

# Social Equity Working Group

## Mission Statement

To identify Hawai'i communities and populations disproportionately impacted by cannabis criminalization and make recommendations for social equity and restorative justice policies that would help to reduce and remediate past and ongoing disparities, including equity in the market, community reinvestment, and expungement and resentencing.

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## **Summary of Work**

The Social Equity Permitted Interaction Group did a lot of great work in the short amount of time we had and with the limited data we could gather. We started off by setting the goal of gathering data to find out who in Hawai‘i has been harmed the most by the criminalization of cannabis. We drafted a letter that was sent out to various State agencies, departments, and organizations that host data related to crimes and convictions in Hawai‘i. Unfortunately, the common response we received was no response or that there was no data at these agencies that specifically identified cannabis related crimes or impacts. They had arrest data for “drugs” but did not parse out the type. To obtain cannabis data each case would need to be reviewed at the police report level to see if cannabis was identified, if at all. Additionally, the records requests we were making would take much longer to gather let alone release to our investigative committee than the few months we had. We did receive some federal/national data from PEW research that was informative.

This Social Equity Group also utilized a lot of data and analysis that has already been done by social equity focused organizations in the cannabis industry around the nation. These include reports from the Minority Cannabis Business Association (MCBA), Supernova Women, Boston University Law Review, and a few others. The conclusions were clear in that social equity has yet to be a wildly successful initiative in any state. We concluded that Hawaii’s approach would have to look very different than how others were attempting to do so.

When it came to cannabis justice, expungement, and resentencing this Social Equity Group reached out to the Last Prisoner Project (LPP) for their expertise. LPP is a non-profit national organization that focuses on this work specifically. They have an entire policy arm that offers technical assistance to any state that needs it. They put together a comprehensive presentation and recommendations for this Social Equity Group and presented it to the group on August 9th.

Lastly, this Social Equity Group had a uniform and firm belief that any recommendations on cannabis social equity had to have engagement of the affected populations and community members. Thus, this Social Equity Group decided to do a Social Equity Listening Tour. The Social Equity Group visited every major island to include Molokai (excluding Lanai) and held listening sessions (Appendix C) to receive input from community members. This was not an easy task to do in a short period of time. There were often scheduling and administrative burdens that caused some setbacks but ultimately, we were able to gather important insight and information from the community. We recorded most sessions and the transcripts in their entirety will be submitted along with our recommendations for reference.

## **Overall Goals**

The Social Equity Group identified three main areas to address:

1. Cannabis Justice Reform
2. Community Reinvestment
3. Equity in the Market

Stated Goals the Social Equity Group attempted to achieve

1. Recommend how Hawai‘i can eliminate criminalization of cannabis in Hawai‘i.
2. Recommend how Hawai‘i can right the wrongs of the past war on drugs and those who have been convicted for nonviolent cannabis crimes in the past.
3. Define “social equity” in the context of Hawai‘i and the possible Adult Use Cannabis Program
4. Recommend how an Adult Use Cannabis Program can not only include social equity individuals but policies to uplift and invest in these communities from the start of the program
5. Recommend a state agency/body that has significant power to continuously monitor and adjust, if needed, social equity policies in Hawaii’s Adult Use Cannabis program
6. Reach out to the public to gain input on how social equity participation in the adult use market should look like and the benefits the social equity community should receive from an adult use program.

## **Background**

“A complete disaster” concluded a Native Hawaiian, and national cannabis legalization advocate testifying about the implementation of social equity in cannabis legalization programs in California and across the United States.<sup>1</sup> The testifier made this statement at the first meeting of the Act 169 Dual Use of Cannabis Task Force convened by the Hawai‘i State Department of Health on April 25, 2022.<sup>2</sup> This testimony was not an anomaly—every single one of the forty-one unique testifiers and fifty-two pieces of written and verbal testimony presented to the Task Force that day referenced “social equity” or advocated for Hawai‘i to implement elements of cannabis social equity programs used in other states.<sup>3</sup> Even organizations opposing the legalization of cannabis in Hawai‘i supported the implementation of cannabis social equity policies, regardless of eventual legalization.<sup>4</sup>

There was also general agreement on the sorts of policies constituting “social equity” in adult-use cannabis regulations—programs that promote market equity, decriminalize cannabis

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<sup>1</sup> *HDOH MedCann, 2022 04 25 Dual Use of Cannabis Task Force Meeting*, YOUTUBE (May 20, 2022), <https://youtu.be/WLKN10Djmr0>.

<sup>2</sup> Historical background and equity arguments throughout generally derived from: GARRETT I. HALYDIER, *DIVERSIFYING SOCIAL EQUITY APPROACHES TO CANNABIS REGULATIONS*, WORKING PAPER (September 10, 2022); STATE OF HAWAII, DEPARTMENT OF HEALTH MEDICAL CANNABIS PROGRAM: DUAL USE OF CANNABIS TASK FORCE, <https://health.hawaii.gov/medicalcannabis/dual-use/> (last visited Aug. 10, 2022).

<sup>3</sup> *See generally Monday April 25, 2022: Written Testimony*, STATE OF HAWAII, DEPARTMENT OF HEALTH MEDICAL CANNABIS PROGRAM: DUAL USE OF CANNABIS TASK FORCE (2022), <https://health.hawaii.gov/medicalcannabis/files/2022/04/2022-04-25-Dual-Use-of-Cannabis-Task-Force-Testimony-T.pdf>; *Monday April 25, 2022: Written Testimony received - late*, STATE OF HAWAII, DEPARTMENT OF HEALTH MEDICAL CANNABIS PROGRAM: DUAL USE OF CANNABIS TASK FORCE (2022), <https://health.hawaii.gov/medicalcannabis/files/2022/05/2022-04-25-Dual-Use-of-Cannabis-Taskforce-LATE-Testimony.pdf>; and *HDOH MedCann, 2022 04 25 Dual Use of Cannabis Task Force Meeting*, YOUTUBE (May 20, 2022), <https://youtu.be/WLKN10Djmr0>.

<sup>4</sup> *HDOH MedCann, 2022 04 25 Dual Use of Cannabis Task Force Meeting*, YOUTUBE (May 20, 2022), <https://youtu.be/WLKN10Djmr0>.

and expunge cannabis conviction records, reinvest in communities adversely affected by the War on Drugs, and provide equitable access to cannabis products.<sup>5</sup> “Social Equity” (cannabis social equity) was explicitly defined in the testimony as this group of policies,<sup>6</sup> with the implicit definition that there are current inequities related to cannabis between different groups and these policies should be put in place to redress those inequities.<sup>7</sup> Despite the general agreement on the sorts of harms to be redressed and the available menu of policy options, there was also a general consensus among the testifiers that the implementation and results of these policies in the current thirteen adult-use and two medical use cannabis states with cannabis social equity programs left a lot to be desired.<sup>8</sup>

This diagnosis of universal failure amongst cannabis social equity programs is not a critique uniquely presented during Hawaii’s consideration of adult-use cannabis laws, or even unique to the United States.<sup>9</sup> For instance, the Minority Cannabis Industry Association (“MCBA”) argues in its 2022 National Cannabis Equity Report “that not one [program] has resulted in an equitable cannabis industry on all four measures (industry, justice, community, and access).”<sup>10</sup> This Social Equity Group sought to fill in some of the holes in the current approaches through community engagement and imagination of new ideas specific to the needs of Hawai‘i.

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<sup>5</sup> See generally *Monday April 25, 2022: Written Testimony*, STATE OF HAWAII, DEPARTMENT OF HEALTH MEDICAL CANNABIS PROGRAM: DUAL USE OF CANNABIS TASK FORCE (2022), <https://health.hawaii.gov/medicalcannabis/files/2022/04/2022-04-25-Dual-Use-of-Cannabis-Task-Force-Testimony-T.pdf>; *Monday April 25, 2022: Written Testimony received - late*, STATE OF HAWAII, DEPARTMENT OF HEALTH MEDICAL CANNABIS PROGRAM: DUAL USE OF CANNABIS TASK FORCE (2022), <https://health.hawaii.gov/medicalcannabis/files/2022/05/2022-04-25-Dual-Use-of-Cannabis-Taskforce-LATE-Testimony.pdf>; and *HDOH MedCann, 2022 04 25 Dual Use of Cannabis Task Force Meeting*, YOUTUBE (May 20, 2022), <https://youtu.be/WLKN10Djmr0>.

<sup>6</sup> *Monday April 25, 2022: Written Testimony*, STATE OF HAWAII, DEPARTMENT OF HEALTH MEDICAL CANNABIS PROGRAM: DUAL USE OF CANNABIS TASK FORCE 4, 6 (2022), <https://health.hawaii.gov/medicalcannabis/files/2022/04/2022-04-25-Dual-Use-of-Cannabis-Task-Force-Testimony-T.pdf> (paraphrasing the definition of “social equity” given by the Minority Cannabis Industry Association)

<sup>7</sup> See generally *Monday April 25, 2022: Written Testimony*, STATE OF HAWAII, DEPARTMENT OF HEALTH MEDICAL CANNABIS PROGRAM: DUAL USE OF CANNABIS TASK FORCE (2022), <https://health.hawaii.gov/medicalcannabis/files/2022/04/2022-04-25-Dual-Use-of-Cannabis-Task-Force-Testimony-T.pdf>; and *HDOH MedCann, 2022 04 25 Dual Use of Cannabis Task Force Meeting*, YOUTUBE (May 20, 2022), <https://youtu.be/WLKN10Djmr0>.

<sup>8</sup> See generally *Monday April 25, 2022: Written Testimony*, STATE OF HAWAII, DEPARTMENT OF HEALTH MEDICAL CANNABIS PROGRAM: DUAL USE OF CANNABIS TASK FORCE (2022), <https://health.hawaii.gov/medicalcannabis/files/2022/04/2022-04-25-Dual-Use-of-Cannabis-Task-Force-Testimony-T.pdf>; and *HDOH MedCann, 2022 04 25 Dual Use of Cannabis Task Force Meeting*, YOUTUBE (May 20, 2022), <https://youtu.be/WLKN10Djmr0>.

<sup>9</sup> See e.g. MINORITY CANNABIS INDUSTRY ASSOCIATION, NATIONAL CANNABIS EQUITY REPORT 31 (2022) [hereinafter MCBA REPORT], <https://mjbizdaily.com/wp-content/uploads/2022/02/National-Cannabis-Equity-Report-1.pdf>; RELEASE, REGULATING RIGHT, REPAIRING WRONGS: EXPLORING EQUITY AND SOCIAL JUSTICE INITIATIVES WITHIN UK CANNABIS REFORM 12-13 (2022), [https://www.release.org.uk/sites/default/files/pdf/publications/Regulating-Right-Repairing-Wrongs-UK-Cannabis-Reform\\_Release.pdf](https://www.release.org.uk/sites/default/files/pdf/publications/Regulating-Right-Repairing-Wrongs-UK-Cannabis-Reform_Release.pdf); and Sarah Ratliff, *10 Years Into Legalization and We Still Can’t Get Social Equity Right*, Cannabis & Tech Today (Jul. 28, 2022), <https://cannatechtoday.com/still-cant-get-social-equity-right/>.

<sup>10</sup> MINORITY CANNABIS INDUSTRY ASSOCIATION, NATIONAL CANNABIS EQUITY REPORT 31 (2022) [hereinafter MCBA REPORT], <https://mjbizdaily.com/wp-content/uploads/2022/02/National-Cannabis-Equity-Report-1.pdf>.

## 1. Definition of Social Equity

This Social Equity Group is partial to the definition of Social Equity that the Minority Cannabis Business Association (MCBA) has come up with. It states that while the definition of “equity” is to be fair and impartial, when addressing social equity in the cannabis industry it also needs to encompass restorative policies. These policies should adequately address the harms of the past cannabis prohibition on impacted communities and create an equitable cannabis industry. MCBA also breaks this down into four pillars.

- 1) Equitable Industry: promoting the inclusion and success of minorities in the cannabis industry through equal access to opportunities and resources
- 2) Equitable Communities: empowering and supporting the communities most impacted by the War on Drugs through community reinvestment, corporate responsibility initiatives, and social programming
- 3) Equitable Justice: reducing arrests and imprisonment for non-violent cannabis offenses and restore basic rights of citizenship to individuals with non-violent cannabis offenses.
- 4) Equitable Access: ensure safe legal cannabis products are available to immigrants, veterans, seniors, and disabled persons without risk of loss of benefits or immigration status.<sup>11</sup>

## 2. Cannabis in Hawai‘i

The first recorded reference to cannabis in Hawai‘i was in a Honolulu newspaper Ka Nonanona in 1842.<sup>12</sup> Advertisements for medical cannabis in Hawaiian newspapers continued through the 19th century.<sup>13</sup> Anecdotal reports and stories of Cannabis in Hawai‘i have been told that date from the fourth or fifth century all the way until first European contact. Either way, the main point remains; Cannabis has been a part of Hawai‘i’s landscape for a very long time.

After the illegal overthrow of the Hawaiian Kingdom and the installation of the United States governmental structure, the Hawaiian islands became subject to its laws. In 1930’s the Federal Bureau of Narcotics was formed and its first commissioner Henry J. Anslinger started a war on cannabis. His intentions to do so were based on racism of which he was very vocal about with quotes such as “*Reefer makes darkies think they’re as good as white men*”.<sup>14</sup> The US Government then drove media to the masses that villainized anyone who used cannabis. This media has been since made even more famous but for the opposite reason, because its ridiculous claims that scared viewers into believing consuming cannabis would lead to insanity or harmful tendencies such as murder. Then in 1970 Congress passed The Controlled Substances Act which

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<sup>11</sup> MCBA Report page 2

<sup>12</sup> Leaf Magazine, *Cannthropology: Pakalolo in the Pacific*, (2022), <https://leafmagazines.com/learn/history/cannthropology-pakalolo-in-the-pacific/>

<sup>13</sup> Civil Beat, *Pakalolo’s Long History, Regulated Future in Hawaii*, (2016), <https://www.civilbeat.org/2016/02/pakalolos-long-history-regulated-future-in-hawaii/#:~:text=Pakalolo%20is%20the%20Hawaiian%20word,probably%20goes%20back%20much%20further.>

<sup>14</sup> HuffPost, *Marijuana Prohibition Was Racist from the Start. Not Much Has Changed*. (2014), [https://www.huffpost.com/entry/marijuana-prohibition-racist\\_n\\_4590190](https://www.huffpost.com/entry/marijuana-prohibition-racist_n_4590190).

put cannabis in most strict category of Schedule 1 with “no currently accepted medical use in treatment”. This would then become the law that enforcement agencies relied upon to enforce harsh penalties for cannabis which targeted minorities in America and still do to this day.<sup>15</sup>

### 3. Significant Law Enforcement Operations in Hawai‘i

It was not uncommon to find a shipment of cannabis that was grown on the big island of Hawai‘i bound for the continental United States in the 1970s. With the introduction of The Controlled Substances Act and the years of villianization of cannabis years prior Operations Green Harvest launched in the late 1970’s on the Big Island of Hawai‘i, where the majority of cannabis was grown in the state. It was fueled by the War on Drugs started in the Nixon era and was a significant effort to eradicate the cannabis industry that had been flourishing but had little to no regulations in the state. 1980’s saw an expansion of these operations with a flood of federal funding backing it up.

Additional operations such as the start of Operation Wipe Out in 1990 which destroyed cannabis crops by spraying pesticides from helicopters. This eradication operation was very successful in eliminating a large portion of the supply of cannabis dropping prices per pound from \$2500 to \$6000 per pound. This significantly increased the risk of participating in cannabis growth and distribution in Hawai‘i which gave rise to more dangerous drugs such as meth. Meth had been in Hawai‘i since the 1980’s, most likely the first place in the USA to receive large amounts of the smokable form<sup>16</sup>. Meth did not spike in popularity until the 1990s and early 2000s due to many factors but one to note being the cheap price of the drug and the high levels of poverty in Hawai‘i. With cannabis prices still extremely high due to many of the law enforcement operations, meth became the drug of choice for many. Thus, laying the deadly groundwork of an epidemic we are still struggling with today.

Operation Green Harvest is not a thing of the past. While some counties have defunded and moved away from large scale cannabis law enforcement operations, others continue to double down by funding this operation that can result in criminal penalties and jail time<sup>17</sup>. Even compliant 329 caregivers who are legally allowed to grow cannabis for patients in the state are visited unannounced by men in camouflaged uniforms, AR-15s, and bullet proof vests to conduct ‘compliance checks’ to ensure they are under their plant limit can compliant with all 329 laws. All of this continues while only a limited amount of medical cannabis licensees grow and sell cannabis in retail locations that mirror the professional image of an apple store. There is an

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<sup>15</sup> ACLU, *Tale of Two Countries: Racially Targeted Arrests in the Era of Marijuana Reform* (2022), <https://www.aclu.org/report/tale-two-countries-racially-targeted-arrests-era-marijuana-reform>.

<sup>16</sup> Hawaii Public Radio, *Hawaii’s Ice Epidemic*, (2016) <https://www.hawaiipublicradio.org/hawaii%CA%BBis-new-ice-age-crystal-meth-in-the-islands/2016-05-26/hawaiis-ice-epidemic-how-did-we-get-here>.

<sup>17</sup> The Garden Island, *KPD Requests Funds for Green Harvest* (2022), <https://www.thegardenisland.com/2022/05/06/hawaii-news/prosecutor-continues-to-de-emphasize-marijuana-prosecutions/>.

obvious stark injustice of having a protected class while others suffer irreparable harm for the same behavior.

## **Recommendations: Cannabis Justice Reform**

### **1. Level of Legalization**

Recommendation: Cannabis in Hawai‘i should be completely legalized and descheduled subject to the civil licensing restrictions for cultivation, production, sell, transport, consumption, and other plant-touching activities as recommended here-in and enforced by an independent regulatory authority.

Findings: In a 1964 obscenity case, Justice Potter Stuart of the U.S. Supreme Court wrote that “I shall not today attempt to further define the kinds of material I understand to be embraced within that shorthand description; and perhaps I could never succeed in intelligibly doing so. *But I know it when I see it*, and the motion picture involved in this case is not that.” *Jacobellis v. Ohio*, 378 U.S. 184 (1964) (concurring). Cannabis is unlike obscenity, the standards of which can change over time in the public consciousness and which can only be evaluated subjectively rather than by an objective rule. Cannabis possession, distribution, consumption, cultivation, and other plant-touching activities can be precisely defined and regulated at some specific level that divides the legal from the illegal. But what should that level be?

This question of establishing a precise definition for the levels of cannabis that are legal and illegal, and the sorts of penalties that should accompany violations of those definitions, is at the heart of how to regulate a dual-use system. The Social Equity Group engaged in frequent and deep consideration of this question, in addition to extensive discussions in many of the Social Equity Group Listening Sessions.

As with Justice Potter Stuart above, one might argue that “I will know it when I see it”—1 lb. is clearly different from 50 lbs. and there should be a criminal penalty for the latter. But Justice Stuart’s point was that such a rule required a case-by-case analysis, not a specific, measurable rule. Such discretionary rules do not provide a constitutionally valid basis for the imposition of criminal liability. Statutes must provide a basis by which individuals and businesses can evaluate for themselves whether an action violates the statute. Under the Hawai‘i State Constitution, a criminal statute is void for vagueness if it: “(1) is internally inconsistent and incomprehensible to a person of ordinary intelligence, or (2) invites delegation of basic policy matters to police for resolution on an ad hoc and subjective basis.” *State v. Pacquing*, 139 Hawai‘i 302, 314, 389 P.3d 897, 909 (App. 2016) (quoting *State v. Alangcas*, 134 Haw. 515, 532, 345 P.3d 181, 198 (2015)). Thus, there must be a bright line to determine what is legal and what is criminal.

In the final analysis, from a purely social equity perspective (ignoring in this report the market or tax implications of the recommendation), the Social Equity Group could not create an intelligible rule, or even a sliding scale, for the levels of cannabis legalization v. criminality that was not purely arbitrary. On what legally or morally justifiable basis could one distinguish between legal possession of .5 lbs of cannabis and a criminal penalty imposed for possession of



.6 lbs of cannabis, including possible jail time and the other attendant consequences of a criminal conviction? Is there some fundamental legal difference in that .1 lbs. that makes its possession criminal? Some public or societal harm that will result if the slightly larger amount is not criminalized with the full coercive power of the state? And if there is no moral difference between legalizing .5 lbs. and .6 lbs., is there a moral difference between legalizing 1 lb. and 1.1 lbs.? 2 lbs. and 2.1 lbs.? 50 lbs. and 50.1 lbs.? Where should the line be drawn? On what moral or legal basis is any such line not arbitrary?

Further, to the extent that the successful implementation of a dual-use system is intended to bring the legacy market into explicit legality, the lower the barrier to entry and the more inclusive the legalization scheme, the easier it is to meet that goal. Diversion is only possible if there is somewhere illegal to divert it too, if most things are legal, then there is no diversion. Additionally, prices will drop for Hawai‘i products under a full legalization scheme, allowing them to compete with imported products and reducing that importation as a source of potential health concerns. The more extensive the legalization, the fewer law enforcement, judiciary, and correctional staff, facilities, and resources are necessary, freeing up room in the state budget.<sup>18</sup>

Fuller legalization is also vital to remediate the racial disparities in enforcement. Half-measures in other states, i.e. partial legalization, have reduced the overall number of drug arrests, but actively increased the disparity between majority/minority arrests.<sup>19</sup> In Hawai‘i, Native Hawaiians have been disproportionately affected by cannabis enforcement, and partial legalization will likely exacerbate the issue.

This is not to say that civil penalties for operating a cannabis business without a license should not be imposed. Defining licenses sufficiently broadly, i.e. “a delivery or transportation license is necessary to transport more than 20 lbs. of cannabis by vehicle on public roads”, promotes safety and brings large amounts of cannabis cultivation, production, and retail under state supervision. However, the penalties for operating without a license should follow a model analogous to that of the Tax Department or Liquor Commission, civil enforcement until it reaches a sufficient level of intentional evasion that deserves referral to the attorney general. In this structure, the crime is not associated with the cannabis possession itself, but rather with evasion of a statutory obligation to obtain a license. This shifting of criminality and placement of cannabis violations completely within a civil framework is essential to addressing the stigma of cannabis cultivation, production, and use that pervades Hawaii’s society.

Finally, all cannabis plant-touching activities—including cultivation, production, possession, distribution, and use, etc...—whether medical or adult-use, are illegal under federal law. As states began to liberalize their cannabis regimes, the federal enforcement agencies continued to enforce and fund state enforcement of the remaining criminal cannabis laws with

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<sup>18</sup> Garrett I. Halydier, *A Hybrid Legal and Economic Development Model that Balances Intellectual Property Protection and Economic Growth: A Case Study of India, Brazil, Indonesia, and Vietnam*, 14(1) *ASIAN-PAC. L. & POL. J.* 86, 96-98 (2012).

<sup>19</sup> Caislin L. Firth, *Did marijuana legalization in Washington State reduce racial disparities in adult marijuana arrests?*, 54(9) *SUBSTANCE USE & MISUSE* 1582 (2019).

continued interference in communities of color and poor communities<sup>20</sup> until 2009 when the Department of Justice (“DOJ”) and the Treasury’s Financial Crimes Enforcement Network (“FINCEN”) issued the first<sup>21</sup> of several<sup>22</sup> memos ordering federal law enforcement to deprioritize cannabis enforcement in states that chose to create regulated cannabis markets.<sup>23</sup> These memos reserved the right for federal agencies to continue to prioritize eight areas of cannabis enforcement, including diversion to the illegal market, failure to comply with state laws, and the provision of cannabis to minors.<sup>24</sup> The spirit of these memos was continued, in the face of Attorney General Jeff Sessions eventual rescission of these memos,<sup>25</sup> by the 2014 Rohrabacher-Farr amendment<sup>26</sup> which defunded federal enforcement of cannabis laws against individuals and organizations operating in compliance with their state’s cannabis regulations. The DOJ initially misapplied this amendment to reinvigorate federal cannabis enforcement across the country, but later court decisions forced the DOJ to almost entirely curtail cannabis enforcement in jurisdictions with medical and/or adult-use cannabis laws.<sup>27</sup> The most recent U.S. Attorney Generals, William Barr and Merrick Garland, have not deviated from the policy espoused by the Cole Memo, but they have not officially reinstated either, merely deferring to Congress to address cannabis regulation as a legislative matter.<sup>28</sup> Congress is now

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<sup>20</sup> Kim Hewitt, *History and Cultural Context of Marijuana in the United States*, in UNDERSTANDING MEDICAL CANNABIS 40, 49-50 (2021).

<sup>21</sup> The first memo was drafted in 2009 by Deputy Attorney General David W. Ogden under the direction of Attorney General Eric Holder to deprioritize federal enforcement of federal cannabis restrictions against parties operating in compliance with state medical cannabis laws. See Memorandum for Selected United State Attorneys on Investigations and Prosecutions in States Authorizing the Medical Use of Marijuana (Oct. 19, 2009) (<https://www.justice.gov/archives/opa/blog/memorandum-selected-united-state-attorneys-investigations-and-prosecutions-states>); David V. Patton, *A History of United States Cannabis Law*, 34 J.L. & HEALTH 1, 23-24 (2020).

<sup>22</sup> Additional memos include: (1) A 2011 memo written by Deputy Attorney General James M. Cole, noting that while enforcement was deprioritized, cannabis cultivation and distribution activities remained illegal and prosecutable under federal law, especially if there was suspicion that the money or cannabis product was making its way outside of activities authorized by state medical cannabis regulations, see Memorandum for United States Attorneys, Guidance Regarding the Ogden Memo in Jurisdictions Seeking to Authorize Marijuana for Medical Use (Jun. 29, 2011) (<https://www.justice.gov/sites/default/files/oip/legacy/2014/07/23/dag-guidance-2011-for-medical-marijuana-use.pdf>); (2) A 2013 memo written by Deputy Attorney General James M. Cole that further deprioritized federal enforcement actions in states with well-regulated medical cannabis markets unless the enforcement action was to prevent one of eight different activities such as diversion to minors, interstate transport, or use on federal lands, see Memorandum for All United States Attorneys, Guidance Regarding Marijuana Enforcement (Aug. 29, 2013) (<https://www.justice.gov/iso/opa/resources/3052013829132756857467.pdf>); and (3) A 2014 memo from FINCEN detailing rules for how financial institutions could engage with state authorized medical cannabis businesses, see Guidance, BSA Expectations Regarding Marijuana-Related Businesses (Feb. 14, 2014) (<https://www.fincen.gov/sites/default/files/shared/FIN-2014-G001.pdf>); David V. Patton, *A History of United States Cannabis Law*, 34 J.L. & HEALTH 1, 24-26 (2020).

<sup>23</sup> William C. Tilburg et al., *Symposium Article: Emerging Public Health Law and Policy Issues Concerning State Medical Cannabis Programs*, 47 J.L. MED. & ETHICS 108, 108 (2021).

<sup>24</sup> NANCY E. MARION & JOSHUA B. HILL, MARIJUANA 360: DIFFERING PERSPECTIVES ON LEGALIZATION 29-36 (2019).

<sup>25</sup> David V. Patton, *A History of United States Cannabis Law*, 34 J.L. & HEALTH 1, 27-29 (2020)

<sup>26</sup> The amendment has been renewed ever since under various sponsoring names. David V. Patton, *A History of United States Cannabis Law*, 34 J.L. & HEALTH 1, 28-29 (2020).

<sup>27</sup> *US v. McIntosh*, 833 F. 3d 1163 (9th Cir. 2016).

<sup>28</sup> David V. Patton, *A History of United States Cannabis Law*, 34 J.L. & HEALTH 1, 29-30 (2020).

considering various bills to legalize medical and/or adult-use consumption of cannabis at the federal level.<sup>29</sup>

At this time then, federal law enforcement elements generally continue to abide by the 2013 Cole Memo which deprioritizes (in addition to being defunded by Congress on these issues) enforcement of federal cannabis laws in states whose cannabis regulations authorize cannabis-related conduct under “strong and effective regulatory and enforcement systems”. The federal government will still prosecute: 1. Distribution of cannabis to minors, 2. Diversion of cannabis business revenue to criminal organizations, 3. Diversion of cannabis across state lines to state where cannabis is illegal under state law, 4. Use of legal cannabis operations to hide illegal activity regarding other illegal drugs, 5. Violence and the use of firearms in the cultivation and distribution of cannabis, 6. Drugged driving and the exacerbation of adverse public health consequences, 7. Growth or use of cannabis on public lands, and 8. Cannabis possession or use on federal property.

The Social Equity Group notes two things about these priorities and requirements, first, the requirement of a “strong and effective regulatory and enforcement system” does not require that that system be based in a law enforcement framework. Second, the recommendation for full legalization and descheduling advocated for in this report should not exempt cannabis from penalties under other elements of Hawai‘i law—i.e. distribution to a minor, impaired driving, growing on state lands, etc... should still be restricted by civil or criminal regulation as appropriate, which would keep Hawai‘i’s law in compliance with federal priorities. The most important element would be effective enforcement of those existing laws.

Finally, full legalization and descheduling does not create a “wild, wild west” for cannabis activities in Hawai‘i. Rather, the regulation of cannabis activities and consequences will simply move from the criminal sphere to those regulations and enforcement mechanisms currently applicable to similar activities. Department of Agriculture requirements on cultivation, common law nuisance regulations, consumer protection laws, billboard restrictions, financial reporting requirements, business registration laws, workers compensation and labor laws, and Tax Department registration and payment will not only apply, but in some cases, become even easier to enforce, in addition to the licensing requirements for cannabis businesses.

These recommendations for full legalization and descheduling, will not only foster a safe, vibrant industry, but will provide a sound foundation for identifying and remediating the harms of Hawai‘i’s War on Drugs.

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<sup>29</sup> See e.g. Cannabis Administration and Opportunity Act, S. \_\_\_\_\_, 117th Cong (2022) (discussion draft); Marijuana Opportunity Reinvestment and Expungement Act, H.R. 3617, 117th Cong. (2022); and Secure and Fair Enforcement Banking Act of 2021, H.R. 1996, 117th Cong (2022).

## 2. Resentencing and Record Clearance

Recommendation: The Social Equity Group recommends that the Legislature provide a process for resentencing and record clearance of cannabis related criminal offenses in accordance with the following principles and the report prepared by the Last Prisoner Project and incorporated herein.

For resentencing, the Legislature should: 1. Create an automatic process to identify and review eligible cases, 2. Apply this process to all past, current, and future cases, 3. Include a presumption for release, presuming resentencing to time served or reduced terms when before the court, 4. Provide clear guidance on those presumptions to judicial decision makers and subject any opposition by law enforcement or prosecutors to a judicial process, 5. Create enforceable deadlines for the identification, review, processing, and release of adversely affected individuals, and 6. Monitor the process with transparent data and reporting.

For record clearance, the Legislature should: 1. Create an automatic process to identify and review eligible records and clear them with no action or fees required of the record holder, 2. Ensure the criteria for clearance are broad and clearly defined, 3. Ensure there is no waiting period between identification of the records and their clearance, 4. Disallow discretionary review of individual records to improve the efficiency of the process, 5. Monitor the process with transparent data and reporting, and 6. Conduct public advocacy campaigns and individual contact attempt to ensure affected individuals are aware they received relief.

Please see Appendix A for further details and information on these recommendations.

Findings: Please see Chapter 5 of the Report No. 1, 2017 from the Hawai'i Legislative Research Bureau, *Panacea or Pipe Dream: Does Portugal's Drug Decriminalization Policy Translate for Hawai'i?*, for a comprehensively researched and well-presented look at the available state data (and the challenges with obtaining it) concerning current arrest and incarceration statistics for cannabis related offenses. (Attached hereto as Appendix B). It is impossible to overstate the scope of the suffering due to Hawaii's enforcement of the War on Drugs; suffering that continues to fall disproportionately on minorities and economically disadvantaged communities.

Rather than yet another recounting of the statistics and recitation of the horror stories, we say simply that it must stop.

## 3. Remediation

Recommendation: Resentencing and record clearance are only one aspect of remediating the harms of Hawaii's war on drugs. The state should also directly fund direct payments; educational scholarships; job training and placement; and low interest home, vehicle, and business loans to any person, and their immediate family, whose record was cleared of any cannabis offense. The amount of the payments, etc... can vary based on the time served and the severity of the conviction, with higher remediation actions provided by those who suffered larger harms.

Findings: Remediation for Hawaii's prosecution of the War on Drugs payable directly to the survivors and families is the most direct method to provide active, vital assistance with the least possibility of mistake or diversion. Direct remediation efforts provided directly to those whose records were identified and cleared has the potential to provide the greatest benefit to the greatest number of those most negatively affected.

While the recommendation and findings in this section are relatively short, it is not due to lack of importance. Rather, the recommendation and findings are sufficiently self-evident and self-justifying as to need no further elaboration. The state should directly and immediately help those that it hurt.

#### **4. Funding the Identification and Processing of Applicable Records**

Recommendation: The state should fund a new center at the William S. Richardson School of Law to hire supervisors and law students to review all past drug cases to identify individuals eligible for resentencing and record clearance; prepare the forms and administrative documentation to submit to the reviewing agency and the courts as applicable under the new record clearance process; attempt to locate and contact all benefitting individuals; and appear in court representing individuals seeking resentencing. This center would address the difficulties that the current Hawai'i process for record identification, resentencing, and record clearance currently pose and provide the most rapid relief for those currently incarcerated. This plan would also provide unparalleled exposure to Hawaii's criminal justice system via externships, for-credit activities, and employment for Hawaii's future attorneys.

Findings: The Social Equity Group investigated the feasibility of an automatic resentencing, record clearance, and civil asset forfeiture remediation program with the Hawai'i State Judiciary and the Hawai'i State Attorney General's Office. Both organizations provided that there are substantial technological and structural barriers to the creation of an automatic technical process. However, they both provided that with sufficient resources for record identification and a change to the process for record clearance, such a process would be workable.

Due to the structure of Hawaii's criminal code, cannabis offenses are generally not identified directly or electronically searchable in any current reference technology. Rather, the police reports and other documents in each criminal case number will need to be reviewed to identify those cases that involved cannabis offenses. The information could then be used to resentence, clear records, and remediate civil asset forfeiture consequences.

This situation is not unique. Some states have responded by making the process reliant on the affirmative action of the previously convicted/incarcerated to come forward and initiate the resentencing and expungement process. To be truly effective, a process like this would require a large, ongoing public relations campaign to ensure that eligible individuals became aware of their rights. Similar campaigns would also need to be conducted on the mainland to reach other previously convicted/incarcerated individuals no longer living in Hawai'i.

Such a requirement for the previously convicted/incarcerated to affirmatively initiate the process of resentencing and expungement is frequently tied to a lengthy, complicated, and often

expensive process involving multiple government offices, judges, and the approval of a prosecutorial agency of some sort. (This mirrors the current expungement system in Hawai'i for convictions which requires 120 days to complete, a petition to the Office of the Attorney General Criminal Justice Data Center, approval and submission to court, and approval of the judge). These systems significantly disadvantage the previously incarcerated who may be underfunded, undereducated, or otherwise unable to benefit from the system.

An effective system for resentencing and record clearance would address these issues by providing sufficient resources for record identification and processing; create a *sui generis* process specific to record clearance for cannabis offenses (purely administrative for cannabis only offenses; and hybrid administrative/judicial process for cannabis offenses committed in conjunction with other offenses); reserve part of a specific judge's calendar for processing record clearances and resentencing; and funding for a public relations campaign to make people aware of the record clearance and invite registrations from the previously convicted for direct remediation assistance.

Freeing current inmates convicted for cannabis crimes, reducing elements of the State's criminal docket, and redirecting law enforcement resources away from cannabis enforcement will likely result in substantial fiscal and personnel savings to all involved agencies and organizations. However, this savings, while likely large, is currently unquantifiable.

Placing responsibility for implementing this program (specifically the large burdens of research to identify appropriate cases and the generation of administrative recommendations for record clearance) within any the relevant state agencies at this time would take a lot of time and expense to ramp-up (especially since the program would eventually dissolve when all records are cleared). This is time during which now legal individuals remain incarcerated, a situation that is untenable when alternative solutions could provide the services more efficiently. Thus, the creation and funding of an independent operation with the legal expertise to effectively review each record, advise beneficiaries, and prepare documents for the courts and legislative agencies is needed. A funded center at the William S. Richardson School of Law would be faster to setup and become operational than an RFP process to retain a currently existing non-profit to conduct the work. Further, this center would provide a variety of clinical, research, and advocacy experiences for Hawaii's students pursuing public interest law, while exposing those same students to the intricacies of the Hawaii criminal processes in which they will soon work as lawyers. Current federal legislation would also provide state funding for these activities.<sup>30</sup>

## **5. Removal of Law Enforcement Oversight**

Recommendation: Regulation and enforcement of any dual-use system should be removed from any current agency, commission, or department and placed in an independent entity responsible for all regulations implementing the statutory requirements and enforcement of those

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<sup>30</sup> See MORE Act DRAFT 4, Sec. 3056 (April 4, 2022), <https://www.congress.gov/bill/117th-congress/house-bill/3617>; see HOPE Act, Sec. 2 (Dec. 2, 2021), <https://www.congress.gov/bill/117th-congress/house-bill/6129>; Cannabis Administration and Opportunity Act, Sec. 3061 (July 21, 2022), <https://www.congress.gov/bill/117th-congress/senate-bill/4591>.

requirements. See elsewhere in this report and the reports from other permitted interaction groups for the proposed details of this non-law enforcement agency.

Findings: As stated above, the Social Equity Group notes that the Cole Memo requirement of a “strong and effective regulatory and enforcement system” does not require that that system be based in a law enforcement framework. In fact, numerous other states have placed their legal cannabis industries under non-law enforcement governance.<sup>31</sup> The required strength and enforcement of the system comes not from criminal laws and enforcement of criminal sanctions, but from any laws and enforcement that prevent the activities which are the subject of the Justice Department’s enforcement priorities.

## **6. Civil Asset Forfeiture Equity**

Recommendation: As with other recommendations in this report, the state should comprehensively legalize and deschedule cannabis as a first step towards preventing further abuses of the civil asset forfeiture system. If cannabis possession, cultivation, and distribution—even outside of the licensing scheme—is no longer a crime, just a civil enforcement action unrelated to law enforcement, then the civil asset forfeiture system would no longer apply. This avoids the need for the state to reconsider its civil asset forfeiture laws as a whole at this time.

As mentioned in the decriminalization and record removal section of this report, identifying prior cannabis convictions for action will take time and resources. Identifying instances of civil asset forfeiture can be a part of that same process, which already has to review each criminal case for cannabis charges, dramatically reducing the cost of implementation of this recommendation.

Finally, the state should fund direct grants; educational scholarships; job training and placement; and/or low interest home, vehicle, and business loans directly to the individuals and their families whose property was subject to civil asset forfeiture. This provides one of the most targeted, direct methods for remediating some of the harms of Hawaii’s prosecution of the War on Drugs.

Findings: One of the most frequent concerns raised at the Social Equity Group Listening Sessions was the devastating ongoing and historic impacts of drug enforcement in Hawai‘i—specifically, the results of civil asset forfeiture practices in connection with drug enforcement actions. Due to even small drug charges, whole families lost their homes, their familial land, their cars, and other possessions. The funds raised from these seizures went straight back into law enforcement budgets to continue to prosecute the drug war—not exactly an incentive to be careful or considered in the exercise of this drastic measure.

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<sup>31</sup> For example, Colorado’s adult-use cannabis regulations are administered by the Colorado Department of Revenue, Washington’s adult-use cannabis regulations are administered by the Washington State Liquor and Cannabis Board, and Nevada’s cannabis regulations are administered by the independent Nevada Cannabis Compliance Board.

In fact, neither the Criminal Justice Data Center nor the State Attorney General Civil Recoveries Division in charge of civil asset forfeitures actually track historic asset forfeitures. Similar to the process that needs to be applied to the judiciary records to identify cannabis convictions that qualify for resentencing and expungement, finding victims of civil asset forfeiture for targeted remedial relief will be costly and time-consuming, but no less worth doing. However, identifying instances of civil asset forfeiture will be dramatically easier if tied to the process of identifying cannabis convictions that qualify for resentencing and expungement. This is another area where a state-funded, independent center at the Richardson School of Law would provide valuable expertise and

While a recommendation for a complete overhaul of the civil asset forfeiture system in Hawai‘i is beyond the scope of this report, there are a number of steps that Hawai‘i can take to remedy past injustice and prevent future use of this system against participants in a legal industry.

## **Recommendations: Service Equity**

Social equity does not only apply to those who have been affected by criminal enforcement of cannabis regulations. Due to the Controlled Substance Act Schedule I status of cannabis as absolutely illegal at both a federal and state level, a number of knock-on effects of cannabis use or proximity can have dramatic, negative, life-changing effects on even those who have a medical 329 card in Hawai‘i, let alone those who would legally use or possess cannabis under a dual-use regime. Accordingly, this section focuses on those areas where state statutes can address many of these inequities and ensure that participation in the dual-use system does not otherwise penalize a legal activity.

Each of the following findings and recommendation are based in the experiences of other states, Hawaii’s current laws and practices, and the lived experiences of those giving their stories at the Social Equity Group’s listening sessions.

### **1. Employment Equity**

Recommendation: The Legislature should enact provisions that:

- a. prohibit employers from discriminating against a person in hiring, termination, or any term or condition of employment, or otherwise penalize a person, if the discrimination is based upon either the person’s possession of a valid medical cannabis 329 certification or the person’s positive drug test for cannabis components or metabolites, unless the person used, possessed, or was impaired by medical cannabis on the premises of the place of employment or during the hours of employment;
- b. treat off-duty cannabis use in the same manner as off-duty alcohol use. So long as off-duty use does not affect job performance, employers must refrain from terminating workers for recreational use.

These protections can be enhanced for certified medical cannabis users.



These protections should not be applied to professions that either require drug tests or prohibit drug use under the ethical or legal restrictions of that particular profession. These protections should not be applied to use or possession on the job, on the employer's property, on federal property, or on state property (except as allowed under the regulations governing the public use of cannabis).

Except in the cases just mentioned, violations of these protections should not be based on failure of a drug test because cannabis components and metabolites can remain in a person's system for up to 90 days, while impairment can fade in as little as a few hours. Job impairment, cannabis use on the job, cannabis possession on employer property, or cannabis component test results from a blood test above a certain *per se* threshold (such as 5 ng/ml) (rather than a zero-tolerance policy) should be the standards for adverse actions by employers under this legislation.

Findings: It is generally agreed that an employer should be free to discipline and/or terminate employees who use marijuana while working or are impaired on the job. But the difficulty arises in how to test for such impairment in an accurate way, while at the same time not unduly burdening the legal or medical user's legal right to use cannabis under a dual-use system.

Many employers currently maintain zero-tolerance policies, disciplining or terminating employees if they fail a random drug test that detects any amount of cannabis components or metabolites in the employee's body. However, these tests do not accurately measure actual impairment at work but reflect earlier impairment (as long as 90 days previously). Impairment that was the result of prior legal use off of the job site and off of the clock.

Employees so affected not only lose their employment at that time, they may often lose their livelihood as their reason for termination follows them from job to the next job application. Under a dual-use system, such consequences are untenable except in professions/locations where legal cannabis use is absolutely prohibited by professional standards or federal requirement/and or actual on-the-job impairment.

Many employers believe that they are duty-bound (morally if not legally) to not enable an illegal activity on the part of employees. Many employers are also concerned that they risk liability themselves if they do not make reasonable efforts to curtail such illegal use, and the resulting impairment causes injury or damage to the employee or to third parties.

Under a dual-use system, legislation to clarify and balance the balance of employer concerns and employee protections is necessary.

## **2. Custody Equity**

Recommendation: The Social Equity Group clearly does not support the consumption or growth of cannabis around anyone under the age of 21 in a dual-use system, however, consumption and possession of cannabis should be treated by the family courts in the same manner as alcohol consumption and alcohol abuse, rather than in the same way as cocaine and methamphetamine use. Like alcohol, cannabis use and possession must be shown on a case-by-case basis to

adversely affect the child's physical or emotional well-being as a factor in determining custody, not the simple fact of cannabis use or possession as a *per se* bar to custody.

Findings: One of the common issues raised by participants in the Social Equity Group listening sessions are the current policies and results of Family Court judges that adversely affect custody decisions against parents affiliated with cannabis use or possession, even when permitted by the parent's possession of a valid medical 329 certification.

In Hawai'i there are no current statutes specifically addressing the use of cannabis or the impact of possession of a valid 329 medical certification on the outcomes of custody hearings. However, Hawaii's courts remove children from homes and deny custody for as little as a failed cannabis drug test (unconnected to the use of any other drug). *See e.g.* In re K Children, 139 Haw 291, 389 P.3d 128 (Ct. App. 2016) (no reunion with parent without clean drug test for cannabis); *and* Mother's testimony at Maui Social Equity Listening Session about removal of her child from her home and placed in state care on the mainland for her cannabis use despite her legal certification as a 329 patient in Hawai'i.

### **3. Housing Equity**

Recommendation: The Legislature should extend the protections of Chapter 28, Section 521-39 of the Hawai'i Revised Statutes to include all legal use, possession, and growing allowed under a dual-use system (subject to the limitations contained in those provisions). Such protections should also apply to all housing administered by the Hawai'i Public Housing Authority, similar to the language of SB 2870 (2022) (along with the other provisions of SB 2870 if extended to include legal use). Legal cannabis use and possession should not be a bar to receiving any state services administered by the Statewide Office on Homelessness and Housing Solutions.

Findings: At the present time, since marijuana is still classified as a Schedule 1 controlled substance under federal law, a person's use of medical marijuana is a violation of the housing program rules. The United States Department of Housing and Urban Development (HUD) has stated that PHAs and owners of federally assisted housing may not grant requests by current or prospective tenants to use medical marijuana as a reasonable accommodation for their disabilities. State housing authorities for non-federally funded programs employ a similar approach.

These prohibitions adversely impact the most vulnerable populations in Hawai'i by inhibiting their ability to obtain affordable housing or houselessness services.

### **4. Insurance Equity**

Recommendation: The Legislature should pass statutes making it illegal for insurance companies to deny any sort of policy, voluntarily entered into by the insurer, on any basis concerning a legal use of cannabis as defined under the dual-use system.

Findings: In 2012, the United States District Court for the District of Hawai'i in *Tracy v. USAA Insurance Co.*, No. 11-00487, 2012 WL 928186 (March 16, 2012) found that under Tracy's insurance agreement, Tracy was entitled to compensation for the 12 medical cannabis plants

stolen from her property. Tracy was a valid 329 card holder under Hawai‘i law and the insurance carrier was not permitted to deny the claim because Tracy had a lawful, contracted for, and insurable claim under state law. However, the court denied Tracy’s claim under the policy, finding that enforcement of the insurance policy in this circumstance would be contrary to federal law and federal public policy. The court held that, under the doctrine of contract illegality, courts may decline to enforce contracts that are illegal or contrary to public policy, and that this rule applies where the enforcement of the contract would violate federal law, including the CSA. This ruling has generally been followed by other federal courts with the exception of *Green Earth Wellness Ctr., LLC. v. Atain Specialty Ins.*, 163 F. Supp. 3d 821, 834-35 (U.S. Dist. Col., 2016) which held that, explicitly unlike *Tracy*, the insurer “having entered into the Policy of its own will, knowingly and intelligently, is obligated to comply with its terms or pay damages for having breached it,” so rejecting the *Tracy* court’s reliance on the public policy against enforcing federally illegal contracts.

While it is unclear whether or not federal courts will enforce future insurance contracts, the state can provide some clarity for consumers and insurance companies as to the application of state law to insurance contracts in Hawai‘i. This clarity will be important for both consumers and future cannabis businesses, especially social equity and small businesses, who currently struggle to obtain personal, property, and business insurance; and who then have the legitimate fear that such insurance would be unenforceable despite their regular premium payments.

## **5. Real Estate Equity**

Recommendation: To foster an inclusive, equitable, and accessible industry for small business and equity licensees, the state should develop programs to educate landlords on how best to safely interact with the legal cannabis industry; fund grants or the first few years of rent for new small business and equity licensees; provide property insurance to small business and equity licensees; and extend the current prohibition on counties creating zoning or safety code requirements that are more strict than the laws of the state with regards to cannabis licensees.

The state should keep, but modify, its current restrictions on the locations of retail, manufacturing, and grow locations to also include new license types and protect children, but provide accessible locations for all license types across the islands. One method might be to modify current restrictions such that there are identifiable areas in each state election district for the operation of licensed cannabis businesses.

The state should remove restrictions that prevent small growers from using their land for cannabis cultivation, including, but not limited to, the restriction that all cultivation must take place at least 500 feet from a residence on agricultural land.

Findings: Landlord reticence to rent property to cannabis growers, manufacturers, and retail locations is based in fear of: a. ‘trafficking’ of cannabis, even if legal under state law; b. neighbor business complaints and nuisance lawsuits; c. crime due to the cash nature of cannabis business at this time; d. fear that they will be aiding and abetting the commission of a felony under 21 U.S.C. Section 846; and e. subject to civil asset forfeiture under 21 U.S.C. Section 881(a) and current state law which can apply to both real and personal property. As a result, cannabis

businesses of all stripes in Hawai‘i have found it difficult to obtain affordable rental space for every step of the legal cannabis industry.

These issues will be manifestly more impactful on social equity and small business licensees as landlords require higher rents, larger deposits, extensive security and other build-out requirements, insurance requirements, and indemnity provisions. These requirements are insurmountable for many small business and equity licensees. This is in addition to the current potential for the counties to amend their building codes to further restrict the location, build-out, and operation of cannabis businesses through their various zoning and safety codes.

The Social Equity Group Listening Sessions also heard about issues created for small farmers whose land was small properties were appropriately zoned for cannabis and/or hemp agricultural cultivation, but unusable because of the requirement that any such cultivation must take place at least 500 feet from any residence on the property. This policy will exclude many small farmers and social equity applicants from participating in the dual-use system and encourage continued engagement with the legacy market.

## **6. Banking Equity**

Recommendation: The state should require the Department of Commerce and Consumer Affairs Department of Financial Institutions to fast track the approval of any state-chartered financial institution that presents a plan for providing services to the cannabis industry in Hawai‘i. The state should pursue methods of incentivizing state-chartered financial institutions to submit such applications. The state should subsidize access to financial services for small businesses and social equity licensees in Hawai‘i.

The state should itself offer affordable, basic financial services, including deposits and check writing, to all cannabis business licensees in good standing under the state dual-use regulatory scheme. The state can freeze and/or seize any assets it holds if a licensed cannabis business is no longer operating in good standing or otherwise violates Hawaii’s cannabis regulations. This would promote legal participation in the industry, and Hawai‘i would be fostering a “well regulated market” as envisioned by current federal cannabis enforcement priorities.

Findings: One of the most important limitations on the current cannabis industry is the lack of access to banking services of any kind. Those services that are available to Hawai‘i businesses are currently operated out of the mainland, require the transport of large amounts of cash, and are prohibitively expensive – as the banks must charge to conduct extensive compliance efforts, meet reporting requirements, and offset the risk of offering services to the industry (which are not FDIC insured). These issues present extensive obstacles to the establishment of a legitimate adult-use system that encourages business and individual participation in the legal system through ease of use.

Currently, cannabis businesses struggle to accept credit or debit cards, maintain a bank account to pay any provider or employee via check rather than cash, or pay taxes to the state and federal government in a method other than cash. These restrictions make it very expensive for legal cannabis businesses to operate legally and increase the risk of theft or robbery of the large

amounts of cash involved. These restrictions are just as fiscally devastating to small businesses and equity licensees who seek to join the legal market.

## **7. Professional Services Equity**

Recommendation: The state should investigate which professional service providers are currently hindered in their provision of services to a dual-use cannabis industry, both licensed businesses and legal consumers, and enshrine in statute or administrative rules protections and incentives for those service providers to engage with legal participants in the dual-use system.

Findings: On Oct. 20, 2015, the Hawai‘i Supreme Court amended Rule 1.2(d) of the Hawai‘i Rules of Professional Conduct to permit lawyers to advise clients on regarding conduct expressly permitted under Hawai‘i law, so long as the attorney also advised the client of potential legal consequences for that same conduct under other applicable law. This provision allows lawyers in Hawai‘i to provide services to the cannabis industry.

However, that same allowance does not provide the cannabis industry access to other necessary professional services, either at all or without significant cost—both of which are barriers to the participation of small business and social equity licensees in the legal industry.

Accountants, doctors, pharmacists, teachers, and other public institutions have ethical rules, whether general “good moral character” requirements or specific drug or cannabis requirements, which prohibit or greatly discourage the provision of services to cannabis business licensees and consumers.

## **8. Community Reinvestment**

### **a. Regulatory Authority**

Recommendations: The regulatory authority should have a Social Equity Board separate from its operating board and advisory board. This Social Equity Board should have specific authorities and powers such as:

- Authority to review and revise the social equity program, provisions, and implementations at any time.
- Hold veto power for any policy or rule that is adopted by the operating board
- Receive, review, award, and track compliance for grants to applicants of a Cannabis Community Reinvestment Fund. Applicants would come from communities identified as been having disproportionately harmed by the war on drugs (by zip code or other identifier) and recipients do not have to be affiliated with any cannabis operations. Grants can be awarded to any entity that meets the requirements set forth by the Social Equity Board.
- Issue no interest loans or grants to those who apply and can show direct impact from civil asset forfeiture relating to a cannabis crime and/or can show a direct impact from Green Harvest Operations.
- Verify that social equity applicants are indeed qualified for that designation

An example of a possible makeup of the Social Equity Board should consist of, but not limited to:

- 1) A member or representative of the Office of Hawaiian Affairs
- 2) A member or representative of the Council for Native Hawaiian Advancement
- 3) A member or representative from Aha Moku of each island
- 4) A member or representative from a Criminal Justice Reform non-profit
- 5) An expert experienced in prison/jail re-entry to society
- 6) 2 Native Hawaiians not affiliated with an organization
- 7) 2 Formerly incarcerated individuals

The cannabis industry around the nation is subject to the same market forces of other industries plus the added burden of regulations from the state and counties. The consolidation and commodification of cannabis and their companies is happening rapidly at a time where some states have yet to even set up a medical program or even consider an Adult Use program. Thus, we are seeing large multi-state, and in some instances, multi-national companies build for large scale operations with the sole intent on paying high shareholder dividends. This has led to the cannabis industry not paying attention to corporate social responsibility which exacerbates climate change, waste reduction, and energy conservation. The rapidly growing cannabis industry around the nation is quickly becoming an example of yet another unsustainable industry as it uses millions of nonbiodegradable mylar bags to cut costs on child proof packaging requirements, large grow operations contributing to massive amounts of waste and pollution, large amounts of chemical fertilizers, and much more<sup>32</sup>. In keeping up with the State of Hawai'i's clean energy goals, the counties plastic bag and single use plastic bans, and other sustainability practices these should be taken into heavy consideration when setting up a brand-new industry. A new agriculture industry in 2020's should set the bar in terms of corporate social responsibility, sustainability, and innovation.

b. Industry Participation in Social Equity

Recommendations: The State of Hawai'i should mandate that the regulatory authority require (or provide large incentives for) cannabis companies to have a triple bottom line and report on this to the authority. The authority should then issue a bi-annual report card for each company on their impact and make strong considerations regarding this report card in the renewal of licenses. Companies can add additional certifications such as LEED certified buildings, regenerative agricultural practice certifications, local organic inputs, and the like to achieve a higher report card score and more incentives. Ensuring that a new agricultural industry such as this one in this era is incentivized for going above and beyond what is currently minimally required for achieving sustainability and energy goals is paramount for a healthy community and industry.

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<sup>32</sup> Ethan Lu, *Sustainability in the Cannabis Industry, Truly Going Green*, (2021), <https://www.forbes.com/sites/forbesbusinesscouncil/2021/02/02/sustainability-in-the-cannabis-industry-truly-going-green/?sh=7bcd52795e24>

Findings: Community reinvestment is highlighted as a crucial piece of social equity in almost all the analysis and reports our Social Equity Group researched. It is not enough to provide equal opportunity in the market, but it is the State's responsibility to address many of the harms its policies and compliance with federal policies has caused communities in relation to cannabis. One cannabis conviction could have had a ripple effect for generations on a family. It could have prevented them from obtaining a job, obtaining loans, or qualifying for other types of financial assistance, becoming homeless, or any a myriad of different struggles that came with a conviction.

## **Recommendations: Equity in the Market**

As mentioned above, after reviewing most of the social equity reports from organizations such as the Minority Cannabis Business Association (MCBA), gathering information from panel discussions, and input from other states the consensus in the US cannabis industry is that social equity has yet to be done well in any program across the nation.<sup>33</sup> High barriers to entry into the market, difficult and burdensome regulations to obtain licenses, and then even if one of the lucky social equity applicants are to receive a license there is little to no guidance or assistance to operate in an extremely difficult and regulated environment. Given this information, the Social Equity Group concluded that our social equity recommendations would look very different than any one state that currently has a program. Our recommendations would likely be many different interventions from other state programs accompanied by new interventions yet to be tried in other markets.

### **1. Social Equity Licensing**

Recommendation 1: We highly recommend that the rules and regulations to get licensed for any of the businesses operations in an adult use cannabis industry be limited and have low barriers to entry. This will allow the most individuals to participate which has been identified as the best intervention for social equity.

Recommendation 2: Applicants who qualify as a Social Equity Applicant (SEA) will get prioritized in the licensure process and in an initial inspection process which is required to initially operate. The regulatory authority should have adequate dedicated staff who review and prioritize SEA applications specifically.

Findings: In markets such as Oklahoma (note: medical program only) where they have extremely low barriers to entry for obtaining a license experts report that they have a more diverse group of license holders even without a social equity program in place.<sup>34</sup> Additionally, in states that have social equity programs and have a lottery system where a small number of licenses are awarded there have been lawsuits that hold up the issuance of licenses. It also increases costs to

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<sup>33</sup> MCBA Report Page 3

<sup>34</sup> Matthew J. McCarthy, *Notes on Social Equity from a Former Cannabis Regulator*, (2022)  
[https://www.duanemorris.com/articles/notes\\_on\\_social\\_equity\\_former\\_cannabis\\_regulator\\_0711.html](https://www.duanemorris.com/articles/notes_on_social_equity_former_cannabis_regulator_0711.html)

prospective licenses creating another barrier.<sup>35</sup> While New Jersey’s cannabis program does award a limited number of licenses they do have a priority application program that focuses on social equity businesses by prioritizing them in the licensure processes so that their applications are reviewed before other applicants – regardless of when they apply.

## **2. State Support for Social Equity License Applications**

Recommendation: The regulatory authority should have a dedicated office within its structure that carries out functions like the Small Business Association catered toward SEAs. This office should oversee significant technical assistance to SEAs during the application process to ensure they are able to meet all requirements set forth in statute and administrative rules and pass the initial inspection. This includes but is not limited to, trainings for compliance, information briefings for potential SEAs, assistance with business plans, mentorships, etc.

In addition to technical assistance this office should provide financial assistance to SEAs. This would include but not be limited to, administering no interest start up business loans to SEAs that qualify based on criteria set forth by the regulatory authority, subsidizing mandated technology for regulatory purposes that come at a significant financial burden to SEAs (e.g. seed to sale tracking system subscriptions and fees)

Findings: Due to many factors, such as the those that qualified an individual as a SEA in the first place, there are barriers that disproportionally prevent a level playing field for SEAs in comparison to non-SEA and their businesses. This could look like: 1) The lack of access to startup capital, 2) The lack of information and training that it takes to run a successful business, especially in a highly regulated industry with no traditional banking services, 3) The lack of access to experts in the cannabis industry that know of and can advise how to avoid the common initial pitfalls of a new cannabis business. One of the goals of social equity is to provide the SEA the opportunity for success but it should be noted that this does not mean it guarantees it. Thus, not providing specialized support for a SEAs during the application process or after the license is granted, as seen in Oklahoma, would not meet the stated goal of equal opportunity.

## **3. Transition Period**

Recommendation 1: If the State of Hawai‘i decided to legalize cannabis and start an Adult Use program, immediately after passage of the legislation, the Governor’s Office should oversee, or designate an entity, to oversee this interim transitional period from when the law is passed and when the new regulatory authority can adopt new rules and start licensing new cannabis businesses.

Recommendation 2: The State of Hawai‘i should immediately launch the Adult-Use market and allow sales of Adult Use cannabis only by the current medical cannabis license holders, if licensees so choose, until the new administering body is operational after the legislation is passed to deter grey market activity and provide tested regulated cannabis to the public for purchase.

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<sup>35</sup> MCBA Report Page 21



Findings: States that have an existing medical cannabis program and/or significant existing legacy market that transition to an Adult Use program most always have an interim period from when the law is passed and when the new program is implemented. Regulatory agencies need to hire new staff, write new rules and regulations, start soliciting applications for licensing, work with the taxation department, and all the other administrative duties to launch a large program. This interim time has varied in other states. For example, it took Maine four years, California two years, Massachusetts two years, but Nevada it took seven months. During this interim period cannabis enforcement becomes the lowest priority for most law enforcement agencies and grey market operations proliferate.<sup>36</sup> It is common to have unregulated, untested, and unlicensed sales happening on a large scale and out in the open. States that already have a large and flourishing legacy market, such as Hawai'i, have a much harder time bringing those operations into the regulated market once it is online if they do not try to cut down on this activity. States like Oregon and Washington cut down this period of interim time because they allowed the current legal and licensed medical cannabis dispensaries to sell their regulated and trusted cannabis to adults over the age of 21 as an interim measure to launch the market.<sup>37</sup> Given size of the legacy market in Hawai'i, how low of a priority cannabis enforcement is already and will be lower for law enforcement after legalization, the State of Hawai'i is highly encouraged to have an interim transition plan if it decides to implement an Adult Use program. This plan is impartive to cut down on the amount of unlicensed, unregulated, and untested operations that will proliferate in the absense of state regulatory rules.

#### **4. Social Equity Licensee Product Sales During the Transition**

Recommendation: The State of Hawai'i should also allow qualifying social equity individuals to produce, manufacture, and wholesale cannabis products that meet the current testing requirements to the current medical cannabis license holders in a new supply chain diversification. This would ensure that in the interim the market has a supply of cannabis products to satisfy the new increase in demand from the new adult use sales and still have enough cannabis for the medical patients currently enrolled in the 329 program. Additionally, this would provide social equity individuals first mover advantage and significantly reduce the proliferation of untested, and unregulated sales. These interim solutions shall be a provisional allowance until the regulatory authority is fully operational. At the time the authority is capable to start issuing licenses all individuals are the subject to the rules and regulations set forth for applying and receiving an Adult Use license.

Findings: It is difficult to estimate the size of Hawai'i's cannabis market to include illicit sales and production in comparison to the current licensed medical cannabis industry. This committee is aware that the Tax working group of this Task Force will attempt to try and quantify the size of this market. What we do know is that the potential market for legal Adult Use cannabis is much larger than the demand for what currently exists in the licensed medical cannabis program.

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<sup>36</sup> NY Times, *These Weed Sellers Aren't Waiting for Permits*, (2022)  
<https://www.nytimes.com/2022/03/13/nyregion/weed-washington-square-park.html>

<sup>37</sup> MichiganLive, *After Legalization, the Wait for Retail Sales is the Norm*, (2019)  
<https://www.mlive.com/news/2019/08/after-marijuana-legalization-the-wait-for-retail-sales-is-the-national-norm.html>

The current medical cannabis licensees in the State of Hawai‘i do not have the capacity to meet an exponential increase in demand when sales for anyone over the age of 21 is allowed. The market will need a significant increase in production to meet this demand.

## 5. State Support for Social Equity Licensee Businesses

Recommendation 1: The State of Hawai‘i, the respective counties, and the new Regulatory Authority overseeing an Adult Use program should work together to sponsor shared use facilities for social equity applicants on each island.

Recommendation 2: The State of Hawai‘i, the respective counties, and the new Regulatory Authority overseeing an Adult Use program should work together offer low interest loans to qualifying social equity applicants to provide access to new streams of capital.

Recommendation 3: The new Regulatory Authority overseeing an Adult Use program should offer low cost small cultivation licenses to increase participation from social equity individuals.

Findings: In this committee’s statewide listening sessions most of the feedback was that potential cannabis growers and manufacturers just wanted the opportunity to participate in a legal industry but could not meet the high bar to enter the current licensed medical cannabis industry<sup>38</sup>. Some of the larger barriers to entry for social equity individuals and businesses is access to capital<sup>39</sup>, access to land/facilities, proof of premises requirements before licensure<sup>40</sup>. Some states and jurisdictions have been creative to implement solutions to solve these issues and encourage a healthy cannabis market. For example, the City of Oakland has “shared use facilities” where they advance opportunities for equity manufacturers by sponsoring two separate shared-use manufacturing facilities for a one-year period through grant funds received from the Bureau of Cannabis Control (BCC). These facilities will provide equity applicants with both compliant locations to manufacture products and support in distributing products to retailers<sup>41</sup>. With the cost of land and property in Hawai‘i some of the highest in the nation<sup>42</sup> shared use facilities would assist the cannabis industry and social equity applicants succeed.

## 6. Affirmative Action Type Protections

Recommendation: Implement race-specific language into labor practices in a new Adult Use cannabis program to promote diversity in the cannabis workforce. There are specific

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<sup>38</sup> Social Equity Group Listening Sessions with \*Anonymous\*, in Kauai, HI; Maui, HI; Hilo, HI; and Honolulu, HI. (Aug. 2022).

<sup>39</sup> ClarkNow, *Is Social Equity Possible in the Cannabis Industry?*, (2021) <https://clarknow.clarku.edu/2021/04/01/sps-professor-is-social-equity-possible-in-the-cannabis-industry/#:~:text=One%20of%20the%20largest%20obstacles,still%20illegal%20under%20federal%20laws.>

<sup>40</sup> MCBA Report Page23.

<sup>41</sup> City of Oakland Services (Accessed Sep. 2, 2022), <https://www.oaklandca.gov/services/shared-use-manufacturing-facilities>.

<sup>42</sup> University of Hawaii Economic Research Organization Report, *New Perspectives on Land and Housing Markets in Hawaii*, (2019) [https://uhero.hawaii.edu/wp-content/uploads/2019/08/LaCroix-Land\\_Housing.1.27.pdf](https://uhero.hawaii.edu/wp-content/uploads/2019/08/LaCroix-Land_Housing.1.27.pdf).

considerations when implementing affirmative action type language and requirements that should be considered. The NuLeaf project has outlined how to do this effectively.<sup>43</sup>

Findings: If the State of Hawai‘i decides to stand up an Adult Use cannabis program it has the potential to create many local jobs in the state. Licensees will not only employ plant touching jobs such as cultivation but also need staff in the retail locations, delivery drivers, distributors, accounting specialists, media experts, graphics designers, and much more. Thus, it is imperative that a potential new workforce also be aligned with social equity goals. Not only is this good for equity but it also can lead to a healthy economy. “If the number of people-of-color firms were proportional to their distribution in the labor force, people of color would own 1.1 million more businesses with employees. These firms would add about 9 million jobs and about \$300 billion in workers’ income to the U.S. economy”<sup>44</sup>.

## 7. Qualifying for the Social Equity Designation

Recommendation 1: Any applicant for any license in an adult use cannabis program who is of Native Hawaiian descent shall qualify as a Social Equity Applicant (SEA).

Recommendation 2: Supported by the historical data above of the impact the war on drugs and law enforcement operations against cannabis in the State of Hawai‘i; individuals who can show that they themselves and/or an immediate family member has been harmed by Hawai‘i’s policies on cannabis shall qualify as a Social Equity Applicant (SEA). Examples of harm from these policies would be arrests, civil asset forfeitures, and convictions. 75% of any social equity applicant licensed business must be owned and controlled by a social equity applicant. All other owners of the business must be identified at the level of the individual.

Findings: There are not a common set of qualifications for the social equity designation in the states that currently have social equity programs in their cannabis programs. Some states use race criteria others use areas of most impact, arrest data, and other criteria. When dealing with cannabis and building an industry around it we cannot ignore that cannabis prohibition is rooted in racism.<sup>45</sup> Defining who qualifies as a Social Equity applicant will look very different in Hawai‘i due to our history and demographics. Creating a definition that is clear and effective is

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<sup>43</sup> NuProject, *Race-Specific Language to Benefit African American, Latinx, and Native American Communities in Cannabis Equity Legislation*, (2021) <https://nuproject.org/wp-content/uploads/2021/09/Guide-to-Using-Race-Specific-Language-in-Cannabis-Social-Equity-Legislation.pdf>.

<sup>44</sup> Algeron Austin, *The Color of Entrepreneurship, Why the Racial Gap among Firms Costs the U.S. Billions*, Center for Global Policy Solutions, 4 (Apr. 2016), <http://globalpolicysolutions.org/wp-content/uploads/2016/04/Color-of-Entrepreneurship-report-final.pdf>.

<sup>45</sup> John Ehrlichman, White House Counsel to President Nixon, once stated, “We knew we couldn’t make it illegal to be either against the war or black, but by getting the public to associate the hippies with marijuana and blacks with heroin, and then criminalizing both heavily, we could disrupt those communities. We could arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news. Did we know we were lying about the drugs? Of course we did.” Baum, D., Bernstein, J., Quilty, A., & Gurland, H. (2016, March 31). [Report]: Legalize it all, by Dan Baum. Harper’s Magazine. <https://harpers.org/archive/2016/04/legalize-it-all/>.

not easy, but we believe we have come up with a series of definitions and recommendations for Hawai‘i that make sense and addresses those most impacted by harmful policies in our state.

It is extremely important to focus on race-based solutions to remedy race-based harms and create true equity in the cannabis industry.<sup>46</sup> That said, implementing programs that have race-based criteria to qualify can be tricky. It does not mean it cannot be done. Lawmakers and/or regulators must take steps to avoid significant legal challenges that threaten the existence and sustainability of social equity initiatives. This includes exploring the use of “disparate impact theory”. Various states already use the “disparate impact theory” to prove purposeful discrimination within the employment context. Disparate impact theory allows government agencies to prove racial discrimination based on the effect of a policy or practice rather than the intent behind it. To establish an adverse disparate impact, advocates must (1) identify the specific policy or practice at issue; (2) establish adversity/harm; (3) establish significant disparity; and (4) establish causation.<sup>47</sup>

In Hawai‘i there is sufficient data that exists to achieve a disparate impact showing for discrimination in the creation and enforcement of cannabis policy and to illustrate the disparate harm of that discrimination on Native Hawaiian communities as a result of that policy. Our committee attempted to retrieve this data from agencies with a request in letter form from committee member Senator Joy San Buenaventura. Unfortunately, we did not receive data from any of the Hawai‘i specific agencies. This was due to the short turnaround time needed by this committee to submit our reports in a timely manner and because a few agencies mentioned they have some data but is aggregate drug arrest data. Meaning that it does not specify which drugs were involved in the arrest. In order to attempt to retrieve that data, there would need to be an investigation into the police report of the incident.

We did receive some national data from PEW Research. They provided data from Crime Data Explorer on the most recent year with a complete data set, 2019. Data shows that the highest rate of arrests for marijuana possession were of Native Hawaiian individuals at 40%. Native Hawaiians only make up about 10% of Hawai‘i’s population<sup>48</sup> meaning Native Hawaiians are four times as likely to be arrested for cannabis in the state, more than any other demographic. This data would suggest that Native Hawaiians qualify as the community most impacted for cannabis arrests. These findings are supported by the Office of Hawaiian Affairs’s 2010 report titled “The Disparate Treatment of Native Hawaiians in the Criminal Justice System”.<sup>49</sup> Thus, race-conscious social equity programs can be narrowly tailored to remedy past harm to specific Native Hawaiians. As such, no legal need exists to avoid the use of remedial race classifications where such classifications are not prohibited by law.<sup>50</sup>

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<sup>46</sup> MCBA Report Page 32.

<sup>47</sup> MCBA Report Page 33.

<sup>48</sup> U.S. Census Bureau (2020) <https://census.hawaii.gov/wp-content/uploads/2020/06/Hawaii-Population-Characteristics-2019.pdf>.

<sup>49</sup> Office of Hawaiian Affairs, The Disparate Treatment of Native Hawaiians in the Criminal Justice System, Report, (accessed Sep. 2, 2022), <https://19of32x2yl33s8o4xza0gf14-wpengine.netdna-ssl.com/wp-content/uploads/2015/01/native-hawaiians-criminal-justice-system.pdf>.

<sup>50</sup> MCBA Report Page 33.

States such as New York, New Jersey, Vermont, and Massachusetts have successful race-based eligibility requirements to be designated as a social equity cannabis applicant and not run afoul of the Constitution's Equal Protection Clause. To create a successful and compliant policy that is race-conscious the state must show, (1) the public agency's purposeful discrimination against a certain group; (2) that the purpose of the program is to remedy that particular discrimination; (3) the policy is narrowly tailored; and (4) a race-and gender-conscious remedy is necessary as the only, or at least the most likely, means of rectifying the resulting injury.<sup>51</sup>

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<sup>51</sup> Coral Constr., Inc. v. City & Cty. of S.F., 50 Cal. 4th 315, 337 (2010).

# Legalization & Retroactive Relief in Hawaii

*Prepared for Hawaii Dual Use of  
Cannabis Task Force*

August 2022

LAST  
PRISONER  
PROJECT

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# About Us



The Last Prisoner Project (LPP) is a national nonprofit focused on the intersection of cannabis and criminal justice reform. The LPP policy team provides nonpartisan technical assistance to jurisdictions seeking to redress the harms of the historically unjust prohibition of cannabis. We work to advance evidence-based policies that provide retroactive relief for those criminalized by cannabis, namely automatic record clearance and resentencing.

This report was prepared by Gracie Burger, State Policy Director; Adrian Rocha and Frank Stiefel, Senior Policy Associates; and Frances Trousdale, Policy Associate at the Last Prisoner Project.



# Introduction

When a state legalizes adult-use cannabis, it is acknowledging that public interest has shifted on the criminalization of cannabis. The magnitude of this shifting perception is clear in the landscape of national legalization, as adult-use cannabis is legal in 19+ states and territories. However, simply repealing the prohibition of cannabis is not sufficient: millions of individuals still bear the life-long burden of having a cannabis record, and tens of thousands are actively serving carceral sentences for cannabis-related convictions. In order to adequately address the past harms of cannabis criminalization, legalization programs must provide retroactive relief through automatic record clearance and resentencing.

Automatic record clearance is a government-initiated process in which local and state agencies identify and clear eligible records, with no action or payment required by the record holder. Automatic, or state-initiated, record clearance is an evidence-based policy that ensures the intended impact of the policy is not hindered by a process proven not to work. It is also the key to redressing the historically unjust criminalization of cannabis, as cannabis records impose significant and lingering barriers to success. These includes barriers to employment, housing, political participation, public assistance, education, and more. By mitigating the collateral consequences of cannabis records, automatic record clearance provides the necessary pathway towards just cannabis legalization.

Resentencing, a process by which the courts may revise an individual's criminal sentence, is the other cornerstone of comprehensive cannabis policy. By instructing the state to reconsider cannabis-related sentences in light of cannabis prohibition's repeal, this policy provides a pathway to relief for individuals whose continued incarceration is, given legalization, no longer in the interests of justice.

This report provides recommendations as to how Hawaii should include processes for automatic record clearance and resentencing in its development of cannabis legalization. The data-driven policy recommendations are informed by national best practices and research principles, and were developed alongside a comprehensive review of Hawaii's statutes. They are organized in three categories related to the implementation of automatic resentencing and record clearance: process; eligibility; and oversight. Within each of these categories is a description of the policy goal (i.e., the intended outcome of the policy), the policy gaps (i.e., what is missing from Hawaii's criminal code), and the policy recommendation (i.e., what the legislature should adopt to fill the gap and achieve the policy goal).

# Explainer:

## Record Clearance vs. Resentencing

**Record clearance -- which only involves individuals who have served their sentence -- removes a specific event from an individual's criminal record. Resentencing -- which involves individuals still serving their sentence -- can result in a reduction of a criminal sentence.**

### Record Clearance

- Record clearance is the process of updating an individual's criminal record to remove a specific event, like a violation, arrest, or conviction.
- A record clearance remedy has the effect of restricting viewing access to a criminal record, but does not affect the length of the sentence imposed by the criminal incident.
- Only individuals who have completed the terms of their sentence may receive record clearance. In fact, many states have laws that explicitly bar any individual who is currently incarcerated or serving a sentence of supervision from seeking to clear their record.
- The most common forms of record clearance are expungement and sealing.
- Expungement: an eligible record is completely deleted from an individual's criminal record as well as government agency databases.
- Sealing or set-aside: an eligible record is shielded from public view, but preserved and still accessible for some stakeholders, such as law enforcement agencies and certain employers.

### Resentencing

- Resentencing, or sentence review/modification, is the process of adjusting a criminal sentence due to an issue or error with the original punishment. State laws vary on what grounds an individual may be resentenced, such as a factual innocence claim, or if there has been a change in law such that an individual is incarcerated for an offense that no longer carries a period of incarceration.
- Generally, only individuals who are currently incarcerated or serving a sentence of probation or parole are eligible for resentencing.
- Individuals who are serving a term of incarceration or supervision may have the opportunity to ask the court to reevaluate the length of their sentence, or the state may identify such individuals and initiate a resentencing process.
- Unlike parole hearings, in which the individual may be approved to serve the remainder of their sentence in a community setting with conditions of supervision, sentence reviews assess whether the length of the sentence should be shortened altogether.
- If the court of jurisdiction agrees that there is good cause for an individual's length of sentence to be changed, the court may modify the punishment by shortening or effectively ending the sentence.

# Recommendations at a Glance

## RESENTENCING

### **AUTOMATIC PROCESS**

Government agencies identify eligible cases and initiate their review.

### **BROAD ELIGIBILITY SCHEME**

All cases involving cannabis, not just now-legal offenses, are included for varying levels of relief.

### **PRESUMPTION FOR RELEASE**

Downward modifications, to time served or reduced terms in appropriate cases, are presumed.

### **CLEAR GUIDANCE**

Guidance for judicial decisions is clear, and influence from other stakeholders on those decisions is limited.

### **ENFORCABLE TIMELINES**

Deadlines for the review, decision, and potential release are enforced.

### **OVERSIGHT & REPORTING**

The process is monitored for compliance, with transparent data reporting to ensure intended impact.

## RECORD CLEARANCE

### **AUTOMATIC PROCESS**

Government agencies identify eligible records and clear them, with no action or fees from the record holder.

### **BROAD ELIGIBILITY SCHEME**

Criteria is clearly defined, retroactively applied, and has broad impact on cannabis records.

### **NO WAITING PERIOD**

The process begins immediately upon the state's identification of the eligible records.

### **NO DISCRETIONARY REVIEW**

The discretionary review of individual eligible records is limited to maximize the impact of automation.

### **OVERSIGHT & NOTIFICATION**

The process is monitored for compliance, with transparent data reporting to ensure intended impact. Public advocacy campaigns ensure affected individuals are aware they received relief.

# Resentencing Recommendations

- Process
- Eligibility
- Oversight





## Process

# Resentencing Recommendations

### Policy Goal

Sentence reviews are provided to all individuals serving periods of incarceration or community supervision related to cannabis. The process is initiated by the state, not the individual who is incarcerated or under supervision.

### Policy Gap

Hawaii does not have a comprehensive resentencing process. There are very few resentencing options for an individual, outside of a court modifying conditions of probation on a case by case basis<sup>1</sup> or an individual going through the state's appeals process.<sup>2</sup> These resentencing options rely on the individual identifying themselves as being eligible to have their sentence reconsidered. This limited structure will be insufficient in providing sentence reconsideration for individuals serving sentences for behavior that may cease to be criminalized: such a process necessitates initiation by the state, rather than the petitioner.

### Policy Recommendation

Establish a state-initiated process that charges appropriate government agencies with identifying eligible individuals and initiating the resentencing process. Individuals serving sentences involving cannabis should be automatically scheduled for hearings in front of the court of appropriate jurisdiction for reconsideration of their sentence. Create a petition process to allow individuals not identified by the state-initiated process to petition the court to determine whether their cannabis-related case is eligible for resentencing.

1. HRS § 706-625

2. HRS § 641-11 – 641-18



## Process

# Resentencing Recommendations

### Policy Goal

Fair sentence reviews are provided for eligible individuals and deliberated over with limited discretion from stakeholders other than the judge (e.g. prosecutors, victims).

### Policy Gap

Although Hawaii does not have a robust resentencing process, its courts do have the power to modify conditions of probation. However, the court process outlined in statute for modifying probation conditions involves a high degree of influence from multiple stakeholders (i.e. prosecutor and probation officer).<sup>1</sup> A probation officer and the prosecuting attorney have the ability to appear at a hearing, where the court is considering the modification of an individual's conditions of probation, and submit evidence in opposition to any reduction to a person's sentence of probation.<sup>2</sup>

### Policy Recommendation

Establish clear judicial guidance for cannabis sentence reviews with narrowly-rebuttable presumptions of relief. Non-judicial stakeholder discretion should be limited in affecting review decisions, unless an individual is statutorily ineligible for relief.

1. HRS § 706-625  
2. Ibid.



## Eligibility

# Resentencing Recommendations

### Policy Goal

All individuals who are serving cannabis-related sentences receive sentence review hearings.

### Policy Gap

Hawaii does not have a comprehensive resentencing process; therefore a new structure must be established in statute upon legalization.

### Policy Recommendation

Establish a broad eligibility scheme for cannabis resentencing, encompassing all individuals serving terms related to cannabis. Use a tiered scheme based on the severity of the conviction, previous offenses, and whether the conviction was part of a cannabis-related enhancement. Individuals serving sentences solely for a cannabis conviction should be prioritized for sentence reviews, with a strong presumption for downward modification. Individuals serving sentences for a cannabis conviction as well as another type of conviction, or sentences that were enhanced due to a prior cannabis conviction, should also receive consideration for some level of relief.



## Oversight

# Resentencing Recommendations

### Policy Goal

Eligible individuals receive resentencing hearings and decisions in a timely manner.

### Policy Gap

For the narrow resentencing options that do exist in Hawaiian law, there is little to no guidance in statute related to the process and timing within which the court and other actors must act.<sup>1</sup> For example, the process for modifying probation operates on a case by case basis, and the timing of that process is left completely up to the discretion of the court.<sup>2</sup>

### Policy Recommendation

Establish enforceable timelines for each stage of the resentencing process. This should include identifying and notifying eligible candidates; providing counsel, when appropriate; scheduling hearings; issuing decisions; and facilitating approved releases.

1. HRS § 706-625  
2. Ibid.





## Oversight

# Resentencing Recommendations

### Policy Goal

The resentencing process is transparently monitored, to ensure that individuals with eligible cannabis-related sentences receive reconsideration of their terms in a timely manner and that the intended relief is delivered.

### Policy Gap

The narrow resentencing options that do exist in Hawaii have little to no oversight, at least within statute (note: court rules may provide additional guidance, but were not reviewed for purposes of this document).<sup>1</sup> An individual seeking resentencing is beholden to the court of appropriate jurisdiction, which has ultimate discretion in deciding whether to hear a case and modify the sentence, and it is unclear whether the court's decisions are monitored in a transparent way.<sup>2</sup>

### Policy Recommendation

Establish new transparency requirements that allow citizens to monitor the state's progress towards implementation. For example, vest oversight authority with an existing agency (or independent entity) to monitor the cannabis resentencing procedures and outcomes, with required reporting to the legislature and public. Or mandate that, in instances where the court of appropriate jurisdiction denies a motion for resentencing, that court must file their reason for denial as a part of the court record, and that information must be reported regularly to the legislature and public.

1. HRS § 706-625

2. Ibid.

# Record Clearance Recommendations

- Process
- Eligibility
- Oversight & Notification





## Process

# Record Clearance Recommendations

### Policy Goal

An automatic record clearance process for eligible cannabis records, that is initiated by the state rather than by the individual with the record.

### Policy Gap

Hawaii's existing record clearance process is petition-based, meaning the burden is on the individual with the record to request relief. It involves a case-by-case approach that can bog down both the individual and the court system with bureaucratic red tape and paperwork. Even individuals with a criminal record for a non-conviction (e.g., an arrest that did not result in a criminal charge, or a dismissal) are required to file paperwork with the Attorney General's Office to request their record be cleared!

### Policy Recommendation

Establish an automatic record clearance process that shifts the responsibility away from the individual and is instead initiated by the state. Task the appropriate government agencies with performing each component of the automatic record clearance process. For example, 1) the state's criminal record repository queries its database to determine the universe of eligible cannabis criminal records; 2) the Hawaii Department of Public Safety verifies the eligibility of each record identified by the criminal record repository; 3) the Department of Public Safety transmits the list of verified records to the Administrative Office of the Courts to ensure each eligible criminal record is distributed to the appropriate court of jurisdiction; 4) each appropriate court of jurisdiction grants a motion for expungement for all the verified records in one mass order.



## Process

# Record Clearance Recommendations

### Policy Goal

An automatic record clearance process with broad eligibility for cannabis records, that is retroactively applied and clearly defined.

### Policy Gap

At least two different record clearing mechanisms for individuals with first-time drug offenses currently exist. The distinguishing factor between these two mechanisms is whether the individual was sentenced before<sup>1</sup> or after 2004.<sup>2</sup> While eligibility criteria for each of these mechanisms differ, both statutes include language that bars an individual from obtaining criminal record clearance from both of these mechanisms. This effectively limits an individual to a single instance of criminal record clearance, regardless of when the offense was committed.

### Policy Recommendation

Create a single eligibility scheme for automatic record clearance that is inclusive of all non-conviction and conviction records with offense codes involving cannabis regardless of when the offense was committed. This should include offenses such as possession, paraphernalia, and distribution charges. Establishing broad, clearly defined eligibility requirements for cannabis records is the foundational step in creating a state-initiated record clearance process.

1. HRS § 706-622.8  
2. HRS § 706-622.5



## Process

# Record Clearance Recommendations

### Policy Goal

The process to clear an eligible cannabis criminal record begins immediately upon the state's identification of the record.

### Policy Gap

There are numerous statutes that have mandated waiting periods for individuals before they can apply to receive criminal record relief. When coupled with legalization, record clearance for cannabis offenses is necessarily different from general criminal record clearance efforts, the latter of which provide record clearance for offenses that remain illegal. Through legalization, the state will remove from or downgrade cannabis offenses in its criminal code. Thus, individuals with cannabis criminal records should not have to meet additional thresholds for eligibility, other than having an eligible record.

### Policy Recommendation

Do not include a waiting period for automatic cannabis record clearance eligibility upon legalization.



## Process

# Record Clearance Recommendations

### Policy Goal

All records and documentation related to a cannabis criminal record are completely shielded from public access and the offense is treated as though it never happened.

### Policy Gap

According to current Hawaii law, upon the issuance of an “expungement certificate,” an individual shall be treated as not having been arrested;<sup>1</sup> upon the issuance of an “expungement order,” all arrest records maintained by the state related to that specific arrest are placed in a confidential file.<sup>2</sup> Further, all individuals from whom an expungement order has been granted may also request that the court of appropriate jurisdiction seal all judiciary files.<sup>3</sup> These mechanisms are currently separate and distinct from each other. This means an individual may have their conviction information removed from the state criminal record repository (the “expungement certificate”), but the record could still be retained and made available by the arresting agency (the “expungement order”) and/or the courts (sealing).

### Policy Recommendation

For cannabis criminal records, adopt a record clearance process that has the effect of combining the relief granted by an expungement certificate, expungement order, and sealing into one mechanism.

1. HRS § 831-3.2(b)

2. HRS § 831-3.2(c)

3. HRS § 831-3.2(f)



## Eligibility

# Record Clearance Recommendations

### Policy Goal

Potential criteria for ineligibility should be limited, discrete, and terminal. In instances where information related to the cannabis criminal record is missing or otherwise not available, the state should presume the record is eligible.

### Policy Gap

Under current Hawaii law there are various ways an individual may potentially qualify for criminal record clearance with varying types of eligibility criteria. For instance, in order for an individual to have their record expunged and sealed, they must apply to the court of appropriate jurisdiction, which is in turn responsible for making a “good faith” effort to seal the individual’s “applicable files and information within a reasonable time.”<sup>1</sup> There are, however, no parameters defined in statute for what cases are eligible to be processed, what may make cases ineligible, nor what is an acceptable turnaround time. Further, a requirement of eligibility for individuals with criminal records for first-time property offenses stipulates that the individual may not have previously been convicted of a felony offense in “this or another jurisdiction.”<sup>2</sup> These types of open-ended criteria, however well-meaning, can present significant challenges to automation, because there are no time-bound limits that compel a state agency to make an actionable decision on a request for criminal record clearance. Similarly, missing information related to a cannabis criminal record may result in an indefinite suspension of consideration, because the criminal record lacks information sufficient to determine eligibility. These scenarios will result in a break in automation, because a state agency may get stuck indefinitely searching other jurisdictions in order to determine if the individual has been previously convicted of a felony offense, or trying to determine the weight/amount of cannabis that led to an arrest.

### Policy Recommendation

Implement clear guardrails that limit the ability of courts, prosecutors, or other state actors involved in the record clearance process to object to record clearance only on the grounds that the record is statutorily ineligible. For example, a criminal record is deemed ineligible for automatic record clearance only if the individual is found to be currently incarcerated. Where information related to the cannabis criminal record is indeterminate, the state should presume eligibility for that record. For instance, if an individual’s criminal record for cannabis possession does not contain the specific weight or amount of cannabis associated with that charge, the state should presume the record is eligible for criminal record clearance.

1. HRS § 831-3.2(f)  
2. HRS § 706-622.9



## Eligibility

# Record Clearance Recommendations

### Policy Goal

No unnecessary hurdles to cannabis record clearance, such as statutory limits on numbers of eligible records, or required fees.

### Policy Gap

Under current Hawaiian law, there are several ways an individual may be needlessly deemed ineligible to have their criminal record cleared. For example, individuals convicted of a first- or second-time offense for possession or use of drug paraphernalia may petition to have their criminal record for that offense expunged.<sup>1</sup> However, that same statute also contains a provision that stipulates individuals who have been sentenced to probation are only eligible for an expungement for their first offense, thereby rendering additional offenses ineligible for record relief.<sup>2</sup>

### Policy Recommendation

Codify that individuals with cannabis convictions remain eligible for automatic record clearance regardless of whether or not they have been granted a prior expungement for a different offense. An individual should be entitled to a record relief mechanism in light of legalization, and cannabis offenses eligible for automatic record clearance should not count against the statutory limit for obtaining record clearance.

Fees like the \$10 non-refundable administrative fee<sup>3</sup> for an expungement petition should be waived for all individuals with cannabis convictions to ensure access to relief is not cost-prohibitive.

1. HRS §706-622.5

2. HRS §706-622.5(4)

3. <http://ag.hawaii.gov/hcjdc/expungement-frequently-asked-questions/#notqualify>





## Oversight and Notification

# Record Clearance Recommendations

### Policy Goal

The automatic record clearance process for qualifying cannabis offenses is implemented with fidelity and in accordance with the law (i.e., deadlines are met, agencies complete their responsibilities, appropriate individuals receive relief).

### Policy Gap

There is nothing in Hawaii statute that requires reporting or data collection on the amount of petitions filed for clearance (expungement certificate, expungement order, or sealing), or on the ultimate outcomes of those petitions. There appears to be no agency currently responsible for monitoring the petition-based record clearance process and ensuring it has its intended impact.

### Policy Recommendation

Include a provision that requires the state's lead actor in the record clearance process to issue a report on a regular basis (yearly, quarterly, etc.) on key metrics related to the fulfillment of automatic record clearance for qualifying cannabis offenses. In shifting the process of record clearance away from the individual to the agencies that hold the criminal record, the state should establish new transparency requirements that allow citizens to monitor the state's progress towards implementation.



## Oversight and Notification

# Record Clearance Recommendations

### Policy Goal

Individuals who receive automatic record clearance have awareness that their cannabis record has been cleared, so that they may respond accordingly when questioned about their criminal record history (e.g., on job or housing applications).

### Policy Gap

Since Hawaii's existing record clearance process is petition-based, the outcome of each petition is naturally known to the petitioner at the conclusion of the court process. Creating an automatic record clearance process removes the petitioner, thereby necessitating a notification process to ensure that the record holder is aware they have received relief.

### Policy Recommendation

Mandate and adequately fund a government-sponsored public advocacy campaign to ensure that all individuals who received a relief are aware that their cannabis-related offense has been removed from their criminal record.

# Thank You



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# **PANACEA OR PIPE DREAM: DOES PORTUGAL'S DRUG DECRIMINALIZATION POLICY TRANSLATE FOR HAWAII?**

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Report No. 1, 2017

Legislative Reference Bureau  
State Capitol  
Honolulu, Hawaii  
<http://lrbhawaii.org>

This report has been cataloged as follows:

Kanoho, Paul + Brannon, Johnny + Prellberg, Matthew + Baker, Edwin L.

Panacea or pipe dream: does Portugal's drug decriminalization policy translate for Hawaii?  
Honolulu, HI: Legislative Reference Bureau, January 2017.

1. Drug legalization – Portugal. 2. Drug legalization – Hawaii.  
KFH421.5 L35 A25 17-1

## **FOREWORD**

This report was prepared in response to House Concurrent Resolution No. 127, H.D. 1, S.D. 1 (2016), which requested the Legislative Reference Bureau to analyze the potential impact on state government of decriminalizing certain offenses regarding the illegal possession of drugs.

The Bureau requested information from federal, state, county, and private entities and individuals to complete this study. The Bureau extends its appreciation to all those that generously provided information and assistance in the preparation of this report.

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January 2017

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# EXECUTIVE SUMMARY

## Introduction

The Legislative Reference Bureau (Bureau) prepared this report in response to House Concurrent Resolution No. 127, H.D. 1, S.D. 1 (2016) (hereinafter HCR No. 127), which requested the Bureau to conduct a study on the potential impact on state government of decriminalizing the illegal possession of drugs for personal use in Hawaii. More specifically, HCR No. 127 requested that the study include:

- (1) A survey of all existing criminal drug offenses in Hawaii that are class C felonies or lower offenses and pertain to the illegal possession of a harmful drug, detrimental drug, marijuana, or marijuana concentrate, as defined in section 712-1240, Hawaii Revised Statutes;
- (2) A review of the current national drug policy of Portugal pertaining to the illegal possession of drugs for personal use, with a focus on the use of the policy as a potential model for the decriminalization of certain or all of the offenses identified under paragraph (1); and
- (3) The potential impact on administrative and judicial systems of state government of decriminalizing certain or all of the offenses identified under paragraph (1), such that the conduct constituting an offense would constitute an administrative or civil violation rather than a criminal offense.

## Decriminalization, Depenalization, Legalization, and the Focus of this Report

In preparing this report, our purpose was to address the Legislature's request that we focus on drug decriminalization's potential impact on state government in Hawaii, not the broader topic of drug policy, law, or enforcement. Accordingly, we did not explore other topics, such as arrest and incarceration levels for drug offenses in other states, racial disparities in enforcement, the ability of convicted persons to find employment, or drug legalization.

We note that decriminalizing illegal possession of drugs for personal use would entail the removal of all criminal penalties for such possession. However, administrative or civil penalties against offenders would remain in place, and the distribution of illicit drugs would still be a criminal offense. In contrast, legalization of the possession of drugs for personal use would involve the removal of all penalties for such possession, and would likely entail regulation of the legal production, sale, and use of drugs. Further, decriminalization is distinguishable from depenalization. While depenalization of the illegal possession of drugs for personal use would remove incarceration as a possible penalty for such possession, depenalization would still treat such offenses as criminal offenses, which would be reflected on an offender's criminal record.

## The Portugal Experience

In our review of the current national drug policy of Portugal pertaining to the illegal possession of drugs for personal use, we must first note the historical impetus for that decriminalization. In 1999, authorities in Portugal approved a National Drug Strategy to fight against illicit drug use, largely in response to a rise in the use of heroin. The new national strategy proposed the decriminalization of the use and possession for use of drugs. Although statistical data suggest that few in Portugal were imprisoned at the time for illicit drug use or possession, the committee behind the new national strategy believed that drug users' contact with the judicial system and prison establishments, the creation of criminal records, and the social stigma attached to criminal offenses impeded the desired recovery and social reintegration of drug addicts.

However, it is important to emphasize that decriminalization was only part of the new national strategy, which included other components, such as prevention efforts, improvement in health care, the treatment of addicts, and additional funding for such efforts. The public health-focused strategy was consistent with the country's constitution, which guarantees all citizens the right to preventive, curative, and rehabilitative medical care. The strategy was also consistent with a 1979 law that established the National Health Service to provide free health care.

In 2000, Portugal passed its decriminalization law, Law No. 30/2000, which repealed existing criminal penalties against consuming, purchasing for consumption purposes, and possession for consumption purposes a ten-day supply of any drug among an exhaustive list of illicit drugs. The law did not specify what quantities of drugs would be considered ten-day supplies, but the application of a separate law establishes specific ten-day quantities for some, but not all, of these drugs. Those specific drugs and quantities include one gram of heroin; one gram of ecstasy; two grams of cocaine; twenty-five grams of marijuana; fifty grams of hashish; one-half gram of Delta-9-THC; and one gram of amphetamines.

Law No. 30/2000 referred to individuals who possess drugs in small quantities as "consumers," and not "offenders." The law also established new administrative tribunals called "dissuasion commissions" to take the place of courts in presiding over cases against alleged consumers. Each commission is composed of one expert in law and two other experts in medicine, psychology, social service work, or other allied professions.

When a consumer commits a drug offense, generally speaking, Portugal's law does not require the consumer to appear before a commission. In some cases, police may detain a consumer who cannot be identified until the commission disposes of the consumer's case. However, Portugal's law does not specifically authorize law enforcement or the commissions to order any consumer to appear before the commissions.

Commissions do not always impose penalties. Commissions are required to suspend proceedings against addicted consumers for first-time violations if they agree to undergo treatment. Commissions also have broad discretion to suspend proceedings against other addicted consumers



who agree to treatment. When penalties are appropriate, such penalties may include verbal warnings, suspensions of professional licenses, prohibitions on offenders from meeting with certain persons, restrictions on travel, and other non-criminal sanctions. However, addicted consumers may not be fined. In contrast, depending on the drug possessed, non-addicted consumers face possible fines from the equivalent of about \$35 to a maximum equivalent to Portugal's national minimum monthly wage.

## Evaluating the Portugal Experience

HCR No. 127 relied, in large part, on the findings of a 2009 report, which was published by the Cato Institute (hereafter “the Cato report”), that drug decriminalization in Portugal resulted in:

- (1) No adverse effect on drug usage rates, which are among the lowest in the European Union, and particularly when compared with states with stringent criminalization regimes;
- (2) A decrease in lifetime prevalence rates for drug use among various age groups, particularly for youths in the critical age groups of thirteen to fifteen year olds and sixteen to eighteen year olds;
- (3) A dramatic decrease in drug-related deaths, including from sexually transmitted diseases; and
- (4) Steady declines in drug trafficking convictions.

Our research and analysis led us to conclude that the situation in Portugal is not so straightforward.

While the level of illicit drug use in Portugal is generally lower than in other nations in Europe, *problem* drug use – that is, injecting drug use or long duration of use or regular use of opioids, cocaine, or amphetamines – is worse than or at least as bad as in other European nations. Available data do not conclusively prove, or disprove, that there has been no adverse effect on drug usage rates following the decriminalization of drug possession and use in Portugal. Notably, national prevalence statistics regarding drug use in Portugal before the enactment of Law No. 30/2000 are not available. Further, one source we reviewed questioned any attempt to attribute changes in patterns of drug use in Portugal solely or primarily to the country's decriminalization scheme, and asserted that there is no way to directly link national drug policies to prevalence of drug use. Factors other than laws that could affect drug use rates include the economy, religion, and culture. Notably, the Cato report does not appear to clearly recognize that Portugal's decriminalization of illicit drugs was only one component in Portugal's larger National Drug Strategy, which included prevention, treatment, and related funding. It is unclear what impact Portugal's Law No. 30/2000 would have had if the country had not attempted to implement the broader drug strategy.

It also appears that the Cato report may have been unduly selective in the use of data. The report focused on decreases in drug use among some age groups, while ignoring increases in other age groups. Its use of lifetime prevalence rates (which measure whether individuals have ever used an illicit drug at any point in their lifetimes) may be less reliable in examining drug trends than statistics that examine individuals' use of drugs within shorter amounts of time. Available data do not clearly establish that Law No. 30/2000 led to a dramatic decrease in drug-related deaths. Statistics that purportedly show drug-related deaths may be based on incorrect assumptions that the presence of illicit drugs in a deceased person's body indicate that drug use actually caused that person's death. While drug trafficking convictions have declined in Portugal, such a decline may not have been the result of a decrease in actual drug trafficking, since arrests for trafficking have not declined. One source we reviewed suggested that, because few people were incarcerated for mere drug use or possession before Law No. 30/2000, courts simply extended similar leniency to drug users whose behavior remained criminal even after the passage of that law. The source also suggested that drug traffickers may have adjusted the transportation of their supplies so that quantities of drugs in their possession at any given time would not exceed a ten-day supply.

HCR No. 127 also noted the Cato report's assertion that money saved on drug enforcement allowed for increased resources for drug treatment programs. However, the Cato report does not provide any information that demonstrates that resources were redirected for such treatment, nor does it specify the costs of implementing Portugal's National Drug Strategy (such as the costs of administering dissuasion commissions).

### **Portugal's Policy v. Hawaii's Legal Framework**

Portugal's national government can implement laws that apply throughout its jurisdiction. In contrast, Hawaii is one state among many in the United States of America. Both federal law and Hawaii law prohibit the possession of illicit drugs for personal use. Even if Hawaii were to repeal its laws regarding such possession, residents who possess illicit drugs might still face prosecution under federal law. While the use of marijuana is legal for medical purposes under Hawaii state law (as well as under the laws of twenty-seven other states and the District of Columbia), such use remains illegal under federal law. The current lack of federal prosecution of medical marijuana users in Hawaii is solely the result of the discretion exercised by the United States Department of Justice to prioritize its caseload. Following the installation of the new presidential administration in 2017, it is possible that the Department of Justice will adjust its priorities.

Portugal's law decriminalized the possession of all illicit drugs for personal consumption. In contrast, the Legislature's request to the Bureau in HCR No. 127, did not include exploring the possibility of decriminalizing "dangerous drugs," which include "hard drugs" such as heroin, cocaine, and methamphetamine. Instead, the request was limited to surveying the existing criminal drug offenses in Hawaii that are class C felony or lower offenses and pertain to the illegal

possession of a harmful drug, detrimental drug, marijuana, or marijuana concentrate, as defined in section 712-1240, Hawaii Revised Statutes. These relevant drug offenses are:

- Section 712-1246, Hawaii Revised Statutes (HRS), Promoting a harmful drug in the third degree, a class C felony that carries a maximum prison term of five years and a maximum fine of \$10,000;
- Section 712-1246.5, HRS, Promoting a harmful drug in the third degree, a misdemeanor that carries a maximum jail term of one year and a maximum fine of \$2,000;
- Section 712-1247, HRS, Promoting a detrimental drug in the first degree, a class C felony that carries a maximum prison term of five years and a maximum fine of \$10,000;
- Section 712-1248, HRS, Promoting a detrimental drug in the second degree, a misdemeanor that carries a maximum jail term of one year and a maximum fine of \$2,000; and
- Section 712-1249, HRS, Promoting a detrimental drug in the third degree, a petty misdemeanor that carries a maximum jail term of one year and a maximum fine of \$1,000.

Notably, while Portugal's constitution guarantees citizens the right to medical care, the constitutions of the United States and Hawaii do not provide a similar guarantee. Thus, legally speaking, treatment for drug use is a relatively lower priority in Hawaii than it is in Portugal where it was a significant component of the country's overall strategy. Nevertheless, treatment for drug use is already a possible alternative to incarceration in Hawaii for some offenders, including offenders whose crime is the possession of illicit drugs. Under certain circumstances, offenders may be placed on conditional discharge or probation, which requires the offender to comply with conditions, including conditions to receive drug treatment, in order to avoid incarceration. In some cases, an offender may even have his or her record expunged. Another alternative is provided in drug court programs, which involve intensive drug treatment and regular monitoring through the judicial system. However, due to the costly nature of treatment efforts employed in drug court programs, those programs only admit a limited number of offenders at a time. Further, individuals who have committed certain felonies in the past are precluded by law from participating in drug court programs.

### **Current Baseline Information is Insufficient to Estimate the Potential Impacts of Decriminalization**

In our attempt to estimate the potential impact on administrative and judicial systems of state government of decriminalizing relevant drug offenses, we faced a barrier in the form of a lack of baseline information. While we reviewed multiple published reports from several governmental agencies and corresponded extensively with those agencies, we were not able to

## EXECUTIVE SUMMARY

obtain a complete picture of the effects that drug use and drug laws currently have on administrative and judicial systems of state government. This limitation affects our ability to analyze how changes in those drug laws might affect those systems of state government in the future.

We also sought information on drug use trends, treatment, and treatment expenditures. However, we faced challenges in collecting and comparing data regarding drug use in Portugal, the United States, and Hawaii. Challenges included the different age groups researched and surveyed in each jurisdiction, a lack of annual reporting on drug use in Portugal, and incongruent reporting on use estimates of specific drugs. According to the Hawaii High Intensity Drug Trafficking Area Investigative Support Center, the drugs that pose the greatest threat to Hawaii are methamphetamine and marijuana. Generally speaking, it appears that Hawaii and the United States have higher instances of any illicit drug use and marijuana use than does Portugal, although Portugal does have a significant number of people who have used marijuana. However, we were unable to accurately compare or quantify the drug use of the two drugs that pose the greatest threat in each respective jurisdiction, heroin (in Portugal) and methamphetamine (in Hawaii), as we could not locate annual, Hawaii-specific use prevalence estimates for those drugs.

In Hawaii, various state and county agencies spend funds on drug treatment. The primary source of public funds is the Alcohol and Drug Abuse Division (ADAD) of the Department of Health. That agency's statistics show that admissions for treatment for methamphetamine use comprised more than half of all ADAD-funded admissions in fiscal year 2015-2016. The average per-person expenditure for ADAD-funded treatment for all substances was about \$4,000 per year, with some variation, from 2011-2012 to 2015-2016. However, treatment expenditures vary based on factors such as drugs for which treatment is provided and the needs of the individuals treated. For example, we calculated, based on available data, that during fiscal year 2014-2015, the Judiciary was prepared to spend \$1,306.26 on each person that it referred to treatment to a Judiciary-contracted substance-use treatment provider. Based on our calculations, treatment expenditures for Medicaid clients of the Department of Human Services (DHS) have varied from \$63 to \$494 per person, depending on the year in which the individual was treated as well as the substance for which the individual was treated. On the other hand, treatment expenditures for Social Services Division clients of DHS appear to have been as high as \$29,912 per person in some years. It also appears that the Corrections Division, Department of Public Safety expended an average of \$3,959 per inmate to treat 994 inmates in 2015-2016.

The Bureau cannot conclusively determine whether the amount of available funding is adequate for current treatment needs. Further, given the variation in treatment expenditures, we cannot determine how demand for treatment might increase after decriminalization, and we cannot predict whether the Legislature would need to increase funding for treatment or by how much, given the shortage of qualified treatment personnel. We also lack sufficient information to predict what specific impact decriminalization might have on the need to fund drug prevention efforts.

We sought information on the efforts to enforce the relevant drug offenses, and expenditures for those efforts. Available statistics from police departments and the Hawaii Criminal Justice Data Center (HCJDC) suggest that few individuals are arrested and face charges

in court *solely* for the commission of a relevant offense within the scope of HCR No. 127. For example, according to HCJDC data, only three hundred seventy-nine arrests were made *solely* for a relevant offense in 2015. Court cases were only filed against two hundred nine individuals, and only one hundred eight of those individuals were convicted. Of those convicted, only sixty-nine were incarcerated. However, we found a significant problem with this data: arrest statistics from HCJDC showed consistently different numbers than arrest statistics from county police, and we were unable to determine from those agencies the reason for the discrepancies.

Further, it is difficult to determine what are the current expenditures relating to enforcement of the relevant offenses within the scope of HCR No. 127. Police departments and the Judiciary could not isolate expenditures related to drug offenses from expenditures related to other offenses. We also received no statistical information from county prosecutors about their enforcement efforts. One county prosecutor's office did not respond at all to our requests for information. Another prosecutor's office responded that it did not have the resources to provide information, given the limitations of its case management system. The Office of the Public Defender, which defends most accused indigent criminal offenders, provided a similar response to our request for information about its defense efforts in drug possession cases.

As to incarceration expenditures, the Corrections Division, Department of Public Safety estimated that the State expended \$140 per day to house each incarcerated inmate during fiscal year 2015-2016. However, since it was unclear exactly how the Division arrived at this estimate, the estimate may not be reliable in helping to determine how much incarceration expenditures would be reduced as a result of any decriminalization scheme.

### **The Uncertainty Regarding the Legislature's Preferred Decriminalization Scheme Makes it Difficult to Estimate the Potential Impacts of Decriminalization**

Even if we had sufficient statistical data regarding the use and treatment of illicit drugs and the enforcement of drug possession offenses, our ability to estimate the potential impact on administrative and judicial systems of state government of decriminalizing relevant drug offenses is hindered by the lack of specificity regarding the scope of any decriminalization scheme to be implemented in Hawaii.

There are many factors to consider in designing a decriminalization scheme. One factor is the determination of what drugs to decriminalize and in what quantities. It is not clear whether the State would decriminalize the possession of broad range of illicit drugs for personal use, or just marijuana. As noted previously, current federal law prohibits possession of the illicit drugs to which the relevant drug offenses apply, and the removal of criminal penalties under state law would not change federal law. Some states have decriminalized the possession of small quantities of marijuana. However, if Hawaii were to follow suit, it is not clear whether the Legislature would want to incur the expense of establishing Portugal-style dissuasion commissions just for the purpose of processing cases involving a single drug. It is also unclear what civil penalties should be imposed on violators, and whether violators should still be subject to arrest and detention to

ensure that they appear before the tribunals presiding over their cases. Further, the need for a broader health-based drug strategy may vary depending upon the type of drugs the State decriminalizes. If the State decides not to decriminalize methamphetamine, currently Hawaii's greatest drug threat, because it is a dangerous drug, then the need for treatment might not be as urgent in the eyes of some policymakers.

## **Other Decriminalization Approaches**

In 2009, Mexico enacted a law to decriminalize the possession of small quantities of a wide range of illicit drugs. Unlike Portugal's decriminalization law, Mexico's law kept proceedings of decriminalized offenses within the court system. Mexico's law also allows alleged third-time offenders to be detained until released by the courts. Most notably, due to a lack of treatment efforts and treatment facilities, drug users are not receiving the medical help they need.

In the United States, laws have been enacted to decriminalize marijuana possession to some degree in nine states (Delaware, Illinois, Maryland, Minnesota, Mississippi, Nebraska, Ohio, Rhode Island, and Vermont), as well as depenalize such possession in four states (Connecticut, Missouri, New York, and North Carolina). Missouri's law took effect on January 1, 2017. The foregoing list does not include the eight states (Alaska, California, Colorado, Maine, Massachusetts, Nevada, Oregon, and Washington) that, along with the District of Columbia, have enacted laws to legalize the possession of marijuana to some degree. Among the states that have decriminalized or depenalized such possession, the maximum quantity of the drug that is decriminalized varies, as does the maximum fine for such possession. The most common maximum quantity is one ounce, while the most common maximum penalty is a \$100 fine.

While it does not appear that the decriminalization of small amounts of marijuana has led to significant increases of drug use in the United States, it is not clear if the same results would occur in the wake of the decriminalization of other illicit drugs, such as methamphetamine. To date, no other state has decriminalized other illicit drugs.

## **Our Recommendation**

In light of the limitations we faced in obtaining relevant statistical information from governmental agencies regarding drug use and the enforcement of drug laws, funding for improvements in the information systems of governmental agencies may be necessary for policymakers to obtain the data required to make informed decisions on decriminalization. Such improvements may assist in obtaining drug use and treatment data from the Alcohol and Drug Abuse Division of the Department of Health; the Department of Human Services; the Judiciary; and the various counties. Improvements may also be necessary to obtain more consistent and reliable information on enforcement efforts from the Hawaii Criminal Justice Data Center; the county police departments; county prosecutors; the Office of the Public Defender; the Judiciary; and the Department of Public Safety.

## **Factors to Consider for the Legislature's Preferred Decriminalization Scheme**

As noted above, the uncertainty regarding the Legislature's preferred decriminalization scheme makes it difficult to estimate the potential impacts of decriminalization. Therefore, in designing a decriminalization scheme, policymakers may wish to consider:

- (1) Whether there is a need to implement a broader health-based strategy to reduce drug use;
- (2) Which of the illicit drugs, and what quantities of those drugs, should be decriminalized;
- (3) Whether, and what, civil penalties should be established;
- (4) Whether administrative or judicial tribunals are better suited for proceedings to enforce decriminalized drug offenses; and
- (5) Whether violators would remain subject to arrest and detention.

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## **Chapter 1**

### **INTRODUCTION**

The Legislative Reference Bureau (Bureau) prepared this report as requested by the Legislature in House Concurrent Resolution No. 127, H.D. 1, S.D. 1 (2016) (hereinafter HCR No. 127).<sup>1</sup>

### **GENESIS OF THIS REPORT**

The Legislature's request to the Bureau rests on a number of assertions made in HCR No. 127 regarding the scope, nature, and severity of the drug problem in the United States; the perceived trend by government agencies, including the courts, toward addressing the illicit use of drugs as a public health problem, rather than a law enforcement one; a change by federal, state, and local governments in the legal approach to marijuana, including decriminalization, legalization, medical use, and related enforcement priorities; and the decision by Portugal in 2000 to address its drug problem by decriminalizing the use and possession for use of illicit drugs in favor of an administrative scheme that relies on assessment, treatment, and non-criminal sanctions to deter users from violating the prohibition on drugs.

In particular, the HCR No. 127 relies on a white paper published in 2009 by the Cato Institute, which championed Portugal's drug decriminalization scheme as a "resounding success."<sup>2</sup> According to HCR No. 127, the Cato Institute's white paper found that drug decriminalization in Portugal resulted in:

- No adverse effect on drug usage rates;
- A decrease in lifetime prevalence rates for drug use among various age groups;
- A dramatic decrease in drug-related deaths;
- Steady declines in drug trafficking convictions; and
- Monetary savings on drug enforcement efforts, which in turn allowed for increased resources for drug treatment programs.

Based on the foregoing assertions, HCR No. 127 presented a hypothesis that Portugal's drug decriminalization system provides a potential model for more effectively managing drug-related problems in the United States. Pursuant to the Legislature's request, the Bureau sought to test this hypothesis with factual and legal research and analysis of the information generated by that research.

## **THE SCOPE OF THIS REPORT**

By its adoption of HCR No. 127, the Legislature formally requested the Bureau to conduct a study on the potential impact on state government of decriminalizing the illegal possession of drugs for personal use in Hawaii. More specifically, HCR No. 127 requested the study to include:

- (1) A survey of all existing criminal drug offenses in Hawaii that are class C felonies or lower offenses and pertain to the illegal possession of a harmful drug, detrimental drug, marijuana, or marijuana concentrate, as defined in section 712-1240, Hawaii Revised Statutes;
- (2) A review of the current national drug policy of Portugal pertaining to the illegal possession of drugs for personal use, with a focus on the use of the policy as a potential model for the decriminalization of certain or all of the offenses identified under paragraph (1); and
- (3) The potential impact on administrative and judicial systems of state government of decriminalizing certain or all of the offenses identified under paragraph (1), such that the conduct constituting an offense would constitute an administrative or civil violation rather than a criminal offense.

HCR No. 127 also requested the Bureau to submit a written report of its findings and recommendations, including any proposed legislation, to the Legislature.

## **OUR APPROACH TO THIS REPORT**

Following the Legislature's adoption of HCR No. 127, the Bureau began its study by determining the specific scope of the Legislature's request. We then read and considered the written testimony submitted to the standing committees that heard HCR No. 127, and the sources cited both by HCR No. 127 and the testimony, especially the Cato Institute's 2009 white paper. We did not automatically assume the truth of the assertions made by the HCR No. 127, the testimony, or the source materials. Instead, we conducted independent research for purpose of conducting an impartial study.

Our research examined the Hawaii Revised Statutes and information from books, peer-reviewed articles, government publications (including those from Portugal, when available in English) and other publicly available resources. Our goal was to obtain information about the legal frameworks of Portugal and Hawaii, especially as it related to drug possession offenses; drug use and treatment statistics in Portugal and Hawaii; the enforcement of drug laws in Portugal and Hawaii; and decriminalization efforts in other jurisdictions. We also submitted written requests to multiple state, county, and federal agencies to obtain factual information regarding such matters as drug arrests, prosecutions, court dispositions, treatment, and incarcerations.<sup>3</sup> Not all of the agencies responded to our requests, and some agencies that did respond could not provide information, or could not provide everything we requested. The Bureau was still receiving

information even as 2016 drew to a close. While we did our best to capture that information in this report, the six-month time frame in which we were required to prepare the report did not allow for the depth of analysis we would have preferred.

## ORGANIZATION OF THE REPORT

The remaining chapters of this report provide the following:

- (1) Chapter 2 defines decriminalization and articulates the scope of the report;
- (2) Chapter 3 explores the historical impetus behind Portugal’s decriminalization effort; Portugal’s broader health-based strategy to fight drug use; the empirical limitations on declaring Portugal’s drug decriminalization effort a “resounding success;” and why drug decriminalization *in the absence of a broader health-based strategy* might not necessarily succeed in the terms described in HCR No. 127;
- (3) Chapter 4 describes the legal framework within which decriminalization might be undertaken in Hawaii, and how that framework may limit Hawaii’s options regarding decriminalization; a survey of the drug offenses in Hawaii that fall within the scope of HCR No. 127; and existing alternatives to incarceration that may presently be imposed in Hawaii;
- (4) Chapter 5 explains how limitations on the collection and extraction of data and uncertainty regarding what specific decriminalization scheme might ultimately be considered prevented us from providing an empirically-based estimate of the potential impact that decriminalizing the illegal possession of drugs for personal use might have on the administrative and judicial systems of state government in Hawaii;
- (5) Chapter 6 explores how some countries impose non-criminal penalties for an array of illicit drugs, as well as how other states in the United States have removed criminal penalties for the possession of marijuana; and
- (6) Chapter 7 discusses salient points regarding factual information that we found; analyses based on that information; one recommendation regarding data collection; and factors that policymakers in Hawaii may wish to consider in constructing a drug decriminalization scheme.

## ENDNOTES

1. House Concurrent Resolution No. 127 attached as Appendix A.

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2. GLENN GREENWALD, CATO INSTITUTE, DRUG DECRIMINALIZATION IN PORTUGAL: LESSONS FOR CREATING FAIR AND SUCCESSFUL DRUG POLICIES 1 (2009), [http://object.cato.org/sites/cato.org/files/pubs/pdf/greenwald\\_whitepaper.pdf](http://object.cato.org/sites/cato.org/files/pubs/pdf/greenwald_whitepaper.pdf).
3. A list of agencies from which the Bureau sought information is attached as Appendix F.

## Chapter 2

### **DECRIMINALIZATION, DEPENALIZATION, LEGALIZATION, AND THE FOCUS OF THIS REPORT**

Drug laws and their enforcement have been the subject of much discussion, debate, and activism in the United States and around the world. In Hawaii, House Concurrent Resolution No. 127 H.D. 1 S.D. 1 (2016) (hereinafter HCR No. 127) requested, in part, that the Legislative Reference Bureau analyze “the potential impact on administrative and judicial systems of state government of decriminalizing” certain offenses involving possession of drugs for personal use in Hawaii. This request not only defines the scope of what is *included* in this report, but also what is *excluded* from it. While policymaking regarding drug possession and use often encompasses issues such as arrest and incarceration levels for drug offenses in other jurisdictions, racial disparities in enforcement, the ability of convicted persons to find employment, and even drug legalization, these issues are excluded from the focus of this report.

#### **DECRIMINALIZATION, DEPENALIZATION, AND LEGALIZATION DEFINED**

Clarity of terms is also necessary to understand the focus of this report. “Decriminalization” is not the same as “legalization,” and the two terms should not be confused or used interchangeably. As one observer has commented:

Portugal’s 2001 decriminalization law did not legalize drugs as is often loosely suggested. The law did not alter the criminal penalty prohibiting the production, distribution, and sale of drugs, nor did it permit and regulate use. Rather, Portugal *decriminalized* drug use, which, as defined by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), entailed the removal of all criminal penalties’ [sic] from acts relating to drug demand: acts of acquisition, possession, and consumption. Portugal’s reform thus changed the nature of the sanctions imposed for personal possession and consumption of drugs from criminal to administrative. To obtain drugs, however, the user must still depend on illicit markets. Legalization, in contrast to decriminalization, involves the enactment of laws that allow and provide for the state regulation of the production, sale, and use of drugs.<sup>1</sup>

Further, “decriminalization” of illicit drug possession or use is not necessarily synonymous with “depenalization.” A report published by EMCDDA proposed “tentative definitions” of these terms:

According to our convention [“decriminalization”] comprises removal of a conduct or activity from the sphere of criminal law. Prohibition remains the rule, but sanctions for use (and its preparatory acts) no longer fall within the framework of the criminal law (elimination of the notion of a criminal offence). This may be reflected either by the imposition of sanctions of a different kind (administrative sanctions without the establishment of a police record – even if certain administrative measures are included in

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the police record in some countries, such as France), or the abolition of all sanctions. Other (non-criminal) laws can then regulate the conduct or activity that has been [decriminalized.]

According to our convention [“depenalization”] means relaxation of the penal sanction provided for by law. In the case of drugs, and cannabis [also known as marijuana] in particular, [“denpenalization”] generally signifies the elimination of custodial penalties. Prohibition remains the rule, but imprisonment is no longer provided for, even if other penal sanctions may be retained (fines, establishment of a police record, or other penal sanctions).<sup>2</sup>

**THE BROADER DEBATE ON DRUG LAWS V. THE  
NARROWER FOCUS OF THIS REPORT**

Some of the debate surrounding drug laws has revolved around the question of drug legalization. For example, the Cato Institute<sup>3</sup> has asserted<sup>4</sup> (based on various estimates<sup>5</sup>) that if all states and the federal government were to *simultaneously* legalize all illicit drugs<sup>6</sup> – including trafficking in those drugs – and if those drugs were taxed at rates comparable to those imposed on alcohol, then governmental expenditures would decrease and tax revenues would increase, each by billions of dollars in the aggregate.<sup>7</sup> The Global Commission on Drug Policy, asserting that millions of people around the world use drugs without causing harm to others and that criminalizing people who use drugs has been ineffective and harmful,<sup>8</sup> has advocated the legalization of *some* drug offenses and called for the worldwide abolition of “all civil and criminal penalties” for the possession of drugs for personal use.<sup>9</sup> Some states in the United States, such as Colorado, have partially responded to calls for drug legalization by taking the narrower step of legalizing, to some extent, the possession and sale of marijuana, although the long-term effects of legalization are unclear.<sup>10</sup>

Human Rights Watch and the American Civil Liberties Union have raised awareness about related topics. These organizations have asserted that on a nationwide level, drug prohibitions: have led to mass arrests and incarcerations; are enforced in a racially disparate manner; cause financial hardship to defendants; harm defendants’ employment prospects; and make some convicted individuals ineligible for public assistance.<sup>11</sup> All of these issues may be valid subjects of discussion in the broader debate regarding drug laws. However, HCR No. 127 requested that the Bureau analyze “the potential impact on administrative and judicial systems of state government of decriminalizing” certain offenses involving possession of certain drugs for personal use in Hawaii, which is the focus of this report.

Therefore, this report does not explore the *legalization* of personal use of illicit drugs, much less the trafficking of them. Further, the report also does not attempt to evaluate how decriminalization would impact the operations of the State as a whole, or of the counties, nor can it properly explore the complex topic of what impact decriminalization would have on the lives of accused and convicted drug offenders.

## ENDNOTES

1. Hannah Laqueur, Comment, *Uses and Abuses of Drug Decriminalization in Portugal*, 40 LAW & SOC. INQUIRY 746, 747 (2015) (citations omitted).
2. EUROPEAN MONITORING CENTRE FOR DRUGS AND DRUG ADDICTION, ILLICIT DRUG USE IN THE EU: LEGISLATIVE APPROACHES 12 (2005), [http://www.emcdda.europa.eu/system/files/publications/367/TP\\_IllicitEN\\_64393.pdf](http://www.emcdda.europa.eu/system/files/publications/367/TP_IllicitEN_64393.pdf).
3. The Cato Institute regularly releases white papers that are intended to influence policy decisions, and generally espouses a libertarian political philosophy. See *infra* Chapter 3, note 77 and accompanying text.
4. JEFFREY A. MIRON & KATHERINE WALDOCK, CATO INSTITUTE, THE BUDGETARY IMPACT OF ENDING DRUG PROHIBITION 2 (2010), <https://object.cato.org/sites/cato.org/files/pubs/pdf/DrugProhibitionWP.pdf> (updating Jeffrey A. Miron, The Budgetary Implications of Drug Prohibition (Feb. 2010) (unpublished paper, Harvard University) (on file with author), [http://scholar.harvard.edu/files/miron/files/budget\\_2010\\_final\\_0.pdf](http://scholar.harvard.edu/files/miron/files/budget_2010_final_0.pdf)). This publication should not be confused with the Cato Institute’s 2009 publication referenced in HCR No. 127, which is GLENN GREENWALD, CATO INSTITUTE, DRUG DECRIMINALIZATION IN PORTUGAL: LESSONS FOR CREATING FAIR AND SUCCESSFUL DRUG POLICIES (2009), [http://object.cato.org/sites/cato.org/files/pubs/pdf/greenwald\\_whitepaper.pdf](http://object.cato.org/sites/cato.org/files/pubs/pdf/greenwald_whitepaper.pdf). For a discussion of the 2009 publication, see Chapter 3 of this report.
5. For example, Miron and Waldock state that their paper “estimates the percentage of state and local arrests for drug violations and multiplies this percentage by the state and local budget for police” and likewise “estimates the percentage of state and local incarcerations for drug violations and multiplies this percentage by the state and local budget for prisons.” MIRON & WALDOCK, *supra* note 4, at 2.
6. Miron and Waldock concede that such simultaneous legalization is “not currently on the table, nor is it likely to occur in the near future.” *Id.*
7. *Id.* at 1.
8. GLOBAL COMMISSION ON DRUG POLICY, ADVANCING DRUG POLICY REFORM: A NEW APPROACH TO DECRIMINALIZATION 29 (2016). <http://www.globalcommissionondrugs.org/wp-content/uploads/2016/11/GCDP-Report-2016-ENGLISH.pdf>.
9. *Id.* at 11.
10. 4 ROCKY MOUNTAIN HIGH INTENSITY DRUG TRAFFICKING AREA, THE LEGALIZATION OF MARIJUANA IN COLORADO: THE IMPACT 11 (2016), <http://www.rmhidta.org/html/2016%20FINAL%20Legalization%20of%20Marijuana%20in%20Colorado%20The%20Impact.pdf>.
11. HUMAN RIGHTS WATCH AND AMERICAN CIVIL LIBERTIES UNION, EVERY 25 SECONDS: THE HUMAN TOLL OF CRIMINALIZING DRUG USE IN THE UNITED STATES 2-12 (2016), [https://www.hrw.org/sites/default/files/report\\_pdf/usdrug1016\\_web.pdf](https://www.hrw.org/sites/default/files/report_pdf/usdrug1016_web.pdf).

