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REEFER MADNESS: HOW VOTERS RESPONDED TO MEDICINAL MARIJUANA INITIATIVES IN THE 1998 STATE ELECTIONS

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Western Michigan University, 2001

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In recent years, a growing number of states have witnessed the passage of state initiatives that have authorized the medicinal use of marijuana. The medicinal marijuana movement has circumvented elected state legislatures by relying on an increasingly popular form of direct democracy – the direct initiative. This paper briefly examines the history and continuing legacy of illicit drugs and the initiative process in the context of the movement for medicinal marijuana. However, the primary focus of this study is to uncover the voter characteristics that influenced attitudes toward medicinal marijuana in the 1998 state elections. This paper uses Voter News Service surveys conducted in Nevada, Arizona, and Washington State.

Using bivariate analysis of key voter characteristics – age, race, sex, education, party identification, and ideology – this study finds that only party identification and ideology significantly predicted voting behavior with respect to medicinal marijuana. The last portion of this paper briefly considers the campaign effects that likely influenced electorate behavior independent of voter characteristics. This paper finds that the actions of one special-interest group in combination with political variables led to the adoption of medicinal marijuana initiatives.
BIBLIOGRAPHY OF KEY SOURCES


REEFER MADNESS: HOW VOTERS RESPONDED TO MEDICINAL MARIJUANA INITIATIVES IN THE 1998 STATE ELECTIONS

by

Ryan E. Wood

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Ryan E. Wood
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CHAPTER I
INTRODUCTION

At almost every level – local, state, and federal – policymakers have undertaken tremendous efforts to curb the growing global and domestic drug trade that profoundly affects the United States. Constituents and government leaders alike agree that drugs pose a serious threat to a well-ordered society. In response to the perceived effects of illicit drugs, mandatory prison sentences have been lengthened for drug-related offenses, and General Barry McCaffrey, former head of the Office of National Drug Control Policy, embarked upon an aggressive $1 billion nation-wide advertising campaign during his tenure aimed at curtailing drug use among America’s youth. Yet, the topic of illicit drugs in America is not as simple as good versus evil, staunch prohibitionists opposed to drug peddlers and legalization advocates.

Particularly murky is the issue of medicinal marijuana – a subject that seemingly defies ideology and conventional disputes between conservatives and liberals. For decades, there have been repeated calls for the legalization of marijuana in the United States. While marijuana advocacy is nothing new, it has historically been primarily limited to the fringes of American politics. Few mainstream public officials were willing to embrace the widely unpopular issue. However, in the past few years, the classic marijuana legalization debate has taken a surprising turn.
Indeed, the evolving public dialogue over the *medicinal* use of marijuana has little in common with the “legalize pot” proponents of yesteryear. Today, proponents of medicinal marijuana come from all over the political spectrum. Christopher Wren of the *New York Times* has described supporters as “libertarians, liberals, humanitarians and hedonists” leading a “low-profile but sophisticated crusade to end the nation’s criminal laws against marijuana...”

Far from dwelling only on the extremes of the political spectrum, questions over the medicinal use of marijuana have assumed a prominent position in mainstream policy debates.

Corresponding with this evolution of the traditional marijuana debate has been the explosion of direct democracy around the country, particularly in the form of direct initiatives. By initiatives, we refer to those “laws that are *written by citizens* and placed on the ballot by citizen petition.”

Another form of direct democracy is the referendum. “Referendums, by contrast, are laws that are *written by legislatures* and placed on the ballot automatically...or by citizen petition.” Citizens and “special-interest groups,” tired of their state legislatures’ gridlock and lack of accountability, have increasingly turned to the initiative process to enact laws their elected officials have been unwilling or unable to pass. Like the marijuana issue, the initiative process itself is not new. It was born of the efforts of the Populists and

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Progressives at the turn of the twentieth century. However, the past two decades have seen a marked increase in their use as well as the proliferation of an initiative cottage industry. Citizens have voted on policies ranging from mandating a reduction in property taxes, to limiting services for illegal immigrants, to policies governing physician-assisted suicide. Yet, it is the numerous medicinal marijuana initiatives cropping up in recent years that we find the most intriguing.

