (CJEE) Program, Percent Distribution of Expenditure for the Justice System by Type of Government, Fiscal Year 2012. (Filename: jeeus1203.csv).

This expenditure data is drawn from the Census Bureau's Annual Government Finance Survey and Annual Survey of Public Employment. This series includes national-, federal-, and state-level estimates of government expenditures and employment for the following justice categories: (1) police protection; (2) all judicial functions (including prosecution, courts, and public defense); and (3) corrections.

The Hispanic/Latino Data Problem

This report's sole focus on Black-white racial disparities is the result of the fact that the FBI/UCR arrest data does not identify Hispanics/Latinos as a distinct racial group and thus does not distinguish between white and Latino arrests. In other words, an arrest of a Hispanic/Latino person is often categorized as a "white" arrest. This conflation of Hispanic/Latino and white arrests not only prevents calculation of Latino arrest rates based on the UCR data, but also results in an underestimation of the racial disparities between Black and white arrests, since a portion — potentially a significant portion in some places — of the "white" arrests are likely arrests of Hispanics/Latinos.

Put another way, classifying Hispanics/Latinos as whites for the purposes of reporting arrest data to the FBI/UCR Program can inflate the "true" white arrest rate and, in turn, deflate the "true" racial disparity in arrest rates between whites and Blacks. Therefore, in any jurisdiction where the Hispanic/Latino arrest rate is greater than the white arrest rate — which we suspect is the case in some jurisdictions in New Jersey — the arrest rate disparities between Blacks and whites will be even more pronounced than the disparities as captured by the FBI/UCR data.

To understand the distortional effect of underreporting arrests of Hispanics/Latinos, suppose that there are an equal number of whites, Latinos, and Blacks in a jurisdiction, and that the true arrest rates for these three groups are 100, 200, and 300, respectively. If all Hispanics/Latinos are classified as white, then the reported "white" arrest rate would be calculated as 150, implying a Black/white racial disparity of 2 ($= 300$ (Black arrest rate)/150 (white arrest rate)) when, in fact, the true racial disparity is 3 ($= 300/100$).

Counting and Classifying Marijuana Possession Arrests

The FBI/UCR Program counts one arrest for each separate instance in which a person is arrested, cited, or summoned for an offense. Because a person may be arrested more than once during a year, the FBI/UCR arrest numbers used in this report do not reflect the actual number of individuals who have been arrested; rather, the arrest data shows the total number of times that individuals have been arrested, as reported by law enforcement agencies to the FBI/UCR Program.

Further, when someone is arrested for multiple crimes arising from a single police enforcement action, the FBI/UCR Program calls it a "multiple-offense situation." As a general rule, a multiple-offense situation requires classifying each of the offenses committed and

determining which of them are Part I offenses as opposed to non-Part I offenses.²

The Hierarchy Rule, as described in the FBI/UCR Handbook, requires that in a multiple-offense situation — when more than one Part I offense is classified — the law enforcement agency must identify the offense involved that is highest on the hierarchy list and score only that offense and not any others.

Most relevant for present purposes, in a multiple-offense incident involving, for example, both Part I (e.g., Robbery — Other Dangerous Weapon) and non-Part I offenses (e.g., Marijuana — Possession), only the Part I offense, Robbery — Other Dangerous Weapon, must be classified and scored. The arrest for marijuana possession would not be reported in this situation. Thus, any racial disparity observed in the FBI/UCR data with respect to marijuana possession is not a product of differential arrest rates for Part I crimes, as marijuana possession offenses are not recorded with respect to these offenses. By contrast, in a multiple-offense incident involving marijuana possession and a traffic violation — neither of which constitutes a Part I offense — the enforcement action is coded as both a marijuana possession arrest and a traffic violation (i.e., the hierarchy rule does not apply in this situation).

Arrest Data by Legislative District

The analysis conducted on marijuana arrests in each New Jersey legislative district was completed by matching data from municipal arresting agencies with the legislative district in which they are located. In other words, data from all of the arresting agencies located within a particular legislative district make up that district's arrest data. There are two important disclaimers to this method: first, arrests made by county agencies or statewide agencies, such as New Jersey Transit Police, the Port Authority Police, or the State Police, are not assigned to a particular legislative district or locality.

Second, in Newark and Jersey City, sections of each city are located in different legislative districts from other sections in the city. Newark is located in both the 28th and 29th legislative districts. Jersey City is located in both the 31st and 33rd legislative districts. For the purposes of this analysis, we have allocated the share of arrests from each municipality in accordance with the percentage of the population of that municipality that lives in each legislative district. For example, 61.5 percent of Newark's population resides in the 29th legislative district. Accordingly, we assigned 61.5 percent of the arrests by the Newark Police Department for marijuana possession to the 29th legislative district. While this proportional

² Part I offenses include: (1) Criminal Homicide, (2) Forcible Rape, (3) Robbery, (4) Aggravated Assault, (5) Burglary, (6) Larceny-Theft (except Motor Vehicle Theft), (7) Motor Vehicle Theft, and (8) Arson. See U.S. DEP'T OF JUST., FED. BUREAU OF INVESTIGATION, UNIFORM CRIME REPORTING HANDBOOK 8 [2004], available at <http://www2.fbi.gov/ucr/handbook/ucrhandbook04.pdf>.

allocation remains an imperfect methodology — there likely are sections of each city that have a higher rate of marijuana possession arrests than others — this is the best proxy we were able to make. Because the FBI/UCR data do not include the precise location of arrests, we were unable to determine the specific legislative district in which a particular arrest was made within the municipalities that span more than one district.

Note on Arrest Data by Municipality/Arresting Agency

The municipalities included in the report either made at least 30 marijuana possession arrests in 2013 or made an average of 30 marijuana possession arrests per year within 2000-2013.

Arrests made by statewide agencies, such as New Jersey Transit Police, the Port Authority police, or the State Police, are not assigned to a particular legislative district or locality. Therefore, the statewide total of marijuana arrests is higher than the sum of the data from individual municipalities and arresting agencies.

Doubts Remain About Accuracy of Federal UCR Arrest Data

Recent experience shows that the arrest numbers reflected in the FBI's Uniform Crime Reports may be undercounted, with significant ramifications for calculating racial disparities in arrests.

For example, the 2015 ACLU of New Jersey report, *Selective Policing*, revealed that when the ACLU-NJ obtained information about Jersey City's marijuana possession arrests from a manual Jersey City Police Department recount of all 2011 arrest reports, it revealed a *significantly higher number of arrests than Jersey City had reported to the FBI/UCR for that year*.³

Further, using numbers provided by the JCPD via the Open Public Records Act, and the inclusion of Hispanic/Latino data from that data (which the FBI/UCR data does not include), Jersey City's Black-white racial disparity in marijuana arrests in 2013 was calculated to be 8.4.⁴

According to the analysis in this report based *solely* on FBI/UCR data, the Black-white racial disparity for marijuana possession arrests in Jersey City in 2013 was only 2.9. This

³ Lynda Garcia, ACLU OF NEW JERSEY, *SELECTIVE POLICING 18-19* (2015), https://www.aclu-nj.org/files/7214/5070/6703/2015_12_21_aclunj_select_enf.pdf.

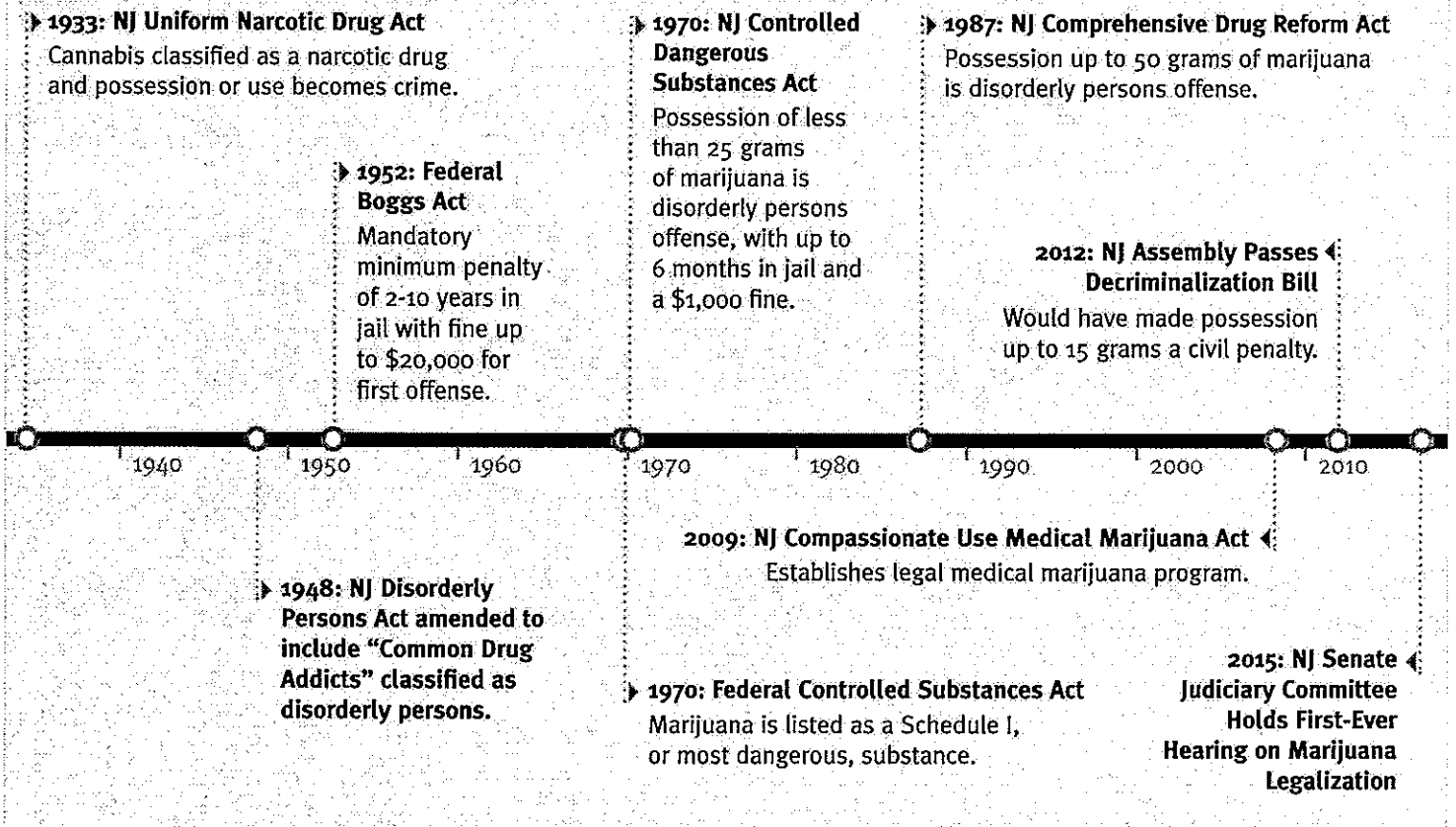
⁴ *Id.* at 21.

significant difference raises fundamental questions about UCR reporting practices by police departments throughout New Jersey. While close analysis of Jersey City's data revealed a particularly troubling gap, it is very likely not alone in this regard.

Despite these discrepancies, we have used FBI/UCR arrest data for all municipalities analyzed in this report as a way to create a consistent source of data for the purposes of comparison among municipalities.

“According to the analysis in this report based solely on FBI/UCR data, the Black-white racial disparity for marijuana possession arrests in Jersey City in 2013 was only 2.9.”

Timeline of New Jersey Marijuana Prohibition Laws



The Consequences of a Marijuana Arrest

A Marijuana Arrest is a Big Deal: Collateral Consequences of Arrests

An arrest for a single marijuana cigarette in New Jersey can create devastating consequences for someone's life. With over 200,000 marijuana possession arrests in the past decade, our marijuana laws have done serious damage to our family members, neighbors, and friends.

Consequences for one adult marijuana possession arrest could include:



UP TO 6 MONTHS IN JAIL



LOSS OF EMPLOYMENT



DRIVER'S LICENSE SUSPENSION FOR UP TO 2 YEARS



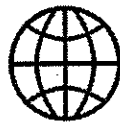
CRIMINAL RECORD FOR AT LEAST 3 YEARS



ARREST WARRANT FOR FAILURE TO PAY FINES



UP TO \$1,255 IN FEES AND FINES



LOSS OF IMMIGRATION STATUS



LOSS OF STUDENT FINANCIAL AID



3-YEAR BAN FROM PUBLIC HOUSING



5-YEAR BAN FROM ADOPTION

STORIES OF ENFORCEMENT

Carrol's story:

Marijuana Saved Her Life, And Marijuana Enforcement Put it on Hold

When Carrol weighed 90 pounds and doctors told her she had weeks to live during her early days with HIV, using marijuana made her life more bearable. But in 2014, she said, enforcement of marijuana laws came close to ruining her life.

Carrol called 911 about newborn raccoons in her yard, not knowing what else to do. She thought the police outside were there to help, until they burst in and started searching her home. She then learned from the officers that law enforcement had been following her for months, suspicious that she was selling marijuana.

Carrol, a medical marijuana patient in her 40s from Bergen County, had a right to have marijuana in her home. Officers found seven grams and a plant and charged her with distribution, manufacturing, possession, and paraphernalia, within a school zone. All five people who were in the house, including Carrol's son, were put in handcuffs and arrested. She was held in jail on \$50,000 bail. She and her family managed to gather the thousands of dollars required for a bail bond, but they knew they would never get it back.

Because the police suspected her of selling, they seized \$3,600 in cash — gambling winnings. Carrol said they were still wrapped in paper identifying the casino, the Sands.

She and her family would lose more than money.

She told the EMTs her HIV-status during the arrest to keep them informed. When she said she was afraid of police beating her, they said she shouldn't worry — they didn't want to risk getting her blood on them. While in jail, she missed her life-saving medications for four days.

Because of the arrest, her lease was not renewed, and she and her family were forced to move. She had to see her doctor less often, and she had to borrow her nephew's car to get there. Most distressing to her, she had finished cleaning out the home of her mother, who had recently died, a day or two before the search. The police took her mother's mason jars that she had brought home, and she never got them back.

She was publicly humiliated when her mugshot appeared in the newspaper, because of less than an ounce of marijuana and a plant. Her son's girlfriend's first Google result is a mugshot because she happened to be at Carrol's house at the time of the search.

After everything, all of the charges were dropped except for a distribution charge, which was downgraded to a misdemeanor.

It took her a year and a month to get back her laptop and Chevy Equinox, which had been seized through civil asset forfeiture. When she did get the car back, it had two flat tires. She signed a settlement agreement after a civil forfeiture suit, agreeing to get only half the amount that was taken. She figured it was better than nothing.

"The marijuana laws are unjust, and the medical marijuana system in New Jersey just doesn't work," said Carrol. "Cannabis needs to be legalized here."

Cost Savings

The War on Marijuana Wastes Millions Every Year

Enforcement of our marijuana possession laws is a tremendous drain on our state resources. The criminal justice process associated with a marijuana possession arrest is complicated and often arduous. From beginning to end, hours of work performed by multiple agencies and branches of government are involved, and the costs add up.

First, there's investigative work involved in a stop. For an arrest, the officer has to handcuff the person and at the station fingerprint them, fill out paperwork, and book them. Even for short stays, the jail must pay guards and provide food and medical care for each pretrial detainee. Then, once the case is heard, it takes work from the judge, court staff, prosecutor, defense attorney, and many others. In many cases, witnesses such as drug recognition experts (DREs) and police officers, must be paid to testify in court or sit for depositions. If there's a conviction, that person may face additional jail time or get conditional release, requiring supervision by a probation officer.

All for one marijuana possession arrest.

These costs are not insignificant: according to the most recent data available, New Jersey made 24,086 marijuana possession arrests in 2012.⁵

Those arrests cost New Jersey taxpayers an estimated \$143,134,012 in 2012 alone.⁶

Over the past decade, New Jersey has spent over \$1 billion to enforce our marijuana possession laws.

⁵ At the time of the analysis for this section of the report, the complete data sets needed for determining this fiscal estimate were only available through 2012, despite the arrest data in this report continuing through 2013.

⁶ For budgetary sources used in this analysis, see the Methodology section of this report. The estimate is done by, for example, identifying the cost of total police time making arrests and calculating a fraction of that time based on the number of marijuana possession arrests out of total arrests. A similar calculus is done with corrections and court costs. For more details on this methodology, see *THE WAR ON MARIJUANA IN BLACK AND WHITE*, p. 68, *SUPRA* N. 1.

Legalization for Adults will Generate More Than \$300 Million Per Year in Direct Sales Tax Revenue

The legalization, taxation, and regulation of marijuana for adults will not just end the wasteful spending on enforcement, but it will also generate hundreds of millions of dollars in tax revenue for New Jersey.

New Jersey Policy Perspective and New Jersey United Marijuana Reform estimate that the state would ultimately bring in more than \$300 million per year in sales tax revenue from direct sales of marijuana within a few years of legalization.⁷

The report also predicted that the size of the marijuana market in New Jersey could reach \$1.2 billion. Legalization would bring other economic benefits not included in the direct sales tax estimates, including job creation, growth in business, research and development, and boosts in property, agricultural, business, and income taxes.

PROFILE



**Jon-Henry Barr, Current Secretary and Former President,
New Jersey State Municipal Prosecutors Association
(Clark, NJ)**

"As a prosecutor, I have spent thousands of dollars and countless hours taking police officers off the roads and into the courtroom, and at the end of the day, it is usually just over a joint. It's collectively brought me and so many prosecutors to the point where we believe that regulation is the only way to ensure that we are not wasting precious taxpayer dollars and we have the time to prosecute serious cases."

⁷ Brandon McKay & Ari Rosmarin, MARIJUANA LEGALIZATION & TAXATION: POSITIVE REVENUE IMPLICATIONS FOR NEW JERSEY (2016), https://www.njuwr.org/files/1214/6409/3531/2016_05_24_MJRRevenue.pdf.

Marijuana Arrests in New Jersey

Data provided to the FBI by New Jersey law enforcement agencies paint a deeply troubling picture of marijuana enforcement practices in the Garden State. With each passing year, our marijuana arrests grow in number, and the severity of the racial disparity in arrests grows.

These data reveal that New Jersey is arresting more people for marijuana possession than ever before. As states across the country move to legalize and decriminalize marijuana possession, New Jersey's enforcement practices are heading in the opposite direction.

The numbers are clear: New Jersey law enforcement's marijuana arrest crusade continues to grow and shows no signs of slowing.

Indeed, New Jersey's racial disparity in arrests was higher in 2013 than ever before. Likewise, low-level possession arrests make up a higher share of marijuana arrests than they ever have.

A majority of New Jerseyans support legalization.

THE NUMBERS: STATE OF NEW JERSEY

With so many marijuana possession arrests every year, it can be difficult to get a clear picture of how police enforce our marijuana laws in New Jersey. The statewide arrest data provide the best overall birds' eye view of what the war on marijuana really looks like in the state.

The trends are unmistakable: New Jersey is making more arrests of marijuana users than ever before, at a higher rate than ever before, and in a more racially disparate manner than ever before.

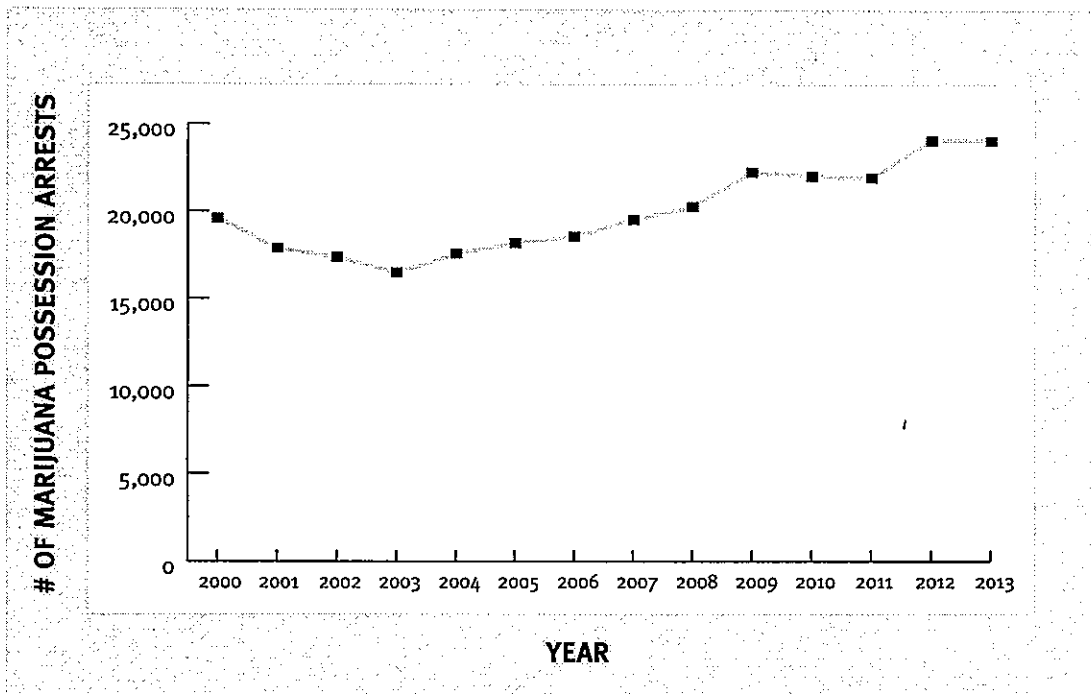
RECORD NUMBERS OF MARIJUANA ARRESTS

Between 2000 and 2013, New Jersey law enforcement agencies made 279,623 small-scale marijuana possession arrests. That number has steadily increased over time. Following a high of 19,607 in 2000, the arrest numbers dropped, only to increase again in 2008 with 20,265 arrests.