## Chapter 3

### THE PORTUGAL EXPERIENCE

House Concurrent Resolution No. 127, H.D. 1, S.D. 1 (2016) (hereinafter HCR No. 127), contemplates using Portugal's Law No. 30/2000, which decriminalized the use or possession of small amounts of illicit drugs for personal use, as a potential model for Hawaii. Portugal's law, which has been the focus of much national and international attention, eliminated imprisonment as a penalty for such use and possession and replaced it with administrative fines and other penalties. An oft-cited look at Portugal's law is a white paper from the Cato Institute "Drug Decriminalization in Portugal: Lessons for Creating Fair and Successful Drug Policies."<sup>1</sup> The white paper recommended the decriminalization of illicit drugs elsewhere, based on its findings that decriminalization in Portugal (1) saved resources that would have otherwise been used to prosecute drug users and (2) either decreased or had a neutral impact on drug usage rates.<sup>2</sup>

However, we conducted our own review of Portugal's law, the context in which it was adopted, and the strategy of which it was a part. We also reviewed the Cato report and the analysis of it by agencies and scholars. As will be explained in this chapter, it is abundantly clear that decriminalization in Portugal did not take place in a vacuum. Rather, decriminalization was implemented in Portugal as a part of a broader strategy, which included prevention and treatment, among other elements, in that nation's effort to reduce illicit drug use. While there is disagreement as to whether and to what extent Portugal's strategy has been effective in this regard, the example of Portugal *cannot* support the assertions that decriminalization *alone* (1) has a neutral or positive impact on drug usage rates, (2) automatically reduces enforcement costs, and (3) automatically frees up funding for the treatment of drug users.

### PORTUGAL PRE-DECRIMINALIZATION

Portugal's geographic location on the southwestern border of Europe has made it a "gateway" of sorts for the trafficking of illicit drugs, such as cocaine from Brazil, heroin from Spain, and marijuana from Angola.<sup>3</sup> While the level of illicit drug use in Portugal is generally lower than in other European nations, *problem* drug use and drug-related harms are as bad as or worse than in other European nations.<sup>4</sup>

In 1926, Portugal enacted a law that prohibited drug trafficking, but did not address illicit drug consumption.<sup>5</sup> The possession and use of illicit drugs did not become a criminal offense in Portugal until 1970.<sup>6</sup> In 1974, the totalitarian regime that had ruled Portugal since 1926 fell<sup>7</sup> and, with liberation, came a new constitution in 1976.<sup>8</sup> Under its constitution, Portugal is a unitary national state,<sup>9</sup> unlike Hawaii, which is only one state within a federal system. Further, Portugal's constitution charges the government with "[g]uaranteeing access by every citizen, regardless of his economic situation, to preventive, curative and rehabilitative medical care."<sup>10</sup> While Portugal's new government retained the criminal prohibition against drug use and possession, a 1983 decree<sup>11</sup> authorized the suspension of punishment for some drug offenses if



the convicted person agreed to participate in treatment for drug use.<sup>12</sup> In 1993, Decree Law No. 15/93 also retained criminal sanctions for the use or possession for personal use of certain illicit drugs, but allowed for the suspension of punishment, including the suspension of imprisonment, for drug-dependent individuals who voluntarily agreed to “treatment or admission to an appropriate establishment.”<sup>13</sup>

Statistical information on illicit drug use in Portugal before 2001 is somewhat limited. For example, the national prevalence estimates for problem drug use in Portugal, unlike for other European countries, were noticeably absent from the European Monitoring Centre for Drugs and Drug Addiction’s (EMCDDA<sup>14</sup>) 2000 Annual Report on the State of the Drugs Problem in the European Union.<sup>15</sup> However, available data show that Portugal has had its share of illicit drug issues. For example, between 1985 and 2000, the number of police reports for all drug law offenses rose nearly ten-fold from 1,471 to 14,276.<sup>16</sup> From 1995 to 1999, the number of arrests for the mere *use* of illicit drugs more than doubled from about 3,000 to about 8,000.<sup>17</sup> It has been estimated that one percent of the Portuguese people were addicted to heroin.<sup>18</sup> By 1998, forty to sixty percent of drug-related arrests in Portugal involved heroin.<sup>19</sup> In the 1990s, injection drug users in Portugal increasingly developed AIDS, and at a higher rate than in most European nations.<sup>20</sup> Based on data collected from 1996 to 1999, over twenty-five percent of drug injectors in Portugal were infected with HIV, the virus that causes AIDS.<sup>21</sup> By 1999, drug-related AIDS cases in Portugal numbered approximately sixty per million.<sup>22</sup> Rates of Hepatitis B and C also soared.<sup>23</sup>

Notably, however, individuals punished with incarceration for *possession or use of* illicit drugs did not comprise a significant portion of Portugal’s prison population at the end of each year from 1993 to 2000, as shown in Table 3-1 in Appendix B.<sup>24</sup> The table separates individuals who were incarcerated as consumers of illicit drugs, those who were incarcerated for all drug offenses (including trafficking), and the prison population as a whole. These years and numbers do not represent the total number of people incarcerated over the course of a year, nor do they represent the population on any given day of the year. However, the data suggest that drug consumers were rarely punished with lengthy terms of incarceration for the mere use or possession of small quantities of illicit drugs.

In October of 1993, Portugal responded to increasing injected drug use, and the associated spread of HIV through such drug use, by starting a national syringe exchange program.<sup>25</sup> Between 1997 and 1999, several laws were also enacted to improve treatment for drug addicts and help them reintegrate into society.<sup>26</sup>

## NATIONAL DRUG STRATEGY

Seeking a new course of action to address the growing national drug problem, Portugal’s Council of Ministers in 1999 adopted a resolution approving a “National Drug Strategy.” The strategy was set forth in a report produced by the National Drug Strategy Committee<sup>27</sup> and recognized that use of illicit drugs had increased in Portugal.<sup>28</sup> It noted that heroin was the drug

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that had “the most damaging social and health effects,” and that hashish was “the most used illicit drug . . . despite the substantial reduction in the quantity of this drug seized in 1998.”<sup>29</sup>

The National Drug Strategy was based on thirteen strategic components, which emphasized:

- International cooperation;
- Decriminalization of the use of drugs;
- Prevention efforts, particularly among young people;
- Improvement of the health care network for drug addicts;
- Harm reduction policies, including syringe and needle exchange programs, and substitution drugs;
- Reintegration of drug addicts;
- Access to treatment and harm reduction for imprisoned drug addicts;
- The voluntary treatment of addicts as an alternative to prison or other penalties;
- Scientific research;
- The establishment of methodologies and procedures for evaluation of public and private initiatives in the field of drugs and drug addiction;
- Simplifying interdepartmental coordination;
- Reinforcing attempts against trafficking and money laundering; and
- Doubling the public investment over a five-year period to finance the National Drug Strategy, especially in the areas of prevention, research, and training.<sup>30</sup>

With regard to decriminalization, the Committee noted that it recommended decriminalizing only the private use of illicit drugs, and not the sale of such drugs.<sup>31</sup> With regard to treatment, the report stated: “The guarantee of access to treatment for all drug addicts who seek treatment is an *absolute priority* of this national drug strategy.”<sup>32</sup> This recommendation was consistent with previously-established law. In 1979, Portugal had enacted a law that established the National Health Service to provide health care free of charge.<sup>33</sup> (The National Health Service is primarily funded through general taxation.<sup>34</sup>)

Thus, while the decriminalization of the use and possession for personal use of certain drugs was an important component of Portugal’s strategy, it was not the only component and not necessarily even the most important one.

## DECRIMINALIZATION

Given the fact that few drug consumers were actually incarcerated for mere drug consumption before the enactment of Law No. 30/2000, decriminalization arguably could be described as symbolic.<sup>35</sup> However, the National Drug Strategy report stated in part:

[I]n many cases, contact with the judicial system and, sometimes, with prison establishments themselves, together with the corresponding social stigma and, in certain cases, the subsequent criminal record, produce harmful effects on the desired recovery and, above all, the reintegration of drug addicts.<sup>36</sup>

As part of the National Drug Strategy, Portugal's Law No. 30/2000 repealed<sup>37</sup> existing criminal penalties imposed by Decree-Law No. 15/93 against consuming, purchasing for consumption purposes, and possession for consumption purposes certain drugs listed in Decree-Law No. 15/93.<sup>38</sup> The "decriminalization . . . enter[ed] into force throughout Portuguese territory on July 1, 2001."<sup>39</sup> However, Law No. 30/2000 retained Decree-Law No. 15/93's existing criminal penalties for cultivation of illicit drugs for personal consumption.<sup>40</sup> Furthermore, Law No. 30/2000 did not repeal existing criminal penalties against drug trafficking.<sup>41</sup>

Law No. 30/2000 "defines the legal framework applicable to the consumption of narcotics and psychotropic substances, together with the medical and social welfare of the consumers of such substances without medical prescription."<sup>42</sup> The law itself repeatedly refers to individuals who violate the law as "consumers," rather than "violators" or "offenders." In place of the repealed criminal offenses, Law No. 30/2000 states that "[t]he consumption, acquisition and possession for own [sic] consumption of plants, substances or preparations listed in [tables I to IV attached to Decree-Law No. 15/93] constitute an administrative offence."<sup>43</sup> However, there is a quantitative limit on such consumption, since "[f]or the purposes of this law, the acquisition and possession for own [sic] use of the substances referred to in the preceding paragraph shall not exceed the quantity required for an average individual consumption during a period of 10 days."<sup>44</sup> Law No. 30/2000 does not specify this quantity for any illicit drug. Instead, a separate law, Portaria No. 94/96,<sup>45</sup> specifies a daily quantity for certain illicit substances: Heroin, 0.1 grams; Ecstasy, 0.1 grams; Cocaine, 0.2 grams; Marijuana, 2.5 grams; Hashish, 0.5 grams; Delta-9-THC, 0.05 grams; and Amphetamines, 0.1 grams.

## DISSUASION COMMISSION PROCESS

Drug consumption offenses are processed and penalties are applied by a commission referred to as a "commission for the dissuasion of drug addiction."<sup>46</sup> There are many of these commissions across Portugal, and each is composed of three persons,<sup>47</sup> as follows:

One of the members of the commission shall be a legal expert appointed by the Ministry of Justice, and the Minister of Health and the member of the Government responsible for

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the coordination of the drugs and drug addiction policies shall appoint the other two, who shall be chosen from doctors, psychologists, sociologists, social services workers or others with appropriate professional expertise in the field of drug addiction . . . .<sup>48</sup>

Fines and other penalties imposed by these commissions are non-criminal in nature. Law No. 30/2000 requires commissions to set penalties with the goal of preventing the consumption of narcotics and psychotropic substances. Possible penalties that may be imposed upon any consumer include:

- (1) Verbal warnings;
- (2) Suspension of professional licenses;
- (3) Prohibitions on visiting certain places;
- (4) Prohibitions on meeting with certain persons;
- (5) Restrictions on the possession of firearms;
- (6) Restrictions on travel; and
- (7) Seizures of any property belonging to the consumer that represents a risk to the consumer or to the community or that encourages commission of a crime or other offense.

Commissions may not impose fines upon addicted consumers, but the law authorizes a range of fines against nonaddicted consumers. Generally, consumers who possess drugs like heroin and methamphetamine are subject to higher fines.<sup>49</sup> Depending on the type of drug possessed, fines may range from a minimum of about \$35 to a maximum of an amount equal to the national minimum monthly wage.<sup>50</sup>

Law No. 30/2000 requires the provisional suspension of proceedings against an addicted consumer if the consumer has no prior record of previous offenses under Law No. 30/2000 and agrees to undergo treatment. It also grants each commission the discretion to provisionally suspend proceedings against an addicted consumer with a prior record if the consumer agrees to undergo treatment.<sup>51</sup> Further, even if a commission decides to penalize an addicted consumer, the commission may choose to suspend a penalty for up to three years if the consumer agrees to “voluntarily” undergo treatment. Proceedings may be closed if, after the suspension period, no reason has been found that could lead to revoking the suspension. Grounds for revocation include a consumer’s failure to start or continue treatment as necessary.<sup>52</sup> Moreover, even if a consumer cannot be treated or refuses to be treated, penalties may be suspended if the applicable commission requires the user to present himself or herself periodically to receive medical services or undergo other follow-up actions.<sup>53</sup>

Law No. 30/2000 requires proceedings against a consumer to be brought before the commission that has jurisdiction over the area in which the consumer resides. (If the address is

unknown, the proceedings shall be brought before the commission for the area in which the consumer was found.)<sup>54</sup> The commission “shall hear the consumer and gather the information needed in order to reach a judgement as to whether he or she is an addict or not,” as well as consider other facts.<sup>55</sup> Notably, if it is “not possible to identify the consumer at the place and the moment of the occurrence, the police authorities may, if necessary, detain the consumer in order to ensure that he or she appears before the commission, in accordance with the legal rules on detention for the purpose of identification.”<sup>56</sup> But technically, there is no language in Law No. 30/2000 that specifically authorizes the police or the commission to “order” a consumer to appear before the commission.

### EFFECTIVENESS OF DISSUASION COMMISSIONS

The use and effectiveness of the dissuasion commissions has been called into question. Some skeptics in Portugal believe that the dissuasion commissions served only a symbolic purpose, that is, to show that Law No. 30/2000 was not intended to condone drug use.<sup>57</sup> The commissions faced difficulty in establishing standards and procedures and implementing their operations until about 2008.<sup>58</sup>

While the apparent impetus for decriminalization was to address and provide treatment for addicted users, and primarily those addicted to heroin, one observer noted:

[I]n practice, most of the individuals who appeared before the Commissions have not been *problem* drug users. Instead, the majority of the issued citations for drug use have been to increasingly younger, nonaddicted, cannabis users. The proportion of cases involving cannabis [also known as marijuana] has steadily grown, from approximately 50 percent of the cases during the Commission’s [sic] first eighteen months of operation to 76 percent of the cases in 2009.<sup>59</sup>

This trend has continued. In 2013, the dissuasion commissions processed 8,729 cases.<sup>60</sup> Of the year 2013 cases in which only one substance was involved, eighty-two percent involved marijuana, and only six percent involved heroin.<sup>61</sup> While it should be noted that this may reflect an actual shift in drug use patterns – with more users using marijuana, and fewer using heroin,<sup>62</sup> the latter drug, in the words of the National Drug Strategy Committee, has “the most damaging social and health effects.”<sup>63</sup> Thus, while heroin users face the greatest risks to their health, the statistics suggest that a disproportionately low number of them benefit from the discipline and paths to treatment that the commissions were intended to provide.

There is also a lack of clarity regarding what impact the dissuasion commission process has had on treatment efforts. As one observer noted:

Treatment attendance [the number of people receiving treatment] increased from 27,750 in 1999 to a peak of 32,064 people receiving treatment. This subsided to 30,266 in 2004. However, as noted earlier it is not known how many clients sent through the CDTs [dissuasion commissions] continued to receive treatment, if they were successfully treated, nor whether there were long term impacts upon drug-related problems.<sup>64</sup>

## **ADMINISTRATIVE MANAGEMENT OF TREATMENT**

In 2002, the Instituto de Droga e da Toxicodependência (the Institute for Drugs and Drug Addiction, abbreviated as “IDT”), was established to consolidate drug program resources, oversee dissuasion commissions, appoint commission members, and gather drug use and addiction statistics.<sup>65</sup> It also provided drug treatment services.<sup>66</sup> The IDT was essentially a merger of different ministerial bodies that handled those tasks and, in the view of one observer, guaranteed “unity, planning, design, management, supervision and assessment of the [drug treatment] system as a whole.”<sup>67</sup>

In 2012, most of the duties of the IDT were transferred to a new agency entitled the Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências (General Directorate for Intervention on Addictive Behaviours and Dependencies,<sup>68</sup> abbreviated as “SICAD”).<sup>69</sup> This change was met with some concern about instability in the availability of treatment, since services under SICAD are not as comprehensive and centralized as services under the IDT.<sup>70</sup> Notably, unlike the IDT, the SICAD is not responsible for treatment services. Instead, that responsibility is delegated to regional government authorities.<sup>71</sup> The elimination of IDT-based treatment means that drug users need to seek treatment from regular regional government health clinics and hospitals. Concerns have been raised that drug users who might otherwise be willing to receive specialized IDT-based treatment will find the prospect of accessing treatment from regular hospitals and clinics to be too intimidating and thus will avoid treatment altogether.<sup>72</sup> This change may have an impact on the success of the treatment component of Portugal’s National Drug Strategy going forward.

## **HCR NO. 127’S RELIANCE ON THE CATO REPORT**

As noted previously, HCR No. 127 specifically referenced a report issued in 2009 by the Cato Institute entitled “Drug Decriminalization in Portugal: Lessons for Creating Fair and Successful Drug Policies” (hereinafter, “the Cato report”).<sup>73</sup> The resolution stated that the Cato report determined that drug decriminalization in Portugal produced four key results:

- (1) No adverse effect on drug usage rates, which are among the lowest in the European Union, and particularly when compared with states with stringent criminalization regimes;
- (2) A decrease in lifetime prevalence rates for drug use among various age groups, particularly for youths in the critical age groups of thirteen to fifteen year olds and sixteen to eighteen year olds;
- (3) A dramatic decrease in drug-related deaths, including from sexually transmitted diseases; and
- (4) Steady declines in drug trafficking convictions[.]<sup>74</sup>

Based on these assertions about the Cato report, the resolution posits that Portugal's decriminalization scheme could serve as a model for the decriminalization of possession for personal use of certain drugs in Hawaii. These assertions will be addressed in detail<sup>75</sup> following: the Bureau's general analysis of the Cato report; a discussion of findings by the United States Office of National Drug Control Policy regarding the Cato report; and a review of certain scholarly articles that comment on the Cato report.

## GENERAL ANALYSIS OF THE CATO REPORT

The Cato report provides valuable information and insight, has been enthusiastically embraced by some authors of scholarly articles, and has attracted significant media attention.<sup>76</sup> However, it should be noted from the outset that the Cato Institute does not conduct "nonpartisan public policy research," as asserted by HCR No. 127. Instead, it espouses a libertarian political philosophy and advocates for limited government encroachment into personal and economic activities.<sup>77</sup> Accordingly, it should also be noted that the Cato report was presented as a "white paper" intended to influence policy discussions by advocating a decriminalization approach to drug policy, rather than presenting an objective analysis of data. For example, the report's executive summary proclaims Portugal's decriminalization "a resounding success" and concludes that "[w]ithin this success lie *self-evident* lessons that should guide drug policy debates around the world."<sup>78</sup> Moreover, certain methodologies on which the Cato report was based, as well as some of the report's findings and conclusions, have been challenged by the Office of National Drug Control Policy and authors of some scholarly articles. In addition, data that became available subsequent to the release of the Cato report support alternative conclusions, as will be discussed.<sup>79</sup>

The Cato report does not appear to clearly recognize, and at any rate does not clearly reflect, that decriminalization of drugs was *only one component* of a much larger drug control strategy in Portugal that also called for significant investments in public health-oriented programs prior to, and in conjunction with, decriminalization. While the Cato report does reference Portugal's increased emphasis on drug abuse prevention, treatment, and harm reduction programs as important components in the country's shift to a public health approach to drug abuse, the report clearly focuses on the decriminalization of drug possession and use, in particular, and tends to create the distorted impression that *decriminalization in and of itself* – rather than such factors as the *increased focus on a public health approach to addressing drug use* that began before, and continued in conjunction with, decriminalization – is primarily responsible for outcomes cited by the study. As an example, the report's executive summary recounts Portugal's shift to decriminalization of drug possession and use and asserts that "[t]he data show that, judged by virtually every metric, the Portuguese decriminalization framework has been a resounding success."<sup>80</sup> However, the executive summary does not even mention Portugal's larger public health-oriented drug abuse control strategy, but attributes solely to decriminalization an enhanced ability of the Portuguese government to offer drug abuse treatment programs.

The Cato report also asserts that the decriminalization of drugs in Portugal has allowed financial resources to be redirected from criminal enforcement to public health-oriented programs such as drug abuse prevention, treatment, and harm reduction services.<sup>81</sup> However, the Cato report does not identify or quantify these resources or explain specifically either how the resources were freed up or how they were redirected. Paradoxically, the Cato report does note that criminal sanctions solely for drug possession or use were very uncommon in Portugal prior to decriminalization.<sup>82</sup> Therefore, it is unclear how any significant financial resources could have been saved or redirected from criminal enforcement of prohibitions against drug possession and use in order to finance public health programs as a result of decriminalization. Nor did the Cato report examine the financial costs of establishing administrative structures to implement Portugal's decriminalization scheme, such as the Commissions for Dissuasions of Drug Addiction – the bodies responsible for adjudicating administrative drug offenses and considering whether to refer drug users to treatment programs or impose sanctions for noncompliance with the decriminalization scheme – which could reasonably be expected to consume at least part of any savings redirected from criminal enforcement.

This is not to suggest that decriminalization of use and possession for personal use of drugs in Portugal has produced no positive results, or has not contributed significantly to an environment in which drug abuse is more effectively prevented and addressed. But any decrease in drug abuse or other changes to drug abuse indicators in Portugal following decriminalization may not necessarily or conclusively be attributed to decriminalization *per se*, and almost certainly not to decriminalization *alone*. Rather, it appears that Portugal's overall approach to treating drug abuse as a public health problem, and to investing in that approach in a decriminalized context, may be responsible for at least some positive outcomes, although economic and cultural factors unrelated to decriminalization may have also contributed and cannot be ruled out.<sup>83</sup>

For example, variations in the type, quantity, and price of available drugs, and the ability of consumers to access them, may reasonably be expected to affect drug use patterns and indicators. Nevertheless, it should also be said that the available data do not necessarily indicate that the decriminalization of drug possession and use in Portugal caused any dramatic general *increase* in drug abuse, as opponents of decriminalization had feared, although some data do indicate that use of certain drugs has increased among some segments of the population in the years following decriminalization, as will be explained.<sup>84</sup>

### **OFFICE OF NATIONAL DRUG CONTROL POLICY CRITICISMS OF CATO REPORT**

In response to the Cato report, the Office of National Drug Control Policy, a branch of the Executive Office of the President of the United States, released a brief "fact sheet" criticizing and disputing certain aspects of the Cato report and its findings.<sup>85</sup> Under the heading, "Limitations in Current Research," the fact sheet stated these specific points:



- **Supporting Analysis Not Definitive:** The Cato Institute report does not discuss the statistical significance of the data shifts it highlights, sometimes focusing on prevalence rate changes as small as 0.8 percent.
- **Fails to Recognize Other Factors:** The report attributes favorable trends as a direct result of decriminalization without acknowledging, for example, the decline in drug-related deaths that began prior to decriminalization.
- **Adverse Data Trends Not Reported:** Evidence that may reflect [the Portuguese decriminalization law's] adverse social effects – such as the increase in drug-related deaths in Portugal between 2004 and 2006 – is sometimes ignored, downplayed, or not given equal recognition.
- **Core Drug-Use Reduction Claims Not Conclusive:**

As “proof” of drug legalization’s<sup>86</sup> success, the report trumpets a decline in the rate of illicit drug usage among 15- to 19-year-olds from 2001 to 2007, while ignoring increased rates in the 15-24 age group and an even greater increase in the 20-24 population over the same period. In a similar vein, the report emphasizes decreases in lifetime prevalence rates for the 13-18 age group from 2001 to 2006 and for heroin use in the 16-18 age group from 1999 to 2005. But, once again, it downplays increases in the lifetime prevalence rates for the 15-24 age group between 2001 and 2006, and for the 16-18 age group between 1999 and 2005.

- **Methodologically Limited:** Cato’s analysis relies heavily on lifetime prevalence data, which can be problematic when analyzing the impact of policy changes over time periods as short as the 5-6 years captured in most of the studies cited in the report.<sup>87</sup>

Under the heading “Additional Studies Offer More Contradictory Evidence,” the fact sheet made the following additional points:

- Statistics compiled by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) indicate that between 2001 and 2007, lifetime prevalence rates for cannabis, cocaine, amphetamines, ecstasy, and LSD have risen for the Portuguese general population (ages 15-64) and for the 15-34 age group.
- Past-month prevalence figures show increases from 2001 to 2007 in cocaine and LSD use in the Portuguese general population as well as increases in cannabis, cocaine, and amphetamine use in the 15-34 age group.
- Drug-induced deaths, which decreased in Portugal from 369 in 1999 to 152 in 2003, climbed to 314 in 2007 – a number significantly higher than the 280 deaths recorded when decriminalization started in 2001.
- Despite Cato’s assertion that increases in lifetime prevalence levels among the general population are “virtually inevitable in every nation,” EMCDDA data indicate that other countries, including Spain, have been able to achieve decreases in lifetime prevalence rates for cannabis and ecstasy use between 2003 and 2008.<sup>88</sup>

And under the heading, “Claims of Benefits from Drug Legalization<sup>89</sup> Exceed Supporting Science,” the fact sheet declared the following:

The Cato Institute report does not present sufficient evidence to support claims regarding causal effects of Portugal’s drug policy on usage rates. More data are required before drawing any firm conclusions, and ultimately these conclusions may only apply to Portugal and its unique circumstances, such as its history of disproportionately high rates of heroin use. However, it is safe to say that claims by drug legalization advocates regarding the impact of Portugal’s drug policy exceed the existing scientific basis.<sup>90</sup>

While the points made in the fact sheet appear to be valid ones, those points do not necessarily disprove the thesis that decriminalization of use and possession for personal use of drugs can produce significant positive effects, especially when coupled with investments in public health, such as drug abuse prevention, treatment, and harm-reduction programs.

### **OTHER STUDIES DISPUTE OR CONTRADICT FINDINGS IN THE CATO REPORT**

Scholarly articles have analyzed the Cato report and competing interpretations of data pertaining to the decriminalization of use and possession for personal use of drugs in Portugal and have criticized a perceived lack of objectivity and selective use of data, both by Cato and by critics of drug decriminalization, to reinforce beliefs that are largely based on ideology, rather than on objective analyses of data.

For example, Caitlin Elizabeth Hughes and Alex Stevens, writing in *Drug and Alcohol Review*, found what they determined was “clear proof of misuse” of data presentations in the Cato report and in another report<sup>91</sup> that disputed the Cato report’s findings:

Both showed selective use of evidence (focusing on different indicators, choice of years or datasets) and omission or a lack of acknowledgement of other pieces of the puzzle. Both also showed differential appreciations of data strengths and weaknesses: with weaknesses highlighted mainly by [the Cato report] to account for apparent failings. In so doing, both provided a version of events that offered certitude and support for opposing “core beliefs.”<sup>92</sup>

Hughes and Stevens found that four datasets have evolved for collecting information on drug use among school students in Portugal, each of which provide a partial, but incomplete, picture.<sup>93</sup> Hughes and Stevens found that the Cato report relied on one set of data indicating that Portugal saw a 27-30 percent decrease in lifetime cannabis use after decriminalizing drug possession and use, but that other datasets suggested that there was actually a 16 percent reduction.<sup>94</sup> Hughes and Stevens also found that the Cato report inaccurately claimed that Portugal had the absolute lowest lifetime prevalence rates for cannabis use, when Bulgaria, Malta, and Romania all had lower lifetime prevalence rates than Portugal.<sup>95</sup>

Furthermore, Hughes and Stevens questioned the extent to which lifetime prevalence provides a meaningful indicator of changing drug use patterns in Portugal following decriminalization. They point out that, although lifetime prevalence is generally deemed useful for examining drug use trends among youth, examining trends among adults and the general population for recent (last 12 months) or current (last 30 days) drug use is generally believed to provide much better indicators.<sup>96</sup> Simply put, if a person has used an illegal drug at least once in her lifetime, that person's indicator of lifetime use will not change in the future whether she later uses an illegal drug again or not; thus it is of limited value for gauging any *change of drug use* among groups of people, especially among adults who may have first used a drug many years before.

Hughes and Stevens caution that any assumptions that changes to patterns of drug use in Portugal may be attributed solely or primarily to the country's decriminalization scheme are problematic, because "there is no direct, cross-sectional link between national drug policies and prevalence of use."<sup>97</sup>

Apart from the decriminalization, there are many other factors that might explain national patterns of use (including disposable income, leisure time, religiosity and other cultural norms) and trends in drug-related harms (including changes in the availability of treatment and harm reduction services and the level of health-care and welfare support). More broadly[,] the overemphasis by both [the Cato report and a report questioning its findings] on the reform, and not the concurrent drug strategy which expanded services for drug users in Portugal, has fostered overconfident assertions about the effects of the reform and a lack of appreciation of the Portuguese model and the causal mechanisms by which outputs and outcomes could be expected to occur.<sup>98</sup>

Another author, Hannah Laqueur, writing in *Law and Social Inquiry*, observed that "[t]he story of decriminalization in Portugal has become a kind of screen onto which drug policy agendas are projected. It has been misapplied as a precedent that can speak to questions of legalization and misconstrued as a more radical policy change than it in fact was."<sup>99</sup> Laqueur noted, for example, that fines had long been the primary sanction imposed on persons convicted of drug use in Portugal prior to decriminalization, and that less than one percent of those imprisoned for a drug offense in Portugal in the year prior to decriminalization were serving time for drug possession.<sup>100</sup> Thus, rather than represent a dramatic shift away from criminal prosecution, decriminalization of drug use in Portugal primarily codified what had already been the existing *de facto* practice.<sup>101</sup> "The statute did not encompass a major change in legal sanctions. But it reflected and supported Portugal's evolving shift from a penal to a therapeutic approach to drug abuse and this, in turn, appears to have had a much broader impact on court practices."<sup>102</sup>

Laqueur contended that, in general, there has been a tendency to focus too much on Portugal's decriminalization of drug use rather than the larger shift in drug policy that included decriminalization as but one component.

Most accounts of the Portugal experiment have focused on the 2001 change in the criminal law regarding drug use, less on the other prongs of Portugal's drug reforms – the

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expansion of programs providing treatment, prevention, and reintegration. Yet, such programs are clearly central to any analyses of drug-related harms and health outcomes. We cannot evaluate decriminalization in isolation, nor was it designed to function alone. The administrative commissions were established to support broader public health efforts by providing a more integrated and efficient method for detection and referral to treatment. The removal of criminal penalties for drug use was intended to de-stigmatize addicted users and encourage treatment. According to Portuguese drug policy officials, the new system has effectively done just that.<sup>103</sup>

Laqueur found that the most dramatic change in Portugal following decriminalization was not necessarily related to drug *use*, but rather to *criminal adjudication* of drug *trafficking* offenses. While the number of *arrests* for trafficking changed little in the ten years following enactment of the decriminalization statute and Portugal's drug trafficking laws did not change during that time, the number of drug trafficking *convictions* decreased by 40 percent during that same period, and the number of defendants *incarcerated* for criminal acts involving the sale, distribution, or production of drugs dropped by nearly half.<sup>104</sup>

Laqueur found that a decrease in Portuguese prison sentence lengths could account at least in part for the decrease in the number of incarcerated defendants, but that data regarding sentence lengths were unavailable.<sup>105</sup> The reduction in incarceration for drug trafficking “suggests that after formally acknowledging and codifying the de facto practice of not convicting and incarcerating drug users, the criminal courts embraced de facto practices of greater leniency for at least some drug users and purveyors whose behavior remained criminally sanctioned,” Laqueur wrote, noting that some drug users are also traffickers.<sup>106</sup> Laqueur noted that some drug dealers may also have begun carrying no more than the ten-day supply of drugs that Portugal's revised drug laws consider indicative of personal use, rather than trafficking,<sup>107</sup> thus making it harder for authorities to distinguish between drug users and users who are also traffickers.<sup>108</sup>

### **“KEY RESULTS” OF DRUG DECRIMINALIZATION IN PORTUGAL**

The four “key results” of drug decriminalization in Portugal cited in HCR No. 127<sup>109</sup> are discussed below:

(1) Available data do not support the statement made in HCR No. 127 that, following decriminalization, Portugal experienced “[n]o adverse effect on drug usage rates, which are among the lowest in the European Union, and particularly when compared with states with stringent criminalization regimes[.]”<sup>110</sup> Available data do indicate that reported cannabis usage rates in Portugal were substantially lower than the European average even prior to decriminalization, and remained so following decriminalization, and are also low when compared to states with stringent criminalization regimes.<sup>111</sup> However, Portugal's rate of *problem* drug use, which the European Monitoring Centre for Drugs and Drug Addiction defines as injecting or prolonged use of heroin, cocaine, or amphetamines, has approximated or exceeded the European average before and after Portugal implemented its decriminalization scheme, and was in fact a key motivator for decriminalization.<sup>112</sup>

Furthermore, data from other sources indicate that usage rates for certain drugs actually increased among certain age groups in Portugal following decriminalization, but do not necessarily suggest any increases were *caused* by decriminalization or by decriminalization *alone*. For example, as will be discussed below, some data suggest a significant increase between 2007 and 2011 in the percentage of Portuguese students who reported using illicit drugs at some point in their lifetime. And, as discussed previously, the Office of National Drug Control Policy fact sheet noted that data made available after the Cato report was issued indicate that use of some drugs increased among certain age groups between 2001 and 2007.<sup>113</sup> However, it should be noted that reported increases in some categories were less than 1 percent or as small as 0.1 percent.<sup>114</sup> The fact sheet noted that lifetime prevalence rates for use of cannabis, cocaine, amphetamines, ecstasy, and LSD increased in Portugal between 2001 and 2007 among the general population aged 15 to 64 and the population aged 15 to 34.<sup>115</sup> The fact sheet also noted that data indicate the prevalence rates for use of cannabis, cocaine, and amphetamines during the last 30 days increased between those same years among the 15-34 age group, and that use of cocaine and LSD during the last 30 days increased during that same period among the 15-64 age group.<sup>116</sup>

Also, data self-reported by Portuguese high school students and collected by the European School Survey Project on Alcohol and Other Drugs (hereinafter “the ESPAD report”) indicate that lifetime use of illicit drugs among students increased from 12 percent in 1999 (approximately two years prior to implementation of Portugal’s drug decriminalization statute in 2001) to 19 percent in 2011.<sup>117</sup> The ESPAD report also found that use of marijuana or hashish during the last 30 days nearly doubled, from 5 percent in 1999 to 9 percent in 2011,<sup>118</sup> and that lifetime use of marijuana or hashish increased from 9 percent in 1999 to 16 percent in 2011.<sup>119</sup> The ESPAD report found that lifetime use of illicit drugs other than marijuana or hashish increased from 6 percent to 8 percent during that same period.<sup>120</sup>

The ESPAD report indicates that lifetime use of marijuana or hashish by students in Portugal was slightly below the European average in 2011,<sup>121</sup> and that lifetime use of other illicit drugs was slightly higher than the average.<sup>122</sup> The report also characterized the change from 2007 to 2011 in the percentage of Portuguese students who indicated they had used illicit drugs during their lifetime as a “significant increase.”<sup>123</sup> The report similarly found a “significant increase” in both the percentage of Portuguese students who had used marijuana or hashish during the past thirty days of the reporting periods in 2007 and 2011,<sup>124</sup> and the percentage who had used other illicit drugs during their lifetime.<sup>125</sup>

Thus, available data do not conclusively establish that there has been no adverse effect on drug usage rates following the decriminalization of use and possession for personal use of drugs in Portugal.

(2) Some available data do support the assertion that, during certain time periods, Portugal experienced “[a] decrease in lifetime prevalence rates for drug use among various age groups, particularly for youths in the critical age groups of thirteen to fifteen year olds and sixteen to eighteen year olds[.]”<sup>126</sup> However, data for slightly different age groupings indicate increases in drug use between different periods.<sup>127</sup> Data also indicate that lifetime prevalence

rates for use of any illicit drug increased between 2007 and 2011 among each specific age from 13 to 18.<sup>128</sup>

It should be noted that none of this data conclusively establish that any increases or decreases in drug use among young people in Portugal are causally related to decriminalization *per se*, or result *solely* from decriminalization. It is also possible, and perhaps more likely, that an increased emphasis on drug abuse education and prevention directed toward youth and young adults as part of Portugal's national drug abuse control strategy have had more of an impact on drug usage rates, along with any changes in the economy, societal acceptance of drug use, evolving preferences for specific drugs, accessibility of drugs by young people, and other related variables.

(3) The assertion in HCR No. 127 that Portugal has recorded “[a] dramatic decrease in drug-related deaths, including from sexually transmitted diseases” is problematic and misleading. While it is true that Portugal recorded, for two years immediately following the implementation of decriminalization in 2001, significant decreases in the number of deaths in which post-mortem toxicological tests *detected the presence* of illicit substances,<sup>129</sup> those tests did not necessarily find that drugs were the *cause* of death. As Hughes and Stevens have explained:

Unlike much of the Western world, Portugal has not historically collected or reported information on deaths that are directly attributable to drug intoxication . . . [Data regarding the presence of illicit substances] is responsive to changes in recording practices, such as the number of toxicological autopsies. [Also], it is only an indirect indicator of attributable death; many people are found to have traces of a drug in their body when they die, but this does not mean that the drug caused the death. This is why the standard international classification of drug-related death relies on reports by physicians on their assessment of the cause of death, *not* positive toxicological tests.<sup>130</sup>

Moreover, the number of deaths in which post-mortem toxicological tests detected the presence of illicit substances had begun decreasing substantially two years *prior* to decriminalization in 2001, then *increased* substantially from 2003 to 2007, years *subsequent* to decriminalization.<sup>131</sup> It should be understood, however, that the Cato report, Laqueur, and the EMCDDA have all noted that the *number* of autopsies and toxicological tests conducted in Portugal have increased since decriminalization, and that an increased number of tests could reasonably be expected to produce an increase in test results that detected illicit substances.

Furthermore, the Cato report did not reference a decrease in “drug-related deaths, including from sexually transmitted diseases,” as described in HCR No. 127.<sup>132</sup> Rather, the Cato report referenced a *stabilization of general infection rates* for HIV in Portugal since 2004, and a *decline in newly reported cases* of HIV and AIDS among drug users.<sup>133</sup> Although scientists have determined that HIV, and thus AIDS, may be spread through sexual contact as well as through shared needles used to inject drugs, the Cato report did not specifically address sexual transmission. Quoting from a 2007 report by Hughes and Stevens, the Cato report noted that injection drug use has been a major mode of transmission for HIV, and that Portugal recorded

decreases of new drug-related HIV infections and of tracked cases of Hepatitis C and B in drug treatment centers after 2000:

With its relatively high rates of heroin use by injection, Portugal has had a serious problem with the transmission of HIV and other blood-borne viruses. For example, in 1999 Portugal had the highest rate of HIV amongst injecting drug users in the European Union . . . . This is a major target of a public health approach to drug use, with opiate substitution treatment and needle exchange being an important element of the Portuguese response. *Between 1999 and 2003, there was a 17% reduction in the notifications of new, drug-related cases of HIV . . . . There were also reductions in the numbers of tracked cases of Hepatitis C and B in treatment centres, despite the increasing numbers of people in treatment.*<sup>134</sup>

It should be noted that Hughes and Stevens also observed in the same 2007 report that “it is difficult to attribute any changes in drug use indicators in Portugal solely to the 2001 [decriminalization] law. It should also be recognized that it is notoriously difficult to measure drug use and related problems accurately.”<sup>135</sup> The authors noted that drug use has generally been a hidden and stigmatized activity, and that the causal link between drugs, death, and disease is “not direct, but is mediated by culture, socio-economics and policy responses.”<sup>136</sup> Hughes and Stevens further noted that Portuguese authorities have recorded a reduction in heroin users who are entering treatment for the first time, but an increase in cannabis users, which suggests a decline in new heroin users but an increase in new cannabis users in Portugal in the years following decriminalization.<sup>137</sup> “It seems that initiation into heroin use is falling, while cannabis use may be rising toward the levels experienced in some other European countries.”<sup>138</sup>

Thus, the data do not support the assertion that the decriminalization of drugs in Portugal produced “a dramatic decrease in drug-related deaths, including from sexually transmitted diseases,” although the available data indicate a decrease in new HIV cases among injection drug users referred for treatment.

(4) The assertion in HCR No. 127 that Portugal has experienced “[s]teady declines in drug trafficking convictions”<sup>139</sup> appears to be an accurate one. However, the relevance of a decrease in convictions is not clear, and a decrease in convictions does not necessarily indicate a decrease in drug trafficking *per se*, or of drug use. As noted previously, Laqueur found that although the number of drug trafficking *convictions* decreased by 40 percent in the decade following decriminalization, the number of *arrests* for trafficking changed little during that period.<sup>140</sup> The decrease in convictions may suggest, among other things, that courts have become more inclined to steer small-scale drug dealers who are also drug users toward drug abuse treatment rather than prison, and that street-level dealers have begun carrying no more than the ten-day supply of drugs that Portugal’s revised drug laws consider indicative of personal use rather than trafficking, thus making it harder for authorities to distinguish between drug users and traffickers.<sup>141</sup>

## ENDNOTES

1. GLENN GREENWALD, CATO INSTITUTE, DRUG DECRIMINALIZATION IN PORTUGAL: LESSONS FOR CREATING FAIR AND SUCCESSFUL DRUG POLICIES (2009), [http://object.cato.org/sites/cato.org/files/pubs/pdf/greenwald\\_whitepaper.pdf](http://object.cato.org/sites/cato.org/files/pubs/pdf/greenwald_whitepaper.pdf) [hereinafter THE CATO REPORT].
2. *Id.* at 28-29.
3. Caitlin Elizabeth Hughes, *Overcoming Obstacles to Reform?: Making and Shaping Drug Policy in Contemporary Portugal and Australia* 50 (Oct. 2010) (unpublished Ph.D. thesis, The University of Melbourne) (on file with The University Library, The University of Melbourne), [https://minerva-access.unimelb.edu.au/bitstream/handle/11343/39229/67255\\_00003215\\_01\\_Caitlin\\_Hughes\\_The\\_sis.pdf?sequence=1](https://minerva-access.unimelb.edu.au/bitstream/handle/11343/39229/67255_00003215_01_Caitlin_Hughes_The_sis.pdf?sequence=1) [hereinafter Hughes thesis].
4. EUROPEAN MONITORING CENTRE FOR DRUGS AND DRUG ADDICTION, DRUG POLICY PROFILES 20 (2011), [http://www.emcdda.europa.eu/attachements.cfm/att\\_137215\\_EN\\_PolicyProfile\\_Portugal\\_WEB\\_Final.pdf](http://www.emcdda.europa.eu/attachements.cfm/att_137215_EN_PolicyProfile_Portugal_WEB_Final.pdf). “Problem drug use” is defined as “injecting drug use or long duration or regular use of opioids, cocaine and/or amphetamines.” *Methods and Definitions*, EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, <http://www.emcdda.europa.eu/stats07/PDU/methods> (last updated Mar. 20, 2012).
5. Hughes thesis, *supra* note 3, at 51.
6. *Id.* (citing Decreto-Lei 420/70, DIÁRIO DA REPÚBLICA de 3.9.1970 (Port.)).
7. Kellen Russoniello, Note, *The Devil (and Drugs) in the Details: Portugal’s Focus on Public Health as a Model for Decriminalization of Drugs in Mexico*, 12 YALE J. HEALTH POL’Y, L. & ETHICS 371, 376 (2012), <http://digitalcommons.law.yale.edu/cgi/viewcontent.cgi?article=1200&context=yjhple>.
8. MARGARIDA BENTES ET AL., HEALTH CARE SYSTEMS IN TRANSITION: PORTUGAL 2004 12 (2000), [http://www.euro.who.int/\\_data/assets/pdf\\_file/0005/107843/e82937.pdf](http://www.euro.who.int/_data/assets/pdf_file/0005/107843/e82937.pdf).
9. CONSTITUTION OF THE REPUBLIC, SEVENTH REVISION, 2005, art. 6(1) (Port.), <http://www.en.parlamento.pt/Legislation/CRP/Constitution7th.pdf>. The Azores and Madeira archipelagos are “autonomous regions with their own political and administrative statutes and self-government institutions.” *Id.* art. 6(2). However, this autonomy “does not affect the integrity of the sovereignty of the state and shall be exercised within the overall framework of the Constitution.” *Id.* art. 225(3).
10. *Id.* art. 64(3)(a).
11. Russoniello, *supra* note 7, at 377 (citing Decreto-Lei 430/83, DIÁRIO DA REPÚBLICA de 13.12.1983 (Port.)).
12. INEKE VAN BEUSEKOM ET AL., GUIDELINES FOR IMPLEMENTING AND EVALUATING THE PORTUGUESE DRUG STRATEGY 8 (2000), [http://www.rand.org/content/dam/rand/pubs/monograph\\_reports/2005/MR1508.pdf](http://www.rand.org/content/dam/rand/pubs/monograph_reports/2005/MR1508.pdf).
13. Decreto-Lei 15/93, art. 44(1), DIÁRIO DA REPÚBLICA de 22.1.1993 (Port.), *translated in Decree-Law No. 15/93*, EUROPEAN MONITORING CTR FOR DRUGS AND DRUG ADDICTION, <http://www.emcdda.europa.eu/topics/law/drug-law->



- [texts?pluginMethod=eldd.showlegaltxtdetail&id=729&lang=en&T=2](#) (last modified July 7, 2015) [hereinafter Law No. 15/93].
14. The EMCDDA, established in 1993 and located in Lisbon, Portugal, is an agency of the European Union. It has published reports on drug-related statistics since 1995. Hughes thesis, *supra* note 3, at 89.
  15. EUROPEAN MONITORING CENTRE FOR DRUGS AND DRUG ADDICTION, 2000 ANNUAL REPORT ON THE STATE OF THE DRUGS PROBLEM IN THE EUROPEAN UNION 14-15 (2000), [http://www.emcdda.europa.eu/system/files/publications/151/ar00\\_en\\_69639.pdf](http://www.emcdda.europa.eu/system/files/publications/151/ar00_en_69639.pdf) [hereinafter EMCDDA 2000 ANNUAL REPORT].
  16. *Table DRCrime-1. Number of reports for drug law offences, 1985-2002. Part (ii) 1985 onwards*, EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, <http://stats04.emcdda.europa.eu/html.cfm/index5308EN.html> (last updated Nov. 23, 2004).
  17. Hannah Laqueur, Comment, *Uses and Abuses of Drug Decriminalization in Portugal*, 40 LAW & SOC. INQUIRY 746, 754, fig.1 (2015) (citing INSTITUTO PORTUGUÊS DA DROGA E DA TOXICODÊPENDENCIA, DROGA-SUMARIOS DE INFORMACAO ESTATISTICA-2000 (2000)).
  18. JOÃO PEDRO SEQUEIRA RODRIGUES AUGUSTO, EVOLUTION OF THE PORTUGUESE ADDICTION TREATMENT SYSTEM 1958-2014 3 (2016), [http://www.sicad.pt/BK/Publicacoes/Documents/EPATS\\_1958-2014\\_ENG\\_vweb.pdf](http://www.sicad.pt/BK/Publicacoes/Documents/EPATS_1958-2014_ENG_vweb.pdf).
  19. EMCDDA 2000 ANNUAL REPORT, *supra* note 15, at 21.
  20. *Id.* at 19.
  21. *Id.*
  22. *Id.*
  23. Hughes thesis, *supra* note 3, at 85.
  24. This table is adapted from a statistical table in Laqueur, *supra* note 17, at 755 tbl.2 (citing INSTITUTO PORTUGUÊS DA DROGA E DA TOXICODÊPENDENCIA, DROGA-SUMARIOS DE INFORMACAO ESTATISTICA-2000 (2000)).
  25. RODRIGUES AUGUSTO, *supra* note 18, at 12.
  26. *Id.* at 12, 46 (citing Lei 7/97, DIÁRIO DA REPÚBLICA de 8.3.1997 (Port.); Decreto-Lei 72/99, DIÁRIO DA REPÚBLICA de 15.3.1999 (Port.); Dr. Jorge Sompajo, Presidente do Republica, Discurso de Abertura de Sua Excelencia o Presidente do Republica Dr. Jorge Sompajo (Apr. 1997), in 10 COLLECTION OF TEXTS 29 (1997)).
  27. RESOLUÇÃO DO CONSELHO DE MINISTROS 46/99, DIÁRIO DA REPÚBLICA de 22.4.1999 (Port.), *translated in* PORTUGUESE NATIONAL DRUG STRATEGY COMMITTEE, NATIONAL DRUG STRATEGY (1999) [http://www.emcdda.europa.eu/system/files/att\\_119431\\_EN\\_Portugal%20Drug%20strategy%201999.pdf](http://www.emcdda.europa.eu/system/files/att_119431_EN_Portugal%20Drug%20strategy%201999.pdf) [hereinafter NATIONAL DRUG STRATEGY].
  28. *Id.* ch. I(2).
  29. *Id.*
  30. *Id.* ch. II(10).
  31. *Id.* ch. IV(22).

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32. *Id.* ch. VI(54) (emphasis added).
33. BENTES ET AL., *supra* note 8, at 12-13.
34. *Id.* at 33.
35. Laqueur, *supra* note 17, at 759.
36. NATIONAL DRUG STRATEGY, *supra* note 27, ch. IV(26).
37. Decreto-Lei 30/2000, art. 28, DIÁRIO DA REPÚBLICA de 29.11.2000 (Port.), *translated in* GENERAL-DIRECTORATE FOR INTERVENTION ON ADDICTIVE BEHAVIOURS AND DEPENDENCIES, DECRIMINALISATION: PORTUGUESE LEGAL FRAMEWORK APPLICABLE TO THE CONSUMPTION OF NARCOTICS AND PSYCHOTROPIC SUBSTANCES (n.d.), [http://www.sicad.pt/BK/Publicacoes/Lists/SICAD\\_PUBLICACOES/Attachments/96/Decriminalisation\\_law.EN.pdf](http://www.sicad.pt/BK/Publicacoes/Lists/SICAD_PUBLICACOES/Attachments/96/Decriminalisation_law.EN.pdf) [hereinafter Law No. 30/2000]. A copy of this law is attached to this report as Appendix D.
38. Law No. 15/93, *supra* note 13. A copy of the tables that list the drugs is attached to this report as Appendix E.
39. Law No. 30/2000, *supra* note 37, art. 29.
40. *Id.* art. 28.
41. *Id.* art. 21.
42. *Id.* art. 1(1).
43. *Id.* art. 2(1).
44. *Id.* art. 2(2).
45. Portaria 94/96, art. IV(9), mapa, DIÁRIO DA REPÚBLICA de 26.3.1996 (Port.); Laqueur, *supra* note 17, at 752; EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, EUROPEAN LEGAL DATABASE ON DRUGS COMPARATIVE STUDY: THE ROLE OF THE QUANTITY IN THE PROSECUTION OF DRUG OFFENCES 13 (2003) [http://www.emcdda.europa.eu/attachements.cfm/att\\_5738\\_EN\\_Quantities.pdf](http://www.emcdda.europa.eu/attachements.cfm/att_5738_EN_Quantities.pdf) [hereinafter EMCDDA QUANTITY].
46. Law No. 30/2000, *supra* note 37, art. 5(1).
47. *Id.* art. 7(1).
48. *Id.* art. 7(2).
49. *Id.* arts. 15-18.
50. Russoniello, *supra* note 7, at 387-388; Law No. 30/2000, *supra* note 37, art. 15.
51. Law No. 30/2000, *supra* note 37, art. 11.
52. *Id.* art. 14.
53. *Id.* art. 19.
54. *Id.* art. 8(1).
55. *Id.* art. 10(1).
56. *Id.* art. 4(2).

57. Hughes thesis, *supra* note 3, at 131-132.
58. RODRIGUES AUGUSTO, *supra* note 18, at 61.
59. Laqueur, *supra* note 17, at 756 (emphasis in original) (citing PORTUGAL INSTITUTE FOR DRUGS AND DRUG ADDICTION, REITOX NATIONAL FOCAL POINT, 2000 NATIONAL REPORT TO THE EMCDDA, TRENDS AND IN-DEPTH INFORMATION ON SELECTED ISSUES (2002); ANA SOFIA SANTOS ET AL., PORTUGAL INSTITUTE FOR DRUGS AND DRUG ADDICTION, REITOX NATIONAL FOCAL POINT, 2010 NATIONAL REPORT (2009 DATA) TO THE EMCDDA: “PORTUGAL” NEW DEVELOPMENTS, TRENDS AND IN-DEPTH INFORMATION ON SELECTED ISSUES (2010), [http://www.emcdda.europa.eu/system/files/publications/664/PT-NR2010\\_399489.pdf](http://www.emcdda.europa.eu/system/files/publications/664/PT-NR2010_399489.pdf) [hereinafter 2010 REPORT TO EMCDDA]).
60. ANA SOFIA SANTOS & ÓSCAR DUARTE, PORTUGAL INSTITUTE FOR DRUGS AND DRUG ADDICTION, REITOX NATIONAL FOCAL POINT, 2014 NATIONAL REPORT (2013 DATA) TO THE EMCDDA: “PORTUGAL” NEW DEVELOPMENTS, TRENDS 11 (2015), [http://www.emcdda.europa.eu/system/files/publications/996/2014\\_NATIONAL\\_REPORT.pdf](http://www.emcdda.europa.eu/system/files/publications/996/2014_NATIONAL_REPORT.pdf).
61. *Id.* at 106.
62. The prevalence of the use of marijuana among students aged 16 to 18 increased from 9.4 percent in 1999 to 15.1 percent in 2003. The corresponding statistics for heroin are 2.5 percent and 1.8 percent, respectively. CAITLIN HUGHES & ALEX STEVENS, THE EFFECTS OF DECRIMINALIZATION OF DRUG USE IN PORTUGAL 3, 5 (2007), [http://beckleyfoundation.org/wp-content/uploads/2016/04/paper\\_14.pdf](http://beckleyfoundation.org/wp-content/uploads/2016/04/paper_14.pdf) [hereinafter HUGHES & STEVENS 2007].
63. NATIONAL DRUG STRATEGY, *supra* note 27, ch. I(2).
64. Hughes thesis, *supra* note 3, at 191 (citing INSTITUTO DA DROGA E DA TOXICODPENDÊNCIA, RELATÓRIO ANUAL 2004 - A SITUAÇÃO DO PAÍS EM MATÉRIA DE DROGAS E TOXICODPENDÊNCIAS, VOLUME I - INFORMAÇÃO ESTATÍSTICA (2004)).
65. Russoniello, *supra* note 7, at 390 (citing Decreto-Lei 269-A/2002, DIÁRIO DA REPÚBLICA de 29.11.2002 (Port.)).
66. *Id.* at 395 (citing Decreto-Lei 17/2012, DIÁRIO DA REPÚBLICA de 26.1.2012 (Port.)).
67. RODRIGUES AUGUSTO, *supra* note 18, at 13.
68. SERVIÇO DE INTERVENÇÃO NOS COMPORTAMENTOS ADITIVOS E NAS DEPENDÊNCIAS, <http://www.sicad.pt/en/Paginas/default.aspx> (last visited Dec. 20, 2016).
69. Russoniello, *supra* note 7, at 395 (citing Decreto-Lei 17/2012, DIÁRIO DA REPÚBLICA de 26.1.2012 (Port.)).
70. RODRIGUES AUGUSTO, *supra* note 18, at 47, 61, 67-68.
71. Russoniello, *supra* note 7, at 395 (citing Decreto-Lei 17/2012, DIÁRIO DA REPÚBLICA de 26.1.2012 (Port.)).
72. Alexandra Kirby-Lepesh, *In Times of Austerity, a Threat to Portugal's Drug Policies*, OPEN SOCIETY FOUNDATIONS (Feb. 10, 2012), <https://www.opensocietyfoundations.org/voices/in-times-of-austerity-a-threat-to-portugals-drug-policies>.
73. THE CATO REPORT, *supra* note 1.
74. HCR No. 127.

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75. The four “key results” asserted in HCR No. 127 are addressed later in this chapter.
76. *See, e.g.*, Alex Kreit, *The Decriminalization Option: Should States Consider Moving from a Criminal to a Civil Drug Court Model?*, 2010 U. CHI. LEGAL F. 299, 300 n.1 (2010), <http://chicagounbound.uchicago.edu/cgi/viewcontent.cgi?article=1463&context=uclf> (characterizing the Cato report as “excellent”); *Treating, not punishing*, ECONOMIST (Aug. 27, 2009), <http://www.economist.com/node/14309861> (noting that the Cato report found that “nightmare scenarios” of increased drug abuse feared by opponents of drug decriminalization in Portugal did not materialize after decriminalization was enacted).
77. The Cato report includes the following description of the Cato Institute:
- Founded in 1977, the Cato Institute is a public policy research foundation dedicated to broadening the parameters of policy debate to allow consideration of more options that are consistent with the traditional American principles of limited government, individual liberty, and peace. To that end, the Institute strives to achieve greater involvement of the intelligent, concerned lay public in questions of policy and the proper role of government.
- The Institute is named for Cato’s Letters, libertarian pamphlets that were widely read in the American Colonies in the early 18th century and played a major role in laying the philosophical foundation for the American Revolution.
- Despite the achievement of the nation’s Founders, today virtually no aspect of life is free from government encroachment. A pervasive intolerance for individual rights is shown by government’s arbitrary intrusions into private economic transactions and its disregard for civil liberties.
- To counter that trend, the Cato Institute undertakes an extensive publications program that addresses the complete spectrum of policy issues. Books, monographs, and shorter studies are commissioned to examine the federal budget, Social Security, regulation, military spending, international trade, and myriad other issues. Major policy conferences are held throughout the year, from which papers are published thrice yearly in the Cato Journal. The Institute also publishes the quarterly magazine Regulation.
- In order to maintain its independence, the Cato Institute accepts no government funding. Contributions are received from foundations, corporations, and individuals, and other revenue is generated from the sale of publications. The Institute is a nonprofit, tax-exempt, educational foundation under Section 501(c)3 of the Internal Revenue Code.
- THE CATO REPORT, *supra* note 1, at 34.
78. *Id.* at 1 (emphasis added).
79. *See, e.g.*, OFFICE OF NATIONAL DRUG CONTROL POLICY, FACT SHEET: DRUG DECRIMINALIZATION IN PORTUGAL: CHALLENGES AND LIMITATIONS 1 (2010), [https://www.whitehouse.gov/sites/default/files/ondcp/Fact\\_Sheets/portugal\\_fact\\_sheet\\_8-25-10.pdf](https://www.whitehouse.gov/sites/default/files/ondcp/Fact_Sheets/portugal_fact_sheet_8-25-10.pdf) (finding that “[i]t is difficult . . . to draw any clear, reliable conclusions from the [Cato] report regarding the impact of Portugal’s drug policy changes” and disputing certain assertions made in the report); Caitlin Elizabeth Hughes & Alex Stevens, *A Resounding Success or a Disastrous Failure: Re-examining the Interpretation of Evidence on the Portuguese Decriminalization of Illicit Drugs*, 31 DRUG & ALCOHOL REV. 101, 108 (2012) <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.645.1699&rep=rep1&type=pdf> [hereinafter Hughes & Stevens 2012] (finding that the Cato report contained errors, noting for example, that the Cato report “asserted Portugal had the ‘absolute lowest lifetime prevalence rates for cannabis . . .’ (when Bulgaria, Malta and Romania all had lower lifetime prevalence than Portugal).”) See also the remainder of this chapter for further discussion.

80. THE CATO REPORT, *supra* note 1, at 1.
81. *Id.* at 9 (asserting that “decriminalization freed up resources that could be channeled into treatment and other harm-reduction policies”) and 28 (asserting that “[t]he resources that were previously devoted to prosecuting and imprisoning drug addicts are now available to provide treatment programs to addicts”).
82. *Id.* at 9 (asserting that “[e]ven before decriminalization, prosecution – and certainly imprisonment – for mere possession or use were rare, but not unheard of”).
83. *See, e.g.*, Hughes & Stevens 2012, *supra* note 79, at 100-111. See also the remainder of this chapter for further discussion.
84. See the remainder of this chapter for further discussion.
85. OFFICE OF NATIONAL DRUG CONTROL POLICY, *supra* note 79.
86. Although the fact sheet uses the term “legalization,” Portugal’s decriminalization scheme did not legalize drug possession or use. Rather, the scheme treats drug possession as an administrative violation rather than as a criminal offense. For further discussion on the differences between legalization and decriminalization, see Chapter 2.
87. OFFICE OF NATIONAL DRUG CONTROL POLICY, *supra* note 79, at 1-2 (citations omitted).
88. *Id.* at 2 (citations omitted). It should be noted that although the source cited by the Office of National Drug Control Policy, a 2009 statistical table from the European Monitoring Centre for Drugs and Drug Addiction, characterizes the deaths reported by Portugal as “drug induced deaths” in a table that similarly lists twenty-nine other European Union states, the table also notes that, for Portugal specifically, these data include all cases in which a post mortem analysis tests positive for the *presence* of any illicit drug, which is likely to produce an overestimate compared to other reporting formats that include only deaths specifically *caused* by drug use. *Statistical bulletin 2009 Table DRD-2. Number of drug-induced deaths recorded in EU Member States according to national definitions, Part (i) Total drug-induced deaths, 1995 to 2007*, EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, <http://www.emcdda.europa.eu/stats09/drdrtab2a> (last updated July 21, 2009) [hereinafter *EMCDDA Table DRD-2*].
89. Portugal’s decriminalization scheme did not legalize drug possession or use. *See supra* note 86 and accompanying text.
90. OFFICE OF NATIONAL DRUG CONTROL POLICY, *supra* note 79, at 2.
91. The report disputed the Cato report’s findings and characterized the decriminalization of drugs in Portugal as “disastrous.” MANUEL PINTO COELHO, ASSOCIAÇÃO PARA UM PORTUGAL LIVRE DE DROGAS [ASSOCIATION FOR A DRUG FREE PORTUGAL, OR APLD], THE “RESOUNDING SUCCESS” OF PORTUGUESE DRUG POLICY: THE POWER OF AN ATTRACTIVE FALLACY 14 (2010), <http://www.wfad.se/images/articles/portugal%20the%20resounding%20success.pdf>. Dr. Coelho has served as a Portuguese abstinence-based drug treatment provider and chair of the Association for a Drug Free Portugal. Hughes & Stevens 2012, *supra* note 79, at 102.
92. Hughes & Stevens 2012, *supra* note 79, at 109.
93. *Id.* at 103.
94. *Id.*

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95. *Id.* at 108.
96. *Id.* at 105.
97. *Id.* at 110.
98. *Id.* at 110-111 (citations omitted).
99. Laqueur, *supra* note 17, at 747 (citation omitted).
100. *Id.* at 748.
101. *Id.*
102. *Id.* at 749.
103. *Id.* at 767-768.
104. *Id.* at 749, 756-757.
105. *Id.* at 758.
106. *Id.*
107. Quantities for a ten-day supply for personal consumption include one gram of heroin, one gram of ecstasy, one gram of amphetamines, two grams of cocaine, twenty-five grams of marijuana, five grams of hashish, and one half of one gram of Delta-9-THC. *Id.* at 752; Portaria 94/96, art. IV(9), mapa, DIÁRIO DA REPÚBLICA de 26.3.1996 (Port.); EMCDDA QUANTITY, *supra* note 45, at 13.
108. Laqueur, *supra* note 17, at 752.
109. *See supra* note 74 and accompanying text.
110. HCR No. 127.
111. According to data from the EMCDDA, lifetime prevalence for cannabis use among Portuguese adults was 7.6 percent in 2001 (the year decriminalization took effect) and 11.7 percent in 2007. Although data are not available for all other European countries for those same years, available data indicate that rates of cannabis use ranged from a low of 1.7 percent for Romania in 2004 to 38.6 percent in Denmark in 2008. *Statistical bulletin 2009 Table GPS-1. Lifetime prevalence of drug use among all adults (aged 15 to 64 years) in nationwide surveys among the general population*, EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, <http://www.emcdda.europa.eu/stats09/gpstab1a> (last updated June 30, 2009) [hereinafter EMCDDA *Table GPS-1*].
112. *See, e.g.*, Laqueur, *supra* note 17, at 767. It should be noted, however, that some data suggest that heroin use in Portugal decreased in years following decriminalization, while other data suggest a slight increase. *See infra* note 137 and accompanying text.
113. OFFICE OF NATIONAL DRUG CONTROL POLICY, *supra* note 79. *See infra* notes 115-116 and accompanying text.
114. *See infra* notes 115-116 and accompanying text.
115. OFFICE OF NATIONAL DRUG CONTROL POLICY, *supra* note 79. The data indicate that lifetime use rates increased in Portugal between 2001 and 2007 among the general population aged 15 to 64 for cannabis from 7.6 percent to 11.7 percent; for cocaine from 0.9 percent to 1.9 percent; for amphetamines from 0.5 percent to 0.9 percent; for ecstasy from 0.7 percent to 1.3 percent; and for LSD from 0.4 percent to 0.6 percent. The data further indicate that lifetime use prevalence rates

- among young adults aged 15 to 34 increased between those same years for cannabis from 12.4 percent to 17.0 percent; for cocaine from 1.3 percent to 2.8 percent; for amphetamines from 0.6 percent to 1.3 percent; for ecstasy from 1.4 percent to 2.6 percent; and for LSD from 0.6 percent to 0.9 percent. EMCDDA *Table GPS-1*, *supra* note 111; *Statistical bulletin 2009 Table GPS-2. Lifetime prevalence of drug use among young adults (aged 15 to 34 years) in nationwide surveys among the general population*, EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, <http://www.emcdda.europa.eu/stats09/gpstab2> (last updated June 30, 2009).
116. OFFICE OF NATIONAL DRUG CONTROL POLICY, *supra* note 79. The data indicate that use during the last 30 days increased in Portugal between 2001 and 2007 among ages 15 to 64 for cocaine from 0.1 percent to 0.3 percent; and for LSD from 0.0 percent to 0.1 percent. The data further indicate that use during the last 30 days increased in Portugal between those same years among the 15-34 age group for cannabis from 4.4 percent to 4.5 percent; for cocaine from 0.3 percent to 0.6 percent; and for amphetamines from 0.1 percent to 0.2 percent. *Statistical bulletin 2009 Table GPS-5. Last month prevalence of drug use among all adults (aged 15 to 64 years) in nationwide surveys among the general population*, EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, <http://www.emcdda.europa.eu/stats09/gpstab5> (last updated June 30, 2009); *Statistical bulletin 2009 Table GPS-6. Last month prevalence of drug use among young adults (aged 15 to 34 years) in nationwide surveys among the general population*, EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, <http://www.emcdda.europa.eu/stats09/gpstab6> (last updated June 30, 2009).
117. EUROPEAN SCHOOL SURVEY PROJECT ON ALCOHOL AND OTHER DRUGS, THE 2011 ESPAD REPORT: SUBSTANCE USE AMONG STUDENTS IN 36 EUROPEAN COUNTRIES 357 tbl.59 (2011), [http://www.espad.org/Uploads/ESPAD\\_reports/2011/The\\_2011\\_ESPAD\\_Report\\_FULL\\_2012\\_10\\_29.pdf](http://www.espad.org/Uploads/ESPAD_reports/2011/The_2011_ESPAD_Report_FULL_2012_10_29.pdf) [[https://web-beta.archive.org/web/20160801055713/http://www.espad.org:80/Uploads/ESPAD\\_reports/2011/The\\_2011\\_ESPAD\\_Report\\_FULL\\_2012\\_10\\_29.pdf](https://web-beta.archive.org/web/20160801055713/http://www.espad.org:80/Uploads/ESPAD_reports/2011/The_2011_ESPAD_Report_FULL_2012_10_29.pdf)].
118. *Id.* at 360 tbl.62.
119. *Id.* at 358 tbl.60.
120. *Id.* at 362 tbl.64.
121. The data indicate that 16 percent of Portuguese high school students surveyed had used marijuana or hashish during their lifetime. The European average was 17 percent. *Id.* at 358 tbl.60.
122. The data indicate that 8 percent of Portuguese high school students surveyed had used illicit drugs other than marijuana or hashish during their lifetime. The European average was 6 percent. *Id.* at 362 tbl.64.
123. The ESPAD report characterized changes in one of three ways: Significant increase, no change, or significant decrease. In 2007, 14 percent of Portuguese high school students surveyed reported using illicit drugs during their lifetime; in 2011, 19 percent so reported. *Id.* at 134, fig. 25a; 377, table 59. *Id.* at 134 fig.25a, 377 tbl.59.
124. In 2007, 6 percent of Portuguese high school students surveyed reported using marijuana or hashish during the last 30 days; in 2011, 9 percent so reported. *Id.* at 140 fig.27a, 360 tbl.62.
125. *Id.* at 142 fig.28a, 362 tbl.64.
126. HCR No. 127. Although the resolution passed by the Hawaii Legislature does not specify a time frame in which these decreases are reported to have occurred, the Cato report specifies that:

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For students in the 7th-9th grades (13-15 years old), the rate [of lifetime drug use] decreased from 14.1 percent in 2001 to 10.6 percent in 2006. For those in the 10th-12th grades (16-18 years old), the lifetime prevalence rate, which increased from 14.1 percent in 1995 to 27.6 percent in 2001, the year of decriminalization, has decreased subsequent to decriminalization, to 21.6 percent in 2006. For the same groups, prevalence rates for psychoactive substances have also decreased subsequent to decriminalization.

THE CATO REPORT, *supra* note 1, at 11-12.

127. The most recent data currently available from the European Monitoring Centre for Drugs and Drug Addiction were collected in 2012 and are grouped to reflect lifetime prevalence of drug use in Portugal among persons aged 15-64, 15-24, 25-34, 35-44, 45-54, and 55-64. *Statistical Bulletin 2016*, EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, <http://www.emcdda.europa.eu/data/stats2016> (last visited Dec. 21, 2016). Data available in 2007 indicate that drug use among students in Portugal aged 15 to 16 increased between 1999 and 2003 for cannabis from 8 percent to 15 percent; for ecstasy from 2 percent to 4 percent; for LSD and other hallucinogens from 1 percent to 2 percent; and for cocaine from 1 percent to 3 percent. *Statistical bulletin 2007 Table EYE-3. School surveys: percentage lifetime prevalence of psychoactive substance use among students aged 15-16 years*, EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, <http://www.emcdda.europa.eu/stats07/eyetab03> (last updated Nov. 8, 2007).
128. ANA SOFIA SANTOS ET AL., PORTUGAL INSTITUTE FOR DRUGS AND DRUG ADDICTION, REITOX NATIONAL FOCAL POINT, 2012 NATIONAL REPORT (2011 DATA) TO THE EMCDDA: "PORTUGAL" NEW DEVELOPMENTS, TRENDS AND IN-DEPTH INFORMATION ON SELECTED ISSUES 29 graph 3 (2012), [http://www.emcdda.europa.eu/system/files/publications/766/Portugal\\_NR2012\\_443595.pdf](http://www.emcdda.europa.eu/system/files/publications/766/Portugal_NR2012_443595.pdf).
129. Hughes & Stevens 2012, *supra* note 79, at 107 fig.4.
130. *Id.* at 107 (emphasis in original).
131. The numbers of deaths in Portugal in which post-mortem toxicological tests detected the presence of illicit substances were 369 in 1999, 318 in 2000, 280 in 2001, 156 in 2002, 152 in 2003, 156 in 2004, 219 in 2005, 216 in 2006, and 314 in 2007. Laqueur, *supra* note 17, at 769 fig.2; EMCDDA *Table DRD-2*, *supra* note 88.
132. HCR No. 127.
133. THE CATO REPORT, *supra* note 1, at 16.
134. *Id.* at 16-17 (emphasis in original) (citing HUGHES & STEVENS 2007, *supra* note 62, at 3).
135. HUGHES & STEVENS 2007, *supra* note 62, at 2.
136. *Id.*
137. Portuguese authorities recorded that the percentage of persons referred to Commissions for the Dissuasion of Drug Addiction for heroin decreased from 33 percent in 2001 to 15 percent in 2005, while the referrals from cannabis increased from 47 percent to 65 percent in those same years. *Id.* at 3 tbl.2. However, a 2010 report found that the percentage of Portugal's population that self-reported using heroin slightly increased between 2001 and 2007 among people aged 15-64 in each of three surveyed categories. The report found that reported heroin use increased from 0.7 percent to 1.1 percent for "lifetime use" (heroin used at least once during a person's lifetime);



from 0.2 percent to 0.3 percent for use during the previous 12 months; and from 0.1 percent to 0.2 percent during the previous 30 days. 2010 REPORT TO EMCDDA, *supra* note 59, at 23 tbl.3.

138. HUGHES & STEVENS 2007, *supra* note 62, at 3.
139. HCR No. 127.
140. Laqueur, *supra* note 17, at 749, 756-757.
141. *Id.* at 758. The Bureau notes that collection of the data that would be necessary to determine the causes and relevance of the decrease in drug trafficking convictions in Portugal, in relation to patterns of drug use and in the context of decriminalization of drug possession and use, exceed the scope of this study.

## Chapter 4

### PORTUGAL'S POLICY v. HAWAII'S LEGAL FRAMEWORK

In chapter 3, we addressed the Legislature's request, expressed in House Concurrent Resolution No. 127, H.D. 1, S.D. 1 (2016) (hereinafter HCR No. 127) that we review "the current national drug policy of Portugal pertaining to the illegal possession of drugs for personal use." This chapter addresses the Legislature's request that our review focus "on the use of [Portugal's drug] policy as a potential model for the decriminalization of certain or all" of the "existing criminal drug offenses in Hawaii that are class C felonies or lower offenses and pertain to the illegal possession of a harmful drug, detrimental drug, marijuana, or marijuana concentrate, as defined in section 712-1240, Hawaii Revised Statutes."<sup>1</sup> Any attempt to determine whether Portugal's national drug strategy can serve as a model for Hawaii must first explore existing Hawaii drug law and the framework in which it operates. As this chapter will show, the potential for emulation of Portugal's model is limited.

#### CONFLICTING LEGAL AUTHORITY IN A FEDERAL SYSTEM OF GOVERNMENT

As noted previously, drug control policy and law in Portugal are established by the national government and apply, as relevant here, uniformly throughout that nation.<sup>2</sup> However, in the United States, statutes regulating or prohibiting the possession and use of drugs have been established both by the federal government and by individual states, including Hawaii. Because federal law supersedes state law,<sup>3</sup> the federal government may enforce in any state a federal law prohibiting the same conduct that has been legalized or decriminalized under a state law. The United States Supreme Court has specifically ruled that the federal government may enforce federal drug prohibitions regarding activities that are explicitly authorized under state law, even when those activities do not cross state lines or involve federal property.<sup>4</sup>

The federal government regulates and prohibits certain drugs under the Comprehensive Drug Abuse Prevention and Control Act of 1970, Title II of which is the Controlled Substances Act (CSA).<sup>5</sup> Although the cultivation and use of marijuana for medical purposes is legal under certain conditions in other United States jurisdictions including Hawaii, twenty-seven other states,<sup>6</sup> the District of Columbia, and the United States territories of Guam and Puerto Rico, the federal government has classified marijuana as a Schedule I controlled substance, meaning that the federal government considers marijuana to have a high potential for abuse and no currently accepted medical use in treatment in the United States.<sup>7</sup> This Schedule I classification renders the manufacture, distribution, or possession of marijuana a federal criminal offense. In 2005, the Supreme Court rejected a challenge to the CSA regarding the medical use of marijuana in California as authorized under California law and, by doing so, upheld the supremacy of federal law over state law regarding the regulation and prohibition of drugs.<sup>8</sup> The Court ruled in *Gonzales v. Raich* that the power vested in Congress under Article I, Section 8, of the federal

Constitution “[t]o make all Laws which shall be necessary and proper for carrying into Execution” its authority to “regulate Commerce with foreign Nations, and among the several States” includes the power to prohibit the local cultivation and use of marijuana even when conducted in compliance with California law.<sup>9</sup>

The *Raich* court held that “we have no difficulty concluding that Congress had a rational basis for believing that failure to regulate the intrastate manufacture and possession of marijuana would leave a gaping hole in the CSA[,]”<sup>10</sup> and that “the mere fact that marijuana – like virtually every other controlled substance regulated by the CSA – is used for medicinal purposes cannot possibly serve to distinguish it from the core activities regulated by the CSA.”<sup>11</sup> The Court further held that the Supremacy Clause in Article VI of the Constitution “unambiguously provides that if there is any conflict between federal and state law, federal law shall prevail.”<sup>12</sup>

The Court recently reiterated in *Taylor v. United States*<sup>13</sup> that the Commerce Clause in Article I, Section 8 of the federal Constitution gives Congress the authority to regulate the national market for marijuana, including the authority to proscribe the purely intrastate production, possession, and sale of marijuana, and further held that federal authority also extends to activities that affect the illegal drug trade.<sup>14</sup> The Court held in *Taylor* that the Commerce Clause authorizes Congress to criminalize the theft or attempted theft of drugs that are regulated or prohibited under federal law, and of proceeds derived from the sale of those drugs, because “[u]nder [*Raich*], the market for marijuana, including its intrastate aspects, is [‘]commerce over which the United States has jurisdiction[.]’”<sup>15</sup> Thus, the federal government may regulate or prohibit drugs and enforce prohibitions against drug-related activities within a state that has explicitly authorized those activities under state law, even where those activities take place entirely within the boundary of a single state. Federal authority also extends to activities that affect the drug trade, such as the robbery or attempted robbery of illegal drug dealers.

It should be noted that the United States Department of Justice has previously indicated that it is unlikely to enforce the CSA with regard to medical marijuana in states that have legalized the use of marijuana for medical purposes and which implement strong and effective regulatory and enforcement systems.<sup>16</sup> However, contrary to the assertion in HCR No. 127, the Department of Justice has not “deferred” its right to challenge state marijuana laws. Indeed, the Department’s policies and priorities provide no legal defense to a violation of federal law<sup>17</sup> and are subject to change under future presidential administrations. The fact remains that the possession of any amount of marijuana remains illegal under federal law except under very limited circumstances.<sup>18</sup> Therefore, a state decriminalization scheme modeled after Portugal’s drug policy may face legal uncertainty in our federal system of government. Even if the State were to adopt laws that emulate the Portuguese model by decriminalizing the use and possession of personal use quantities of certain illicit drugs, federal law would control if the federal government chose to enforce a federal law that prohibits the use and possession of those same drugs or that otherwise conflicted with state law.

## **A SURVEY OF HAWAII DRUG OFFENSES UNDER THE SCOPE OF THE RESOLUTION**

HCR No. 127 also requested the Bureau to survey “existing criminal drug offenses in Hawaii that are class C felonies or lower offenses and pertain to the illegal possession of a harmful drug, detrimental drug, marijuana, or marijuana concentrate, as defined in section 712-1240, Hawaii Revised Statutes.”<sup>19</sup> Accordingly, by definition, HCR No. 127 excluded those offenses relating to “dangerous drugs,” which include “hard” drugs such as heroin, cocaine, and methamphetamine,<sup>20</sup> from consideration for possible decriminalization.

Portugal’s law decriminalized the possession of *all* illicit drugs in quantities that the possessing individual could reasonably be expected to consume in 10 days, although it is not always clear what amounts of illicit drugs fall within that limit.<sup>21</sup> Similarly, while HCR No. 127 asked the Bureau to analyze “the potential impact on administrative and judicial systems of state government of decriminalizing” the “illegal possession of [certain] drugs for personal use in Hawaii,” the resolution did not define or quantify what “possession of drugs for personal use” means. Hawaii laws that apply to the possession of illegal drugs do not generally distinguish between “possession for personal use” and “possession with intent to distribute,”<sup>22</sup> although higher penalties are authorized based on the amount of drugs in an offender’s possession.

Further, the scope expressed in HCR No. 127 excludes the possible decriminalization of certain drug offenses based on the maximum level of punishment that may be imposed upon the commission of those offenses under current law. Under the Hawaii Revised Statutes (HRS), crimes are of three grades: felonies, misdemeanors, and petty misdemeanors.<sup>23</sup> Felonies include the following classes: class A, class B, and class C.<sup>24</sup> As previously noted, HCR No. 127 applies to drug offenses that are class C felonies or lower offenses. Class A and class B felonies are “higher offenses,” punishable by terms of imprisonment and fines higher than the penalties for class C felony offenses,<sup>25</sup> and are thus excluded from the scope of the resolution. Class C felonies, misdemeanors, and petty misdemeanors are punishable by terms of imprisonment of up to five years, one year, and thirty days, respectively, as well as fines of up to \$10,000, \$2,000, and \$1,000, respectively.<sup>26</sup>

Table 4-1 found in Appendix B lists the relevant drug offenses identified by the survey we undertook pursuant to HCR No. 127. We note that section 712-1247, HRS, and section 712-1248, HRS, are not solely “drug possession laws.” This is because these sections not only prohibit drug possession, but also prohibit other illegal activity, such as drug distribution or sales.

## **THE LEGAL PRIORITY OF HEALTH CARE**

As noted in Chapter 3, Portugal’s constitution guarantees “access by every citizen, regardless of his economic situation, to preventive, curative and rehabilitative medical care.”<sup>27</sup> In contrast, while the United States Constitution grants Congress the power to “provide for the . . . general Welfare of the United States,” it does not explicitly require the federal government to

provide health care.<sup>28</sup> The Hawaii State Constitution provides that the State “shall provide for the protection and promotion of the public health,” but does not require the State to directly provide every person with health care.<sup>29</sup> One observer has noted that “[t]he emphasis on health as a common good (i.e., population health concerns) [e.g., in Portugal] distinguishes public health from individually oriented health care [e.g., in Hawaii].”<sup>30</sup>

Hawaii law does promote health care in some respects, such as by requiring employers to provide their full-time employees health insurance coverage in group health plans.<sup>31</sup> Employees may engage in collective bargaining to negotiate for the terms of their health insurance.<sup>32</sup> Nevertheless, since access to health care is not *guaranteed* by the federal or state constitution, access to individual health care may be viewed as less of a *legal* priority for policymakers in Hawaii than it is in Portugal. As a practical matter, this may impact the availability of treatment for drug use in the State, which would be an essential component of any decriminalization scheme modeled on Portugal’s national drug strategy.<sup>33</sup>

## **EXISTING ALTERNATIVES TO INCARCERATION AVAILABLE UNDER HAWAII LAW**

HCR No. 127 contemplates decriminalization as a way to possibly treat, instead of incarcerate, individuals who commit certain drug possession offenses. However, decriminalization is not the only path to treatment. As we will see in the next chapter from court statistics,<sup>34</sup> not everyone who commits a relevant drug offense in Hawaii is incarcerated under present law. As discussed below, a criminal defendant facing prosecution for a jailable offense may be able to avoid imprisonment under certain circumstances, such as when the defendant agrees to plead guilty or no contest to the alleged offense and to undergo substance abuse treatment. Thus, alternatives to imprisonment are already available under Hawaii’s criminal justice system, and not only for those accused or convicted of committing drug offenses. As also discussed below, the use of those alternatives can lead to positive results for some individuals, although there is still room for improvement.

### **Deferred Acceptance of Defendant’s No Contest or Guilty Plea**

Typically, when a criminal defendant pleads guilty or no contest to an offense, the court accepts the plea, convicts the defendant, and imposes a sentence. However, the court, upon a proper motion by the defendant, may defer the acceptance of the defendant’s plea and delay judicial proceedings<sup>35</sup> for an amount of time that varies based on the severity of the alleged offense.<sup>36</sup> The court has the discretion to require the offender to comply with certain conditions in exchange for the deferred acceptance of the plea. One of the conditions may include a requirement that the defendant undergo substance abuse assessment and treatment.<sup>37</sup> If the defendant meets all applicable conditions imposed by the court, the charge is dismissed after the corresponding passage of time,<sup>38</sup> and the defendant may eventually apply for the expungement of records of the arrest.<sup>39</sup>

## Conditional Discharge

When a criminal defendant pleads guilty or is found guilty of certain drug offenses, including some offenses involving dangerous, harmful, or detrimental drugs,<sup>40</sup> the court, without entering a judgment of guilt and with the consent of the defendant, may defer further proceedings and place the accused on probation upon terms and conditions established by the court.<sup>41</sup> Upon violation of a term or condition, the court may enter an adjudication of guilt.<sup>42</sup> However, if the defendant fulfills all terms and conditions, the court is required to discharge the defendant and dismiss the proceedings against the defendant.<sup>43</sup> Further, if the defendant against whom proceedings were dismissed was not over the age of twenty-one at the time of arrest, the court, after application from the defendant, is required to enter an order to expunge from all official records any recordation relating to the person's arrest, indictment, or information, trial, finding of guilt, dismissal, and discharge.<sup>44</sup>

## Probation and Expungement of Record of Conviction for Certain Drug Possession Offenses

An offender convicted of violating certain laws that apply to the possession of illegal drugs, even if previously convicted once before for a specified drug-related offense, may be eligible for probation and the expungement of the applicable criminal record if the offender:

- Is nonviolent, as demonstrated in the defendant's criminal history;
- Has been assessed by a certified substance abuse counselor to be in need of substance abuse treatment due to dependency or abuse; and
- Enters substance abuse treatment.<sup>45</sup>

After successful compliance with all the terms of probation and the completion of substance abuse treatment, an offender who has never been previously sentenced under section 706-622.5, HRS, relating to sentencing for drug offenders, is eligible to have his or her record of conviction for the drug possession or use offense expunged.<sup>46</sup>

## Probation

When a court sentences a convicted defendant to probation, the court, at its discretion, may require the offender to undergo, as a condition of probation, "available . . . assessment and treatment for substance abuse dependency, and remain in a specified facility if required for that purpose."<sup>47</sup> Such a condition may be imposed even if the offense for which the defendant was convicted was not an offense relating to drug or other substance abuse.

While courts have the *discretion* to impose treatment, treatment is not imposed in every case. One version of probation in this State is Hawaii's Opportunity Probation with Enforcement

(HOPE), which has been in place since now-retired circuit court Judge Steven S. Alm initiated its use in 2004.<sup>48</sup> HOPE is targeted toward offenders – including drug offenders – who are at risk of becoming repeat offenders.<sup>49</sup> HOPE probationers undergo frequent and random drug testing as a condition of their probation. A positive drug test or an offender's failure to appear for a drug test may result in a jail sanction that lasts between two and fifteen days.<sup>50</sup> HOPE recognizes that not all drug abusers are addicts.<sup>51</sup> Under HOPE, substance abuse assessment, treatment, and drug court interventions are typically reserved for offenders who request treatment or who demonstrate through multiple violations of conditions of probation that they need treatment or drug court.<sup>52</sup> An offender who fails to complete treatment faces a jail sanction.<sup>53</sup>

## Drug Court

A drug court program is considered an “alternative program” in lieu of imprisonment.<sup>54</sup> There are approximately 2,734 drug court programs in the country,<sup>55</sup> including in Hawaii, that are conducted “in lieu of traditional justice case processing.”<sup>56</sup> For at least one year, offenders who participate in drug court programs are:

- Provided with intensive treatment and other services they require to get and stay clean and sober;
- Held accountable by a drug court judge for meeting their obligations to the court, society, themselves, and their families;
- Regularly and randomly tested for drug use;
- Required to appear in court frequently so that the judge may review their progress; and
- Rewarded for doing well or sanctioned when they do not live up to their obligations.<sup>57</sup>

Drug court programs have been in place in Hawaii since 1995.<sup>58</sup> Judge Alm describes the program in Honolulu as follows:

[A] client sees the judge once a week, every week, to start. They are assigned a counselor and a case manager and given substance abuse treatment. Drug court clients typically live in an Oxford Clean and Sober House (or at the YMCA if they are truly indigent and have no family support on their release from jail).<sup>59</sup>

Notably, under Hawaii law, a person may not be considered for drug court if he or she has been convicted of a class A felony for which a sentence of imprisonment is mandatory.<sup>60</sup> Drug court programs in Hawaii are intended for high-risk offenders who have failed under community supervision or HOPE probation.<sup>61</sup> The drug court programs are usually the last resort before an offender faces prison.<sup>62</sup> Due to the costly and intensive nature of the drug court programs, Hawaii's programs can only admit a limited number of offenders at a time. For example, in September of 2014, there were only one hundred ninety-seven clients in the drug

court program in Honolulu.<sup>63</sup> Estimated annual drug court program expenditures statewide have remained fairly constant since fiscal year 2010-2011, as shown in Table 4-2 in Appendix B.<sup>64</sup> Any effort to increase the number of eligible offenders enrolled in the program would conceivably need additional funding.

### **Treatment or Imprisonment: Potential Limitations**

There may be some drawbacks that accompany any program that allows defendants or offenders to choose drug treatment over imprisonment. For example, American drug court programs have been criticized as “overinclusive” because they may “cause individuals who do not have drug abuse or addiction problems and thus are not in need of drug treatment to use precious treatment resources in order to avoid the consequences of a conviction.”<sup>65</sup> Further, persons with history of violent offenses are often prevented from entering drug court, even if they could significantly benefit from the program.<sup>66</sup>

Judge Alm, aware of some of the criticisms of drug court, initiated some adjustments to Oahu’s version of the drug court program in 2011, by attempting to admit into the program the individuals who most need it, including some individuals who may have committed violent offenses.<sup>67</sup> Nevertheless, the statutory prohibition on placing class A felony offenders in drug court remains.<sup>68</sup> Notably, while all class A felonies are serious offenses, not all such felonies are acts of violence.<sup>69</sup>

Thus, while drug treatment programs are available to some defendants through Hawaii’s judicial system, not all offenders can receive treatment due to limited resources. Moreover, other offenders who conceivably could benefit more from treatment than others might not be eligible to participate in treatment programs.

### **ENDNOTES**

1. House Concurrent Resolution No. 127.
2. *See supra* Chapter 3 notes 9, 11-12, 37, and accompanying text.
3. The Supremacy Clause in Article VI of the Constitution of the United States of America provides that federal law shall prevail in the event of any conflict between federal and state law.
4. *Gonzales v. Raich*, 545 U.S. 1 (2005).
5. Controlled Substances Act, 21 U.S.C. § 812 et seq.
6. In addition to Hawaii, states that have legalized the use of marijuana for medical purposes under certain conditions include Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Illinois, Maine, Maryland, Massachusetts, Michigan, Minnesota, Montana, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, Vermont, and Washington. *See* Table 1 in *State Medical Marijuana Laws*, NAT. COUNCIL ST. LEGISLATURES (Nov. 9, 2016), <http://www.ncsl.org/research/health/state-medical-marijuana-laws.aspx#3>. Alaska, California,



Colorado, Maine, Massachusetts, Nevada, Oregon, Washington, and the District of Columbia have also legalized adult recreational use of marijuana under certain conditions. *Marijuana Overview*, NAT. COUNCIL ST. LEGISLATURES (Nov. 10, 2016), <http://www.ncsl.org/research/civil-and-criminal-justice/marijuana-overview.aspx>. See also “United States: Decriminalization of Marijuana for Non-medical Use” in Chapter 6 of this report for further discussion.

7. The Controlled Substances Act establishes five categories, or “schedules,” into which controlled substances are placed. These schedules are updated on an annual basis and are found at 21 C.F.R. § 1308.11 et seq., as amended by subsequent revisions published in the Federal Register. The federal position is that marijuana has not met the rigorous safety and efficacy standards of the United States Food and Drug Administration’s approval process and that smoking marijuana is a particularly unsafe delivery system that produces harmful effects. 21 U.S.C. §§ 812(b), (c); *Office of National Drug Control Policy Answers to Frequently Asked Questions about Marijuana*, WHITEHOUSE.GOV <http://www.whitehouse.gov/ondcp/frequently-asked-questions-and-facts-about-marijuana>.
8. *Raich*, 545 U.S. at 29.
9. *Id.* at 2.
10. *Id.* at 19.
11. *Id.* at 25.
12. *Id.* at 26.
13. *Taylor v. United States*, No. 14-6166, 2016 WL (U.S. June 20, 2016).
14. *Id.*
15. *Id.* at 6.
16. In a memorandum issued on August 29, 2013, the Department of Justice enumerated the following specific nationwide enforcement priorities regarding marijuana:
  - Preventing the distribution of marijuana to minors;
  - Preventing revenue from the sale of marijuana from going to criminal enterprises, gangs, and cartels;
  - Preventing the diversion of marijuana from states where it is legal under state law in some form to other states;
  - Preventing state-authorized marijuana activity from being used as a cover or pretext for the trafficking of other illegal drugs or other illegal activity;
  - Preventing violence and the use of firearms in the cultivation and distribution of marijuana;
  - Preventing drugged driving and the exacerbation of other adverse public health consequences associated with marijuana use;
  - Preventing the growing of marijuana on public lands and the attendant public safety and environmental dangers posed by marijuana production on public lands; and
  - Preventing marijuana possession or use on federal property.

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The memorandum noted that the Department of Justice “has not historically devoted resources to prosecuting individuals whose conduct is limited to possession of small amounts of marijuana for personal use on private property[,]” but has generally left enforcement to state and local authorities unless the marijuana-related activities implicated the priorities enumerated above.

The Department of Justice indicated that it is inclined to defer to state and local enforcement in states that authorize the production, distribution, and possession of medical marijuana only if the affected states “implement strong and effective regulatory and enforcement systems that will address the threat those state laws could pose to public safety, public health, and other law enforcement interests.”

The memorandum emphasized the need for effective implementation of state regulatory schemes: “Jurisdictions that have implemented systems that provide for regulation of marijuana activity must provide the necessary resources and demonstrate the willingness to enforce their laws and regulations in a manner that ensures they do not undermine federal enforcement priorities.” The memorandum warned that states that enact marijuana legalization schemes but fail to implement them effectively could be subject to federal intervention: “If state enforcement efforts are not sufficiently robust to protect against [the harms that are the bases of the enforcement priorities enumerated above], the federal government may seek to challenge the regulatory structure itself in addition to continuing to bring individual enforcement actions, including criminal prosecutions, focused on those harms. . . .” Memorandum from Deputy Attorney General James M. Cole to all United States Attorneys (Aug. 29, 2013), <http://www.justice.gov/iso/opa/resources/3052013829132756857467.pdf>.

17. The 2013 United States Department of Justice memorandum explicitly stated that it is intended “solely as a guide to the exercise of investigative and prosecutorial discretion[,]” but “does not alter in any way the Department’s authority to enforce federal law, including federal laws relating to marijuana, regardless of state law.” The memorandum further cautioned that “[n]either the guidance herein nor any state or local law provides a legal defense to a violation of federal law, including any civil or criminal violation of the [Controlled Substances Act,]” and that investigation and prosecution that serve an important federal interest may continue regardless of a state’s strong and effective regulatory system for marijuana. *Id.*
18. The federal government has designated the National Institute on Drug Abuse (NIDA) within the National Institutes of Health as the agency responsible for overseeing the cultivation of marijuana for medicinal research. NIDA contracts with the University of Mississippi to grow marijuana for use in research studies. *See, e.g.*, Marijuana Research with Human Subjects, U.S. FOOD & DRUG ADMIN. <http://www.fda.gov/NewsEvents/PublicHealthFocus/ucm421173.htm> (last updated Sept. 14, 2015).
19. HCR No. 127. A harmful drug is “any substance or immediate precursor defined or specified as a ‘Schedule III substance’ or a ‘Schedule IV substance’ by chapter 329 [Hawaii Revised Statutes], or any marijuana concentrate except marijuana and a substance specified in section 329-18(c)(14) [Hawaii Revised Statutes].” A detrimental drug is “any substance or immediate precursor defined or specified as a “Schedule V substance” by chapter 329, or any marijuana.” Section 712-1240, Hawaii Revised Statutes (HRS).
20. A dangerous drug is “any substance or immediate precursor defined or specified as a ‘Schedule I substance’ or a ‘Schedule II substance’ by chapter 329 [HRS], or a substance specified in section 329-18(c)(14) [HRS], except marijuana or marijuana concentrate.” Section 712-1240, HRS. *See*

Chapter 5 of this report for further discussion on dangerous drugs, harmful drugs, and detrimental drugs.

21. Except for seven substances, Portugal's law does not specify what constitutes a "10-day" supply. *See supra* Chapter 3, notes 45-46 and accompanying text.
22. One exception is found in section 712-1249.6, HRS, which prohibits, among other activities, possession with intent to distribute an illicit drug in or near a school. Since Portugal's law does not appear to be designed to eliminate criminal penalties for distribution of illicit drugs to others, we assume that the Legislature does not intend to decriminalize the offense of promoting a controlled substance in, on, or near schools, school vehicles, public parks, or public housing projects or complexes under section 712-1249.6, HRS, because that offense prohibits possession *with intent to distribute*. We note that one type of drug possession prohibited under federal law is the possession "with intent . . . to distribute" illicit drugs, and that law is unrelated to where the offense took place. 21 U.S.C. § 841.
23. Section 701-107, HRS.
24. Section 701-107, HRS. Murder offenses are not listed among class A, class B, or class C, but fall under their own separate categories.
25. The commission of class A and class B felonies are punishable by terms of imprisonment of up to twenty years and ten years, respectively, as well as fines of up to \$50,000 and \$25,000, respectively. Sections 706-640, 706-759, and 706-660, HRS.
26. Sections 706-640, 706-660, and 706-663, HRS.
27. CONSTITUTION OF THE REPUBLIC, SEVENTH REVISION, 2005, art. 64(3)(a) (Port.), <http://www.en.parlamento.pt/Legislation/CRP/Constitution7th.pdf>.
28. U.S. CONST. art. I, § 8, cl. 1.
29. HAW. CONST. art. IX, § 1.
30. Nancy M. Baum et al., *Looking Ahead: Addressing Ethical Challenges in Public Health Practice*, 35 J. L. MED. & ETHICS 657, 658 (2007).
31. Section 393-11, HRS.
32. Sections 89-9(e) and 377-4, HRS.
33. See "National Drug Strategy" in Chapter 3 of this report for a discussion of Portugal's national drug strategy.
34. *See infra* Chapter 5 note 231 and accompanying text.
35. Section 853-1(a), HRS.
36. Section 853-1(b), HRS.
37. Section 706-624(2)(j), HRS.
38. Section 853-1(c), HRS.
39. Section 853-1(e), HRS.
40. The "relevant" offenses applicable to this discussion on conditional discharge are those listed under section 712-1246, HRS (Promoting a harmful drug in the third degree; section 712-1248,

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- HRS (Promoting a detrimental drug in the second degree); and section 712-1249, HRS (Promoting a detrimental drug in the third degree).
41. Section 712-1255(1), HRS.
  42. *Id.*
  43. Section 712-1255(2), HRS.
  44. Section 712-1256, HRS.
  45. Section 706-622.5(1), HRS. This section provides in pertinent part that a person “convicted for the first or second time for any offense under section 329-43.5 involving the possession or use of drug paraphernalia or any felony offense under part IV of chapter 712 involving the possession or use of any dangerous drug, detrimental drug, harmful drug, intoxicating compound, marijuana, or marijuana concentrate, as defined in section 712-1240, but not including any offense under part IV of chapter 712 involving the distribution or manufacture of any such drugs or substances and not including any methamphetamine offenses under sections 712-1240.7, 712-1240.8 as that section was in effect prior to July 1, 2016, 712-1241, and 712-1242, is eligible to be sentenced to probation” if the person meets the specified eligibility criteria.
  46. Section 706-622.5(4), HRS.
  47. Section 706-624(2)(j), HRS.
  48. Judge Alm determined that HOPE could be instituted without changing existing law. Judge Steven S. Alm, *HOPE Probation and the New Drug Court: A Powerful Combination*, 99 MINN. L. REV. 1665, 1672 (2015), [http://www.minnesotalawreview.org/wp-content/uploads/2015/09/Alm\\_5fmt\\_final.pdf](http://www.minnesotalawreview.org/wp-content/uploads/2015/09/Alm_5fmt_final.pdf).
  49. ROBERT L. DUPONT ET AL., INSTITUTE FOR BEHAVIOR AND HEALTH, INC., STATE OF THE ART OF HOPE PROBATION 2 (2015), [http://www.courts.state.hi.us/docs/news\\_and\\_reports\\_docs/State\\_of\\_%20the\\_Art\\_of\\_HOPE\\_Probation.pdf](http://www.courts.state.hi.us/docs/news_and_reports_docs/State_of_%20the_Art_of_HOPE_Probation.pdf).
  50. *Id.* at 4.
  51. ANGELA HAWKEN & MARK KLEIMAN, MANAGING DRUG INVOLVED PROBATIONERS WITH SWIFT AND CERTAIN SANCTIONS: EVALUATING HAWAII’S HOPE 32-33 (2009), <https://www.ncjrs.gov/pdffiles1/nij/grants/229023.pdf>.
  52. DUPONT ET AL, *supra* note 49 at 5-6, 23, 24.
  53. *Id.* at 50, 64.
  54. Section 706-605.1, HRS.
  55. *Types of Drug Courts*, NATIONAL ASSOCIATION OF DRUG COURT PROFESSIONALS , <http://www.nadcp.org/learn/what-are-drug-courts/models> (last visited Dec. 21, 2016).
  56. *What are Drug Courts?*, NATIONAL ASSOCIATION OF DRUG COURT PROFESSIONALS , <http://www.nadcp.org/node/13> (last visited Dec. 21, 2016).
  57. *Id.*
  58. DUPONT ET AL, *supra* note 49 at 62.
  59. Alm, *supra* note 48 at 1687.

60. Section 706-605.1(2), HRS.
61. DUPONT ET AL, *supra* note 49 at 51, 62.
62. *Id.* at 51, 63.
63. *Id.*
64. This table is adapted from E-mail correspondence from Judiciary staff on Aug. 26, 2016 (on file with the Bureau).
65. Alex Kreit, *The Decriminalization Option: Should States Consider Moving from a Criminal to a Civil Drug Court Model?*, 2010 U. CHI. LEGAL F. 299, 311-312 (2010), <http://chicagounbound.uchicago.edu/cgi/viewcontent.cgi?article=1463&context=uclf>.
66. *Id.* at 321 (citing Morris B. Hoffman, *The Drug Court Scandal*, 78 N.C. L. REV. 1437, 1362 (2000); AVINASH SINGH BHATI ET AL., THE URBAN INSTITUTE, TO TREAT OR NOT TO TREAT: EVIDENCE ON THE PROSPECT OF EXPANDING TREATMENT TO DRUG-INVOLVED OFFENDERS 60-62 (2008)).
67. Alm, *supra* note 48 at 1685-1686, 1689-1690.
68. Section 706-605.1(2), HRS.
69. Nonviolent, non-drug-related class A felonies include those listed under section 708-891, HRS (Computer fraud in the first degree) and section 708-895.5, HRS (Unauthorized computer access in the first degree).

## Chapter 5

### **THE CHALLENGES OF ESTIMATING THE POTENTIAL IMPACT OF DECRIMINALIZATION IN HAWAII**

In House Concurrent Resolution No. 127, H.D. 1, S.D. 1 (2016) (hereinafter HCR No. 127), the Legislature requested the Bureau to study “[t]he potential impact on administrative and judicial systems of state government of decriminalizing certain or all” of the “existing criminal drug offenses in Hawaii that are class C felonies or lower offenses and pertain to the illegal possession of a harmful drug, detrimental drug, marijuana, or marijuana concentrate, as defined in section 712-1240, Hawaii Revised Statutes.”<sup>1</sup> Unfortunately, as explained below, our ability to estimate that impact is affected by the limits of the information available regarding drug use trends, treatment needs and capacity, prevention effects, and criminal enforcement. In addition, it is presently uncertain what specific scheme of decriminalization, if any, policymakers may find appropriate for Hawaii. While these challenges ultimately prevented us from estimating the impact of decriminalization, the discussion below seeks to shed light on some of the issues the Legislature may wish to consider in the context of devising and evaluating a potential decriminalization scheme.

#### **CURRENT BASELINE INFORMATION IS INSUFFICIENT TO ESTIMATE THE POTENTIAL IMPACTS OF DECRIMINALIZATION**

Any attempt to estimate the potential impact on state administrative and judicial systems of decriminalizing relevant drug possession offenses requires the collection of accurate information on the impact that current drug laws and use presently have on those systems. During the course of conducting research for this part of the study, we located several published reports with relevant information,<sup>2</sup> and we also wrote to numerous agencies to obtain more detailed data. Some agencies responded and provided some or all of the information that we requested. Other agencies responded, but could not provide any information, due to their limited ability to compile relevant data. Some agencies acknowledged our request, but did not follow up by providing the information we requested. Some agencies did not respond to our requests at all. A table indicating whether and how agencies responded to our requests for information is attached in Appendix F. While we were able to obtain some information, we did not obtain all of the information we sought, and some of the information was limited with regard to relevance, specificity, and reliability. Overall, the information obtained helped paint a very broad picture, but that picture is incomplete.

## INFORMATION REGARDING HAWAII'S DRUG PROBLEM: TRENDS, TREATMENT, AND PREVENTION

To understand the extent of the current impact that drug use has on administrative and judicial systems, we sought relevant information about Hawaii's drug problem. Various illicit drugs are known to be in use in Hawaii, but we wanted to know which drugs are more pervasive than others, in terms of supply and demand, and which pose a greater threat than others, since more funding and resources may be necessary to provide treatment to individuals who use those drugs.

### Drug Use Trends

Understanding and comparing the drug use trends in Hawaii and Portugal is necessary to grasp the potential impact that decriminalization modeled on Portugal would have on the State's administrative and judicial systems. The drugs specified for review by the Bureau, pursuant to HCR No. 127, include marijuana, marijuana concentrates, harmful drugs, and detrimental drugs. Notable omissions from this list include most opioid prescription pain relievers, heroin, and methamphetamine.<sup>3</sup> Along with information regarding the use of marijuana, marijuana concentrates, harmful drugs, and detrimental drugs, the following discussion provides selected information relating to the use of drugs not mentioned in HCR No. 127 as a means of presenting a more complete understanding of the nature and scope of drug use in Hawaii, and how it differs from drug use in Portugal.

Preliminarily, we note that comparing drug use in Hawaii and Portugal, whether in terms of the trends that led to the adoption of Portugal's drug strategy or the current trends in each jurisdiction, is an imperfect process for multiple reasons. First, the inaugural general population drug use survey of Portugal was conducted in 2001, after Portugal had modified its drug laws.<sup>4</sup> The lack of information regarding Portugal's drug use trends prior to the modification of Portugal's laws makes it difficult to present a comprehensive picture both of the specific circumstances that led to the change in Portugal's drug laws and of how Hawaii's drug issues today compare to Portugal's issues prior to 2001. Further complicating the presentation and assessment of drug trends in Hawaii and Portugal is the fact that surveys and studies conducted in each jurisdiction cover different age groups,<sup>5</sup> ask about different drugs,<sup>6</sup> and do not routinely ask the same questions regarding the prevalence of drug use.<sup>7</sup> Finally, it is difficult to accurately compare turn of the millennium drug use trends in Hawaii to current drug use trends because the United States Substance Abuse and Mental Health Services Administration (SAMHSA) recommends that the results of surveys taken before 2002 not be compared to the results of surveys taken since then.<sup>8</sup>

An additional challenge to understanding Hawaii's drug use trends is the lack of statistics regarding usage trends for the specific drugs enumerated in HCR No. 127.<sup>9</sup> There is not enough information available to accurately quantify which types of harmful or detrimental drugs are used in Hawaii, or how often, largely because the harmful and detrimental terminology reflects statutory classifications pertaining to drug regulations and prohibitions, rather than public health classifications used to track the use of specific drugs. Among other things, the statutory classifications of harmful and detrimental drugs include various prescription opioids, stimulants,

tranquilizers, sedatives, and steroids. While SAMHSA surveys the nonmedical use of pain relievers, which includes certain prescription opioids and sedatives, it does not survey the comprehensive list of harmful or detrimental drugs defined by Hawaii criminal statutes.<sup>10</sup> Additionally, SAMHSA's survey of nonmedical pain reliever use also includes various drugs that are classified under Hawaii law as dangerous, making these numbers unreliable in the assessment of harmful and detrimental drug use trends.

Regardless of the challenges in comparing drug use trends in Hawaii and Portugal, especially as it relates to trends in the use of harmful and detrimental drugs, enough information is available to paint a broad picture of certain drug use trends in each jurisdiction. Using estimated prevalence use rates, together with treatment admission rates, some of Hawaii's relevant drug use trends can be identified.

### **Illicit Drug Use, Generally**

In 2014, approximately one in ten Americans aged twelve or older were estimated to be past-month users of an illicit drug,<sup>11</sup> which is the highest number of estimated past-month users of an illicit drug since 2002 when the current estimation survey methods were first used.<sup>12</sup> Hawaii has followed the national trend with an estimated 9.67 percent of the population of Hawaii aged twelve or older being past-month illicit drug users in 2013-2014.<sup>13</sup> This estimate is similar to recent estimates; 9.71 percent in 2011-2012 and 10.30 percent in 2012-2013, of illicit drug use of the population of Hawaii aged twelve or older.<sup>14</sup>

Unlike Hawaii and the United States, available data indicates that Portugal has not experienced a consistent increase in illicit drug use in recent years.<sup>15</sup> While illicit drug use rates in Portugal appear to have peaked in 2007, data indicate that there was an overall decline in past-month and past-year use rates from 2001 to 2012.<sup>16</sup> Use of any illicit drug in the past-year by those aged between fifteen and sixty-four in Portugal was estimated to be 3.4 percent in 2001, 3.7 percent in 2007, and 2.7 percent in 2012.<sup>17</sup> Use of any illicit drug in the past-month by those aged between fifteen and sixty-four in Portugal was estimated to be 2.5 percent in 2001 and 2007, and 1.7 percent in 2012.<sup>18</sup> The 2012 lifetime drug use rates for those aged between fifteen and sixty-four in Portugal have risen from 2001 estimates (7.8 percent in 2001 and 9.5 percent in 2012), although the 2012 estimate is less than the 12 percent estimate in 2007.<sup>19</sup>

When comparing estimates of past-month illicit drug use in Portugal, Hawaii, and the United States as a whole, it is clear that illicit drug use is more prevalent in the United States, generally, and in Hawaii separately (approximately ten percent of the population ages twelve and older), than it is in Portugal (between 1.7 and 2.5 percent of the population aged between fifteen and sixty-four).



### *Marijuana Use*

Marijuana, or Cannabis, refers to the dried leaves, flowers, stems, and seeds from the hemp plant *Cannabis sativa*, which contains the psychoactive (mind-altering) chemical delta-9-tetrahydrocannabinol (THC), as well as other related compounds. This plant material can also be concentrated in a resin called hashish or a sticky black liquid called hash oil. THC is believed to be the main chemical ingredient that produces the psychoactive effect. Marijuana is often smoked in hand-rolled cigarettes (joints), pipes, or water pipes (bongs). People also smoke it in blunts, which are partly or completely emptied cigars filled with marijuana. Marijuana is also mixed in food (edibles) or brewed as tea.<sup>20</sup>

Marijuana<sup>21</sup> is the most frequently used drug in Portugal,<sup>22</sup> not including licit drugs.<sup>23</sup> In 2001, an estimated 7.6 percent of Portugal's population aged fifteen to sixty-four had used marijuana at least once in their life, 3.3 percent had used marijuana once in the past-year, and 2.4 percent had used marijuana during the preceding thirty-day time period.<sup>24</sup> Portugal's lifetime and past-year marijuana use rates rose in 2007 to 11.7 percent and 3.6 percent, respectively, while the last month use rate remained 2.4 percent.<sup>25</sup> In 2012, Portugal's marijuana use rate in all three categories, 9.4 percent lifetime use, 2.7 past-year use, and 1.7 percent past-month use, were lower than the 2007 rates, and the past-year and past-month use rates were lower than the 2001 rates.<sup>26</sup>

In the United States, marijuana is also the most commonly used drug, not including alcohol and tobacco, with approximately 22.2 million Americans aged twelve and older, or 8.4 percent, estimated to be past-month users of marijuana in 2014.<sup>27</sup> Estimated marijuana use rates in the United States were steady between 2002 and 2008 with use rates at highs in 2002-2003 (the estimated national average of past-month marijuana use was 6.18 percent and the estimated past-year use was 10.78 percent) and lows in 2006-2007 (the estimated national average of past-month marijuana use was 5.94 percent and the estimated past-year use was 10.24 percent).<sup>28</sup> The marijuana usage rates rose sharply in 2009-2010 with an estimated past-month rate of 6.77 percent and past-year rate of 11.47 percent.<sup>29</sup>

In Hawaii in 2002-2003, an estimated 6.95 percent of the population aged twelve and older were past-month users of marijuana, and an estimated 11.56 percent were past-year users of marijuana, placing Hawaii slightly above the national average in past-month and past-year marijuana use.<sup>30</sup> Hawaii's percentages were an estimated 6.7 percent for past-month marijuana use and an estimated 10.43 past-year marijuana use in 2007-2008.<sup>31</sup> These estimates are in line with the national estimates of marijuana use mentioned in the previous paragraph, and remain well-above the 2007 peak in marijuana and illicit drug use in Portugal. As shown in Figure 5-3 in Appendix C, Hawaii's recent past-month and past-year marijuana use rate has remained consistent with the national average.

Thus, while marijuana use is common in Portugal, use of the drug is not nearly as widespread there as it is in the United States as a whole and in Hawaii separately. As previously mentioned, approximately 22.2 million Americans, or approximately 8.4 per cent of the population over the age of twelve are estimated to have been past-month users of marijuana in 2014, while Portugal, with a total population of approximately only ten million, estimates only 1.7 percent of its population between the ages of fifteen and sixty-four were past-month users of marijuana in

2012. The gross number of past-month marijuana users in Portugal and Hawaii is similar, even though Hawaii's total population is roughly one-tenth that of Portugal. Hawaii is estimated to have had 98,000 past-month marijuana users aged twelve and older in 2012-2013, while Portugal had approximately 120,000 past-month marijuana users between the ages of fifteen and sixty-four in 2012.<sup>32</sup>

Read in conjunction with use estimates, the number of admissions for treatment of drug use can present a more complete understanding of a jurisdiction's drug problem. SAMHSA data show that, excluding alcohol, marijuana has been one of the top two substances for which people in Hawaii aged twelve and older were admitted for treatment in each year between 2001 and 2015.<sup>33</sup> However, since 2011, there have been fewer admissions for treatment of marijuana use than there have been for treatment of methamphetamine or other amphetamine use.<sup>34</sup> The number of admissions for treatment in which marijuana was the primarily used substance was 2,032 (30.1 percent of all admissions) in 2013,<sup>35</sup> 1,785 (28.1 percent of all admissions) in 2014,<sup>36</sup> and 1,720 (27 percent of all admissions) in 2015.<sup>37</sup> The percentage of admissions for the treatment of marijuana use funded by the Alcohol and Drug Abuse Division of the State Department of Health (ADAD) varies by age. Marijuana use treatment for adults comprises 14.1 percent of the ADAD sponsored treatment funding, which is greater than the percentage of treatment funding for heroin use, cocaine use, and other drug use, and less than the funding for treatment of methamphetamine use and alcohol use. Marijuana use treatment for youths comprises 63.5 percent of ADAD sponsored treatment funding, with alcohol use treatment receiving 24.7 percent, other drug use treatment receiving 10.9 percent, and methamphetamine, cocaine, and heroin use treatment all receiving less than one percent.

### *Nonmedical Stimulant, Depressant, and Pain Reliever Use*

HCR No. 127 requested a study on the decriminalization of possession of personal use quantities of harmful and detrimental drugs, among others. Under Hawaii law, harmful and detrimental drugs consist largely of prescription drugs.<sup>38</sup> There are more than one hundred individual harmful or detrimental drugs, including various opioids, stimulants, depressants, sedatives, and steroids.<sup>39</sup> Certain harmful or detrimental drugs are often used by persons for whom the drugs were not prescribed, or are used for purposes other than the intended medical uses, both of which are referred to as nonmedical or recreational use. While we located no surveys or studies that attempt to estimate the nonmedical or recreational use of any particular harmful or detrimental drug in Hawaii, the following information regarding the nonmedical use of stimulant, depressant, and pain relieving drugs serves to present a limited picture of drug use trends in Portugal and Hawaii.

***Stimulants and Depressants.*** The terms "stimulant" and "depressant" are used broadly to describe certain drugs. Stimulants:

[I]ncrease alertness, attention, and energy, as well as elevate blood pressure, heart rate, and respiration. Stimulants historically were used to treat asthma and other respiratory problems, obesity, neurological disorders, and a variety of other ailments. But as their

potential for abuse and addiction became apparent, the medical use of stimulants began to wane. Now, stimulants are prescribed to treat only a few health conditions, including ADHD, narcolepsy, and occasionally depression – in those who have not responded to other treatments.<sup>40</sup>

Stimulants can include dangerous drugs like cocaine, amphetamines, or methylphenidate, or harmful drugs like benzphetamine. The Bureau could not locate any data that estimate the prevalence of nonmedical prescription stimulant use in Hawaii. Admissions for the treatment of nonmedical prescription stimulant<sup>41</sup> use in Hawaii are minimal and have been stable over the past three years, with five admissions in 2013,<sup>42</sup> seven admissions in 2014,<sup>43</sup> and seven admissions in 2015.<sup>44</sup> Admissions in each of these years totaled 0.1 percent of the total admissions for treatment.<sup>45</sup>

When measured by national surveys, “depressants”:

[A]re often categorized as sedatives or tranquilizers. Sedatives primarily include barbiturates (e.g., phenobarbital) but also include sleep medications such as Ambien and Lunesta. Tranquilizers primarily include benzodiazepines such as Valium and Xanax, but also include muscle relaxants and other anti-anxiety medications.<sup>46</sup>

Many commonly used depressants are categorized under Hawaii law as harmful drugs. Portugal surveys the prevalence of licit tranquilizer and sedative use. It is unclear whether the “licit” use rates provided by Portugal refers to medical use, nonmedical use, or both. Tranquilizers and sedative use was found to be common and stable in Portugal, with last month prevalence use rates estimated to be eleven percent in 2001, 9.9 percent in 2007, and ten percent in 2012.<sup>47</sup> Past year prevalence use was estimated to be 14.4 percent in 2001, twelve percent in 2007, and 12.2 percent in 2012.<sup>48</sup> Estimated lifetime use was 22.5 percent in 2001, 19.1 percent in 2007, and 20.4 percent in 2012.<sup>49</sup>

It appears that no agency in the United States gathers state-specific prevalence estimates for the nonmedical use of depressants, sedatives, or tranquilizers. Similar to stimulants, the number of admissions for treatment of depressants in Hawaii has been minimal. The number of admissions for treatment in Hawaii in which tranquilizers<sup>50</sup> were the primarily abused substance were thirteen (0.2 percent of total admissions) in 2013,<sup>51</sup> five (0.1 percent of total admissions) in 2014,<sup>52</sup> and eighteen (0.3 percent of total admissions) in 2015.<sup>53</sup> The number of admissions for treatment in Hawaii in which sedatives<sup>54</sup> were the primarily abused substance were even lower, with no admissions in 2013 and 2014, and one admission in 2015.<sup>55</sup>

***Pain Relievers.*** Many different drugs may be prescribed for pain relief. While medical professionals have various pain relief options to offer clients,<sup>56</sup> opioids are the most common form of pain relief prescribed in the United States. Prescription opioids are natural, semi-synthetic, and synthetic drugs, including hydrocodone (Vicodin), oxycodone (OxyContin), morphine, and codeine.<sup>57</sup> In Hawaii, particular opioids have been classified as dangerous, harmful, or detrimental drugs.<sup>58</sup> It should be noted that more people in the United States die from opioid pain reliever overdoses than from heroin and cocaine overdoses combined.<sup>59</sup> A recent increase of opioid abuse

in the United States resulted in the enactment of the federal Comprehensive Addiction and Recovery Act of 2016,<sup>60</sup> which, among other things, authorized the United States Attorney General and Secretary of Health and Human Services to award grants to address prescription opioid and heroin abuse.<sup>61</sup>

There does not appear to be any reliable data regarding nonmedical opioid or pain reliever use in Portugal for comparison purposes. However, in the United States, the estimated prevalence of nonmedical pain reliever use in the past-year was 4.79 percent of total pain reliever use in 2002-2003,<sup>62</sup> 4.57 percent in 2010-2011<sup>63</sup> and 2011-2012,<sup>64</sup> 4.51 percent in 2012-2013,<sup>65</sup> and 4.06 percent in 2013-2014.<sup>66</sup> The estimated prevalence of nonmedical pain reliever use in the past-year in Hawaii was similar to the national rates, with 3.90 percent of total pain reliever use in 2002-2003<sup>67</sup> and 2010-2011,<sup>68</sup> 4.36 percent in 2011-2012,<sup>69</sup> 4.54 percent in 2012-2013,<sup>70</sup> and 4.24 percent in 2013-2014.<sup>71</sup> See Figure 5-4 in Appendix B.

In Hawaii, admissions for treatment of opioids other than heroin<sup>72</sup> are the third most frequent admission for an illicit substance, after marijuana and amphetamines (which includes methamphetamine). However, this frequency is a distant third. There were three hundred three admissions (4.5 percent of total admissions) in 2013,<sup>73</sup> two hundred eighty-eight admissions (4.5 percent of total admissions) in 2014,<sup>74</sup> and two hundred seventy-eight admissions (4.4 percent of total admissions) in 2015.<sup>75</sup>

It should be noted that the estimated prevalence use rates reported by SAMHSA do not identify the specific pain relievers for which use is estimated and that the treatment admission numbers include those for dangerous, harmful, and detrimental drugs.

### *Heroin Use*

As reviewed in Chapter 3, an increase in the use of and addiction to heroin in the general population of Portugal has been cited as a leading factor in that country's decision to adopt its revised drug control strategy, which took effect in 2001.<sup>76</sup> Heroin was a concern in Portugal in the 1990s not only because of the effects of use and addiction, but also because the sharing of needles used to inject heroin led to an increase in the transmission of disease.<sup>77</sup> Portugal's reported heroin usage rates in all three surveyed categories (lifetime, past-year, and past-month) increased between 2001 and 2007,<sup>78</sup> while a 2012 survey found that rates had by then dropped to 0.6 percent for lifetime use and, most interestingly, zero percent use in both the past-year and past-month categories.<sup>79</sup> In comparison to other drug use surveyed in Portugal, heroin use has consistently been ranked as either less common or equal to marijuana, tranquilizers and sedatives, and cocaine use.<sup>80</sup> See Figure 5-5 in Appendix C.

The use of, and the threat posed by, heroin in the United States has increased since 2007, particularly in the northeast, mid-Atlantic, and Midwest states.<sup>81</sup> Although limited information is available on heroin use in Hawaii, it is unclear how much of a problem heroin use currently poses in Hawaii because, as noted above, SAMHSA does not release estimated usage percentages for heroin, per state.<sup>82</sup> The National Drug Intelligence Center of the United States Department of

Justice released a Drug Threat Assessment for Hawaii in 2002 that provided some insight into heroin use in Hawaii shortly after Portugal modified its drug laws in 2001. While the Assessment found that “the availability, distribution, and abuse of heroin continue to present a threat to Hawaii,” the threat was not as severe as the threats posed by methamphetamine and marijuana.<sup>83</sup> The Assessment reported that Hawaii had a 0.9 percent lifetime heroin use rate and four hundred thirty-four admissions for treatment of heroin use in 1998.<sup>84</sup> However, after falling for a decade, the number of admissions for treatment of heroin use in Hawaii rose in 2015. More specifically, until last year, 2002 was the most recent year in which there were over two hundred admissions for treatment of heroin use in Hawaii (two hundred twenty-one admissions); in 2015, the number of admissions climbed to two hundred two admissions.<sup>85</sup>

### *Methamphetamine Use*

Methamphetamine (meth) is a stimulant that has a similar chemical structure to amphetamine. Regular methamphetamine is a pill or powder, while crystal methamphetamine takes the form of glass fragments or shiny blue-white “rocks” of different sizes. Meth is taken orally, smoked, injected, or snorted. To increase its effect, users smoke or inject it, or take higher doses of the drug more frequently.<sup>86</sup>

Methamphetamine is categorized as a dangerous drug.<sup>87</sup> It is difficult to *quantify* Hawaii’s methamphetamine problem because annual studies or surveys that estimate its use rates or trends are not conducted, but one way to understand the severity of methamphetamine use is to consider the number of admissions for substance use treatment in which amphetamine or methamphetamine is the primary substance for which treatment was sought. However, calculating the specific number of treatment admissions in which methamphetamine is the primarily used substance is problematic because, when reported by SAMHSA, admissions for methamphetamine use are reported under the broader category of amphetamines, rather than being reported alone. Amphetamines include substances other than methamphetamine, and when admission numbers are reported, the amphetamine category includes admissions both for methamphetamine and other amphetamines.<sup>88</sup> Between 2013 and 2015, SAMHSA reported that amphetamine was the primary drug for which there were the most adult admissions for drug use treatment in Hawaii. In 2013, there were 2,063 (30.6 percent of all admissions) treatment admissions in Hawaii in which amphetamines were identified as the primarily treated substance.<sup>89</sup> Admissions rose in both 2014 (2,166 admissions, representing 34.1 percent of total admissions)<sup>90</sup> and 2015 (2,260 admissions, representing 35.5 percent of total admissions).<sup>91</sup>

While we are unable to quantify the number of admissions for treatment of methamphetamine use, rather than amphetamine use, with SAMHSA-reported admissions, we note that ADAD reports on adult admissions for treatment of methamphetamine use. The SAMHSA and ADAD data are different because: (a) ADAD only reports admission data that is funded by ADAD, and SAMHSA reports ADAD- and non-ADAD-funded admission data; and (b) the reporting criteria may be different. However, the considerable number of ADAD reported admissions for methamphetamine treatment (1,428 in fiscal year 2015-2016, which was 50.5 percent of all ADAD-funded admissions for treatment) suggests that methamphetamine likely represents a majority of SAMHSA-reported admissions for amphetamine treatment.<sup>92</sup>

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The general population survey of drug use in Portugal reports on the estimated prevalence of amphetamine use, but not on methamphetamine in particular,<sup>93</sup> and the Bureau was unable to verify whether the data collected on amphetamines also include methamphetamine. Still, use of amphetamine in general (lifetime, past-year, and past-month) in Portugal was minimal in 2001, 2007, and 2012. Past-month use of amphetamines by fifteen to sixty-four year olds in Portugal was 0.1 percent in 2001 and 2007, and zero percent in 2012.<sup>94</sup> If methamphetamine use is included in the reported amphetamine use, it may be inferred that the amount of methamphetamine use in Portugal is negligible, at most.

While the scope of the Legislature's request in HCR No. 127 was limited to marijuana, marijuana concentrates, harmful drugs, and detrimental drugs, the vast difference between methamphetamine use in Portugal and Hawaii highlights a key point regarding decriminalization. When adopting its drug strategy, Portugal did not have to account for a need to dedicate significant resources to combat methamphetamine use and addiction, as methamphetamine use appears to have been minimal there. In Hawaii, by contrast, treatment for methamphetamine use consumes a major portion of the resources used to combat the overall drug use problem.<sup>95</sup> Thus, if marijuana, marijuana concentrates, or harmful or detrimental drugs are decriminalized in Hawaii, an increase in resources dedicated to treatment for use of those substances could have the effect of reducing the resources necessary for treatment of methamphetamine use unless overall treatment resources are increased.

### **The Limits on Evaluating Drug Use Trends**

As previously noted,<sup>96</sup> the various obstacles to evaluating drug use trends in both Portugal and Hawaii make comparing those trends difficult. One similarity that can be drawn is the wide prevalence of marijuana use in both Portugal and Hawaii. However, the only clear similarity in that prevalence is that marijuana use is common in both places, although Portugal's marijuana use has decreased over time while Hawaii's has grown, and the percentage of marijuana users in Portugal is much smaller than the percentage in Hawaii. Other differences in the drug trends between the two jurisdictions include: secondarily popular drugs -- heroin and cocaine in Portugal versus methamphetamine in Hawaii; and an overall increase in Hawaii's drug use. In view of the limited information available regarding drug use trends, any further comparison between trends in Portugal and Hawaii should be avoided.