In short, medicinal marijuana advocacy has led to the formation of actual laws around the country. Recent years have witnessed the adoption of medicinal marijuana initiatives in a variety of states, and the available evidence indicates that this trend is only likely to continue. The overarching topic of this paper, then, concerns the persistent state initiatives that attempt to decriminalize marijuana for medical reasons. More specifically, this paper will examine how the larger forces associated with the initiative process in general relate to the specific case of Nevada’s 1998 medicinal marijuana initiative. We will also be especially interested with the individual level of analysis – that is, elucidating those factors that likely influenced an individual voter’s support for or opposition to the marijuana initiative. We suspect that in initiative campaigns, voter characteristics such as party identification, race, and education, may matter to some extent but will affect voting behavior differently from candidate and party-centered campaigns. In sum, this paper will examine two facets of the marijuana initiative: (1) the individual voter characteristics that influenced how a voter was likely to respond to Nevada, Arizona, and Washington’s

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5 David S. Broder, Democracy Derailed: Initiative Campaigns and the Power of Money, (New York:
1998 medicinal marijuana initiatives; and (2) the typical features of initiative campaigns that affect public opinion and ultimately, initiative election outcomes.

Because this public policy issue is at the state and not the federal government level, the issue is not perfectly uniform throughout the country. Depending on the state, attempts to decriminalize the medicinal use of marijuana are in different stages. For example, residents in California and Arizona approved their marijuana propositions in 1996, while Nevada and Washington voters did not see their marijuana initiative on the ballot until 1998. (Arizona voters also faced a marijuana question on the 1998 ballot because of their state legislature’s desire to reject the previously-approved measure). In addition, subtle differences among the medical marijuana proposals vary by state. Just as states approach public education differently, so are there also variances in how each state would implement (or fail to implement) the medicinal use of marijuana. However, despite these differences, this issue can for the most part be examined as a single public policy, for the similarities among the state initiatives overwhelm any minor variations. Thus, this paper examines the medical marijuana debate as a solitary issue. We feel reasonably confident, then, in initially treating the 1998 Nevada initiative as a representative case. It should be noted, moreover, that this paper will not directly evaluate the legitimacy of the arguments either for or against decriminalization, for it is not the


intent of this paper to come down on any side of this debate. Any discussion of such arguments will only be to improve understanding of this complex issue.

That the medicinal marijuana initiative process is deserving of research is readily apparent. Beginning with California and Arizona in 1996 and most recently, Oregon, Alaska, Nevada, Colorado, and Washington State, more states have been forced each year to confront this issue. Although political, structural, and cultural variables unique to each state\(^7\) will determine how, if, and when each state will face the medicinal marijuana question, it is not unlikely that many of the twenty-four states that allow for initiatives in their constitutions will contend with this issue within the next decade. The principal argument of medicinal marijuana proponents is that marijuana should be reclassified “from that of a Schedule 1 drug (considered to be potentially addictive and with no current medical use) to that of a Schedule 2 drug (potentially addictive but with some accepted medical use).”\(^8\) They argue that marijuana is especially helpful in relieving the nausea and pain associated with cancer and AIDS against which conventional medicine is often ineffective. In contrast, opponents such as James McDonough, Florida’s director of drug control argue that “it is a tribute to the power of political activism that popular vote has displaced objective science in advancing what would be the only smoked drug in America under the guise of good medicine.”\(^9\)


\(^8\) Jerome P. Kassirer, “Federal Foolishness and Marijuana,” 118.

Examining this issue, then, is far from being a sterile academic exercise confined to the classroom and lacking in real-world applicability. It is imperative that scholars, policymakers, and citizens clearly understand the debate itself, and perhaps more importantly, the complicated processes that influence the course of public dialogue and the outcome of state laws. By examining the marijuana initiative, it is hoped that both the policymaker and the informed citizen are given not only the basic facts but also the theoretical underpinnings on which to make informed evaluations. Thus, having noted the relevance of this issue, it is important to briefly discuss the most current literature on initiatives and medicinal marijuana. We will begin this review with the highlights of the American history of psychoactive substances in order to better understand the contemporary mindset concerning drugs. A similarly concise recounting of the initiative process in American politics will also place the contemporary debate in historical and scholarly context.
CHAPTER II

HISTORICAL REVIEW

History of Illicit Substances

To understand why it is that states now find themselves embroiled in medicinal marijuana initiatives, it is helpful to trace the general history of drugs in the United States. First, we should note that the presence of drugs, including marijuana, in America is not a phenomenon that began in the latter half of the twentieth century. Long before the crack epidemic of the 1990s and Timothy Leary’s advocacy of mind-altering substances in the 1960s and 1970s, drugs were firmly rooted in American culture. In his history of drugs in America, Dr. David F. Musto, a medical historian at the Yale School of Medicine, notes that by the second half of the nineteenth century, opium and its derivatives were widely used.\(^\text{10}\) Self-proclaimed medicine men traveled the country hawking their snake oils as cure-alls for any and all afflictions of the mind and body. A favorite was laudanum – opium dissolved in alcohol. “During this time, because of a peculiarity of the U.S. Constitution, the powerful new forms of opium and cocaine [and marijuana] were more readily available in America than in most nations...[because] individual states assumed

responsibility for health issues.” In contrast to today’s arrangement, the federal government played a strikingly minor role in the regulation of psychoactive substances.