As a point of comparison, in 2003 law enforcement made 16,449 arrests, the lowest figure in the past 15 years. By 2013, ten years later, that number had reached 24,067 arrests, an increase of 46 percent.⁸

While there do not appear to be any identifiable law or policy changes that would impact the number of arrests since 2000, it is clear that the number of marijuana possession arrests in New Jersey has never been higher.

TABLE 1: NUMBER OF MARIJUANA POSSESSION ARRESTS, 2000 – 2013



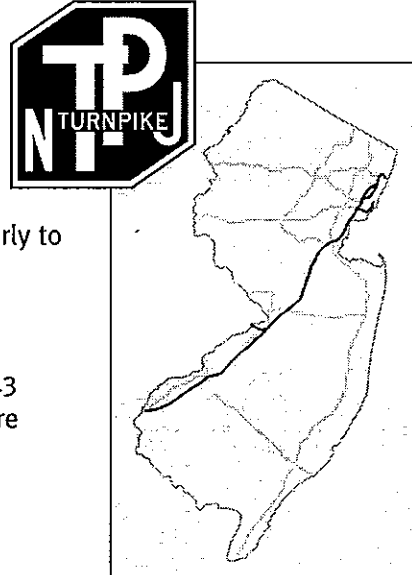
⁸ Though the data was not available at the time of analysis for inclusion in this report, New Jersey police reported 24,689 marijuana possession arrests in 2014. See New Jersey State Police, 2014 Uniform Crime Report (2016), <http://www.njsp.org/ucr/2014/index.shtml> (pg. 71).

46x

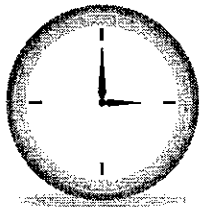
INCREASE IN MARIJUANA POSSESSION ARRESTS 2000 — 2013 vs. POPULATION INCREASE

There Were About 280,000 Arrests Between 2000 – 2013

The NJ Turnpike is 122.4 miles — which is 646,272 feet. If you lined up every person arrested for marijuana between 2000 and 2013, the line would stretch the entire length of the New Jersey Turnpike and beyond, nearly to the Maryland border.



Another way to look at it is that the number of people arrested for marijuana possession between 2000 and 2013 would roughly be the same number of people as the entire populations of Trenton, Camden, Morristown, Red Bank, Livingston, Montclair, and Atlantic City, combined.



Between 2000 – 2013: A marijuana arrest was made in New Jersey approximately once every 22 minutes.

To illustrate the number of arrests over time would mean that there were approximately **66 arrests per day** or **2.7 arrests per hour**.

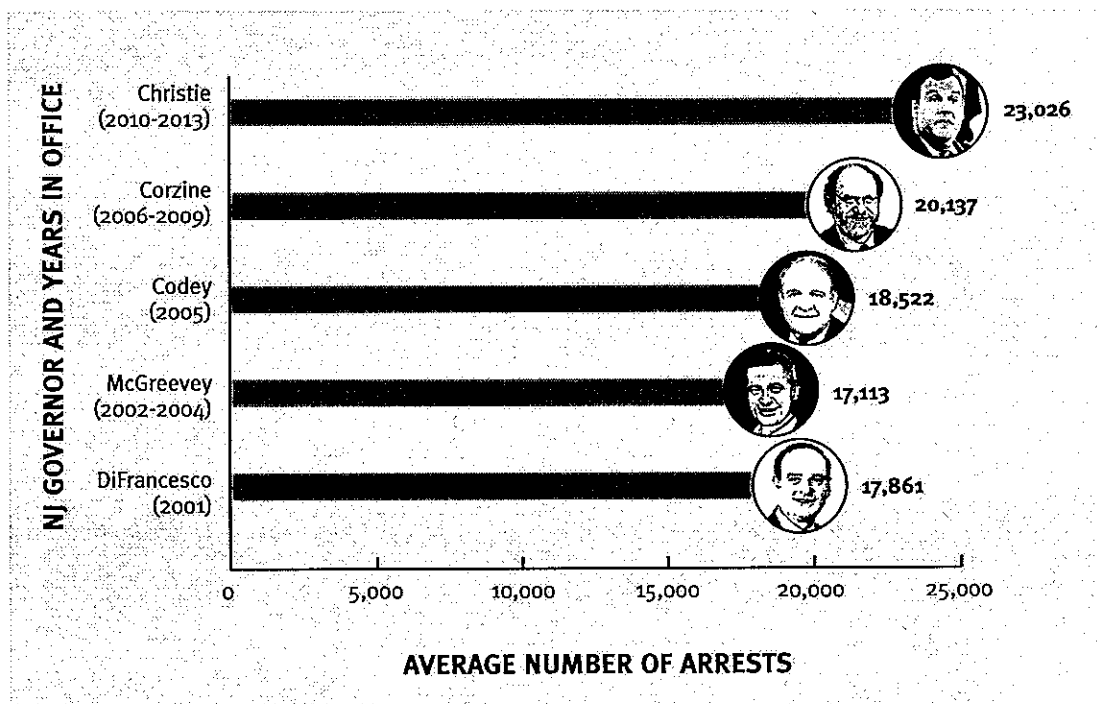
P R O F I L E



Lt. Dominick Bucci (Ret.), Former New Jersey State Police, Law Enforcement Action Partnership

"I spent 25 years as a New Jersey State Trooper, retiring with the rank of Lieutenant, and dedicated much of my life to fighting crime in our state. I spent 22 of my 25 years of service working as a narcotics detective. As somebody who made many arrests for marijuana possession, I have come to the conclusion that our marijuana laws are a failure, that they do not improve public safety, and that New Jersey should move towards legalizing and regulating marijuana for adults."

TABLE 2: AVERAGE NUMBER OF ARRESTS PER YEAR BY NJ GOVERNOR⁹



Worst Racial Disparities on Record

Between 2000 and 2013, Blacks in New Jersey have been, on average, approximately 2.5 times more likely to be arrested for marijuana possession than whites, despite similar usage rates.¹⁰

In 2013, that disparity reached an all-time high of 3 times more likely.

⁹ Governor Christine Whitman is not included on this chart, although her term of office included the arrests in the year 2000, which is a part of this report. Further, though calendar years do not align with terms of office, we have assigned governors full calendar years because we do not have access to monthly or daily marijuana arrest numbers. Though Governor DiFrancesco took office January 31, 2001, and left office January 8, 2002, we have assigned him calendar year 2002. Similarly, Governor McGreevey took office January 15, 2002, and left office November 15, 2004, but we have assigned him 2002-2004. Governor Codey took office November 15, 2004 and left office January 17, 2006, but we have assigned him 2005. Governor Corzine took office January 17, 2006 and left office January 19, 2010, but we have assigned him 2006-2009. Though Governor Christie took office January 19, 2010, and currently remains in office, we have charted his first term as 2010-2013.

¹⁰ According to the 2013 National Survey on Drug Use and Health (NSDUH), Blacks and whites use marijuana at similar rates. See http://www.icpsr.umich.edu/quicktables/quicksetoptions.do?reportKey=35509-0001_all%3Az (In "Measures of Marijuana Use" drop-down menu, select "Ever Used Marijuana." In "Respondent Characteristics" drop-down menu, select "Race and Ethnicity", then click "Create the Table"). In 2013, 42.1 percent of Blacks reported having ever used marijuana, while 48.9 percent of whites reported having ever used marijuana. Similarly, 5.3 percent of Blacks reported having used marijuana in the past year, while 5.2 percent of whites reported using marijuana in the past year.

TABLE 3: RACIAL DISPARITY RATIO STATEWIDE, 2000 – 2013

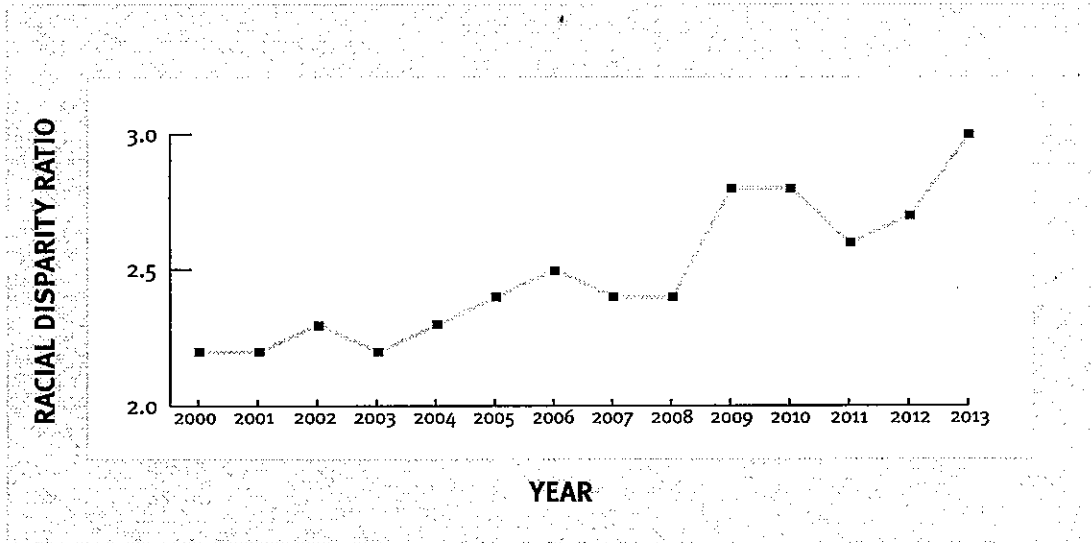
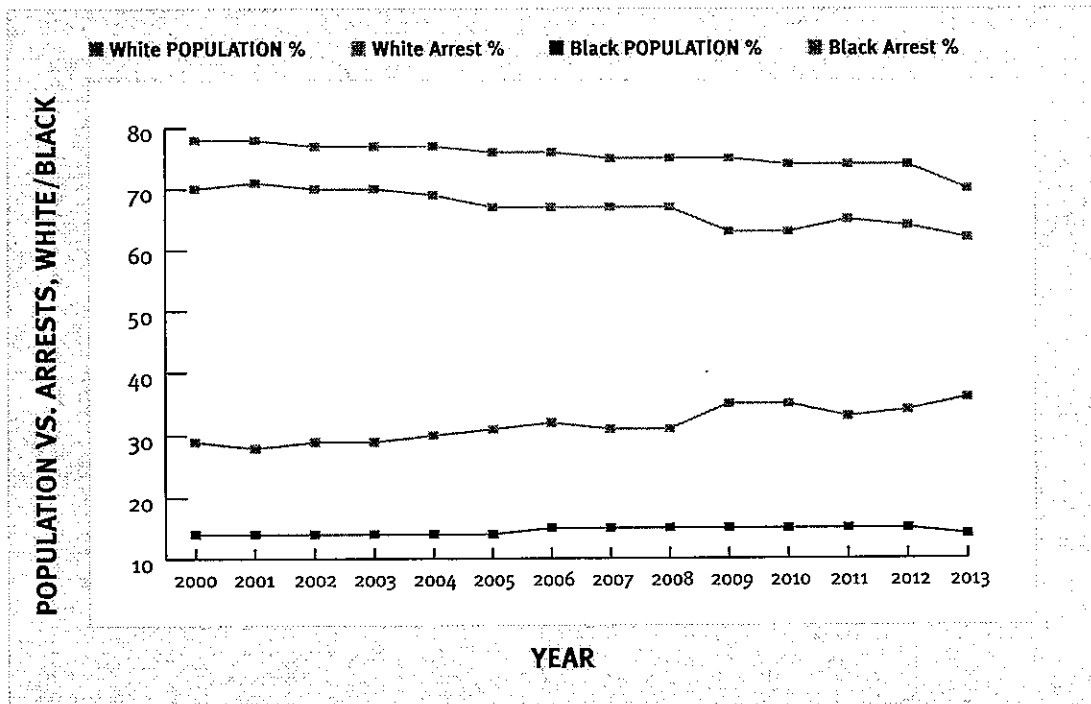


TABLE 4: POPULATION VS. ARRESTS, WHITE/BLACK, 2000 – 2013



49x

In 2013, although Black New Jerseyans made up 14 percent of the state population, they made up 36 percent of all marijuana possession arrests—an arrest rate three times the rate that white New Jerseyans face. While the percentage of the population of New Jersey that is Black has remained consistent since 2000 (14 percent), the Black community’s share of arrests has steadily grown (29 percent in 2000, 36 percent in 2013). It is now higher than ever.

This disparity raises deep and troubling questions about not just our marijuana enforcement practices—but racial disparities throughout New Jersey policing practices, and our broader criminal justice system.

Marijuana enforcement provides one of the clearest examples of unequal treatment under the law—government data tells us that Blacks and whites use marijuana at the same rates, but are arrested at vastly different rates. Over time, this disparity in enforcement contributes to devastating collateral consequences borne far more greatly by one community—Black New Jerseyans—than others. An arrest can lead to jail time, heavy fines and fees, loss of employment or educational opportunities, immigration consequences, and more.¹¹ While some New Jerseyans may have the wherewithal to hire a lawyer and seek expungement of their arrest or conviction records, many do not. For the majority, a marijuana arrest follows them for the rest of their lives. If Black lives are to matter as much as white lives in New Jersey, our marijuana possession enforcement practices must end.

P R O F I L E



Dianna Houenou, American Civil Liberties Union of New Jersey
(East Orange, NJ)

“Marijuana criminalization hurts our state by taking people out of the workforce, jeopardizing housing and educational opportunities, and costing taxpayers millions of dollars to enforce unjust, unnecessary laws. Despite the fact that marijuana usage rates are similar among all racial groups, New Jersey continues arresting Blacks at a higher rate than any other racial group. New Jersey has a choice to make: does it want to spend more than \$143 million each year to enforce these unnecessary, harmful laws, or does it want to collect more than \$300 million each year in revenue? Marijuana legalization makes sense for our finances and for racial justice.”

¹¹ See [Collateral Consequences section in this report pg. 16]

60x

STORIES OF ENFORCEMENT

Omar's story:

Geography is Destiny in One Young Black Man's Arrest

Omar, a Black man in his early 20s, walked from his home in a public housing development to his cousin's home in Newark. An unmarked police car stopped him, and officers claimed they wanted to search him for a weapon. Instead, they found about six grams of marijuana — less than an ounce. But because he had \$80 on him, the officers charged him with intent to distribute within 1,000 feet of public housing or a school.

He was arrested and spent the night in a jail cell at police headquarters.

He was ordered to do community service, but the experience left him anxious. He hopes to re-enroll in college, but he worries this event has derailed his plans.

Omar's story illustrates the geographic disparities in marijuana enforcement. Because Omar lives in public housing within a dense city, in close proximity to schools, a charge for marijuana will almost as a rule be more severe.

Police Target Marijuana Users, Not Dealers

New Jersey's own war on marijuana has not been a war waged on drug dealers or kingpins. Rather, New Jersey police have targeted individuals who commit the lowest-level marijuana possession offense on the books. These are individuals who have small amounts of marijuana for personal use (less than 50 grams of marijuana).

Between 2000 and 2013, almost nine out of 10 arrests for marijuana offenses were for possession of less than 50 grams.

In 2013, 88 percent of marijuana arrests were for small-scale possession, the highest proportion of any year studied.

The Numbers: New Jersey Counties

Marijuana Arrest Rates in Each County Vary Throughout the State

An analysis of marijuana possession arrests in each New Jersey county shows that police take varying approaches to marijuana across the state. While the counties with the largest populations—such as Essex, Bergen, and Monmouth—tend to have the highest number of marijuana possession arrests, other counties, including some with the lowest populations—including Cape May and Salem—tend to have the highest arrest rates.

From 2000 to 2013, 28,993 people were arrested for marijuana possession by law enforcement in Bergen County, but it had only the 12th highest arrest rate of all counties over the same period. In 2013, police in Cape May County arrested people more than three times as often for marijuana possession than police in Hudson County.

“While the counties with the largest populations—such as Essex, Bergen, and Monmouth—tend to have the highest number of marijuana possession arrests, other counties, including some with the lowest populations—including Cape May and Salem—tend to have the highest arrest rates.”

Cape May County has had the highest marijuana possession arrest rate for all but five years since 2000. Gloucester County had the highest rate from 2004 to 2007. The seasonal influx of summer tourists to Cape May County each year may explain the unusually high arrest rate, but we do not have enough data to confirm that hypothesis.

In 2013, Salem County had the second-highest arrest rate of all New Jersey counties, but made the third-fewest number of arrests. Salem’s high arrest rate suggests either that police in Salem County are particularly aggressive in enforcing marijuana possession, or that they are arresting non-residents for possession more frequently than other counties do.

TABLE 5: NUMBER OF MARIJUANA POSSESSION ARRESTS BY COUNTY, TOTAL, 2000 – 2013

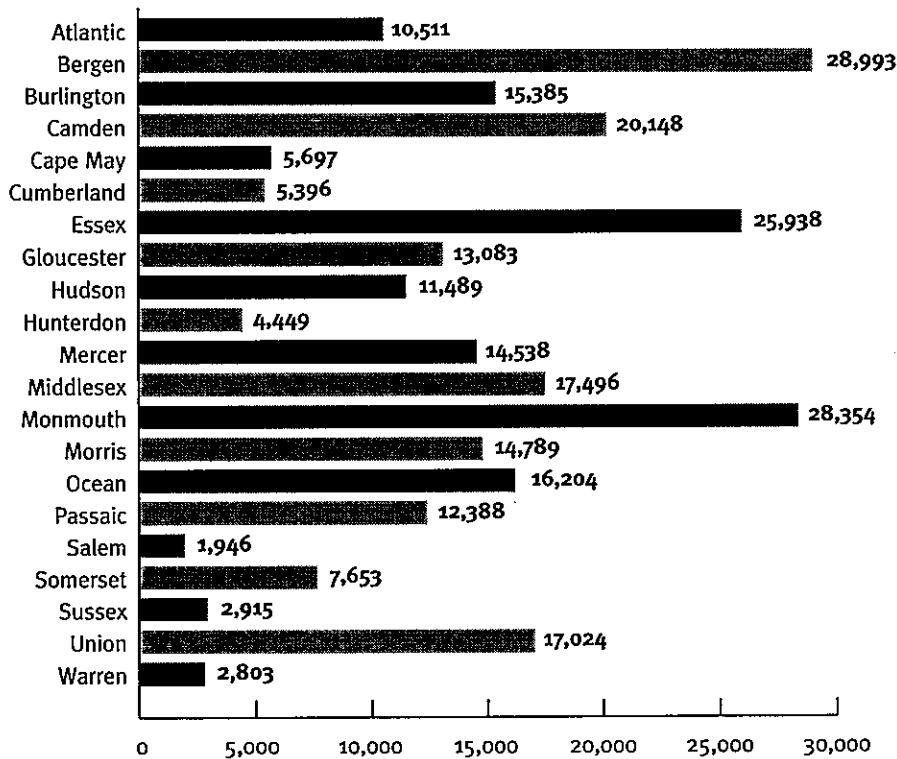


TABLE 6: PER CAPITA ARRESTS — 5 COUNTIES WITH HIGHEST PER CAPITA¹² MARIJUANA POSSESSION ARRESTS (Arrests Per 100,000 People)

Top five counties, 2000 – 2013:

Cape May	411
Gloucester	337
Monmouth	323
Mercer	287
Camden	281

Top five counties, 2013:

Cape May	487
Salem	475
Monmouth	406
Union	364
Cumberland	345

Blacks are Disproportionately Arrested for Marijuana in Every New Jersey County

While Blacks are disproportionately arrested for marijuana possession in every New Jersey county, some counties have particularly egregious enforcement disparities. These counties tend to have the smallest Black populations. For example, from 2000 to 2013, the four counties with the highest Black-to-white racial disparities over the period were Salem (4.5 times); Warren (4.3 times); Hunterdon (4.2 times); and Ocean (4 times). Warren, Hunterdon, and Ocean counties all have Black populations at three percent or lower.