### **The Current Drug Threat**

In conjunction with our review of drug use trends, we asked the federal Drug Enforcement Administration (DEA); the Hawaii High Intensity Drug Trafficking Area (HIDTA) Investigative Support Center; and the Narcotics Enforcement Division of the Hawaii Department of Public Safety for their assessments of which drugs pose the greatest threats.<sup>97</sup> The DEA did not respond. The Hawaii HIDTA Investigative Support Center responded,<sup>98</sup> and included a copy of its published annual report, which determined that methamphetamine currently poses the greatest drug threat to

Hawaii “due to its widespread availability and association with addiction, crime, overdose deaths, treatment, law enforcement efforts and prosecutions.”<sup>99</sup> In 2015, law enforcement agencies seized 126.646 kilograms of the drug.<sup>100</sup> The agency also stated that marijuana poses the second greatest threat, “based on its consistent high demand, criminal association, drug seizures, and encumbered medical resources to drug treatment admissions,”<sup>101</sup> and noted that the abuse of prescription drugs is a “noteworthy emerging threat.”<sup>102</sup> While heroin, ecstasy, and cocaine are present in the State, the Support Center considers those substances “a comparatively lower threat to the user population in Hawaii.”<sup>103</sup> The Narcotics Enforcement Division’s response reiterated the threats posed by methamphetamine and marijuana, and also noted the threat posed by opioid pain relievers, which reportedly contributed to 35 percent of drug overdose deaths in Hawaii from 2010 to 2014.<sup>104</sup>

## Substance Use Treatment

If Hawaii were to attempt to follow the portion of Portugal’s drug strategy regarding decriminalization, an important issue facing policymakers is whether to also follow the critical component of that country’s strategy regarding treatment. In contrast to the cultural and legal backdrop in Portugal that encourages a public health approach to drug use, people in the United States with substance use disorders<sup>105</sup> have traditionally and historically been considered morally flawed, which has resulted in these individuals being treated in a punitive manner, rather than in a mental health-oriented or preventative manner.<sup>106</sup> The current White House National Drug Control Strategy suggests a reversal in this tradition and highlights the importance of recognizing substance use disorders as diseases that require a public health approach.<sup>107</sup> Additionally, the National Drug Control Strategy incorporates multiple strategies to reframe and address substance use disorders as health issues rather than criminal issues, including integrating substance use disorder treatment into mainstream health care and developing infrastructure to promote alternatives to incarceration.<sup>108</sup> A 2016 Surgeon General’s report also emphasized the need to treat substance use, substance misuse,<sup>109</sup> and substance use disorders as public health matters.<sup>110</sup>

## The Need for and Availability of Treatment in Hawaii

While individuals may be admitted for treatment of substance use, substance misuse, and substance use disorders, it is not possible to differentiate between these three when reviewing treatment admission data.<sup>111</sup> Accordingly, for consistency and clarity, “substance use treatment” when used this part, refers to treatment for substance use, substance misuse, and substance use disorder. Treatment for substance use can consist of counseling, inpatient and residential treatment, outpatient treatment, in-hospital care, medication, twelve-step programs, and support groups,<sup>112</sup> but the ability to obtain effective treatment can vary based on a number of factors, including:

- (1) The drug for which treatment is sought;<sup>113</sup>
- (2) Frequency of drug use;<sup>114</sup>

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- (3) Financial resources of the user;<sup>115</sup>
- (4) What sort of post-treatment support the user needs;<sup>116</sup> and
- (5) Whether the user seeks out treatment or is referred by the criminal justice system.<sup>117</sup>

In SAMHSA surveys taken between 2007 and 2014, an estimated average of 85.6 percent of individuals aged twelve and older in Hawaii who reported illicit drug use did not receive treatment for their drug use within the year prior to being surveyed.<sup>118</sup> However, simply because an individual uses an illicit drug does not mean that the individual is in need of treatment. In its 2013-2014 National Survey on Drug Use and Health, SAMHSA estimated that only 2.22 percent of those aged twelve or older in Hawaii need, but do not receive treatment<sup>119</sup> for, illicit drug<sup>120</sup> use.<sup>121</sup>

The 2014 National Survey of Substance Abuse Treatment Services conducted by SAMHSA found that one hundred seventy-seven facilities in Hawaii provide mental health treatment, which is the highest number of facilities since 2004.<sup>122</sup> Of these facilities:<sup>123</sup>

- One hundred fifty-one provided substance use treatment services, two provided other mental health treatment services, twenty-one provided a mix of mental health and substance use treatment services, and three provided other services;<sup>124</sup>
- One hundred fifty-one are private non-profit operated, nineteen are private for-profit operated, three are state operated, and four are federally operated;<sup>125</sup>
- One hundred seventy offer some outpatient services, and fifteen offer non-hospital<sup>126</sup> residential treatment;<sup>127</sup> and
- Fifty-five accept cash or self-payment, fifty-one accept private health insurance, twenty-nine accept Medicare, forty-two accept Medicaid, forty-three accept State-financed health insurance, twenty-eight accept federal military insurance, eighty-three do not accept payment, thirteen accept Access to Recovery vouchers,<sup>128</sup> four accept IHS/638 contract care funds, thirty-three accept other funds, seventeen have a sliding fee scale, and one hundred nineteen provide treatment at no charge for clients who cannot pay.<sup>129</sup>

### ***Treatment Information from the Alcohol and Drug Abuse Division***

In Hawaii, the Alcohol and Drug Abuse Division of the Department of Health (ADAD) is the primary and often sole source of public funds for substance use treatment.<sup>130</sup> Pregnant women and injection drug users have priority in admission for ADAD funded treatment services.<sup>131</sup> In fiscal year 2015-2016, 50.5 percent of the ADAD-funded adult admissions for treatment were for



methamphetamine use, 13.8 percent were for marijuana use, 2.6 percent were for cocaine/crack use, 5.3 percent were for heroin use, and 5.6 percent were for other drug use.<sup>132</sup>

When calculating the amounts of funding allocated for substance use treatment, ADAD categorizes treatment as:

- Residential treatment - long-term;<sup>133</sup>
- Therapeutic living - long-term;<sup>134</sup>
- Intensive outpatient treatment;
- Outpatient treatment;
- Methadone maintenance;
- Residential social detoxification;
- Residential pregnant women with dependent child treatment - long-term;<sup>135</sup> and
- Therapeutic living pregnant women with dependent child - long-term.<sup>136</sup>

As noted by Figures 5-6 and 5-7 in Appendix C,<sup>137</sup> nearly half of all admissions for substance use treatment in Hawaii are self-admitted, and nearly one-fourth are referrals from the criminal justice system.

Between fiscal years 2011-2012 and 2015-2016, the per person average expended by ADAD for treatment was as low as \$3,873 and as high as \$4,670.<sup>138</sup> Between fiscal years 2011 and 2016, overall ADAD funding for illicit drug treatment has remained relatively steady, between the low of \$12,129,862.50 in fiscal year 2011 to a high of \$13,554,573 in fiscal year 2015. Additionally, as shown by the Table 5-1 in Appendix B, the funding of specific types of treatment has remained steady between those years.

Individuals performing clinical supervision of drug use treatment are required to be certified as counselors by the Department of Health or hold an advanced degree in behavioral health sciences.<sup>139</sup> Currently, the Department of Health certifies fourteen categories of counselors.<sup>140</sup> As shown in Table 5-2 in Appendix B, the number of certified substance abuse counselors<sup>141</sup> has steadily risen over this decade, with 1,229 certified substance abuse counselors in fiscal year 2015-2016.<sup>142</sup> Nonetheless, Hawaii ranks low among the states with regard to the number of specialists available to treat those with substance use disorders.<sup>143</sup>

### ***Treatment Information from the Judiciary***

According to a Judiciary report to the 2016 Legislature entitled “A Report on Statewide Substance Abuse Treatment Monitoring Program” (“2016 SATMP Report”), during fiscal year 2014-2015, the Judiciary referred 4,310 adults and 211 children (a total of 4,521 individuals) to twenty-six service providers for substance use treatment.<sup>144</sup> All of the referred individuals were admitted to treatment.<sup>145</sup> Expenditures for treating these individuals were not specified in the report, which noted that “[s]ervices rendered to Judiciary referred clients may not have been paid for by the Judiciary.”<sup>146</sup> To help determine how many of these individuals received treatment paid for by the Judiciary, we consulted another publicly-available document. According to the Judiciary’s written testimony submitted to the 2015 Legislature, as of December 1, 2014, the Judiciary had contracts with only thirteen service providers for substance use treatment services. The lengths of the contacts varied but generally ran from July 1, 2013, to June 30, 2015. The aggregate maximum value of these contracts was \$7,917,231.20.<sup>147</sup>

Based on data from the 2016 SATMP Report, it appears that 3,121 adults and 201 children (a total of 3,322 individuals) were admitted to these thirteen Judiciary-contracted substance use treatment providers during fiscal year 2014-2015.<sup>148</sup> Based on the Judiciary’s corresponding report to the 2015 Legislature, it appears that a total of 2,739 individuals were admitted to the Judiciary-contracted substance use treatment service providers during fiscal year 2013-2014.<sup>149</sup> Based on the known maximum value of the contracts (\$7,917,231.20), and the number of individuals admitted into treatment during those two fiscal years (6,061), it can be estimated that the Judiciary was prepared to spend an average (statistical mean) of \$1,306.26 per person admitted into treatment. However, we caution that this amount does not necessarily reflect actual treatment expenditures.

### ***Treatment Information from Other Agencies***

We asked the Hawaii Department of Human Services (DHS) to provide information regarding how many members of the public received treatment services through that agency for illicit drug use, and the associated expenditures for treatment.<sup>150</sup> We made similar inquiries to the Department of Community Services, City and County of Honolulu; the Department of Finance, County of Hawaii; the Department of Finance, County of Kauai; and the Department of Housing and Human Concerns, County of Maui about what, if any, efforts the counties currently make toward providing drug use treatment.<sup>151</sup> We asked the Hawaii Department of Public Safety (PSD) how much it spent to treat correctional system inmates for illicit drug use during fiscal year 2015-2016.<sup>152</sup> In response to these inquiries, we received statistical information only from the state DHS and PSD, and the Department of Housing and Human Concerns, County of Maui, and some of that information had limitations.

### *Treatment Information from the Department of Human Services*

Based on data from DHS,<sup>153</sup> and as illustrated in Tables 5-3 and 5-4 in Appendix B, the number of Medicaid program clients who received alcohol and drug use treatment has increased significantly over the years. For example, the number of drug-dependent clients treated rose from 2,658 in fiscal year 2006-2007 to 8,002 in fiscal year 2014-2015. However, per-person expenditures for treatment appear to have decreased over time for individuals in the Medicaid program. For example, we calculated the average (statistical mean) expenditure for each drug-dependent client to be approximately \$178 in fiscal year 2006-2007 and approximately \$88 in fiscal year 2014-2015.

Among those Medicaid Program clients who were receiving treatment for what the department deemed “dependence” upon illicit drugs (which, for our purposes, do not include alcohol and tobacco), treatment for opioid dependence and amphetamine dependence were most frequent among specified categories of dependencies. The number of individuals treated for opioid dependence increased by more than 300 percent from fiscal years 2006-2007 to 2014-2015. The number of individuals treated for amphetamine dependence increased by more than 100 percent during the same period. Per-person expenditures for treatment for each respective dependence peaked near the end of the last decade but have declined since then. See Tables 5-5 and 5-6 in Appendix B.

Among those Medicaid Program clients who were receiving treatment for what the department deemed “abuse” of illicit drugs (excluding alcohol and tobacco) but who were not necessarily dependent upon those drugs, treatment for amphetamine abuse was the most frequently specified category of abuse. The number of individuals treated for that category of abuse increased by more than 400 percent from fiscal years 2006-2007 to 2014-2015. The second-most frequently specified category listed was “other drug abuse.” The third-most frequently specified category was marijuana. The number of individuals treated for that category of abuse increased by more than 300 percent from fiscal years 2006-2007 to 2014-2015. Per-person expenditures for amphetamine abuse peaked near the beginning of this decade but have declined since then, while average expenditures for marijuana have declined steadily since fiscal year 2006-2007. See Tables 5-7 and 5-8 in Appendix B.

Some clients in the DHS Division of Vocational Rehabilitation had a diagnosis relating to drug use in fiscal years 2014-2015 and 2015-2016. These individuals received mental restoration services,<sup>154</sup> and the expenditures of services for those individuals increased from fiscal years 2014-2015 to 2015-2016. See Table 5-9 in Appendix B.

Among clients of the DHS Social Services Division, considerably more funds were expended for treatment: up to nearly \$29,912 per person. See Table 5-10 in Appendix B.

We caution that it is very difficult to determine the causes in changes in the numbers of people treated. Increases in treatment for certain drugs may reflect the increased use of those drugs; increases in the availability of treatment; or other unknown factors. We also caution that the per-person expenditure calculations in Table 5-10 are only very general “per person”

expenditures, especially since we do not know how long individuals were treated and whether expenditures were driven by the availability of funding, or lack thereof.

DHS noted that General Assistance recipients and First-to-Work participants have also received drug treatment over the years. However, expenditure information regarding these individuals was not available.<sup>155</sup>

### ***Treatment Information from County Agencies***

Based on the data provided by the Department of Housing and Human Concerns, County of Maui,<sup>156</sup> we created Table 5-11 in Appendix B, which includes our calculation of the average expenditure (statistical mean) of treatment, which reached up to nearly \$1,365 per person.

We again caution that the averages in Table 5-11 are only very general “per person” expenditures, since we lack data regarding how long individuals were treated and the substances for which they were treated. These calculations are provided only as a very broad estimate of the expenditures of treatment for some individuals in Maui County-funded treatment programs.

The Department of Finance, County of Kauai forwarded our inquiry to the Life’s Choices Kauai Program at the Office of the Mayor, which informed us that one of its duties is to refer substance abusers to treatment. The agency did not have data available on the number of users it referred to treatment.<sup>157</sup>

### ***Treatment Information from the Department of Public Safety***

The Corrections Division, Department of Public Safety (PSD) noted that 994 inmates in state correctional facilities received treatment for illicit drug use in fiscal year 2015-2016, for which expenditures were an estimated \$3,935,376.<sup>158</sup> Based on our calculations, the average expenditure (statistical mean) for the treatment of each inmate during that time was approximately \$3,959.13.

### **Adequacy of Treatment Funding and Capacity**

The Patient Protection and Affordable Care Act,<sup>159</sup> for the first time under federal law,<sup>160</sup> required all insurers, including Medicaid, to cover the treatment of drug and alcohol addiction as an “essential benefit.”<sup>161</sup> Previously, Medicaid covered only certain people, and private insurance either did not pay for treatments or paid so little that most people could not afford to make up the difference.<sup>162</sup> For those with private insurance coverage, the Mental Health Parity and Addiction Equity Act<sup>163</sup> now ensures that the duration and dollar amount of coverage for substance use disorders is comparable to coverage for medical and surgical care.<sup>164</sup> Together, the two federal laws are expected to make billions of dollars available to the behavioral health care market.<sup>165</sup>

The United States spent \$24,000,000,000 on the treatment of drug and alcohol disorders in 2009, the most recent year for which comprehensive data are available.<sup>166</sup> Spending from public sources such as state and local governments, Medicaid, Medicare, and federal grants accounted for 69 percent of the total; private sources, including commercial insurance and out-of-pocket spending, made up the balance.<sup>167</sup> However, despite that spending, treatment capacity has not kept pace with the demand for treatment or the funding available to support it.

While acknowledging the scarcity of treatment specialists, the federal government has failed to quantify and assess it.<sup>168</sup> A health care consulting firm developed a “provider availability index” – the number of psychiatrists, psychologists, counselors, and social workers available to treat every 1,000 people with substance use disorders.<sup>169</sup> The index ranges from a high of 70 in Vermont to a low of 11 in Nevada. The national average is 32 behavioral health specialists for every 1,000 people afflicted with the disorder, while Hawaii has 22, and is ranked forty-fourth out of fifty-one US jurisdictions.<sup>170</sup> The “growing workforce crisis in the addictions field” is due to a variety of factors, including stigma, an aging workforce, and inadequate compensation for treatment service providers, according to a 2013 report to Congress from SAMHSA.<sup>171</sup>

Reimbursement rates and consequently salaries for physicians, psychologists, social workers, and counselors in the addiction field historically have been well below salaries for comparable professionals in other health care specialties that require the same level of education and training.<sup>172</sup> For example, the average annual salary for social workers in the addiction field is \$38,600, compared to \$47,230 in the rest of the health care industry, according to the Bureau of Labor Statistics.<sup>173</sup> Moreover, only 55 percent of addiction practitioners accept Medicaid reimbursements, which tend to be lower than private insurance.<sup>174</sup>

The shortage of treatment specialists is particularly acute for Medicaid beneficiaries. They are prescribed highly addictive painkillers at twice the rate of non-Medicaid patients and are at three to six times the risk of prescription opioid overdose.<sup>175</sup> As a group, Medicaid enrollees suffer from opioid addiction and other substance abuse disorders at a higher rate than the general population.<sup>176</sup> Overall, less than half of the 2,200,000 people who need treatment for opioid addiction are receiving it, according to the United States Department of Health and Human Services.<sup>177</sup> It will be largely up to states to make the changes needed to develop an adequate addiction treatment workforce.<sup>178</sup>

States have responded by, among other steps, trying to encourage opioid addiction treatment centers to offer more counseling when patients need it, by reimbursing providers for as much counseling and related medical services as are needed for individual patients, rather than paying a flat rate per patient.<sup>179</sup> Others are turning to a nurse manager approach, in which registered nurses take over from doctors the labor-intensive office visits, behavioral health assessments, drug screenings, and paperwork, to make it easier for physicians to accept more patients and write prescriptions for the medication patients need.<sup>180</sup> Thirty-eight states, including Hawaii, now certify peer specialists, who are people who have personally struggled with mental health or substance abuse problems but are now in recovery and helping others in community behavioral health centers, psychiatric inpatient facilities, and other health-care settings.<sup>181</sup> Medicaid programs reimburse peer specialists in thirty-six states, including Hawaii.<sup>182</sup>

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It is important to note that demand for substance use treatment may increase if the possession of personal use amounts of one or more drugs is decriminalized in Hawaii, as was the case in Portugal.<sup>183</sup> The Bureau is unable to conclusively determine whether available funding is adequate to meet Hawaii's current treatment needs, let alone any increased demand for treatment that may develop after enactment of a decriminalization scheme. Additionally, considering that funding for treatment may come from a variety of sources (i.e. from the State, federal, and county governments; grants; insurance providers; and individuals receiving treatment), it is unclear the extent to which the Legislature may need to appropriate additional treatment funds following decriminalization.

Furthermore, despite the information reviewed by the Bureau, it is difficult to accurately assess the adequacy of substance use treatment capacity in Hawaii, as information related to, among other things, the number of vacancies for residential treatment, the physical capacity of locations that provide treatment, or the number of drug users seeking but not receiving treatment is not readily available. Yet, considering that punitive measures have historically been chosen over treatment when addressing substance use in the United States, and the growing understanding that the nation's capacity to treat substance use is lacking, it seems reasonable to assume that decriminalization would increase the need for treatment resources and personnel.

**DRUG PREVENTION EFFORTS BY THE DEPARTMENT OF HEALTH'S  
ALCOHOL AND DRUG ABUSE DIVISION**

Drug use prevention efforts were and continue to be a crucial component of Portugal's drug strategy.<sup>184</sup> The scope of funding for and the results of Hawaii-based drug use prevention efforts are difficult to quantify or evaluate because there are local and national, private and public, drug use prevention efforts ongoing in Hawaii. One quantifiable measure is the amount of money allocated for drug use prevention efforts conducted by ADAD. The Prevention Branch within ADAD implements a broad array of prevention strategies directed at individuals who have not been identified as in need of treatment.<sup>185</sup> The primary prevention activities and services are provided in a variety of settings for the general population as well as targeted sub-groups that are at high risk for substance use.<sup>186</sup> Funding is provided to six categories of prevention strategies:

Alternative Activities;<sup>187</sup>

Community-based Processes;<sup>188</sup>

Education;<sup>189</sup>

Environmental;<sup>190</sup>

Information Dissemination;<sup>191</sup> and

Problem Identification and Referral.<sup>192</sup>

Table 5-12 in Appendix B breaks down the amount of money expended by the Prevention Branch for each program from fiscal years 2011-2012 to 2015-2016.<sup>193</sup>

### **INFORMATION REGARDING THE ENFORCEMENT OF RELEVANT HAWAII DRUG POSSESSION OFFENSES**

Efforts to enforce any criminal law consumes time and resources. In theory, eliminating criminal penalties for some offenses could free up time and resources for the enforcement of other offenses. However, in order to determine whether the decriminalization of possession of amounts for personal use of certain illicit drugs would significantly reduce the need for enforcement efforts and the expenditures related to those efforts, it is necessary to review data regarding arrests, prosecutions, convictions, and incarcerations for relevant drug possession offenses, and associated expenditures. We sought such information, but faced several obstacles in obtaining accurate and complete data.

#### **Arrests; Information from Police Departments**

We attempted to find out how often individuals are arrested for relevant drug offenses, and the associated expenditures. By “relevant drug offenses,” or simply “relevant offenses,” we mean those offenses that, pursuant to the terms of HCR No. 127, include “class C felonies and lower offenses that can be committed by the illegal possession of a harmful drug, detrimental drug, marijuana, or marijuana concentrate.”<sup>194</sup> Published reports from the Department of the Attorney General provide some relevant information regarding arrest statistics for criminal offenses. The statistics in these reports “were collected and compiled using the FBI’s Hierarchy Rule that limits crime counts to only the most serious offense committed within an incident that is constrained by time and place, and limits arrest counts to only the most serious charge per booking.”<sup>195</sup> As the Table 5-13 in Appendix B shows, between 2000 and 2014, drug possession offenses comprised the most serious offense for 3.46 to 5.19 percent of all non-traffic criminal offense arrests of adults.<sup>196</sup>

However, these reports do not state the *specific drug-related offenses* for which the individuals were arrested. This is significant because some drug possession offenses include large quantities of drugs and thus are more likely correlated with the distribution or sale of drugs than personal consumption. Further, these reports do not specify how often a relevant possession offense was the *sole* offense for which an arrested person was charged. This distinction is important because the impact of decriminalizing any given drug possession offense may be minimal or nonexistent for a person who would be arrested for another offense anyway, especially for an equally serious or more serious charge. Therefore, while the published reports from the Department of the Attorney General are helpful in understanding the overall scope of all arrests made in the State, the data provided in those reports have severe limitations for purposes of this study.

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In an attempt to find more specific information, we asked the police departments of the several counties to provide statistical data on the number of arrests made for state drug possession offenses, the expenditures associated with making those arrests, and the sources of funding for those expenditures.<sup>197</sup> From the departments' responses,<sup>198</sup> we compiled the data found in Table 5-14 in Appendix B, which shows the number of arrests by county police for all offenses for which the simple possession of illicit drugs constitutes the offense. The table also summarizes the number of arrests for relevant drug offenses.

Generally speaking, it appears that arrests for the specified offense increased during the period from 2011 to 2014, with a slight decrease in 2015. Available statistics for 2016 are too incomplete to draw any conclusions as of this writing. We note, however, that the foregoing tables may overestimate the number of arrests that police made for drug possession offenses because several of the statutory sections under which drug possession offenses may be committed have multiple subsections, some of which also prohibit the distribution or sale of illicit drugs.<sup>199</sup> Thus, based on the data provided, it is impossible to determine whether a person arrested for one of these offenses was arrested for *possessing* an illicit drug, *distributing* an illicit drug, or *selling* an illicit drug.

Further, it is still not entirely clear how many of these arrests included a relevant offense within the scope of HCR No. 127 as the sole offense for which the suspect was arrested. Honolulu Police Department (HPD) and Kauai Police Department (KPD) did not specify those arrests in their responses. HPD explained that its database would need to be updated in order to provide that information.<sup>200</sup> KPD responded that it did not have the time to review its records to provide that information.<sup>201</sup> Based on available data from Hawaii (County) Police Department (HCPD) and Maui Police Department (MPD), it appears that during the vast majority of arrests in the counties of Hawaii and Maui for relevant drug charges, the suspects were arrested for other charges as well, as shown in Table 5-15 in Appendix B. In other words, relatively few arrests are based solely on a single relevant drug offense. For example, Table 5-15 in Appendix B shows that in 2015, a total of three hundred thirteen arrests were made in Hawaii County for violations of section 712-1249, Hawaii Revised Statutes (HRS), promoting a detrimental drug in the third degree. In only seventy of those arrests was that offense the only offense for which the suspect was arrested. As another example, the table shows that in fiscal year 2014-2015, a total of four hundred fifty arrests were made for violations of section 712-1249, HRS. In only two hundred twenty-four of those arrests was that offense the only offense for which the suspect was arrested. However, whether this general pattern also applies to the islands of Oahu and Kauai is unknown.

It is also difficult to determine exactly how much money county police departments spend to enforce laws regarding drug offenses that are relevant to the scope of HCR No. 127. HPD informed us that it would not be able to provide expenditure information for enforcement relating to the possession of illicit drugs, as it could not accurately separate what funds were spent specifically on the enforcement of relevant drug offenses, as opposed to laws relating to other offenses such as gambling or prostitution.<sup>202</sup> HCPD stated that it "does not keep statistical information relative to expenditures to enforce laws against illicit drugs, as this involves all sections of the department."<sup>203</sup> The department noted that its Vice Section "concentrates mainly on drug offenses,"<sup>204</sup> and estimated the expenditures for that section as noted in Table 5-16 in



Appendix B. The department cited its “budget” as the source of “funding,”<sup>205</sup> so it is presumed that Vice Section funds come from Hawaii County.

KPD and MPD provided more specific estimates regarding their expenditures for drug-related offenses.<sup>206</sup> However, we note that these estimates, which are replicated in Tables 5-17 and 5-18 in Appendix B, are related to the enforcement of drug laws in general, and not just the relevant drug offenses that are within the scope of HCR No. 127.

### **Court Cases: Information from the Judiciary**

We attempted to learn how many individuals are prosecuted in state courts each year for drug possession offenses that are within the scope of HCR No. 127, and how much the Judiciary expends to adjudicate those cases. A published report from the Judiciary of the State of Hawaii provides some statistical data regarding the types of offenses processed through Hawaii’s criminal justice system in fiscal year 2014-2015. Tables 5-19 and 5-19 in Appendix B summarize relevant information from that report. Notably, while the statistics provide information on how many narcotic drug offenses are processed in the courts, especially in proportion to other matters, the statistics do not identify which specific drug offenses were processed and do not distinguish between drug possession offenses and other drug offenses. As a result, those statistics, while helpful, do not allow us to fully evaluate what impact decriminalization of the drugs specified in HCR No. 127 could have on Hawaii’s courts.

Because the Judiciary’s report provided mostly aggregated information, we requested more specific information directly from the Judiciary regarding the number and outcomes of criminal court cases filed against individuals for drug possession offenses, associated expenditures, and sources of funding.<sup>207</sup> We were able to obtain some of this information.<sup>208</sup>

From fiscal years 1999-2000 to 2015-2016, a total of 299,098 criminal counts were filed for all charges in the State’s circuit courts and family courts. Drug offenses comprised 49,968 of those counts, of which 28,305 were for offenses that can be committed by the simple possession of illicit drugs. Of those counts, 6,295 counts were filed against 5,711 parties for relevant offenses. From fiscal years 2012-2013 to 2015-2016,<sup>209</sup> a total of 111,025 criminal counts were filed for all charges in the State’s district courts. Of those counts, 3,255 were for relevant misdemeanor drugs offenses.<sup>210</sup>

Tables 5-21, 5-22, 5-23, 5-24, and 5-25, found in Appendix B, were created based on the Judiciary’s data. Once again, the tables may overestimate the number of filings made regarding drug possession offenses, because several of the statutory sections under which drug possession offenses may be committed have multiple provisions under which a person may be charged, some of which prohibit the distribution or sale of illicit drugs.

Based on the statistics we received, it is unknown how many of the defendants against whom a relevant drug offense was filed were charged for that offense only. It is also unclear how the courts disposed of each of the drug offenses.

The Judiciary stated that it was unable to provide information on expenditures imposed by the judicial branch of government for the enforcement of drug laws. The Judiciary also noted that its accounting systems “do not have the capability to capture the detail needed to isolate expenditures relating to criminal cases involving illicit drug offenses.”<sup>211</sup> Further, appropriations to the Judiciary do not specifically apply to cases involving illicit drugs. The only relevant fiscal information that the Judiciary could provide related to federal grants for the treatment of substance abuse offenders.<sup>212</sup> That information is replicated in the Table 5-26 in Appendix B.

### **Court Cases: Lack of Information from Prosecutors and the Public Defender**

Criminal cases impose costs not only on the courts, but also on the prosecutors who pursue these cases and the defense attorneys who represent defendants. In light of this, we attempted to obtain information from the prosecutors of the several counties<sup>213</sup> and the Criminal Justice Division of the Department of the Attorney General on the number of drug possession cases filed in each county and the outcomes of those cases and associated expenditures.<sup>214</sup> We also attempted to obtain corresponding information from the Office of the Public Defender,<sup>215</sup> which provides free legal representation to indigent criminal defendants.<sup>216</sup>

The Department of the Attorney General indicated that it prosecuted sixteen relevant drug offense counts during the entire period from 2000 to 2016. Expenditures for those enforcement efforts were unknown.<sup>217</sup> The number of cases prosecuted by Attorney General is not surprising, given that responsibility for the prosecution of the vast majority of state criminal offenses falls to county prosecutors. However, we did not receive any statistics from the county prosecutors. The Department of the Prosecuting Attorney, City and County of Honolulu, did not acknowledge receipt of our initial request letter or our follow-up letter. The prosecutors’ offices for Kauai and Maui counties acknowledged our request,<sup>218</sup> but did not subsequently provide any information. The Office of the Prosecuting Attorney, County of Hawaii, informed us that it did not have the resources to research individual dispositions of relevant drug cases and create timely reports given the limitations of its case management system.<sup>219</sup> The Office of the Public Defender provided a similar response.<sup>220</sup>

### **Arrests and Court Cases: Information from the Hawaii Criminal Justice Data Center**

In light of the limitations of much of the arrest and court data that we received from the police departments and the Judiciary, we also inquired with the Hawaii Criminal Justice Data Center (HCJDC), Department of the Attorney General, for data regarding the number of arrests, and the number and outcomes of criminal court cases, for relevant drug possession offenses.<sup>221</sup>

Two sets of data tables, Tables 5-27 and 5-28 found in Appendix B, are based on data provided by the HCJDC.<sup>222</sup> While the information that we received from the HCJDC was grouped

according to both fiscal years and calendar years, for the sake of simplicity, our tables include data for only calendar years. The first set of tables (Table 5-27 found in Appendix B) shows, from calendar years 2000 to 2015:

- The number of arrests for each of the drug possession offenses, separated by arresting agency and county; and
- The number of criminal court cases filed, separated by county.

The second set of tables (Table 5-28 found in Appendix B) shows, from calendar years 2000 to 2015:

- The number of arrests, for each of the drug possession offenses, in which the specified offense was the sole offense for which the suspect was arrested;
- The number of criminal court cases filed, by county, for each of the drug possession offenses, in which the specified offense was the sole offense for which the defendant was charged; and
- Among criminal court cases in which the specified offense was the sole offense for which the defendant was charged, the number of cases:
  - In which the court deferred its acceptance of the defendant's "guilty" or "no contest" plea to the offense charged;
  - In which the court referred the defendant to a drug court program;
  - In which the defendant was convicted; and
  - In which the defendant was sentenced to incarceration.<sup>223</sup>

We also note that there was some discrepancy between arrest data obtained from the HCJDC and data obtained directly from police. HCJDC indicated that it was difficult to determine what was causing the differences, because it was unknown how the police departments were counting arrests in their own data systems. Staff commented that a single incident could generate zero arrests or multiple arrests and suggested that police may be counting arrests according to incidents that occur or according to charges filed. Staff also suggested that some arrests could have been expunged from the HCJDC database.<sup>224</sup>

We also asked the various police departments for a possible explanation of the difference between their own data and HCJDC's data. HPD suggested that its data appears to be based on report numbers. If a person is arrested on multiple charges, the department generates a different report for each charge. So, if a person is arrested for three drug charges, the data that HPD provided us will indicate three separate arrests.<sup>225</sup> KPD informed us that data may reflect criminal cases, and cases may be initiated even when an arrest has not yet occurred. Further, when more than one suspect is arrested in the same incident for the same charge, KPD treats each separately, and not

as a single arrest. KPD noted that while the statistics it provided to the Bureau reflected arrests made by the department as a whole, it is possible that some statistics from other sources only reflect arrests from a particular division of a police department.<sup>226</sup> Our contact person at HCPD informed us that he did not have an explanation for the discrepancies.

Therefore, even though we received data from the police departments, the Judiciary, and the HCJDC, the inconsistency in the data leaves some uncertainty as to exactly how many arrests were made against individuals whose *sole alleged offense* in any given case was the commission of a relevant drug possession offense.

We note that differences in data from the Judiciary and the HCJDC regarding the number of court filings for each offense can be explained by the fact that the Judiciary clearly reported its statistics by the number of *parties* against whom cases were filed,<sup>227</sup> while the HCJDC reported its statistics by the number of *cases* filed.<sup>228</sup> Therefore, since the data are measuring different statistics, we did not raise the same concerns regarding consistency that we raised regarding arrest data.

### **PATTERN IN ARRESTS, PROSECUTIONS, AND INCARCERATIONS FOR SINGLE DRUG POSSESSION OFFENSES**

Figures 5-8 through 5-17 found in Appendix C<sup>229</sup> demonstrate the differences in some of the arrest data received from the police departments and from the HCJDC. However, in spite of the inconsistencies, the data provided by MPD, KPD and HCJDC all consistently suggest one point with regard to cases in which a relevant drug offense is the only offense for which a suspect is arrested: relatively few arrests by MPD and KPD are based solely on a single relevant drug offense.<sup>230</sup> Not only do HCJDC data suggest a similar conclusion, the data also suggest that few individuals are *prosecuted* and *incarcerated* solely for a single relevant drug offense.

As seen in Table 5-28 in Appendix B, according to statewide data from the HCJDC, in 2015 a relevant drug offense<sup>231</sup> was the sole offense in only:

- Three hundred seventy-nine arrests;
- Two hundred nine court filings;
- One hundred eight convictions; and
- Sixty-nine incarcerations.

Of those offenders, sixty-six were incarcerated pursuant to section 712-1249, HRS, for promoting a detrimental drug in the third degree, a petty misdemeanor (for which a convicted person may be imprisoned for up to thirty days).<sup>232</sup> One offender was incarcerated pursuant to section 712-1246.5, HRS, for promoting a harmful drug in the fourth degree, a misdemeanor (for which a convicted person may be imprisoned for up to one year).<sup>233</sup> The remaining two offenders were

incarcerated pursuant to section 712-1248, HRS, for promoting a detrimental drug in the third degree, which is also a misdemeanor.

### INFORMATION REGARDING INCARCERATION EXPENDITURES

We attempted to calculate the extent to which expenditures related to incarceration might decrease if the relevant drug possession offenses were decriminalized. We therefore inquired with the Corrections Division, Department of Public Safety about daily expenditures for incarcerating inmates.<sup>234</sup>

The Division estimated that the State expended \$140 per day to house each incarcerated inmate during fiscal year 2014-2015.<sup>235</sup> The Division noted that the estimate took into account wrap-around services for the inmate, including meals, rehabilitation programs, medical and dental care, mental health treatment, laundry services, as well as general facility operations. The Division was unable to break down this estimate by facility;<sup>236</sup> therefore, it is unknown, for example, what amount the State expends per day to incarcerate an inmate in the Oahu Community Correctional Center. Further, it was not clear exactly how the Division calculated its estimate.

By making very broad assumptions (as we discuss in more detail below), it may be estimated that if the foregoing offenses had been decriminalized in 2015, then the State may have saved up to \$430,500 in incarceration expenditures, as shown in Table 5-29 in Appendix B.

However, we acknowledge that these calculations may overestimate incarceration expenditures, as the broad assumptions on which they are based may not be accurate:

- **Assumption 1:** *Sentenced offenders were incarcerated for the maximum term of imprisonment.* However, offenders sentenced to incarceration do not necessarily serve the maximum terms of imprisonment that may be imposed by law. When a person is incarcerated for the commission of a class C felony, the court normally establishes the maximum term of imprisonment, which may range from one year to five years, depending upon the offense involved.<sup>237</sup> However, the Hawaii Paroling Authority establishes a minimum length of imprisonment, which may be up to the maximum term of imprisonment established by the court, but may also be shorter.<sup>238</sup> When a person is incarcerated for the commission of a misdemeanor or a petty misdemeanor, the court may impose a maximum jail term of one year or thirty days, respectively, but also has the discretion to impose a shorter period of incarceration.<sup>239</sup>
- **Assumption 2:** *The offenders incarcerated for violating Section 712-1248, HRS, were guilty of possessing an illicit drug, not distributing an illicit drug.* Since a person may violate this section either by possessing or distributing a detrimental drug in certain quantities, it is possible that the incarcerated offenders reflected in this table engaged in distribution. If that is the case, then a law that decriminalized the *possession* of detrimental drugs would not have decreased the cost of incarcerating the two offenders.

- **Assumption 3:** *The estimated incarceration expenditure of \$140 per day applies to all inmates.* As noted above, it is unclear how the Corrections Division arrived at this estimate. Therefore, it is unclear exactly how much the State could save in incarceration expenditures if relevant offenses were decriminalized.

### **THE UNCERTAINTY REGARDING THE LEGISLATURE'S PREFERRED DECRIMINALIZATION SCHEME MAKES IT DIFFICULT TO ESTIMATE THE POTENTIAL IMPACTS OF DECRIMINALIZATION**

The information set forth in this chapter demonstrates that there are limitations regarding data on current drug use trends, the need for and availability of treatment, and the enforcement of statutes pertaining to drug possession offenses in Hawaii. But even if sufficient data were available, our ability to estimate the potential future impact on administrative and judicial systems of the decriminalization of relevant drug possession offenses faces another obstacle. That is, any attempt at such an estimation is hindered by the lack of specificity regarding the scope of any decriminalization scheme to be implemented in Hawaii. Specifically, based in part on the issues discussed in Chapter 4, the Legislature's preferences in this regard are unknown and the method by which laws would be enforced through the scheme are also unknown. In particular, uncertainty with respect to the following issues impedes our analysis.

### **UNCERTAINTY AS TO WHICH DRUGS SHOULD BE DECRIMINALIZED, AND IN WHAT QUANTITIES**

As discussed in Chapter 4, Hawaii's legal framework presents challenges to the duplication of Portugal's model in this State. The most significant challenge is the fact that Hawaii law may be superseded by conflicting federal law.<sup>240</sup> Whether Hawaii decriminalizes possession of all illicit drugs for personal use, a smaller scope of illicit drugs as specified in HCR No. 127, or just marijuana, the possession of illicit drugs would remain illegal under federal law unless federal law were also changed.<sup>241</sup>

In light of the fact that the United States Department of Justice does not currently regard the possession of marijuana for personal use as an enforcement priority, some states have eliminated incarceration as a penalty for the possession of small quantities of marijuana, yet still impose civil penalties for the possession of the drug in those small quantities.<sup>242</sup> The maximum quantity that constitutes a decriminalized quantity varies from state to state, although the most common quantity is one ounce.<sup>243</sup> However, even if we assume that Hawaii would follow suit and decriminalize only marijuana, that assumption presents another problem, as discussed below.

### **UNCERTAINTY AS TO WHETHER ADMINISTRATIVE OR JUDICIAL TRIBUNALS WOULD PRESIDE OVER PROCEEDINGS IN A DECRIMINALIZED SYSTEM**

As discussed in Chapter 3, under its decriminalization scheme, Portugal employs administrative dissuasion commissions, not courts, to preside over proceedings for alleged violations of decriminalized drug offenses. Policymakers in Hawaii would need to determine whether the State should utilize similar commissions here, or adapt to new uses the judicial structures that already exist. Portugal's commissions include experts in medicine, psychology, and social service who understand drug users. Such expertise, in theory, can arguably lead to better judgment in determining penalties and potential treatment for users of illicit drugs, especially in light of the fact that Portugal decriminalized the possession of small amounts of *all* illicit drugs. However, if Hawaii were to decriminalize only the possession of small amounts of marijuana, it is unknown whether the decriminalization scheme would also include a new tribunal system similar to Portugal's dissuasion commission system solely to handle cases involving only one substance.

The establishment of such tribunals, which are unprecedented in Hawaii, could require considerable funding, resources, and time to implement, including that needed to locate and employ qualified staff. Further, enforcement and oversight would require the creation of appropriate structures to track offenses and compliance with penalties, and to assign and monitor any additional sanctions imposed for noncompliance. In contrast, criminal courts are already established in Hawaii and include programs aimed at reducing drug use and recidivism (e.g. drug courts and HOPE probation). However, since judges are generally not health or social service experts, utilizing health professionals to help address the needs of drug users under a decriminalization scheme could require additional financial resources.

### **UNCERTAINTY AS TO WHAT PENALTIES SHOULD BE IMPOSED ON VIOLATORS**

If Hawaii were to implement a decriminalization scheme for marijuana only, other states could provide models regarding what civil penalties should be imposed. Among the states that have eliminated incarceration as a penalty for the possession of small quantities of marijuana yet still impose civil penalties for such possession, the civil penalty varies. The most common penalty for the first violation is a civil fine of \$100.<sup>244</sup> It is unclear if Hawaii would follow this model. Under state law, the current maximum fine in Hawaii for possession of less than one ounce of marijuana is \$1,000.<sup>245</sup>

It is also unclear what the penalty would be if Hawaii were to implement a decriminalization scheme for other detrimental drugs and harmful drugs. Current criminal fines for the possession of such drugs under the offenses specified by HCR No. 127 range from \$2,000 to \$10,000.

### **UNCERTAINTY AS TO WHETHER VIOLATORS WOULD REMAIN SUBJECT TO ARREST AND DETENTION**

In Portugal, drug users are only held in custody if their identification is unknown, and only until they appear before the appropriate dissuasion commissions.<sup>246</sup> In theory, eliminating arrests could remove a source of stigma that may deter users from seeking treatment and may affect employment and other opportunities. Since county police departments currently conduct most enforcement actions in Hawaii with regard to drug possession offenses, they might reasonably be expected to perform similar duties with regard to drugs that are decriminalized but not legalized, issuing administrative citations rather than making arrests. However, it may be argued that arrests may help ensure that users appear before the appropriate presiding authority, which may ultimately have a more positive impact on a user than the mere payment of a fine without any appearance.<sup>247</sup>

### **UNCERTAINTY AS TO WHETHER DECRIMINALIZATION WOULD BE PART OF A BROADER-BASED HEALTH STRATEGY**

As noted previously, Portugal's strategy also included important components such as drug use education and prevention, health care for drug users, harm reduction programs for drug users (e.g., needle exchange), treatment of drug users in lieu of incarceration, treatment for incarcerated drug users, managed reintegration of formerly incarcerated drug users, research on drug use and treatment, and commitment of necessary financial resources.<sup>248</sup> However, the main impetus for Portugal's national decriminalization strategy regarding illicit drugs was a serious increase in the use of heroin, which is classified as a dangerous drug in Hawaii.<sup>249</sup> If the State were to decriminalize the possession all illicit drugs, especially methamphetamine, heroin, and other dangerous drugs, then it seems that the State would need to fund and implement a similar broader-based health-oriented strategy. If, on the other hand, the State were to decriminalize only the possession of marijuana, or even if the decriminalization scheme involved only marijuana and detrimental and harmful drugs, the need to implement and fund a broad-based health-oriented strategy may arguably be relatively less urgent, since these drugs may be perceived by some as "softer" than "hard" drugs like methamphetamine and heroin.

### **ENDNOTES**

1. House Concurrent Resolution No. 127, H.D. 1, S.D. 1 (2016) (hereinafter HCR No. 127).
2. These are primarily annual and periodic reports from governmental agencies, including the United States Department of Health and Human Services; and the State of Hawaii Judiciary, the Department of the Attorney General, and the Department of Health. The reports are cited in endnotes throughout this chapter.
3. The omission of these drugs is notable because of their prevalence in Hawaii, the United States, or Portugal, as noted throughout this chapter.



4. *Portugal country overview, Drug use among the general population and young people*, EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, <http://www.emcdda.europa.eu/countries/portugal> (last updated May 20, 2016).
5. As discussed in this chapter, the age range of Portugal's general population drug use survey is fifteen through sixty-four, while Hawaii and United States statistics survey those twelve and older.
6. The general population drug use surveys of Portugal reports on the use of any illicit drug; licit alcohol; licit tobacco; cannabis; heroin; amphetamines; cocaine; ecstasy; LSD; hallucinogenic mushrooms; and licit tranquilizers and sedatives. It is unclear which specific substances the Portugal survey includes when referring to "any illicit drugs," "amphetamines," and "tranquilizers and sedatives." Casimiro Balsa et al., III General Population Survey on Drugs Use, Portugal 2012: First Results (June 18, 2013) (slideshow presentation), [http://www.emcdda.europa.eu/attachements.cfm/att\\_225966\\_EN\\_1.C.Urbano-GeneralPopulationSurveyonDrugsUse.pdf](http://www.emcdda.europa.eu/attachements.cfm/att_225966_EN_1.C.Urbano-GeneralPopulationSurveyonDrugsUse.pdf). The National Survey on Drug Use and Health (NSDUH) conducted annually by the United States Substance Abuse and Mental Health Services Administration (SAMHSA) reports national estimated prevalence rates for a variety of drugs, but the only state-specific use data on which it reports is regarding the use of: any illicit drug; alcohol; tobacco; marijuana; cocaine; and nonmedical use of pain relievers. See UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, 2013-2014 NATIONAL SURVEY ON DRUG USE AND HEALTH: MODEL-BASED PREVALENCE ESTIMATES (50 STATES AND THE DISTRICT OF COLUMBIA) tbl.1 (2015), <http://www.samhsa.gov/data/sites/default/files/NSDUHsaePercents2014.pdf> [hereinafter SAMHSA 2013-2014 PREVALENCE ESTIMATES]. Illicit drugs are defined by SAMHSA as "marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used nonmedically." *Id.* tbl.1.
7. The prevalence of drug use is categorized in three ways by the general population survey of Portugal as: (1) lifetime use, someone who has used a specific substance at least once in their lifetime; (2) someone who has used a specific substance at least once over the past year; or (3) current use, someone who has used a specific substance over the past month. SAMHSA and other surveys and studies use the same intervals to determine the prevalence of drug use, but not every survey or study collects or reports detailed information for each category. Balsa et al., *supra* note 6.
8. A report regarding the 2002 NSDUH states that "because of improvements to the survey in 2002, estimates from the 2002 NSDUH should not be compared with estimates from the 2001 and earlier [National Household Surveys on Drug Abuse] to assess change over time in substance use. Therefore, the 2002 data will constitute a new baseline for tracking trends in substance use and other measures." UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, RESULTS FROM THE 2002 NATIONAL SURVEY ON DRUG USE AND HEALTH: NATIONAL FINDINGS 1 (2003), <https://ia801601.us.archive.org/12/items/resultsfrom2002n00offi/resultsfrom2002n00offi.pdf>.
9. HCR No. 127 called for a review of the potential effects of decriminalizing marijuana, marijuana concentrates, and detrimental and harmful drugs. Section 712-1240, Hawaii Revised Statutes (HRS), defines and classifies drugs in multiple categories. "Dangerous drugs" are defined as "any substance or immediate precursor defined or specified as a 'Schedule I substance' or a 'Schedule II substance' by chapter 329 [HRS], or a substance specified in section 329-18(c)(14) [HRS], except marijuana or marijuana concentrate." "Harmful drugs" are defined as "any substance or immediate precursor defined or specified as a 'Schedule III substance' or a

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- ‘Schedule IV substance’ by chapter 329 [HRS], or any marijuana concentrate except marijuana and a substance specified in section 329-18(c)(14) [HRS].” “Detrimental drugs” are defined as “any substance or immediate precursor defined or specified as a ‘Schedule V substance’ by chapter 329 [HRS], or any marijuana.”
10. See note 6 of this chapter for SAMHSA’s definition of illicit drugs
  11. SARRA L HEDDEN, ET AL., UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, BEHAVIORAL HEALTH TRENDS IN THE UNITED STATES: RESULTS FROM THE 2014 NATIONAL SURVEY ON DRUG USE AND HEALTH 1 (2015), <http://www.samhsa.gov/data/sites/default/files/NSDUH-FRR1-2014/NSDUH-FRR1-2014.pdf>.
  12. *Id.*
  13. SAMHSA 2013-2014 PREVALENCE ESTIMATES, *supra* note 6, tbl.1.
  14. UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, 2011-2012 NATIONAL SURVEY ON DRUG USE AND HEALTH: MODEL-BASED PREVALENCE ESTIMATES (50 STATES AND THE DISTRICT OF COLUMBIA) tbl.1 (2014), <http://archive.samhsa.gov/data/NSDUH/2k12State/Tables/NSDUHsaeTables2012.pdf> [hereinafter SAMHSA 2011-2012 PREVALENCE ESTIMATES]; UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, 2012-2013 NATIONAL SURVEY ON DRUG USE AND HEALTH: MODEL-BASED PREVALENCE ESTIMATES (50 STATES AND THE DISTRICT OF COLUMBIA) tbl.1 (2014), <https://www.samhsa.gov/data/sites/default/files/NSDUHStateEst2012-2013-p1/Tables/NSDUHsaePercents2013.pdf> [hereinafter SAMHSA 2012-2013 PREVALENCE ESTIMATES].
  15. Balsa et al., *supra* note 6 (unclear how the Portugal general population drug use survey defined “illicit drugs.”)
  16. *Id.*
  17. *Id.*
  18. *Id.*
  19. *Id.*
  20. *Marijuana (Cannabis)*, U.S. DEP’T HEALTH HUM. SERVICES, SAMHSA, <http://www.samhsa.gov/atod/marijuana> (last updated Nov. 21, 2016).
  21. The General Population Drug Use Survey in Portugal reports on cannabis use rates. Balsa et al., *supra* note 6. For consistency within this report, we use the word “marijuana” in place of the word “cannabis.”
  22. *Id.*
  23. Alcohol, tobacco, and tranquilizers or sedatives. *Id.*
  24. *Id.*
  25. *Id.*
  26. *Id.*
  27. HEDDEN, ET AL., *supra* note 11, at 5.
  28. *Id.* at 6 fig.3 [hereinafter SAMHSA 2002-2003 PREVALENCE ESTIMATES]; UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, 2006-2007 NATIONAL SURVEY ON DRUG USE AND HEALTH: MODEL-BASED PREVALENCE ESTIMATES (50 STATES AND THE

- DISTRICT OF COLUMBIA) tbls. 2 & 3 (2009), <http://archive.samhsa.gov/data/NSDUH/2k07State/NSDUHsae2007/ExcelTabs/NSDUHsaeTabs2007.pdf>.
29. UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, COMPARISON OF THE 2002-2003 AND 2009-2010 MODEL-BASED PREVALENCE ESTIMATES (50 STATES AND THE DISTRICT OF COLUMBIA) tbls. 2 & 3 (2012), <http://archive.samhsa.gov/data/2k3State/2k3SAE.pdf>; *Id.*
30. SAMHSA 2002-2003 PREVALENCE ESTIMATES, *supra* note 28.
31. UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, 2007-2008 NATIONAL SURVEY ON DRUG USE AND HEALTH: MODEL-BASED PREVALENCE ESTIMATES (50 STATES AND THE DISTRICT OF COLUMBIA) tbls. 2 & 3 (n.d.), <http://archive.samhsa.gov/data/NSDUH/2k08State/NSDUHsae2008/ExcelTables/NSDUHsaeTabs2008.pdf>.
32. The United States Central Intelligence Agency estimates Portugal’s fifteen to sixty-four year old population to be 7,083,431, 1.7 percent of which is 120,418. *The World Factbook: Portugal*, CENT. INTELLIGENCE AGENCY, <https://www.cia.gov/library/publications/the-world-factbook/geos/po.html> (last visited Dec. 21, 2016).
33. DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, TREATMENT EPISODE DATA SET (TEDS) 2001-2011: STATE ADMISSIONS TO SUBSTANCE ABUSE TREATMENT SERVICES 25 fig.19 (2013), [https://www.samhsa.gov/data/sites/default/files/TEDS2011St\\_Web/TEDS2011St\\_Web/TEDS2011St\\_Web.pdf](https://www.samhsa.gov/data/sites/default/files/TEDS2011St_Web/TEDS2011St_Web/TEDS2011St_Web.pdf).
34. *Id.*
35. Center for Behavioral Health Statistics and Quality, *Treatment Episode Data Set, Substance Abuse Treatment Admissions by Primary Substance of Abuse, According to Sex, Age Group, Race, and Ethnicity, Year = 2013*, U.S. DEP’T HEALTH HUM. SERVICES, SAMHSA, <http://www.dasis.samhsa.gov/webt/quicklink/HI13.htm> (last updated Nov. 1, 2016) [hereinafter *TEDS 2013*].
36. Center for Behavioral Health Statistics and Quality, *Treatment Episode Data Set, Substance Abuse Treatment Admissions by Primary Substance of Abuse, According to Sex, Age Group, Race, and Ethnicity, Year = 2014*, U.S. DEP’T HEALTH HUM. SERVICES, SAMHSA, <http://www.dasis.samhsa.gov/webt/quicklink/HI14.htm> (last updated Nov. 1, 2016) [hereinafter *TEDS 2014*].
37. Center for Behavioral Health Statistics and Quality, *Treatment Episode Data Set, Substance Abuse Treatment Admissions by Primary Substance of Abuse, According to Sex, Age Group, Race, and Ethnicity, Year = 2015*, U.S. DEP’T HEALTH HUM. SERVICES, SAMHSA, <http://www.dasis.samhsa.gov/webt/quicklink/HI15.htm> (last updated Nov. 1, 2016) [hereinafter *TEDS 2015*].
38. Some drugs formerly available with a prescription, such as methaqualone (quaalude) have been subsequently banned in their entirety. Victoria Bekiempis, *Do People Still Take Quaaludes?*, Newsweek (Aug. 2, 2015, 10:13 AM), <http://www.newsweek.com/do-people-still-take-quaaludes-357914>.
39. Section 712-1240, HRS, defines and classifies drugs in multiple categories. “Harmful drugs” are defined as “any substance or immediate precursor defined or specified as a ‘Schedule III

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substance' or a 'Schedule IV substance' by chapter 329 [HRS], or any marijuana concentrate except marijuana and a substance specified in section 329-18(c)(14) [HRS]." "Detrimental drugs" are defined as "any substance or immediate precursor defined or specified as a 'Schedule V substance' by chapter 329 [HRS], or any marijuana." Schedules III, IV, and V are listed in sections 329-18, 329-20, and 329-22, HRS.

40. *Misuse of Prescription Drugs: What are stimulants?*, NAT'L INST. ON DRUG ABUSE, <https://www.drugabuse.gov/publications/research-reports/prescription-drugs/stimulants/what-are-stimulants> (last updated Aug. 2016).
41. This category includes admissions for all other stimulants that are not separately counted, such as cocaine or amphetamines. *Primary Substances*, U.S. DEP'T HEALTH HUM. SERVICES, SAMHSA, <http://www.dasis.samhsa.gov/webt/definitions.htm> (last visited Dec. 21, 2016).
42. *TEDS 2013*, *supra* note 35.
43. *TEDS 2014*, *supra* note 36.
44. *TEDS 2015*, *supra* note 37.
45. *Id.*; *TEDS 2013*, *supra* note 35; *TEDS 2014*, *supra* note 36.
46. *Media Guide: Most Commonly Used Addictive Drugs*, NAT'L INST. ON DRUG ABUSE (last updated Oct. 2016), <https://www.drugabuse.gov/publications/media-guide/most-commonly-used-addictive-drugs>.
47. Balsa et al., *supra* note 6.
48. *Id.*
49. *Id.*
50. This category includes admissions for benzodiazepines, which include diazepam, flurazepam, chlordiazepoxide, clorazepate, lorazepam, alprazolam, oxazepam, temazepam, prazepam, triazolam, clonazepam, halazepam and other tranquilizers. *Primary Substances*, *supra* note 41.
51. *See TEDS 2013*, *supra* note 35.
52. *See TEDS 2014*, *supra* note 36.
53. *See TEDS 2015*, *supra* note 37.
54. This category includes admissions for barbiturates including phenobarbital, Seconal, Nembutal and other sedatives/hypnotics such as chloral hydrate, Placidyl, and Doriden. *Primary Substances*, *supra* note 41.
55. *See TEDS 2015*, *supra* note 37.
56. Such options include muscle relaxants. *Back Pain Health Center: Muscle Relaxants*, WebMD, <http://www.webmd.com/back-pain/muscle-relaxants-for-low-back-pain> (last updated May 22, 2015).
57. *Opioids*, NAT'L INST. ON DRUG ABUSE, <https://www.drugabuse.gov/drugs-abuse/opioids> (last updated May 2016).
58. For example, oxycodone and codeine are dangerous drugs. Section 329-16, HRS. However, drugs with certain levels of codeine are harmful or detrimental drugs. Sections 329-18 and 329-20, HRS.
59. *Most Commonly Used Addictive Drugs*, *supra* note 46.

60. Comprehensive Addiction and Recovery Act of 2016, Pub. L. No. 114-198.
61. The United States Department of Health and Human Services awarded \$53 million to forty-four different states, four tribes, and the District of Columbia to improve access to treatment for opioid use disorders, reduce opioid related deaths, and strengthen drug misuse prevention efforts. Hawaii will split \$6 million with twelve other states and the District of Columbia for “The Prescription Drug Overdose: Data-Driven Prevent Initiative” to advance and evaluate state level prevention activities to address opioid misuse and overdose. Press Release, HHS awards \$53 million to help address opioid epidemic, Dep’t Housing & Hum. Services Press Off. (August 31, 2016), <https://www.hhs.gov/about/news/2016/08/31/hhs-awards-53-million-to-help-address-opioid-epidemic.html>.
62. UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, NATIONAL SURVEY ON DRUG USE AND HEALTH: COMPARISON OF 2002-2003 AND 2011-2012 MODEL-BASED PREVALENCE ESTIMATES (50 STATES AND THE DISTRICT OF COLUMBIA) tbl. 8 (2014), <https://www.samhsa.gov/data/sites/default/files/NSDUHStateEst2011-2012/TrendTabs/Web/NSDUHsaeTrendTabs2012.pdf> [hereinafter SAMHSA COMPARISON].
63. UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, 2010-2011 NATIONAL SURVEY ON DRUG USE AND HEALTH: MODEL-BASED PREVALENCE ESTIMATES (50 STATES AND THE DISTRICT OF COLUMBIA) tbl.8 (2014), <http://archive.samhsa.gov/data/NSDUH/2k11State/NSDUHsae2011/ExcelTabs/NSDUHsaeTables2011.pdf> [hereinafter SAMHSA 2010-2011 PREVALENCE ESTIMATES].
64. SAMHSA 2011-2012 PREVALENCE ESTIMATES, *supra* note 14, tbl.8.
65. SAMHSA 2012-2013 PREVALENCE ESTIMATES, *supra* note 14, tbl.8.
66. SAMHSA 2013-2014 PREVALENCE ESTIMATES, *supra* note 6, tbl.8.
67. SAMHSA COMPARISON, *supra* note 62.
68. SAMHSA 2010-2011 PREVALENCE ESTIMATES, *supra* note 63.
69. SAMHSA 2011-2012 PREVALENCE ESTIMATES, *supra* note 14, tbl.8.
70. SAMHSA 2012-2013 PREVALENCE ESTIMATES, *supra* note 14, tbl.8.
71. SAMHSA 2013-2014 PREVALENCE ESTIMATES, *supra* note 6, tbl.8.
72. This category includes admissions for non-prescription use of methadone, codeine, morphine, oxycodone, hydromorphone, meperidine, opium, and other drugs with morphine-like effects. *Primary Substances*, *supra* note 41.
73. *See TEDS 2013*, *supra* note 35.
74. *See TEDS 2014*, *supra* note 36.
75. *See TEDS 2015*, *supra* note 37.
76. See “National Drug Strategy” in Chapter 3 of this report for further discussion.
77. Portugal’s national drug strategy included needle exchange programs. *See supra* Chapter 3 note 30.
78. Lifetime rates increased 0.7 percent to 1.1 percent, past year rates increased 0.2 percent to 0.3 percent, and past month rates increased 0.1 percent to 0.2 percent. Balsa et al., *supra* note 6.
79. *Id.*

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80. *See, e.g., id.*
81. *See* note 6; UNITED STATES DEPARTMENT OF JUSTICE, DRUG ENFORCEMENT ADMINISTRATION, 2015 NATIONAL DRUG THREAT ASSESSMENT 27, 31 (2015), <https://www.dea.gov/docs/2015%20NDTA%20Report.pdf>.
82. *See* note 6 of this chapter for which drugs SAMHSA reports state-specific use estimates.
83. UNITED STATES DEPARTMENT OF JUSTICE, NATIONAL DRUG INTELLIGENCE CENTER, HAWAII DRUG THREAT ASSESSMENT iii-iv (2002), <https://www.justice.gov/archive/ndic/pubs07/998/998p.pdf>.
84. *Id.* at 12.
85. *See TEDS 2015, supra* note 37.
86. *Stimulants, Methamphetamine*, U.S. DEP'T HEALTH HUM. SERVICES, SAMHSA, <http://www.samhsa.gov/atod/stimulants> (last updated Mar. 2, 2016).
87. Section 329-16, HRS.
88. This category includes methamphetamine and other amphetamines including Benzedrine, Dexedrine, preludin, Ritalin and any other amines and related drugs. *Primary Substances, supra* note 41.
89. *See TEDS 2013, supra* note 35.
90. *See TEDS 2014, supra* note 36.
91. *See TEDS 2015, supra* note 37.
92. E-mail correspondence with ADAD staff on October 20, 2016 (on file with the Bureau).
93. *See Balsa et al., supra* note 6.
94. *Id.*
95. In fiscal year 2015-2016, over half of all ADAD-funded adult substance abuse treatment admissions were for methamphetamine treatment. E-mail correspondence with ADAD staff on October 20, 2016 (on file with the Bureau).
96. *See* “Drug Use Trends” in this chapter.
97. Letter to DEA staff on August 30, 2016; Letter to Hawaii HIDTA staff on August 24, 2016; Letter to Narcotics Enforcement Division staff on October 10, 2016. All letters are on file with the Bureau.
98. E-mail correspondence with Hawaii HIDTA staff on September 1, 2016 (on file with the Bureau).
99. HAWAII HIDTA INVESTIGATIVE SUPPORT CENTER, OFFICE OF NATIONAL DRUG CONTROL POLICY, STATE OF HAWAII, HAWAII HIDTA ANNUAL REPORT FOR CALENDAR YEAR 2015 11 (2016).
100. *Id.* at 52.
101. *Id.* at 11.
102. *Id.*
103. *Id.*
104. Letter from Narcotics Enforcement Division staff on October 19, 2016 (on file with the Bureau).

105. According to SAMHSA:  
The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), no longer uses the terms substance abuse and substance dependence, rather it refers to substance use disorders, which are defined as mild, moderate, or severe to indicate the level of severity, which is determined by the number of diagnostic criteria met by an individual. Substance use disorders occur when the recurrent use of alcohol and/or drugs causes clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home. According to the DSM-5, a diagnosis of substance use disorder is based on evidence of impaired control, social impairment, risky use, and pharmacological criteria.  
*Substance Use Disorders*, U.S. DEP'T HEALTH HUM. SERVICES, SAMHSA, <https://www.samhsa.gov/disorders/substance-use> (last updated Oct. 27, 2015).
106. EXECUTIVE OFFICE OF THE PRESIDENT OF THE UNITED STATES, NATIONAL DRUG CONTROL STRATEGY 2015 29 (2015), [https://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/2015\\_national\\_drug\\_control\\_strategy\\_0.pdf](https://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/2015_national_drug_control_strategy_0.pdf).
107. *Id.* at 31.
108. *Id.* at 31, 43.
109. Substance misuse is the use of any drug in a manner, situation, amount or frequency that can cause harm to users of those around them. UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, OFFICE OF THE SURGEON GENERAL, FACING ADDICTION IN AMERICA: THE SURGEON GENERAL'S REPORT ON ALCOHOL, DRUGS, AND HEALTH 1-6 (2016), <https://addiction.surgeongeneral.gov/surgeon-generals-report.pdf>.
110. *Id.* at 1-2.
111. *Id.* at iii.
112. *Treatments for Substance Use Disorders*, U.S. DEP'T HEALTH HUM. SERVICES, SAMHSA, <http://www.samhsa.gov/treatment/substance-use-disorders> (last updated Aug. 9, 2016).
113. For example, certain substance use treatment requires medication, and certain treatment is not benefitted by medication. *Id.*
114. For example, certain people may only need day treatment if the frequency of their substance use is minimal, whereas a more frequent user of a narcotic may require residential treatment. Additionally, treatment of opioid use often requires medication, while treatment for other drug use disorders does not use medication as a means of treatment. *Id.*
115. Persons with substance use who do not have private health insurance may have less options for treatment, as not all service providers accept publicly-funded health insurance. *See infra* notes 122-129 and accompanying text.
116. Certain substance use disorder treatment requires monitoring or assistance. Some treatment recipients may receive monitoring or assistance from family or friends, while others require state certified follow-up. SAMHSA, *Treatments for Substance Use Disorders*, *supra* note 112.
117. Courts often refer the highest risk offenders to treatment. See "Drug Court" in Chapter 4 of this report.

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118. UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, BEHAVIORAL HEALTH BAROMETER, HAWAII 2015 (2015), [http://www.samhsa.gov/data/sites/default/files/2015\\_Hawaii\\_BHBarometer.pdf](http://www.samhsa.gov/data/sites/default/files/2015_Hawaii_BHBarometer.pdf).
119. “Needing But Not Receiving Treatment refers to respondents classified as needing treatment for illicit drugs, but not receiving treatment for an illicit drug problem at a specialty facility (i.e., drug and alcohol rehabilitation facilities [inpatient or outpatient], hospitals [inpatient only], or mental health centers).” SAMHSA 2013-2014 PREVALENCE ESTIMATES, *supra* note 6, tbl.33.
120. “Illicit Drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used nonmedically. Illicit Drugs Other Than Marijuana include cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used nonmedically. These estimates include data from original methamphetamine questions but do not include new methamphetamine items added in 2005 and 2006.” *Id.*
121. *Id.* tbl.21
122. UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA, NATIONAL SURVEY OF SUBSTANCE ABUSE TREATMENT SERVICES (N-SSATS): 2014. DATA ON SUBSTANCE ABUSE TREATMENT FACILITIES 47 (2015), [https://www.dasis.samhsa.gov/dasis2/nssats/2014\\_nssats\\_rpt.pdf](https://www.dasis.samhsa.gov/dasis2/nssats/2014_nssats_rpt.pdf) [hereinafter SAMSHA N-SSATS 2014].
123. The number of facilities that offer substance use treatment as reported by SAMHSA may differ from the number of facilities reported by the Alcohol and Drug Abuse Division (ADAD) because: (a) ADAD only reports admission data that is funded by ADAD, while SAMHSA reports ADAD- and non-ADAD-funded admission data; and (b) the reporting criteria may be different. E-mail correspondence with ADAD staff on Oct. 20, 2016 (on file with the Bureau).
124. SAMSHA N-SSATS 2014, *supra* note 122, at 53.
125. *Id.* at 49.
126. Unlike other states, none of the hospitals in Hawaii offer residential inpatient services for substance use disorder treatment. SAMSHA N-SSATS 2014, *supra* note 122, at 57.
127. *Id.*
128. Access to Recovery is a federal program that provides funding for substance abuse services for states, territories, tribes, and tribal organizations to carry-out voucher programs for substance abuse clinical treatment and recovery support services. *PPHF-2014-Access to Recovery (PPHF-2014)*, U.S. DEP’T HEALTH HUM. SERVICES, SAMHSA, <https://www.samhsa.gov/grants/grant-announcements/ti-14-004> (last updated Sept. 11, 2015).
129. SAMSHA N-SSATS 2014, *supra* note 122, at 76.
130. *About the Alcohol and Drug Abuse Division*, ST. HAW., DEPT. HEALTH, ALCOHOL & DRUG ABUSE DIVISION, <http://health.hawaii.gov/substance-abuse> (last visited on Dec. 17, 2016).
131. *Id.*
132. E-mail correspondence with ADAD staff on October 20, 2016 (on file with the Bureau).
133. ADAD reports that there were five hundred ninety-six beds licensed and accredited in Special Treatment Facilities (both Residential Treatment Programs and residential Therapeutic Living



- Programs) whose primary focus is substance use disorder treatment in fiscal years 2014-2015 and 2015-2016. The vacancy rates of these beds is not tracked. *Id.*
134. *Id.*
135. *Id.*
136. *Id.*
137. Figures provided by ADAD. *Id.*
138. Specifically, the average cost expended by ADAD for treatment per person were \$4,670 (fiscal year 2011-2012), \$3,902 (fiscal year 2012-2013), \$3,873 (fiscal year 2013-2014), \$4,316 (fiscal year 2014-2015), and \$4,465 (fiscal year 2015-2016). *Id.*
139. *Id.*
140. Section 11-177.1-4, Hawaii Administrative Rules (HAR).
141. It should be noted that the number of *ADAD-certified* counselors may not represent the actual number of counselors actively working in the field of substance use treatment.
142. E-mail correspondence with ADAD staff on December 9, 2016 (on file with the Bureau).
143. See *infra* notes 168 to 171 and accompanying text.
144. THE JUDICIARY, STATE OF HAWAII, ANNUAL REPORT TO THE TWENTY-EIGHTH LEGISLATURE, 2016 REGULAR SESSION ON ACT 40, SESSION LAWS OF HAWAII 2004, HRS §601-21: A REPORT ON STATEWIDE SUBSTANCE ABUSE TREATMENT MONITORING PROGRAM 5-6 (2015), [http://www.courts.state.hi.us/docs/news\\_and\\_reports\\_docs/Proviso\\_Reports-final\\_12-15-15\\_1233PM.pdf](http://www.courts.state.hi.us/docs/news_and_reports_docs/Proviso_Reports-final_12-15-15_1233PM.pdf) [hereinafter JUDICIARY 2016 REPORT ON TREATMENT].
145. *Id.* at 7-9.
146. *Id.* at 7.
147. *Judiciary Informational Briefing: Hearing Before the S. Comm. on Ways & Means and the H. Comm. on Finance*, 28th Leg., tbl.20 (Haw. 2015) (written testimony of Judiciary), [http://www.capitol.hawaii.gov/session2015/testimony/MASTER\\_TESTIMONY\\_WAM-FIN\\_1-6-15\\_JUD\\_20150106.pdf](http://www.capitol.hawaii.gov/session2015/testimony/MASTER_TESTIMONY_WAM-FIN_1-6-15_JUD_20150106.pdf). The contracted entities were Aloha House, Inc.; Big Island Substance Abuse Council; Bobby Benson Center; CARE Hawaii; Hale Ho'okupa'a; Ho'omau Ke Ola; Maui Youth and Family Services, Inc.; Mental Health Kokua; The Queen's Medical Center; The Salvation Army; Waianae Coast Comprehensive Health Center; Women in Need; and Young Men's Christian Association of Honolulu.
148. JUDICIARY 2016 REPORT ON TREATMENT, *supra* note 144, at 5-6.
149. THE JUDICIARY, STATE OF HAWAII, ANNUAL REPORT TO THE TWENTY-EIGHTH LEGISLATURE ON ACT 40, SESSION LAWS OF HAWAII 2004, HRS §601-21: A REPORT ON STATEWIDE SUBSTANCE ABUSE TREATMENT MONITORING PROGRAM 6 (2014), [http://www.courts.state.hi.us/docs/news\\_and\\_reports\\_docs/2014\\_judiciary\\_proviso\\_report.pdf](http://www.courts.state.hi.us/docs/news_and_reports_docs/2014_judiciary_proviso_report.pdf). The data in this report did not distinguish between children and adults admitted.
150. Letter to DHS staff on August 5, 2016 (on file with the Bureau).
151. Letters to Department of Community Services, City & County of Honolulu staff on August 5 and September 1, 2016; Letter to Department of Finance, County of Hawaii staff on August 5, 2016; letters to Department of Finance, County of Kauai staff on August 5 and September 1, 2016;

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- Letter to Department of Housing and Human Concerns, County of Maui staff on on August 5, 2016. All letters are on file with the Bureau.
152. Letter to Corrections Division, PSD staff on October 10, 2016 (on file with the Bureau).
  153. Letter from DHS staff on August 26, 2016 (on file with the Bureau).
  154. Mental restoration services can include treatment. Section 17-401.1-2, HAR.
  155. DHS also provided statistics and expenditure data for treatment services for program recipients in the Office of Youth Services. Letter from DHS staff on August 26, 2016 (on file with the Bureau). However, since youth are not the focus of this study, we are excluding that data from this report.
  156. E-mail correspondence with Department of Housing and Human Concerns, County of Maui staff on October 4, 2016 (on file with the Bureau).
  157. Telephone Interview with Life Choices Kauai Program staff on September 6, 2016.
  158. These numbers do not account for inmates at Saguaro Correctional Center in Arizona, which houses some Hawaii-based inmates. The Corrections Division informed us that while approximately 300 inmates at that facility received treatment for illicit drug use during fiscal year 2015-2016, such treatment is provided as part of the “all inclusive” services provided by the contractor. The contractor charges the State of Hawaii the same for housing the inmates whether treatment services are rendered to them or not. Letter from Corrections Division, PSD staff on October 31, 2016 (on file with the Bureau).
  159. Patient Protection and Affordable Care Act, Pub. L. No. 111-148, 124 Stat 119 (2010).
  160. Christine Vestal, *Diverse Medicaid Rules Hurt in Fighting Addiction*, PEW CHARITABLE TRUSTS: STATELINE (Oct. 14, 2016), <http://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2016/10/14/diverse-medicaid-rules-hurt-in-fighting-addiction>; Christine Vestal, *How Severe is the Shortage of Substance Abuse Specialists?*, PEW CHARITABLE TRUSTS: STATELINE (Apr. 1, 2015), <http://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2015/4/01/how-severe-is-the-shortage-of-substance-abuse-specialists>.
  161. Patient Protection and Affordable Care Act § 1302(b), 124 Stat. at 163 (codified at 42 U.S.C. § 18022(b) (2012)).
  162. Vestal, *Diverse Medicaid Rules Hurt in Fighting Addiction*, *supra* note 160; Vestal, *How Severe is the Shortage of Substance Abuse Specialists?*, *supra* note 160.
  163. Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008, Pub. L. No. 110-343 tit. V, §§ 511–512, 122 Stat. 3765, 3881–3893.
  164. Vestal, *How Severe is the Shortage of Substance Abuse Specialists?*, *supra* note 160.
  165. *Id.*
  166. *Id.*
  167. *Id.*
  168. *Id.*
  169. *Id.*
  170. *Id.*
  171. *Id.*

172. *Id.*
173. *Id.*
174. *Id.*
175. Vestal, *Diverse Medicaid Rules Hurt in Fighting Addiction*, *supra* note 160.
176. *Id.*
177. Christine Vestal, *Nurses Step In to Boost Treatment for Opioid Addiction*, PEW CHARITABLE TRUSTS: STATELINE (Aug. 31, 2016), <http://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2016/08/31/nurses-step-in-to-boost-treatment-for-opioid-addiction>.
178. Vestal, *How Severe is the Shortage of Substance Abuse Specialists?*, *supra* note 160.
179. Christine Vestal, *States Move to Encourage More Addiction Counseling*, PEW CHARITABLE TRUSTS: STATELINE (Nov. 1, 2016), <http://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2016/11/01/states-move-to-encourage-more-addiction-counseling>.
180. Vestal, *Nurses Step In to Boost Treatment for Opioid Addiction*, *supra* note 177.
181. Mattie Quinn, *Your Peer Specialist Will See You Now*, GOVERNING (Aug. 2, 2016), <http://www.governing.com/topics/health-human-services/gov-peer-specialists-mental-health.html>; ADULT MENTAL HEALTH DIVISION, DEPARTMENT OF HEALTH, STATE OF HAWAII, HAWAII CERTIFIED PEER SPECIALIST PROGRAM: GUIDELINES, STANDARDS AND PROCEDURES 3 (2012), <https://health.hawaii.gov/amhd/files/2013/06/HCPS-Handbook.pdf>.
182. Quinn, *supra* note 181; ADULT MENTAL HEALTH DIVISION, *supra* note 181, at 12.
183. *See supra* Chapter 3, note 64, and accompanying text.
184. *See* “National Drug Strategy” in Chapter 3 of this report.
185. E-mail correspondence with ADAD staff on December 9, 2016 (on file with the Bureau).
186. *Id.*
187. The alternative activities strategy is to provide opportunities for participation in healthy, positive, and constructive activities that exclude substance use. These activities are assumed to offset the attraction to and/or meet the needs filled by alcohol and drugs, thereby reducing the likelihood of substance use. *Id.*
188. The community-based process strategy aims to enhance the ability of the community to more effectively provide prevention. Activities in this strategy include organizing, planning, enhancing the efficiency and effectiveness of service implementation, interagency collaborations, building coalitions and networking. *Id.*
189. The education strategy involves two-way communication between educator/facilitator and is distinguished from merely disseminating information by the fact that it is based on interaction between the educator and the participants. Activities under this strategy aim to affect critical life and social skills, including decision-making, refusal skills, and critical analysis (e.g., of media messages). *Id.*
190. The environmental strategies seek to establish or change community standards, codes, and attitudes, thereby influencing the incidence and prevalence of alcohol and drug abuse in the general population. This strategy is divided into two subcategories to permit distinction between activities that center on legal and regulatory initiatives and those that relate to service and action-oriented initiatives. *Id.*

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191. The information dissemination strategy is to provide awareness and knowledge of the nature and extent of substance use, abuse and addiction, and their effects on individuals, families, and communities, as well as available prevention programs and services. Information dissemination is characterized by one-way communication from the source to the audience with limited contact between the two. The information provided does not offer or promote a specific behavior change. *Id.*
192. The problem identification and referral strategy aims to identify those who have indulged in the illegal use of alcohol or drugs in order to assess whether their behavior can be reversed through education. It should be noted, however, that this strategy does not include any activity designed to determine if an individual is in need of treatment. *Id.*
193. Amounts are from ADAD. *Id.*
194. These offenses are listed under section 712-1246, HRS (Promoting a harmful drug in the third degree); section 712-1246.5, HRS (Promoting a harmful drug in the 4th degree); section 712-1247, HRS (Promoting a detrimental drug in the first degree); section 712-1248 (Promoting a detrimental drug in the second degree); and section 712-1249, HRS (Promoting a detrimental drug in the third degree). See “A Survey of Hawaii Drug Offenses Under the Scope of the Resolution” in Chapter 4 for more information on these offenses.
195. DEPARTMENT OF THE ATTORNEY GENERAL, STATE OF HAWAII, CRIME IN HAWAII 2014: A REVIEW OF UNIFORM CRIME REPORTS i (2016), <https://ag.hawaii.gov/cpja/files/2016/07/Crime-in-Hawaii-2014.pdf> [hereinafter AG 2014 REPORTS]; DEPARTMENT OF THE ATTORNEY GENERAL, STATE OF HAWAII, CRIME IN HAWAII 2005: A REVIEW OF UNIFORM CRIME REPORTS 109 (2009), [http://ag.hawaii.gov/cpja/files/2013/01/Crime\\_in\\_Hawaii\\_2005.pdf](http://ag.hawaii.gov/cpja/files/2013/01/Crime_in_Hawaii_2005.pdf) [hereinafter AG 2005 REPORTS].
196. This table is adapted from statistical tables in AG 2014 REPORTS, *supra* note 195, at 110; AG 2005 REPORTS, *supra* note 195, at 109.
197. Letter to Honolulu Police Department staff on August 5, 2016; Letters to Hawaii (County) Police Department staff on August 5 and September 1, 2016; Letters to Kauai Police Department staff on August 5 and September 1, 2016; Letters to Maui Police Department staff on August 5 and September 1, 2016. All letters are on file with the Bureau.
198. The data from the police departments analyzed in this report are drawn from correspondence made from August to December 2016. The primary sources of information were: E-mail correspondence with Honolulu Police Department staff on September 16, 2016; Letter from Hawaii (County) Police Department staff on September 8, 2016; Letter from Kauai Police Department staff on August 25, 2016; Letter from Maui Police Department staff on September 9, 2016. However, several follow-up communications were made in attempt to clarify information. All written correspondence is on file with the Bureau.
199. Sections 712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248, HRS.
200. Telephone Interview with Honolulu Police Department staff on September 23, 2016.
201. Telephone Interview with Kauai Police Department staff on September 21, 2016.
202. Telephone Interview with Honolulu Police Department staff on August 22, 2016.
203. Letter from Hawaii (County) Police Department staff on September 8, 2016 (on file with the Bureau).
204. *Id.*

205. *Id.*
206. Letter from Kauai Police Department staff on August 25, 2016; Letter from Maui Police Department staff on September 9, 2016. Both letters are on file with the Bureau.
207. Letter to Judiciary staff on August 5, 2016 (on file with the Bureau).
208. The data from the Judiciary analyzed in this report are drawn from correspondence made from August to October 2016. The primary source of information was e-mail correspondence with Judiciary staff on August 26, 2016. However, several follow-up communications were made in attempt to clarify information. All written correspondence is on file with the Bureau.
209. Judiciary staff informed us that some records were not available for earlier years. Telephone Interview with Judiciary staff on August 15, 2016.
210. Statistics we received from the Judiciary show that some felony drug cases were filed in the district courts of the State. However, while complaints may be filed in district courts in cases for which a preliminary hearing is held, that is only to initiate those cases, which are then sent to circuit courts. Rule 5(b), Hawaii Rules of Penal Procedure. Since district courts play only a small role in processing felony cases, we excluded those cases from district court statistics.
211. E-mail correspondence with Judiciary staff on August 26, 2016 (on file with the Bureau).
212. *Id.*
213. Letters to Department of the Prosecuting Attorney, City & County of Honolulu staff on August 5 and September 1, 2016; Letter to Office of the Prosecuting Attorney, County of Hawaii staff on August 5, 2016; Letter to Office of the Prosecuting Attorney, County of Kauai staff on August 5 and September 1, 2016; Letter to Department of the Prosecuting Attorney, County of Maui staff on August 5, 2016. All letters are on with the Bureau.
214. Letter to Criminal Justice Division staff on August 5, 2016 (on file with the Bureau).
215. Letters to Office of the Public Defender staff on August 5 and September 1, 2016 (on file with the Bureau).
216. Section 802-1, HRS.
217. Letter from Criminal Justice Division staff on August 25, 2016 (on file with the Bureau).
218. Telephone Interview with Office of the Prosecuting Attorney, County of Kauai staff on September 6, 2016; telephone interview with Department of the Prosecuting Attorney, County of Maui staff on August 23, 2016.
219. E-mail correspondence with Office of the Prosecuting Attorney, County of Hawaii staff on August 23, 2016 (on file with the Bureau).
220. Letter from Office of the Public Defender staff on October 12, 2016 (on file with the Bureau).
221. Letter to HCJDC staff on September 30, 2016 (on file with the Bureau).
222. The data from the HCJDC analyzed in this report are drawn from correspondence made from October to November 2016. The primary source of information was e-mail correspondence with HCJDC staff on October 20, 2016. However, several follow-up communications were made in attempt to clarify information. All written correspondence is on file with the Bureau.
223. Our inquiry also asked the HCJDC to provide statistics on court cases in which the outcome was still pending at the end of each year. Letter to HCJDC staff on September 30, 2016 (on file with the Bureau). The HCJDC's data showed that none of the relevant court cases had such a status at

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- the end of any given year. *See* E-mail correspondence with HCJDC staff on October 20, 2016 (on file with the Bureau).
224. E-mail correspondence with HCJDC staff on November 3 and November 29, 2016 (on file with the Bureau).
225. Telephone Interview with Honolulu Police Department staff on November 4, 2016.
226. Telephone Interview with Kauai Police Department staff on November 28, 2016.
227. E-mail correspondence with Judiciary staff on August 26, 2016 (on file with the Bureau).
228. E-mail correspondence with HCJDC staff on October 20, 2016 (on file with the Bureau).
229. *See* notes 198, 208, and 222 for more information on the collection of the data utilized in these figures.
230. *See supra*, p. 64.
231. *See* note 194 for a listing of relevant drug offenses.
232. Section 706-663, HRS.
233. *Id.*
234. Letter to Corrections Division, Department of Public Safety (PSD) staff on October 10, 2016 (on file with the Bureau).
235. Letter from Corrections Division, PSD staff on October 31, 2016 (on file with the Bureau).
236. E-mail correspondence with ADAD staff on November 9, 2016 (on file with the Bureau).
237. Section 706-660, HRS.
238. Sections 706-660 and 706-669, HRS.
239. Sections 706-660, and 706-663, HRS.
240. *See* “Conflicting Legal Authority in a Federal System of Government” in Chapter 4 of this report.
241. *Id.*
242. Laws have been enacted to decriminalize marijuana possession to some degree in nine states (Delaware, Illinois, Maryland, Minnesota, Mississippi, Nebraska, Ohio, Rhode Island, and Vermont) and depenalize such possession to some degree in four states (Connecticut, Missouri, New York, and North Carolina). *See infra* Chapter 6. Missouri’s law took effect on January 1, 2017. The preceding list does not include states that, along with the District of Columbia, have enacted laws to legalize the possession of small amounts of marijuana by removing all criminal and civil penalties for such possession. For a discussion of the distinction between decriminalization, depenalization, and legalization, see Chapter 2 of this report.
243. The quantity is one ounce in Delaware, Nebraska, Rhode Island, and Vermont; any amount *less* than ten grams (0.35274 ounces) in Maryland; ten grams in Illinois and, effective January 1, 2017, in Missouri; 0.5 ounces in Connecticut and North Carolina; thirty grams (1.05822 ounces) in Mississippi; 42.5 grams (1.499143 ounces) in Minnesota; and one hundred grams (3.5274 ounces) in Ohio. In New York, the quantity is not defined in statutory law. *See* Chapter 6 of this report for further discussion.
244. The maximum fine for a first violation is \$100 in Connecticut, Delaware, Maryland, and New York; \$150 in Ohio and Rhode Island; \$200 in Illinois, North Carolina, and Vermont; \$250 in

- Mississippi; \$300 in Minnesota and Nebraska; and \$500 in Missouri, effective January 1, 2017. *See infra* Chapter 6.
245. Section 712-1249, HRS. See also Table 4-1 in Appendix B.
246. See “Dissuasion Commission Process” in Chapter 3 for further discussion.
247. Some states that have decriminalized the possession of marijuana still provide for arrests in some circumstances. *See infra* Chapter 6.
248. See “National Drug Strategy” in Chapter 3 of this report.
249. *See supra* Chapter 4 note 20 and accompanying text. Sections 329-14(c) and 712-1240, HRS.

## Chapter 6

### OTHER DECRIMINALIZATION APPROACHES

Examining the experiences of other jurisdictions that have decriminalized certain aspects of drug possession and use may be instructive in relation to decriminalization approaches that may be contemplated for Hawaii. As will be reviewed in this chapter, Mexico has decriminalized the possession of small amounts of commonly used illicit drugs, including highly addictive drugs such as methamphetamine and heroin, but Mexico's approach and results have differed significantly from those in Portugal, which were discussed in chapters 3 and 4. In Europe, Spain and Italy had already taken steps to reduce penalties for possession of small amounts of illicit drugs by the time Portugal enacted its decriminalization law. A number of United States jurisdictions have also legalized, decriminalized, or designated as petty offenses the possession of small amounts of non-medical marijuana, but continue to criminalize possession and use of other illicit drugs.

#### MEXICO

Like Portugal, Mexico has decriminalized, through the legislative process, the possession of small amounts of drugs and devised strategies to direct drug users into treatment programs.<sup>1</sup> However, Mexico's approach has differed significantly from Portugal's and has not produced clear indications of success.<sup>2</sup> Rather, some analysts have viewed Mexico's shift to decriminalization in 2009 as a very problematic cautionary tale, underscoring the need to cast decriminalization as part of a larger shift toward treating drug abuse as a public health concern and to establish appropriate administrative structures and provide adequate resources for successful implementation.<sup>3</sup>

Over the past decade, Mexico has experienced a rapid increase in drug use and addiction<sup>4</sup> amid a horrific wave of violence related to drug trafficking and its suppression.<sup>5</sup> Mexico is a primary drug smuggling gateway to lucrative illegal markets in the United States for cocaine, heroin, marijuana, methamphetamine, and other drugs.<sup>6</sup> Competing criminal organizations have established drug production and distribution cartels with tightly controlled transportation networks within Mexico and the United States, in some areas challenging the Mexican government's control of territory or gaining de facto control of territory and government structures through widespread corruption and ineffective policing.<sup>7</sup> In 2006, the Mexican government began dispatching thousands of military troops and federal police officers across the country to assume duties normally carried out by state and local police officers.<sup>8</sup>

Nonetheless, the widespread availability of drugs has contributed to increased drug abuse, especially injected drug use, and the spread of HIV and other diseases associated with injected drug use. Heroin and methamphetamine injection and addiction are especially prevalent in some areas near the United States border that serve as major smuggling hubs. In the northwestern Mexican state of Baja California, 4.8 percent of the population in 2008 reported



injecting drugs, compared with 0.2 percent in Mexico as a whole.<sup>9</sup> Tijuana, the largest city in Baja California, may have the highest number of injected drug users per capita of any city in Mexico, along with one of the nation's most severe rates of HIV infection.<sup>10</sup>

In 2009, in response to the escalating drug-related violence and inability of authorities to prosecute and incarcerate the growing number of drug users and addicts, the Mexican Congress approved a drug decriminalization bill that has since been codified in Articles 478 and 479 of Mexico's General Law of Health.<sup>11</sup> The legislation generally provides that anyone apprehended by law enforcement officers with amounts of drugs below certain small limits may not be prosecuted, imprisoned, or fined.<sup>12</sup> A person caught possessing a decriminalized amount of drugs will be "encouraged" to seek treatment, if a first or second instance; drug abuse treatment is mandatory upon a third instance.<sup>13</sup> However, the sale of drugs, even in decriminalized amounts, remains a criminal offense, and the legislation increased penalties for possession of amounts of drugs that exceed the decriminalized limits.<sup>14</sup>

Mexico's approach to decriminalization and the circumstances in which it was undertaken differ from Portugal's in significant ways. For example, the amounts of drugs that may be possessed without criminal liability are much smaller in Mexico,<sup>15</sup> often below the amounts in which drugs are commonly sold on the street.<sup>16</sup> This may undermine the decriminalization scheme and expose drug users and addicts to criminal charges because most possession for personal use is still criminal.<sup>17</sup> Also, a person caught with drugs for a third time in Mexico may be taken into police custody and detained until released by a prosecutor or a judge,<sup>18</sup> rather than receive a citation and appear before a health-oriented civilian commission as in Portugal.<sup>19</sup> Cases in Mexico are routinely routed through the criminal justice system, and a prosecutor decides whether the amount of drugs possessed exceeded the decriminalized quantity.<sup>20</sup>

Widespread corruption is also a major concern, and the prospect of detention leaves drug users and addicts vulnerable to police extortion. Absent more sweeping reforms, corruption could remain a serious obstacle to decriminalization even if Mexico adopted Portuguese-style civilian dissuasion commissions but failed to properly fund their implementation and administration. As one analyst observed:

The level of corruption that pervades the Mexican government is staggering and stands in the way of executing any real reform. An extensive reform of the justice system in Mexico is needed; Portuguese-style decriminalization will not be a panacea for the system – and may in fact suffer as a result. Should the members of [Portuguese-style dissuasion commissions] be as corrupt as their existing law enforcement analogs, they may extort users diverted to them, and fail entirely to impose sanctions or refer addicts and users to treatment.<sup>21</sup>

Decriminalization in Mexico has also been hampered by a severe shortage of drug abuse treatment opportunities and facilities as well as other barriers to treatment. For example, a 2011 survey found that only 18 percent of Mexicans who meet the criteria for drug dependence were in treatment.<sup>22</sup> Tijuana is home to an estimated 10,000 heroin addicts and other injection drug users.<sup>23</sup> However, as of 2012, only three methadone maintenance<sup>24</sup> clinics were in operation in

Tijuana, two of which were private, for-profit businesses and the third of which was a public facility that charged fees for services.<sup>25</sup> Furthermore, data indicate that people who receive treatment for heroin addiction in Tijuana may be at increased risk of extortion by police.<sup>26</sup> There is also the potential for increased extortion nationwide:

There is a very real concern that this law will actually increase corruption and extortion by police forces. Jurisdiction to enforce criminal penalties for small-scale trafficking has been extended to state and local police, believed to be the most corrupt segments of Mexican law enforcement. These agencies will in turn experience new pressure to pursue drug offenders, requiring them to obtain more resources and skills. This will be a difficult task because they are already lacking in professional staff and sufficient capital. Extortion may also increase under this law because the low possession quantities that qualify as personal use under the amended laws could encourage state police forces to “shake down” addicts who possess an amount over the prescribed limit.<sup>27</sup>

Thus, although Mexico has decriminalized the possession of small quantities of drugs and partially begun a shift toward a public-health approach for the control and treatment of drug abuse, it has yet to implement a system that provides adequate access to treatment opportunities, nor does it adjudicate minor drug possession violations in a non-criminal context as does Portugal. Furthermore, the lucrative markets for illegal drugs in the United States continue to fuel violent conflict in Mexico over drug trafficking control and suppression and have contributed to the creation, growth, and maintenance of ancillary drug markets in Mexico.<sup>28</sup>

## EUROPE

Portugal's Law No. 30/2000 has often been portrayed as somewhat revolutionary. For example, in his 2009 white paper for the Cato Institute, Glenn Greenwald states that “no [European Union] state other than Portugal has *explicitly* declared drugs to be ‘decriminalized.’”<sup>29</sup> However, the significance of this declaration should be understood in a proper historical and legal context. While it is true that Portugal's Law No. 30/2000 was distinct in that, with regard to the possession of small amounts of illicit drugs, the law replaced the criminal court system entirely with an administrative process. Yet, at the time that Portugal enacted Law No. 30/2000, laws already in effect in Spain and Italy allowed offenders to avoid imprisonment as a possible sanction for the possession of small amounts of a broad range of illicit drugs, and that range was similar in scope to that of Portugal's new law.<sup>30</sup> For example, an offender under Spanish law could still be judged by a criminal court and acquire a criminal record, but the offender would not be sent to prison for mere consumption or possession.<sup>31</sup> Notably, Portugal's 1999 National Drug Strategy report praised Spain and Italy for their “bold” laws.<sup>32</sup> In light of the common geographic, cultural, political, legal, and economic factors that European countries face in addressing illicit drug use, it appears that Portugal's adoption of Law No. 30/2000 was not a significant departure from the laws of other countries on the continent. Rather, it would seem to have been an extension of an approach already undertaken elsewhere in Europe.<sup>33</sup>

## UNITED STATES: DECRIMINALIZATION OF MARIJUANA FOR NON-MEDICAL USE

Decriminalization that may have been effective in Portugal, an independent and sovereign nation in Europe, may not necessarily work for Hawaii, one state within a nation bound together by a federal government. A more apt comparison for Hawaii policymakers considering the decriminalization of illicit drugs may be the decriminalization legislation enacted in other American states.

As noted in Chapter 4, even if a state of the United States decriminalizes, depenalizes, or legalizes an illicit drug under its state laws, the practical effect of such a change may be limited by the fact that state laws may be superseded by federal law. To date, marijuana is the only illicit drug that any state has decriminalized, depenalized, or legalized with regard to non-medical use.<sup>34</sup> Broadly speaking, the decriminalization of small amounts of marijuana does not appear to have led to major increases in the consumption of marijuana.<sup>35</sup> However, this does not necessarily mean that the decriminalization of harder drugs such as heroin or methamphetamine would have a similarly benign effect.<sup>36</sup> Perhaps for this reason, to our knowledge, there has been only one recent state legislative measure that has attempted to decriminalize illicit drugs other than marijuana.<sup>37</sup> That 2016 Maryland bill would have made possession of “de minimis” quantities of seven “controlled dangerous substances” a civil offense, but it did not receive favorable committee action.<sup>38</sup>

Below is a brief discussion of the states that have decriminalized, depenalized, or legalized the personal possession of marijuana to some degree.

### Alaska

Alaska first moved toward legalization of marijuana use in 1975, when the Alaska Supreme Court ruled that, based on the state’s constitutional guarantee of a right to privacy, adults have the right to possess marijuana in their homes for personal use.<sup>39</sup> The Alaska legislature responded that year by passing a law that replaced criminal penalties for the possession of (1) up to one ounce of marijuana in public and (2) any amount of marijuana in private with a civil fine of up to \$100.<sup>40</sup> However, in 1982, in order to bring the state’s criminal code into true compliance with the 1975 court decision, Alaska law was again amended to repeal any penalty (civil or criminal) for any adult possession of less than four ounces of marijuana for in-home personal use.<sup>41</sup>

From 1990 to 2006, personal possession of small amounts of marijuana in the home went through a series of recriminalizations and decriminalizations through legislative acts and court decisions,<sup>42</sup> leaving a period of legal confusion that lasted until 2014.<sup>43</sup> That year, voters approved “Measure 2,” an initiative that legalized the recreational use and retail sale of marijuana,<sup>44</sup> and allowed adults twenty-one years or older to possess up to one ounce of marijuana and certain amounts of plants.<sup>45</sup>

## California

In 1975, California enacted a law that made possession of up to one ounce of marijuana a nonjailable criminal “misdemeanor” that is only punishable by a fine of up to \$100.<sup>46</sup> In 2011, California’s governor, noting that possession of such an amount of marijuana was already “an infraction in everything but name,”<sup>47</sup> signed a bill that officially made the offense an infraction.<sup>48</sup> Notably, while a person who commits an infraction in California is not subject to a sentence of imprisonment for that infraction, the person is still subject to arrest.<sup>49</sup>

One article estimated that California saved at least \$1 billion between 1976 and 1986 on enforcement expenditures as a result of making possession of an ounce or less of marijuana a citable and depenalized misdemeanor instead of a felony.<sup>50</sup> However, we cannot assume that Hawaii would save a significant amount of money if the State were to similarly depenalize or decriminalize the possession of up to one ounce of marijuana. As noted previously,<sup>51</sup> depending upon the amount in question, possession of less than one *pound* of non-medical marijuana is already a misdemeanor or petty misdemeanor in Hawaii, albeit an offense for which incarceration remains a possible penalty.<sup>52</sup> Further, as noted previously, Hawaii does not appear to routinely incarcerate large numbers of people solely for possession of less than one ounce of marijuana.<sup>53</sup>

During the 2016 general election, California’s voters approved a marijuana legalization measure, Proposition 64.<sup>54</sup> Many of the provisions of the ballot measure became effective on November 9, 2016,<sup>55</sup> including provisions that allow adults 21 years of age and older to possess and distribute without compensation up to 28.5 grams of non-concentrated marijuana or 8 grams of marijuana concentrate, and cultivate up to six living marijuana plants.<sup>56</sup> The measure also provides for the sale of recreational marijuana starting January 1, 2018.<sup>57</sup>

## Colorado

In 1975, Colorado enacted a law that deemed possession of one ounce or less of marijuana a “class 2 petty offense” punishable by a fine of up to \$100.<sup>58</sup> In 2012, Colorado voters approved a ballot initiative that amended Colorado’s constitution to legalize and regulate certain acts regarding marijuana.<sup>59</sup> For example, adults twenty-one years of age or older may possess, as well as transfer without compensation to other adults, up to one ounce of marijuana. They may also possess, grow, process, or transport up to six marijuana plants, including up to three mature plants.<sup>60</sup> The law also provides for the sale of marijuana in certain circumstances.<sup>61</sup>

## Connecticut

In 2011, Connecticut depenalized the possession of up to one-half ounce of marijuana. First time offenders face a fine of up to \$100, while repeat offenders face a fine up at least \$200 and up to \$500. Offenders who plead “no contest” or are found guilty of this offense upon the third time are referred to participate in a drug education program at their own expense.<sup>62</sup> While

offenders cannot be imprisoned for the offense of marijuana possession alone, an offender faces a separate jailable misdemeanor offense if he or she fails to (1) pay the fine, (2) fails to submit a timely plea of “not guilty,” or (3) fails to appear for any scheduled court appearance.<sup>63</sup>

## **Delaware**

In 2015, Delaware passed a law that imposed a civil penalty of up to \$100 for the possession of a “personal use quantity” (up to an ounce<sup>64</sup>) of marijuana.<sup>65</sup>

## **District of Columbia**

In 2014, the District of Columbia enacted a law that decriminalized the possession of up to one ounce of marijuana. Possessors would be required to pay a civil penalty of \$25.<sup>66</sup> Later that same year, voters approved Initiative 71,<sup>67</sup> which allows adults over the age of twenty-one to possess up to two ounces of marijuana and consume it on private property.<sup>68</sup>

## **Illinois**

In 2016, Illinois decriminalized the possession of up to ten grams of cannabis.<sup>69</sup> A person who knowingly possesses up to ten grams of cannabis is guilty of a civil law violation and may be fined up to \$200.<sup>70</sup>

## **Maine**

In 1975, Maine was one of the first states to decriminalize the possession of marijuana.<sup>71</sup> Currently, a person who possesses up to one and one-quarter ounces of marijuana commits a civil violation and may be fined between \$350 and \$600.<sup>72</sup> A person who possesses between one and one-quarter ounces to two and one-half ounces of marijuana commits a civil violation and may be fined between \$700 and \$1000.<sup>73</sup>

Marijuana legalization appeared on Maine’s ballot during the 2016 general election. Among other reforms, the measure proposed to allow adults 21 years of age and older to use, possess, and transfer without compensation up to 2.5 ounces of prepared marijuana, as well as cultivate a limited number of marijuana plants. The measure also provided for the retail sale of marijuana.<sup>74</sup> Voters in Maine approved the measure by a margin of 4,073 votes out of more than 750,000 cast.<sup>75</sup> After a recount challenge, the margin was reduced to 3,995 votes, but the “yes” side still prevailed.<sup>76</sup> On December 31, 2016, the Governor issued a proclamation verifying the results of balloting on the measure, which took effect on January 30, 2017.<sup>77</sup>

## **Maryland**

In 2014, Maryland enacted Chapter 158, which, among other things, made the use or possession of marijuana in a quantity of less than ten grams a civil offense.<sup>78</sup> Violation of this chapter is punishable by a fine of no more than \$100 for a first violation, \$250 for a second violation, and \$500 for each subsequent violation.<sup>79</sup> In 2016, following the override of a gubernatorial veto, Maryland enacted Chapter 4, which, among other changes, made smoking marijuana in a public place a civil offense punishable by a fine of no more than \$500, and decriminalized the use or possession of drug paraphernalia involving the use or possession of marijuana.<sup>80</sup>

## **Massachusetts**

In 2008, the State deemed possession of up to one ounce of marijuana a civil offense. Offenders were subject to a civil penalty of up to \$100 and forfeiture of the marijuana.<sup>81</sup>

During the 2016 general election, voters in Massachusetts approved Question 4.<sup>82</sup> Effective December 15, 2016, the ballot measure allows many activities in relation to marijuana.<sup>83</sup> For example, it allows persons 21 years of age and older to possess, use, purchase, process, or manufacture up to one ounce of non-concentrated marijuana or 5 grams of marijuana concentrate, as well as, within the person's own residence, to possess up to ten ounces of marijuana and cultivate up to twelve marijuana plants.<sup>84</sup>

## **Minnesota**

Minnesota decriminalized the possession of a small amount of marijuana in 1976.<sup>85</sup> In Minnesota, a person who possesses a small amount of marijuana<sup>86</sup> is guilty of a petty misdemeanor and is required to participate in a drug education program unless a court enters a written finding that a drug education program is inappropriate.<sup>87</sup> Petty misdemeanors are not considered crimes and carry a maximum fine of \$300.<sup>88</sup>

## **Mississippi**

Mississippi was one of the states to decriminalize marijuana in the late 1970s.<sup>89</sup> Currently, a person that possesses thirty grams or less of marijuana will be fined between \$100 and \$250 for a first violation.<sup>90</sup> Subsequent violations within two years of the initial violation are misdemeanors that are punished with higher fines, jail time, and mandatory participation in drug education programs.<sup>91</sup> First and second convictions of those found to have thirty grams or less of marijuana are reported to the Mississippi Bureau of Narcotics, which maintains for up to two years a private, nonpublic noncriminal record of the convictions that is used to help determine judicial penalties.<sup>92</sup>

## Missouri

In 2014, the Missouri Legislature passed Senate Bill No. 491, which comprehensively amended that state's criminal code, including depenalization of the possession of limited amounts of marijuana.<sup>93</sup> Many parts of the bill take effect on January 1, 2017.<sup>94</sup> Beginning on that date, a person with no prior drug-related convictions who possesses not more than ten grams of marijuana, or a synthetic cannabinoid, commits a class D misdemeanor.<sup>95</sup> Also beginning on January 1, 2017, a class D misdemeanor is punishable with a fine of no more than \$500.<sup>96</sup>

## Nebraska

In Nebraska, the first offense for possession of one ounce or less of marijuana is an infraction, which results in a citation, a fine of \$300, and assignment to a course relating to the effects of the misuse of drugs, if the judge determines that attending such a course is in the best interest of the individual.<sup>97</sup> Subsequent offenses for possession of one ounce or less of marijuana are misdemeanors that may result in imprisonment, among other penalties.<sup>98</sup>

## Nevada

Prior to January 1, 2017, in Nevada, the first and second offenses of possession of up to one ounce of marijuana were misdemeanors.<sup>99</sup> The penalty for a first offense was a fine of not more than \$600 or mandatory substance abuse treatment.<sup>100</sup> The penalty for a second offense was a fine of not more than \$1,000 or mandatory substance abuse treatment.<sup>101</sup> The penalty for subsequent violations included imprisonment.<sup>102</sup>

During the 2016 general election, Nevada's voters approved Question 2.<sup>103</sup> Effective January 1, 2017, the new law, among other matters, allows persons 21 years of age and older to possess, use, purchase, process or manufacture up to one ounce of non-concentrated marijuana or one-eighth of an ounce of marijuana concentrate, as well as cultivate and transport a limited number of marijuana plants.<sup>104</sup>

## New York

In 1977, New York enacted a law that made possession of a small amount of marijuana a violation punishable by a fine of up to \$100 for first-time offenders.<sup>105</sup> The statute does not define what constitutes a small amount, which leaves interpretation up to the courts.<sup>106</sup> While certain repeat offenders may face fines of up to \$250 and imprisonment of up to fifteen days, no sentence of imprisonment of first-time offenders is possible.<sup>107</sup> A related law authorizes the arrest of first-time offenders, but when a defendant is arrested without a warrant, the defendant is not held in custody and is instead given a ticket to appear in court. A warrant of arrest is issued if the defendant fails to appear as required by the appearance ticket.<sup>108</sup>

## **North Carolina**

North Carolina was another state that enacted a form of marijuana depenalization in the 1970s.<sup>109</sup> Currently, possession of up to one-half of an ounce of marijuana is a Class 3 misdemeanor<sup>110</sup> and carries a penalty of up to \$200.<sup>111</sup> Any sentence of imprisonment imposed must be suspended, and at the time of sentencing, the judge may not require that the defendant serve a period of imprisonment as a special condition of probation.<sup>112</sup>

## **Ohio**

In Ohio, the possession of less than one hundred grams of marijuana is a minor misdemeanor,<sup>113</sup> which carries a maximum fine of \$150<sup>114</sup> and for which the offender does not incur a criminal record.

## **Oregon**

In 1973, Oregon became the first state to remove imprisonment as a possible penalty for simple possession. The state enacted a law that made possession of less than one ounce of marijuana a violation punishable by a fine of up to \$100.<sup>115</sup> In 2014, voters passed “Measure 91,” which legalized adult possession of up to eight ounces of marijuana.<sup>116</sup>

## **Rhode Island**

Rhode Island decriminalized marijuana possession in 2013.<sup>117</sup> For a first violation, or a second violation within eighteen months of the first, a person who possesses up to one ounce of marijuana commits a civil offense and subject to a \$150 fine; provided that violators under eighteen years of age must complete an approved drug-awareness program and community service, as determined by the court.<sup>118</sup>

## **Vermont**

Vermont decriminalized adult possession of up to one ounce of marijuana in 2013.<sup>119</sup> A person who is at least twenty-one years old and who possesses one ounce or less of marijuana, or five grams or less of hashish, commits a civil violation that does not result in the creation of a criminal record.<sup>120</sup> A person that violates this offense can be fined up to \$200 for a first violation, up to \$300 for a second violation, and up to \$500 for a third or subsequent violation.<sup>121</sup>



## Washington State

Instead of first decriminalizing marijuana, Washington went directly from criminalization to outright legalization. In 2014, voters approved Initiative 502.<sup>122</sup> As a result of that initiative and subsequent legislation, Washington allows adults of the age of twenty one and older to possess up to one ounce of useable marijuana, as well as other amounts of marijuana-based products, without any civil or criminal penalty.<sup>123</sup>

## ENDNOTES

1. See, e.g., Justin B. Shapiro, Note, *What Are They Smoking?! Mexico's Decriminalization of Small-Scale Drug Possession in the Wake of a Law Enforcement Failure*, 42 U. MIAMI INTER-AM L. REV. 115 (2010), <http://repository.law.miami.edu/cgi/viewcontent.cgi?article=1004&context=umialr>.
2. See, e.g., Kellen Russoniello, Note, *The Devil (and Drugs) in the Details: Portugal's Focus on Public Health as a Model for Decriminalization of Drugs in Mexico*, 12 YALE J. HEALTH POL'Y L. & ETHICS 371 (2012), <http://digitalcommons.law.yale.edu/cgi/viewcontent.cgi?article=1200&context=yjhple>.
3. *Id.* at 429-430.
4. A national survey found that drug addiction doubled in Mexico between 2002 and 2008 to nearly half a million people. *Id.* at 402-403. Between 2002 and 2011, the use of illicit drugs increased 87 percent. Erick G. Guerrero et al., *Mexicans' Use of Illicit Drugs in an Era of Drug Reform: National Comparative Analysis by Migrant Status*, 25 INT. J. DRUG POL'Y 451, 451 (2014).
5. Between 2006 and 2012, an estimated 47,000 to 51,000 people were killed in drug-related violence in Mexico. See, e.g., TED GALEN CARPENTER, CATO INSTITUTE, *THE FIRE NEXT DOOR: MEXICO'S DRUG VIOLENCE AND THE DANGER TO AMERICA* 45 (2012).
6. An estimated \$25 billion to \$30 billion worth of illegal drugs enter the United States via Mexico each year, including ninety percent of the cocaine consumed in the U.S. (transshipped from Central and South America) and many tons of Mexico-produced heroin, marijuana, and methamphetamine. See, e.g., Shapiro, *supra* note 1, at 118-119.
7. See, e.g., 1 UNITED STATES DEPARTMENT OF STATE, INTERNATIONAL NARCOTICS CONTROL STRATEGY REPORT: DRUG AND CHEMICAL CONTROL 432 (2010), <http://www.state.gov/documents/organization/137411.pdf>. The report noted:  

The cross-border flow of money and guns into Mexico from the United States has enabled well-armed and well-funded cartels to engage in violent activities. They employ advanced military tactics and utilize sophisticated weaponry such as sniper rifles, grenades, rocket-propelled grenades and even mortars in attacks on security personnel. [Drug trafficking organizations] have openly challenged the [government of Mexico] through conflict and intimidation and have fought amongst themselves to control drug distribution routes. The results led to unprecedented violence and a general sense of insecurity in certain areas of the country, particularly near the U.S. border.

*Id.*

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*See also, e.g., ANABEL HERNÁNDEZ, NARCOLAND: THE MEXICAN DRUG LORDS AND THEIR GODFATHERS 7 (2013).*

Currently, all the old rules governing relations between the drug barons and centers of economic and political power have broken down. The drug traffickers impose their own law. The businessmen who launder their money are their partners, while local and federal officials are viewed as employees to be paid off in advance, for example by financing their political campaigns. The culture of terror encouraged by the federal government itself, as well as by the criminal gangs through their grotesque violence, produces a paralyzing fear at all levels of society.

*Id.*

8. *See, e.g., Shapiro, supra note 1, at 129.*
9. Angela M. Robertson et al., *Evaluating the Impact of Mexico's Drug Policy Reforms on People Who Inject Drugs in Tijuana, B.C., Mexico, and San Diego, CA, United States: A Binational Mixed Methods Research Agenda*, Harm Reduction J. 2014 11:4, at 3.
10. In 2006, an estimated one in every 116 people aged 15 to 49 in Tijuana was infected with HIV. *Id.*
11. *See, e.g., Shapiro, supra note 1, at 132.*
12. The decriminalized quantities are: five grams of marijuana, 500 milligrams of cocaine, 40 milligrams of methamphetamine or ecstasy/MDMA, and fifty milligrams of heroin. *See, e.g., Russoniello, supra note 2, at 406.*
13. *See, e.g., Shapiro, supra note 1, at 134.*
14. The sentence for possession of drugs exceeding the amounts designated for personal use but less than one thousand times the maximum amount for personal use is three to six years in prison upon a finding that the drugs were intended for distribution, or ten months to three years if not intended for distribution. The sentence for the sale of any drug in an amount exceeding the quantity for personal use but below one thousand times that amount is four to eight years. The sentence for possession of an amount equal to or greater than one thousand times the quantity for personal use, with intent to distribute, is five to fifteen years. *See, e.g., Russoniello, supra note 2, at 407.*
15. *See supra note 12.* In contrast to Mexico, Portugal's decriminalization statute allows a person to possess an amount no greater than a ten-day supply of drugs for personal consumption, which has been determined to include up to one gram of heroin, one gram of ecstasy, one gram of amphetamines, two grams of cocaine, or twenty-five grams of cannabis. *See, e.g., Russoniello, supra note 2, at 385 n.58.* Thus, Portugal decriminalized possession of 25 times the amount for methamphetamine or ecstasy, twenty times the amount for heroin, five times the amount of marijuana, and four times the amount of cocaine as did Mexico.
16. *Russoniello, supra note 2, at 409.*
17. *Id.*
18. *Id.* at 408.
19. Portugal's use of civilian "dissuasion commissions" to adjudicate administrative citations for drug possession is highly regarded by many advocates of public health-centered drug abuse policies.

The [dissuasion commissions] are arguably the most unique feature of decriminalization in Portugal. These bodies represent a marked departure from traditional law enforcement in addressing drug use. Mexican decriminalization could much more effectively reduce drug use, drug-related disease, and burdens on the criminal justice system if it were to adopt commissions like the [dissuasion commissions] of Portugal for two reasons: First, a diverse panel would be able to make offender-specific determinations and impose a variety of sanctions aimed at achieving the most effective outcomes. Second, the commission would be removed from the criminal justice system. This separation is likely to encourage users to seek treatment voluntarily; reduce the burden of drug use cases on the courts; decrease corruption, extortion, and human rights abuses; and refocus law enforcement efforts on large-scale drug trafficking.

An advantage of the Portuguese system is that experts in the field of drug addiction, and not judges with limited knowledge in this field, determine whether a drug possession offense has occurred and whether the offender is addicted. The creation of similar commissions in Mexico would allow for experts in the area of substance abuse to determine whether or not a user is addicted. This is preferable to having a judge perform this task, since the commission would likely be more familiar with the symptoms and presentation of addiction and would be able to more accurately decide whether a person is addicted. Additionally, removal of this decision-making power from the criminal justice system would help reduce the stigma associated with addiction, thus mitigating one barrier to treatment.

*Id.* at 417.

20. *Id.* at 409.

21. *Id.* at 426-27.

22. Editorial, *Mexico's Drug Policy Reform: Cutting Edge Success or Crisis in the Making?* 25 INT. J. DRUG POL'Y 823, 823 (2014), [http://www.ijdp.org/article/S0955-3959\(14\)00145-5/pdf](http://www.ijdp.org/article/S0955-3959(14)00145-5/pdf).

23. *Id.*

24. Methadone maintenance is a form of opioid substitution treatment in which a person addicted to an opioid such as heroin receives regular doses of methadone to avoid debilitating withdrawal symptoms that typically result when an addict stops using the opioid. *Methadone*, U.S. DEP'T HEALTH HUM. SERVICES, SAMHSA, <https://www.samhsa.gov/medication-assisted-treatment/treatment/methadone> (last updated Sept. 28, 2016).

25. *Mexico's Drug Policy Reform*, *supra* note 22, at 823.

26. *See, e.g.*, D. Werb et al., *Police Bribery and Access to Methadone Maintenance Therapy Within the Context of Drug Policy Reform in Tijuana, Mexico*, DRUG & ALCOHOL DEPENDENCE 221 (2015).

27. Russoniello, *supra* note 2, at 410.

28. *See, e.g.*, CARPENTER, *supra* note 5.

29. GLENN GREENWALD, CATO INSTITUTE, DRUG DECRIMINALIZATION IN PORTUGAL: LESSONS FOR CREATING FAIR AND SUCCESSFUL DRUG POLICIES 2 (2009) (emphasis added), [http://object.cato.org/sites/cato.org/files/pubs/pdf/greenwald\\_whitepaper.pdf](http://object.cato.org/sites/cato.org/files/pubs/pdf/greenwald_whitepaper.pdf).

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30. EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, DECRIMINALISATION IN EUROPE? RECENT DEVELOPMENTS IN LEGAL APPROACHES TO DRUG USE 3-4 (2001), [http://www.emcdda.europa.eu/attachements.cfm/att\\_5741\\_EN\\_Decriminalisation\\_Legal\\_Approaches.pdf](http://www.emcdda.europa.eu/attachements.cfm/att_5741_EN_Decriminalisation_Legal_Approaches.pdf).
31. Mirjam Van Het Loo et. al, *Decriminalization of Drug Use in Portugal: The Development of a Policy*, ANNALS AM. ACAD. POL. & SOC. SCI. 49, 58 (2002).
32. RESOLUÇÃO DO CONSELHO DE MINISTROS 46/99 ch. IV(29), DIÁRIO DA REPÚBLICA de 22.4.1999 (Port.) *translated in* PORTUGUESE NATIONAL DRUG STRATEGY, NATIONAL DRUG STRATEGY (1999), [http://www.emcdda.europa.eu/system/files/att\\_119431\\_EN\\_Portugal%20Drug%20strategy%201999.pdf](http://www.emcdda.europa.eu/system/files/att_119431_EN_Portugal%20Drug%20strategy%201999.pdf).
33. EUROPEAN MONITORING CTR. FOR DRUGS AND DRUG ADDICTION, ILLICIT DRUG USE IN THE EU: LEGISLATIVE APPROACHES 22 (2005), [http://www.emcdda.europa.eu/system/files/publications/367/TP\\_IllicitEN\\_64393.pdf](http://www.emcdda.europa.eu/system/files/publications/367/TP_IllicitEN_64393.pdf).
34. Laws have been enacted to decriminalize marijuana possession to some degree in nine states (Delaware, Illinois, Maryland, Minnesota, Mississippi, Nebraska, Ohio, Rhode Island, and Vermont) and depenalize such possession to some degree in four states (Connecticut, Missouri, New York, and North Carolina). Missouri's law took effect on January 1, 2017. The preceding list does not include eight states (Alaska, California, Colorado, Massachusetts, Maine, Nevada, Oregon, and Washington) that, along with the District of Columbia, have enacted laws to legalize the possession of small amounts of marijuana by removing all criminal and civil penalties for such possession. The states' laws will be discussed in more detail in this chapter.
35. JONATHAN P. CAULKINS ET AL., MARIJUANA LEGALIZATION: WHAT EVERYONE NEEDS TO KNOW 106, 171-172 (2016).
36. *Id.* at 106.
37. Lindsay LaSalle, *Md. Legislation Would Create Drug-Use Facilities, Decriminalize Possession of Small Amounts*, BALT. SUN (Feb. 4, 2016, 11:41 AM), <http://www.baltimoresun.com/news/opinion/oped/bs-ed-morhaim-legislation-20160204-story.html>.
38. *HB1119 History*, GEN. ASSEMBLY MD. <http://mgaleg.maryland.gov/webmga/frmMain.aspx?pid=billpage&stab=03&id=hb1119&tab=subject3&ys=2016RS> (last updated Mar. 14, 2016).
39. Jason Brandeis, *The Continuing Vitality of Ravin v. State: Alaskans Still Have a Constitutional Right to Possess Marijuana in the Privacy of Their Homes*, 29 ALASKA L. REV. 175, 179 (2012) (citing *Ravin v. State*, 537 P.2d 494, 511 (Alaska 1975)), <http://scholarship.law.duke.edu/cgi/viewcontent.cgi?article=1343&context=alr>.
40. *Id.* at 181-182 (citing *Noy v. State*, 83 P.3d 538, 541 (Alaska Ct. App. 2003); Act of 1975 § 1, 1975 Alaska Sess. Laws ch. 110, 2).
41. *Id.* at 182 (citing *Noy*, 83 P.3d at 542).
42. *Id.* at 183-202 (citations omitted).

43. Jason Brandeis, *Ravin Revisited: Alaska's Historic Common Law Marijuana Rule at the Dawn of Legalization*, 32 ALASKA L. REV. 309, 310 (2015) (citation omitted), <http://scholarship.law.duke.edu/cgi/viewcontent.cgi?article=1499&context=alr>.
44. *Id.* (citing Alaska Ballot Measure 2: An Act to Tax and Regulate the Production, Sale and Use of Marijuana (2014); ALASKA STAT. §§ 17.38.010-17.38.900 (2014)), <http://scholarship.law.duke.edu/cgi/viewcontent.cgi?article=1499&context=alr>.
45. *Id.* at 321.
46. ROSALIE LICCARDO PACULA ET AL., MARIJUANA DECRIMINALIZATION: WHAT DOES IT MEAN IN THE UNITED STATES? 30 (2003) (citing 1975 Cal. Stat. ch. 248; CAL. HEALTH & SAFETY CODE § 11357 (b) and (c) (West 1975)), <http://www.nber.org/papers/w9690.pdf>.
47. Patrick McGreevy, *Schwarzenegger Signs Bill Reducing Offense for Marijuana Possession*, L.A. TIMES: POLITICAL (Oct. 1, 2010, 10:31 AM), <http://latimesblogs.latimes.com/california-politics/2010/10/schwarzenegger-signs-bill-reducing-offense-for-marijuana-possession.html>.
48. 2011 Cal. Legis. Serv. ch. 15 (A.B. 109) (West); CAL. HEALTH & SAFETY CODE § 11357 (b) (West 2011).
49. CAL. PENAL CODE § 840 (West 1976).
50. Michael R. Aldrich & Tod Mikuriya, *Savings in California Marijuana Law Enforcement Costs Attributable to the Moscone Act of 1976* J. PSYCHOACTIVE DRUGS 75, 79 (1988).
51. See table 4-1 in Appendix B.
52. Section 712-1249, Hawaii Revised Statutes (HRS), provides, in pertinent part, that possession of any marijuana *in any amount* is a petty misdemeanor. Section 712-1248, HRS, provides, in pertinent part, that possession of one or more preparations, compounds, mixtures, or substances, *of an aggregate weight of one ounce or more*, containing any marijuana, is a misdemeanor. Section 712-1247, HRS, provides, in pertinent part, that possession of one or more preparations, compounds, mixtures, or substances *of an aggregate weight of one pound or more*, containing any marijuana, is a class C felony.
53. See *supra* Chapter 5 notes 231-233 and accompanying text.
54. Thomas Fuller, *Californians Legalize Marijuana in Vote That Could Echo Nationally*, N.Y. TIMES (Nov. 9, 2016), <http://www.nytimes.com/2016/11/09/us/politics/marijuana-legalization.html>.
55. Alexa Renee, *Prop 64 Passes: When You Can Start Using Marijuana*, ABC 10 (Nov. 10, 2016), <http://www.abc10.com/news/local/california/prop-64-passes-when-you-can-start-using-marijuana/350221123>.
56. Proposition 64 (Cal. 2016), <http://vig.cdn.sos.ca.gov/2016/general/en/pdf/text-proposed-laws.pdf#prop64>.
57. Renee, *supra* note 55.
58. PACULA ET AL., *supra* note 46, at 30 (citing 1975 Colo. Sess. Laws ch. 115; COLO. REV. STAT. § 12-22-412 (1975)).
59. *Amendment 64 - Legalize Marijuana Election Results*, DENVER POST, <http://data.denverpost.com/election/results/amendment/2012/64-legalize-marijuana> (last visited Sept. 2, 2016).

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60. COLO. CONST. art. 18, § 16(3) (Westlaw through Nov. 2015 amendments).
61. *Id.* § 16(4).
62. 2011 Conn. Acts 11-71 (Reg. Sess.); CONN. GEN. STAT. ANN. § 21a-279a (West 2011).
63. CONN. GEN. STAT. ANN. § 51-164r (West 1993).
64. DEL. CODE ANN. tit. 14, § 4701(33) (West 2015).
65. 2015 Del. Legis. Serv. ch. 38 (West); DEL. CODE ANN. tit. 14, § 4774(b) (West 2015).
66. 2014 D.C. Sess. L. Serv. 20-126, Act 20-305 (West); D.C. Code Ann. §§ 48-1201, 48-1203 (West 2014).
67. John M. Broder, *When is Marijuana Legal in DC? What to Know about Initiative 71 and Legal Weed in Capital*, INT'L BUS. TIMES (Feb. 24, 2015), <http://www.ibtimes.com/when-marijuana-legal-dc-what-know-about-initiative-71-legal-weed-capital-1826756>.
68. Press Release, Executive Office of the Mayor, Bowser Administration Outlines Changes in District Marijuana Laws (Feb. 24, 2015), <http://mayor.dc.gov/release/bowser-administration-outlines-changes-district-marijuana-laws>.
69. 720 ILL. COMP. STAT. 550/4 (2016).
70. *Id.*
71. PACULA ET AL., *supra* note 46, at 30.
72. 22 ME. REV. STAT. §2383 (2009).
73. *Id.*
74. Question 1 (Me. 2016), <http://www.state.me.us/sos/cec/elec/upcoming/citizensguide2016.pdf>.
75. *Maine Nears Recounts on Marijuana Legalization, Education Tax Measures*, PORTLAND PRESS HERALD (Nov. 21, 2016, 4:22 PM), <http://www.pressherald.com/2016/11/21/maine-takes-another-step-toward-recounts-on-marijuana-legalization-education-tax/>.
76. *Question 1 recount finds no change; recreational pot to become legal in Maine*, WMTW NEWS 8 (Dec. 21, 2016, 10:58 AM), <http://www.wmtw.com/article/question-1-recount-finds-no-change-recreational-pot-to-become-legal-in-maine/8524005>.
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78. MD. CODE, CRIM. LAW, §5-601(c)(2) (2014).
79. *Id.*
80. *Id.* §5-601(c)(4).
81. Alexandra Natapoff, *Misdemeanor Decriminalization*, 68 VAND. L. REV. 1055, 1073-1074 (2015) (citing MASS. GEN. LAWS ANN. ch. 94C, § 32L (West 2014)), <https://www.vanderbiltlawreview.org/wp-content/uploads/sites/89/2015/05/Misdemeanor-Decriminalization.pdf>.
82. Fuller, *supra* note 54.
83. Renee, *supra* note 55.

