Public Hearing

of

NEW JERSEY LEGISLATIVE BLACK CAUCUS

“Recreational Marijuana Hearings; third of three”

LOCATION: Second Baptist Church
Atlantic City, New Jersey

DATE: April 24, 2018
11:00 a.m.

MEMBERS OF CAUCUS PRESENT:

Senator Ronald L. Rice, Chair
Assemblywoman Shavonda E. Sumter, 2nd Vice Chair

ALSO PRESENT:

Assemblyman John Armato
District 2
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Name</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaleem Shabazz</td>
<td>1</td>
</tr>
<tr>
<td>Councilman</td>
<td></td>
</tr>
<tr>
<td>Third Ward</td>
<td></td>
</tr>
<tr>
<td>Atlantic City, and President</td>
<td></td>
</tr>
<tr>
<td>Atlantic City Chapter</td>
<td></td>
</tr>
<tr>
<td>NAACP</td>
<td></td>
</tr>
<tr>
<td>Reverend Collins A. Days, Sr.</td>
<td>1</td>
</tr>
<tr>
<td>Senior Pastor</td>
<td></td>
</tr>
<tr>
<td>Second Baptist Church of Atlantic City</td>
<td></td>
</tr>
<tr>
<td>Ernest D. Coursey</td>
<td>9</td>
</tr>
<tr>
<td>Freeholder</td>
<td></td>
</tr>
<tr>
<td>Atlantic County</td>
<td></td>
</tr>
<tr>
<td>Marty Small</td>
<td>11</td>
</tr>
<tr>
<td>President</td>
<td></td>
</tr>
<tr>
<td>City Council</td>
<td></td>
</tr>
<tr>
<td>Atlantic City</td>
<td></td>
</tr>
<tr>
<td>Roneet Lev, M.D.</td>
<td>13</td>
</tr>
<tr>
<td>Chief, Scripps Mercy Hospital Emergency Dept.</td>
<td></td>
</tr>
<tr>
<td>and Chair</td>
<td></td>
</tr>
<tr>
<td>San Diego and Imperial County Prescription</td>
<td></td>
</tr>
<tr>
<td>Drug Abuse Panel, and</td>
<td></td>
</tr>
<tr>
<td>President</td>
<td></td>
</tr>
<tr>
<td>San Diego Emergency Medicine Oversight</td>
<td></td>
</tr>
<tr>
<td>Committee</td>
<td></td>
</tr>
<tr>
<td>Luke D. Niforatos</td>
<td>19</td>
</tr>
<tr>
<td>Chief of Staff and Senior Policy Advisor</td>
<td></td>
</tr>
<tr>
<td>Smart Approaches to Marijuana (SAM)</td>
<td></td>
</tr>
<tr>
<td>William V. Jones III</td>
<td>19</td>
</tr>
<tr>
<td>Communication and Outreach Associate</td>
<td></td>
</tr>
<tr>
<td>Smart Approaches to Marijuana (SAM)</td>
<td></td>
</tr>
<tr>
<td>Anthony Catanoso</td>
<td>39</td>
</tr>
<tr>
<td>Owner and President</td>
<td></td>
</tr>
<tr>
<td>Steel Pier</td>
<td></td>
</tr>
</tbody>
</table>
## TABLE OF CONTENTS (continued)

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frank L. Greenagel, Jr.</td>
<td>Member, Governor’s Council of Drug Abuse and Alcoholism, and Professor, Rutgers Center of Alcohol Studies, Rutgers, the State University of New Jersey</td>
<td>40</td>
</tr>
<tr>
<td>Ben Cort</td>
<td>Board Member, Smart Approaches to Marijuana (SAM)</td>
<td>50</td>
</tr>
<tr>
<td>Robert Zlotnick, Ph.D.</td>
<td>Executive Director, Atlantic Prevention Resources</td>
<td>55</td>
</tr>
<tr>
<td>Salaam Ismial</td>
<td>National Director, National United Youth Council, Inc., and Co-Chair, New Jersey Study Commission on Violence</td>
<td>62</td>
</tr>
<tr>
<td>David Weeks</td>
<td>Private Citizen</td>
<td>66</td>
</tr>
<tr>
<td>Christopher M. Leusner</td>
<td>Chief of Police, Middle Township Police Department, and Vice President, New Jersey State Chiefs of Police Association</td>
<td>68</td>
</tr>
<tr>
<td>Melissa Tassé, Ph.D.</td>
<td>Chief Executive Officer and Founder, The Honey Bee Foundation</td>
<td>68</td>
</tr>
<tr>
<td>Kristine De Jesus, Psy.D.</td>
<td>Founder and Recovery/Life Coach, The Wellness Cooperative, and Staff Psychologist, and Coordinator, Alcohol and Other Drug (AOD) Program, Counseling and Psychological Services, Montclair State University</td>
<td>68</td>
</tr>
</tbody>
</table>
TABLE OF CONTENTS (continued)

<table>
<thead>
<tr>
<th>Name</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rory Joseph Wells, Esq.</td>
<td>80</td>
</tr>
<tr>
<td>Former Assistant Prosecutor</td>
<td></td>
</tr>
<tr>
<td>Ocean County Prosecutor’s Office, and</td>
<td></td>
</tr>
<tr>
<td>Senior Legal Advisor</td>
<td></td>
</tr>
<tr>
<td>New Jersey Responsible Approaches to Marijuana Policy (NJ RAMP)</td>
<td></td>
</tr>
<tr>
<td>Bishop Jethro C. James, Jr.</td>
<td>84</td>
</tr>
<tr>
<td>Senior Pastor</td>
<td></td>
</tr>
<tr>
<td>Paradise Baptist Church, and</td>
<td></td>
</tr>
<tr>
<td>President</td>
<td></td>
</tr>
<tr>
<td>Newark/North Jersey Committee of Black Churchmen, and</td>
<td></td>
</tr>
<tr>
<td>Chaplain</td>
<td></td>
</tr>
<tr>
<td>New Jersey State Police, and</td>
<td></td>
</tr>
<tr>
<td>Senior Advisor</td>
<td></td>
</tr>
<tr>
<td>New Jersey Responsible Approaches to Marijuana Policy (NJ RAMP)</td>
<td></td>
</tr>
<tr>
<td>John E. Harmon, Sr.</td>
<td>90</td>
</tr>
<tr>
<td>Founder, President, and Chief Executive Officer</td>
<td></td>
</tr>
<tr>
<td>African American Chamber of Commerce of New Jersey</td>
<td></td>
</tr>
<tr>
<td>LaQuay Laun’Juel</td>
<td>94</td>
</tr>
<tr>
<td>President and Founding Partner</td>
<td></td>
</tr>
<tr>
<td>Obsidian Elite Investment Association</td>
<td></td>
</tr>
<tr>
<td>Alysa Fornarotto-Regenyre</td>
<td>95</td>
</tr>
<tr>
<td>Co-Chair</td>
<td></td>
</tr>
<tr>
<td>Public Awareness and Legislative Committee</td>
<td></td>
</tr>
<tr>
<td>Association of Student Assistance Professionals of New Jersey, and</td>
<td></td>
</tr>
<tr>
<td>Member</td>
<td></td>
</tr>
<tr>
<td>Monmouth County Board of Addiction Services</td>
<td></td>
</tr>
<tr>
<td>Donna Higbee</td>
<td>100</td>
</tr>
<tr>
<td>Chief of Police</td>
<td></td>
</tr>
<tr>
<td>Galloway Township, and</td>
<td></td>
</tr>
<tr>
<td>Secretary</td>
<td></td>
</tr>
<tr>
<td>Atlantic County Chiefs of Police Association</td>
<td></td>
</tr>
<tr>
<td>Scott Bemetery</td>
<td>104</td>
</tr>
<tr>
<td>Founder and Chief Executive Officer</td>
<td></td>
</tr>
<tr>
<td>Cannalytics Research Center, LLC</td>
<td></td>
</tr>
<tr>
<td>Cheryl Gordon</td>
<td>114</td>
</tr>
<tr>
<td>Private Citizen</td>
<td></td>
</tr>
</tbody>
</table>
**TABLE OF CONTENTS (continued)**

<table>
<thead>
<tr>
<th>Samantha Harries</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director of Operation</td>
<td>119</td>
</tr>
<tr>
<td>New Jersey Prevention Network</td>
<td></td>
</tr>
</tbody>
</table>

**APPENDIX:**

<table>
<thead>
<tr>
<th>Testimony submitted by Roneet Lev., M.D.</th>
<th>1x</th>
</tr>
</thead>
<tbody>
<tr>
<td>Testimony submitted by Luke D. Niforatos</td>
<td>4x</td>
</tr>
<tr>
<td>Testimony submitted by Will V. Jones III</td>
<td>10x</td>
</tr>
<tr>
<td>Testimony submitted by Anthony Catanoso</td>
<td>13x</td>
</tr>
<tr>
<td>Testimony submitted by Frank L. Greenagel Jr.</td>
<td>15x</td>
</tr>
<tr>
<td>Testimony submitted by Ben Cort</td>
<td>20x</td>
</tr>
<tr>
<td>Testimony submitted by Robert Zlotnick, Ph.D.</td>
<td>34x</td>
</tr>
<tr>
<td>Testimony submitted by Melissa Tassé, Ph.D.</td>
<td>36x</td>
</tr>
<tr>
<td>Testimony submitted by Kristine De Jesus, Psy.D.</td>
<td>38x</td>
</tr>
<tr>
<td>Testimony</td>
<td>Page</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>submitted by</td>
<td></td>
</tr>
<tr>
<td>Christopher M. Leusner</td>
<td>42x</td>
</tr>
<tr>
<td>Testimony</td>
<td></td>
</tr>
<tr>
<td>submitted by</td>
<td></td>
</tr>
<tr>
<td>Rory Joseph Wells, Esq.</td>
<td>46x</td>
</tr>
<tr>
<td>Testimony</td>
<td></td>
</tr>
<tr>
<td>submitted by</td>
<td></td>
</tr>
<tr>
<td>Bishop Jethro C. James, Jr.</td>
<td>48x</td>
</tr>
<tr>
<td>Testimony, plus attachments</td>
<td></td>
</tr>
<tr>
<td>submitted by</td>
<td></td>
</tr>
<tr>
<td>Alysa Fornarotto-Regenye</td>
<td>57x</td>
</tr>
<tr>
<td>Testimony</td>
<td></td>
</tr>
<tr>
<td>submitted by</td>
<td></td>
</tr>
<tr>
<td>Donna Higbee</td>
<td>81x</td>
</tr>
<tr>
<td>Testimony</td>
<td></td>
</tr>
<tr>
<td>submitted by</td>
<td></td>
</tr>
<tr>
<td>LaQuay Laun ’Juel</td>
<td>83x</td>
</tr>
<tr>
<td>Testimony</td>
<td></td>
</tr>
<tr>
<td>submitted by</td>
<td></td>
</tr>
<tr>
<td>Samantha Harries</td>
<td>86x</td>
</tr>
<tr>
<td>Fact Sheet</td>
<td></td>
</tr>
<tr>
<td>submitted by</td>
<td></td>
</tr>
<tr>
<td>Responsible Approaches to Marijuana Policy (RAMP)</td>
<td>88x</td>
</tr>
<tr>
<td>pnf: 1-128</td>
<td></td>
</tr>
</tbody>
</table>
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Location/Role</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaleem Shabazz</td>
<td>Councilman</td>
<td>Third Ward, Atlantic City, and President, Atlantic City Chapter</td>
<td>1</td>
</tr>
<tr>
<td>Reverend Collins A. Days, Sr.</td>
<td>Senior Pastor</td>
<td>Second Baptist Church of Atlantic City</td>
<td>1</td>
</tr>
<tr>
<td>Ernest D. Coursey</td>
<td>Freeholder</td>
<td>Atlantic County</td>
<td>9</td>
</tr>
<tr>
<td>Marty Small</td>
<td>President</td>
<td>City Council, Atlantic City</td>
<td>11</td>
</tr>
<tr>
<td>Roneet Lev, M.D.</td>
<td>Chief, Scripps Mercy Hospital Emergency Department, and Chair</td>
<td>San Diego and Imperial County Prescription Drug Abuse Panel, and President</td>
<td>13</td>
</tr>
<tr>
<td>Luke D. Niforatos</td>
<td>Chief of Staff and Senior Policy Advisor</td>
<td>Smart Approaches to Marijuana (SAM)</td>
<td>19</td>
</tr>
<tr>
<td>William V. Jones III</td>
<td>Communication and Outreach Associate</td>
<td>Smart Approaches to Marijuana (SAM)</td>
<td>19</td>
</tr>
<tr>
<td>Anthony Catanoso</td>
<td>Owner and President</td>
<td>Steel Pier</td>
<td>39</td>
</tr>
<tr>
<td>Name</td>
<td>Position and Affiliations</td>
<td>Page</td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------</td>
<td>------</td>
<td></td>
</tr>
<tr>
<td>Frank L. Greenagel, Jr.</td>
<td>Member Governor’s Council of Drug Abuse and Alcoholism, and Professor Rutgers Center of Alcohol Studies, Rutgers, the State University of New Jersey</td>
<td>40</td>
<td></td>
</tr>
<tr>
<td>Ben Cort</td>
<td>Board Member Smart Approaches to Marijuana (SAM)</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>Robert Zlotnick, Ph.D.</td>
<td>Executive Director Atlantic Prevention Resources</td>
<td>55</td>
<td></td>
</tr>
<tr>
<td>Salaam Ismial</td>
<td>National Director National United Youth Council, Inc., and Co-Chair New Jersey Study Commission on Violence</td>
<td>62</td>
<td></td>
</tr>
<tr>
<td>David Weeks</td>
<td>Private Citizen</td>
<td>66</td>
<td></td>
</tr>
<tr>
<td>Christopher M. Leusner</td>
<td>Chief of Police Middle Township Police Department, and Vice President New Jersey State Chiefs of Police Association</td>
<td>68</td>
<td></td>
</tr>
<tr>
<td>Melissa Tassé, Ph.D.</td>
<td>Chief Executive Officer and Founder The Honey Bee Foundation</td>
<td>68</td>
<td></td>
</tr>
<tr>
<td>Kristine De Jesus, Psy.D.</td>
<td>Founder and Recovery/Life Coach The Wellness Cooperative, and Staff Psychologist, and Coordinator Alcohol and Other Drug (AOD) Program, Counseling and Psychological Services Montclair State University</td>
<td>68</td>
<td></td>
</tr>
</tbody>
</table>
TABLE OF CONTENTS (continued)

<table>
<thead>
<tr>
<th>Name</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rory Joseph Wells, Esq.</td>
<td>80</td>
</tr>
<tr>
<td>Former Assistant Prosecutor</td>
<td></td>
</tr>
<tr>
<td>Ocean County Prosecutor’s Office, and</td>
<td></td>
</tr>
<tr>
<td>Senior Legal Advisor</td>
<td></td>
</tr>
<tr>
<td>New Jersey Responsible Approaches to Marijuana Policy (NJ RAMP)</td>
<td>80</td>
</tr>
<tr>
<td>Bishop Jethro C. James, Jr.</td>
<td>84</td>
</tr>
<tr>
<td>Senior Pastor</td>
<td></td>
</tr>
<tr>
<td>Paradise Baptist Church, and</td>
<td></td>
</tr>
<tr>
<td>President</td>
<td></td>
</tr>
<tr>
<td>Newark/North Jersey Committee of Black Churchmen, and</td>
<td></td>
</tr>
<tr>
<td>Chaplain</td>
<td></td>
</tr>
<tr>
<td>New Jersey State Police, and</td>
<td></td>
</tr>
<tr>
<td>Senior Advisor</td>
<td></td>
</tr>
<tr>
<td>New Jersey Responsible Approaches to Marijuana Policy (NJ RAMP)</td>
<td>84</td>
</tr>
<tr>
<td>John E. Harmon, Sr.</td>
<td>90</td>
</tr>
<tr>
<td>Founder, President, and Chief Executive Officer</td>
<td></td>
</tr>
<tr>
<td>African American Chamber of Commerce of New Jersey</td>
<td></td>
</tr>
<tr>
<td>LaQuay Laun’Juel</td>
<td>94</td>
</tr>
<tr>
<td>President and Founding Partner</td>
<td></td>
</tr>
<tr>
<td>Obsidian Elite Investment Association</td>
<td></td>
</tr>
<tr>
<td>Alysa Fornarotto-Regenye</td>
<td>95</td>
</tr>
<tr>
<td>Co-Chair</td>
<td></td>
</tr>
<tr>
<td>Public Awareness and Legislative Committee</td>
<td></td>
</tr>
<tr>
<td>Association of Student Assistance Professionals of New Jersey, and</td>
<td></td>
</tr>
<tr>
<td>Member</td>
<td></td>
</tr>
<tr>
<td>Monmouth County Board of Addiction Services</td>
<td></td>
</tr>
<tr>
<td>Donna Higbee</td>
<td>100</td>
</tr>
<tr>
<td>Chief of Police</td>
<td></td>
</tr>
<tr>
<td>Galloway Township, and</td>
<td></td>
</tr>
<tr>
<td>Secretary</td>
<td></td>
</tr>
<tr>
<td>Atlantic County Chiefs of Police Association</td>
<td></td>
</tr>
<tr>
<td>Scott Begraft</td>
<td>104</td>
</tr>
<tr>
<td>Founder and Chief Executive Officer</td>
<td></td>
</tr>
<tr>
<td>Cannalytics Research Center, LLC</td>
<td></td>
</tr>
<tr>
<td>Cheryl Gordon</td>
<td>114</td>
</tr>
<tr>
<td>Private Citizen</td>
<td></td>
</tr>
</tbody>
</table>
TABLE OF CONTENTS (continued)

<table>
<thead>
<tr>
<th>Name</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Samantha Harries</td>
<td>119</td>
</tr>
<tr>
<td>Director of Operation</td>
<td></td>
</tr>
<tr>
<td>New Jersey Prevention Network</td>
<td></td>
</tr>
</tbody>
</table>

**APPENDIX:**

<table>
<thead>
<tr>
<th>Testimony submitted by</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roneet Lev., M.D.</td>
<td>1x</td>
</tr>
<tr>
<td>Luke D. Niforatos</td>
<td>4x</td>
</tr>
<tr>
<td>Will V. Jones III</td>
<td>10x</td>
</tr>
<tr>
<td>Anthony Catanoso</td>
<td>13x</td>
</tr>
<tr>
<td>Frank L. Greenagel Jr.</td>
<td>15x</td>
</tr>
<tr>
<td>Ben Cort</td>
<td>20x</td>
</tr>
<tr>
<td>Robert Zlotnick, Ph.D.</td>
<td>34x</td>
</tr>
<tr>
<td>Melissa Tassé, Ph.D.</td>
<td>36x</td>
</tr>
<tr>
<td>Kristine De Jesus, Psy.D.</td>
<td>38x</td>
</tr>
</tbody>
</table>
### Table of Contents (continued)

#### APPENDIX (continued)

<table>
<thead>
<tr>
<th>Testimony</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>submitted by Christopher M. Leusner</td>
<td>42x</td>
</tr>
<tr>
<td>Rory Joseph Wells, Esq.</td>
<td>46x</td>
</tr>
<tr>
<td>Bishop Jethro C. James, Jr.</td>
<td>48x</td>
</tr>
<tr>
<td>John E. Harmon, Sr.</td>
<td>51x</td>
</tr>
<tr>
<td>Alysa Fornarotto-Regenye</td>
<td>57x</td>
</tr>
<tr>
<td>Donna Higbee</td>
<td>81x</td>
</tr>
<tr>
<td>LaQuay Laun’Juel</td>
<td>83x</td>
</tr>
<tr>
<td>Samantha Harries</td>
<td>86x</td>
</tr>
<tr>
<td>Responsible Approaches to Marijuana Policy (RAMP)</td>
<td>88x</td>
</tr>
</tbody>
</table>
COUNCILMAN KALEEM SHABAZZ: (off mike) I want to thank you all for coming to the Legislative Black Caucus hearing on recreational marijuana.

And to open this up, with opening remarks, is the Pastor of the Second Baptist Church, Senior Pastor Reverend Collins A. Days, Sr.

PASTOR COLLINS A. DAYS, Sr.: (off mike) Good afternoon, everyone.

I want to thank Kaleem for doing what I was supposed to do in the first place -- which was to officially welcome you here at Second Baptist for the legislative hearing of the Black Caucus.

I want to welcome Senator Rice, and all of his colleagues, and those who (indiscernible) come to talk about this most important issue.

We know that there are many who are lobbying and pushing; but we need to hear from the community, and we need to get informed information so that we can make informed decisions.

And we are grateful for you, and we are really grateful to Senator Rice always being at the forefront of bringing the issues to the community. And we are grateful being the last place where the last hearing is going to be held.

And we want to welcome you, and we want to welcome them. And we ask that you please -- we want to get as much information as possible, as leaders, as community people, so that we can make informed decisions.

And we thank you, and welcome you here.
SENATOR RONALD L. RICE (Chair): Thank you very much, Reverend Days, for allowing us to be here in this wonderful place today.

Let me also thank Councilman Shabazz and Freeholder Coursey for taking point on making sure that arrangements were made, and that people were notified of the hearing today.

I also want to thank the rest of his Council colleagues for working with him on these initiatives.

I want to just say a couple of things, first, before we have our County officials, and local and State officials say hello to you.

I want to thank all of you who took the time to travel throughout the state; particularly those of you who have travelled from others states to be here with us today to give testimony, and those who have come to hear. I would hope that the information you receive is shared.

One of the things, as Chairman of the New Jersey Legislative Black Caucus -- and I have my Vice Chair, Assemblywoman Sumter, next to me; she’ll say hello to you -- we took a position that we need to go out and be a part of the conversation. We’ve been listening for quite some time now, nationally as well as locally, to all the conversations that have been taking place.