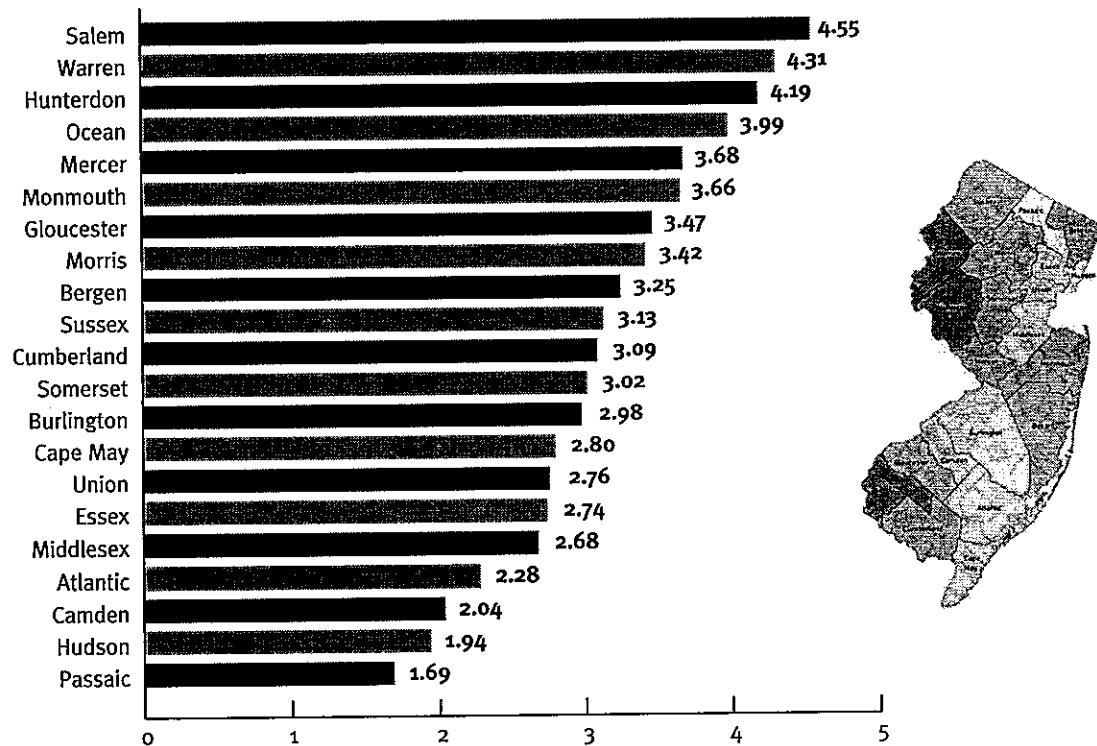
Blacks constitute 15 percent of Salem County, a similar percentage to Passaic and Hudson counties, which have among the lowest racial disparities in the state. Salem County has a particularly high arrest rate—and a very high racial disparity—raising troubling questions about enforcement practices. In 2013, Blacks made up 15 percent of Salem County's population, but 46 percent of the marijuana possession arrests.

In 2013, Blacks in all but two counties (Sussex and Passaic) were more than twice as likely to be arrested for marijuana possession than whites. In some counties, the disparity was much higher.

¹² The per capita figure here and in all subsequent sections was determined by calculating an arrest rate *per 100,000* residents.

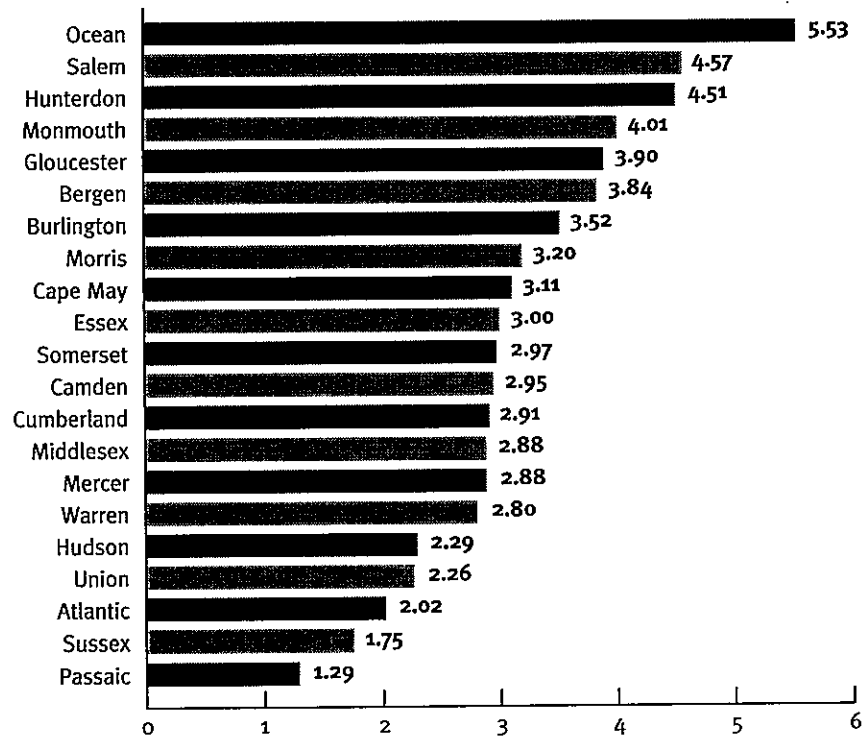
Police in no New Jersey county arrest Blacks and whites at an equal rate or at a rate in which whites are more likely to be arrested than Blacks. In 2013, Passaic County had the lowest racial disparity of any county; there, Blacks were arrested at a rate nearly 30 percent higher than whites. While that rate may appear insignificant in comparison to Ocean County, in which police arrested Blacks at a rate 5.5 times higher than whites, racial disparities are present throughout New Jersey counties despite varying geography, wealth, demographics, or political leadership.

TABLE 7: BLACK/WHITE RACIAL DISPARITY IN ARRESTS OVER TIME BY COUNTY, 2000–2013

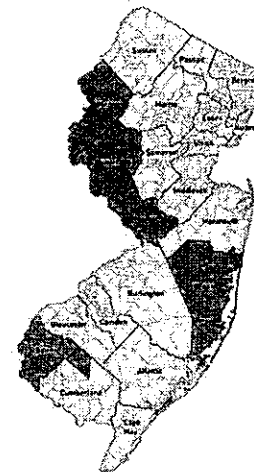
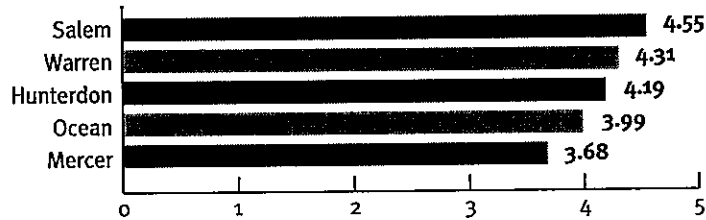


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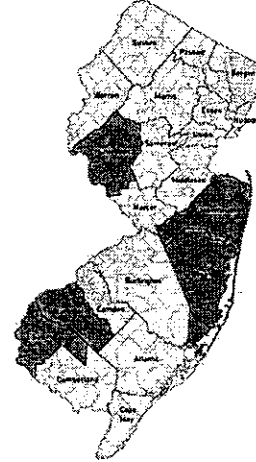
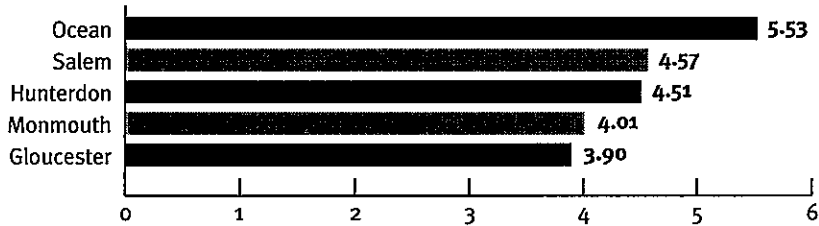
TABLE 8: BLACK/WHITE RACIAL DISPARITY IN ARRESTS BY COUNTY, 2013



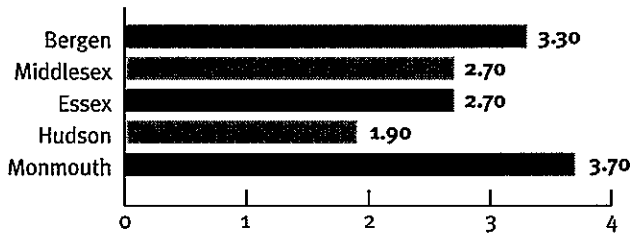
Top five counties with highest racial disparities, 2000 – 2013:



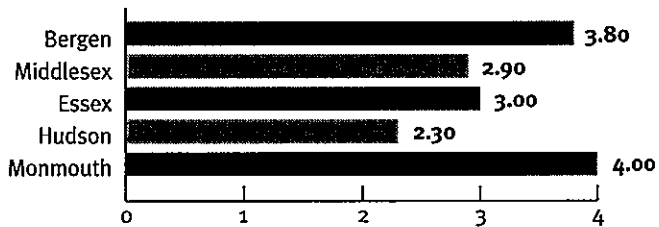
Top five counties with highest racial disparities in 2013:



Top five most populous counties' racial disparities, 2000 – 2013:



Top five most populous counties' racial disparities, 2013:



Star

In a Majority of Counties, At Least 9 Out of 10 Marijuana Arrests are for Small-Scale Possession

In twelve of New Jersey's 21 counties, at least nine out of ten arrests for marijuana were for small-scale possession between 2000 and 2013. In 19 out of 21 counties, that number was at least eight out of ten marijuana arrests.

Across the state, police are focusing their marijuana enforcement resources on arresting individuals who possess the lowest amount for personal possession, less than 50 grams. The counties with the lowest share of small-scale possession arrests trend toward counties that contain large cities. The counties with the three lowest shares of possession arrests between 2000 and 2013, Hudson (67 percent), Passaic (77 percent), and Essex (77 percent), each contain one of New Jersey's three largest cities: Jersey City (second largest), Paterson (third largest), and Newark (largest), respectively. This may indicate that urban police departments make more arrests for dealing marijuana than their counterparts in more rural or suburban communities.

In 2013, possession arrests made up 95 percent—or 19 out of 20—of total marijuana arrests by police in Monmouth County.

This focus on marijuana users, not dealers, raises troubling questions about police priorities if law enforcement's goal is to disrupt the illegal marijuana trade.

P R O F I L E



Dr. David Nathan, MD. Founder and Board President of Doctors for Cannabis Regulation
(Princeton, NJ)

"Throughout my career as a clinical psychiatrist, I have borne witness to the devastation brought upon cannabis users — not so much by misuse of the drug, but by a justice system that chooses a sledgehammer to kill a weed. The criminal consequences of marijuana use are far worse than the medical consequences. Marijuana possession should be legal for adults, and we should use revenues from marijuana taxation to educate young people about the actual harms caused by its recreational use."

TABLE 9: ALL COUNTIES' PERCENTAGE OF MARIJUANA ARRESTS THAT WERE FOR POSSESSION IN NJ, 2013

Monmouth	95%
Cape May	94%
Burlington	94%
Morris	93%
Hunterdon	92%
Atlantic	92%
Gloucester	91%
Warren	91%
Mercer	90%
Somerset	90%
Cumberland	90%
Ocean	89%
Bergen	88%
Sussex	88%
Union	87%
Passaic	85%
Middlesex	85%
Essex	85%
Salem	84%
Camden	84%
Hudson	72%

STORIES OF ENFORCEMENT

Scott's story:

A Medical Marijuana Patient Reports Domestic Abuse and Gets Arrested

The day after Scott kicked his ex-boyfriend out of their apartment in Sussex County, he got an unpleasant surprise: his ex, in his living room, grabbing things to take with him. Their argument escalated when Scott's ex-boyfriend stabbed him in the side, puncturing a lung.

Scott, a white man in his 20s, rushed to the police department to file a report about the assault. Officers searched the home when Scott was treated for his injuries, and they fixated on his marijuana.

Scott, a cardholding medicinal marijuana patient, uses the drug to manage Crohn's Disease. The police still arrested him for possession of marijuana. They also seized his marijuana and smoking apparatuses. His ex was arrested and charged with assault.

A judge ruled that officers had no right to search Scott's home, as his ex was already in custody, and the criminal charges were dropped. But the town appealed, keeping Scott embroiled in the legal system for more than two years after the incident, despite the illegal search and his status as a registered medicinal marijuana patient.

In December 2015, when an appeals court upheld the lower court's ruling, Scott still wasn't sure if he would ever get back his seized possessions.

The Numbers: Legislative Districts¹³

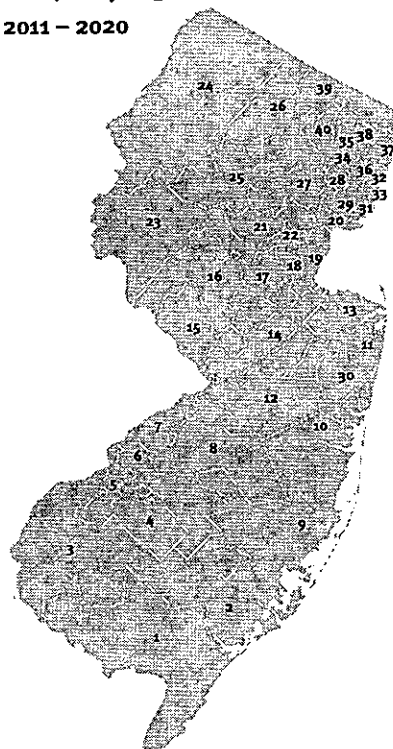
Arrest Rates Range Widely Among Legislative Districts, Despite Same Population Size

Each of New Jersey's 40 legislative districts holds approximately 220,000 residents, yet the number of marijuana possession arrests and accompanying arrest rates in each district varies widely. For example, police in the 26th legislative district, which includes parts of Essex, Morris, and Passaic counties, and is currently represented by Senator Joseph Pennacchio (R-Montville), Assemblywoman BettyLou DeCroce (R-Parsippany), and Assemblyman Jay Webber (R-Parsippany), made 218 arrests in 2013. However, police in the 37th legislative district, which includes parts of Bergen County, and is currently represented by Senator Loretta Weinberg (D-Teaneck), Assemblywoman Valerie Vainieri Huttler (D-Englewood), and Assemblyman Gordon Johnson (D-Teaneck), made 1,073 arrests, nearly five times as many as District 26.

Notably, the partisan affiliation of each district's representative also appears to bear no relationship to the arrest practices within a district. In 2013, the 26th legislative district, which was represented by Republicans in the Assembly and Senate, had the lowest arrest rate of any district. The 37th legislative district, represented by Democrats in the Assembly and Senate, had one of the highest. Conversely, the 11th legislative district, which was represented by Republicans, had the third highest arrest rate of any district, while the 31st legislative district, which was represented by Democrats, had the second-lowest.

Ultimately, changing New Jersey's laws to end our harmful and broken marijuana prohibition system will depend on the votes of state legislators. These elected officials represent constituents who are being arrested—and dealing with the devastating consequences associated with arrest—on a daily basis. In more than two out of three legislative districts, police made an average of one marijuana possession arrest every day in 2013. In some districts, police made multiple arrests per day on average.

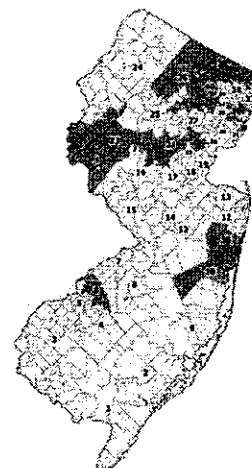
**New Jersey Legislative Districts
2011 – 2020**



¹³ The legislative districts analyzed here are the districts drawn by the New Jersey Apportionment Commission on April 3, 2011. See New Jersey State Legislative Districts: 2011-2020, <http://www.state.nj.us/state/elections/2011-legislative-districts/statewide-large.pdf>.

TABLE 11: PER CAPITA ARRESTS — 10 LEG DISTRICTS WITH HIGHEST PER CAPITA MARIJUANA POSSESSION ARREST RATES, 2013 (arrests per 100,000 people)

District 28	534
District 37	494
District 11	445
District 1	333
District 3	329
District 7	302
District 8	300
District 25	299
District 39	296
District 30	286



Disturbing Racial Disparities in Arrests in New Jersey’s Legislative Districts

In line with trends statewide, analysis of arrests within New Jersey’s legislative districts reveals severe racial disparities in many districts. Police in 38 out of 40 legislative districts arrest Blacks at a rate higher than whites for marijuana possession. In some districts, these disparities are extreme.

The 21st legislative district, which includes parts of Morris, Somerset, and Union counties, and is currently represented by Senator Tom Kean Jr. (R-Westfield), Assemblyman Jon Bramnick (R-Westfield), and Assemblywoman Nancy Muñoz (R-Summit), has the highest racial disparity of any district in the state. In 2013, Blacks in the 21st district were 11.3 times more likely to be arrested for marijuana possession than whites. Black New Jerseyans make up three percent of the district’s population but constituted 27 percent of the marijuana possession arrests.

There were two legislative districts in the state in which Blacks were underrepresented in arrests in 2013. In the 35th district, which includes parts of Bergen and Passaic counties, and is currently represented by Senator Nellie Pou (D-Paterson), Assemblywoman Shavonda Sumter (D-Paterson), and Assemblyman Benjie Wimberly (D-Paterson), whites were 6 percent more likely to be arrested than Blacks. In the 34th district, which includes parts of Essex County, and is currently represented by Senator Nia Gill (D-Montclair), Assemblywoman Sheila Oliver (D-East Orange), and Assemblyman Thomas Giblin (D-Clifton), whites were 63 percent more likely to be arrested for marijuana possession than Blacks.

60x

While there is no clear correlation between partisan political representation and the racial disparity in arrests, eight of the top 10 districts with the highest racial disparities are represented by Republican lawmakers in both houses of the Legislature. The legislative districts with the highest racial disparities have small Black populations—of the districts with the 10 highest racial disparities in arrests, all but one have Black populations of 7 percent or less. Conversely, of the districts with the 10 lowest Black-to-white racial disparities, all but three have Black populations of 20 percent or more.

The racial disparities present in New Jersey's legislative districts represent a civil rights crisis—but one with a clear solution. It is within the power of state lawmakers to vote to end marijuana prohibition and strike a blow to the severe racial injustices of New Jersey's marijuana arrest practices.

“The racial disparities present in New Jersey’s legislative districts represent a civil rights crisis—but one with a clear solution. It is within the power of state lawmakers to vote to end marijuana prohibition and strike a blow to the severe racial injustices of New Jersey’s marijuana arrest practices.”

P R O F I L E



Richard Smith, President NAACP New Jersey State Conference
(Bridgeton, NJ)

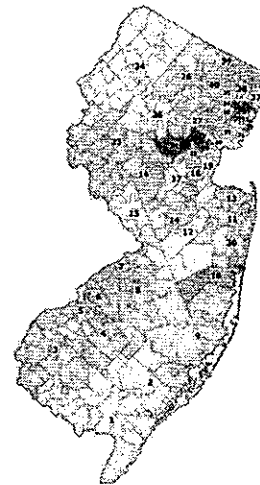
“New Jersey’s marijuana laws are failing people of color. Black New Jerseyans are three times more likely to be arrested for marijuana possession than whites, despite similar usage rates. Taxing, regulating, and legalizing marijuana possession will be a step forward in reducing the disproportionate burden the criminal justice system has placed on people of color in New Jersey. Legalization will eliminate thousands of arrests per year and generate revenue to invest in our communities for education, jobs, and public safety.”