Nevertheless, this laissez-faire attitude exhibited by the central government swiftly reversed itself during the first few decades of the twentieth century. As accounts of drug-abuse became more common and the dangers of drug use better understood, federal legislation was passed that eventually made such substances illegal. However, the United States did not arrive at its present prohibitionist stance because of a small cluster of legislation. Instead, the passage of anti-drug legislation followed a decidedly incremental approach. Anti-drug sentiment evolved for more than a century, and laws responded accordingly and as such, slowly. For example, by the end of the nineteenth century, growing public concern over the dangers of morphine use prompted many states to enact more restrictive prescription laws. In 1905, only the medicinal use of opium remained legal, and in the following year, the federal government’s Pure Food and Drug Act continued to allow the prescription and sale of addictive substances but required “accurate labeling of contents for all patent remedies sold in interstate commerce.” In a move that would repeat itself numerous times, Congress slowly increased the power of the central government through the use of its constitutional authority to regulate interstate commerce. Several international commissions convened during this period to discuss the global aspects of the drug trade, and by 1914, the watershed Harrison Act was passed. Again, the

federal government tightened its control over psychoactive substances by using its authority to tax.

Musto also describes how marijuana became a specific target of the federal government with the passage of the Marihuana Tax Act of 1937. This act effectively curtailed production and distribution of this substance “through a transfer tax for which no stamps or licenses were available to private citizens…Prohibition was implemented through the taxing power of the federal government.”13 However, it was not until the Comprehensive Drug Abuse Act of 1970 that the nominal basis for marijuana’s illegality was no longer fiscal. Moreover, beginning with the initiation of the federal government’s “war on drugs” in the late 1970s, public opinion of marijuana soured remarkably. A 1980 Gallup Poll reported that “53 percent of Americans favored legalization of small amounts of marijuana,” but that number had dropped to 27 percent only six years later.14 The past several presidents and congresses have continued the attempt to appear “tough on drugs” by enacting increasingly severe punishments for not only marijuana production and distribution but also possession of the substance. Mandatory minimum prison sentences have become the norm, usurping the authority and discretion of state courts and legislatures.

Thus, it is hardly surprising that the medicinal marijuana issue found its genesis in the initiative process as opposed to state legislatures. First, most state

legislatures are loath to pass bills that are in flagrant violation of federal statutes. Individual state legislators may be personally tempted to pursue policies that are popular with their constituents. Yet, they are constrained by state and federal courts. It is reasonable to assume that despite a nominal desire for “states’ rights,” individual legislators are unlikely to sponsor bills that will face significant court challenges over constitutionality. One reason, then, that state governments did not tackle the question of medicinal marijuana may be because they feared court reprimands that might diminish their legislative power.

The second reason medicinal marijuana initiatives may have not originated in state legislatures is the flipside of the first premise: that the issue was insufficiently popular to warrant state lawmakers’ attention. B. Guy Peters writes that at any given time, there are conceivably unlimited issues facing the American public.\textsuperscript{15} However, while the issues may be infinite, the public policy agenda itself is finite. Thus, only a small percentage of issues come to the public’s attention and an even smaller amount bring about legislation. “Many real problems are not given any consideration by government, largely because the relevant political actors are not convinced that government has any role in attempting to solve those problems.”\textsuperscript{16} In other words, if the issue of medicinal marijuana was not even crystallized in the minds of voters prior to the 1990s, we can hardly expect state legislatures to have devoted time and resources to what was essentially a “nonissue.” Given these two possible reasons,

\textsuperscript{16} B. Guy Peters, \textit{American Public Policy}, 45.
then, it seems natural that as the medicinal marijuana issue formed, the initiative process presented itself as the favored medium of legislation. Of course, this presupposes the existence of an initiative process – the topic to which we now turn.

History of State Initiatives

The primary intent of this paper is to understand the processes and factors surrounding a particular initiative passed in Nevada in 1998. In doing so, we hope that any insights may be used to explain other state initiatives, regardless of whether or not the specific issue is medicinal marijuana. By focusing so heavily upon the initiative process, however, it becomes easy to exaggerate both its effects and its pervasiveness, especially when some observers describe it as “the most uncontrolled and unexamined arena of power politics.”

