



Alaska Association of Chiefs of Police

14 Reasons to Oppose Legalization of Marijuana

1. Legalization will place a significant financial burden on local law enforcement agencies due to the need for special training that will be necessary to identify marijuana users who are driving impaired and to create or enhance youth education programs.

- **It is estimated that Alaskan police departments will have combined costs of nearly \$6,000,000 to respond to immediate needs which will arise from legalization of marijuana.**¹ These costs include necessary training of police officers to establish drug impairment based on symptomology because there are no roadside tools like breathalyzers for testing marijuana usage, and for increasing the number of School Resource Officers (SROs) in communities to educate teens about the dangers of drug use. **These are expenditures that have been tallied by mostly municipal police departments, therefore the bulk of these costs will likely need to be borne by taxpayers in the impacted communities.** Additional costs may exist for the Department of Public Safety.
- After medicinal marijuana became easy to get in Colorado, seizures of smuggled marijuana quadrupled in roughly 4 years as “legal” marijuana was diverted to other markets². No comparable studies have been found addressing this problem in Alaska, but if legalization in this state results in a similar increase in diversion trafficking, **more than 75% of Alaskan police feel they will not have sufficient local resources to combat the potential impact in their community.**³
- In 2011, the national average for youth aged 12 to 17 years old and considered “current” marijuana users was 7.64 percent which was the highest average since 1981. The most recent figures found for Alaska teens dates from 2009 and puts the number of students claiming to have used marijuana within the last 30 days at 22.7% and the number who have used the drug during their lifetime at 44.5%⁴. Only 16 Alaskan chiefs report currently having SROs in their communities. If legalization occurs in Alaska, **64% of police chiefs felt it would be necessary to increase the number of school resource and DARE officers doing youth outreach in their communities to protect against an increase in local teen drug usage.**⁵

- In 2006, Colorado drivers testing positive for marijuana were involved in 28 percent of fatal vehicle crashes involving drugs. By 2011 that number had increased to 56 percent. These statistics clearly indicate the importance of traffic enforcement, but identification of impairment due to marijuana requires special skills.⁶ No figures seem to exist which can illuminate the degree of the problem in Alaska but the consistency of data from other states would support the assumption that the Alaskan experience would be comparable. **Ninety seven percent of Alaskan chiefs responding to the AACOP survey felt their officers needed additional Advanced Roadside Impaired Driving Enforcement (ARIDE) or Drug Recognition Expert (DRE) training to help them properly identify drivers impaired by marijuana.** Of more than 950 police officers in the state, less than 100 are estimated to have ARIDE training, and less than 20 now have DRE training.⁷
 - **Less than 6% of the AACOP survey respondents felt their local taxpayers would support a sufficient increase in their police budget to meet the anticipated financial implications of marijuana legalization.**⁸
 - **Seventy five percent of respondents felt their agency would require financial assistance to meet training needs that will be created by legalization.** Providing this training for all police officers will not only be costly to local taxpayers and also logistically difficult.⁹
 - Unlike alcohol, for which impairment can be reasonably measured using a breathalyzer (and confirmed with a blood alcohol content measurement), valid detection for cannabis is time-consuming, and blood tests cannot definitively determine an approximate degree of impairment. The lack of suitable roadside tests and agreed-upon intoxication levels will make enforcement of impaired driving more difficult.¹⁰
 - The necessity of drawing blood for toxicology testing creates another potential problem for police as it will necessitate training officers as phlebotomists, contracting with an independent phlebotomist to be on call, or taking all drivers suspected of impaired driving due to drugs (DUID) to the nearest hospital or clinic to have blood drawn..¹¹ In this “post-CSI” era, juries are likely to expect effective prosecution of drug impairment will require a toxicology evaluation combined with the testimony of a trained Drug Recognition Expert.
- 2. Stoned driving and other dangers would be increased, while the difficulty of proving impairment from marijuana may impact prosecutions, and could make civil settlements more difficult in the case of personal injury lawsuits.**