OTHER DECRIMINALIZATION APPROACHES

84. Question 4 (Mass. 2016), [http://www.sec.state.ma.us/ele/elepdf/IFV\\_2016.pdf](http://www.sec.state.ma.us/ele/elepdf/IFV_2016.pdf).
85. PACULA ET AL., *supra* note 46, at 30.
86. A “small amount” of marijuana is defined as 42.5 grams or less. MINN. STAT. §152.01 (2015).
87. *Id.* §152.027.
88. *Id.* §609.02.
89. PACULA ET AL., *supra* note 46, at 30.
90. MS CODE §41-29-139 (c)(2)(A).
91. *Id.*
92. *Id.*
93. S.B. 491, 97th Gen. Assemb., Reg. Sess. (Mo. 2014).
94. *Id.*
95. MO. REV. STAT. § 579.015(4).
96. *Id.* § 558.002(5).
97. NEB. REV. STAT. §28-416(13)(a) (2016); NEB. REV. STAT. §29-433 (1978) (describing the class to which violators of NEB. REV. STAT. §28-416(13)(a) may be assigned).
98. NEB. REV. STAT. §28-416(13)(b) and (c) (2016).
99. NEV. REV. STAT. §453.336 (2015).
100. *Id.*
101. *Id.*
102. *Id.*
103. Fuller, *supra* note 54.
104. Question 2 (Nev. 2016), <http://nvsos.gov/sos/home/showdocument?id=3294>.
105. 1977 N.Y. Sess. Laws ch. 360 (McKinney); N.Y. PENAL LAW 221.05 (McKinney 1977).
106. PACULA ET AL., *supra* note 46, at 8.
107. N.Y. PENAL LAW § 221.05 (McKinney 1977).
108. N.Y. CRIM. PROC. LAW § 150.75 (McKinney 1977).
109. PACULA ET AL., *supra* note 46, at 30.
110. Marijuana is a Schedule VI controlled substance in North Carolina. N.C. GEN STAT. §90-94 (2015).
111. *Id.* §90-95.
112. N.C. GEN STAT. §15A-1340.23 (2013).
113. OHIO REV. CODE ANN. §2925.11 (C)(3)(a) (2016).
114. *Id.* §2929.28.

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115. PACULA ET AL., *supra* note 46, at 30 (citing 1973 Or. Laws ch. 680; OR. REV. STAT. § 167.207(3) (1973)).
116. *Oregon Voters Legalize Recreational Marijuana*, FOX 12 OREGON (Nov. 5, 2014, 6:11 AM), <http://www.kptv.com/story/27273055/measure-91-oregon-voters-decide-on-legalization-of-marijuana?autostart=true>.
117. Matt Sledge, *Rhode Island Marijuana Decriminalization Law Going Into Effect*, HUFFINGTON POST [http://www.huffingtonpost.com/2013/03/29/rhode-island-marijuana\\_n\\_2980405.html](http://www.huffingtonpost.com/2013/03/29/rhode-island-marijuana_n_2980405.html) (last updated Apr. 1, 2013).
118. R.I. GEN. LAWS §21-28-4.01 (c)(2)(iii-iv) (2015).
119. Press Release, Gov. Shumlin Signs Bill Decriminalizing Possession of Limited Amounts of Marijuana, Off. Gov. Peter Shumlin (June 6, 2013), <https://www.hhs.gov/about/news/2016/08/31/hhs-awards-53-million-to-help-address-opioid-epidemic.html>.
120. VT. STAT. ANN. TIT. 18, §4230a (2013).
121. *Id.*
122. *Initiative Measure No. 502 Concerns Marijuana*, WA. SEC'Y STATE, <http://results.vote.wa.gov/results/20121106/Initiative-Measure-No-502-Concerns-marijuana.html> (last updated Nov. 27, 2012).
123. 2013 Wash. Legis. Serv. ch. 3 (I.M. 502) (West); WASH. REV. CODE ANN. §§ 69.50.4013, 69.50.360 (West 2015).



## Chapter 7

### **IN CONCLUSION: FINDINGS, A RECOMMENDATION, AND FACTORS FOR POSSIBLE CONSIDERATION**

House Concurrent Resolution No. 127, H.D. 1, S.D. 1 (2016) (hereinafter HCR No. 127) requested the Legislative Reference Bureau to conduct a study on the potential impact on administrative and judicial systems of state government of decriminalizing drug offenses in Hawaii that currently are graded as class C felonies or lower and pertain to the illegal possession for personal use of a harmful drug, a detrimental drug, marijuana, or marijuana concentrate, as defined in section 712-1240, Hawaii Revised Statutes (HRS). HCR No. 127 also requested the Bureau to review the national drug policy of Portugal pertaining to the illegal possession of drugs for personal use and to consider that policy as a potential model for the decriminalization in Hawaii of certain or all offenses referenced above. Further, HCR No. 127 requested the Bureau to report its findings and recommendations to the Legislature.

This chapter begins with a discussion of the salient points that emerged from the information we presented in the preceding chapters, and continues with findings based on our analysis of those facts and related information. This chapter also includes one recommendation, and concludes with a summary of some of the factors that policymakers may wish to consider regarding the potential decriminalization of possession of personal-use quantities of illicit drugs.

#### **SALIENT POINTS**

The following salient points are essential to an understanding of decriminalization as reviewed in this report.

#### **Decriminalization is Not the Same as Legalization or Depenalization**

HCR No. 127 contemplates the potential decriminalization of what this report has chosen to call “relevant drug offenses,” or simply “relevant offenses.” These are drug offenses in Hawaii that currently are graded as class C felonies or lower and pertain to the illegal possession for personal use of a harmful drug, a detrimental drug, marijuana, or marijuana concentrate, as defined in section 712-1240, HRS.<sup>1</sup> Decriminalization is not the same as legalization or depenalization:

- Decriminalization eliminates criminal penalties for engaging in a prohibited activity, but still prohibits that activity and may impose fines or other civil penalties for violations of the prohibition.<sup>2</sup>

- Decriminalization should not be confused with legalization, which involves the enactment of laws that authorize and may provide for state regulation of an activity, such as the production, sale, or use of drugs.<sup>3</sup>
- Further, decriminalization should not be confused with depenalization, which involves the elimination of custodial penalties for an offense that remains classified as a criminal activity and thus may subject an offender to criminal fines and the establishment of a police record.<sup>4</sup>

### **The Decriminalization of Personal Use Quantities of Illicit Drugs in Portugal was One Component of a Larger National Strategy Designed to Reduce Drug Use and Address Public Health and Other Concerns Associated with Drug Use**

- Portugal's strategy also included important components such as drug use prevention, health care for drug users, harm reduction programs for drug users (e.g., needle exchange), treatment of drug users in lieu of incarceration, treatment for incarcerated drug users, managed reintegration of formerly incarcerated drug users, research on drug use and treatment, and commitment of necessary financial resources.<sup>5</sup>

### **A Drug Decriminalization Scheme in Hawaii that is Modeled After Portugal's Approach Would Need to Similarly Consider the Expansion of Public Health-Oriented Programs and Their Associated Costs**

- Depending on the specific drugs that would be decriminalized in Hawaii, additional drug use prevention, harm-reduction, and treatment opportunities, facilities, and personnel may be necessary to help control or reduce instances of drug use and their associated effects on public health and society. A robust public health-oriented approach may entail significant expenses, and policymakers would accordingly need to consider appropriate sources of funding.

### **Access to Health Care is Addressed Differently in Portugal and Hawaii**

- Health care is a constitutional right in Portugal, and treatment for drug use must be made available to all who seek or agree to accept it.<sup>6</sup>
- In contrast, comprehensive health care in Hawaii is generally mandated only pursuant to an individual's health insurance coverage, state law pertaining to health insurance, and collective bargaining agreements. Although Hawaii law mandates parity in medical and mental health care, including treatment for drug dependency, under health insurance policies,<sup>7</sup> treatment for drug use is not guaranteed for persons covered by

those policies,<sup>8</sup> and the capacity to provide treatment does not currently appear to be sufficient to meet the needs of those who have insurance coverage, whether privately or publicly funded, because of a shortage of drug treatment specialists.<sup>9</sup>

### **The Decriminalization of the Greatest Drug Threat to Hawaii is Beyond the Scope of This Study**

- HCR No. 127 limited the Bureau’s evaluation to the impact of decriminalizing certain illicit drugs — that is, those classified by state law as harmful or detrimental, marijuana, or marijuana concentrate — but excluded methamphetamine and other drugs classified as dangerous.
- Marijuana use is prevalent in both Portugal and Hawaii, but marijuana is not viewed by health and law enforcement authorities as posing the greatest threat to Hawaii.<sup>10</sup> The main impetus for Portugal’s national decriminalization strategy regarding illicit drugs was a serious increase in the use of heroin.<sup>11</sup> However, heroin also does not currently appear to be as great a threat to Hawaii.<sup>12</sup> Moreover, heroin is classified as a dangerous drug under Hawaii law,<sup>13</sup> and is thus outside the scope of HCR No. 127. Based on our research, it appears that methamphetamine is seen as currently posing the greatest drug threat to Hawaii.<sup>14</sup> Similarly, methamphetamine is also classified as a dangerous drug and thus is also outside the scope of HCR No. 127.

### **Hawaii Law is Superseded by Federal Law in the Event of a Conflict Between the Two**

- Portugal’s decriminalization of the possession of personal-use quantities of *all* illicit drugs applies uniformly across that nation.<sup>15</sup>
- In contrast, Hawaii is but one of fifty states, all of which are subject to federal laws that supersede states’ laws in the event of a conflict with state law.<sup>16</sup> If Hawaii were to decriminalize the possession of even a limited number of illicit drugs for personal use, the federal government could still enforce superseding federal law prohibiting that possession.<sup>17</sup>
- Even the relatively modest level of decriminalization contemplated by HCR No. 127 would be unprecedented in the United States. Although twenty-one states and the District of Columbia have removed incarceration as a penalty for the possession of small amounts of marijuana,<sup>18</sup> no state has done so regarding other illicit drugs.<sup>19</sup>
- The possession of any amount of marijuana remains illegal under federal law except under very limited circumstances.<sup>20</sup> While the criminal prohibitions against possession of marijuana are not currently a federal enforcement priority with regard to small amounts of marijuana for personal use, the U.S. Department of Justice has warned that

its priorities will be affected by the ability and willingness of state and local governments to establish and maintain strong and effective enforcement systems to prevent, among other activities, distribution of marijuana to minors, use of marijuana sales revenues to support criminal activities, acts of violence and the use of firearms in criminal activities, drugged driving, and other adverse consequences, including those pertaining to public health.<sup>21</sup> Moreover, there is no indication that the federal government would defer enforcement of federal laws pertaining to the possession of dangerous drugs like methamphetamine, or even “softer” harmful or detrimental drugs (other than marijuana), as contemplated by HCR No. 127.

- The Justice Department’s enforcement policies and priorities are subject to change under future presidential administrations. Thus, it remains possible that the Department will more aggressively enforce federal law in the future with regard to marijuana.<sup>22</sup>

### **The Experiences of Other States Provide Limited Guidance Regarding Drug Decriminalization**

- Decriminalization of marijuana in other states does not appear to have led to long-term significant increases in marijuana use in those states.<sup>23</sup> However, reliable data is very limited regarding any long-term public health impact attributable to marijuana decriminalization, any monetary savings resulting from an end to enforcement of criminal laws against marijuana use and possession for personal use, or whether and to what extent any monetary savings could be redirected to support a transition to a public health-oriented approach to marijuana use.<sup>24</sup>

### **Alternatives to Incarceration as Punishment for Drug Use Already Exist in Hawaii**

- While decriminalization is one alternative to incarceration, other alternatives are currently available under certain circumstances.
- Certain criminal offenders may avoid incarceration by agreeing to participate in a drug treatment program as a condition of probation, or by participating in the Drug Court program.

## **FINDINGS BASED ON OUR ANALYSIS**

Based on our review of known facts, data, and competing interpretations of those facts from diverse sources, as well as the absence of certain data, the Bureau finds as follows:

### **Decriminalization Should Not be Viewed as a Panacea**

- Decriminalization of possession of small amounts of certain illicit drugs for personal use may produce some positive results, such as reducing the stigma that may deter some drug users from seeking treatment that could help end or decrease their drug use, or at least prevent increased drug use.
- However, decriminalization *alone* – that is, in the absence of a comprehensive public health strategy to address drug use – may not necessarily decrease overall drug use or its impact on administrative and judicial systems of state government.<sup>25</sup>

### **The Effectiveness of Portugal’s Strategy to Address Drug Use is Not Empirically Clear**

- Portugal’s baseline drug use survey was conducted in 2001, *after decriminalization*, so comparisons to drug use surveys taken in later years may not reveal a causal connection between decriminalization and subsequent changes in drug use trends.<sup>26</sup>
- Any assumptions that changes to patterns of drug use in Portugal may be attributed solely or primarily to the country’s decriminalization scheme are problematic because other important factors, such as Portugal’s emphasis on drug education, prevention, and treatment, as well as changes to the drug market and the economic status of users, cannot be clearly quantified as contributing factors or clearly ruled out.<sup>27</sup>

### **Available Data is Presently Insufficient to Draw Clear Conclusions Regarding the Exact Nature and Extent of Drug Use in Hawaii**

- Accurate data regarding drug use in Hawaii is necessary in order to draw comparisons between drug use in the State and Portugal, which in turn would help accurately estimate the potential impacts of drug decriminalization.<sup>28</sup>
- Excluding marijuana and cocaine, there is a lack of current and comprehensive data regarding drug use in Hawaii.<sup>29</sup>
- The lack of information can be attributed to the scarcity and infrequency of studies or surveys regarding drug use in Hawaii and the limited number of specific drugs surveyed annually.<sup>30</sup>
- The federal Substance Abuse and Mental Health Services Administration’s (SAMHSA) annual state-based reports estimate the prevalence of any illicit drug, marijuana, cocaine, and nonmedical use of pain relievers, but not heroin, methamphetamine, hallucinogens, or nonmedical use of depressants or stimulants.

Additionally, nonmedical use of pain relievers is not surveyed in a manner to show which type of pain relievers are being nonmedically used.<sup>31</sup>

- There is very little drug-specific information regarding the general or individual use of harmful drugs or detrimental drugs (other than marijuana), which mostly consist of non-opioid-based prescription drugs.<sup>32</sup>
- While the extent of Hawaii's drug problem can be viewed through multiple frames, including arrest records, drug-related charges and convictions, and admissions for drug abuse treatment, these frames do not present the entirety of drug use trends, as arrests, charges, convictions, and admissions for treatment only account for a specific subset of the drug user population. All of this information combined is useful for a very broad understanding of drug use in Hawaii, but is insufficient with respect to a clear understanding of the prevalence of specific drug use.<sup>33</sup>
- Determining trends in drug use and their causes, for the purpose of focusing a public health approach to addressing drug use, is challenging. Beyond changes in laws, changes in drug use can be attributed to factors such as changes to the economy (more or less disposable income), cultural norms, and the availability of health care and drug use prevention, treatment, and harm reduction services.<sup>34</sup>

**Available Data on the Enforcement of Current Drug Laws in Hawaii is Insufficient to Predict What Effects Decriminalization of Certain Drugs Could have Regarding the Cost of Law Enforcement**

- The costs to enforce drug laws, from arrest to prosecution, adjudication, and corrections, are not clearly segregated by offense or substance, so it is difficult to assess the cost of enforcement with respect to use or possession for use of a particular drug.<sup>35</sup>
- Data regarding enforcement of specific drug offenses was difficult to obtain from state and county agencies. Several agencies were not able to provide statistics regarding the frequency with which specific drug offenses are enforced and prosecuted.<sup>36</sup> Data obtained from police departments regarding arrests was inconsistent with data maintained by the Hawaii Criminal Justice Data Center.<sup>37</sup>
- Most expenditures for drug enforcement in Hawaii are made at the county level, while most expenditures for drug use prevention, education, harm reduction, and treatment are made at the state level.<sup>38</sup> Thus, even if decriminalization of certain drugs resulted in a decrease to county police and prosecution enforcement expenses, it is not clear whether the State would realize monetary savings as a result.
- It is difficult to estimate how much it costs the State to incarcerate violators of relevant drug possession offenses. Although the Department of Public Safety estimates that it costs the State \$140 per day to incarcerate an individual, it is not clear how the department reached its estimate.<sup>39</sup>

- The available data is not sufficient to allow us to estimate, with any certainty, either the nature and extent of Hawaii’s drug problem or the true cost of providing treatment for different substance use disorders. Further, it is uncertain which drug or drugs the possession of which for personal use might be the focus of decriminalization efforts. Thus we are unable to estimate whether any savings realized by decriminalization would be sufficient to fund expanded public health-oriented drug control efforts such as prevention, treatment, and harm reduction programs, at the level provided in Portugal.<sup>40</sup>

### **Available Data Suggest that Few Individuals in Hawaii are Incarcerated Solely for Drug Possession Offenses that Fall Under the Scope of House Concurrent Resolution No. 127 (2016)**

- 2014 data concerning the most serious offenses for which individuals were arrested reveal a total of 2,225 arrests for the possession of illicit drugs (including 247 for opium or cocaine, 792 for marijuana, 31 for synthetic narcotics, and 1,115 for non-narcotic drugs).<sup>41</sup>
- However, it does not appear that many drug offenders in Hawaii are either incarcerated or incarcerated for extended periods of time *solely* for the possession of small amounts of drugs that are classified as harmful or detrimental, or marijuana or marijuana concentrate, which are the relevant drugs specified in HCR No. 127. For example, according to data from the Hawaii Criminal Justice Data Center, only sixty-nine offenders were incarcerated in 2015 when their *sole offense* was the possession of a small amount of a relevant drug within the scope of HCR No. 127.<sup>42</sup>
- Thus, it appears unlikely that a decriminalization scheme would immediately produce a significant decrease in the cost of incarcerating persons convicted only of offenses involving possession of personal-use quantities of the illicit drugs addressed by HCR No. 127.
- However, given the limitations and inconsistencies regarding the data for arrests and prosecutions for relevant offenses, we note that we cannot reach these conclusions definitively.<sup>43</sup>

## **OUR RECOMMENDATION**

### **The Collection and Analysis of Pertinent Data Should be Improved**

As noted previously, we faced several limitations in our attempt to gather data and information for this report, including the lack of comprehensive information on specific drug use trends, as well as inconsistent or incomplete data regarding arrests and prosecutions.<sup>44</sup> Investing in timely and consistent collection and analysis of quality data regarding drug use, prevention,

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treatment, enforcement, and incarceration would be necessary to achieve a clearer picture for policymakers and the public of the extent of Hawaii's drug problem, and the effectiveness of efforts undertaken to address it. Improved data collection and analysis would help gauge the effectiveness of any policy changes that are ultimately undertaken to address the drug problem. To improve the availability of relevant data, legislation may be necessary to fund structural improvements in the information systems of the:

- Hawaii Criminal Justice Data Center and the county police departments so that their data regarding arrests are consistent;
- County police departments in calculating the costs associated with enforcing specific drug prohibitions;
- County prosecutors in tracking how specific offenses are prosecuted, and associated costs;
- Office of the Public Defender in tracking the defense of specific offenses, and associated costs;
- Judiciary in tracking how specific offenses are processed through the court system and in tracking treatment statistics, and the respective associated costs;
- Department of Public Safety in tracking the costs of incarcerating offenders.
- Alcohol and Drug Abuse Division of the Department of Health and the Department of Human Services in tracking specific drug use trends and treatment expenditures; and
- Counties in tracking expenditures on their treatment efforts.<sup>45</sup>

### **FACTORS FOR POSSIBLE CONSIDERATION**

Given the previously noted limitations with respect to the data and information we were able to gather for this report, the Legislative Reference Bureau takes no position on the issue of drug decriminalization as contemplated by HCR No. 127 or how any decriminalization scheme should be implemented. However, policymakers considering the issue may wish to address the following:

#### **Whether There is a Need to Implement a Broader Health-Based Strategy to Reduce Drug Use**

- As noted, Portugal decriminalized the possession of certain illicit drugs for personal use as part of a much broader comprehensive strategy that included enhanced efforts to provide drug use education, prevention, harm-reduction, treatment, and rehabilitation services.



- As also noted, it is not clear whether decriminalizing the use and possession for use of specified drugs would necessarily yield savings to the State, and whether any savings would be sufficient to significantly fund a more comprehensive public health-oriented illicit drug policy strategy. Consequently, legislators may need to consider how to fund the various aspects of a comprehensive public health-oriented strategy and, in particular, how to provide for additional treatment opportunities, facilities, and relevant personnel.

### **Which of the Illicit Drugs, and What Quantities of Those Drugs, Should be Decriminalized**

- As previously noted, no other states have decriminalized illicit drugs other than marijuana. Most states that have decriminalized marijuana impose civil penalties for the possession of one ounce or less of the drug, although this quantity varies in some states.<sup>46</sup>

### **Whether Civil Penalties Should be Included**

- States that have decriminalized or depenalized the possession of small amounts of marijuana have established monetary penalties for first violations.<sup>47</sup> In those states, the most common penalty for a first violation is a \$100 fine. Fines for subsequent violations may be higher.<sup>48</sup> In addition, a violator may still face additional penalties, including incarceration under certain circumstances. For example, in Connecticut, failure to pay a fine for possessing marijuana is a jailable misdemeanor. In Nebraska and New York, subsequent violations after a first violation may result in imprisonment of up to one year or fifteen days, respectively.<sup>49</sup> In Rhode Island, in addition to a \$150 fine, violators under the age of eighteen must complete an approved drug-awareness program and community service, as determined by the court.<sup>50</sup>
- Portugal authorizes a range of possible fines against nonaddicted violators. Depending on the type of drug possessed, fines may range from a minimum of about \$35 to a maximum equivalent to the national minimum monthly wage. Generally, those who possess drugs like heroin and methamphetamine are subject to higher fines. Fines may not be imposed on addicted persons. Possible penalties that may be imposed on all violators include verbal warnings, suspensions of professional licenses, prohibitions on offenders meeting with certain persons, and restrictions on travel. Portugal also requires the provisional suspension of proceedings against an addicted person if the person has no prior record of previous drug possession violations and agrees to undergo treatment. Portugal also grants a tribunal the discretion to provisionally suspend proceedings against an addicted person with a prior record if the person agrees to undergo treatment.<sup>51</sup>

### **Whether Administrative or Judicial Tribunals are Better Suited for Enforcement of Decriminalized Drug Violations**

- If Hawaii chooses to incorporate the use of administrative tribunals similar to the dissuasion commissions employed in Portugal, policymakers will need to decide whether to establish entirely new administrative systems or adapt to new uses the judicial structures that already exist.
- One advantage of using the dissuasion commission model seems to be that experts in medicine, psychology, and social service who are included on those commissions may better understand addiction and the health needs of the drug user.<sup>52</sup>
- However, the establishment of dissuasion-type commissions, which are unprecedented in Hawaii, and the appointment of qualified experts to those commissions, would likely require both funding and time to establish those commissions and to find and employ sufficient personnel to staff and lead them. Further, enforcement and oversight would require the creation of appropriate structures to track violations and compliance with penalties, and to assign and monitor implementation of any additional sanctions imposed for noncompliance.
- In contrast, criminal courts in Hawaii already include programs aimed at reducing drug use and recidivism that might be more easily and cost effectively adapted to a decriminalized scheme. However, since judges are generally not health or social service experts, policymakers may wish to consider including the assistance of health professionals to address the needs of drug users, which would likely require additional financial resources.

### **Whether Violators Would Remain Subject to Arrest and Detention**

- In Portugal, a drug user is only held in custody if the user's identity is unknown, and only until the user appears before the appropriate dissuasion commission.<sup>53</sup>
- In contrast and for example, even though the state of New York has removed the possibility of imprisonment for first-time offenders apprehended with small amounts of marijuana, that state still authorizes the arrest of any offender who fails to appear in court for proceedings pertaining to an alleged violation.<sup>54</sup>
- On the one hand, discontinuing arrests of alleged violators may remove a source of stigma that may deter users from seeking treatment and may affect employment and other opportunities.
- On the other hand, arrests may help ensure that drug users appear before the appropriate presiding authority, which may ultimately have a more positive impact on a user than the mere payment of a fine without any appearance requirement.

- Finally, since county police departments currently conduct most enforcement actions in Hawaii with regard to drug possession offenses, they could potentially perform similar duties with regard to drugs that are decriminalized but not legalized, issuing administrative citations rather than making arrests, as is done in other jurisdictions that have decriminalized the possession of small amounts of marijuana.

## ENDNOTES

1. These offenses are listed under section 712-1246, HRS (Promoting a harmful drug in the third degree); section 712-1246.5, HRS (Promoting a harmful drug in the 4th degree); section 712-1247, HRS (Promoting a detrimental drug in the first degree); section 712-1248 (Promoting a detrimental drug in the second degree); and section 712-1249 (Promoting a detrimental drug in the third degree). See “A Survey of Hawaii Drug Offenses Under the Scope of the Resolution” in Chapter 4 of this report for more information on these offenses.
2. *See supra* Chapter 2.
3. *Id.*
4. *Id.*
5. See “National Drug Strategy” in Chapter 3 of this report.
6. *See supra* Chapter 3 note 10 and accompanying text.
7. *See supra* Chapter 4 notes 31-33 and accompanying text.
8. *Id.*
9. See “Adequacy of Treatment Funding and Capacity” in Chapter 5 of this report.
10. *See supra* Chapter 5 notes 34-36, 97-104, and accompanying text.
11. *See supra* Chapter 3 note 29 and accompanying text.
12. *See supra* Chapter 5 notes 81-85, 103, and accompanying text.
13. *See supra* Chapter 4 note 20 and accompanying text.
14. *See supra* Chapter 5 notes 97-104, and accompanying text.
15. *See supra* Chapter 3 notes 9, 11-12, 37, and accompanying text.
16. See “Conflicting Legal Authority in a Federal System of Government” in Chapter 4 of this report.
17. *Id.*
18. Laws have been enacted to decriminalize marijuana possession to some degree in nine states (Delaware, Illinois, Maryland, Minnesota, Mississippi, Nebraska, Ohio, Rhode Island, and Vermont) and depenalize such possession to some degree in four states (Connecticut, Missouri, New York, and North Carolina). Missouri’s law took effect on January 1, 2017. The preceding list does not include eight states (Alaska, California, Colorado, Massachusetts, Maine, Nevada, Oregon, and Washington) that, along with the District of Columbia, have enacted laws to legalize the possession of small amounts of marijuana by removing all criminal and civil penalties for such possession. See Chapter 6 of this report for further discussion of these states’ laws.

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19. *See supra* Chapter 6 note 34 and accompanying text.
20. The federal government has designated the National Institute on Drug Abuse (NIDA) within the National Institutes of Health as the agency responsible for overseeing the cultivation of marijuana for medicinal research. NIDA contracts with the University of Mississippi to grow marijuana for use in research studies. *See supra* Chapter 5 note 18 and accompanying text.
21. *See supra* Chapter 4 note 16 and accompanying text.
22. See “Conflicting Legal Authority in a Federal System of Government” in Chapter 4 of this report.
23. *See supra* note 35 and accompanying text.
24. *See supra* Chapter 5.
25. *See supra* Chapter 3 notes 83, 114, and accompanying text.
26. *See supra* Chapter 5 note 4 and accompanying text.
27. *See supra* Chapter 3 note 83 and accompanying text.
28. See “Drug Use Trends” in Chapter 5 of this report.
29. *Id.*
30. *Id.*
31. See “Nonmedical Stimulant, Depressant, and Pain Reliever Use” in Chapter 5 of this report.
32. *See supra* Chapter 5 notes 9 and 10 and accompanying text.
33. Not everyone who uses an illicit drug is arrested or treated for the use of that drug.
34. *See supra* Chapter 3 notes 97-98 and accompanying text.
35. *See supra* Chapter 5 notes 202-206 and accompanying text.
36. See “Court Cases: Lack of Information from Prosecutors and the Public Defender” in Chapter 5 of this report.
37. *See supra* Chapter 5 notes 224-229 and accompanying text.
38. *See supra* Chapter 5 notes 202-206 and accompanying text.
39. *See supra* Chapter 5 notes 235-236 and accompanying text.
40. See “Adequacy of Treatment Funding and Capacity” in Chapter 5 of this report.
41. See Table 5-13 in Appendix B.
42. *See supra* Chapter 5 note 231 and accompanying text.
43. *See supra* Chapter 5 notes 224-229 and accompanying text.
44. *See supra* Chapter 5.
45. *Id.* See “Treatment Information from County Agencies” in Chapter 5 of this report.
46. *See supra* Chapter 5 note 243 and accompanying text.
47. *See supra* Chapter 5 note 244 and accompanying text.
48. *Id.*
49. *See supra* Chapter 6 notes 62-63, 97-98, 105-108, and accompanying text.

50. *See supra* Chapter 6 notes 117-118 and accompanying text.
51. See “Dissuasion Commission Process” in Chapter 3 of this Report.
52. *See supra* Chapter 3 notes 46-48 and accompanying text.
53. *See supra* Chapter 3 note 56 and accompanying text.
54. *See supra* Chapter 6 notes 105-108 and accompanying text.

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Appendix A

HOUSE OF REPRESENTATIVES  
TWENTY-EIGHTH LEGISLATURE, 2016  
STATE OF HAWAII

H.C.R. NO. 127  
H.D. 1  
S.D. 1

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HOUSE CONCURRENT  
RESOLUTION

REQUESTING THE LEGISLATIVE REFERENCE BUREAU TO CONDUCT A STUDY  
ON THE POTENTIAL IMPACT ON ADMINISTRATIVE AND JUDICIAL  
SYSTEMS OF STATE GOVERNMENT OF DECRIMINALIZING THE ILLEGAL  
POSSESSION OF DRUGS FOR PERSONAL USE IN HAWAII.

1           WHEREAS, despite a longstanding policy that enforces  
2 illicit drug prohibition and imposes some of the world's  
3 harshest penalties for drug possession and sales, illicit drug  
4 use in the United States has been increasing, according to the  
5 results from the 2013 National Survey on Drug Use and Health;  
6 and  
7

8           WHEREAS, the survey, conducted annually by the Substance  
9 Abuse and Mental Health Services Administration of the United  
10 States Department of Health and Human Services, found that an  
11 estimated 24,600,000 people aged twelve or older nationally--9.4  
12 per cent of the population--had used an illicit drug in the past  
13 month, up from 8.3 per cent in 2002; and  
14

15           WHEREAS, there is a growing heroin epidemic in the United  
16 States, particularly along the East Coast and in many cases  
17 beginning when patients are legally prescribed drugs containing  
18 opium; and  
19

20           WHEREAS, acknowledging the need for a change in solutions  
21 to illicit drug use, the federal administration's 2014 National  
22 Drug Control Strategy presented a marked departure from previous  
23 approaches to national drug policy by focusing on both the  
24 public health and public safety aspects of drug use and  
25 substance use disorders, recognizing addiction as a disease,  
26 emphasizing the importance of preventing drug use, and promoting  
27 treatment to those who need it, including those who are involved  
28 in the criminal justice system; and  
29



1 WHEREAS, the 2014 National Drug Control Strategy also  
2 recognized that many people charged with drug-related crimes are  
3 afflicted with an underlying substance abuse disorder that  
4 warrants the diversion of non-violent offenders to drug  
5 treatment instead of prison; and

6  
7 WHEREAS, in Hawaii, drug court and related programs  
8 alleviate prison overcrowding and offer more effective  
9 rehabilitation options for qualified defendants by providing  
10 them with an opportunity to be granted community supervision to  
11 obtain substance abuse treatment in lieu of incarceration; and

12  
13 WHEREAS, while the distribution of marijuana remains a  
14 federal offense, in 2013 the United States Department of  
15 Justice, in the wake of recent state ballot initiatives that  
16 legalized the possession of marijuana for personal use,  
17 announced an update to its marijuana enforcement policy that  
18 deferred the federal government's right to challenge state  
19 marijuana legalization laws under the expectation that each  
20 affected state would implement an appropriate regulatory system;  
21 and

22  
23 WHEREAS, Hawaii is among twenty-three states that authorize  
24 and regulate medical uses of marijuana; and

25  
26 WHEREAS, nineteen states and the District of Columbia have  
27 decriminalized the possession of small amounts of marijuana for  
28 personal use; and

29  
30 WHEREAS, the foregoing examples at the national and state  
31 levels demonstrate a burgeoning trend towards addressing illegal  
32 drug use by focusing on treatment on a wider scale; and

33  
34 WHEREAS, in 2001, Portugal became the first European  
35 country to officially abolish all criminal penalties for the  
36 possession of drugs for personal use, making these violations  
37 exclusively an administrative matter processed in noncriminal  
38 proceedings, while continuing to prosecute drug trafficking as a  
39 criminal offense; and

40  
41 WHEREAS, the strategy behind Portugal's drug  
42 decriminalization framework was to maintain the prohibition  
43 against using or possessing an illicit drug for personal use  
44 without authorization but to replace penalties of imprisonment





1 with the offer of therapy, under the belief that the fear of  
2 jail time drives drug addicts underground and that incarceration  
3 is more expensive than treatment; and  
4

5 WHEREAS, under Portugal's revamped drug control regime, a  
6 person found in illegal possession of small amounts of drugs is  
7 ordered to appear before a panel consisting of members with a  
8 legal, medical, or social services background who determine  
9 whether and to what extent the person is addicted to drugs; and  
10

11 WHEREAS, depending upon the panel's final determination,  
12 the person found in illegal possession of small amounts of drugs  
13 may be referred to a voluntary treatment program, ordered to pay  
14 a fine, or subjected to administrative sanctions, such as  
15 community service, suspension of a professional license, or  
16 restrictions on where the person may visit or who the person may  
17 associate with; and  
18

19 WHEREAS, the Cato Institute, which is a public policy  
20 research organization that conducts independent, nonpartisan  
21 research on a wide range of policy issues, commissioned a 2009  
22 report that found the following results of drug decriminalization  
23 in Portugal:  
24

- 25 (1) No adverse effect on drug usage rates, which are among  
26 the lowest in the European Union, and particularly when  
27 compared with states with stringent criminalization  
28 regimes;  
29
- 30 (2) A decrease in lifetime prevalence rates for drug use  
31 among various age groups, particularly for youths in  
32 the critical age groups of thirteen to fifteen year  
33 olds and sixteen to eighteen year olds;  
34
- 35 (3) A dramatic decrease in drug-related deaths, including  
36 from sexually transmitted diseases; and  
37
- 38 (4) Steady declines in drug trafficking convictions; and  
39

40 WHEREAS, the Cato Institute report also found that money  
41 saved on drug enforcement allowed for increased resources for  
42 drug treatment programs; and  
43



1 WHEREAS, the positive results from Portugal's drug  
2 decriminalization system provide a potential model for more  
3 effectively managing drug-related problems in the United States;  
4 now, therefore,  
5

6 BE IT RESOLVED by the House of Representatives of the  
7 Twenty-eighth Legislature of the State of Hawaii, Regular  
8 Session of 2016, the Senate concurring, that the Legislative  
9 Reference Bureau is requested to conduct a study on the  
10 potential impact on state government of decriminalizing the  
11 illegal possession of drugs for personal use in Hawaii; and  
12

13 BE IT FURTHER RESOLVED that the study include:  
14

15 (1) A survey of all existing criminal drug offenses in  
16 Hawaii that are class C felonies or lower offenses and  
17 pertain to the illegal possession of a harmful drug,  
18 detrimental drug, marijuana, or marijuana concentrate,  
19 as defined in section 712-1240, Hawaii Revised  
20 Statutes;  
21

22 (2) A review of the current national drug policy of  
23 Portugal pertaining to the illegal possession of drugs  
24 for personal use, with a focus on the use of the  
25 policy as a potential model for the decriminalization  
26 of certain or all of the offenses identified under  
27 paragraph (1); and  
28

29 (3) The potential impact on administrative and judicial  
30 systems of state government of decriminalizing certain  
31 or all of the offenses identified under paragraph (1),  
32 such that the conduct constituting an offense would  
33 constitute an administrative or civil violation rather  
34 than a criminal offense; and  
35

36 BE IT FURTHER RESOLVED that the Legislative Reference  
37 Bureau is requested to submit a written report of its findings  
38 and recommendations, including any proposed legislation, to the  
39 Legislature no later than twenty days prior to the convening of  
40 the Regular Session of 2017; and  
41

42 BE IT FURTHER RESOLVED that the Judiciary and the  
43 Department of Public Safety are each requested to provide



1 statistics and other information as may be requested by the  
2 Bureau to assist in the timely completion of the study; and

3  
4 BE IT FURTHER RESOLVED that certified copies of this  
5 Concurrent Resolution be transmitted to the Director of the  
6 Legislative Reference Bureau, Chief Justice, Administrative  
7 Director of the Courts, and Director of Public Safety.

8



## Appendix B

### CHAPTER 3 TABLE

<b>Table 3-1. Year-End Count of Prison Population in Portugal</b>								
	1993	1994	1995	1996	1997	1998	1999	2000
Total Drug Consumers (Users or Possessors)	36	12	10	14	42	4	23	25
Total Drug Inmates	1,507	1,683	1,934	2,557	3,649	3,882	3,862	3,793
Total Inmates Overall	7,150	6,403	7,400	8,897	10,333	10,348	8,756	8,917
Drug Consumers Among the Total Population (Percentage)	0.50%	0.19%	0.14%	0.16%	0.41%	0.04%	0.26%	0.28%

## CHAPTER 4 TABLES

**Table 4-1. Hawaii Relevant Drug Offenses Under the Scope of HCR No. 127**

Name of Offense in Hawaii Revised Statutes (HRS)	A Person Commits the Offense When the Person Knowingly Possesses...	Level of Offense	Maximum Penalty for First Offense Under HRS
§712-1246: Promoting a harmful drug in the 3rd degree	...25 or more capsules or tablets or dosage units containing one or more of the harmful drugs or one or more of the marijuana concentrates, or any combination thereof.	Class C Felony	Imprisonment: Five years (\$706-660); Fine: \$10,000 (\$706-640)
§712-1246.5: Promoting a harmful drug in the 4th degree	...any harmful drug in any amount. (This offense is usually charged when the amount possessed is less than the amount specified in §712-1246.)	Misdemeanor	Imprisonment: One year (\$706-663); Fine: \$2,000 (\$706-640)
§712-1247:* Promoting a detrimental drug in the 1st degree	...(1) four hundred or more capsules or tablets containing one or more of the Schedule V substances; or (2) one or more preparations, compounds, mixtures, or substances of an aggregate weight of one ounce or more, containing one or more of the Schedule V substances; or (3) one or more preparations, compounds, mixtures, or substances of an aggregate weight of one pound or more, containing any marijuana; or (4) twenty-five or more marijuana plants.	Class C Felony	Imprisonment: Five years (\$706-660); Fine: \$10,000 (\$706-640)
§712-1248* Promoting a detrimental drug in the 2nd degree	...(1) fifty or more capsules or tablets containing one or more of the Schedule V substances; or (2) one or more preparations, compounds, mixtures, or substances, of an aggregate weight of one-eighth ounce or more, containing one or more of the Schedule V substances; or (3) one or more preparations, compounds, mixtures, or substances, of an aggregate weight of one ounce or more, containing any marijuana.	Misdemeanor	Imprisonment: One year (\$706-663); Fine: \$2,000 (\$706-640)
§712-1249: Promoting a detrimental drug in the 3rd degree	...any marijuana or any Schedule V substance in any amount. (This offense is usually charged when the amount possessed is less than the amount specified in §712-1248.)	Petty Misdemeanor	Imprisonment: Thirty days (\$706-663); Fine: \$1,000 (\$706-640)

\* §§712-1247 and 712-1248 are not solely “drug possession offenses.” Persons may also violate these statutory sections by distributing or selling drugs in certain amounts.

**Table 4-2. Judiciary Drug Court Program Expenditures**

<b>FY2011</b>	<b>FY2012</b>	<b>FY2013</b>	<b>FY2014</b>	<b>FY2015</b>	<b>FY2016</b>	<b>FY2017</b>
\$4,040,391	\$3,860,282	\$3,740,085	\$4,036,696	\$4,012,214	\$3,901,538	\$4,051,483

## CHAPTER 5 TABLES

Modality Type State Code	<b>Table 5-1. ADAD Funds expended for Illicit Drug Treatment by Modality and Fiscal Year</b>					
	2011	2012	2013	2014	2015	2016
	Total Charge Amount	Total Charge Amount	Total Charge Amount	Total Charge Amount	Total Charge Amount	Total Charge Amount
Residential Treatment – Long-Term	\$3,349,332	\$3,671,052	\$3,947,020	\$4,064,746	\$4,094,580	\$3,348,870
Therapeutic Living – Long-Term	\$634,286	\$568,550	\$642,088	\$452,599	\$465,298	\$460,733
Intensive Outpatient Treatment	\$1,115,151	\$1,506,331	\$1,464,526	\$1,314,430	\$1,555,327	\$1,533,769
Outpatient Treatment	\$4,912,758	\$5,212,569	\$5,047,986	\$5,021,769	\$4,909,959	\$4,553,681
Methadone Maintenance	\$498,246.50	\$459,719	\$463,368	\$529,152	\$566,714	\$570,250
Residential Social Detoxification	\$246,792	\$232,596	\$227,864	\$224,224	\$277,186	\$294,112
Residential PPW Child Treatment – Long-Term	\$865,503	\$1,055,237	\$878,883	\$771,145	\$1,042,508	\$1,182,905
Therapeutic Living PPW Child – Long-Term	\$507,794	\$504,997	\$402,965	\$526,054	\$643,001	\$573,945
Total	\$12,129,862. 50	\$13,211,051	\$13,074,700	\$12,904,119	\$13,554,573	\$12,518,265

ADAD reports that there were five hundred ninety-six beds licensed and accredited in Special Treatment Facilities (both Residential Treatment Programs and residential Therapeutic Living Programs) whose primary focus is substance use disorder treatment in fiscal years 2014-2015 and 2015-2016. The vacancy rates of these beds is not tracked.

Specifically, the average cost expended by ADAD for treatment per person were \$4,670 (fiscal year 2011-2012), \$3,902 (fiscal year 2012-2013), \$3,873 (fiscal year 2013-2014), \$4,316 (fiscal year 2014-2015), and \$4,465 (fiscal year 2015-2016). Figures provided by ADAD.

<b>Table 5-2. Number of ADAD Certified Counselors per Fiscal Year</b>	
<b>Fiscal Year</b>	<b>Number of ADAD Certified Counselors</b>
2011-12	947
2012-13	1,015
2013-14	1,066
2014-15	1,185
2015-16	1,229

<b>Table 5-3. Treatment Expenditures on DHS Medicaid Drug-Dependent Clients (Alcohol-Dependent Excluded)</b>			
<b>Fiscal Year</b>	<b>Number of Clients Treated</b>	<b>Expenditures</b>	<b>Expenditures Per Person (Statistical Mean Calculated by LRB)</b>
2007	2,658	\$473,268.00	\$178.05
2008	4,055	\$934,791.00	\$230.53
2009	4,256	\$1,244,656.00	\$292.45
2010	4,201	\$1,379,152.00	\$328.29
2011	4,267	\$1,243,234.00	\$291.36
2012	4,840	\$1,155,686.00	\$238.78
2013	5,757	\$895,145.00	\$155.49
2014	6,213	\$72,200.00	\$11.62
2015	8,002	\$707,720.00	\$88.44



<b>Table 5-4.</b> <b>Treatment Expenditures on DHS Medicaid Non-Drug-Dependent Clients</b> <b>(Alcohol-Dependent Included)</b>			
<b>Fiscal Year</b>	<b>Number of Clients Treated</b>	<b>Expenditures</b>	<b>Expenditures Per Person</b> <b>(Statistical Mean Calculated by LRB)</b>
2007	1,539	\$415,409.00	\$269.92
2008	2,946	\$827,319.00	\$280.83
2009	3,051	\$946,331.00	\$310.17
2010	3,386	\$904,596.00	\$267.16
2011	3,748	\$1,112,440.00	\$296.81
2012	4,557	\$1,092,872.00	\$239.82
2013	6,860	\$1,128,221.00	\$164.46
2014	7,859	\$1,266,992.00	\$161.22
2015	7,671	\$1,141,723.00	\$148.84

<b>Table 5-5.</b> <b>Treatment Expenditures on DHS Medicaid Opioid-Dependent Clients</b>			
<b>Fiscal Year</b>	<b>Number of Clients Treated</b>	<b>Expenditures</b>	<b>Expenditures Per Person</b> <b>(Statistical Mean Calculated by LRB)</b>
2007	713	\$45,003.00	\$63.12
2008	981	\$108,717.00	\$110.82
2009	1,033	\$160,545.00	\$155.42
2010	1,197	\$173,035.00	\$144.56
2011	1,434	\$231,519.00	\$161.45
2012	1,761	\$225,222.00	\$127.89
2013	2,048	\$187,086.00	\$91.35
2014	2,405	\$159,623.00	\$66.37
2015	2,986	\$127,548.00	\$42.72

**Table 5-6.  
Treatment Expenditures on DHS Medicaid Amphetamine-Dependent Clients**

<b>Fiscal Year</b>	<b>Number of Clients Treated</b>	<b>Expenditures</b>	<b>Expenditures Per Person (Statistical Mean Calculated by LRB)</b>
2007	943	\$183,908.00	\$195.02
2008	1,327	\$309,011.00	\$232.86
2009	1,395	\$423,258.00	\$303.41
2010	1,350	\$496,387.00	\$367.69
2011	1,356	\$437,689.00	\$322.78
2012	1,448	\$395,437.00	\$273.09
2013	1,658	\$264,246.00	\$159.38
2014	1,603	\$255,096.00	\$159.14
2015	2,006	\$223,247.00	\$111.29

**Table 5-7.  
Treatment Expenditures on DHS Medicaid Amphetamine Non-Dependent Clients**

<b>Fiscal Year</b>	<b>Number of Clients Treated</b>	<b>Expenditures</b>	<b>Expenditures Per Person (Statistical Mean Calculated by LRB)</b>
2007	222	\$59,988.00	\$270.22
2008	341	\$98,497.00	\$288.85
2009	405	\$86,813.00	\$214.35
2010	501	\$165,940.00	\$331.22
2011	525	\$196,087.00	\$373.50
2012	674	\$230,301.00	\$341.69
2013	979	\$229,256.00	\$234.17
2014	1,172	\$247,360.00	\$211.06
2015	1,125	\$304,754.00	\$270.89

<b>Table 5-8.</b>			
<b>Treatment Expenditures on DHS Medicaid Marijuana Non-Dependent Clients</b>			
<b>Fiscal Year</b>	<b>Number of Clients Treated</b>	<b>Expenditures</b>	<b>Expenditures Per person (Statistical Mean Calculated by LRB)</b>
2007	108	\$53,355.00	\$494.03
2008	231	\$65,806.00	\$284.87
2009	253	\$79,959.00	\$316.04
2010	335	\$111,363.00	\$332.43
2011	374	\$113,624.00	\$303.81
2012	375	\$101,817.00	\$271.51
2013	413	\$67,156.00	\$162.61
2014	439	\$87,566.00	\$199.47
2015	452	\$63,925.00	\$141.43

<b>Table 5-9.</b>			
<b>Mental Restoration Expenditures on DHS Vocational Rehabilitation Clients</b>			
<b>Fiscal Year</b>	<b>Number of Clients Who Received Mental Restoration Services</b>	<b>Expenditures</b>	<b>Expenditures Per person (Statistical Mean Calculated by LRB)</b>
2015	40	\$66,481.83	\$1,662.05
2016	38	\$72,821.55	\$1,916.36

<b>Table 5-10.</b>					
<b>Treatment Expenditures on DHS Social Services Division Clients</b>					
<b>Fiscal Year</b>	<b>Number of Clients Treated</b>	<b>State Funds</b>	<b>Federal Funds</b>	<b>Expenditures</b>	<b>Expenditures Per Person (Statistical Mean Calculated by LRB)</b>
2011	N/A	\$27,865	\$109,333	\$137,198.33	Unknown
2012	5	(Blank)	\$149,559	\$149,559	\$29,911.80
2013	6	\$70,668	\$27,959	\$98,627.00	\$16,437.83
2014	22	\$32,623	\$64,962	\$97,585.27	\$4,435.69
2015	N/A	\$96,830	\$69,089	\$165,919.00	Unknown
2016	7	\$81,372	\$58,059	\$139,431.00	\$19,918.71

<b>Table 5-11.</b>			
<b>Treatment Expenditures on Department of Housing and Human Concerns, County of Maui Clients</b>			
<b>Fiscal Year</b>	<b>Number of Individuals Treated</b>	<b>Expenditures</b>	<b>Expenditures Per Person (Statistical Mean Calculated by LRB)</b>
2011	536	Not Provided	Unknown
2012	639	\$825,171.00	\$1,291.35
2013	619	Not Provided	Unknown
2014	766	Not Provided	Unknown
2015	583	Not Provided	Unknown
2016	561	\$765,707.00	\$1,364.90

**Table 5-12.  
Amounts Expended by ADAD Prevention Branch for Prevention Strategies  
Per Fiscal Year**

<b>Fiscal Year</b>	<b>Alternative Activities</b>	<b>Community - Based Process</b>	<b>Education</b>	<b>Environmental</b>	<b>Information Dissemination</b>	<b>Problem ID &amp; Referral</b>	<b>Total Amount</b>
2011-2012	\$900,764	\$874,101	\$4,684,419	\$642,263	\$556,379	\$38,571	\$7,696,497
2012-2013	\$1,444,010	\$756,304	\$864,888	\$430,747	\$972,447	\$13,600	\$4,481,996
2013-2014	\$1,468,681	\$592,807	\$855,512	\$472,890	\$949,386	\$13,600	\$4,352,876
2014-2015	\$1,497,779	\$625,312	\$862,878	\$215,221	\$887,469	\$13,600	\$4,102,259
2015-2016	\$1,812,000	\$1,207,010	\$1,089,980	\$999,263	\$856,650	\$13,600	\$6,068,413

Amounts are from ADAD. E-mail correspondence with ADAD staff on December 9, 2016 (on file with the Bureau).

<b>Table 5-13. Arrest Statistics (Adults) from the Department of the Attorney General, Based on Most Serious Offense</b>										
	Drug Possession				Drug Manufacturing or Sale				All Non-Traffic Criminal Offenses*	Drug Possession Arrests as a Percentage of All Non-Traffic Criminal Offense Arrests
	Opium or Cocaine	Marijuana	Synthetic Narcotic	Non-Narcotic	Opium or Cocaine	Marijuana	Synthetic Narcotic	Non-Narcotic		
<b>2000</b>	535	597	181	477	320	116	22	177	51,789	3.46%
<b>2001</b>	444	512	88	697	294	97	12	175	48,184	3.61%
<b>2002</b>	484	513	163	721	194	96	30	183	50,630	3.72%
<b>2003</b>	339	635	138	996	107	159	50	297	46,977	4.49%
<b>2004</b>	259	556	40	1,221	79	110	23	406	47,455	4.37%
<b>2005</b>	214	561	28	1,411	67	133	47	274	45,547	4.86%
<b>2006</b>	298	687	42	1,126	87	191	43	211	47,273	4.55%
<b>2007</b>	292	752	107	1,068	69	214	41	180	50,271	4.41%
<b>2008</b>	210	698	242	517	44	198	52	148	48,227	3.46%
<b>2009</b>	176	873	252	494	31	165	61	121	47,541	3.78%
<b>2010</b>	164	924	141	623	31	166	31	150	46,968	3.94%
<b>2011</b>	241	801	33	761	13	139	17	191	47,084	3.90%
<b>2012</b>	272	849	46	906	18	129	16	151	48,382	4.28%
<b>2013</b>	305	794	32	956	36	137	9	189	48,130	4.34%
<b>2014</b>	247	792	31	1,155	25	97	3	224	42,887	5.19%

This table is adapted from statistical tables in DEPARTMENT OF THE ATTORNEY GENERAL, STATE OF HAWAII, CRIME IN HAWAII 2014: A REVIEW OF UNIFORM CRIME REPORTS i (2016), <https://ag.hawaii.gov/cpja/files/2016/07/Crime-in-Hawaii-2014.pdf> [hereinafter AG 2014 REPORTS]; DEPARTMENT OF THE ATTORNEY GENERAL, STATE OF HAWAII, CRIME IN HAWAII 2005: A REVIEW OF UNIFORM CRIME REPORTS 109 (2009), [http://ag.hawaii.gov/cpja/files/2013/01/Crime\\_in\\_Hawaii\\_2005.pdf](http://ag.hawaii.gov/cpja/files/2013/01/Crime_in_Hawaii_2005.pdf) [hereinafter AG 2005 REPORTS].

\* This column lists (1) the number arrests for all non-traffic criminal offenses and (2) all arrests for negligent manslaughter, whether or not the alleged act of negligent manslaughter was traffic-related. AG 2014 REPORTS, *supra* note 169, at 2; AG 2005 REPORTS, *supra* note 169, at 2.

<b>Table 5-14.</b>							
<b>Arrest Statistics from County Police for All Simple Drug Possession Offenses</b>							
		<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016<sup>#</sup></b>
<b>HRS §712-1241* Promoting a dangerous drug in the 1st degree</b>	Honolulu	11	7	18	3	4	6
	Hawaii County	40	10	10	11	23	17
	Kauai	11	3	1	2	0	2
	Maui**, +	8	8	15	11	11	6
	<b>ALL**</b>	<b>70</b>	<b>28</b>	<b>44</b>	<b>27</b>	<b>38</b>	<b>31</b>
<b>HRS §712-1242* Promoting a dangerous drug in the 2nd degree</b>	Honolulu	52	85	72	73	39	23
	Hawaii County	80	84	75	93	74	56
	Kauai	37	42	20	15	17	20
	Maui**, +	9	22	19	32	19	19
	<b>ALL**</b>	<b>178</b>	<b>233</b>	<b>186</b>	<b>213</b>	<b>149</b>	<b>118</b>
<b>HRS §712-1243 Promoting a dangerous drug in the 3rd degree</b>	Honolulu	620	629	626	748	656	433
	Hawaii County	578	651	773	652	732	434
	Kauai	291	306	222	176	187	163
	Maui**, +	332	380	371	525	605	523
	<b>ALL**</b>	<b>1,821</b>	<b>1,966</b>	<b>1,992</b>	<b>2,101</b>	<b>2,180</b>	<b>1,553</b>
<b>HRS §712-1244* Promoting a harmful drug in the 1st degree</b>	Honolulu	12	8	0	4	9	4
	Hawaii County	8	14	13	7	15	6
	Kauai	5	6	0	0	1	3
	Maui**, +	0	0	2	0	2	1
	<b>ALL**</b>	<b>25</b>	<b>28</b>	<b>15</b>	<b>11</b>	<b>27</b>	<b>14</b>
<b>HRS §712-1245* Promoting a harmful drug in the 2nd degree</b>	Honolulu	7	2	3	6	11	3
	Hawaii County	17	19	8	19	12	3
	Kauai	6	2	3	2	1	1
	Maui**, +	2	1	0	2	1	3
	<b>ALL**</b>	<b>32</b>	<b>24</b>	<b>14</b>	<b>29</b>	<b>25</b>	<b>10</b>
<b>HRS §712-1246 Promoting a harmful drug in the 3rd degree (A "Relevant Offense")</b>	Honolulu	16	4	9	6	7	8
	Hawaii County	10	13	12	11	27	7
	Kauai	6	7	3	4	2	3
	Maui**, +	1	7	3	4	8	6
	<b>ALL**</b>	<b>33</b>	<b>31</b>	<b>27</b>	<b>25</b>	<b>44</b>	<b>24</b>

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Arrest statistics for these offenses may include individuals arrested for distribution or sale of dangerous, harmful, or detrimental drugs.

\*\* Maui Police Department provided its statistics in fiscal years instead of calendar years. This means that the statewide total arrests by police for relevant drug-related offenses are estimated.

+ Statistics from Maui Police Department include juveniles, while statistics from other departments exclude them.

# Data for 2016 includes arrests up to August 16, 2016, for Honolulu; up to June 30, 2016, for Hawaii County and Maui; and up to August 22, 2016, for Kauai.

		2011	2012	2013	2014	2015	2016 <sup>#</sup>
<b>HRS §712-1246.5 Promoting a harmful drug in the 4th degree (A "Relevant Offense")</b>	Honolulu	48	60	24	51	25	13
	Hawaii County	56	60	68	58	66	23
	Kauai	22	34	20	17	8	8
	Maui**, +	15	10	14	19	11	10
	<b>ALL**</b>	<b>141</b>	<b>164</b>	<b>126</b>	<b>145</b>	<b>110</b>	<b>54</b>
<b>HRS §712-1247* Promoting a detrimental drug in the 1st degree (A "Relevant Offense")</b>	Honolulu	27	20	10	10	16	3
	Hawaii County	44	39	50	18	29	16
	Kauai	7	3	5	1	4	1
	Maui**, +	16	14	15	14	4	12
	<b>ALL**</b>	<b>94</b>	<b>76</b>	<b>80</b>	<b>43</b>	<b>53</b>	<b>32</b>
<b>HRS §712-1248* Promoting a detrimental drug in the 2nd degree (A "Relevant Offense")</b>	Honolulu	53	45	19	19	20	9
	Hawaii County	52	67	56	34	44	17
	Kauai	13	2	4	5	6	9
	Maui**, +	34	35	20	39	45	29
	<b>ALL**</b>	<b>152</b>	<b>149</b>	<b>99</b>	<b>97</b>	<b>115</b>	<b>64</b>
<b>HRS §712-1249 Promoting a detrimental drug in the 3rd degree (A "Relevant Offense")</b>	Honolulu	398	460	383	376	316	168
	Hawaii County	424	339	399	340	313	178
	Kauai	168	126	132	91	71	59
	Maui**, +	224	250	470	537	450	384
	<b>ALL**</b>	<b>1,214</b>	<b>1,175</b>	<b>1,384</b>	<b>1,344</b>	<b>1,150</b>	<b>789</b>
<b>All Simple Drug Possession Offenses</b>	<b>TOTAL**</b>	<b>3,760</b>	<b>3,874</b>	<b>3,967</b>	<b>4,035</b>	<b>3,891</b>	<b>2,689</b>
<b>All "Relevant Offenses"</b>	<b>TOTAL**</b>	<b>1,634</b>	<b>1,595</b>	<b>1,716</b>	<b>1,654</b>	<b>1,472</b>	<b>963</b>

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Arrest statistics for these offenses may include individuals arrested for distribution or sale of dangerous, harmful, or detrimental drugs.

\*\* Maui Police Department provided its statistics in fiscal years instead of calendar years. This means that the statewide total arrests by police for relevant drug-related offenses are estimated.

+ Statistics from Maui Police Department include juveniles, while statistics from other departments exclude them.

# Data for 2016 includes arrests up to August 16, 2016, for Honolulu; up to June 30, 2016, for Hawaii County and Maui; and up to August 22, 2016, for Kauai.



Table 5-15. Arrest Statistics from Hawaii County and Maui County Police Departments for Relevant Offenses							
		2011	2012	2013	2014	2015	2016 <sup>#</sup>
<b>HRS §712-1246 Promoting a harmful drug in the 3rd degree</b>	Hawaii County	10	13	12	11	27	7
	Sole Offense	0	0	1	0	0	0
	Maui**	1	7	3	4	8	6
	Sole Offense	0	3	1	1	3	3
	<b>Both**</b>	<b>11</b>	<b>20</b>	<b>15</b>	<b>15</b>	<b>35</b>	<b>13</b>
	<b>Sole Offense</b>	<b>0</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>3</b>	<b>3</b>
<b>HRS §712-1246.5 Promoting a harmful drug in the 4th degree</b>	Hawaii County	56	60	68	58	66	23
	Sole Offense	0	3	2	8	3	1
	Maui**	15	10	14	19	11	10
	Sole Offense	11	7	7	10	11	7
	<b>Both**</b>	<b>71</b>	<b>70</b>	<b>82</b>	<b>77</b>	<b>77</b>	<b>33</b>
	<b>Sole Offense</b>	<b>11</b>	<b>10</b>	<b>9</b>	<b>18</b>	<b>14</b>	<b>8</b>
<b>HRS §712-1247* Promoting a detrimental drug in the 1st degree</b>	Hawaii County	44	39	50	18	29	16
	Sole Offense	1	1	5	2	1	1
	Maui**	16	14	15	14	4	12
	Sole Offense	0	3	8	8	7	2
	<b>Both**</b>	<b>60</b>	<b>53</b>	<b>65</b>	<b>32</b>	<b>33</b>	<b>28</b>
	<b>Sole Offense</b>	<b>1</b>	<b>4</b>	<b>13</b>	<b>10</b>	<b>8</b>	<b>3</b>
<b>HRS §712-1248* Promoting a detrimental drug in the 2nd degree</b>	Hawaii County	52	67	56	34	44	17
	Sole Offense	10	5	11	8	6	3
	Maui**	34	35	20	39	45	29
	Sole Offense	19	16	9	17	15	9
	<b>Both**</b>	<b>86</b>	<b>102</b>	<b>76</b>	<b>73</b>	<b>89</b>	<b>46</b>
	<b>Sole Offense</b>	<b>29</b>	<b>21</b>	<b>20</b>	<b>25</b>	<b>21</b>	<b>12</b>
<b>HRS §712-1249 Promoting a detrimental drug in the 3rd degree</b>	Hawaii County	424	339	399	340	313	178
	Sole Offense	117	90	79	75	70	42
	Maui**	224	250	470	537	450	384
	Sole Offense	149	152	310	321	224	214
	<b>Both**</b>	<b>648</b>	<b>589</b>	<b>869</b>	<b>877</b>	<b>763</b>	<b>562</b>
	<b>Sole Offense</b>	<b>266</b>	<b>242</b>	<b>389</b>	<b>396</b>	<b>294</b>	<b>256</b>
<b>All Relevant Offenses</b>	<b>TOTAL**</b>	876	834	1,107	1,074	997	682
	<b>Sole Offense</b>	307	280	433	450	340	282

\* HRS §§712-1247 and 712-1248 are not solely "drug possession offenses." Arrest statistics for these offenses may include individuals arrested for distribution or sale of detrimental drugs.

\*\* Maui Police Department provided its statistics in fiscal years instead of calendar years. This means that the statewide total arrests by police for relevant drug-related offenses are estimated.

+ Statistics from Hawaii Police Department exclude juveniles. Statistics from Maui Police Department include juveniles.

# Data for 2016 includes arrests up to June 30, 2016, for Hawaii County and Maui.

<b>Table 5-16.</b>					
<b>Hawaii (County) Police Department - Estimated Vice Section Expenditures</b>					
<b>FY 2012</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>	<b>FY 2016</b>	<b>FY 2017</b>
\$2,507,529	\$2,620,560	\$2,566,282	\$2,692,230	\$3,002,295	\$3,122,832

<b>Table 5-17.</b>						
<b>Kauai Police Department - Drug Enforcement Expenditures</b>						
	<b>FY 2012</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>	<b>FY 2016</b>	<b>FY 2017</b>
County Fund (for Salaries/ Benefits)	\$1,156,891	\$1,020,056	\$1,039,590	\$1,385,071	\$1,441,118	\$1,521,000
Federal Funds (for Overtime)	\$14,351	\$41,610	\$35,173	\$34,385	\$113,026	Not Specified
Federal Funds (for Other Expenses)	\$150,003	\$231,811	\$212,143	\$353,005	\$127,876	Not Specified
<b>TOTAL</b>	<b>\$1,321,245</b>	<b>\$1,293,477</b>	<b>\$1,286,906</b>	<b>\$1,772,461</b>	<b>\$1,682,020</b>	

<b>Table 5-18.</b>						
<b>Maui Police Department - Drug Enforcement Expenditures</b>						
	<b>FY 2012</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>	<b>FY 2016</b>	<b>FY 2017</b>
County Fund	\$2,370,115	\$2,627,196	\$2,759,989	\$2,829,779	\$2,412,485	\$2,559,913
Grants (from all Sources)	\$220,296	\$204,054	\$156,503	\$316,897	\$453,649	Not Specified
<b>TOTAL</b>	<b>\$2,590,411</b>	<b>\$2,831,250</b>	<b>\$29,164,921</b>	<b>\$3,146,676</b>	<b>\$2,866,134</b>	

**Table 5-19.  
Offenses Processed Through the District Courts  
During Fiscal Year 2014-2015**

<b>Court</b>	<b>Status</b>	<b>Narcotic Criminal Offenses</b>	<b>All Criminal Offenses (Except Traffic)</b>	<b>Criminal Traffic Offenses</b>	<b>Non-Criminal Traffic &amp; Parking Matters</b>
District	Pending Cases at Start of Fiscal Year	1,974	66,665	63,860	213,589
	Cases Filed	959	29,291	38,309	328,367
	Total Caseload	2,933	95,956	N/A	N/A
	Case Discharged or Dismissed	509	6,812	N/A	N/A
	Prosecution Declined	70	819	N/A	N/A
	Other Terminations	2	1,004	N/A	N/A
	Sent to Circuit Court for Jury Trial	10	330	N/A	0
	Conviction/Entry of Judgment	299	14,719	32,736	339,557
	Pending Cases at the End of Fiscal Year	2,043	72,271	22,301	225,511

This table is adapted from statistical tables in THE JUDICIARY, STATE OF HAWAII, 2015 ANNUAL REPORT STATISTICAL SUPPLEMENT tbls.22, 27 (2015), [http://www.courts.state.hi.us/docs/news\\_and\\_reports\\_docs/annual\\_reports/Jud\\_Statistical\\_Sup\\_2015.pdf](http://www.courts.state.hi.us/docs/news_and_reports_docs/annual_reports/Jud_Statistical_Sup_2015.pdf).

**Table 5-20.  
Offenses Processed Through the Circuit Courts  
During Fiscal Year 2014-2015 (footnote 183)**

<b>Court</b>	<b>Status</b>	<b>Narcotic Criminal Offenses</b>	<b>All Criminal Offenses (Except Traffic)</b>	<b>Criminal Traffic Offenses</b>
Circuit	Pending Cases at Start of Fiscal Year	2,421	11,866	213
	Cases Filed	939	4,298	127
	Total Caseload	3,360	16,164	340
	Termination Due to Lack of Service of Process	28	149	2
	Dismissed	203	865	14
	Terminated by Trial	14	76	0
	No Trial Held Yet	657	2,771	0
	Other Terminations	75	458	22
	Defendant Acquitted	6	49	0
	Convictions	707	3,151	50
	Defendant Fined	2	36	3
	Defendant Incarcerated	535	2,342	28
	Defendant Sentenced to Probation	120	433	1
	Defendant Sentenced to Community Service	0	4	0
	Other Disposition	49	264	4
	Remanded to Court after Appeal	1	72	14
	Pending Cases at the End of Fiscal Year	2,444	12,099	276

This table is adapted from statistical tables in THE JUDICIARY, STATE OF HAWAII, 2015 ANNUAL REPORT STATISTICAL SUPPLEMENT tbls.22, 27 (2015),

[http://www.courts.state.hi.us/docs/news\\_and\\_reports\\_docs/annual\\_reports/Jud\\_Statistical\\_Sup\\_2015.pdf](http://www.courts.state.hi.us/docs/news_and_reports_docs/annual_reports/Jud_Statistical_Sup_2015.pdf).

This table is adapted from statistical tables from the Judiciary. *Id.* tbls.7, 12.

**Table 5-21.  
Filings of Select Criminal Counts, Hawaii State Circuit and Family Courts,  
Fiscal Years 1999-2000 to 2015-2016 in the Aggregate**

	Counts	No. of Cases	No. of Parties
All Counts Filed	299,098	132,016	136,310
All Drug-Related Counts Filed	49,968	17,752	19,256
Charged with Only Drug-Related Counts			11,279
HRS §712-1241* Promoting a dangerous drug 1	718	Not Specified	564
HRS §712-1242* Promoting a dangerous drug 2	2,848	Not Specified	2,335
HRS §712-1243 Promoting a dangerous drug 3	18,190	Not Specified	15,043
HRS §712-1244* Promoting a harmful drug 1	65	Not Specified	45
HRS §712-1245* Promoting a harmful drug 2	189	Not Specified	174
HRS §712-1246 Promoting a harmful drug 3 ("Relevant Offense")	134	Not Specified	128
HRS §712-1246.5 Promoting a harmful drug 4 ("Relevant Offense")	1,072	Not Specified	829
HRS §712-1247* Promoting a detrimental drug 1 ("Relevant Offense")	435	Not Specified	372
HRS §712-1248* Promoting a detrimental drug 2 ("Relevant Offense")	638	Not Specified	606
HRS §712-1249 Promoting a detrimental drug 3 ("Relevant Offense")	4,016	Not Specified	3,776
All Simple Possession Drug Offenses	28,305	Unknown	23,872
All Relevant Offenses	6,295	Unknown	5,711

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-22.  
Filings Against Parties for Simple Drug Possession Offenses,  
Hawaii State Circuit and Family Courts, Separated by Year**

						← "Relevant Offenses" →				
	HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249
<b>2000</b>	46	169	883	3	5	14	35	16	30	164
<b>2001</b>	33	146	736	2	3	5	25	10	37	151
<b>2002</b>	52	162	831	1	6	5	37	20	35	201
<b>2003</b>	66	197	926	2	3	3	36	10	25	179
<b>2004</b>	55	176	1,034	2	2	4	38	18	28	239
<b>2005</b>	71	173	1,210	0	6	6	32	13	32	260
<b>2006</b>	44	170	1,069	0	13	7	46	15	35	266
<b>2007</b>	38	156	1,036	0	7	4	40	24	36	219
<b>2008</b>	34	119	826	1	15	5	45	29	34	228
<b>2009</b>	14	93	707	7	12	10	43	39	32	207
<b>2010</b>	29	117	685	9	15	6	55	32	48	214
<b>2011</b>	26	104	676	3	17	12	63	24	43	254
<b>2012</b>	10	111	839	4	14	11	79	24	37	249
<b>2013</b>	11	113	788	4	9	13	56	23	32	205
<b>2014</b>	11	123	890	2	13	3	62	26	37	241
<b>2015</b>	11	99	921	3	16	10	76	26	37	252
<b>2016</b>	13	107	986	2	18	10	61	23	48	247

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

<b>Table 5-23.</b>			
<b>Results for Select Criminal Counts, Hawaii State Circuit and Family Courts, Fiscal Years 1999-2000 to 2015-2016 in the Aggregate</b>			
	<b>Counts</b>	<b>No. of Cases</b>	<b>No. of Parties</b>
Drug Counts Not Adjudicated	3,810	Not Specified	Not Specified
Adjudications for All Drug Counts	46,160	Not Specified	Not Specified
Acquitted/Not Guilty	517	Not Specified	Not Specified
Convicted	24,561	Not Specified	Not Specified
Deferred	1,492	Not Specified	Not Specified
Dismissed	19,434	Not Specified	Not Specified
Other (includes cases transferred)	156	Not Specified	Not Specified

<b>Table 5-24.</b>			
<b>Filings of Select Criminal Counts, Hawaii State District Courts, Fiscal Years 2012-2013 to 2015-2016 in the Aggregate</b>			
	<b>Counts</b>	<b>No. of Cases</b>	<b>No. of Parties</b>
All Counts Filed	111,025	91,183	Not Specified
HRS §712-1246.5 Promoting a harmful drug 4	169	Not Specified	Not Specified
HRS §712-1248* Promoting a detrimental drug 2	189	Not Specified	Not Specified
HRS §712-1249 Promoting a detrimental drug 3	2,897	Not Specified	Not Specified
Relevant Misdemeanor Drug Counts Filed	3,255		

<b>Table 5-25.</b>			
<b>Results for Select Criminal Counts, Hawaii State District Courts, Fiscal Years 2012-2013 to 2015-2016 in the Aggregate</b>			
	<b>Counts</b>	<b>No. of Cases</b>	<b>No. of Parties</b>
Drug Counts Not Adjudicated	Not Specified		Not Specified
Adjudications for All Drug Counts	4,984	Not Specified	Not Specified
Acquitted/Not Guilty	4	Not Specified	Not Specified
Convicted	881	Not Specified	Not Specified
Deferred	206	Not Specified	Not Specified
Dismissed	2,117	Not Specified	Not Specified
Other (includes cases transferred)	1,776	Not Specified	Not Specified

<b>Table 5-26.</b>	
<b>Federal Grants to the Judiciary for the Treatment of Drug Offenders</b>	
<b>Grant</b>	<b>Amount/Period</b>
Big Island Adult Drug Court Enhancement Project	\$199,950 for 3-year period (FY2012 - FY2014)
Mea Kokua Grant	\$200,000 for 3-year period (FY2012 - FY 2014)
Maui/Molokai Drug Court Program (Edward Byrne) Grant	\$105,960 for 4-year period (FY2013 - FY2016)



**Table 5-27. HCJDC Data, Simple Drug Possession Offenses**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249
<b>2000</b>	<b>Arrests</b>	177	386	2,114	27	20	56	96	55	111	1,026
	Honolulu	80	190	1,229	18	11	21	44	13	21	338
	Police	62	138	1,010	3	7	13	30	11	20	292
	Sheriffs	18	52	219	15	4	8	14	2	1	46
	Hawaii County	51	120	370	6	7	23	31	35	61	337
	Police	51	120	369	6	7	23	31	35	61	337
	Sheriffs	0	0	1	0	0	0	0	0	0	0
	Kauai	11	38	151	1	0	2	0	3	8	73
	Police	11	38	151	1	0	2	0	3	8	73
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Maui	35	38	364	2	2	10	21	4	21	278
	Police	35	38	364	2	2	10	21	4	21	278
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	<b>Court Cases Filed</b>	47	149	834	4	8	14	32	12	50	491
	Oahu	20	82	541	2	4	5	9	1	17	211
	Hawaii Island	10	28	83	2	2	7	9	6	16	132
	Kauai	2	8	73	0	1	0	0	3	6	31
Maui	15	31	137	0	1	2	14	2	11	117	
<b>2001</b>	<b>Arrests</b>	137	364	2,137	12	11	30	75	50	100	944
	Honolulu	54	218	1,227	6	7	8	40	9	21	340
	Police	40	180	1,039	2	5	4	27	9	18	313
	Sheriffs	14	38	188	4	2	4	13	0	3	27
	Hawaii County	47	81	379	2	4	16	20	26	50	312
	Police	47	81	379	2	4	16	20	26	50	312
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Kauai	7	23	99	2	0	1	1	3	4	85
	Police	7	23	99	2	0	1	1	3	4	85
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Maui	29	42	432	2	0	5	14	12	25	207
	Police	29	42	432	2	0	5	14	12	25	207
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	<b>Court Cases Filed</b>	40	166	833	1	2	5	38	17	54	482
	Oahu	11	96	481	0	1	1	15	1	18	226
	Hawaii Island	14	35	113	1	1	2	15	11	23	129
	Kauai	6	10	68	0	0	1	1	2	3	57
Maui	9	25	171	0	0	1	7	3	10	70	

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-27. HCJDC Data, Simple Drug Possession Offenses (continued)**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249
<b>2002</b>	<b>Arrests</b>	201	360	2,114	6	18	26	94	43	93	1,013
	Honolulu	91	182	1,172	2	2	6	40	10	24	400
	Police	77	143	967	2	1	5	27	6	21	310
	Sheriffs	14	39	205	0	1	1	13	4	3	90
	Hawaii County	34	81	306	4	5	6	29	31	40	278
	Police	34	81	306	4	5	6	29	31	40	278
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Kauai	11	17	139	0	0	4	2	0	7	82
	Police	11	17	139	0	0	4	2	0	7	82
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Maui	65	80	497	0	11	10	23	2	22	253
	Police	65	80	497	0	11	10	23	2	22	253
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	<b>Court Cases Filed</b>	67	198	886	1	7	6	47	16	57	576
	Oahu	30	85	465	0	0	1	17	3	23	258
	Hawaii Island	11	49	148	1	3	0	10	13	17	157
	Kauai	4	11	77	0	0	1	4	0	5	47
Maui	22	53	196	0	4	4	16	0	12	114	
<b>2003</b>	<b>Arrests</b>	203	366	2,523	10	7	47	98	57	111	1,277
	Honolulu	66	182	1,293	5	2	8	37	5	19	461
	Police	55	153	1,042	0	1	4	30	4	14	310
	Sheriffs	11	29	251	5	1	4	7	1	5	151
	Hawaii County	47	97	520	1	4	26	32	19	52	406
	Police	47	97	520	1	4	26	32	19	52	406
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Kauai	7	29	148	1	0	0	7	2	7	105
	Police	7	29	148	1	0	0	7	2	7	105
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Maui	83	58	562	3	1	13	22	31	33	305
	Police	83	58	562	3	1	13	22	31	33	305
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	<b>Court Cases Filed</b>	53	215	1,087	4	1	27	39	29	52	718
	Oahu	20	102	580	2	1	1	14	1	13	288
	Hawaii Island	11	58	249	1	0	22	13	5	17	233
	Kauai	1	20	75	0	0	0	4	5	6	64
Maui	21	35	183	1	0	4	8	18	16	133	

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-27. HCJDC Data, Simple Drug Possession Offenses (continued)**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249
<b>2004</b>	<b>Arrests</b>	195	369	2,562	11	13	28	107	67	109	1,273
	Honolulu	65	218	1,219	4	5	0	33	5	30	473
	Police	52	192	1,002	3	3	0	31	5	29	388
	Sheriffs	13	26	217	1	2	0	2	0	1	85
	Hawaii County	45	61	637	2	2	16	52	29	43	437
	Police	45	61	637	2	2	16	52	29	43	437
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Kauai	20	32	173	2	0	5	1	8	9	112
	Police	20	32	173	2	0	5	1	8	9	112
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Maui	65	58	533	3	6	7	21	25	27	251
	Police	65	58	533	3	6	7	21	25	27	251
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	<b>Court Cases Filed</b>	64	202	1,249	1	7	10	40	25	73	767
	Oahu	27	123	635	1	3	0	10	2	25	345
	Hawaii Island	15	35	322	0	2	6	23	16	23	239
	Kauai	8	19	87	0	0	1	3	3	9	85
Maui	14	25	205	0	2	3	4	4	16	98	
<b>2005</b>	<b>Arrests</b>	147	310	2,539	8	14	36	139	53	82	1,293
	Honolulu	30	152	1,131	1	7	5	40	5	23	452
	Police	25	130	967	1	6	4	34	3	22	405
	Sheriffs	5	22	164	0	1	1	6	2	1	47
	Hawaii County	36	72	674	4	1	15	60	28	40	411
	Police	36	72	674	4	1	15	60	28	40	411
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Kauai	26	29	189	0	0	7	9	8	5	134
	Police	26	29	189	0	0	7	9	8	5	134
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Maui	55	57	545	3	6	9	30	12	14	296
	Police	55	57	545	3	6	9	30	12	14	296
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	<b>Court Cases Filed</b>	52	212	1,273	2	7	13	57	20	54	811
	Oahu	13	121	631	0	5	2	15	3	19	362
	Hawaii Island	14	43	321	2	1	3	19	11	17	232
	Kauai	13	18	116	0	0	7	7	5	4	83
Maui	12	30	205	0	1	1	16	1	14	134	

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-27. HCJDC Data, Simple Drug Possession Offenses (continued)**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249	
<b>2006</b>	<b>Arrests</b>	112	271	2,102	19	35	20	116	65	133	1,241	
	Honolulu	32	124	1,023	2	12	7	28	4	23	441	
	Police	28	101	894	2	11	6	23	2	23	417	
	Sheriffs	4	23	129	0	1	1	5	2	0	24	
	Hawaii County	37	62	543	16	18	7	45	44	84	406	
	Police	37	62	543	16	18	7	45	44	84	406	
	Sheriffs	0	0	0	0	0	0	0	0	0	0	
	Kauai	9	31	106	1	1	1	7	0	5	122	
	Police	9	31	106	1	1	1	7	0	5	122	
	Sheriffs	0	0	0	0	0	0	0	0	0	0	
	Maui	34	54	430	0	4	5	36	17	21	272	
	Police	34	54	430	0	4	5	36	17	21	272	
	Sheriffs	0	0	0	0	0	0	0	0	0	0	
	<b>Court Cases Filed</b>	42	186	1,102	5	13	7	59	15	69	771	
	Oahu	14	106	629	0	6	3	19	1	18	353	
	Hawaii Island	19	45	287	5	7	4	21	13	38	239	
	Kauai	4	11	59	0	0	0	2	0	3	73	
	Maui	5	24	127	0	0	0	17	1	10	106	
	<b>2007</b>	<b>Arrests</b>	106	232	2,046	10	21	31	115	87	140	1,309
		Honolulu	32	116	910	3	8	2	38	14	18	449
Police		23	100	772	2	5	0	29	12	17	406	
Sheriffs		9	16	138	1	3	2	9	2	1	43	
Hawaii County		35	61	498	5	10	20	41	51	95	457	
Police		35	61	498	5	10	20	41	51	95	457	
Sheriffs		0	0	0	0	0	0	0	0	0	0	
Kauai		4	20	99	2	0	3	4	2	0	107	
Police		4	20	99	2	0	3	4	2	0	107	
Sheriffs		0	0	0	0	0	0	0	0	0	0	
Maui		35	35	539	0	3	6	32	20	27	296	
Police		35	35	539	0	3	6	32	20	27	296	
Sheriffs		0	0	0	0	0	0	0	0	0	0	
<b>Court Cases Filed</b>		35	161	1,055	2	8	7	68	29	73	888	
Oahu		14	92	507	0	3	0	22	5	17	374	
Hawaii Island		11	36	239	1	5	4	22	21	37	277	
Kauai		2	11	60	1	0	2	6	2	1	71	
Maui		8	22	249	0	0	1	18	1	18	166	

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-27. HCJDC Data, Simple Drug Possession Offenses (continued)**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249
<b>2008</b>	<b>Arrests</b>	89	188	1,568	38	28	25	115	80	118	1,305
	Honolulu	32	82	638	15	6	6	31	12	19	414
	Police	19	62	504	14	4	2	27	9	18	376
	Sheriffs	13	20	134	1	2	4	4	3	1	38
	Hawaii County	15	47	366	13	13	9	36	44	64	426
	Police	15	47	366	13	13	9	36	44	64	426
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Kauai	3	10	118	1	1	1	6	1	7	90
	Police	3	10	118	1	1	1	6	1	7	90
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Maui	39	49	446	9	8	9	42	23	28	375
	Police	39	49	446	9	8	9	42	23	28	375
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	<b>Court Cases Filed</b>	27	149	876	13	18	5	79	50	65	918
	Oahu	13	69	357	2	3	0	15	3	9	342
	Hawaii Island	7	37	243	7	8	2	27	29	35	312
	Kauai	1	11	73	1	1	1	4	3	4	66
Maui	6	32	203	3	6	2	33	15	17	198	
<b>2009</b>	<b>Arrests</b>	110	220	1,576	18	25	39	118	90	173	1,443
	Honolulu	9	77	596	7	5	4	31	9	56	442
	Police	7	58	473	2	2	3	24	7	54	400
	Sheriffs	2	19	123	5	3	1	7	2	2	42
	Hawaii County	33	79	341	5	14	6	25	50	69	438
	Police	33	79	341	5	14	6	25	50	69	438
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Kauai	4	14	152	1	0	4	9	7	2	107
	Police	4	14	152	1	0	4	9	7	2	107
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Maui	64	50	487	5	6	25	53	24	46	456
	Police	64	50	487	5	6	25	53	24	46	456
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	<b>Court Cases Filed</b>	35	127	823	8	11	13	57	53	83	990
	Oahu	4	53	311	3	1	2	13	1	15	348
	Hawaii Island	23	41	195	3	10	0	13	35	40	321
	Kauai	3	9	84	0	0	1	5	5	0	71
Maui	5	24	233	2	0	10	26	12	28	250	

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-27. HCJDC Data, Simple Drug Possession Offenses (continued)**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249
<b>2010</b>	<b>Arrests</b>	76	199	1,496	29	41	32	168	86	200	1,508
	Honolulu	23	59	598	7	3	4	26	14	50	467
	Police	19	47	503	3	2	3	22	10	50	434
	Sheriffs	4	12	95	4	1	1	4	4	0	33
	Hawaii County	12	77	356	7	21	12	55	45	75	465
	Police	12	77	356	7	21	12	55	45	75	465
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Kauai	9	32	135	3	4	5	16	6	19	137
	Police	9	32	135	3	4	5	16	6	19	137
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Maui	32	31	407	12	13	11	71	21	56	439
	Police	32	31	407	12	13	11	71	21	56	439
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	<b>Court Cases Filed</b>	30	125	791	14	29	10	90	44	91	1,035
	Oahu	7	38	323	5	2	0	13	5	7	387
	Hawaii Island	13	55	239	4	18	5	31	26	57	322
	Kauai	6	13	74	1	2	1	10	5	9	79
Maui	4	19	155	4	7	4	36	8	18	247	
<b>2011</b>	<b>Arrests</b>	37	178	1,665	19	40	45	186	92	165	1,347
	Honolulu	17	55	628	7	14	14	46	22	57	448
	Police	11	50	536	6	13	11	38	19	53	408
	Sheriffs	6	5	92	1	1	3	8	3	4	40
	Hawaii County	4	72	395	7	16	10	46	35	49	397
	Police	4	72	395	7	16	10	46	35	49	397
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Kauai	8	25	210	5	6	5	19	7	12	172
	Police	8	25	210	5	6	5	19	7	12	172
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Maui	8	26	432	0	4	16	75	28	47	330
	Police	8	26	414	0	4	14	74	28	46	325
	Sheriffs	0	0	18	0	0	2	1	0	1	5
	<b>Court Cases Filed</b>	14	105	830	8	20	22	95	38	81	875
	Oahu	8	35	350	5	5	7	25	8	19	343
	Hawaii Island	2	36	207	1	12	6	24	21	29	266
	Kauai	4	21	121	2	3	2	16	4	13	116
Maui	0	13	152	0	0	7	30	5	20	150	

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-27. HCJDC Data, Simple Drug Possession Offenses (continued)**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249
<b>2012</b>	<b>Arrests</b>	37	250	1,808	22	39	37	199	78	165	1,433
	Honolulu	5	95	690	8	4	5	46	19	47	525
	Police	5	79	585	6	4	3	43	17	41	474
	Sheriffs	0	16	105	2	0	2	3	2	6	51
	Hawaii County	10	79	418	7	19	13	50	37	65	362
	Police	10	79	418	7	19	13	47	37	65	326
	Sheriffs	0	0	0	0	0	0	3	0	0	36
	Kauai	2	29	151	3	2	6	28	3	3	123
	Police	2	29	151	3	2	6	28	3	3	123
	Sheriffs	0	0	0	0	0	0	0	0	0	0
	Maui	20	47	549	4	14	13	75	19	50	423
	Police	20	39	495	4	12	13	64	18	46	395
	Sheriffs	0	8	54	0	2	0	11	1	4	28
	<b>Court Cases Filed</b>	9	130	809	12	11	10	103	20	65	889
	Oahu	2	46	358	6	2	2	25	2	21	402
	Hawaii Island	3	40	216	4	6	7	31	13	30	229
	Kauai	1	20	78	1	0	1	12	2	3	75
Maui	3	24	157	1	3	0	35	3	11	183	
<b>2013</b>	<b>Arrests</b>	44	202	2,001	21	27	37	230	94	132	1,419
	Honolulu	19	65	633	1	3	7	28	12	20	414
	Police	12	58	555	0	3	7	14	9	17	388
	Sheriffs	7	7	78	1	0	0	14	3	3	26
	Hawaii County	6	72	493	8	8	10	59	49	54	390
	Police	6	72	493	8	8	10	59	49	54	369
	Sheriffs	0	0	0	0	0	0	0	0	0	21
	Kauai	2	20	160	0	2	3	14	4	6	118
	Police	2	20	156	0	2	3	14	4	6	117
	Sheriffs	0	0	4	0	0	0	0	0	0	1
	Maui	17	45	715	12	14	17	129	29	52	497
	Police	17	43	676	12	12	15	119	29	48	476
	Sheriffs	0	2	39	0	2	2	10	0	4	21
	<b>Court Cases Filed</b>	11	109	846	6	17	10	114	43	79	814
	Oahu	8	30	331	1	1	1	11	4	9	296
	Hawaii Island	2	42	244	4	9	4	24	30	42	226
	Kauai	1	15	99	0	2	1	11	3	6	73
Maui	0	22	172	1	5	4	68	6	22	219	

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-27. HCJDC Data, Simple Drug Possession Offenses (continued)**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249
<b>2014</b>	<b>Arrests</b>	36	238	2,189	12	23	32	198	44	125	1,344
	Honolulu	7	71	792	6	3	6	42	9	28	424
	Police	4	61	680	4	3	5	35	8	25	387
	Sheriffs	3	10	112	2	0	1	7	1	3	37
	Hawaii County	6	69	465	3	13	11	52	18	37	332
	Police	6	69	463	3	13	11	52	18	35	307
	Sheriffs	0	0	2	0	0	0	0	0	2	25
	Kauai	3	18	156	0	2	1	13	1	5	112
	Police	2	16	126	0	2	1	13	1	5	86
	Sheriffs	1	2	30	0	0	0	0	0	0	26
	Maui	20	80	776	3	5	14	91	16	55	476
	Police	19	72	723	2	4	14	86	15	53	454
	Sheriffs	1	8	53	1	1	0	5	1	2	22
	<b>Court Cases Filed</b>	11	124	938	7	13	3	98	17	51	768
	Oahu	5	33	427	4	2	1	21	1	10	291
	Hawaii Island	3	40	239	2	7	1	29	8	27	211
	Kauai	1	11	83	0	0	0	6	0	1	74
Maui	2	40	189	1	4	1	42	8	13	192	
<b>2015</b>	<b>Arrests</b>	40	195	2,305	17	43	45	186	62	127	1,248
	Honolulu	6	49	696	3	13	8	30	11	17	368
	Police	4	36	611	2	10	5	27	11	16	325
	Sheriffs	2	13	85	1	3	3	3	0	1	43
	Hawaii County	22	66	544	11	10	20	47	26	41	298
	Police	20	64	537	11	10	19	46	26	40	290
	Sheriffs	2	2	7	0	0	1	1	0	1	8
	Kauai	0	19	182	1	3	2	16	6	7	96
	Police	0	16	144	1	1	2	9	4	7	70
	Sheriffs	0	3	38	0	2	0	7	2	0	26
	Maui	12	61	883	2	17	15	93	19	62	486
	Police	12	52	801	2	17	12	83	17	61	452
	Sheriffs	0	9	82	0	0	3	10	2	1	34
	<b>Court Cases Filed</b>	13	115	978	5	20	17	105	27	68	672
	Oahu	2	30	355	1	6	5	7	0	5	257
	Hawaii Island	9	32	245	4	8	10	28	13	29	161
	Kauai	0	9	105	0	2	0	10	4	2	62

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.



**Table 5-28.**  
**HCJDC "Sole Offense" Data, Simple Drug Possession Offenses**

The following table represents:

- The number of arrests, for each of the drug possession offenses, in which the specified offense was the sole offense for which the suspect was arrested;
- The number of criminal court cases filed, by county, for each of the drug possession offenses, in which the specified offense was the sole offense for which the defendant was charged; and
- Among criminal court cases in which the specified offense was the sole offense for which the defendant was charged, the number of cases:
  - In which the court deferred its acceptance of the defendant's "guilty" or "no contest" plea to the offense charged;
  - In which the court referred the defendant to a drug court program;
  - In which the defendant was convicted; and
  - In which the defendant was sentenced to incarceration. Our inquiry also asked the HCJDC to provide statistics on court cases in which the outcome was still pending at the end of each year. Letter to HCJDC staff on September 30, 2016 (on file with the Bureau). The HCJDC's data showed that none of the relevant court cases had such a status at the end of any given year. *See* E-mail correspondence with HCJDC staff on October 20, 2016 (on file with the Bureau).

**Table 5-28. HCJDC "Sole Offense" Data, Simple Drug Possession Offenses**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249	
<b>2000</b>	<b>Arrests</b>	52	100	222	11	5	1	5	7	27	306	
	<b>Court Cases Filed</b>	16	27	105	0	3	4	8	1	25	333	
	Oahu	4	16	68	0	2	0	1	0	12	161	
	Hawaii Island	5	5	16	0	0	4	2	1	6	96	
	Kauai	0	1	2	0	0	0	0	0	1	4	
	Maui	7	5	19	0	1	0	5	0	6	72	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	0	1	0	0	0	0	0	0	0	0
	Drug Court Referrals	0	0	1	0	0	0	0	0	0	0	0
	Convictions	4	15	32	0	1	0	0	0	0	9	109
	Incarcerations	4	12	25	0	0	0	0	0	0	2	33
<b>2001</b>	<b>Arrests</b>	37	107	247	3	4	1	5	8	20	294	
	<b>Court Cases Filed</b>	9	37	120	0	1	2	11	3	25	329	
	Oahu	2	30	46	0	1	0	2	0	14	191	
	Hawaii Island	5	4	30	0	0	2	9	2	7	82	
	Kauai	0	0	2	0	0	0	0	0	1	18	
	Maui	2	3	42	0	0	0	0	1	3	38	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	0	0	0	0	0	0	0	0	0	0
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	0
	Convictions	4	20	30	0	0	0	1	0	12	93	
	Incarcerations	4	18	21	0	0	0	0	0	5	29	
<b>2002</b>	<b>Arrests</b>	40	76	226	2	1	2	5	7	32	314	
	<b>Court Cases Filed</b>	16	31	150	0	2	4	7	0	32	376	
	Oahu	8	16	67	0	0	0	4	0	20	199	
	Hawaii Island	0	7	30	0	1	0	1	0	6	101	
	Kauai	0	0	4	0	0	0	0	0	2	14	
	Maui	8	8	49	0	1	4	2	0	4	62	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	2	0	0	0	0	0	0	0	0	0
	Drug Court Referrals	0	2	0	0	0	0	0	0	0	0	0
	Convictions	3	4	38	0	0	0	0	0	13	106	
	Incarcerations	3	2	24	0	0	0	0	0	10	36	

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-28. HCJDC "Sole Offense" Data, Simple Drug Possession Offenses (continued)**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249	
<b>2003</b>	<b>Arrests</b>	54	81	256	4	0	5	6	13	34	400	
	<b>Court Cases Filed</b>	14	51	190	2	0	20	12	8	27	529	
	Oahu	10	27	45	1	0	0	6	0	9	238	
	Hawaii Island	0	18	85	0	0	19	4	1	5	177	
	Kauai	0	0	4	0	0	0	0	0	3	29	
	Maui	4	6	56	1	0	1	2	7	10	85	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	0	0	0	0	0	0	0	0	0	0
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	0
	Convictions	9	29	20	1	0	0	5	0	6	134	
Incarcerations	7	27	10	1	0	0	2	0	2	44		
<b>2004</b>	<b>Arrests</b>	40	97	275	3	2	1	4	22	27	422	
	<b>Court Cases Filed</b>	19	49	251	0	3	4	16	5	38	529	
	Oahu	9	34	71	0	2	0	3	0	19	275	
	Hawaii Island	6	9	93	0	1	2	12	3	13	146	
	Kauai	0	0	0	0	0	0	0	0	2	45	
	Maui	4	6	87	0	0	2	1	2	4	63	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	0	0	0	0	0	0	0	0	0	1
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	0
	Convictions	5	31	36	0	2	1	3	1	14	154	
Incarcerations	3	28	27	0	0	1	1	1	6	47		
<b>2005</b>	<b>Arrests</b>	20	53	242	0	6	2	5	11	17	355	
	<b>Court Cases Filed</b>	5	55	215	1	2	3	21	3	21	549	
	Oahu	2	37	59	0	2	1	8	2	13	283	
	Hawaii Island	3	12	78	1	0	2	8	1	3	128	
	Kauai	0	0	3	0	0	0	0	0	0	36	
	Maui	0	6	75	0	0	0	5	0	5	102	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	0	0	0	0	0	0	0	0	0	0
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	0
	Convictions	1	38	23	0	3	0	4	0	3	158	
Incarcerations	1	32	19	0	2	0	1	0	0	62		

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-28. HCJDC "Sole Offense" Data, Simple Drug Possession Offenses (continued)**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249	
<b>2006</b>	<b>Arrests</b>	27	65	172	1	3	0	5	9	40	403	
	<b>Court Cases Filed</b>	13	32	97	1	5	0	13	3	37	542	
	Oahu	8	27	58	0	2	0	6	1	15	285	
	Hawaii Island	5	4	37	1	3	0	4	2	18	145	
	Kauai	0	0	1	0	0	0	0	0	1	54	
	Maui	0	1	1	0	0	0	3	0	3	58	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	0	0	0	0	0	0	0	0	0	0
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	0
	Convictions	3	25	23	0	2	0	8	0	10	175	
Incarcerations	3	19	18	0	1	0	0	0	8	67		
<b>2007</b>	<b>Arrests</b>	24	58	178	1	1	3	7	20	33	504	
	<b>Court Cases Filed</b>	8	24	76	0	0	0	16	0	24	648	
	Oahu	7	18	35	0	0	0	10	0	10	315	
	Hawaii Island	1	3	39	0	0	0	3	0	9	191	
	Kauai	0	0	1	0	0	0	0	0	1	45	
	Maui	0	3	1	0	0	0	3	0	4	97	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	0	0	0	0	0	0	0	0	0	1
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	0
	Convictions	7	18	13	0	0	0	8	0	9	255	
Incarcerations	4	5	10	0	0	0	5	0	6	75		
<b>2008</b>	<b>Arrests</b>	27	33	143	13	4	1	8	13	40	521	
	<b>Court Cases Filed</b>	4	16	90	3	5	0	17	7	32	636	
	Oahu	2	10	33	0	1	0	8	0	9	287	
	Hawaii Island	2	6	57	3	4	0	6	6	18	225	
	Kauai	0	0	0	0	0	0	0	0	2	33	
	Maui	0	0	0	0	0	0	3	1	3	91	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	0	0	0	0	0	0	0	0	0	0
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	0
	Convictions	2	7	15	0	0	0	5	1	18	273	
Incarcerations	0	3	13	0	0	0	2	1	8	101		

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-28. HCJDC "Sole Offense" Data, Simple Drug Possession Offenses (continued)**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249	
<b>2009</b>	<b>Arrests</b>	30	31	163	4	2	1	9	5	79	573	
	<b>Court Cases Filed</b>	13	20	64	0	3	0	9	10	36	702	
	Oahu	2	10	30	0	0	0	2	0	9	289	
	Hawaii Island	11	10	32	0	3	0	5	10	22	237	
	Kauai	0	0	2	0	0	0	0	0	0	40	
	Maui	0	0	0	0	0	0	2	0	5	136	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	1	0	0	0	0	0	0	0	0	0
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	0
	Convictions	1	6	14	0	0	0	3	0	11	318	
Incarcerations	0	3	13	0	0	0	3	0	2	96		
<b>2010</b>	<b>Arrests</b>	23	27	118	6	0	2	14	15	74	624	
	<b>Court Cases Filed</b>	4	17	80	2	5	3	19	6	36	740	
	Oahu	2	7	28	1	1	0	6	0	7	333	
	Hawaii Island	2	10	51	1	4	3	11	6	23	232	
	Kauai	0	0	1	0	0	0	0	0	0	42	
	Maui	0	0	0	0	0	0	2	0	6	133	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	1	1	0	0	0	0	0	0	0	1
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	0
	Convictions	0	2	18	1	0	0	6	0	14	309	
Incarcerations	0	1	14	1	0	0	4	0	1	124		
<b>2011</b>	<b>Arrests</b>	8	15	125	5	2	3	12	7	57	516	
	<b>Court Cases Filed</b>	3	3	41	4	1	3	11	1	31	584	
	Oahu	3	1	21	3	1	1	6	1	13	273	
	Hawaii Island	0	2	20	1	0	1	3	0	15	181	
	Kauai	0	0	0	0	0	0	0	0	0	52	
	Maui	0	0	0	0	0	1	2	0	3	78	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	0	0	0	0	0	0	1	1	2	
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	
	Convictions	0	0	10	2	0	0	4	0	13	303	
Incarcerations	0	0	8	2	0	0	2	0	6	127		

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-28. HCJDC "Sole Offense" Data, Simple Drug Possession Offenses (continued)**

		HRS §712- 1241*	HRS §712- 1242*	HRS §712- 1243	HRS §712- 1244*	HRS §712- 1245*	HRS §712- 1246	HRS §712- 1246.5	HRS §712- 1247*	HRS §712- 1248*	HRS §712- 1249	
<b>2012</b>	<b>Arrests</b>	15	32	141	1	2	2	25	7	42	594	
	<b>Court Cases Filed</b>	2	8	41	3	1	0	20	0	28	565	
	Oahu	1	3	14	3	1	0	6	0	12	308	
	Hawaii Island	1	5	27	0	0	0	10	0	12	140	
	Kauai	0	0	0	0	0	0	0	0	0	26	
	Maui	0	0	0	0	0	0	4	0	4	91	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	0	3	0	0	0	0	0	0	1	0
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	0
	Convictions	0	2	6	0	0	0	10	0	18	279	
	Incarcerations	0	2	5	0	0	0	7	0	7	132	
<b>2013</b>	<b>Arrests</b>	6	20	163	0	0	2	21	12	36	475	
	<b>Court Cases Filed</b>	2	2	17	0	0	1	7	2	20	316	
	Oahu	2	1	14	0	0	0	2	0	5	154	
	Hawaii Island	0	1	1	0	0	1	0	0	7	75	
	Kauai	0	0	0	0	0	0	0	2	3	16	
	Maui	0	0	2	0	0	0	5	0	5	71	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	3	3	0	0	0	0	0	0	0	0
	Drug Court Referrals	0	0	1	0	0	0	0	0	0	0	0
	Convictions	0	0	8	0	0	0	8	0	14	185	
	Incarcerations	0	0	8	0	0	0	6	0	9	86	
<b>2014</b>	<b>Arrests</b>	4	18	185	1	0	0	16	5	31	455	
	<b>Court Cases Filed</b>	2	2	31	0	0	0	7	2	14	287	
	Oahu	2	2	27	0	0	0	2	0	4	150	
	Hawaii Island	0	0	3	0	0	0	4	2	7	71	
	Kauai	0	0	1	0	0	0	0	0	1	10	
	Maui	0	0	0	0	0	0	1	0	2	56	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of Acceptance of Pleas	0	0	6	0	0	0	0	1	0	2	
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	
	Convictions	0	0	21	0	0	0	3	0	9	167	
	Incarcerations	0	0	14	0	0	0	3	0	7	85	

\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

**Table 5-28. HCJDC "Sole Offense" Data, Simple Drug Possession Offenses (continued)**

		HRS §712-1241*	HRS §712-1242*	HRS §712-1243	HRS §712-1244*	HRS §712-1245*	HRS §712-1246	HRS §712-1246.5	HRS §712-1247*	HRS §712-1248*	HRS §712-1249	
<b>2015</b>	<b>Arrests</b>	3	19	223	3	1	0	14	6	28	331	
	<b>Court Cases Filed</b>	0	2	35	2	1	0	3	2	7	197	
	Oahu	0	2	26	1	0	0	1	0	0	117	
	Hawaii Island	0	0	6	1	1	0	1	0	4	37	
	Kauai	0	0	0	0	0	0	0	0	0	10	
	Maui	0	0	3	0	0	0	1	2	3	33	
	<b>Selected Court Statuses (Statewide)</b>											
	Deferrals of											
	Acceptance of Pleas	0	0	4	0	0	0	0	0	0	0	2
	Drug Court Referrals	0	0	0	0	0	0	0	0	0	0	0
Convictions	0	2	16	0	0	0	1	0	5	102		
Incarcerations	0	1	16	0	0	0	1	0	2	66		

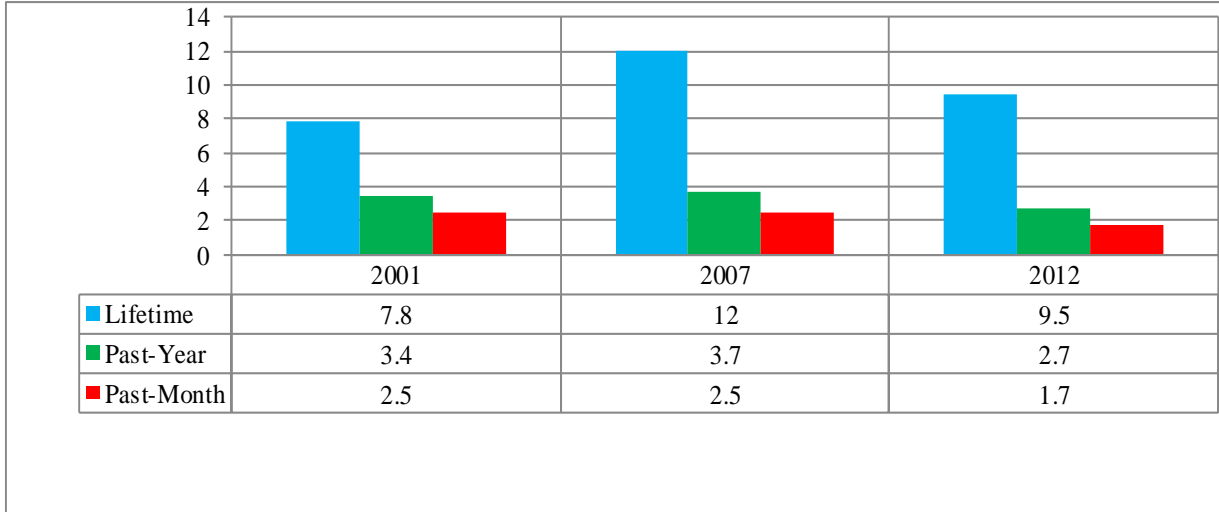
\* HRS §§712-1241, 712-1242, 712-1244, 712-1245, 712-1247, and 712-1248 are not solely "drug possession offenses." Statistics for these offenses may include charges filed against individuals accused of the distribution or sale of dangerous, harmful, or detrimental drugs.

	HRS §712-1246.5	HRS §712-1248*	HRS §712-1249
Inmates Incarcerated	1	2	66
Days of Imprisonment Per Inmate (Maximum)	365	365	30
Incarceration Expenditure Per Inmate Per Day	\$140	\$140	\$140
Expenditures for Year for Offense	\$51,100	\$102,200	\$277,200
<b>TOTAL FOR YEAR</b>			<b>\$430,500</b>

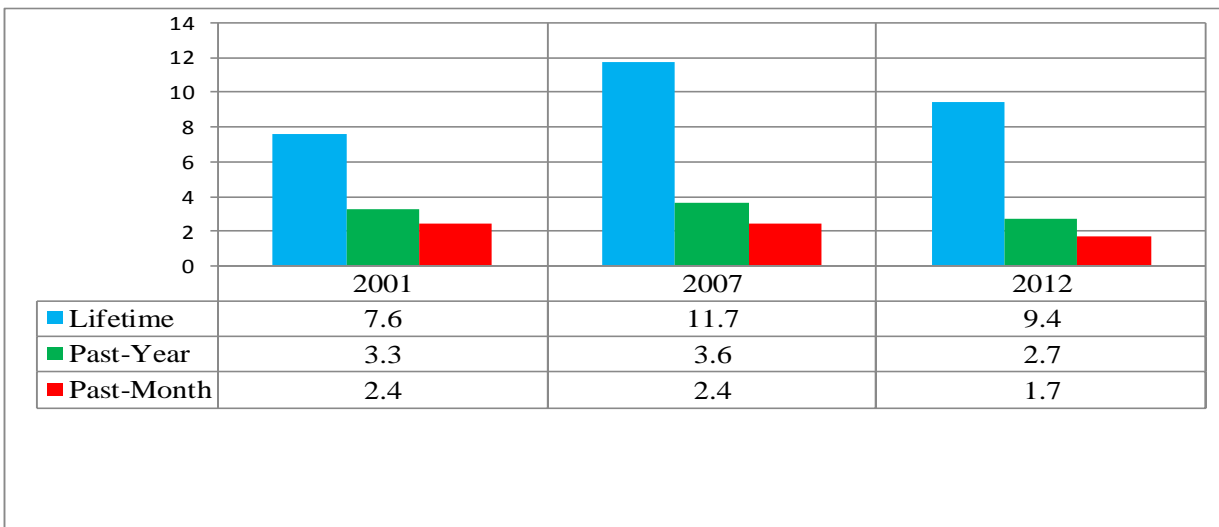
## Appendix C

### CHAPTER 5 FIGURES

**Figure 5-1. Estimated Percentage of Lifetime, Past-Year, and Past-Month Illicit Drug Use in Portugal**

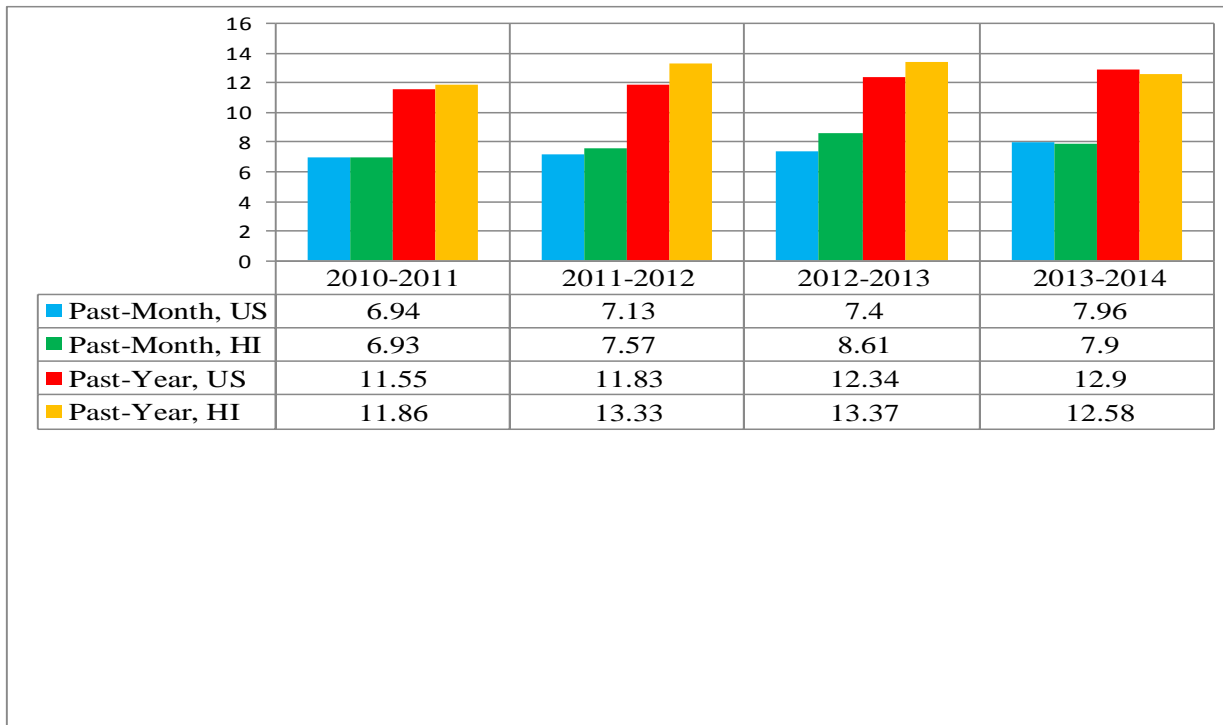


**Figure 5-2. Estimated Percentage of Lifetime, Past-Year, and Past-Month Marijuana Use in Portugal**

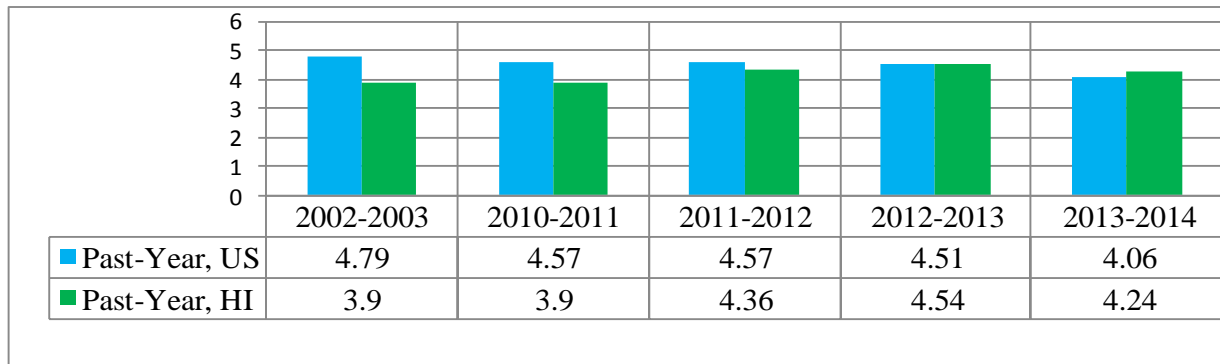




**Figure 5-3. Estimated Percentage of Past-Year and Past-Month Marijuana Use in the United States (US) and Hawaii (HI)**



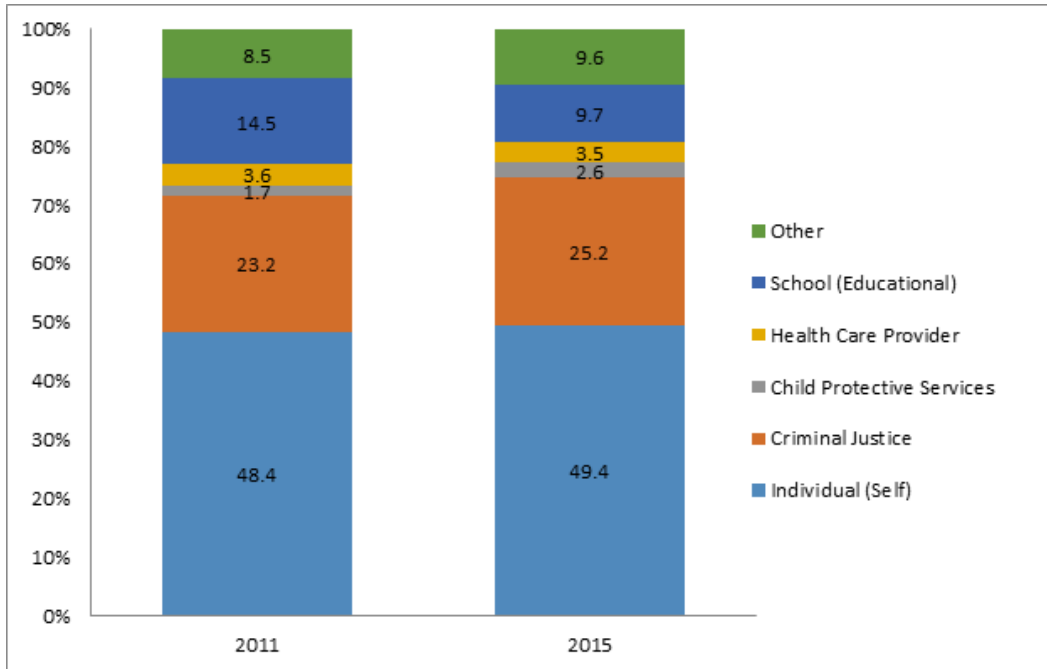
**Figure 5-4. Estimated Percentage of Past-Year Nonmedical Pain Reliever Use in the United States (US) and Hawaii (HI)**



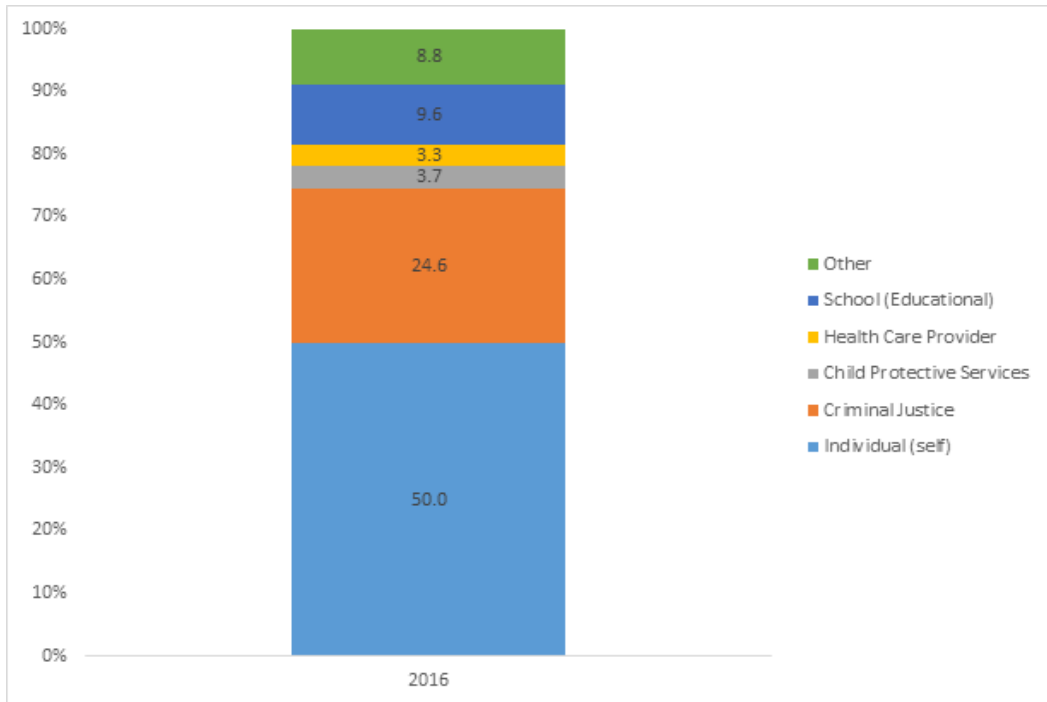
**Figure 5-5. Estimated Percentage of Lifetime, Past-Year, and Past-Month Heroin Use in Portugal**



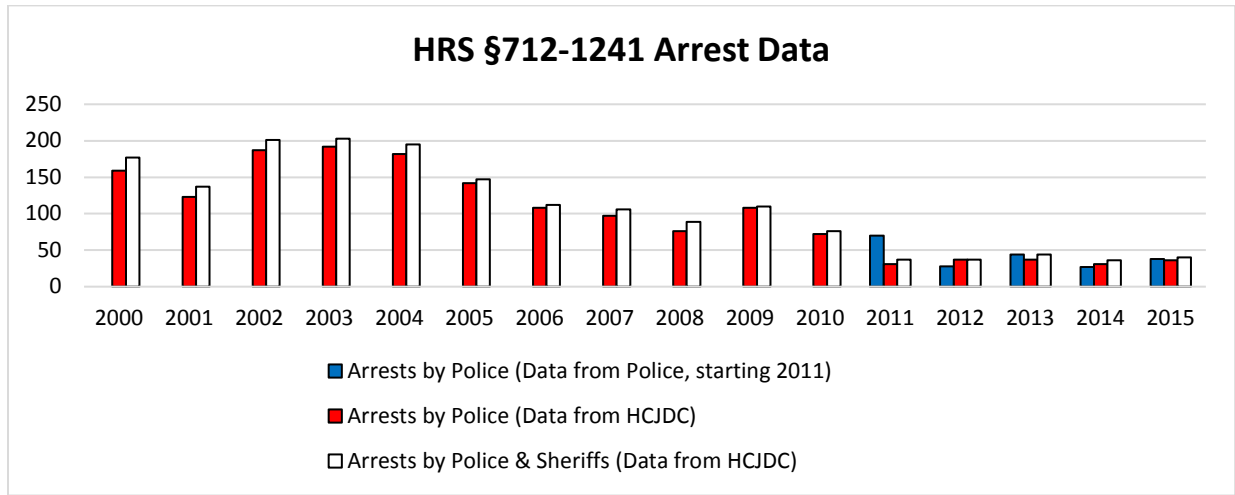
**Figure 5-6. ADAD-Funded Admissions for Substance Use Treatment by Source of Referral, 2011 and 2015**



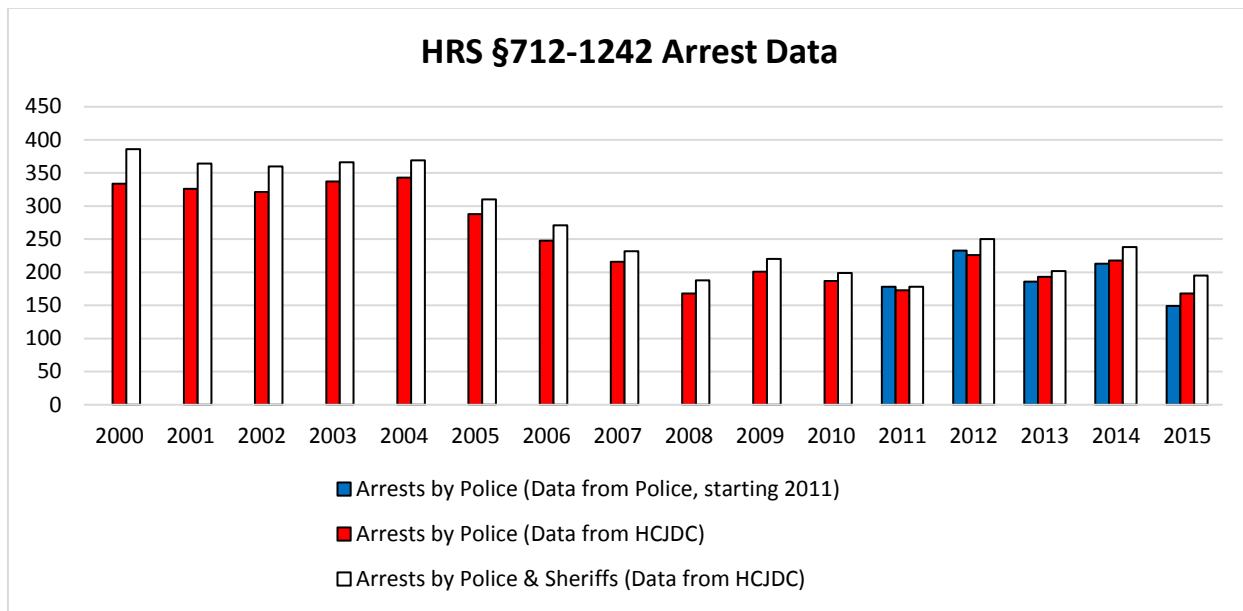
**Figure 5-7. ADAD- Funded Admissions for Substance Use Treatment by Source of Referral, 2016**



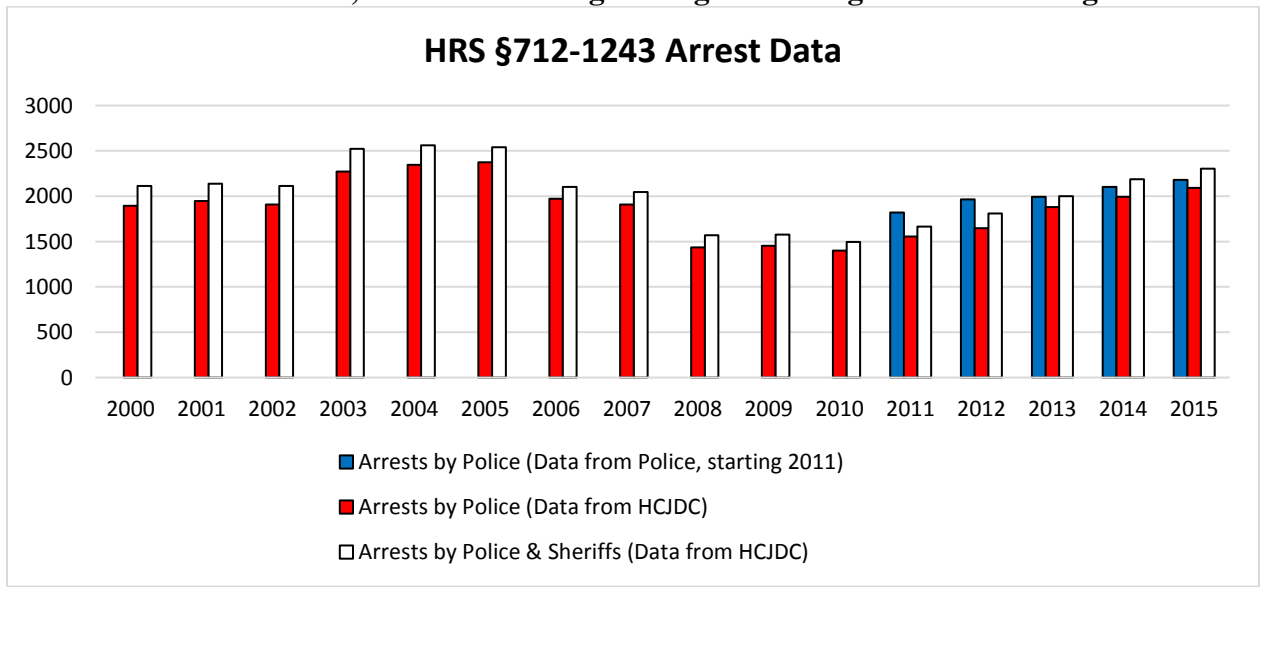
**Figure 5-8. Arrests Made for Violations of Section 712-1241, HRS: Promoting a Dangerous Drug in the First Degree**



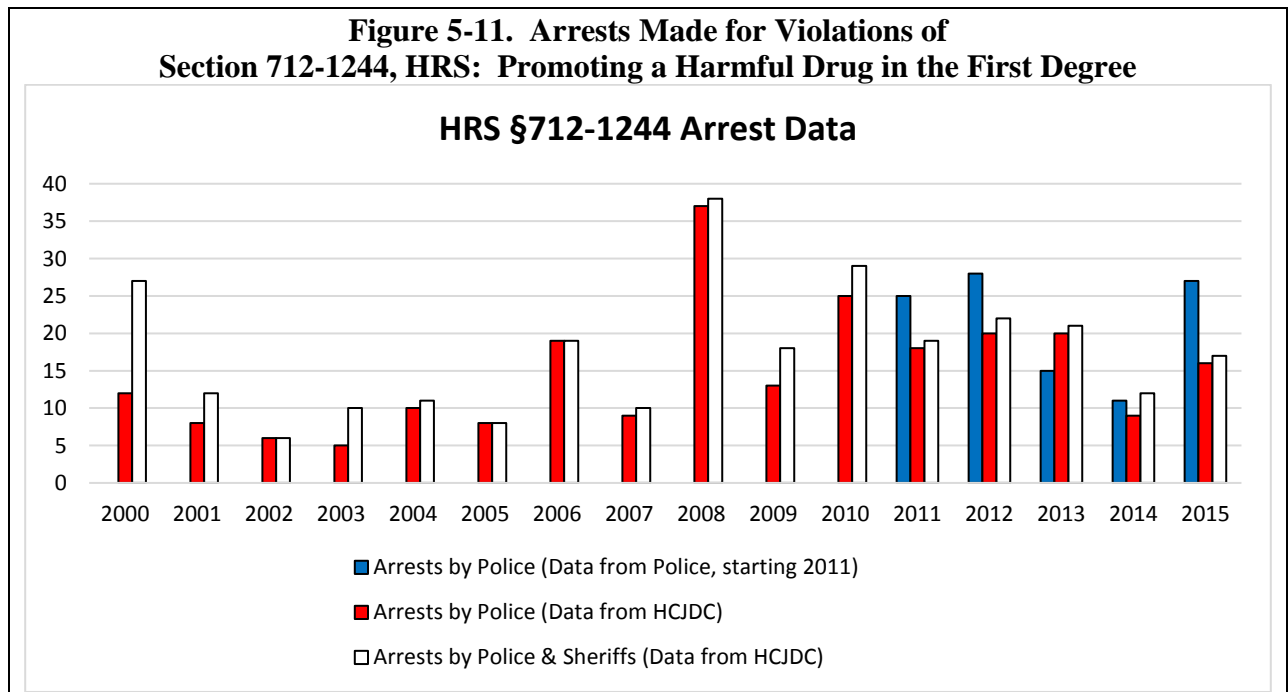
**Figure 5-9. Arrests Made for Violations of Section 712-1242, HRS: Promoting a Dangerous Drug in the Second Degree**



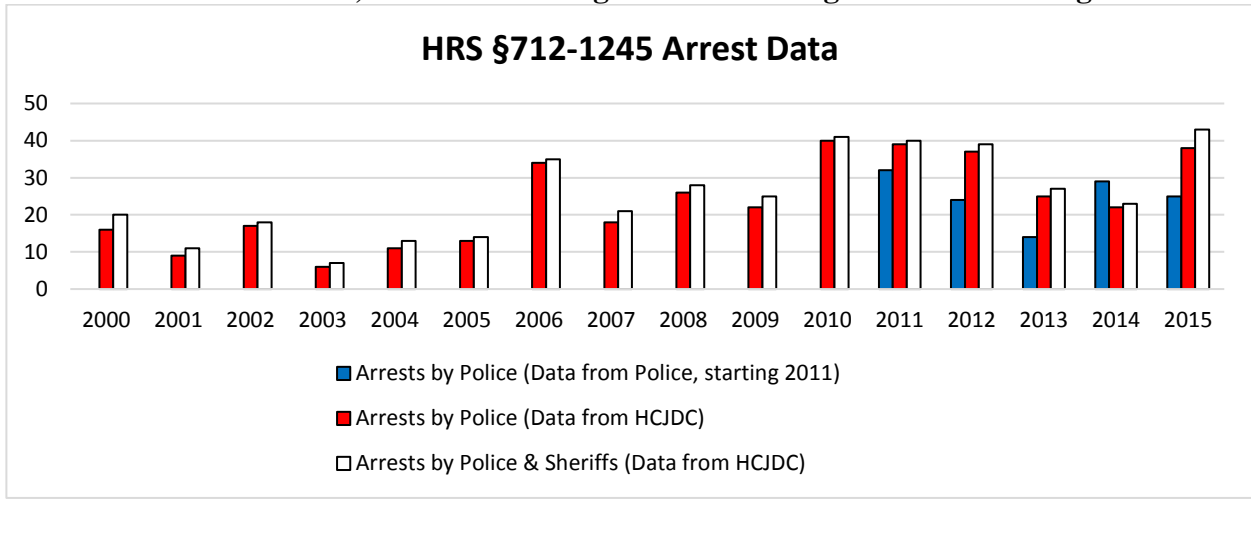
**Figure 5-10. Arrests Made for Violations of Section 712-1243, HRS: Promoting a Dangerous Drug in the Third Degree**



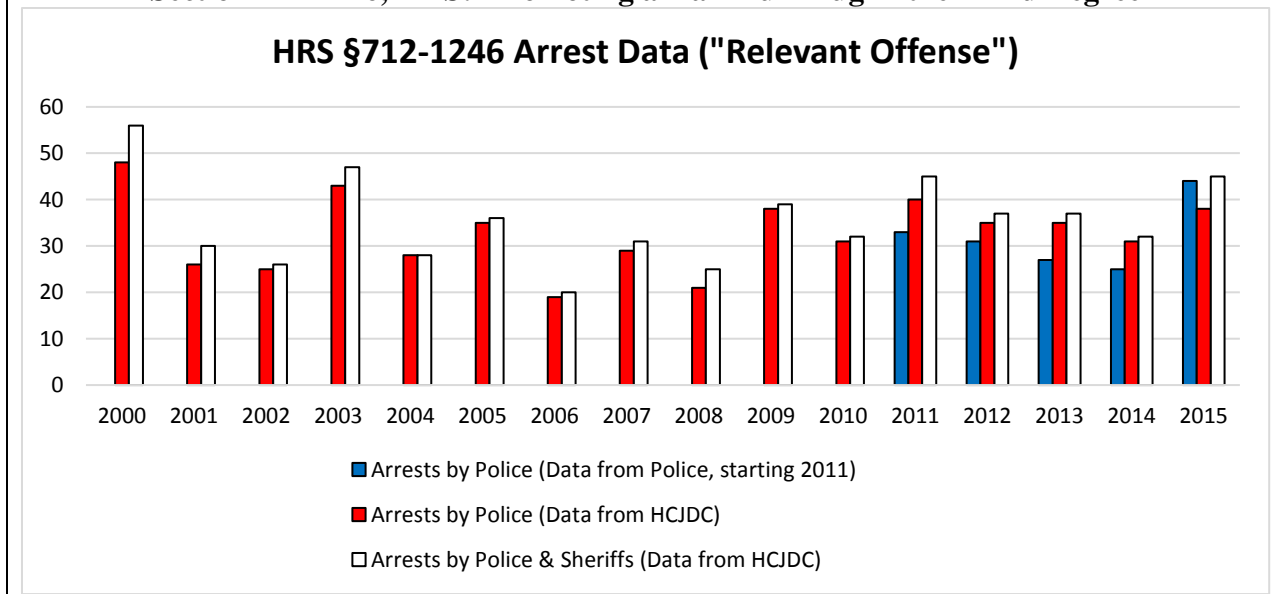
**Figure 5-11. Arrests Made for Violations of Section 712-1244, HRS: Promoting a Harmful Drug in the First Degree**



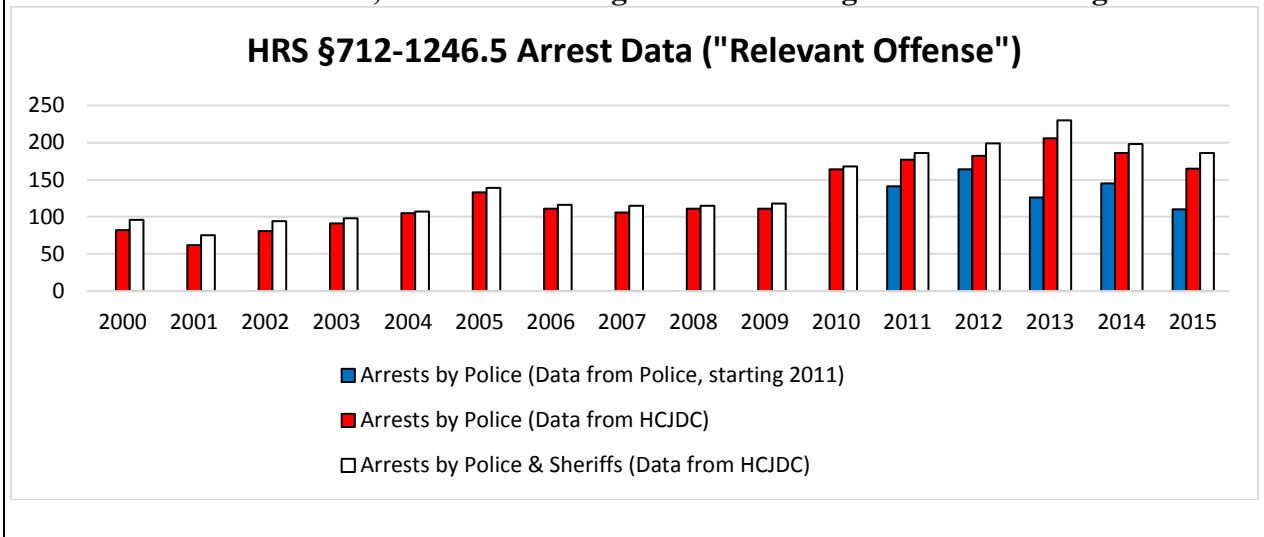
**Figure 5-12. Arrests Made for Violations of Section 712-1245, HRS: Promoting a Harmful Drug in the Second Degree**



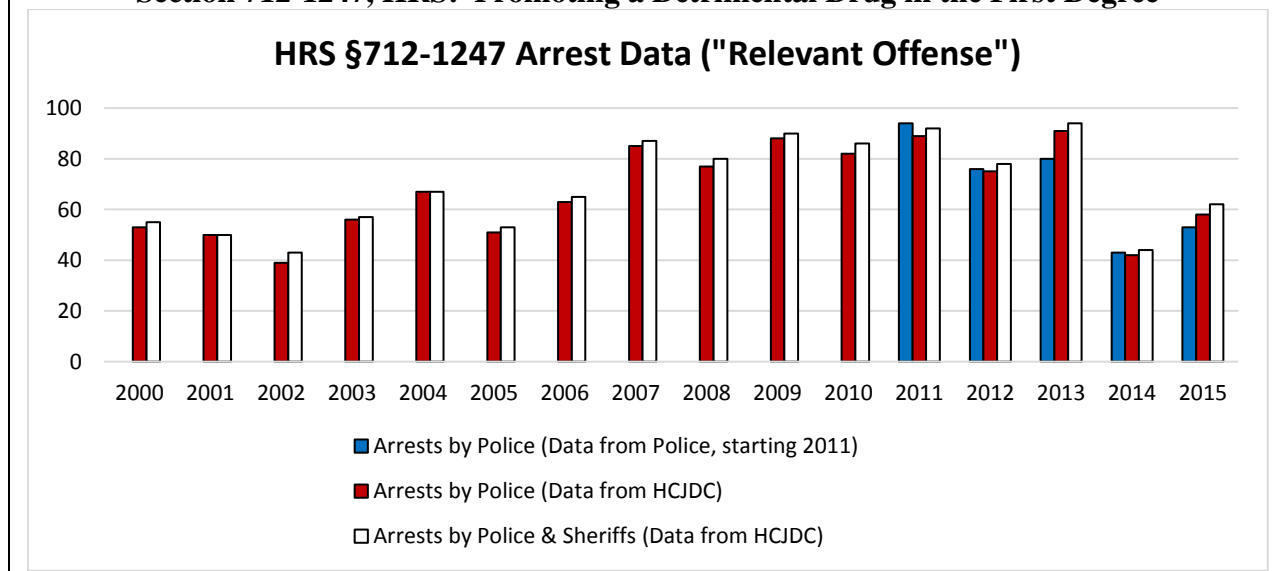
**Figure 5-13. Arrests Made for Violations of Section 712-1246, HRS: Promoting a Harmful Drug in the Third Degree**



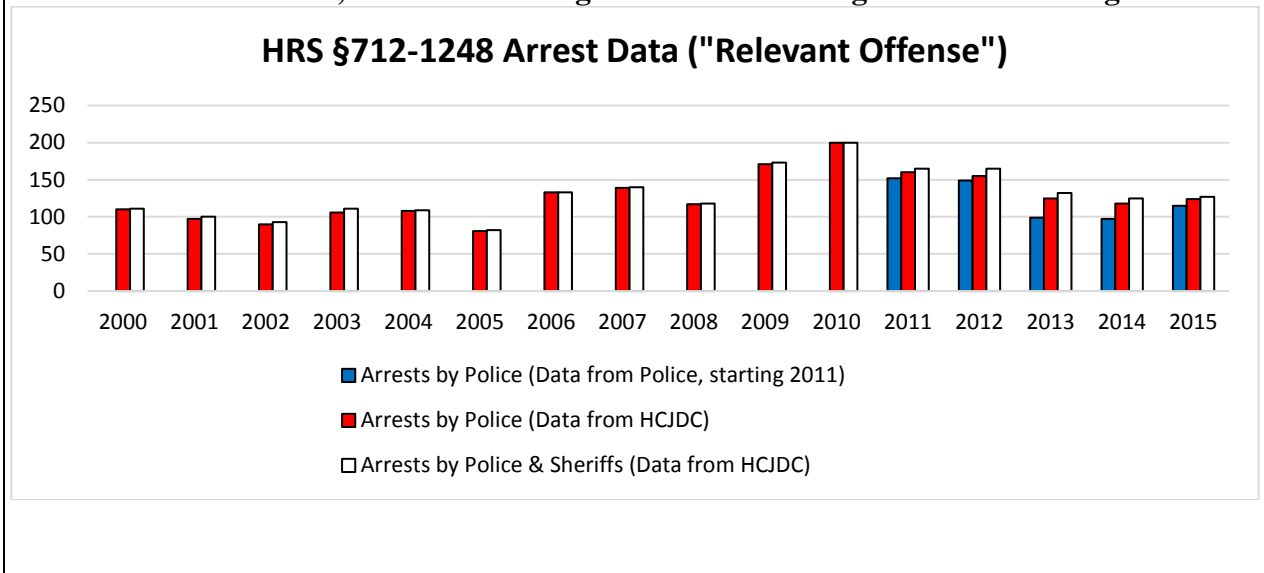
**Figure 5-14. Arrests Made for Violations of Section 712-1246.5, HRS: Promoting a Harmful Drug in the Fourth Degree**



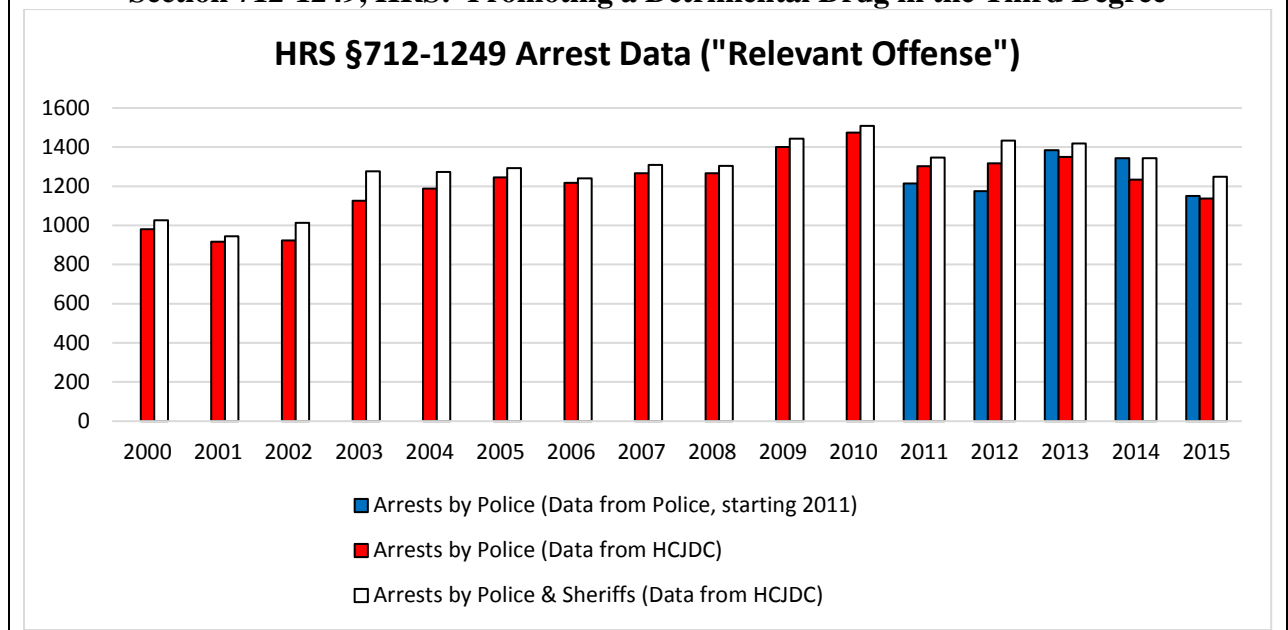
**Figure 5-15. Arrests Made for Violations of Section 712-1247, HRS: Promoting a Detrimental Drug in the First Degree**



**Figure 5-16. Arrests Made for Violations of Section 712-1248, HRS: Promoting a Detrimental Drug in the Second Degree**



**Figure 5-17. Arrests Made for Violations of Section 712-1249, HRS: Promoting a Detrimental Drug in the Third Degree**





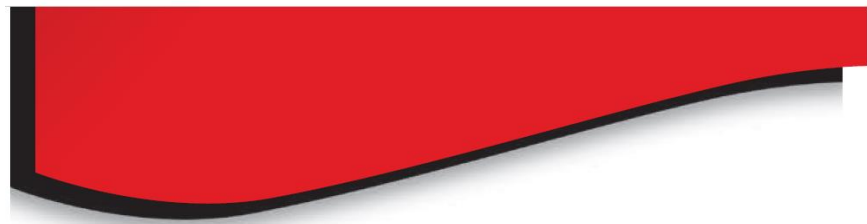
## Appendix D

# PORTUGAL'S DECRIMINALIZATION LAW

General-Directorate for Intervention  
on Addictive Behaviours and Dependencies  
Ministry of Health - Portugal

## DECRIMINALISATION

Portuguese legal framework  
applicable to the consumption  
of narcotics and  
psychotropic substances



**SICAD** | Serviço de Intervenção nos  
Comportamentos Aditivos  
e nas Dependências

# DECRIMINALISATION

Law n.º 30/2000, of 29 November

*Translated from Portuguese to English by SICAD*

## **Law n.º30/2000, of 29 November**

Defines the legal framework applicable to the consumption of narcotics and psychotropic substances, together with the medical and social welfare of the consumers of such substances without medical prescription.