All of the conversations that have been taking place were being presented at forums that were promoted and supported by folks who were for the legalization of recreational marijuana; people from Wall Street, as well as people who want to invest -- big investors. And that’s fine. The problem we had is that when we look at New Jersey, and other states, and we travel internationally with our colleagues, there are problems that are
foreseeable with the legalization of recreational marijuana, and there are problems -- even though there is no longitudinal study -- that are also starting to appear, being documented in states such as Colorado, Nevada, Washington state, Washington, D. C, etc.

And those problems are not being discussed at these meetings. We believe in New Jersey, the Black Caucus, that our folks are intelligent people -- regardless of economic income, regardless of their zip codes -- and that we should give them all the information and let them make decisions themselves, as people, as to the veracity or truthfulness of the -- the validity of the information; as well as to whether it’s a good thing for the community.

The other thing I want to say is that people keep talking about New Jersey, but the demographics of New Jersey -- which no one talks about -- is different than the demographics of those other states, for a lot of different reasons.

And so we want information, the Legislative Black Caucus, for the record; there’s a lot of media here. And, by the way, the room is hot. What that means is, that you can whisper and they’re going to hear what you’re saying. So if you say something bad about me, it’s coming up. (laughter) And we say something bad about you, it’s coming up. If you say something you shouldn’t be saying, they are going to definitely leave the hearing and catch you outside. (laughter) So I just want to be clear on that.

But the idea is that the Black Caucus -- we do not have a position, pro or con, on the legalization of recreational marijuana. My members -- there are 19 of us; we just lost one, and we’re going to have a moment of silence for him -- but our members, we have our own individual
thoughts about it, just as our colleagues do in the legislature. And so that’s important to know.

I also want to thank Patrick Kennedy, the former Congressman, who has been moving around this country for a number of years, really promoting and trying to get funding as it relates to mental health and mental health issues, surrounding people throughout our country. And when the marijuana debate came up years ago, he moved to the forefront of it, because he’s trying to show the impact that that can have in the mental health area, as well as other social ills it could very well have too. And as a result, he put together an organization known as SAM, as well as a group in New Jersey, known as RAMP. And want to thank them, because when you reach out for research information and good data, you have to know what to reach out for. And so, not only did I do my own research for the last three years, but we’ve had organizations helping us out; and I just wanted to go on record to thank them too.

This is the last hearing of the New Jersey Legislative Black Caucus on this subject, as a Caucus. But I can assure you our members are probably going to be on forums and be on panels, etc., talking about this subject matter. And I would hope that even my members, when they talk about it, they be objective and talk about, yes, here’s what they are saying about money, but here’s what they are also identifying as problematic that we need to be thinking about objectively.

With that being said, I think the ground rules are laid. I think some housekeeping stuff -- I believe that the men and ladies room are both downstairs; is that right? Are there some out here too? Okay, out that way there (indicates) or downstairs, okay?
Now what I’m going to do is, I’m going to let the Vice Chair of the Legislative Black Caucus speak first; then I’m going to ask Councilman Shabazz if he would bring greetings on behalf of the City; and then I’m going to ask Freeholder Coursey if he would bring greetings on behalf of the County; and I will ask the Assemblyman if he would bring greetings on behalf of the State -- this is his District. And then we’re going to start the hearing.

I didn’t miss anybody, right?

ASSEMBLYWOMAN SHAVONDA E. SUMTER (2nd Vice Chair): Thank you; good morning, everyone.

ALL:  Good morning.

ASSEMBLYWOMAN SUMTER:  It is an honor to be here.

I had the pleasure of driving up from Paterson, New Jersey, this morning. So I can tell you all about New Jersey roads and the need for continued construction. (laughter)

But I want to thank Senator Rice, our Chair; thank all of you; thank the leader of this great house for allowing us to come in on a weekday morning to talk about an issue that is transformational for our communities.

While we are policymakers, you all are the thought leaders of -- who will live out these commitments that we make. It’s important to us as legislators, as members of the New Jersey Legislative Black Caucus, that everyone have an opportunity to weigh in early on; because we know once legislation is formed, it usually goes through the Trenton process relatively quickly.
So I thank Senator Rice for having the foresight and the forethought to put together these hearings in the different sections of the state so that the community can share their opinions, share their experiences; and we have experts who will provide testimony for the community.

We also have a document that’s being created from each of these hearings, where the testimony is on record, so that we will have a document of all of the information that has been shared.

This issue is nothing that we can take lightly, if you will, because it has a people impact, a social impact, and a monetary-economic impact. And we want to make sure that the societal benefit far outweighs the monetary impact. And that’s something that we have to do judiciously.

We do ask that you allow for everyone to testify without clapping and fanfare because it is being recorded.

And we also, again, just want to thank you all for coming out this morning.

SENATOR RICE: On that note, let me be clear, because the first hearing that we had -- people there who were “pro legalization” of recreational were there. They did not speak because the hearing was set up to have folks who had never spoken, and people from out of state, to come in and give us the other side of the story so we can have a clear legislative public record on the issue.

The second hearing -- folks did come in, and I was kind enough -- because I pretty much knew I could control it -- to make sure they had an opportunity to speak, since one of my members brought them in. But I wanted to make sure that the other side of the story is told.
And at that hearing, some folks got a little out of hand. Those of you who don’t know Senator Ron Rice, the person -- I don’t tolerate that, okay? So this is church, and we’re going to act like church people in here. Whether you agree or disagree with something, you can’t clap because we have transcribers here. We have to have a clear record of what’s going on. Everybody with me?

UNIDENTIFIED MEMBERS OF AUDIENCE: Yes.

SENATOR RICE: Okay; so turn to your neighbor and say, “Hello; it’s good to be in church today.” (laughter) Very good; we’re going to do this right.

Councilman Shabazz.

COUNCILMAN SHABAZZ: Good morning.

ALL: Good morning.

COUNCILMAN SHABAZZ: (off mike) Let me, very briefly -- I wanted to recognize my Council President, Council President Marty Small, who is here.

Three things, and then I’m going to sit down.

Firstly, let me thank Senator Rice for bringing this hearing to South Jersey. Too often, in Jersey, those of us in South Jersey feel slighted because things sometimes appear to happen in other parts of Jersey, and sometimes we feel that we don’t get our just due.

When the Senator talked about having hearings statewide to look at the question of recreational marijuana, he said he was going to have one in North Jersey, he wanted to have one in Central Jersey, and he wanted to have one in South Jersey. Now, I immediately said, “We volunteer Atlantic City,” and he was ready to receive that. And he did and,
of course, Reverend Days -- who is not only an ecclesiastical leader, but also is a social justice leader -- offered his church. And I wanted to say that publicly -- thank you, Senator for doing that.

Bishop Hargrove has given me instructions before we started. He said, “Are you going to speak as a Councilman or as the President of the NAACP?” I said, “This issue speaks to both hats that I’m wearing,” as the Assemblywoman said. Marijuana, to my mind, when we talk about it, it shows the failure of the war on drugs because we’re not just talking about the legalization of marijuana; we’re talking about hundreds of thousands young African American and Hispanic men and women -- mostly men -- who are languishing, sometimes in jail, sometimes with the loss of professional licenses, because they were arrested with marijuana; sometimes victims of the disparity in our justice system because of the way they’re treated when they are arrested, and when people who are not people of color are arrested -- how they’re treated.

So I am concerned about the social justice issue even more so than the economic issue; although the economic issue is one to be considered.

The mangled lives of these young people who have been caught in the justice system, and the disparity and the racism that we, unfortunately, have to deal with is something, I think, that we have to have paramount in the marijuana discussion; paramount in the marijuana discussion. We must keep pointing up to policymakers and decision makers that we are not just talking about facts and figures; we’re talking about human lives.
And lastly, let me say to the elected officials, thank you so much for coming out -- and everyone -- in making sure that people know that in South Jersey we are concerned, we’re civically engaged, and as other issues come up we would encourage the Black Caucus to consider Atlantic City.

Thank you.

FREEHOLDER EARNEST D. COURSEY: First of all, let me just say good morning and welcome to Atlantic City; it’s certainly in the District that I represent.

I want to, first of all, give honor to God; and certainly to the Pastor of this church and to all the reverend clergy. The Bible says give honor to who honor is due, and we certainly honor you who have come out today to be a part of this.

I also want to recognize the Mayor of the City of Pleasantville, Mayor Tweedle, in the District which I represent. I have to go back to them, so I’m not going to say they’re not here. (laughter)

COUNCILMAN SHABAZZ: (off mike) And the Council President.

FREEHOLDER COURSEY: I didn’t talk when you had the mike. (laughter)

And the Honorable Council President Judy Ward, from the City of Pleasantville. (applause)

We also have the President of the School Board in Pleasantville, Ms. Carla Thomas. (applause)

Let me just say -- on behalf of the State delegation, and the Black Caucus, to the Assemblywoman, and to the Senator -- thank you so
much for seeing (indiscernible) to come to Atlantic City on this third and final hearing; as we discuss, and debate, and at least deliberate different aspects of legalizing marijuana, whether we talk about if it is for recreational or whether we talk about for medical use. The fact of the matter is, the worst thing is not knowing what effect it’s going to have on our communities. And so if we come with an open mind, to be able to accept it and then make our own conclusions, as the Senator said, at some later date and time, that’s fine. But I think not having the knowledge of what impact it would have as a whole -- we’re left in the dark.

And so when the Black Caucus decided they were going to go around the state to have these hearings, we thought that was a great opportunity to do so.

The other thing is, is just let me say this as I close.

I’m not one who is accustomed to public speaking, Pastor Days, and I’m going to keep my remarks very short. But the fact is, is that when we come together, and we pray together, and we’re able to be able to go back to our communities and to give them information that those who were not able to attend this hearing -- to let them know what’s going on, whether it’s our civil association groups, or the talk shows, etc. And this is probably not the last you’re going to hear of it; probably the last hearing, but other things are coming down the road.

In closing, let me just say, Council President Small is going to have to jet out of here; he has a meeting at City Hall. He is coming back. But I would be remiss if I did not acknowledge former Freeholder Charlie Garrett, who is in the back of the room; and we certainly want to thank him so much for coming over.
Thank you so much, Senator.

SENATOR RICE: Council President.

COUNCIL PRESIDENT MARTY SMALL: Good morning, everyone.

ALL: Good morning.

COUNCIL PRESIDENT SMALL: And once again, we would like to thank the Legislative Black Caucus and the State of New Jersey. Certainly, this group is no stranger to Atlantic City. We thank you again for hosting hearings down here for important matters.

This is a statewide matter, as previous. You guys were very active in the fight with us regarding the takeover of Atlantic City. You guys took a stand, and we appreciate you for that.

But regarding marijuana -- the topic came up at the last two Council meetings. As I stated, as the Council President, initially when this matter began discussions, I was a solid “no” in support due to moral issues. But as an elected official, sometimes you have to separate your personal beliefs for the greater good of the community.

I’m just glad everyone here today-- With that being said, I have an open mind now; I’m open to the discussion. But everyone here today -- this is a free education on the issue, to listen to arguments from both sides of the aisle. That’s democracy, in a peaceful way.

So once again, we thank you for hosting this hearing. As he stated, I have a meeting at 11:30 with Jeff Chiesa; and then I’ll be back to join in the discussion.

So, thank you again.

SENATOR RICE: Okay, thank you.
Assemblyman.

ASSEMBLYMAN ARMATO: Thank you, everyone, for coming out today.

I’m honored to be here, as always.

As an elected official in Atlantic County, we have to look at a lot of things; and as everyone knows, most of it is money.

But in saying that, we can’t be blinded by a tax -- I’m going to call it a sin tax -- that would generate funds for different vendors.

We’re looking at a budget, right now, of $36 billion in the State of New Jersey; billion -- billion dollars. So $100 million, $150 million -- it sounds like a lot to us; but in the grand scheme of things, it is not. What I have to look at is what my beliefs are, and what the beliefs are of the people who I represent. And I’m going to do that; I’m going to do that with an open mind.

But when, in 2016, the State of New Jersey -- we lost over 2,000 of our residents to drug addiction and overdose deaths. In 2016, Atlantic County had 171 deaths. That is huge. And to introduce another drug to our state-- I’m going to wait and see what the bills look like; but I can tell you that they are going to have to really impress me to change my mind right now.

But once again, I’m open; I’m here to listen. I thank everyone for coming out today.

And thank you.

SENATOR RICE: I thank all of you who represent the State in one capacity or another.

Now I’m going to start the hearing.
When the speakers come up, you have a mike like this (indicates); that’s for the audience to hear you. But you also have two other mikes there. You need to speak directly into those mikes, because you are being recorded. This is being transcribed, okay?

So with that being said, let me, first of all, welcome, and thank, and bring up Dr. Roneet Lev (indicating pronunciation); she will pronounce it correctly for the record. She is an ER doctor in Los Angeles; I guess it’s the right person.

Come up and-- Where’s Dr. Roneet Lev? Is that correct?

Come on up, Doc, and give us the right pronunciation of your name; I apologize. Throughout the hearing you’re going to see me messing up names, so you need to correct me for the record, okay? This is not new to me, okay?

Also, can we ask Dr. Adam Sagot, a psychiatrist from the New Jersey Psychiatric Association, to come up also? And we’ll bring another chair up; but if you can just come up.

UNIDENTIFIED MEMBER OF AUDIENCE: They’re bringing it up.

SENATOR RICE: Okay; if he’s here.

Okay; with that being said, why don’t you identify who you are, where you’re from, and give your testimony.

Yes, both (indicating microphones); just speak into, and just pull that to you.

There you go.

RONEET LEV, M.D.: Okay.
Hi; my name is Roneet Lev -- close -- and I’m from San Diego, which is close to Los Angeles also.

I am Chief of the Emergency Department at Scripps Mercy Hospital, which is a big trauma center; urban emergency department in San Diego. And I Chair our San Diego Prescription Drug Abuse Medical Task Force; and I’m President of the San Diego Emergency Oversight Commission; we bring together all the emergency departments in our county.

So I’ve been practicing emergency medicine in San Diego for 28 years. And they say the entire world is a stage, and people in the emergency department have the front seat.

Working on the opioid epidemic for the past seven years, I realized the link to marijuana. And I would like to share with you what marijuana looks like in the emergency department, and what marijuana looks like in the morgue.

Every day, in California, we treat patients with marijuana poisoning; every day. The number of emergency department visits for marijuana-related diagnosis has gone up by 830 percent, from 2006 to 2014. That’s 1,108 people to 10,302 people a year in San Diego alone.

Picture a 25-year-old woman with loud audible retching, who is writhing in abdominal pain. We can hear her agony from across the emergency department. We termed the condition, scromiting. Scromiting is screaming and vomiting, and the hallmark for Cannabis Hyperemesis Syndrome. She had been to numerous emergency departments and was receiving Dilaudid, a strong opioid, each time; and was exposed to multiple
CAT scans and radiation. And yet she could not understand why she was so sick.

Her cure would be simple: stop smoking weed. The problem is that her marijuana addiction was also becoming an opioid addiction, and we see cases of scromiting every day.

My next patient is spitting and thrashing about, and sweating with high blood pressure. And it takes six strong people to hold him down until the sedatives take effect. And the diagnosis could be anything, but his drug test comes back as just marijuana; just marijuana. And it was just marijuana that landed another patient on life support in the ICU hanging between life and death. And he was inhaling wax, which is 90 to 100 percent THC.

And tourists -- we have a beautiful city; you should all visit -- but beware. Recently, a man who was visiting our beautiful city for a convention came to the emergency department with a concern that he couldn’t talk right and that he couldn’t move his arm. I did all the evaluation to make sure he was not having a stroke. And when everything came back normal, he showed me a small package of gummy bears that was labeled hangover remedy. And he received a very expensive diagnosis of marijuana poisoning.

It was heartbreaking for me to treat an elderly man who traveled to our Scripps Institute for a second opinion for his cancer diagnosis. His son saw a prominent advertisement, and was hoping the marijuana brownie would help his nausea from chemotherapy. His nausea did not get better, and I admitted him to the hospital for chest pain and palpitations because of the pot brownie.
A three-car collision closed our freeways for a few hours as the driver admitted to being high on marijuana. But this case will not enter any statistic, because no one died.

And what does our medical examiner see? Deaths from all drugs in the past 10 years went up by 56 percent. At the same time, deaths from all THC went up by 64 percent. And there is a direct correlation -- a direct association with increased drug deaths and marijuana deaths, and we cannot turn a blind eye to the correlation between marijuana and other drugs.

So who dies from marijuana? The San Diego marijuana death diaries counted 462 people who died with THC in their system in 2016: a 1-year-old baby, a 15-year-old, a 19-year-old driver, along with 31 other drivers; a 55-year-old motorcyclist, along with 9 other motorcyclists; a 21-year-old who jumped off a bridge, along with 76 other suicides; a 55-year-old with hypertension, along with 63 cardiac deaths.

Marijuana is associated with a three-fold risk of death from hypertension. If you have high blood pressure, you should not smoke weed.

THC was involved in 29 percent of all homicides; 30 percent of all illicit drug deaths; 30 percent of prescription deaths; 30 percent of alcohol deaths. If THC was really a medication, the FDA would have a big black box warning.

And the political, green wave on marijuana is placing profit over people; profit over public health.

And marijuana legalization in California has unleashed a public health disaster. Don’t do the same in New Jersey.

Thank you.
ASSEMBLYWOMAN SUMTER: Will you hold for questions?

DR. LEV: Sure.

ASSEMBLYWOMAN SUMTER: Okay, great.

SENATOR RICE: Also, can you leave a copy of your testimony with us? And hopefully, other speakers have some testimony they can leave with us. I’d appreciate it.

Go ahead, Assemblywoman.

ASSEMBLYWOMAN SUMTER: Great.

Thank you for your testimony.

And those numbers were staggering. I work in the health care field as well, in mental health. Marijuana, typically -- is it in admitting diagnoses to the hospital for marijuana addiction, overuse--

DR. LEV: The number of 830 percent increase is primary or secondary diagnosis.

ASSEMBLYWOMAN SUMTER: Primary or secondary diagnosis. And typically, we’re looking at the co-morbidities of marijuana use as a trigger -- because you mentioned heart palpitations, hypertension.

DR. LEV: The data comes from ICD-10 coding; so it is whatever the emergency department or hospital said. So for example, Cannabis Hyperemesis Syndrome would be primary diagnosis if it was--

ASSEMBLYWOMAN SUMTER: So the ICD-10 -- which is the diagnosis code that’s recognized by the government -- has a code for marijuana.

DR. LEV: For cannabis.

ASSEMBLYWOMAN SUMTER: For cannabis, that you can actually assign to a patient.
And can you have a tox screen level for marijuana ingestion that healthcare professionals may use to determine whether they are at a toxic level or whether it’s going to just flush through their system within 24 hours as a synthetic drug?

DR. LEV: Probably all hospitals use qualitative testing, not quantitative testing. That’s for cocaine, methamphetamine, opiates, THC. So we take that qualitative value and see the clinical symptoms, and then make a diagnosis.

ASSEMBLYWOMAN SUMTER: Okay. And my last question - for the THC levels in ingestion of edible products -- you mentioned that there was, again, another high number of children who are impacted by poison control, etc. Is there a THC level we should be considering, as we look at whether we’re legalizing, that should be a recommended level of THC for edible products?

DR. LEV: Well, edible and inhaled -- one just goes through the system faster than the other. So we would see that on a blood test later. But again, in the clinical world, we’re not doing quantitative measurance.

As far as law enforcement, and swabbings for drugged driving, or at the Medical Examiner’s Office -- that’s where the quantitative tests occur, not in the hospital setting.

ASSEMBLYWOMAN SUMTER: Great; thank you.

SENATOR RICE: Just a quick question.

In San Diego-- We know that, in Colorado and elsewhere, the number of newborn babies with THC in their brains has risen tremendously. We also know that the number of mothers with THC in
their breasts, where breastfeeding, is going up substantially. And they don’t feel that doing marijuana does any harm because it’s legal.

Are you seeing an increase in the medical institutions in San Diego of those two categories?

DR. LEV: We are seeing that. We’re not doing a good job in measuring that, like neonatal abstinence syndrome for opioids and marijuana testing positive for newborns. We need to do a better job in public health in measuring that.

But we are seeing more and more pregnant mothers who are using THC to help their nausea during pregnancy, and that’s going straight to the fetus.

SENATOR RICE: Okay; thank you very much.

If you could leave a copy of your testimony, we’d appreciate it.

Next, we’re going to bring up Mr. Luke Niforatos, Chief of Staff, SAM; by way of Colorado, through Washington. And also -- is Will Jones here? And we’ll bring up Will with him.

LUKE D. NIFORATOS: I’ll let Will go first.

SENATOR RICE: Make sure you’re speaking into both mikes, okay?

WILLIAM V. JONES, III: For the record, my name is William Jones.

I’m happy to be here and talk about this issue.

It is very important to me; that’s why, after just getting off a 24-hour shift -- I’m a D.C. firefighter EMT -- I drove up here and just came here. So I’m pretty tired; but this is an issue that is extremely important to me, and I’m privileged just to talk about this to this panel this morning.
To start out, I’d just like to give an illustration that I often give when talking about this issue.

I ask people to, in their mind’s eye, imagine walking out their front door of their house and walking down the sidewalk to the closest store to their home. Looking up at that sign, and imagine what kind of store is that.

For myself, and too many others in minority communities, the closest available store is a liquor store. I live right on the border of southeast D.C., northeast-southeast D.C.; and in any direction that I go from my house -- north, south, east, or west -- the closest available store is a liquor store. If I go a little bit farther to a corner convenience store, there are so many cigarette and alcohol advertisements plastered on the windows that I can’t even see inside the store to get what I want.

Just the other day, as I was leaving to go to a convenience store nearby, I went inside, and plastered all on the inside of the store were signs saying *winning lotto tickets sold here.*

The precedent that we’ve set with our current legal recreational drugs in the United States is one that has targeted minority and disenfranchised communities. The data says that, in some neighborhoods, such as Baltimore, there are eight times as many liquor stores in minority communities as other communities. And that’s what motivates me to speak out on this issue. I do not want to see the next legal recreational drug industry targeting my community.

