



the  
Drug Policy  
Forum  
of hawaii

NEWSLETTER

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## Drug Policy's Ira Glasser featured At DPFH Annual Dinner

**D**PFH's Annual Dinner Meeting on Saturday, April 13, promises to be a great one. We'll be presenting our annual Ho'omaluhia Award, catching you up on legislative activities and national events, and you'll get to hear from a truly impressive leader in drug policy reform: Ira Glasser.

This year's dinner is at Che Pasta, 1001 Bishop Street (Bishop Square) in downtown Honolulu. We'll begin at 5:30 p.m. with a no host bar, dinner at 6:30, followed by the program. Cost is \$25 for members, \$35 for non-members (with membership available at the dinner.) For further details visit online at [www.dpfhi.org](http://www.dpfhi.org), e-mail Darlene Hein at [dhein@hawaii.rr.com](mailto:dhein@hawaii.rr.com) or call 384-7794. Space is limited and we must have the count for the restaurant by April 6<sup>th</sup> --so please contact us now!

Featured speaker, Ira Glasser, recently retired as Executive Director of the national American Civil Liberties Union. During his 23 years in that position he made a huge impact on this nation as one of the foremost protectors of the Bill of Rights. Increasingly he has focused his attention on prohibition and the failed War on Drugs and its central role in abridging those rights.

Since the late 90s, Ira has served as President of the Drug Policy Alliance (formerly the Lindesmith Center-Drug Policy Foundation) working closely with its Executive Director Ethan

Nadelmann. He's appeared on countless television shows, written scores of op ed pieces, and has testified before Congress, while managing an organization with more than 300,000 members and over 600 employees. In short, Ira is profoundly knowledgeable, an insightful and original thinker, and a brilliant and dynamic speaker.

Ira was last in Hawai'i in 1982. Don't miss this opportunity to meet him and hear him speak on "Drug Prohibition and the Erosion of Civil Rights: Prospects for Reform." There will be plenty of time for catching up with old friends and meeting new ones. See you there! *-Pau*

## Legislative update on SB 1188 by Kat Brady

**L**ast session (2001) Governor Cayetano introduced SB 1188, which would divert first-time NON-VIOLENT drug offenders to treatment in lieu of incarceration. This bill was extensively debated and made it to Conference Committee only to be held up by the Senate which insisted on a study instead of the bill.

This was a puzzling argument since SB 1188 SD2 HD2 (the latest incarnation of the bill) called for complete data collection in the first year of the legislation (2001-2002) by the Department of Health, the Department of Public Safety, the Hawai'i Paroling Authority, and the Judiciary:

- Conduct an inventory of existing

Update

## Medical marijuana

**N**ews about medical marijuana is primarily positive. We are pleased that there are currently 550 patients legally using marijuana as medicine in Hawai'i, certified by approximately 50 participating physicians. No bills were introduced at the legislature this session that would amend the law in a way that would be harmful to patients. Overall, not bad!

The major issue that we continue to hear about is the difficulty in finding a physician who is willing to certify patients for use of MMJ. While this is largely due to physicians' concerns about John Ashcroft and friends, we

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treatment programs for criminal offenders in Hawai'i;

- Identify gaps in services that might impact the intent of this bill;
- Recommend methods to fill the gaps including any associated costs;
- develop a "best practice" service guide for substance abuse treatment providers;
- conduct a thorough study of the fiscal implications of diverting nonviolent drug offenders from incarceration to treatment;
- gather information regarding the status of the diversion efforts underway in Arizona and California.

*(Continued on page 2)*

# No News . . . Is Good News

by Pam Lichty

**W**hen it comes to the Hawai'i State Legislature that is. There were very few bills this year that related to illegal drugs or drug treatment. Most of the ones that were introduced dealt with sentencing or other prison-related issues. Was this because they wanted to avoid controversy in an election year or because no legislators had a burning desire to introduce either reform-minded or punitive bills?

