



the
Drug Policy
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of hawai'i

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Ho‘omaluhia Award goes
To Dr. Bill Wenner

The annual Ho‘omaluhia Award for 2001 was presented to Dr. Bill Wenner at the DPFH Annual Dinner Meeting on April 13. Since Dr. Wenner could not be present, he sent a home-made video of himself expressing his gratitude for the recognition.

Dr. Wenner was nominated for his dedication to certifying patients on the Big Island (more than 275 at last count), and for his efforts to educate and convince his fellow physicians that cannabis is an effective medication for multiple diseases, and therefore should be made available to those patients who can benefit from it. According to Dr. Wenner, the majority of his patients suffer from neuropathic pain.

Dr. Wenner’s dedication to drug policy reform has been long-standing. He has been certified as a specialist in addiction medicine for many years, and he served faithfully and productively on the DPFH board during the 1990s. —Pau

Ecstasy forum on ‘Olelo

For those not able to attend the public forum on “Ecstasy: Sorting Fact from Fiction,” the videotape will be shown on ‘Olelo on the following dates:

- July 8 - 11:00 a.m.
- July 15 - 11:00 a.m.
- July 23 - 8:00 p.m.
- July 30 - 8:00 p.m.

All airings will be on Channel 54.

This show features Dr. Charles Grob, UCLA School of Medicine; Alan Shinn, ED of Coalition for a Drug-Free Hawai‘i, and Kai Takayama, Gregory House Programs.

SB 1188 moves Hawai‘i
To harm reduction model

by Kat Brady

Governor Cayetano signed SB 1188 into law (Act 161) on June 7, 2002. SB 1188 was modeled after California’s Prop 36—the Substance Abuse and Crime Prevention Act of 2000 (SACPA). Prop 36 was implemented in July of 2001 and in the first six months it is providing treatment to a greater number of individuals than California’s drug courts have graduated during their entire ten-year history in the state. From January 2000 to March 2001 (14 months), California drug courts graduated 1,489 individuals, while SACPA already has placed over 6,472 individuals into treatment in just seven of the state’s 58 counties.

SB 1188 moves Hawai‘i toward a harm reduction model and treats substance mis-use as a public health issue and away from the punitive criminal justice model we currently have.

The new law also involves a unique collaboration between criminal justice and public health agencies at the state level by establishing a coordinating body through an interagency cooperative agreement to oversee the development and implementation of offenders’ substance abuse treatment programs. Besides the appropriate agencies assigned oversight responsibilities for

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Ira Glasser

The seventy-odd faithful members who attended the dinner were given a compelling overview of the war on drugs and how it has eroded our civil rights by the featured speaker, Ira Glasser, past Executive Director of the National ACLU. Glasser made a strong case for building coalitions among disparate groups who share the belief that the drug war has failed and alternative measures are needed.

Myron P. “Andy” Anderson is New DPFH board member

Mryon “Andy” Anderson, retired from the U.S. Air Force in 1972, has an extensive background in the field of alcoholism and drug abuse. After studies at the University of Utah and Texas Schools on Alcohol Studies, he graduated from the Air Force Social Actions Institute, and in 1974 completed an in-depth course at Pinehurst, N.C., held under the auspices of the NIAAA.

Prior to retirement from the Air Force, Mr. Anderson was the Associate Director of the Hickam Air Force Base Drug/Alcohol Education & Counseling Center. He also has been a consultant to the base commanders and medical staffs at McGuire AFB in New Jersey, and at Phan Rang AB in Viet Nam.

In 1972 he was appointed ED of the Hawai‘i Committee on Alcoholism. In this capacity he provided consultation to 35 business firms and governmental agencies, including the city and county of Honolulu, Pan American World Airways, and the State of Hawai‘i.

In 1974 he was elected Chairman, Hawai‘i State Advisory Council on Alcoholism, and Regional Staff Representative to the National Occupational Alcoholism Training Institute. As ED, he succeeded in amending Hawai‘i’s pre-paid health law to include mandatory coverage for alcoholism and drug addiction for all full time employees, the first such comprehensive coverage in the nation.

In February 1977, Mr. Anderson began his Federal Civil Service career with the Naval Air Force at Barber’s Point, as Director of the Counseling and Assistance Center and in 1990 of both Pearl Harbor and Barber’s Point Centers.