I have a 10-month old daughter; she is beautiful, I love her. The impact that that would have in my neighborhood -- to have a marijuana store right next to a liquor store -- is very troubling to me.
Emerging data that is coming out of Colorado -- where they actually have more marijuana stores than Starbucks and McDonald’s combined -- shows that, in some of the minority communities there in Denver, Colorado, there’s one pot shop for every 43 residents, and that’s not something I want to see in my community; that’s not something that I believe is healthy for my community.

We are about to repeat mistakes of the past by legalizing a commercial industry. And I just said this the other day when I was speaking about this issue. I am not here to demonize the marijuana plant; it’s not about that. But I am here to demonize Big Marijuana, and that is going to be an industry that makes its profit off of those who are addicted to the substance. And just like our recreational drug industries, of alcohol and tobacco, that make about 80 percent of their revenue off of less than 20 percent of the users, that’s what the marijuana industry would do. And that targets those who are least able to combat the impact of an addictive industry in their life.

And again, that’s what we see with alcohol, that’s what we see with tobacco. Every time I go to work as a first responder I see the impact of our current legal recreational drugs, responding to those who do -- whether it’s driving under the influence of alcohol, responding to those who have different illnesses associated with smoking cigarettes -- there’s a myriad of issues that people have from our current recreational drugs that are legal. And commercializing a third recreational drug is not what our community needs.
Another issue that is hugely important to me is the issue of incarceration. And I have -- all of my remarks are here in my testimony that I’m submitting, with all the data cited as well.

And I’ve said this before -- that if I knew for certain that legalizing marijuana would significantly reduce the population of African Americans incarcerated in the United States -- that, for me, would be a serious reason for legalization. Because there are serious health impacts as well from being incarcerated; it has a health impact on the family and on the person themselves. But what we’re seeing, for example, in D.C., is that even though it is legal to smoke marijuana, and to share it, and grow plants in your home, the incarceration rate -- that had been declining for, I believe it was eight years prior, since legalization in 2015, since it was implemented -- the incarceration rate has increased, and is projected to continue to increase. And there’s this same type of pattern that we’re seeing emerging in other states that have legalized, including Alaska, Oregon, and Colorado, where declining rates of incarceration -- and I’m talking of the overall prison population -- has begun to increase. Of course, it’s not specifically for marijuana; it is true that arrests for marijuana, as the reason for the arrests, has gone down. But there are a myriad of other reasons why you can be arrested-- And particularly, when you do something under the influence of a mind-altering substance -- which marijuana is -- you’re more susceptible to do something that may be illegal.

And the issue of discrimination in law enforcement is something that is also hugely important to me. But I say this; the legalization of a drug does not deal with the heart of the issue. The heart of the issue is, for those officers, for those departments that have
discriminatory practices, their heart will not change and their practices will not change because we legalize another recreational drug. They will find another reason to continue that pattern of vice and discrimination. And I think the example of Eric Gardner is a great example -- a sad example, but an illustration of how the issue is the heart. We have -- cigarettes are completely legal, but he was killed for allegedly selling cigarettes. And my fear is that with the industry that we are creating with marijuana, there will still be even more reasons for officers to arrest you. Say, maybe you have more than the limit that you’re allowed to have, or maybe you’re trying to sell it. There is a myriad of reasons why they can still prosecute you, and those who have this heart issue of injustice and discrimination will continue to implement that in our communities.

Unfortunately, we’ve seen the arrest rates for African American youth in Colorado -- by some data, it’s gone up, up to 58 percent; while it’s gone down 8 percent for white youth in Colorado.

This should not come as a surprise to us because, once again, the issue is injustice, and that is what we need to be focusing on. By creating a third recreational drug industry, it can exacerbate the existing issues of injustice and systemic discrimination that we have in our country. I don’t want to see that in my community.

To conclude, I would just like to share something that I wrote when I began to work on this issue with everyone here.

It may be a little bit unorthodox for a panel that we have here; but I think that the time for staying within the orthodox lanes and talking about this issue has gone out.
We are seeing that because of the huge amounts of money that are involved with this issue, many people are turning a blind eye to what it can do to our communities, to the already existing pattern that we have with addictive recreational drugs in our country and how they target minority communities.

And so I feel that this is something that I need to share with everyone here so that we can put the brakes on what can be a lucrative industry.

And in closing I will say this.

If you live in a wealthy suburban community, the legalization of marijuana might look great for you. You might not have that many liquor stores next to you right now, and legalization could look great for you for marijuana as well.

If you invest in stocks -- which I have a lot of friends who are, “Oh, this is the greatest thing that I should invest in this. The stocks are shooting up for that.” And if that’s your concern as well, then you’re probably going to like marijuana legalization.

But if you live in a minority community, where you’re already seeing the impact of addictive recreational drugs, this is not something that we need to continue.

In D.C., I launched a campaign called *Two is Enough*, referring to alcohol and tobacco, and saying we don’t need to add a third recreational drug. And this -- in closing, this is a poem, or spoken word piece, if you will, that I wrote about this issue that, for me, encapsulates some of my concerns and some of what’s really going on in my heart when I think about this issue.
They say it’s about Civil Rights and equal opportunities.
And we are in a fight that’s targeting black communities.
No, it’s not a war with guns and knives, but with smooth, strategic words.
Still the cost will be our lives, if the voice of truth is not heard.
They say it’s about discrimination, so the plan seems untouchable.
But I say it’s an indication that some people are gullible.
Being deceived to believe what the industry breathes.
But we’re duped; nobody’s legalizing weed to keep our men from the coop.
The real agenda is money.
To make more millionaires than Microsoft,
but I’m not laughing because it’s not funny.
It’s my people who will pay the cost.
Now, let me say that I appreciate those who truly care.
That’s why I’ve worked on a campaign to make folks aware of the actual situation, not just industry, hype, and fluff.
I want to broadcast across the nation that two is enough.
Two what? Legal drugs, we call them alcohol and tobacco.
These aren’t just sold by thugs; they’re available to one and all.
And to help us get the picture, I got some disturbing facts.
See, the amount of stores selling liquor in communities of blacks are disproportionately high;
and it’s the same for cigarettes, and I’m trying to understand why we want marijuana to come next.
As the rate of smoking declines among non-Latino whites companies know they have to change their sites.
So intensive merchandising is targeted towards our neighborhoods.
Companies are advertising, because they think we’ll buy their goods.

But I’m saying -- it has to end, what good have these drugs done?

Have they helped create responsible men, or just dudes trying to have fun?

Have they helped create better homes and job opportunities?

Or have they set in place legislation that will legalize a substance
that will harm homes and families and provide an abundance --
another drug causing more inequality?

So if we want to be realistic about the statistics of people of color locked away,

let’s be rational and help in a reasonable way.

Let’s address racial profiling and systemic discrimination
and clean up the defiling of our criminal justice system.

Let’s work to create better schools and job opportunities,
and instead of changing the rules, let’s work to change our communities.

Let’s make our voices heard above the industry and all their fluff.

Let’s not legalize a third drug; isn’t two enough?

Thank you.

SENATOR RICE: Thank you very much; and very well said too.

Next, Luke, can you just, kind of, give us some real-life experiences as well?

MR. NIFORATOS: Yes; it’s hard to come in after that.

(laughter)

So I’m going to echo him, and drop the mike.

SENATOR RICE: Can you sing? (laughter)

MR. NIFORATOS: No, I don’t think that would be a good idea.
It’s an honor to be here.

My name is Luke Niforatos: I’m the Chief of Staff and Senior Policy Advisor at SAM, Smart Approaches to Marijuana.

I’m from Colorado; I just actually moved to D.C. from Colorado about six months ago. I’m working with SAM now.

It’s an honor to be here and speak with you all today. And I want to thank you all again for having another hearing, to really get both sides of this story out, because it’s very important and it’s a very important decision for the State.

I have lived legalization in Colorado before, during, and after. I am the husband to a beautiful wife; I am the father to a beautiful daughter, 17-month-old girl. And we have lived legalization; we took our daughter on walks in our neighborhood and experienced marijuana smoke flowing over her stroller, and the risk and the harm of her getting second-hand smoke in her lungs.

We’ve experienced driving down the street and seeing pot shop after pot shop; just complete inundation of an industry, with billboards and advertisements, etc.

We have lived that; and that was something that, for our family, we had to step out and tell the rest of this country, before it’s too late, what’s actually going on with legalization.

So today I’m going to talk a little bit about two main points; really, the public health aspect of what legalization is doing in other states and then the black market and, kind of, crime aspect as well.
My background is health care; I’ve worked in health care for nearly a decade. You know, I worked for the largest hospital system in Colorado; I did a lot of other work in that space.

And I can tell you I’ve worked with over a thousand physicians and even more clinicians; and I’ve never met one who thinks that legalization of marijuana is a good idea. And I never met one in Colorado who thought that legalization had been a successful experiment.

I can tell you -- you know, I can echo what Dr. Roneet Lev said -- that the emergency departments are inundated with folks who are having marijuana-related diagnosis. The health system is being inundated by folks who are impacted by this.

So what does that look like from a statistical perspective? Colorado has seen a 35 percent increase in emergency room visits as a direct result of marijuana legalization, since legalization. We’ve seen a 210 percent increase in Poison Control Center calls in Colorado as a result of marijuana legalization and marijuana-related issues.

So what we’ve seen are a large portion of these increases are directly impacting our youth, adolescents. A large part of these increases are adolescents who are showing up in the emergency rooms, who are on these Position Control Center calls.

Just a few weeks ago we had a child come into her elementary school, and she brought in a bag of gummies because she wanted to share them with her friends. She didn’t realize that they were THC-laced gummies, and she and her friends consumed them. And that was a major issue.
So these are the kinds of things we’re seeing in Colorado; we are seeing Colorado become the number one state in the country for youth first-time use of marijuana. It’s a 65 percent increase.

If you look at the age bracket, between 18 and 25, that is truly the bracket that is really skyrocketing; and not just in Colorado, but across all of the legalized states.

And the mind is still developing well into 25; maybe even 30. The research is still out there on that. But we know that this impact is significant. And when we’re looking at 18 to 25, those are the people who are coming into the prime of their lives, who are working age. And we really need to think about the effects that it has on the mind and on the workforce as we head into the 21st century.

We’ve also seen -- when you talk about major national organizations, there are virtually no national organizations or medical societies that are in agreement with marijuana legalization. Virtually all of them agree with the science -- that marijuana is not healthy, it is harmful. It is not something that’s good for you.

So one of the things we heard about earlier -- and I think whenever we discuss marijuana legalization we always hear about the revenue. So from a revenue perspective, you know, I would definitely-- First of all, I would say, count the costs. And when I say count the costs, I mean not just the costs to the government in terms of the regulatory bodies that need to be created, the enforcement, the law enforcement angle, the drugged driving -- all the other issues that come into play with this. But also count the cost to society. In Colorado, drugged driving fatalities doubled since legalization. In Washington, drugged driving fatalities
doubled since legalization. Marijuana is related in at least one out of every five DUI cases that takes place in Colorado now. So this is a major cost to society.

If it is a question of, do we legalize this and accept that, at a minimum, one more family is going to be bereft of their child, is that a worthwhile cost to you? And that’s a cost that you really have to think about. So that’s that aspect of it.

And you also have the aspect of that no national societies think that this is good for us. So it’s something to take into consideration.

You know, in terms of the black market, we’re told that marijuana legalization will reduce the black market. Well, we’ve seen that continue to thrive in states. California has now produced six to eight times the marijuana that that state can consume. So we know for a fact they will be the top, or one of the top exporters of black market marijuana in the next couple of years. Who’s number one right now? My home state, Colorado, unfortunately. They are shipping out marijuana like it’s going out of style -- black market marijuana to states that have it illegal. It’s a very big problem.

We just have had-- I was just, actually, talking to law enforcement from Colorado just a few weeks ago. They were telling me that they were doing a huge bust of some major illegal grow operations in the mountains; and these grow operations were being defended by cartels with AK-47 weapons, in America, in our national forests. I mean, this is -- it’s just a dismal picture of what’s happening in some of these states that have legalized, and it is something we really need to be concerned about.
In Nevada, we heard, actually, a few weeks ago, from a Commander from Nevada, who talked about drug-related homicides going up 21 percent in Nevada after legalization. And of those drug-related homicides, that 21 percent increase, 57 percent of that was directly related to marijuana as the cause.

And then we also saw a 58 percent increase of all drug-related murders; and all of those were tied to marijuana. So they’ve seen some serious damage and carnage as a result of marijuana legalization.

Another interesting fact that he told me -- this was Commander Raybuck -- he shared with me that they’ve seized 1.5 tons of black market marijuana in Nevada; and that is a 47 percent increase from 2016. So from 2016 to 2017, they saw a 47 percent increase in black market marijuana that they seized.

In terms of parcels that Nevada shipped out -- their number of marijuana parcels being shipped out -- so, black market -- increased 111 percent. And included in that increase was a 455 percent increase in marijuana edibles, THC edibles; so brownies, candies, waxes, whatever it may be, usually very high potency.

And when it comes to high-potency edibles and high-potency THC -- so, you know, in the Woodstock days, we’re talking 4 to 6 percent THC in joints. Nowadays we’re talking about up to 99 percent THC in the form of crack, and waxes, and other sorts of just incredible concoctions that we’ve seen for marijuana.

So when you think about those things being shipped out, those are things that are incredibly dangerous. The research cannot even begin to
understand, at this point, what the damage of a 99 percent THC product would do to the human mind, but we know it cannot be good.

And then, you know, you have to just consider that when you're legalizing these things -- so there's the cost, financially, to the government; there's the cost -- the societal cost we talked about; there's a cost to the workplace, in terms of productivity and absenteeism, which we know that increased drug use-- And there are a number of very long-term studies that have come out -- one from New Zealand -- that found that folks who are regular users of marijuana -- they followed them from their high school age, long into their 30s and 40s -- they found that their absenteeism rates were higher; their rate of joblessness was higher; their rate of college graduation was much lower; they found -- and they followed these people for a large number of years -- that there were significant impacts on their productivity.

So these are things to be considering when we look at policies such as this.

That's really all I have to share today. I just want to encourage you, as somebody who is from Colorado, who has lived it, I can speak to it from firsthand experience. I can speak to it as a father, as a husband, as somebody who has friends who are there who have told me, on regular occasion, “We had no idea, when we legalized this drug, that we would have over a thousand pot shops in our state.”

And I'll leave you with one thought. Will mentioned that we had more pot shops than Starbucks and McDonald’s combined. And I just said we have over a thousand; that’s true. That sounds like a lot. Now, think about the fact that about 70 percent of Colorado has banned retail
marijuana shops from being in their towns and localities. So 70 percent of the towns and localities in Colorado have banned it. That means that only 30 percent are allowing pot shops. Now, let’s revisit that number of a thousand pot shops; that’s a thousand pot shops in only 30 percent of the cities and towns in Colorado. That is pure inundation; that is a massive industry that is making billions of dollars at the expense of addiction and of the communities that are the most vulnerable.

So I urge you to look through the smokescreen that is being presented, the bogus science that is being presented, and listen to the voice of the people who have been impacted by this, by the families, and your constituents. And I trust that you’ll make the right decision.

Thank you so much.

SENATOR RICE: Thank you very much.

I don’t know if you can answer this -- as I know the Commander couldn’t be here, and we had this conversation before. As you know, I come from law enforcement.

I’m told now that the cartels are moving into Colorado and other states, and legally getting their licenses. But because they can legally grow it now and send it back into the black market, that they are now sending heroin and other drugs to the streets.

But I’m also told, in the growth area, that Colorado students are going out to pick the pot, which is like picking cotton. And that the women are starting to be sexually raped, and harassed, and assaulted, etc. And there’s a potential -- it appears to be some human trafficking starting to take place.
And so you have the legal growers, who are putting it in the black market; and you have the illegal growers soon to go out there as well. And you are right about the AK-47s.

But Colorado, like other states, has high college towns. It is my understanding that, since the legalization of marijuana, the number of college students who have never used any type of drugs -- at least, this is being reported -- has risen substantially. Can you speak to that, from your experience? Because we’re in Atlantic City; and we did a lot of things to try to get this city out of takeover mode, to stop it from being taken over by the State. We have Stockton University down here; Newark is a college town; Bergen County, Passaic are college areas. New Jersey is basically a college state, quiet as it’s kept.

And so that concerns me, because I understand that students are now dropping out of schools; they can’t get jobs, etc.

So is it -- can you speak to that, or is it someone -- we need someone to speak to?

MR. NIFORATOS: Absolutely.

So as I mentioned, in Colorado, the age range, 18 to 25, has skyrocketed in regular monthly marijuana use. So we’re seeing that number go up significantly, and it has just continued since legalization. So certainly we’re seeing college-age students who are using it.

From a more, kind of, qualitative perspective, as somebody who lived in Colorado, I can tell you Boulder is the major college town -- or one of the major college town -- in Colorado. And Boulder has really been kind of known for its allowance of marijuana; and it’s now a total hub of pot shops, and marijuana-related restaurants, and marijuana-related this and
that. It’s very much infiltrated by the industry; you can definitely see the dominance there.

And of course, CU Boulder is a school that is often known as a school where students can go and try weed. And so from my personal experience, it’s a great school, and no knocks on the faculty there or any of the students there. But a lot of families have concerns, and actually have come to me and asked me -- I’ve met a few people just in my travels who have said, “My student is thinking about going to CU Boulder, but I’m worried that they’re going to try marijuana there.”

And that certainly has been, unfortunately, one of the stereotypes that comes with being in Colorado -- is that students who come to the state, oftentimes they say they want to do it because they want to try marijuana. I certainly experienced that when I was in college there in Colorado. We saw a lot of people who came because they wanted to experience that. So certainly that’s an impact.

Denver’s had a long-term issue -- to speak to your sex trafficking and human trafficking issue -- Denver has had a long issue with this because we have the interstate that comes right through the state. And so there have been a lot of human trafficking-related problems there. We certainly have only seen those be exacerbated by increased cartel presence and other issues there.

Assemblyman.

ASSEMBLYMAN ARMATO: Just a couple of questions.

Colorado seems to be the benchmark, because it’s been so long. In your estimation, if that same vote was held today, would it pass again?

MR. NIFORATOS: I think that’s a great question.
I can tell you that I wish it were that simple, I guess. I wish it were as simple as, let’s look at the truth, like we’re given the option here today, and make a sound decision. But unfortunately, what we’ve seen is -- and I experienced this being a resident of Colorado -- we are so outgunned and outmatched by this industry. So they have dozens of lobbyists at the capital in Colorado; we just released a report -- our Marijuana Accountability Coalition in Colorado released a report on all the legislators who are receiving money from the industry. So that’s a major impact. The billboards advertisements, radio ads -- everything that inundates people are telling us all that we’re doing just fine; the state is better off than it was before. Meanwhile, we have the Colorado Superintendent of one of our best school districts, Cherry Creek Schools, say, “We aren’t seeing a dime of the revenue for our schools from marijuana.” But regardless, we are being showered with these advertisements telling us, “Everything is great.”

And so, honestly, you know, if you have enough money and a clear and cohesive message, you can tell people to believe just about anything that you want in this country. And that’s where we come into problems with industries like Big Tobacco, and like Pharma, and like all these other industries.

So, you know, I think that if it was a fair playing field and there was equal play time for each message, I absolutely think people would vote in opposition to it. But if it was not fair, and if we were outgunned 20 million to 1, which we are, then I think that it would be a much more difficult proposition.

ASSEMBLYMAN ARMATO: The other issue -- no one seems to talk about the gateway aspect of marijuana.
And, you know, I know I can get five doctors to say it’s a gateway; and you can get five doctors to say it isn’t a gateway. So in my experience, and what I’ve seen, to me it’s a gateway.

Now, has Colorado or Washington -- does that seem from -- you know, we’re getting from A to B because of a marijuana start?

MR. NIFORATOS: Yes; so the gateway question is always a great one.

So it brings up, obviously, kind of a checkered past with marijuana policy; and you kind of hear the *reefer madness* kind of thing, and people will kind of jump onto that.

And certainly, SAM does not hold the position that it is necessarily a gateway drug; however, there is much research out there -- so there is research that found that marijuana users are 2.7 times more likely to use opioids or harder drugs. So there certainly is a link there. You know, not to say that if somebody uses a joint once, they’re now going to go on to use heroin. That’s probably not the case; in fact, 9 times out of 10, that’s not going to happen. However, if you talk to people who use opioids or are hooked on other drugs, oftentimes marijuana was somehow involved, or related in that process.

So it is a link, as Dr. Lev said, that we cannot ignore. Is it necessarily a gateway drug? Not necessarily.

ASSEMBLYMAN ARMATO: The last question I have for you is, you said 70 percent of Colorado does not allow the sales. Now, does that 70 percent still get the benefit of the tax?

MR. NIFORATOS: That’s a great question. I don’t believe so, but I’m not sure. I’d have to look into that.
ASSEMBLYMAN ARMATO: Well, if that’s true, you look at that, and that-- The light has to come on that they’re willing to give up revenue because they feel that strongly about it.

MR. NIFORATOS: Yes. And I can tell you, having spent a lot of time in Colorado, across many of the towns in the state, they are very strongly feeling about this issue, and they do not want this in their neighborhoods or among their kids.

ASSEMBLYMAN ARMATO: Thank you.

MR. JONES: And just to add to the tax question on Colorado. So there are various taxes, and it’s divided up in different ways. Colorado voters were issued a partial refund because there was an excess in, say, tax money that was brought into it. And it came out to about, I think-- Some of it did go out to everyone, and I’m sure some of it is not distributed to some of the towns. But what went out to everyone was, like, $6 -- what would’ve gone out. And then there was a vote that they just put it back in the general fund.

And I believe you mentioned the statistic earlier, though, but the overall budget for Colorado, in 2016 and 2017, was about $27 billion. And in 2016-2017, they brought in $250 million through taxes. So when you do the math, that comes out to less than 1 percent of the overall state budget; and then $40 million was allocated to the schools, which the overall school budget was $6 billion for Colorado in 2016-2017, and that is less than half of a percent of the overall school budget. So once again, it’s a negligible amount, which I think you brought up earlier. And from my perspective as well, just as we hear often said the lottery is going to help schools, particularly in minority communities, the impact that tax has
brought in -- whether it's through alcohol, cigarettes, or marijuana -- we see none of that money, but we see the consequences of those who are more susceptible to this addictive industry.