The only bills addressing the medical marijuana law, for example, were Senate and House companion ones, drafted by the Big Island's Jonathan Adler, which would have permitted a distribution system. These never saw the light of day. An interesting one which would have formed a "controlled substances panel" to determine under what circumstances practitioners other than physicians could prescribe was killed by the Commerce, Consumer Protection and Housing Committee, Ron Menor, chair.

There was plenty of discussion at the Legislature, however, about the value of treatment in lieu of incarceration. See Kat Brady's article for details on the struggle to translate this lip service into actual legislation. *-Pau*

## Medical marijuana

*(Continued from page 1)*

think there could be some fine tuning of the state's registration process to make it more convenient for patients and physicians. As the annual recertification becomes necessary for the patients who registered last year, we will be initiating discussions with the Department of Public Safety to try to streamline the process for everyone involved. *-Pau*

## Justice Policy Institute Report: Hopeful trend in prison reform

A new report released by the Justice Policy Institute on 2/7/02 highlights states that are responding to fiscal crises by closing prisons or downsizing correctional systems, and outlines strategies that states can employ to reduce correctional costs while maintaining public safety. The report shows that the public is shifting away from support for imprisonment for non-violent offenders, and now embraces a wide array of prevention, rehabilitation and alternative sentencing approaches.

Corrections expenditures represent a substantial part of states' budgets, with one out of every 14 general fund dollars spent on prisons in 2000; when \$40 billion were spent on imprisoning approximately two million state and local inmates, with \$24 billion of that total spent on incarcerating non-violent offenders. **Ohio, Illinois, Michigan and Florida** Republican governors have decided to close prisons. **Texas, Ohio, North Carolina and Louisiana** have reduced or taken steps to reduce their prison populations. Proposals by both political parties and policy advocates to modify sentencing practices are being considered in **Washington State, Kansas, New York, and Oregon**.

A menu of proposed options for reducing spending include:

- **Repeal mandatory sentencing, restore judges' discretion, and place certain low risk non-violent offenders in alternatives.**
- **Reform drug laws to divert drug offenders from incarceration.**
- **Restructure sentencing.**
- **Reform parole practices.**

Will Hawai'i state legislators follow the trend, or continue with business as usual?

## SB 1188 *(Continued from page 1)*

The actual implementation would not take place until the second year (2002-2003) when the data was compiled.

The main opponents of this measure were the Prosecutor's Office (who testified that they "could not remember one case of a first-time drug offender going to prison") and the Judiciary, whose bottom line was their concern about a program that might compete for Drug Court funds.

Since our legislature works on a biennium schedule, this bill from last session is still alive in the Conference Committee. This means that no hearings will be held during this session, but the Conference Committee can re-convene and pass it out. If they don't reconvene, it is dead and we will have to start over next session.

YOU CAN HELP by calling or e-mailing the legislators below and

asking them to "Reconvene the Conference Committee on SB 1188 - Treatment in Lieu of Incarceration - and to pass out SB 1188 SD2 HD2."

Senators: \*Brian Kanno, \*Colleen Hanabusa, Jonathan Chun, Sam Slom; Representatives: \*Nestor Garcia, \*Bob Nakasone, \*Dennis Arakaki, Willie Espero, Bertha Leong and Emily Auwae.

(\* Indicates Senate and House Co-Chairs of Conference Committee.)

Telephone numbers and e-mail addresses are listed on the State Capitol website: <http://www.capitol.hawaii.gov/>.

E-mail for senators is [senLASTNAME@capitol.hawaii.gov](mailto:senLASTNAME@capitol.hawaii.gov) (Example: [senkanno@capitol.hawaii.gov](mailto:senkanno@capitol.hawaii.gov).) For members of the House, use [repLASTNAME@capitol.hawaii.gov](mailto:repLASTNAME@capitol.hawaii.gov).

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# Nixon tapes indicate “misinformation” At root of War on Marijuana

Researched and reported by Kevin Zeese and Doug McVay,  
Common Sense for Drug Policy

Washington, D.C.—“We need, and I use the word ‘all out war,’ on all fronts . . . .” That was Richard Nixon’s reaction to his national commission’s recommendation that marijuana no longer be a criminal offense according to recently declassified Oval Office tapes. The year after Nixon’s “all out war” marijuana arrests jumped by over 100,000 people even though the experts said it should not be criminal.