TABLE 12: BLACK/WHITE RACIAL DISPARITY IN ARRESTS BY LEGISLATIVE DISTRICT, 2013

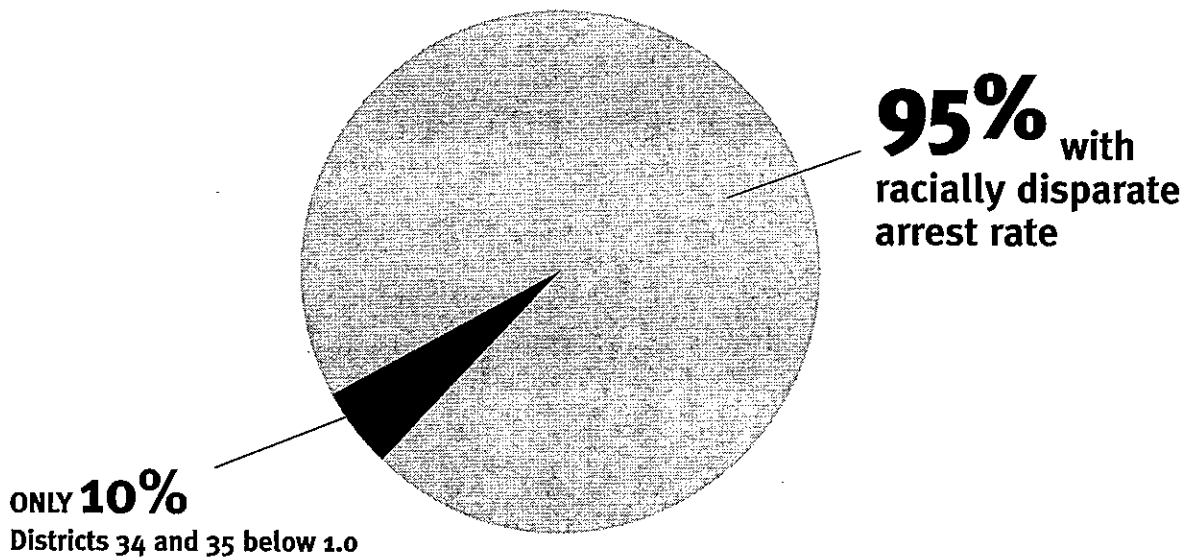
1	2.81	21	11.34
2	2.20	22	2.42
3	4.04	23	5.84
4	3.60	24	2.39
5	1.34	25	2.78
6	4.46	26	5.68
7	3.53	27	3.57
8	4.02	28	2.36
9	4.01	29	3.81
10	8.67	30	4.63
11	4.30	31	1.46
12	2.64	32	1.58
13	3.02	33	9.47
14	3.41	34	0.52
15	2.72	35	0.94
16	3.24	36	9.80
17	2.20	37	2.58
18	3.21	38	4.11
19	2.31	39	4.79
20	2.32	40	4.50

TABLE 13: 10 LEG DISTRICTS WITH HIGHEST RACIAL DISPARITIES, 2013

District 21	11.34
District 36	9.80
District 33	9.47
District 10	8.67
District 23	5.84
District 26	5.68
District 39	4.79
District 30	4.63
District 40	4.50
District 6	4.46



SHARE OF LEGISLATIVE DISTRICTS WITH RACIALLY DISPARATE ARREST RATE, 2013: 38 out of 40.



P R O F I L E

Lisa, mother of a son diagnosed with multiple mental illnesses
(Gloucester County, NJ)

"Marijuana is the only thing that keeps my son alive. He's been on pretty much everything for his mental illnesses since he was diagnosed eight years ago — you name it, he's been on it. The side effects of the medications were so bad that he had to stop taking them. They made him suicidal and they made him even more depressed than he was already.

"Since he started using marijuana, things have been so much better. I have no idea how to get a medical marijuana license for him, so I've been buying it illegally, because it's the only thing that helps him. He would move to Colorado in a heartbeat if he could, but it's not something we can afford. It would help our family so much if marijuana were legal here."

Proportion of Arrests That Were For Possession

In a majority of legislative districts, nine out of 10 marijuana arrests are for small-scale possession.

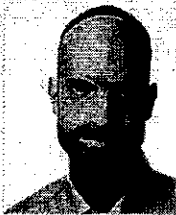
In 36 out of the 40 legislative districts in New Jersey, at least eight out of 10 marijuana arrests are for small-scale possession; for a majority of districts, at least nine out of 10 arrests are for possession.

The 8th legislative district, which includes parts of Atlantic, Burlington, and Camden counties, and is currently represented by Senator Dawn Marie Addiego (R-Medford), Assemblywoman Maria Rodriguez-Gregg (R-Medford), and Assemblyman Joe Howarth (R-Medford), 97 percent of all marijuana arrests in 2013 were for possession of less than 50 grams.

Conversely, in the 31st legislative district, which includes Bayonne and parts of Jersey City in Hudson County, and is currently represented by Senator Sandra Cunningham (D-Jersey City), Assemblyman Nicholas Chiaravalloti (D-Bayonne), and Assemblywoman Angela McKnight (D-Jersey City), 62 percent of marijuana arrests were for small-scale possession, the lowest share of arrests for possession of any district in the state.

The focus of law enforcement resources on arrests of individuals who are found with small amounts of marijuana for personal use is wasteful and contributes little to public safety or public health. New Jersey's legislative leaders should examine the data from their own districts in assessing how limited tax dollars are being spent on marijuana possession enforcement.

P R O F I L E



Rabbi Justus Baird, Auburn Theological Seminary
(Princeton, NJ)

“Every religious tradition I have been blessed to come into contact with, including my own Jewish tradition, inspires and commands adherents to pursue justice and righteousness. A policy and enforcement system that, intentionally or not, is significantly racially unjust demands reform. If there is a reasonable chance that legalizing, regulating, and taxing marijuana will reduce its impact on our children—and I believe legalization will — then we have a moral obligation to try out those policies.”

TABLE 12: 10 LEGISLATIVE DISTRICTS WITH THE HIGHEST PERCENTAGE OF MARIJUANA ARRESTS THAT WERE FOR POSSESSION, 2013

District 8	97%	District 30	95%
District 11	96%	District 7	94%
District 1	95%	District 25	93%
District 40	95%	District 10	93%
District 16	95%	District 37	93%

The Numbers: Municipal Police Departments¹⁴

Sky-High Arrest Rates in Towns and Cities Throughout New Jersey

Our analysis of marijuana arrest practices by municipal police departments reveals a wide variation in approaches to marijuana enforcement in towns and cities throughout the state. The statewide marijuana possession arrest rate annually from 2000 to 2013 was roughly 230 arrests per 100,000 people per year. Some towns have arrest rates more than ten or 15 times the state average.

What emerges from this study is that arrest rates are heavily determined in many locations by the presence of tourists or temporary visitors. For example, nine out of the 10 towns with the highest arrest rates from 2000 to 2013 are shore towns that draw significantly higher seasonal or daytime populations (including beach-goers) than their year-round residential population. While we do not have seasonal data to determine what share of these arrests take place in the summer months, and do not know whether police specifically target tourists or beach-goers for enforcement, enforcement strategies that focus on visitors of any kind lead to a significantly higher arrest rate than might otherwise be the case.

That said, some municipalities have extraordinarily high arrest rates without any clear explanation. The town of Chester in Morris County had the second highest arrest rate of any town in 2013 at more than 13 times the state average.

Police departments with the highest arrest rates in New Jersey tend to operate in smaller towns. Of the 50 municipalities with the highest arrest rates between 2000 and 2013,

¹⁴ Only municipal police departments that made an average of 30 marijuana possession arrests per year between 2000 and 2013, or made at least 30 arrests in 2013, were included in this analysis.

Trenton is the only one of New Jersey's 50 largest municipalities to make the list. While some large urban police departments make a significant number of marijuana possession arrests, most urban police departments tend to make possession arrests at a relatively lower rate than their suburban or rural counterparts.

TABLE 13: TOP 50 MUNICIPALITIES WITH HIGHEST PER CAPITA MARIJUANA POSSESSION ARRESTS, 2013 (arrests per 100,000 people)

Ocean	SEASIDE PARK	5,028.09	Monmouth	NEPTUNE TWP	785.71
Morris	CHESTER	3,563.64	Camden	BERLIN	779.61
Ocean	SHIP BOTTOM	2,804.57	Bergen	MAYWOOD	778.56
Ocean	BEACH HAVEN	2,757.24	Somerset	SOUTH BOUND BROOK	773.85
Cape May	NORTH WILDWOOD	2,430.44	Sussex	FRANKLIN	765.54
Monmouth	NEPTUNE CITY	2,365.56	Camden	WATERFORD TWP	722.23
Monmouth	ENGLISHTOWN	2,345.95	Salem	PENNSVILLE TWP	692.63
Morris	MENDHAM TWP	2,287.03	Burlington	BURLINGTON TWP	661.63
Ocean	LAKEHURST	1,624.93	Camden	MOUNT EPHRAIM	653.60
Bergen	ROCHELLE PARK TWP	1,504.71	Burlington	MOUNT HOLLY TWP	639.31
Cape May	WILDWOOD	1,434.39	Monmouth	MANASQUAN	634.25
Monmouth	ASBURY PARK	1,307.02	Bergen	FORT LEE	634.15
Ocean	POINT PLEASANT BEACH	1,261.00	Salem	PENNS GROVE	633.57
Bergen	HACKENSACK	1,220.01	Salem	CARNEY'S POINT TWP	625.87
Ocean	SEASIDE HEIGHTS	1,188.80	Cape May	OCEAN CITY	610.54
Bergen	MONTVALE	1,098.03	Camden	STRATFORD	602.18
Union	ROSELLE PARK	1,083.08	Gloucester	PAULSBORO	596.35
Ocean	OCEAN TWP	1,023.88	Bergen	EMERSON	595.17
Burlington	BORDENTOWN	977.81	Passaic	HALEDON	579.49
Monmouth	WALL TWP	929.19	Mercer	HIGHTSTOWN	572.62
Morris	CHESTER TWP	912.36	Morris	EAST HANOVER TWP	562.06
Gloucester	GLASSBORO	814.59	Gloucester	PITMAN	556.17
Morris	BOONTON TWP	804.58	Burlington	BURLINGTON	555.07
Camden	HADDON HEIGHTS	791.55	Monmouth	RED BANK	548.35
Camden	PINE HILL	790.31	Burlington	RIVERSIDE TWP	547.69

TABLE 14: EACH COUNTY'S TOP 3 MUNICIPALITIES WITH HIGHEST PER CAPITA MARIJUANA POSSESSION ARREST RATE, 2000-2013

Atlantic	NORTHFIELD	553.23	Mercer	TRENTON	498.61
Atlantic	EGG HARBOR TWP	387.44	Mercer	HAMILTON TWP	239.79
Atlantic	ATLANTIC CITY	342.96	Middlesex	EAST BRUNSWICK TWP	339.40
Bergen	EDGEWATER	792.97	Middlesex	PLAINSBORO TWP	247.83
Bergen	MONTVALE	572.12	Middlesex	PERTH AMBOY	212.94
Bergen	FORT LEE	461.76	Monmouth	SEA BRIGHT	2,720.15
Burlington	MOUNT HOLLY TWP	712.49	Monmouth	ASBURY PARK	1,323.58
Burlington	BURLINGTON TWP	660.07	Monmouth	NEPTUNE CITY	972.25
Burlington	BURLINGTON	552.23	Morris	HARDING TWP	1,270.10
Camden	MERCHANTVILLE	953.35	Morris	MENDHAM TWP	1,057.58
Camden	BERLIN TWP	580.39	Morris	DENVILLE TWP	454.43
Camden	WINSLOW TWP	473.62	Ocean	SHIP BOTTOM	3,405.36
Cape May	STONE HARBOR	3,693.45	Ocean	SEASIDE HEIGHTS	2,444.96
Cape May	WILDWOOD	2,201.52	Ocean	POINT PLEASANT BEACH	1,340.88
Cape May	NORTH WILDWOOD	1,585.97	Passaic	LITTLE FALLS TWP	417.42
Cumberland	MILLVILLE	393.04	Passaic	RINGWOOD	310.72
Cumberland	VINELAND	368.63	Passaic	CLIFTON	243.04
Cumberland	BRIDGETON	283.79	Salem	PENNS GROVE	790.24
Essex	NEWARK	340.94	Salem	CARNEY'S POINT TWP	480.27
Essex	EAST ORANGE	260.13	Salem	PENNSVILLE TWP	309.41
Essex	IRVINGTON	254.25	Somerset	BERNARDS TWP	268.31
Gloucester	WESTVILLE	847.07	Somerset	HILLSBOROUGH TWP	202.85
Gloucester	PAULSBORO	725.21	Somerset	MONTGOMERY TWP	167.42
Gloucester	WEST DEPTFORD TWP	575.08	Sussex	SPARTA TWP	275.47
Hudson	KEARNY	234.54	Sussex	HOPATCONG	240.88
Hudson	BAYONNE	199.60	Sussex	VERNON TWP	166.01
Hudson	UNION CITY	157.39	Union	ROSELLE PARK	543.42
Hunterdon	RARITAN TWP	763.07	Union	CRANFORD TWP	453.35
Hunterdon	READINGTON TWP	299.22	Union	PLAINFIELD	282.27
Hunterdon	CLINTON TWP	547.34	Warren	POHATCONG TWP	901.88
Mercer	ROBBINSVILLE TWP	515.60	Warren	PHILLIPSBURG	298.20

TABLE 15: EACH COUNTY'S TOP 3 MUNICIPALITIES WITH HIGHEST PER CAPITA MARIJUANA POSSESSION ARREST RATE, 2013

Atlantic	NORTHFIELD	526.04	Mercer	HIGHTSTOWN	572.62
Atlantic	GALLOWAY TWP	359.02	Mercer	ROBBINSVILLE TWP	518.79
Atlantic	VENTNOR CITY	342.59	Mercer	HAMILTON TWP	295.55
Bergen	ROCHELLE PARK TWP	1,504.71	Middlesex	MILLTOWN	454.83
Bergen	HACKENSACK	1,220.01	Middlesex	EAST BRUNSWICK TWP	406.28
Bergen	MONTVALE	1,098.03	Middlesex	SPOTSWOOD	403.54
Burlington	BORDENTOWN	977.81	Monmouth	NEPTUNE CITY	2,365.56
Burlington	BURLINGTON TWP	661.63	Monmouth	ENGLISHTOWN	2,345.95
Burlington	MOUNT HOLLY TWP	639.31	Monmouth	ASBURY PARK	1,307.02
Camden	HADDON HEIGHTS	791.55	Morris	CHESTER	3,563.64
Camden	PINE HILL	790.31	Morris	MENDHAM TWP	2,287.03
Camden	BERLIN	779.61	Morris	CHESTER TWP	912.36
Cape May	NORTH WILDWOOD	2,430.44	Ocean	SEASIDE PARK	5,028.09
Cape May	WILDWOOD	1,434.39	Ocean	SHIP BOTTOM	2,804.57
Cape May	OCEAN CITY	610.54	Ocean	BEACH HAVEN	2,757.24
Cumberland	VINELAND	472.00	Passaic	HALEDON	579.49
Cumberland	BRIDGETON	284.80	Passaic	LITTLE FALLS TWP	436.41
Cumberland	MILLVILLE	193.52	Passaic	CLIFTON	323.86
Essex	NEWARK	466.82	Salem	PENNSVILLE TWP	692.63
Essex	IRVINGTON	439.65	Salem	PENNS GROVE	633.57
Essex	EAST ORANGE	243.38	Salem	CARNEY'S POINT TWP	625.87
Gloucester	GLASSBORO	814.59	Somerset	SOUTH BOUND BROOK	773.85
Gloucester	PAULSBORO	596.35	Somerset	RARITAN	513.23
Gloucester	PITMAN	556.17	Somerset	BRANCHBURG TWP	264.53
Hudson	KEARNY	294.80	Sussex	FRANKLIN	765.54
Hudson	WEST NEW YORK	247.00	Sussex	SPARTA TWP	261.08
Hudson	SECAUCUS	179.83	Sussex	HOPTACONG	222.29
Hunterdon	CLINTON TWP	366.32	Union	ROSELLE PARK	1,083.08
Hunterdon	RARITAN TWP	360.62	Union	CRANFORD TWP	502.32
Hunterdon	READINGTON TWP	355.25	Union	KENILWORTH	433.28

Extreme Racial Disparities Evident in Marijuana Enforcement Throughout New Jersey

While previous analyses of New Jersey marijuana arrest practices have uncovered significant racial disparities at the county level, an examination of New Jersey towns' arrest practices reveals shockingly high racial disparities by police in towns in nearly every corner of the state.

From 2000 to 2013, the towns with the two highest racial disparities in the state were the

“In Hanover, Blacks make up one percent of the population, but 19 percent of the marijuana possession arrests; similarly, in East Hanover, Blacks make up one percent of the population, but 16 percent of the arrests.”

neighboring municipalities of Hanover Township and East Hanover Township in Morris County. In both townships, Blacks were nearly 28 times more likely to be arrested for marijuana possession than whites. In Hanover, Blacks make up one percent of the population, but 19 percent of the marijuana possession arrests; similarly, in East Hanover, Blacks make up one percent of the population, but 16 percent of the arrests. These disparities do not have any clear explanation; more

investigation is needed to determine why police in these towns are arresting Blacks for marijuana possession at such grossly disproportionate rates.

We also see the continued presence of shore towns on the list of municipalities with the highest racial disparities. In 2013, the town with the worst racial disparity was Point Pleasant Beach. There, Blacks were nearly 32 times more likely to be arrested for marijuana possession than whites. In Point Pleasant, Blacks are 1 percent of the population, but made up 23 percent of the marijuana possession arrests. While Point Pleasant undoubtedly has a higher share of Black visitors to the beach than live in town, this extreme racial disparity raises fundamental questions about racial profiling and selective enforcement.

While not all municipalities have racial disparities as excessive as 28 or 32 times as high, Blacks are more likely to be arrested for possession in nearly all of the municipalities we studied. From North Jersey (e.g., in 2013: Hoboken — 8.3 times more likely, Paramus — 8.2 times more likely, Montclair — 4.6 times more likely) to South Jersey (e.g., in 2013: Cherry Hill — 7.4 times more likely, Evesham — 6.6 times more likely, Deptford — 6.2 times more likely), Black New Jerseyans bear the significant brunt of marijuana enforcement practices in cities and towns across the state. These rates are not anomalies or isolated examples; racial disparities in marijuana enforcement are pervasive, consistent, and unacceptable.

TABLE 16: TOP 50 MUNICIPALITIES WITH HIGHEST RACIAL DISPARITIES, 2000–2013

Morris	EAST HANOVER TWP	27.77	Union	ROSELLE PARK	6.93
Morris	HANOVER TWP	27.53	Gloucester	EAST GREENWICH TWP	6.88
Ocean	SEASIDE PARK	18.76	Atlantic	NORTHFIELD	6.70
Union	CRANFORD TWP	18.36	Ocean	OCEAN TWP	6.48
Bergen	MONTVALE	16.27	Passaic	RINGWOOD	6.39
Camden	HADDON TWP	14.63	Bergen	FORT LEE	6.16
Ocean	TOMS RIVER TWP	13.53	Hudson	HOBOKEN	6.10
Bergen	RAMSEY	13.47	Union	WESTFIELD	6.07
Morris	HARDING TWP	12.86	Monmouth	MIDDLETOWN TWP	6.02
Warren	POHATCONG TWP	11.86	Mercer	ROBBINSVILLE TWP	5.93
Salem	PENNSVILLE TWP	10.72	Monmouth	WALL TWP	5.92
Gloucester	WESTVILLE	10.60	Cape May	LOWER TWP	5.90
Monmouth	HAZLET TWP	10.49	Ocean	STAFFORD TWP	5.76
Bergen	PARAMUS	10.29	Bergen	MAYWOOD	5.65
Hunterdon	READINGTON TWP	9.53	Morris	LINCOLN PARK	5.63
Cape May	NORTH WILDWOOD	9.10	Passaic	WAYNE TWP	5.57
Ocean	POINT PLEASANT BEACH	8.87	Camden	CHERRY HILL TWP	5.48
Somerset	BERNARDS TWP	8.57	Camden	MERCHANTVILLE	5.44
Bergen	FAIR LAWN	8.53	Essex	CEDAR GROVE TWP	5.44
Ocean	LAKEWOOD TWP	8.24	Burlington	MEDFORD TWP	5.30
Morris	DENVILLE TWP	7.71	Morris	WASHINGTON TWP	5.27
Camden	GLOUCESTER CITY	7.71	Ocean	MANCHESTER TWP	5.17
Monmouth	HOLMDEL TWP	7.30	Burlington	RIVERSIDE TWP	5.05
Gloucester	MANTUA TWP	7.16	Camden	WATERFORD TWP	5.04
Morris	MENDHAM TWP	6.93	Ocean	LONG BEACH TWP	4.99

TABLE 17: TOP 50 MUNICIPALITIES WITH HIGHEST RACIAL DISPARITIES, 2013

Ocean	POINT PLEASANT BEACH	31.81	Union	WESTFIELD	7.87
Morris	EAST HANOVER TWP	25.56	Gloucester	HARRISON TWP	7.84
Somerset	BERNARDS TWP	23.77	Middlesex	METUCHEN	7.81
Salem	PENNSVILLE TWP	23.60	Union	SUMMIT	7.60
Union	CRANFORD TWP	22.64	Morris	MENDHAM TWP	7.51
Camden	HADDON HEIGHTS	21.90	Monmouth	OCEAN TWP	7.41
Camden	MOUNT EPHRAIM	21.48	Mercer	ROBBINSVILLE TWP	7.38
Monmouth	MANASQUAN	18.79	Camden	CHERRY HILL TWP	7.36
Essex	MILLBURN TWP	17.77	Bergen	FAIR LAWN	7.33
Bergen	RAMSEY	16.93	Ocean	BERKELEY TWP	7.26
Middlesex	MILLTOWN	15.79	Camden	STRATFORD	7.25
Ocean	OCEAN TWP	14.89	Ocean	BRICK TWP	7.05
Ocean	BEACH HAVEN	14.08	Ocean	SEASIDE HEIGHTS	6.88
Burlington	MEDFORD TWP	13.01	Monmouth	ENGLISHTOWN	6.77
Ocean	TOMS RIVER TWP	12.14	Morris	ROXBURY TWP	6.75
Gloucester	PITMAN	12.12	Passaic	RINGWOOD	6.73
Ocean	LAKEWOOD TWP	10.67	Camden	WATERFORD TWP	6.66
Ocean	SEASIDE PARK	10.41	Burlington	EVESHAM TWP	6.57
Monmouth	TINTON FALLS	9.76	Somerset	RARITAN	6.48
Somerset	BRIDGEWATER TWP	9.73	Burlington	RIVERSIDE TWP	6.37
Bergen	MONTVALE	9.68	Gloucester	DEPTFORD TWP	6.25
Cape May	NORTH WILDWOOD	8.92	Union	SPRINGFIELD	6.16
Bergen	ROCHELLE PARK TWP	8.44	Somerset	SOUTH BOUND BROOK	6.15
Hudson	HOBOKEN	8.29	Hunterdon	READINGTON TWP	6.13
Bergen	PARAMUS	8.24	Burlington	BURLINGTON	6.08