The Assembly of the Republic hereby decrees the following, in accordance with paragraph c) of article 161 of the Constitution, as a general law of the Republic:

### **Article 1**

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#### **Aim**

1 – This law defines the legal framework applicable to the consumption of narcotics and psychotropic substances, together with the medical and social welfare of the consumers of such substances without medical prescription.

2 – The plants, substances and preparations subject to the framework established here are those listed in tables I to IV attached to Decree-Law no. 15/93 of 22 January.

### **Article 2**

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#### **Consumption**

1 – The consumption, acquisition and possession for own consumption of plants, substances or preparations listed in the tables referred to in the preceding article constitute an administrative offence.

2 – For the purposes of this law, the acquisition and possession for own use of the substances referred to in the preceding paragraph shall not exceed the quantity required for an average individual consumption during a period of 10 days.

## Article 3

---

### Spontaneous treatment

1 – The provisions of this law shall not apply when the consumer or, in the case of a minor, certified or disqualified person, his legal representatives, request the assistance of public or private health services.

2 – Any doctor may notify the State health services of the cases of the abuse of plants, narcotic or psychotropic substances which he encounters in the course of his professional duties, when he believes that treatment or healthcare measures are justified in the interest of the patient, the members of his family or the community, for which he or she lacks the resources.

3 – In the cases provided for in the preceding paragraphs there shall be a guarantee of confidentiality, the doctors, technical staff and other health workers who care for the consumer being subject to the duty of professional secrecy, and such persons shall not be obliged to testify in inquiries or judicial proceedings neither to provide information on the nature and evolution of the therapeutic process or on the identity of the consumer.

## Article 4

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### Seizure and identification

1 – The police authorities shall identify the consumer and may also proceed to search him and seize the plants, substances or preparations referred to in article 1 which have been found in the possession of the consumer, which shall be forfeit to the State, drawing up the respective police report, which shall be forwarded to the relevant territorial commission.

2 - Whenever not possible to identify the consumer at the place and the moment of the occurrence, the police authorities may, if necessary, detain the consumer in order to ensure that he or she appears before the commission, in accordance with the legal rules on detention for the purpose of identification.

## Article 5

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### Powers to process, apply and enforce

1 – Offences shall be processed and the respective penalties applied by a commission referred to as “commission for the dissuasion of drug addiction”, especially created for this purpose, operating in the premises of the civil governments.

2 – The Governo Civil <sup>1</sup> shall have powers to enforce fines and alternative penalties.

3 – In districts with a greater concentration of proceedings, more than one commission may be created by order of the member of the Government responsible for coordinating drug and drug addiction policy.

4 – The Governo Civil and the IPDT (Portuguese Institute on Drug and Drug Addiction) shall provide the commissions with administrative support and technical support respectively.

5 – Expenses relating to the members of the commissions shall be borne by the IPDT.

## Article 6

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### Central Register

The IPDT shall keep a central register of proceedings relating to the offences provided for in this law, which shall be kept in accordance with regulations issued by the Minister of Justice and the member of the Government responsible for the coordination of drugs and drug addiction policies.

## Article 7

---

### Composition and appointment of commissions

1 – The commissions provided for in paragraph 1 of article 5 shall comprise three persons, one of which shall serve as chairman, appointed by the member of the Government responsible for the coordination of drugs and drug addiction policies.

2 – One of the members of the commission shall be a legal expert appointed by the Ministry of Justice, and the Minister of Health and the member of the Government

<sup>1</sup> The Governo Civil is the administrative structure that represents the government in the districts.

responsible for the coordination of the drugs and drug addiction policies shall appoint the other two, who shall be chosen from doctors, psychologists, sociologists, social services workers or others with appropriate professional expertise in the field of drug addiction, who in the course of their duties shall guard against any possible direct therapeutic interest or ethical conflict.

3 – The Minister of Justice and the member of the Government responsible for the coordination of drugs and drug addiction policies shall issue regulations on the organization of the commissions, on their proceedings and procedures, and the status of the members shall be established by joint order of the Minister of Finance, the Minister for the Reform of the State and Public Administration and the member of the Government responsible for the coordination of drugs and drug addiction policies.

4 – The members of the commission shall be subject to the duty of secrecy with regard to the personal data contained in proceedings, without prejudice of the legal rules on the protection of public health and the criminal proceedings, where applicable.

## Article 8

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### Territorial jurisdiction

1 – Proceedings shall be brought before the commission of the residence area of the consumer, except in case of unknown address, in which case the proceedings shall be brought before the commission of the area in which the consumer was found.

2 – Appeals against penalties applied by the commissions shall be brought before the court with jurisdiction at the head office of the commission in question.

## Article 9

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### Cooperation with other bodies

1 – In order to undergo treatment voluntarily accepted by the consumer, the latter may use the public health services or duly licensed private services.

2 – In order to comply with the provisions of this law, the commissions and the Governo Civil shall request the assistance, as the case may be, of the public health services, the social welfare services, the police authorities and the administrative authorities.

## Article 10

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### Judgement as to the nature and circumstances of consumption

1 – The commission shall hear the consumer and gather the information needed in order to reach a judgement as to whether he or she is an addict or not, what substances were consumed, the circumstances in which he was consuming drugs when summoned, the place of consumption and his economic situation.

2 – The consumer may request that a therapist of his or her choice takes part in the proceedings, and the commission shall establish the rules for such participation.

3 – In order to formulate the judgement referred to in paragraph 1, the commission or the consumer may propose or request that appropriate medical examinations be conducted, including blood or urine tests or any other tests as may be deemed appropriate.

4 – If the commission does not base its definition of the nature of consumption on the findings of a medical examination with the characteristics set out in the preceding paragraph, the consumer may request such examination, and the findings shall be analysed with a view to a possible reconsideration of the initial judgement reached by the commission.

5 – The commission shall have the examination conducted by a duly licensed health service, the costs being borne by the consumer if he or she chooses a private service, and the tests shall be carried out within a period of no more than 30 days.

## Article 11

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### Provisional suspension of proceedings

1 – The commission shall provisionally suspend proceedings whenever a consumer with no prior record of offences under this law is deemed to be a non-addicted consumer.

2 – The commission shall provisionally suspend proceedings whenever an addicted consumer with no prior record of previous proceedings for offences under this law agrees to undergo treatment.

3 – The commission may provisionally suspend proceedings if an addicted consumer with a prior record of previous proceedings for offences under this law agrees to undergo treatment.

4 – The decision to suspend proceedings may not be impugned.

## Article 12

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### Submission to treatment

1 – If an addicted consumer agrees to undergo treatment, the commission shall notify the public or private health service chosen by the consumer, who shall be notified of the alternatives available.

2 – If the consumer opts for a private health service he or she shall bear the respective costs of treatment.

3 – The organization referred to in paragraph 1 shall notify the commission every three months of whether treatment is continuing or not.

## Article 13

---

### Duration and effects of suspension

1 – Proceedings may be suspended for up to two years, which may be extended by one additional year by means of a decision with due grounds by the commission.

2 – The commission shall file proceedings, which may not be reopened, if:

- a) in the case of a non-addicted consumer, there is no repeated offence;
- b) an addicted consumer undergoes treatment and does not interrupt it unduly.

3 – Other than as provided for in the preceding paragraph, the proceedings shall continue.

4 – The limit period for the expiry of proceedings shall not be counted whilst its suspension.

## Article 14

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### Suspension of penalties applied in the event of voluntary treatment

1 – The commission may suspend a decision to apply a penalty if an addicted consumer agrees to undergo, voluntarily, treatment in a public or duly licensed private service.



2 – Penalties may be suspended for up to three years.

3 – If during the suspension period, for reasons attributable to him or her, the addict does not undergo or interrupts treatment, the suspension shall be revoked and the penalty corresponding to the offence applied.

4 – The commission shall declare proceedings closed if, on expiry of the suspension period, no reason has been found which could lead to revoking the suspension.

5 – Refusal to undergo treatment under the terms of article 11 and the continuation of proceeding under the terms of article 13 shall not prejudice the provisions of paragraph 1 of this article.

6 – The provisions of paragraph 2 of article 12 and of paragraph 4 of article 13 are correspondingly applicable.

## Article 15

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### Penalties

1 – Non-addicted consumers may be sentenced to payment of a fine or, alternatively, to a non-pecuniary penalty.

2 – Non-pecuniary penalties shall be applied to addicted consumers.

3 – The commission shall set the penalty in accordance with the need to prevent the consumption of narcotics and psychotropic substances.

4 – In applying penalties, the commission shall take into account the consumer's circumstances and the nature and circumstances of consumption, weighing up namely:

- a) The seriousness of the act;
- b) The degree of fault;
- c) The type of plants, substances or preparations consumed;
- d) The public or private nature of consumption;
- e) In the case of public consumption, the place of consumption;
- f) In the case of a non-addicted consumer, the occasional or habitual nature of his drug use;
- g) The personal circumstances, namely economic and financial, of the consumer.

## Article 16

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### Fines

1 – In the case of plants, substances or preparations contained in tables I-A, I-B, II-A, II-B and II-C, the fine shall be fixed between a lower limit of PTE 5.000\$00 and an upper limit equivalent to the national minimum monthly wage.

2 – In the case of substances or preparations contained in tables I-C, III and IV, the fine shall be fixed between PTE 5.000\$00 and PTE 30.000\$00.

3 – The proceeds of fines shall be distributed as follows:

- a) 60% to the State;
- b) 20% to the SPTT (Drug Addiction Treatment and Prevention Service);
- c) 10% to the Governo Civil;
- d) 10% to the IPDT.

## Article 17

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### Other penalties

1 – Instead of a fine, the commission may issue a warning.

2 – Without prejudice to the provisions of paragraph 2 of article 15, the commission may apply the following penalties, as an alternative measure to a fine or as the main penalty:

- a) Banning from the exercise of a profession or occupation, namely those subject to licensing requirements, when such exercise jeopardises the well being of the consumer or third parties;
- b) Banning from certain places;
- c) Prohibiting the consumer from accompanying, housing or receiving certain persons;
- d) Forbidding the consumer to travel abroad without permission;
- e) Presenting himself periodically at a place to be indicated by the commission;
- f) Disenfranchisement, removing the right to be granted or to renew a fire arms license for defence, hunting, precision shooting or recreation;
- g) Seizure of objects belonging to the consumer which represent a risk to him or her or to the community or which encourage the committing of a crime or other offence;
- h) Privation from the right to manage the subsidy or benefit attributed on a personal basis by public bodies or services, which shall be managed by the organization

managing the proceedings or monitoring the treatment process, when agreed to by the consumer.

3 – As an alternative to the penalties provided for in the preceding paragraphs, the commission may, if the consumer so agrees, instruct the consumer to make a financial donation to a public or private charitable organization or to provide community service free of charge, in accordance with the rules established in paragraphs 3 and 4 of article 58 of the Criminal Code.

4 – The commission may suspend enforcement of any of the penalties

provided for in the preceding paragraphs, replacing them by performance of certain duties, under the terms of article 19.

## Article 18

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### Warnings

1 – The commission may issue a warning if, in view of the personal circumstances of the consumer, the type of consumption and the type of plants, substances or preparations consumed, it considers that the consumer will abstain from future consumption.

2 – The warning shall consist of an oral reprimand, with the consumer being expressly warned of the consequences of his behaviour and urged to abstain from consumption.

3 – The commission shall deliver the warning when the decision to apply it becomes definitive.

4 – The commission shall deliver an immediate warning if the consumer declares that he waives the right to bring an appeal.

## Article 19

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### Suspension of enforcement of penalty

1 – In the case of an addicted consumer for whom there is no feasible treatment, or who refuses to accept treatment, the commission may suspend enforcement of the penalty, requiring the consumer to present himself or herself periodically at medical services, with the frequency deemed necessary by such services, with a view to improving his

health conditions, and suspension of enforcement may also be made conditional on the acceptance by the consumer of the measures provided for in paragraph 3.

2 – In the case of a non-addicted consumer, the commission may opt to suspend the penalty if, in the light of the personal circumstances of the consumer, the type of consumption and the type of plants, substances or preparations consumed, it concludes that this is the most appropriate form of achieving the aim of preventing consumption should the consumer agree to the conditions proposed by the commission under the terms of the following paragraphs.

3 – The commission may propose other follow-up solutions which may be particularly advisable in view of the specific nature of each case, in such a way as to ensure respect for the dignity of the individual and with the acceptance of the latter, such measures being chosen from those provided for in subparagraphs a) to d) of paragraph 2 of article 17.

4 – The rules governing periodic attendance as provided for in paragraph 1 shall be issued by the Minister of Health.

## Article 20

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### Duration of suspension of enforcement of penalty

1 – Suspension shall have a duration of between one and three years as from the date on which a decision becomes final, not counting the time for which the consumer may be deprived of liberty due to coercive procedural measures, prison sentence or security measure.

2 – The commission shall determine the duration of the measures provided for in paragraph 3 of the preceding article, never exceeding an upper limit of six months.

## Article 21

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### Periodic attendance

1 – In the case of suspension of the enforcement of the sentence with periodic attendance at health services, the commission shall notify the health centre of the consumer's area of residence or any other health service which may be agreed with him.

2 – The services referred to in the preceding paragraph shall notify the commission of the consumer's regular attendance or, when applicable, of his failure to attend, indicating any reasons of which it may be aware.

## Article 22

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### Notification of measures

1 – The services and authorities whose cooperation is requested for the purpose of monitoring compliance with measures shall be notified of the decision to suspend enforcement of penalties.

2 – The services and authorities referred to in the preceding paragraph shall notify the commission of any failure to comply with measures, for the purposes of the provisions of paragraphs 2 and 3 of the following article.

## Article 23

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### Effects of suspension

1 – The commission shall declare a penalty to have been set aside if, on expiry of the suspension period, there exist no reasons which would lead to revoking such suspension.

2 – Suspension of enforcement of penalty shall be revoked whenever, whilst such suspension is in effect, the consumer repeatedly fails to comply with the measures imposed.

3 – If suspension is revoked, the penalty applied shall be enforced.

## Article 24

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### Duration of penalties

The penalties provided for in paragraph 2 of article 17 and the follow-up measures provided for in article 19 shall have a minimum duration of one month and a maximum duration of three years.

## Article 25

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### Compliance with penalties and follow-up measures

The Governo Civil shall be notified of the decision to apply penalties or follow-up measures, and shall notify the services and authorities whose cooperation is required for the enforcement of such measures.

## Article 26

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### Subsidiary law

In the absence of specific provisions herein, the general rules on administrative offences shall apply.

## Article 27

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### Application in the Autonomous Regions

In the Autonomous Regions, the geographical distribution and composition of the commission, the powers to appoint their members, the definition of the services taking part in proceedings and the distribution of the proceeds of fines shall be established by regional legislative decree.

## Article 28

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### Repeal

Article 40, save with regard to cultivation, and article 41 of Decree-Law no. 15/93, of 22 January, are hereby repealed, together with any other provisions which prove incompatible with the framework established herein.

## Article 29

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### Entry into force

The decriminalisation approved herein shall enter into force throughout Portuguese territory on July 1, 2001, and all the regulatory, organizational, technical and financial measures needed in order to apply the treatment and follow-up framework herein provided for shall be adopted within 180 days from publication.

Approved on 19 October 2000. - The President of the Assembly of the Republic, António de Almeida Santos. - Promulgated on 14 November 2000. Publish. - The President of the Republic, Jorge Sampaio. -Countersigned on 16 November 2000. The Prime-Minister, António Manuel de Oliveira Guterres.



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# Appendix E

## Tables of controlled plants, substances and preparations (Articles 2 and 3 of Decree-Law

### No. 15/93)

#### TABLE I - A

Acetorphine - 3- *O*- acetyl(tetrahydro- 7- *l*- (1 - hydroxy - 1 - methylbutyl)- 6,14- *endo*etheno- oripavine.

Acetyl- *alpha*- methylfentanyl - *N*- [1 - (1- methylphenethyl) - 4- piperidyl] - acetanilide.

Acetyldihydrocodeine - 3- methoxy- 4,5- epoxy- 6 - acetoxy - 17- methylmorphinan.

Acetylmethadol - 3- acetoxy- 6- dimethylamino- 4,4- diphenylheptane.

Alfentanil - *N*- [1 - [2- (4- ethyl- 4,5 - dihydro- 5- oxo- 1 *H*- tetrazol- 1 - yl)ethyl] - 4- (methoxymethyl)-4- piperidinyl]- *N*- phenylpropanamide monohydrochloride.

Allylprodine - 3- allyl- 1 - methyl- 4- phenyl- 4- propionoxypiperidine.

Alphacetylmethadol - *alpha*-3-acetoxy-6-dimethylamino-4,4-diphenylheptane.

Alphameprodine - *alpha*- 3 - ethyl- 1 - methyl- 4- phenyl- 4- propionoxypiperidine.

Alphamethadol - *alpha*- 6- dimethylamino- 4,4- diphenyl- 3- heptanol.

*Alpha*- methylfentanyl - *N*- [(1- methylphenethyl)-4-piperidyl]-propionanilide.

*Alpha*- methylthiofentanyl - *N*- [1 - [1 - methyl- 2- (2- thienyl)- ethyl] - 4- piperidyl]- propionanilide.

Alphaprodine - *alpha*- 1,3- dimethyl- 4- phenyl- 4- propionoxypiperidine.

Anileridine - 1- *para*-aminophenethyl-4-phenylpiperidine-4-carboxylic acid ethyl ester.

Benzethidine - 1 - (2- benzyloxyethyl)- 4- phenylpiperidine -4- carboxylic acid ethyl ester.

Benzylmorphine - 3- benzyloxy- 4,5- epoxy- *N*- methyl- 7- morphinen- 6- ol; 3- benzylmorphine.

Betacetylmethadol - *beta*- 3- acetoxy- 6- dimethylamino- 4,4- diphenylheptane.

*Beta*- hydroxyfentanyl - *N*- [1 - ( *beta*- hydroxyphenethyl)- 4- piperidyl]propionanilide.

*Beta*- hydroxy- 3 - methylfentanyl - *N*- [1 - ( *beta*- hydroxyphenethyl)- 3- methyl- 4- piperidyl] propionanilide.

Betameprodine - *beta*- 3- ethyl- 1 - methyl- 4- phenyl- 4- propionoxypiperidine.

Betamethadol - *beta*- 6 - dimethylamino- 4,4- diphenyl- 3- heptanol.

Betaprodine - *beta*- 1,3- dimethyl- 4- phenyl- 4- propionoxypiperidine.

Bezitamide - 1 - (3 - cyano- 3,3- diphenylpropyl)-4- (2- oxo-3- propionyl- 1 - benzimidazolyl)- piperidine.

Clonitazene - 2- *para*-chlorbenzyl-1-diethylaminoethyl-5-nitrobenzimidazole.

Codeine - 3- methoxy - 4,5- epoxy- 6- hydroxy- 17- methyl- 7- morphinene; 3- methylmorphine.

Codeine *N*-oxide - 3-methoxy-4,5-epoxy-6-hydroxy-17-methyl-7-morphinene-17-oxy-ol. Codoxime - dihydrocodeinone-6- carboxymethyloxime.

Concentrate of poppy straw - the material arising when poppy straw has entered into a process for the concentration of its alkaloids, when such material is made available in trade.

Desomorphine - 3- hydroxy-4,5- epoxy-17- methylmorphinan; dihydrodeoxymorphine.

Dextromoramide - (+)- 4- [2- methyl- 4- oxo- 3,3 - diphenyl- 4- (1 - pyrrolidinyl)butyl] - morpholine.

Dextropropoxyphene - *l*- (+)- 4- dimethylamino- 1,2- diphenyl- 3- methyl- 2- butanolpropionate.

Diampromide - *N*-[2-(methylphenethylamino)-propyl]propionanilide.

Diethylthiambutene - 3- diethylamino- 1,1- di- (2'- thienyl)- 1- butene.

Difenoxin - 1- (3- cyano- 3,3- diphenylpropyl)- 4- phenylisonipecotic acid.

Dihydrocodeine - 6- hydroxy- 3- methoxy- 17- methyl- 4,5- epoxymorphinan.

Dihydromorphine - 3,6- dihydroxy- 4,5 -epoxy- 17- methylmorphinan.

Dimenoxadol - 2- dimethylaminoethyl- 1- ethoxy- 1,1 - diphenylacetate.

Dimepheptanol - 6- dimethylamino- 4,4- diphenyl-3- heptanol.

Dimethylthiambutene - 3- dimethylamino- 1,1- di- (2'- thienyl)- 1- butene.

Dioxaphetyl butyrate - ethyl-4-morpholino-2,2-diphenylbutyrate.

Diphenoxylate - 1- (3- cyano- 3,3- diphenylpropyl)- 4- phenylpiperidine- 4- carboxylic acid ethyl ester.

Dipipanone - 4,4- diphenyl- 6- piperidine- 3- heptanone.

Drotebanol - 3,4- dimethoxy- 17- methylmorphinan-6- [\_,14- diol.

Ethylmethylthiambutene - 3- ethylmethylamino- 1,1- di- (2'- thienyl)- 1- butene.

Ethylmorphine - 3- ethoxy- 4,5- epoxy- 6- hydroxy- 17- methyl- 7- morphinene; 3- ethylmorphine.

Etonitazene- 1-diethylaminoethyl- 2- *para*-ethoxybenzyl- 5- nitrobenzimidazole.

Etorphine - tetrahydro-7-,1-(1-hydroxy-1-methylbutyl)-6,14- *endo*etheno-orphavine.

Etoperidine - 1 - [2 - (2- hydroxyethoxy)-ethyl] -4- phenylpiperidine - 4- carboxylic acid ethyl ester.

Fentanyl - 1 - phenethyl - 4 - *N*- propionylanilinopiperidine.

Furethidine - 1 - (2- tetrahydrofurfuryloxyethyl)- 4- phenylpiperidine- 4- carboxylic acid ethyl ester.

Heroin - 3,6 - diacetoxy -4,5 - epoxy - 17 - methyl- 7 - morphinene; diacetylmorphine.

Hydrocodone - 3 - methoxy - 4,5 - epoxy - 6 - oxo- 17 - methylmorphine; dihydrocodeinone.

Hydromorphinol - 3,6,14- trihydroxy- 4,5- epoxy- 17- methylmorphinan; 14- hydroxy- dihydromorphine.

Hydromorphone - 3 - hydroxy - 4,5 - epoxy- 6 - oxo- 17 - methylmorphinan; dihydromorphinone.

Hydroxypethidine - 4- *meta*- hydroxyphenyl - 1 - methylpiperidine- 4- carboxylic acid ethyl ester.

Isomethadone - 6- dimethylamino- 5- methyl- 4,4- diphenyl- 3- hexanone.

Ketobemidone - 4- *meta*- hydroxyphenyl- 1 - methyl- 4- propionylpiperidine.

Levomethorphan - (-)- 3- methoxy - *N*- methylmorphinan[\*] .

Levomoramide - (-)- 4- [2- methyl- 4- oxo- 3,3 - diphenyl- 4- (1 - pyrrolidinyl)butyl] - morpholine.

Levophenacymorphan - (-)- 3- hydroxy- *N*- phenacymorphinan.

Levorphanol - (-)- 3- hydroxy- *N*- methylmorphinan[\*] .

Metazocine - 2'- hydroxy- 2,5,9- trimethyl- 6,7- benzomorphan.

Methadone - 6- dimethylamino- 4,4- diphenyl- 3- heptanone.

Methadone intermediate - 4- cyano- 2- dimethylamino- 4,4- diphenylbutane.

Methyl-desorphone - 6- methyl- *delta*- 6- deoxymorphine; 3- hydroxy- 4,5- epoxy- 6,17- dimethyl-6- morphinene.

Methyl-dihydromorphine - 6 - methyldihydromorphine; 3,6 - dihydroxy- 4,5 - epoxy - 6,17- dimethylmorphinan.

3 - methylfentanyl - *N*- (3- methyl- 1 - phenethyl- 4- piperidyl)propionanilide (and its *cis* and *trans* isomers).

Metopon - 5-methyldihydromorphinone; 3-hydroxy-4,5-epoxy-6-oxo-5,17-dimethylmorphinan.

Moramide intermediate - 2- methyl- 3 - morpholino- 1,1 - diphenylpropane carboxylic acid.

Morpheridine - 1 - (2 - morpholinoethyl) -4- phenylpiperidine-4- carboxylic acid ethyl ester.

Morphine - 3,6- dihydroxy- 4,5 - epoxy- 17- methyl- 7- morphinene.

Morphine methylbromide and other pentavalent nitrogen morphine derivatives.

Morphine - *N*- oxide - 3,6 - dihydroxy - 4,5 - epoxy - 17 - methyl- 7 - morphinene - *N*- oxide.

MPPP - 1 - methyl - 4 - phenyl- 4 - piperidinol propionate.

Myrophine - myristylbenzylmorphine; 3- benzyloxy- 4,5- epoxy- 17- methyl- 7- morphinene - 6- yl tetradecanoate.

Nicocodine - 3-piridinocarboxylic acid codeine ester; 6-nicotinylcodeine.

Nicodicodine - 3- piridinocarboxylic acid dihydrocodeine ester; 6- nicotinyl- dihydrocodeine.

Nicomorphine - 3,6-dinicotinyImorphine.

Noracymethadol - (1)- *alpha*-3-acetoxy-6-methylamino-4,4-diphenylheptane.

Norcodeine - 3- methoxy- 4,5- epoxy- 6- hydroxy- 7- morphinene; *N*- demethylcodeine.

Norlevorphanol - (-) - 3 - hydroxymorphinan.

\* Dextromethorphan ((+)- 3 - methoxy - *N*- methylmorphinan) and dextrorphan((+)- 3- hydroxy- *N*- methylmorphinan) are specifically excluded from this table.

Normethadone - 6- dimethylamino-4,4- diphenyl- 3- hexanone.

Normorphine - 3,6- dihydroxy- 4,5- epoxy- 7- morphinene; demethylmorphine.

Norpipanone - 4,4- diphenyl- 6 - piperidino- 3 - hexanone.

Opium - the coagulated juice spontaneously generated by the seed pod of *Papaver somniferum* L. which has undergone only the operations necessary for its packaging and transport, regardless of its morphine content.

Opium - mixture of alkaloids in the form of hydrochlorides and bromides.

Oxycodone - 3- methoxy- 4,5- epoxy- 6- oxo- 14- hydroxy- 17- methylmorphinan; 14- hydroxy- dihydrocodeinone.

Oxymorphone - 3,14- dihydroxy- 4,5- epoxy-6- oxo- 17- methylmorphinan; 14- hydroxy- dihydromorphinone.

*Para*- fluorofentanyl - 4'-fluoro-*N*-(1-phenethyl-4-piperidyl)propionanilide.

PEPAP - 1 - phenethyl- 4- phenyl- 4 - piperidinol acetate.

Pethidine - 1 - methyl- 4- phenylpiperidine- 4- carboxylic acid ethyl ester.

Pethidine intermediate A - 4- cyano- 1- methyl- 4- phenylpiperidine.

Pethidine intermediate B - 4- phenylpiperidine-4- carboxylic acid ethyl ester.

Pethidine intermediate C - 1 - methyl- 4- phenylpiperidine- 4- carboxylic acid.

Phenadoxone - 6-morpholino-4,4-diphenyl-3-heptanone.

Phenampramide - *N*- (1 - methyl - 2- piperidinoethyl) - propionanilide.

Phenazocine - 2'- hydroxy- 5,9 - dimethyl- 2- phenethyl- 6,7 - benzomorphan.

Phenomorphin - 3- hydroxy- *N*- phenethylmorphinan.

Phenoperidine - 1- (3- hydroxy- 3- phenylpropyl)- 4- phenylpiperidine- 4- carboxylic acid ethyl ester.

Pholcodine - 3 - (2- morpholino- ethoxy)- 6- hydroxy- 4,5 - epoxy- 17- methyl- 7- morphinene; morpholinylethylmorphine.

Piminodine - 4 - phenyl- 1 - (3 - phenylaminopropyl) - piperidine - 4- carboxylic acid ethyl ester.

Piritramide - 1 - (3- cyano- 3,3- diphenylpropyl)- 4- (1- piperidino)- piperidine- 4- carboxylic acid amide.

Proheptazine - 1,3-dimethyl-4-phenyl-4-propionoxyazacycloheptane.

Propiperidine - 1 - methyl- 4- phenylpiperidine- 4- carboxylic acid isopropyl ester.

Propiram - *N*- (1 - methyl- 2- piperidinoethyl)-*N*- 2- pyridylpropionamide.

Racemethorphan - (1)- 3 - methoxy- *N*- methylmorphinan.

Racemoramide - (1)- 4 - [2 - methyl- 4-oxo- 3,3 - diphenyl- 4- (1 - pyrrolidinyl)- butyl]- morpholine.

Racemorphan - (1)- 3 - hydroxy - *N*- methylmorphinan.

Sufentanil - *N*- [4 - (methoxymethyl)- 1 - [2- (2- thienyl)ethyl] - 4- piperidyl] - propionanilide.

Thebacon - 3 - methoxy - 4,5 - epoxy - 6 - acetoxy - 17 - methylmorphinan; acetyldihydrocodeinone.

Thebaine - 3,6- dimethoxy- 4,5 - epoxy- 17- methyl- 6,8 - morphinadiene.

Thiofentanyl - *N*- [1- [2- (2- thienyl)ethyl]- 4- piperidyl] propionanilide.

Tilidine - (1)- ethyl- *trans*- 2- (dimethylamino)- 1 - phenyl- 3 - cyclohexene - 1 - carboxylate.

Trimeperidine - 1,2,5- trimethyl-4- phenyl-4- propionoxypiperidine.

The isomers, unless specifically excepted, of the drugs in this table whenever the existence of such isomers is possible within the specific chemical designation.

The esters and ethers, unless appearing in another table, of the drugs in this table whenever the existence of such esters or ethers is possible.

The salts of the drugs listed in this table, including the salts of esters, ethers and isomers as provided above, whenever the existence of such salts is possible.

**TABLE I-B**

Coca leaf - the leaves of *Erythroxylon coca* (Lamark), *Erythroxylon nova granatense* (Morris) Hieronymus and varieties thereof, the Erythroxylaceae family and their leaves, other species of this genus, from which it is possible to extract cocaine directly or to obtain it by chemical conversions; the leaves of the coca bush, with the exception of those from which all the ecgonine, cocaine and any other alkaloid that may be derived from ecgonine have been extracted.

Cocaine - (-)- 8 - methyl - 3- benzoyloxy- 8- aza- bicyclo- (1,2,3)- octane - 2- carboxylic acid methyl ester; methyl ester of benzoylecgonine.

Cocaine-D - dextro-isomer of cocaine.

Ecgonine - (-)- 3- hydroxy- 8 - methyl- 8-aza- bicyclo- (1,2,3)-octane- 2- carboxylic acid, and its esters and derivatives which are convertible to ecgonine and cocaine.

The salts of the compounds listed in this table are deemed to be included in this table, whenever the existence of such salts is possible.

**TABLE I-C**

Cannabis - the leaves and flowering or fruiting tops of the plant *Cannabis sativa* L. from which the resin has not been extracted, by whatever name they may be designated.

Cannabis resin - separated resin, whether crude or purified, obtained from the cannabis plant.

Cannabis oil - separated oil, whether crude or purified, obtained from the cannabis plant.

The salts of the compounds listed in this table are deemed to be included in this table, whenever the existence of such salts is possible.

**TABLE II-A**

Bufotenine - 5 - hydroxy - *N*- *N*-dimethyltryptamine.

Cathinone - (-)- aminopropiophenone.

DET - *N*- *N*-diethyltryptamine.

DMA - (1) - 2,5- dimethoxy- 1 - methylphenethylamine.

DMHP - 3- (1,2- dimethylheptyl)- 1- hydroxy- 7,8,9,10- tetrahydro- 6,6,9- trimethyl- 6*H*- dibenzo[ *b*, *d*]pyran.

DMT - *N*- *N*-dimethyltryptamine.

DOB - 2,5- dimethoxy- 4- bromoamphetamine.

DOET - (1)- 4- ethyl- 2,5- dimethoxy- *a* - methylphenethylamine.

DOM, STP - 2- amino- 1- (2,5- dimethoxy- 4- methyl)phenylpropane.

DPT - dipropyltryptamine.

Etcyclidine, PCE - *N*- ethyl- 1- phenylcyclohexylamine.

Lysergide, LSD, LSD-25 - (1)- *N*, *N*-diethyllysergamide; dextro-lysergic acid diethylamide.

MDMA - 3,4-methylenedioxyamphetamine.

Mescaline - 3,4,5-trimethoxyphenethylamine.

4- methylaminorex - (1) - *cis* - 2- amino- 4- methyl- 5- phenyl- 2- oxazoline.

MMDA - (1)- 5- methoxy- 3,4- methylenedioxy- 1 - methylphenylethylamine.

Parahexyl - 3- hexyl- 1 - hydroxy - 7,8,9,10- tetrahydro- 6,6,9- trimethyl- 6 *H*- dibenzo[ *b*, *d*]pyran.

Phencyclidine, PCP - 1- (1- phenylcyclohexyl)piperidine.

PMA - 4- methoxy- 1 - methylphenylethylamine.

Psilocybine - 3- (2- dimethylaminoethyl)indol- 4- yl dihydrogen phosphate.

Psilocine - 3- (2- dimethylaminoethyl)-4- hydroxyindole.

Rolicyclidine, PHP, PCPY - 1- (1-phenylcyclobexyl)pyrrolidine.

Tenamphetamine, MDA - (1)-3,4 *N*-methylenedioxy, 1-dimethylphenethylamine.

Tenocyclidine, TCP - 1- [1- (2- thienyl)cyclohexyl]piperidine.

TMA - (1)- 3,4,5 - trimethoxy- 1 - metbylphenylethylamine.

The salts of the substances listed in this table, whenever the existence of such salts is possible.

**TABLE II-B**

Amphetamine - (1) - 2 - amino- 1 - phenylpropane.

Cathine - *d*- *threo*- 2- amino- 1- hydroxy- 1 - phenylpropane.

Dexamphetamine - (+) - 2 - amino- 1 - phenylpropane.

Fenetylline - (1)-3,7-dihydro-1,3-dimethyl-7-[2-[(1-methyl-2-phenylethyl)- amino]ethyl]-1 *H* - purine - 2,6 - dione.

Levamphetamine - (-)-2- amino- 1-phenylpropane.

Levomethamphetamine - (-)- *N*- *alpha*-dimethylphenethylamine.

Methamphetamine - (+)- 2- methylamino- 1 - phenylpropane.

Methamphetamine racemate - (1)- 2- methylamino- 1 - phenylpropane.

Methylphenidate - 2-phenyl-2-(2-piperidyl) acetic acid methyl ester.

Phendimetrazine - (+)- 3,4- dimethyl- 2- phenylmorpholine.

Phenmetrazine - 3- methyl- 2- phenylmorpholine.

Phentemine - 1- 1- dimethylphenethylamine.

Tetrahydrocannabinol - the following isomers:  $\Delta$  6a (10a),  $\Delta$  6a (7),  $\Delta$  7,  $\Delta$  8,  $\Delta$  9,  $\Delta$  10,  $\Delta$  (11).

The derivatives and salts of the substances listed in this table, whenever the existence of such derivatives and salts is possible, as well as all preparations in which these substances are associated with other compounds, regardless of their action.

#### TABLE II- C

Amobarbital - 5-ethyl-5- (3-methylbutyl) barbituric acid.

Buprenorphine - 21 - cyclopropyl- 7- *alpha*- [( *S*)- 1- hydroxy- 1,2,2- trimethylpropyl] - 6,14- *endo*-ethano- 6,7,8,14- tetrahydrooripavine.

Butalbital - 5 - allyl- 5 - isobutybarbituric acid.

Cyclobarbital - 5- (1 - cyclohexen- 1- yl)- 5- ethylbarbituric acid.

Glutethimide - 2- ethyl- 2- phenylglutarimide.

Mecloqualone - 3-( *O*-chlorophenyl)-2-methyl-4(3 *H*)-quinazolinone.

Methaqualone - 2- methyl- 3- *O*- tolyl- 4(3 *H*)- quinazolinone.

Pentazocine - 1,2,3,4,5,6 - hexahydro- 6,11 - dimethyl-3- (3- methyl- 2- butenyl)- 2,6 - methano-3- benzazocin-8- ol.

Pentobarbital - 5- ethyl- 5- (1 - methylbutyl) barbituric acid.

Secobarbital - 5 - allyl- 5 - (1 - methylbutyl) barbituric acid.

The salts of the substances listed in this table, whenever the existence of such salts is possible.

#### TABLE III

1. Preparations whose quantitative composition, notwithstanding the fact that they are derived from narcotic drugs, presents no serious risk of use or abuse.
2. Preparations of acetyldihydrocodeine, codeine, dihydrocodeine, ethylmorphine, pholcodine, nicocodine, nicodicodine and norcodeine, when compounded with one or more other ingredients and containing not more than 100 milligrams of the drug per dosage unit, with a concentration of not more than 2.5 per cent in undivided preparations.
3. Preparations of cocaine containing not more than 0.1 per cent of cocaine, calculated as cocaine base, and preparations of opium or morphine containing not more than 0.2 per cent of morphine, calculated as anhydrous morphine base, and compounded with one or more other ingredients, whether active or inert, and in such a way that the drug cannot be recovered by readily applicable means or in a yield which would constitute a risk to public health.
4. Preparations of difenoxin containing, per dosage unit, not more than 0.5 milligram of difenoxin, calculated as base, and a quantity of atropine sulphate equivalent to at least 5 per cent of the dose of difenoxin.
5. Preparations of diphenoxylate containing, per dosage unit, not more than 2.5 milligrams of diphenoxylate, calculated as base, and a quantity of atropine sulphate equivalent to at least 1 per cent of the diphenoxylate.
6. *Pulvis ipecacuanhae et opii compositus*: 10 per cent opium in powder; 10 per cent ipecacuanha root, in powder; 80 per cent of any other inert powdered ingredient containing no controlled drug.
7. Preparations of propiram containing not more than 100 milligrams of propiram per dosage unit and compounded with at least the same amount of methylcellulose.
8. Preparations for oral use containing not more than 135 milligrams of salts of dextropropoxyphene base per dosage unit, or with a concentration of not more than 2.5 per cent in undivided preparations, provided that such preparations contain no substance controlled under the 1971 Convention on Psychotropic Substances.
9. Preparations conforming to any of the formulations listed in this table and mixtures of the same preparations with any ingredient that is not a controlled drug.

#### TABLE IV

Allobarbital - 5,5- diallylbarbituric acid.

Alprazolam - 8- chloro- 1 - methyl- 6- phenyl- 4 *H*- s- triazol[4,3- a] [1,4]benzodiazepine.

Amfepramone - 2-(diethylamino)propiophenone.

Barbital - 5,5- diethylbarbituric acid.

Benzphetamine - *N*- benzyl- *N*,*i* - dimethylphenethylamine,

Bromazepam - 7 - bromo- 1,3 - dihydro- 5 - (2 - pyridyl) - 2 *H*- 1,4 - benzodiazepin - 2 -one.

Butobarbital - 5 - butyl- 5 - ethylbarbituric acid.

Camazepam - 7 - chloro- 1,3 - dihydro- 3- hydroxy- 1 - methyl- 5 - phenyl- 2 *H*- 1,4- benzodiazepin-2- one dimethylcarbamate (ester).

Chlordesmethyl diazepam - 7- chloro- 5 - (2- chlorophenyl) - 1,3 - dihydro- 2 *H*- 1,4- benzodiazepin- 2- one.

Chlordiazepoxide - 7-chloro-2-(methylamino)-5-phenyl-3 *H*-1,4-benzodiazepin-4-oxide.

Clobazam - 7- chloro- 1 - methyl- 5- phenyl- 1 *H*- 1,5- benzodiazepine- 2,4(3 *H*,5 *H*) - dione.

Clobenzorex - (+)- *N*-( *o*-chlorobenzyl)- *i*-methylphenethylamine.

Clonazepam - 5 - ( *o*- chlorophenyl)- 1,3 - dihydro- 7- nitro- 2 *H*- 1,4- benzodiazepin- 2- one.

Clorazepate - 7- chloro- 2,3 - dihydro- 2 - oxo- 5- phenyl- 1 *H*- 1,4- benzodiazepine - 3- carboxylic acid.

Clotiazepam - 5 - ( *o*- chlorophenyl) - 7- ethyl- 1,3 - dihydro- 1 - methyl- 2 *H*- thieno- [2,3 - *e*] -1,4 - diazepin - 2 - one.

Cloxazolam - 10 - chloro-11b-( *o*-chlorophenyl)-2,3,7,11b-tetrahydrooxazolo-[3,2- *d*][1,4]- benzodiazepin-6(5 *H*)-one.

Delorazepam - 7- chloro- 5 - (2-chlorophenyl)- 1,3- dihydro- 2 *H*- 1,4- benzodiazepin- 2- one.

Diazepam - 7 - chloro- 1,3 - dihydro- 1 - methyl- 5 - phenyl- 2 *H*- 1,4- benzodiazepin- 2 - one.

Estazolam - 8-chloro-6-phenyl-4 *H*- *s*-triazolo[4,3-*a*][1,4]benzodiazepine.

Ethchlorvynol - ethyl- 2- chlorovinylethynylcarbinol.

Ethinamate - 1-ethynylcyclohexanol carbamate.

Ethylamphetamine - *dl*- *N*-ethyl- *i*-methylphenylethylamine.

Ethyl loflazepate - ethyl7- chloro- 5- ( *o*- fluorophenyl)- 2,3- dihydro- 2- oxo- 1 *H*- 1,4- benzodiazepine -3- carboxylate.

Fencanfamin - (1) - *N*- ethyl- 3- phenylbicyclo(2,2,1)- heptan- 2- amine.

Fenproporex - (1)-3-[(*i*-methylphenethyl)amino]propionitrile.

Fludiazepam - 7 - chloro- 5 - ( *o*- fluorophenyl)- 1,3 - dihydro- 1 - methyl- 2 *H*- 1,4- benzodiazepin- 2- one.

Flunitrazepam - 5 - ( *o*- fluorophenyl)- 1,3- dihydro- 1 - methyl- 7- nitro- 2 *H*- 1,4- benzodiazepin- 2- one.

Flurazepam - 7- chloro- 1 - [2- (diethylamino)ethyl] - 5- ( *o*- fluorophenyl)- 1,3- dihydro- 2*H*-1,4 - benzodiazepin - 2 - one.

Halazepam - 7 - chloro- 1,3- dihydro- 5 - phenyl- 1 - (2,2,2- trifluoroethyl)- 2 *H*- 1,4- benzodiazepin- 2- one.

Haloxazolam - 10- bromo- 11b- ( *o*- fluorophenyl)- 2,3,7,11b - tetrahydrooxazolo- [3,2- *d*] [1,4]- benzodiazepin-6(5 *H*)-one.

Ketazolam - 11 - chloro- 8,12b- dihydro- 2,8- dimethyl- 12b- phenyl- 4 *H*- [1,3]- oxazino- 3,2- *d*] [1,4]bezodiazepine-4,7(6 *H*) - dione.

Loprazolam - 6- ( *o*- chlorophenyl)- 2,4- dihydro- 2- [(4- methyl- 1 - piperazinyl)- methylene] - 8- nitro-1 *H*-imidazo[1,2- *a*][1,4]benzodiazepin- 1-one.

Lorazepam - 7 - chloro - 5 - ( *o*- chlorophen yl)- 1,3 - dihydro- 3 - hydroxy- 2 *H*- 1,4- benzodiazepin - 2- one.

Chlordesmethyl diazepam - 7- chloro- 5 - (2- chlorophen yl)- 1,3- dihydro- 2 *H*- 1,4- benzodiazepin- 2-one.

Chlordiazepoxide - 7 - chloro- 2- (methylamino) - 5 - phenyl- 3 *H*- 1,4- benzodiazepin - 4 - oxide.

Clobazam - 7- chloro- 1- methyl-5- phenyl- 1 *H*- 1,5- benzodiazepine- 2,4(3 *H*,5 *H*) - dione.

Clobenzorex - (+)- *N*-( *o*-chlorobenzyl)-*i*-methylphenethylamine.

Clonazepam - 5 - ( *o*- chlorophenyl)- 1,3- dihydro- 7- nitro- 2 *H*- 1,4- benzodiazepin- 2- one.

Clorazepate - 7- chloro- 2,3 - dihydro-2-oxo- 5-phenyl-1 *H*-1,4-benzodiazepine-3-carboxylic acid.

Clotiazepam - 5 - ( *o*- chlorophenyl) - 7- ethyl- 1,3 - dihydro- 1 - methyl- 2 *H*- thieno- [2,3 - *e*] -1,4- diazepin- 2- one.

Cloxazolam - 10-chloro-11b-(*o*-chlorophenyl)-2,3,7,11b-tetrahydrooxazolo-[3,2-*d*] [1,4]-benzodiazepin-6(5*H*)-one.

Delorazepam - 7-chloro-5-(2-chlorophenyl)-1,3-dihydro-2*H*-1,4-benzodiazepin-2-one.

Diazepam - 7-chloro-1,3-dihydro-1-methyl-5-phenyl-2*H*-1,4-benzodiazepin-2-one.

Estazolam - 8-chloro-6-phenyl-4*H*-s-triazolo[4,3-*a*][1,4]benzodiazepine.

Ethchlorvynol - ethyl-2-chlorovinylethynylcarbinol.

Ethinamate - 1-ethynylcyclohexanol carbamate.

Ethylamphetamine - *dl*-*N*-ethyl-1-methylphenylethylamine.

Ethyl loflazepate - ethyl-7-chloro-5-(*o*-fluorophenyl)-2,3-dihydro-2-oxo-1*H*-1,4-benzodiazepine-3-carboxylate.

Fencanfamin - (1)-*N*-ethyl-3-phenylbicyclo(2,2,1)-heptan-2-amine.

Fenproporex - (1)-3-[(1-methylphenethyl)amino]propionitrile.

Fludiazepam - 7-chloro-5-(*o*-fluorophenyl)-1,3-dihydro-1-methyl-2*H*-1,4-benzodiazepin-2-one.

Flunitrazepam - 5-(*o*-fluorophenyl)-1,3-dihydro-1-methyl-7-nitro-2*H*-1,4-benzodiazepin-2-one.

Flurazepam - 7-chloro-1-[2-(diethylamino)ethyl]-5-(*o*-fluorophenyl)-1,3-dihydro-2*H*-1,4-benzodiazepin-2-one.

Halazepam - 7-chloro-1,3-dihydro-5-phenyl-1-(2,2,2-trifluoroethyl)-2*H*-1,4-benzodiazepin-2-one.

Haloxazolam - 10-bromo-11b-(*o*-fluorophenyl)-2,3,7,11b-tetrahydrooxazolo-[3,2-*d*] [1,4]-benzodiazepin-6(5*H*)-one.

Ketazolam - 11-chloro-8,12b-dihydro-2,8-dimethyl-12b-phenyl-4*H*-[1,3]-oxazino-3,2-*d*] [1,4]bezodiazepine-4,7(6*H*)-dione.

Loprazolam - 6-(*o*-chlorophenyl)-2,4-dihydro-2-[(4-methyl-1-piperazinyl)-methylene]-8-nitro-1*H*-imidazo[1,2-*a*][1,4]benzodiazepin-1-one.

Lorazepam - 7-chloro-5-(*o*-chlorophenyl)-1,3-dihydro-3-hydroxy-2*H*-1,4-benzodiazepin-2-one.

Lormetazepam - 7-chloro-5-(*o*-chlorophenyl)-1,3-dihydro-3-hydroxy-1-methyl-2*H*-1,4-benzodiazepin-2-one.

Mazindol - 5-(*p*-chlorophenyl)-2,5-dihydro-3*H*-imidazo[2,1-*i*]isoindol-5-ol.

Medazepam - 7-chloro-2,3-dihydro-1-methyl-5-phenyl-1*H*-1,4-benzodiazepine.

Mefenorex - (1)-*N*-(3-chloropropyl)-1-methylphenethylamine.

Meprobamate - 2-methyl-2-propyl-1,3-propanediol dicarbamate.

Methylphenobarbital - 5-ethyl-1-methyl-5-phenylbarbituric acid.

Methypylon - 3,3-diethyl-5-methyl-2,4-piperidine-dione.

Midazolam - 8-chloro-6-(*o*-fluorophenyl)-1-methyl-4*H*-imidazo[1,5-*i*][1,4]-benzodiazepine.

Nimetazepam - 1,3-dihydro-1-methyl-7-nitro-5-phenyl-2*H*-1,4-benzodiazepin-2-one.

Nitrazepam - 1,3-dihydro-7-nitro-5-phenyl-2*H*-1,4-benzodiazepin-2-one.

Nordazepam - 7-chloro-1,3-dihydro-5-phenyl-2*H*-1,4-benzodiazepin-2-one.

Oxazepam - 7-chloro-1,3-dihydro-3-hydroxy-5-phenyl-2*H*-1,4-benzodiazepin-2-one.

Oxazolam - 10-chloro-2,3,7,11b-tetrahydro-2-methyl-11b-phenyloxazolo[3,2-*d*] [1,4]benzodiazepin-6(5*H*)-one.

Pemoline - 2-amino-5-phenyl-2-oxazolin-4-one (= 2-imino-5-phenyl-4-oxazolidinone).

Phenobarbital - 5-ethyl-5-phenylbarbituric acid.

Pinazepam - 7-chloro-1,3-dihydro-5-phenyl-1-(2-propynyl)-2*H*-1,4-benzodiazepin-2-one.

Pipradrol - 1,1-diphenyl-1-(2-piperidyl)-methanol.

Prazepam - 7-chloro-1-(cyclopropylmethyl)-1,3-dihydro-5-phenyl-2*H*-1,4-benzodiazepin-2-one.

Propylhexedrine - (1)-1-cyclohexyl-2-methylaminopropane.

Pyrovalerone - (1)-1-(4-methylphenyl)-2-(1-pyrrolidinyl)-1-pentanone.

Quazepam - 7-chloro-5-(2-fluorophenyl)-1,3-dihydro-1-(2,2,2-trifluoroethyl)-2*H*-1,4-benzodiazepine-2-thione.

Secbutabarbital - 5 - sec- butyl- 5 - ethylbarbituric acid.

SPA, Lefetamine - (-)- 1 - dimethylamino- 1,2- diphenylethane.

Temazepam - 7 - chloro- 1,3- dihydro- 3- hydroxy - 1 - methyl- 5- phenyl- 2 *H*- 1,4- benzodiazepin - 2-one.

Tetrazepam - 7 - chloro- 5 - (cyclohexen - 1 - yl)- 1,3 - dihydro- 1 - methyl- 2 *H*- 1,4- benzodiazepin- 2 - one.

Triazolam - 8-chloro-6-( o-chlorophenyl)-1-methyl-4 *H*- s-triazolo[4,3- i][1,4]-benzodiazepine.

Vinylbital - 5 - (1- methylbutyl)- 5- vinylbarbituric acid.

The salts of the substances listed in this table, whenever the existence of such salts is possible.

**TABLE V**

Ephedrine.

Ergometrine.

Ergotamine.

Isosafrole.

Lysergic acid.

3,4-methylenedioxyphenyl-2-propanone.

N- acetylanthranilic acid.

1 - phenyl- 2 - propanone.

Piperonal.

Pseudoephedrine.

Safrole.

The salts of the substances listed in this table, whenever the existence of such salts is possible.

**TABLE VI**

Acetic anhydride.

Acetone.

Anthranilic acid.

Ethyl ether.

Hydrochloric acid.

Methylethyl ketone.

Phenylacetic acid.

Piperidine.

Potassium permanganate.

Sulphuric acid.

Toluene.

The salts of the substances listed in this table, whenever the existence of such salts is possible.

Secretariat-General, Office of the Chairman of the Council of Ministers, 20 February 1993. -  
*Franga Martins*, Secretary-General.

\* Dextromethorphan ((+)- 3 - methoxy - *N*- methylmorphinan) and dextrorphan((+) - 3- hydroxy- *N*- methylmorphinan) are specifically excluded from this table.



**Appendix F**  
**LIST OF AGENCIES FROM WHICH LRB REQUESTED INFORMATION**

<b>Agency</b>	<b>Responded with some or all of requested data</b>	<b>Responded, but agency unable to provide data</b>	<b>Responded, but no follow up on data</b>	<b>Did not respond at all</b>
<b>State of Hawaii</b>				
Judiciary	X			
Department of the Attorney General, Criminal Justice Division	X			
Department of the Attorney General, Hawaii Criminal Justice Data Center	X			
Department of Budget and Finance, Office of the Public Defender	X			
Department of Health, Alcohol and Drug Abuse Division	X			
Department of Human Services	X			
Department of the Public Safety, Corrections Division	X			
Department of the Public Safety, Narcotics Enforcement Division	X			
	X			
<b>City &amp; County of Honolulu</b>	X			
Honolulu Police Department	X			
Department of the Prosecuting Attorney	X			X
Department of Community Services	X			X
	X			
<b>County of Hawaii</b>	X			
Hawaii (County) Police Department	X			
Office of the Prosecuting Attorney	X	X		
Department of Finance	X		X	
	X			
<b>County of Kauai</b>	X			
Kauai Police Department	X			
Department of the Prosecuting Attorney	X		X	
Department of Finance	X	X		
	X			
<b>County of Maui</b>	X			
Maui Police Department	X			
Department of the Prosecuting Attorney	X		X	

Agency	Responded with some or all of requested data	Responded, but agency unable to provide data	Responded, but no follow up on data	Did not respond at all
Department of Housing and Human Concerns	X			
	X			
<b>Federal</b>				
Drug Enforcement Administration				X
Hawaii High Intensity Drug Trafficking Area Investigative Support Center	X			

## Appendix G

### LIST OF ACRONYMS

ADAD	Alcohol and Drug Abuse Division of the State Department of Health
DEA	Drug Enforcement Administration
DHS	Department of Human Services
DSM-5	The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition
EMCDDA	European Monitoring Centre for Drugs and Drug Addiction
ESPAD	European School Survey Project on Alcohol and Other Drugs
HAR	Hawaii Administrative Rules
HCJDC	Hawaii Criminal Justice Data Center
HCPD	Hawaii (County) Police Department
HIDTA	Hawaii High Intensity Drug Trafficking Area
HOPE	Hawaii's Opportunity Probation with Enforcement
HPD	Honolulu Police Department
IDT	Instituto de Droga e da Toxicodependência (the Institute for Drugs and Drug Addiction)
KPD	Kauai Police Department
SATMP	Statewide Substance Abuse Treatment Monitoring Program
MPD	Maui Police Department
NSDUH	National Survey on Drug Use and Health
N-SSATS: 2014	National Survey of Substance Abuse Treatment Services: 2014
PSD	Hawaii Department of Public Safety
SAMHSA	United States Substance Abuse and Mental Health Services Administration
SICAD	Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências (General Directorate for Intervention on Addictive Behaviours and Dependencies)
TEDS	Treatment Episode Data Set
THC	Delta-9-tetrahydrocannabinol, the psychoactive (mind-altering) chemical

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# Hilo Listening Session

2022.07.23

Social Equity Group

08:28:03 Thank you for this thing. Yeah, I hear it watch.  
08:28:08 But it just depends on how many people show up we can't get along.  
08:28:16 I see. Thank you. Appreciate you guys, this system  
08:28:35 Alright,  
08:28:49 Consciously.  
08:28:51 ,  
08:29:00 We can go in that quarter. Yeah, if that's easier with the bug.  
08:29:04 Sure awesome. Thank you.  
08:29:12 Yeah,  
08:29:22 Cool, just  
08:29:39 On the agenda,  
08:29:53 We cannot answer. the issue of social equity, and the current and passenger  
08:30:05 This program in one. yet questions of the social equity and Action group is So we here, around 9, .  
08:30:21 How can you  
08:30:27 Well, it seems like they have a pretty clear definition of what the baby, when social equity is a very you had incursions on your people.  
08:30:40 They don't have licenses right now all people have sold out to the outside.  
08:30:50 Industry is entitled to social equity and If you're people that paid thousands and \* about  
08:31:02 You guys have a place to get the water. I believe there's a watercount by the bathroom. So in the middle.  
08:31:13 And then to the right,  
08:31:14 I'm not sure you can have social equity without Federal housing programs.  
08:31:21 Talking about this Morning You're not going to talk about people that are not have license. That's not That's not social security that you should have a license out here.  
08:31:45 Right now.  
08:31:54 You know. So it doesn't say I Miss criminal you know we social equity is not just about.  
08:32:01 Oh, everybody was affected there's yeah.  
08:32:11 Anyone who is like parent or like a like a family, you know, appearance.  
08:32:16 If kids Try to get jobs can't get held in school zones can't get certain jobs can't do This can't do that that directly.  
08:32:22 Affects. not only the partner, was one of the original colors of the license.  
08:32:35 Alright, No. another guy on my eddies guys  
08:32:56 You're you're from the polynomials originally, originally.  
08:33:01 Yeah. worked with Chris Carth over there, Chris Carl: Thank you.  
08:33:03 What was the holy dispensary of? we try to be the original Trade Association.  
08:33:08 That also works like patients and stuff for like back in 2,015, when everything first started.  
08:33:17 So we had a bunch of ancular businesses joint You're on the task force now,  
08:33:25 And you taught a class with Michelle i'm, not mistaken.  
08:33:30 Here, so you could define social equity for us no, that's one of the things we want you all in the past.  
08:33:42 Talk about some of the things, the social equity.  
08:33:58 Okay, So we got a move forward we're supposed to look for here.  
08:34:22 Program, everybody  
08:34:31 So anybody can participate out of the work. Caregiver Farm, you know, if you can.  
08:34:37 Anybody  
08:34:45 Long answer questions. But, uncle, are you adding those  
08:35:13 It is Saturday alright.  
08:35:25 I heard of my no car yeah I couldn't find a rental, because i'm gonna try and go to the caller one.  
08:35:35 I'm not sure if I want to do what I could get around.  
08:35:38 I I I convince them to let me do it Well, we'll just charge you an extra 100 bucks.  
08:35:48 We're gonna have to bus it. I got a a friend of mine,  
08:35:59 Yes, James.  
08:36:07 ,  
08:36:09 We had the point essentially lines right Now we just like research and write about Canada stuff So i'm here, just as an advocate for so in the past course, you're an advertisement

08:36:34 What? marginally successful? What was the HD.

08:36:41 That was up

08:36:50 Good website, just case that Oh, you did so it should forward to my subset. Now, which has all of the like back back stuff. But doesn't for people to create the cell phone anymore. Alright, Do you have any of the 4 previous recordings from the

08:37:06 meetings i'm not on there I know They're on the task force, or supposed to be on the task Force website.

08:37:12 I'm sorry I mean the previous 4 task forces I have notes on like. So back in the day I took like transcripts of the Malls.

08:37:20 All the transcripts are so on that's on the freebase awesome.

08:37:24 Who is the man for Hda. Now, no it's

08:37:37 You know who else? Chris Cart? The other one who was in the team

08:37:45 Are you guys contracted by anybody or just i'm not I think he's working with which is a Marijuana policy project.

08:37:52 So

08:38:28 I do reversely the original password How cute

08:39:04 8 40. Oh, make something. how's it going if we get too full.

08:39:12 We'll have to cycle people in announcement for now.

08:39:16 Yeah.

08:39:23 2 of us. Yeah, I think it's very important for whatever ,

08:39:51 Hello!

08:39:55 You can reiterate things for sure

08:40:02 Okay.

08:40:31 So did you guys need to release that report before you from Julian?

08:40:40 Oh, that was a part of how to release that

08:40:47 Kind of a information piece on what was collected from listening exceptions.

08:40:52 Before this password started, so that's so That's a free report, correct.

08:41:01 That's just like information from sessions or once yes, information about each stakeholder

08:41:12 So let's get started as we can means like call to order.

08:41:17 We can just yeah, Exactly. So thanks everyone for coming out and making time.

08:41:31 This is going to be our first we're gonna have one today, here in New one, and call not today, and then we're gonna try to get to every island.

08:41:43 Every time new set will not eat well today's purpose is to focus on the social equity.

08:41:55 Permitted interaction room. social equity has been carved out in this.

08:42:02 Still use task force to have a discussion. and there's 4 of us members on that on that permitted interaction group.

08:42:08 That's myself scare it senator julie sand ventura

08:42:18 So 4 of us and we've been diving into this topic specifically asking for requests around information around exponent of records, making sure that was just jail for cannabis when something is

08:42:34 legalized And these listening sessions are to kind of get ideas from the public of how, individuals want to be engaged in an adult use market.

08:42:46 Specifically the social activity applicants, and this permitted interaction is, look at social equity. act as native wines, and those who have a conviction for canvas and white for a little bit of background.

08:43:03 On what we're not gonna be tasked to looking into is we're not tasked to look into the debate around.

08:43:12 Sure what you legalize this this task force is working under the assumption that there's going to be a program.

08:43:19 And if the program is this is what's recommendations are going to be, you say a program, you need a recreational program.

08:43:29 And then we're also not looking at the current past medical campus program in toy

08:43:41 So we we all we understand there's no social equity currently in our program.

08:43:45 So you know providing comments on on how unfortunate that is!

08:43:48 Well I understood. what we're really looking for today is things like which is part B.

08:43:57 So how is your community would negatively impact impacted by the world drugs on the previous campus?

08:44:04 How can future cannabis programs involve you right?

08:44:07 The rounds of these impacts. How do you envision your perspective participation in the adult use system?

08:44:14 And give it each island, and even a lot is very different.

08:44:18 What geographical considerations should at legal canvas industry Take again.

08:44:26 The The focus here is tried to to frame this in the aspect of social equity.

08:44:30 So again, individuals who have been impacted by the world drugs here in significance

08:44:48 So we are so logistically We are going to be less formal than the task force itself, depending on how many people show up when they have to funnel in and out at the moment.

08:44:53 We don't have time limits on. speaking it will be a much more informal conversation. for now, if we get more people, then we may have to change those rules as we go.

08:45:06 Why

08:45:07 Very informal, though but we should be able to bring up any topic we want, Sure, sure as long as you can give a reason why it's related to social equity.

08:45:21 It seems the definition

08:45:30 So very simply.

08:45:38 Fairies and justice for all people in social policy. Social activity takes into account systemic inequalities to ensure everyone in access to the same opportunities and outcomes, epidemic of all kinds, acknowledges

08:45:55 that in companies exist and works to eliminate them that does not just mean expense, and it's not a new client.

08:46:02 That means me, has every capability to be running this country right now, but was taken away from me through policies that were written by people like to capture the market and to keep other people. out.

08:46:21 You cannot discuss social equity without including the matter in which Andrew, this person and that person, and everybody that would like to send their children to college on such money do not have that equity.

08:46:38 I mean. So let's define social what are we talking about here.

08:46:42 You guys wanna frame it, and it seems like you guys wanna frame it in a fashion that you can contain it define it. and if it's not applicable to your desktop of social equity, we're not going to

08:46:57 discuss it. So we need to discuss what is so factory

08:47:11 Is what they're framing at right now and not like is there a reason that's

08:47:25 Why they're only considering people who have been impressed it, I mean, I understand, part of why.

08:47:34 But is there Is there a reason why I guess is what I'm asking consideration for what, in regards to state you said that it had to be you to find or conduct it in is there a reason that you're only

08:47:50 focusing on convictions is It applicable of like Let's go with this.

08:47:59 We have questions here to instigate a discussion. Yes, y'all Tell us what you want us to hear in your opinion?

08:48:14 We can't affect them. but if you have reasons why we should not include them as like.

08:48:16 Why the task force should not like should recommend that they, those sorts of fraction should not be included as a like an elimination of things. Right?

08:48:23 Right? my biggest question is like, Why are you not? Why are you guys not currently including the current medical program?

08:48:31 A big deal right? because we are there right Now and we have social inequity all over the place.

08:48:39 Why are we not addressing that while we're addressing this as well?

08:48:41 That would be a my question for a couple of reasons. First, we do have an entire permitted interaction group that is supposed to be examining how to update the the medical program to fit into any particular adult use program second fully recognizing

08:48:56 that there are things that are not working about the current medical use.

08:49:00 Program Our goal is to figure out what we can do in the future to alleviate those concerns rather than well, and what those those concerns actually are. that said the extent that you have specific reasons why you have been you know

08:49:12 negatively impacted by those current regulations. Give us, what you think are good solutions to the attacks, and that would be a different conversation and different.

08:49:21 Especially within the context of like a dual system.

08:49:27 What kinds of solutions can you imagine? 21?

08:49:39 No recreational. It sounds like they're trying to bring it all together at once.

08:49:42 Is that the still theory depends on who you're who you're asking about right.

08:49:49 So the task force is just asked to investigate the potential for this kind of program.

08:49:54 Different legislators have their opinions about that.

08:49:57 Whoever wins the governorship is going to have their own opinions about that. we're supposed to make recommendations for what we think would be the beginnings of that I would recommend you definitely because of other States they have lost how many

08:50:15 fans. they're allowed to grow and they go to the Middle East program.



08:50:17 I think that really feeds into the different regions that we have here, because it's like you're living opposed to con up.

08:50:25 You're gonna lose more plans due to the rain if you're gonna if you're going But we should definitely make sure that we are able to take that and you considerationally looking at a plan count all being with all wreck

08:50:35 as well, I think that's really important that's the number One thing I have seen that has happened in other States do that, and it really affects so.

08:50:45 What do you affect the rest that affects things of that nature?

08:50:48 It effects also the patient's virtual use like if you take away 10 plans for patient that's going to harm them.

08:50:55 Great no no rights that patients currently have would be removed if we went forward with recreation.

08:51:05 That that has happened in other States and that's not very to the medical patients who have, you know, So we have it for the record. one of those rights.

08:51:15 Are you like particularly interested in

08:51:29 We're doing the legislation consistently and It's written that patients are course, to go to the black market to go to these devious areas to get our cannabis Yeah, that is what we've been doing all

08:51:44 along in the State has allowed us to do when somebody says they want to legalize clones and make a legal market for Clones.

08:51:53 Does that then, make everything that we, as medical patients, are doing illegal?

08:51:57 That is what we do not want to happen presently. There is a lot that is not in the definition of Canada in Hawaii, and we wanna make sure that when teams get added to the definition of canvas it is not just that

08:52:10 it dispensaries and just the organized people that get to benefit from us.

08:52:15 We as patients may also. And so that's one of the things especially for like numbers, 2 and 3 that we really want to hear about is under some sort of adult program.

08:52:24 How would you structure a program like that to allow you to participate in it?

08:52:27 Further on the method side or the adult you side holy What's our information, or it's a hard You can bread it like, Why are we out here like the rest of the country? is just you're

08:52:39 talking about this I I can tell you why and I you know I I like to realist back to the beginning here.

08:52:49 The format of the meeting we have a dual use task force member in the building that's not present.

08:52:53 So Barrett should be in this meeting sorry That's.

08:52:58 Why, you both have worked. You both have received money from dispensaries for your roles in the industry.

08:53:19 By Big Island grown. And so the 2 of you would like to hear from us about social equity.

08:53:26 When, in fact, you do can't do it yourselves.

08:53:32 And yeah, you know, we hold this to be very important to us.

08:53:35 So when you come in here and you don't represent yourselves, or make introductions at the beginning of the meeting, and declare any conflicts of interest you disgrace this building.

08:53:48 This is Helo. this is it awful! And I know a lot goes on for a while, but we hold people to their words here, and both of you seriously need to introduce yourselves.

08:54:03 And start this meeting properly. Alright, Hi! my name is Karen, in 2,015 when the original century goes.

08:54:09 Excuse me so that's still on nowhere here you are one of the worst when it comes. I've written all legislation.

08:54:17 Your room. no intimidation for you guys whatsoever well, that's seriously .

08:54:24 Possible, because this is, I just wanna say I appreciate you guys coming here.

08:54:30 I appreciate every one of you guys just so much, and I will say more because I love you guys.

08:54:37 You guys are my family, but I do appreciate you guys taking the time to come here.

08:54:41 Here is now, because that is important. it's all be going on and that makes itself.

08:54:45 I've not been able to attend any of the stuff over there. But I'm submitted video test phone and testimony.

08:54:52 Do you appreciate you guys being here? I know that the tension from our side that you feel is is because we have.

08:55:00 The whole thing is social equity. We we have been a press for so long.

08:55:08 Whether it's before medical program or after the medical program or canvas consumers have been shown by the government churches school, you know.

08:55:16 I mean it's just there's always been a stigma test to this plant that I feel every person that's Dora was kind of out right you have right to every single client on this planet that's used as your resource

08:55:29 So you know the the the the frustration you hear from us they're from a deeply rooted systemic problem. And I know you guys are for here to at least hopefully help pick some of those problems.

08:55:43 I just don't want you to walk away from here. they don't like we're a bunch of angry people.

08:55:49 Well, we are very frustrated, and we are that up because this has been going on, for I've been going to things like this for 20 years.

08:55:56 Maybe not to legalization, but as a proponent of Canada's slower form.

08:56:04 And you know, 20 years later I still I can still saying the same thing, and they're still not seeing that so the the frustration do you feel from us?

08:56:12 I just wanna clarify they're deeply rooted and it's just because we have them held back because of this plant helps us helps many other people.

08:56:23 It isn't important. this is very important what you guys don't slap.

08:56:27 I just hope that you guys realize how important what your job is, and I know you only make America.

08:56:34 But please, not just some deal on all the other The voice is angry.

08:56:42 Just and please retain all we're saying because it is from our hearts. We do care about this deeply care about it, and it is important to us to that's all I want to say I mean i've got other things but I I

08:56:58 just wanted the tensions we're getting high I just wanna the tensions are gonna stay a little high.

08:57:04 I I apologize.

08:57:10 So brandy? Are you still writing legislation for this country?

08:57:14 Are you actively writing legislation for the dispensary right now?

08:57:16 No, not ready any less Have you written legislation for the next upcoming session?

08:57:21 Do you have legislation, you haven't no not for the next session.

08:57:27 You are still employed as my writing legislation for the dispensers of that is your job.

08:57:34 My job is not to write the legislation. My job is to organize those centuries strategic planning come up with ideas for legislation. But you have written a lot of legislation in last 12 months So who who pays

08:57:47 you exactly to do that the financial discovery, Industry Association pays you Do you have any employees?

08:57:57 So you pay yourself great. We have 9.

08:58:06 9 members of our association are our our 9 members of our association, which is how many of their legislation which is packaging companies which is insurance companies which is marketing company.

08:58:20 Are there any other conflicts of interest we need to pull out of you, Garrett?

08:58:26 Yes, sir, do you have any conflicts of interest that was filmed in your language?

08:58:42 You may not have written it completely, but all that hair and scare at the beginning of it.

08:58:45 Your work, I know organization that we're called the let's say ,

08:59:17 I I understand why people have this tension, and I really appreciate you kind of calling it out and saying there are frustrations in the space.

08:59:21 And you know we are here because we want to hear your best voices right in the end.

08:59:25 We didn't, you know. technically. for you on our own. but our State didn't give us any money to the year. We fall out here on our own money to come listen to you all and spend our time here and it was our idea to

08:59:37 do every island until reach out to the community to have this session, to have all these sessions; otherwise this would have been all on the wall, and would have been only on zoom, and there may have not been opportunities to and all

08:59:51 of this is going to go into record so we can have if in record that lawmakers, when they're crafting this legislation, they're the ones that are going to be writing utilization, and you know a

09:00:01 year or 2 or 3. All of this is going to be recorded, and we can go back to and say can heal on the on July 20 third.

09:00:11 We had 9 10 people in the room discussing social equity.

09:00:15 If you know X or representative, y ignore social equity if we have evidence of it, you are, you know we can go to your community and call you out, and that's why we're here, because we need to make the strongest

09:00:27 recommendations we can to make an industry and a legalization effort for Hawaii.

09:00:32 And what is people since then? maybe don't talk about the utilization as a foregone conclusion I thought we were here to discuss how it might affect the medical program that that's one of the aspects of case the way. that

09:00:50 you just set it within 2 or 3 years when we have legalization. Correct?

09:00:51 Okay, So it's it's this task force isn't so timing on legalization when the timing things of that nature.

09:01:00 But this task force has been given the task of looking at a program or recommending what that program would look like.

09:01:18 Legalization, because harm's patients in every other State. it's been brought to whether by a policy project or anyone else that's getting paid by dispensaries to come and legalize

09:01:25 it's harmed patients in every instance it's not something we really have to articulate a 1 million different ways.

09:01:31 We can see the harm that's already been calls

09:01:40 Obviously the biggest issue that we're all having here with legalization social equity, and one of the biggest reasons that people can't get a license, even if they haven't committed a crime is money.

09:01:51 Money right? everyone's upset where the money is coming from who is putting the money into the yeah of course she's putting money into hiccup?

09:01:58 Who's putting money into that that plays under social equity because none of us. I don't know I should say most of us speak for myself in this room.

09:02:07 I I would never be able to get a sp 3 license even if I wanted to.

09:02:10 I don't have that money I can't go get that low and I can't.

09:02:13 I Can't, and that's an issue with like not attacking you, Randy, at all. hiccup is paid for by like you said packaging this sensory kind of thing.

09:02:26 That is being money that is big money that can't have an influence on what you guys decide in.

09:02:32 Not only like, but the task force I think that's the biggest issue that we really need to talk about. is That is what is affecting the community. it's it's a it's not much else like I think that you

09:02:44 need to realize where, like the anger is coming I think it's a really good point. So so one of the good takeaways we can have here is recommendations.

09:02:54 We can have on record, saying, there's a low barrier to entry for license So it's not a a 1 million dollar requirement to get a license.

09:03:03 Right. So you guys can on record today recommend that there'd be a very low bar for

09:03:38 Preserving the medical program. Increasing plan counts, making e easier for people to cultivate at home.

09:03:41 I mean. you have no idea how how hard it is to spend 4 months taking plans from c to smokeable flour to usable flower.

09:03:55 Maybe you do we need more plans it's it's It's incredible how Hawaii in every aspect, is 15 years behind, and there are still entrenched in the same mindset of profit greed money over everything

09:04:15 else, even over the people of Hawaii Alright.

09:04:19 And if the question continue down that road if you guys don't reshape, your definition of social equity. then what I wanna definite, what we want to do is listen right.

09:04:37 So you have mentioned that there are a lot of arms and concerns, and you want to make sure that the people use program includes medical.

09:04:45 And if if and adult use of some sort, so be real specific with what you think is wrong right now, what has happened negatively in the past, and then be real specific, with what you would want to see that includes you in whatever the future

09:04:57 regulation starts that's what we want to keep can I turn these questions background on you guys, Would you guys go through these one by one, and actually answer these individually for us?

09:05:09 We could try, I mean because we also know what you guys have learned over the years upset a lot of these meetings a long time, or if it was even like we're gonna talk ourselves.

09:05:17 Into i'm talking myself right out of the state you know what I mean.

09:05:20 So I wanna know you guys, is answers on these questions.

09:05:23 I can just ask a question real quick for you involved in that.

09:05:26 So do we agree that there is a conflict of interest in this position.

09:05:32 Value recommendations as a works. it's related to dispensers.

09:05:37 I don't understand I mean if you if you look at how any other State would to do it. .

09:05:43 There are a stakeholder groups, right look at any other task force that are out there.

09:05:48 I've sat on a multiple task force for the homelessness issues and you have, individuals representing everything right?

09:05:55 So, for example, we had homelessness, task force. looking at involuntarily. taking people off the street, you bring them into hospitals.

09:06:00 You have the Ceos of the hospitals there to give information about how hospitals work and give input right. So you have a various amount of stakeholders and I'm representing the industry seat.

09:06:10 So, the industry being the current licenses that are set up for the program department health overseas. So if it wasn't going to be, it would be it'd be another license, and and because I have a few

09:06:23 licenses under each icia, and have the industry knowledge. From that standpoint they have chosen me to have that.

09:06:30 So is this Is the stakeholder big enough to collect this kind of information, and should all stay towards be at all

meetings.

09:06:37 This is kind of confusing. The The unfortunate thing is that the administrator of the of this task force?

09:06:43 They they set to how many seats are on the task force, and they choose right.

09:06:47 So they chose their own, and and they asked us and we said yes it wasn't anything that we had

09:07:10 You might ask those questions, Right? One of the things One of the things that I think is really important is substantive or due process, substantive, due processed meetings. When people are going about their the government cannot step in and say

09:07:32 you can no longer do that, they can't do it for no reason. there has to be an overriding health or or public concern for that.

09:07:40 Okay, So first, right now, i'm buying my clothes from Jason, he he's lying on from him.

09:07:48 Do you want to be able to continue doing what the State is allowing us to do?

09:07:53 Now, whether it is a permissive or whether it is legal.

09:07:59 Right now we have permissive processes going on allowed by the State for us to be able to distribute cannabis amongst us as patients, and we wanna make sure that just because illegal don't use market comes along that it does

09:08:17 not now become illegal for us to do what we have been doing.

09:08:23 That is substantive due process, and nobody wants to go after the fact.

09:08:28 In the end have to be filing you know lawsuits and things like that.

09:08:33 We appreciate That's what you're here for that makes sense.

09:08:39 Thank you for that. So can you write that down, please?

09:08:41 Subscribe to literally be recorded thank you and it's got a transcript, so that we can attach it to our report.

09:08:47 Did you guys define legalization? So much is made out of patients not being able to test, not being able to test, but it's too expensive.

09:09:16 Being wrongly and passing that I think that having such high regulations.

09:09:22 But it's great to impact the home market that We need to find a way to make it to that is legal to sell in the home market and that you will not be in trouble for it, because regardless of that we go legal or not i'm Still, gonna be

09:09:36 getting my cannabis from my rover, who grows my streams, that I needed yes, care.

09:09:50 And I think that bringing that regulation down would really help a lot of aspects, the dispensaries, or whatever is going to consuming as soon as we go.

09:10:03 Adult rest. they were the assumption that we go with all rep right There's going to be a people buying the licenses.

09:10:09 Besides, there's going to be not this big island going on, and why he goes something around.

09:10:14 Whoever else is getting for that country, we need to make it so that those dispensaries are able to purchase from our whole market.

09:10:21 Some of our home market growers are the best growers that ever see in the entire world, and they will not be able to give their organic homegrown team candidates to dispensary and sell it to me if it doesn't

09:10:32 need this like vigorous regulations I think that's really important to look at, because that does boost the economy that does use the community right, being able to purchase the medicine.

09:10:49 I I think it would do a great sort of to our community if we allow them to have it off like I in Michigan, when we were able to grow and sell to the dispensaries that was awesome that really like you and people

09:11:03 were tight boot under tables. people who are normally not eating like selling their couch for food like we're able to provide for their families. I think that's Do we need to implement here.

09:11:15 And that would just be considered So if you look at like me, you would get my voice like that.

09:11:22 But I think, yeah, for sure, that makes sense. Yeah, I just want to circle back like you guys is full of experience. And I mean, as we've had thousands of testimony.

09:11:38 Yeah, last thing. And you guys are gonna answer these questions for me.

09:11:40 We set around in these names and talked about this stuff forever.

09:11:44 Like you guys are the ones in the position. if we know better than you'll Then one of us should be on one of your positions like you guys tell us why you're why you know better than us Yes, you would be able to tell us like answer these questions

09:11:56 for us we can't be in that position that's a huge problem, right?

09:12:03 There are lots of people with expert not be decided to You guys have so much MoreI think that's part of the frustration.

09:12:16 I mean. I know that some are some of your joys that are most full meeting.

09:12:20 She was at the So people event. this is Grant, the first like canvas, human meetings back in 2,016.

09:12:29 I know the people from the Government were there then talking about the exact same things that she was bringing up. and the first question on this list is how we don't already know the answers to that question we're just back to those little terms

09:12:48 sending like that's The first we've been listening for the last 5 years.

09:12:56 Well wasn't the original law like before when they did the first task force wasn't it geared towards micro licensing micro peers, and then it was better to replace

09:13:40 ,

09:13:55 So again, this is the social equity interaction group listening session.

09:13:58 So we're we're both some social equity and we have some questions in our handout.

09:14:03 These aren't limiting questions i'm saying you can't talk about anything, or you can talk about anything but what we're really trying to do is parse out specific recommendations very specific.

09:14:12 Right. So, for example, like what we're saying here the ability to cell phones one another is is not going to go away.

09:14:21 That recommendation that's very specific we can take that put it you know

09:14:27 So some of these questions on here about how is your community?

09:14:31 You can make the impact. right? So for example, there's social equally individual, they have a personal story about something that's happened to them. And that's really important for us to know if this individual for example, you know got something wrong with custody issues

09:14:47 custody battle for children. Something about your How Has that impact in your How?

09:15:01 How's that impact

09:15:24 Yeah, So So even if what i'm saying is even though it's legal to smoke and have cannabis and have children.

09:15:37 I'm not like absolutely correct.

09:15:59 So so that those same things these are specific recommendations here. We can take that we're not going to be able to answer the question about what that looks like in the market. I think the rejection.

09:16:20 Maybe the the task force should look at is that, And I want to add that one of the other goals of listening sessions like this is that large numbers of the members on the task force especially the ones from the agencies and

09:16:23 some on the like, because they they're just working at agencies. they haven't been at the task force meeting they haven't been the legislative sessions in anything related to candidates.

09:16:30 Yet. So there's a large element of education of some of the members of the task force that have not been in all of the places that you all have been sharing for the last number of years. and so one of the one of the reasons

09:16:39 we're doing this is to also make sure that they have that kind of information that they have a currently that's a really good question, because when you're trying to come up with standards for a bill use cannabis task

09:16:50 force and you're training, the whole task force that's involved in And so we have department of taxation out to our medical farm on the wall right, And so a lot of education going on, and and a lot of those things but

09:17:05 I mean it's really difficult to have a group of people running a cannibal task force team decided by the Department of Health, who knows?

09:17:17 Already made her a lot of bad, a lot of bad problems going on, you know.

09:17:20 And so this is kind of a little bit worrisome that nowhere is this task force port going, and and how is it going to be?

09:17:27 You know, formed with people who are learning on the fly right you know what I mean.

09:17:32 It's like this is the this is not you need more people in this group, I mean the one thing I have noticed about those people is that they are very, very good at their what their regulation jobs themselves and They know a lot about

09:17:43 that piece, and so they can apply all of that knowledge to this kind of new industry.

09:17:48 If we can give them specific information for them to act on, and use their expertise in their field to apply.

09:17:55 And that's what we want to hear from you all what sorts of things.

09:17:58 Can they use their expertise in positions and their 8 agencies to change about what's happening now?

09:18:04 I would I would do that. I would second that I can vary that that surprise, and happily lose that the individuals on this task force that don't know Haven't.

09:18:16 They are so curious, and they are spending a lot of their state time and resources trying to figure it out.

09:18:20 And they're actually really enjoying this process they love to learn about it.

09:18:24 They'd love to be you know shopping and and you know excited about being a part of this process.

09:18:29 They're not just punching in punching out they're showing up, and they're doing work, and they're spending a lot of their own extra hours researching and diving into Unfortunately, the industry. people have they have the easiest access to

09:18:43 the industry, and you know, I think, that their intentions like in your suspect.

09:18:49 You know what they tell us. You know meetings appears to be a little bit different than what I experience with the you know.

09:19:04 In. Specifically, we had representatives meet with us on online, and before they did that they went to Big Island group and majority budgets of dispensaries.

09:19:16 And when the the information that they came back with their question was Well, why aren't you know, every day growers required to test their candidates, you know, and and it appears to be the industry people appear to there's no sales out there for it So there's no requirement

09:19:40 Why is the question being asked? you know and and it's planted?

09:19:42 It's like putting no need a bucket under your house right Are you gonna go after those people?

09:19:47 You know It's this time and having that understood is pretty important pretty much the discover how they can join the line We're we're not I mean this have never are not.

09:20:01 Now, and will never control growing of cannabis in Hawaii.

09:20:06 You can either do it with our help and our cooperation, or without whatever social equity means to you.

09:20:14 That's what it means to you but one of these to the rest of Hawaii is what is important, and if you guys don't listen, and you don't get it right? you'll just be what you are 15 years

09:20:26 down legislators. my contact in the industry people, it appears, you know, I think, that they're concerned with the rules they put into place to strangle the industry.

09:20:41 Now they're saying, Well, this industry isn't really making money you know there's no profit, So my concern is that that is the direction that they're going to take is how do we make this profit you know and getting government

09:20:54 involved with corporate, and that's a huge concern of mine is the industry is the usual ,

09:21:06 For the victims of green harvest, they should be the first one.

09:21:47 Yeah, I mean they got that So if we that green harvest cause the price of cannabis to rise above the price of meth causing everyone to see their drug of

09:22:12 preference methods that it means that would be really other regulations.

09:22:17 Well, I have the floor Cvd is unregulated by the Dea. so why is it regulated by the Department of Health?

09:22:27 The Cannabis industry here. so Why can't I drive today with my medicine to couple without fear of being arrested in the National Park from that Federal agent that's parked on the side of the road checking to see if

09:22:41 i'm speeding or not. Oh, i'll give you an entire list, if you like.

09:22:47 Some written testimony. but the problem here that a lot of people are having is that we're here and this is the fourth task force. right?

09:22:59 That's the problem. These things get here for those of us that have been doing it for a while.

09:23:06 Our multi-generational farmers are not happy with you guys.

09:23:10 Whatsoever. The rhetoric the discussion the ethics are completely inappropriate.

09:23:19 So. so it's not okay to take dispensary money Garrett.

09:23:22 I understand It's been years we did not have any censoring numbers.

09:23:27 When we were So the way you just been 3 alliance didn't, didn't actually have any .

09:23:31 3 numbers. Okay, I do remember that. I do remember that a lot of base numbers that was your goal.

09:23:38 I got the letter right? requesting money. Okay, So just before, so recommendation is to make sure Cvd is also allowed in the abilities program.

09:23:48 Well you can't do that in the context of social every i'm just asking like the specific part, so I make sure it's in you could ask the Department of health to reduce the We're told that Oh, we don't want

09:24:10 Walmart selling Cvd. But the truth of the matter is that the cannabis Industry in Hawaii wants to be the Walmart. not.

09:24:19 They want to prevent Cvd should be unregulated, models hemp crossover there.

09:24:26 So we need additional licenses. Right? 8 licenses is not enough.

09:24:32 You have no competition, and that's part of the root of this problem, Right?

09:24:37 No, not the root of Canada, and why the most recent developments from the dispensary industry.

09:24:44 If you're doing that, or you make your recommendations from certain State? or are you saying, Hey, there should be tier licenses? that should be sensory licenses?

09:24:56 Really good question. So right now my 3, 2, 9 license allows me to possess, to consume, to produce transport, to process, transfer, to distribute and to transport.

09:25:10 Now, which of those are you gonna try and take away which of those processing is?

09:25:19 So if I make medicine for my neighbor, and I drive it to their house down the road, Are you going to try and

take that right away from me?

09:25:26 If I don't pay for an additional license cause I already pay for my license in every other State that's legalized up to I use California world's.

09:25:37 Fifth largest economy, not something we should be. comparing ourselves to, however legalization.

09:25:42 There is overshadowed by 2 things right, the taxes and the regulations required for a distribution license for a retail license for a processing license, and for a production license, and if you have

09:25:55 all 4 of those you can get a fifth license right.

09:25:59 The golden license right so, they're paying taxes they've re criminalized everyone, and the second the second thing that I think that you should know if task force members don't already is that they're now

09:26:17 undoing all of that we don't have to look at them.

09:26:19 For an example of what to do. 5 years ago that happened, and it was wrong, and it was led by the dispensaries. It wasn't led by the small farmers.

09:26:33 In the first year we had 63,000 licenses.

09:26:35 Application licenses applied for within 2 years that number was down in the teams.

09:26:42 So recriminalize everyone. you can make a rest go up like they're doing on Hawaii right operation.

09:26:46 Green harvest tired backup on hawaii you can double your arrest rates, but it doesn't mean we're gonna go and buy from a decisionary so any attempts that you guys make to take market share

09:26:59 from us we're just gonna grow more anyone's over the license and that's a medical.

09:27:14 So that's a that's the medical program yeah England with a \* \* card that has a state license and is authorized to grow still possessed to consume. Can I follow up real quick on your your statement that one of the things that we can do is

09:27:21 for people impacted by green harvest give them preference for social equity, licenses of some sort.

09:27:28 What else can we do for those people through a program like this?

09:27:33 In addition to that suggestion I haven't suggested no taxes on buying Canada, or like some of the things that we can do to the little things that we can do to loans for home because a lot of these people have had their own seats by

09:28:00 the government when they were busted for grounds so if you can imagine I wouldn't work, you would go and work in your butt off to to home and have it stolen from you and some of these people have families kids and

09:28:14 whatnot and they're you know they had a hole in the place, and all of a sudden that's not under them is so.

09:28:20 Some of these people never, you know they go to jail some of them don't go to jail, but no matter the case.

09:28:26 They are taking way back and have to start from Scrap.

09:28:29 So even if it's financial assistance in the way of like low, affordable housing loans or these people have been impacted.

09:28:42 Big time financially and mentally by the whole world deals.

09:28:49 If you can imagine helicopters, people are telling down right of all these cars rolling up, I mean, even if you're doing nothing illegal that's a scary situation I have a statute that If you have a drug conviction on

09:29:08 your record. you can within a certain amount of distance not as far as I'm.

09:29:11 Not here, because I that would be a suggestion that I wouldn't. need I wasn't sure if that your suggestion will bring So I think it's a really good point so look at individuals who have had assets

09:29:23 seized from cannabis, The other issue, too, is is and something that i'm sure senators are aware of is civilized forature and I think that we've we've supported it

09:29:39 heavily the fast on the through policy form side and things like that, and it's got me to But I think this is really good recommendation for the

09:30:04 Just people. non migrated people, don't either drop themselves, or maybe they were providing for others illegally.

09:30:10 But still, like I said earlier it's. planned that every person is born on the right to at least that's how I feel in my heart. we all have a so I have to say that if you're gonna get to

09:30:24 you know the social actually greenhars and stuff like that.

09:30:28 Pretty much you need to exponentially Cannabis charges pre-imposed as a movement to 21 over recreational.

09:30:35 So. So anybody who has a family convict is not going to be thrown out of getting into your licensing and getting a harvesting line Yeah, work in a dispensary you know all that

09:30:49 stuff that's so infuriating to have people in jail right now, and we're sell cannabis in the sensories. I mean that that is something that all politicians you got very quickly. and go hey?

09:31:01 This is absolutely wrong in a moral world. So you can.

09:31:05 You can be charged. you can spend 10 years in court right your charges could be dismissed after 10 years, and

they may have never taken any of your property because like me. they don't want my car all right.

09:31:21 So it's real important to understand the asset. portal is not an indication of an adjustment. correct absolutely.

09:31:29 The charge is what is wrong, being charged with a crime and requiring someone to go to court for what you guys i'm sorry your funders making profits from is what social equity is about.

09:31:46 Right. So we don't want anyone charged with a crime. If someone else is doing legally because they have 10 million dollars.

09:31:55 Make sense. Okay, do. we just jump into the room.

09:31:58 I wanted to give opportunity for others to speak a little bit which one's a question for sure.

09:32:04 So just again reframe or anything for you all just to reframe it for everybody again.

09:32:12 We're here in the the social equity permit interaction group talking about how we can include individuals that were impacted disproportionately.

09:32:22 Go along drugs, how we can see that playing to an adult use market.

09:32:26 So we're asking questions. that for instance How would you like to participate in an adult use market in no way, shape or form.

09:32:33 And in what ways have your communities been negatively impacted by the law?

09:32:37 So I just recommend that you're gonna have you can enjoy these programs that need to expand the medical program for more than 13 conditions as not necessarily social equity based.

09:32:50 But if we're gonna give anyone 20 up or no 21 and over a lot of the smoke, we're allowed to consume canvas, we need to extend the medical program include medical conditions and make sure that those patients need to keep their 09:33:02 quality of medicine, their availability of medicine and their access. it needs to become more horrible, and that's all I have to say.

09:33:10 Thank you for that.

09:33:17 We're going to do viewing like It is not an official part of the task force, but we are happy to ,

09:33:57 So how do we now transition to let's I I I am a I am assuming the decriminalization or realization ?

09:34:10 End up horizontal i we have not defined what that means yet? Oh, no, of course so we're heading into this tunnel of darkness where people get hurt inside and and we we don't know what's on the

09:34:21 other side that's the reason for this Is there any legislation being written right now to extend Kerryo. and to extend the breast of caregivers.

09:34:41 Maine has 3 pages of caregivers regularly.

09:34:47 Who is not I just want to know is that being done right now?

09:35:09 And we do have They split the different islands, too, so that makes it even different.

09:35:15 But we have the ability to do is I mean i'd hate to see that.

09:35:19 Why is so far behind on this issue. I really just the benefit from that is, lots of other States didn't think so moment. We've got some things dry.

09:35:28 A lot of them have got a lot of things. We can apply some of the stuff that States have gotten wrong and right to the wise and circumvent. any of the problems that patience or just the communities have been affected.

09:35:43 By. but I just have a few minutes. I did put a few detailed nations for the Committee.

09:35:52 So personal form of protect the medical program. and in fact I would agree. it should be expanded upon not just protected, but at the very least, if we're gonna have Google use patients should not stop her because of all changes now that

09:36:06 anyone who just wants to enjoy Cannabis so first and foremost to take patients right.

09:36:13 I'd also recommend expanding patients rights. i'd also suggest the definition of social equity de change, because realistically, these laws have affected everyone.

09:36:24 People that don't and it doesn't take long if you just drop through some of the back roads and Lower Puna.

09:36:34 You'll see what the for the damage some of the damage is left, or from the ninth the nineties the heavy flying and all the eradication that went on here. right.

09:36:45 It's not you great. Yeah. but it's some parts of it might look like it.

09:36:50 But literally you know this place. I didn't live here then.

09:36:52 But I only grow shopping and so I had lots of feedback from customers to the years.

09:36:59 And you know the story you know Everybody's driving me these cars food on tables they go to the restaurant like they used to sell caddr.

09:37:21 Over in puna or keep their businesses going so just narrowing it down to native wine, which should first and foremost be on there. that's the first one does affect all the wrong drugs but also We Can't leave

09:37:44 out everybody in the community somehow. some way everyone has been affected, even if they never could



soon canvas in their life.

09:37:52 Especially when you're talking Laura Bona who I know. The other ones have their little hotspots that are, you know where they're most of the grown activity goes.

09:38:02 But if you look at huge impacts for the world drugs put money back into programs that help these areas would be great as far as like what to do with the tax money, I think it's definitely go mostly back to the communities.

09:38:20 That were most affected by the world drugs but yeah I don't wanna say that as a committee shouldn't get money, because you know, everyone was affected, and I do believe the the area's most impacted somehow should have been a

09:38:33 bit the most from whatever tax money comes. The other thing, I think if there is gonna be, you know, I I agree with these guys.

09:38:42 Legalization is scared also something I won't see seen it done wrong.

09:38:48 So affordable and obtainable license.

09:38:52 It has to be a affordable, because, like Maggie had mentioned the most

09:38:57 Farmers are not rich individuals barely get by so I don't know how we make it a formal portable and obtainable, not so much red tape to hurdles to jump over to Z.

09:39:08 Even just a pot, you know, shouldn't be a the 1 million dollar app that liquid assets in the bank just

09:39:31 Well, the legislature and the task force is operating with mentality like they've been watching.

09:39:33 I dreamed yesterday. Okay, and that's a good analogy what you could say and what you could do on the Tv 10 years ago is a lot different from what you you can do now.

09:39:44 And this we right here in 20 years, will be such a joke that what cannabis will turn into, and the availability of it, and what it will become.

09:39:59 Well, these meetings are important. We're not here doing this we're not here doing this oh, so as far as like that, you wanted.

09:40:18 Detailed suggestions. So I did write down some like tier license type situations.

09:40:29 And and I think. Yeah, we definitely right now, it's it's just tough to go outdoor with the current dispensary situation.

09:40:34 I know that's. Why, I need those has their greenhouse. As far as I understand the walls are you know you can't think of the walls, but I just wanna make sure that going forward with any sort of

09:40:46 little legislation for canvas that we don't leave out outdoor or greenhouse growers.

09:40:53 It's the best medicine in the world and Hawaii is known.

09:40:56 Any kind of canvas consumer. Who's ever smoked Hawaii grown canvas, central, especially as well, because, our latitude to the sun, the degree, the angle of the sun the amount of UV rates we

09:41:11 receive is, you know, almost unbelievable as far as canvas press.

09:41:14 So we have some of the best sundrome canvas.

09:41:17 California growers will say that 14 growers. Will say that and I'd really like to suggest that we don't fan outdoor, or you know.

09:41:34 In fact, we should make it easier to be that type of pro how many?

09:41:43 So have you guys seen them on a week that's been produced at a dispensary facility ,

09:42:00 Legalized, they have security requirements costing tens of thousands of dollars to set up and I don't I don't think that I think of security. It should be you know without the use of binoculars or something I think that's how

09:42:16 a lot of States have it. and in some States definitely make you have teams what's tall dancing with our wire camera.

09:42:22 You know all this stuff realistically I'll bring it back to its plan, and you know, having a grocery shop out here here like in California, People got yourself all the time.

09:42:37 They play some customers coming in, Tony and why I think I heard 3 times in 5 years.

09:42:43 Real estate Is not that big of a deal here, because most people either grow their own or they their neighbor does, or you know it's pretty easily accessible.

09:42:51 Black market or dispensary at this point so the the urge for people to go off plus the prices are all time low.

09:42:58 It's kind. of it is thing but it's not a widespread problem at this point, especially in why, maybe still in other States.

09:43:06 But I think out of sites, you know, without the use of someone using binoculars or being nosy, is a good idea, but the the ridiculous requirements of making it like a jail for some plants I do wanna get back to

09:43:23 what I was gonna suggest These are just, you know.

09:43:27 My suggestions honestly, but like a tiered, licensing type of thing for the do we use like a tier one?

09:43:35 Maybe 50 mature plants or 500 square feet of canopy and also allow a 100 immature plants. because you get a keep the potential harvest board.

09:43:47 You try to keep mothers that you could take hanging up on.

09:43:49 And then again, I believe, just like with the dispensaries.

09:43:52 Currently you have to leave this. anything under one foot is considered not a plan.

09:43:55 Yeah, that that should also i'd like to say should apply to medical basis.

09:43:59 Now that's what this group is for but since we're on the record.

09:44:24 Really upset that doesn't apply that one for single world plan this toll, and another person could grow up in this call But It's going to jail it' anything

09:44:27 under call inches does have to be subotted and barcoded, and everything else.

09:44:28 So it is considered a rule by the do they do track and trace those. The problem is all the genetics are in the home market, but the home market is being constrained because all the genetics are in the home market but the home market is being constrained because it's.

09:44:44 An unequal environment. And we cannot run our own genetics programs, because we can't have enough plants to to find the medicine that helps our neighbors. yeah I just as far as like equity.

09:45:05 I think that speaking to the caregiver program part of it I think it's really important, and I also concerned like isn't it discriminatory like, can you tell someone with a visible disability that just because they

09:45:10 can't burn their own. They then have to go by it X. Y.

09:45:13 Or Z like, especially if you've already had the right for so many years like, why can't really backtrack to 2,001, and that undo the fact that they gave us caregiver program and the state says you can no longer have a

09:45:37 caregiver. You have no option like you go to the dispensary.

09:45:41 Medical patients is not wanted to vote their in medical information.

09:45:44 Private health information for the Federal Government. They do not have to go to that just as it was written or suggested proposal to the change was that, and for the caregiver to apply that, they would have to be the legal guardian or the

09:46:02 minor child, and that would be like the exception but I just don't that doesn't make sense to me and additionally, there's been a lot of language talking about concern with black market.

09:46:14 Like how's you know the sensory system needs to expand to be able to provide for these patients that are force it's a little late to be worried about black market.

09:46:22 I see a discussion where we move towards equity and talking about how can we do it right?

09:46:27 Not like, Yeah, there's a black market for like everything guys like

09:46:39 The families right now in our home market since that's where most of the cannabis is I mean I I just, wanna you know.

09:46:52 Yeah, and legalized markets. Anyone gets the right to Berlin.

09:46:55 And maybe that's all that problem they either way like if if you've been growing a plan up for 20 years.

09:47:02 That works for your seizures or works for whatever like you should be able to continue what you've been doing.

09:47:11 Really reduced. So you know one caregiver and patient like Â£10, you know.

09:47:18 So discussing caregiver to me is some relevant like if having a grow space where you can accommodate many more licenses.

09:47:33 And you know, having that take center stage rather than the character I think So That's way more effective

09:47:48 And in Maine, the caregiver program, and this was as of 2,018.

09:47:51 I want to grow medical canvas to sell a patients another caregivers.

09:47:56 How can I do that in Maine? you have a medical caregivers license?

09:47:58 So we're they've expanded on their medical program to allow law to let these people interact with other patients even to the point now where they don't even have to have their growth site on the same farm It is a interaction

09:48:13 between patients sharing product, paying taxes on It you know They've They've already done this.

09:48:18 They've already moved forward because they Knew They had to protect the medical programmers to get lost moved into 21 and over, and there's a lot of there's a lot of literature out there for a lot of different States

09:48:26 guys. But I mean I've been doing this last 5 years like hard core trying to find what's gonna fit the light.

09:48:32 What's gonna fit. hawaii main 1.5 million people 1 point, 5 million people main we don't have the tourism like like they don't have our tourism.

09:48:41 But it's like they've started, with this healthy home room so cannabis in our communities let's stop being scared of this, and stuff being offensive and let's grow with this plan so we have helping people and that starts, to take away

09:48:55 the black Market. it's not a black market doesn't want to be the Black Market.

09:48:59 They want to be taxpayers and they want to enjoy this they don't want to run from the police. So we're seeing this data come out so big here that it's.

09:49:05 Like, and it's the same thing as the kind saying you know cultivation Licenses are in there, they're happening.

09:49:11 There's 2, one through tier 4 indoor outdoor cultivation outside.

09:49:14 This stuff is already happening that we don't have to invent these things we can start to piece these things together and say, Hey, what's gonna work over?

09:49:22 Why, you know, do we take a main bill? and start to pop your base and go, hey? Well, I like this. You know this is the most beautiful thing in the world that I don't know.

09:49:29 If obviously, why you do this at home caregiver dispensaries walking into someone else's home and picking flour off their counter and paying flour from their counter from Nancy right down the street at home raising makers I mean this is

09:49:44 like they've embraced it you know what I mean So this is where this State needs to go. and \$21. we'll do the same thing, but you gotta protect this medical thing it's huge not to mention the compliance stuff

09:49:55 I mean I'll bring it up real quick as being the largest patient based farm in Hawaii.

09:49:59 Right now. We've had department of public safety coming in there, pushing Federal power, taking plants, causing chaos do not their do H. with them taking plants. you know what I mean, and even to the point where we had department taxation there last week doing a

09:50:13 site I got tandy over there, not even interacting.

09:50:17 Do? h not even interacting just over here taking pictures of plants and Shit and i'm like we're here trying to solve a problem.

09:50:23 Right. Why are you not interacting? you know what I mean and So another great thing, I think this is to get apartment helping go to department taxation that's what I wanna know it's part of the recommendation

09:50:38 to the task force, and the good thing about recommendations of task force is, we can use it as introduction for bill.

09:50:43 So can we have a consensus here, at least within that, the main caregiver law is at least something to be introduced.

09:50:51 So then you guys can pick it apart in the legislative process and see how much of the I mean.

09:50:57 That's just one person. These guys would have to do their homework.

09:50:59 We we wrote to We're gonna we're gonna ask you folks to to testify when it comes through.

09:51:20 Okay by first we do the introduction as as part of the as part of the PasswordI'm. the legislator. I can introduce it as part of the task force recommendation.

09:51:30 Then we will. But you know this, I ask you guys for testimony all the time.

09:51:34 Whenever I introduce them. Then i'm gonna ask you folks to provide a customer. and yes, I am sorry if it's but then it's new people we're gonna we're gonna have you know a new

09:51:46 slate of legislators coming in that in November.

09:51:48 Okay, we need to re-educate so just don't wanna keep doing the same thing ,

09:52:03 So we Have got about I mean we're slotted for another 10 min here, and we can say a little bit let's go over here.

09:52:16 Until we eleventh, I just Can I just take more conference?

09:52:32 Because I don't this needs to be like all done together. You know what I mean. This is not just you guys taking one recommendation how much is like the entry level tier for making them.

09:52:51 Get into so like 800 I think is about 1,000 bucks if you're like 20,000 square feet.

09:52:54 It's about 20 grand, so that's a scalable, all pretty much what we could. What we could do right is we could look at the total number of patients who grow now right in our home market who are relying

09:53:07 on this money. \$500 a month. let's say just to pay your taxes right, and we can look at we can look at if they're doing medical We don't have to worry about 21 over we're gonna stay

09:53:17 and this is well, that's that's where it's going. So we're doing the same thing as we're doing right now. we saw what we could do differently in haw is that we can require the

09:53:27 license right? The problem is that people are getting charged with cannabis crimes for something that is not a crime.

09:53:34 And so if you have a medical license I don't think that you need an additional license to grow 50 bucks, so we take a percentage of the people that are most affected by the drug, more and we give them the money to pay for

09:54:14 those licenses indefinitely, is that money for for medical.

09:54:21 It's a 5% retail tax so anything you're selling to other medical patients.

09:54:25 You say 5 or so that's fair or not Let's do .

09:54:44 Thanks, thanks. You Got something I just wanna know which department Do we imagine taking over an employees, and that's .

09:54:56 We recommend that we not go ahead with our recommendations. on that. Okay, we recommend that we not go ahead with the Department of Health They are biased with. I think there's a Concept.

09:55:05 Maine is put everything in barbaraization where they paid.

09:55:07 That makes policy decisions. About 15 to 20 people from all around The world growers, the other States are already paying to do what you're doing.

09:55:23 Now that's the model that seems to be working good do H.

09:55:27 Is nothing doh is trying to regulate safe now it's not working.

09:55:30 It's failing everybody. has got no sense and it keeps you rewritten. Now we're now we're taking you some mold out, and so they do have the safest the safest.

09:55:40 But it is but everything that everybody produces in here is safe already.

09:55:45 .

09:55:50 People in and who is who is regulating the program now?

09:55:53 Is it? voa

09:56:31 Public safety to become. So we went to something like doh as a as an internal So State of Washington has used like a control.

09:56:41 And I think nevada's using like a version of gaining commission which is already doing some kind of regulatory, at least on a sort of so we could end up with dealing our being in charge of everything that's kind

09:56:54 of like Nice there's the old community dedicated to your own, through dedicated or own through dedicated so they're not highly likely yet it would be it would be nice but we're looking at like an

09:57:08 umbrella. Look at the different departments because I think it's easier if you have it within a department like kind of a controller, then deal age for or dln R.

09:57:16 Or in those packs and liquor commission I think it's underneath, and the power of tax because they're they're used to regulating it. Yeah, Exactly.

09:57:32 So I can give you an update of kind of what information we've got so far.

09:57:37 And then kind of with the conversation, ratio has been.

09:57:38 So the the briefings we've got to from all the regulators in the other industries has been that if you have it in multiple different departments, Other States have, you know, working a health run something from a tax rate something else department

09:57:51 of agriculture running something else becomes a little convoluted and very difficult to get things rolling and difficult to make right.

09:57:58 Admirative rules things of that nature. So the suggestion has been given by multiple states.

09:58:04 Now to say, find one regulatory to oversee everything. See you oversee the canvas adult use program.

09:58:11 See the medical program. so maybe set rolling the hemp program

09:58:14 So we're taking a look at what that option could look like any over umbrella organization instead of parsing it out.

09:58:26 Need Jersey action The problem is a 1 million dollar canvas industry. no matter how we want to look at this is a plan.

09:58:36 This is gonna be hawaii's. largest industry they've ever seen in their lifetime.

09:58:42 So you can't Have a program like this an Ag.

09:58:44 That's trying to run a program like that and you've got all this money that's involved in set it's, gonna you know, and heavy toxic material.

09:58:59 Is not a problem for growers from old sugarcane sites, because everybody in this room knows that about 98% we birds in Hawaii.

09:59:08 Soil bought medium and pot I want somebody who runs a program that understands what we're doing, and that people who write legislation with It's all just people saying, Oh, the paycheck We

09:59:32 don're monitoring that goes into legislation to sway legislators there's a lot of misinformation.

09:59:41 And And what do you want? A department? Not like the Department of Health that will roll over at any health risk?

09:59:48 You want somebody that's gonna look at things objectively to get the plan be able to say no there's other issues such.

09:59:53 As buttritis there's other vectors that can be spread from this clone to that.

09:59:59 Come there's a lot of issues besides the shallow fear that is generated among Senators and Representatives.

10:00:07 We would like a department that runs it that understands.

10:00:10 No, those are fears. you know We're not concerned about those those are not Phido remediating properties.

10:00:17 If you look at the job description for the dos inspectors, there's nothing about having any type of cannabis knowledge.

10:00:23 It's having investigative knowledge and enforcement knowledge ,

10:00:37 And so let's give them. a second kind of work through this things, and then we can discuss all of this I I still have something to go.

10:00:47 But I mean I I would like hi! some of you I recognize a lot of human interfaces.

10:00:55 It's awesome to see people come out especially since I know that.

10:01:01 Randy and Jr. guys really wanted to do this They didn't have to do this.

10:01:07 They're not required to do this it's just stuff to their 50 Never hold on the task force zoom meetings, but they went out of the way to come to the big island.

10:01:16 So thank you guys for that. and i'm gonna Yeah, they have limited time.

10:01:23 They have to write this report out by November so it's an exciting time in Hawaii for social equity in particular.

10:01:31 To be on the table is amazing. So I grew up in a lot of little.

10:01:37 My mom was born in Hilo her Mom was born and he'll feel all the way back.

10:01:42 Well, like great great grandfather from so Oh, no, no!

10:01:47 How many people in here are coming up about

10:01:53 Okay, that's it. it's good that's that's my my nephew, and Chain is wandering around.

10:01:59 So that's 4 of us so that's good because thanks to Randy and Garrett.

10:02:04 They put that on the map very clearly that by social equity they need not about it, and other victims of the war on drugs.

10:02:13 I've been lucky enough to work with a group that's been meeting for a couple of years now that like kind of this week, and we have defined it a little more broadly economic empowerment for

10:02:25 Kenaka Mali Social Justice for other victims in the War on Drugs Continuity of Medical Access.

10:02:31 Right existing mode rows caregiver grows. co-op rows. That's all part of social equity. You'd be getting your medicine over there for the last 5 years.

10:02:39 You should be able to continue getting your medicine there that's only obvious.

10:02:43 Everybody in this room got that and then another thing that's interesting to me is integrating the hemp licenses.

10:02:49 It's one plan it's not clear to me why we have 2 systems of of regulation, right?

10:02:53 So that's something that think about because there are valuable cannabis.

10:02:59 Coming out of the so called him, and that needs to be integrated into the into the the so called cannabis supply chain.