ASSEMBLYWOMAN SUMTER: Thank you.

SENATOR RICE: Thank you very much. We’ll get the next speakers up.

MR. NIFORATOS: Thank you.

SENATOR RICE: I do want to say that it’s interesting that we had placed Atlantic City as the last of the hearings. I was in Atlanta, Georgia, a few weeks ago, and just got back from Washington a few days ago. And it’s interesting because Atlantic City came up, and I was told that Atlantic City -- that the promulgators are saying that Atlantic City is going to be known soon -- because it’s going to happen -- as the marijuana destination. No longer casinos; get rid of them, you don’t need them. And New Jersey is going to be the laughing stock, because $100 million-plus is going to be pumped in here to market this.

I mean, you hear things like that -- whether it’s true or not, it kind of disturbs you -- when you come from a state like New Jersey, and we’re not paying attention to some of this testimony we’re getting.

With that being said, let me bring up Frank Greenagel (indicating pronunciation)--

ASSEMBLYWOMAN SUMTER: Greenagel. (indicating pronunciation)

SENATOR RICE: --and also Anthony Catanoso (indicating pronunciation)

ANTHONY CATANOSO: (off mike) Catanoso.
SENATOR RICE: Okay; just make sure you put the right name on the record, because I mess up names. (laughter) You know, I just know Senators, and Assemblymen, and Councilmen, and Freeholders. (laughter)

FRANK L. GREENAGEL, Jr.: Well, good afternoon, ladies and gentlemen.

There is a long history of white experts testifying and lecturing black leaders; and I certainly don’t want to be a part of that disastrous history.

I told my ex-wife this morning that I was coming to talk to you, and she wanted to pass on her condolences. And if your eyes tend to glaze over during my talk, she wants to let you know that family members and friends often feel the same way. (laughter)

My name is Frank Greenagel; I have taught at the Rutgers Center of Alcohol Studies since 2008, and at the School of Social Work and the School of Communication since 2011.

I have served on the Governor’s Council of Drug Abuse and Alcoholism, also, since 2011. I am the supervising therapist at the New Jersey Recovery High School in Roselle, and also Director of the Family Program at College Recovery, a treatment program in New Brunswick.

I am a consulting therapist for the New York State Troopers Employees Assistance Program, and serve as a Medical Officer in the Pennsylvania National Guard. I am the Co-Chair of the Middlesex County chapter of the National Association of Social Workers, I am a member of the NAADAC, and serve as the Public Policy Chair of the New Jersey Society of Addiction Medicine.
I have other jobs and associations, but for the sake of time, I will not keep listing them.

I have treated people who have used and abused marijuana since 2004. I have treated both genders, all races, all socio-economic classes, and people aged 13 to 79. I have treated veterans since 2004, and active service members since I was directly commissioned back into the Army in 2014.

Let me be clear. I am someone who will make more money if marijuana is legalized in New Jersey. I will see more patients who have problems caused or exacerbated by their marijuana use, and my trainings for treatment programs and community speeches will be even more in demand. Despite the positive effect this will have on my bank account, and unlike almost everyone else who would profit from the legalization of marijuana, I am completely against the legalization of this dangerous drug.

There are three major arguments that are given by the for-profit marijuana movement. It is a major revenue source; it is medicine; and legalization is a Civil Rights issue, and will reduce criminal justice disparities among minorities

I have counter arguments to each of these points.

It is a major source of revenue. Marijuana revenues have increased in Colorado and Washington over the last three years. But the revenues are not nearly as large as California has anticipated. This is partly because, as previous witnesses have mentioned, the illegal markets in those states continue to thrive.
Since legalization in Colorado, the tax revenue from alcohol and tobacco has decreased. Economists call this an example of a substitute good.

Economists, tax experts, public health officials, and governmental bean counters all agree that alcohol and tobacco are revenue negative. For every current dollar these substances bring in, they cost between $7 and $10 dollars in the future. This is due to health care and criminal justice costs, which are easily measured. Workplace productivity costs are difficult to measure, and family problems and their associated costs are almost impossible to measure. If we were able to figure out workplace and family costs, tobacco and alcohol would be even more long-term revenue negative.

Because of health care costs and legal costs, marijuana is almost certainly a long-term source of negative tax revenue. Remember, even with legalization, marijuana crimes will include underage use, public smoking, public intoxication, and drugged driving. Neither the American government nor the American people seem to have a strong grasp of the concept of negative long-term tax revenues.

So-called medical marijuana is taxed at a lower rate than recreational marijuana. In March, Governor Murphy increased the number of diagnoses from 11 to over 30. Those new diagnoses covered anxiety and chronic pain, both of which are quite common and, in my opinion, over-diagnosed. This will undercut the revenues brought in from higher taxed recreational marijuana, as tens or hundreds of thousands of more New Jerseyans will seek low-taxed medical marijuana as an alternative.
Some politicians state that some of the marijuana tax revenues will go towards funding prevention and treatment programs. We heard similar arguments in the 1970s about casino tax revenues going to fund schools statewide and to rebuild Atlantic City’s infrastructure. I invite you to walk around outside and see if that promise was kept. I can assure you that most of the casino tax revenue was soon diverted into the general fund. I believe that marijuana tax revenue would similarly be diverted into a general fund. It is a false carrot, meant to lull a too-trusting public and our officials into agreeing to this terrible public policy.

Argument Number Two: It is medicine.

I take no issue with people with AIDS, late-stage cancer, or glaucoma who use marijuana to alleviate their symptoms or the side effects of various medications. I have no problem with the Federal government moving marijuana from Schedule I to Schedule II in order to conduct studies. There have been almost no worldwide random controlled clinical trials on these 30-plus diagnoses that it is approved for in New Jersey. There have been no RCTs on these 30-plus diagnoses in the United States of America.

Major arguments about legalization have been made using veterans, and for-profit marijuana advocates love to offer up anecdotal evidence. I have treated hundreds of veterans over the years. I have many stories about veterans whose problems got far worse while using marijuana, including a veteran who recently committed suicide, despite taking marijuana to treat his complex trauma. I am a veteran myself, and rejoined the Army, in 2014, after a 10-year break in service. This is a population
that is incredibly important to me and, like many who claim that they care about the veteran population, my actions demonstrate that I actually do so.

The VA reports that over 20 percent of veterans with a diagnosis of PTSD also have a substance misuse disorder. My experience finds that number to be much higher. Treating people with a substance misuse disorder with a dangerous drug that has not gone through random controlled clinical trials is terrible medical practice. It is the government's duty to protect the public from untested substances that I believe are falsely labeled as medicine.

Medical professionals do not *prescribe* marijuana; they *recommend* it. This is an important manipulation of words. If they *prescribed* it, they would be liable to malpractice suits. By *recommending* it, they are not. It seems quite peculiar that people argue that it is medicine, but doctors will not prescribe it.

This talk of both medicalization and legalization has caused a significant problem. It has lessened the stigma associated with marijuana. A Hazelden Betty Ford poll found that 60 percent of people, aged 18 to 25, believe that marijuana has no negative impact on the brain. With less stigma comes increased use.

And the final point: Legalization is a Civil Rights issue and will reduce criminal justice disparities among minorities.

Since legalization in Colorado in 2014, there has been an 8 percent drop in the arrest of whites under the age of 21 for marijuana. We all mention this. Hispanics under 21 have been arrested at a rate 29 percent higher. Blacks have been arrested at a rate 58 percent higher.
There are similar numbers in Washington state as well. Arrests involving marijuana in Washington, D.C. are way down; but blacks are still arrested at a much higher rate than whites and Hispanics. While it is a good thing that there are fewer arrests -- as was mentioned by previous witnesses -- legalization has not changed the racial problems in the criminal justice system.

Tobacco and alcohol are disproportionately sold in and disproportionately affect minority communities. Again, I’m echoing the statements of Will. Marijuana stores will almost certainly follow a similar pattern. In Denver, marijuana stores are much more prevalent in minority areas. If marijuana is legalized, I am certain that there will be no stores in Marlboro, Upper Saddle River, Alpine, my home township of Tewksbury, Montgomery, or Bedminster. I am quite sure that there will be a push for stores in Asbury Park, Atlantic City, Newark, Camden, Trenton, Paterson, and Jersey City.

Whites support legalization about 20 points more than blacks in Washington, D.C. This would be the first Civil Rights issue that whites were more supportive of than blacks. I can assure you that this is not a Civil Rights issue, and I strongly believe that calling marijuana a Civil Rights issue is demeaning to that very term.

To be clear, I am opposed to the legalization of marijuana. I am in favor of decriminalization. I believe that any decriminalization or legalization bill should include a provision that addresses marijuana arrest records and provides for the release of prisoners who are solely incarcerated for marijuana use or possession; as well as adjusts the sentences of those who got longer sentences because of any historical marijuana convictions.
If we lose, and recreational marijuana is legalized in New Jersey, I beg of you to force municipalities to opt-in to growing, producing, and selling it, rather than making it opt-out, where it would immediately become legal in all 565 municipalities.

I really want to thank you all for your service to New Jersey, and for holding these hearings.

Thank you so much for patiently allowing me to testify. I am happy to answer any questions now, or in the future.

SENATOR RICE: Let me thank you for taking the time of your testimony.

I’m watching the clock; we’re going to get at least (indiscernible) people; but I think that was really great, for our records.

I’m going to ask Ben Cort-- You’re Ben, right? No, no--

MR. CATANOSO: No, I’m Anthony Catanoso.

SENATOR RICE: --you’re Anthony. Okay; Anthony, you can speak now.

And while Anthony is speaking, I’m going to ask Ben Cort, if he’s here, to get ready to come up; and Joe Williams.

MR. CATANOSO: Thank you; it’s a pleasure to be here.

I will be very brief.

Most of the statistics in my testimony have been covered by the other speakers, so I will leave a copy of my testimony.

I am Anthony Catanoso; I’m the owner and President of Steel Pier here in Atlantic City. We are a family amusement park.

This issue is very near and dear to us.
We have 300 employees at Steel Pier who are full-time seasonal, and about 20 employees who are full-time year-round.

This issue is paramount to us. We have the same age group that is most affected by this -- the pot epidemic, which is 18 to 25 -- operating our equipment. Now, we have rides that move 100 miles per hour, that go 225 feet in the air; that do all sorts of things. And the last thing you’d want is somebody with impaired judgement operating that ride when you put your children on there, or you are on there yourself.

So to be brief, I just want to mention a few of the things that we have seen since we have instituted drug-testing policies many years ago.

When you apply for a job at Steel Pier, the first thing you do is take a urine test which tests for five opiates. And since we have started our drug testing we have had the elimination of accidents involving staff errors; severe or total reduction of near accidents at the hands of staff; severe reduction of absenteeism; almost total elimination of sick leave; elimination of workers’ comp claims; enhanced safe working environment for employees and the public; eradication of serious personnel conflicts that led to unacceptable behavior; and eradication of property theft, both corporate and personal.

So, in a nutshell, in our business, it’s unacceptable. There are 11 million young adults, between the ages of 18 and 25, who are indulging in smoking pot. And in an age where we are creating more ways for them to ingest this, by vaping and other things, is this the right thing to do?

When we are in an age where there’s poor mental health, and there is violence, and many, many drug-related deaths on a daily basis, is this the right thing to do?
And we submit that it’s not; we’re opposed to it. And as a family member, a family man, and a businessman, we couldn’t be more opposed to this legalization of pot.

So, that’s all I have to say.

Thank you.

ASSEMBLYWOMAN SUMTER: Thank you.

SENATOR RICE: Thank you very much.

Just, right quickly, on the business side, the research I have, and the people who have testified in the past, have indicated that part of the problem in the other states -- Colorado is the leader in terms of what we have identified -- but this community is very much concerned. They are concerned because they can’t keep employees because they are testing with marijuana in their system. They go out of state to hire employees; they said the problem with hiring employees from out of state -- if they were to bring you and me in from New Jersey, that’s fine; we do a good job. But then we become residents; and after six months or so, with all the marijuana being used, and people talking about it, we become inquisitive and we try it. We use a cupcake, not a joint. It’s in our system; you have to let us go.

They are not sure about what liability they have, because they feel that the right test case has not come down yet, in terms of a suit. They don’t know what’s going to happen with workers’ compensation. They don’t know if the insurance companies are going to insure certain kinds of things. So it is a nightmare for business, and so I feel your pain. I just want you to know that.

MR. CATANOSO: Yes; it’s interesting. We have -- of 300 employees, we have 150 locals and 150 foreign contracts. The students
who come over from Europe on J-1s, or come from the Dominican or wherever, they have to spend thousands of dollars in order to get the J-1 visa to get here. Now, they all know that they are getting a drug test, so they all come here and they all test clean.

Now, we do random testing. So somebody like that gets to New Jersey; this stuff is legal, they get it. Within 30 days, we test them, it’s in their system, and they’re gone. So they -- it’s a nightmare for them and for us. So they spent thousands of dollars for nothing, and it ruins their -- it could ruin their career, their whole college career.

So there are so many permeations to this problem that, as a businessman, we can’t even begin to imagine.

SENATOR RICE: Okay; thank you.

MR. CATANOSO: Thank you.

ASSEMBLYMAN ARMATO: Just -- for one second.

I was in a meeting this morning with local business owners, and this topic came up. This one gentleman is a prominent contractor in New Jersey who does paving; he has over 500 drivers. CDL is a zero-tolerance; so, we know that. I don’t know if marijuana is going to be a zero-tolerance or not. And it affects him and it affects his business. If you smoke legally on a Friday night; and you don’t smoke at all and then get into an accident on Monday morning, that’s still going to be in your system.

MR. CATANOSO: Exactly.

ASSEMBLYMAN ARMATO: So you’re going to be charged with driving under the influence.
These types of things have to be known. The public, that is ready to jump on the money of it, they have to know about their businesses are being affected.

MR. CATANOSO: Right. And you know, if there’s an accident on one of our rides, and if there’s ever a fatality, they’ll do toxicology. And if that’s in their system, I mean, there are so many more liability issues.

And they make the argument, “Well, alcohol is legal.” But we know, when you come to work -- I mean, alcohol is not going to stay in your system. You can tell if somebody’s inebriated; you can smell it, there are indicators. And we have daily training and daily safety meetings; this is drummed into their heads. But that is a big problem, because it stays in your system. And we don’t know where it’s going to go from there.

SENATOR RICE: Okay; thank you very much.

And make sure we have a copy of your testimony.

Are you Joe Williams, or are you Ben?

B E N   C O R T: Ben.

SENATOR RICE: Is Joe Williams here? (no response)

Okay; Joe is not here.

Is Dr. Bob Zlotnick here? Come on up, Doc.

Okay, you can start your testimony. Just put your information on the record -- name, rank, serial-- I mean, name, you know. (laughter)

MR. CORT: Thank you, Senator Rice.

My name is Been Cort, C-O-R-T.

I appreciate the opportunity to testify today on what is a complex and often misunderstood subject. The subject of cannabis
legalization is nuanced, it’s complex, it’s difficult, and it is very politically divisive.

So Senator Rice, for your leadership on this, and your courage, I applaud you, sir.

Bishop James, the same to you, sir. This takes heart to discuss this; as somebody who does it a lot, I know.

My expertise comes not from books or from academic study; rather, I speak to you from the practical, on-the-ground experience.

I’d like to share with you the reality of what it is like to live, stay sober, and try to help other addicts find sobriety, as well as raise kids in Colorado in a post-marijuana industrialized era.

My credentials are much less impressive than those of my fellows here today; but relevant nonetheless, I believe.

I am a person in long-term recovery. I am a recovering drug addict, sober since June 15, 1996. I lived in Washington, D.C., at the time. I am also a father of three kids in Colorado, who have known commercialized marijuana for most of their lives. From 2007 to 2017, I worked inside a nonprofit drug and alcohol treatment program in Denver and Boulder, and have been a consultant to the field since leaving the University of Colorado Hospital in February of 2017.

I am the author of *Weed Inc.*, a book about the commercialization of cannabis; a vocal opponent of the marijuana industry; a proponent for recovery and sobriety; a Board member for SAM, Smart Approaches to Marijuana, as well as the New Jersey-based nonprofit NALGAP, the National Association of Lesbian, Gay, Bisexual, Transgender Addiction Professionals and Their Allies.
I also recently gave a TED talk, discussing the social justice issues associated with this new industry.

If my experience on the front lines in Colorado’s great social experiment has taught me one thing, it is that the marijuana industry is a massive, persuasive, and well-funded political movement that will stop at nothing to get its products into the hands of customers. This industry’s primary purpose is to maximize profits, regardless of the individual or social costs.

Their willingness to manipulate public opinion by using alternative facts and selective statistics knows no restraint. In Colorado this has led to more marijuana stores than McDonald’s and Starbucks combined, as you’ve heard before. Of all those marijuana stores in Colorado that we have -- there are well over a thousand -- I’d like to submit to you that one is owned by an African American. I was just on a panel with her last week.

Mark my words that the effort in New Jersey to commercialize marijuana is anything but grassroots. It is a well-funded lobbying effort focused on one thing, and that is making money. In Colorado, the lion’s share of that money is being made off of our disenfranchised and most at-risk communities. The National Survey on Drug Use and Health found that 28 percent of women living in low-income areas in Colorado tested positive for marijuana use during their pregnancy; over a quarter.

Like its predecessors -- pharma, tobacco, alcohol -- Big Marijuana makes 80 percent of its profit from 20 percent of its users; people like me, who were unable to use in moderation. The casual user, like the casual drinker, holds little value to the industry. The money is in
problemed use. The industry also targets the economically disenfranchised and, according to the Colorado Department of Public Safety, Coloradans who earn under $20,000 a year are twice as likely to consume marijuana regularly than those who earn over $50,000 a year.

The definition of what marijuana products are is widely misunderstood. For Colorado, and for all of the other recreational states, this lack of clarity opens the door for a multitude of manufactured products unimaginable to even the most dedicated consumers -- myself included -- a few years ago. By loosely defining what marijuana is, expect to see an onslaught of products ranging in method of ingestion, as well as potency, that should change the way that we perceive the simple, and fairly benign, cannabis plant.

When I thumb through my local paper and see advertisements for marijuana products-- When I was buying a burrito at Chipotle yesterday, I picked one up to bring to you here (indicates). When I thumb through my local papers and I see advertisements for marijuana products, they are rarely for the plant. Even when they are in plant form, they boast potency levels that are often up to 50 times what is naturally occurring, which is less than half of a percent of THC, the part of the plant that gets you high. Often these products have names like Toxic Kool-Aid, Girl Scout Cookies, and Green Crack. I see cartoon characters advertising “Buy one, get one free,” and early bird specials for items such as THC-infused gum, candy, soda, coffee, ice cream, suppositories, suckers, gummy bears, chocolate bars, pop rocks, cotton candy, cookies, breath spray, and sex lube. These edibles comprise approximately 20 to 50 percent of the market in legalized states, where the data is available; thereby increasing their...
availability to children and youth who are normally unaware of consumption methods and serving sizes.

Ads also promote THC-specific vaporizers disguised to look like pens, highlighters, beverage containers, lighters and asthma inhalers, in which one can consume THC oil, flavored like bubble gum and candy.

The ads for the plant are hard to find. They are mixed in with coupons, specials, and even the first one is free ads for extremely potent derivatives, such as BHO -- Butane and Propane Extracted Hash Oil; honey, Wax, Shatter, Butter, Dabs, Solventless, Live Resin, Sauce, Caviar, Moonrock, Rosin, and Sugar Wax. Many of these products containing THC rates, that were unimaginable a few years ago, above 99 percent.

In Colorado we were unprepared for the innovation of the industry and, as such, attempted to regulate a plant rather than the massive industry that was waiting in the wings to cash in on our ignorance. By going first, we are able to show other states what to expect; and I hope that New Jersey takes note of what this is -- which is not an exercise in democracy or social justice; rather, a money grab by wealthy white industry looking to cash in.

Years after legalization passed, Colorado Attorney General Cynthia Coffman said, “The criminals are still selling on the black market. We still have plenty of cartel activity, and plenty of illegal activity. And we still have the same arrest rate ratios of black-to-white-to-Hispanic.”

I’ll leave you with one thought that’s been said; but here’s the citation for it. This is something that should give pause to even the most passionate supporter of the industry.
According to a report entitled *Marijuana Legalization in Colorado: The Early Findings*, by the Colorado Department of Public Safety, the *Denver Post* reports-- I’m sorry; an article entitled *Denver’s pot businesses mostly in low-income, minority neighborhoods*. Please read that article.

According to the report by the Colorado Department of Public Safety, Colorado has experienced an 8 percent reduction in the arrests of white kids for all weed-related crime since opening retail -- almost all of which is in poor minority neighborhoods -- in Colorado in 2014. During that same time period and for the same crimes, we’ve seen an increase in the arrests of Hispanic youth of 29 percent, and an increase in the arrests of African American youth of 58 percent.

As you consider changing State laws to accommodate the marijuana industry, I hope that you will carefully look to my home state of Colorado and listen to those of us who are living there who are not profiting from the *green rush*, as we urge caution.

Thank you.

ASSEMBLYWOMAN SUMTER: Thank you.

SENATOR RICE: Thank you very much.

Please make sure we get a copy of that testimony. I think it is very powerful.

But it’s on-the-ground reality stuff; it’s not stuff that some other guys -- you lived it, and we thank you for bringing it and sharing it with us.

Doc, you’re next.

ROBERT ZLOTNICK, Ph.D.: Mr. Chairman, and all members, thank you for being here today to learn more about this
important issue and to listen to some people from this area, and our insights.

My name is Robert Zlotnick; I’m Executive Director of Atlantic Prevention Resources, which is a local nonprofit human service agency with offices in Pleasantville and Absecon.

APR was founded in 1985 to serve all of Atlantic County by raising awareness about substance use, reducing the stigma associated with addiction, and trying to get people help for substance use disorders.