TABLE 18: TOP 3 MUNICIPALITIES WITH THE HIGHEST RACIAL DISPARITIES FROM EACH COUNTY, 2000–2013

Atlantic	NORTHFIELD	6.70	Mercer	PRINCETON	4.83
Atlantic	EGG HARBOR TWP	4.31	Mercer	WEST WINDSOR TWP	4.46
Atlantic	VENTNOR CITY	4.21	Middlesex	SOUTH PLAINFIELD	4.94
Bergen	MONTVALE	16.27	Middlesex	EAST BRUNSWICK TWP	4.31
Bergen	RAMSEY	13.47	Middlesex	NEW BRUNSWICK	3.80
Bergen	PARAMUS	10.29	Monmouth	HAZLET TWP	10.49
Burlington	MEDFORD TWP	5.30	Monmouth	HOLMDEL TWP	7.30
Burlington	RIVERSIDE TWP	5.05	Monmouth	MIDDLETOWN TWP	6.02
Burlington	BORDENTOWN TWP	4.57	Morris	EAST HANOVER TWP	27.77
Camden	HADDON TWP	14.63	Morris	HANOVER TWP	27.53
Camden	GLOUCESTER CITY	7.71	Morris	HARDING TWP	12.86
Camden	CHERRY HILL TWP	5.48	Ocean	SEASIDE PARK	18.76
Cape May	NORTH WILDWOOD	9.10	Ocean	TOMS RIVER TWP	13.53
Cape May	LOWER TWP	5.90	Ocean	POINT PLEASANT BEACH	8.87
Cape May	STONE HARBOR	3.47	Passaic	RINGWOOD	6.39
Cumberland	MILLVILLE	4.73	Passaic	WAYNE TWP	5.57
Cumberland	VINELAND	3.06	Passaic	LITTLE FALLS TWP	4.90
Cumberland	BRIDGETON	1.89	Salem	PENNSVILLE TWP	10.72
Essex	CEDAR GROVE TWP	5.44	Salem	CARNEY'S POINT TWP	3.28
Essex	NUTLEY TWP	4.80	Salem	PENNS GROVE	2.40
Essex	MONTCLAIR	3.49	Somerset	BERNARDS TWP	8.57
Gloucester	WESTVILLE	10.60	Somerset	MONTGOMERY TWP	3.62
Gloucester	MANTUA TWP	7.16	Somerset	FRANKLIN TWP	3.27
Gloucester	EAST GREENWICH TWP	6.88	Sussex	SPARTA TWP	3.94
Hudson	HOBOKEN	6.10	Sussex	HOPATCONG	2.33
Hudson	BAYONNE	3.64	Sussex	VERNON TWP	1.41
Hudson	JERSEY CITY	2.22	Union	CRANFORD TWP	18.36
Hunterdon	READINGTON TWP	9.53	Union	ROSELLE PARK	6.93
Hunterdon	RARITAN TWP	4.87	Union	WESTFIELD	6.07
Hunterdon	CLINTON TWP	3.31	Warren	POHATCONG TWP	11.86
Mercer	ROBBINSVILLE TWP	5.93	Warren	PHILLIPSBURG	4.26

TABLE 19: TOP 3 MUNICIPALITIES WITH THE HIGHEST RACIAL DISPARITIES FROM EACH COUNTY, 2013

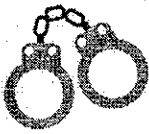
Atlantic	NORTHFIELD	5.55	Mercer	ROBBINSVILLE TWP	7.38
Atlantic	HAMILTON TWP	5.20	Mercer	HAMILTON TWP	6.05
Atlantic	EGG HARBOR TWP	3.88	Mercer	TRENTON	3.89
Bergen	RAMSEY	16.93	Middlesex	MILLTOWN	15.79
Bergen	MONTVALE	9.68	Middlesex	METUCHEN	7.81
Bergen	ROCHELLE PARK TWP	8.44	Middlesex	SPOTSWOOD	5.69
Burlington	MEDFORD TWP	13.01	Monmouth	MANASQUAN	18.79
Burlington	EVESHAM TWP	6.57	Monmouth	TINTON FALLS	9.76
Burlington	RIVERSIDE TWP	6.37	Monmouth	OCEAN TWP	7.41
Camden	HADDON HEIGHTS	21.90	Morris	EAST HANOVER TWP	25.56
Camden	MOUNT EPHRAIM	21.48	Morris	MENDHAM TWP	7.51
Camden	CHERRY HILL TWP	7.36	Morris	ROXBURY TWP	6.75
Cape May	NORTH WILDWOOD	8.92	Ocean	POINT PLEASANT BEACH	31.81
Cape May	LOWER TWP	4.16	Ocean	OCEAN TWP	14.89
Cape May	WILDWOOD	2.01	Ocean	TOMS RIVER TWP	12.14
Cumberland	MILLVILLE	3.79	Passaic	RINGWOOD	6.73
Cumberland	VINELAND	3.64	Passaic	LITTLE FALLS TWP	4.46
Cumberland	BRIDGETON	2.28	Passaic	CLIFTON	3.74
Essex	MILLBURN TWP	17.77	Salem	PENNSVILLE TWP	23.60
Essex	MONTCLAIR	4.76	Salem	CARNEY'S POINT TWP	2.79
Essex	WEST ORANGE	4.68	Salem	PENNS GROVE	1.55
Gloucester	PITMAN	12.12	Somerset	BERNARDS TWP	23.77
Gloucester	HARRISON TWP	7.84	Somerset	BRIDGEWATER TWP	9.73
Gloucester	DEPTFORD TWP	6.25	Somerset	RARITAN	6.48
Hudson	HOBOKEN	8.29	Sussex	VERNON TWP	4.19
Hudson	NORTH BERGEN TWP	3.05	Sussex	SPARTA TWP	3.27
Hudson	JERSEY CITY	2.87	Union	CRANFORD TWP	22.64
Hunterdon	READINGTON TWP	6.13	Union	WESTFIELD	7.87
Hunterdon	RARITAN TWP	3.59	Union	SUMMIT	7.60
Hunterdon	CLINTON TWP	2.40			

Get the Facts

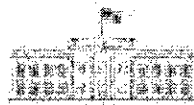
Marijuana Reform in New Jersey

Marijuana prohibition in New Jersey has failed. It's time for common sense.

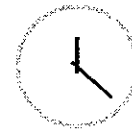
Legalizing, taxing, and regulating marijuana for adults will put an end to the tremendous harms caused by our current laws, create jobs, increase public safety, and generate millions of dollars in revenue to fund projects that help all New Jerseyans.



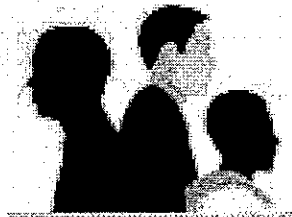
New Jersey police make more than
24,000 ARRESTS PER YEAR
for marijuana possession.



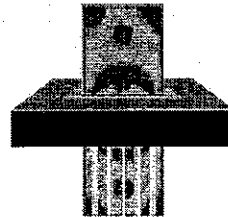
From 2000-2010, police arrested New Jerseyans
nearly 210,000 times for an offense that
SEVERAL U.S. PRESIDENTS
have admitted to doing.



Someone is arrested for
marijuana possession in New Jersey
EVERY 22 MINUTES.



**BLACK NEW JERSEYANS ARE
3X MORE LIKELY TO BE ARRESTED**
for marijuana possession than whites,
despite similar usage rates.



**OVER THE PAST DECADE, NEW JERSEY
WASTED MORE THAN \$1 BILLION**
on police, courts, and jails enforcing
marijuana possession laws.



New Jersey's
MEDICAL MARIJUANA SYSTEM FAILS
to provide patients with the medicine they need.



Taxing and regulating marijuana will
GENERATE MORE THAN \$300 MILLION
per year for New Jersey.

The War on Marijuana Users is Being Waged Town by Town

In some New Jersey towns, marijuana arrests are targeted toward marijuana users—and only users. In 2013, police in 31 towns in this study made all of their marijuana arrests of users for small-scale possession. From 2000 to 2013, police in 25 towns made at least 19 possession arrests out of every 20 marijuana arrests.

Five of the 15 municipalities that had the highest proportion of possession arrests in relation to total marijuana arrests, between 2000-2013, were shore towns. The prevalence of shore towns with high arrest rates, high racial disparities, and a high proportion of possession arrests of total marijuana arrests contributes to the picture of police targeting beachgoers or tourists for small-scale possession offenses. Further data and analysis is needed in order to develop a fuller understanding of arrest practices there, however.

“Municipal police largely focus resources on arrests for small-scale possession.”

Conversely, among the lowest share of possession arrests are Jersey City (58 percent), East Orange (59 percent), and Paterson (63 percent). While some urban departments do make a high proportion of possession arrests (e.g., Atlantic City at 98 percent), the towns with the highest share of possession arrests tend to be suburban or rural.

Municipalities have the most direct control over local police department enforcement priorities. It is clear that municipal police departments are largely focusing their resources on arresting individuals for small-scale possession. Municipal leaders and police executives should examine their data to deprioritize enforcement against users who possess small amounts of marijuana.

P R O F I L E



Lazaro Cardenas, Latino Action Network
(Freehold, NJ)

“Arresting and incarcerating people who use marijuana amounts to a terrible misuse of our criminal justice resources, yet marijuana possession arrests make up nearly all marijuana arrests statewide—this is a scandal. Our communities remain concerned about those who abuse marijuana. That is why it is so critical that we finally legalize, tax, and regulate it.”

TABLE 20: MUNICIPALITIES WITH 100% OF MARIJUANA ARRESTS FOR POSSESSION, 2013

Atlantic	VENTNOR CITY	100%	Hunterdon	READINGTON TWP	100%
Bergen	NORTH ARLINGTON	100%	Monmouth	ENGLISHTOWN	100%
Bergen	CLOSTER	100%	Monmouth	RED BANK	100%
Bergen	EMERSON	100%	Monmouth	MARLBORO TWP	100%
Burlington	BORDENTOWN	100%	Morris	MONTVILLE TWP	100%
Camden	STRATFORD	100%	Morris	BOONTON TWP	100%
Camden	WATERFORD TWP	100%	Ocean	BEACH HAVEN	100%
Camden	PINE HILL	100%	Ocean	BERKELEY TWP	100%
Cape May	NORTH WILDWOOD	100%	Ocean	LAKEHURST	100%
Cumberland	VINELAND	100%	Ocean	SHIP BOTTOM	100%
Essex	MILLBURN TWP	100%	Passaic	RINGWOOD	100%
Essex	BLOOMFIELD	100%	Somerset	RARITAN	100%
Gloucester	PITMAN	100%	Somerset	SOUTH BOUND BROOK	100%
Gloucester	DEPTFORD TWP	100%	Somerset	BRANCHBURG TWP	100%
Gloucester	WEST DEPTFORD TWP	100%	Union	ROSELLE	100%
Gloucester	MONROE TWP	100%	Bergen	HACKENSACK	100%

P R O F I L E



**Leo M. Bridgewater Sr., Veteran, U.S. Army,
Operation Iraqi Freedom**
(Trenton, NJ)

“After I completed six tours of duty in the U.S. Army during Operation Iraqi Freedom and Operation Enduring Freedom as a soldier and Defense Department contractor, cannabis helped me transition from suffering from post-traumatic stress disorder to living with post-traumatic stress disorder. Cannabis itself is not dangerous. Its illegality is what makes it dangerous. Twenty veteran suicides a day in the U.S. is shameful. The time for full cannabis legalization in the state of New Jersey has come. The longer we wait, the more suffering we enable.”

76x

Recommendations

The findings of this report make explicit that our system of marijuana prohibition is a failure. While support for reform grows wider every year, more New Jerseyans are being arrested for marijuana possession than ever before. Further, the racial disparity in arrests between Blacks and whites continues to grow more severe.

The ACLU-NJ makes the following recommendations to finally end the harms caused to New Jerseyans by our current marijuana laws:

1. Legalize, Tax, and Regulate Marijuana for Adults

Marijuana prohibition has failed. It's time for common sense. New Jersey should legalize, tax, and regulate marijuana for adults. In particular, New Jersey lawmakers should:

Make marijuana use a public health issue, not a police responsibility. New Jersey's legalization law should remove all penalties for adult possession of both marijuana up to one ounce and related accessories. While driving under the influence of marijuana should remain illegal, police should no longer make arrests for possession or use of marijuana. New Jersey should further disentangle its criminal justice system from marijuana enforcement by making public consumption and the most minor distribution offenses civil penalties, not criminal ones. But decriminalization alone is not enough.

Automatically expunge prior marijuana possession convictions. Once New Jersey legalizes and regulates marijuana, those individuals whose records continue to bear marijuana possession offenses that would no longer be considered illegal should have those records automatically expunged. New Jerseyans should not continue to suffer the collateral consequences of a conviction if the behavior they are being punished for is now fully legal.

Reinvest a large portion of tax revenue in impacted communities. Communities, particularly communities of color, that have borne the disproportionate impact of New Jersey's war on marijuana users should be eligible for new programming focused on job training, adult education, re-entry programs, workforce development, affordable housing, and community policing. This "justice reinvestment" will help repair communities that have been unjustly harmed by New Jersey's discriminatory marijuana enforcement practices.

Protect limited "home-grow" of marijuana. Once legal, New Jerseyans should not have to rely on companies or the marijuana industry to possess or use marijuana. The right of New

Jerseyans to grow a limited amount of marijuana for personal use should be protected under the law.

Prevent minors' access to marijuana. New Jersey's regulated marijuana system should implement best practices to keep marijuana out of the hands of minors, including by establishing strict requirements for child-proof packaging, restricting youth-directed advertising, banning employment of minors in the industry, implementing undercover and unannounced inspections, and taking other steps to protect young people.

Spend a portion of tax revenue on drug treatment & prevention. New Jersey must get serious about preventing youth marijuana use by using a portion of the tax revenue generated by legalization to develop and expand evidence-based prevention programs targeted at young people, a state hotline for referrals to treatment, and youth intervention strategies. Further, New Jersey should use revenue to help fill the much-needed treatment and services gap for opioid abuse, including inpatient beds.

Establish strict and effective health and safety requirements. In order to shift the legal framework for marijuana from a criminal justice issue to a public health matter, we must take health and safety very seriously. In particular, New Jersey should ensure accreditation and training requirements for marijuana facilities and workers; enable regular testing of marijuana to determine its health, safety, and potency; establish serving-size limitations; require health-oriented product labeling and child-proof product packaging; institute sanitation controls; and adopt other best practices.

Prevent "Big Marijuana" from dominating the system. The marijuana system in New Jersey should be built with the intention to prevent the harms that can come from such an industry growing too large and powerful, as we have seen in the context of the tobacco industry. With strong regulations, New Jersey can build a legal marijuana system that protects public health and safety. These limits, including a ban on vertical integration and a limit on the number of licenses one company can hold, should prevent any one company from controlling too much of the supply chain and help ensure that more New Jerseyans have an opportunity to partake in the marketplace.

Fix the broken medical marijuana system. Far too many patients that need medical marijuana in New Jersey find themselves unable to access it through New Jersey's broken system. Some have even been forced to leave the state in order to receive needed treatment. In addition to a legalization system, New Jersey's medical marijuana program demands an overhaul to ensure patients are able to access the medicine they need. The program should fully treat marijuana like all other medicine — including ensuring that insurance covers access to the medicine, especially for those who cannot afford it—and regulate it separately in accordance with the laws and benefits we apply to other medicines.

Establish a tax on marijuana that helps undercut the illegal market. New Jersey must establish a marijuana taxation system that encourages consumers to abandon the illegal marketplace and to instead participate in the legal, regulated one. This should include a graduated tax that starts low but grows each year after the market is established. The tax rate should be flexible in order to make the tax high enough to discourage youth access but low enough to respond to realities on the ground as the underground market dissipates.

Ensure that disenfranchised communities can share in economic benefits of the legal marijuana market. New Jersey's regulated marijuana system must be designed to facilitate participation in the marketplace for members of New Jersey communities that may lack access to extensive capital or preexisting industry connections. For legalization to provide the full economic boon it has the potential to provide, the law must make sure that all New Jersey communities, including those that may have had involvement in the underground marijuana industry, are not only permitted, but encouraged to participate in the legal economy. This includes establishing clear conflict-of-interest rules, ensuring that the application process for licenses is not overly burdensome or expensive, and rejecting barriers to entry that would privilege wealthy, out-of-state corporations.

Protect marijuana users from discrimination. New Jersey should create legal protections to ensure that employers can keep their workplaces marijuana-free, but still prohibit workplaces from punishing employees for marijuana use outside of work unless it harms their job performance.

2. Make Marijuana Possession the Lowest Law Enforcement Priority

While municipalities do not have the authority to legalize or decriminalize marijuana possession in New Jersey, they do have the power to make the enforcement of marijuana possession the lowest law enforcement priority. New Jersey towns should join jurisdictions across the country—including San Francisco; Denver; Tacoma, Washington; Fayetteville, Arkansas; Kalamazoo, Michigan; Eureka Springs, Arkansas, and others—and pass ordinances or police department directives that make the enforcement of marijuana possession offenses the lowest law enforcement priority for officers.

3. Require Police Departments to Properly Record Hispanic/Latino Arrest Data

The absence of data on the number of Hispanics/Latinos arrested likely leads to a deceptively lower Black-white racial disparity. The state should require police departments to keep track of the number of Hispanic/Latino arrests for marijuana possession to properly assess the law's impact on the Hispanic/Latino community. The state should also establish common standards for training officers in how to report such information.

4. The New Jersey Attorney General Should Investigate Causes of Racial Disparities in Arrests

With consistent government data that whites and Blacks use marijuana at the same rates, the growing racial disparity in New Jersey's marijuana possession arrests demands further scrutiny to determine the cause of such disparities. With racial disparities occurring in the vast majority of jurisdictions in the state, New Jersey must take a closer look at the reasons behind these disparities and take steps to end them. This investigation will shed light on persistent racial disparities throughout the New Jersey criminal justice system. The Attorney General has the power and authority to conduct such an inquiry, and the AG's Office should do so immediately.

5. The New Jersey Attorney General Should Require Police to Regularly Collect and Publish Data on Arrests, Tickets, Stops, Searches, and Other Data

The Attorney General must set strong transparency standards for law enforcement agencies in New Jersey by formally requiring that all agencies document their arrest, summons, stop, and search activities related to, but not limited to, marijuana enforcement. The AG should set uniform guidelines for tracking the data, and require that it be publicly reported on a periodic basis. Transparency about how police agencies are enforcing our laws should not depend on a multi-year analysis by the ACLU-NJ. This information should be regularly collected and provided by New Jersey's chief law enforcement officer.

P R O F I L E



Rev. Craig Hirshberg, Former Director, Unitarian Universalist Legislative Ministry
(Somerville, NJ)

"Under the current drug laws, the potential criminal records resulting from minor drug possession charges can have devastating effects upon the life opportunities of many young adults, and especially people of color. The cruel realities of these minor drug arrests have been limited employment, denial of educational financial aid, ineligibility for public housing, destabilized family relationships and lost future income for those caught up in these policies. It's time to legalize marijuana for adults."