The tapes from 1971-1972 demonstrate that the foundation of the modern war on marijuana was Nixon’s prejudice, culture war and misinformation. The release of the newest set of tapes coincide with this March 22, the 30th Anniversary of the National Commission on Marihuana and Drug Abuse (“the Shafer Commission”) appointed by President Nixon, and highlights the discrepancy between Nixon’s personal agenda and his Commission’s highly researched recommendations.

“At a critical juncture when the United States decided how it would handle marijuana, President Nixon’s prejudices did more to dominate policy than the thoughtful and extensive review of his own Blue Ribbon Commission,” observed Kevin Zeese, President of Common Sense for Drug Policy. “It is time to end a marijuana policy based on Nixon’s prejudices and put in place a policy that works. If we follow the advice of experts we would have less marijuana use, spend less money on marijuana enforcement and arrest many million less people.”

Since the Commission issued its recommendation that marijuana offenses not be a crime, fifteen million people have been arrested on marijuana charges.

Highlights of Nixon comments on marijuana:

- Marijuana compared to alcohol: marijuana consumers smoke “to get high” while “a person drinks to have fun.” Nixon also saw marijuana leading to loss of motivation and discipline but claimed: “At least with liquor I don’t lose motivation.”

- Marijuana and political dissent: “. . . radical demonstrators that were here . . . two weeks ago . . . They’re all on drugs, virtually all.”

- Jews and marijuana: “I see another thing in the news summary this morning about it. That’s a funny thing, every one of the bastards that are out for legalizing marijuana is Jewish. What the Christ is the matter with the Jews, Bob [Haldeman], what is the matter with them? I suppose it’s because most of them are psychiatrists . . . .”

- Marijuana and the culture wars: “You see, homosexuality, dope, immorality in general. These are the enemies of strong societies. That’s why the Communists and the left-wingers are pushing the stuff, they’re trying to destroy us.”

- Drug education: “Enforce the law, you’ve got to scare them.” —Pau

## *Timely quotes From yesteryear*

“Beware the leader who bangs the drums of war in order to whip the citizenry into a patriotic fervor, for patriotism is indeed a double-edged sword. It both emboldens the blood, just as it narrows the mind. And when the drums of war have reached a fever pitch and the blood boils with hate and the mind has closed, the leader will have no need in seizing the rights of the citizenry. Rather, the citizenry, infused with fear and blinded by patriotism, will offer up all of their rights unto the leader and gladly so. How do I know? For this is what I have done. And I am Caesar.”

— Julius Caesar

(Posted on I-net by Nicky Eyle of ReconSider)

They knew it in 1936....

“Stringent laws, spectacular police drives, vigorous prosecution, and imprisonment of addicts and peddlers have proved not only useless and enormously expensive as means of correcting this evil, but they are also unjustifiably and unbelievably cruel in their application to the unfortunate drug victims...Drug addiction, like prostitution and like liquor, is not a police problem; it never has been and never can be solved by policemen. It is first and last a medical problem.” August Vollmer, *The Police and Modern Society*, 1936, pp.117-118.

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## **Bush acknowledges Colombian coca Production increase**

Despite an unprecedented aerial herbicide spraying campaign, illicit coca production in Colombia increased by roughly 25% last year, according to the White House Office of National Drug Control Policy.

(Continued on page 5)

- **Full report:**  
<http://www.csdp.org/research/shafernixon.doc> or  
<http://www.csdp.org/research/shafernixon.pdf>.
- **Transcripts in text format:**  
<http://www.csdp.org/research/nixonpot.txt>

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# "Date Rape" drug available soon At your local pharmacy

by D.M. Topping

Some of you may remember the front-page stories from July 1998 of the big "drug-lab" bust in Foster Village where the perpetrator was charged with manufacturing GHB (gamma-HydroxyButyrate), a.k.a. the "date-rape" drug, which had been made illegal by the Hawai'i State Legislature the year before. Well, it now seems that the very same substance will soon be available by prescription from your physician under the product name of *Xyrem*, developed by Orphan Medical, Inc.