Primarily, we offer evidence-based prevention programming to address substance use and school violence. Also, since 2009, we operate an outpatient addiction treatment for adults in Pleasantville office.

APR is the Atlantic County affiliate of Facing Addiction with NCADD, an organization formed just this year through the merger of the National Council on Alcoholism and Drug Dependence, founded in 1944, and Facing Addiction, founded just a few years ago.

APR also operates the Join Together Atlantic County Coalition, founded more than five years ago, to address underage drinking, youth use of marijuana, and prescription drugs.

Since 2009, like Frank Greenagel, I’ve also served as a member of the New Jersey Governor’s Council on Alcohol and Drug Abuse, appointed by Senator Steve Sweeney -- Senate President Sweeney. I do not represent the Governor’s Council in any way here today, and my testimony does not reflect the official position of any agency or organization, including APR and Join Together Atlantic County; even though the missions and visions of our organizations do mirror my testimony.
I’m also a person in long-term recovery. Nine days ago I celebrated 32 years since I got clean and sober. From the age of around 13 or 14, I drank alcohol and smoked marijuana almost daily until I was 23.

According to potency studies at University of Mississippi, the weed that I smoked 32 years ago likely contained little more than 2 percent THC by volume, the national average in 1986. By 1995, the average THC content in the U.S. was up to a whopping 4 percent by volume, nearly doubling in fewer than 10 years. And four years ago, the average weed on the street had a THC percentage of more than 12 percent. This is the average weed that was taken by police officers all across the country.

So in 2014, the weed was nearly 6 times the average potency since I smoked my last joint in April of 1986. Note that during that same time period, levels of CBDs have decreased. CBDs are believed to contain many positive health benefits and, at the same time, potentially reducing the high that THC causes. So CBDs have gone down.

A couple of years ago, I was visiting with family in Fort Collins, Colorado, and my wife and I visited a dispensary. The *budista* took our photo -- I’ll just show it to you, because it’s not on any social media because of what I do for a living and my wife is a school teacher in New Jersey -- but I was holding a jar of something called *Colorado Kush*, which they listed as 38.5 percent THC. This is just the plant matter; this is not something that has been -- used solvents and it’s not a wax. This is the plant matter; it’s 38.5 percent. That’s what they were saying; that’s what they were advertising. That’s almost 20 times what the average was when I last smoked pot in 1986.
So the weed of the 1970s or 1980s, compared with that of today, is like comparing a 12-ounce can of Coors Light -- also from Colorado -- with 5 percent alcohol by volume; with 24 ounces, or 16 shots, of Hennessy cognac at 40 percent alcohol by volume. That’s a big difference.

That’s just a little math; so here’s a little philosophy.

I heard these comments last Friday, which was the 20th of April; or 4/20, our national day to celebrate cannabis in this country.

If I’d never stopped smoking weed, I might have had a more difficult time preparing these comments. In fact, my testimony might have been very different. Even if I were in favor of legal marijuana, I might not have made it here. My whole life would be different. I would have a different wife, one or more ex-wives, or still be a bachelor. Heaven knows if I would have kids; and if I did, I don’t believe that they would be anything like my kids are today.

I dare say my vocational and educational history would have been very different. I likely would have never earned a Ph.D. from Temple University, which was hard enough to do just with a family and a full-time job.

The reason I bring all this up is to illustrate that, by itself, cannabis can and has robbed people of their potential. Please understand, I am not a prohibitionist. I generally believe that people should be able to do what they want as long as it doesn’t hurt someone else or impact me. As a recovering alcoholic, I don’t care if people drink, as long as they don’t assault me, damage my property, or drive on the roads where we and our families drive. And if someone has a drinking problem, or another
substance use disorder, they should be encouraged to get help; and help should be available so that their dependence doesn’t cause harm to others, especially their children.

I did not have the time to go through the records of current or former patients at our treatment program, but I know that a significantly high percentage of them -- 80 percent or more -- used cannabis. Many of these patients are in treatment for opioid use disorders. And I’m not saying that their marijuana use directly led to their use of opioids, but that’s what it appears to look like. And we also have clients who are being treated just for cannabis use disorder alone.

But getting back to prevention. We have known for years that use increases when perception of harm decreases. In the last 40 years, according to the University of Michigan’s Monitoring the Future study, the perceived risk of using marijuana among high school seniors was the lowest around 1979; and that’s when our daily use was at an all-time high. I say that because I’m in the class of 1980, and so that was the peak, so far, in my lifetime.

As perception of risk increased after that, and peaked around 1992, daily use dropped to an all-time low. And this is just one study. I firmly believe that legal cannabis creates the perception among youth and young adults that it is safe, and no one here today could say that smoking marijuana is perfectly safe.

Sure, Atlantic City could get a windfall from cannabis production and/or sales; and that would be great for the city and the area. But at what cost?
Next month, Atlantic City’s first casino, Resorts, will celebrate their 40th anniversary. Has Atlantic City benefited from casino gambling? In many ways it has; and in some, it has not. I have serious concerns that some people think that Atlantic City will be saved by legal cannabis, as many thought it would be completely saved by legal gambling.

My agency provides prevention and addiction treatment. It is counterintuitive for us to do both; since if we were 100 percent effective in our prevention work, ultimately we would close down both our prevention and our treatment offices.

Addressing underage drinking is difficult; addressing the use of illegal cannabis is difficult. It will be more difficult to address if it were legal. In my personal opinion, 121 elected officials in New Jersey, many of whom are not experts in this area -- present company accepted -- shouldn’t be considering this.

Thank you for holding these hearings and taking the time to understand all the sides of this complex issue. Whatever happens, the future of New Jersey will be significantly impacted.

ASSEMBLYWOMAN SUMTER: Thank you for your testimony, and for your disclosure; and congratulations on the celebration of your recovery.

DR. ZLOTNICK: Thank you.

ASSEMBLYWOMAN SUMTER: If you can, just share with us if there are a number -- or if there is available -- all the treatment options that we need. Because what my experience is, is that while people want to get help, there is a limitation on availability of treatment options.
DR. ZLOTNICK: Very quickly -- people want to get help, and they don’t really want to get help. Sometimes they want to get help in the winter because it’s cold and they’re homeless. Sometimes they want to get help because they want to get somebody off their back -- their wife, their employer, girlfriend, boyfriend, whatever.

ASSEMBLYWOMAN SUMTER: Right.

DR. ZLOTNICK: And so that’s why treatment doesn’t always work for those people.

For adolescents -- locally we have a dearth of treatment options for adolescents, meaning there are no current licensed agencies in Atlantic County that serve adolescents for addiction treatment, which is a serious issue.

I don’t know if that answered your question.

ASSEMBLYWOMAN SUMTER: It does; I just want to make clear that--

DR. ZLOTNICK: There are plenty of beds available. The problem is, is the motivation. And in many cases, drug court has been great getting people motivated to go for treatment and stay in treatment.

ASSEMBLYWOMAN SUMTER: Thank you.

SENATOR RICE: I have to deal with that many available beds. It seems like in my area, we can’t seem to find those available beds; so that’s a whole other question and issue.

ASSEMBLYWOMAN SUMTER: It’s loaded; it’s a loaded answer.

SENATOR RICE: Okay. (laughter)
SENATOR RICE: I want to thank you very much; if you could leave that with us.

I also want to ask Mr. Salaam Ismial to come up, along with David Weeks.

And next on board is going to be Dr. Tassé and Dr. De Jesus, after these two.

Is Weeks speaking with you?

SALAAAM ISMIAL: (off mike) Yes.

SENATOR RICE: Yes; come on up, David.

MR. ISMIAL: This mike right here, or this one?

ASSEMBLYWOMAN SUMTER: That mike.

SENATOR RICE: Yes, make sure you speak into that mike; but also speak into this one too, because we’re being transcribed. And the same thing with you, Mr. Weeks.

And just give your information -- name, your organization, whatever.

MR. ISMIAL: Salaam Ismial, Director of the National United Youth Council, Incorporated; also, I serve as the Co-Chairman of the New Jersey Study Commission on Violence.

I’m talking very -- quite bluntly, because this is the New Jersey Legislative Black Caucus. So I’m going to speak specifically on issues of how it impacts my community, the African American community.

And I say for those who are here, representing respective communities -- African American communities, don’t be bamboozled.
Now, on this question of legalization versus decriminalization, and the economic benefit, and the social justice element of this problem, this issue, this concern -- we have to be very careful in getting behind this.

Now, some of my colleagues in the activist community are supporting legalization. There are some on the more radical side -- which is my side -- it’s not deaf, confused.

The impact, first of all, on youth-- First of all, our kids-- I’m a counselor for 35 years. Our kids are half out of their minds with smoking weed right now. We call them weed heads. They don’t get up in the morning, they don’t carry their butts to school; you know what I’m saying? They barely make it to a job interview, and those kinds of stuff; they’re smoking weed. Pants low down; their hair all messed up. You know the look -- let’s keep it one hundred -- because of weed.

Marijuana has become a risk factor, according to studies, that causes our kids to now developing schizophrenia; that’s a fact.

Now, black and poor communities-- Do you remember cigarettes? Now, I remember in the 1970s when they marketed Kool cigarettes, and Newport, and they had this high element of nicotine. And they targeted black communities -- young black communities. And we got more addicted off of cigarettes than anybody else. Don’t be bamboozled.

Now, the liquor stores. Beyond the prohibition, what have you -- and we had all the white liquor in the countryside, or whatever. As soon they legalized it, what did they do? They made black communities the target communities to sell liquor. And you know I can go up and down some of our hoods, and there’s a liquor store, there’s a church, liquor store;
and maybe a couple of blocks, a mosque, liquor store, a couple of blocks, a liquor store -- in the black community. Don’t be bamboozled.

Then we talk about casino gambling. Remember they told all Atlantic City that they are going to have these casinos, and black folks are going to get hired, and all this good stuff? They put these casinos up, and guess what happened? Right now, today, Trump and all his boys declared bankruptcy; they wrote off their taxes, got businesses from it; Chapter 1, 2, 3 or 4. They say they walked out of here with a bankruptcy, and still with a check in their pocket. And black people in Atlantic City are just about going bankrupt. So don’t be bamboozled.

So I’m saying to this because I’m speaking for my people. We can’t let this legalization thing fool us again. Do you all hear what I’m saying? I’m talking to my folks.

So when we talk about the decriminalization -- right now, in New Jersey, we have the highest percentage -- 61 percent of the prison population is black -- in the nation; number one in the nation. Our schools are the number three most segregated school system in the nation. Come on now; don’t be bamboozled, my people.

So when we talk about legalization, we better be talking about decriminalization, and how this should work.

Let me just pass some more stuff on you.

If we’re going to talk about, Senator, decriminalization, we better be talking about freeing up all those boys who they arrested with two and three bags of marijuana, and doing two and three years’ worth of time. Do you hear what I’m saying?

SENATOR RICE: Yes.
MR. ISMIAL: Don’t be bamboozled.

And when we decide to release them -- if that’s part of the package, because I’m sure there’s going to be a deal at the end of this legislative issue -- then those boys who we are letting out of jail -- make sure they have wraparound services; make sure they have a transition back into the community and don’t become criminalized all over again.

ASSEMBLYWOMAN SUMTER: Right.

MS. ISMIAL: Do you all hear what I’m saying?

UNIDENTIFIED MEMBERS OF AUDIENCE: Yes.

MR. ISMIAL: So, when we talk about legalizing something that is going to, no doubt, impact our community negatively, we better be talking about the other factor that can benefit our community positively.

So our organization is going to be very loud on this. And I’m going to be talking to the brothers in our community, and the sisters in our community, and the organizations in our community, to stand up, and stand up firm, for our community. Because we know once they legalize this, we know how it’s going to turn out. They are going to sell us on a dream; and what’s going to end up happening is the white folks with a lot of money-- It takes about $2 million to open a dispensary; $2 million.

UNIDENTIFIED MEMBER OF AUDIENCE: At least.

MS. ISMIAL: At least, right, Reverend? So don’t be bamboozled.

So we need to check this; you all hear me? My brothers and sisters from AC, check this. We need to raise our voices across this state. When this starts coming to the legislative point, we need to get behind Senator Rice and be supporting our side of the picture, and be there in
busload in Trenton. Because I don’t know how much I want to (indiscernible) Murphy, and all that kind of good stuff. At the end of the day, he’s a big man there too, right? (laughter)

Don’t be bamboozled.

Thank you.

SENATOR RICE: Thank you.

Mr. Weeks.

DAVID WEEKS: I’m with Salaam.

I never really tried drugs.

ASSEMBLYWOMAN SUMTER: We want you to use that one (referring to PA microphone)

SENATOR RICE: Yes, please.

MR. WEEKS: My name is David Weeks; I’ve been working with Salaam for over 30 years.

I never really tried drugs and whatnot.

ALL: We can’t hear you.

MR. WEEKS: I’m with Salaam; you know, I’m with him.

I never really tried drugs; I never even smoked marijuana. But I saw what it did to our community; it devastated our community. I mean, people lost their jobs, houses were split apart. Our people ended up in jail. Drug dealing exploded; it was how the gangs made their money -- selling drugs, and whatnot, and so forth.

I mean, it devastated our community. And I think about Malcolm X and Martin Luther King, all the things they were doing. Then all of a sudden, at the end of the late 1960s, early 1970s, it seemed to be
the drug explosion. Temptation -- that’s all; like, I’m doing fine, on cloud nine; you know, drugs.

You had movies like Super Fly; I saw that a lot of the young kids wanted to be drug dealers and whatnot. I saw what drugs did to our community; I mean, it devastated it, and whatnot, and so forth.

It devastated it so bad that when I was watching this program called Like It Is, they showed you what happened to the black community because of drugs. I was very upset; I told them to order me a transcript about that -- of what the drugs did. I found out that the United Nations has a department -- something on human rights -- and I mailed them a copy, because I was furious. Because it said who was involved and whatnot; it talked about a lot of stuff.

But of course, nothing really happened; except the next day my phone was acting funny, and I kind of realized it probably was bugged, and whatnot, and so forth. How many people do you know are sitting around, talking about drugs to the United Nations? -- you know.

But anyway, I’m not happy with it at all. I have a daughter and I have grandkids, and I wouldn’t be happy seeing them smoking marijuana or any kind of drugs.

ASSEMBLYWOMAN SUMTER: Thank you.

SENATOR RICE: Thank you very much.

Next, is Rory Wells here?

ASSEMBLYWOMAN SUMTER: Yes.

SENATOR RICE: Okay; would you come, Rory.

And is Chief Leusner here still?
SENATOR RICE: Come on up, Chief.

What’s your name?

MELISSA TASSÉ, Ph.D.: Melissa Tassé.

SENATOR RICE: Melissa.

ASSEMBLYWOMAN SUMTER: Did you call her before, I think?

SENATOR RICE: Yes.

ASSEMBLYWOMAN SUMTER: You were called before?

SENATOR RICE: Hang on; we’re going to let Melissa come up first. It’s Melissa and -- Dr. Melissa Tassé, yes; and Dr. Kristine De Jesus. Is she here?

ASSEMBLYWOMAN SUMTER: Yes.

KRISTINE DE JESUS, Psy.D.: She’s here.

SENATOR RICE: Okay; come on up. Okay; I’m watching the clock. We’re doing pretty good; but try to be succinct anyway, okay, please?

DR. TASSÉ: Yes.

SENATOR RICE: Thank you.

DR. TASSÉ: I will try.

I definitely shortened it from last time.

SENATOR RICE: The last two will be on deck next.

DR. TASSÉ: Thank you.

And just-- My name is Melissa Tassé, first of all. I have a Ph.D. in neuropharmacology. And I choose to devote my time to educating
parents about the developing brain and the effect of substances on the brain. That’s really where I come from -- is understanding all the science and the data behind that, because the use of any substance in children -- whether it’s nicotine-related substance, it’s marijuana, it’s alcohol -- all affect the brain and make children more susceptible to developing substance use disorders. And most substance use disorders start in childhood, right? Ninety percent of people who develop addictions or substance use disorders will tell you they started in childhood.

So this industry will be making money off of getting children addicted; and I find that to be very disheartening.

And when it comes to answering your question about insurance-- That’s a serious problem with any substance use disorder; that the insurance companies are not -- even though they’re supposed to -- it’s not parity with other health conditions, and that’s usually the big problem. When it comes to the opioid epidemic especially, people who are -- it’s essentially a life-or-death situation to be able to get the treatment when you want it. And the insurance, or lack of coverage, makes it very difficult for these people to access treatment.

So that’s my two cents about that.

ASSEMBLYWOMAN SUMTER: Thank you.

DR. TASSÉ: And I could sit here and I could talk about all the points that the marijuana industry touts as reasoning for legalizing marijuana. But like I said, I’m really going to focus on the science of children and their developing brains; because that’s what this will be affecting, because it will be readily available to our children.
So as I mentioned, 94 percent of all addictions will start during adolescence; 17 percent of adolescents and teens, who begin using marijuana, will develop a marijuana use disorder. As you know, the adolescent and teen brain is still in a process of critical development, making it that much more vulnerable to drug use. You also probably have heard that regular heavy marijuana use has been shown to cause an 8-point drop in IQ that is not reversed when use stops.

We also know, from several studies that people have mentioned -- the New Zealand study, Australia study; also the *Monitoring the Future* study -- heavy marijuana use in children also affects their entire life. These studies show that, with regard to educational outcomes, they have lower grades and exam scores, they are less likely to enroll in college, and they are less likely to even graduate from high school or college.

They have poor life outcomes. They report lower satisfaction with life, more likely to earn a lower income, and more likely to be unemployed.

You may have heard of a study of postal workers, who were screened -- urine samples of marijuana on a pre-employment screen. And those who tested positive during their employment period experienced a greater number of accidents, injuries, and absenteeism. As you also know, ER visits and car accidents have increased with marijuana usage. And marijuana is typically not used alone; it is often used with alcohol, which makes the combination even worse.

So, for example, if we think that it’s better than alcohol, have we noticed that in states where it’s legal that there is less rates of DUIs due
to alcohol, or alcohol-related hospitalizations, or development of alcohol disorders?

And my focus of this is for us to not be fooled that children under 21 will not use just because we say it’s illegal for them. By legalizing it, just by simply legalizing it, we are endorsing and normalizing its use for our children. The marijuana industry comes to our children, in their faces, with colored THC sodas, candies, gummies, ads, sponsorships, scholarships, newspaper advertisements. And this is all in the face of our children.

This industry, as I mentioned before, will be making money off of developing addictions in our children, as these are their lifelong and most profitable customers. And is this really where we want our tax revenue to come from?

Can we not learn our lessons from opioids, alcohol, cigarettes, and sugar? These were all introduced as substances that were believed to actually be good for people without sufficient data. It has taken us decades to reverse the harm on the youth of our country of advertising to children and its easy access. The damage has been done, and it is massive.

And yes, specific cannabinoids in the marijuana plant can be isolated and could be of benefit to people suffering from epilepsy, loss of appetite due to a disease, or perhaps even chronic pain. But this research must be left to the scientific community; these non-psychoactive isolates -- those cannabinoids in the medicines -- are carefully dose-controlled. They are not the same thing as consuming marijuana recreationally. More research and data is needed to understand the effects on children -- and I think I’ve mentioned this before -- the Adolescent Brain Cognitive Development study, also known as the ABCD Study, will answer many of
these questions on the effects of marijuana on the developing brains of children. Because, obviously, we’re not going to purposefully study what’s going to happen to their brains, so we have to wait for data to come out.

And I am baffled as to why we would want recreational marijuana to be legalized without first really understanding the science and the data that is coming out of states where it is already legalized. Marijuana is not a benign, harmless substance; it is far from it. We owe it to ourselves to be educated and informed as to what recreational marijuana legalization will do to our society, and especially the children in our society. We should not pass any legislation to legalize recreational marijuana until we better understand the science, data, and consequences.

Yet, if we do, legalization should only be done as part of a massive educational campaign about the risks and unanswered questions of marijuana use. Anything short of that would be deeply irresponsible.

And I thank you for your time.

ASSEMBLYWOMAN SUMTER: Thank you.

DR. DE JESUS: Good afternoon.

Thank you for having me today.

My name is Dr. Kristine De Jesus; I work as a staff psychologist at Montclair State University, and I also have a private recovery coaching practice in Rahway, New Jersey.

When we talk about communities that are affected by marijuana and where we’re going to see dispensaries, I come from those communities. I’m a Puerto Rico woman from Irvington, New Jersey, originally; and I have beaten the odds. I grew up in Irvington during the crack epidemic; my parents left Irvington, trying to escape to give me a
better life. And I have to say, my experience, as a Puerto Rican woman, is very different than those of my friends who I grew up with.

So I speak to you not only as a professional, but as a person who has lived through watching many people she loved experience what substance use disorders can do.

I’m the mother of four children; I’m married to an African American man. So my family is really going to be impacted by how we approach this. I live in a working-class community; I’m from Rahway, New Jersey, which is a community that will likely end up seeing a dispensary there, right? We’re that kind of community, where the people from wealthy communities, like Westfield and Cranford, don’t mind coming. But we have that little special place, right? It’s not the Elizabeths or Plainfields.

I work in the College at Montclair; I work both there, and I’ve worked at Temple, working with students with substance use disorder. And I work with a recovery program at Montclair State University.

I’m not going to talk to you about the legalization, in terms of incarceration rates; because we know with both decriminalization and legalization, we see increased incarceration and arrests for people of color.

But what I’d like to talk to you about is how we see dispensaries in working class communities. So, if we look at our Governor, his community -- Wall, New Jersey -- has taken active steps to make sure that they do not have a dispensary in their community. Towns like my town that I grew up in -- Irvington and Rahway -- don’t have that access; the lure of financial resources coming to our communities is definitely there. They are seduced by the promise of money.
Interestingly, I was doing some math -- and I am not a mathematician, by any stretch -- but if the State of New Jersey grosses $100 million, and we split that between the 565 municipalities, what we get is approximately $176,991 per municipality across the state. If we break that down by citizen in Atlantic City, that is $4.57 per citizen. Are we willing to sell our children and our communities out for that little money? I think it’s something we really need to be thinking about.