10:03:09 That leads to another question, and you know I So I lived in America for 37 years, and I was a cannabis law and policy Attorney is Oakland.

10:03:20 For 17 years I was the I was the Oakland City attorney, and when Oakland license the first dispensaries anywhere on the planet in modern times, and I watch the whole California thing unfold and let me

10:03:34 tell you medical cannabis under the old California model.

10:03:39 That was the good old days, relatively light regulation.

10:03:43 There was an amazing explosion, a variety of strains and products, animals and topicals.

10:03:50 It was all kind of small mom, and pops. Oakland was like a small business paradise, right?

10:03:55 This kind of stuff. These guys been talking about in maine was everywhere everybody's kitchen.

10:04:01 Everybody's thatpr Everybody was taking care of everybody it was really incredibly beautiful.

10:04:07 It all went to the dispensaries. the dispensaries tested. if they wanted to test.

10:04:11 People got to choose if they wanted tested medicine or if they didn't care you know nobody got her right. Still, a of like this.

10:04:21 What did we know? 12 years legalization? what's the death toll on cannabis?

10:04:25 Well, still 0 right? So not regulating new radio right that is not what we're doing here.

10:04:32 And I appreciate doh's testing program. I think things are gonna be in the chain of commerce.

10:04:37 There's got to be some level of assurance and then, you know, hungry lawyers suing people.

10:04:41 If somebody gets hurt. But yeah, somebody would have to get her.

10:04:45 We can balance that right and if it's department of ag or Db.

10:04:49 If it's going to be the world's biggest industry then why not the department of business, economic development and tourists right?

10:04:55 And really let us our end gate it's not the medical market.

10:04:59 It's not the local market it's not even the tourist market.

10:05:01 The end game is global export to use. we have to control appellation right?

10:05:07 If it says that it's hawaiian or what you grow or put up, or call out more mali or Kawai Electric, and I ain't happy to say it that way.

10:05:13 But you know that's the brand right a coacie electric, and we would know what the hell you're talking about right.

10:05:18 It has to come from those places cannot be. Some Kansas ditch we sold in Paris, called Maliwali.

10:05:26 Olympic not having that right and that's starts with our Legislature, our senator our task force right?

10:05:33 But it's our job to give them a political credibility on the coverage from the community right when they show up at the task force and at the latest legislature.

10:05:45 They need to be able to say, went to Theila.

10:05:48 We went to This is what we heard right and if it slows them down.

10:05:54 That's okay. There is no hurry not all legalization is good legalization.

10:05:59 There is plenty of bad legalization. California has been a disaster.

10:06:03 One thing about California. We brought all of the felonies down to misdemeanors right.

10:06:10 The decriminalization was really one of the best aspects of social justice.

10:06:13 We did the the the cleaning up everybody's record right.

10:06:22 It was a little clunky at first it was like voluntary you'd have to go apply go through a whole court process eventually took a couple of years.

10:06:30 It needs to be automatic. right? Everybody gets exposed unless if the if the prosecutor wants to kick up a bus about somebody, then that's on that. pick up a fuss.

10:06:39 Tell us why you want to pick on this guy otherwise Everybody you know. that would be a good job for the office of canvas control. Yeah. And and it should just it's what the courts are for right the courts of law enforcement.

10:06:56 Got us into this mess. Let them get us out right. It is a matter of deep shame, And who carries the shame right?

10:07:04 People feel bad, right like actually, when we go into the Hawaii community.

10:07:09 This is not an easy lift, because we have so much shape like.

10:07:13 Oh, we were back! Well, we broke the law. Well, my nephew was growing right.

10:07:18 And then you say, Oh, you you know happy with the legalized marijuana!

10:07:21 It's like Oh, I don't know sounds like drug addiction gags, crime, violence, right? and we have to deal colonize the lines of our own people. Right?

10:07:31 That's where we are, and that will take time and it will take up education, and you know, so one of the things we've done in the Holy is we're slowing down because we sit with red and we sit with with Jason.

10:07:43 right right, because we want to be with all the stakeholders.

10:07:46 But right now we're pulling back and we want to hang out and talk with people who are growing at home for themselves have been growing in the underground market or growing on a white house land growing on commitment schools lease lab and I talked to all those

10:08:04 lawyers. Hawaii homes is all good. We can grow all the 3 to 9.

10:08:07 We want to. So let me just hit a couple of specific points for people just to start thinking about. is it Okay, if I do?

10:08:15 Yes, okay, no. I don't know if you can check with everybody that that's why I wanna make sure.

10:08:19 Okay, because I I just wanna show it up. We came to humor.

10:08:23 You can you'll be going drove all the way from for the to the yellow.

10:08:29 It's a long trip welcome to book so 1 one thing that I think got here in this room is that basic principle: that small is beautiful, right?

10:08:41 And you do not have to have a legal system that rewards gigantic corporations, because that's what we have in California last year.

10:08:48 The biggest one was 600 million I thought Oh, my God that's so big this year. there's a 2 billion dollar company right?

10:08:55 With my cresco rest still do the merger the market cap through the Canadian securities exchange 2 billion dollars right?

10:09:03 You get tilt. The market to discourage that you can promote small is beautiful.

10:09:08 You can make up arbitrary rules here's one that some veterans of California have been thinking about working with some first nations people in caller i'm sorry in in what's that country Canada

10:09:22 i'll tell you the name of this tribe.

10:09:25 This is an interesting way to check out, and I will run this stuff down in more detail for the task force.

10:09:31 Alderfield this is in Ontario it's It's independent Canadian native tribe.

10:09:42 First station. Alderville has cannabis autonomy.

10:09:46 And We're looking at New York we're looking at Jamaica. I'm.

10:09:51 Talking to all my friends who were in California the good old days, and soccer sideways, and we're rethinking it.

10:09:57 So here's like a basic role that would change everything 5,000 square foot.

10:10:03 Max right? or if you have a specific tier, or highly limited on anything bigger than that.

10:10:08 But an unlimited number of licenses.

10:10:11 And then you were talking about should be able to go to empty store should be able to drive around the island and just like you stopping at food stands, or if you're in California you're stopping at little wideries little

10:10:21 boutique wineries you should be able to stop and sample the the local product, the terraw of that place, that climate, that particular rate the soil over there, you know, no matter how contaminated it is where do you

10:10:37 go right. So there's a thing think about that that creates a radically different universe.

10:10:41 We try to do that in California. They try to hold it up an acre, and a truck got driven through it like last house That was in 600 billion last year.

10:10:53 1.5 million square feet under glass right that's a grow in Southern California, right?

10:11:02 And, believe me, is some of the shittiest ways you ever smoked in your life. Right?

10:11:07 You cannot grow decent wheat at scale like that you just have 5,000 square feet, you know. you know what you're doing.

10:11:12 You could take care of him. his doors are up it's industrialized medicine, whatever it's not my thing, and I don't see why we should create a regulatory system that encourages it so you know and then you need

10:11:22 to think about. Do you need a limit of the number of licenses?

10:11:26 If they're all gonna small, be small, anyway. and Then you know, maybe your small, your fall back position is supply chain unlimited right?

10:11:33 The market can sort that out if you want to have some kind of control of retail outlets.

10:11:39 Yeah, we can talk about that. Maybe the other thing we could do while we're waiting, because I actually think it's gonna take time because I don't.

10:11:47 I think that what you can pick and choose from the main model, from an alder bill model from all of these different things that are happening and emerging right because the social equity movement not only in America, but all over the planet is growing in

10:12:02 strength. right. We started this thing in Oakland 5 years ago, when we said no felony exclusion, no way.

10:12:10 And then we said, In fact, if you haven't fel any conviction, you get both points Here's a free license.

10:12:16 Knock yourself out right. The problem with that is you know more money what you'll do or get your grandmother's house absolutely.

10:12:23 Do not organ your grandmother's house for one of these crazy asked wild schemes.

10:12:28 Do not do that, You will lose it right Do You Hear me you're up against 2 billion dollar market cap. right?

10:12:35 We've got a fixed step. We gotta be smart and maybe that means we gotta slow it down.

10:12:39 Maybe that means not all. Legalization is good legalization. Maybe next year we gotta kill some bills depending how many bills we get up there.

10:12:47 If we get up to one where we can all agree great got 3 bills, and we don't all agree, and they all die.

10:12:52 You know what that is a victory for us that is good for us.

10:12:56 Meanwhile we could take maybe steps. Why is the medical program vertically integrated and just took the first baby step to allow wholesale transferred between dispensaries?

10:13:09 Why is that not a diversified supply chain? Why is it?

10:13:12 If they have crop failure, their shelves go dry it's not like. There's no weed on the island right back to recommendations as a recommendation.

10:13:20 Diversify their medical supply chain Keep diversified.

10:13:24 Now, as your first baby step towards having a robust, diversified supply chain for your ultimate legalization, when, if that ever happens, because if you have 35,000 patients, and then you got 60,000 patients, and you got a 120,000

10:13:36 patients, which you probably do in a couple of years. Then everybody all of the residents are patients who are consuming.

10:13:44 So it's part of social equity to have a horizontal rather than

10:14:00 Not at just the supply. Now, Okay, that is, that means growers can have their own .

10:14:15 Or or number not just subs if you're not happy with your current license.

10:14:24 Give it back. Okay. Okay. I think I think i've actually hit a couple of these points.

10:14:28 There's only 2 left But again to be clear i'm not convinced that, having separate medical and adult use regulatory systems makes any sense.

10:14:43 California, we basically collapse. Them cannabis is basically an over the counter medication.

10:14:47 Right. So in which case we're looking at I think what people are referring to is unification, and we need to think about the advantages and disadvantages of that and while we're doing that we just continue

10:15:00 expanding the medical market. The medical market is currently either restricted, highly regulated. That was 5, whatever from 7, 8 years ago. Whenever we first started thinking about this, we live in a very different world.

10:15:14 Now we need to think about bringing down the level of regulation on the dispensaries way out, bringing up maybe a little bit of regulation on the co-ops right, so that they meet in the middle, and the middle is way lower right they'll be a

10:15:29 little test If we do that, then we could begin to test grown medicine and put it in the retail supply chain.

10:15:36 If we want to, and come up with other retail outlets, go ahead, my friend, what's happening it's It's when you said that the end game was global export hmm for patience the end game is healing

10:15:48 And so in order to do that we don't need we don't need a supply so big that we make money from it, we need to supply, so that we can heal from Okay, So that's an argument for maintaining a

10:15:58 dual system, and there anything above that amount that's necessary to hear really brings in money, and and money is fine, you know.

10:16:08 Everyone should have an opportunity i'm not saying anybody is bad i'm just saying that in Hawaii we could do it, that we could all have all the we we wanted.

10:16:19 If well, alright folks it's all good, let me just so.

10:16:33 I think I think I said There's no rush I think I suggested.

10:16:36 You know debt makes sense to me. and then the last thing i'm gonna do is if you would like to talk more about this, since I can find a pen, give me your contact info you can take one of those flyers

10:16:49 for all that the week, and we might go up to.

10:16:53 But I have a just fall out a little bit after this meeting.

10:16:54 If you guys wanna hang out some more cool. Thank you so much.

10:16:58 So. So the question the question has to be, Who gets charged with the crime, or gets fine for not having a license first, which who, born and raised here, who cannot go, gets charged with a crime, or gets fine for not having a proper

10:17:20 license First, What is that necessary? Why does someone have to be charged with the crime or fine for not having the proper license?

10:17:31 Why is that happening? it's cannabis like andrew saying, it's a plan.

10:17:35 But then we all get this money thing in our head, and we start figuring out ways to make perfect.

10:17:42 Well. and then I think we have an over program with a lot about healing each other.

10:17:47 Yet we we're all still stigmatized to such an extent it's knowledge.

10:17:56 Yes, that's and then? back to What are the things about A story? that is really important.

10:18:02 So we do need to. I did 20 years hard time from my imagination as that's the white Community hospital.

10:18:08 And when you talk about that, this of that Miss that people can be eligible to get medical campus, those those aren't just words.

10:18:17 I've held those people in my arms aunties i'm close.

10:18:23 These people don't use medical, candidates are no different than medical patients, and you they are entitled to set rights or privacy.

10:18:30 When you become a consumer, adult use candidates you are consuming Captain Crunch, and that's as far as you go with the government.

10:18:37 You got a problem. You got an issue that's as far as it goes.

10:18:41 You got your account when, when you're a medical patient you have rights under the Federal Government, the fourteenth amendment means whatever pushed into legislation and light must match up with what is in the Federal hey?

10:18:55 That may slide for Canada and psilocybin and everything.



10:19:01 But when it comes to your privacy right also, also, everyone that has a license has to sign.

10:19:12 2 of us to agree to be prosecuted federally so, no matter what you've heard about federal prosecutions being here or not being here, you've ever been in a rate you say there's 12 agencies and any of

10:19:23 them are fed, and you agree as a license holder to be prosecuted by the fed.

10:19:29 So. Lastly, James, when you talk about taking our time with separating this, one of the things that is being provided is kinky.

10:19:39 So factory with this 3 year old sister in the car, with Dad and a couple of days, and and then go to the dispensary, and they buy a package of cannabis, and it looks very much like nice as as

10:19:58 as the State says it has to be. But then, hey, go to a liquor store, and they buy a bunch of beer, and then they go home, and they consume alcohol.

10:20:09 And they throw this medicine bottle back and forth in front of a 2 year old. child. Opioid prescription opioids.

10:20:15 Is that any issue in Hawaii anywhere? So what do we?

10:20:21 What do we like conditioning our children? No, we do not have time.

10:20:27 You need to get the drug of users and the drug seekers, which is what they call it in the emergency room.

10:20:34 You need to get the drug seekers out of the medical program.

10:20:36 So we have a medical program. That is not a massive stock.

10:20:41 It is not a joke that makes sense I wanna i'm gonna tease out something real quick.

10:20:47 I think there's some good recommendations to be trying from. So So regarding what you mentioning right like who gets arrested, and things of that nature, and how the state se things right?

10:21:01 So if you look at all the local markets for the recreational markets around the nation, they do individuals that are getting charged still.

10:21:08 So in California, people getting charged for doing commercial operations and not having a license.

10:21:13 So so, you know, providing a a a commercial service. right?

10:21:18 So growing your cannabis selling it at store at at some volume that is unallowable. Right?

10:21:24 So given that that is what's happening in other states and that's That's something that people are facing still criminalized for commercial operations. because there's a license structure the setup and If you choose not to

10:21:34 get a license in that license structure you're then breaking the wall.

10:21:37 Is there any specific recommendations you would like this Social equity group to look at to make sure that issue is pressed.

10:21:46 Yeah, I think there needs to be a concerted effort to figure out which regulations should go away first and not threatening the caregiver program every year with the solution.

10:22:00 I think the worst is here on, never jail or any sort of something that's gonna be on your record is something That's what I call you after a job or something regulation. you have to call But we don't want to treat it you know cannabis is treated

10:22:22 like this the devil's lettuce or something.

10:22:28 And really it is. i'm different from the other other than the sensitive, just such a useful all around.

10:22:31 But no, we don't what happens when we find the next plan that's better than canvas

10:22:57 You're out of compliance this is Why, you know can you get into compliance if it happens again, and maybe as a fine, I don't know what the perfect answer is.

10:23:04 But I just know that no one should be charged a criminal charge for a plan.

10:23:09 You can Bedriving home, you know, and let you go is, I mean, we preferential treatment for licenses.

10:23:20 Is that equitable? The The problem with that is, you know, put the thing reason.

10:23:27 The whole Ohha voting that got tone up by the Us.

10:23:31 Supreme Court. We cannot, we cannot, do a preference.

10:23:35 Space So I I mean, I hate to say, but it is on the election finally legalized.

10:23:52 The sensory, and I really fought against jail time.

10:23:55 I really fought again. Okay, and I mainly was fighting for warnings first.

10:24:04 But so I really hate to say it but it's whoever the Dan governor is, gonna be next year because this particular governor he insisted he was gonna he vetoed the person legislation we have

10:24:21 which didn't have any felonies okay, he detailed it, and he was gonna be told the medical dispensary unless we agree on having the felony.

10:24:32 So I I feel for you. I walk for you folks but we'll keep going my my stuff my soap boxes.

10:24:47 Maybe folks can grow like a huge and I tell breadth this.

10:24:50 And now, James, and now you folks are here he you both can have a list of emails people who because

whenever we have a hearing it's within 2 days, and i'm gonna tell you every time I bring up the horizontal  
10:25:02 region. And you folks, the people who have been in the battles with me know this.  
10:25:08 Okay, and also outdoor grow. Okay, whenever I bring that up, you have like no idea.  
10:25:15 Public safety comes up and then we don't have enough of you folks to overcome.  
10:25:24 I had. I think I point. had you more noticed. He heard it recently.  
10:25:25 The recent thing, you know, not in one of the hearings in every hearing that I have witnessed this man in, he  
has said, The prices at the dispensaries are too high.  
10:25:41 That comes up Again and again and again and again she brought forth a resolution to investigate dispensary  
prices.  
10:25:54 It got controlled by kale hockey and this guy and got thrown over to some place that they don't even want to  
take care of it. They got married.  
10:26:04 This is a matter of social equity. when people say the prices at the dispensary are too high, and we're ignored.  
10:26:13 We're just gonna go grow our own you can ignore we gotta ignore.  
10:26:17 I just wanna make maybe a plea real quick because we do represent a lot of people at our farm, and if you've  
seen what I've seen.  
10:26:24 I don't ever think i'd be at this table man your grow, or do my own little small thing, and do my my, my, as  
these people start coming through this gate and they are thanking you for the bomb their hearts  
10:26:35 for impression, not dying get nothing I mean it's just astounding. And I think that's really the message that this  
task forces to bring forward massively is that we're in a medical crisis right now and these people leave this  
10:26:52 medicine right, and it's happening over and over again. I mean I started off with 20 people 5 years ago.  
10:26:58 I had 200 people 2 years ago. Now we're up at 2,000, and this is no advertiser. Nothing is people talking to  
each other going, Hey, man, We can't We can't afford to discriminate sensors Don't have the medicine  
10:27:10 we need we don't know what to do here. and so it just keeps steam rolling I think that's what we're trying to  
impress upon people.  
10:27:22 Is that really it's it's a strategy it really is to under that that the politicians no but a lot of them either.  
10:27:28 Don't have a view of cannabis don't have a side to Cannabis. There was recently just a marijuana policy  
project.  
10:27:35 Put out that. ask everybody when they think about legalization to cannabis.  
10:27:38 Over 80% of the so it's like pretty It's pretty insane, you know what I mean and in fact, it's also from the  
patients themselves here, because they don't want to publicly a lot of them don't  
10:27:56 want to publicly say that they need it in the user.  
10:28:02 That's video presentations video presentations and that and that a lot of people might remember when the  
program was under public safety right when the police.  
10:28:17 Were running the program. it was a very very different thing there That's really what we're recovering from  
right now.  
10:28:23 The police sent every patient's name to me for example,  
10:28:38 It was bad Then and we're still recovering from that it's still happening, and it's still happening, And so the the  
one word I Haven't heard yet right starts with any needs to be applied with all enforcement  
10:28:51 first education right? because that was part of the dispensary law.  
10:28:56 5 years ago, and it was never delivered So the money was taken.  
10:29:01 The money was taken by the program from the dispensaries to pay for education, and then that money was put  
into the general fund, where it was completely lost and never to be seen again.  
10:29:12 And so that money is still being collected in the state and put somewhere, we don't know, but we know new  
departments are being created, while law enforcement is not being educated at all.  
10:29:22 You know, these guys need to know when they when they see a cannabis plan.  
10:29:28 The reason they react to it is because it's in their dna Yeah, bio markers in their dna. We have a relationship  
with the band that's 10,000 years old, and none of us are a meeting from that we required this plant We required to have  
a noise to regulate  
10:29:42 our systems. vio cannonoids help with that the the elephant in the room of our endo cannabinoid system is that  
we don't have a test.  
10:29:52 Why can I go and get a test that says you can have annoying deficient?  
10:29:55 Yeah, you need cbn like you can't sleep because you don't have enough cdn be introduced in your body.  
10:30:03 I think another big thing is part of the public safety cannot use campus.  
10:30:07 And so lawfully right so they're they're evicted from that whole role where you know I I've heard it quotes

from like leading leading people that are like I can't wait to retire get out the  
10:30:17 police for some other big islands. so it's not so much. They're like oblivious of it. They just can't partake in it.  
10:30:28 And so here we go, There was a lot of work done location protection idols.  
10:30:41 Allowing so employees to have we have a patient that's a janitor. We have a patient that's a janitor.  
10:30:48 We have a patient that's a janitor at the airport, and she's being fired for using cannabis.  
10:30:51 A janitor at the airport is being fired for using cannabis.  
10:30:54 One of our patients. So you know these are another things that we need to bring up is like the worst is when a  
child stay controls taken from a parent, I I have I've never heard anything more since that's and i'm dealing  
10:31:04 with that right now  
10:31:24 Okay, you know, I was just wondering If there's anything else we could add to it right now. I do want to bring  
it back and just focus again back into social you know we was discussed that it is  
10:31:32 difficult to cop kind of carve out specific, you know, an ethnicity for source, but there are ways to craft the  
language.  
10:31:38 So around the nation. New York, for example, American Latinas and also those have been incarcerated.  
10:31:47 So first, licenses are going to. so focusing back, you know, on social equity in general.  
10:31:54 Take some more comments around how we can once a social equity program within an adult use.  
10:32:00 Structure. Yeah, just be careful. The bud quorum cause that could cost us 3 years.  
10:32:04 You know, we could cost us 3 years of getting it introduced and then getting sued like So, you know, just  
make it local licenses.  
10:32:13 Residency. Yes, if you had 20 years plus local Residency, or however many years, I'm.  
10:32:36 Iron workers, versus people from Hawaii.  
10:32:40 Social equity means money grown money from Canada's going in Hawaii stays in Hawaii.  
10:32:46 We should not be feeding outside interest in outside shareholders unless they are consumers.  
10:32:54 So there is a residential requirement in current license program.  
10:32:56 But when it comes to shareholders who can be involved, there are a lot of local shareholders on a lot of  
different yes sensories.  
10:33:03 But here's the issue We live in capitalist market we live in America that loves capitalism right, and it's It's  
difficult to mandate of who can have a share of what and I will say at least time  
10:33:16 I undo is what you're Saying well there was a 50%, no ownership but of investors. It's not man.  
10:33:27 We have Canada investing behind and it's right in the same same issue in our housing market.  
10:33:38 It's we can do our best like you said make it something for our local people, and I will say for for at least  
everyone just had the conversation.  
10:33:43 That is all our goal to make this market for Hawaii, and for what he's in business live here right?  
10:33:54 So you see the teamable licenses make it so. it's attracted for people that live here and less attractive for you  
huge conglomerates that won't bring in much so  
10:33:59 I have I have evidence showing that i'm showing that our dispensaries are owned all by out of State employees,  
or more than 49% and sharehold Okay, And And so have they been investigated No, they have an address.  
10:34:20 In white they were considered I think we're getting the up ThereWe investigated. So why are the dispensaries  
being investigated for not we need compliance with financial and and forensic every other product now We have  
30Â min left can We have a final statement from  
10:34:54 each We've learned from dispensers and what we did wrong.  
10:34:58 We set them up too quick, we shouldn't have in the first place, and we had over 50 years like see growers here  
in Hawaii all over the place where we could set up a driving medical Cannabis market and so We're learning from  
10:35:07 that right. but we need to make sure we're moving forward we don't keep making the same problems happen.  
10:35:14 I'm doing a lot of weird shit we all know what they're doing, you know, and and you could say Hey, there'd be  
a watch structure that on a fire track because we know how to get around bio track we know all this stuff they're  
10:35:24 not being honest because they have to pay, shareholders and they're not making money right now, so they're  
doing a lot of stuff they can do.  
10:35:31 Maybe shareholders pay, including checkpoint. supplication because they can't drop the patient license  
because they have to pay their investors. So this is, you know.  
10:35:38 So we just wanna live and learn from this and make sure you know going forward that you know we don't.  
10:35:41 We don't allow department public safety to make our laws and decide the expenses are going to be the one that  
runs program, and that's really insulting all the growth of Hawaii just sit there and go Hey I Can't  
10:35:52 sell my product. But I have these dispensaries. are opened up that are not even it's very. It's very upsetting. and

very yeah, it's it's a huge problem those are remarks

10:36:07 Yes, you know one of the things at the top of this is that you know this interaction group is not task to address that there's been no social equity in the medical cannabis program But I think that's part of

10:36:19 why the Conversation that way? Just because you can't really address social equity going forward and not address what's happening right now, especially when we have suggestions on how so open it up to make it more equitable currently like I don't think that

10:36:34 we can say, Oh, you know, this is just the way it is and it has to be babies that we're already looking at the future like we need to be addressing all of it together because of it's not really acceptable just

10:36:47 putting on reminders to what we're dealing with one half into the dual use.

10:36:54 One half is like, Okay, we're gonna ignore the injustice that's already there, because we made a mistake.

10:36:58 But we focus on making it better. thank you alright so I don't really like what Christie just said hang out on that.

10:37:06 And that you know the medical program We have now I don't know again about We're not supposed to be

10:37:16 You know, in patience now, just like what James was saying in California out there for the golden dates when it was prop 2, 15, and I could take my excess.

10:37:24 Madison to any number of shops right now where I live, and you know they have a choice to buy or not you're going there.

10:37:31 I usually don't have a problem selling that stuff but you know.

10:37:35 Sometimes you could never get turned out. whether cause they had too much fire whatever, maybe.

10:37:39 But let's just so reiner what he said it was beautiful.

10:37:42 I grew up at it for myself was the last time extra to take it down to the spin theory.

10:37:50 They compensate me for my time and efforts of growing it.

10:37:53 And allowing more options for patients on the shelves.

10:37:57 And some patients had a whole pleasure of other options besides.

10:38:00 Just what. Let me just break it up for you. Spencer, is only growth.

10:38:05 Things that yield have high Phc number and look pretty in a bag because that's what sales and the dispenser is us formation That's that's being robbed because you know let's say it's 20

10:38:20 strings to your patient, and needs this specific kind of annoying profile and help your needs, and and nothing that they offer has that we're being you're being robbed of the medical benefits So something that could be done

10:38:33 really quick. I feel like to start providing some social equity before even some sort of dual use there's allowing patients to call for excess medicine into the dispensaries that are currently upgrade which also allows people who

10:38:48 are possibly interested in pursuing a adult use type situation permanently wrong to go ahead and establish a little bit of their name, some branding

10:39:00 It just patient way. More options on the shelf. dispensaries would be able I mean not only crack, but I like the flower real good flower. but I was like by other.

10:39:18 Flower. If I could if I knew the no that's basically don't do a good talk, it's just I really know what they have to focus on when that's something that's gonna give them the you'll have

10:39:30 Cc. number assess what unfortunately, a lot of patients want.

10:39:35 And they also think it's crazy because there's really human.

10:39:40 We are doing something that's pretty but that's not what cannabis medicine is about. it could look really ugly. We're saying on the table for 100 things.

10:39:49 But it might be the most It could look like black tar, So anyway, I know this is for the to use.

10:39:58 But if you really want to start preparing social equity, and you wanna start going in really fast, you could allow patients to offer their medicine to dispensaries.

10:40:06 Obviously probably have to pass tests and things like that. but you could start social equity prepared almost immediately by doing that.

10:40:16 The other thing I wanna touch on is can ask your questions.

10:40:21 Other for you stuff that's Why I ask that.

10:40:22 Would you also welcome your medicine? going to other medical patient caregiver sites?

10:40:27 Oh, yeah, for sure. Okay, I I just feel like you should have it, you know, if you have excess medicine right?

10:40:32 All of a sudden, like as it currently stands your allow certain amounts you know it's kind of a gray area.

10:40:39 So if i'm sitting over 8 o'clock, is this is in my school under that adequate amount, or am I illegal?

10:40:45 What you need the case. You know your farmer. You kicks grow tomato pipes.

10:40:50 Say there should be 2022 it's illegal. So I mean, it's hard to fix that where we get that problem.

10:40:58 But basically what it falls down to is that you know it's. If you have extra medicine, it should be going in trash, which is maybe technically under the law, what business should happen to know? you should be able to offer that to  
10:41:10 this this thing I wanna touch on a social equity in other States has led to maybe some of the right people getting license.

10:41:16 But then they're all approached and bought out by multi-state operators.

10:41:23 You know, businesses costs other states. I mean that may be You could argue that still good for the person who got the social area license, cause maybe they get hashed out a nice check, and they're happy or

10:41:35 realistically that should not be happening. Social equity license should go to people who are gonna implement the license employees.

10:41:43 Local people put money back into the local community. not I don't know how you can fix it.

10:41:49 But somehow there has to be a way to make it this license is good for X one years before it can even be sold or transferred to 81, and may not ever be allowed to be told or transferred to someone

10:42:00 that's outside of the State I don't know how but somehow that has to be very neat, because what would happen if you had on a directory license you know no longer get all

10:42:12 the Enterprise or somebody else. And then, all of a sudden, everybody did all this work to prepared.

10:42:16 The harmless, and calls, and then it still ends up in the hands of the guide. that's what's happening in another State.

10:42:24 Now i'll just i'll i'll be as quick as I can I started into the tier entertain earlier.

10:42:29 Oh, so outdoor, indoor working household information.

10:42:35 I do not play a should be exploded tier.

10:42:37 One did the mature plants, 500 square foot 100 andature plants allowed.

10:42:43 I personally feel like 200 license should be an hour.

10:42:46 Maybe this shouldn't even be a limit because i'm just like the free market wins.

10:42:51 If you pro good medicine do good business you're gonna see just like any other business.

10:42:55 If you jump into it and put out a good product and you're not a good business, then you're gonna fail.

10:42:59 That's just how I feel like the desk outcome for people jumping into another business.

10:43:06 Also patients. are just people that like to consume for recreation. let's just say tier 200 license.

10:43:15 I'm gonna mature plants for 1,000 square feet, with 200 amature plants, tier 3 200 mature plants, or 2,000 square feet, or under immature plants, tier, 4 400 mature

10:43:29 plants for 4,000 square feet, 800 to make sure i'm not totally close to something about 4,000 square feet.

10:43:37 But I do like the model of keeping it so what's long contained.

10:43:42 It allows the grower to touch their hands on each plant versus it, to come in a commercial commodity that is just like you know.

10:43:50 Everything else want your individual product Stand out in Hawaii.

10:43:55 We do have the Oh, now that's a Mackey. there are so many different microcontrollers on the islands, and we should mostly protect that, because I can't remember, said earlier But yes, we will have somewhere.

10:44:11 In a shop in la someone something called mauivei or cola or something when it was growing in downtown, and lay in a basement, or whatever and I don't know we can stop that but let's just say in

10:44:22 our state, for sure it has to be and especially for export down the road.

10:44:27 We will be our largest export crowd. The biggest thing is ever seen.

10:44:30 Our greed. Oh, we have to protect the and I think you KnowMackay, or who knows Malfa?

10:44:44 Possibly, or you know, Kilo, I think the native foreign community. you know i'm already been in here for native white community should really be involved in the collations, partly because they know the land.

10:44:58 Better, I will. Anyways, that should definitely be really key is protecting the Okay, the other thing.

10:45:07 Do you think that you could for social justice you could give a planned nursery license to?

10:45:12 Not just a cultivation. but Some cultivators will want to buy their plants from somewhere else.

10:45:18 They don't worry about it. some will do their own inhouse. but I think it should be an option also like a breeding permit.

10:45:27 That's kind of a totally different thing. I think there should be something for greeters.

10:45:32 And also I don't think we should limit it to call patient. our C word freeing permits it should be allowed our retail permits.

10:45:40 If you're gonna do something like cause someone may have been a rest for buying a seller and never grown it, they may not be interested in the cultivation license, they don't understand what they want to do but maybe they learn how

10:45:51 to buy low so high and make money that way they'd like to do a retail.

10:45:57 The last that i don't want to see overlooked especially since we are seeing. See? so many tourists North will bring lots more cannabis tourism.

10:46:06 These people are gonna need a safe place to smoke. A lot of hotels are

10:46:17 So anyways, a bar like a canvas lounge or bar that might be scared thing for a lot of people.

10:46:23 Real estate, is not it's much safer than alcohol.

10:46:28 And I don't want to see who I lead that out, because, for one thing, it does bring in extra tourism dollars.

10:46:35 It provides a safe place for tourists. People were unfamiliar with the island, you know.

10:46:41 We go to the Spencer and get off playing Oh, they go!

10:46:45 Where do they go after that? Did they slope in the car the State, You know we're different than from California, we're different than a lot of other States?

10:47:04 And since that, we have a whole lot of tourists here all the time. And these people are telling the day you're gonna need a safe spot

10:47:26 Lounges. I don't want to see that like the other boy, because for the reason I just say it's very should not be robbed of going and sitting at a table like this with friends and past and joined or

10:47:42 just smoking themselves. I don't drink but you know a lot of friends go to the bar.

10:47:48 I, like the concept. Sit, Have all of friends enjoy something you all enjoy.

10:47:54 I still

10:48:03 Especially if you spend your own money and get here. I really appreciate

10:48:07 Thanks for listening.

10:48:12 Fewer stuff, because we need to pass the horizontal policy.

10:48:18 And then we could go into this but i'd like to say, probably, have we have to have that realist.

10:48:25 So we have that actual future moving down the line. final thoughts.

10:48:31 Yeah, convictions and exponents and possible renewation and reconciliation and I mean to the dual tier system creates different rules for the different uses and I would like to see

10:48:58 the medical program receive the benefits of that rather than the adult use.

10:49:06 Profit getting you know relaxing the rules for the medical program, and I think we'd be stuff in the right direction for having social equity, because once it's not used that's going to be

10:49:25 you know that's this much of the market and the medical is going to be this much?

10:49:32 And I hope that it stays No program states because that really is where this all started and the healing is real.

10:49:43 I think that there should be like educational programs for legislature coming in the new legislature.

10:49:50 You know that will help to dissolve the provisionary, thinking that everyone has been bombarded with for next.

10:50:05 Thank you thank you. I see it just Why, don't you raise another guy, you know, smoking my whole life. It's like i'm on that application and I work.

10:50:23 For this country, and understand the whole kitchen behind it.

10:50:29 Now working for the that's big month I'm, not more at this time. she's only 62 years old.

10:50:41 My whole life had to be that stigma working in construction, working on all my jobs.

10:50:46 But the medical part behind this cannot be productive because then it's the people that come into the distances.

10:50:54 I know everybody is You We are we use too expensive but when they cry to you for some that's just you can go.

10:51:05 It's \$50 a frigging 8 I feel bad to charge him. but I speak because of the frickin room is why it's so expensive, Cannot forget about the patients. that's what to me marijuana is

10:51:21 a it has. I know most of us is here, because of marijuana We wouldn't be able to be in front of people because it's you know, and trying to make people believe that and for hawaii and locals to believe

10:51:39 that of those It's hard working at the dispensary and how to explain to all to people i'm working for a holiday.

10:51:51 But now I'm working for cause there is room for all of Us.

10:51:55 There is room for all of us. We just need to find a way that we can all work together. and the State.

10:52:08 Yeah for me as being an issue. i'm not it's not I don't have to smoke as much.

10:52:16 We just need a joint a week as I love it.

10:52:20 I would love to be. That regular person would be like that. But no, I need it.

10:52:23 Every day all day. If I you know what I mean and that's what I want, and I think just like holidays.

10:52:31 It. Thank you guys for because we need you guys, and I it sucks that everybody's view about It's always change.

10:52:37 I see it cause it's it's always changing objects it's not gonna happen again, and it's frustrating that you see the frustration level. But we still need to continue need to not give up this

10:52:48 fight because it's not about getting this on my instructions People live in Hawaii and every everywhere that comes to madness.

10:53:03 Adams can I just pick you back onto that, and ask that we resend the additional felonies that were created for dispensary employees.

10:53:15 That's ridiculous right but that was the only person i'm just so like you know i'd like to always was that an easy answer, we'll talk about Alright, so

10:53:42 again a partnership between the people of Hawaii and the state of life to bring people to.

10:53:48 Why, you can break down barriers social equity means that's what we've accomplished that he or he or he can send their children to college just like being 7 do That's your trade.

10:54:03 If that's what you do good you should be able to do it not just have licenses handing out for multi 1 million operators.

10:54:10 That's not equitable, thank you and thank you very much for being here, Benny, I apologize.

10:54:18 It's not the last time i'm gonna begin I have taken some new recommendations too hard, thank you.

10:54:28 So, as far as social equity goes, I feel a horizontal system is definitely gonna be the best way to go to keep cost sound, you know, and get your entry level in.

10:54:38 Also. I really like what Andrew said about being able to sell your access medicine to the sensory, or maybe also if it's not a dispensary some type of government run facility that you could take your stuff doing you could not sell

10:54:51 it for you, you know, like a market area or a farmer's market area, where you could go and set up and be able to sell to people that come the easiest way for the safe to regulate it Obviously would be for you to take

10:55:01 it to our any license, retail dispensary, and then pick it up.

10:55:05 I believe they would probably be interested in something like that, because it puts their costs down.

10:55:10 They only gotta buy it from you they don't got it paid for everything else like along the way, and they're vertically integrated system.

10:55:17 I also work for one of the dispensers on the island, and to see how much money they have to put out to even operate is insane. You know there's a 100 plus employees that electric bill everything that they have to put

10:55:31 out in order to be able to offer, you would definitely do ruin.

10:55:35 A small time, farmer. One failure is your whole life.

10:55:40 So having a horizontal system with canopy account, you know.

10:55:47 Don't allow cookies to come in don't allow again Class house to come in and take older because they're time they're going to begin here.

10:55:55 They're looking at putting this fingers into everybody they can have their time to get in there, and once they take over there is not that many small farmers I'm. like I said earlier, I am from doing a holiday and I

10:56:09 saw it both from where, you know, caviar on the shelves and everything.

10:56:15 The family's completely the stigma behind it of oh, well, you got Buster for going .

10:56:24 And then also, when I saw it turned into a medical thing where the Reverend, that you always hit from and went down went for smoke had cancer, and they're like in the middle of your circle, and healing all that second hand smoke just so they

10:56:37 can eat all and food for the last time in life, You know it is a huge game changer to see that, and I just feel that the social equity you guys got a thing small to build, you know, was the largest.

10:56:54 It was the largest economic driver in the State of Ho, behind Kurds in the nineties, larger than sugar team, larger than pineapples, larger than everything.

10:57:04 That's why we don't have to help fund all of the law enforcement on top of it, too.

10:57:28 Made it a giant economic driver, you know there was a and I mean wrapping it up.

10:57:31 Yeah. small horizontal licensing with a cap on canopy space.

10:57:35 And like Drew said the first thing you could do is allow current patients and i'll web to get rid of their access medicine.

10:57:44 It should be required to grow the max that they're allowed should they be required to grow Well, it's just got up to 15,000 funds, and so 5,000.

10:57:55 So that's kind of where you guys are growing less than 5,000.

10:57:59 We pushed the 5,000 trash threshold pretty often, so you were to double your supply.

10:58:03 Then you could sell it for half or not half. but you could sell it for 12 or so less hopefully.

10:58:10 But also it's and then on the social activity side say you have a card.

10:58:16 You know you're holding somebody's, card and they don't need their 4 ounces.

10:58:20 But you're able to go and drop that off to the dispensary, and they give you money.

10:58:22 You can turn around and get that to them and all of a sudden.

10:58:26 That person is making money, and you're giving them money to go and spend in the silence economy instead of was asking for extra, and then he got busted no no but mike mike just had multiple licenses at

10:58:48 his property he said, Oh, because it wasn't So for the excess of what a patient would go be able to use his Co-huh. Yeah.

10:59:07 I have no Okay, because and and he reaches convention license, taking away a few months ago for a cannabis, but but what i'm thinking about

10:59:38 is, the entire trial was over. one else one day they got like 4 years later.

10:59:44 That's why I say you don't you don't look to win in court right 4 years later, and 12 attorneys later.

10:59:53 To not go to court you shouldn't be charged with the crime.

10:59:55 That is where it gets that's where the families are destroyed This way you get charge for the crime, and you have to show up every month. 3 is a little bit jaded on this issue.

11:00:11 The community needs to w the trust is not there. We've Heard all this stuff just over and over and over and I'm just gonna leave it that Thank you guys for.

11:00:22 Done. Thank you very much. Start on the left. Yes, so either

11:00:32 Yeah.

11:00:41 At some point in and talking about social equity, and how to weave it into policy was, you know, because you also share the market.

11:00:51 Structure. I think it's called working group that there's certainly a very strong relationship between how the market gets structured, and and how equitable or inequitable it is in in the same way. What i'm hearing a lot

11:01:05 here today is that their recommendations would break down. Basically, the 2 categories like ultimate legalization policy.

11:01:14 And what can we do to improve and make more equitable the medical program?

11:01:19 It would be better for patients that will build a structure that will then transfer into a more equitable market structure for medical, and therefore more equitable market structure for

11:01:32 Or so called recreation so I mean kind kind of tracking these.

11:01:39 I'll just run them down so we've got them on the recording, and also i'll go through and sort them out.

11:01:44 But I think you guys want to think about them in those categories.

11:01:48 Yeah, this would be great ultimate legalization social equity but also here's some stuff that maybe we can do.

11:01:54 First, you know, if we have to stagger let's make some improvements number one absolute. all time winner diversify the medical supply chain right horizontalize. take that medicine from for patients as specific from any of

11:02:11 my patients quiet home plan patients case, lease holders wherever you can find in the community longtime multi-generational.

11:02:21 You know. they gotta be 3 to 9 They gotta be They got a test, and then it's up to the dispensers. That's just want to buy it.

11:02:28 They could buy it. That just seems like a win win win for everybody.

11:02:33 Okay, So there's that one it's horizontal it's outdoor it addresses the cost impact of over regulation, which thank you for keep bringing back that with resolution.

11:02:44 But if we begin to diversify the supply chain that medicine is going to land in the dispensaries at a reduced total sale cost compared to what they're paying to produce it, and it's all legal right

11:02:54 it's helping consume my patients so that's all good

11:02:59 I would say that one structural impact that will go a long way for really making social equity real for native wives is insists that any future regulation legalization or medical bills must go through the Hawaiian affairs

11:03:14 committees in both Houses you can have to make that deadly clear to leadership, because without that a lot is get no respect right.

11:03:24 And so, if you need help, is there right? if we need to like.

11:03:29 Look at these things, and there were some really good things that you were mentioning. both of you.

11:03:35 Ran the Senator. no jail time, no felonies horizontal outdoor grow simplified only.

11:03:42 But if you make your threshold sufficiently high so that there's no crime, and then it's easy to get into a license that we're not talking about any kind of criminalization, We make it just really clear that it

11:03:54 is easy. If you want to play by the rules. the rules are easy to barriers, to entry or low make that happen.

11:04:01 Make your educational mandate happen, not only for law enforcement, but for the community.



11:04:06 And then the patient protections that you were talking about Randy.

11:04:11 And I think, Senator, you mentioned some of these also we have to have employee protection.

11:04:15 It's how long is it it's 23 years later, in California we still have no employment protection that is unacceptable, and that needs to apply also to law enforcement law enforcement needs to be

11:04:30 allowed to get access to medicine. That is good for first responder trauma victims, which is what they all are same thing with cps and custody.

11:04:42 It is big, fat, irrelevant to the best interests of the child.

11:04:46 If anybody is using cannabis for medical or any other purpose, irrelevant has to be thoughtified right into the statute.

11:04:56 But these are all things that we can do now in the medical program that enhance social equity.

11:05:05 The social equity

11:05:08 The social equity transfer issue, we will have to leave for another time.

11:05:11 It takes forever, I think, in shining just the principle that Small is beautiful.

11:05:16 Looking at caps on canopy, looking at, not limiting license numbers, and really continuing to build and diversify medical access, including pull off access.

11:05:27 I say that's where we are and and we need to look at the issue of unification or separateness for medical, you know.

11:05:36 Is it better or worse? And is Is this gonna be a long conversation right?

11:05:43 There is no off the shelf. solution. Oh, the last thing that I think you had mentioned, Randy, that I haven't heard about anybody talk on is

11:05:55 What do we do with tax funding for social equity?

11:05:58 The social equity is not just giving people business licenses in high risk businesses.

11:06:03 Right. It means employment opportunities. Their dotcom is related.

11:06:08 It means housing opportunities. they're obviously not tennis related means.

11:06:14 Educational opportunities can't forget the legacy of decades of no financial aid.

11:06:20 Because you were a teenager. you sold lead to a cop.

11:06:22 Your public defender told you top of plea and Bingo.

11:06:28 No financial aid. 4 decades right? How many lives, families, communities, ruin back of that.

11:06:33 Put that in your factual 5 days. we could never forget that this to our eternal shame and notification, some of those programs are existing, and that might help you dodge some of the first metal equal protection.

11:06:47 Issues you know right if we required that all future licenses be

11:07:08 sustainable. What are they called sustainable business corporations under Hawaii law that they have a that that they benefit the environment, living wages where they're workers social justice from victims to the war on drugs that they can cover for data flies as well as a return on investment if you build that in you will discourage large corporations

11:07:20 Thank I very quick. Yeah, I Wanna: respect your time. .

11:07:24 Thank you for being here. Thank you, Senator, for for being here.

11:07:26 Thanks, everyone, for coming out when we showed up this morning.

11:07:30 Looked like there might be 3 of us so i'll fix everyone for making it. I honestly in my heart of hearts believe that we're all here for the canvas plan.

11:07:40 And I believe that we do want the same thing and and we don't want to be impeded in that when money gets involved it gets very complicated.

11:07:49 Individuals organized in such ways. they can, they can confer.

11:07:55 They can bring more influence necessary. i'll run through a couple of things that haven't been mentioned.

11:08:02 It's. not okay. to return from war and have your gun taken away because you're trying to treat your trauma with cannabis.

11:08:12 So the second amendment needs to be protected.

11:08:16 And we need some education here. to make sure that our second amendment is protected.

11:08:22 Right now we have a lot of people that are afraid to grow online homelands that needs to be fixed.

11:08:27 We have a lot of people that cannot get medical life or temporary disability.

11:08:32 Insurance. there's a huge issue right now, with the stigma of kids up being able to medicate on school grounds.

11:08:39 Oh, this is where the kids are able to take out a role they're literally given synthetic drugs their bodies don't know what they do and they're not allowed to have cannabis is that that's

11:08:49 a crime. and can't use cannabis in hospice or long term care facilities fully crap someone's dying, and you're telling me that they can't use canvas or what and you

11:09:03 can't get a commercial driver's license for White department application, and you know our university not that they seem that interested.

11:09:12 But in 2,014 we met with the university, and

11:09:17 It was learned that, they were unable to conduct any research on cannabis out of their cancer center.

11:09:23 Multi-million dollar facility.

11:09:27 So that and not being able to travel to whatever I was hoping that it's legal, and in fact, it is, and that's where education comes in because there's a carriage law that expressly allows marijuana to be transported if it's

11:09:40 under medical license anywhere in the us provided the plane find that doesn't know.

11:09:48 So you can't get on the plane and say illegal you just get a look like so thank you for allowing me to get to

Rough for picking back in on your your topics for i'm gonna get louder.

11:10:03 I'm not gonna get quieter so we can count on that.

11:10:08 And yeah, we should be able to sell to anything that comes in here from another State with a medical license.

11:10:15 It's not just the gift for dispensaries thank you and that was awesome.

11:10:19 Thank you. thank you. any kind of comments at the end.

11:10:25 Right good, We also have an email address specifically for social equity.

11:11:20 So a lot of our committed interactions have specific email.

11:11:25 No. an email Address ,

11:11:51 Passforce those email addresses are on there, so fill those in boxes up you know, any time so as far as the pig, there is also a public safety.

11:12:00 Which does not have listening sessions and for those of you folks who want to be criminalized.

11:12:07 I can't I really want you folks to zoom in and save your piece.

11:12:14 Okay, I'm, one of the containers in that one, but not whoever it is in charge public public say you think we could erase for a Zoom meeting you you know you'll just show people out indoors.

11:12:49 All of them. They probably can candidate who said they work against the criminalized and against now. So this is yeah.

# Kona Listening Session

2022.07.23

Social Equity Group

14:46:42 Hello! Hello!  
14:46:50 Hello! Hello!  
14:47:02 Speak speak loudly.  
14:47:07 Correct. speak up and speak well.  
14:47:15 Okay.  
14:49:21 I guess let's see  
14:54:13 Hello! Hello!  
14:57:00 Yes, might just be us. i'm in here the more I really like this home.  
14:57:06 I know it's actually this whole common it's awesome yeah  
14:57:12 Right yeah.  
14:57:25 I'll give you a permission. Yeah, maybe I had this crazy idea.  
14:57:33 Oh, So i've had this idea for just been focused around.  
14:57:43 Wholesale is that obviously the big issue is that you know there's only 8 licenses, and no one else to be able to get in blah blah blah and in my opinion to diversify the  
14:57:59 current medical change and set us up for the first vacation.  
14:58:03 And get the State. Take social equity whatever seriously is issue.  
14:58:12 Another license. that license yourself has a  
14:58:30 Is found by that license set up which is maybe kind of like a space that they find  
14:58:47 It requires tools or small growers for selling their craft in there and give them a certain amount of time to sell their stuff.  
14:58:55 Oh, Okay.  
14:59:05 Yeah, not too. but missing in addition to the  
14:59:30 And then they share the cost they share the expense. right so they don't have to be this big again.  
14:59:38 It's and if you wanna go okay, I see their reading license  
15:00:01 We have a like a  
15:00:10 Right,  
15:00:19 So  
15:00:37 Oh, there you go,  
15:00:49 Is that every license? oh, totally, by 100%. right?  
15:00:59 So So So okay, have them, you know.  
15:01:13 Better style.  
15:01:21 Oh, yeah.  
15:01:41 Stay around  
15:01:45 Stay around too long. She wants to talk allow his voice in the house for us.  
15:01:57 Right thing is freshman and repressive. so  
15:02:11 I know right  
15:02:22 Yeah guys, but they are not. I don't need to exclude it.  
15:02:43 You could say, whatever you want, gotta make that clear session go.  
15:02:50 Oh, pretty good.  
15:02:57 Yeah. Bye.  
15:03:04 Perfect. Okay, sounds great. So if we've got recorded  
15:03:10 So you guys set this so we're a subset of the task force right?  
15:03:21 Public recommendation specific to  
15:03:48 Okay, yeah.  
15:04:18 Yeah.  
15:04:30 Yeah, no. I just ,  
15:04:40 And I saw that was like a take a break from my  
15:05:19 ,  
15:05:21 Yeah, please.  
15:05:39 That's very John Yeah, right  
15:06:00 If you got time like  
15:06:06 Because i'm out there  
15:06:13 Yeah. it's been a while

15:06:42 ,  
15:06:48 ,  
15:06:52 ,  
15:07:01 Is your email  
15:07:02 Is your V\*  
15:07:07 Yeah. brought me my name  
15:07:13 And like, you know, we just  
15:07:27 The space  
15:07:37 Okay, cool. So sorry. I need to get you in touch  
15:08:23 Check that out. Yeah.  
15:08:33 And see like Stop.  
15:08:45 So  
15:08:49 We're trying to do what  
15:08:54 Yeah.  
15:08:59 And then after this morning, yeah.  
15:09:11 To do co. 2  
15:09:28 It's actually just like you're watching that is like So right now, this ,  
15:09:39 Then you have air gas, basically, so let me turn We capture the art  
15:10:02 That's that's the basic that is how for me.  
15:10:10 It's like the part, at least, not have worry so much about like the standardization, you know.  
15:10:17 We, we just just so we can do run  
15:10:30 So we're at starting. time. but also depends on how much time you all have. Alright, so we can start hearing from you all, for so she gets here. So that you can talk directly to her that's really.  
15:10:42 Fine so we'll still record it and also, if you wanted to talk to her directly, so I mean, do you have some background in terms of like what what the task force is.  
15:11:07 So the task force was Thank you, not this last one that Oh, trying to investigate the relationship like what would happen like It's called the dual dual use program, because it's going to be about the relationship of the like any  
15:11:23 new legalization to the medical canvas. perfect Okay, So like what the impact of any sort of you know, legalization or don't use would have on the current.  
15:11:35 So we  
15:11:40 Investigating different elements tax so likely public health so we're the Social Equity group.  
15:11:49 We figured. one of the best things that we could do is provide information about.  
15:11:53 We fall on the ground on all of the different so in so the purpose of this specific So if you can help us identify in the communities or populations or ways awesome I've been negatively affected and eat right  
15:12:12 or like remediation of those forms. And then what sorts of remediation you suggest or think would be possible in any sort of adult.  
15:12:21 At this point  
15:12:36 Fine it's about how  
15:12:52 And one of the main things about it is unlike some of the previous task force.  
15:12:57 We're mostly like a few legislators This one does have members from all of the counties as well as a lot of agencies who have not been a part of the industry.  
15:13:06 Yet. so it's a really important time of education for the administrative apparatus that's going to be doing things So the more that you can a little bit from scratch kind of start with how you do things in the industry how you do kind of social  
15:13:20 equity. and then what's towards the thank you to the future program that'd be great passport as well.  
15:13:34 And those recommendations don't necessarily have to be taken you know the legislation to decide what they like.  
15:13:41 The idea is that they use the recommendations to, so are any of the legislators that are on the password  
15:13:58 So  
15:14:04 We have  
15:14:15 Not right here. Yeah.  
15:14:27 Make it a little less  
15:14:44 Make it a little less for creating this phase.  
15:14:51 And they need to. I think the more we create this like this.

15:14:56 I I missed the beginning but it's real  
15:15:03 Not just 5 licenses, which was really a mistake.  
15:15:07 You know what I think, the way that  
15:15:10 I think there's a lot that needs to be done like  
15:15:17 But that will kind of start, you know, to put on the recording so that we can hear from you.  
15:15:21 Yeah. yeah. So what's your district? so I represent a district 5, ?  
15:15:35 Your name is how Wanna: like pull it out. Yeah.  
15:15:46 So you basically have the bread basket of cannabis in your.  
15:15:51 So you need to get this meeting because i'm from the cell phone.  
15:15:55 So like we, the lifestyle like that you live growing up in the south corner.  
15:16:02 Canada. wise I think it's very like different from a lot of like the other West Side communities, you know that like even now, kids growing up in terms of like their introductions medical much earlier, sure where the farmers live in like  
15:16:19 operating like down South. you have, like the on all starting from basically challenging cool, like.  
15:16:29 Motion view, I think, is like probably one of the bigger producing areas for our State.  
15:16:33 So maintaining the thing because for a lot of guys that I've seen kind of moves since i've been alive.  
15:16:40 It's the opportunity, for you been creating far as almost exclusively existed between, like cool kenneth you know, like those like historically. I have even friends.  
15:16:59 Their parents moved here. that's how they basically came becoming part of the program.  
15:17:03 It will feeding their companies off so it's a huge E.  
15:17:07 Economic part of like our communities, people seems people alive So I think that's definitely some things you could when we think about like the location of these operations and permitting And like the way that we basically create policy around what is a legal  
15:17:24 form. We need to like be able to work with the gap certification to to make sure that people that are that we're creating products that are.  
15:17:36 We're getting ready for the export because I think that'll be something that'll drive a lot of the cell phone partners to continue to phone.  
15:17:47 Is it. There's the export for this so whether it's export to voabulu maui Other markets in Milwaukee or us mainland, or Japan you know anywhere.  
15:17:57 Like we need to already set up the infrastructure.  
15:17:58 Even the medical infrastructure for us to send for medical growers.  
15:18:05 Some use products, other medical programs. Other countries that only have medical programs similar to how counted on is like sourcing.  
15:18:13 All of these new medical countries that don't have grows like what he needs to be that for, Asia you know.  
15:18:21 So if we can create a situation where the growers are empowered to like, even take that far ahead in terms of building their phone, setting up the infrastructure so that they're not.  
15:18:35 They're not just thinking like, Okay, how much do I need to grow to produce for my account.  
15:18:40 Yeah, this is gonna look like just to think you were thinking about the trigger, For when it is C is our our biggest issue here that anything is going to travel, even if it's an export that's federal So we have to have a  
15:18:59 Trigger set up a hubby that what it is legalized generally, which it will be.  
15:19:06 It's gonna happen that we that our little partners for the first time  
15:19:15 And that was kind of like brought up by project that if we don't move fast.  
15:19:19 It's gonna go federally legal so we're kind of already there, right?  
15:19:30 I mean we're just introduced the Legislation Conference, the Tumor Poker Bill  
15:19:44 For all those farmers. What sort of participation in like, How should licenses, or certifications, or registration in the industry?  
15:19:53 Look up to you, so I I don't think that I think that the effect so sure.  
15:19:59 So I I basically have my experience in medical Canada started in Oregon and California.  
15:20:06 I had in grown in Florida like 3 years ago.  
15:20:10 But so my start half wasn't 2 different medical markets that have been established since the ninth.  
15:20:17 So when I when California began to get more restrictive on the on the farmers, I never stopped farmers from growing. So I think that we need to have like a regulatory system where we set up some basic guidelines So  
15:20:32 that we're, you know, basic health guidelines and also setup systems.  
15:20:38 That is, send device people to get good agriculture cockpit certification, because that's how we can get our

products into stores, you know, and we don't have I I even think that you know there has to  
15:20:49 be a way, for I know this is about medical kind of this, but we also would like to see cannabis be a ubiquitous  
thing that we could buy and Costco by.

15:20:58 You know, like if that's an and mobile product But when we're talking about half the for meeting processes  
getting people opportunities, I don't necessarily know like how that should look I think right now where the so  
processes, I

15:21:16 think that farmers need to be able to front? themselves. the medical market to be able to make a product that  
you can take to the public and say, Hey, like I've got this you can't do that in medical practice.

15:21:31 Right. So I think, starting with that and testing the market in terms of like actually allowing people to  
marketing and product development, I think that's a good start.

15:21:43 Can you can you do that Now, what's stopping us from doing.

15:21:47 I think the I think the bound on sales I don't know I I I think, in terms of you.

15:21:53 I I don't know what the technical

15:22:02 Developing a story behind your brand actually makes people understand that it's not just chat like commercial  
information.

15:22:14 So it's a delicate thing, too because you have had to like toll the line, and not look like, because up into your  
form it's not just a time little I'd like to see you as much as I love the small

15:22:31 growers I'd like to see very high So if we can create, I don't know what the programming process should look  
like.

15:22:42 I don't know what that but I think that we should encourage like.

15:22:46 Oh, something that allows us to do stuff like Jim, or like people that actually are creating a community around  
their their operations.

15:22:58 I mean, I was talking to kind of sporn, and he was saying that actually is legal to have patient to patient sale of  
Canada.

15:23:15 Anything that exchanges product. How about license on that?

15:23:23 But if you are saying like for for carrier sake right now, thank you for great donation. it's been not solicited  
from me, and just doing all the call my heart would give me a suggested Yeah, they can't stop anyone saying I

15:23:39 think for growing my tomatoes. You know. let me throw you you know, I always love that we're trying to  
reach this market going.

15:23:51 What do we do here? you know like How are you talking it's a wholesale tax? I don't know what to tell you,  
but this is what we're doing.

15:24:01 These people pay back in the system, so we can afford to grow it and got it up, you know.

15:24:07 I think if you think of like what what you're talking about in fairness and a system important part is to kind of  
like and social equity as well as like, if you open the medical program up just a tab bit more we can have patient

15:24:21 efficient sales and brand each other and start to work the market without a 2,100 in place.

15:24:27 Then you now have social equity as well, because anybody can go out hopefully.

15:24:32 They Atlanta stuff, not anybody got land or a place to grow, or even a small indoor operation in your house.

15:24:39 You can start to grow every brand yourself and start to get face to patient medicine, A little bit of small taxes  
on it, and stuff.

15:24:46 And that group, you know, through the medical program seems to be that

15:24:55 No, I I know I'm just thinking about what you're talking about and move forward, talking about legalization  
and stuff like trying to figure it all out.

15:25:08 Almost, sees.

15:25:12 In America.

15:25:24 If that is it, it's almost like vertical integration. better model and for medical, because in medical choices so  
much more that we have somebody that has drafted cannabis that nobody else has It I use It

15:25:48 By having the verification, I think, social equity all over patients especially because they don't have the  
problem choice.

15:26:00 If there was any way that we could just swap this out and say, all your medical licenses can now have  
commercial, and let's rebuild the medical licenses.

15:26:11 Not necessarily the program, but it's almost wish we could

15:26:21 You think about it? Think about the insurance market right now?

15:26:22 Yeah, an insurance commission was run by the state and they set the prices. They're the ones that oversee the  
regulations space.

15:26:31 And then you have insurance companies or private insurance to it they're trying to compete with the compare that to what would look like.

15:26:44 Put that model over the The issue is that you know, purpose of that Insurance Commission is to make sure that everyone is is operating within their framework.

15:26:55 They give it by us right? So if you if they were to flip that model, then you could say anybody could sell insurance to anybody. It's fun to speed on my insurance.

15:27:05 Looks like if you get an insurance license sell to, anyway individuals selling insurance.

15:27:11 But then the Insurance commission, the the regulators essentially would have right right like Oh, now we have to change different rules, because we're We've changed.

15:27:21 We've made our rules, so what good here is to think about in that space.

15:27:31 How do you allow individuals on that global playing field that to enter that regulator Cisco in a way to make sex for them?

15:27:38 Not push it out. failure are you already. doing what we are doing.

15:27:52 I mean that's the other thing, too, is all like in what way? Just the regulatory market to change to allow that type of blank field right?

15:28:02 If you look at like what main is done right i'm gonna keep going back to me.

15:28:07 If you look at Maine, and what they saw okay we're gonna opens up some dispensaries and go medical here.

15:28:15 Medical was all, and then they were like, Well, medical is going to be solved. the medical, no matter what we want to do.

15:28:21 What do we do here? Very well. This is the least we can do.

15:28:27 If we want taxation this out very quick. So they quickly opened up the whole medical system.

15:28:32 So people can do exactly what they're doing and there's smaller crap things. you don't need like like your parent insurance.

15:28:40 No people would get away with the high insurance companies taking over.

15:28:47 When we have like this, more craft, cannabis, market, and smaller entities.

15:28:50 Then you start to kind of build something no and it's a little more.

15:28:53 I think it's a little more fair because everybody kind of starts off relatively the same.

15:28:57 I mean maybe not so much of the same you're looking to get away on a plane like Okay, I want fairness.

15:29:07 I don't want to be the only person with a license. It's not acceptable right.

15:29:13 It's gotta be like you know and we've already.

15:29:15 Got so we've got 33,000 meters right Now, Maine's got a 111,000 You might definitely see us go on to like 100,000.

15:29:22 Notifications. it's changing quick themselves we know what's going on.

15:29:28 So now you have a 100,000 plus met that are all in the system, right?

15:29:33 And so now you have you. Have opportunity. Now, farms and people and and maintenance got to the part where you know you're not even required to be on that Tmk Any medical person can sell to another medical person.

15:29:49 Please just let's do taxation and there's a lot of things that cannabis is really hard to compare to a lot of different models.

15:29:58 Right insurance wherever the case may be it didn't really start off on a fair plane, too.

15:30:05 There's a lot going on right now. there you know is corrupt school politics, as we all know. You know.

15:30:12 5 years ago we had a task force. team. to work out how those programs work customer totally ridiculous, totally any way you look at.

15:30:27 It was horrible, and establish what you've got 20 plus years, 30, 40 years of legacy goes in Hawaii.

15:30:32 And now you're saying no you can't sell your body to make money only gonna open up these 2 dispensaries. and that's the way it's gonna be that is a huge problem already you know.

15:30:42 So like recognizing recognizing, the immense amounts of experience that are well, whether it's local here in big island or throughout the islands. Yeah, and finding ways to bring them into the medical space, knowing that they've been growing a vast variety of

15:30:55 strains specific to different people one of the things that we're kind of struggling with is there is how to incorporate that into a system that we can get the legislature to officially like adopt

15:31:08 because they're still in especially for the agents are still going to want a fair number of regulations, whether that's seem to sail or high security, or regular checks, or audits.

15:31:19 Things like that that A. make it expensive, and B are not super inclusive of kind of those those putting all of those regulations on the current kind of piece.



15:31:29 So How? what's what's the Middle Ground?

15:31:32 Can you already go now as we continue to be regulated into the future?

15:31:36 But why are we going there when we're seeing better states that are not flying with that stuff?

15:31:40 You look at me. You were doing their own testing so that's why we go into this extreme offensive security kind of level.

15:31:47 We're not there anymore. all across the united States right in place. I mean, this is really these people politicians need to be educated, and they need to know that.

15:31:59 Hey? you set up a dispensary system that has a large system, but we're not there anymore.

15:32:03 We we've left that you know what I mean we're not especially the medical program.

15:32:06 Now, if you want to do that with 21 over record you want to build these laws and bank that's understandable.

15:32:13 But the medical program we have never been. there, never had to be.

15:32:17 We never had to have a security system we've never had to have testing, and we know what we're doing.

15:32:22 And this and It's just it's just so not educational When you hear people going well, we wanna start discussing system because we need to test the products.

15:32:32 Just that fact alone tells me that you're not educated in a huge way.

15:32:35 There's so much data out there, peer review about testing a canvas. How easy it is to do, and what needs to be tested, What doesn't it that no homeless but done at all.

15:32:45 So here we have it. How do we provide this information? So when we look at the policy, and I think there are 2 main subjects that the regulators like the hard part, So one is land use so I operate

15:33:02 hemp fiber him farm and I think that for us. the the him bill that passed in 2,020 really killed the industry for us because they didn't have for it was like this, and they did we didn't have

15:33:18 the opportunity to give some feedback. I mean, I called all the legislators who tried to tell them that this 500 foot rule is gonna kill our industry in him. right now.

15:33:30 You cannot operate a headfield within 500 pizza.

15:33:33 Any residential structure. So for us, that puts us Rl.

15:33:39 From where we need to be in terms of logistics.

15:33:43 Transportation in land that we have access to, you know, like So all right, and so the then it also like in terms of having access to power access to clean water.

15:33:56 All of these things that have that are on their minds when they're trying to regulate us are not on their minds trying to regulate partners like moon farms and these big big farms that don't have not necessarily this the infrastructure that you

15:34:13 need to operate a help for so when we're talking about equity.

15:34:16 I think it's important for us to look at the land use policy.

15:34:24 Make it possible for people with a homestead, or people with a big backyard to operate their their their farms.

15:34:33 Because if you just say that you need to have a 60 to a 100 acre farm for you to operate hen operation, what are they gonna say?

15:34:46 Even if you look at the medical lab, use policy right now, everything has to be without cyber, without smell.

15:34:54 How do you create an industry where we, where we basically need to hide our product?

15:35:00 We need to be able to to our our work like a pig. far, if you can smell a pig form, and you think that you're the the thing is kind of this makes Bill noise.

15:35:12 Yeah, if you've ever been next to a pig farm do you know the kind of place that you deal with.

15:35:17 We have chicken farmers everywhere through this state, hey?

15:35:20 Make a pollute the day I mean. I I support small chicken farmers even, but they have practices that might need pollution.

15:35:31 Oh, yeah, they have noise solution that they cause problems in puna like you've seen it.

15:35:35 They have their thing, but they're able to operate with their chickens.

15:35:39 You can drive past their house and you can see their chickens and they're not gonna get sighted.

15:35:43 So when we talk about equity, only a certain amount of people can afford to start up business where they build a brand new indoor, even if you so imagine if you say, hey, we got sun growing in a in our facility, where

15:36:00 you cannot smell it. You have to basically have hp or a greenhouse, and I don't know if you guys are far farmers, but try to cool a greenhouse in the middle of the day with a sun shining.

15:36:11 Through it. It's ridiculous out here, right so Imagine corner right?

15:36:19 Cona is a very dry, hot point. We have. We have 2 ringing systems.

15:36:24 What most of the year, if you are anywhere industrial in 8 quarter, you're gonna be blazing on right perfect for

cannabis farming.

15:36:35 We're at legislature. cannabis farming in this we have a world brand that's recognized around the world is called People recognize this region as well.

15:36:47 The best kind of district regions in the world. if you force us to grow our candidates under like is over.

15:36:56 Yeah, So it's super important because in the international market cool no Hawaii County is a brand who know he's up around.

15:37:10 They have their own brands. You should write this down who not butter is all right.

15:37:15 It's all Gram corner goal is our bra Koai Electric, So if we basically set up the land, use policy where we cannot actually capitalize on the brand, the legacy grows up created and we're doing a

15:37:32 huge disservice to the industry. And then on another note, I think that we need to discuss, smell and site like those are 2 things that we need to ensure.

15:37:44 If you guys want to do that in the wreck, and you want to regulate that to make it outside or swollen great, go do that.

15:37:51 What medical growers need access to medicine, and that policy is gonna just increase the amount of medicine so given given that right, try to parts out a little more detail.

15:38:02 So say, let's just say if the hypotheticals.

15:38:07 This can be would recommend apple growing right. but knowing that the state, you know they're gonna want some type of breakdown right in some shape of form, but it will never allow.

15:38:18 Can it be sold like or 2 pro like class right? What reasonable regulations could we recommend it to an to an agency that says, we need this to be right.

15:38:29 That makes sense, I think, we need to identify the like What is the threat?

15:38:34 Looks like what other like We need to explain what that is.

15:38:38 And then I think I guess what that gets into this time. policy.

15:38:42 Address. So if your neighbor comes that you have, they can see your wheat plants, and they can smell them.

15:38:51 What is the difference between you having a week, 5 min to give you phone? right?

15:38:58 Because you can legally have that full scene, and have the same, and your neighbor can have the same.

15:39:03 So if we're talking about equity if the if the chicken farmer operates in a great market, because we all understand that chicken partners are operating in a very very dream if they can operate in place site, in

15:39:16 the greenwork. What is what like what is keeping us from operating like that?

15:39:23 And then i'll just add to that I think point I think another.

15:39:26 I think a better way for us to regulate. Garden is square footage.

15:39:32 You can kill me. Yeah, I can like I can grow 12 flags for patient 10 times per nation is patient per patient.

15:39:40 That count numbers are arbitrary like They don't necessarily have have much value in terms of medicine.

15:39:49 I mean, I would say, per patient, 10,000 square feet Take a backyard no 100 by 100 for everything involved, because a lot of patients you have to understand 10 plans for a patient that needs flowers is not the

15:40:11 same amount of medicine that a patient that needs rso or or extracts that garden is not gonna produce the same amount of medicine for somebody who's seriously ill, as somebody who has their classes.

15:40:27 If this, if we're talking about every and access to medicine who are lead to say how many plants appreciate needs for their condition.

15:40:37 That's why, I think it's a little bit like it doesn't necessarily exist.

15:40:44 I mentioned a minute ago that one of the big issues is education for a lot of the legislators who will be writing or you're putting through conference these bills and kind of these issues what sorts of

15:40:54 things you recommend. 2 provide that education to them. These legislators are so busy there, they are generally so much.

15:41:05 How can we keep canvas on it? Well, I think

15:41:15 At rosen dolls freaking I don't care who it is man I need to be some really good forms.

15:41:19 They learn from the lessons that everybody else has and bring them together, you know, even like a conference or an expo or something like that will be a great because here we are trying to make recommendations 3 people, and they're gonna go there and make

15:41:32 recommendations. but it's really there's so much involved there like when you ask him what's a perfect girl even make that number.

15:41:40 I can read off the working right now, hey? Once you get your license. You grow a maximum 30 flour and plants and 60 vegetative plants. Now everybody's pulling numbers out of it.

15:41:53 Back. Yeah, which is fine. But it's like you know we're trying to get to the point that when are we gonna stop

looking at this plant?

15:41:58 As like, hey? for our society right and that's the way legislators are formed.

15:42:04 Policy. we do have a foreign policy. they're all looking at it like we need to control this.

15:42:08 We need to control this. We are so far past that with legalization on the corner that we need to control taxation.

15:42:17 That's about all we're going to be actual every something else is pretty straightforward, and we can control we can do tier licensing.

15:42:23 There's so many different avenues right now, and Dea says you can .

15:42:31 Scenes less than Point 3 now have a seed organization

15:42:48 On goal would I would I happily go into the system and pay something taxes and get a pin counter. I'm right I would.

15:42:53 But we're not give them that opportunity right now, it just seems basically like the medical dispensaries were created.

15:43:03 And then there was this big push to say we got all the infrastructure.

15:43:07 Give it all to us, and then that that just kind of seemed like the way it was heading. And I think some of the pushback that you get is people that are kind of smart enough.

15:43:18 See what was going on. so we don't like this influence being pushed into the capital.

15:43:22 That is not truthful to what our practice. This is truly our what we are truly doing.

15:43:29 What hazards do we present to ourselves not very much there's no report.

15:43:34 It's pretty obviously Senator bernabeur is controlling this and that's department a lot of power our cars and stuff.

15:43:45 I think that's They're not even not even at the table they were supposed to be out there with department taxation.

15:43:51 He's on that board right there

15:44:00 But I mean I, when you go back to like Okay, give us i'd use the licensing stuff like that There's a little more in depth conversations.

15:44:09 Take your picture state if you're picked your flavor and really, you know, we want to focus those conversations not necessarily licensing teams as a whole, because you're right, that is a very deep conversation.

15:44:19 But what element of a licensing team will most benefit social equity and or benefit the effective populations? right?

15:44:26 So like, regardless of how the license even in works out what particular pieces, I mean, Look at it right now.

15:44:33 Look at life Better for life, right? Anybody can go get a medical license pretty much right now.

15:44:37 There are symptoms and stuff we're pretty lax so anybody right now can go get a speech 9 card right?

15:44:45 10 plans for 200 bucks right I mean that's not really far out in the social work.

15:44:54 Yeah, I know so I mean. you've already got if you could build the medical program. So there's a little bit more clarity in it.

15:45:05 A little bit more legalities in it you've already got a great social record program.

15:45:08 I mean it's awesome like we're all going back to the old go to days where people are selling we do each other.

15:45:14 Patients are some of the patients I mean like that's kind of already taken you back.

15:45:18 There. Are we trying to go to super wildlife? No, but we are trying to get back to social equity?

15:45:22 That's the first way you you enjoy after that if you're going to 21 and over.

15:45:27 Then it's gotta be to your licensing and affordability, you know.

15:45:31 You look at Maine, you know, like to grow at 800 square foot, indoor outdoor it's about the 100 bucks.

15:45:37 If you want to do a 1,000 square foot indoor opera it's about 20,000 bucks, or whatever so you know.

15:45:46 There I wouldn't say that that's really social equity but it's a program that you can that's what you want to do. I mean now when you're talking about giving out licenses for they're gonna go 21 over

15:45:56 which gonna happen, probably, but for retail spots do all that stuff.

15:46:02 You look at me they're doing it right now man there's literally like 384 retail storage right now, somewhere in people's home.

15:46:10 Yeah. So that social equity all the way to the Max.

15:46:13 And why are they doing that? This brick and mortar is the most expensive thing in the world?

15:46:16 They've kind of backed off that so when you're looking at all these stuff, I think it's where you need to get people in the room, and the task force to say Hey, what is working here you know like we had some

15:46:26 interviews with California Washington. But the most important people that are succeeding weren't even on that call. those are mostly all the people that have failed, I mean, are now saying, hey? First thing we did was go too fast on

recreational we left

15:46:38 our medical program behind. one of them said, that Oh, you know every single one.

15:46:43 That's up problem you know what I mean so not you've lost that whole thing.

15:46:45 So you know that's kind of where I stand at you know like our our farms growing fast.

15:46:51 We're at like 22,000 people bounce back all day long.

15:46:54 We're trying to figure out how to move forward and you know I brought literature because I thought this means to be a little bit bigger.

15:47:00 But you see, they're small so the information is not getting out either, and that's really really important to me.

15:47:05 I have a beautiful dual task meeting with people and kind of load them up.

15:47:12 You need that. Add a little more time to it right like 2 h from 10 of us.

15:47:15 Sure that's a good start. But they really need to have some kind of conference, something that kind of like really takes us to another world that takes all the senators and the politicians rooms into like a thriving canvas industry

We talked about that this

15:47:31 morning. This is going to be kawate's top money making product in years ago.

15:47:37 It's gonna blow their calendar right now it's it's happening everywhere.

15:47:41 The time. moment is going to be

15:47:48 Doing what was medical canvas and and

15:48:02 Have a booth come down see that's coming I know It's a little bit laid up we, you know, we'll be in the left session.

15:48:12 So it' try to get some movement going here, we understand that M. Pp.

15:48:15 Just put out a about for how people feel about legalization. marijuana, and they got about 20% respond out of all politicians, there's a lot going on there.

15:48:27 2 questions. First, Rep: If you have any particular questions, feel free to to jump in and ask as we go, second in regards to kind of the social equity of licenses, one of the things that lots of States are

15:48:40 doing are reserving them for a particular applicants from whatever community is that part of y'all's consideration.

15:48:48 Do you think that's even necessary? if you have kind of a tiered system?

15:48:51 What are your your feelings on that there's poplars about these?

15:49:00 Well, so Illinois has it. New Jersey has it reserving a certain amount of license.

15:49:09 Connecticut on all of their first licensing app that I don't know the market when I go into social FBI.

15:49:13 And what is that place for cultivation, side or retail school?

15:49:18 Whatever they can. they can get all that for so they say, the individuals.

15:49:21 The first ones to market in this license to qualify as a social.

15:49:27 And then those requirements to lay out saying from a zip code.

15:49:31 It's been disproportionately curved by soil are African-american.

15:49:39 I think when we we are looking at social equity it's I guess we're asking like in what ways those communities outside of just saying in general terms, everyone could get a license.

15:49:53 Right. So you're talking about maine model right where they have all these different retail stores?

15:49:59 How many of those individuals that have those stores come from a disadvantaged community that would maybe not have the resources to, as it comes up just to go get a spot have it in their house, because it's a most

generational

15:50:11 family. All the other considerations right? How do we make sure Those have disproportionate audience. If you can't afford to have a retail spot in your house, we got bigger problems such way.

15:50:22 Almost that split up.

15:50:25 Yeah, I I get that Yeah, I think we can get in the weeds when we talk about like, like giving certain groups like early, access.

15:50:37 Because I think a lot of these businesses are partnerships.

15:50:40 Anyways, you know, you might have the money done. you might have, you know.

15:50:46 So in the end, I think a lot of people be able to leverage these situations. I will end up with outcomes that are on in sure like.

15:50:53 I think the extension is great like you know that's cool but I think in the end, like 2 to have people that are not necessarily even like they don't understand the industry and you know like it's a new industry and basically

15:51:08 creating opportunities, but they don't understand necessarily the the long term comes because they have to participate in.

15:51:14 I mean if you look at the industry too, I mean we're already out here so it's not necessarily like we have it been a 100, and I understand like human nature of like inequality like in terms of it's

15:51:28 like lot for you. that is hobbies. but I also think like we might end up with, like, you know. and any consequences from over regulation of who we allowed to get to.

15:51:40 Yeah, here's a thing right so an Mcpa was a minority association.

15:51:50 They come out with a great report, and said if it's left to back It's left for everyone that's good opportunity.

15:51:56 Equal opportunity, and anyone without these measures of who I work ties to get what we have right now.

15:52:04 So that Cba says: social equity has been an complete failure across the Board.

15:52:09 The majority of people in cannabis around the nation are white, wealthy, and come from communities that benefited off the world.

15:52:16 So African, American, all these individuals are 10%.

15:52:25 I would imagine those numbers have to be skewed by environments, or I can't imagine what you look like It's not like everything manny could talk about a place like Maine. It's not skewed by big business that's

15:52:38 very different. If you have big business players come in and free wrapping everything up.

15:52:43 So there is no licenses social equity. can't get to them. That that seems to be more like the skew for me. the nuance in here is, like for example, right who has home actually has you know been able to

15:52:55 benefit from Red lining districts has been benefit. benefiting from having generational wealth, has owned homes for 4 generations in Maine.

15:53:05 They can open up a broken order in their own house. Do this right communities at a disadvantage.

15:53:12 Don't have a household. Yeah, necessarily take your rental and Marshall operation.

15:53:18 What are they gonna do? then, that's what some Some States are doing?

15:53:23 Some States are saying, Look, if you want to get into this industry, you come from this community, we will give you a grant.

15:53:31 We will, we will. The State has these tax dollar set aside for this, or gets together and say, Oh, you're from

15:53:43 Just hand out licenses

15:53:52 There. Because, yeah, if there's money available for for people, that are these details are like, Oh, should we have is what we're trying to do, should we have a white house. These types of programs where so for.

15:54:08 Example, we get an individual from a disadvantage, give them a technical assistance on how to start a business and how to.

15:54:17 So it'll just come in blind and then .

15:54:22 Fail? big island Is that, or below the property? How?

15:54:25 How are you giving them an opportunity for businesses I don't know How do you make sure that somebody's gonna be able not just to get the best?

15:54:32 But they have to succeed right, and that's the best see that should be displayed.

15:54:40 That makes sense, and like I, I would agree we could all come together. They come together with a funding plot.

15:54:48 Education grants were low. Yeah, that's a great spending a licensing team for someone Yeah, I I see if they're kind of all off of we soliciting questions.

15:55:08 And how to get my opinion out. so take it for great assault.

15:55:11 But if we see a Max at mass access of individuals and in rates in California, or that will triangle the one moved away that have the capital, because their family has some money, buys a property, and then gets a low end

15:55:24 license that takes away that opportunity from a native alignment a legacy grower.

15:55:32 And now they're competing against Guy or woman or never!

15:55:37 This came from the content, taking away that market share do something like Well, yeah, maybe.

15:55:46 But I mean in the end I don't think we're gonna have you know, in the library.

15:55:55 So I I I understand like that that's another necessary concern but also why it's been up there.

15:56:00 People left for what I need to go to a moment to go create families and and plenty people.

15:56:06 There's a whole community up there, so if they cannot come home because they were born in Hawaii, you know, like But he got the opportunity now to create the industry.

15:56:15 That does we have an opportunity to say you want to grow Cannabis that is marketed and branded as cannot done I mean is what we're here Now you're talking about it's a

15:56:35 state and city program, you can leverage their bargaining hour or or land ownership and to negotiate what that looks like.

15:56:43 I mean so that's what New York is doing correct New York is using their city county leverage.

15:56:49 Their negotiation power to get parcels bye.

15:56:55 Property here towards those who have had this 50. So say, for example, we have a big, full time 1 million dollar company.

15:57:03 They have pretty big barking power to get, you know, a property downtown short.

15:57:08 The city who is on that same plane field is now negotiated table for a social equity.

15:57:13 Where's that money coming from where's it coming from any State like?

15:57:18 What is the time? Where is that money coming it's coming from their existing medical market?

15:57:26 So the medical taxes they're bringing in or the the licensing the rain and licensing fees, and that's going directed to these. programs.

15:57:32 So this is it? So we're back out again, you could speed it from the medical project.

15:57:37 But yeah, Presently medical program doesn't even click I think it's.

15:57:46 It is shameful

15:57:52 And the director. this is medical campus sure says I don't know.

15:57:58 I don't know how many I don't know I don't know we don't have that information it's inexcusable to digitize I don't know when she says she doesn't know how many

15:58:08 cooperatives are out there. Okay, to that or How many cards are on site That's inconceivable.

15:58:14 You wonder if information is How difficult I mean There's only a few numbers, and they well, they just can't know where Where did all the money that they need?

15:58:25 Where is all that money out Company was set up, so that they would have the high caliber office that they so they they take in about \$160,000 to run all licensing fees, getting all of the the a small patient

15:58:42 peter all that. It takes about \$460,000 of operating box, or you know it takes them about 700 to 800 to do what they do now.

15:58:52 So they're operating in deficit go on what they can do well.

15:59:00 They don't have that many staff members if they have like these, like their plate is this high?

15:59:03 And their budget is is small. and that goes to the government right, like the government.

15:59:07 If they wanted a medical program. it is successful. They would have funded that quote It's also a funding problem revenue problem. But it I think essentially, it's a funny problem because we have so much interested.

15:59:24 You know what I mean like you could say like the medical counterpart is problem program. doesn't pay for it.

15:59:30 So but it's pretty much like it should be paid for considering the amount of like my interest is they talked about trying to fix that cause.

15:59:42 What happened was when the program was started. the licensing feature set.

15:59:46 They couldn't change that right so now, we've given them the opportunity be flexible.

15:59:51 State your own feature. What would you want to charge a license to read their license?

15:59:56 Make you hold to make you sustainable instead of saying, only charging me 25,000 only charge me whatever currently So you're talking about this.

16:00:07 So Department of Health now has the ability to say I can set my fee.

16:00:12 Whatever I need to cover my cost was before it was mandated charge of dispensary for licensing access, and when they were getting those funds that was that wasn't any doing of the licenses but that was a

16:00:25 legislator setting flexed on how 7 companies have all the access to the patience of retail sales at the program.

16:00:37 Ting the kt. But then that goes to a general phone.

16:00:46 How does this? How do the fees to operate as basically a monopoly?

16:00:50 Not reflect like your market share. You know what I mean. like you basically got the whole market.

16:00:55 So I mean your fees should reflect that in paying for the system right like.

16:01:00 If you're I mean they're operating so they're, cheaper set, the market was available for So that's an issue.

16:01:06 I mean I just I would actually like change the subject right now, because if there's a very big topic that i'm concerned with right now, and I think and it's enforcement protocol.

16:01:16 So. So if there's a college in place for enforcement right now, as far as I move there's no policy for it.

16:01:25 I've operated usda legalized have farms where these guys come into my spot like rambles like, Say, don't have any background information on dean phone number.

16:01:39 Comment information on my the. They come right in like gate, and they start Jessica wrapping.

16:01:46 They send one guy out on my farm they're driving all of over my form. But we need if we're gonna have successful cannabis program period is enforcement.

16:01:58 Protocol that is not punitive off the back. You are gonna treat me as a criminal.

16:02:06 Yes, and I have, and I have all of my documents.

16:02:09 Got it. I don't think that that reflects leave a market But let me tell you even more, even more, if you have.

16:02:26 If hpo A. if H. to the department, of hell if they're regulating cannabis, why are why are pull these clothing up to my spot first first State?

16:02:41 Why are the police the first one to send just? and we would like to avoid the over regulation or Gps imagery that people use to send a baby?

16:02:51 Because you can just send me an abatement, and you never come to talk to about my situation, because I mean, we know and humble.

16:02:59 As soon as legalization happened they sent a payments to every medical grower out there, and these people have been on their properties for years.

16:03:06 Right. You would like to promote a non punitive enforcement.

16:03:12 Call this yeah first goes with the organization that's regulating. So whoever you put charge of cannabis, they have a team that shows up to your property, ask you your questions.

16:03:29 Looks to see it. See your your stuff. You still have to go through the steps, step onto my property when you can.

16:03:36 Oh, you can always come to my farm, stand outside my gate, verify my license.

16:03:43 If I break it along where you come and bring the swap because you don't know how traumatizing a rate is until you are the only on your phone.

16:03:53 If You're the only guy on your farm and 10 cots show up with machine bonds, and you're the only one there to talk.

16:04:01 That's a totally right situation for any kind of this driller, because you're gonna kill the industry because a lot of you your neighbors, Then your neighbors that are going to see that everybody's gonna start hiding and then I

16:04:15 think in the end was just more indoor, which is what we felt on this year.

16:04:18 So I think that point is well, so we need that. What is it?

16:04:22 Well, well take it because yes makes it when when it's been brought up.

16:04:31 Individuals were regulating the spaces. Well, you don't even have enough inspectors to regulate what we currently have.

16:04:36 So how so? what are we going to do we're gonna pass off to have that capability and have the funding and the bodies to do it?

16:04:44 Well screw it so. So what we need to do is is when you bring this recommendation to us to have that we need to come up with a recommendation.

16:04:51 Need the full fund a a part of the regulatory agency that comes out So it doesn't fall onto the next person in the line, should be the last option exact law enforcement.

16:05:06 Should be when you ignore everything, and you're operating and you might have unsafe traditions right but for a black count, violation, pro possible platform, violation, or for smell, or whatever

16:05:22 What? What is the policy? do they have? ?

16:05:29 Take samples of my my product? Do they have permission to even step on my property without a sort of top?

16:05:35 More. because right now, the way that the the law is So vague in terms of the enforcement, it basically says, like, if you're naive and you don't understand your rights. a police can say this is the policy I can come

16:05:48 from any fats you want, and 90% of the people that are drillers will let police onto their property because they're afraid of some kind of, you know.

16:05:58 Punitive things from not letting them or not.

16:06:08 They know this shit is happening right and They continue to move forward with it. who's responsibility?

16:06:12 Is it? and that's the ui and checking who is checking the poh to verify you guys just know what they're doing? Yeah, like.

16:06:24 But even hdo because we do it so if I log my So if I log my head papers with Usda, everyone should exhaust all of those on the that research before even show up to my phone like they shouldn't be showing up to

16:06:47 my farm asking if I have a license they should know it's a license area, and it's and it's love, because you know usda basically knows every anger that's that's a of pip

16:06:59 form, and that's just for hand by things like this will be taken away from law enforcement right?

16:07:05 So it's a new age too, right now, because, you know, we had to show up on our property with the barbara.

16:07:12 Narcotics go into container and take clones that have labels right next to give. So this is another problem right?

16:07:17 They're just showing up I don't know what so we're all grown up here.

16:07:24 We hide not like not at my phone I mean it's ridiculous, So you know I have Michelle and Tammy on my farm with 15 arm was spent in 2 Helicopters watching these guys

16:07:33 take plants out of my container I don't like going on here.

16:07:39 I tell. I tell Michelle i'm like let these guys take these patients cutting.

16:07:42 She goes to me there's nothing I can do about it to work, man. there's nothing I can do about so who runs this show department and help asking for help it's Obviously, not so now it's actually department of public

16:07:55 safety run so. and then, when someone does come on your property, what is the violation?

16:08:01 You get a fine. You get your car take it away. Did we just start taking plants and doing our own.

16:08:06 We're gonna we're gonna run this down to the way. if you want. So this is just ramble rabble. right?

16:08:11 This can go off the last 4 or 5 years. so my point is though we've been rambling about this for a long time.

16:08:16 Nobody has done anything about it. Try remember. the whole thing is happened recently about the those guys are selling Cbd stuff you know. everyone has been kind of talking about this for a debt that There is people in the kind of gray space that are

16:08:40 selling the desktop that have high ts account There you don't know what to do things like that nature, but everyone kept saying to the barbecue, say, Well, it's not our jurisdiction of things and using not our

16:08:50 jurisdiction, or it's so low level was King Kate back and forth until it was an investigation that came out on the news, and then they were forced to do something, right and even when brought it to what's up

16:09:04 they said it's gotta be it's the same thing.

16:09:12 I mean that's a cvd thing that we're talking about exactly. But it's the same scenario that's playing out the department she said out of my control So

16:09:25 that's thing is not explicitly written at all it's explicitly written in the law that you kind of sell health to 8 products.

16:09:36 Yeah, it's already it's a whole lot that way.

16:09:40 It's to be a law. It is on the united States twenty-year-old, not employee that. yet so it is a regulation.

16:09:47 This logic came up it's an admin it's not it's not a long.

16:09:53 So they're actually trying to pass the latter

16:10:02 Right admin rules are enforcement so right we're not the the the departments will always say it's a slippery slope.

16:10:15 If you want us to start please would have to enforce admin rules on later on, they would have to that enforce an admin rule at someone's farm growing organic you know what I mean like it's a slippery

16:10:28 slope, so they don't want to get involved in that and they're seeing the gay all right.

16:10:36 Where is the professionalism, and say, Hey, this is going absolutely don't you realize this?

16:10:49 But why are they allowing this to happen? what what is what it justifies them to be able to say, Hey, I can make this call right now.

16:10:55 I'm: calling in department of public safety? Okay, So yeah yeah, What salad state in new legislation for a dual use system?

16:11:05 How do you fix this

16:11:08 What you build a body. you got it build a camera's body. It's gonna be all professional, I think I totally knew.

16:11:19 Maybe even perhaps like another organization, that's separate and that's. a little more difficult start to hold your branch.

16:11:26 But if you're gonna start you know again, here we go back to Maine.

16:11:33 You can see how they're doing compliance you can see what they're doing it's not these braves.

16:11:36 It's like we're gonna come check and see what's like it's all kind of written out you know what I mean.

16:11:41 So I think I think my hardest part is that's like lost stuff.

16:11:49 If I ever have a police officer called my yeah that's it we're going now.

16:11:54 They're not coming on, because i'm telling you a search one, and they show up like 2 mondays ago, When I was talking they showed up trying to say Hey, what we're doing?

16:12:05 They showed up my friends far and we're all cooking as well. the way you get a lawyer and we're here to do a laboratory to see if you have any of these 17 that we're allowed to do this and if you don't have a chance to tell me your

16:12:14 rep. We call our lawyer now that's absolutely wrong we got to make it minutes of there.

16:12:19 And now try the Department of Public Safety is now so involved in this, if they're trying to find ways to get on our land.

16:12:25 And do just nowhere inside. So this is the problem that's going on.

16:12:30 This stuff is on off, and these are government bodies leading this stuff.

16:12:33 Now, so this is a huge problem. If we can't even fix this kind of ship.

16:12:38 How are we supposed to move forward? Make marijuana Paul yourself stuck back in time that the sheriff's



office is still doing well.

16:12:45 Reagan operated part of shit. How can we even move ahead?

16:12:49 These guys are still running the system. So this is like a recommendation from, at least the social equity.

16:12:57 But even the task force general to me is recommend a body or agency, to have regulation power that does not force criminal aspect of i'll even say, before we even get there.

16:13:13 Let's make a non. something that is not yeah something where it's the click boards before whatever you said like before the machine guns.

16:13:22 We got. We got the quick boards. make that first like we wanna have.

16:13:27 We wanna have a body that is in that ensures that chat of this is regulated, but also success.

16:13:34 That's all cool that's down the road and I think that's a harder problem.

16:13:37 Then first us making a smart that are already there, because they need rules too.

16:13:47 If we have to. if we have to operate, if we have to operate under rules they need to like.

16:13:52 Just so. we all know what the protocol so we can conduct ourselves safely and not feel like we're great. Yeah.

16:14:01 And to put myself in shoes of of say, department, head, or something of that nature.

16:14:06 And I hear from the community that hey, we need this protocol in place. first.

16:14:10 So you guys have the resources, all of that as a department head i'd say, Okay, how do I implement it?

16:14:14 How do I get the resources for? who is going to hire these individuals?

16:14:22 And what training are they going to get? Those are the type of questions are trying to answer as well.

16:14:27 Right. So right, and that's a funding problem. I'm saying that we can do this almost free like we can do the trainings.

16:14:33 What in that? Right now we have a box like a like a rules that we have to follow essentially.

16:14:40 But when they show up to enforce the rules it's not a standard practice so like that's what i'm saying is like, even before we get into like funding more than someone to to show up and if it's not police, gonna be

16:14:55 somebody, and then that somebody firmly has a job operates.

16:15:01 They have to somehow get a paycheck. so so like the department of Help right?

16:15:04 They have 3 or 4 inspectors, inspector licenses currently and again barely keep up right.

16:15:11 So if they would need another 10 to do the inspections on lines, checks in general there, they're gonna say, Okay, we need 10 more inspectors.

16:15:23 How are you gonna do that for all or \$500,000?

16:15:29 So we can kind of club with that solution, like what so do we do. We have our seed. the the just clipping the medical like.

16:15:39 The medical is then always kind, child, at least extra money for the Po age for admin and stuff like that medical program.

16:15:50 Actually.

16:15:51 The department health trying to do its best to become self-sufficient, but that they said it's often off and off.

16:15:59 We're trying to put in things to make sure that we don't have to rely on a general fund go to legislature and bank for money from the general funds big lawmakers, so that we can just

16:16:08 sustain the operations we have, and or even build out operations.

16:16:11 We have, and adult use market is going to help that immensely, because some of those ball essentially taxes you would get.

16:16:22 If you're not Okay, Hello, tax on cannabis and the adults market ideally, some of those tax spots would go to helping out.

16:16:34 So I think, in the web market we're looking at that direct market will generate.

16:16:42 They won't. have, the same I don't know I think they'll get the red card for the little one service that medical patients have.

16:16:51 So I think, in order to kind of remedy that situation, please, that the wreck growers like you know, our charge to operate in that in that realm should also be allocated to a medical program that that you know they might

16:17:10 see correct stuff, and I think they you get support for that because they don't wanna see if you're operating in. If you don't wanna see the Wild West.

16:17:20 It was better. You wanna have, you know, some kind of regulation, I mean.

16:17:24 Also there's there's a balance there and it could get way off balance where like they basically regulate medical.

16:17:34 But I do think that if you start to make there's 2 money off of the legalization and the the health authority that basically regulates medical cannabis cap or whatever they're like, they're still

16:17:55 gonna like regulate brand. so they're still gonna be doing a lot.

16:18:01 They're gonna need more. they're gonna have their own team enforcing right?

16:18:05 Right. I think that there should be some type of like, you know, would be that adult use revenues would go to sure that on the medical side, that we have that just gives us, a like more time because do a just showing

16:18:26 up these sites where they have

16:18:35 So, you know, and and if they Don't know what the company comes, why do they even bother? Say, Caroline moves.

16:18:45 Got a 1,000 patients there. What am I gonna do if I go over there? 10,000?

16:18:51 What does it mean if he's got one plant that's tagged wrong.

16:18:54 So these things just showing up the farms just show face and cause chaos.

16:19:02 It's on professional problematic guys not even like us

16:19:09 It is not only in that space too, it's. an inventory model to I mean thousands of dollars a fine, taking the butt off of the hearing section and putting into the processing section, and they have to take the So So this

16:19:23 is without the tag on the plan.

16:19:27 Then they take that plan when they the tags. So we need to recommend remove this.

16:19:29 We did a whole I think we just need educated inspector understand what it's like. I don't know if you guys saw like the job posting for the the cabin is Regulator but

16:19:48 they're essentially looking for people with law enforcement so they're basically the enforcement.

16:19:53 I think that's also another problem is like the hiring practice or these things, because they're basically just saying like, if you're been a police officer detective that's the only versus active that that so I mean and I think

16:20:06 It's pretty public like you know because they've they've advertised this position on so I think that's kind of a black guy in terms of like where we're at with the .

16:20:17 Enforcement when you have because I think I was like But I mean if I have to have 5 years experience in mind.

16:20:37 Yeah, You have 6 are you in the medical like, you know.

16:20:47 You don't need you don't need time for us with you know, experience to go through a retail store and be like, Oh, my!

16:20:54 You know, to know all the rules, and especially those guys. So what is this?

16:20:57 Is highlighting. We have individuals for tasks to do something by the State, and then not having the the resources and expertise from saying who is actually going to carry out the best way.

16:21:10 Right. So what a recommendation could be is that there's a body of individuals that actually recommending like a job bank where entity that has a bunch of workers that have experiences in this space!

16:21:26 You. could hire my daughter to do that honestly walk into a farm account?

16:21:30 Plans to one person

16:21:44 Like This is supposed to be government stuff.

16:22:06 I discouraged it at right what we're looking at is code enforcement they'll find building inspectors or health inspectors, whatever right bill stack people. But really, you need to think about where that level

16:22:19 of over regulation. It comes from that ongoing culture warrant.

16:22:24 We need to end the war. just what runs one or I'm Johnson over so everybody just popped out.

16:22:35 You know it's not your radio, not a problem. but what is the the total dep count so far, or Canvas legalization right?

16:22:46 So everyone just take up and if we weren't over regulated in the first place, like Oh, my God! 11 plants and plants, you know.

16:22:56 Call out the National Guard. don't Have this problem your life with can be square footage.

16:23:10 I know you don't want people fly over your far pictures but I think that's okay but it's cool that I mean So they're looking at anyways.

16:23:23 I think that's fine. but use the satellite imagery, as a reason to create my phone And in fact, we begin to be regulated by okay, what happens.

16:23:42 If we just let this, everybody grows much. We just want to like tomatoes.

16:23:48 Right cultural product. I want to venture out let's say this morning there was a alternatives besides so far.

16:24:03 But whatever different approaches there are quasi-governmental approaches.

16:24:10 Well just need to talk. look at the models that launched 10 years ago.

16:24:16 Yeah, great. They're all over brought as they create necessary inflation for the underground market.

16:24:24 Believe nobody is happier in California. all the guys stayed underground it's in licensing no way not happening.

16:24:33 Those guys are all back. They are really fine, All of the people.

16:24:38 The small drivers tried to do it, try to play by the rules all though

16:24:48 So you know, like, let's just you to the whole thing, and either the transition of legalization is a good time for that, or even now, could rationalize the medical market survive the supply chain like that was the big one

16:25:11 you know, rabbit guys the first.

16:25:14 So this year not any license equal 3, 2, 9, roller, right either over pro or patient or character. medicine test, lead.

16:25:28 And if the dispensaries want to buy it, just start there right?

16:25:31 Well, very simple baby stuff who have we're we're votes on all head of bars, especially possible to farm on a lot of it's proven But is you know way more

16:25:55 comfortable part over here. Yeah, start to take those kinds of very simple comments.

16:26:06 Get sucked into the valley. Just what happened

16:26:15 You know. we went to Dh right and dealing they said, will take it.

16:26:31 I don't know what happened so changing that kind of culture. right?

16:26:39 So, even if we change the world on top of, so what can we do as a taking some funds, or something of that?

16:26:47 Nature is to support a publication. Yeah. So yeah, people really community, number one change of culture like, I think if you can have an event, or you can, have, I mean, especially since all the patients have the event, are you know,

16:27:14 like. I think that if we have this because I think you've actually changed, like, you know't mind because you know it gets you out of your daily thing.

16:27:23 You go through music, you you meet new people and make friends.

16:27:28 So. so we, or whatever consumer kind of this, however, you work.

16:27:33 So I think that. So, However, whoever regulates to make those forums officially legal, it is some capacity so that we don't have to have events where we're concerned about somebody pulling up fire that Yeah, to tell

16:27:52 our security guards like If you get that Guy looks square like just don't let it in, or you know like we need to have.

16:28:02 We need to have legal events. so and then, when we start talking about the rack direct marketing public use to be in the conversation.

16:28:11 It can't be an after thought it kind of like a we'll deal with that later. let's just get we need to leave yeah anywhere. you can smoke a cigarette, because So that's what we would like

16:28:27 to see in. what is the public use? free use anywhere you can, spoke a cigarette.

16:28:32 You could consume kind of yeah, you know. careful with that though But you don't wanna rolling papers at us. is it promotes Well, right?

16:28:51 Right, right? So yeah and I mean you know It's So yeah, I think that's the number one thing that I've changed the culture is you guys like there's nothing else that'll change your function.

16:29:06 Thank you. getting your dentist out of the back So for for the last 30 min.

16:29:12 Are there any other kind of topics or suggestions or things that we haven't covered yet?

16:29:15 That you want to make sure kind of on the record for the day.

16:29:18 Transportation is a big issue for me. for you to be able to carry your medicine wherever you go, or for you to be able to dinner.

16:29:26 So I think transportation of medicine and transportation of plants are 2 things that we need to basically sucks out.

16:29:34 And there Shouldn't be a great area but also there shouldn't we shouldn't over regulate like plants in your car, or kind of Miss Smell in your pocket or you know even just having kind of like you know

16:29:46 like some people will tell it all in their car like and they'll they'll tell the truth.

16:29:53 But I think in the end there's there's a whole lot of problems that can happen.

16:29:58 Yeah. So I I think that transfer of possession transport.

16:30:06 Those types of things are huge like, they're on my mind all the time. because if you think about you know there are patients that need medicine delivered to them, and if they're part of our collected, how do I legally

16:30:18 go deliver them medicine. And how do go on run of 7 deliveries with you know.

16:30:28 So we need to really think about how we regulate

16:30:32 And so I know that there's a big large enforcement voice which we like.

16:30:39 I totally respect like that right? At the same time, considering the the lack of negative effects from you know us from our the lack of kind of evidence of like carrying large amounts of cannabis and like negative sexes, accidents, or

16:30:54 whatever we need to totally like, prefer transport.

16:31:07 I can lead us somewhere real quick recommendations. So we talked a lot about people access to the or what we would like to see from individuals being on the back end to help reinvest it have any input or suggestions on where that

16:31:30 tax might go to Some of the the harmony

16:31:52 ,

16:32:03 I would love to see on your science out there poverty, and how great to see taxation covered with that

16:32:17 You're mark our cannabis picture dollars specifically for those things it would be awesome. I mean there should be some outcomes like some expected outcomes.

16:32:28 If we actually generate this type of revenue we just don't want it to all go to calories or yeah, whatever.

16:32:34 There's 2 trains of thought right is happening across the station.

16:32:38 There's tax revenues go into a general fund Then the State gets to do distribute that how they'd like, and or we earmark funds for certain things in my ear.

16:32:49 This is just my personal opinion. is that if we the the general front route.

16:32:54 20 years from now. we're not going to see any I won't have to never see any impacts lifted economic development.

16:33:06 So if there's we can tie recommendations to the company can be voice, say, communities want educational center in their in their districts, you know something like that provide funding for they want a or from every island that takes a looking at applications

16:33:25 for individuals, and say I do, community reinvestment, or, if not need to, not profits, give us your application, and 20% ,

16:33:39 The t at barely goes, the was a part of that was so similar color.

16:33:50 Yeah, I mean, I think that's where trying to make it this process and also curious like, should the rate reflect like the board, and like how it's used to. I mean like, if we're talking about like funds going into the general fund

16:34:06 I think the tax rate should be different than maybe it's gonna go into like a that is dedicated for cannabis purposes are like, oh, or not actually overseeing not because if you're paying the same

16:34:24 amount. for the 36 studies show that one more education

16:34:38 To say, go to elementary schools and start teaching at that point the opposite of just say no like we don't decisions.

16:34:44 I used to talk and like when I saw a mom with their child and cannabis, when I was under the influence over, maybe my my attitude of change much.

16:35:00 So since i've had kids

16:35:07 I know exactly what it's all about I I want to normalize you.

16:35:11 I want to normalize my own children.

16:35:18 You know

16:35:26 Yeah. and a couple of years ago there's actually candidates running for office in when he was President, actually had thought about supporting recreational academies use to help fund public free.

16:35:38 So I mean, I mean that one of the things that we that hopefully comes out of this thinking about, what organizations how can we reach into whether it is PHD or it is units like pages Ta where we can we know that these

16:35:54 areas like our public school system underfunded can benefit from a raise in tax revenue.

16:36:01 And we also know that if we if it wasn't glass the tax just be local people who would also be for us.

16:36:08 So this is a raising tax for me. So I maybe looking at other organizations that maybe haven't been a part of this conversation to healthy stigmatize, but also to help really ingrain the importance of what

16:36:18 this kind of funding to do for communities, because and to the extent that some of you all may be at futures of these listing sessions and have connections different.

16:36:29 To be soliciting sessions. It will be very important for that.

16:36:30 Those sorts of ideas to be said by the community, especially if we could connect them to specific stories.

16:36:36 It would help. So yeah, you know more of these every island.

16:36:43 Yeah, we're gonna want everyone over the next 3 weeks We're gonna have several of these .

16:36:48 Alright, I love 2, 1, one.

16:36:54 Being is. we have to have our report together. the administration by August seventeenth for me to get interaction, and they're gonna put it together.

16:37:03 Put it online the august 29 we're all gonna present, all of our pigs to present to a full task force all of our clients to our investigation this: is a part of our

16:37:17 investment. Unfortunately, right there. ,

16:37:30 Gary. So we have any constitutional examples of differential taxation, like transient taxes.

16:37:33 Anybody who rents a hotel room can we charge Tour is a higher campus fact than residents.

16:37:40 So we have any constitutional comma item that great technically.

16:37:44 No, yeah, there are ways to work right let's work around oh, you can't charge it to individuals just coming into the State, but can charge it to enter But then then, we've got Well.

16:38:13 that's right? yeah right so they're they'll be raised to get around it.

16:38:23 Why are we talking

16:38:28 You don't want to pay right your risk you don't wanna pay recreational I mean the thinking is that we still wanna overburden our our local Yeah, this this extra tax regardless of big tours are

16:38:45 they're still gonna be paying it multiple communities that I mean, maybe having the top thought or understood or understand the benefit of correct.

16:38:57 Yeah,

16:39:08 Right I was in Oakland when we're trying to make nice to the city, and we're like, hey?

16:39:16 We will pay the business tax will pay 10 times for this to tax and open for most businesses.

16:39:21 0 point. 1, 2 first of growth, he said. Look, if you 1 point, 2% of folks right President of the Council, 2, why not 2?

16:39:35 Point. 4 account of this tax in modern history it's 2,008 Oakland.

16:39:42 1.8% right, with the difference that in 2,010 they thought the black guy was gonna legalize pot was a valve measure.

16:39:52 That me was obviously fail by Oakland, got greedy and jacked up taxes.

16:39:58 5% medical and 10% adult use each did not even exist like they were like one's company.

16:40:03 It's coming right, but we got stuck with that at least still have the legacy of that 12 years later.

16:40:14 So I always want to caution people. How does this text not going to solve all these problems?

16:40:20 Not going to balance your budget. Right? Yeah, we can do our a little bit to address the hearts of

16:40:28 Yeah races of but it's not everything. and then, you know, I still have this thing in my head.

16:40:46 Those corporations are allowed to have, you know, Jeopardy so they can report to their investors as their license for What did you do for your employees?

16:41:01 Right. you pay a living wage. What did you do to address social equity about?

16:41:05 The war on drugs. as well as once you return on investment to your your to your your investors, your own shareholders by any other corporation.

16:41:19 They're not found like for product corporations each plus facilitates will turn up.

16:41:24 We're terribly sorry we'd like to help out we'll get 2 our shareholders.

16:41:29 Why are that some say shape or form future licenses?

16:41:35 I can build that into the system that they have to be thinking about that, and they have to report to the regulator.

16:41:40 And you know you want an enforcement job. A cop is not going to figure that out.

16:41:44 Hire some economists, so you know, socioeconomist, and have them figure out.

16:41:49 Are these licenses maximizing triple for triple offline, as they are obligated to do.

16:41:56 Otherwise we'll revoke, you know and they can step up and at that point.

16:42:02 You're like regulated okay, which is historically a best.

16:42:06 But if you don't do that you know the luck just have unlimited licenses, I think certainly right there's no reason to limit the number especially if there's spot people 5,000 square foot

16:42:21 backs right and then unlimited licenses, a distribution manufacturing They need a lot of respect detail.

16:42:32 But you know right. So you can think about different ways.

16:42:36 To do this to instead of ice, positive, positive, the equitable outcomes, 1 billion dollars market cap.

16:42:47 Cut it out of Canada look at hawaii and it's like what we have to be a what there's no way I'm gonna sell that to my work directors like.

16:42:57 Well, let's go to hawaii and being a public benefit corporation or sustainable business for Yeah, alright.

16:43:06 So we can tilt the playing field that way. yeah it doesn't have to be that particular phone

16:43:14 But you know I don't wanna go over here absolutely can ask a couple of questions in the hip farmer real quick.

16:43:27 You don't mind thank you Nice to meet you. Glad you're able to be here today. So as soon as part of the last meeting.

16:43:36 We all know clearly help us the same point right Yes, they'll currently regulate it very differently.

16:43:43 Talk about putting like adult use in medical inside, like some separate organization, is it?

16:43:49 Should that also be like? Should him be also be regulated through that same organization?

16:43:54 Should it be separate? Are the process products of him? Do they need?

16:43:58 Are they? Do you want an Avenue for them to enter like the adult use of the recreational market, like Cvd stuff on the Shelves, or should that be kept separate?

16:44:05 How should those industries interact right? So my ideal kind of view of how should, I think I think that there should no be like. I think it should be one license if we have re I think him.

16:44:19 Should also like, follow under that license. and I, I understand, like the concern about like having, you know, 5,000 square feet.

16:44:27 And then you license something. you can get 20 licenses.

16:44:31 Then you get a 100,000 square feet, whatever that's like I I can get with that.

16:44:37 But I also think that like really yeah, if we the more caps we put on square feet and like, and like, the more we limit space to grow more.

16:44:49 We did send device people that are outside of that space too far, and you can grow cannabis like anywhere.

16:44:57 So I think that the medical market needs to be protected because people actually off of this.

16:45:04 You know it's like essential to their well meeting and the Rec.

16:45:07 Market the products in the rec market don't always reflect the needs of patients.

16:45:11 That's Why, we need that when we talk about rack I don't necessarily think that these it it's I don't.

16:45:22 I think that we're so young in the head right relation to that nobody knows even the pros Jason Shinishi.

16:45:31 He runs the fsa is how you log your your speakers, so that they understand where you're growing.

16:45:36 Your problem to get there, even because nobody really understands protocol.

16:45:44 So I think that like if we're like there are already laws that have destroyed where it even started, whether it's grows that are within 500 feet of a residential structure all things that have inhibited

16:46:06 the farmers, and it also like I think it's made the regulatory process.

16:46:11 A lot harder because I think some revenue would help the regulatory situation, so I don't have a clear answer on like how that should look.

16:46:20 But I would like to see from the record queue how lucky grown cannabis!

16:46:24 Very cheap like it. should be bye because we can produce it for very cheap, and i'd like to see us compete in the worldwide.

16:46:34 I don't think that I I would I mean like to see a Utopia where, like all the Hawaiians are growing, all that we that we're setting all over the world companies coming here you know and buying thanks like

16:46:48 swaths of land, 2 grand holiday cannabis, and then send it to Japan like I don't want to see that, but I also want to see coins.

16:46:58 Big farmers like i'm gonna see people. have like the high like reach the heights like I don't think that, like big farming is the pitiful of farming.

16:47:08 But I think, like, you know. Still, you know by families. Yeah.

16:47:14 So I just like to see that for cannabis like i'd like it to be possible like I don't know what that all looks like, but i'd like to i'd like it to be possible that we have big

16:47:24 successful, like world known Chinese brands or collectives, or whatever.

16:47:32 So, and I would like to. I would like this to also be an example for him, because I do like you are still figuring out like i'm like we're really foolish on the the concrete construction.

16:47:44 Yeah. but we don't have the solution for Then, if we have to import third, or you know almost half of our material, that's a big problem.

16:47:55 So. the answer to the line problem right now, because the implications for half building are so big in what you especially like, just for like how those applications look with you to jail whether it's like you know new construction all of

16:48:18 these things like helps to answer that that call and under another note i'd say, if we do have big rep

16:48:30 Support that happens like there should be a way to transfer even if you have a small medical growth to transfer your material to a processing site, they can turn it into, You know, hopefully all the all the ways, from all the catalyst if you're not using

16:48:45 it as your own input for your own farm, you can create some kind of revenue off of that, or you know within the hemp industry, and there shouldn't be red paid. When you try to go take your your head or whatever material to the

16:48:59 processor, and then go. Oh, no, we kind of take that because I i'm looking at your coefficients.

16:49:06 Okay, To avoid any of those calls or rules like that would be great.

16:49:12 So. no, that's great thank you yeah actual products right trying to certain things out.

16:49:26 I will be very honest a lot of us don't know anything.

16:49:30 So yeah, So no concern over him limit or come from the regulation Kc.

16:49:45 Wasn't regulated or I don't know how to do so No.

16:49:52 So for the so for the I have create and building materials 5 or No, I can't say that definitively, because I don't know if there's a betting for example, for getting there Tc flour, you put in your

16:50:12 house. there might be some results. yeah but but generally It's the same plant.

16:50:21 The only reason it temp is because it's defined as having a low level of th right, and then it's an arbitrary number.

16:50:27 It's not based on any science or or the effects. So the number it really would make no difference So we've got about 10Â min left.

16:50:43 Let's see statements final things that whether it's wrapping up or summarizing, or adding like final things that you think

16:50:52 Like see shared except

16:51:16 It's it's not gonna turn into not those Hawaii that just like going on right now, it's a self regulating street.

16:51:26 If tomorrow they said you could put 2 years from now.

16:51:30 How many people will be so sick and quit and just go difficult, difficult.

16:51:37 See flow and the the madness that, utilizing this just not gonna happen.

16:51:51 Yes, my man says it's not uranium it's not now in 20 years it's going to be less than what we can pass laws and changing in the process and become obsolete we need to be able to make sure

16:52:16 that if we say yes, we say yes, we cannot do that without checkpoints in place along the way to make sure that our this is still good.

16:52:29 Just this. Still, work did these things work that was not put into place with the matter.

16:52:34 We would not be here, you would not have a lot of stuff that has come down.

16:52:38 A lot of personal animosity because there were no stop checks in place to say everybody, are we doing it the right way?

16:52:48 What you're doing right now is exactly what should have taken place

16:52:53 Communication. Thank you.

16:53:06 Yeah, slow is better for sure. You have a medical program in place right now.

16:53:20 If you're looking for social actually for health departments sorry parties that are fine now

16:53:33 And so you're seeing when you can just kind of like let things go a little bit.

16:53:37 Recent laws, employees.

16:53:45 And we're seeing that happen right now and yeah bye it told me that I would.

16:53:48 This person's picking up on you right now charge for a couple of 1,000.

16:53:55 This is happening because people how long they're looking to be going this farm closes.

16:54:01 We're not getting our best it's just There's there's so much going on right now with the state of early taken in the consider that we have just take way home really quick, right by solving this

16:54:26 building the place basic regulations

16:54:35 And I think we need to put this

16:54:39 They're gonna be total antagonist cannabis for the rest of happen to want to retire.

16:54:45 Those guys gotta cover them or they can't sit back at the opposite being educated and speaking to us.

16:54:54 What really the problem is So they can see professionals from our system

16:55:04 Your society's better. You wanna make law enforcement we want to solve a lot of problems. agriculture program Here's horrible.

16:55:16 Yeah, just so much. We got going our minds, and just not even allowed to go with.

16:55:21 It was going with it, but

16:55:27 A little bit tired, so

16:55:34 More easier to establish on that

16:55:42 So I i'd say I wrapped it up by saying, Okay, So this is about this event is about social equity in canvas.

16:55:51 It's a so i'd like to think maybe it's generation all, and So a lot of the capitalist growers that grew up in only like I grew up in socom, and you know this is always been my platform I

16:56:06 just wanted to make this to happen. I think that there are a lot of young people in that space, and my hope for the future talk about social equity is that young kids from Corona chrome Model kai from the outer

16:56:27 highlights or accounts. West Side along can be called you know big people in their community give kids in their community that are coming up an example.

16:56:37 I'm continue the cycle. Now build a legacy of group. Yeah, grassroots, farmers through promoting the kind of is at not creating policies that create that treat catabase like as a tool to the

16:56:58 negative with negative social outcomes, because as a person who's. had very positive social from town is that those come from like a big city, or like a no, like a family where we are kind of is farmers.

16:57:16 It, like I see, like there's a lot of opportunity. for young kids to have an economic future in their home.

16:57:24 Here. So I think That's a very that care point is like you need to make sure that there's a future for young people in kind of this in Hawaii, and not discourage them from like you know like So that going down

16:57:39 that road, because maybe there's no opportunity does it let you study that, or you know all of that.

16:57:46 So that's all kind of philosophical but also That's chase room rural areas real like real royalty culture campus.

16:58:05 Thank you. I got a couple of things that I did not mention this morning and below, so I will like up. Where?

16:58:17 Where are you from, Miss? the 6 o'clock flight So couple of quick things?

16:58:25 So that the the size issue is super it's complicated and it's tricky, and I watched it really just goes sideways in California.

16:58:39 So bad it was. the attempt to control the size of pros, to even keep it down to the acre, totally fail.

16:58:46 The last year of glass House was at 1.5 billion square feet. Okay, I'm sure that's a very high quality,

16:59:06 But even that, you know, oil can be made. yeah, And and even the dreams of promises of generational well, right in quotes Generational?

16:59:19 Well that are still being used in a lot of social programs around to be, and it feels like dangerous potential for me and switch. And recently I was like playing with this idea of some of the better in California.

16:59:33 We would just you want it like cap everything is 5,000 square feet.

16:59:40 There's first they should try in Canada indigenous people in Canada,

16:59:53 Harvard, Do they have a kind of was it, Alderman?

16:59:59 Thank you, you know they're they're doing some some interesting limits.

17:00:10 People are looking at that the size of 5,000 feet.

17:00:16 We got 12 bars, small park stats, Global product. Yeah.

17:00:22 I did have one thought about a way to aggregate.

17:00:27 Do like True, it's hundreds of funds, and they just share.

17:00:38 What add co-ops do is they share facilities that they need.

17:00:41 They share silos as your processing there's your packaging At least you're branding at work.

17:00:49 You don't have the money. to correct and that's a possibility is, you guys can take your small farms and aggregate them into the .

17:01:19 Hey? what else? I don't know for me

17:01:30 And then with him him for construction material for 5 or all of that this and I think some kind of like commission or grand jury or oversight body on cannabis Lee you wanna have cops

17:01:57 great. Then we'll have the cops that watch the cops you know.

17:02:00 Let's play Another thing about starting with a high level of break.

17:02:10 Just 5 in the beginning is, you know, you can plan in the obsolescence of those regulations, just building regulatory sunset, right?

17:02:17 They die unless there's some reason to keep it iterative review right whatever.

17:02:23 Every couple of years we look at all of these Gregs top the bottom.

17:02:26 Does this make any sense? aside from yes, it's providing life that a plugin for bureaucrats and all of you have jobs.

17:02:33 Let's see

17:02:42 Oh, yeah, hold that hold sunshine sorry that's what I meant. Yeah.

17:02:50 So on the tax that I love the idea of having community boards overseas.

17:02:57 All crafts like vibrant to the startup, nonprofit.

17:03:02 It's still big. You can you can literally jump start a whole local.

17:03:07 Yeah. yeah, The other thing that I would look for is talking about tax revenue.

17:03:16 No Cannabis tax revenue not absolutely not. I will not have it.

17:03:25 I will pitch such a bit like Daniel looks fall on serious.

17:03:27 Okay, that's it

17:03:34 There we go. Oh, I just maybe something might be also very good as a review of isn't it the secretary rates.

17:03:41 It's a sunshine review. such the one that came out for the dispensary and said, Hey, we're going to build this.

17:03:50 Yes, probably be good to review that just had a lot of great language in there at that.



17:03:59 If you open dispensaries and cost of product gives above a range, then we have failed.

17:04:04 So it was a very, I think. I know. Yeah, yeah so That'd be really good.

17:04:12 Yeah. it was a district attorney wrote a paid by that'd be a really good review.

17:04:17 Look at that and see what the failures are why this Hasn't worked out, and I think that will empower the better.

17:04:24 Thank you very much. we really appreciate you all. coming today.

17:04:29 We look forward to seeing that i'm sure some of you at some of the upcoming, and at the test force, please show up to the the live task force meeting to continue to give your stories and your testimony.

17:04:37 What's so august second is the next thank you very much.

# Kauai Listening Session

2022.08.06

Social Equity Group

09:07:56 or.

09:08:59 I've lived in in America for a long time.

09:09:07 30 years in California. Yeah, i've been called through the last year for the last 17 years I've been working as a lawyer, and all of you consultant on campus in California mostly local government, but now

09:09:21 more state and local government. and i've been following the social equity issue as the evolve out of both some other folks over here, and I are in a group that started meeting actually a couple of years before I got

09:09:39 here. i'll like how this only which is really focused on the social issue.

09:09:46 How it's gonna impact on data. point economic Powerland. and maybe some social, delicate or happy to talk with you guys about that.

09:10:03 Thank you, and yeah my name's river yon i'm the former CEO of buy him company currency, you know, currently with these guys with and yeah, we're interested in

09:10:15 both hand. kind of that's fine for Here thank you my name is Baton Kelly Formal.

09:10:22 I am. so is this partner. So past 5 secures but also hard heavily involved in the cannabis space.

09:10:35 In some operations in California, so you've seen kind of a spectrum

09:10:43 And would like to see Hawaii better since you just got here.

09:10:52 But you're right alright not a COVID-19 grower, and a patient and a carryover.

09:11:02 So Good morning, my name is ryan bim i'm.

09:11:11 Enforcement cannabis doors. I've seen how the current rules are completely counterfeited.

09:11:23 So I came in today. Just listen here with you all. Hold on, guys.

09:11:30 My name is Laura. also there's no Farmer so much perfect Thank you so much.

09:11:47 I'm gonna let garrett Oh, well what one would think I do that Ellen gets the code for the

09:11:54 The restroom. We'll let you know we'll take a break awesome welcome.

09:11:58 Everyone a large purpose in today in kind of the social activity. group we're on a task force that is focused on how legalization can work in Hawaii just kind of in general.

09:12:10 This particular group is here to listen. we've got a session on each of the different islands, and a couple on a big island, a couple of water.

09:12:16 To make sure that people are able to attend so that We can hear from you all.

09:12:19 Hasn't been impacted inversely so we can hear the stories and what sorts of things can be put into law that might help repeat those kinds of impacts, whether for you or for your communities.

09:12:29 As we go along. so we have a list of questions that's kind of on the sheet in front of you that we want to know about from all those are general guides to the conversation But we're welcome to kind of move outside.

09:12:40 Of those in the direction of social equity. What it means to you how we can address that in particular through law. in whatever stories you could share along the way, more powerful as we try to talk to legislators about why particular recommendations are

09:12:53 important for Hawaii. So Oh, yeah, well, and quite reminder to please speak up with microphone.

09:13:05 We ask questions too. Sure, we're not necessarily limited in what we can.

09:13:11 Reply with, We can talk about whatever. no, the task force itself does not have any recommendations yet.

09:13:17 But we can try to answer whatever questions I do want to hear responsible for writing, but existing 3 to 9 one the existing 3 like the 2,016 or the I hope with some of the

09:13:35 amendments. So my first question is, why is there a sunset deadline on Gary?

09:13:41 Divers. My second question is, Why is it limited to one carrying over for one patient for property?

09:13:49 But a property is not to have 5 agents. That is it logical, alright.

09:13:55 So talk to me about why those 2 things. Okay, Okay. First of all, there are people who are patients that cannot grow their own.

09:14:04 Okay. Not only other people in Capo, their own medicine cause of physical, mental, or whatever illness.

09:14:14 But some people just cannot. How dedication to growl plan Sorry i'm a harmony as well and by getting farmer and

09:14:26 It's hard enough getting people to grow up in their garden nobody wants to harm Right?

09:14:36 Yup, not just your whole life, but the world, and across the country.

09:14:41 So how do we expect people to grow a very complicated?

09:14:47 Wow! when they can't even grow up that's a real plan

09:14:54 And why? multiple period numbers? How would that help them? Not multiple caregivers?

09:14:59 What makes sense to me is if there's in the one contiguous property.

09:15:04 You're allowed 5 medical patients to use that site as their designated pro site.

09:15:09 I'll come. One person who is capable of going cannot be a caregiver for the other 4.

09:15:14 Maybe do not reside there. you know, are not available or not, pro.

09:15:21 By so caregivers, should be responsible, or can be responsible for one and one which I think it should be allowed.

09:15:28 But it it can be documented. as long as a paperwork is there.

09:15:31 I think it's fine, but it just makes sense that for one site.

09:15:39 There are 5 patients, you know, less than 5 or less, but on caregiver should be able to carry your board.

09:15:45 The other patients are also, you see, that awesome here in both sides, as the State moves towards legalization.

09:15:52 Should that change how this part of the medical program is implemented should change your recommendations?

09:15:57 Or would you prefer to have that part of the program kind of continue exactly how it is?

09:16:01 I would prefer that the sunset deadline is all together.

09:16:07 Certainly this just remains in time. Yeah, we can expand it so that one caregivers can care again for a site Okay, and the battles room.

09:16:18 So let's take a quick break and then we'll come back.

09:16:28 Oh, you stop the record! thank you for having that You're.