- Drugged driving impairs one’s motor skills, reaction time, and judgment and is a public health concern because it puts not only the driver at risk, but also passengers and others who share the road.¹²
- In other states where there has been an enormous increase in “medical” marijuana cardholders, DUI arrests involving marijuana have skyrocketed, as have traffic fatalities where marijuana was found in the system of one of the drivers.¹³ Because toxicology results are not universally reported for Alaskan crashes no definitive data exists which would demonstrate a different result here.
- In 2011 there were 9.4 million persons aged 12 and older who reported driving under the influence of illicit drugs during the past year. The rate was highest among young adults aged 18 to 25.¹⁴
- Drugs that may affect driving were detected in one of every seven weekend nighttime drivers in California during the summer of 2012. In the first California statewide roadside survey of alcohol and drug use by drivers, 14 percent of drivers tested positive for drugs, 7.4 percent of drivers tested positive for alcohol, and just as many as tested positive for marijuana as alcohol.¹⁵
- In a study of seriously injured drivers admitted to a Maryland Level-1 shock-trauma center, 65.7 percent were found to have positive toxicology results for alcohol and/or drugs. Almost 51 percent of the total tested positive for illegal drugs. A total of 26.9 percent of the drivers tested positive for marijuana.¹⁶
- The **National Organization for the Reform of Marijuana Laws (NORML)** has called for a science-based educational campaign targeting drugged driving behavior. In a January 2008 report titled, *Cannabis and Driving*, it is noted that motorists should be discouraged from driving if they have recently smoked cannabis and **should never operate a motor vehicle after having consumed both marijuana and alcohol.** The report also calls for the development of roadside, cannabis-sensitive technology to better assist law enforcement in identifying drivers who may be under the influence of pot.¹⁷
- In a 2007 National Roadside Survey of alcohol and drug use by drivers, a random sample of weekend nighttime drivers across the United States found that 16.3 percent of the drivers tested positive for drugs, compared to 2.2 percent of drivers with blood

alcohol concentrations at or above the legal limit. Drugs were present more than 7 times as frequently as alcohol.¹⁸

- Low doses of THC moderately impairs cognitive and psychomotor tasks associated with driving, while **severe driving impairment is observed with high doses, chronic use and in combination with low doses of alcohol**. The more difficult and unpredictable the task, the more likely marijuana will impair performance.¹⁹

3. Persons under the influence of marijuana will present a risk on job-sites. If marijuana is legalized, aggressive drug screening and periodic testing of medical personnel, industrial workers, transportation workers, and others will be necessary to insure safety of the public and other workers.

- According to the American Council for Drug Education in New York, employees who abuse drugs are 10 times more likely to miss work, 3.6 times more likely to be involved in on-the-job incidents (and 5 times more likely to injure themselves or another worker in the process) and 5 times more likely to file a workers' compensation claim. They also are said to be 33 percent less productive and responsible for potentially tripling health care costs.²⁰
- The risk that your surgeon, pilot, bus driver, or coworker has used marijuana will increase if the drug is decriminalized.
- A Rand study suggests drug use leads to about a 25-percent increase in men's risk of having a workplace injury.²¹
- In addition to the acute effects of alcohol and other drug use on judgment and psychomotor skills, substance use that occurs hours before a worker begins his or her shift can cause spillover effects, such as fatigue and hangovers, that may independently increase injury risk. Studies have shown that hangovers affect cognitive skills, including tasks related to driving or piloting aircraft, which may therefore influence the risk of injury in a manner similar to the influences of acute alcohol intoxication.²²
- Persons more likely to misuse alcohol and other substances may be more likely to be engaged in other behaviors that increase the risk of injury, a concept termed *deviance proneness*²³

4. Marijuana legalization will usher in Drug Commercialization increasing the chances of the drug falling into the hands of kids.

- Already, private holding groups and financiers have raised millions of start-up dollars to promote businesses that will sell marijuana and marijuana-related merchandise.
- Cannabis food and candy is being marketed to children and are already responsible for a growing number of marijuana-related ER visits.²⁴ Edibles with names such as “Ring Pots” and “Pot Tarts” are inspired by common children’s candy and dessert products such as “Ring Pops” and “Pop Tarts.”
- Several, profitable vending machines containing products such as marijuana brownies are emerging throughout the country.²⁵
- The former head of Strategy for Microsoft has said that he wants to “mint more millionaires than Microsoft” with marijuana and that he wants to create the “Starbucks of marijuana.”²⁶

5. Marijuana use will increase under legalization

- **Because they are accessible and available, our legal drugs are used far more than our illegal ones.** According to recent surveys, alcohol is used by 52% of Americans and tobacco is used by 27% of Americans. Marijuana is used by 8% of Americans.²⁷
- When RAND researchers analyzed California's 2010 effort to legalize marijuana, they concluded that the price of the drug could plummet and therefore marijuana consumption could increase.²⁸
- The 2011 Monitoring the Future Survey noted that daily or near daily marijuana use, defined as use on 20 or more occasions in the past 30 days rose significantly in the 8th, 10th and 12th grades in 2010 and rose slightly higher again in 2011. This translates to one in every 15 high school seniors smoking pot on a daily or near daily basis, the highest rates that has been seen in thirty years – since 1981.²⁹