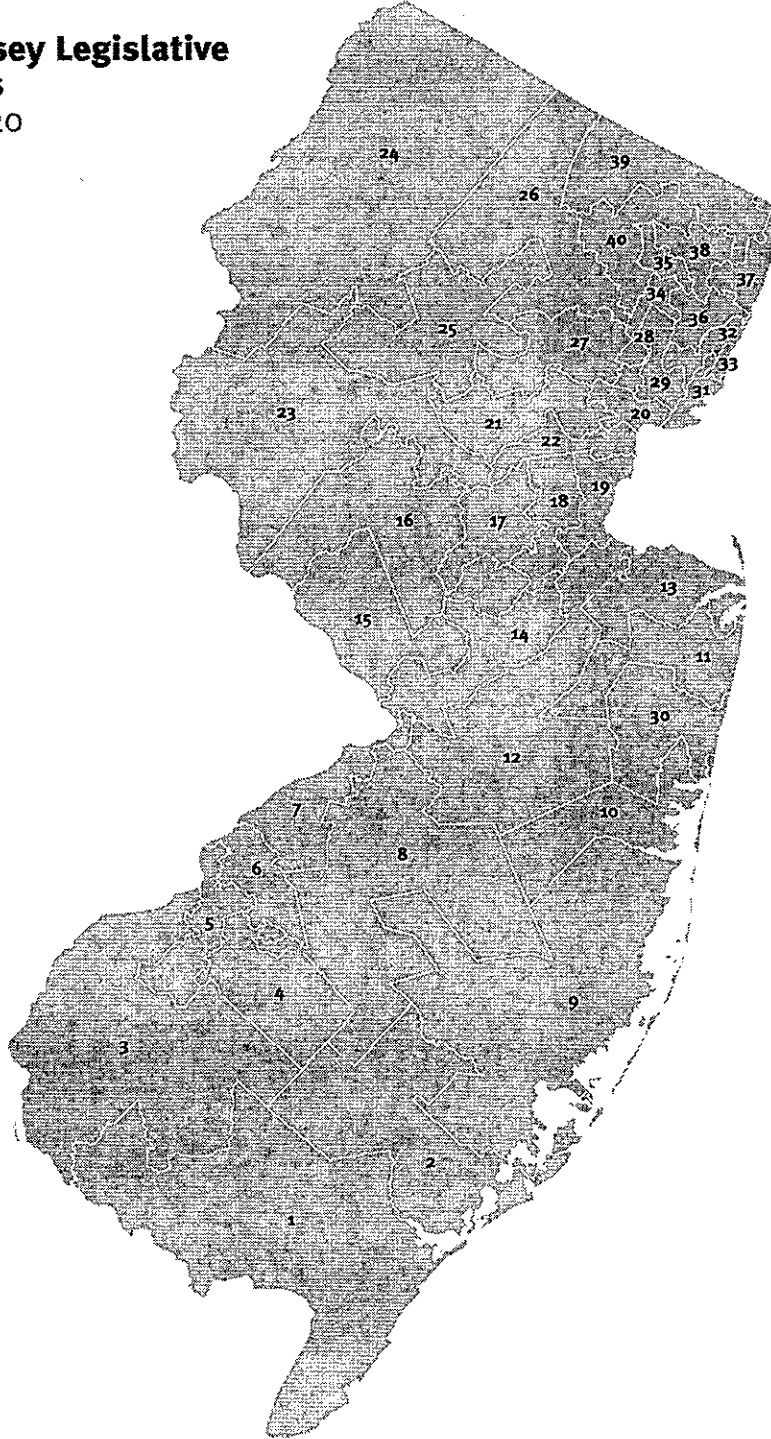


What Regulation Looks Like

QUESTION	AFTER: REGULATED	NOW: UNREGULATED
Who can legally buy marijuana?	Only adults 21 and over.	No one.
Where can you buy it?	New Jersey licensed stores.	Street corners, parks and playgrounds.
Who gets the money?	Communities, schools, and drug addiction, treatment and prevention programs.	Gangs, corner drug dealers, organized crime.
Who regulates marijuana?	The State of New Jersey with sensible rules and regulations.	No one.
How do we know what's in marijuana?	A tested, labeled product in a safe container with clear indication of strength, and appropriate warnings on it.	We don't.
How many people are arrested for marijuana possession?	Adults over the age of 21 can legally possess one ounce of marijuana.	New Jersey makes over 24,000 arrests per year for simple marijuana possession.
What happens if you drive under the influence of marijuana?	You are arrested.	You are arrested.
How will this impact drug prevention programs for youth?	Funded through marijuana tax revenue.	Woefully underfunded.

8/17

**New Jersey Legislative
Districts**
2011-2020



82x

54x

Appendix

For more complete data sets and to see arrest statistics for hundreds of New Jersey municipalities, please visit https://www.aclu-nj.org/marijuana_arrests.

TABLE 21: ALL COUNTIES' AVERAGE PERCENTAGE OF MARIJUANA ARRESTS THAT WERE FOR POSSESSION IN NJ TOTAL, 2000 — 2013

Burlington	93%	Union	90%
Monmouth	93%	Ocean	89%
Hunterdon	92%	Bergen	88%
Cape May	92%	Camden	88%
Somerset	92%	Middlesex	85%
Gloucester	92%	Salem	84%
Atlantic	91%	Mercer	81%
Morris	91%	Essex	77%
Warren	91%	Passaic	77%
Cumberland	91%	Hudson	67%
Sussex	90%		

TABLE 22: TOP 5 MOST POPULOUS COUNTIES' PERCENTAGE OF MARIJUANA ARRESTS THAT WERE FOR POSSESSION, 2000 — 2013

Bergen	88%
Middlesex	85%
Essex	77%
Hudson	67%
Monmouth	93%

TABLE 23: TOP 5 MOST POPULOUS COUNTIES' PERCENTAGE OF MARIJUANA ARRESTS THAT WERE FOR POSSESSION, 2013

Bergen	88%
Middlesex	85%
Essex	85%
Hudson	72%
Monmouth	95%

TABLE 24: NUMBER OF MARIJUANA POSSESSION ARRESTS BY LEGISLATIVE DISTRICT, 2013

District	Total	District	Total	District	Total	District	Total
1	743	11	994	21	565	31	237
2	501	12	292	22	548	32	438
3	731	13	508	23	358	33	318
4	380	14	304	24	335	34	362
5	357	15	243	25	641	35	328
6	527	16	409	26	218	36	524
7	667	17	242	27	425	37	1,073
8	657	18	425	28	1,204	38	503
9	579	19	363	29	560	39	636
10	539	20	582	30	640	40	414

Stet

TABLE 25: NUMBER OF MARIJUANA POSSESSION ARRESTS 2011-2013 FOR ALL LEG DISTRICTS

District	Total	District	Total	District	Total	District	Total
1	2,859	11	3,158	21	1,887	31	1,186
2	1,901	12	735	22	1,642	32	1,139
3	2,261	13	1,724	23	1,273	33	743
4	1,242	14	1,752	24	1,202	34	1,782
5	1,936	15	1,206	25	1,904	35	987
6	1,563	16	1,461	26	809	36	1,323
7	1,943	17	1,267	27	1,235	37	2,333
8	2,383	18	1,394	28	2,099	38	2,001
9	1,789	19	1,236	29	3,626	39	2,019
10	1,549	20	1,483	30	1,740	40	1,389

TABLE 26: PERCENTAGE OF MARIJUANA ARRESTS THAT WERE FOR POSSESSION IN NJ, BY LEGISLATIVE DISTRICT, 2013

1	95%	11	96%	21	91%	31	62%
2	90%	12	88%	22	81%	32	80%
3	88%	13	92%	23	89%	33	83%
4	90%	14	90%	24	89%	34	83%
5	84%	15	90%	25	93%	35	76%
6	90%	16	95%	26	92%	36	76%
7	94%	17	82%	27	92%	37	93%
8	97%	18	87%	28	89%	38	89%
9	91%	19	82%	29	79%	39	90%
10	93%	20	87%	30	95%	40	95%

TABLE 27: TOP 50 MUNICIPALITIES WITH HIGHEST PER CAPITA MARIJUANA POSSESSION ARRESTS, 2000 — 2013 (arrests per 100,000 people)

Cape May	STONE HARBOR	3693.453	Monmouth	KEANSBURG	631.089
Ocean	SHIP BOTTOM	3405.357	Camden	BERLIN TWP	580.385
Monmouth	SEA BRIGHT	2720.151	Gloucester	WEST DEPTFORD TWP	575.080
Ocean	SEASIDE HEIGHTS	2444.957	Bergen	MONTVALE	572.421
Cape May	WILDWOOD	2201.519	Atlantic	NORTHFIELD	553.226
Ocean	SEASIDE PARK	2143.104	Burlington	BURLINGTON	552.233
Ocean	LAKEHURST	1908.840	Hunterdon	CLINTON TWP	547.340
Ocean	LONG BEACH TWP	1612.255	Monmouth	WALL TWP	543.736
Cape May	NORTH WILDWOOD	1585.974	Burlington	RIVERSIDE TWP	543.515
Ocean	POINT PLEASANT BEACH	1340.878	Union	ROSELLE PARK	543.416
Monmouth	ASBURY PARK	1323.578	Cape May	OCEAN CITY	541.983
Morris	HARDING TWP	1270.103	Monmouth	HOLMDEL TWP	538.461
Morris	MENDHAM TWP	1057.580	Gloucester	GLASSBORO	525.003
Monmouth	NEPTUNE CITY	972.246	Mercer	ROBBINSVILLE TWP	515.604
Camden	MERCHANTVILLE	953.354	Gloucester	WOOLWICH TWP	510.171
Warren	POHATCONG TWP	901.878	Mercer	TRENTON	498.609
Gloucester	WESTVILLE	847.073	Gloucester	WOODBURY	497.986
Bergen	EDGEWATER	792.968	Salem	CARNEY'S POINT TWP	480.265
Salem	PENNS GROVE	790.238	Camden	WINSLOW TWP	473.619
Hunterdon	RARITAN TWP	763.073	Bergen	WESTWOOD	469.293
Ocean	OCEAN TWP	731.433	Bergen	FORT LEE	461.764
Gloucester	PAULSBORO	725.208	Morris	DENVILLE TWP	454.430
Burlington	MOUNT HOLLY TWP	712.492	Union	CRANFORD TWP	453.354
Burlington	BURLINGTON TWP	660.073	Bergen	MAHWAH TWP	446.471
Monmouth	KEYPORT	659.367	Morris	MOUNT OLIVE TWP	445.799

TABLE 28: EACH COUNTY'S TOP 3 MUNICIPALITIES IN VOLUME OF MARIJUANA POSSESSION ARRESTS, 2000 — 2013

Atlantic	EGG HARBOR TWP	2,059	Mercer	HAMILTON TWP	3,000
Atlantic	ATLANTIC CITY	1,929	Mercer	ROBBINSVILLE TWP	864
Atlantic	GALLOWAY TWP	1,232	Middlesex	EAST BRUNSWICK TWP	2,271
Bergen	FORT LEE	2,350	Middlesex	WOODBIDGE TWP	1,949
Bergen	HACKENSACK	2,062	Middlesex	PERTH AMBOY	1,468
Bergen	MAHWAH TWP	1,557	Monmouth	ASBURY PARK	3,081
Burlington	BURLINGTON TWP	2,009	Monmouth	MIDDLETOWN TWP	2,209
Burlington	EVESHAM TWP	1,376	Monmouth	WALL TWP	1,985
Burlington	MEDFORD TWP	1,203	Morris	MOUNT OLIVE TWP	1,637
Camden	CHERRY HILL TWP	2,975	Morris	DENVILLE TWP	1,043
Camden	WINSLOW TWP	2,491	Morris	MENDHAM TWP	780
Camden	CITY OF CAMDEN ₁	2,120	Ocean	BRICK TWP	2,043
Cape May	WILDWOOD	1,645	Ocean	LAKESWOOD TWP	1,168
Cape May	OCEAN CITY	1,085	Ocean	SEASIDE HEIGHTS	1,074
Cape May	NORTH WILDWOOD	1,030	Passaic	PATERSON	2,550
Cumberland	VINELAND	3,028	Passaic	CLIFTON	2,549
Cumberland	MILLVILLE	1,539	Passaic	PASSAIC	1,599
Cumberland	BRIDGETON	957	Salem	PENNSVILLE TWP	578
Essex	NEWARK	13,310	Salem	PENNS GROVE	545
Essex	EAST ORANGE	2,457	Salem	CARNEY'S POINT TWP	493
Essex	IRVINGTON	1,907	Somerset	HILLSBOROUGH TWP	1,081
Gloucester	WEST DEPTFORD TWP	1,689	Somerset	FRANKLIN TWP	1,070
Gloucester	GLASSBORO	1,408	Somerset	BERNARDS TWP	988
Gloucester	DEPTFORD TWP	1,222	Sussex	SPARTA TWP	740
Hudson	JERSEY CITY	3,622	Sussex	VERNON TWP	578
Hudson	BAYONNE	1,715	Sussex	HOPATCONG	530
Hudson	UNION CITY	1,456	Union	ELIZABETH	3,139
Hunterdon	RARITAN TWP	2,329	Union	PLAINFIELD	1913
Hunterdon	CLINTON TWP	1,043	Union	CRANFORD TWP	1,435
Hunterdon	READINGTON TWP	678	Warren	PHILLIPSBURG	627
Mercer	TRENTON	5,938	Warren	POHATCONG TWP	429

TABLE 29: EACH COUNTY'S TOP 3 MUNICIPALITIES IN VOLUME OF MARIJUANA POSSESSION ARRESTS, 2013

Atlantic	GALLOWAY TWP	136	Mercer	HAMILTON TWP	266
Atlantic	ATLANTIC CITY	125	Mercer	TRENTON	135
Atlantic	EGG HARBOR TWP	115	Mercer	LAWRENCE TWP	94
Bergen	HACKENSACK	536	Middlesex	EAST BRUNSWICK TWP	197
Bergen	FORT LEE	229	Middlesex	WOODBRIIDGE TWP	173
Bergen	PARAMUS	118	Middlesex	PERTH AMBOY	107
Burlington	BURLINGTON TWP	152	Monmouth	WALL TWP	247
Burlington	EVESHAM TWP	122	Monmouth	NEPTUNE TWP	223
Burlington	MOUNT LAUREL TWP	97	Monmouth	ASBURY PARK	214
Camden	CAMDEN COUNTY POLICE DEPT*	382	Morris	MENDHAM TWP	137
Camden	CHERRY HILL TWP	264	Morris	MOUNT OLIVE TWP	76
Camden	WINSLOW TWP	203	Morris	DENVILLE TWP	75
Cape May	NORTH WILDWOOD	99	Ocean	BRICK TWP	155
Cape May	WILDWOOD	77	Ocean	MANCHESTER TWP	124
Cape May	OCEAN CITY	72	Ocean	LAKEWOOD TWP	109
Cumberland	VINELAND	292	Passaic	CLIFTON	277
Cumberland	BRIDGETON	73	Passaic	WAYNE TWP	122
Cumberland	MILLVILLE	56	Passaic	PATERSON	122
Essex	NEWARK	1315	Salem	PENNSVILLE TWP	94
Essex	IRVINGTON	241	Salem	SALEM	57
Essex	EAST ORANGE	159	Salem	CARNEY'S POINT TWP	51
Gloucester	GLASSBORO	154	Somerset	HILLSBOROUGH TWP	68
Gloucester	DEPTFORD TWP	89	Somerset	FRANKLIN TWP	50
Gloucester	WEST DEPTFORD TWP	74	Somerset	BERNARDS TWP	48
Hudson	JERSEY CITY	342	Sussex	SPARTA TWP	52
Hudson	WEST NEW YORK	126	Sussex	FRANKLIN	39
Hudson	KEARNY	123	Sussex	HOPTACONG	34
Hunterdon	RARITAN TWP	81	Union	ELIZABETH	256
Hunterdon	READINGTON TWP	58	Union	UNION TWP	198
Hunterdon	CLINTON TWP	50	Union	PLAINFIELD	176

* Not a municipality

TABLE 30: TOP 25 MUNICIPALITIES WITH HIGHEST PERCENTAGE OF MARIJUANA ARRESTS THAT WERE FOR POSSESSION, 2000 — 2013¹⁵

Cape May	STONE HARBOR	98.13%	Monmouth	SEA BRIGHT	95.75%
Burlington	MEDFORD TWP	97.01%	Warren	POHATCONG TWP	95.75%
Cape May	OCEAN CITY	96.92%	Morris	LINCOLN PARK	95.57%
Burlington	MOUNT HOLLY TWP	96.67%	Ocean	LAKEHURST	95.36%
Union	ROSELLE	96.50%	Camden	WATERFORD TWP	95.29%
Bergen	HACKENSACK	96.42%	Monmouth	WALL TWP	95.13%
Somerset	HILLSBOROUGH TWP	96.30%	Bergen	MAYWOOD	95.03%
Ocean	SHIP BOTTOM	96.20%	Somerset	BERNARDS TWP	95.02%
Burlington	MOUNT LAUREL TWP	96.14%	Hunterdon	READINGTON TWP	94.77%
Hunterdon	RARITAN TWP	96.13%	Monmouth	ASBURY PARK	94.70%
Ocean	POINT PLEASANT BEACH	96.09%	Gloucester	WEST DEPTFORD TWP	94.64%
Mercer	HAMILTON TWP	95.96%	Burlington	WILLINGBORO TWP	94.60%
Passaic	WAYNE TWP	95.87%			

¹⁵ This figure does not include 2013 data from the Camden County Police Department, but rather only 2000-2013 data from the (City of) Camden Police Department. If 2013 marijuana arrests by the CCPD were added in, the combined arrests from 2000 to 2013 would total 2,502.

9/1x

A REPORT BY THE AMERICAN CIVIL LIBERTIES UNION OF NEW JERSEY



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Pot Legalization in NJ

The illegal sale of pot will continue to allow the distribution of treated product that can cause health issues including addictive and hallucinogen producing additives.

The illegal sale of pot will keep the growing and distribution of marijuana in the hands of criminals. To continue the war on drugs, specifically pot, has proven to be a waste of time and resources for the past 40 years.

Prosecution and incarceration ruins the lives of people for doing something no more harmful, in most cases less harmful, to themselves or those around them than drinking a beer, a glass of wine or a martini. And there is no scientific proof that untreated pot on its own is addictive like the other mind altering drugs I just mentioned.

conclusive

Decriminalization will likely embolden criminal sellers who will sell unregulated, treated, harmful products which would not be the case if a user was able to purchase a regulated, untreated product of choice at a legal dispensary. Legalizing the sale of pot should substantially reduce the use of bad street products by the monitoring and regulating of what users purchase and consume from legal dispensaries.

Another benefit of legalizing pot, not a primary motivation, is that NJ will gain millions of dollars in taxes that can be used for good causes. That's millions of dollars that won't go into the pockets of criminals who can use that money to purchase more dangerous and addictive drugs as well as guns and ammunition. Additionally, millions of more dollars in resources will be saved by freeing the time of police, judges, prosecutors and court staff allowing them to go after and prosecute real criminals instead of chasing our tails for another 40 years on frivolous cases, ruining people's lives while believing we are taking the moral high ground when what we are really doing is continuing to persecute and prosecute our minority populations, at a disproportionate rate, as statistics bear out. Those statistics also show that ruining people's lives in this way will push them into and keep them in our welfare system costing us more money and more resources.

Finally – legal or illegal, the best way to dissuade our children from smoking pot, or cigarettes, or drinking alcohol illegally, or taking and becoming addicted to opioids or other illegal drugs – is good parenting. It's on us as parents and extended family members. We can't do our parenting through legislation. We won't stop the people of New Jersey, or for that matter the citizens of our country, from smoking pot by keeping it illegal. What we can do is enact legislation that will help keep people safe.

To be clear – I am advocating for the legalization of marijuana but not until our NJ legislators have an appropriate plan that is right for New Jersey. Thank You for your time.

Is This Finally the Time When the War on the British-Run Drug Traffic Can Be Won?

by Ernest Schapiro, MD

March 25—Today we are witnessing an acceleration of the march to complete victory in the British Opium War against the United States. Eight states have already legalized marijuana for recreational purposes, and Vermont and Washington, D.C. allow marijuana possession and growing. Now, the Governor of the agro-industrial state of New Jersey, Phil Murphy, for many years a top Goldman Sachs banker, and ambassador to Germany from



2009 to 2013, intends to legalize marijuana use, and the current debate in New Jersey is limited to the varying degrees of repeal of the marijuana laws—this despite the fact that, in federal law, marijuana is a Schedule I narcotic, which is defined as having a high addictive potential and no medical use. One of the outcomes of the intended legislation will be prescription of marijuana to smoke for supposed medical purposes, and also the full availability of places to purchase marijuana for “recreational” use.

From the time in the late 1970s when I was a founder of the National Anti-Drug Coalition, our nation has been on a descent into Hell. Whereas at that time, marijuana used in the United States was mostly imported from South America, now it

is grown domestically, especially in California, and it is by far the biggest cash crop there. Whereas there is speculation in the media concerning whether legalization will lead to an increase in use, the answer is obvious, particularly among young people. Over a forty-year period, their usage rates have varied by a range of close to 100%, and that rate has been strikingly inverse to perceived risk. Legalization tells the young person that it can't be dangerous

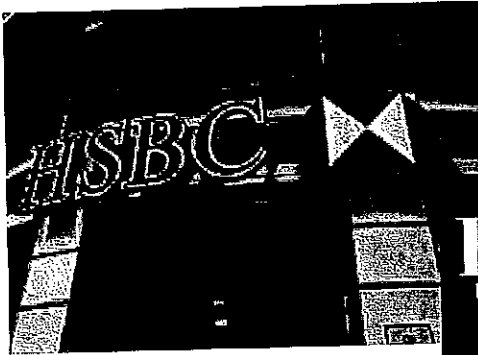
after all. As I will address a little later, the history of the many centuries of widespread hashish consumption in Islamic countries such as Egypt and Morocco, shows a collapse of civilization and the apparent impossibility of eradicating the highly addictive and motivation-destroying drug.