17 Granted, an implicit assumption of this paper is that the state initiative is a powerful form of legislation, deserving of study and examination. It is, nevertheless, only one way in which laws are passed. More importantly, as Samuel C. Patterson is quick to point out, as a form of direct democracy, the initiative is a relatively rare breed of lawmaking. 18 It is used regularly only in twenty-four states and Switzerland – the country from which it was imported. 19 As an institution, direct democracy has all but disappeared in the modern state. Compared to the two other main varieties of direct democracy – the New

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17 David S. Broder, Democracy Derailed, 1.
19 Samuel C. Patterson, “Foreword,” vii.
England-style town meeting and the referendum – the direct initiative is even more rare.\textsuperscript{20}

Patterson describes initiative campaigns as "highly professionalized, media-intensive, public relations efforts...[that] are frequently lavishly funded by well-heeled special interests."\textsuperscript{21} Yet, this contemporary characterization of the initiative process is a far cry from the hopes of the Populists and Progressives that introduced it to these shores before the turn of the twentieth century. Born of an era in which oil, steel, and railway tycoons effectively controlled state governments – especially those of the West – the initiative was "expected to give citizens a greater voice in state-level policy making and weaken the hold of wealthy interests over state legislatures."\textsuperscript{22} Todd Donovan and Shaun Bowler explain that supporters of amendments to state constitutions allowing direct initiatives did not otherwise share the same concerns. They were essentially "disaffected groups and social movements" from all classes and interests united by their opposition to having little voice in their state governments.\textsuperscript{23} In eventually forcing state constitutional amendments, these supporters expected the initiative to "provide an end-run around partisan legislatures, mitigating the corrupting influences thought to operate within them, and would also improve the quality of public life."\textsuperscript{24} The direct initiative, then, is a marked departure from the routine of indirect or representative democracy, and as such, many studies

\textsuperscript{20} Samuel C. Patterson, "Foreword," viii.
\textsuperscript{21} Samuel C. Patterson, "Foreword," ix.
have been devoted to determine to what extent it has affected American politics and the behavior of the American voter. Because a detailed examination of all the literature is beyond the scope of this paper, we will highlight only the most important features of the direct initiative.

Of course, one reason why it took the enormous efforts of the Populists and Progressives to institutionalize the initiative process is because the direct initiative is conspicuously absent in the U.S. Constitution. David S. Broder colorfully notes that this is because the founding fathers “were almost as distrustful of democracy as they were rebellious against royal decrees.”24 While Madison, Jefferson, Hamilton, and others recognized the imperative of self-government, they were also acutely aware of the dangers of pure democracy. “Their reading of history had convinced them that the Greek city-states had failed because they had tried to govern themselves by vote of the people.”25 Accordingly, the framers of the U.S. Constitution were careful to construct a form of representative democracy whereby the “passions” of the people would be diluted so as to not lead to unstable and ineffective governance.

Thus, the Populists and Progressives faced formidable barriers in their opposition to centuries of political and moral philosophy. Donovan and Bowler state that “early critics [of the initiative] chose several lines of attack.”26 Some argued that the initiative would threaten unpopular minorities. Others contended that initiatives would allow short-lived whims to be legislated, or that special interests would come

25 David S. Broder, Democracy Derailed, 11.
26 David S. Broder, Democracy Derailed, 14.
to dominate the process at the expense of the general welfare. Still others claimed that the individual voter was not sophisticated enough to render a judgment on potential pieces of legislation.28 Interestingly, these arguments continue to be lobbed at the initiative process today. Since the resurgence of initiative use beginning in the 1980s after its decline following World War II, scholars have been revisiting the same arguments made at the turn of the twentieth century in addition to exploring new and evolving ones.29

CHAPTER III

LITERATURE REVIEW

Current Areas of Initiative Research

Much of the initiative research, of course, is frequently contradictory. However, it is helpful to divide the current scholarship on initiatives into three broad categories. The first area of research is devoted to delineating the subtleties of the critiques of the initiative process. While the primary criticisms of the direct initiative are widely recognized, there is considerable disagreement as to what extent and under what conditions these criticisms are valid. Examining whether the initiative process disfavors minorities, for instance, requires more analysis than a simple yes/no answer provides. Likewise, the capacity of voters to make well-reasoned political judgments is regularly questioned, and some researchers have extended that criticism to the initiative process. Yet, support or opposition to such criticism must rely on careful analysis.