Big business is absolutely behind this; it is not about social justice. We have said, time and time again, marijuana is the next Big Tobacco. Yale and Harvard -- Ivy League folks, grads -- and Wall Street have heavily invested. The companies behind Corona and Scotts Miracle-Gro have invested in this lobby.

Companies -- currently marijuana companies are trading on Nasdaq; and the Silicon Valley investors are getting involved as well. This is big business; this is not backyard. This is not my husband and I owning a dispensary. Guess what? We don’t make $2 million to buy a dispensary. I have a doctorate; he has a bachelor’s degree. That’s not that.

And it’s only 10 percent of people of color who own dispensaries. That means that 90 percent are not -- I’m sorry; 10 percent of African Americans and Latinos. So 80 percent of whites own dispensaries. So that means 10 percent of all other minorities own the dispensaries. This is not going to benefit communities of color.

If we’re talking about social justice, we should be talking about reparative justice; we should be talking about -- Before we even consider legalizing marijuana, we should be talking about how we are going to deal with those who have been incarcerated for simple possession or cannabis
use disorder. If we are not talking about that prior to legalization, then this has nothing to do with justice, straight up.

If it was about social justice, wouldn’t we be ensuring that the revenue that is coming goes straight to the communities that are going to be most impacted? Wouldn’t we have a plan to fund prevention and treatment efforts?

And talking about treatment -- earlier, one of the presenters was talking about treatment. There is a difference between adolescent and adult treatment. Having worked for welfare, or general assistance, I oftentimes tried to get my clients into treatment. They would wait up to three weeks to get a bed.

ASSEMBLYWOMAN SUMTER: That’s right.

DR. DE JESUS: People die in three weeks; let’s be honest. Now, will they likely die of cannabis order disorder? No; but if they’re polysubstance using, that is a thing. Working on a college campus, many of my students have Medicaid. Try to get a Medicaid bed for a person; it’s not a thing.

And unfortunately, because of the opioid use disorder, cannabis use disorders end up taking a backseat. People are not getting the treatment they need. So if we’re talking about social justice, we need to be talking about these issues as well.

We need to be talking about young people’s brains. We need to be talking about poor communities, where these young people will be exposed to second-hand smoke. Poor communities where already rates of asthma are problematic, right? Exposing young people to second-hand smoke related to marijuana is not going to make that any better. And guess
which communities those affect? Primarily poor brown and black communities; these communities are vulnerable.

So it’s time for us to look behind the curtain and see the wizard for what he is doing. He has created talking points about social justice to get communities of color to buy into the narrative, knowing full well that it’s not true; knowing full well that when you’re in survival mode, you’re not looking for research. Guess what? I got out of survival mode. I am one of the very few who ends up getting an education and getting a doctorate. The people I grew up with -- guess what? They didn’t get that opportunity, and they’re buying into this hook, line, and sinker because no one is telling them the truth.

We’ve been through this with alcohol and tobacco. There’s a saying, “Fool me once, shame on you; fool me twice, shame on me.” This girl from Irvington is not going to be fooled; I am not playing. And I am going to talk to anyone who will listen to me about this.

If we want to ensure justice, we have to look at our community. We have to deal with systemic racism, with classicism, with gender disparities. Only when we deal with those issues will we find justice. Legalizing a drug does not provide justice; what it does is provide opportunity to create wealth.

Thank you.

ASSEMBLYWOMAN SUMTER: Thank you.

SENATOR RICE: Thank you very much.

Also, would you leave copies of your testimony with us?

Thank you very much, Doctors.
Next we can bring back up, now, Rory Wells and Chief Leusner.

And while they are coming up, is Councilman Brown here, by chance?

UNIDENTIFIED MEMBER OF AUDIENCE: (off mike) He’s not going to make it, sir, with the traffic.

SENATOR RICE: Okay; so after this group, we’re going to have Bishop James and John Harmon.

Yes; just state your name and all the stuff, for the record, okay?

CHIEF LEUSNER: Thank you, sir.

I would like to thank the Legislative Black Caucus for the opportunity to speak on this very important issue.

My name is Chris Leusner; I’m the Chief of Police of the Middle Township Police Department. I also serve as Vice President of the New Jersey State Chiefs of Police Association, and a member of our Marijuana Working Group.

The New Jersey State Chiefs of Police Association opposes the legalization of marijuana. We believe the risks to our communities far outweigh any potential benefits. However, we do believe common ground can be found on this issue, and we acknowledge that alternatives to arrest and incarceration must be included in the discussion.

I will highlight a few of our concerns if marijuana were to become legalized in the State of New Jersey.

First, driving while impaired. We believe there will be an increased risk to the public with more impaired drivers on the roadways of
our state, resulting in more crashes and fatalities. We also believe it will increase government costs to detect and successfully prosecute violators.

Colorado saw its costs increase, from $50,000 a year to $500,000 a year, to train Drug Recognition Experts, which would be an expensive proposition for us here in New Jersey. We understand there have been discussions of per se violations of the amount of THC in the blood as part of the dialog surrounding legalizing marijuana. This is a complex process that may result in many drivers going undetected because of the lack of scientific basis to establish such a level. It will also require officers to obtain a written warrant, transport the individual to the hospital to obtain a blood sample, and it will ultimately add considerable time to an arrest for impairment.

Middle Township, where I’m Chief, is a 72-square mile community; 8th largest geographically in the State of New Jersey, and we handle between 900 to a 1,000 crashes a year. In my professional opinion, based on over 20 years in law enforcement, the roadways of Middle Township will certainly not be safer if marijuana is legalized but, in my opinion, more dangerous.

Second, edibles: Edibles are a huge concern with marijuana. The most prominent difference between ingesting and inhaling cannabis is the delayed onset of the drug effect with ingestion. Consumers often do not understand this aspect of edible use, and may consume a greater-than-intended amount of the drug before the drug has taken effect. Most troubling, high quantities of THC are reported to produce transient psychotic symptoms, such as hallucinations, delusions, and anxiety in some individuals.
Unintended pediatric exposure to edibles is another concern. According to the *Journal of the American Medical Association Pediatrics*, who reported that the number of annual pediatric marijuana cases increased more than fivefold, from 2009 to 2015, in Colorado. I know, in Cape May County, where I’m Chief, we recently seized Rice Crispy treats infused with THC that were bought over the Internet; and once taken out of the package, you would never know it contained THC.

Many of the edibles sold in Colorado have listed, in fine print, *only consume one-eighth of the edible*. What do we think will happen when a young adult -- or worse, a teenager or a child -- takes a bite of THC-infused cookie? Do we think they will only eat one-eighth of the cookie? What happens when that same teenager doesn’t feel the effects fast enough, and thinks it’s not working? I think you get the point; edibles are a huge concern.

Third: I would like to address the myth that the black market will disappear.

I read, frequently, that if we legalize marijuana, it will destroy the black market and bring the business into the open where it can be regulated and taxed. Unfortunately, this is not the case in states that have legalized marijuana. The Colorado Chiefs of Police Association, in partnership with the Police Foundation, put out a Practical Guide for Law Enforcement titled *Colorado Legalization of Marijuana and the Impact on Public Safety*. In this guide, Colorado law enforcement officials report the black and grey market not only exists, but is thriving. All one needs to do is type marijuana black market Colorado in Google, and search the local news stories to see it’s real problem occurring on a regular basis.
The legalization of marijuana in Colorado has not saved millions of dollars in law enforcement costs, but has created more costs. According to the Chiefs in Colorado, in the same report, investigations into the black and gray market are very complex, very time consuming, and often requires extensive investigation to prove it is a black market-grown product, or sold on the black market.

In closing, the members of the New Jersey State Chiefs of Police Association believe there will be many adverse impacts to our communities if New Jersey legalizes marijuana. We stand ready, and look forward to working together with our community partners to help chart a course that is in the best interests of all the citizens of the State of New Jersey.

Thank you.

SENATOR RICE: Thank you, Chief.

Mr. Prosecutor.

RORY JOSEPH WELLS, Esq.: Thank you.

My name is Rory Wells, and I’m a former Assistant Prosecutor out of Ocean County, New Jersey. My work with the Office included handling numerous cases, as well as an extensive community relations outreach portion. I did a number -- hundreds -- of school assemblies, speaking to young people and parents on drug prevention and the dangers of the addictions to drugs.

I just want to say -- I know it’s getting late in the day and my comments will be very concise. I do want to thank the Senator, and the entire Caucus, and the panel, for providing an outlet for different, various opinions on this matter. A lot of the times we see and hear so much pro-
legalization information that it’s often a surprise to people to realize that there is a strong anti movement against this legislation.

So I just appreciate the opportunity to actually come and be a part of the conversation here.

I also want to state in my comments that this is going to be a legacy position. So no matter how you slice it -- good, bad, or indifferent -- if you vote to commercialize and legalize marijuana in New Jersey, we will get more of it. That’s obviously the cause and the effect; they want more, because they want to make money for the revenue source.

For whatever reason, you will be voting a legacy vote that says, “I voted to increase drugs in my community.” How you support that will be part of your legacy.

For me, I am also an advisor to New Jersey RAMP, Responsible Approaches to Marijuana Policy, and I know obviously several of our advisors have given input here. The one thing that we really pride ourselves on is making policy and decisions based on science, and data, and facts. And a lot of the times it’s hard to get that information out.

So once again, I appreciate the opportunity to speak here today.

I’m going to put three points on the record that I just want to be included, and then I’ll say some concluding points.

Washington, D.C. saw public consumption and distribution arrests nearly triple between the years 2015 and 2016. A disproportionate number of those marijuana-related arrests occurred among African Americans.
And of course, we heard earlier testimony this morning from Will, who is actually from Washington, D.C. I think he provided excellent testimony for the panel.

The second point: Along with the increase in property crimes, the Boulder Police Department has reported a 54 percent increase in marijuana public consumption citations since legalization.

And the third point: In Anchorage, Alaska, school suspensions for marijuana use and possession increased more than 141 percent from 2015, when legalization was implemented, to 2017.

So I know, Senator Rice, throughout his time, has been encouraging a lot of people to do their own research, look up your own information, make sure you’re educated on this matter. And I also want to add my voice to that.

A lot of the time there’s misleading information and agenda-driven information in statistics and polls. If you ask someone, do they feel somebody should be arrested and put in jail for having a small amount of marijuana, that is very different from saying that person also supports commercial and retail establishments in their community. Those are miles apart; and a lot of the time, the statistics and the polls are used to do one of two things: have people feel and talk about somebody who maybe really shouldn’t be treated harshly because of a small amount of marijuana; and then they go the extreme on the other side. And then the other point that is often made in this debate is the conflation of medical marijuana with commercialization and recreational sales.

So make no mistake, I am against commercialization and legalization of marijuana retail dispensaries to be sold in this state.
Certainly, there’s room to improve and move in the medical marijuana field. But that, for me, is another discussion.

So with that, like I said, I promised to keep my remarks concise; and I will do so.

Thank you.

SENIOR RICE: Thank you very much for your services, as law enforcement officials at different levels. And I understand it is from that perspective, as we try to create a better quality of life for our community. Sometimes we think we’re going in the wrong direction.

MR. WELLS: Right.

I’m sorry; I know--

Just briefly, because of the law enforcement background, I know there is a true issue with the disproportionate arrests of minorities. And it’s something that needs to be addressed.

But I think we heard earlier some of the statistics -- that it would be a shame if this legislation passed, or one of the several bills passed, and concerns about disproportionate arrests of minorities actually went up, like we’re seeing some of the numbers in others states. That would-- We’re seeing it actually aggravate the problem.

Do we have all the solutions? No. Can we look at how somebody is arrested, when they’re arrested, what are the circumstances surrounding that; can we do things we do better, including actually lowering the use of marijuana? We can do that. But I don’t believe that legalization and commercialization of this drug will accomplish that goal.

So thank you, Senator, very much.

SENIOR RICE: Thank you very much.
We are going to ask Bishop James to come up, with John Harmon.

And while you’re leaving, I just wanted to say in other states, you know, that you were talking about, the number of blacks are still being arrested three times greater than whites, with legalization. And the impression that those who are pushing legalization is that decriminalized people are going to jail, but they fail to tell people if they legalized it, they’re still going to jail, too.

BISHOP JETHRO C. JAMES, Jr.: Good afternoon.

I am Bishop Jethro James. I am the President of the Newark-North Jersey Committee of Black Churchmen, and the parent of the Black Ministers Council here in the State of New Jersey; Senior Pastor of the Paradise Baptist Church. I am also a licensed social worker in the state; Chaplain for the New Jersey State Police. I survived Ground Zero on 9/11; I’m still here. I’m responsible, as a Bishop, for all the Full Gospel Baptist churches in the state -- for all their social actions; as well as I sit on the Board of Saint Michael’s Hospital in Newark.

And I’m retired, 38 years, from PSE&G; retired an urban development executive.

And to put forth anything that says this is a social action, or social justice issue, is an out and out lie. It is not a social justice issue. I sat on the Governor’s -- Governor Murphy’s Law and Justice Transition Team. And I would say I hijacked the team with this argument. It is said that I am not loyal to the Governor. I’m more loyal -- I answer to a higher authority -- for him to put forth something that’s going to devastate the African American and Hispanic community.
I don’t want to repeat everything that was said here, but the reality-- I was fortunate enough to get an education and to work for PSE&G, one of the nation’s largest utilities. The reality is that you will not get a job at PSE&G, you will not work at Verizon, you will not work at any major corporation, you will not drive a New Jersey Transit bus, you will not teach in the school system, you cannot work at Home Depot or Lowe’s, because you must pass a drug test.

Just recently, we took on Essex County College; we got things straightened out there. The Minister’s Council met with one of the professors from there. We were given, Senator Rice, 150 jobs for students, for this summer because, as you know, schools are going to be closing in the next few days.

Well, because we’re doing pre-screening, Assemblywoman, we were only able to fill 30 of those 150 jobs. Kids cannot pass the marijuana test. They will not have an economic future in this state anywhere -- for marijuana testing.

The Senator and I were blessed -- along with some other folks here -- that we were on C-SPAN Friday. And when I left C-SPAN, I was whisked off to talk to some of the drug folks at the White House. Yes, Donald Trump had some of us there to talk about what’s going on with some of his people.

The reality is, it’s going to devastate the African-American community. There will be no employment. We never had an opioid crisis in the hood until this opioid-- As we watched brothers nod out when they came back from Vietnam; we watched them nod out every day. We
watched them hustle the streets; we watched young ladies sell themselves on the street.

But it got on the Parkway, you all. It left Newark and went down the Parkway, and decided to get off as they were going to Princeton; and that’s when it became a problem. It wasn’t a problem until it got up on 280 and went on up and got into Parsippany and whatnot; then it was a problem. People of color have never mattered to a lot of folks when it came down to the money. This is not about morality; this is about money.

The reality is that this is about health care. We’re starting to see some things out in Colorado; for example, I don’t know if you’re aware that there is a 70 percent increase in pediatric poisonings; 70 percent. If you and I have a drink, we only ingest what it is into our bodies. The reality is, if there’s a baby there, a young person there -- there is no EpiPen for marijuana or THC poisoning. The reality is that we’re seeing -- our children will not be able for their brains to develop or to function. The American Medical Association has already told us that cigarette smoke is bad for our health. We’re spending billions of dollars on cigarettes, but the *New England Journal of Medicine* has just issued a report that marijuana smoke -- the THC -- will take your heart out twice as fast as nicotine; and your lungs will go out twice as fast as nicotine. Why do we want to do this?

I sit on the Board of Saint Michael’s Hospital; I get reports. Just a few weeks ago, we had 28 folks under the age of 18 come in, out of their minds because of marijuana. The reality is that we’re not even thinking about our children; and when our children are dying, it goes across all neighborhoods. We need to look at what’s going on in our community.
There was never any, any, any realistic hope of doing anything about those who are incarcerated. Some say 61 percent; some say 65 percent -- it’s still too high. But the reality -- there was never legislation proposed to do anything about letting anybody out of jail.

I, too, met with Jeff Chiesa yesterday; a good friend, excellent attorney, former Attorney General. We talked about what it would take to let somebody out of jail. Well, if you had five crack rocks and five pounds of marijuana, you got more time for the five crack rocks than you did for the five pounds of marijuana. And so this is a lie that they are telling about -- they want to let someone out of jail.

And so what we do -- each case, each case would have to be looked at on its own merit. Each case would have to see that they make a plea deal to get rid of the crack, which carries Federal time, more time than the three years you’re going to get for marijuana. Don’t believe the hype. No one goes to jail for a joint. You’ll get a fine; but you aren’t going to jail for a joint. And so the lie that they’re putting out in our community, “We’re going to let your kids out.” That’s a lie; they never intended to allow that to happen. I know; I sit on the Law and Justice Transition Team. I’m talking to the best attorneys -- including three former Attorneys General in the state -- said it couldn’t happen. I will be meeting with the new U.S. Attorney to talk about this.

Then I asked another question, coming from law enforcement. The reality is, no officer in this state can defend a crack-growing situation. I just talked to Jeff Chiesa about this yesterday, because you raised your hand and said you were going to defend the Constitution of the United States and the Construction of the State of New Jersey.
And Senator, I’m about finished.

The reality is that you are jeopardizing your job because now you’re breaking your oath. And so where are we going to get the guards for this?

And let’s talk about the hood. The reality -- and I’m done; and I’ll just pass my stuff in -- the reality is, in this state that has the strictest gun laws, we know that there are folks in the hood who look for other folks in the hoods that they’re going to stick up, take their stash, and sell it. You put it in the local corner store; it’s all cash, can’t pay for it with a credit card, and can’t write check. And I’m one of those dudes -- I know where the cash is. Me and my boys are going in. We’re going to do what we have to do; we’re going to get the cash and the weed.

And so unless we start having realistic conversations; until we start talking about who’s really going to die out in the streets; until we start talking about what it’s going to do, and the lie that they told us-- My great-great-granddaddy is still waiting for his 40 acres and a mule.

Thank you for having me. (applause)

SENATOR RICE: Thank you, Bishop.

John.

Next coming up, while John is speaking, I want Alysa Fornarotto-Regenye; and after that, we’re going to have Cannalytics and Obsidian Elite Investments, or something like that.

We’ll get it right when they come up here, okay?

ASSEMBLYMAN ARMATO: Sir?

SENATOR RICE: Bishop.

ASSEMBLYMAN ARMATO: Bishop.
Could you address a couple of things.

BISHOP JAMES: (off mike) Sure.

ASSEMBLYMAN ARMATO: You really hit the nail on the head when you started talking about jobs.

Nobody, nobody is talking about the loss of jobs like you just did. UPS -- anybody who drives a truck, buses -- they drug test.

BISHOP JAMES: PSE&G.

ASSEMBLYMAN ARMATO: And that’s--

BISHOP JAMES: Connectiv.

ASSEMBLYMAN ARMATO: That has to be championed to let everyone know that this is going to come about. And you know it’s going to come about, and I know it’s going to come about. That’s one thing.

The second thing is, I do a lot of work with the opiate epidemic; a lot of work. And again, you were right on point. We had the epidemic about 25 years ago. And the only reason that it is today -- the only reason that it’s on the front page is because it’s in the suburbs. Now, you know, I think that has to be addressed also; and I commend you for saying these things that are absolutely, positively true. Once again, I do commend for saying those.

BISHOP JAMES: Thank you.

I want to give you one more point.

One percent of all the electricity that is produced in this nation is in the five states -- in the five states of the lights of the grow houses. I’m drafting a letter -- and I haven’t even told the Senator this yet -- to PSE&G, Connectiv, and to all of them. Because anytime -- those of us who came
from that world know that they can get a windfall of money; there are supposed to be societal benefits, and they are acting like they don’t even know it.

SENATOR RICE: Thank you, Bishop.

BISHOP JAMES: God bless you.

SENATOR RICE: I just want to say, Bishop, you mentioned PSE&G. Many of us in the Legislature did the right thing, we think, and saved jobs.

BISHOP JAMES: Yes, sir.

SENATOR RICE: The jobs are going to be meaningless if, in fact, they can’t function.

John.

J O H N E. H A R M O N, Sr.: I want to just thank you all for the opportunity to add to this discussion today.

I’m John Harmon; I’m Founder, President, and CEO of the African American Chamber of Commerce of New Jersey.

Again, thank you for the opportunity to discuss the legalization of marijuana in the State of New Jersey.

First, a few points worth noting. I am not an expert on this subject; however, I do know that blacks have suffered many injustices due to their direct or indirect participation in the selling or distribution of illegal drugs in the State of New Jersey.

New Jersey has some severe financial issues that they must addressed in order for the state to be more competitive in this nation; specifically, extreme high taxes and significant pension obligations, just to name a few. Moreover, the 1.1 million blacks that reside in New Jersey
have the highest poverty, the highest incarceration rates, the highest unemployment; lowest median and household incomes, and home ownership rates. These are just a few reasons why I support the legalization of marijuana here in the State New Jersey.

Based on the aforementioned, I recommend the following.

Again, marijuana should be legalized, similar to alcohol. Therefore, anyone manufacturing any quantity, or marketing, or distributing outside of a licensed facility, in my view, is breaking the law and should be prosecuted.

Workforce and public safety provisions should be consistent with those of alcohol use at the workplace and/or driving.

Tax revenues generated from the manufacturing, sale, and distribution should be placed in a lockbox; and any appropriations of funds must be earmarked specifically to provide for the following: public education, social and economic improvement of individuals who have been adversely affected by the criminal justice systems here in New Jersey, or reside in communities where there is evidence of blight, uninhabitable living conditions, or inconsistent with a prosperous, healthy, and enterprising environment.

Specific initiatives should include home ownership subsidizes for seniors, low-income residents, veterans, as well as the disabled. Financial literacy programs for youth and adults administered through nonprofit and faith-based organizations. Improving the economic standing of low income men and women, especially blacks and Hispanics, should be a priority. Small business and entrepreneurial development programs should also be included. Financing programs to support those individuals
who are seeking to secure license to manufacture or distribute marijuana in New Jersey should be also entitled to leverage some of these resources.