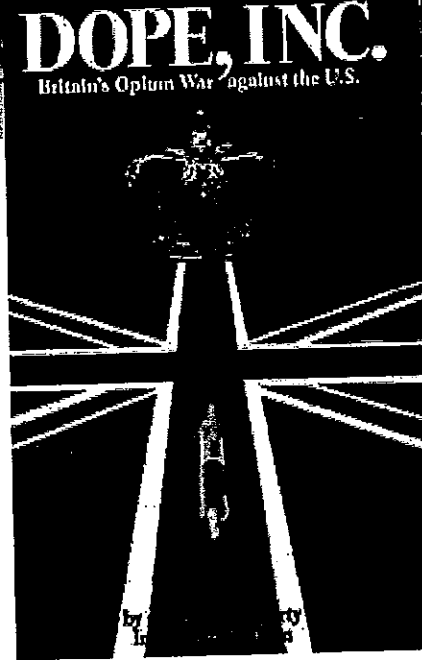
The Enemy: Dope, Inc.

In 1977 and 1978 our organization, the Lyndon LaRouche movement, clearly perceived the danger, because we recognized the intent of the British in conducting an Opium War against our nation. This was the result of our unique intelligence capabilities, our international deployment as a single organization, and above all, Lyndon LaRouche's method of hypothesis. We published our

94x



Headquarters of money laundering HSBC today (left) and its 1865 crest (right) from its Opium War roots, which incorporates the UK royal coat of arms.



findings in *Dope, Inc.*¹ By that time, we had recognized that there was a fundamental, implacable conflict between the British system of empire and the intention of the American republican tradition. We traced the history of the conflict between Britain and America and identified the key adversarial figures.

Through LaRouche's work in physical economy, we were alerted to anomalies in global financial flows and balances of payments. This led us to an investigation of the vast array of "offshore" financial institutions, the great majority in small places under the control of the British and Dutch crowns. One of the most notorious was the Hong Kong and Shanghai Bank, which just then was applying for a New York State charter allowing it to buy the Marine Midland Bank, the biggest bank in western New York state, which includes Buffalo, where I was living. A case of the useful role of our international deployment was in Canada: In our exposé of Edgar Bronfman, a key figure in *Dope, Inc.*, we had a confrontation with Louis Mortimer Bloomfield, whose law firm represented Bronfman. When I saw the report, I told our leadership that Bloomfield was a key figure in the JFK assassination, based on a book, *The Kennedy Conspiracy*, by Paris Flammonde,² which I read in 1973, a year

before I joined LaRouche's movement. I believe that had we not written *Dope, Inc.*, no one else could have done what we did. It required a kind of creative non-inductive leap based on LaRouche's insistence on seeking universal principles. Furthermore, once we had discovered the ordering principle, we were able to fill in the picture, including the offshore banks and the actual role of organized crime, including the way

it operates through secret ethnic societies. That included the Anti-Defamation League of B'nai B'rith and its protégés—Meyer Lansky, Edgar Bronfman, Max Fisher, and Mo Dalitz.

Armed with this book and our strategically distributed locations, both in North and South America and in western Europe, we were a tremendous threat early on. I was privileged to be a participant. Buffalo was a strategic location, as I said, because of the Marine Midland fight. I ran for school board and was able to make this a public issue. Marijuana had recently been decriminalized by the New York legislature at the behest of Governor Hugh Carey, and I was able to get up impromptu at a dinner of the Buffalo Teachers Federation, to which a member had invited me, and denounce it for supporting the legislation. I got the endorsement of several ministers, including the bishop of the Church of God in Christ, and the President of the National Council of Catholic Physicians, who lived in Buffalo. I spoke in many church services. The key organizing weapons were the *Dope, Inc.* book and our magazine, *War On Drugs*, for which we sold thousands of subscriptions on the street and in my case, over the phone, to local clergy and small businesses. Our

1. *Dope, Inc. Britain's Opium War against the U.S.*, by a U.S. Labor Party Investigating Team, New Benjamin Franklin Publishing House, New York, 1978. The book has gone through subsequent editions published by EIR. The latest, in 2010, is available at <http://store.larouche-pub.com/product-p/eirbk-2010-1-0-0-std.htm>. It has also had a Spanish edition, *Narcotráfico, S.A.*

2. Paris Flammonde, *The Kennedy Conspiracy: An Uncommissioned Report on the Jim Garrison Investigation* (New York: Meredith Press, 1969).

95

meetings were large; in one case a church brought a bus-load of people.

The response we got from the enemy was very instructive. The power of what we were doing forced the enemy to crush the National Anti-Drug Coalition (NADC) we had helped organize. The *Chicago Sun Times* and Illinois Attorney General Tyrone Fahner had the NADC banned in Illinois in 1982.³ Their assault on us featured the charge that we were anti-Semitic! Despite that, we won victories in the 1986 Illinois primaries. Janice Hart won the Democratic primary for Secretary of State, and Mark Fairchild won the primary for Lt. Governor. Judge Albert V. Bryan lied;⁴ we were indeed a clear and present danger.

Legalization Has Been Tried Before

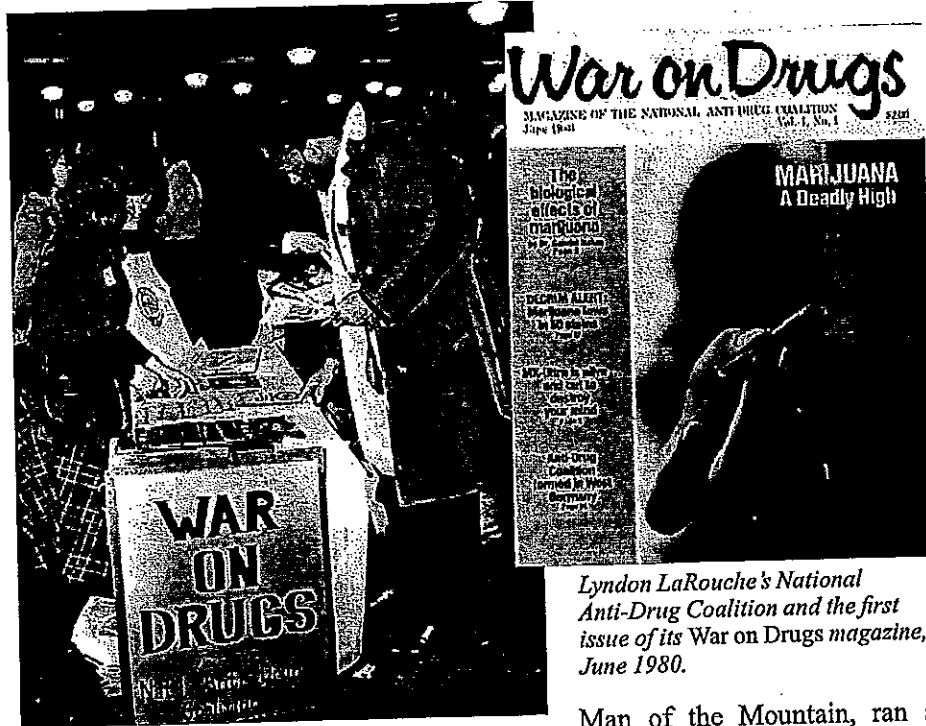
The power of Dope, Inc., to wag the tongues of the media, politicians, and corrupt health and other professionals is shown by the still-repeated story that marijuana is not harmful. I can elaborate the experience of the Islamic countries over many centuries, as reported by Dr. Gabriel Nahas⁵ in print and in his 1974 Congressional testimony, and by Egyptian psychologist Dr. M.I. Soueif in his very extensive study of male prisoners.⁶ The earlier high civilization of the Islamic world as a whole was destroyed, and a large portion of the male work-force debilitated. The Sufi cults encouraged its use, and the story is told that Hasan-i Sabbah, the Old

3. Christian Curtis, "Anti-Drug Group Sues ADL and Sun-Times," *Executive Intelligence Review*, Volume 9 Number 14: 1982.

4. *Railroad*, Commission to Investigate Human Rights Violations, Washington D.C. 1989, page xxiv.

5. Gabriel Nahas, M.D., Ph.D., "Hashish in Islam, 9th to 18th Century," *Bulletin of the N.Y. Academy of Sciences*, Vol. 58 #9, Dec. 1982. Gabriel Nahas, M.D. Ph.D., *Keep Off the Grass* (Paul S. Eriksson Publisher: 1990, Fifth Edition).

6. "Marijuana-Hashish Epidemic and Its Impact on United States Security," Hearings by the Subcommittee to Investigate the Administration of the Internal Security Act and Other Internal Security Laws, Committee on the Judiciary, U.S. Senate, 1974. See <https://archive.org/details/marihuanahashish00unit>



Lyndon LaRouche's National Anti-Drug Coalition and the first issue of its War on Drugs magazine, June 1980.

Man of the Mountain, ran a stable of political assassins who were so named from the word hashish.⁷ It was noted in Islamic chronicles and poetry, as well as the writings of European travelers, that hashish users were not only unfit for any but the simplest tasks, but also that they often went on to opium, as also reported by Dr. Soueif.

One problem that was not known in the Islamic world was the effects of young women's usage in damaging the fetal brain. There is evidence that marijuana causes "miswiring" of nerve fibers in the fetal brain, because the receptor of the normal endocannabinoid system guides their connecting with one another, and its function is injured by marijuana.⁸ The younger the user, through adolescence, the more developmental harm is suffered.⁹

Dr. Soueif stressed that the more intelligent the hashish addict had once been, the more loss of cognitive power he suffered. This becomes relevant to the fact that for a considerable period, the Islamic world was ahead of Europe in the quality of scientific discovery, astronomy, navigation, and medicine, and that this

7. The word assassin derives from Hasan-i Sabbah's political murder cult in the 11th and 12th Centuries. Members were called "Hashishin," meaning "hashish eaters."

8. G. Tortoriello, et al., "Miswiring the Brain," *EMBO Journal*, 2014 Vol 33 Number 7, 668-685.

9. Nora Volkow, et al., "Adverse Effects of Marijuana Use," *New England Journal of Medicine*, 2014, Volume 370, (23): 2219-2217.

9/10/17

cultural advantage and gift to mankind as a whole was destroyed by centuries of unchecked hashish use. This centuries-long history of the catastrophic effects of widespread cannabis use in the Islamic world has been well known to the British Empire's "Arabic" scholars at Oxford and Cambridge for decades. Yet, nothing is ever said about it in the American and European press, because if such knowledge became widespread, it would upset the plans of Dope, Inc. today. Uncovering, by astute historians, of the Dope, Inc. of that period would be of considerable value for us today.



Dr. Gabriel Nahas, 1920-2012.

What Marijuana Does to the Brain

It has been shown in new studies that marijuana is comparable in its effects on brain circuits and neurotransmitters to other addictive drugs¹⁰ and that it is comparable to cocaine in addicting power, and as difficult to quit. It is especially dangerous for people with a tendency to schizophrenia.¹¹ It brings the full-blown disorder on at an earlier age and makes it much more severe. Siblings of schizophrenics are therefore advised not to touch it.¹² Marijuana destroys executive function,¹³ i.e., the ability to make judgments, observe one's inner emotional state, make decisions, and delay gratification. It, in effect, destroys free will, leaving a compulsion to take the drug in increasing amounts as tolerance develops. In place of creative reason the victim engages in magical thinking and is more suggestible.¹⁴ That is, it increases impulsivity—of obvious relevance to the "new violence." One never hears about whether today's mass killers have been using marijuana. Effectively, marijuana destroys the fac-

10. Volkow, Nora, *ibid.*; Wrege, Johannes et al., "Effects of Cannabis on Impulsivity: A Systematic Review of Neuroimaging Findings," *Current Pharmaceutical Design*, April 2014, Vol. 20 number 13.

11. "Marijuana and Cannabinoids: A Neuroscience Research Summit," NIDA/NIH, March 22-23, 2016, Video. On March 22: First speaker is Dr. Eden Evans, "Adolescent Cannabis Use Increases Risk for Psychosis." She discusses relation to onset of schizophrenia. Second speaker, Dr. Alan Budney, "Adolescent Cannabis Phenomenology, Prevalence, Outcomes, and Problems." He discusses the comparative addictive power of marijuana and cocaine and aspects of addiction. See at https://www.youtube.com/watch?v=Gx5P_RXn6ds

12. See video, reference 11.

13. See references in 10.

14. Testimony of Dr. Andrew Malcolm, reference 6.

ulties which make us human; the ability of the creative faculties to govern the sensual or erotic is removed.¹⁵

Medical marijuana has always been a fraud. Marijuana contains dozens of compounds, including the chief intoxicant, tetrahydrocannabinol (THC). Many of these compounds have been isolated and tested. Some of them have potential benefits, especially cannabidiol, without the intoxicating effects of THC. Therefore, allowing people to become intoxicated and

addicted by smoking marijuana on the pretext of medical benefit has no justification, since any medical benefits can be derived from the isolated components. Medical marijuana is a monstrous lie and a fraud.

It should be kept in mind that under federal law, marijuana is still classified as a Schedule I drug. That means it has no medical use, a high potential for abuse, and the potential to create severe psychological and/or physical dependence. Therefore, the President has the authority to declare null and void all of the state laws which contravene that scheduling. This highlights the fact that to this day, no one in the executive branch or the Congress has been willing to declare that Britain is leading an opium war against this nation. I believe this is due to a combination of fear—that they will be subjected to the same treatment we received—and to a lack of intellectual guts. A case of the latter was our close contact, Dr. Gabriel Nahas, who knew the role of the British through his extensive study of the history of the drug trade and the fight by the Chinese and the Islamic countries against the British for agreements to end the traffic in opiates and marijuana.

If we are successful in turning the British overplaying their hand, as in the Skripal affair, and their obvious effort to destroy President Trump's collaboration with China and Russia, into an understanding of their underlying malevolent intent, it should be possible for Americans to finally make the connection of the British to drugs. Then, but only then, will Dope, Inc. become a thing of the past, along with the rest of geopolitics.

15. Lyndon LaRouche, "Remarks on Gurwitsch's Method, Part 2," *21st Century Science and Technology*, Fall 1998, pages 54-57. "These [the erotic and the agapic—ES] are two distinct kinds of morphogenetic development of the personality. As such, each must have its own peculiar physiological substrate."

97x

Saturday, April 14, 2018
Assembly Oversight, Reform, and Federal Relations Committee
Public hearing on the impact of prospective marijuana legislation

Good morning Chairman Danielson and other members of the Committee,

My name is Susanna Short, and I own homes in Morris and Monmouth Counties. My primary residence is in Mendham Township. Today I do not represent any particular organization, business, or political party, although I am a member and supporter of several groups advocating for both the reform of the medical marijuana program and the legalization and regulation of cannabis for adult use. I am not a patient in the medical program, although people close to me benefit from medical cannabis in this and other states.

I am strongly in favor of legalization for adult use, with the caveat that it must be done in a way that benefits patients in our medical program and in a way that has racial and social justice at its core. I am aware of the recent and pending changes to the medical program and believe that those changes are largely positive but miss the mark on doing anything to increase competition in the marketplace and thereby reduce the cost of medicine for our state's patients. Without lower costs, the black market will proliferate, and this is something that must be kept in mind when determining regulations for the adult use program as well.

Let me tell you a little about myself in the ways that relate to my position on this issue. I was born and raised in Philadelphia. I grew up on a street that, somewhat relevant to today's topic, is named "High Street," and it is in the Germantown section of the city. My family was in the racial minority in Germantown, and my social conscience and lens of the world was informed by a rich childhood in integrated schools and friends from different ethnic and socio-economic backgrounds. When my parents decided to move in with my grandparents, they sold their home to a formerly homeless family for one dollar. This was not because my parents were wealthy and couldn't have used the money. My brilliant mother earned no income staying home with her six children, and my father's salary was modest as a religion teacher in a program for juvenile delinquents. I remember one of the magnets that we had on our fridge-- "Live simply, so that others may simply live."

My education was in the Philadelphia school system for some years and also in Catholic schools run by the Sisters of Saint Joseph. I graduated from a Jesuit college, which I chose to attend because I was offered a full scholarship and promised that it was a place where I would grow "not only in wisdom, but also in grace." The Jesuit ideal of being a person for others was at the heart of my education, and I was able to promote social justice through my role in the campus ministry department, as the editor-in-chief of our school newspaper, and through the Special Jesuit Liberal Arts Program, from which I graduated with the highest GPA in the College of Arts and Sciences. I also met my husband in college, and I am proud that we have initiated and recently endowed a scholarship at our alma mater that is called the Men and Women For and With Others Scholarship. As I evaluate this issue of legalization, my Catholic education and faith certainly factor in, and though I am no saint, I strive to implement the tenets of Catholic Social Teaching including the option for the poor and solidarity, among others. The War on Drugs has been a war on black, brown, and poor people, and it has created and exacerbated poverty in our communities. Just yesterday, I read a perspective piece in the Washington Post that juxtaposed the criminalization of black crack-cocaine addicts in the 90s with the recognition of the primarily white

opioid crisis as a chronic disease. It's prosecution and prisons for people of color, while white addicts have treatment centers and sympathy. Cannabis as a substance does not destroy lives and families as crack-cocaine and opioids do, but prosecution of minor marijuana offenses does ruin lives and families—and overwhelmingly those destroyed lives are the lives of people of color.

One of my first jobs, besides babysitting and waiting tables, was working as a community organizer in Brooklyn, where I collaborated with community members around the issues of affordable housing and strategies for ESL parents to advocate for their children in the public schools. I also worked with the community when a methadone clinic moved in, and I came to understand the ways that addiction destroys families and communities as well as the ways that treatment programs can help. My husband and I also recently served as temporary resource parents (aka foster parents) for the New Jersey Department of Child Protection and Permanency, and again I gained firsthand knowledge of how addiction destroys families and damages children. I have relatives and friends whose families have been ravaged by alcoholism and opioid addiction. In these encounters with addiction, I have personally not seen cannabis abuse come anywhere close to the levels of destruction of these other substances, and I am aware of research that indicates that cannabis is a safer alternative to alcohol, can reduce opioid addiction, and is generally not as addictive as dozens of other substances including caffeine and sugar, one of which is a vice of mine.

I also worked as a high school teacher for about ten years and am an educator at heart. Tied up in that piece of my heart is a profound love for children and a genuine admiration of teenagers. I think teenagers are awesome. The last thing I would want to do is to advocate for a change that will harm young people or put them at greater risk. If we can effectively reduce black market activity and properly educate about cannabis, I am hopeful for a reduction in teenage use of cannabis. I am encouraged by stats out of Colorado, where they went from having the highest rate of teen use to the seventh highest after legalization and regulation. There is absolutely no way that underage people obtain access to dispensaries in other states; it just doesn't happen, and it wouldn't happen in New Jersey. Teenagers are smart enough to know that cannabis is not a gateway drug. If that is our message—that it is a gateway drug—they will discredit anything else we have to say about it. Alternatively, if we can inform them about the complexities of the plant, the way that it interacts with the endocannabinoid system, and the ways that it is harmful for a developing brain, what I know of teenagers tells me that many of them will evaluate the issue scientifically and make informed decisions. Of course legalizing cannabis for adult use will not eliminate teen use, but if their only source is the black market, and if we can reduce black market activity, it is a step in the right direction.

I have to shake my head in disbelief at these municipalities that are pre-emptively banning cannabis sales in their towns because they don't want to bring marijuana to their towns. Marijuana is in our towns, regardless of our zip codes. There is approximately a billion dollars of cannabis being sold annually in the black market across the state, and it is used at the same rates by white, brown, and black people. Yet, it is people of color who are disproportionately penalized. Data indicates that people of color are arrested at at least three times the rate of white people for nonviolent, minor marijuana offenses. This just isn't right. Further, I don't want my tax dollars and our police resources to be used arresting, prosecuting, and incarcerating people for these minor offenses. 25,000 people in New Jersey are arrested annually for these types of offenses, and these arrests ruin lives. Incarceration negatively affects job prospects, educational opportunities, and family structures. The lives that are being ruined are overwhelmingly the lives of people of color.

Some people see the problems with racial injustices related to this issue and propose decriminalization as an alternative to legalization. This will not solve the problem. Criminal justice resources will still be wasted on these violations, and failure to pay fines associated with civil penalties will result in criminal charges. So the wealthy who can afford to pay fines will have license to continue to use marijuana, yet those with fewer financial resources--most often people of color--will face more severe penalties. All the while, the black market will proliferate, and cannabis will be sold by dealers who in many cases also have access to dangerous and addictive drugs like heroin, cocaine, and pharmaceutical pills. Cannabis sold illegally will not be regulated and may be laced with something that could even kill someone, as we've seen even just since the beginning of March with the cases of synthetic marijuana being laced with rat poison and killing 3 people and sickening over 100 more in the Chicago area. And, of course, a more robust black market means more teen use.