“Andy” Anderson

In addition to the professional training above, Mr. Anderson graduated from Chaminade University with a bachelor’s degree in psychology, and minors in sociology and business.

When he retired from the Federal Civil Service in 1992, he relocated to Pineville, Louisiana, where he developed and opened a 30 bed acute psychiatric dual diagnosis treatment unit for the State of Louisiana and Huey P. Long Hospital. In 1996 he was recruited to return to Hina Mauka as CEO, where he previously served on the board of directors from 1980-1992).

Hina Mauka Recovery Center, with main headquarters in Kane‘ohe is a 45-bed drug addiction treatment center that also treats persons with dual disorders (addiction and psychiatric or emotional issues). In addition to the headquarters, HM has 19 sites throughout the islands. On any given treatment day Hina Mauka’s programs provide addiction treatment services to some 500 people.

Mr. Anderson is married to the former Patsi Craig, and they have three daughters, Anne-Elizabeth, Susan Leilani, and Cara Leihua, and grandsons Craig Anthony Kekoa and Kellen Jacob. —Pau

U.S. Drug Czar Flexes Muscle in Canada

(From Rick Kalb reports for CBC Radio June 12, 2002)

QUEBEC—Canada can have a medicinal marijuana program, but the U.S. government believes the drug is dangerous and addictive, the United States’ drug policy chief said Wednesday.

John Walters told scientists attending a convention on drug dependency in Quebec City that addiction rates for marijuana are rising in the U.S.

“People my age—baby-boomers who have children—do not believe that’s possible,” Walters said. “They went to college, they watched movies like *Reefer Madness*, they had friends who experimented and they do not believe that you can have a dependency on marijuana.”

“We have research that suggests otherwise.” He added that of the 4.3 million Americans drug addicts, 65 per cent are dependent on marijuana.

“We are happy to have Americans come and spend their hard-earned money in Canada as tourists, but we would hope that they check their policies, guns and other dangerous materials at the border,” said Marijuana Party leader Marc-Boris St-Maurice.

Patients with HIV, cancer and multiple sclerosis can apply for clearance from Ottawa to smoke marijuana for pain relief. More than 200 Canadians have the clearance.

Walters said he won’t interfere with Canadian drug policy, but he doesn’t want it to lead to drugs moving across the border. —Pau

Drug Policy Alliance: A vision and mission

Dr. Ethan Nadelmann, ED of the new Drug Policy Alliance (formerly Drug Policy Foundaton/Lindesmith Center) recently distributed the organization's Vision and Mission Statements. They are, as you can see, brief and to the point. DPFH endorses them fully.

“We ENVISION a just society in which the use and regulation of drugs are grounded in science, compassion, health and human rights, in which people are no longer punished for what they put into their own bodies but only for crimes committed against others, and in which the fears, prejudices and punitive prohibitions of today are no more.

“Our MISSION is to advance those policies and attitudes that best reduce the harms of both drug misuse and drug prohibition, and to promote the sovereignty of individuals over their minds and bodies.” —*Pau*

Topping, Lichty and Wenner attend Cannabis therapeutics conference

Don Topping, Pam Lichty and Dr. Bill Wenner were invited speakers at the “Second National Clinical Conference on Cannabis Therapeutics: Analgesia and Other Indications,” held in Portland, OR May 2-4, 2002.

Other speakers at the conference, attended by more than 500, included research scientists, clinical physicians and nurses, patients and providers of medical marijuana. The common theme was: smoked cannabis is an effective medicine for many people, and they should be allowed to use it without fear of punishment.