09:16:35 Welcome

09:16:46 But yeah, you can handle that you got a campus with that house that's

09:17:21 Like

09:17:43 That's. the That's the same time that's the same time with the No. not yet so.

09:17:53 The reason why the sunset is that 5, those

09:18:03 So when the sunset comes with with sunset and it's not getting I thought the peer give us go and total within that becomes fine also and then and then

09:18:39 different, What? Okay, Okay,

09:18:58 So sorry i've done it I got a the question.

09:19:06 You said that does that for you. This meeting? I wanna say that all Directory: Yeah.

09:19:09 Okay, wait for percentage then we'll Restart. Let me do.

09:19:28 I've got a couple of follow up questions

09:19:37 Welcome

09:19:45 Okay.

09:20:02 Yeah,

09:20:13 That was already hired, and you look happy for adventure license. Huh!

09:20:26 Yes, I can't say i'm gonna go to law school I cannot help my life.

09:20:41 Oh, yeah, that's fair. So we on the like one because I think that there is going to be a first time an online part time program, something cool.

09:20:52 That would be that would be I i've been taking this around for a couple of years, and I kind of like had settled on getting a master's single study or semester just is even like the hybrid program that are in

09:21:05 other State So for the long time the Aba has a really There's some changes for that.

09:21:19 So should hopefully be someone like alright.

09:21:40 In that case. we'll get started again, like I said i've got a couple of follow up questions for you, and then we can jump around very well. Oh, the first off, so you mentioned.

09:21:49 That is, currently 5 patients on a particular piece of property. Do you recommend that that work?

09:21:53 Do you have opinions about whether that numbers should go up or down going forward?

09:21:58 I think it depends on the 800 and total square footage of

09:22:04 Also I'm gonna get into the weeks here but when you talk about a property.

09:22:11 The question to is, who also property, for example, a lot of people on this island.

09:22:19 They have long term laces with state that and if this program is a State program, what is preventing long term leases?

09:22:31 Who will release agriculture's own land that is stable, medical cannabis under his state program.

09:22:38 That's a great question as Well, as for so if you had 5 or however many patients on your land that you're the caregiver for you're going plants for them, you said talking's important or

09:22:53 registration, or whatever of those plants. right now, those like how many plants have to be as associated with a particular patient?

09:23:01 If you had like, 5 patients on your lance, could you just grow the 25, or third, 50 plants, or whatever but not have them towards a specification.

09:23:11 All of the pro as well take 2 or 50 to go to, you know, in the innovation depending on what they particularly be.

09:23:17 Or would you still like, associate a particular set of plans for a particular set of like particular issues?

09:23:24 I right now I have no opinion on that. it works

09:23:30 The other thing, too, though, is based on the square footage or the the total See somebody.

09:23:38 You have one. our property like 28 person. I think us tfk a lot of record.

09:23:46 That doesn't make sense to only limit 5 patients for the entire 20 acres of book of parcel, but that'd be something more like a cooperative from like California what one way people have done

09:24:02 it is. if you could, you could divide a property, and Cvr.

09:24:11 Expense on top. but I think it should.

09:24:14 We should be discussed. potential solution for being able to break up a large piece of agriculture.

09:24:22 So Now we're open so that I open use this open because it's a steep grade, or it's it's not the best soil for for additional farming. What was something that is like small scale like this

09:24:33 yeah, I think it's feasible to utilize open man versus like this.

09:24:38 That makes sense. So acreage should not necessarily write a bit.

09:24:44 5, 5. Yeah. Okay, perfect, That makes sense. Others want to say stuff in relation to the questions I know the first question: What would it be to you?

09:25:01 What does social equity mean to you? I think branding is a big issue.

09:25:06 So I think companies from the mainland will come here as legalization opens.

09:25:10 Yeah, utilize the wine. Genetic names team got it, And I think there should be some kind of protection for levels is it protection for the genetics themselves, or particular growers?

09:25:25 How would you charge, or something like that? Yeah, what it's to protect the the buyers?

09:25:31 I mean if you go to a dispensary and they order mainland cannabis, and call it something blind for sales purposes that's protecting the public, and then it protects local settings in the business for years that are Well.

09:25:44 known pretty slow genetics that why not yourself it's scared to great and to that point you're going to be protecting a brand.

09:25:58 I think that there needs to be a very confirmed from Hawaii and from we need to give credit to the legislature that have been doing this, that half by the war on drugs so keeping

09:26:15 that in consideration when we're talking about you know in our group, we talked about you know a label, you know something that's you know, in aligned with the a little hobby programs or the quiet manager But that I think

09:26:31 that would be super important. absolutely. One of the things that States are struggling with is they implement social equity programs is how to determine who was effectively impacted in the task.

09:26:42 Is that gonna be 5? Should it be by zip code, where there were the most enforcement actions should be buying ethnicity.

09:26:50 Should it be by previous colony or misdemeanors in the Canada space?

09:26:53 How should we, or how should our law address that one opinion would be to?

09:27:02 So there's tracking programs for genetic. so so locals can registered or genetics not for Id purposes, but just to show that there's a holder.

09:27:13 And then this dispensers can honor those registries.

09:27:16 And there's a company there's a couple of companies one that comes to minus 5. those bio signs and they have accounts.

09:27:26 I think all 3 of those points for super important I don't think that there's like a one size, it's a really hard issue.

09:27:38 And I think that I essentially it becomes very damaging as well, for you know for future generations that have, you know, current legacy grows that have kids that are company.

09:27:51 You're passing down genetics growing up at all with you. So i'm I don't know what the right answer is, you know.

09:27:58 But i'll link it to solution. is not the right solution.

09:28:04 I think that this seems very personal consideration. and when you're developing the campus task force.

09:28:08 You know it can't be an apartment but then I think it's overflows in a processing as well.

09:28:20 So you can process alliance style and take 10% of it.

09:28:26 Makes it with mainland stuff, and then branded it's The other comments on what social equity means to you

09:28:42 So one of the things that we're struggling with is that this space, right now in the social equity programs,

there's not a definition.

09:28:49 Okay there's not necessarily like a long philosophical industry board. It's just kind of a thing that we're trying to pursue without a lot of directions.

09:28:58 Is there a way that you can give us some direction for Hawaii at the very are we talking about?

09:29:05 Like we in the medical

09:29:17 And so is is the goal of legalization to make money for the state of boy.

09:29:27 To empower the local community of population to reduce the new industry, so that there are more jobs for local residents to work and earn a living.

09:29:39 A livable wage, so that they can pay for their rent, their mortgage, and their their basic needs.

09:29:45 That's a question because of the state of Hawaii just using more money for their copers.

09:29:50 Very good about it. in terms of equity what we're seeing with the existing medical program, and the way these dispensary permits were given out.

09:30:06 I understand that there are certain, all your control measures that used to be I understand there are bureaucratic people work that used to be submitted.

09:30:20 So when it comes down to conroll the best medicine you don't need 2 million dollars to grow good clean medicine.

09:30:28 Okay, I don't know if you're familiar with our situation here.

09:30:32 We have one dispensary on the East side they gave a second permit for a second location, and from what I understand it's the same. guys and they're not from here.

09:30:44 So talk about welcome. is that these people who got the vermin. First of all, what I heard we don't afford it, cause they have some mess up in their previous business endeavor, and then they get back by the mainland

09:31:02 corporation, which is exactly what we don't want is mainly incorporate corporate capabilities to these islands.

09:31:10 I take over an entire industry, and yet on this island. i'm seeing 2 or from the same guys, they don't even give any competition to a second a second company, a local company.

09:31:24 So social equity. Yeah, whatever i'm not seeing any of it so far so. And it seems like you're saying the things that would make so socially equitable industry for you is allowing not just allowing but like encouraging local

09:31:38 participation both the previously affected, just in general local versus their mainland, or kind of limit it to, You know just a few people.

09:31:45 I I would Okay, so it also sounds to me that you're also saying that we should have board live because my I think right now we don't have one license for so here's the thing it's also a supply on

09:32:05 the map problem right? You cannot just allow everyone to have a license, and all of a sudden people are jumping product into the the market and then screw up the price point of everything and bring everybody over especially when somebody who is a multi

09:32:20 millionaire or a corporation that had both 10 million dollars, even a 1 billion dollars come in and just talk all their their money in this in this market.

09:32:30 That cannot be well. okay. So what what what what I suggest is removing certain financial barriers that prevent a local mom and pop sort of keep the number of licenses which is that this island does not have a large

09:32:50 population, so we don't need We don't need I think 2 is good, maybe 3.

09:32:57 But even even then like to allow more growers if you would like, look at the retail location.

09:33:03 But a lot more growers, especially local growers I think even if you allow more glorious, a lot of people will still not jump into .

09:33:12 Because it takes a level of dedication and consistency That the operator does not have.

09:33:18 Average person does not Have the self discipline to invest their time and energy and money, and doing this sort of operation.

09:33:25 You've been on a small scale so you said just at least more than one.

09:33:28 But you don't know what I said just stopping allowing Foreign and me and that money to be invested in the Hawaii account of this I suggest that No, we need We need to We need to rent a break or break Canada

09:33:42 this will come in over here and spring down. Okay, So that bottom line common sense to piggyback for that.

09:33:51 Maybe it's not more licenses but maybe it's open it up to over as well to where growers.

09:33:56 We can all grow and sell to the one place, so the one we can also process app devices.

09:34:01 So there should be a share in opportunities. Okay, I mean, rob you guys, you can work

09:34:14 Somebody out there that wants to grow and create up around Can we do that one?

09:34:25 You guys have anything to run on like that right now or That is one of the things that's going on. hat force is supposed to be investigated. So these listing sessions are to hear Dolls opinion of that what is that

09:34:35 kind of program look like to you in a way that would both remediate past harms or benefit the local industry going forward.

09:34:42 So what does that policy look like to you? that also through the equity is not happening.

09:34:49 I don't like my back to call from you and actually form you know organic great medicine for the you guys have There's no information out there. that allows us to even look at.

09:35:23 What it's. I think they're trying to define that I mean that's part of part of what we're here to do right, is to get a clear definition of what social equity meetings, and I think for me if

09:35:36 I may jump in here. I think there needs to be a legal way legal round for farmers to produce their medicine and bring into market.

09:35:46 They have expenses that are in your and they're loving practices.

09:35:50 And so they're more. I don't think they should be hindered again by the point that's been date about having 2 million dollars behind them, or would they know there should be a legal avenue that protects farmers to

09:36:00 group their medicine and bring into market, and I would challenge the concern about mainland.

09:36:07 Money being part of can be backing part of somebody's effort because you're never really gonna know about

09:36:13 You can have a farmer here on coa that says he's local, and that he's producing it locally, and i'll have that back you might come from an investor on the mainland.

09:36:22 So I I don't know how you want whatever really trace that or industrial that And so I I think what would be better is that great illegal avenue here that is fairly divine. that is controlled?

09:36:34 That is regulated that has the proper pay for, as you mentioned earlier, so that people can bring their medicine to market in a fair way.

09:36:43 Competition is good, right so that's what i'm concerned I know.

09:36:49 So I I wanna bring this up and then and I like this discussion.

09:36:53 Okay, but we're talking about dual use and right now.

09:36:57 The eighth license is not that big only one for one. That's the reason why you have one guy with multiple

09:37:06 But that's for the medical time. But we're looking at the potential for legal invasion.

09:37:12 Okay, So should they even and that's that's what's cool for talking, because you're you're saying that we may, we may even need to limit But we're saying maybe not about limiting the license, for

09:37:27 recreational when it doesn't come in so because the market won't be able to share.

09:37:31 But I don't think there should be limitations for hindrances to acquire a license.

09:37:40 I think that there should be error and level playing ground for those that are in seeking getting a license if they can do so.

09:37:48 That is realistic, but it's possible from what i've seen so far from what I've heard. mothers in this real nice it's not possible I know.

09:38:03 Thank you. I think it comes far to you know spreading out the market being ancillary service creation, having processor licenses, producer licenses that that barrier to entry becomes lower right?

09:38:16 Because you're not working within a vertical integration like Vr.

09:38:21 Right now. I mean the vertical integration on top of the licensing piece was tremendously prevented and that's why we have an Mso.

09:38:29 That came in, and bats But then we also have to to level the playing ground. You have to dissemble that vertical system because a farmer that's blowing out the sun is never gonna meet the testing

09:38:46 requirements which are the strictestimation. and So we need to do away with some of those more basal issues that we have within the current and existing program.

09:38:57 And that's the most prohibitive thing for our medical farmers that might want to sell into the dispensary at some point. they can't do it.

09:39:06 They're not gonna get the micro level. and yet we have the most beautiful sun and the environmental conditions to produce some of the finest campus as well.

09:39:17 And so we need. We need to give our farmers. a lot more opportunity than we do now, and it is about to sampling the systems that are currently in place with the department of health.

09:39:28 Like obviously i've said it twice don't like the department of health.

09:39:31 They screwed up the hand side of things. I screwed up the Canada side of things like, let's have a better system.

09:39:36 So give you back and off that as well. you mentioned.

09:39:41 That grower licenses, maybe producer or manufacturer licenses, as we try to do.

09:39:45 Vertical licenses and retail licenses.

09:39:47 What other ways, and in particular, what other plan touching ways?

09:39:51 Or business in salary businesses are there that people especially local people want to be involved in there's the delivery Okay, so it'll be raising .

09:40:02 Went to another and then back on my bang let's say indoor growing is killer like 33 cents a year a lot. We're expected to grow inside while we have 3 son call sign thanks no sense i'd allow the grow

09:40:17 license to grow license any other anybody else want to talk about with social equity needs to them, especially in contrast to like how it's being implemented on the big.

09:40:33 Oh, I think preparations of records criminalization.

09:40:34 To start define reparations for me in this context.

09:40:38 I I mean, we know people that have family members that are locked up for essentially petty.

09:40:43 You know marijuana charges, and those immediately.

09:40:47 These people need to be let out of prisons. What

09:40:51 They need to be given. I think the the people that have really suffered under a very impressive system like this need to be given first opportunity to participate in the market.

09:41:03 I don't know, if that is a state funded incubation program for business, because I don't know I don't know what the right answer is, but definitely the piece of one thing i'd like to give you back on is i'm a

09:41:17 class saved Bill and I also have a degree in mathematics, and I can tell you this is my release.

09:41:23 It's been extremely difficult to find jobs where I can utilize my degree.

09:41:29 A lot of people that have a degree in mathematics or bankers.

09:41:34 They work in education. How they work in what's considered a control industry.

09:41:38 So someone looks at me great love you I've been able to find other ways. We get through that. but i'm sure we'd like to see others not have to go through what I went through that alone being

09:41:53 incarcerated it doesn't experience it didn't do anything didn't rehabilitate the Oh, I never felt I should have been there in the first place.

09:42:03 And so I think, for the youth of Kuwait especially if wine, even though I it breaks my heart.

09:42:10 So when I think of also, for that point is how we protect. How do we protect people and get?

09:42:15 How do we go back to creating an people to do This in a way that's all. and that is legal.

09:42:21 So, in addition to that experience, what other ways or stories can tell for us to bring back the task force to the legislature about how fair policies, historic policies here in Kwaii in particular, have negatively impacted either

09:42:34 you relations, or just the communities that you know. I mean the stigma that goes along with being a felon a little on what it does to a family.

09:42:44 It breaks the family apart and create strength in the neighborhood.

09:42:47 You know you have a name. your last name and then with that comes this, you know stigma. Oh, that's not found, you know. that's what they do.

09:42:55 Well, it's kind of us here you know what knowing got raped going about murdered, and so so for me.

09:43:02 I think you know what. When I think about the negative effects it takes.

09:43:06 Had I look at? how other drugs then became more popular.

09:43:10 You know there was an article not that long ago that operation green harvest is so successful.

09:43:14 We now have ice. I mean little bit of a little bit of fluff there, but but a whole lot of truth there as well. and as we all know, ice is terrible, and if you want to talk about what that stuff in the community

09:43:29 then so long in the conversation so i'd like to find a way that you know, enforcement. It is done in such a way that it's doing something productive and not what what that is and how that rolls

09:43:42 out. I I don't know. Okay, I got some questions on the topic of those work.

09:43:50 I am active. so a lot of licensing just in general for the State has they?

09:43:57 They have a background check requirement, right? And one of the things that other stakes have done is they said, you know, to Cannabis offense, that that is okay.

09:44:06 You know, flying for a license, but you know most what we found in what I've seen personally is that when you get in cannabis of the often might come with other things right and I don't

09:44:23 know you know, when it comes to licensing.

09:44:27 You know what the State would look at around requiring background checks.

09:44:31 But you in your experience, do you have any recommendations, or say someone in your position, or something?

09:44:37 You know, who has had that conviction about how they would go about the line, and how the State would look into something like that.



09:44:43 Make sure. I think one thing that this thing could do is is look at somebody's stouting conviction Say at my case and go Well, What have you done since your release?

09:44:53 Have you had any other offenses have you shown a history they'll behave following the rules.

09:44:58 I mean there should be done, an exemption. right in many cases like you know, with some jobs for example, they'll look at accounting prediction, and they'll say, okay, Well, this is the over 10 years. right So then, So then.

09:45:11 there's an exemption team, so maybe if someone's a a multi-fender, maybe that's a little different, deserve some security.

09:45:19 But somebody who is, you know, kept their nose for the better way to put it.

09:45:26 Okay, So what i'm hearing is that you know if there's a say an authority that does licensing. they have the discretion.

09:45:33 It's a good background check and and they can say you know, because even though this person has x, they're still, you know, good to go.

09:45:40 They can get the license I don't even have that authority Absolutely.

09:45:42 I don't think it should be an automatic part yeah it's great.

09:45:45 It's pretty good, but but maybe that power doesn't rest with one person, not a single person that makes that decision right now, because it is a very subjective

09:46:03 Otherwise you or your communities have been effectively affected. So

09:46:06 I know. I know a couple of different friends who you know they have kids with somebody, and then I never married another going through a divorce of custody.

09:46:18 No, and they stop going when they stop registering their \* card altogether because of fear that the judge was going to look negatively, them in their lifestyle, their capability.

09:46:34 But taking care of children and being the people guardian I think that's another form of discrimination, and speak about that.

09:46:45 Definitely should be made aware of. And also, you know, same thing comes down to the judge.

09:46:56 Does the judge have their own bias and you know negative i'll look on count of this. so that they're gonna they're gonna you know, rule against the a better parent simply because they're a medical patient or a grower Yeah, that's not

09:47:13 so hard, very common situation that I see in more.

09:47:19 So. so your By the way, I I No, exactly the type of situations both the people that are talking about .

09:47:38 Okay, where I judge, actually, we come in touch with the end.

09:47:46 So only because of So I understand so what We're talking about here in the first also potential solution.

09:48:02 So with one resolution and i'm just putting this out there.

09:48:14 And you guys can where it's a nonviolent channel.

09:48:19 This phone. huh? That that should not be good, as it is qualified for promotion.

09:48:29 That would be one, and I think the second one is A resolution asking for the Chief Justice, and determining the qualifications for a family party charge.

09:48:48 To see whether or not they have any biases totally on having possession of it into.

09:49:01 Not is that this? Am I saying it correct? Yes, that's a good place to start Okay, But these are the kinds of things that we can put in as part of the report coming forward from this hi is There anything

09:49:24 else you'd like of to report virons so I have a 3 t 9 card, and I have to give up my firearm.

09:49:35 It's only 4 or 3 to 9 calls

09:49:41 No, I I think you're in included that but it will question so especially kind of since one of the topic of convictions in the kind of public safety element of it, as we are kind of recommending things for a

09:49:55 zoom system, or a legalization system. how should we or in in what ways, or even should the department of public safety be involved in the industry going forward today be involved?

09:50:08 For if you don't have a license that are going anyway, or should that be a civil thing administered by whatever agency, how does that part look in kind of dolls vision of the industry What happens?

09:50:20 If somebody's growing without a license what should happen, if the line, in that case, if we legalized accounts, I do the current So we have we legalize cannabis we have a horizontal regime you can If it's easier to

09:50:37 get a license global communities, different people are able to get them. but it's still kind of limited right like on the grow or other retail licenses.

09:50:45 And so somebody still grows some of their backyard without a license on private land.

09:50:51 Yeah, in in your scenario. How many plants are we talking about?

09:50:55 They are running a block market off out of their house and the plot should be free.

09:51:03 I don't care what what my neighbors do in their backyard if they got their own community.  
09:51:07 Their own market. it's unloaded that's why it doesn't hurt me.  
09:51:11 The only person that is hurting is this mastery, and all honestly.  
09:51:16 My opinion about the dispensary. All those guys said when you all the hassle and all the oops and all the paperwork, and they drop down to a 1 million dollars, they should be the first wants to have the option to go legal  
09:51:29 wrapped, and so that towards us I don't care about I don't care about.  
09:51:33 Maybe my office I'm a medical caregiver i'm a medical curriculum.  
09:51:38 I take care of my family and my friends and it's it's up to them.  
09:51:42 If they want to go. spend \$500 an hour so that's I don't care about that. so don't infringe on my rights on your friend don't don't go causing problems to their guy calling a bunch of  
09:51:54 plants, and he's back here I don't care about him you come along.  
09:51:58 I. I have some concerns German commercial, general public safety issue.  
09:52:03 There you had mentioned happen anchor that's That's a lot of that could attract drive, and I think that you know we should be respectful of our neighbors there's the right way to do  
09:52:18 things there's there's a funnel with do things and There's a this up to a free for all to say that that's okay.  
09:52:26 I I don't think that that's a good idea I think that that could bring about disarmament in a neighborhood or a so I think that absolutely some sort of regulation and enforcement will be necessary  
09:52:37 how's that before that happened? Is it still helicopters, and you know, tactical gear or is it inspector comes by and gives you a box just like we have instructors for other things right? we We build additions.  
09:52:53 On our home, or when we're creating lab or you know, water numbers, and stuff like that, it has to be done, and only in this right should any part of like the regulation of cannabis, be under some sort of criminal portion  
09:53:07 of like management or regulation. i've heard the department of saying here in the department, the way the law is currently written.  
09:53:14 Sorry it is, or regulating agency. Yes, okay, what parts?  
09:53:30 Well, I think that you know, when we talk about taking medicine to Margaret.  
09:53:35 He mentioned earlier. blackmart. Good! There, again, is a right way.  
09:53:41 There an avenue illegal, avenue for taking your medicine to storefront. and then there's another road that sounds used to go down. And I think again, that can cause problems so?  
09:53:55 How the enforcement how that is all I don't know really don't, but I think it's a concern.  
09:54:01 There are other states that have been successful just where last week so we can look at other States and their successes back up what they take that they washed, too.  
09:54:17 I wouldn't, have to have a \*-nine guard under the board, and want to have a handful or 10 cents, or whatever it is, and I think that I think that's all well and good and reasonable I think that that hits.  
09:54:28 the your your personal freedom to enjoy plant medicine as an everyday person.  
09:54:35 But it also allows a path to buy a whole business and it's still each space for the \* program and caregivers right. it's not everybody's kind of grow in their backyard not Everyone but I  
09:54:48 think removing the stigma around. You know what is, what is good, what is healthy?  
09:54:56 You're talking about the decimalized nature movement this morning, which is a really interesting but I think that everybody should be allowed to have some personal use clients.  
09:55:06 Now what the capacity is from the State to moderate that sort of thing, or what the limitations on those plants, or what is too much.  
09:55:16 That definitely needs to be discussed. but I don't think that anybody should help her family terrorize with taxable gear.  
09:55:24 And you know, assault weapons in their home. for cannabis.  
09:55:28 That's not the right way and we need to move away from the Stigma associated with all that I I've been in the business for a while.  
09:55:37 We've We've had especially in Washington to California as the applicant here, and I did have a 1 million dollars and that still didn't get it.  
09:55:42 But that stigma convincing our elder generation that marijuana is very difficult for us in the business State wants to advertise and say we were wrong.  
09:55:54 Green harvest is wrong. we're changing I think that the State could do a really great educational push when all of this happens, really really pretty much and then help the operators  
09:56:24 oh, my gosh! so much but  
09:56:28 So when researching other States we did some research, a local homework recently.

09:56:37 They have a large large amount of licenses but what they're finding is a large amount of for investment.

09:56:45 So a lot of Chinese operations Russian operations and that nature and some of them are operating a license so many.

09:56:53 It's not much you know regulation around them and you know they they do have an enforcement division that .

09:56:58 Law enforcement, and has one person hours in their harm.

09:57:03 Then they go, and they found some some growth sites that you don't have what you consider slave labor.

09:57:09 You know people from different vectors coming over and bringing people that are working to bring money and and it being a a hospital work environment and that major thing you're damaging back to the question of how do we regulate on force something of

09:57:23 that nature. Do we want to see the law enforcement agency?

09:57:27 Go in there and do that, or you want to see a regulatory authority that by a wicker commission can go some place without, you know weapons.

09:57:34 And say, you know you just shut down your operations but I guess the question we're trying to tease out here is in what way it can do.

09:57:45 We want law enforcement in years, Given what could happen like given the extremes, it could be.

09:57:50 You know the extremes on that and I spoke about where you have the legal operation where there's people possible, you know.

09:57:59 Illegal gang filling or organizations or to the very other end where it's just someone had got the perfect Yeah, they're trying to get up and running and possibly don't want someone on their side. So guarantees out that question how do

09:58:13 we want law Enforcement involved, because inevitably they're going to be falling once. sounds like all the other stuff that you mentioned is the repo case, and and stop hoping beyond growing chess cannabis

09:58:27 Sounds like there's other crimes. going on there but it's pretty right so like it's it's happening in every State yeah don't know a lot more investment in you

09:58:44 need to be a resident who resides here in the state of why you need to have W.

09:58:51 2, and I 9 at 1099 show that you live here and you work here.

09:58:57 You don't have any of that sorry no permit i'll take it.

09:59:02 I I think a lot what we're seeing around the nation again is that's being challenged in court, since i'm constitutional, or for a board for somebody who's not a citizen they're not I don't think

09:59:19 right out of State, but not even that no international investment, 0 I think we should have some, some boundaries there as well, though you need to be a resident.

09:59:26 You need to live. and occupy welding us so like residency requirements acquired, or a percentage of your investment group.

09:59:34 That's what's going to be required for this seems to be local.

09:59:40 One of the issues that i've heard bought up around this from other individuals in other States is that that can be very limiting to, you know, acquiring just right now and again. right? you can't go back and ask for So you have to

09:59:56 ask people for capital investment right? and and how that can be a very limiting form.

10:00:01 Right So send you that, you know on the on on the Continent that one reason why but lives there now.

10:00:08 No one wants to keep some that would then having a rest too far from the helping your your company right?

10:00:18 So in more ways. see the Residency requirement, and the kind of ability to kind of get up and going a barrier.

10:00:28 In what ways do you see it as Would you have a question. In fact, I wanted to go back to the question you were chasing about. You know 1 point we asked. our invite law enforcement to be part of this Yeah, I think

10:00:40 you're suggesting about having an inspector if if they were coming in and doing routine inspections, and they observe their notice anything like that, What a big flag it!

10:00:54 And then bring that to law. enforcement. attention. and the things that you brought up are very real.

10:00:58 I've heard these nightmare stories and I think that absolutely at that point law enforcement needs to be involved.

10:01:06 But if there was such an inspector, was visual.

10:01:10 It would look forward to the complete walkthrough, and then they would flag that site and go.

10:01:14 Hey? Something this year is going on, and then boom! It has billions.

10:01:17 But to go in the pathical gear. Initially, the whole not necessary.

10:01:22 One is one of the issues, you know, less teasing out of question or solution.

10:01:27 But that we're having currently is it just funding example right we only have 3 exectors from the entire state of white.

10:01:32 Whatever licensing so I guess what I'm hearing, too, should be good recommendation, is that these inspectors.  
10:01:38 We have enough of them. they're fully funded so that you know.  
10:01:45 Law enforcement part to do that you funded W.  
10:01:54 Would there not be enough a tax revenue generated to bring on for inspectors to be determined?  
10:02:09 Every year  
10:02:13 2 million go for every single oxygen The majority of that was not a license that was for their investment.  
10:02:20 They just had to have it. you said it haven't been sitting the bank.  
10:02:25 Well, it was an object. Yeah, yeah, yeah. But no. Well, I think I think that you know again kind of tease out the recommendation without, you know, leading into the water.  
10:02:33 Is that make sure that these inspectors his authority are well planned, and there's enough of them. So we don't have to be a regulatory authority like enforcement. division to show up right if you're saying it's cheaper to buy all these helicopter we bring all these  
10:02:48 guys, I mean, firstly, paying you guys. the merchandise is a money to come off.  
10:02:54 No, but it's it's not a lot right so for example, the police department has more funds and they get Federal dollars.  
10:03:01 Of course, cannonis law, right, or Canada drugs in general  
10:03:15 So the cannabis from the bell I think you know they're They're right, and you know for having that they do that. they do having these factors, you know.  
10:03:27 They can barely give.  
10:03:36 So I totally agree. Yeah, regarding the requirement.  
10:03:54 And that was actually built into the license. Okay.  
10:03:58 So moving forward. How are you, boys, and I don't Know about any other phone that in 2,000 and the open sky? .  
10:04:10 Thank you. When you were talking about advertising about that that green argument.  
10:04:19 We will long about that. Basically, the county of coin people can do a resolution, you know, conditioning initiative to basically say, the lower enforcement  
10:04:36 I remember. Yeah, the lowest and 4 times basically is that question by the prosecutor.  
10:04:47 Is it wasn't Impossible! But it said loud and clear the got it.  
10:04:59 Did not consider and I think it's Every company is that kind of an issue, though i'm your request .  
10:05:13 I mean i'm gonna tell you it never goes up.  
10:05:20 But same thing like they got, would go with you actually needs far more.  
10:05:34 Well now to the Department of Health advertising that good part of it.  
10:05:42 Alright. so i'm sorry that's it That's a I know the listening session, but I just want to make sure you folks know that I believe in the big island.  
10:05:54 We have that's great before we change gears a little bit.  
10:05:57 Any other comments or stories on how you were and negatively impacted.  
10:06:04 Well, I think that's that conversation around social equity should also send me on just folks that are negatively  
10:06:19 I outside of the Canada space. I spent a lot of time in in food and justice securable sustainable peak production.  
10:06:29 And I would say that, like the Gmoc companies on the west side of why, you have cost tremendous amount of damage and what they did their soil quality open air pesticide, testing their community is that  
10:06:48 sit time and time again, and I would say, that I would love to see those considerations also be taken into account. When you speak about social equity in the space, because we have lingering plantation mentality on the West side we have fire barbers that  
10:07:04 don't want to grow you know we have generations that should be connected to the Aina, and and one team to work the land, and they Won't do it.  
10:07:13 And so I do a lot of work with, you know.  
10:07:16 You but I think that those bigger at the the County and State Hall should be taken in iteration as well.  
10:07:27 Historically West wise tremendously. I would love to see some more work done in that space, and I definitely see Canada path to revenue.  
10:07:40 As far as taxation goes. to help support lift up our meetings.  
10:07:47 I think that have should be separate from campus.  
10:07:50 Thank you. And I ran at him company and left 40.  
10:07:53 1% feel testing requirements but if we're doing industrial applications.  
10:08:00 1 billion homes would have, Why would be have anything to do with cannabis?

10:08:09 Out the little bit more from Megan here.

10:08:17 So i'm hearing essentially environmental justice to be included into social equity.

10:08:24 It's not it's how we got consideration yeah How was that if any i'll type in how would that look with that?

10:08:30 Would that look like funding current? Would it look like a program like investigation for me?

10:08:38 What way would environmental justice be incorporated in social equity and a statement?

10:08:42 I think that I can. You know a secret that the Abc is kind of problematic.

10:08:50 And I would say they they should be open

10:08:57 And giving consideration to cannabis as an agricultural marketing.

10:09:03 Essentially So I think bring up some of those plans.

10:09:07 Is a great first step. I think that's encouraging soil organization programs.

10:09:15 Is a a great step, and it would really help to be stigmatized.

10:09:22 Some of the like negative opinions around cannabis.

10:09:29 If they could do something good for the community, would have not be great.

10:09:35 I with West Kwaii in particular, you know.

10:09:39 Again an underserved population. You can look at the the medium income for the space and this immigrant, demographic and population, and you can see that it is under certain and so funding from a Federal level or like I

10:09:55 said. I mentioned earlier. Maybe you can hear programs to help support and lift up

10:10:01 Farmers that may not have the same opportunities

10:10:10 Once it's a little bit more yeah So there, if the communities that are impacted from such a bad ag practices here can lead to that problem.

10:10:22 Outcomes wouldn't be that's right for me to say that you're recommending also some funding for healthcare.

10:10:34 Perfect, absolutely awesome. I think that, you know, supporting.

10:10:37 I think that farmers play critical role in our overall health community health.

10:10:42 So, instead of using organic farmers to get to market you know for faster, better processing facilities at the county level, you know, like working in the app space, it's really difficult to export valueatic products for example, based on the

10:10:59 processing the U.S.A. processing facility

10:11:04 So expanding those to some farms we're kind of and then more specifically, cannabis as well.

10:11:11 I think That's answer your question I know i'm getting in the it would be easy that should be good.

10:11:29 Oh, not for what she said regarding taxation of legalize the office.

10:11:39 Is there any current agenda or plan for How that money that is taken is allocated in the state budget.

10:11:54 That is what we're listing the state of boy our politicians and representatives.

10:12:00 They like to talk a lot about sustainability security.

10:12:05 And they keep going around this number 80%, 80% is imported.

10:12:09 All the food bottoms holding stores and restaurants is imported about massive containers

10:12:18 And others in other States. I know they they say that okay we're gonna we're gonna earmark this money that we're taxing from our dispensaries.

10:12:25 And our legal wreck, you know we're gonna put it towards education.

10:12:30 Well you know education is another single right now, because that's another broken system.

10:12:35 I used to work in department education and Wi-fi

10:12:41 Is it possible, though? Yeah, we can keep the tax money taken as revenue from our canvas industry and keep it in the agricultural sector to subsidize good production because nobody likes the park right now we like stuff for

10:12:58 me, because in you doing you're doing so hard work growing tomatoes, if you saw it for \$4 a pound, Okay, but if a terminal farmer or allowed to grow cannabis and subsidize the middle

10:13:11 operation by going to high high. you know commodity cash crop, hey?

10:13:17 Maybe you'll see all the red you know and then so the other thing, too, is that she thought it was healthcare.

10:13:25 No. How about that question? right that's the only way I can cover myself?

10:13:33 It's my question that doesn't even I don't I hardly make any difference.

10:13:44 Yeah. My suggestion, though, is to extend a medquest like pocraft to anybody who is a legitimate farmer in the state of oil, and remove that 2,000 power a month.

10:13:53 Account. Because if if the state of why truly supports farmers in the state of, why should provide health insurance and dental ambition for people who are gonna do a job that nobody else wants to do.

10:14:10 If you could get vision on that

10:14:18 Want to ask a step by question on you mentioned farmers who are growing food, and then also, possibly from

the campus, So I guess i'm hearing that if a farmer is doing cannabis, but also doing boom production that there should be some kind

10:14:33 of tax incentives to to encourage the absolutely, and not, I mean, it's better for the soil.

10:14:42 Yeah, or polycropping, or working within a really strong rotation.

10:14:48 Of food and cannabis production. I mean that's that's that's optimal, right?

10:14:53 Yeah, Yeah, So it I guess i'm thinking ahead. so I like that nobody wants to start a cannabis company.

10:15:02 They have a bunch of land, and all of that and then they're also putting local food into the the economy of that should come with some type of incentive.

10:15:10 So it's really interesting right now. we'll before we get to help a question right now, canada's licenses and like what we could do with that poverty is restricted just to candidate right?

10:15:22 So I can reach out this mystery. you can only sell cannabis, and you can't even sell parap down the forms.

10:15:27 If the growing facilities you could only grow cannabis and you can't grow anything else.

10:15:31 How how cy should licenses be in the future?

10:15:34 So it seems, at least on a growing side. maybe not suicide.

10:15:37 One should retail licenses you've restricted to just cannabis

10:15:46 You mean dispenser. use it so no no head job stuff correct. it's illegal for Okay, can be a separate business.

10:15:58 It it's another job for somebody so even when it's in the legalized okay.

10:16:06 So even when it's legal Oh, my should the licenses still be bar or

10:16:26 I know that seems like a real I mean I appreciate a headshot, because i'm going to consider that like a creation, you know. So it's still spreading the opportunity but it seems like really small building

10:16:40 question. I mean you work at on the dispensary level. What?

10:16:46 What is the what is the methodology behind? not allowing parabola?

10:16:57 So, therefore they do not endone, or will run out the selling of anything that encourages smoking.

10:17:05 Probably what? and active smoke. So you can't sell joints for a long or florida There's 0 rational basis, because there's 0 evidence that smoking cannabis does anything other than lower

10:17:24 your risk of capsule, and we're not talking about selling tobacco right?

10:17:28 We're not talking about something to that right so i'm Sorry I will, I do want to take one thing that because I know Alex looked in here, and I was listening to your introduction just for full transparency you

10:17:46 are the executive director of the what you have for a yeah one Countless Industry Association, which represents all of the dispensaries or 7 out of 8

10:18:05 Paraphernalia right now

10:18:20 Yeah, why not? Yeah, The question is, you have more one other than Black ?

10:18:24 Yeah, I think that's I guess it coming from that license standpoint around this kind of smoking policy.

10:18:47 So just continuing all your product and keep it, you know, refresh.

10:18:53 They? they have not allowed those for the long time saying that that encourages smoking of the product.

10:18:59 Yeah, we're not gonna allow you to sell containers.

10:19:02 So I guess this is a question for retail licenses.

10:19:07 Should they be allowed to sell other things you know what I mean, if that's a part of their business decision, and they want to sell they can put your data on the same. should they be about i'm not sure that they should be selling the data on the same. shop. as by electricity.

10:19:29 Like, you know. but I don't see a problem with that But then that that this discussion feeds into a bigger issue is which is the the States policies with smoking.

10:19:35 I I mean from somebody in the headspace, near the same age or me.

10:19:39 This opportunity at the State level to sell and flower It's a really big economic driver on the on the Continent.

10:19:50 And we should be allowed to see the same great Hi.

10:19:54 I. So I was just gonna say so. A recommendation out of here would be to to say this, not push back on, but reevaluate the States policy on smoking in regards to cannabis yeah I mean

10:20:14 the There's plenty of medical dna and evidence you know wedding. So it changes all where it's. Okay, it is more beneficial than not not So i'm losing focus in that fight.

10:20:35 Because I know why it's so, against smoking yeah I mean if we can get a lot more and have them put a hedgehog over here, same owner, or whatever.

10:20:43 So we can get more freedoms on the canada side that'd be preferable.

10:20:47 So i'm not sure at what point that So turning to him that you mentioned keeping it separate from the canvas.

10:20:58 Say you were over, whatever that they do put on the definition of them.

10:21:03 Should you be able to sell that into the sensory system, the cannabis system?

10:21:07 Or can you just use the ability materials and not Cv.

10:21:10 Stuff. Why, for simplicity 6. I keep it separate.

10:21:18 However, the Tc. that we extract and concentrated form should be able to be sold.

10:21:23 In the center, like like Iceland, and it's just a complete base.

10:21:42 If someone's selling down the street but this include so one of the things, let's center try to pass last year's ban on like delta 80 delta double 10 some of those things of that nature given that there's

10:21:57 not a lot of research things like that, and there are people being extracted very high frequency rates.

10:22:02 Would this include those types of items? Well, I think

10:22:13 Question. I like, what are healthy extraction processes, because a lot of the ways that not really great for you, Correct?

10:22:23 So I, and as a as somebody that has traveled both worlds here.

10:22:30 I think that have production on some level should be separate I don't think that the dispensary should be growing up.

10:22:40 I think that we need to give the have farmers in the opportunity to have a fair shot at their making somebody in that space.

10:22:50 So I think the Canadian production should be Cannabis production, as far as like CD production stuff like that.

10:22:58 I know some of the sensors, are trying to sell their own so like right now there's a 56 million dollar market and that's imported in and that's not wrong here

10:23:26 it's just over regulation didn't put us that just doesn't work, and essentially it should be growing

10:23:47 Yeah, that's how it happens and you could also then produce it, and secondly, sell it on the continent. great?

10:23:56 Yeah, that does make sense

10:24:02 No one take one so in a few future dual early organization system. How do you envision your own participation?

10:24:16 I'd like to do a little bit of everything consulting and then, being a part of any license from the growth, it's delivery to the retailer that's where personally I think

10:24:31 Mega Nice Company is positioning ourselves, should we?

10:24:44 Transition We talked about the horizon from bottle for the account.

10:24:52 What What about have lowered and he wasn't up by tracking it?

10:25:03 It's already wide open the question is, How is it the business feasible at this point?

10:25:12 And I think what if there's 56 licenses or something.

10:25:14 And then not one. that's really successful here because it's. it's a really hard business to make it with the current. Yeah, and I mean like, I know you guys have gailing cap paper I think I live in cohola they put forth a pretty

10:25:33 decent bill that essentially allow for up to \$600.

10:25:39 So have processing on farm to support a small and that Bill got, you know, scratch It's a pretty big meat, but I think always putting a little bit more power back against our farmers.

10:25:52 So it could be a profitable, profitable, viable, and of course you know less.

10:26:02 Our our dependency on client exploitation I think that giving some of that i'm not sure if the cannabis let me explain a little bit of what that bill is trying to address so the

10:26:16 processing on a farm that's currently not allowed so you would encourage State to allow processing to happen at the

10:26:25 Origin of I think that was long as as long as it's dive in as long as it's tested, and it's.

10:26:37 If it's not on the phone you can process.

10:26:44 Let me not have a a process or registration through the department, of which kind of again, in the true Hawaii regulation.

10:26:55 This one pretty hard to very highly regulated make the processors like Gmp certified, which ultimately actually from the national level, might be a thing but processors or harvest can process the registered processors and there's

10:27:14 only a handful, maybe bring it or at this at this point so far as time production.

10:27:23 And what's the barriers for individuals to register and getting a processing plan.

10:27:31 It's the the the kind of lab processing facility.

10:27:40 But like Cgmp certified it's tremendously expensive.

10:27:43 A lot of people are. really prohibits a smaller, less.

10:27:51 Well, processor got. And how could you? more great environment?

10:28:00 That provides more of those with less versions. I think it goes back to that.

10:28:07 Well, there's there's a few laws within the you know, opening up the smokeable market with each there is, you know, the farmers wanted to do like water extraction.

10:28:27 Yeah. the line is kind of smaller scale process, do away with testing and so many compliant that should be good just like normal business.

10:28:46 Right Now you go and test if somebody points it So so we have a new person here. Yeah.

10:29:04 So we really wanna get to on social equity because we're really getting into the what we really should go back to the idea of why we're here, my name is Jay Brad my brother

10:29:25 Johnson actually runs Through So I buy my license Personally, I would like to see more of a where we're doing 5% tax on a collective be generating better tax revenue

10:29:56 see 2 times already. Okay, Personally, the PI is a medicine access to the cost and then we bring it back to Oh, what could that mean?

10:30:18 Right, cause I was part of the reason why awesome So a large part of our kind of listening session here is if the State were to move beyond the medical program to a full legalization what sorts of things could that program

10:30:41 do to enforce social equipment. So what is social equity need to you?

10:30:49 A definite percentage of whatever recreational account is i'd like to see it.

10:30:52 10% tax building people that are actually made up to

10:31:02 You were born here to cap you, I told you you know, so. what it ultimately comes down to is why it needs an export.

10:31:17 Desperately. we have ebay's growing 5Â min for them. it's pretty much in the world if you can help someone know what they're doing.

10:31:26 Someone who knows what They're doing is not ringing in an expert from the main lab, and it's probably on mainland for 2030 years.

10:31:34 Actually someone from Hawaii, from along from Hollywood that has been growing in from either.

10:31:38 As soon as it was the I think we're gonna have like people didn't grow up in the sixties and 70 say \$10 in a house.

10:31:50 Okay, I off through all 5 \$10 in house they paid now should get their percentage to do the research they need.

10:32:03 They need the station to get their percentage they need But i'll ultimately care why they would have said an example of 5% kind of collective this work as a recreational one.

10:32:15 You know what I mean, and so that's where I stand on it there shouldn't be to the motions because another a small farmer, and everybody has something to offer based off the genetics a lot

10:32:36 of people I kind of i'm hoping Ricky, Hoffman, you got that's a lot that's for you for accounts.

10:32:47 Alright, I think the Tims were after him. possibly. Well, how they should get that!

10:32:54 That would be another set Social equity way to look at it like I know the State of Oakland.

10:32:58 I know a couple of guys out there, you know, came from nothing, because they were, if they were able to get a social equity license.

10:33:09 You know, like something that can be because all the meetings on that is yeah for some of the accounts.

10:33:19 Really, unless you're talking about like you're overdosing them with you know that that needs to be the only thing really right regulated. It's like you can't over know somebody with that you know that that

10:33:29 is the reality of But you can very easily and so like the fighting So that's my next kind of question for social equity is there's definitely the kind of references or making up for past pieces animals can

10:33:55 put people on their on the bus real fast you don't want anyone tried.

10:34:01 So one social costs are there. and what can we do to to remediate those in the law ahead of time?

10:34:07 So instead writing, maybe

10:34:14 I don't know joke and that that is where like other States. I'm wanted i'd also like to point out that, like my father, rumors were at the top of the way.

10:34:22 He was paddled i'll never transmit with because of that sooner.

10:34:34 We literally lost it like and I don't expect anything. Yeah, but I would like it like I've literally helped I do it for people who have paid for answers who are really sick to understand.

10:34:44 So it's like not all real cannabis on my own, unless somebody who's in that dire situation. That's where the compassion really goes back to is like again.

10:34:55 It's not about access to fare and you know what I mean like parallel, they're paying the 5%.

10:35:08 So it's like he's setting a great account, and I know their lawyers are on it.

10:35:12 And like. I would like to see that kind of thing will all, every with whatever you you gotta understand.



10:35:24 Not everybody wants to go. You know what I mean just because I have a part, not a lot 65. the part of the thing over here, and I've been.

10:35:32 I walked away from the both of my accounting back with the I don't got it caught, not synthetically grown.

10:35:41 And also the last thing is testing greatly. I believe the testing regulations over here might be a little bit too string, as far as certain things.

10:35:51 And I know a lot of people problem the industry from California or it still will have, like you know, the main thing, but it's There's something that's not harmful whatsoever, but It's like

10:36:09 this department health decided to put that in there which makes it very difficult for if you're going for an hour and a half.

10:36:22 Let's take a quick break and then come back and

10:36:49 Yeah I have a business I can't even

10:37:38 Because of the other States,

10:37:52 You know well

10:38:11 ,

10:38:20 ,

10:38:24 From all it's not Okay, okay.

10:38:40 Job from all

10:38:52 There we go, So so what do you mean?

10:39:00 But I I and then one part of what we're talking about today is how that you know actually

10:40:01 licenses that's why I'm terrified with as well, or the pensions

10:40:40 Yeah, we're very passionate about it so I don't know ,

10:41:30 I've been looking at my help back, but

10:41:46 I I did not start losing until I was 35.

10:41:51 Do this if you want to 500 if there's anything else

10:42:05 I would no moving up right

10:42:23 It's because of by paper addiction I'm.

10:42:31 Sure there are people I know that yeah, I noticed that.

10:42:50 Yeah, your paper all over because I brought the the backpack, because i'm traveling and cut.

10:43:01 You know I didn't really read the rebates you can kind of see the paper that's actually gonna take them all out

10:43:16 But it's actually a lot of well, yeah, i'm really my desk to go to all of them.

10:43:38 I think, except the time, Alright, okay, and I don't know how good I'm not going to and actually I guess even Huo, I land on the blowing and

10:44:03 thing like I do need to type out my notes no, not how many?

10:44:20 ,

10:44:31 No, you're fine that is pretty we have got it that is one good idea, but I do see but that kind of it gives

10:45:32 itself as a medical or not is relevant to the best instance of the child.

10:45:37 Unless you make a factual blinding, otherwise right for them to say what is wrong with ,

10:46:11 Yeah, if they're if they're endangering the child then clearly that's what the we have to do that a calendar all of the

10:46:38 reports. The family law courts are all different, and all the child detected.

10:46:39 Sir, and then we finally got full State level, really I like I like

10:47:01 Show exactly, and not community education has elected education

10:47:20 I want well, I see No.

10:47:45 I I watch No, I I watch them

10:48:11 Never worked on

10:48:55 Okay.

10:49:12 ,

10:49:48 Yeah. Okay, ,

10:49:56 Yeah,

10:50:17 Yeah, yeah, But what other level of ,

10:51:20 Just like oh, it's all the version no so we gotta go like

10:51:32 Right, any wow, another part at all, And do you think, Josh You want to tap them for which is We have the innovator?

10:52:08 What are you doing

10:52:14 But thank you. My problem sets Okay, So well, he's got to get elected, for if you got 2 lines as well for one and a half.

10:52:36 Yeah, yeah, yeah, So he sorry, ,

10:52:54 Oh, democratic, primary!

10:53:04 Good, democratic, primary, or a total.

10:53:19 Both caps right like doesn't the republican have a help that it's kind of what i'm wondering we're gonna see what we're gonna see Yeah, I know it's a lock shot and I don't know

10:53:38 actually scarcely because I think that scenario, and like a lot of angles will not which can happen. I haven't been following those numbers but if you look at

10:54:01 instagram I tell you while it's the most outrageous.

10:54:08 No, no.

10:54:14 No, but then the State, as a whole I know but it's not insignificant number, and you know, a fair driver of our constituents.

10:54:24 However, the talking Yeah, Yeah. Yeah. yeah. So I I am hopeful that : no level headed.

10:54:38 I wish okay, Oh, we could only go and then you know .

10:54:48 Oh, yeah, i'm glad we're not doing it we like we might.

10:54:55 Oh, gosh! so much I mean just on the the way that

10:55:15 Yeah. So Let's figure it out. I mean kuwait is pretty mellow, I think, except for that guy who got invited.

10:55:34 I know Brian. yes, and now, we're thinking now but

10:55:41 We do have our our little Yeah. Yeah. I wanted it.

10:55:57 I mean, I have patience with the conversation that they have to stay.

10:56:05 I think, Okay, hello.

10:56:20 So I really wanted that you guys. don't. know his name to to tell this story on the on which is interesting because his brother is on the Yeah, Yeah.

10:56:36 So whenever you wanna start with that so everybody's making the way back in break your chair, Do you have to sell all the way to that ,

10:56:50 On the corner of the table there perfect, I mean, I can say Yeah, no worries that way. when you talk to the camera, can definitely like Senator Say, if you could when we come back, if we could start

10:57:05 just telling your story. Oh, just to say that we don't, you know, when they come back in yeah, Oh,

10:57:44 Okay, No, it's all How like

10:58:01 I really like I said, yeah,

10:58:28 I don't know

10:58:32 I don't know that we could show that we can't.

10:58:39 And then yeah, ,

10:58:57 So then I'm going to wait for them to send me But so yeah, i'll stay here.

10:59:10 My wife won the picture with me

10:59:19 Okay, Well, okay. So well, maybe ,

10:59:44 ,

10:59:49 Are we gonna be on your instagram I don't know

11:00:00 Okay, all right. So in the last dish hour, and then and always things that you already as well.

11:00:17 So we have a total story. If you want to hear we want to talk about what it in the industry, and I want to ask all of you the questions like, what questions should we be asking that we haven't asked yet about social equity in

11:00:29 the industry. So be thinking about that while we hear a story and then talk about webinar industry.

11:00:36 Okay, So my daughter, her name is Soviet.

11:00:41 By the age of I believe that was 3 or 4. She started.

11:00:46 We tried doctor medicine. We tried Cvd. and eventually, you know, have a bad account.

11:00:55 Yeah. So we eventually try a PHD. by the recommendation of her pediatric.

11:01:01 And what we found is the gamec actually completely prevents the seizures.

11:01:07 If you're able to build it. up, in their system and as long as they don't actually get like a like 6, or they're cuteing in lose the why, they're able to completely control this feature, with the

11:01:19 cvd even more so if they go into a Seizure, you can bring the Seizure with the Dvd.

11:01:25 And that is my binding, and I would really like to see something in consideration for as far as like seizures and what not like that.

11:01:34 Because I know other parents that have to lose the call. Yeah, that that is my 2 point, as far as you know.

11:01:47 And we we talked outside Jake One of the one of the concerns, I think, was also because your kid is going to school, that the educators that the educators the key .

11:02:08 Features like you can sign where you know what i'm saying and like, I don't wanna even quit that either.

11:02:13 With our choice. we want really pressured all but yeah, so.

11:02:20 But that is a very real issue with a lot of our teachers, and even just generally like whether or not it's the teacher needs the medicine, or the student who needs the medicine.

11:02:31 They shouldn't be judged at all reminding their medicine.

11:02:36 I feel like that needs to have the log rewritten because you don't need a bunch of young kids on pharmaceutical.

11:02:38 We need a lot of a natural plan, which is actually a a lot better.

11:02:42 Last side of that. Well, it's an action over you as somebody

11:02:54 Laws in place to make it where it's not a situation where you're like even considering like am I breaking a lot or not needs to be like this is the best option for my child.

11:03:04 Not. Oh, I gotta go to Colorado because they're allowed to allow this.

11:03:09 You know it's just a compassion side of the black

11:03:17 And it's like that's not the point of the plan like everybody that goes into the business.

11:03:20 So even in a legalization regime, continuing to think about the medicinal part is going to be really important.

11:03:29 Yeah, even recreationally, it needs to be thought about because, like at the end of the day, a lot of people on the mainland's right? zoom in tenure.

11:03:40 Can you, daughter get a medical license again, Okay, So isn't that Oh, okay, Alright, i'm trying to get something like that you know.

11:03:56 Or look at in a state more way that it's not inappropriate.

11:04:01 Currently No. You have your car. You still cannot leave here. but you know, under the age of 18, and your car you still ran for at school. You can, have, of course, and but I think that it helps to like somebody responsibility as

11:04:19 school and make it possible for other kids to get their hands on top, right? right?

11:04:25 So yeah, So that's great yeah I didn't give them their Okay, I got you, you know what I mean.

11:04:43 So then you're like you know you can demonstrate any other medication for a student.

11:04:54 Yeah, I don't know everything. that's a good consideration In what and what other ways do you think that could be implemented?

11:05:03 You said, child, use considerations or or under issues considerations under a So school is one. And what other ways? sports?

11:05:12 Okay, sport should be allowed, I think, Oh, yeah, I think that even like she was going now.

11:05:22 She just kind of facing out of it and it's a dashboard. So we have to give her extra, and it's like she's, you know, but like yeah people will work with it but like now, we're at the

11:05:32 point where, like we might have to get like an e to be able to live.

11:05:36 The State be. I don't it's like we kind of just like held back on it, because we're hoping she'll grow out of them.

11:05:44 So do you think issue is still a cons? Continue stigmatization. and then, therefore, a solution could be a public education camping in about by that point.

11:05:56 There needs to be an education down hand out schools you know and I think it also needs to like.

11:06:03 While we're on the subject. with all the drug issues in general. And why Silicon needs to be like just resettled That's a whole Another that's a whole another

11:06:26 The state of one, so women in the industry. I think labeling.

11:06:35 So if you are using if you're a grower and you're using people's wedding, and you don't have to label that so the end consumer doesn't know I don't think that's right at

11:06:44 all. and right now the way it works is, if I want to grow up with certified or gathering like a pet kind of money, get a certification.

11:06:50 But I want to display the next do whatever so I think it's all after I have one thing go out, I believe sustainable garden in general for kind part of the law you got guys growing that's Why, i'll put

11:07:05 it in the sensor over here like. Have you seen Rock rule and all this stuff just wrong in?

11:07:11 You know the Land Bill, and it's like you can take some good soil.

11:07:15 I'll just keep using it you don't have to stop and for an island that's really the only way to do it.

11:07:20 I mean, we prevented that to the Department of Health which allowed them to get the license with Zoom So for me, like something that actually invite people not so much of all right.

11:07:34 Everybody can grow cannabis with, input, you know, okay Is there a certification?

11:07:50 Is there a standard Got it these guys, There's 5 voices up in on Washington right now.

11:07:59 They're all using certified and then big things up there.

11:08:02 So like, yeah, So they they would probably be the best people.

11:08:09 Bye. they have a whole big I you can solve video. understand what they're doing, and then maybe not make it for every garden has to operate things like that.

11:08:25 But it's like a it's a a place market so you guys don't understand like look they're able to keep reusing their soil.

11:08:30 They're using all organic components not causing any harm to the to canvassing and brandy as well.

11:08:49 We talked about certified corporations as an essential model for you know.

11:08:55 Good management practices, good agricultural practices, providing, you know, liable wages for people that are working within the industry.

11:09:03 And you know that's not an easy thing to do but like having somebody that's already done it as a use of benchmark, or where we can get to positive thing.

11:09:15 And there's so much within the the cannabis cases it is that is waste

11:09:21 I think that that is something that needs to be looked at.

11:09:23 You know, packaging sustainable practices sustainable farming practices, good agricultural offices.

11:09:33 I think that's all really an important part a puzzle because you know, we're just we're stores here, and we need to be doing better and you're you're talking about jobs earlier, and what

11:09:44 about their jobs instead of in warding Rock Bell from Washington?

11:09:49 What if we had local guys selling local restorative stuff for the growers?

11:09:55 I mean, it makes sense soon, but put the focus into a local community versus kind of main.

11:09:59 Them. and so if we it's a organization had something like an incubator, it shouldn't just be limited to like plant touching licenses.

11:10:09 But anyone who wants to be involved in that industry like selling product, packaging or growth material things like that as well, especially if there you know social equity applicant of some sort.

11:10:19 Yeah, as far as stuff that's been here for a good amount of time along with like a that seems lab, because I don't think we have anything for that so I believe that they have

11:10:38 oh, new thing that is destroying all the genetics across the United States, and all that.

11:10:47 So away, establish like what in my mind it would be like a Hawaiian Sea vault like, give us 10% of the money they generate back people and not one seat ball would Basically, like protect the genetics whatever

11:11:02 registration our trademarks for a specific name.

11:11:06 So then other companies been basically like what the legacy?

11:11:13 Some some families are groups of people, and why have built, you know?

11:11:16 And then, like I said, half in the June testing is very important.

11:11:20 Guys, if y is going to be let's say on the top of the export, any of this stuff in the future, you gotta have clean genetics to start with.

11:11:29 And so having a lot that actually verifies all that before like registering it.

11:11:35 And there's issue culture as well like people could create a tissue culture like a whole other business. So there's a There's a lot of things people are doing on the main line that I feel like should be allowed over here

11:11:46 because it could be beneficial, for whatever patient, how they are not they want to grow at home and go so to talk to this point about regenerative agriculture and motel farm maybe style

11:12:05 a whole nother as a job producer. The job creator is guys making organic inputs from a compost.

11:12:17 Hey? I know, pre natural farming inputs, those kinds of things that we can source locally and produced locally.

11:12:26 That that right? there is a potential industry. Well, I think if we go back to that like started by before.

11:12:39 Okay, model that's a good way to ensure right There's bench parts that you need to meet within that area to be certified.

11:12:49 Which are ultimately and living wages organic info better packaging sustainability.

11:12:56 I don't know how feasible that actually is I'm not quite sure of the cost associated with it.

11:13:02 I know that often like in organic production, that's the cost the the barrier to entry to be certified is often a deterrent.

11:13:11 It's, particularly for small producers so maybe there's incentives like, I say, if you're going through the canvas center, maybe if it's you're using organic inputs it's an incentive.

11:13:23 or whatever it is, alright in that case we're gonna kick us, and we bring it up.

11:13:34 And you say maybe not as seriously about it. Right? but it is one of the issues that large parts of the mainland are trying to address as well.

11:13:42 So. Is there something in hawaii that you think should be added? You don't have to spend a lot of time on it.

11:13:46 But is that a thing that we should be considering for social equity in Hawaii?

11:13:49 Or is some of the other things that we've talked about today taking priority.

11:13:53 I think the things that we talked about today are are taking have taken priority for me in particular.

11:14:02 I would love to see more women in the industry. I would love to see more about feminine energy, particularly when we grow inside.

11:14:11 Oh, thanks, but I think the more pressing me is is you know, armed by the more on drives.

11:14:23 I think I mean it's still a pretty male dominated space, and you know I get by because I am the person I am, and i'm very direct, and I think is the market opened up as we move into a horizontal.

11:14:37 space. More often you will naturally arise there's a lot of incredible in the space that are doing really good stuff.

11:14:44 So I think it'll be a natural progression thank you So one question about social equity are we not asking whether on the sheets or today?

11:14:56 In terms of so also of addressing the women in count of this issue, I think, we should discuss the educational aspect of building this industry.

11:15:09 Organically, and community centric a grassroots from the bottom up is so pretty much telling deal with the program.

11:15:23 I don't need to go to the program university of boy needs to get with the program. I need to get rid of this whole idea of stigma and understand that there's potential in this market and there's potential to do it

11:15:34 right if we want homegrown talent and homegrown farmers, and so we don't have to import people from the mainland or from other countries, and we need to start teaching our children how to grow plants again in school and

11:15:48 K. through 12. We need to teach them how to do agriculture.

11:15:53 And you know I got. I got a major scoldings.

11:15:56 When I used to work on a for the county, I was talking to the principal of one of the high schools about, not about marijuana about him.

11:16:07 After the 2,018 farm bill I was talking about him and automatically My, my boss came after me.

11:16:14 It's only kind of talk about marijuana because it's right right.

11:16:19 But not for real like. If we wanna talk about building a strong, viable industry in this annoying, we need to find a responsible way to educate the next generation, so that we could have the best growers in the world on in these

11:16:36 islands, and we need to remove that stigma and get over ourselves, so that we can actually create solid curriculum in our local schools and in our university, so that we can be a primary Campus for your university

11:16:50 and college, or where students want to be a little bit more.

11:16:56 You know of that, that college pathway, so that so we could help the research and the laboratory, and the testing, and everybody can be.

11:17:05 You know, hospital nature role in this industry. I would like to see, like the actual youh guys set up like how to grow up the cannabis class.

11:17:14 Yeah, because if we really like caterpillars that are up and coming you know, 1920, 21 year old people that could be a full, you know, the State allows for the export of the product and So forth because I do

11:17:29 like providing it for within the state. is important but also looking at the We have some of the best growers in the world between the islands, and it's just they don't really want to come to the light, because there's

11:17:43 not incentives. you know. And the only way to provide that sentence is like basically create a lot of protesting.

11:17:53 Create the genetic documentation while protecting the people, providing those genetics, you know, actually using the State, using that as a popcorn that collects.

11:18:03 Basically So like, why would we just sit there? And as kind of this is growing and groaning, yeah, like, say, in the back, Oh, the law, we should do progressive forward and create the opportunities for all the jobs.

11:18:22 Because right now all the money comes from all what you want, or is our throughout the State, and we need that drug to stay upload.

11:18:32 And if we're able to create the prop that is exported, we're less and obviously i'm not straight up to like, I go away, and I see Disneyland at all 50 I think

11:18:47 in, so I wanna tease out some of the information here.

11:18:52 I guess what i'm hearing is that the the state should have an active role in building industries.

11:18:57 So an entity, or or something of the nature of the State, is holding trainings.

11:19:03 Education bringing people in to educate them, to get ready for this integrating and providing local talent.

11:19:12 I think. Well, they're saying is a little broader than that too.

11:19:14 Right. it's fostering or funding classes whether it's at or and I think part of my question to like Oh, clarify how much of kind of you mentioned growing in schools, How much of what you're talking

11:19:31 about is specific to cannabis and How much is we don't have any growing classes in schools for any point right?

11:19:37 So it's part of it like

11:19:47 On that a facility away from the actual main school I mean I as a somebody that's in the head space.

11:19:59 I would argue that, you know, like the the current rules, the 500 bucks in regards to background and stuff it should be.

11:20:09 It should be it should be reserved because it is perpetuating the stigma that filter into the Canada States. I think that is something that we need to look all of this.

11:20:18 We need to be more as a an agricultural education.

11:20:23 And I would also like that yeah you can't like, put a whole bunch of girl

11:21:25 Yeah. Okay, I have been for me incredibly restrained.

11:21:35 I know What I would love to do is take a few minutes

11:21:38 And I set myself a timer. So it'll go off and I will shut up. because this is the most exciting one of these perspective that we have so far we did call out and get to be low I kind.

11:21:47 Of do something in the whole so what I would say, Jeff, What i'm hearing here is that while long ago even, I think before my esteemed colleagues were we're educated

11:22:06 I was at in the Oh God, the early eighties, the very early meetings and political science.

11:22:12 There was a guy there. they jim data who taught the platform futures because what we are doing is we are inventioning future solutions right?

11:22:22 And so There's a couple of dangers when we do that, one is that we think it has to be a linear progression from the present day.

11:22:29 Reality that is incredibly restricting. And if you think about it, that is not how reality works did not get here out of the path to some kind of linear progression, Even if you just look at the the the history of Hawaii so, one of the things we

11:22:41 did was okay. We're gonna suspend this week we're gonna just imagine what is our perfect account of its future, And one of the things that Jim did back in the day since we had Well, actually there's it's not just

11:22:55 the future, it insurance. and he had, like 4 basic models that you can make up your own ball.

11:23:00 So one model with can pay you growth right? Capitalism is going to keep growing.

11:23:04 The stock market will be really good. Everything will keep going up.

11:23:06 Everything will be fine with your money and realistic right. And never mind about the externalities and pollution.

11:23:12 Little minor problems like that. another kind of opposite one was the Ethnopia model like whoa we're gonna slow down and chill out really more with left.

11:23:22 We're over. we're working sock to my bicycle, so it'd be cool more kids will be farmers, and that's kind of like we don't live in Oregon right it's like the

11:23:30 whole world, you can totally get a bottle the other one is like transformational.

11:23:34 Either high tech is going to save up when one day we'll all have super computers in our pockets, and our lines will be perfect right, or there's a variation of that which is new age realization one day.

11:23:46 We'll all vitamin certified in and you know the legislature will become enlightened, and Congress will the world piece, because they're okay you know it's possible You know We spend a lot.

11:23:55 Of money logging the world piece. Maybe we should just do the other one.

11:24:01 My favorites, and probably the most likely it's just collapse.

11:24:05 You guys ready. You got gun. You got lab. You can go funding We need more while it goes, and cheap stuff by way.

11:24:20 Yeah. So I have, by all the pathforce members, and always be fighting, you know. Right?

11:24:28 My So think about what are our possible future, And a little bit about where we came from, right.

11:24:33 We came from the war on drugs, which is really a racist process started a 100 years ago. But the moral paddock of the 70 is like, Oh, my God!

11:24:41 You know marijuana to make everybody crazy, and then the incredible shape, and especially for like, because we carry the shame prosecution incarceration. and you know, hurting everybody is a terrible terrible thing and and out of

11:24:56 that background. we have a couple of weird conceptual structures that we all take for gravity, for instance, and

excuse me river that he and cannabis are somehow 2 different things, which I mean come up is the same.

11:25:11 One i'm not sure exactly. why we would regulate the same plan in 2 different ways, but certainly different activities.

11:25:17 Certainly, if you're extracting, powerful pharmaceutical single molecule drugs that is different from 83, or making paper 5, or whatever you know.

11:25:27 But I think we need to think about what are our conceptual structures that we're inheriting from the the past that are, in fact, quickly, because I actually hear you guys talking about all kinds of crazy radical stuff.

11:25:38 Mobile Answer. little export is still star trek okay and we're gonna get that.

11:25:42 We're gonna get this in africa right now from bipartisan, the government offering 35 million dollar bills, maybe all right.

11:25:54 There. I don't have to make it in front of me but there's already Yeah, exactly. So you know.

11:26:04 But that stuff is already super far out and we're thinking about that.

11:26:07 So right. And we're talking about it educational programs and as you put back a meeting and data for progress is because we recognize that we have all of this inherited metal baggage that we do not want to pass off another one

11:26:19 that we inherent is medicinal versus non medicinal. right?

11:26:25 So people like often think. Oh, my God, you know we could medical this little cannabis, and then it's just like It's just a bit edge of the wedge.

11:26:34 They're trying to sneak into legalization the exact complete opposite is true historically right. When they attempted to restrict Canada.

11:26:42 It was in a barbecue. It was legal, traditionally in the in the early part of the century, and what they did when the 1,933, how it could pass that was common made it so difficult for position

11:26:55 super prescribe, and this will have this and so how many tax that they stop billing it so that by 1,944. They could say that.

11:27:04 Oh, it has no that it's no use therefore it's out of the pharmacopia, and then 1,970.

11:27:08 They could say, nobody is. so you schedule one how did God's name discounted schedule up right, and that is where we came from.

11:27:17 And so we used to notice what we're thinking absolutely is that is that is medicine for all kinds of people in all kinds of contacts.

11:27:25 How do we include that? So I just inviting as much broad thinking as possible.

11:27:33 I just wanna wrap up with and and i've got some other stuff that i'll.

11:27:36 I'll get to the the task force how would that prohibition and the war on drugs comes profit save the chat right?

11:27:47 There is high reward, because there is high risk. If the point of the legalization project of that project is to bring that right out of the risk.

11:27:58 So we are going to bring down the reward and I Don't care how many tens of billions of dollars come out of the Canadian Security Exchange.

11:28:05 This is dirt. Pardon me right this is only the portfolio that some consumers are more discriminated, and they've been a lot more group, not by wise.

11:28:14 They want a nice bottle of wine knocked down right with that shape of the industry is not clear, and there's gonna be a lot of retail wholesale price crash.

11:28:25 If we are successful because of that, that would happen there will continue to be able to block the underground market, which is what that's happening in California.

11:28:32 So if we measure success by transfer from the underground market to the above ground market, then we will see a reduction in the margins, and the prices are all gonna come down and quickly when you say transfer you don't mean

11:28:48 transfer of wheat itself. No, no, I mean transfer of the it's the operators in the block market, the current, the economic market share which both with me, who submitted a report to the task force for the last

11:29:03 meeting has many years now of measuring different states. What is their success?

11:29:08 Rate, is moving the economy from the underground market into the regulated above ground mark.

11:29:14 So he could tell you how effective your State regulations are based on that measure.

11:29:18 But that measure is going to be different from your tax revenue.

11:29:22 Right, because you you these some of our starry visions of like Oh, we're gonna make all this money and fund all these programs.

11:29:32 That's a that you can't have both things right You can't have massive taxation on a successful legal program.

11:29:40 It's just not gonna work, and you guys are all like people on a farm.

11:29:44 It is hard work for me. So some people are on the bar and in the future that will be there.

11:29:49 It's not gonna be all that glamorous it's not gonna be all that sexy.

11:29:53 But there are all these other exciting ideas in this world, educating people about the importance of farming about, you know action, making things about understand where our medicine comes.

11:30:02 So I think that that stuff is super important and I think in in many ways. The more dictionary we can be, the more we could set a challenge or our policy makers to implement our vision. right?

11:30:15 And that's what we want we don't want to chase them around, and try to make life easy for an inherit, You know.

11:30:21 I mean, I feel sorry for the people in the Department of Health.

11:30:25 We have to work to try to make this crazy thing work. But I think we need to get out there because we have so much, so much pain in baggage and and I love all you guys.

11:30:37 So, and maybe what i'll do is I have people's email i'll send them some specific response.

11:30:42 But that's that's really my spiel and also I'm.

11:30:47 Available after 12 o'clock until my 6 o'clock like if anybody wants to go hang out.

11:30:52 Thank you what it just said i'll comment on him

11:30:59 So I agree that same way, I mean in a perfect room absolutely should be regularly the same other.

11:31:07 In this case we wanna call, walk, run, and you have a plan with Tc.

11:31:11 Which is regulated, and a plan with no tc a pilot No, Tnc.

11:31:14 That's going to be used for building holes let us let us run with that, and we'll also the same time.

11:31:20 You can. How would it be like, say yes, because it it comes from the same family?

11:31:28 But it's not necessarily the same one doesn't have that high school like you say so.

11:31:34 They should be able. Use that as thank you, for they want, and kinda how it set little laundry for that type of field.

11:31:44 But I kind of heard about genetic reservations and stuff like that, and my take on that is, I would hate for somebody to have only 3 rights to that genetics. so so I would like to see if there is genetic.

11:31:57 Preservations. I mean let's not lie and be there on the bush.

11:32:00 This time has been longer than around for a long time Those guys have had both genetics, and they've been using those genetics for points on time.

11:32:06 So for us to be selfish. and say that i'm going to presume this for my won't even have maybe just royalty rights to this. It's kind of you know it's a plan everyone should have that

11:32:15 plan. Nobody should have more rights than another. so I would hate to see that happen is is preserving genetics in their own self benefit and self-satisfaction. and well, phones!

11:32:28 What if there was a State C bank that preserved it for everybody who you know, whatever the limitation you want to make for residents?

11:32:43 I mean mentioned something about that, and there was genetics that were given to some kind of I think it's silo, or something like that. they kind of just screwed over everybody got it.

11:32:50 So it really didn't work and so I think it's up to a farmer's individual well being in practice to create what we can and give it to the world it's not up to just preserving it for your

11:33:00 own self, and having some involved that that special just in in that field of work.

11:33:06 One Person's ball you know what I mean so as a partner, i'll say like it's it's up to you to create and and shit I agree but I do think there should be a genetic marker

11:33:17 on way of showing and sharing this while what they're sharing.

11:33:24 Okay, Zoom, I share something to you it's something but something else.

11:33:27 There should be. thank you, Like a truthfulness or some kind of validity transparency with the supply chain from the farmer to the dispensary to the hand consumer, and everyone wins also with information to

11:33:42 genetics in our work. there's a lot of potential for licensing genetics, and it's become a very attractive pathway.

11:33:50 To bring, you know, Black Market gray market guys. I even though I hate that terminology into the legal market as well.

11:33:56 So there is ways to preserve genetics but at the same time make sure that the farmer is receiving a piece of the proverbial pie when it goes into a recent retail. space.

11:34:09 As well. So I think that there's a lot of creative ways to one person per day with a state of Hawaii good basically benefit from allowing people that are talented to bring their strains to prove that

11:34:31 these are ours right, and as an example would be, one of our most famous streams, is the most grown strain and all the flora.



11:34:38 You know what I mean that truly and we don't get shit on that they're making millions of 5 million.

11:34:44 So it's like there should be a kick back for the people who did the bombing work, and I feel like, if the state is involved in that would protect the farmer.

11:34:54 You know what I mean on a bigger level, where, like they can bring their vice thing to the State.

11:35:01 Then give a portion of whatever the State is receiving or providing them.

11:35:04 Well, what about all the people that are out there that are lying about things and saying that?

11:35:07 Oh, yeah, I have this. and that, really isn't what you ask of the internal it's a very fine line of like, what is the truth?

11:35:15 And what is it? What are people saying? Also funding and seeing that it is and not?

11:35:18 You know I have to manage that coming from the seventies from an envelope that went to Vietnam. that brought it back here that he didn't do anything with smoke Marijuana so he brought it back to the Wasn't really marijuana back

11:35:29 there here. so honestly like all over. This is where the Mall at the end of the

11:35:42 So. it's it's hard to say that like you know these genetics are in genetics, and that genetics. and this, you know. So a better idea I have a really like hard time.

11:35:56 Except you might. Where did they come from? holiday get creative he's?

11:36:00 Never had land race and it's not here. on the bush. I mean, you know, I've never heard of ever we're all in genetics We're all importance.

11:36:19 When you have true combine genetics is just bias and I stuff for the truth.

11:36:20 I don't stand for that love to have a lion growing class available to the public. but i'll hate for it to be coming from.

11:36:29 You know we're allowed to advise but it is searching.

11:36:38 And you can document this So then it's like, if I say I have cherry I at the highest from all.

11:36:41 Yeah, i'm just saying there's a lot of people that have amazing genetics.

11:36:44 But they're not gonna like let's say bring into the state, unless there's and that would be on a higher level of like they can help.

11:36:54 For example of this data, that thing that is taking advantage of whatever strand. No, they're not libraries, but they're preserved in the life, or 1020, 30 plus years and over time at the genetics that just change it doesn't

11:37:08 matter it it turns into its own day partner so it's like we didn't get out the same problem 20 years ago.

11:37:17 If he grows in outside, and I grow inside, and we bring both of those the app, they may come back very similar on the and respectfully.

11:37:29 I never trust the State shit. Is there a Is there any tried and true programs or or methods to be able to figure out what those genetics are in kind of no

11:37:53 Uniquely positioned out of all accounts because we have national chocolate compatible card, and they have for years.

11:38:06 They're the only national congressional dedicated desktop, One of the many things that they do is research.

11:38:21 I mean internationally clean research academic class. finding them, and probably they've done lots of So in my mind.

11:38:33 Yeah, the State was gonna support correct funding in in getting them to assist with identification and genetics.

11:38:46 That's right That's, right they are a nonprofit so there's also another thing, and this comes from Hey D Island, where we we're also known as the orchard island and a

11:38:59 lot of the farmers there have planned passing I don't know what.

11:39:08 No one or Cannabis farmer. But yeah, the line read it for generations proof, The platform was federally legal or the State like a lot.

11:39:24 So the the State, doesn't have anything to do with the Federal, any platform yeah, maybe But you gotta depend on that.

11:39:40 So yeah, Well, that's that's that's the same thing with every farmer there. Yeah, So our con farmers have to be dependent at all in captain our pandemic. The better level 3 marks are

11:39:52 handled at the State Level a question for everyone.

11:40:03 And we mentioned a little bit over the break as well.

11:40:06 So whenever this legalization program is implemented, it is going to or is passed in the legislature.

11:40:12 It is going to take a little while right before it gets actually limited and licenses get issued.

11:40:18 During that time there will have been like increased, even increased.

11:40:23 You know legalization. How should the market function during those, you know, year and a half or 2 years

while the agency gets stood up?

11:40:31 What happens during that time? and how do we transition over that period into a license market?

11:40:38 Are we still enforcing the current laws during that period?

11:40:41 What happens so decrep, which you mentioned is is an interesting, agile to legalization, because legalization implies the regulatory program licensing whereas decrementalization is just like, Oh, let's bring

11:41:01 all the felonies out of this demeter for refractions, or stop putting people in jail, and a part of the impulse of social equity is that, gee!

11:41:09 It's map apparently you know Marijuana is not the devil, and maybe we shouldn't have destroyed so many individual that way, and community lives and the 3 people in jail.

11:41:20 For this is is bad policy. So just stop putting people in jail right?

11:41:24 So that can be implemented immediately and retroactively.

11:41:28 If I let people out of jail right so that you can do immediately that doesn't take a program to stand up. and then that kind of transitional period we have the existing medical program for house.

11:41:39 And so, you know broadening and improvements and social equity or horizontalizing and you know hopefully, like do yard and other states that have shown such a fine example. we'll just have chaos.

11:41:52 You know. Okay, i'll stop the worst thing we'll just see what happens.

11:41:54 Very low level, right in the streets. partly any babies will be a payload of pitchforks.

11:41:58 I guarantee. i'll give you the dollar right I can't.

11:42:05 We just donation for a t-shirt, and they get free.

11:42:07 Yeah, and the save is paid for 5% I think You've been talking to Jason you know like people that are going to jail for this, and stuff like that I don't think it's it's

11:42:21 like What is is there anything being done for those folks like I Don't know who's been in jail for 12 years?

11:42:29 I don't think there's a question of his life was thinking away from his family and you know all the things in the hardship that that .

11:42:42 Are you guys working towards trying to make something? I think you guys should.

11:42:44 I think there should be some kind of free go like he was Dave, you know, the movie.

11:42:48 Maybe you possibly did Well, they gave you money and a license as far as they're trying to help you off So I think we need to consider that I need to look into like actually getting people to the license free on

11:43:07 that that has been jailed for. you know again, we went back and said, like, if there was other things right runs inside of the house and then get the buses.

11:43:16 But yeah, definitely there's we're looking into that drop and see that this guy is not a bad person, but in jail for a while they should remove that I have a couple of friends that's gone through those

11:43:27 counting, you know I think they should be free from all that.

11:43:31 Getting a job and all that stuff you know so what are the kind of related issues that we've been a lot on.

11:43:42 I've heard about a lot on big items was the kind of consequences of the civil asset forfeiture that went along with the arrests.

11:43:50 Was that an issue on kawai as well sorry so that'd be like we're making 2 arrest you for your cannabis violation.

11:43:57 They could take all of your stuff in your house because it was associated with crime.

11:44:01 Right, so it wasn't neat but yeah you know unfortunately, I I know an individual that has lost lots of and lost lots of you know things.

11:44:11 So it it isn't fair the one that has has spent and dedicated so much time into you know.

11:44:17 Yes, you may have done something that you might have but he's given a lot of people hope in helping people with their message like they need it, you know. and you know that's up. to you guys I don't know what you guys

11:44:29 are gonna work on to try and do it for that or relax on that.

11:44:34 But yeah, I don't think you know after a certain amount of time.

11:44:37 If someone has spent 10 years of not getting into trouble not being a bad in this society, they should be, you know, free of all those type of especially in if they didn't do anything more than they go on I think that you know

11:44:52 licensing, and all that needs to There used to be some sort of subjective approach to it.

11:44:59 It's not a one size, you know and and Maybe there is reparations monetarily, I think they give giving, you know, social equity. applicants like his uncle should be the first people in life, or consideration. for .

11:45:16 You know the thing with exponential is that all of the affirmative action. Processes have been incredibly cumbersome, and you know you're asking somebody with a criminal record to go out on their way to exude their records so the more

11:45:31 successful programs have been automatic, exponential unless the prosecutor wants to raise an objection and so reverse that that that burden.

11:45:43 And then you know, the issue of civilization, or the Senator was talking about Alex was mentioning.

11:45:47 So you know, on different counties. I mean that's money that that is, you know the the wealth of about it is there left there.

11:46:00 Item, And who knows what the State did with that lab but right? So I mean. So then the question is, are you looking at financial compensation right for the value of the land in today's dollars?

11:46:17 Or are you looking at undoing A bunch of title transfers to take that unique piece of real estate back?

11:46:24 And that is going to be a huge, complicated issue, right? But I think if you put that on the table, at least as an issue from a social equity perspective, we remind people about how an injustice rendered 20 or 30 years ago, had 11:46:40 repercussions and and implications today and trying to fix it. You know I don't know who I was talking about, you know, trying to find the only way to do this has all kinds of implications.

11:46:55 And you know, Kara, I thank you for bringing that issue up again and again.

11:47:00 But it would. We really need to seriously think about the impact of the war on drugs on the survivors.

11:47:09 I really stop using the word victims because we are not picked up near survivors.

11:47:13 We have resilience in our communities and families and individual lives, and an injustice would stop.

11:47:19 And so you know what what is gonna happen today. and Do you really expect the mason cannabis industry is gonna somehow pay for all of that. but cause they didn't get the money.

11:47:30 The State hold of the lab it had the money right that's where the money left I mentioned automatically exponent one of the issues we're running to kind of in Hawaii specifically is that most a one of our

11:47:44 drug laws have been enforced. Our drug in general as opposed to Cannabis and so you won't find in, like any of the court records themselves here. I have to go back to the police reports to find out that it was Cannabis versus ice

11:48:00 versus whatever else which makes automatic exponents very difficult.

11:48:04 Clearly can do it. If someone but shows up and it's like hey?

11:48:08 I had a canvas infraction. Go find it and fix it.

11:48:13 So what sorts of things could you brainstorm for me, for the State?

11:48:18 For how to kind of begin to do that was going to be a labor intensive task.

11:48:21 If we don't wanna just put it all on the previously your car already right?

11:48:26 Well again, if you reverse the burden then great if that's how marijuana crimes are classified, then we're going to expunge all whatever generic drug you know trafficking, whatever and get the prosecutor

11:48:39 is so concerned, or whoever it is, is concerned about this that they can spend their money and take their effort to find who they take.

11:48:47 Are they good or bad guys for myself personally? my philosophical issue? Is that all drug prohibition is a bad idea because it doesn't work?

11:48:56 If you have a willing seller and a willie buyer right they're gonna connect with each other.

11:49:03 And there's no problem unless you're saying there's a public health problem, right or a criminal problem.

11:49:07 Now, if somebody went and you know mug somebody and an ATM to pay for the drug addiction, that's not a drug crime. That's our robbery. right?

11:49:15 That is a criminal violence against the person that's what we're talking about expansion we're talking about you know somebody who is doing something that I've not seen that it's really any of the government's business until there

11:49:28 is either a crime against a violence against the person or a private against property. right?

11:49:34 So it's for that point of view the the whole world drugs not just the war on Merrill, even though the war of Marijuana was 80% of the thing until it wiped out all of our rows and we

11:49:44 ended up with the you know bought to it's not even nice we're talking boxes in the eighties.

11:49:51 You know that. I I just think that you're absolutely right you cannot put that on on the survivors of the war on trucks, and and it's not just the war on half of us.

11:50:04 Yeah. And I think we we dance around like, Oh, you know, marijuana is a nice drug.

11:50:09 Now, But you know Oh, that's that's a bad joke? how's that That vitamin a bad drop?

11:50:14 We give it to fighter pilots in the United States air force, and we give it to children, and voiced I that's all out of all this is that that benefit bye.

11:50:24 So. you know, I think if if we, if we untangle ourselves from the philosophical mess of the inherited more on drop, so oh, you know, some drugs are bad, and some drugs are really bad, and none of it makes any

11:50:38 sense. Then it's not incumbent on us to prove that. Oh, I was convicted of a nice drug, prime, you know.

11:50:45 But this guy was convicted of a bad drug product.

11:50:48 I just, you know, I think we need to challenge the underpinning of like that.

11:50:52 Fill upical objection to exponential and we can look at like Portuguese and gamble a country that's actually very much benefited from the different all drugs all drugs and we're reinvesting

11:51:06 that many of the treatment and community calls so are less few minutes final topics or summaries, or things that we haven't addressed.

11:51:17 Yet in regards to social equity, in a future don't use our dual use candidates industry fine thoughts yeah.

11:51:33 The future growth of the medical feel account of this and addition to hydro teaching or horticulture and agriculture. phone number.

11:51:49 That's all principles and and practical applications of that.

11:51:54 And then you h beginning to incorporate medical and also have research and education in their curriculum.

11:52:07 I'd like to see capsule and the medical school University of Medical School.

11:52:12 I think there's a lot of potential there for them to be a leader, and this new industry and in terms of medical applications of cannabis upload my patients have I love see and the

11:52:33 grandma seizures and there's not a lot of publications out there on any of this, and i' my best to help them find the right.

11:52:46 The right strains. right call to more bars for their condition.

11:52:50 But it would be really nice if our medical school actually put some money and effort into towards research and publications.

11:53:00 What is this kinds of with? their real and they could also be like appointment developing like Cvd with Dhc class?

11:53:14 Okay, I'm going to keep in yeah a little bit. We've already seen stuff that was like 800%.

11:53:20 Phc. like call for that Cbd and everybody's like everyone in Canada, is like this: final bus

11:53:34 I think native Hawaiians people color women. They should have first shots, and these licenses, or less restrictions.

11:53:41 I know what it is, but there should be some incentives.

11:53:45 Yeah, especially if you need one to get a shot at becoming a real retailer. for every.

11:53:51 All have to agree with that. you know like I I'm born and raised here.

11:53:56 My first language is Hawaiian. I speak clue in a line.

11:54:00 I can do all that I have to take hook on launch just to read English.

11:54:04 So just give you guys an idea of like my all of it.

11:54:11 But I i'm not rich I don't have all the money in the world to be able to make all of that I would love to.

11:54:16 But yeah, So i'm just here kind of and I would agree with them.

11:54:22 I would like to see you guys give a better chance and a better train you for us.

11:54:27 You have an opportunity to be side by side with that, and be able to help you all work together. because

11:54:33 Where it is Now it seems like you have to have deep pockets get involved, and so on.

11:54:38 Yeah. have to partner all the rich people on Company at home.

11:54:53 Oh, that sentiment! What is the puda?

11:55:05 And it's difficult for the state to do a pro whole line.

11:55:09 But almost a 1 billion dollars to well, No.

11:55:32 So I I would recommend, because that's how but we can often be going.

11:55:47 We cannot legally do it. So I. We we totally agree with you folks.

11:55:58 So we go put the all our testing nominees on on the ballot and room about there's done oh, And there are some ways i'm target affected populations. that.

11:56:13 Will include more targeting towards state of yeah the listening sessions.

11:56:21 We've been here in the

11:56:31 Yeah, that's an incredibly long question but it's a good question.

11:56:45 Well, you know

11:56:52 I gotta run down by list. currently the holy account of this who is agnostic on legalization.

11:56:58 Not all legalization is good legalization. We certainly welcome verticalization of the existing medical program, and if there is to be any kind of legalization, it should be within a framework of economic empowerment for the clients

11:57:12 social justice for other survivors. with the war on drugs, etc.

11:57:15 We put that first, and we legalize inside that we don't legalize first, and both on some kind of shepherd program.

11:57:22 The the This working group has put out a slide saying provisioning interactive group to find social equity is

the sort of native wy. and under those who have been charged with the Canada from the State of  
11:57:37 Hawaii. I would encourage us to take the widest possible definition of survivors of the war on drugs.  
11:57:44 It's not just those who were charged, although I appreciate the charge, since better than predicted anybody who  
participated in any part of the cannabis, or in really any part of the prohibited substances underground trade has  
11:57:57 linked in fear, and has suffered traw, and maybe the way to back into the the race issue under equal protection  
is geographical residents.  
11:58:06 For some period of time in a high impacted high arrest area, like if we hit everybody pop in for or who live in  
Montgomery for 10 in the last 20 years.  
11:58:15 You're picking up a lot of people who are impacted on the world drugs directly or through their family. That  
kind of thing could be a good proxy. The sustainable corporation benefit corporation thing that megan mentioned in  
terms.  
11:58:26 Of environmental values is also good for limiting the flow of outside power limiting the flow of outside  
capital, it's constitutionally problematic.  
11:58:36 But if you make it hard for them to make money and have to explain to their investors that in a hobby who  
might show environmental sustainability, living wage, social equity, and profit, that you have a quadruple bottom  
11:58:49 line, or you cannot have a license here. Those investors are gonna scratch their head.  
11:58:55 But what is that? we don't understand that so that is seriously?  
11:58:57 What way to throw it out the other thing to do. And you guys need to think about it.  
11:59:01 So you were saying like update or we? How about 5,000 square foot cap on all cultivators and no license?  
right?  
11:59:10 What can you do with an eighth of an acre of cake?  
11:59:12 Think about that because They've got a lot of little bar that's a whole different world than you know. blackout  
with 1.5 million square feet.  
11:59:23 Well, that is not where we want to go. felony recap is totally demonstrable.  
11:59:30 If somebody has a melody, they can give evidence of rehabilitation.  
11:59:32 They can be wise or we just don't have a box We don't ask custody absolutely countless uses zoom relevant to  
company firearms irrelevant to fire, our you know as we think  
11:59:45 about decrementalization. that's a great thing maybe we could dream of a future where how this is like  
tomatoes or a pit bar?  
11:59:55 Yeah interface. But if you're if you're if you're. if you're in a state, you know you have legal reports as it is, we  
don't have to tell people that Oh, you can never have a pin.  
12:00:11 We don't want monopoly for anybody not to meet this being licensed not for anybody in the future.  
12:00:20 But what is unique. So we might like to think that some geniuses on the content figured it out.  
12:00:25 Let me promise you they haven't figured It out okay, and I down to my labs, too.  
12:00:33 Really I have ted class where I have 11 classes and Then suddenly i'm a fella Oh, right, No, not no costs no  
costs.  
12:00:41 Now, unless you break a real long break from me along a couple of different story.  
12:00:44 And then, finally, we must have i've heard a lot of consensus around it.  
12:00:48 Community education. I we're coming out of 40 years of more pack when I would tell my 90 and 19 year old  
alcohol and happy in on that, hey?  
12:00:57 You know we have a legalized habits, it can be good for a lot of farmers.  
12:01:00 They're like, What are you talking about? crime drug gang violence. so I can make sure i'm all right, and so I  
need help with that.  
12:01:08 We gotta do communicate with the education it's horrible one my apologies.  
12:01:14 Thank you very much. for coming that's been fantastic.

# Honolulu Listening Session

2022.08.07

Social Equity Group

08:45:07 Hello! Hello! Oh.

08:55:30 Pretty small. Yeah. pretty small, people are like into like actually coming and hearing this off, you know.

08:55:40 That you know like just proper that they, you know unless you know yeah, yeah, I mean, I feel like information out there.

08:56:02 I mean this is the first one. but like my thank you for always updating on your page, and i'm glad that nice is all like you know, trying to make into

08:56:22 I wanted to check out the second one, but I got the key, but I have something to go on that we go.

08:56:29 But yeah, so much going on, you know like once they get sorry it's not hard for like you're happy.

08:56:38 Yeah. super cool. They were trying to do a better job.

08:56:41 And ip so like even for a few 3.

08:57:02 That's doing like Yeah follow along with you guys?

08:57:15 Yeah, I mean just like small buy I wouldn't go with aspirations to grow.

08:57:22 So. but yeah, I got my car yeah, and it's like seeing there since that.

08:57:37 And then like seeing also like yeah,

08:57:55 Yeah.

08:57:57 So

08:58:17 So as far as these work out some kind of system so it are.

08:58:32 And how to say

08:58:51 ,

08:59:20 Thank you. Yeah, Yeah.

08:59:38 Yeah.

08:59:43 Thank you. ready, said you can be about 30 min late, cause you got to stuck in this place.

08:59:51 I'm sorry

09:00:02 So i'll give people a few minutes

09:00:14 Yeah. Oh, I thought it was right so he's been off doing is that was stuff right?

09:00:27 Now I think you do it sometimes stuff. Yeah, yeah But I think it's working for Mtp.

09:00:43 Thank you. So i'm like in the corner over there, Okay, exactly. it's a co-working space. thing.

09:00:55 You can, just like rent at that and you can just like, come in and work because it's like right one of the desk, or you can just come and work out here so like, if you're one of those like you travel around the world

09:01:01 and work in your computer. We could have like a monthly or a week here.

09:01:05 I just like work, and then move on to the next You can also read the whole box like that.

09:01:33 So I think the prices are on the window downstairs is like \$24 per day and then much cheaper, for you know, a month ago.

09:01:44 They've done or tried to be good with the you know, ,

09:01:58 Okay.

09:02:27 Give it a few more minutes and then we'll get started

09:02:50 Like good, you know.

09:03:24 And yeah, I I I know when yeah, ,

09:03:50 I've been doing a lot of social faculty history like research right now. Awesome.

09:03:53 So I can You're not like Okay, it's killer.

09:04:19 I don't want to hear about it okay that's great, and anything that you want us to have on your top yeah, Pretty cool.

09:04:33 No reason to stay on Saturday we can start because the Ac.

09:04:37 Is running, and y'all kind of want it to keep running we know people are normal along the way.

09:04:48 Yeah and rating will be here that's stuck on this like the photon.

09:04:51 So i'll be here you would think and it will be on the west side.

09:05:02 I don't know representative, yeah, do you wanna do those starting bidding all go on?

09:05:23 It did so. Good: Okay, bye, Okay, ?

09:05:42 Oh, yeah, ,

09:05:54 For the dual use. Canada social equity. pay group which is permitted interaction group in case you don't know what for And so with us are 2 of the 4 members and i'm people the

09:06:07 bandicon kind of become

09:06:17 1 2, by having the interaction but everyone knows that we are actually taking into account listening to that

area.

09:06:29 And

09:06:44 Writing it's transactions and i'm working on. I have a paper on social activity in addition to serving on this task.

09:06:52 Okay, So i'm joy. San Juan Ventura. I'm. a State Senator webinar the big island for the district, and always part of the one of the few senators.

09:07:03 Well, I was a representative of the original Conference committee that need a lot go ahead.

09:07:12 Oh, yeah, My name is Jason Nellie. I am a

09:07:18 We call a care cooperative. on the north and Yeah, I've been putting the lead by all my patients. represent them and say, hey, let's let's get a good ball in place

09:07:36 and i'm actually a cultivation back for a year long.

09:07:43 But seeing how I think I just saw something that I'm looking at so fantastic.

09:07:54 Thank you for coming i'm a former banker and I've recently shipped it into the army industry.

09:08:02 I've got a farming team that i've working on building, growing next, though next week, and I would like to be able to grow on that property and not be worried about giving me a hard time long

09:08:18 time. and this is something that I am passing about, and the Social program and ties into how this thing was against it.

09:08:28 Preventing from that is smoking or using it as a medical and very much as a banker.

09:08:35 It. it's just something that i'm not interested in So So before I get handed over to Garrett, we've been doing it. Excellent job moderating these meetings just wanna make sure everyone has

09:08:50 a copy of what we expect for this need to be and everyone's not in there yet.

09:08:56 So okay, they're on the they're on the table out there. Yeah, 199 But basically it's we're okay.

09:09:08 Do all of these meetings, and our understanding is what is the explanation is on the second part community, and populations disproportionately impacted by kind of this criminalization and make recommendation for social equity.

09:09:23 And started just the policies that it helped to reduce, and we may be an ongoing disparity, including equally the market community, the investment and exponential.

09:09:33 And I wanna make sure you folks know it's the dual use of cannabis that means going forward.

09:09:41 They're actually expecting legalization Marijuana.

09:09:45 And so the idea behind these meetings is not to argue or legalization, I'm gonna assume it's gonna be.

09:09:57 And how do we move forward? So when we ask for your input, we would ask that you help us do the report by answering the question.

09:10:08 On that third, a number 3 here. Okay, what the social equity mean? queue?

09:10:14 And if you have also large experiences, we've heard quite a bit of that in Kuwaiti and Hero specifically, my district, 20 their lives.

09:10:28 Okay. And in yesterday, there was actually somebody who had a bachelor in mathematics, but because she had a felony, a classic only for marijuana bill a job.

09:10:42 And so, how does that affect you and it, and how and recommendations moving forward?

09:10:48 Okay, So go ahead. Yeah, awesome. Thank you very much. as you said, this is permitted to interaction group.

09:10:53 And we're here to kind of listen and Then bring what we're saying back to the task force as a whole, and out of that task force will come recommendations for the legislature.

09:11:01 We got this kind of set of questions in front of us you can see that it's evolved a little bit since we were in yellow.

09:11:06 But we're not necessarily bound to these questions. as we try to explore this idea of social equity.

09:11:11 We can say things, but generally we are here to listen to you all.

09:11:15 So, starting with the first question. as i've been kind of researching so much likely across the country.

09:11:19 No one has a good definition, or even a definition of so trying to find out.

09:11:25 And why it has its own weaknesses as well. so trying to find out what social everything means for Hawaii is one of the chief purposes of this group.

09:11:32 So what does social equity? and a dual use system or a legalization system mean to you?

09:11:41 Yes, on the first start with it means going back when we're spending people's records, we have nonviolent.

09:11:50 Yeah, And really kind of in a part of that is reducing the stigma. hey?

09:11:57 Really it's unfounded against canada's users and so that's the first step of that, I believe.

09:12:05 Then the other step of it is with getting rid of those stigma, allowing people to grow it.

09:12:12 Use It traded like any other agricultural and and then it also brings those people who haven't really been



involved in the community as a stigma.

09:12:22 They're allowed to be involved in the community not professionally, but in multiple ways where they've just kind of been forced into deposit to not be able to participate in that thing.

09:12:33 And I feel like the way that the dispensaries are set up now, and not just in Hawaii, but in a lot of other states.

09:12:40 It's really geared towards people who have the money. they're not getting into it for any other purpose.

09:12:47 Then you make a bunch of money on it. I mean I have experience working with.

09:12:53 I group here was doing him and their focus was a 100% about money, they didn't, you know they didn't care about the safety of the product as much.

09:13:02 They weren't able to focus on that stuff they were they were just all about the money, and it wasn't really healthy for what this will say.

09:13:12 Social. everything's trying to do have an interest in it so I think that the first place to sorry is it's fun, both records and then creating a system that allows other people to get into it.

09:13:25 Or passionate about it, and really care about creating quality product, and really wanted to be a part growing in not just making a bunch of

09:13:37 In addition to that. like you said it's kinda I think it's a we're doing board that we are inclusive of everyone that wants to be a part of this industry right now collaboration at a larger

09:13:54 scale is pretty much slowly the realm of the dispensaries and that's why I think what they do.

09:14:05 They do well, which is grow a lot you know but they're also limited in what they're able to grow just because of like hardest 5 frames and that sort of thing, and from a medical standpoint I think

09:14:18 that leaves out possibly products, and you need varieties of cannabis.

09:14:25 They could be grown and offers patients. and also like you said, they're really it's ego apparent to me that these business, obviously their businesses, you know, they need to stay in this as they have a lot of

09:14:41 overhead. They have store fronts, you know, all kinds of stuff they deal with.

09:14:46 But yeah, very cool like looking towards advancing my career I don't really see?

09:14:55 Oh, possibility to do that there's there's no real life Intermediate position between myself as a cultivation tech.

09:15:06 And then, like a manager of one of these facilities and even if they're expand, they're only gonna be so many decisions available.

09:15:14 So i'm kind of looking at it like as this market grows. There should be opportunity for people like me to get more involved, you know.

09:15:26 Maybe like, start my own business and kind of grow this holding on, and that allows for more like niche markets.

09:15:34 Do you know, like even from a recreational standpoint like we've got great weather here, you know.

09:15:41 We can use this side class will flour almost anytime a year.

09:15:47 And you know there's I think the potential for a crap kind of this market is really good in Hawaii.

09:15:54 And you know that that can go ahead and have a tourism going rack all that kind of stuff. Yeah.

09:15:59 So. and on top of that, yeah, like just making things fair for everyone, going back doing everything right, you know.

09:16:07 Just gotta try to there's room for hours yeah so I don't wanna see just the big dispensary is taking over

09:16:17 I think that's really just limiting the market

09:16:23 Yeah, I mean these guys, you guys see on nails perfect it's all about And I think you know we really want to get down to what the problem is right now, and going into social work as well, as like Why, the

09:16:38 dispensary log or pass in the first place right like There was a huge task force developed to build a nice horizontal program.

09:16:46 Let's do this, and then maybe part of public safety or whatever just came in and shut everything down and went straight to the and that's why we're seeing the mass of failure right now, and you know a lot of

09:16:58 anxiety is because you know like like as you know in Hawaii.

09:17:02 There's 40 50 year legacy growers here they've been doing it for a long time underneath the radar.

09:17:09 And now, all of a sudden, okay, we have a chance to do this.

09:17:12 No, especially the only way to do it. so that's very frustrating for everybody.

09:17:17 And I think when lobbyist and and professional sit down and make these laws, they know they didn't think about those things before they first survived.

09:17:24 You know it's a person, but not dispensaries to Say, hey, we're gonna do this and get people safe medicine.

09:17:29 I think that was very, very in my opinion, very uneducated. i'm data proven non data proven way to go about their own business when there was already so much going on.

09:17:40 And so you know, whoever left that, and whoever quit that that I think that was a little bit unfortunate.

09:17:46 And it was a rush job. So you know, Exactly. Yeah, I think that was the fastest way, for a group of people take capitalize on that opportunity, and it really shut a lot of people out.

09:17:56 And we can't continue that Yeah, I think these guys bring up great.

09:18:03 I mean you know it's all back and past you know our my farm started with 20 people.

09:18:07 I didn't put a call out do an Internet search and go hey?

09:18:12 Come join this farm. It was just people coming to be going and tears and and, like, you know, I mean it's basically it comes down to you know I visited a log green the other day.

09:18:26 And you know if it's \$60 Maybe guys that's that's unbelievable.

09:18:29 You know what I mean, and the product is not on that part.

09:18:33 The product is so hard, so now we're talking about recreational prices.

09:18:37 We're not talking about medical devices. it's totally recreational. at 24 you're the recreational market in Colorado, when they open their doors.

09:18:45 The medical market was 2 to 50 announcements, with all the governing, and it with all the licensing in it.

09:18:50 They came from a compassionate place. We cannot get people in here and get people.

09:18:55 Medicine is too expensive. So this is kind of what we're dealing with and once again products available, you know there's a lot of you know.

09:19:03 Put the small branch of going in place like you age when you don't have a a resilient group of people that help make laws.

09:19:09 That's very problematic, because they don't know what they're doing in fairness we're gonna it's the help of this plant and we need to protect understood there's a lot more going on with it and

09:19:19 There's so much data for you guys it's just amazing, I mean. And that's really as you guys move forward.

09:19:25 Please look at all the data out there it's massive right now. and there's miles that are just succeeding, and there's It's just a win win for hawaii to go with a dual purpose medical recreational program

09:19:37 is for the people that opens the doors for our own market. It's a win win. Countries are gonna make all the money in the world.

09:19:43 They want It's gonna happen. so and the small farmers in the and the Small people are going to do really.

09:19:50 Well, here we are in the social equity. So when you build a dispensary program. Now you have shut down the social record program.

09:19:55 There's nothing nobody can do. I could even apply for the sensory license with my heart, because you had to have a 1 million dollars.

09:20:02 So that's a big problem and you know it would have been a little more open to say, Hey, Well, you have to come up with a plan to get invested together to build a country that secured it up that would open up to so many

09:20:13 people. but to say you had to have a 1 million dollars in the bank, and not let people at least try to get these things set up, and more licenses as well.

09:20:20 That was huge failure. but in the positive side of things we're doing good,

09:20:25 Vermont, just released in July of this year, 2,022.

09:20:30 Their guidance for social equity applicants it's massive when we was docking with you guys and saw the Vermont Cannabis control Board.

09:20:36 It's awesome. it gets into you know how to help people.

09:20:40 How much are brought. My last is gonna hurt But you know basically it's identifying Who are the social?

09:20:46 Yeah. in this, in this document they're targeting black disadvantage, because they are the people that are most affected by cameras laws.

09:20:55 Here in Hawaii. you can replace that but you'd be, say for lying I don't even care, but people I don't even know so. here.

09:21:04 We are this great program. it's already set up in their handout licenses, both medical and recreational.

09:21:11 And it's happened right now. what's paying for this stuff. There's nonprofits in place.

09:21:17 There's also grant systems within the state, that are now helping people get their licenses and given them like a percentage off of the application fee, you know, like and this is a really good document.

09:21:26 But it's got you know it targets a lot of things like that.

09:21:29 It's already. women veterans members of LGBT you know, first nation more lying specific honors as to American other communities of color. not

09:21:39 We're supposed to name So it's a very nice broad document to bring everybody into, and then it gets into you know, this grant in this State program set up to help people pay for the fees.

09:21:50 To start with business, you know, and so you can get into this document.

09:21:53 I I linked a bunch of stuff, you know, with the record, the guidance for software. We have comes July 40 out to 2,022 for Mont Cannabis, where they work really hard on this and they argue about license right

09:22:03 Now it's also lingered into just a mob social equity.

09:22:08 Stuff that's explained a little more in the the normal language.

09:22:11 So it's easy to read or easy. to look at it's another page in here. but you know here we are license fees for the first 5 years, Oh, you're in one full way you're not

09:22:23 I mean, this is big stuff, you know. year 2 they pay 25% of the.

09:22:26 So I They start to make money. They can start to afford the fees, but they start off press, and they start up without these, you know, and and this breaks into really

09:22:36 You know a lot of good training a lot of initiatives, you know.

09:22:46 And then you know we just you're gonna get that to the whole idea behind this listening session is after we looked at that. How does it fit into hawaii I really don't want

09:22:55 a main. I really Don't that that's one of my pet peeves it's when we when people come here and try to force us in Hawaii to do name and stuff well I will even look at

09:23:08 that understood. Let's focus on social equity and not like and not what Vermont is doing.

09:23:18 Well, I think, and I'll argue with it on that because if you fight the mainland models have already put their time and effort in the building these big programs, I mean this is targeting the statics in black this is no different than

09:23:24 targeting all lions and people. This is the same stuff.

09:23:27 This is data rhythm. This is not mainland.

09:23:30 This is, David wrote on how to set up social equity programs that people have put their heart on.

09:23:35 This is not mainly on people. People like me who own small businesses have been trying to do this with their people in those neighborhoods.

09:23:42 They're the same people as up but we live in where they live in Manhattan. so it's not to listen to Vermont.

09:23:54 But to. listen to everybody here that's what we want to all the right? So what what what is the answer you're looking to get out of that, you know No, we're gonna look at that? But what I want to do is I want to hear from you folks on the

09:24:08 wall like we listen to tuna and we're looking to Kuwait let's experience it, and what what their solution are, and we and and i'm sure you're gonna give that to us.

09:24:20 Okay, so we will. We will put that in as part of the report.

09:24:23 Okay, okay. So So We're not discounting it focus on what Hawaii people live.

09:24:32 Experiences are so and I want to rebate what what a person!

09:24:39 John said, Right before you, Is is it your understand your request?

09:24:45 As part of social equity that as we move forward, we first look into going from vertical to, for example, Is that a first step?

09:24:57 Yeah, okay, and we will look at how we're not doing and and frankly, I think probably the only vertical No, that's correct.

09:25:07 There's time to verify yeah That's a Pennsylvania one of the largest brook that may be labeled.

09:25:16 That is really important. Now we talk about this, so you have to know the data.

09:25:18 And when you say, hey, you're asking people who are trying to give you a social equality, answered, Well, we're just giving you how we live and how we learn what you need data and science how to move forward, we can tell

09:25:29 you, hey? My friend Got bus down the road I can tell you hey?

09:25:32 He's been low. number of 1,000 times in the client I can tell you the chaos for not having social That's the month. data.

09:25:42 It's not even Vermont state we're talking about people that are trying to build social weapons in cannabis across the world.

09:25:48 Sure to to jump in. We are going to look at that report. We have brandy. I, in particular, are putting data from all of the various States, and how they're approaching social equity into it.

09:25:57 Yeah. So as we go through, and you, want to recommend like I think this particular policy will help social equity in Hawaii definitely bring those up as we go through, Why is the why you're trying to develop their own policy

09:26:10 from square one when there's tons of people working on this stuff right now.

09:26:13 I'm putting tons of hours from social equatedness to build rate programs.

09:26:18 Okay, this is the problem why we have a sensory right now. So this is another question.

09:26:23 You should ask yourself right. These are people that are bringing you.

09:26:26 On things and stuff, and the time you really so that we're not starting from Square. one.

09:26:31 We are going to be doing it based on the data from other States, in conjunction with the things she wants to build a Hawaii. Yes, I do i'm sorry. That's true.

09:26:42 That and the thing is, we will look at that data and I don't.

09:26:45 I really one to focus on the lived experiences of the people and we just and i'm gonna tell you that's one of my pet fees.

09:26:54 Whenever I do, hearing when people just need stuff to when I can meet at months, you know how much time I've taken to bring this data. This is not a reading session Senator just is i've been My person.

09:27:11 Public safety coming in, and we can do the finest chicken plants with Department of Health in place.

09:27:17 Okay, how do you stop that from happening? That social? everybody? people get busted and take people taking their plans left, and I, by Department of Public safety, left and right all happening every day as we speak right now.

09:27:27 And nobody has done nothing about it. Even talking to you is to go. hey?

09:27:32 Stop having public safety. do these checks? because they have no idea what they're doing.

09:27:36 Okay, this is this is what's happening. all over the place we already know this. We don't need to have discussions to get people to understand. This is happy. it's good.

09:27:43 We have But there's 4 people here if you really want to know what's happening.

09:27:47 Why you want to see this happening. We need 400 people here.

09:27:50 No, this is not me just going out looking for data. This is me involved in lots of small craft, Canada.

09:27:56 This partnerships. People who have already seen everything fail across the world that want to see compassion and social equity brought into the program.

09:28:05 This is new, this just happening made never mind been doing this for 10 or 15 years, and we're not saying that we're not gonna use it.

09:28:13 But we're just I want to tailor to Hawaii,

09:28:27 Totally totally understand what that welcome we are kind of going through. the questions, but also kind of branching out.

09:28:32 We're currently on what social equity means to you So if you got you want to tip it by all means, okay.

09:28:47 So if you have anything to say along the way, yeah and what you missed is basically

09:28:49 What I really want to hear. our lived experiences okay, and how we move forward to the live That's very unconscious.

09:28:57 Yeah, and what? what? I understand where Jason is coming from?

09:29:05 Because one thing that I realized that not many when and I spoke to, and I thought everybody who was in the Cannabis mindset and boy, knew this with our co-op on the big island, Let's bust them right.

09:29:24 It was yeah, I know yeah. So so Mike Logos.

09:29:35 Yes, I mean he went to a ringer because he you believe, basically what's self impatient? And and it was a shame that he wasn't part of that listening session, because I really would have wanted it on the

09:29:52 record as to what he went through You know. having to hit having to go through the whole criminal system doing what he thought was like of helping canada's patient and doors.

09:30:08 Okay, but that's the kind of stuff we wanted to hear so that how we move forward.

09:30:15 How do we mediate from that? and it is a great and that's been got up multiple guys.

09:30:26 Okay? but yeah, but we would like to know how I was gonna say, let's dive into the details of some of those things that you'll agree so far in particular, starting with you were just talking about tps going along with doh

09:30:37 for these enforcement things. when it comes to social equity or any, the new program for dual use.

09:30:43 And we talk about exponent and kind of further legalization of it.

09:30:48 There is still going to be enforcement problems depending on wherever we set that bar for what is legal and what is not.

09:30:54 How should we approach that bar? Where should that r be? How should enforcement on either side of that bar be handled?

09:31:01 How do we approach that? What are other States doing? What do you recommend?

09:31:12 Filter through how you want to apply to what you think we should do. I mean I.

09:31:16 This is, I would keep going back and forth right. I mean, this is already been issues in other States.

09:31:19 This is what happens. Other states, right? so may or Vermont.

09:31:23 They build a main policy board to understand who's going to enforce? what kind of enforcement it's gonna be Okay, So I wanna take it back from the actual entity That's enforcing where should the barrier

09:31:35 for what is legal and not rule fee okay so it has to be licensed, and it's not that's what it's all day.

09:31:42 That's right we pay taxes that's what you have to do that.

09:31:45 You can't just open your bar and go for it that there's no way to track anything you know he's saying it's the same way with food.

09:31:53 You to sell food or resell teams. You have to go get Usca licensing.

09:31:56 Okay, and I think it should be much different than that it should be another crop that people are allowed to grow.

09:32:02 So, and not have the statements of all that are associated with that.

09:32:08 You want to take the criminality of out of It make it make Don't make it a criminal offense.

09:32:13 Didn't have anything to do with it like just make it legal it's not in my my personal experience, and what I've seen in it is the endangered from this is from people using pesticides and doing things like

09:32:26 that that are not safe, not just I mean it's personal about savings.

09:32:31 But and then there's with it being illegal they can't do any real research on what's the safety of now smoking something like that, so something that may be safe to consume on food that you need may not be safe to

09:32:43 smoke. So I think that with the being illegal you can really stigmatize me to the point. there's no, there's not much real research out there like universities Can't study it because they're fed to be

09:32:53 funded and so you can't you know you can't get anywhere.

09:32:58 With that you're kind of stuck in this group of and then, you wonder why there's only 4 people here.

09:33:03 Well, all these legacy growers you Think they're gonna come in here beyond referencing, hey?

09:33:07 I grow much of me combusted. you guys want to open this up to the public, you know.

09:33:14 Really open it up and let me get rid of that commonality Aspect of it.

09:33:17 If people shouldn't be treated by animals people use it should be treated by criminals, You know on my personal experience as a banker, it was okay for me to go drink and get dropped with my co-workers, and my customers every night but

09:33:30 if I smoke to join after work for you last I can use my job the next day or the next month, for that matter. you know it's not healthy for the community, or you know alcohol is not the only solution.

09:33:43 Or you know a lot of people use it to relax and lined up their heart.

09:33:46 They work. What's the difference between that and somebody going on ?

09:33:53 It's not you know. I Think you really need to take the whole criminality part of it out. But then, if you want to have regulations and stuff, it should be centered around the safety of it.

09:34:03 No multi product, no has to site which products things like that.

09:34:05 So taking the criminality of it is that at all levels is that it's like the the large scale growing and distribution level, how how should someone who doesn't have a license being How should that be enforced

09:34:21 when you guys look at recreational legalization and if you want to do a social activity program with it, and you don't want people to be at farmers markets able to sell their product, and you want to have a little

09:34:32 bit of control over that like that. you do, you know, Yeah, with their licensing and things like that well created a sensory system where that dispensary job is solving to intake product from small farmers or where you can register

09:34:44 with them like sort of like a co-op type deal, and then the farmers can grow their product.

09:34:49 They can take it to that dispensary. they can test it when it passes on and testing, and it's safe.

09:34:54 They take that product in, and then they handle the sale of it to their legal outlines, and then they give the farmers a full sale price.

09:35:02 So then. now they have an outlet to go legally sell it it's all recorded.

09:35:06 You guys can collect the taxes on it, or you can even structure, you know.

09:35:10 Say they buy account for \$1,500, and then they mark it up to 2,000, or whatever it is they're selling it for.

09:35:17 You know, we said \*speaker overlap\* that's nineties and early 2,000 pricing that's nineties and early 2,000 pricing when there's a complete prohibition. It was all outlaw It was all black market it's not it's it's

09:35:31 not reality colorado's announcement that's after the guys growing, and pale and their expenses payload taxes, you know there's there's plenty of ring here for money to be made

09:35:42 on all from the farmers to the dispensaries and if you open it up to where people in like how are you saying you can scale it up like Vermont, with waving fees for the licensing don't make the

09:35:54 fees, you know, in the tens of thousands of thousands of dollars.

09:36:00 Make it like help to get a medical part. You go get a \$150 license, and then you can start small either plant.

09:36:06 Count Canada. Besides, I know we're not talking about that stuff here.

09:36:09 But you start small, and then you allow these guys who want to be small rovers.

09:36:13 They start small, and then they can scale up as they feel necessary.

09:36:17 When these guys start trying to just okay, one person can only grow so much.

09:36:22 So take what they end up doing, and they can do these huge grows, and then they have a follow. they're like.

09:36:28 Well, I have all this money invested in this I can't lose it.

09:36:32 So then, that's where they are with the pesticides instead of it, is potentially dangerous.

09:36:36 But they they're so focused on the money they're willing to use that stuff because they don't want to take the loss on a huge crop that they got in with their head up.

09:36:45 So. So how should in what way so right now? like cannabis plus guns super bad on like the criminal rule side?

09:36:54 How is that interaction, for instance, be treated in a legalization?

09:36:59 What? Why is somebody use Canada's not safe So if by small candidates I can go on yeah ?

09:37:17 Yeah, it's good where is the foundation of that what's the difference between someone who drinks out all and owns a gun, and someone's both cannabis knows the guy it doesn't mean you're automatically

09:37:27 just gonna go out and shootings free and stuff it's I don't.

09:37:31 I don't think that I can make a point on that, but that doesn't exist in a lot of states right.

09:37:37 So, Hawaii, you take that for themselves if they made that themselves. So here's what we're talking about the Google and lost.

09:37:44 They actually made that themselves and enforce it. so here we are and I just not want to back up to what you were saying about a place a wholesale place, and I love the idea I mean it's it's a great

09:37:53 thing moving forward. The most important thing for hawaii if they want to keep social activating place and they want to keep local jobs.

09:38:01 It's for that big business so that's a big deal you walk down the north shore there's sign up for everywhere.

09:38:06 If it's just a free for all and we don't have any guidance or any licensing, they will come in, and they will grow a lot of weed.

09:38:14 And yes, they might not grow the best meat in the world, but in a market with 1.5 million people plus tourism.

09:38:19 They will have an effect on small growers and that's what we're seeing happening in California watching all the surplus.

09:38:25 So when we talked about like licensing and social equity.

09:38:29 In in my opinion those are very important and yes, they're complex.

09:38:32 They're not easy they're very complex subjects and as you can see everybody's going room right now.

09:38:37 I'm trying to get them over some that works but I think if you guys are really if we're here for social equity, that's what needs to be brought into the top of the list.

09:38:45 If you're really looking to get people who can't afford to live here, jobs in cannabis and people who have been prosecuted canvas that needs to be your guide, if you use social equity as your guide

09:38:58 you will not fail. No matter how you decide to set up your program, you will be way ahead of the game.

09:39:09 You know. So what's brought up at the Kuwait meeting was being a dichotomy between some people.

09:39:12 Was that one person who was a caregiver wanted limited licenses and other growers.

09:39:25 Want to to be able unlimited licenses.

09:39:28 So basically what you said you know make sure that there is.

09:39:36 If you're gonna sell it you'll make sure that there's, it's specified do that kind of thing.

09:39:42 What are your thoughts on that? I mean, Should there be unlimited license on both medical and recreational?

09:39:50 Or should they, or should we continue to have limited licensing on medical

09:39:57 Or should we even not have a dual use should we just have it like a free for all but licensing. I'm sorry just to clarify you're talking about limited licensing in regard to the amount

09:40:10 of the number of licenses be limited in this is all in the context of the States that had a medical program, and then legalized, and the number of medical patients using the medical program with that keep because they're using the legal market for

09:40:24 whatever reasons, right, So how should all of that kind of play together in life. If it's trivial, it's like you said, you don't wanna watch for other states like other states where there's this massive, surplus you

09:40:36 know, and it's pretty much like the market browser is the market for

09:40:43 But I don't think it should be limited either and that's why 80 some sort of tiered system would be more effective.

09:40:54 And what a certain license holder is allowed to do, which their license, and also on the topic of fees.

09:41:04 That could also be honest scale. that's adjusted with production, you know, to keep things affordable for everyone wherever you want to be, you know, cause some people are gonna wanna be, you know, big time bars and

some people like me would rather just

09:41:19 be crafted out of this and serve a smaller amount of people, really high quality brought up, not as much, but you know.

09:41:29 So. I think I don't think you should limit the licenses.

09:41:35 I think you should make it where if people want to have the ability to, you know. Yeah.

09:41:38 Well, I think we need differentiate for legal recreational legalization.

09:41:43 If somebody wants to just grow their own. Yeah, just let them grow their own stuff. and if they want to have the ability to go out and sell that, or make some sort of not not necessarily a business, even just to kind of supplement their income on the

09:41:56 side either. allow. Just allow people to do small transactions with each other, you know, like trade, or maybe limited to a house transaction, or something like that.

09:42:07 But then that's where I feel like the department of health and there's gonna be concerned about the safety of the product, or where it's being sold.

09:42:14 So that's kind of what ties. in Okay, you want to address that I mean set up. and just venture you can even set that up for the dispensary is like, yeah for a group that's like a nonprofit and then they

09:42:28 can get in part of that qualification. They have a plan on how the profits or whatever you want to use it for like whether it goes back to the department of Education during recap programs. You can set grammars for that expensory

09:42:41 on how to get qualified for that system where it is kind of solely based on social equity, and how you break some of the laws from this and also address some of the other issues.

09:42:52 So I am. and then to for the licensing of it I don't think you should limit it, because everyone people get the license. Their goal is just to grow as much as they can, and they don't focus on quality

09:43:03 as much if you let everybody wants to be licensed they'll get license, do it the right way.

09:43:08 The people who grow in high school and like you said crap cannabis is this: If this thing was all legalized, the craft candidates, producers are going to stand out and they're gonna eventually take over because people are not allowed

09:43:21 to smoke the better. So yeah it's gonna say as well.

09:43:32 Which kind of model is gonna be better for social equity in Hawaii.

09:43:35 Is it going to be limited licenses that reference social equity applicants? We're just kind of a broad base?

09:43:41 Anybody can get a license, I think everybody can get sure. Yeah, I mean, I understand. The purpose of this meeting is to discuss social equity.

09:43:49 But I think realistically, I okay. So there should be.

09:43:56 Everybody gets whatever license stable. sorry. what else?

09:44:06 Oh, oh, yeah. So I mean you know So this is the reason why we're bringing in a lot of data, I mean.

09:44:15 No I I'm i'm a pick of air force space cute. there's in the late seventies I love this place and everything I'm doing for this place not to bring in policy from other States but the build a low

09:44:29 off State for tenants. that's what I do that's Why, i'm doing this that's why I have the largest cooperative.

09:44:35 Why do I want that? No, I didn't want that people were feeding down my gates?

09:44:38 Because they couldn't afford that so that's what it's turned into rescue for me I don't know where all this is going in on. email.

09:44:46 But I can't stop people upset there They need help right And so you talk about a medical program right?

09:44:52 The medical program, and the dual use program You'll see states that are taken away and their States still have Colorado right?

09:45:01 The other States just run it out of town because they want to deal with it.

09:45:03 Those same States are coming back to the hubble now going I really wish we'd withdraw that we really let our medical patients down because it gives the medical patients rights to something that's a little bit bigger than just Oh, it's

09:45:16 a reck mark, and we go by some. We It gives them a lot of stuff.

09:45:20 It gives medical patients. people to sell to other medical patients that's What we're seeing in some states like it's happening right?

09:45:27 It's like, How do we open this doors get away from all the stigma and build a beautiful cannabis policy?

09:45:32 Program and in place. it's been played with it and a lot of people hate it right?

09:45:37 I mean it's vicious here. i've sat down with many politicians and all young politicians will tell me that the older politicians they're just anti-campus way, and simple that's one of them

09:45:47 so slow. You have one pro campus person business house the last 15 years right?

09:45:51 I'd be there that speaks her mind you know again. and so, and risk speaking her mind, you know, and so that's why it's really important to keep a Google system in place.

09:46:00 I believe you know what I mean that medical's got a lot of benefits can help people pay for their medication. There's a lot of stuff that can happen medical and going into a dual and that's what we're

09:46:09 seeing in the more or the more forward thing states and when I put forward.

09:46:18 It's not like taking people's models it's taking people thinking about this and moving forward and going, hey?

09:46:24 We are representing people here just like Hawaii.

09:46:28 You wanna rooms that represent our people. We wanna feel good about this we don't want to go back to the plantation, or in a couple of days.

09:46:33 So you know That's really important about keeping a Google system in place licensing It's the same thing.

09:46:39 If you look at Oklahoma they just threw them all out right.

09:46:43 Well, you gotta have what's the better ratio of minority ownership to authority under like ethnic ownership.

09:46:53 Then most of the States that allow, like all that privilege, a specific number of social,

09:47:06 Healthily, and a little bit slow. just to make sure we get it right. You don't want just open the doors and go, hey?

09:47:13 That's Oklahoma right back let's just do it.

09:47:16 I mean i'm like. Well, you know you might want to talk, and and they're learning them states right? they got like what 7,000 licenses right?

09:47:23 Okay, if you look at the places like other states.

09:47:26 And I I just keep thinking of these states like i've seen them grow, you know, like Maine started with a medical program.

09:47:32 That's where they started right that's where they built their heels into, and then discussions came along almost the same shadow.

09:47:40 Okay, we're going to take over no you're not gonna do this. We are main.

09:47:43 We want this we will fight and bite and fight and make continue. so.

09:47:46 Now we have a system that's medical base and \$21 that's both rewarding tier licenses and 21 over getting into social equities.

09:47:56 And also privilege supporting the medical market to Now be patient, patient sales with a guidance marijuana policy working group guys structure licensing.

09:48:07 Okay, you can't just be out there this is a big big industry.

09:48:10 It's going to be massive right if you just throw it on the table.

09:48:13 Go, hey? Go for it. it's not gonna work you see that bill, right?

09:48:18 So licensing is important. you know what I mean and if you don't have a license.

09:48:20 Why don't you have a license we're not talking about social equity here?

09:48:23 But i'm not people feed the black market up which We now have to get away from which is 50 years old in Hawaii. right?

09:48:28 We don't want this massive. black market that is both good and very bad, right? And so that's where we're heading.

09:48:37 This is trying to get okay let's get these black market people out of the black Market, and there's no reason to do that anymore.