I am sure you are aware that marijuana is decriminalized in New York, and I am sure you also know that Governor Cuomo laid some groundwork for legalization in just the past couple of days, and this would certainly be an indication that decriminalization does not work. Governor Cuomo's announcement came on the heels of candidate Cynthia Nixon's statement that, "We need to stop putting people of color in jail for something white people do with impunity."

I also have a personal interest in health and wellness that draws me to this issue. The medical benefits of cannabis have been well documented, and we've seen the medicine have a positive impact on our own state's medical patients. Currently I work in my family's insurance agencies in Morris County, and one of my roles is helping people to obtain life insurance. It is interesting to note that life insurance carriers, by and large, do not disqualify cannabis users from obtaining life insurance coverage. You know insurance companies--they have a bad rep for declining to cover so many things--and they certainly will not insure people who have harder drugs in their systems. Yet someone with THC in their system is still able to obtain life insurance coverage, and without a particularly significant penalty.

It is worth noting that the largest growing segment of cannabis users is the senior population, who see the benefits in helping with everyday aches and pains as well as serious health conditions. The argument can be made that almost all use of cannabis is medical in nature. Whether someone uses cannabis to alleviate pain, help them to sleep, or even to enjoy the health benefits of recreation and socialization, there can be a medical purpose served. Legalization will increase access for people using cannabis medicinally, and market competition should reduce patient cost. IF we do it right and protect our patients first.

Something that Dr. David Nathan, the head of the Doctors for Cannabis Regulation, said the other day stuck with me--"You do not have to be pro cannabis to be pro legalization, regulation, and taxation." Once people are educated on the issue and understand that marijuana is not a gateway drug and that this is a racial and social justice issue, regulation becomes the right choice. I urge you to legalize, regulate, and tax in a way that protects those who medicate with cannabis and in a way that keeps racial justice at the core. Ensure that businesses provide for patients first and that there is adequate competition in the market to bring down prices and reduce black market activity.

Realize that this is an industry that was built on the backs of people of color. As our program takes shape in New Jersey, it would be such a mistake to allow this industry to be taken over by white men. We've seen it in other states--these white men are heralded as trailblazers and industry pioneers while people of color are still viewed as criminals. Please don't let that happen in New Jersey. We have the

opportunity to be the leaders here. Regulate in a way that rewards municipalities for welcoming cannabis businesses that operate responsibly, and use funds generated by the program to reinvest in communities that have been hard hit by the war on drugs. Include automatic expungement in the final legislation.

I have a family member who serves as a township committee person in New Jersey, and I understand just how tirelessly public servants work. The sheer volume of information you must digest and legislate on is significant, and constituents can be very demanding and sometimes even unreasonable. I commend you for doing your due diligence on this issue and for holding these forums. I know that you take this seriously, and I hope that you see this as an exciting and empowering moment.

I speak to you today as an advocate for social and racial justice, a business owner, a voting taxpayer, a Catholic, a teacher, and a parent. Giving a homeless family a home, funding a scholarship that rewards advocates of social justice, and fostering children from substance abuse households is good stuff. Good karma, if nothing else. But as legislators, you have an opportunity to do much more. You have the power to impact an entire structure, to improve the lives of entire communities. Please do this right.

Thank you.

Susanna Short

Mendham, NJ 07945

New Jersey
Psychiatric
Association *A District Branch of the American Psychiatric Association*



March 4, 2018

Honorable Joe Daniels
Chairman, Assembly Oversight, Reform & Federal Relations Committee
334 Elizabeth Ave.
Somerset, NJ 08873

Dear Chairman Daniels:

My name is Debra E. Koss, MD. I am a board-certified child and adolescent psychiatrist with 25 years experience working with children, teens, and families. I am currently the Senior Vice President of the New Jersey Psychiatric Association (NJPA). This organization represents over 850 psychiatrists in New Jersey with expertise in multiple psychiatric subspecialties, including addiction psychiatry and child and adolescent psychiatry. I am writing on behalf of NJPA to express our concerns regarding the harmful effects of marijuana on adolescents and ask that you consider the following scientific evidence as you review legislation that could increase access to marijuana in this vulnerable population.

According to the Monitoring the Future Survey, rates of cannabis use by adolescents continue to increase. Forty-five percent of high school seniors have used cannabis, 23% are currently using and 6% use daily. These alarming trends are associated with perception. That is, as the perceived risk of marijuana use has decreased, rates of use have increased. Additionally, these early rates of initiation and use of marijuana are associated with increased rates of addiction and subsequent use of other illicit drugs. Of note, about one in six individuals who begin marijuana use as adolescents, develop cannabis use disorders.

The brain remains in a state of active development through the age of 25. During this critical developmental period, the young brain is more vulnerable than the mature brain to the adverse long-term effects of tetrahydrocannabinol, or THC, the active ingredient in marijuana. Cannabis use in youth is associated with reduced neural connectivity in the brain and reduced brain volumes in areas that influence memory, decision-making, impulse control, and motor functions.

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Research demonstrates that these brain changes are associated with significant declines in IQ, poor school performance, increased risk of dropping out of school, decreased occupational performance and increased unemployment later in life. Increased rates of motor vehicle accidents and fatalities have also been documented as a result of driving under the influence of marijuana. Furthermore, cannabis use in adolescence is associated with increased rates and worsening symptoms of psychosis, anxiety and depression.

Dangerous effects of marijuana have also been associated with increased potency. The average potency of THC has increased from 3% in 1992 to 12% in 2010 and the potency of edibles is even higher at 62%. Use of this more potent marijuana has been associated with serious medical consequences including unrelenting vomiting, difficulty breathing, increased heart rate and severe psychotic symptoms.

Increased rates of marijuana use, initiation at a younger age, and increased drug potency are harmful to the developing brain. Marijuana use by adolescents is associated with adverse developmental, cognitive, medical, psychiatric and substance use outcomes. We respectfully urge you to oppose any legislation that will increase access of marijuana to adolescents and emerging young adults. We recommend increased public education for children, youth, and families regarding the impact of marijuana on the developing brain; increased research into the effects of marijuana related policy on child and adolescent health; and improved access to evidence-based treatments for marijuana use disorders.

Sincerely,

A handwritten signature in black ink, appearing to read "Debra E. Koss".

Debra E. Koss, M.D.

Cc: Assembly Oversight, Reform & Federal Relations Committee

NJCCAP

New Jersey Council Child & Adolescent Psychiatry

New Jersey Council of Child and Adolescent Psychiatry (NJCCAP) Policy Statement on Marijuana, Cannabinoids, and Legalization

There is a growing trend in the United States toward legalization of marijuana for both medical and recreational purposes. With this trend, there has been an increase in marijuana use and a decrease in the public perception of harm associated with marijuana use and addiction. Additionally, the potency of marijuana has increased significantly over the years along with the availability of synthetic cannabinoids and edible forms of marijuana, often ingested by children with dire consequences. There is a lack of public awareness and education around the negative effects of marijuana use and abuse that needs to be addressed. There are particular risks for children and adolescents whose brains are still developing and a lack of research addressed at further understanding the effects of marijuana on children and adolescents. Efforts in public education to alert the public concerning the adverse effects of tobacco, alcohol, and cannabis have been successful when sustained.

There are many well-documented adverse effects of marijuana use such as altered brain development, cognitive impairment, decreased brain activity in areas of the brain and a significant increase in risk of developing psychotic symptoms or disorders. Those with habitual use have a greater risk of decreased academic performance, increased school dropout rates, decreased overall educational attainment and decreased workplace productivity. There are known carcinogens and toxins in marijuana and the long-term risk for developing cancer is unknown. The use of synthetic cannabinoids has led to multiple emergency room visits for paranoia, anxiety, and psychosis. The use of marijuana, particularly in adolescents increases not only the risk of addiction to marijuana, but also the risk of addiction to other substances. There have also been multiple reports of increased driving accidents and fatalities linked to driving while under the influence of marijuana.

There is little funding going toward the education, prevention or treatment of marijuana use and addiction. There is a huge amount of public funds involved in criminal penalties for marijuana use and possession that has disproportionately affected poor and minority communities. This disruption to the lives of these families has been linked to long-term social and economic destabilization. Legalization of marijuana has been proposed as a way of decreasing rates of incarceration and increasing the flow of tax revenues from the regulated sale of marijuana toward funding for education and treatment. However, there is no evidence for this and in states where marijuana has been legalized there have been concerning results such as increased emergency room visits for cannabis toxicity, psychotic reactions, and cannabis diversion to minors.

NJCCAP opposes any legislation that can increase the use of marijuana by adolescents beyond when prescribed for specified medical or research purpose.

As mental health advocates for NJ children and adolescents, NJCCAP recommends:

1. **Greater attention to the public health effects of any change in the legalization of cannabis that includes--**
 - a. **Increased research** into the health effects of marijuana
 - b. **Increased research** into the effects of marijuana-related policy changes on child and adolescent mental health
2. **Increased public education** to children and families regarding the known adverse effects of marijuana on youth
3. **Increased attention to the special issues related to children and young adults and immediate access to evidence-based treatment** for marijuana use disorders

Approved February 15, 2017



Marijuana and Youth: Utilizing Science to Inform Policy



Brain development continues until the age of 25

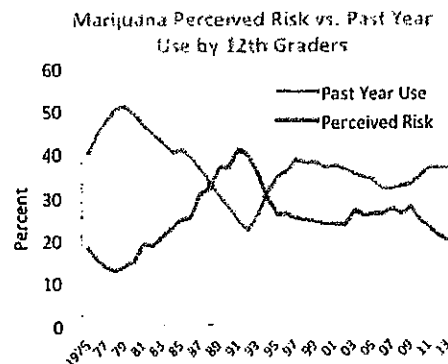
Cannabis use in youth is associated with decreased brain connections and volumes in areas involved with memory, decision-making, self-control, and motor functions.¹

Effects of cannabis use in adolescence

- Decreased academic performance, increased drop-out rates, and decreased college enrollment and educational achievement.
- Decreased occupational performance and increased unemployment later in life.
- Increased rates of and worsening of psychotic disorders (including 2-5x increase in schizophrenia), mood, and anxiety disorders.
- Decreased IQ by 8 points on average.

Rates of Use²

- 45% of US high school seniors have used cannabis
- 23% of US high school seniors use currently
- 6% of US high school seniors use daily
- Decreased perceived risk is associated with increased use in youth.



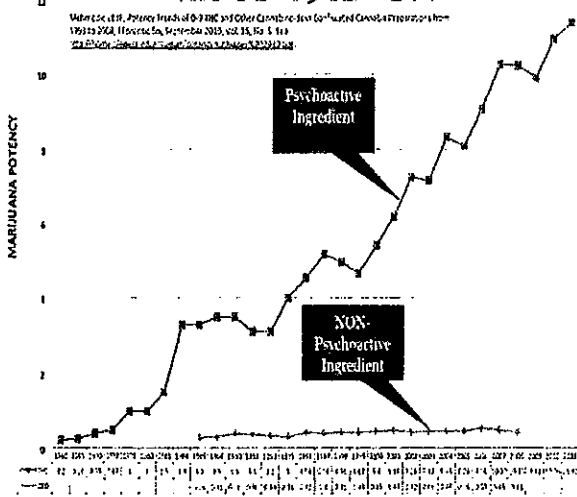
SOURCE: University of Michigan, 2013 Monitoring the Future Study

Cannabis Use and Addiction³

- Earlier use predicts greater risk of developing addiction to cannabis.
- People who begin using marijuana before the age of 18 are 4-7 times more likely than adults to develop a marijuana use disorder.⁴
- Youth who use cannabis are at greater risk for developing addictions to other substances including opioids.

Marijuana and Youth: Utilizing Science to Inform Policy

Average THC and CBD Levels in the US: 1960 - 2011



Marijuana Potency and Youth⁵

- Currently marijuana has higher potency (12% THC) vs. marijuana in 1990's (3%) and edibles and concentrates are even higher (62%).
- Increased potency cannabis use associated with dangerous effects including unrelenting vomiting, difficulty breathing, increased heart rate, and severe psychotic symptoms.
- Increased potency has been associated with increases in adolescent detox/rehab admissions and calls to poison control due to child marijuana ingestion and exposures (2-fold increased rate of accidental exposure in children less than 6 in states with legalized marijuana).

Recommendations

NJCCAP, NJPA and NAMI oppose any legislation that will increase access of marijuana to adolescents. We recommend the following steps be taken:

- Increased funding of educational programs for youth and their families about the effects of marijuana on youth.
- Increased funding of research into the effects of marijuana on youth and treatment strategies for marijuana addiction.
- Increased access to evidence based substance treatment programs for youth.
- Implementation of steps to prevent the distribution of marijuana and cannabis products to children and adolescents.

¹Volkow, ND, et al. Adverse health effects of marijuana use. *N Engl J Med.* 2014 June 5; 370 (23): 2219-2227.

²Johnston, LD, et al. (2014). *Monitoring the Future national results on drug use: 1975-2013: Overview, Key Findings on Adolescent Drug Use.* Ann Arbor: Institute for Social Research, The University of Michigan.

³Hall, W, Degenhardt L. Adverse health effects of non-medical cannabis use. *Lancet.* 2009 Oct 17; 374(9698): 1383-91.

⁴Winters KC, Lee C-YS. Likelihood of developing an alcohol and cannabis use disorder during youth: association with recent use and age. *Drug Alcohol Depend.* 2008;92(1-3):239-247.

⁵ElSohly MA, et al. Changes in cannabis potency over the last 2 decades (1995-2014); Analysis of current data in the United States. *Biol Psychiatry.* 2016 Apr 1; 79(7):613-9.

NJCCAP
New Jersey Council
Child & Adolescent Psychiatry



NAMI New Jersey
National Alliance on Mental Illness

106



**Testimony for Assembly Oversight, Reform and Federal
Relations Committee
April 13, 2018**

**By: Diane Litterer, MPA, CPS
CEO & Executive Director of New Jersey Prevention Network**

Thank you allowing me to testify today on this important topic. I am Diane Litterer, the CEO of the New Jersey Prevention Network. NJPN is a public health agency working to create healthier communities by reducing the burden of substance use, addiction and other chronic disease. I will be speaking today highlighting the research available, the lessons learned from other states and my own 30 years' experience in public health and working in communities in Union County and across the state. I share the field of addiction's grave concerns about the consideration to legalize recreational marijuana in New Jersey. In the midst of an addiction epidemic, making a drug that often starts people's path to addiction more available to our youth and young adults is counter to all common sense and research.

Today's marijuana is very different than many remember even ten years ago. Not only has the THC in traditional smokable form increased from about 4% in 1970 up to as high as 30% THC today, but it is now available in various concentrated forms that have THC levels as high as 99%. These concentrates are being used in electronic smoking devices commonly known as vapes or e-cigarettes as well as edible products such as gummy bears, lollipops, brownies and other products that are

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very enticing to our youth. These extreme THC levels have had significant impact on the health of its users.

*According to Nora Volkow of NIDA, "...the higher the content of THC, the higher the likelihood that you can actually become addicted to it. And also, interestingly, high content THC also has an associated risk of psychosis...Repeated marijuana use during adolescence may result in long-lasting changes in brain function that can jeopardize educational, professional, and social achievements. However, the effects of a drug (legal or illegal) on individual health are determined not only by its pharmacologic properties but also by its availability and social acceptability. In this respect, legal drugs (alcohol and tobacco for example) offer a sobering perspective, accounting for the greatest burden of disease associated with drugs not because they are more dangerous than illegal drugs but because their legal status allows for more widespread exposure."*ⁱ

Legalization of marijuana makes this drug significantly more accessible to our youth. We have learned that the attempt to regulate a substance does not effectively keep the substance from our youth but does just the opposite. Youth marijuana rates in states that have legalized are increasing with Colorado having the highest youth marijuana use rates, double the national average.ⁱⁱ The industry and businesses created through legalization become motivated by profits and create and promote products that capture the attention of our youth. Examples of this currently are the various edible forms of marijuana that include gummy bears, lollipops and in food products such as cookies and brownies. 47% of the marijuana sold in Colorado are in these forms. These edibles have extremely high THC levels up to 99% THC and are being promoted as harmless which we know is not true. These products allow an easy introduction to marijuana use by youth. This results in increased accidental poisonings among the very young in the Colorado emergency departments. It also allows youth to be introduced to

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marijuana in a kid-friendly form. The marijuana oils and waxes are being used in the popular vaping devices that is creating a popular but dangerous culture introducing our youth and young adults to this drug as well as nicotine.

We know that marijuana is an addictive drug in approximately one in ten adults who use and one in six adolescents who have used marijuana. This percentage goes up to 25% to 50% for daily users. As I mentioned earlier, NIDA highlights that the higher the THC level, the higher the addiction rate. As our state is in the middle of an addiction epidemic, we are concerned with the peer-reviewed research that revealed early marijuana use more than doubles the likelihood of opioid use later in lifeⁱⁱⁱ Marijuana's impact on mental health is also concerning. Research has determined that marijuana use triggers psychotic symptoms as well as the onset of schizophrenia.

Marijuana use has also shown to have a negative impact in our youths' academic success, it reduces high school and college graduation rates, reduces employment success, increased car crash fatalities and increases the risk of addiction and mental illness. It has also been found to reduce IQ scores by up to 8 points. For those students already struggling, this impact can be devastating to their success. We want our youth to succeed and marijuana use is detrimental to their success. The marijuana industry is already spending millions of dollars to promote this drug as harmless and often boasting the benefits of the use of marijuana. These mis-representations of the harmlessness of marijuana confuses our youth and highlights the danger of letting this industry loose on our New Jersey youth. Colorado has more marijuana stores than Starbuck and McDonald's combined and these businesses have free reign in promoting their products through advertising, signage, discounts and more. Do we want to normalize marijuana use among adults which

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will in turn normalize marijuana use among our youth? I certainly don't want my grandsons to be raised in a community that has a marijuana leaf lite up in green neon lights or a marijuana drive-through convenience store.

There are many that have an idealistic impression that legalization is a way to eliminate youth's legal consequences for marijuana use and not penalize a youth's poor judgement in having marijuana in their possession. But the legalization legislation currently proposed will do nothing to address the legal impact for youth since it only addresses those over 21. It will still be illegal for youth under 21. In Colorado, full legalization has not addressed the youth arrest rates among minority youth but instead has increased the arrests among our minority youth since legalization with a 58% increase for black youth and 29% increase for Hispanic youth^{iv}.

The current decriminalization bill sponsored by Senator Rice more effectively addresses a positive alternative to marijuana related arrests among our disparate populations by changing the reaction to marijuana use to one of a more supportive approach and one that will not result in an arrest. We certainly want to solve the social justice issues that are negatively impacting our most vulnerable communities, but legalization has not been that solution. Legalization has actually followed the tobacco industry's rule book by specifically targeting these most vulnerable communities with a higher density of marijuana outlets being placed in the most disparate communities in Colorado.^v

NJPN and others in the addiction field who care about the youth of NJ are concerned about the negative consequences that states who have legalized marijuana are experiencing including an 1) increase in youth marijuana use rates double the national rates; 2) an increase in car crashes related to marijuana impaired driving resulting in 2x the rate of

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fatal car crashes; and 3) the creation of an industry similar to the tobacco industry who's business is to promote a substance that is addictive in one in six adolescents and can be up to 50% of those youth who use marijuana daily.

New Jersey's current youth marijuana use is below the national average because of the quality of our prevention efforts and the current status of marijuana as an illegal product. 5.7 % of New Jersey's youth have used marijuana in the past 30 days which is below the national average of 8.6%.^{vi} Colorado's youth use rate is at over 12% due to legalization.

As a professional who has dedicated my lives to helping those afflicted with the disease of addiction, I strongly oppose legalization of marijuana in New Jersey and ask that more time be spent on creating alternatives that will not promote and normalize a drug that will negatively impact our youth and young adults. We have the ability to use science and best practice to address the issues that face our state and we need to look to those solutions and not create an industry whose motivation to profits will mislead and promote their product to our youth and young adults with significantly negative consequences. Thank you for the opportunity to speak to you today. Please make the youth of our state a priority and don't legalize marijuana in NJ.

ⁱ Nora Volkow, Director of NIDA from New England Journal of Medicine

ⁱⁱ National Survey on Health and Drug Use, 2015

ⁱⁱⁱ Secades-Villa, Garcia-Rodríguez, Jin, Wang, & Blanco, 2015; Olfson, Wall, Liu, & Blanco, 2017

^{iv} Colorado Department of Public Safety, 2016

^v Rocky Mountain HIDTA Report

^{vi} National Survey on Drug Use and Health, 2016