One might wonder how this "drug," which was sold legally over the counter in health-food stores until November 1990, later demonized, banned, and finally placed on Schedule I of controlled substances, could make its way back to market through Big Pharma. In view of this history, one might begin to suspect collusion between the pharmaceutical industry and a certain agency of the federal government.

Without going into great detail, here is a possible scenario.

GHB, which exists in everyone's body as a natural substance, was first synthesized in 1960 by a French physician, Dr. Henri-Marie Laborit. It is a relatively easy compound to manufacture, requiring only a stainless steel or glass bowl, a mixing spoon, and the component ingredients, which were readily available from chemical suppliers until the drug warriors clamped down.

From the 1970s, word about GHB's beneficial uses began to get around, especially among body-builders and health-food enthusiasts looking for a natural mood-enhancer and non-toxic sleep aid. As its popularity grew over the next decade, GHB found its way

into the party drug crowd, who found that it served as a feel-good drug. They also discovered that increasing the dose would also bring on immediate and deep sleep.

While European physicians began to use GHB to treat insomnia, narcolepsy and alcohol addiction, the medical profession in the U.S. remained in

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## **Big Pharma eventually woke up to the fact that GHB was a drug with enormous sales potential.**

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complete ignorance, since it gets all its drug information from the pharmaceuticals, and Big Pharma showed no interest in a drug that any amateur could make in the kitchen for a few bucks.

What happened to bring about such a dramatic shift? And how did it happen?

One possible scenario goes like this. Big Pharma eventually woke up to the fact that GHB was a drug with enormous sales potential, particularly as a non-toxic sleep aid without the typical morning-after fog that most sleeping pills produce. The problem was how to develop a profitable market for a product that is already available through health food stores at a very modest price? The answer: make it illegal. Who makes drugs illegal in this country? The government. Who influences the government? Mostly paid lobbyists, of which the pharma-

ceutical industry has many.

In the early 90s the DEA attempted to schedule GHB as an illegal drug. However, they encountered an unexpected problem with a fellow agency, the FDA, which refused to label GHB a drug, since it is a naturally occurring substance in all mammals. Since it was not officially a drug, the DEA did not have the power to schedule it. They needed to find a way around this dilemma. They found one, and it worked to perfection.

The tactic used was to lobby state legislators with the argument that they must protect the young women of their communities – their daughters - from this dangerous, lethal date-rape drug. In state after state, legislators voted unanimously to outlaw GHB on the state level. By 1997, 10 states, including Hawai'i, had laws against GHB on their books.

Next, the lobbyists and DEA officials went to work on the U.S. Congress which, without dissent, voted to place GHB on the federal schedule of prohibited drugs, where it has been for the past two years.

This total ban on GHB gave the green light for Big Pharma to move in, start producing the substance, give it another name and put it on the market of prescribed drugs at a price yet to be determined.

Does this sound like conspiracy? Could such a thing happen in a free and open society in which the pharmaceutical industry is only there to help?

If this sounds too far-fetched, check out the book *GHB: the Natural Mood Enhancer*, by Ward Dean, M.D. *et al* and the following URL: <http://sleepdisorders.about.com/library/weekly/aa061001c.htm>

For detailed information on GHB see [www.erowid.org](http://www.erowid.org) –Pau

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## News from abroad

(Within the limited space available, we try to include drug policy news from other countries, news that, for one reason or another, doesn't appear in the local media. -DMT)

### Ministers declare 'war on drugs' is over

by Neil Mackay, Home Affairs Editor, *Sunday Herald* (Scotland)

Scotland's drugs minister has officially declared that the 30-year war on drugs is over. In an exclusive interview with the *Sunday Herald*, Dr Richard Simpson, also the deputy justice minister, said: 'The only time you will hear me use terms such as 'War On Drugs' and 'Just Say No' is to denigrate them.'

Instead Simpson has pledged to ensure that Scotland's harm-reduction, methadone, and rehabilitation services are fixed.