09:48:42 There's gonna be some problems we're doing this for the last 4 years.

09:48:45 I'm like Yeah, but you're only one and we have people in poverty.

09:48:49 We have homelessness. So that's you know that's what I feel like the other hobby is just do it back to the people.

09:49:07 Yeah.

09:49:08 Yeah, age older than the house has always passed legalization, and the house the younger people, the younger house politicians because they have to point it out it's need the younger politician for actually 200

09:49:29 always dies in the house. Why, why is the younger people killing them? We go Basically, it doesn't make sense.

09:49:36 Why are they doing so? if the if the policy of the person who is delighted? So let's not just say it's the older politicians who don't want it, because in the

09:49:56 6 feet year old, But we could go down just perfectly speaking, and that has been always where it is right.

09:50:11 So that's only what 1015 years ago. yeah .

09:50:15 Let's let's look back yeah I just wanna make sure you'll know that in your State Okay, it's not the oldest so i'll just let you know where my data came from and I had a meeting with like sean

09:50:33 Quinn. and these people right? and they were the ones that tell me that, hey? there's still a lot of older politics



in place.

09:50:35 Okay, why not? Well, it's not It's not just, you know, but I think that's very important to understand that we have history here.

09:50:41 In Hawaii, a huge one, and it whether it's young or old politician.

09:50:46 It definitely goes back 40 years while ringing and all kinds of stuff.

09:50:49 So that's not you know I do want to come back and revisit stigma as like a general thing here in a minute, as well, both amongst politicians and most of the population welcome as you kind of talked

09:51:00 about since we were starting with what this social like we in Hawaii, in the canvas industry here.

09:51:05 Excellent. my name is Ny. Nilton I am a ham researcher. I am a doctor student in Canada's medicine and ethics and politics, and in quality insurance, and design.

09:51:20 So I am sort of as an overarching kind of all kind of as if it's kind of a set of really my nieces and I'm an herbalist.

09:51:29 So I am here advocating for the plant as a whole plant as a plant that has a coa ball.

09:51:38 Product with the human body. we've known about this this medicine for more than 5,000 years.

09:51:47 We have written documentation for that so that's where I come into this whole discussion.

09:51:51 To that end. we have a very specific history with this plan here in boy that has to do with our with our local folks here, with our cannot go with our with. This is a canoe plant.

09:52:07 Whether we want to talk about it that way or not but this is like a new plan. It came here.

09:52:12 It's been involved here. we've had more than 40 years worth of knowledge of this plant in our herbal history here.

09:52:19 So, as we are going forward with this, we really need to make sure that social justice and social equity includes that longevity of history.

09:52:32 So. Yes, we have the 20 years of of the senate and the end the 10 years that we've been talking about, and the new laws that are coming out, and everything that's a drop in the bucket compared to where

09:52:42 you've been with this plan and when I talk about the plan i'm not talking about justice, th Lady plans or just.

09:52:50 We have to talk about this. This plane has an entourage.

09:52:53 We are an oncarage of people that's how we work in this.

09:52:57 So as we're talking about social justice we need to make sure that we are hitting each of those pieces where the roots of the plant where the roots of our our history with this plant here in this culture that includes our

09:53:08 legacy growers that includes our new growers that are coming in.

09:53:11 That includes our Csa farms that includes our dispensaries that have a specific niche as well.

09:53:19 Everybody has a place to play in This but we need to make sure that it's an equal place and an equal putting, and we need to follow the design plan.

09:53:30 This is the doctors signatures of this plan. We have roots.

09:53:34 We have soil, we have a stop, we have a stem, we have, we have branches, we have flowers.

09:53:40 We have male with email plans for a reason we have Cvd plants.

09:53:44 We have thc plants This is a big picture and social equity is a huge part of that, and so far we haven't seen that justice that we really need and that's what i'm really advocating for here So I have a little

09:54:00 deeper into what you mean by social equity? social justice restorative justice? who's targeted by it?

09:54:07 What's the call it like what does it mean I try to fix the I'm trying to pick access for people to plant them is on medicine as well as a tool in the social wheels.

09:54:21 That we live in. we have had a lot of people that we know are our legacy.

09:54:28 Brothers have been There's a reason they're in the black market, you know they've been persecuted.

09:54:33 They were prosecuted. They've been targeted for generations.

09:54:38 These are generational growers. They need to be brought out in the vice.

09:54:41 They need to be added to our our licensing structure.

09:54:43 They need to be. They need to be asked how they want to be added to our licensing structure.

09:54:49 This is not a top down thing that's what social equity and justice is about.

09:54:53 Everybody needs to come to the table. Everybody needs to be given a seat and a voice.

09:54:57 That's why I think this is such an important piece this, this listening session, and I wanna make a note that I am a clinician, and I am embarrassed that the medical social the most the medical working group

09:55:12 does not have open listening sessions that there are only 2 of these groups that have opening list inside listening sessions. and that's that's a detriment to the dual use task force honestly.

09:55:23 Because not everybody's getting a a seat of the table in those and that's what's really important.

09:55:29 So, making sure that all the voices are heard that everybody has a chance to be heard, and I think that we're missing some pieces there

09:55:42 Regarding these, putting these listening sessions together, because we have such a short timeline. it's a very, very short time.

09:55:51 I know we we were given what 6 8 months to be able to put together, and it's higher, and an entire report and an entire report on an industry. That is, that is moving of lightning speed So I I I admire the fact.

09:56:04 That you all are trying to do the best you can with this.

09:56:07 But please give us that. How the the knowledge that has the niches asked us for our knowledge asked us for it.

09:56:16 I'm happy to give You all the research i've done over the last 3 years in my doctoral program on on ethics in in cannabis medicine.

09:56:25 You're, it is, I can do modeling trade please do yeah, we got this from monthly .

09:56:31 So we're gonna we yeah absolutely So what are the things that kind of come up frequently, and this is getting back to the stigma piece.

09:56:39 What sorts of policy like what needs to be done, or can be done?

09:56:44 Whether legislatively or through education I don't know that's for you all.

09:56:48 How can we address stigma partly by legalizing and making sure that it's not enforced by public safety or law enforcement anymore?

09:56:55 But how do we address the sigma I think it's an education piece that's my that's That's really it's educating clinicians inside educating the public It's educating it's

09:57:08 educating our legislature there's a lot of hearsay.

09:57:12 There's a lot of we think this is how we now know how this plan works in a lot of different ways.

09:57:18 You don't know what a lot of different things let me be very clear.

09:57:20 We don't know a lot of different things but we do know some very clear things, and what we do know is that this plant works as a whole on garage, and what we're trying to do in every part of this industry is not working at

09:57:35 this plant doesn't entourage we have dea and we have and we have another group, and everybody else doing doing, you know, with agriculture doing doing tough plans.

09:57:47 It's 10 of us toiva is the name of that plant.

09:57:51 We also have a different organization, a whole different set doing The plans, which is also cannabis.

09:57:57 Isiva. So yeah, we really need to make sure that we got our arms around us in all of these pieces.

09:58:04 And I think the reason i'm here in hawaii doing this is because of the unique, truly the unique structure. Out here we have a unique geography.

09:58:15 We have a unique population. we have a unique environment. We have a unique client.

09:58:20 We have. This is some place that really can be the forefront and the forerunner, for how it can be done in the best possible way for everybody involved, and that includes reaching back into into our legacy and saying you

09:58:38 post are the ones with the knowledge. you far are the ones who have been here the longest.

09:58:46 Please come help us. Maybe this the best possible thing we can make it So that's what that's my thought is.

09:58:55 It's really about education. it's really about making sure that everybody understands how this plan works.

09:59:02 Others. How do we address about whether it's in the legislature, in whether or not like nurses can have medicine for children who need it with epilepsy at schools you know what before go on i'm sorry I don't know about

09:59:14 the new people. I hope you folks don't mind being recorded just to make sure that other people know that we are using.

09:59:21 Okay, go ahead. Sorry. I think. you know. .

09:59:31 I think you know hawaii is one of the first places That that's a passive endeavor. and I still don't know how to happen. Yeah, So and that's still to be like almost

09:59:37 amazing in this political environment that's been going on for the last 3 years.

09:59:42 So I would say, you know if that's what the state believes. and then you believe me out of campus and there should be plugins or outreach. there's 2 funding for programming on Tv news you know what

09:59:53 I mean all that stuff that gets that out there and goes support this medical cannabis that's really what we feel like in Hawaii, and that's the building path while we pass we don't see that right.

10:00:03 We don't see that at all. we still see the backward side of old Nixon, or against drug stuff.

10:00:09 You know that of all a lot of us have grown up, and eventually both behaviors. now.

10:00:13 So you got crush those things. they have to be crushed and they have to see working living in brians where it's happening, and it's positive you know what I mean and that's you know that's why I

10:00:22 keep leaving the state of hawaii as Well, looking for environments where it's where you know we want role

model, so we don't make mistakes and say, Hey, what we did this ourselves.

10:00:33 But we didn't get it right you know and and all honesty.

10:00:35 I think Colorado drove the dispensary thing, but there was some stuff that came in and knocked it out hand.

10:00:39 So yeah, all fairness. Yes, we want to be a whole lot. you want to be a special thing, and that's what we're talking.

10:00:45 We are going to build a white program that leads the world, and everything will look at.

10:00:49 Who are you going? Oh, we should they did so that's very very important to me, but, like I said, this it has to be only brought up in environments.

10:00:59 You know you can still talk about. you know the sensories and homes in certain places. You know that was black people crazy.

10:01:06 If someone's that employee, and to go downstream, Vietnam and some of you know that's how far we are out of that realm.

10:01:11 Really you know and and I don't wanna say politics wise.

10:01:16 Maybe it is your generation. it's holding it back but in my world.

10:01:20 It's the older generation. it's not in politics that is holding it back, and I see it from my parents their parents.

10:01:26 Other people that I meet you know what I mean and it's on It's really dominating to say you know people won't even use campus because they're like Well, wait a minute i'm not gonna find you that said Oh.

10:01:38 it's a you crazy man that's that's so I don't care to sleep, or not you know.

10:01:43 So it's that big signal that has to get across any big problem?

10:01:48 I'm actually born and raised in colorado and so i've seen people there when it legalized like you just said when it legalized.

10:01:58 There were adults who their whole life, the event only against it.

10:02:02 They never would try it. And then, when it legalizing pop Oh, maybe it's not so bad, Maybe I can try it, and things like that. and you know I think that's the first step of an impression that stigma and then it really

10:02:13 goes back to education, and really just selling all the mist that could come from the refurbanness propaganda that was put up their original account.

10:02:22 Look at the politics of way. it was make criminal. In the first place, you know, it was to protect big business interest in logging and things like that.

10:02:32 Fears of immigrants, and you know he died really deep in all that stuff.

10:02:36 But I think today there's a lot of people out there who recognize that this isn't? what a lot of the stigmas are against it, And it it's gonna come down to education.

10:02:49 And so first step of that is legal. Yeah. So right? So yeah, basically, I just want to rephrase what my understanding what you said to to distinguish.

10:03:00 Maybe the we we do need to look device. but dual use assumes legalization.

10:03:07 So how do we? How do we? and sure the social equity?

10:03:16 That we don't that we learn from the path and we make sure that there is an equal distribution.

10:03:25 Oh, licenses, especially since we're looking at license thing right?

10:03:32 Nobody understand the same, no license except for maybe when you grow your phone

10:03:45 But this plan is scheduled in the wrong place.

10:03:47 Okay. So scheduling and utilization are few, very different things, and these are very different things in terms of the process.

10:03:59 And if and if Congress decides to be scheduled before legalization happens, we have a whole other set of things that we need to talk about.

10:04:08 So you know There, i'm just want to throw that ball out there, because that's actually what they're talking about in Congress right now.

10:04:15 They're not talking about legalization they're talking about the scheduling, and we do like there are a bunch of interactions with that, because even if the beds D schedule, it will still be on schedule one

10:04:23 or Hawaii. Yeah, which is gotta Then we look at where the where? where it says in our in our \* that says that you are no longer, that that is, a reaching our patient that doesn't apply to

10:04:40 you. So if you are using, if you are, if you are medicating yourself within the framework of the situation that we have set up here in white, that would apply anyway.

10:04:54 However, do you scheduleing and then figuring out that legalization piece, because it's written in and Hawaii is a whole other ball of wax that would potentially drop in the middle of everything that we're

10:05:09 doing because of the timing of what's happening in Congress and what's happening here.

10:05:14 So I wanted to sort of education, education, education, education. We need to make sure that people understand that this is a This is a useful medicine, that it has really fantastic results for lots of different things.

10:05:31 There is a lot of medical research that goes along with that.

10:05:36 There are some things that are harmful about it. There are some populations for whom it is probably not the best substance.

10:05:43 All of that needs to be educated. So all of that groups

10:05:49 So couple of things i'm getting from this first that kind of legalization of these scheduling are important part of the moving stigma, because then it is no longer considered like 5, a state a bad drop right and then all of

10:06:00 the following effects, for how people perceive it? How much so on the education piece in particular, should.

10:06:07 Would that be the mission of whatever like governing agency?

10:06:10 Should that be one of their missions to conduct this education?

10:06:13 Or should it be like distributed via procurement to nonprofits, to do the education well?

10:06:17 Where should the education there's the fun there's the fund that's already part of the patient.

10:06:22 So there's that fun that's already there so we have the the state we this date has the money to has has has a fund of money for which to allocate from who it goes to I think is the question you're

10:06:35 asking Okay, does it go to the agency to do this education or try to go to external parties to do this education?

10:06:43 Okay, Cool: Yeah. because you know, people the people whether we like it or not.

10:06:49 People look to the Government for guidance. so there's people that are extreme, that hate the government.

10:06:56 People love the Government. Look for guidance. I mean and so If your government is guiding that you're gonna get an entourage of people that are like more control.

10:07:07 I'm a taxpayer you know there's things.

10:07:09 I believe in things I don't but you know we generally kind of stay in the realm of my opinion.

10:07:15 Government's good right so we need you know whether it's big or small.

10:07:17 We've talked about that all day there's a reason why you install and around your own damn thing, you know, you know.

10:07:24 So I think it's very important in mind taking that out you know the Government does take some lead on that, and that's, I think, when you've solved a program that would have a great time to start doing it .

10:07:33 I was never yeah, I had to be we're not utilizing.

10:07:43 Whichever way you're gonna be able to reach and educate the largest audience is really important, because, like you said, some people don't wanna listen to the government, and they rather listen to their peers, you know in their

10:07:58 community. But as long as we're all setting out the same message and trying to be stigmatized, That's the important part, you know, because it kind of yeah, I mean probably one of the biggest things I hear from people is we don't want this medicine to

10:08:16 get, and they have the children. That is a massive thing time and time again.

10:08:23 And you know what stops are from getting into the children.

10:08:26 We call it parent right and that's a skill in itself. So there's a whole societal shift going on here that we're trying to deal with this drug like alcohol.

10:08:34 It's coming into our society and how we deal with it. So I wanna revisit exponent for a minute again.

10:08:44 If that's okay especially in the context where we've been kind of as we've gone through today.

10:08:52 The moving off the scale, for how much stuff is legalized or rescheduled?

10:08:57 A lot of States when it comes to exponent or just expending either like low-level cannabis felonies, or they'll only expose if it's just a cannabis felony

10:09:05 and not incorporating with another felony. if we like, imagine a world where it was completely rescheduled, and maybe there was like an everybody keeping a licensing system like a a barely liberal legalization

10:09:16 team how far up the team should expose me to go.

10:09:20 I think people are taking not okay So even if it came with other felonies like breaking it, entering or guns can still as long as it wasn't the environment he was of

10:09:34 the ,

10:09:43 You know we don't want to just let people out of there, or kind of spend it, but also also sure times that are you talking to gun charge because somebody only done Yeah, I think that's a really important differentiation. You touched on it earlier

10:10:06 how I, you know, done this so it makes it all into light.

10:10:10 But yeah, you gotta definitely take into consideration what was the nature of the crime, you know like?

10:10:15 Say it was kind of less than a firearm with some on site fully registered.

10:10:19 Whatever. you know I don't think that is a violent crime, but Yeah, So it's kind of unfair, Yeah, so it's kind of fair if you have a canvas card you can't get a fire. But if you've had one ahead of time.

10:10:41 You can I got I can't I don't have any firearms register to myself anymore.

10:10:46 But can't register a new one yeah But yeah, that that definitely has to be different.

10:10:54 Because if you're talking about yeah like where is the cut off, what are we looking at like you know that's 2 felonies right there.

10:11:03 So those wouldn't be explained but I don't think that's right at all, because that's still not violent, you know.

10:11:07 Would you go, is it possible to go around, or what are your thoughts on a route where all all Cannabis specific phones were expunged, and you were still in deal for whatever the other felony was because you know your sentence

10:11:19 would be reduced accordingly. That could be a good compromise.

10:11:27 For sure still billing we broke the law, but as far as the cannabis aspect for is oh, I don't think you should be charged for that.

10:11:32 But so you know, it would help us and that's why I keep going back to lived experiences, if you post no open, unjust circumstances. because Garrett has pointed out you know Hawaii, is so

10:11:53 antarctic, that I just say it's not there may not be enough.

10:12:02 But if we have lived experiences that says, you know this person, I can see 2 2 individuals.

10:12:11 I work for a short period of time we're just mentoring here in Hawaii.

10:12:14 As a product specialist, so I had daily contact with patients coming in for for purchase.

10:12:20 I can speak to 2 individuals who I who are patients at that sensory, who dropped their canvas card.

10:12:30 They were both done collectors and we're purchasing anti firearms, and you off their cannabis card in order to purchase those firearms.

10:12:40 So we're no longer taking the medicine that was you know that they needed, in order to be able to purchase and anti firearm that they were not gonna fire off on the island.

10:12:54 More than maybe once to see if it actually did fire and probably you know.

10:12:59 So you know it's it's it's so they have to cheat.

10:13:04 They haven't made their medicine and their hobby they have their lifelong hobby, and to expand on that.

10:13:09 I know people who have their medical cards in the past they haven't had them for a number of years, and when they went inside the bicycle recently they weren't allowed because of having a part in the past But even if there.

10:13:21 wasn't and so the process will send them to be able to move forward on buying a gun.

10:13:30 Now they would have to go get the document that they were legal.

10:13:37 Go forward with panel. so it's really good it's like wrong. we're not crazy like even on this group of people here.

10:13:46 Like work from a pretty diverse background and used to be a banker. I don't know for 15 years, you know, like we're all smart people.

10:13:52 It's not like we were madness, we're not all this like lazy stone, yeah, like this is something that we all feel very passionate.

10:14:11 For these other careers that we're successful in because we just like, you know, we need to see this out.

10:14:30 If I get a camera star can I have a guy know what I mean. i'm like Well, you know I the advice I give them is no you'd kind of have to dive deeper in that.

10:14:37 But as far as I understood, those 2 grants are not talking to each other right so, especially at the State level.

10:14:44 They're only talking to each other on the like administrative part of whether you can get a gun and have a cannabis start on the Federal level, having cannabis and guns in the same

10:14:52 location get you in all kinds of Oh, yeah, anytime hanging in that's right.

10:15:02 But there's Federal

10:15:21 Parameter position We have a population of 342 to answer your question.

10:15:29 Yes, and this one new. that is a federal So the State makes that call, because it is a schedule.

10:15:50 Especially are any any kind of insurance.

10:15:58 So there, you said that's already problematic right There they're making decisions and call that right state level.

10:16:09 You know, and it is good. to one in the state too, which doesn't help center products enforcement division gets involved.

10:16:14 It's a mess, not a big deal right just the car If you have a gun in cannabis.

10:16:20 It's bad. Yeah, you like you can have your .

10:16:25 But no physical product, no physical possession. If you have physical possession, any amount, and it got your account

10:16:35 Like any perfect right like, are you serious like I can't go hunting just like that we just had an issue here.

10:16:51 Yeah, and to go back to the the topic that we're talking about here and subsistence funding and subsistence living, we have a large population that is that here in rural areas ,

10:17:18 Personally, no people that are subsistence hunters on this island who can medicate themselves and live?

10:17:26 And I mean for sure on the app yeah No.

10:17:36 Yeah, it's just so not only be scheduling, but also but not only expansion with that

10:17:55 Not make it the done for a because You're right? I I I depended somebody with that on the platform of State platform, because you cannot. All of what we cannot have information apply on If you have Yeah, and if

10:18:20 that's not any conviction or state only upon yeah, then, that would be problematic.

10:18:29 So maybe we have to look and it's a it's a much broader, if I might, these other charges, yeah, the opposite of like. Oh, I don't drop in the liquor store or whatever

10:18:51 and then when I found canada. that's a full definition, But if it's all just related to having tennis, and then yeah, and also because we have a now.

10:19:06 acceleration, so the i'm I'm saying and we shouldn't consider call your felony or criminal conviction, and that were that was caused by 9 one go alone a non-violent projection

10:19:28 over we have the session in there too because not everybody's like not everybody can grow on this island who has so so nonviolent possession for nonviolent

10:19:45 of a as a trigger to extended sentence.

10:19:50 What about not buying the distribution? Yeah.

10:20:06 Not a violent distribution. B. What do you mean by a nonviolent distribution?

10:20:19 I mean as long as you're not connected with the who's the firearm on a banana man, or like that? that sort of thing we just talked about possession and cultivation.

10:20:21 This distribution counts as well, or like what do you all think about that. How would you treat somebody who was caught distributing that?

10:20:25 Say it's legalized you have to all the licensing in place.

10:20:27 That's where everybody can access it. How would you treat somebody that you catch distributing without license at that point.

10:20:33 So that goes back to my previous question of Is there a level at which law enforcement should be involved in cannabis regulation in Hawaii after a licensing system is in place where should it be entirely civil

10:20:46 just like the alcohol we're not going to say civil right back in time. it has to be Okay, you're fine.

10:20:59 So there is no level of which law enforcement should be involved. I'm.

10:21:01 Trying to \$50 without a license or distribution to normally. Well, so let's look at that, though, because because once you get to that level, once you get to I have \$50 in my in my in garbage bags in the back of my

10:21:11 Honda! I probably have a gun, and I probably have a network.

10:21:17 That direct here that's different that's something of your friend.

10:21:22 That's the photo I have 4 ounces My buddy can't get to the dispensary.

10:21:33 He wants to buy 2 ounces from me, so you can make it to the dispensary next week. So there's non cannabis crimes that you can use to enforce that sort of thing without making it specific to candidates

10:21:46 I think that's good you talk about license license right?

10:21:55 The license, so that's not that right there you sold camps.

10:21:57 Okay, that's your whole different world it's just like buying Yeah, that should be involved. It's not necessarily related to the amount of cannabis.

10:22:12 It's related to particular activities with cannabis. like alcohol and miners, or like drugs and numbers.

10:22:17 Yes, I I think I agree with even cigarettes Okay, yeah.

10:22:31 That makes sense other talks along this way so one of the things I've gotten from talking about the judiciary because most of our kind of cannabis laws because of scheduled one they're just covered under the

10:22:41 general job lost. So to go back and do exponent we'll have to go back through every single case in the police report.

10:22:49 Part of the case to find that it was actually a cannabis related product, because it's not always like in some of the rest of it, unless it's like specific to the acceleration part or the settings for that is going to

10:23:00 take a lot of resources. How should that come from the license?

10:23:07 If this is done the right way you're about to see the large so it's gonna happen So there should be resources to start giving out, saying whether it's a marijuana policy board or it's

10:23:22 A. How do we define these people that are incarcerated?

10:23:26 Not again, should school system education has been children come in should be paying for these things.

10:23:32 It shouldn't come from the general fund. as the state is trying to make up for all of the justice it's done over the last 40 years.

10:23:38 I think it makes okay you know that's part of the social equity market this program But then also, I think the Government should take some responsibility for not acting on this sooner.

10:23:50 Because this has been in discussion for a long time about maybe, if they can to just turn the blind eye to this, you know, there is some responsibility on the you know the public as a whole, and that that time writings and

10:24:02 education. Yeah. So to go back to personal stories of ways that either you or people, you know, have been negatively impacted.

10:24:11 If you have more, please share if you have like you said Friends, or you know people please have them submit their stories to the the email accounts that's associated with this pay that way.

10:24:20 We've got those kind of stories to to get because it's an important part of supporting what we're talking about, especially to those who need education on how bad it is when law enforcement shows up in your haggard farm

10:24:31 or accelerates your sentence. Score? Yeah, I think my biggest concern is how these canvas things make it into the Federal level.

10:24:42 When this is State law we're enforcing right now we understand it's Why, when where do we pick and choose what the Federal Government is to come in?

10:24:49 Whether it's you know exporting from alliance stuff.

10:24:53 And why do we allow the recommend like for example he'd be a great case that happened, Maui, about 6 months ago.

10:24:58 The guy was making resin cards. Yeah, it was a big deal right, I mean.

10:25:04 A massive deal is making whatever you team cards whatever.

10:25:07 But now and every Dispensary in the world It's sold here in Hawaii.

10:25:11 It's not So we have to take that thing other things, you know what I mean.

10:25:14 So you know, those things need to be We need to be really aware of this stuff.

10:25:18 We're moving forward, or we're gonna lock ourselves up with the Government.

10:25:24 You know how we get these things Now, that makes sense

10:25:42 I was like as a non recommending clinician and why it's important for me in that respect to be part of this and also personally, first personally, when I was working in the sensories I had numbers of patients whose

10:25:54 primary care. Physicians and medical qualifying physicians were here on Waco, and they live on outer islands.

10:26:02 They didn't have dispensaries. on outer islands and they couldn't ring that is, that they could legally bring medicine from a while to your home. So that's that there was the beginnings of my online through becoming

10:26:18 active in understanding what we really needed to change in the geography.

10:26:21 Here in Hawaii. I also, what had the experience?

10:26:29 Unfortunate experience of working with several people for whom their doctors, their qualifying physicians, were not

10:26:38 Educated in the products and the medicine that they were recommending for their for their patients, and no one was legally allowed to talk to these patients about safe use.

10:26:50 For this so i'm here because state use of this product is my biggest issue, and nobody can talk to patients right now about that.

10:27:00 And that's got to change that's a huge education piece and as a as a clinician, who will, as current laws stand, never be allowed to have that say, with those patients because I am not a medically designated doctor

10:27:16 i'm a nutritionist not a medically designated Doctor, make me crazy that I have to work with patients whose doctors say I can sign this part for you, and I can get paid and I can get insurance money to

10:27:29 sign this partner for you but I don't know anything about this and I'm gonna send you to a dispensary where the employee there is legally liable.

10:27:39 If they do tell you how to take this safely. This is a big problem for our dispensary workers.

10:27:47 They are, they are currently as the law state regularly potentially. practicing license. because clinicians don't know and won't say that's okay, that's that's my that's my

10:28:04 concern though, that's true appreciate it we're about an hour and a half.

10:28:08 So let's take a quick break restrooms are around the corner to the left.

10:28:12 If you need water, if there's lots of water by the sinking little water company.

10:28:15 So we'll come back a few minutes i'll make sure I I think record that we are listening to everybody.

10:28:27 Yeah, So the recording stops you all the same with So thank you very much for coming today, and we'll we'll

join back up there again I have some cooking

10:28:41 It's my

10:28:49 So you know that's not no not that special i'm. introduced the building guide transportation a personal projection every year for a while so much time but that's a younger a 30 year old

10:29:20 house of that guy who kills it each time but that's a younger, a 30 year old house of that guy who kills it each time .

10:29:26 Leadership have fashion. Can you give me an example of that because it's hard for me to understand that

10:29:38 This constituency,

10:29:51 Very often

10:30:06 We don't know yeah, I think I but I know I grew up with people actually one ,

10:31:02 Yeah, you know the open. yeah i'm so like, basically I don't the other counties do that but at least it's full cloud and clear but at least.

10:31:35 It's a people did not consider 9 one yeah That's one of the other reasons why that house is a little more conservative, because they have to be more responsive to their like smaller.

10:31:40 This folks. and so you'll have more people who are more responsive to the the 30% of people who vote in their development.

10:31:47 They shop in the same store. Yeah, I can't get away from, because the tiny little island that's the hopefully election every 2 years. an average voting age in Most districts of that 1 40% of the vote.

10:31:59 Is not the young people, so there may be no people in the house, but they are voted for 5. Yeah. so it's not the phone.

10:32:04 Yeah. the one person who would share the transcription killed it each time in the House for the personal .

10:32:17 Of transportation, cause department of transportation is Oh, everyone, bye, bye, they have a hard job, though they have a really hard job, especially in this environment in terms of Well, that's what i'm i'm

10:32:34 offering Trader joe's lying for a while cookies right? I really don't have i'm hoping that we're gonna bring him back from tuesday so we missed too. i'm glad you're here for me

10:32:52 too. But yeah, you go to the event. Yeah. how was it?

10:32:58 It was what was happening in Conan. Yeah, they got him growing through like a community.

10:33:08 Events too much important, and my flight was delayed too we're, just looking at that

10:33:16 It was open air. so there was no one releasing absolutely so it's kind of like, you know, Condone, if you want to.

10:33:22 But we're not gonna tell you that was that our property was gone.

10:33:26 I was on a Oh, okay, that's nice yeah It's a nice area they have.

10:33:34 They have like the it sounds like you're gonna love kind of a all depends upon our keeper.

10:33:48 So in the big iron like I was telling them I mean I was chicken fine.

10:34:00 That's one of the reasons i'm not i'm not this in your your place, because I

10:34:21 I'm writing. on ethics right now, so i'm, reading everybody all the stuff right now, and I was that was insane.

10:34:30 So I mean. Oh, good money got back into it I don't think so pretty much.

10:34:34 We still an advocate. I think let me hear from mayor after and his and his daughter, who was very unpopular. basically. also, I think we're going Yeah, like the church or something

10:35:02 okay. He got part of it Federally and his wife I think it Sheriff Christie only got really very simple.

10:35:12 They wanted to. they get wanted to serve. At the same time I was working in email with the pain.

10:35:20 Actually when that all happened, and the banks are identifying where it's.

10:35:22 Oh, yeah, yeah, no, no, no, yeah. So yeah, the kind of is the ?

10:35:54 You know basically that's the document for long term yeah I mean there's there's there's a lot of that they can kill they're not at all So that's what

10:36:15 that's how they're saying when they can get So yeah, ,

10:36:28 Yeah, the It it's A.

10:36:43 Cool is this dictator? You don't have too many cookies that you folks are Okay, let's get started again.

10:37:02 We talked a bit about education, about stigma, about the crime sort of things.

10:37:08 Just so we can update randy, I don't restart the recording again, a person, maybe a personal.

10:37:17 But are you worried about me? No, okay, but I I worry about No.

10:37:25 But but I am not in team with the prosecutors like I used to be Then Then he will find a new who are being targeted, and I also knew people to make money in Canada and We're Martin

10:37:54 now to get out, and are actually very successful business people, but they knew when to get out and



10:38:04 But I also knew at the time, that they were being targeted so I don't know whether or not they're being targeted. but I am generally will either right, because think because of what happened tonight kind of show Up it's more into

10:38:29 Ailgative justice, so maybe not so much now. and I hate to say the whole politics of everything.

10:38:35 Goes into play as to whether or not it's enforcement.

10:38:39 But you have to worry about Clarence yeah She's the Federal agent, and she is very She was the one who passed told Governor.

10:38:50 We did until a first handfill Okay, and she was the one who basically almost killed our first i'll do that

10:39:06 The new felony which you know what no other state has.

10:39:09 So. yeah, sometimes the fiddle they g we'll do things that the State that's not referred to us, and in some examples, Kiro, we really wanted them to go after Tlo.

10:39:22 But yeah, So yeah really concerned. But be careful and so and to the extent that becoming more known within the different state agencies, there's both danger and protection in that right right I mean I think that's Why, i'm here

10:39:37 and i'm here with people from I do and at the moment do. H.

10:39:44 Knows that parts back in is find under the law like they don't like that.

10:39:47 But they know that it is and as long as you're in the clients with the current regulatory system and car stacking is in compliance with that.

10:39:54 Then the Feds I think, my problem is that I invite the department taxation for a site in my place, and we're supposed to get started with it, and it turned into quickly.

10:40:07 What I felt like an investigator. Yes, so. and I thought that was a huge misrepresentation on their point.

10:40:13 And so that's where I am Now, going Okay, Okay, I've been criminal defense Attorney right?

10:40:27 That was a big mistake, right And that came from a dual task force team.

10:40:32 Yeah. when the tax the tax group wanted to go visit them.

10:40:39 Okay.

10:40:46 Passport to try and move it heading Okay.

10:40:49 Yeah. hopefully, there will go the time. Oh, okay, You know, I think they were personally okay.

10:41:02 What you folks do. right Now, and that's all i'm concerned about right. so i'm not sure you go turn to that problem, though.

10:41:34 So every restart call, I think, for the next thing I want to hear about.

10:41:41 We talked about having a different licensing scheme some more open, some less open.

10:41:47 We've talked about that maybe the prices need to stay higher for a little bit and maybe kind of incrementally phasing things in that other States the prices have dropped a How does that work?

10:42:00 Like, What are your thoughts on an incremental approach given that we've also been talking about legalization and scheduling and not having law enforcement involved?

10:42:09 Prices going up or down, kind of falling, or what? what?

10:42:13 Where are you all that on all of that kind of stuff?

10:42:15 If that makes sense, or I can make that a more specific question.

10:42:18 If you need. Well, I think we're leaving social athletes now, are we not

10:42:38 How does that process work in a way that encourages social equity versus still kind of privileging?

10:42:43 Whatever group initially like, How does that phase and work, especially in regards to the interaction between the medical and the legalization industry and the effects on prices that go through the little bit in terms about prices

10:43:00 And one of the more specific pieces to this is say we have a cool, licensing scheme.

10:43:06 It's gonna still take year and a half 2 years to set up the agency and the first licenses to be issued.

10:43:12 What happens during that period, if we're legalized and scheduled, or what should happen during that period

10:43:23 Yeah, I mean doesn't tell personally to address, maybe like pricing, and the concerns of like market just getting the flooded with a bunch of part.

10:43:35 Oh, so start with small licenses don't let them go like, Go on and just grow 10 acres with the cannabis, you know, started I don't know what size or anything like that would be reasonable but start

10:43:48 small. and then, in order to qualify to get into those bigger licenses, you have a tracker, and you would do that by proving to your smaller license, if you're producing it consistently quality product state product and

10:44:01 then kind of ramp it up through that that avenue with.

10:44:05 If you really open up the licensing to a lot of people that that guys are really good, if their crap are gonna stand out and they'll just kind of naturally come to the lead on the on scaling up Yeah, So you're asking like you know, from

10:44:23 the time that we get this all set up to the time the first licenses are approve.

10:44:30 Maybe there could be some kind of pilot program, and a smaller scale like you're saying, you know, limited

amount of license for the you know, like an integral program.

10:44:41 And then I I mean, I guess there are ibons that have to be put in a place for that as well.

10:44:46 But maybe amended, after once you roll into the full license program. Okay, So we all, we, every every dispensary, every farm, every group here has already a network. What if we what if we look at currently license organizations

10:45:06 and fix the licensing for those that are that are obviously currently in the market and well established in the market.

10:45:18 Already offered, and then those mark those licenses our Mentor licenses for their networks, or they're young for their smaller growers where they're smaller organizations because part of what we're

10:45:29 trying to do is flatten this ridiculous vertical system.

10:45:33 We have. So if we already set those licenses up you are.

10:45:38 You have proven that you can manage in this industry in in the what we're doing now.

10:45:44 We want you to help make, or those other new market those new those new producers, whether they're growers, whether they're manufacturers.

10:45:57 And then once you once you are through that mentoring piece then you this will then give you the first step into that first set of licenses.

10:46:07 Yeah, and you're also there are you know quickly moving some kind of patient, patient sales, something that starts to kind of buffer things out a little bit and takes away people like me you know what I mean and you're moving already

10:46:24 and then you get into 21 over you've already. got some established.

10:46:30 That is that rule is a okay you know so if you have a free to 9 hard you're already in the system.

10:46:36 We're working things out here. you know that's probably the fastest way to address your medical system really quick, right, and and and to be clear I would talk about the medical side.

10:46:52 So once we get once we go into the the adult news side that's gonna be a whole other set of licenses, and they've got to wait the year and half until we get it set off.

10:47:01 Thanks, but at the same time that's not law enforcement that's still.

10:47:05 Who's this forcing very that time period before the board is set up?

10:47:08 Yeah, I mean, I think those probably probably one of the most important things are ever to do is go a big deal, because now you got guidance to wherever you go.

10:47:20 Patient, patient sales. How do you do that you know I think that's you know. I I saw on the ground with that believe that.

10:47:31 Do did need extra funds for doing what we call the clients checks right. it's like they just don't need it, and i'm like

10:47:44 And that's a big problem now and I said they're doing weird stuff, and they're doing whole soon.

10:47:51 Big island, so I mean they're trying to get on properties of different settings and stuff like that it's like.

10:47:55 So I told representative that I just absolutely wrong this is moving real quick, and there's plenty of no just because mine's a big one. It doesn't mean there's not plenty of multi license farms across

10:48:06 the light They're all over the Well, over here and that's your department act.

10:48:19 Okay, So what they're talking about with new work in particular, talking about different states, too.

10:48:26 One of the things I was looking at is set up the school system.

10:48:32 What state of Washington, and sort of live out of the following state of Washington, using the procedures of our existing Liquor Commission, and how they handle that liquor license, and the life is that some kind of model or is

10:48:47 that is Is Is that part of the the mod stuff you've given? I think I can't remember

10:49:05 I think, separate the 2, and a start of something fresh.

10:49:09 And Bill, build a working room, so I know let's not mix them together. Now let's let's start pressure.

10:49:16 This is a very different creature. Still, the structure we needed to identify all these different liquor regarding regulating. should we have a recreational use? adult use license?

10:49:34 I think it's I think we don't need to look at neither one.

10:49:38 I think we have states that have that have systems that in place like made that have a much better licensing structure.

10:49:45 That's neither taxation nor I thought maybe most part of that message. But they but still their licensing structure is not under is not the same structure that they you are for the other.

10:50:00 One they we already have. We don't need to reinvent the wheel.

10:50:02 We need to tweak the wheel to fit our environment.

10:50:05 But we have several states that already have these structures in place that we can pick from and make a plan that works for us.

10:50:16 Which I don't have to look at the the best because i'm not. I don't have a ton of information on later stuff.

10:50:20 I did talk to an organ person the other day, and it seemed like once a their people were involved in.

10:50:26 There was a lot more money stuff stuff going on and not so fairness they just want a regulatory capturing there's a lot of lot of loophole. they just free with Oregon.

10:50:36 Why I went there, and I I would look I really like to have this guy So yeah, Yeah, you don't.

10:50:50 Wanna I and I know to make a whole different group another creature so we we don't want to add to the time. we need rolls and effects now to protect people.

10:50:59 So wherever that board is located, whether it's independent or like something that's modeled on the labor Commission, or it's in the department of training and taxation is still going to be a group of people who are

10:51:08 overseeing for the purposes of social equity.

10:51:15 Who should be on at that and that's that's that's. I mean, we keep going back.

10:51:27 So yeah, So we need to. We need to have. We need to have patients that are there as patients, not as another head that has that happen to have a part.

10:51:36 We need to have clinicians who are qualified not only in in their field, but also in canada's specifically because we don't.

10:51:46 We need to have We need to have our our. We need to have our native folks there as well, and after that everybody else need the patient.

10:52:01 If we have in the adult view section rather than the medical exception. No. but you need to have a rented from that population.

10:52:19 Okay, I think that's very important there's nobody in the Department of Health.

10:52:21 They all pass their drug testing. So how many people in the Department of Health are really familiar with candidates, you know?

10:52:31 Or I think maybe not even that. Just like you.

10:52:35 Away with the drug testing to be involved in that like you know one of us once hopefully to be in that the other bus could do it because you wouldn't be able to pass that i'd like to bring all 3 point

10:52:46 If you want that, you have licensing holders, you have medical licenses, holders.

10:52:53 You have law enforcement. You have all you have politicians.

10:52:57 You have your different county and city people so it's a very real bus bunch of people that are all on same page, trying to move forward with canvas laws.

10:53:07 It's not like one person's gonna stop from that and Everybody's coming together as a group. Okay, what's the next step here, you know, you might have someone that's a business owner.

10:53:15 A cop shop. Medical canvas place like a higher ground, that's within that board going Well, this is what we're seeing on our floor, and then you get a nice little bus, though but then you see law enforcement Well, this is what we're

10:53:25 seeing gotta be. Did you get a nice, robust group of people to move ahead?

10:53:30 Which could be difficult to not, of course, but at least you have a lot of brains working on it.

10:53:36 And it's not just you know self-centered or should there be particular, c.

10:53:40 Time that board reserve for effective populations. or social equity.

10:53:50 Oh, yeah, no doubt yeah, I mean I I think the most important thing is, you need a lovely port, right? So so.

10:53:51 And that's that that comes from the state that comes from taxation dollars.

10:53:53 So you build a budget that's paying 18 to 20 working members for a \$1,000,000,000,000,000 canvas to move forward, make great policy, and for getting on something else.

10:54:04 You know how much money does the State spend on green harvest in these programs like that?

10:54:10 You could direct those funds instead of you know I don't think we have.

10:54:13 I have helicopters. fly over my place all the time yeah, or it's not even I i'm not even growing when I've I've had a telephone covering over me when i'm planning all

10:54:22 of yeah, you know setting up. others just yeah and they're covering right over me, checking out where i'm watching what i'm doing. and then I leave my farm and I come around the corner and there's 30 or 40

10:54:33 costs with the full rifles full of through best go around, You could be a chat and it's really like disturbing.

10:54:40 And if I want to grow my open Somehow they've gotten the board up there to say, Hey, No, marijuana allowed.

10:54:49 So now, like I can. I even grow up there without getting kicked out by my association?

10:54:53 And all this stuff like that's part of the stigma that's going on.

10:54:56 And then not just that. Okay, if I have a kid with me my son, I have a 9 month old, son. Not that I'm gonna be having to be in the bar in, or you know, exposing it to anything but my wife can get her up there while

10:55:08 i'm working and i'm growing and these guys come keep down my date, or, you know, come raising me like the swat team. Are they now in danger?

10:55:15 And that is my wife can be a handcuff what's gonna happen to my kid there's a lot of so, and how it's being handled right now and then, in when I see that many pops up there I

10:55:24 see the helicopter up there all time for flying history and checking stuff.

10:55:27 That's a lot of money and if that money was used to education and his task force to go handle this stuff peacefully, and, you know, get with the not just like kind of tie into the social equity But I think

10:55:42 a lot of the growers that people who are gonna be involved in this are gonna be afraid of dealing with them.

10:55:47 They can have over conversations with them. We can invite people to his farm to see it, and see how he does it without worrying about.

10:55:53 If it's maybe us as an investigation that prosecuted So the fact that we're still using helicopter supply really same slots over to when they're already listed with Voa you know what I mean

10:56:08 and then, you know, like i'll tell you the last time we were I guess.

10:56:12 Approached. You know it was probably about 3 weeks ago.

10:56:16 No helicopters would definitely 20 different cars you know what I mean.

10:56:21 And at the gate and you know we'd already. know they were coming from covenant waters up the road, and they were actually trying to get on our property to a different statute in the broad law, which was saying, we can expect

10:56:30 we can inspect you for these chemicals. Benzene was very confusing, right, but when it all came out to it they actually have to have an appointment to make that inspection.

10:56:40 So we stop them at the gate. And this is the same thing, you know.

10:56:41 We talk about attorneys and stuff and walking through all this stuff because it's threatening if it's scary right?

10:56:47 I mean I I didn't approach it 5 times for the last 3, not a search point.

10:56:53 They have now get on the spot and that's a really big thing, because now we're trying to address so what is compliance.

10:56:56 We're trying to sit down on the shell to kind of get these things on the table and go.

10:56:59 Hey? she knows these are happening. she's been on site i'm gonna add my side person, but not she saw them take 200 clubs out of the container right in front of my eyes with tax right there, and going hey?

10:57:12 There's nothing I can do about it I don't like This is your program.

10:57:16 Everything you can do about it. So you know these are the things that continue to happen.

10:57:20 And you know there's nobody really stop department public safety there's really no way it says, Hey, can't do this.

10:57:30 Yeah, basically, i'm gonna apologize for random grounds right now, because I basically stop them because on my island and my district.

10:57:41 So we had 3 in all of this, and we had that

10:57:48 I closely have been there even though I don't go not only that, you that at least on my island we stopped it.

10:57:59 I mean 20 years ago, 2 decades ago, that's why, it surprised me, and I stopped standing yesterday when I thought that he was exaggerating.

10:58:09 So it surprises me apparently that it's not and I'm. Glad i'm in the zoom in session.

10:58:14 Yeah, I mean, there are your common accounts. Yeah, and And that's what happened online distance in my what our County Council basically determination early on not to find green.

10:58:28 All this helicopters because we had a story even from the head farmer.

10:58:33 It was a hip farmer from a lot of, but we were on coding when he talked.

10:58:35 But he gave the same story. If they rated him with 30 guys with the salt rifles, too, and he's got a, you know, federally legal

10:58:56 What do we do to protect Ourselves I'm gonna put on my verbalist hack here and I don't.

10:59:06 Wanna I wanted to address the conversation that you made about Oh, your kids and and my kids.

10:59:10 I have 2 kids. I have a special needs daughter and she has been being dose with cannabis since she was born.

10:59:17 It's pardon, for medicine is what we do she's, you know she uses it every day I can't grow where I am right now, but if I could she would absolutely be helping me tend her own plants as a

10:59:32 herbalist, and as a mother and as a patient myself.

10:59:38 I want to show my kids that this is as valuable a plant and as D stigmatized the plant.

10:59:49 Have my oxygonda as michelangelo as all the other herbs that I grow from medicine in my garden.

10:59:55 It's really important that if standardization includes the fact, that we need to teach everybody, including our kids, that they is a helpful plant, and that, like all plants, there are things that are good about it, and there are limits to it and

11:00:14 if we don't start with gay the Helicopters out of the sky, so that our kids can go and help us tend our plants and tend our medicine, we're going nowhere we're

11:00:35 picking our kids away because we're we're because they're taking medicine that that makes it so they can stand up.

11:00:38 You have kids here. we can do all i've had apartment safety go.

11:00:44 I can press stuff along you right now. give me any more shitness panel.

11:00:48 How does that mean? You know what I mean like these are like serious.

11:00:50 So, and I made these very loud to send rebecca in our area, and there's just nothing happening.

11:00:58 I mean it's and even like shell myself this is happening?

11:01:02 Do you want the staff and you're in charge of this program right now and there, just doesn't mean anything we've tried to get sit down to the sheriff.

11:01:10 And we know people know people and stuff you know they're just like well, I can't wait till I remember the big.

11:01:15 I'll get to smoke i'm like what about what we're talking about right now, so right now and go over.

11:01:21 If you want to address people that are going illegal and a treat does in our products.

11:01:26 Investigation, and they're not listed with the voa so maybe that's a smaller step.

11:01:29 I don't agree with it, but it's better than the people that are following along trying to do the right thing and still being stressed way out, and I mean like massive I mean to see a big blonde woman with a big

11:01:42 blonde all hop not kind of invested it's just huge right walking down by doing. we want on your property.

11:01:47 I'm like and to stop 30 narcotics officers, probably some public people in there, too, and ask them to leave and have neo say yes, stand down.

11:02:00 You have to leave me to search for that was very empowering but it's also like you guys, you see all these.

11:02:09 If there was a patient day, too, I mean you wanna see people crying and like what the hell's going on here like I don't know and the point point, on this as Well, I mean when I was working at the

11:02:27 dispensary. I had patients that came in who literally sat down in all my salesforce in solving in tutors because public housing caught with their their medicine, and they're going to keep that public housing so that was my next question kind.

11:02:34 Of building off the Cps idea. what kind of stories of Yeah, you all have for the people, you know, have in regards to the negative impacts in the field of what family law the family law courts employment like you

11:02:49 said, on the public housing insurance. All of these are places where candidates is purchased you.

11:02:57 We need some stories about that i'll give you a great sort of myself So it's been through a divorce that was growing on his property at his home.

11:03:06 Why, I'm on my my mother turned me in, and everything starts to right.

11:03:14 Okay, they'll be doing here. the court for my children, I was a great father.

11:03:19 Do not record. it was I forgot her name.

11:03:23 It comes office, or something like that. it's really cool and when it all came down to it.

11:03:27 After the whole he goes. Mr. Hamley, the only thing i'm worried about Is not you growing?

11:03:32 I'm worried about you growing in your house and the Federal Government looking at that and trying to take you to.

11:03:38 That's what it came down to it have nothing to do else is like, I understand you are your records perfect.

11:03:45 I understand you educate your children they don't good at all. But I fear the Bell Government for you, and that's why I want you to go on your house for your children.

11:03:52 Sure, and that was about that's probably about 10 years ago. and I think it's gotten worse since then as far as like the get active candidate on custody and better law for people you know.

11:04:07 So I started going. No, I I So my personal story, my young daughter, like I said, is special needs, and she has been being there since she was and invent

11:04:21 I am wipe with a bitterly. I we are.

11:04:26 We are always worried about what's coming down the pipe you know I I have a 3, 2 9 card I have.

11:04:33 I have a whole as as soon as it became possible for me to have a card in whatever state I was in. I had a card specifically to save my children from being taken with on public housing or employment, or Internet side they're

11:04:49 not They don't care if you have a card, or not same thing with we're all these phones from now, and they will

not.

11:04:57 You will not be using tabs are places and I have people that are actually for all people that are patients at my farm that tell these stories.

11:05:03 These people can't even begin to get their life together one drug, and there'll be no we will not tolerate that repeatedly.

11:05:11 You'll move into everything you have repeatedly and That's.

11:05:15 The hard part is that you're you're living in fear of always losing it.

11:05:20 No break right? and that's where the hard there was a lot of that chaos.

11:05:30 Yeah, that that you know drug testing and work and things like that or that's exactly what it cannabis, those are the main ones and get drug testing the ones.

11:05:46 You use for gain? Nothing. that means all that stuff is it's in your water system. So it flushes out every couple of days you can.

11:05:49 Those are the like Colorado oil field, this big industry.

11:05:54 All those guys can smoke canvas, but they can go.

11:05:55 So for whatever it is because they don't have to worry about failing the drug test.

11:06:01 If they go get high on the weekend and it's out of their system.

11:06:04 We want to mention the fact, that it's legal to work on Yeah, that's that's just ridiculous. So that's that's just ridiculous. so that's something I

11:06:20 also got to in my previous career off like I said I was a merchant parent for 15 years. and that's something you can see in that industry, too, you know.

11:06:25 I feel like any of those kind of like you know labor like Yeah, there are definitely guys that do our drugs and don't get busted, and I've seen a lot of people lose their licenses for failing

11:06:39 drug tests. We have both incident at random, and even for myself.

11:06:45 The the reason that I got my card was for chronic pain and I have to and that's because of the work I was doing, you know.

11:06:57 And so yeah, this whole like beer losing your job. and like trying to, you know, kind of sneak around like that, just because I don't want to take your kids regularly, you know.

11:07:06 And it really does help me manage my symptoms along the physical therapy and all that.

11:07:11 But yeah, I mean it's it's not really so so one I cannot say I'm i'm I was working for the United States like you know going post so that is one of the places

11:07:28 where, literally, you know, they talk about the best friends and different things like that working with the phone.

11:07:33 Don't office is like so many different emotions that go on. that's what.

11:07:41 Oh, man, i'll work there for a long period of time I'm.

11:07:44 From there. So I grew up in a very shelter environment with my parents.

11:07:49 So it came to the Canada, and that was something that I always thought of being the robin story, and and when I came here to walk away, and when they didn't leave the lives here with medical I realize I am also a

11:08:08 licensed and I have a lot of well, a lot of fun coming to me and wanting to show me different things they I've learned I wanted to be a part of the

11:08:33 cannabis industry because I realized it does help and also it's something that I feel like to all the people who come to me as the clients.

11:08:44 They are, you know, veterans. They are people who work for the post office.

11:08:49 They are government workers. I work with everyone who's 20 years i've done it Not just you know that's nothing and the luxury it's something where people come and really want to get help you're dealing with

11:09:03 Spain. they're dealing with those kind of issues and this is something that is very important to me, and i'm one of the people I got involved in a particular organization, but I found out that particular organization wasn't the right

11:09:16 thing I feel like they were more involved in popularity and so now.

11:09:24 I don't feel it was a totally different other organization that I feel is really looking out for the social equity looking out for people, and that's more important to me.

11:09:34 I've been here twice in 10 years and I pay my taxes every year.

11:09:40 So it's one of those things where I want to call everyone in every element.

11:09:46 It's more than just the brown and black community that are going conditions.

11:09:50 It's more than that, and being here for 10 years I realized that.

11:09:54 And so for me, even i've dealt with Jason in this farm, and he is a you know.

11:10:01 People are really genuinely hearing about people. and This is one of the reasons why I think it's important for us to really become legalized and really get down to the nitty gritty and figure out what it is we need to

11:10:15 do, because we just keep on, and just sometimes of redundancy you know. and it's like you were going to meet talking about the same thing over and over again, where I feel the why should have been one of the first 3 States to be

11:10:32 relaxed a long time ago, because it is so many people here that are intelligent.

11:10:39 There's so many people that have been the original ones that really get into this industry, and we'll be we're procrastinating, and I don't understand and I just won't be kids to the point and give

11:10:52 them with brandy down the talking check now here's some like it's like, you know.

11:10:57 I've had people try to read that like me another way and tell me not to be able to start with people, and i'll realize when the people that I would and making a different life and different people like say they're

11:11:16 good people, and they're people that really care about this so so follow up question as kind of that element liberalizes in reverse to employment, or cbs, etc.

11:11:34 In what way? or even should what's the work sign up here, back under the influence on the job, How should that be?

11:11:47 Great is it better by industry should not be regulated at all.

11:11:51 I mean, Yeah. So if you gotta get somewhere on that, I think they were talking about trying to get more like heavy equipment.

11:12:02 Operators are very extreme things that are like, you know. that probably does probably.

11:12:09 But I think you gotta get somewhere to get somewhere you know and I think that's how we do it you know it's not gonna happen overnight where it goes Freebie and everybody can smoke a week ago.

11:12:16 That's not realistic in the system. right but I do think you gotta get away from the bar.

11:12:20 You know I think I think while we are I Personally, I think.

11:12:29 Well, it's not my first place to go I think in this instance, with the way that things are changing, especially in the Va.

11:12:37 I think, following and looking at how the military is going to handle that is going to be really important, that's a huge body of population.

11:12:47 It's a huge body of population here. in the state that we're going to have to deal with

11:12:53 And I think it's a place that we're going to see some so really clear some really good guidance that can be then tweaked for other industries.

11:13:05 And the problem is on and off the job right so it's a lot of decrepreneurs should be able to smoke all day and night if he's not working on that machine .

11:13:21 Way of determining No. How do you?

11:13:45 Yeah, so that's right. It comes down to you cause like from.

11:13:49 I used to work for your brothers off in the harbor, or like moving bars around and out shit.

11:13:54 Is it's dangerous or you know you have to be like focus and go here.

11:13:58 You that's the thing right it's like there needs to be a way to determine

11:14:08 Could I have done that job after medicating now? would I?

11:14:15 But

11:14:16 But yeah, you know, there needs to be some kind of way in terms of that.

11:14:22 And because, so we fall under like the the coast guard is our government logging for purchase mariners, and obviously they're gonna all the Federal regulations.

11:14:29 But then it all comes back to like, Yeah, you know, I gotta take in prescribe for a and management.

11:14:37 But how is that any different? really you know it's like even with Canada?

11:14:43 Is you can dose it to the point that you're gonna have in pair.

11:14:49 But you're still got it in your symptoms you know, just like you would with So yeah, there needs to be some kind of got it that makes it follow up in those fields where you know I mean she's operating anything like

11:15:06 that has more eyes on. are there portuguese on their their population?

11:15:16 So, for example, if i'm looking at like out right to work, we smell an alcohol there's gonna be a problem right?

11:15:24 But people. Probably we had a train you know who knows where it's. it's self-regulated and it's like if they catch if they got a wizard on the on you know on site but use your boss gonna

11:15:35 so so companies like that would be

11:15:48 Yeah, So that's kind of all makes sense see that that's a really big line, right?

11:16:00 It's like you've done it man. There you are, if you're doing something right and a responsible person in your life, you know.

11:16:07 Just like, Do you like it? doesn't work you see that time and time again to where you go?

11:16:12 Basically put some out of car on the street. You know what I mean.

11:16:14 And so I don't think the because there has been a problem.

11:16:20 The internal question, regarding now on the use and fine.

11:16:26 Just Do you think those field providing tests?

11:16:31 And you know that dilation of eyes and the the, I think do.

11:16:38 Those are those quite appeal to violate that applicable for somebody who is impaired with marijuana.

11:16:46 No, absolutely no they can still walk yes, physiological background, or just your you know, general appearance doesn't really have a lot to do with impairment.

11:17:09 Now you know a bunch of studies that you think about, that this, that the impairment of Canada is vastly different to the impairment of

11:17:18 alcohol that is really key now we're understanding much more to your genetics.

11:17:25 Then it and your end what you eat in recently, and How much your metabolism and your first passing tableism.

11:17:32 You're literally. So it is really really highly in individually also your your your use history.

11:17:42 So. you So yeah, you're use history specifically so it you can I can.

11:17:50 When I when I take my my dursing break, I then recalibrate my body to my, to my psychoactive effect.

11:18:03 Once I come back off that dosing rate, because it changes.

11:18:06 You do have a tolerance change just like you do with any other psycho?

11:18:11 Same thing that you do with with opioids and things like that.

11:18:15 So it's not significant over there not at all No, I totally no.

11:18:28 There's there's. a lot of there's a lot of researchers, a lot of it is tolerance and a lot of that is built up, You know, I spoke every day all you know and Yeah, if you have that tolerance

11:18:33 built up. you can pop shame you can do it can be very debatable safety of it.

11:18:39 But then there's there's a few instances where it's gonna be obvious.

11:18:42 Yeah, that person prepared. But there's so much gray area that there really needs to be assigned determine that.

11:18:48 Okay, I I feel, too like there's an impairment level that we all can reach in canvas where you wouldn't even get behind the wheel something like that.

11:18:59 Like there's there's a Oh, for sure and that's what I call really impairment by hands it's like, okay, I can't even work the desk all right now no i've got to be edible or something like that

11:19:06 that's where I really taking that so I don't think I know anybody that. but I personally know that smoking brought up all this time.

11:19:27 Ui or hurt somebody I don't know anybody and I know lots of .

11:19:35 So come in here and then welcome the The person who just walked in.

11:19:37 Oh, on the work environment Recently in New Jersey, and you are assuming Canada.

11:19:54 Oh, oh, sorry. So drug testing That's policy within the individual environments, ,

11:20:16 Yeah, in that case welcome we're talking about social equity.

11:20:23 We kind of started with what the social equity into you and what can we do to redress it? at the moment we've been talking about employments, But also we want to give you a chance to talk.

11:20:33 So, if you have something to say, what does social equity mean to you?

11:20:36 And how can we redress it? like as someone who writes about?

11:20:43 And this for a living a lot of things kind of interested in in specific to, so that I could be programs is not only and like how they are set up, but how they're taken advantage of by people who aren't necessarily under

11:21:01 the umbrella or the umbrella gets a little too big, and therefore some people are able to acquire licenses under social equity programs that shouldn't quite be theirs and like so that was like a

11:21:19 multi-state operator like buys a subset of license when they go out of business. Exactly.

11:21:24 That, we've seen down to like a dental storage in Ohio, where social activity applicants will actually have deals with multi-state operators, free application. process, and because there is no

11:21:40 legislation on the transfer time. licensing that there's loopholes that these multi-state operators can effectively get So so that's something that's something we had to

11:21:55 talk about any of our meetings yet. how should that be regulated to ensure that it's still a few of the things, and like there's I I could go off 4 pages just on this.

11:22:12 So But just one of the some weird downs like to that is actually have to do with the basis of how they set up licenses, which really circle from a licensing cat.



11:22:30 Like I know it is a very like. It is hard for the State to give up control around licensing taxes. There are these issues that they do see around it.

11:22:41 However, when we see not only any way people taking advantage of licenses, but also corruption really centered around licensing cap issue.

11:22:54 And so that's one. of the things that I really want first is not having licensing guys like the licensing cap is a very it's.

11:23:04 It's a great thing, theory, however, for the business side it just never seems to work.

11:23:10 We've seen that again, like our system here where we have a treeopoly of system that aren't even profitable, but because they have literally exhausted the licensing path, There is no room for

11:23:29 competitors and evolution in the industry that benefits the end patient, and not the business.

11:23:37 Could we have a copy of what? Yeah.

11:23:43 And if you want me to wait on that. so it becomes the full document, then well, I think we know we we have a deadline, though we have it the So anything yeah, So we've got to have our report in by August.

11:23:56 seven. So at least a couple of days before that if you could submit any of the the things that you're writing to email address for the the listening Yeah.

11:24:07 But having your announcement also yeah.

11:24:15 So i'll send that in and then there's a lot of things that go into these processes absolutely, and there are take advantage of often it is human nature.

11:24:30 So really getting to like very specific in like the social

11:24:39 So that is one of the things we've been struggling with is the definition of social equity.

11:24:45 And what? Another Another thing with that is a lot of the definitions end up being unpopular.

11:24:52 Which, yeah, we we cannot do that. this is True, we don't do that like we have to do.

11:25:01 Maybe system that works one time that's it bye we we just can't afford to ban it.

11:25:15 So, bye. Yes, so in your in your analysis in your in your research like what I'm building up before it would really help if you've heard lived experiences from the people.

11:25:28 Okay, because we did talk also in a not meeting district, but in other groups about the unconstitutional bandage.

11:25:36 Yeah. So yeah. So like I can think of like some of the what's going on in Michigan where you have people?

11:25:49 And this isn't obviously a virtual background thing but you have

11:25:57 The majority of white women who are taking over circularity licenses that were meant for a brown black and Latino communities.

11:26:07 So there is like by that that's one of the way the like, the right there. they may be umbrella a little too big and like.

11:26:18 I heard you guys talking about like that. veterans licenses and like things like that, like I know there's a large better in population here and like we're really gonna have to like make sure that.

11:26:32 We either we have to define it in one way or the other and we need to like that.

11:26:40 There's room, obviously, for both, like native ones and veterans, so we need to very clearly define what makes them your room, and what like.

11:26:48 So celebrity program like i'd say something that we could do is believe that some massachusetts they actually have a it's a state run organization that helps these surgical equity applicants actually apply for the

11:27:08 license. So they have 4 different types of educational programs.

11:27:15 So those are like the big things educational programs and that. And then also having to own the property while you're going through the licensing process what is one of the lived experiences that has really like

11:27:38 destroyed. so like your programs, because businesses camp the Lisa space for 3 years and not make money.

11:27:49 That's not how any business in America works except here We're waiting on the planning department for 2 years before you, real estate has a requirement or either just social equity applicants or like applicants as a

11:28:13 whole. So one of the kind of places, and this is for everyone.

11:28:17 Where kind of theoretically social equity can come from in the licensing process, whether you have like a really narrow number of licenses or a larger piece, or you have like just within the the buying social

11:28:30 equity licenses is rather than merit based.

11:28:33 If you need the minimum requirement it's been a lot, because it gives everyone an equal play filled to access the license.

11:28:39 If you meet that kind of following one thoughts yeah I mean i'm all about licensing and help them get it.

11:28:53 I mean it's 2 lotteries now we're starting to pick and choose again. and it's you know.

11:28:56 I just think I I try to stay far away from that kind of stuff.

11:28:57 But we're talking about equity you know there's lots of stuff going on. A pet is bringing up and and and security programs are coming to place that they're learning from these States. right?

11:29:07 How we? How do we have people licenses, I mean, How do we help them get licenses?

11:29:10 If they they can show they don't make money How do we keep out of State operators out of this place by strong residency.

11:29:19 You know what I mean it's like really let's get into this right.

11:29:24 So we can prevent this from happen. it's not being perfect right same thing like this sentence that'd be 51%, or whatever you know what I mean.

11:29:29 So you know It's not perfect system. but it does get you back into the social faculty school. and not really it doesn't feel like i'm not gonna do it.

11:29:39 There's no reason to Do It No you can't.

11:29:40 Do I have any money right now? it's going to let you work on a smaller license.

11:29:46 So and that's hope for a lot of people you know nobody's got like it It's like It's full of people who are just like that. If I could just start growing my house in one room this

11:29:57 would be really cool. and make a little money to do it I mean and i'm safe, and my children are here, and everybody's cool.

11:30:05 It's kind of utility but it's not really that far away.

11:30:07 It's the role. What we need to see and then to bring that up. and we're talking about this did.

11:30:12 We got also talked about that as manipulation. okay because that's a whole set of piece.

11:30:20 We have, we have growing and and and using raw cloud flourished flower.

11:30:28 Then we have medicine manipulation, and that involved other industry products under other industry, things that may be more difficult to manage in a less regulated system, unless I've been manufacturing and process, manufacturing and process

11:30:52 products out of fresh cloud. you have a flower.

11:30:55 So making making you have to call making your your phone and stuff like that at home.

11:30:58 That takes a lot more, and if you're gonna sell that people or you're going to to dispense that the people.

11:31:07 However, we want to call whatever word we choose to use there release that people, if that's how it the the market work

11:31:16 Those there's there's a level of of contamination that comes with raw flour. there's a whole other level that comes with manufacturing products, and I think we need to be aware of that kind of distinction as

11:31:34 we're going through this it's another follow-up i'm gonna throw out there and say remember that we're not just talking about growing a plant in a flower. of people turn this into other things I mean I will I I agree

11:31:45 with you on some part, but I will argue a little bit at that patience.

11:31:53 I don't have a retributitional Mark yeah but patience.

11:31:57 No, it'll be looking for know what They want to use and do trust people to give them a product that is, you know they wanna test if we can test it. You know I mean there's a lot of things going on here.

11:32:07 You know you know maybe more stuff like resin stuff like that solve it. and that's what i'm talking about.

11:32:20 I'm not talking about symbols mess i'm not Yeah, I'm not talking about things like taking your so i'm in her list. I may I manipulate a lot of cannabis I turn it into fisher rights

11:32:27 I put raw Canada into blisscerin, and I so get overnight for safely.

11:32:31 I stick it into alcohol. I may take your side of it that way.

11:32:33 These are things that I do for my own personal use in my own house.

11:32:36 If you if I try to. a really great medicine, Major, and I make this really amazing list right and everything you love my voice right right. Let me get it.

11:32:45 Let me get into Department of Health certificate that says I can make this medicine for you and sell it for you. but I need to have another step to do that.

11:32:52 Yes, I can grow. but this is part of that whole we need to be aware that there are other manipulations for that.

11:32:59 And if you're going to then go into something like that that's another step, you know, and that's in that wrongs or licenses that Latins are our market and use more people the opportunity to make more

11:33:13 medicine for more patients, and those things are very personalized medicine, too, and it doesn't hurt so it's likely to have for instance, like end user labeling and packaging requirements you standard that

11:33:39 we'd like to see as a as a herbalist. then somebody that that's has sold my own products in other markets and cotton markets that labeling is very simple to do If you've

11:33:52 got a printer, and for can type alright changing gears for a second.

11:33:58 Then we've been talking about the uniqueness of Hawaii. but it's not just Hawaii is a state that's unique.

11:34:03 Each of the islands, as you need, are like different pieces of each of the islands is unique.

11:34:08 How should social equity equity be responsive to those differences Where's it?

11:34:21 One of the things that we can do is first the State needs to really sit down and take a look at Appalachian.

11:34:28 If that's one of the big things for like national legalization happens, It's a numbers game, and boy simply cannot compete with E square footage in farms that are out in California.

11:34:46 Oregon. so we will need something that does like set away, or and like, make it so like Hopefully, when national, national people say, can happen, This will also remove like trademarking issues with on the Federal level which will

11:35:07 actually open the door, or an entire state to have an appellation this, that's only an idea, because Appleton could apply to each individual island.

11:35:19 It can go down to even a mountains side like If there's so much to be done with Appalachian.

11:35:28 Then the State really needs to sit down and look at it and either say yes or no, and then figure it out because like I don't think we in this room.

11:35:41 No, I think it adds another layer. of licenses and we're talking about not license, but another lay license is another layer of places.

11:35:52 That people can, fine space hold space for themselves in this market that brought with the equity that gives more people, more places.

11:36:00 And I and Appalachia is as a as some of Oh,

11:36:09 So Appalachian is calling in the wine industry, and it has to do with yeah,

11:36:32 the sparkling line. It does take a a large percentage of the market, because it is champagne, and it can only come from the champagne bridge

11:36:53 The nature and the specific nature of that pop up in Miami, and call something for my invites and sell off of brand.

11:37:12 That is coming through the software in Thank you. So we talked about expenditures.

11:37:24 We talked about how to include social equity as part of like the licensing or industry participation side.

11:37:29 We're talking a little bit about public education all of those to an extent are defined aside from education or defined populations.

11:37:39 That can benefit from social equity by involvement in the industry to an extent.

11:37:43 But they're by no means the only ones who have been negatively affected.

11:37:47 So what sorts of activities can't either the governing body or the State engagement to both identify and then assist those who have been negatively affected over the last 20 or 40 years? We don't necessarily want to participate in the

11:38:02 industry or do themselves have a cannabis conviction on the record

11:38:10 Because enforcement is had knock on effects throughout communities.

11:38:14 What can we do for them? absolutely ask them what they how they want to be, how they wanna be, how they wanna be prepared, how they what what we don't I don't know I wasn't there this happened to you please tell me that's Why, we're having you

11:38:34 here I know. I know, and that's why I keep asking for this experience.

11:38:42 Yeah, exactly. I know I haven't been part of those other than that as a mall.

11:38:46 I'm worried about my medicine you know kids are gonna get taken away from you.

11:38:50 That's my live experience with both are you talking about canvas?

11:38:54 Are you talking about this? the War of the World? like the world drugs in regards to cannabis in particular?

11:38:59 So yeah, how do we remediate Because we're not getting rid of all the drugs?

11:39:04 Yet at least the entire war on drugs. Yet so, however, may remediate the impacts and community.

11:39:12 So so examples for apparently had to homeschool his kid because he couldn't trust the doe to allow for the medicine

11:39:31 Even Cbd is not if you give his kids.

11:39:39 Let's see Dvd right at that time and feature occurred.

11:39:42 If they class but because he couldn't trust the teacher or the schoolers to do that, you know.

11:39:51 So he is impacted. And 1 one possible solution is not just not only education, but is is there a way that we have this medicine?

11:40:04 Okay at that time. So that's Your kid will not will be able to socialize with other kids.

11:40:12 No good regular settings, so that you know that kind of thing.  
11:40:17 And then, of course, like in team that we had we had Hello!  
11:40:25 Laptop is then people and I gave examples because i've lived in that.  
11:40:30 Yeah. 2 major industries cheat and dig a little share big supermarket changing that.  
11:40:43 Major, money is coming in from and I don't wanna go over into that.  
11:40:48 That is because of being harder ended up, and I think to this day we still don't really have a cheap.  
11:40:55 The worship there. Okay, but and the supermarket is not. yeah.  
11:41:02 It's not been directed, either. but those those are those are like example.  
11:41:07 So i'll be I had that role.  
11:41:20 Patience. more than more than I can count on one hand.  
11:41:25 Who who were home schooling their children, whose children had that  
11:41:31 I can think of it. I mean, think about specifically my that's where I saw the back majority of folks.  
11:41:40 Bye had several people who I. Several people who were concerned about their neighbors, who were their dear friends in public housing because they were using in their apartment, and they were worried about their friends being kicked out of public housing  
11:41:57 because whoever controlled their floor didn't like them and we're gonna pick everybody out  
11:42:05 I've had i've had patients who were worried about coming to the dispensary, using candy band because they weren't. They were worried that they're handyman driver wasn't gonna drop them off after the said 3  
11:42:20 close enough for them to be able to manipulate themselves into the dispensary, so they would have a driver drop them off down the street, and then make their way to the dispensary because they weren't comfortable with the handy  
11:42:33 pan. same thing with public transportation. A lot of my discussions folks were really uncomfortable with public transportation and carrying their medicine on public transportation.  
11:42:48 Yes, some small and heuristic solution can be that real quick. I get this part, and these stories are going on.  
11:42:54 I keep going on what is interest or no interest loans available to people in particular.  
11:43:03 Zip codes that were specifically affected by 3 parts.  
11:43:07 So what sorts of things can be done for the the communities that can help redress, or restorative justice, or whatever current you want to put on it for effective communities?  
11:43:16 How can we identify those communities, and what can we do for them?  
11:43:18 So rebuilding, yeah, I think some of that is gonna happen naturally.  
11:43:26 If you deregulated, you open it, up the growers who back to an hour or shut down, will come back, or anyone who start and kind of the you know, jumps That's where a lot of this like the  
11:43:38 licensing caps and stuff really limit the economic impact that this can have. because you spread it out amongst the whole community.  
11:43:46 Yeah, everybody in that community have a little more discretionary email, understand?  
11:43:50 They may be able to go out and forth. That means hard.  
11:43:53 And then, if you want to target like someone you specific making identify, hey?  
11:43:56 I'll shut down because of green harvest i'm.  
11:44:00 Sorry you can first did it opening up to meership again.  
11:44:05 I don't know. Yeah, the legalities of all that but I think so.  
11:44:10 Help it like a low interest loan or whatever to get them.  
11:44:17 Job started. and then a lot of this stuff is just gonna naturally tap in with the community having access to these licenses.  
11:44:24 Don't put caps on it because then you start playing the corruption gets involved.  
11:44:31 The the bigger players are the ones i'm gonna have the advantages.  
11:44:34 So think a lot of that's gonna kind of naturally resolve itself.  
11:44:37 But if there's specific instances, then that kind of look at programs for those the other thing that was also brought up, and I don't know about but then the language last year so we already know who  
11:44:59 a population. A group of that population is that's where we start you know we know we know that you you you do, and you were affected by this, and let me tell you, as soon as you start handing out like everybody else, is from around  
11:45:11 the corner. So I don't think we're gonna have a problem finding the people that were affected by this I think what you're gonna have a problem with is when they come back and say this is how I wanna be repair how I want to be  
11:45:29 how I want to be address for this and and it may not be monitored, and that's and that's the the larger question.

11:45:41 I think so. The organization can't be all thanks to all people? but it can't have specific mandates for what it can do.

11:45:48 What should those, or what could those be to address populations?

11:45:52 The needs of populations that were effective and enterprise with non-market solutions right like I I agree.

11:45:56 I think market solutions will help from the industry side we'll also have a ton of businesses that fail and canvas will drop the price which off the floor, and you know people from they do get a license to go to a

11:46:07 business. You'll have some of the wings on the fail so you'll have people who are still in the market.

11:46:13 They've got involved in Canada space but we're talking So that's like the front end that's like the front entrance to the canvas of the street the back end Trans.

11:46:19 Is going to be. What can cannabis do for communities without people that want to touch the plant?

11:46:24 So what? what can we reinvest it? What can we?

11:46:28 What can state tax revenues go to? What can be to for communities that were hurt by this?

11:46:33 Number one If people don't have a roof over the head, and the place they eat none of this public housing support public housing. I don't know whether that's building public housing whether it's facing the

11:46:47 the stuff that follows the calls for public housing. Now,

11:46:52 We need to get our. We need to buy refund our public transportation system, so people can get to the if we're talking specifically about a cannabis industry

11:47:07 This is an incredibly expensive place to live here's all a lot of people here who don't have vehicles who can't get places.

11:47:18 We have awful brenda's public education system Let's fix that.

11:47:24 So be paying for loss passes for people in

11:47:41 I think, to what we were seeing when looking at possible tax revenues.

11:47:47 Is that it'll be significant. but it won't be a lot right? We're thinking maybe first 5 years under a 100 for the State right, which is a drop in the bucket when we have a state budget it's about

11:48:01 11 billion. not, but but also the I think that was part of the whole which was basically their their recommendation originally.

11:48:14 Probably they don't know yet to get no reports is that we we both tap the industry.

11:48:18 You want to go correct for the we're not gonna have cannabis related revenues right to build the kind of public housing and transfer.

11:48:35 If that's what we if that's the goal without money, what do we do?

11:48:43 Money for the canvas industry right? And still the policy was like a State, and I almost .

11:48:57 I mean these these taxation places should all be working together inside of Hawaii.

11:49:05 What do we want to deal with here? you know canada'sization to be part of it?

11:49:09 But we have a lot of taxation from it and that's that's really hard to understand right now, because I don't understand how we you know It's very it's very difficult for me.

11:49:20 To understand these bigger pictures. You know what I mean. what we are seeing the tread in the canvas.

11:49:25 Industry is feeling hard. Yeah, people are coming in and building on calls and doing these things, to address these things to help government on how to deal with.

11:49:35 Oh, here's what finland's done you know what I mean?

11:49:38 How do we deal with this you know what I mean ma'am. Well, it's a little bit bigger because of this is now we have the real estate market that runs this and we're a very capitalistic site.

11:49:46 Now these are big big pictures, and there is science programs how to fix these things. but they're like And I think we are going part of field it is it being very very obvious Now in industry and this is not a

11:50:08 Nca. will not be a super bowl of solved any of the budget goals.

11:50:11 It'll be a very small portion of the state Yeah, So when we're looking at social equity, what can what can we do from a social equity standpoint as a State body repairing you know this is not going to solve

11:50:23 all of wise we could. Problems it's going to Maybe encourage some economic growth in communities that were families right If there's a zip code like we're talking about this been identified. has had a 200% increase or

11:50:36 200% more arrests in cannabis than another one.

11:50:40 Maybe that district gets 20% more of directly related to Cannabis specifically but this it has to be wrapped to cannabis policy like the what has happened on the world. drug.

11:50:59 So if you say poverty welcome to white right and it's everywhere, right?

11:51:06 Because how are you likely with that we said we're not gonna get money from the Canadian industry for a while?

11:51:13 But policy going forward. But do you have any solution for recommendation that's non monetary.

11:51:23 That will help repair. Okay. So I gave them a day.

11:51:28 The example of the parent with the kid I mean that's non monetary.

11:51:33 That could be as hopefully implemented by D will be. and you know h 2 that could help his kids right.

11:51:41 And we've got about 10 min left so this is your outro as well.

11:51:45 So if you have any kind of small thing that you want to add, in addition to your my own, I think like how you said was asking about you know not 3 like growers and things like that but how can you have kind

11:51:58 of a backdoor for people to get involved. I think part of that is opening up banking right now.

11:52:04 No canada's related business and legally they'll get they even down to like smokeshops and sell pipes.

11:52:11 Real storage potentially. any hey? good businesses that could be built around the industry that Aren't directly involved in the growing.

11:52:19 And then you, like U.S.A. has preferential loans, for you know the agriculture areas and stuff like that.

11:52:25 You could open the Usda up to being involved in either planning something that helps with it, or just really opening up the banking side of it.

11:52:35 And then that's also gonna help you know if it's a purely cache business.

11:52:40 How does the Department taxation address people not paying their taxes on it?

11:52:44 Things like that it's like right Now, they're just kind of turning their head the other way, and saying we don't want anything to do with it.

11:52:51 But I think you know that's good place to start because then it's gonna open up the economic site and all these other businesses benefit to be built off the cannabis industry either directly or indirect.

11:53:04 Yeah, you know, I think you know, society wise these are bigger pictures. But we are on education and free and things like that.

11:53:13 So we're kind of built even within the canvas industry equity.

11:53:17 Right. Okay, you're not gonna make a 1 million we're gonna both make 10,000, So how do we be able to people that don't wanna be in the canvas. industry?

11:53:27 So a big thing for power, a string was when you say There's not be tax dollars.

11:53:31 They thought the same thing. And then all these tax dollars coming from Canada, they were like, Oh, shit!

11:53:36 This is out of control, you know I mean They didn't think I think they thought the same thing.

11:53:39 We're not gonna make taxes. you guys are gonna make tax dollars. and you're gonna make a lot of tax dollars, even if you taxes elbow rate. i'll give you an example.

11:53:48 Oh, I mean I know it's drops in the bucket but those tax dollars can go to certain programs where we for me all, and I've seen society the way it's wrong you know what I mean and education and parenting

11:54:01 and all this stuff feels humility compassion fairness in the market. right?

11:54:06 We're not there. We're a very cut pro you know look at this market, and the cap is I have Cap. This grows here back in the day. They weren't talking to each other, so they would just find each other out.

11:54:18 Right, and so it it makes sense right. And so I think that education can be a masked one, I mean for tax dollars.

11:54:24 And and really, you know, starting to oh, address these pockets so exactly.

11:54:31 You know but I I like what you're saying, you Know, this seems to be that if we open this up and things start to balance out that. Maybe we'll actually end up with a healthy tuna again you know we

11:54:43 don't have to target and Go hey? your screw you're actually you're back open again. here.

11:54:47 We go. We have a healthy market because we're all doing. this, not just Jason down the streetcare, or whatever we're making.

11:54:53 This we're all doing this and we're all making money and we're all giving it back.

11:54:58 We're all not getting rich but we have a healthy community sound right, and I think, which is what I see a lot when i'm doing a lot of site for the markets and the canvas will it's like

11:55:07 start to see it started off it's greed We're gonna do this. i'm getting licensing.

11:55:11 It's leaving that now. people are trying to form small camps as far as they're trying to get back to.

11:55:18 You're not having 49 I know jobs for a minority, right?

11:55:23 Everybody's the only way is there is really great people out there that don't want to continue to live in the society the way it's been done right now, and I think that what we've got to see is the money coming to

11:55:32 campus history, people actually taking that set of not governmently and going, hey?

11:55:36 Last Christmas, father, hey? we're getting people out of jail hey?

11:55:38 Because we all know each other, and we're responsible for each other, and, like you're down the street growing there'd be an asshole.

11:55:44 We're gonna know. that now. and they're gonna get house out of this community because we're not up with that. and that's what i'm sorry, thank you other final thoughts or no monetary ways.

11:55:56 That we can invest in affected communities. So I have 2.

11:56:01 One is my monetary, and that one is the State is gonna have to decide.

11:56:07 If it is gonna yeah, taxes collected from the cannabis industry are gonna go just in directly into the State budget for the public project bond, where we can do things like reinvesting.

11:56:24 And Canada is, the State teams have been audited fairly, or like one of the ideas that you got brought up.

11:56:32 That is actually very impactful is that the no interest loans or social equity applicants using those tax dollars has actually proven to be very effective in Job.

11:56:49 Starting at like keeping these in the live, because even if you get a license.

11:56:54 It doesn't mean you're gonna have to be able to renew it.

11:56:57 The next year these sets of programs do actually help like social media applications renew at higher.

11:57:06 So that's just the 2 and the non monetary one would be having actual photos for the social equity licenses for people who live here and I think Ohio was a state that did they

11:57:23 have, hey? like. if you are so like the applicant your high decision makers, anyone at at an executive level planning or strategizing has to be in that.

11:57:41 So collectively they can't be you 49% that is zoom.

11:57:45 Not so set up the licensing that the licensing is set up in such a way that that it's not a a white walk, you know.

11:58:03 A brown wash for this in this case you know whereas here's, our stakeholder, and I think part of that is making it accessible.

11:58:10 Not everybody can afford to hire an attorney, guide him through this process, or to bend their car every time the Enforcement Agency shows up.

11:58:19 I think it should just be a simple process I don't like how getting your medical part is now, and more likely to obtain it.

11:58:26 Yeah license, and not something that you have to hire an attorney to get final box.

11:58:38 Yeah, we are trying to form. I have started with. I do a lot of small crimes, canvas lines.

11:58:42 We are applying to Einstein Start empowering.

11:58:47 People are bringing people together. so you have a word discussion you have more talk and more guidance to the State from the people.

11:58:53 So it's not just Jason or us talking it's like trying to, you know.

11:58:56 So i'm trying to get that going forward to 5 and save and get together, so we can really be on the same page and know what what you guys want.

11:59:07 How are you attacked by taking These meetings and going bigger? that's my time, not I.

11:59:14 Don't you guys have responsible for everything that's fantastic.

11:59:18 Alright, thank you all very much. appreciate you being here today.

# Waianae Listening Session

2022.08.07

Social Equity Group



18:37:13 yeah.  
18:37:34 I'll take a look at  
18:37:49 Check, check.  
18:37:50 Check check. Okay, Great: Yeah.  
18:41:35 I know we'll pass on you don't wanna make it round. but then we'll get started here in a minute, I know.  
18:41:39 Probably  
18:42:45 Yeah.  
18:44:42 Do you have a party  
18:44:50 Exactly. I think that we're  
18:45:36 Yeah, ready as when it started to wind up wait for people to turn it.  
18:45:43 That would help  
18:45:50 We just started we don't hear about the ideas.  
18:46:01 Oh, I haven't seen a pretty good thing  
18:46:10 So here we have that means that we are considering the medical and the kind of utilization around Rachel.  
18:46:21 Take my and we're here to figure out how to work it's like we into that, and a racial diversely in fact, so one of the things that  
18:46:48 because goes into authority I am gonna do that for about 7 Years brandy gods.  
18:47:10 I can, Berkeley and the representative from the industry on the passport.  
18:47:15 Whatever. We got the licenses on the half, of course, one for the current medical licenses. and just just for a little bit more background task.  
18:47:26 Force. the Legislature recommended as passwords being put together to study.  
18:47:30 What a dual use program in the place is that meant to medical program!  
18:47:34 And you don't use our recreational program and then we get together.  
18:47:37 So we are attached to study and investigate what that would look like to make recommendations.  
18:47:42 So Lawmakers good, hopefully, or possibly take those and people back them into whether that being a bill or debating about this, we social media is a big part of that as big part of the  
18:47:58 cannabis space right now around the nation. We wanted to make sure that he was focused on such faculty and seeing what community needs around. And hopefully, we can.  
18:48:09 We gather a lot of inputs. We all have those recommendations.  
18:48:11 And then we comes out to the public to advocate for those recommendations.  
18:48:15 When I get back forward. Okay.  
18:48:33 Yeah, yeah, only I work in the account for like So are you here  
18:48:46 Yeah.  
18:49:02 You guys are gonna be they're sure It's the largest patient based on i'm also around the on zoom power people 3 people together.  
18:49:21 All these meetings so I try to show face here by information and doing a lot of a study that's like That's tailors to the people  
18:49:51 ,  
18:50:00 Oh.  
18:50:13 I'm wondering I don't. think i've ever do this kind of like a history of this team started what Bill, and came from possibly. and what so worse this interaction to happen you know.  
18:50:30 Oh, one of the reasons I think it was actually in the we'll gonna install all the like on the bus  
18:51:00 So  
18:51:20 Good morning, Oh, I believe it was that It's actually put together by Okay, It was attached to an additional Bill  
18:52:02 the concept of having a limitation it's floating around the house and let that be a lot I was like.  
18:52:13 Well, we need data. have some data put it for open.  
18:52:28 That'll help when there's any networks surrounding.  
18:52:37 We have to report alcohol. We use the cell groups.  
18:52:40 ,  
18:52:57 Oh, I don't have the number that's well  
18:53:18 Is there a some concern that the department so long to set up this task order to get a I don't know.  
18:53:26 Say concern like I have concerns about that  
18:53:36 Depending on their skill. We don't have something they get matched through. It will allow them to carry out

their business.

18:53:43 But unfortunately this one did not. So we even something like this: because we thought it was worth People put it on the in the pocket with a practical space like this.

18:53:56 But there's our time for task force groups are put together in the best way.

18:54:01 Certain things to have And what was your mom? It was just unbelievable.

18:54:16 And there in the moment we, you know, work really really cool.

18:54:25 So if if you would have attached you money to it, the the business

18:54:33 If it could be wasn't done then the like to go to individuals, maybe in the i'm saying, you know, but we have no dad when I can go near the issue for another 2 years 4 years right

18:54:52 ,

18:54:54 ,

18:54:59 We do

18:55:07 Yeah. Yeah. it's not a issue of leisure. Specific cannabis is issued around State in Denver.

18:55:16 My friends value to work in the State with the public office about transportation. So a lot of times have set up the farmers markets.

18:55:29 Yeah, So maybe just a question. So no funding attacks.

18:55:36 Is there a reason why nobody reached out earlier in life to try and get these groups together with this task? force?

18:55:44 I know It's kinda you guys, but so the task force like getting started with and then we got started

18:56:13 They're they're shortstapping and just getting black. you know, when it was passing 20.

18:56:20 Oh, okay, and they didn't know their michelle or maybe there it's working on, you know.

18:56:28 They add it to their contributors. the the bill is back specifically So it's available.

18:56:39 There is there cleaning up to take on things like, yeah, they had to put it in their list of priorities.

18:56:49 And and it was also that to balance everything else.

18:56:57 Yeah, I mean It's it's I think it's gonna come a lot of areas.

18:57:09 Do you guys see anything coming out of that like extension of the task force the funding company to change thing whatever to provide as much?

18:57:30 We are So like one of the things we came off this morning that I do

18:58:05 That's not there are some Zoom meeting?

18:58:20 Yeah.

18:58:21 Yeah,

18:58:39 It can dial into I can see.

18:58:44 What are we gonna do? national nonprofit?

18:58:56 Oh, and then i'll I don't know i'm gonna have to live inside. i'm trying to bring my own.

18:59:04 My Okay, ,

18:59:17 However, in particular, Hello.

18:59:53 So we can we're all over with some of the Wow!

19:00:09 On the other groups. the other working group be hearing from them in a live platform is just their collect information they're doing to the report.

19:00:21 And that's That but i'm not entirely it's gonna have it at the task force level

19:00:48 So

19:01:21 All that ,

19:01:40 What's the question

19:01:58 You don't

19:02:12 Yeah, I mean like this side style.

19:02:27 That's a good 15Â min

19:02:39 It's Okay,

19:02:54 So I I mean we could talk a little bit, because I already introduced this this morning.

19:02:57 But we have player in the room without this is that your mom just came out with guidance, with social security applicants.

19:03:08 And so it's really there, at our Roots there are roots of people of Maine, and the Mona was working very hard to capture the local people.

19:03:18 Captured. the people suffered capture people that are all in prison for campus living, working really, really hard at this.

19:03:27 And this is where this stuff starts to come from you know the the choice voice as well. We don't want something different to stay, and i'm like this is dated real bad.

19:03:39 This is not not something from another State. This is like people like you and be that are taking their time or right needs.

19:03:46 And say, How do we do this? Everything from now?

19:03:49 This is just guys, for, like social step into the recreational market.

19:03:56 So, and everything that comes along with the finding that you know to me, as far as like No.

19:04:01 Yup

19:04:14 Right Now there's appears not to be any limits.

19:04:18 They're going through the process. by checks recently They've got about 50 licenses right, but I don't think they're looking to. I think they're just going through.

19:04:27 The program as they can get through on, because it does take some of investigation on both right licenses.

19:04:35 Man social equity applicants which they're trying to really yeah, good applying to the phone line.

19:04:42 So it's not being abused. you know they are recognizing the .

19:04:53 Hello!

19:05:01 It's not quite the same

19:05:07 You know, I think they're they're tasking freedom of definitions.

19:05:12 Well and then, you know they're they're looking at disproportionate impact of historic government, led economic oppression and black people for generations, and continues disadvantage as individuals as well as

19:05:27 indigenous people people restored with marginalized

19:05:41 Yeah, that's really what it is other Well, I think you know I was working through this lot of good stuff here, and just talking about you know how to and advance.

19:06:13 Those people by helping all the licensing fees and free fees for the first year, and then, as they get their businesses, go on, maybe a 15%, B.

19:06:22 You know. So for example, you know if we're we're all into like, you know, tears and stuff like that.

19:06:30 What they're doing just with the reconational side of thing, you know,

19:06:39 Yeah, this one can be up to i'm just gonna put you greenhouses because they do ignore everything.

19:06:45 So we're out here corporate cultivation. you can do of cannaby for a certain number of plants.

19:06:52 So they're kind of crossing those things to make sure they kind of collect it.

19:06:56 And then, you know, you were doing like let's say my kind of dream in this world is like for like let's say for add 2 thanks for a greenhouse about 22,000 square feet I thought that's a

19:07:09 great like whole team place where most people don't want to grow up, or what else?

19:07:16 Because you can So now you have to wait for you got a There's family and all on a running. me all these different bankers, and they could go smaller quarters like they recognize

19:07:29 indoor and if these aren't cheap you know what I mean.

19:07:32 But you know, if you talk about like say say we're a social inequity license that has land, or has it?

19:07:41 Let's just go with the biggest there is you know like let's say, a \$20 per with canopy or \* cost you \$18,000 right as a person I can stay with the top of

19:07:56 that fee for the first year, and then asking for 25% of the second year and build you into that.

19:08:00 So you're still on Oh, I haven't really got into that team as far as how they're doing everything, you know.

19:08:17 I just know that they're covering a lot of just in that part of the that documentation along.

19:08:24 So it's not like just a small thing Thank you.

19:08:31 Yeah, yeah, they do have Okay, yeah, yeah, so I mean that's really, if you know, when you're talking about social integrity, it's like anywhere we have right?

19:08:41 Now with the medical program greatly. Come on with a patient patient sale.

19:08:45 A program right now. you can start to open up things, but I think people get scared of that by it.

19:08:53 But we're kind of hard, and there are a lot of senses. How do we now capture it through taxation of doing the right?

19:09:00 Now. Okay, Okay, you're growing your patient patient you know, and I think you know it's it's you know where we are right now.

19:09:08 So little bit. it's not easy to make these jobs coming from a State Level anti-cannabis. I think once you follow the data and see people that are succeeding and not seeing like criminality cartoons coming

19:09:26 in the things that we worry about. the most if you don't set up the program right, and that's when you start to believe yourself, and I always make it.

19:09:35 I was thinking there's some other states, because like maine No.

19:09:48 Not a lot of buildings, not a lot of infrastructure.

19:09:53 So how do we? I like that? And then also and think about ?

19:09:58 You know, you gotta work on each lee I let's see? a 1 million allow and start with generally start to think about.

19:10:06 Okay, It's we're we're going to have a dispensary, 2 houses down in branding south, you know, and we're taxing it.

19:10:16 And everybody's okay with us and we're starting to get all of life, and get away with the tickets.

19:10:20 We have yeah it's not yeah, I mean, even if you look at my like when I found out I was like and then we get in this world we

19:10:46 did it seems regacy. but it's that's where we have to get to the point of we gotta gotta get away from It's crazy to be like the future plan we haven't.

19:10:59 Respect this thing to start moving forward education better than Me Good!

19:11:07 We could have something really similar to main people,

19:11:17 You know ,

19:11:35 So what you said i'm trying to think

19:11:47 So one of the things I was thinking about oh,

19:12:03 But

19:12:23 Religious facts replying I'll imagine this big here, so I can tell you like even where i'm people across the street.

19:12:30 I know that Well, well, they's 25% of the Megan cannabis. Most their church group is very much against it.

19:12:36 So So here. you have population of people that in canvas the first thing in the world is a gateway road, and it's called there.

19:12:47 It's called their environments, too, so that's. very, very big things,

19:13:20 Sure. Yeah.

19:13:33 Okay.

19:13:45 Can be somewhere in last year around at a most.

19:13:48 Okay, and as we know, Yeah.

19:13:58 Hey? people got scared, and they call like that.

19:14:04 It became a new story about Okay, that was this year.

19:14:10 Not, but last year at least it's selling it their own So that's a non law enforcement

19:14:25 And I haven't say in all fairs it's really not we. Honestly, I think law enforcement can be swayed pretty easy to change over it's not easy, but I don't think they're

19:14:37 really the push, but what we're seeing in our society in relation to right, line of moderation,

19:15:39 Yeah, you know it's I wanna go back to what you were talking about.

19:15:51 The Wayne Social Okay, So I i'm sorry so is the

19:16:02 The discussion. that in the okay for a doll, please.

19:16:16 We should also within that yeah that's what's happening.

19:16:22 It's actually Oh, cooperative

19:16:34 So I think in discussions, because, let's say oh, when when we, when we visited out in the Legislature, are we gonna get how are we gonna find out that really the only one who is switching for

19:16:55 this, or I think there are some senses well I think you're absolutely right. These conversations still need to have.

19:17:10 You're not even there. we'll really sit back and this medical program.

19:17:15 And those patients are going so it's a safe place to be, and but like that's where we still are most people I don't think unless they've been doing their homework.

19:17:25 A lot of work. I don't really understand the dual program. I don't care about it as hearsay right.

19:17:31 And so you know that's our job. for us bring people together and come up with a consensus.

19:17:36 I don't think there is one and I don't think there isn't.

19:17:48 Yeah.

19:17:49 Yeah, to have this subject within the dual game social media.

19:17:54 But remember at the last well, really I I think it was also so.

19:18:04 Other one senses. Yeah, it's part of moving forward we should also think about you should go into .

19:18:19 I see you all the time. I wanna make sure that that's why discussion is that we really should be even as part of the .

19:18:31 The pull walls, so that we don't have to we don't have to work with the ringer for or is it going to be the framework for the of the cure okay But the

19:18:55 he wanted to go so it will not make you as part of the

19:19:10 We really need to and maybe I don't know because you don't need any co-op that's shown that we really need to make sure that Oh, awesome.

19:19:25 Okay, sort, of like but and I know there's a we have the solution we didn't have to bring one for the peculiar life.

19:19:40 What we can. Okay, patient, who are using the coal end up?

19:19:50 People are you using like to yourself, you know, who really should need to think about?

19:19:57 How are you? Okay, yeah. I think I mean you're absolutely right.

19:20:06 So this lesson session about social I agree, and I think that becomes more apparent in the recreation.

19:20:12 That's really, really because that was a 3 to 9 carver and 3 to 9 4 patients.

19:20:18 We all are already kind of sitting in this world. down the bottom where we're all kind of already using.

19:20:23 Oh, yeah, I mean help that possibly that might be a social But we're all kind of sitting in the same area, just because I had a lot of patience on my site no different than anybody else and that's 5

19:20:35 parts on their site or 2 parts of their site the only reason my thing is got away.

19:20:40 It's because i'm the one on first of all we have a huge population, the second of all people need medicine, and they talk so everything on my farm.

19:20:53 From day one I'll start a month. so this person that this person this person I said, Hey, got a it's compassion. it's better I don't know it's not trying to get away from this at

19:21:06 all I understand you'd like to see a little more language in the care and everything.

19:21:12 And that's what that's what exactly what like maintenance, they call it the care a different program.

19:21:19 The care program, and what they've done recently joy is They they can actually open up the patient with patient sales.

19:21:25 So yeah, Yeah. yeah they have the same thing that's the day.

19:21:33 There are all these Okay, Well, how do we protect these paradox, so they don't get in trouble, so they can get medicine to patients.

19:21:43 Yeah, no doubt, We know that the medical, requires all of this password

19:22:06 Should we?

19:22:12 I let me do yeah, I mean that's in my opinion that's been a broken system since it started

19:22:20 It's very a uneducated view of what it takes to provide safe medicine to be more obviously.

19:22:27 As you start to build. These people can test around medicine, but also like this can do it as well.

19:22:35 Your seat as well as in the they're starting to drop stuff off on a joy like let's say in scientific size.

19:22:48 There might be 5 beneficial. Okay, So when you go over there and you try and target all the use, and you're not targeting asteroids.

19:22:57 If we can test order, then you set a number that says hey?

19:22:59 You can't be over 200,000 parts. when this plant grows outside into exhaust. and everything else everything in that environment has been doing for since magnetizing is spoken right, it's not not safe that is a very and there's tons of

19:23:12 data for that I mean that is a very and and you'll see it all.

19:23:16 The States are back there off that joint because they put in these serious testing, and they were like totally wrong.

19:23:22 Just like you age recently, Yes, I don't I don't think about social

19:23:41 Selling right so I don't know

19:24:10 Somebody who has economy awesome.

19:24:23 More, right and requiring a \$150 test, just like you're gonna pass.

19:24:50 We all know that unless you're growing with pesticide and getting fall out from other farms. So your flowers in the past, there's no doubt about it.

19:24:57 We got our pass outdoors it's all about building your reputation, and what's your all about getting safe medicine to people. When I think safe medicine.

19:25:09 We're talking about the basics. you can see how email Do you could see more.

19:25:13 These are very visible things for most patients I do my phone Well, well, I mean, that's That's basically what we're speaking about it's it's it's a

19:25:31 patient to, so that's not what we do but what I'd like to see is big, patient's sale it doesn't matter if you're going to jason's collective or robert's collected

19:25:43 patient's patient sale and you're gonna choose where you want to go, just like put in the old days thing about it is, we would not.

19:25:51 We don't have to work at all please be involved in all the basketball, and also you provide this all taxation to the State.

19:25:59 What you're doing and that's it's really not even when I started dying in the other today.

19:26:03 So it's it's ironing to see the stuff that's going on right now, and you're almost like it's unbelievable to see that we're like in reaper bad this 10

19:26:13 years ago. And now see the way it's opening up but the thing I want to see is I want to see it built up with responsibility.

19:26:22 Positive community. is that way? Okay, that's not happening in a lot of places when they just open up it's chaos.

19:26:30 It's happening everywhere. and So that's what you're seeing these States have started off with programs. Okay, and then, people are like, Well, we're getting more busy here.

19:26:39 We got people. we got more people coming our barn so we know we have the capacity of open up a dispensary at all, which is still medical.

19:26:48 It's not in dispensary it's still considerations for patient sale within our home.

19:26:52 So you know there's those things going on that yeah i've been doing first of all providing good medicine.

19:27:00 The second law line taxes, set it and pay the taxes So it's actually where a lot of people and now they're positive policy, and and and there's still a big business in these States don't want to see that

19:27:16 patient, patient dispensaries here. No, I wanna see the patient.

19:27:20 They want over the control but they don't realize It's actually an help, you know It's actually gonna help them.

19:27:28 They'll assist in that end the future it's gonna be robust.

19:27:32 It's gonna be and I think that's what's really hard to explain.

19:27:35 Those people. They had a bit involved in the canvas industry.

19:27:38 They just got a license so did they cooperative license.

19:27:53 I do was part of the medical set. Yeah. And so they do.

19:28:00 They So right now we're in the process balancing and incorporating all those it's.

19:28:15 It's impressive. just the no if I were to put myself decision making here laid off the call on this I hate comparing alcohol in this case. like we probably have right So if you you grew your own

19:28:39 alcohol, they'll set up a job virtualize your operation cell phone can you go to the look?

19:28:53 Information all that in what ways? and patient patients distribution type operation that that deals with exchange of money, ours be implemented in a way that so scary to the individual maybe at

19:29:12 least currently still are not there. they're still looking at you right licenses there going that far off almost be a non-star. Well, I think you know It is scary.

19:29:30 It goes to new concept, for all of us I mean cannabis has come into our world so fast we never thought my lifetime would never happen.

19:29:38 Stuff's happening super fast. So my opinion is we need to get political leaders to these areas and let them see what's going on.

19:29:47 We've talked about maybe trying to do it offered to invite and get them on the ground, because I think like your body came out to my site.

19:29:55 It's only been to California in these places failed. But if you're gonna start thinking about social equity, save the collectives block and stuff like that to get these people on the ground to see it first, of all and explain it

19:30:10 to their distinction, because that's the hardest part way even to me.

19:30:14 You know It's almost something good in a lot of sense right now to start it.

19:30:22 You're gonna have to drop a lot of feathers to get this going right by.

19:30:26 There is no doubt about it. There is a lot of people who don't want sale. The investments don't want to see that they want to be vertical.

19:30:35 There's going to be a lot of phones on the problem. what I mean.

19:30:37 Yeah, they're gonna end up with Why are real Boston dollar cannabis industry that captures access to medicine for patients.

19:30:51 Awesome. You know that's what we're really right because this is a business that's not this is coming.

19:31:00 This is a lot of money and like just giving the numbers to me and those guys last year 111 million, just from the patient.

19:31:07 So that's just in small Then you get into the dispensaries and get in 21 over.

19:31:13 Now we're talking about 700 million so there's a lot.  
19:31:21 But you know nice to know see what's going on to see it.  
19:31:40 We can search for our mind  
19:31:49 So  
19:31:50 It's pretty  
19:31:59 Yeah, Thank you very much.  
19:32:06 Yeah, we have. I mean I had I had 7 gates before, and talked about some things, you know.  
19:32:12 I think they're see this will be even just chase right.  
19:32:19 I interest is for the people. Why, it always has been that's why I started this black there's everybody's like i'm trying to make a point.  
19:32:28 But just need to happen, and there's here and just the telephone.  
19:32:34 So that's why I do you know that's it I mean every person that comes to my part i'm like this is not about me.  
19:32:45 Vision serve and I enjoy life. it's already too much for me It needs to be handed down to another one on them.  
19:32:49 Families and the stuff. These things start moving but it can't move their way.  
19:32:54 Scary alright. they're terrible they still are terrified here this morning.  
19:32:58 Yeah and I'm still putting out information that goes just chill out.  
19:33:03 Okay, we don't do property. Well, a voluntary supply chain.  
19:33:08 So just low. that is really hard for us to look up the slide, they get my like.  
19:33:14 2 weeks ago. i'm still like well i'm not Clearly that's I don't know what's happening right?  
19:33:21 And so no see those same options show with my friends farm and we're all talking what's the show up there?  
19:33:29 No one, no instruments Oh, no we're We're taking a different stature here.  
19:33:35 If you don't let us in right now it's a phone you know.  
19:33:38 Rest right now, it's absolutely wrong you can call the top narcotics guy inspection.  
19:33:50 They come back down they leave. But you know, yeah, property,  
19:34:13 But i'd love to do one more for you me, and I see it.  
19:34:22 You know the co-op still the niche right where they don't know about to get the quality.  
19:34:45 So yeah, I I really see the social activity part of this coming in and 25 and over right now.  
19:34:53 What I see is trying to fix a problem we want there's a lot of people that want to start patient the patient's sale and do like I was just like i'm doing you know and there's a lot of capacity  
19:35:03 for even if you're doing it let's say you're in a house, and you want to do a small 800 square foot and sell your medicine to another patient, let's do right.  
19:35:16 But if we are sitting around with no no we can't do that worms already here, black market here is one of the biggest new world, and i'm just on the blackboard, here.  
19:35:26 There's millions of pound from this place every year. light depths are coming in this place right now for \$500 a month all over the place.  
19:35:35 It's already here So there's no really way of addressing that I'm actually gonna go on a different you're actually going let's start let's start with this up a little bit. Sorry there.  
19:35:45 Okay, that's the business assessment you gotta come to our It's already here in happening so like and i'm assuming they already  
19:36:18 know that, or maybe they're not my you know that.  
19:36:22 But if they're get those numbers barely I mean this light, it's all around us everywhere.  
19:36:29 Do you only block the market. there's plenty of people that come at least everything when it's happening.  
19:36:40 It's all over the place i'm just like They're Black Market.  
19:36:44 Okay, it's on canvas for years their families can sell on campus for years.  
19:36:51 Don't be mistaken there is a bad part of it and it's not just canvas get involved in the hardware, Martin, so that's the part where if you do this right you can start to  
19:37:11 You know  
19:37:19 You know It's a big way from all of that I I think the more story to tell once it's captured all of us children using ours so with Cmd stuff.  
19:37:33 I mean that's still cannabis right more and more that gets out, you know, are something affected in your life using cannabis. I think that's the way it's gonna do it it's not a fast  
19:37:43 process, and it's still out in all of you and places where it's a lot of cannabis go on call a lot of stuff. But you still have sections of colorado and just there were some of the last places  
19:38:02 to get because I mean it costs chaos that's gonna call up the level of prime that we don't expect, you know.

19:38:11 Yeah, So I think you know that's the that's the best way to do it is to get your politicians out there start talking to their constituents a little bit you know and take it some risk if you know

19:38:24 there's going to be Those lots of don't want to I've been something that I experienced people okay.

19:38:53 We're gonna engage that that's what we're doing So that's why I don't do it.

19:38:56 We have to engage i'm writing a mit sitting around in a house we've not engaged anymore as well lost with laws.

19:39:03 If you want to be part of the solution, you have to get out, and it's how people are coming to me that are some of the biggest names in the biggest growers.

19:39:11 And why, from the black market, they're what did we do?

19:39:14 What do you want from us? Well, how do we move this i'm like, get involved in it?

19:39:23 5,000 people. this title program by not just Jason.

19:39:27 The only way, so that's what they're trying to do right now.

19:39:30 This is why I started out and stuff like that that's Why, I have site business, probably Rovers and stuff at my phone.

19:39:36 What's going on it's not so much a we're gonna make some mine here.

19:39:38 It's like we're gonna change i'm not the Utopian person.

19:39:44 We're gonna do it's gonna change some things that are. I hope they're gonna be some very very positive planes that we see a lot we've got to do that sure

19:40:03 so I mean you seem right I mean I know We've been there and they haven't been there quite a days.

19:40:20 They have been there, where there are medical patients there, and share their stories with them all over the place.

19:40:27 All the way to you don't need to it's real.

19:40:33 It's not made up it's like this is happening right Now this is happy.

19:40:37 We're in this space right now, for comfortable we'd like to be at this bar.

19:40:42 We can afford medicine by being part of it, and contribute back to what it takes to know it.

19:40:47 This is a great thing, so that's how it's happening. I can tell you right now this is scary right?

19:40:52 We're seeing about 22,000 patients everything. and I have no control over people were telling me, don't.

19:41:05 I need help. We try to do the best we can to make of sidelines.

19:41:12 Make sure not being trapped all the stuff right that's what we're doing right.

19:41:16 But really easy. Well, when we started It's been acceleration, sure it's easier to do.

19:41:32 Yeah. you know. I mean, like I went to a long green the other day.

19:41:37 I was there for 10Â min, and I saw 30 people I mean 10Â min. I was there.

19:41:41 It's a good thing, So it's how It's Okay, yeah, Okay, so talk about So you got mad at one and as you get into 20.

19:42:22 One a lot of great things. You can set up tears and set licensing.

19:42:28 You can do a lot of things that allow you control. The most important thing is, you have to build a group of people that can enforce these things in my reinforcement. I mean, like a noble bisticks right?

19:42:39 Fine. So whatever the case may be, you know we're not I get away from the scary stuff all together, even people who are doing all our roads, we just wanna you gotta find a way to be like, hey?

19:42:51 We need to talk to you've got to come on board man.

19:42:56 These people, you know, no we want people in mess That's a beautiful thing. i've been in a lot of ways.

19:43:02 This man. I started here in this place, this place you can talk about.

19:43:06 You look at a place like California and watch on stuff. No one was working together.

19:43:11 You can actually have a conversation with people and meet people. I have people come in my form all the time where they go.

19:43:16 Yeah i'll never happen to be out this place right and I do. i'm having like i'm sitting down with Josh screen. i'm sitting here in detroit doesn't happen so

19:43:31 that's the energy that i'm trying to bring in this is like this can happen.

19:43:34 We can all start, connect, you know but it can get can get to a point where we build. Then we feel like, okay, Well, we still happens.

19:43:44 We're like we're always in our listen to us now, what we can do.

19:43:46 Okay, well let's go back to the door inside what we need to do people that just don't get the shit about us. don't want to join the system and just want me raw like that.

19:43:55 And then we could decide. Well, we need to enforce law.

19:43:56 There, I mean, so we could go back and change these things, as we see how all the system.



19:44:03 Now, when I say doing that, seems to make the light like other States, I've given them a baseline structure, so we can draw our own thing and say, hey?

19:44:14 So Why, you just got there to pay and it's gonna happen man?

19:44:19 Because I'm already talking better. system. name really because this place is so long. Cannabis has been alive and kick in here for a long time.

19:44:30 Regular music is second line is broken place we're making These things like, there's a share kind of goofy.

19:44:36 They part with chit. Oh, I mean I came here when I first came to the field.

19:44:42 Here. We are not province. Some of the better people might.

19:44:48 I can smoke what answers stay here I'm like this is not even realistic in the main.

19:44:59 Now, yeah, yeah, ,

19:45:11 Yeah.

19:45:15 Right now. Good. We have a

19:45:29 No,

19:45:38 I mean you let me do side along the west side right it's a golden drug, right it's it's chaos, right I mean.

19:45:45 I used to go to all the contests all the time, and camp over there with my kids.

19:45:50 And then people started coming on the window like crystal map and stuff.

19:45:52 You know what I mean. so it's a fine example of where you started to do patient, patient sales.

19:45:57 You may actually start to to society a little bit because now. it's like, okay, we don't need to do this.

19:46:04 We can actually make money, sell me to each other now we don't need to sell Now, we don't need to sell these for our support in our families. I mean really don't want to bring Excel I don't really have no

19:46:16 choice. you know what i'm saying everybody's got a choice but I mean it's like ,

19:46:46 I think

19:47:13 And I think i'll ask you to do you see the stories that we hear with the injustice Cannabis story of all the time.

19:47:25 Maybe not so much

19:47:35 ,

19:47:38 ,

19:47:55 Great,

19:48:11 Thank you, and I I think the hardest thing is like It's okay.

19:48:20 Now it really there's no really just talking about it's not a life, you know.

19:48:30 It's a lot different now. but that's the history don't really trust anything great That's really hard to get this thing, but it's not in this gift as far as it's out.

19:48:43 Right. what's happening? We all see it guys no Okay, I don't wanna see it shake in your own role.

19:48:52 If you stay in the closet let's not shape it now and that's It's your own fault.

19:48:58 I'll understand how it's going to be shaped especially if you don't do anything about it.

19:49:00 It can stay where what's the shaping look like now, a lot of people live like that for I got a thinking about collectively.

19:49:17 So again putting myself into training a regulator thinking about patient information, or So most states have like a point of sales, CD sales traffic state have an understanding of you know where the body is made where

19:49:37 It's going Yeah, when it comes to that for a patient that's extremely burned regulation right? So now we'll see the set tracking you're mainly here that would one of sales tracking the system.

19:49:53 You're paying \$500 for that things like that?

19:50:02 No. So this is what receiving see the sale and other places right?

19:50:11 It's it's just not

19:50:12 The Governor's starting to trust people yet right we don't need the seal to see the sales back. It didn't place right. That's what we need to get back into society.

19:50:22 Your taxes right? We have everybody pay attention to a lot of things, while all of a sudden we make a big deal about cannabis, and saying, Hey, you know what doing this?

19:50:30 If if if you're caught doing that and you're investigating some new gonna get the problem.

19:50:36 So that's how we need to go it's not really what it's seen The sale is kind of going way down a lot of places, because you know it's just not realistic you can still cheat see the sale on

19:50:48 Yeah, I know but it's like you know it's My! I tried to be modified with my own arm just to keep up with my have plants invite people have a scandal I can scan all those lines real

19:50:58 quick it's \$2,000 why I show you how to use it on Michael i'm like this is the we were trying to go in this world and see the sale and I figured all out if we start to see that it's not

19:51:15 a very great system. it's very broken so many people are trying to implement it.  
19:51:21 It's almost impossible to do so you know it's.  
19:51:25 Basically, you know, you start to build a history with people license.  
19:51:29 You're a do our license your licenses \$1,000 a \$100.  
19:51:35 That's not our licensing now? you file under the light of what are you doing? What's going on?  
19:51:41 You know, and to be financials you would put yourself in that spot.  
19:51:47 So the seat to sale isn't it because of it.  
19:51:53 It's to make sure that the bed still comes and because I could live with me and that Okay, so maybe to get the whole national thing.  
19:52:15 And I agree with you with this if the the scheduler, I would say in all fairness, I don't know that'll be into the patient patient even if you're person in the scene second I mean it's 2  
19:52:28 \$1,000 a year that's about it that's all I really pay.  
19:52:34 But that's it someone's going to do see the sale.  
19:52:37 I mean sorry sorry patiently. patient sale which we call seem to say it's not the same thing but you it really is everything right and largely.  
19:52:45 It's travel right? it's not really what it's worth trying to.  
19:52:48 That's kind of I I want to see that Okay, because I think the whole patient I see the department of Health being upset with that, because they don't know whether or not and you know .  
19:53:08 Hello, the people doing the patient to be sure it's willing to do the job it is with exactly for example, you have to see the cell tracking  
19:53:48 You know, handing it to work patient without having to eat the Dna, I mean, i'm gonna be able to talk about conference right like we look at a system where you know businesses are encouraged to make money  
19:54:04 so you can find someone they don't have to track anything we'll leave you there.  
19:54:11 We can tell them right. So you'll have Yes, i'll have a poking up wireless to the way you people are trusted, but it seems that are saying one thing and selling something else and there's no traffic on that  
19:54:25 right we're trying to make sure that as the regulator that it's probably from what you need to go in the way it's.  
19:54:35 It's this regulated system it's a no way to express what is happening.  
19:54:39 You know that you know we know there's Cannabis.  
19:54:45 Now we do sponsors. it's not roading we know this.  
19:54:48 I know it's happening so you know see the sale thing is out of like, Okay, put it in place I'm downloading, But it's gonna people wanna beat it, and they're gonna meet it right and if you're  
19:55:01 trying to grow a a program where you know we do have A.  
19:55:09 Gotta get there some doc you can't just know what it is. can't just be the double I think. Go, hey?  
19:55:13 Everybody's in the business themselves. screw everything it's the way it's gonna be yeah, I get it, you know.  
19:55:19 So I for me. it's like you know the better things it doesn't get Bob so doubt about it it is right now.  
19:55:27 Problem. you know it's even a problem with expenses right now. I can't even say I know they're laundry, but not laundry way. but she can pay the Colorado.  
19:55:40 Whatever the case would be like it's a live one in a huge bay area.  
19:55:41 So you know I you know I think I think  
19:55:46 The patients are gonna establish relationships with farms with real people.  
19:55:54 There's a lot of people here it's gonna take time That's gonna how you're gonna start to see this route.  
19:55:58 Small part. Patient Sales You're gonna start to see this now, but you know you can also have some of it's bringing in the best role.  
19:56:09 Scotland is in the world, and selling to a patient.  
19:56:14 So. but the State still making money off that taxation to make So that's another thing to see the sale  
19:56:41 You should have a financial break, if you shouldn't have what's going on. if you can.  
19:56:43 No, that's the whole idea of people are doing and a lot of people do sales Now we can track it.  
19:56:51 We can be legitimate there's no reason unless You're gonna be that person that doesn't know Okay, you're gonna versus.  
19:57:00 Then, alright, let's see what you got when he comes to be sure I know people that buy you know, hospital on sale.  
19:57:15 You pick up apples and go to a corporate market and they're not we're gonna see that medical license to come across the border bill to get  
19:57:44 patient, patient or patient, a dispensary that needs to change super away from all the other States that have

done that already still sits behind this we haven't come to get your license here.

19:57:54 That's a kind of a broken thing and that really is that really versus Yeah, yeah, i'll i'll say they wanted to it's anonymous please.

19:58:20 Yeah. but they're not

19:58:29 Yeah, but they're not now I mean, go back to social.

19:58:43 Yeah. And okay, So we talked about that. I like the the patient.

19:58:54 How do we? I guess if we're gonna have like 2 volumes?

19:59:02 And should we say a drop on the I mean you're gonna be you're you're gonna run out 0 If you're gonna pay for say someone who wants to have a smaller growth of \$3,000 a

19:59:21 year. you're only gonna have so much money when you can take care of a 100 licenses or 15 or 20 license.

19:59:28 You know that's gonna be difficult there's no doubt about that.

19:59:31 But I think you know it's. not just on you guys as well you know like That's why you're starting to see a lot of this smaller groups coming in.

19:59:38 It's so smart can't just be on the State.

19:59:40 They'll run out line so you have a 100 applicants they spend, you know, \$30,000, and that's how much you have.

19:59:48 That's it. You know what I mean for that year now they have to wait to the next right.

19:59:53 But it can still be herely after that. Then they start starting to cover some of their own.

20:00:00 No. good social equity, licenses you talked about that don't need within the not in the wedding, in anyway.

20:00:17 The ones a question as to whether or not we should keep Okay, in the small room, which is basically only one.

20:00:31 Should we keep it a child, increase the cap

20:00:41 So to be a little bit different.

20:00:45 There are breaking water this past reason there are just better people's model, but they're not really dispensable.

20:00:52 They're still the patient of sale is really what they are with their license through the program.

20:00:57 It says, like a retail store, or whatever the case may be.

20:01:01 Okay, But we into what we talked about the medical license here.

20:01:09 Okay, but not

20:01:16 Should they also be yeah comedy for Ireland?

20:01:25 I mean should it be like what form should it I mean that's I guess it's for thought as far as .

20:01:33 For more increase, and pull off because I think during the one the population paid cannot afford it and then she'll drop it.

20:01:58 There in rather than not like Right?

20:02:08 Yeah, I mean I can take a little bit of information and I don't believe they're capping up. I believe they're growing It takes a little bit of time i'm getting the licenses.

20:02:18 To the people. So I think if I remember correctly it's about are you about it?

20:02:24 300 selective licenses is main right now.

20:02:27 The last 4 years it doesn't happen super fast and same thing.

20:02:36 It's pretty heavy population. who operated licenses just like we are the only thing we're working with the medical licenses, licenses.

20:02:48 We live in the Yeah. I mean that's the way yeah, yes, sir.

20:02:59 I think I think we'll talk about the medical side. I don't.

20:03:06 I don't know necessarily it'll tell me an issue, because of what the business aspect is right like.

20:03:11 I think it's a but if you open up for a migration.

20:03:17 I think most of you will probably choose to go recreational just by nature of business.

20:03:23 But if they'd like to you know I think leaving it an option, i'm having it you wanna go yeah, that awesome that's your choice.

20:03:37 So I can tell you when talking to in other States, like the the consensus of the law papers, anything was the regular rather than automatic.

20:04:00 But when you talk to patient they want

20:04:07 Yeah, ,

20:04:15 If you have to put the people place, that can collect the tax and do everything it's supposed to be done in a massive program, it's gonna be a burden, you know, even when not it's gonna end up in your

20:04:26 room, and seems like I don't want any more work but you want money.

20:04:32 She's like lunchap and he's a while money like so you know.

20:04:33 So it it It's only a verbal if you you can't find it, you know what I mean doesn't have good policy in place.

20:04:42 Good policy employees and you have funding and it's a great thing, I mean Colorado is still dealing with that right.

20:04:52 But you know, like I went to a place where it goes spring to automatically, so I can use my benefit part there.

20:04:57 Why, I mean it was like she would be the rightational I honestly possible borrow better there, you know, so whether they think it's a burden or not.

20:05:07 They have done the right thing, so that's the biggest thing in the world.

20:05:12 They've kept their medical program. Yeah, everybody talk to you through theirs out.

20:05:16 It's wrong about it. you know what I mean and they cost a lot of cable us.

20:05:21 So I would say, Hey,

20:05:26 We keep a dual use, yeah, for sure.

20:05:40 Especially

20:05:57 Yeah, you can be on that one more time, to keep the industry here, is required.

20:06:12 You want to participate in their rooms? I mean, you know.

20:06:29 Here we are again trying to play control the rings right and we're trying to.

20:06:36 I'm set up a robust system next possibly can but many.

20:06:41 You start pushing people and saying, Hey, we're gonna do this now they're gonna be I mean that's what people do.

20:06:46 Yeah, you wanna embrace people will go hey? okay we're gonna set up to your systems.

20:06:51 You can buy into it. We're gonna see how it goes right I honestly don't think oversets the whole while under saturate.

20:07:00 The Hawaii market the way we will do it, or I think we could do it.

20:07:04 Now you can do it. You can do it like California where you're watching it.

20:07:06 Okay, start here there anymore. Take that away

20:07:22 Oh, i'm sorry I know I'm so be listening.

20:07:34 But

20:07:41 But what they're seeing is just like anything There's ways around that way, like there's the Columbia cares and problem is not profit.

20:07:55 And they have a foundation that that runs, you know, the entire Mso.

20:07:57 Operating. Yeah, it's very valuable why, he doesn't have any around the Corporation.

20:08:13 It could be an escrow. You can just court and incorporate in a place like

20:08:22 No, it's it's not like you can't use it.

20:08:26 When you go to the the website No, I know I think the intent is like I don't The intent is to to bring a the entities unity

20:08:59 right out there that they have a best in business, but that they cut up all their ads and say, Oh, we would love to that. Our investors will sue us because we are required by law to maximize we turn on investment

20:09:07 right So that clocks off that avenue and for me, the intent is clearly to create a stubborn blog we don't understand this. We don't know what the environmental.

20:09:29 Bottom line is, we don't like living wages because they come into our profits. We don't know what social equity is, and we don't want to prepare that.

20:09:35 And we have a risk having our license to vote on this sort of nebulous set of criteria, in which case great

20:09:44 That that is for me very clearly entities that seek to purely maximize.

20:09:55 And yeah, you know any more was an invitation to lawyers to give the Cisco.

20:10:02 Okay, Thank you. We need to talk to, and I gotta make a little bit in.

20:10:13 I did it. I did a quickie awesome research it's sent to buying stuff.

20:10:22 So I was talking about very important to get that people up there.

20:10:35 Yeah, the licensing agency that has discretion to Oh, the other problem is we're gonna help out. the help of licensing and agency in that Oh, yeah, yeah, Well, I I think

20:10:59 that. yeah, that's part of the nebulaist and It can also be a lot of power we'd like to see our like It's really it's like Portland charter dissolution.

20:11:15 It is life of that person paying dispensaries subsidized.

20:11:49 That's my understanding i'll double check definitely, and I think they might be governments

20:12:00 I think there was a lot. Yeah, they came in and tried to take over like Pennsylvania and stuff and take quite

work out

20:12:12 What what they've found again, they're just getting nonprofits and they're still not ready to get

20:12:44 Yeah i'll i'll It's a it's a viable question, because big business is right outside of they're they've been here i've met with people.

20:13:01 That are here, and they can't. do anything here because we are still met at the State They can't get you all over.

20:13:08 They can't do collective so you know i've seen some of the biggest women there, and stuff so I mean man's really started with this trying to figure out and the small honestly I

20:13:36 mean on the small route across the united States a little bit, but come up with some recommendations It's too big right.

20:13:50 What is too big, you know. it's 2 acres as big as Mike.

20:13:54 Some some stuff coming out right now that I need to get back to that group.

20:13:58 So I can. So over my stuff. they are really trying to take a look at that stuff to find the industry.

20:14:05 So we don't run into this box of big business ever right I just have an idea .

20:14:17 Regulatory of 42, the the nuts and bolts of what people?

20:14:24 It does right, and in or that kind of licenses every year, if you're failing

20:14:47 Unsustainable again, all those things I I wanted with me, and that is part of the now i'm sure either that cheating in all of these areas for that to make the

20:15:20 products, and an ordinary sale, and they're making progress me here to the first so

20:15:57 Okay, So I'll hear a recommendation of that reporting now about now licenses

20:16:33 Hello, and and and I think we need to adopt some lines of the war

20:16:42 And

20:17:06 I go on, especially after I love you.

20:17:19 Guys a pleasure here. I bring my low hot part everything i'm managing guys.

20:17:25 I really want this to be the best program in the life ever.

20:17:29 I do see legislators and politicians in these places, so they can see how many people told me, and and setting up when those guys are like, wait for everybody, hit the office.

20:17:45 Maybe we could do like a conference in maine or something like that, so they can pay for I just you know.

20:17:51 But it's also consistent, based just like towards both all day.

20:17:55 So you know There's a lot of it's good contracts. course that nobody can afford, because but this is the engine tool is the all this stuff that we need to be doing have you guys.

20:18:10 Yeah, we need to be doing this to turn the tide.

20:18:14 So it makes it easier on you guys right and that's not easy, and it takes a lot we will.

20:18:28 It's valuable yeah it's hard to do to lock

# Maui/Molokai Listening Sessions

2022.08.14

Social Equity Group

(Not recorded)