Medical Marijuana, Race and Social Justice



New York's Marijuana Policies Have Been Historically Rooted in Inequality

Marijuana prohibition in the U.S.— including the prohibition against using marijuana medicinally— is rooted in inequality. Harry Anslinger, the first commissioner of the Federal Bureau of Narcotics, helped to initiate the war on drugs by spreading racist beliefs on drugs and drug use that persist to this day. Amongst the racist stereotypes used to further the drug war were the ideas that marijuana use inspired the "satanic jazz and swing music" produced by African-American communities.

New York's Current Marijuana Policies Remain Exclusive and Prejudiced

Over 75 years later, the inequality in drug laws may be less explicit but it is no less pervasive. People of color are much more likely to be targeted, detained, arrested and convicted for marijuana use than white people. Over 85% of those arrested for marijuana possession in New York City are Black and Latino, mostly young men, even though young white men use marijuana at higher rates.

Unfortunately, those communities most likely to be targeted for marijuana possession arrests are the very same communities facing high rates of illness for which medical marijuana has demonstrated potential as a treatment. As a result of inequalities in access to health care, exposure to environmental health hazards, and other socio economic factors, communities of color often suffer from higher rates of chronic illness like HIV/AIDS and well as certain types of cancer. Other conditions disproportionately affecting communities of color, like sickle cell disease, aren't even covered by the new law despite the relief medical marijuana could provide. We hold firmly to the belief that no one, regardless of race, should have to go to jail or prison for using a medicine.

We Have to Work for a Better Tomorrow

To insure that the communities most devastated by our marijuana policies in New York and nationwide - have a fair shot at benefiting from this medicine and at participating in this new legal industry, we need to mobilize people to fight for regulations that create these opportunities.

We must remember, that although patients and families of color are more likely to face criminalization as a result of the intersecting consequences of disproportionate policing and illness in communities of color, advocating for a change in the laws and policy is not illegal; in fact, it's a civic duty that we should all have the opportunity to engage in regardless of privileges of race and class. Contact Compassionate Care New York to talk about how you can get involved, meet with legislators, have your voice heard in the media, or outreach to your community. We need you in the fight for social justice and compassionate care.

To get involved contact Chris Alexander at calexander@drugpolicy.org