Establishment of drug treatment programs. Make it illegal to manufacture, sell, or distribute marijuana without a license, and all activities associated with the same outside of a licensed facility should be prohibited.

Educational campaigns via television commercials, billboards, school districts, packaging, etc. -- these should all be a part of a comprehensive strategy to inform New Jersey’s residents. Moreover, you must be 21 years of age or older to purchase or participate in this industry.

Also, I would suggest that we look at increasing the number of proposed licenses, from 80 to 120; of which 40 should be made available to black and Hispanic residents who have the wherewithal to satisfy the licensing requirements in the State, and/or have the monetary resources to establish and operate a proposed establishment.

Workforce training and small business capacity should be also a focus; and again, giving priority to black and Hispanics, given, again, they have the highest poverty, highest unemployment, and also the lowest median income levels.

Those incarcerated on offenses related to the sale or distribution of marijuana should be considered for release from institutions, once legalization of marijuana becomes law in the State of New Jersey.

THC, or potency levels of marijuana, must be regulated to minimize its effects on becoming a pathway to something more severe. There is also data that shows, in other states, where the increased levels of THC has some real harmful effects on society.
I'll give you an example. In the 1970s, THC levels were half of 1 percent; while today, in Colorado, those numbers are north of 30 percent. THC is the component that gets you high -- there’s no question about it -- while CBD is the component found in medicinal cannabis. So you have two ingredients; one, if oversubscribed, could create some real, real devastating effects on society.

Blacks and Hispanics must have access to establishing enterprises in all communities that are designated to manufacture or sell marijuana in the State of New Jersey, and not be limited to where they are the predominate population.

Derived tax revenues should not be used for infrastructure-related projects, given that the State recently passed a protected Transportation Bill, where those revenues are clearly dedicated to do some very specific things.

Lastly, funds generated should also be used for facade improvements and home renovations for low-income residents, seniors, veterans, and individuals with disabilities.

The above are a few of my proposed recommendations for your consideration as you work to consider legalization of marijuana in New Jersey.

Thank you for extending me this opportunity to contribute to this discussion today.

SENATOR RICE: And thank you very much for the work you do as Executive Director, and President, and CEO of the African American Chamber of Commerce New Jersey.
And let me also say to you, and to the others, this discussion we’ve been having, as the Black Caucus, has been on recreational, not medical. There’s a difference. And those African Americans who keep being sold a bill of goods -- how much money people are going to make -- if I gave out 50 licenses, that means 50 black people are going to have licenses and make some money; and they can hire $X$ number of people, and there’s a limit. Which means if we’re wrong on this in one direction, but right on the negative impact, it means that the rest of our communities suffer, generation after generation.

And so for the black folks who are being -- continue to push in our community and our articulation -- that weed is legalized so people can have money; yes, we should share in the money revenue. But you need to start to take the focus on the revenue -- making money now on the legalization because it’s legalized and we’re getting it straight. If they’re going to spend our time on talking about recreational, there’s not going to be any money pot for medical. So I think we need to use our common sense as well.

But thank you very much; and take that back to your membership from Ron Rice.

MR. HARMON: Thank you.

SENATOR RICE: Next we’re going to bring up Alysa Fornarotto-Regenye and Chief Donna Higbee. And after that -- the time is moving close; we’re doing good -- after that, the last two speakers are going to be someone from Cannalytics; and Obsidian, I believe, Elite Investments.

LaQ A Y  L A U N ’ J U E L: (off mike) Obsidian.
ASSEMBLYWOMAN SUMTER: Obsidian.

SENATOR RICE: Okay; well, you’ll get it right when you get up here, okay? I’m just doing the best I can from the card I got, okay? (laughter) You know, I’m not an English teacher; I was a criminal justice major. (laughter)

ALYSA FORNAROTTO-REGENYE: Thank you again for having us, and giving us all an opportunity to voice our opinions.

My name is Alysa Fornarotto-Regenye. I’m here representing the New Jersey Association of Student Assistance Professionals. We provide the drug, and alcohol, and mental health services in schools across the State of New Jersey.

So I have worked in the addictions field for 25 years, both in prevention education, as well as counseling. I am a Licensed Clinical Alcohol and Drug Counselor; I am a mother of two children; and I work in a school setting.

I also serve as a member of the Monmouth County Board of Addiction Services; I’m also Co-Chair for the Public Awareness and Legislative Committee for the Association of Student Assistance Professionals of New Jersey. And I also served 11 years at the State level, working under the Division of Mental Health and Addiction Services; half of my tenure was under the Office of Prevention training, the other half was under the Office of Treatment, specializing in best practices.

So for the future of our youth, young citizens of New Jersey need you, our Legislature, to role model for them a careful and cautious decision-making process which reflects good sound judgement based on the consideration of all alternatives.
A smart man learns from his own mistakes, but a wise man learns from others. So I’m asking you to please consider all of the consequences that Colorado, and its former states, have all experienced since they legalized marijuana.

On behalf of the Association of Student Assistance Professionals of New Jersey, as well as the Youth Rite of Passage -- Impact of Marijuana Legalization Statewide Collaborative, as well as educators across the state of New Jersey who value happy, healthy, and achieving youth, we ask you to please use caution and explore all possible ramifications of legalizing marijuana.

Adolescent health and wellness versus addiction rests upon the conscience of policymakers across the United States, and now in New Jersey. The CDC states marijuana users are three times more likely to become addicted to heroin. The latest research indicates a connection between the cannabinoid receptors and opioid receptors in the brain. Adolescent brains, in particular, are primed for addiction, due to the loosened gene expression.

This is all research-based; we know this. Kids are six times more likely to use pot simply because of a parental attitude of indifference, which is of concern for me. Because if we have adults across New Jersey now openly smoking pot, the number of students -- of youth, at a much younger age -- they’re using by 7th grade and even younger than that. And that’s increased just in the last year, since we put legalization on the table. And once it does -- if it does legalize -- those numbers are going to skyrocket.
Those who smoked weed heavily as teens showed mental decline even after they quit using the drug; and had, on average, an 8-point drop in their IQ scores. That is significant; an 8-point loss could push a person of average intelligence into the lower third of testers. Even those who started smoking pot after age 18 showed some decline.

Teenagers who are daily users of marijuana are 60 percent less likely to complete high school or obtain a university degree; 7 times more likely to attempt suicide; 8 times more likely to use other drugs.

In New Jersey, in 2017, 88.23 percent of adolescent treatment admissions were for marijuana; 6.76 percent was for alcohol. So obviously, marijuana is the chosen illicit drug among our teens, and we must do something about it.

Research indicates marijuana’s cannabinoids activate the same CB1 Receptor System as opiates, like OxyContin, morphine, heroin, etc. This triggers a dopamine release in the mesolimbic reward system. Cannabis use in adolescence has also been associated with increased risk of psychosis in adulthood. There was a time when research would say that if you were predisposed to mental health issues -- let’s say, schizophrenia -- that if you used a drug like marijuana it would draw it out much sooner. Well, now the research is saying that it’s actually causing schizophrenia and other mental health -- serious mental health issues among youth, as well as adults.

Citizens of Colorado were tricked by Big Marijuana, just like many generations were tricked by Big Tobacco. New Jersey must avoid those same devastating mistakes which have taken a toll on human collateral in Colorado through significant increases in homelessness,
psychosis, crime, ER visits; even teens high on pot in schools skyrocketed there. It’s much more like -- almost like a warehouse of teens who are using pot. Can you imagine being an educator in a classroom and half your population sitting in front of you is high? How do you teach? How does that happen? And what are we going to do to prepare for that? -- is my question.

I think it’s important for you all to see a YouTube video called *Weed Documentary (2016) - High School: Marijuana in an American Public High School*. It’s really critical. That’s going to give you some visual input as to what’s going on in the schools.

I also left with you my testimony and some DVDs for you, to provide for you, that explains Colorado’s situation.

It is impossible to leave youth out of the equation on legalization. We all know that legalizing marijuana goes beyond an adult choosing to use an addictive, mind-altering drug. It is about aggressive marketing, lowering the public’s perception of harm, especially youth’s perception of harm, since they look to adults to model healthy behaviors. And we all know that leads youth to a broader rite of passage with legalizing marijuana.

Student Assistance Counselors across the State of New Jersey have seen an increase in vaping, both nicotine as well as marijuana, in the schools. It started last year, and it really ramped up this year. If you look at what the conversation in the public has been -- legalizing marijuana -- that coincides, in my opinion, with the increase in vaping in schools and among youth in general.
Since Colorado legalized marijuana, from cannabis lollipops to pot tarts -- not pop tarts, pot tarts -- from gummy bears to Reefers Cups -- not Reese’s Cups -- to vaping concentrated forms THC with 99 percent pure THC, Colorado is number one in the nation for first-time use of marijuana among youth; representing a 65 percent increase since their legalization, compared to before legalization.

According to a poll by FDU in New Jersey, legalization is not supported by the majority of New Jersey residents.

I want to explain to you -- a quick story of a friend’s teenager, who is now in her 20s. She was babysitting; I don’t know about any of the females in this room, but for me, I was an avid babysitter. That’s the way that I made my money when I was a teen.

So very often when the babysitter comes over to the house, usually parents say, “We have munchies in the house; help yourself to whatever’s in the cupboards.” This particular teen, who was only 16 years old at the time-- The parents left; she actually -- she went into the cupboards, she saw brownies. She took the brownies out; she ate a brownie. She thought about giving it to the 1-year-old baby who she was babysitting, but then she decided, “Well, no, because the baby had enough,” so she chose not to give that brownie to that baby.

Well, unfortunately, she started to feel very strange. She called her parents; she was slurring, she was very confused. The parents ended up calling 911, and came over. It turns out -- long story short -- it turns out that those brownies were pot brownies. So can you imagine the devastating-- She had to receive hospitalization. Can you imagine if that went to a baby, a 1-year-old?
Please consider the societal and public health costs to our communities, which will be much greater than the gain from any tax revenue. Let your conscience speak to your heart.

Thank you.

SENATOR RICE: Thank you very much.
The testimony you left; was that--
MS. FORNAROTTO-REGENYE: I did leave it; I gave--
ASSEMBLYWOMAN SUMTER: Yes, we have it.
SENATOR RICE: Yes, was that America, whatever, High School?

MS. SEGUINOT (Chief of Staff): No, Association of Student Assistance Professionals.

SENATOR RICE: Okay; you got it?
MS. SEGUINOT: Yes, we have it.
SENATOR RICE: Okay.
Okay; go ahead, Chief.

CHIEF DONNA HIGBEE: Good afternoon.

My name is Donna Higbee; I am Chief of Police in Galloway Township, Atlantic County; and the current Secretary of the Atlantic County Chiefs of Police Association.

First, I would like to thank you for your time in allowing me to say a few words as part of the discussion on legalization of marijuana here in New Jersey.

I’m certainly not qualified to speak as an expert in the marijuana industry, so I won't talk about profit, statistics, or percentages.
I’m here to talk about real-life issues that we, as law enforcement, are seeing every day.

If you think that all adults are responsible enough to manage life while not under the influence of a mind-altering substance, you can open a newspaper or watch the news any day of the week and see the fallout from bad decisions made by otherwise good people that had a momentary lapse in judgment.

Clearly, as a Police Officer, and Police Chief, I am not for legalization of recreational marijuana; however, my job is to enforce the law, not write the law. I see there are many facets in this discussion, and I would like to use my time today to speak on two points, each from opposite sides of the spectrum.

Galloway Township is the largest municipality, by size, in the State of New Jersey, at 115 square miles. We host just over 40,000 residents, Stockton University, and a major hospital. We are uniquely situated as a direct corridor between Philadelphia, New York, and Atlantic City, with 28 motels and hotels; we welcome a very diverse community.

We are home to five nursing homes and assisted living facilities, as well as over 1,200 single-family homes for the 55-and-older community. In talking with many senior citizens in my community, the complaint I hear the most is that access to medicinal marijuana, for seniors suffering from debilitating pain or terminally ill conditions, is limited. The current cost associated with obtaining medicinal marijuana is astronomical, not to mention the abundance of paperwork and documentation required. Even the most technologically savvy seniors are having trouble navigating the system.
I would ask, on their behalf, that these concerns be looked into and addressed, because I do see a need for the conditions mentioned above.

Second, and most important to me as a Police Officer and mother of two elementary aged children, with respect to our youth and recreational marijuana legalization, the mental and emotional challenges that our youth face daily -- balancing school, sports, family obligations, and the everyday stressors of being a kid growing up in today’s society -- are overwhelming. I am not foolish enough to think that money is not the driving factor to persuade lawmakers into legalizing marijuana here in New Jersey.

With that being said, I would ask that, should this discussion actually gain any headway, the appropriate overseers set strict criteria with respect to age, accessibility, and availability to any mind-altering substances, namely marijuana. Clearly, a legal age requirement should be established to any mind-altering substance, but I’m speaking more along the terms of punishment for reckless and irresponsible adults who may choose to drive while under the influence, or leave such substances out in the open.

We are already seeing pure THC inhalers, edible gummies, candies, and baked goods; items that any child may see as a normal household food and eat, with severe health ramifications and traumatic long-term effects.

Spend a day speaking to any school administrator, guidance counselor, or police officer, and you will hear about the adverse effect the advent of social media has had on our children and the world that has been made available to them at their fingertips at such a young and impressionable age.
Mental illness, depression, and suicide prevention is now at the forefront of discussion and concern in almost every meeting I sit in with our schools and our community. We owe it to our children to make sure they are protected from adults who become reckless with such substances. Lawmakers should ensure that anyone responsible for the care of a minor or another person is charged and prosecuted to the fullest extent of the law should this move forward.

Solely focused on the positive uses of social media -- and there are many -- we as a society missed our initial opportunity to teach the dangers associated with it. Because of that grave error, we have been playing catch-up for years now, and this has placed a tough burden on parents, teachers, and police officers, as well as mental health professionals.

Today, however, as this law steadily moves across the country initiating discussions, testimony, and hearings like this, it allows us time to evaluate the benefits and the negative aspects of legalizing marijuana and the effect that it will have on our State. It is my hope that lawmakers and politicians will slow down and truly take the time to appraise more than the almighty dollar, because no amount of money or profit in the world is worth a child being exposed to a dangerous substance, or the effects it may have on their quality of life with their parents, guardians, teachers, and their future accomplishments.

I appreciate the invitation to speak with you today.

Thank you.

ASSEMBLYWOMAN SUMTER: Thank you.

SENATOR RICE: Thank both of you very, very much.
And Chief, it’s good to have you here. It’s also good to know we have a female Chief. (laughter)

CHIEF HIGBEE: Thank you.

MS. FORNAROTTO-REGENYE: Girl power.

SENATOR RICE: There’s progress in New Jersey, particularly in South Jersey, okay?

CHIEF HIGBEE: Yes, thank you.

SENATOR RICE: You’re welcome.

The next speaker -- I thought that would conclude, but I didn’t realize that I had some folks over here who were on the list.

And I advised the businesspeople to come -- you can come up now; come on.

I don’t want to call your names again, because I don’t want to act like I’m insulting you, okay? -- I just can’t pronounce them.

Come on; we don’t have a lot of time. We’re supposed to be out--

I only need the two representatives from the businesses to testify; so I have one of each, right? It’s two different businesses, or one business?

SCOTT BEGRAFT: Two different.

MR. LAUN’JUEL: Two businesses.

SENATOR RICE: Okay; so you can determine who is going to speak first.

And after that, I need to bring up -- and these are the final speakers; if there are any others, I apologize, because I’m going by this list now -- Cheryl Gordon and Samantha Harries, okay?
MR. BEGRAFT: Thank you, Senator, for allowing me to come at the last minute to testify.

My name is Scott Begraft with Cannalytics. We are a research facility for cannabis; and a testing facility.

UNIDENTIFIED MEMBERS OF AUDIENCE: Can’t hear you.

MR. BEGRAFT: Sorry.

SENATOR RICE: Pull your mike up to your mouth.

MR. BEGRAFT: We’re a testing center for cannabis, and a research facility.

And I have to say, though I’m for the legalization, full legalization; I have to agree with some of the opposition, as far as the gentlemen from SAM speaking about his daughter in her stroller, you know, having a puff of marijuana smoke in her face. I’m strongly--

SENATOR RICE: Hold that a little closer to you.

MR. BEGRAFT: I strongly agree with that as well.

SENATOR RICE: There you go.

MR. BEGRAFT: As far as edibles, and doughnuts, and things like that -- gummy bears, doughnuts -- yes, attractive to children. I feel that there’s a lot left out. These products are being sold in child-proof containers 90 percent of the time, I would have to say. These products are tested by laboratories like ours to make sure they’re safe, and consumable. And they have -- the gentleman who spoke a couple of minutes ago had mentioned that the THC content, the content of the cannabinoids in the products-- And I feel that they do need to be tested, they do need to be regulated, and the State needs to be involved with that as well.
We have also developed a system called the AERS, which is the Adverse Event Reporting System; where if somebody was to go to the hospital because they thought they were dying or having an issue because of cannabis consumption, that hospital will be linked to the State, to the dispensary, to the grow facility, for an immediate recall of that product. So we are on the safety side of things. If everything is supposed to be going to be legalized, it needs to be regulated and it needs to be safe for anyone who is going to consume it.

So again, I do agree with some of the concerns; but I do feel, as well, that Colorado is kind of the poorest state that we can base it on. We all base it on Colorado, because Colorado was the first state to legalize fully. But the data is not very accurate data. The data is being pulled from the day of legalization until current. There is no baseline for that data. So of course usage is going up. People are coming out of the closet, now that it’s legal, “Okay, I want to smoke marijuana,” and they’re a statistic now. So I don’t think the data is very accurate.

And I think we’re getting a lot of half-stories as well. People driving under the influence of marijuana -- I do agree it’s just like alcohol or any other drug -- heroin -- you shouldn’t be driving under the influence of any kind of drug. But the part that’s left out, about someone who’s pulled over and deemed that they are high on marijuana -- they had also drank a fifth of vodka or half a fifth of vodka that day. So that part is being left out.

So again, I do agree, to a certain extent. But I think we’re only getting half a story from a lot of the negative aspects of marijuana usage, whether it be medical or recreational.
Thank you.

SENATOR RICE: Just for the record, I’ve been researching three years. You’re getting half the story on both sides, because there is no conclusive evidence. But you’re not as factual on the negative, too. When somebody puts this in your head, you might find out that the THC in newborns is going up -- that’s factual; that’s data. When the police walk in and close down a grow shop, and women are being violated, and human trafficking is taking place, that’s documented stuff.

And that’s the problem -- because there are no longitudinal studies. And where there is disagreement on what path to take on something like this, we should take no path until we determine what’s the right path to take. Because this is not some simple legislation that we can change the next day and everybody’s life would be better. Once you legalize drugs, any drugs, in this country, it’s going to impact generation after generation. Newborns that haven’t been born yet are going to impacted by it. It’s going to impact industries in this country; it’s going to impact families; it’s going to impact rebuilding communities, and impact government. We have to get it right.

And folks who are in business, and the money people, and those who want to make business -- whether they are black, white, or Latino; whether they are young or old -- I get that. But when someone comes to me -- which happened recently -- and I said, “Well, what if we get this wrong?” And they said, “Well, legalization of recreational will happen anyway.” And I said, “What if we get it wrong, and then all these folks will be dying?” They said, “Well, it’s going to happen anyway, so I might as well just make some money too, like the white folks.”
So what you’re telling me is that even if we die, you don’t care because white folks are making money off us dying; you want to make money off us dying too.

I just think that’s a horrible statement, etc. So I just want to put it in perspective that I agree with you that both sides are distorting some information. But what this hearing is trying to bring to you -- if anyone paid attention -- is factual information from people who actually live in Colorado, work in the emergency rooms, work in the institutions, to tell you what’s factual now.

Now, if the scale goes like this (indicates), going like this (indicates), it may change later. So New Jersey needs to slow down, and pay attention, and see where this graph is going on stuff that we know is real, not the stuff that both sides are saying may be real, may not be real, okay?

With that, thank you very much for your testimony.

MR. BEGRAFT: Thank you.

SENATOR RICE: You don’t have any written-- You can stay; okay. You don’t have any written testimony, right?

MR. BEGRAFT: No; it was ad lib.

SENATOR RICE: Okay.

Do you have any--

MR. LAUN’JUEL: You have my written.

SENATOR RICE: Okay.

MR. LAUN’JUEL: There were 12 copies.

SENATOR RICE: Okay; oh, thanks.

ASSEMBLYMAN ARMATO: Yes, we got that.
MR. LAUN’JUEL: You said we have two representatives for the companies?

SENATOR RICE: Yes; you have one from your company, and one from his.

MR. LAUN’JUEL: Okay.

SENATOR RICE: Yes.

MR. LAUN’JUEL: All right.

SENATOR RICE: We’re trying to move; we’re beyond time. I have deficit people--

MR. LAUN’JUEL: My name is LaQuay Laun’Juel; I’m President of Obsidian Elite Investment Association. I’m an Atlantic City native; this actually is what I would consider my family’s church.

My cousin recently passed away -- and her services were done exactly where you guys are sitting -- due to opioid complications and misapplication of some medications that she was given. So this is apropos for me to be here today.

Thank you to Reverend Days; and much respect to Council President Marty Small and all the other officials from our city.

So, welcome, Senator Rice.

Esteemed ladies and gentlemen, I am speaking to you today as a pro-cannabis legalization advocate that does not believe in smoking as a method of delivery.

We have been the victims of a pernicious lie with insidious intent, the creation of the cancer industry. Cannabis, unlike heroin and cocaine, requires no modification to receive the God-intended benefits of the plant. The other two must be processed and modified by man to
achieve their deadly end products. Cannabis is not a drug as we think of it in society; it is a plant that has been among humans, without ill effect, from the inception of farming itself. It’s even in the tombs of the pharaohs, emperors of China, and in the teachings of the Talmud.