Doctors from several different states reported that the great majority of their patients use cannabis to relieve

Media campaign backfires For ONDCP anti-drug message

Apparently, the heavily funded anti-drug media campaign sponsored by the drug czar's office has produced some unintended consequences. According to the report, “There is little evidence of direct favorable Campaign effects on youth. There is no statistically significant decline in marijuana use or improvements in beliefs and attitudes about marijuana use between 2000 and 2001, and no tendency for those reporting more exposure to Campaign messages to hold more desirable beliefs. For some outcomes, and for some subgroups of respondents, analysis raises the possibility that those with more exposure to the specific Campaign ads at the start of Phase III of the Campaign had less favorable outcomes over

the following 18 months. This was true for the youth respondents who were nonusers and aged 10 to 12 at the start of this phase, with regard to their intentions to use marijuana in the future and for all youth 12 to 18 for their perceived social norms about marijuana use. Girls with the highest exposure to Campaign ads at the start were more likely than less exposed girls to initiate marijuana use. This effect was not seen for boys. This unfavorable association with initiation was also significant for the youngest respondents and for the low risk respondents. Further analysis is required before any firm conclusion can be reached to support these unlikely outcomes.” (p. xi)

Further, “NSPY (National Survey of Parents and Youth) also examined rates of change in three other measures of marijuana use: ever use, regular use (almost every month), and use in the previous 30 days. For all ages and for all of those measures, use was unchanging between 2000 and 2001, with two exceptions. Reports of regular use and last 30 days use, while still rare, were significantly increasing among youth who were 14- to 15-years-old. Reports of past month use increased from 3.6% to 7.2%, and regular use (defined as use every month or almost every month) increased from 2.2% to 5.4%.” (p. xxiv)

A copy of the executive summary is available from: http://www.nida.nih.gov/PDF/DESPR/Table_ExecSumm.pdf.

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Topping, Lichty

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significant attributable sequelae were noted in any other physiological system examined in the study.”

Researchers presented findings on how cannabis appears to work in the human body to relieve various conditions, including spasticity and pain, through binding with the anandamide receptors, which are found throughout the body.

New alternative delivery systems, such as a trans-dermal patch, extracts and a sub-lingual spray were also described by researchers from Kentucky, Canada and England, while vendors displayed some newly developed vaporizers.

Common problems found in all the states which have passed medical cannabis laws include the following: lack of cooperating physicians; legal limits are set far too low for most patients; difficulty of obtaining medicine when needed; no distribution system for those who cannot grow their own; slow and cumbersome certification process.

The DEA's closure of several buyers' clubs in California occurred during the conference, generating howls of protest among the attendees. More action can be expected on that front. *-Pau*

DPFH holds forums On cannabis therapeutics

The DPFH three from Hawai'i who attended the Portland conference on cannabis therapeutics gave a report on the conference in Honolulu and Hilo. Although the Honolulu event was less than well attended, the Big Island residents came out in numbers and engaged the speakers in a lively dialogue.

Several folks from the Big Island offered their assistance in providing the medicine to those in need and can not grow their own. Names are available upon request.

Organized churches decry The "War on Drugs"

(ABC News, 6/18/02)

The Presbyterian Church (USA), the Unitarian Universalist Association of Congregations, the Philadelphia Yearly Meeting of the Religious Society of Friends and the Progressive Jewish Alliance are among the groups that have lent their support to a call by the National Coalition for Effective Drug Policies to redirect efforts to curtail drug use.

These organizations all make clear that their opposition to current drug policy is based not on support for drug use, but out of a belief that the war on drugs has done more harm than good and that it is essentially immoral.

“The war on drugs has been an abysmal failure in any practical sense, and the number of people who are being victimized by the war is fairly

awful,” said Thomas Jeavons, the general secretary of the Philadelphia Yearly Meeting of the Religious Society of Friends, a group of Quakers.

“The war on drugs affects our society in so many negative ways,” Universal Unitarians for Drug Policy Reform executive director Charles Thomas said. “We believe underlying it all is an immoral approach to dealing with a health problem.”

The thrust of the NCEDP's statement, “Eight Steps to Effectively Controlling Drug Abuse and the Drug Market,” is that criminalizing drug use has failed to curtail drug use, and that society would be better served by a “shift to treating drug abuse as a health problem with social and economic implications.” *-Pau*

SB1188 moves Hawai'i

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offender substance abuse treatment, it includes a representative from a community based prisoner advocacy group, a substance abuse treatment provider, and an ex-offender. The meetings will be publicly noticed in accordance with our open meeting law: Chapter 92 HRS.

The major opposition to this measure was from the prosecutors and the Judiciary. The prosecutors, of course, object to any such mandate to send nonviolent first time drug offenders to treatment instead of prison because it removes the power from them.