6. Marijuana is especially harmful to kids and adolescents.

- Marijuana use that begins in adolescence increases the risk they will become addicted to the drug. The risk of addiction goes from about 1 in 11 overall to 1 in 6 for those who start using in their teens, and even higher among daily smokers.³⁰
- Marijuana contributes to psychosis and schizophrenia³¹, addiction for 1 in 6 kids who ever use it once³², and it reduces IQ among those who started smoking before age 18.³³

- Regular or daily use of marijuana may be robbing many young people of their potential to achieve and excel. THC, a key ingredient in marijuana, alters the ability of the brain's hippocampus to communicate effectively with other brain regions. In addition, recent research has shown that marijuana use that begins during adolescence can lower IQ and impair other measures of mental function in adulthood.³⁴

7. Today's marijuana is NOT your Woodstock weed.

- In the 1960s and '70s, THC levels of **the marijuana smoked by baby boomers averaged around 1%**, increasing to just under 4% in 1983, and almost tripling in the subsequent 30 years to around **11% in 2011**.³⁵

8. Marijuana legalization will increase public costs.

- **For every \$1 in alcohol and tobacco tax revenues, society loses \$10 in social costs, from accidents to health damage**³⁶.
- In addition to the costs to law enforcement for training and prevention, the anticipated increase in impaired driving arrests would result in additional court costs including prosecution and public defenders. Even in places where these costs are not borne directly by taxpayers, they will divert funds which might otherwise be used to support other civic needs.

9. People are not in prison for small time marijuana use.

- Few people are currently in prison for marijuana possession (in fact, only 0.1% of prisoners with no prior offenses³⁷) and **current alcohol arrest rates are over three times higher than marijuana arrest rates**.³⁸
- Statistics on state-level prisoners around the United States reveal that just **0.3% of all state inmates were behind bars for marijuana possession only** (with many of those pleading down from more serious crimes).³⁹
- 99.8% of federal prisoners sentenced for drug offenses were incarcerated for drug trafficking.⁴⁰
- The risk of arrest for each joint smoked is estimated at **1 in 12,000**.⁴¹

- On the most recent prison census date only 4 people were incarcerated in Alaska prisons due to conviction on 6th degree Misconduct Involving Controlled Substance (MICS) which would include possession of less than 1 oz. of marijuana (the amount legalized by the proposed legislation). It is undetermined if these MICS-6 offenders had concurrent convictions for other offenses as well, but it is possible that at least some do.⁴²

10. Drug cartels and the black market will continue to function under legalization.

- A recent RAND report showed that **Mexican drug trafficking groups only received a minority of their revenue (15-25%) from marijuana.** For them, the big money is found in illegal trade such as human trafficking, kidnapping, extortion, piracy, and other illicit drugs.⁴³
- We know from past experience with other businesses that illegal actors have a lot to do with so called legal industries. These cartels will only be helped with legalization and more addiction, not hurt.
- **Dealers aren't likely to give up their lucrative income. Legalization of marijuana will lead entrepreneur dealers and cartels to focus their energies on selling harder drugs.**

11. The foreign experience is not promising. Neither Portugal nor Holland provides any successful example of legalization.

- Offenses related to drug use or possession for use continued to comprise the majority of drug law offenses in 2010; between 2005 and 2010, there was an estimated 19 percent increase in the number of offenses related to drug use in Europe.⁴⁴
- Independent research reveals that in the Netherlands, where marijuana was commercialized and sold openly at "coffee shops," **marijuana use among young adults increased almost 300%.**⁴⁵ Now, the Dutch are retreated from their loose policies. About 70 percent of Dutch towns have a zero-tolerance policy toward cannabis cafes.⁴⁶
- **There are signs that tolerance for marijuana in the Netherlands is receding.** They have recently closed hundreds of coffee shops, and today Dutch citizens have a higher likelihood of being admitted to treatment than nearly all other countries in Europe.⁴⁷

- In Portugal, use levels are mixed, and despite reports to the contrary, **they have not legalized drugs**. In 2001, Portugal started to refer drug users to three person “panels of social workers” that recommend treatment or another course of action. As the European Monitoring Center’s findings concluded: “the country does not show specific developments in its drug situation that would clearly distinguish it from other European countries that have a different policy.”⁴⁸

12. Marijuana is believed by some to have medicinal properties, but we shouldn’t smoke the plant in order to derive those benefits, just like we do not smoke opium to get the benefits of morphine. More widespread use would increase the dangers of secondhand smoke damage to nonsmokers and children in the homes of users.