The biggest fear of cannabis is not medical, but social. A social class stigmatization has been placed on the plant, because many associate lackadaisical and aimless behavior with people who smoke cannabis. While not uniformly true for the latter, we, in some misapplied logic, view this as inferior to drunkenness and the violence that often accompanies it.

We’ve all heard of the reefer madness produced by the propaganda of Harry Anslinger during the 1930s; and not much has changed for many whose generations were reared on such babble, as people become murderous, and white women sexually crave black men and Mexican men when smoking cannabis. This idiotic racism was fuel and concealment of the real goal to begin prohibition of cannabis, and here is why.

Cannabis is not some random plant that humans have had in almost every civilization from ancient times until now, on a massive level. It’s a fundamental component to our life cycle. Dr. Raphael Mechoulam, the preeminent Israeli chemist who discovered the endocannabinoid system, helped to expose one of the biggest lies and greatest breakthroughs in medical history. While we all are dreadfully terrified of cancer, as if it were a virus that you catch, it’s actually a basic malfunction of the body on a cellular level, because of toxins and other repeated chemical irritants that damage cells’ nucleus and mitochondria. Cancer exists in us all at some
level; but for most of us, our immune system removes these damaged cells or they die naturally.

A very telling and interesting note is that while we all are aware that the immune system is what fights away viruses, bacterial infection, and some toxins; the majority could never tell you what system in the body is responsible for the regeneration, reconstruction, and healing of the body. Well, it’s the endocannabinoid system. While we feed our immune system Vitamin C to strengthen and preserve it, what vitamins, minerals, etc., do we feed the ECS? It just so happens that cannabis is the only source, meaning both THC and CBD, among other cannabinoids, to strengthen and enhance this vital system. The very plant that we have allowed to be demonized has the components for healing and maintaining our bodies from cancer and countless other ailments.

It was Rick Simpson, of Canada, in 1998, who peaked my interest in cannabis as a possible treatment for cancer. I was familiar with marijuana as weed, ces, skunk; that thing we smoke to get high, and totally thought his claims were bogus. I was a profuse smoker of cigarettes and cigars for a decade during my stay in the United States Marine Corps as a Captain; at least two-and-a-half packs of Newports a day, and a pack of Black & Milds every single day.

When I began to quit this gross habit, I became very aware that developing cancer, at some point, might occur in my life. I was then on a hunt for a preventative treatment. I found several plants, fruits, etc. However, the most prevalent and easily obtainable has been cannabis.

If you notice, for those who are researching thoroughly, there is an inverse relationship between the cancer treatment industry and the
development of the prohibition of cannabis. The one plant in abundant supply to the masses, and capable of self-medicating for cancer prevention and treatment, as well as other ailments, was systematically removed from the U.S. human environment. Additionally, this policy was spread through the U.S. foreign relations policy departments to all our allies as a global policy.

The research is conclusive; and when the public gets the full knowledge of what has been perpetrated against us all -- with the many of those who have died from cancer -- I hope justice will be served. We have watched so many of our people die from diseases and conditions that could have been treated or prevented. But for the myopic and short-sighted view of men, they had to die.

I watched my own father wither away from liver cancer in 2015, myself still hopelessly ignorant of the access to medical marijuana. But in retrospect, he didn’t have the money to see a cannabis doctor, to get a card, and then pay for the oils he would have needed. In truth, he shouldn’t have needed to do any of that.

For those who say they are for medical, but against recreational, you are sadly misinformed. The plant, in its entirety, is medicinal. Its use, even when smoked, is still medicinal; although this is not in any way the optimal or advised way to utilize this plant. Nothing should be smoked as a means of use by humans.

Cannabis should be accessible without a doctor’s prescription. It should be available to all adults. We don’t demonize THC over CBD either, because both are necessary to achieve the beneficial medical results.
We cannot allow our social inhibitions to steer us in a direction that creates even more problems by ignoring science and wise judgement. Statements like *babies being born with THC on the brain* are examples of gross ignorance of a subject that requires better-versed minds. THC is naturally occurring in humans under the name of *anandamide*, which is responsible for every moment of joy or euphoria you have ever experienced in life. It’s a natural hormone.

We have a unique opportunity to right many wrongs when we legalize this industry, the greatest among them being the medicinal damage that has been done against us all.

The second -- social injustice has incarcerated 80 percent more *melanated* people than whites for the same illegal behavior. Without question, a universal pardon or expungement is in order without additional cost; hence, automatically for all marijuana-related charges. The policy was nefarious in its inception and execution. While it was legal, it was not lawful or righteous.

And thirdly, we must not transfer wealth from a financially disadvantaged class and demographic to an already financially abundant demographic. The cannabis industry is 99 percent male elite businessmen. This is the result of past class disparity and social bias; therefore, creating rules that demand a high capital bar of entry and unrelated level of above reproach social record is prejudicial. While it’s the normal way of doing business, it’s time to for cultural disruption, because our normal way of doing things is glaringly insufficient.

Thank you for your time.

SENATOR RICE: Thank you very much for your testimony.
Next we have Cheryl Gordon and Ms. Harries.

Yes; Ms. Gordon, how are you? You’ve been on my mind; I need your phone call; and I’m glad to see you here. (laughter)

And how are you, Ms. Harries? I apologize for the lateness of the day, okay? But we’re being transcribed, so it’s really for the record, which we need very much, okay?

So thank you.

You can kind of determine who is going first and who is going last; as long as you end at the same time, we’ll be okay. (laughter)

CHERYL GORDON: Thank you so much.

Good afternoon, Mr. Chairman and Committee.

I, too, recognize the briefness of the hour, and it really had not been my intent to give any extensive testimony. However, I can provide you with a written document after this hearing is concluded.

I appear before you today because I think that this matter is not simple; in fact, I think it’s quite complex.

I am not here to oppose the legalization or to support it; but to encourage ongoing dialogue between us and our community.

I am not speaking as an expert, but as an individual who has seen and heard the impact that marijuana has in our community. In fact, I want to talk, for a second or two, about the 99 percenters -- those people whose voices have not appeared here at this table today.

You see, in February, when I first started to circulate this flyer and to let some of our people know that the hearing would be taking place, a large number of them, who are everyday citizens, were not able to get their arms around what was happening at a hearing in totality. You see,
they wanted their voices amplified, but recognized that they did not have the ability to have a voice at a forum such as this.

So today, while marijuana is not legal in our community, it is a part of the daily lives of so many people who live in our community.

You see, whether they’re people of African descent, whether they are young or old, or whether they are rich or poor, or whether they are small or large, they clearly understand that they’re being affected by the thousands. You see, I can remember, for instance, visiting a young mom, and she was elated that she had gotten a newspaper. And she said to her child, “Go and get me that newspaper,” and he turned to her -- and honestly, he was about 4 years old -- and he said to her, “Mom, you mean those E-Z Widers? Do you want me to get those papers? Mom, are they upstairs by your bed where you’ve been?”

She looked at him in astonishment. She pretended not to know what he was talking about. In fact, she said to him, “Boy, stop playing; you know what I’m talking about.” And I said to her, “Stop; he didn’t do anything different today than he did this morning, yesterday, or when I leave. The only embarrassment is, he said it in my presence.”

He said it in my presence; he fetches her E-Z Widers probably every day of her life.

Or the time when I can remember a group of us, particularly myself, being approached in a vehicle by a group of young, vibrant, African American men in the community of Trenton, where I grew up, who began to surround my vehicle. They surrounded my vehicle because they thought that I was encroaching upon their turf. They thought I was 5-0; that I had come in to get a check on them. And I had to convince them, before I went
to get a Chinese bacon sandwich, that I wasn’t 5-0, that the people in the car with me were not 5-0, and that we did not come there that day to interfere with their small cottage industry.

You see, historically -- and we’ve heard it before -- whatever no one else wants, we get in our community. What we clearly understand is, whether we want it or not -- we get toxic waste, we get prisons, we get halfway houses, we get experimental housing, we get unwanted populations and pollutions, we get liquor stores, we get billboards, we get advertising, we even get storefront churches that we didn’t ask for.

So when you start to talk about what’s happening in the African American community or, for that matter, the urban areas, it is no wonder that marijuana has a black market; they do. There’s no doubt about it. But I really do think that there should be ways that we can address what’s happening in terms of that market. In fact, if we really took a look at how to give them some assistance, we can figure out how to help them with unemployment, we can figure out how to get some jobs, we can figure out other successes that would not (sic) allow them to compete against other industries.

What I clearly, clearly know is that marijuana has an adverse impact on our community, it has an adverse impact on productivity, it has an adverse impact on most areas where we intersect in our lives. Yet the African American community, and other communities, see marijuana through what I’m going to call rose-colored glasses. They see it as a panacea to make life for them just a little bit more comfortable, and a little bit easier today.
So what I really want us to think about is, how do we explore the safety nets to get us from where we are to in the future? How do we look at proactive measures that can be put in place? How do we approach our families and community-- And we can all pretend that it’s not at our cousin’s house, or our uncle’s house, or our granddaddy’s house; but it’s in our community, and we need to honestly and openly take a look at what’s happening and try to figure out how we can be part of the solution and not part of the problem.

And then at the very end, whether we give permission or not, marijuana use is going to go on; people will continue to use it, and we’re going to have to figure out a way -- how to make it a positive, and not a negative.

And I close by saying that, in all honesty, doing nothing is doing something; it’s going to move with or without us, so we have to figure out how to deal with it and what’s happening in terms of our brothers, and sisters, and the other people who I know.

Thank you, sir.

ASSEMBLYMAN ARMATO: Thank you.

SENATOR RICE: Thank you, too.

And just right quickly, I know you come -- your other life, in the legal community; and I’ve heard from Labor. And you have two forces -- some want to legalize; some of them don’t want to legalize, they just want to organize around it where it’s legalized.

But on the other side, Labor is saying to me -- particularly construction workers -- is that it creates difficulty for them. And what people are saying is that it’s no different than alcohol. Well, it may be no
different than alcohol, but when you legalize another drug, you also create increased use. The one thing that no one can disagree on -- I don’t care what side of it they’re on -- the numbers are real about the increased use among all populations in those states. Increased use means increased risk, particularly in the employment market and places like that.

And so, you’re right. We have to figure out-- And what the Black Caucus has been saying is that, look, we just want people to pay attention to the negatives that we do know, that we can document; and the foreseeable negatives, based on the history of our communities, also based on what’s happening now in our communities.

For example, we know there are people on food stamps right now, who we’re trying to help. Many in our communities -- meaning the black communities or the urban communities -- are taking the food stamps to the bodegas; the bodegas give them $50 on $100. They get $50, and go to the corner and buy drugs now.

If in fact there’s increased use -- and we know there will be increased use when we legalize -- substantially; it means you have a new population who never used drugs before of any type -- who tried it, liked it. Some of that population is going to be food stamp people, for example, or the rent payers.

And so, we are saying if you know these things are going to happen, and you move in another direction, sure as heck put a firewall around it. If you can’t put a firewall around it, then we’re going to have a real problem. And the people who are just thinking about the money -- they only think about themselves right now, and they’re thinking about, maybe, this generation. If the problem is not looked at objectively for
potential problems, once we pass it it’s going to affect babies not yet born. I don’t think anyone is getting that down here; we have to get this right. This is not just another super piece of legislation that we do in the Legislature.

So that’s why I’m glad you did come and testify; I think your testimony was right on point.

Thank you.

MS. GORDON: Thank you, Senator.

SENATOR RICE: Ms. Harries.

SAMANTHA HARRIES: Thank you.

Thank you, Senator Rice, and members of the New Jersey Legislative Black Caucus, for allowing me to testify today on this very important issue.

My name is Samantha Harries, and I am the Director of Operations at the New Jersey Prevention Network. NJPN is a public health agency working to create healthier communities by reducing the burden of substance use, addiction, and other chronic diseases throughout our state.

From legitimate research that’s available, and my 20 years of experience in this field, in my opinion I do not believe that marijuana legalization is a good fit for New Jersey.

There have been people here today who have talked about issues, such as marijuana being a very different drug than many remember from their youth. The THC levels have increased, from about 4 percent in 1970, to as high 30 percent in traditional smokable marijuana; and up to 99 percent in edible forms.
Others have talked about the developing brain and the impact on early use as it relates to the increased risk of addiction with our youth. Twenty years ago we didn’t have the technology, or the science, or the knowledge to know that the adolescent brain doesn’t stop developing until approximately age 26. We didn’t know or understand the addictive nature and qualities of marijuana use either.

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

And still others have discussed the significant social justice issues associated with marijuana, youth, and our state.

While all of those issues are critically important to our state and our youth today, I would like to request -- as mentioned in some of the opening remarks -- that our elected officials continue to look at and not be lured in by the promise of a financial windfall that the legalization of
marijuana will bring, especially as it will be on the backs of our youth and on our state’s most vulnerable communities.

The conservative projected estimates of tax revenue are in the range of about $60 million, and projections run upwards of $300 million that could be generated annually. There are promises that the funding would go to help our schools, law enforcement, those in need of addiction treatment and prevention efforts. Those who have been in the field and those who have been in the communities where these promises have been made, and have all seen them made, have all seen the change of what has actually happened and not come to fruition.

I cite as examples the legalization of gambling Atlantic City, that was going to help fund older adults’ needs; the New Jersey Lottery, that would fix our educational system; and then the 1998 Tobacco Master Settlement Agreement that was to bring millions of dollars a year into our state, for 20 years, to fund youth prevention efforts and tobacco cessation programs for those smokers who wanted to quit.

As the Master Settlement dollars became available in New Jersey, a comprehensive tobacco control program was rolled out by the State. But just a couple of years into the efforts, the Governor at the time sold off the dollars in the amount of approximately 10 cents on the dollar to address a budget crisis in the State, essentially wiping away any future payments for the State of New Jersey through the MSA.

While this was happening, tobacco control advocates were promised the revenues from the tobacco taxes -- that tobacco taxes would be used to replace the funding lost from the Master Settlement Agreement.
Within a nine-year period, there were five tax increases that took place, which has brought us to over $700 million in tobacco tax revenue.

As tobacco tax revenue continued to grow, the level of funding towards prevention and cessation programming went from $30 million dollars a year, to $20 million, to $10 million, to $7 million; and then to zero in 2010. We went from a leader in this country, regarding our tobacco efforts, to being 50th in the entire nation regarding commitment, on a State level, towards putting dollars towards these efforts. That will be changing in 2018-2019; we are very grateful for that. But it’s been a long conversation to have the changes come through.

As the dollars were not legislatively protected or focused, there was nothing to keep them designated in the intended areas of focus as our State’s budget needed support. Currently, there is over $700 million in tobacco tax annually generated, and not one penny goes towards the promised efforts.

We can also look at our societal consequences of alcohol and tobacco tax revenues, and the costs associated with these already addictive products. In both cases, for every dollar in tax revenue that’s brought in to our State, we see $10 to $20 in direct and indirect costs with these sales.

Given past history of these windfalls of tax revenue, and the one that is before us today, I thank you for all the work that you’re doing and I urge the Legislature to continue these conversations; to not only look at the dollars on the surface as a quick fix to some of the most challenging financial and fiscal issues that our State may be facing, but to look at our history that has seen the societal costs of legalizing other substances, and how they far outweigh those of the tax revenues that are generated.
As a professional and a lifelong resident of this great state, I strongly oppose the legalization of marijuana in New Jersey, and ask that more time and continued conversations be spent on creating alternatives that will not promote and normalize a drug that will negatively impact our youth and young adults.

ASSEMBLYMAN ARMATO: Thank you.

SENATOR RICE: Thank you very much.

This is really a conclusion; but let me conclude with these remarks in response to you.

I’ve been in the Legislature 32 years. I have watched Governors come and go, and my colleagues; and I can tell you this: You’re right on the money. Anything that we dedicate is not dedicated. We went-- And our communities have suffered the most with lead paint. We dedicated money under my bill; the Governors continued to put it in general revenue. I don’t think that the folks who testified, who want to make money on this, understand our problem. They’re doing okay with their lives, and probably always will.

When we took the one-half of 1 percent in contracts over $1 million and dedicated it to women and minority businesses to train them in the construction trades and the labor trades, the Governor, last year, put something like $17 million of our money in the general revenue.

And this whole promise of giving us treatment money -- which you were talking about -- that starts off right, that’s to get you into the process, and then it backs off. And then we do change Governors, because it’s not dedicated in the Constitution. But we’ve been there before.
But what the promoters of the legalization of marijuana are saying to us is that we have to increase the number of addicts -- potential addicts in order to get treatment. That doesn’t make any sense. Common sense -- I just don’t think people are paying attention. And listening to some of the people who come and testify who are for it -- I’m saying I know they’re not using common sense, or even doing research, because we need to look at those things and be able to respond to them as legislators, okay? How do we protect? When you put money in the budget, your first budget -- and I criticize, publicly, the ability to do that, because we have to balance the budget. But when you have problems in the State government -- any government -- and you don’t anticipate the revenues, and you anticipate revenues from drug money-- And the question becomes, how did you get to those numbers? What’s your formula? And then you go to OLS, the Office of Legislative Services and others, and they report back what the formula -- the way they understood was that those number came from what Colorado got in the first year; Washington, and Portland, and some combination of that. That’s not a formula; it’s a formula for disaster, because if in fact we don’t pass legislation, I think the legislation -- the money is there to kind of force the Legislature to move something legally -- but if we don’t do it, then it means that we did not account for a $60 million windfall in the budget that we already have. So we have not looked at our priorities -- what we have and how we are spending it.

If we put it in there, and we don’t reach $60 million, that means there is still going to be a shortfall. Now, for the public record, this is a fact. And government is keeping those (indiscernible) from anyone and the residents in the urban communities. Every time there’s a deficit, the
programs that get cut to make up the deficit are the programs that impact the urban communities, poor communities -- whether it was down in Gloucester County or up in Salem County -- or communities of predominantly brown, and black, and lower-income people, and single head of household women. That’s a fact, and no one can dispute those facts.

And so we just can’t move rapidly because black folks come in here and testify; they come in and say, “We have to make money; white folks are making money all these years while we go to jail.” I get that, and we should be a part of the economics of anything that occurs. But I don’t think we should be stupid about it, and that’s what I see from some of my community leaders, etc., and others. And that’s why the Black Caucus is not taking a position. We want people to hear the other side.

Now, this is the last hearing; and so people will be hearing my position at forums. And I will call some of those people stupid for not doing their own research and using common sense to turn what direction they’re going in. And I don’t care if it offends them; but that’s just Senator Rice’s way.

I want to thank everybody for coming out. I certainly want to thank OLS; I want to thank Senate President Sweeney for working with us on having these hearings with the Office of Legislative Services.

I want to thank my staff; I want to thank the Assemblyman, and let him say some last words in closing out. I want to thank my colleagues, the Councilman, etc.; and you can have some last words too.

And this is something that we have to continue to stay focused on. But we need to educate the public
And let me make one quick example, because I know we’re closing.

I went to a debate in Newark; they had a Mayor-Council race. And this is important for people to know, Councilwoman Donna -- okay? -- is that when they had a break in the debate, three people came up to me, and they were mostly, I would say, elderly couples; you know, above the age of 50, okay? And two I knew were college graduates and very active; and they retired.

And they said, “You’re right in holding the hearings; and we don’t think you should move this stuff, particularly the legalization of recreational. You should look at medical. But if you’re going to move it, slow it down.”

And meanwhile, the other lady came up; and she hadn’t heard the other conversation, and she said, “Senator Rice,” she said, “you know, you’re doing a good job. I hear about this medical stuff, and I’m told that it may help us get some money for the State budget, and it would help people.” I said, “Okay,” I said, “let me ask you a question. Do you know what recreational marijuana is?” And she said to me -- I quote you -- “I think so.” I said, “So you think?”

But I wouldn’t embarrass her; I said “Okay, so if we’re looking at this, if we legalize recreational marijuana -- which you think you know what it is, okay? -- do you know that there’s going to be commercialization with it?” She said, “Well, what is that?” I said, “Well, while you’re on South Orange Avenue,” where the hearings were being held nearby, I said, “they’re going to put the stores up that sell marijuana lipstick, and gummies, and cupcakes, and stuff.” She said, “Oh, no, no, no.” She said,
“They didn’t tell us that.” I said, “They don’t intend to tell you.” She said, “Why aren’t they telling us that?” I said, “They don’t intend to tell you.”

And then that’s the part-- And that bothered me so much, because I knew in my heart, when we started these hearings, that was the problem: The other side of the story is not being told; and people want to know it, regardless of what the decision is. So we’re not making decisions for them, as the Black Caucus; we’re providing the other side.

The problem is while people testify, the money that George Soros, the billionaires are putting in marketing -- we can’t get to that other side quick enough; but I’m going to try. I’m going to try to do it by bringing those who are for it, in the Legislature, into the black communities and the urban communities. And I want them to deliver what they’re doing, and I want to sit down next to them and have a debate on what I think we should be doing. And I think if we do that, then they’re going to hear from real people who are single-head-of-household parents, who are PTA folks, who are senior citizens, who are people who need medical and are not getting it and we’re trying to make it work. That’s what we need to do, and that’s what we intend to do.

Assemblyman, you can have some comments; and leading out, Councilman, you can -- you can close us right out, okay?

And thank everybody, okay?

ASSEMBLYMAN ARMATO: Thank you.

Just real quick -- any problem that we have has two sides. And any problem with drugs, alcohol -- there’s always a supply and a demand.
Unfortunately for us, the supply will always be there. We have to work, as legislators, on the demand. And if we can do that, we can move forward. I see no benefit at all to increasing the supply in New Jersey.

Thank you.

COUNCILMAN SHABAZZ: (off mike) Senator, on behalf of Reverend Days, who had an appointment, he told me to say that he is very thankful that you had this hearing. We appreciate you coming to Atlantic City and exposing the views of people on this very important subject.

Assemblyman, thank you so much for your time.

Thank all of you for coming out. You’ll be hearing about this; this is a crucial, generational question in New Jersey; and we thank the Senator for his leadership.

And have a safe trip; thank you so much.

ALL: Thank you.

(HEARING CONCLUDED)