Throughout the 2001 session they recited their mantra *ad nauseam*, “We never send first-time drug offenders to prison.” However, this session the Department of Public Safety went through their files and found 48

nonviolent first time drug offenders in prison. Oops. “Give us their names, they shouldn't be there,” responded the Office of the Prosecutor.

The Judiciary's concern was really about money. They fear that any other program would negatively impact funding for Drug Court. We find this interesting since the head Drug Court, Judge Rey Grauly, told Pam Lichty and me in a meeting we had with the Judiciary that not all drug offenders need the intensive and expensive treatment provided by the Drug Court.

Act 161 is a MAJOR step for Hawai'i and we need to continue to seek funding for more treatment beds. The Department of Health has said that the funding restored to them could treat about 200 offenders under Act 161. *-Pau*

DPFH welcomes new board members

In addition to M. P. “Andy” Anderson (profiled on page 2), DPFH welcomes two additional new board members, Michael J. Kelly and Larry Geller.

Dr. Michael J. Kelly, Associate Professor and Chair of the Psychology Program at Hawai’i Pacific University, has a long history of research and teaching in the psychopharmacology of drugs in Europe and the U.S., and currently teaches a course in drugs and society at HPU.

Larry Geller comes to us from the business world where he runs a consulting firm, Larry Geller Associates. During the past decade or more, he has served as consultant to various state government, non-profit and commercial agencies in Hawai’i and overseas.

More informative profiles of Mike and Larry will appear in coming editions of this newsletter. —Pau

Where to find information About drugs and drug policy

The DPFH office frequently receives requests for information, ranging from where to find a doctor for medical marijuana (most frequent) to what are the statistics on deaths from drugs. Numerous callers want information on the properties and effects of certain drugs, and some are curious about the penalties for possessing or distributing different drugs.

For many of these inquiries I am able to refer them to an informative web site. I am listing some of the more important ones below for reference.

For basic information and facts about the drug war, my favorite URL is: www.csdp.org/factbook This site is maintained by Common Sense for Drug Policy, and the fact book is frequently updated.

Perhaps the most complete website for information on the entire range of

drugs is: www.erowid.org In addition to its well-informed pages on the various drugs, this site covers a wide range of issues relating to drugs in ancient as well as modern society.

For news reports from all over the world, meticulously archived by subject, date and keyword, go to www.mapinc.org/drugnews/ This site is especially useful when searching for information regarding events reported by the media in all parts of the world.

A relatively new website that focuses on drug education is: www.safety1st.org/home.html

Unfortunately, there are no handy resources for local MD’s participating in the medical marijuana program or penalties for that various drugs in Hawai’i. Hopefully that information will become more accessible in the near future. —Pau

On Drug Education vs. Propaganda

by D. M. Topping

Bruce McKinney of the Harm Reduction Coalition recently posted the following observation on the internet: “Educating young people is one thing. Propagandizing them is another. What is the difference between public health education and lifestyle propaganda? Education gives people the information to make up their own minds. Propaganda attempts to persuade them to make a particular decision and live their lives in a certain way.”

This statement struck me as very a propos for what goes on as drug education in the schools of Hawai’i, and the rest of the country. I have attended a number of drug education presentations around Honolulu during the past several years, and I have yet to

see one that provides unbiased, science based information to the students and parents. On the contrary, the content tends to focus on the dangers of drugs, both real and imagined, and the importance of just saying “no.”

This approach would be more acceptable if the results indicated that the current education programs produced the desired results. Sadly, the use of drugs, legal as well as illegal, still remains high among adolescents, and in some areas it is growing. And yet, the drug educators remain committed to programs that have been thoroughly discredited, especially the DARE program, has been discontinued in many school districts around the country.

For my part, I would much prefer that my grand-children be given honest information about all psychoactive substances, including alcohol, caffeine and nicotine, so that they can make informed choices. Otherwise, I fear that they, like many who have gone before them, will reject the one-sided information and run the risk of getting into trouble with a substance about which they have learned from their peers on the street.

We need not look far for a model. Mothers Against Drunk Driving have already set the standard. And, of course, the best set and setting for drug education is in the home. Hopefully, parents will educate themselves and take on this onerous task for the sake of their children. —Pau

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)

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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