- A 1999 The Institute of Medicine (IOM) study explained that “smoked marijuana . . . is a crude THC delivery system that also delivers harmful substances.” In addition, “plants contain a variable mixture of biologically active compounds and cannot be expected to provide a precisely defined drug effect.” Therefore, the study concluded that “there is little future in smoked marijuana as a medically approved medication.”⁴⁹
- The principal IOM investigators explicitly stated that using smoked marijuana in clinical trials “should not be designed to develop it as a licensed drug, but should be a stepping stone to the development of new, safe delivery systems of cannabinoids.”⁵⁰
- In states with medical marijuana laws, the average user is a **male in his 30s with no terminal illness and a history of drug abuse**.⁵¹
- **Less than 2% of users have cancer or AIDS**.⁵²
- Residents of states with medical marijuana laws generally have abuse and dependence rates almost **twice as high as states with no such laws**.⁵³
- Research should be conducted to produce pharmacy-attainable, non-smoked medications based on marijuana.

13. The Alaska Initiative is premature. The experience of Colorado and Washington is not promising. It is better to wait to see if predictions of both sides are borne out by hard data rather than rely on speculation and the promise that benefit will outweigh harm.

- Two independent reports released in August 2013 document how Colorado's supposedly regulated system is not well regulated at all.⁵⁴
- Teen use has increased in the past five years. Currently, the marijuana use rate among Colorado teens is 50% above the national average.⁵⁵
- Drug-related referrals for high school students testing positive for marijuana has increased.⁵⁶
- Medical marijuana is easily diverted to youth.⁵⁷
- While the total number of car crashes in Colorado declined from 2007 to 2011, the number of fatal car crashes with drivers testing positive for marijuana rose sharply.⁵⁸

14. Marijuana is often used as a stepping-stone drug, leading to heroin, cocaine, or other harder drugs.

- Teens who experiment with marijuana may be making themselves more vulnerable to heroin addiction later in life, if the findings from experiments with rats are any indication. Cannabis has very long-term, enduring effects on the brain.⁵⁹
- Marijuana is a frequent precursor to the use of more dangerous drugs and signals a significantly enhanced likelihood of drug problems in adult life. The Journal of the American Medical Association reported, based on a study of 300 sets of twins, "that marijuana-using twins were four times more likely than their siblings to use cocaine and crack cocaine, and five times more likely to use hallucinogens such as LSD."⁶⁰
- Long-term studies on patterns of drug usage among young people show that very few of them use other drugs without first starting with marijuana. For example, one study found that among adults (age 26 and older) who had used cocaine, 62 percent had initiated marijuana use before age 15. By contrast, less than one percent of adults who never tried marijuana went on to use cocaine.⁶¹
- Columbia University's National Center on Addiction and Substance Abuse (CASA) reports that teens who used marijuana at least once in the last month are 13 times likelier than other teens to use another drug like cocaine, heroin, or methamphetamine and almost 26 times likelier than those teens who have never used marijuana to use another drug.⁶²

- An estimated 3.1 million persons aged 12 or older – an average of approximately 8,400 per day - used a drug other than alcohol for the first time in the past year according to the 2011 National Survey on Drug Use and Health. More than two-thirds (68 percent) of these new users reported that marijuana was the first drug they tried. ⁶³
- Nearly one in ten high school students (9 percent) report using marijuana 20 times or more in the past month according to the findings of the 2011 Partnership Attitude Tracking Survey. ⁶⁴
- Teens past month heavy marijuana users are significantly more likely than teens that have not used marijuana in the past to: use cocaine/crack (30 times more likely); use Ecstasy (20 times more likely); abuse prescription pain relievers (15 times more likely); and abuse over the counter medications (14 times more likely). This clearly denotes that teens that use marijuana regularly are using other substances at a much higher rate than teens who do not smoke marijuana, or smoke less often. ⁶⁵

ENDNOTES

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² *The Legalization of Marijuana in Colorado: The Impact Vol. 1/August 2013*

³ AACOP survey of Alaskan police chiefs conducted April 28-May 5, 2014

⁴ MARIJUANA USE BY YOUNG PEOPLE: The Impact of State Medical Marijuana Laws By Karen O'Keefe, Esq., *Director of State Policies, Marijuana Policy Project* and Mitch Earleywine, Ph.D., *Professor of Psychology University at Albany, State University of New York*, Updated: June 2011

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⁶ *The Legalization of Marijuana in Colorado: The Impact Vol. 1/August 2013*

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