Simpson, who was a prison doctor, said: "I've never used the term 'teach children how to take drugs', but what I would say is that we need to provide them with information. We need to say 'we'd rather you didn't take ecstasy, but if you make that decision, here are the risks'. We have to give them all the information they need to take responsibility for themselves.

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#### Bush acknowledges

(Continued from page 3)

The White House claims the finding of increased coca cultivation can be explained in part by the inclusion of regions covered by clouds when the country was surveyed in 2000.

The U.S. assessment differs from that of the Colombian Justice Ministry, which claimed an overall decline of 16% late last year. The alleged decline was heralded as a "clear demonstration" that the U.S. funded eradication campaign was working - and that giving Colombia additional funds for supply-side eradication would be money well spent. -Pau

(From *Drug Policy Alliance e-letter*, 3/14/02)

"We've got to be very realistic and not say 'you're going to die if you take ecstasy', what we will say is 'some people do die when they take ecstasy but we don't truly know why'."

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**"It wasn't a prison sentence he got, it was a death sentence . . . Going to jail harmed my son and did nothing to address the cause of crime."**

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In another interview, the UK pensions minister Ian McCartney, whose son died of a heroin overdose because he was not given methadone in jail, told the *Sunday Herald*: "It wasn't a prison sentence he got, it was a death sentence. There is no sense to the current system. Going to jail harmed

my son and did nothing to address the cause of crime."

His Scottish government colleague Simpson also edged close to support for a Royal Commission on drugs saying that the debate was 'stifled', and issues such as legalisation and decriminalisation 'have to be addressed', adding: 'We can't have a genuine debate about these issues because some of the press turn around and say that's wrong. We need to have that debate, we need to be more sophisticated about our approach. I think this parliament has to talk about it much more openly.'

He attacked the jailing of addicts for short prison terms. "Drug addicts going into prison and coming back out again is a waste of public money. It neither addresses their offending behaviour nor does it cut crime. It's purposeless ... We have our priorities wrong." He added that he would like to see "very, very, very many fewer" addicts going to prison. -Pau

#### Switzerland opens "inhalation rooms" In bid to encourage treatment

As one of the first countries to embrace needle exchange, safe injection rooms and heroin maintenance trials, Switzerland is again pushing the harm reduction envelope with the addition of two Zurich-based inhalation rooms where crack and heroin users can smoke their drugs without fear of arrest.

Acknowledging that driving drug use underground compounds the problem, the medically supervised rooms have an emergency service in the event of

overdoses and serve as a bridge to drug treatment.

The goal is to prevent short-term drug-related harm while simultaneously encouraging an estimated 30,000 users of crack and heroin to seek help over the long-term. Public health professionals provide problem drug users they might not otherwise meet on the streets with referrals to drug treatment.

Three other Swiss towns have plans to open similar centers. -Pau

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# DPFH NEEDS YOUR HELP

As most of you know, DPFH depends on membership dues and contributions to cover the costs of this newsletter, announcements and flyers for events that we sponsor. All office expenses are covered by personal funds of the officers, and funds for bringing in speakers from the mainland are provided through a grant from the Lindesmith Center/Drug Policy Foundation. To keep the newsletter and other announcements coming, **we need your help, especially through membership renewal.**

To save the cost of sending out individual reminders, please check your mailing label for your membership expiration date, and take appropriate action. *Mahalo.*

(Tel/Fax: 808-988-3286; e-mail: [dmt@dpfhi.org](mailto:dmt@dpfhi.org))

## **YES! I WANT TO HELP DPFH PROMOTE DISCUSSION OF DRUG POLICIES!**

Please accept my TAX-DEDUCTIBLE membership donation.

\$10 Student/Low Income or Gift Membership

\$35 Organization Membership

\$25.00 Regular Membership

Other\_\_\_\_\_

<p>From DPFH Changes in current drug policies will not be advanced by elected officials or those with vested interests in maintaining them. DPFH members believe that in an open debate, reason and truth will prevail. Your help is needed in making that happen. MAHALO!</p>
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