A second vein of investigation has focused on the institutional effects of the initiative process. This research involves more than merely questioning whether the initiative has lived up to the expectations of the Populists and Progressives. Clearly, viewed as a whole, the initiative has not been used exactly as the turn-of-the-century

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reformers believed it would. However, this is not to say that the initiative has failed
to correct some of the problems that so angered early reformers. Because of the
complexity of the initiative process and its application to a wide variety of alleged
social problems, investigators have been careful to distinguish the circumstances that
contribute to institutional effects arising from initiative use. Asking whether
initiatives make state governments more responsive or responsible unleashes a host of
other questions. Responsive to whom? What is considered responsible?31

Finally, a third avenue of scholarship has focused on the relationship between
the initiative campaign and individual voting behavior – an area that this paper will
examine most closely. Because the initiative process differs so much from other
candidate and party-centered campaigns in addition to professional legislating, the
established literature on voter and legislator behavior is not entirely satisfactory. We
cannot take for granted that what The American Voter argued were the most
important factors influencing an individual’s vote – party identification, candidate
evaluations, and stance on policy issues – are also the most explanatory variables for
initiative voting.32 Indeed, the unique characteristics of the initiative process have
given impetus to a whole new subfield that looks at the influences of ideology, class,
and race, among others. Previous research on candidate elections has used these
factors as well, but the emerging literature on initiatives presumes that such factors

32 Angus Campbell, Philip E. Converse, Warren E. Miller, and Donald E. Stokes, The American Voter,
may influence voter choices differently. In short, the initiative process is “a whole new ball game” that has required fresh and innovative approaches.

Critiques of the Initiative

Falling within the first area of initiative research, David Magleby has examined some of the perceived shortcomings of the initiative process. While we must be careful to not pigeonhole Magleby as only a critic of the direct initiative, he does argue that the initiative process has the potential to create conditions unfavorable to a state’s unpopular minorities.33 Magleby contends that minority interests (as opposed to narrow, special-interests) are frequently excluded from the initiative process because they lack the organizational and financial resources to mobilize support for their causes.34 Moreover, because they may not understand the initiatives in question, they may be more unlikely to vote on propositions that do affect their interests. This view suggests that the initiative process is passively biased against minorities.

Other critics contend that the initiative can serve as a dangerous weapon in the hands of an intolerant majority that seeks benefits at the expense of a vulnerable minority. Distinct from Magleby’s concerns, these critics view the direct initiative as actively biased against minority populations. As a case in point, David Broder notes that in 1994, California voters approved Proposition 187 that “denied education and

34 David B. Magleby, Direct Legislation, 183-184.
[non-emergency] health benefits to the families of illegal immigrants, a relatively weak minority group."35 Two years later, the notorious Proposition 209 struck a fatal blow to state affirmative action programs. Finally, combined with voter approval of Propositions 63 and 227 in 1986 and 1998 – two “English only” proposals36 – it is not difficult to see why some are so critical of the initiative process. The passage of such initiatives seemingly provides ample fodder for those who argue that the direct initiative jeopardizes minority rights. Moreover, such claims appear to echo James Madison’s fears that without structural constraints, a hostile majority may gain political advantages over competing factions.

Thus, it has been necessary to determine the conditions under which unpopular minorities are targeted by initiative proposals. Caroline Tolbert and Rodney Hero partially endorse Magleby’s viewpoint by arguing that “states with bifurcated racial/ethnic populations may be more likely to adopt policies, especially through the initiative process, that target minority groups.”37 Tolbert and Hero find evidence of majority support for so-called anti-minority initiatives in areas where there are primarily two main racial/ethnic groups. They also suggest that majorities are likely to support such initiatives in homogenous areas with little minority representation. Yet, they find the lowest level of support for anti-minority initiatives

35 David S. Broder, Democracy Derailed, 17.
"in racially heterogeneous counties with sizable black and Asian populations."38 James Wenzel, Todd Donovan, and Shaun Bowler also examine the relationship between the initiative process and the treatment of minorities, but they focus on attitudes and preference formation.39 Their evidence indicates that initiative campaigns and influence by elites can at times substantially change voters’ attitudes toward particular initiative issues. However, they are unable to completely distinguish between the effects of “the initiative process itself or elite demagoguery” that lead to majority “intolerance” of minority rights.40

Joseph Zimmerman, on the other hand, disagrees with the characterization of certain initiatives as necessarily anti-minority. In his examination of allegedly discriminatory initiatives that dealt with forced school bussing and “English only” attempts, he disagrees with researcher Barbara Gamble’s conclusion that certain initiatives are supported only because they are anti-minority. By looking closely at various groups who support supposedly anti-minority initiatives, Zimmerman finds that there are frequently nondiscriminatory reasons why voters of varying races and classes support or oppose such initiatives.41 The available evidence, then, indicates that with respect to minority rights, the initiative process is a “mixed bag.” It may include elements of anti-minority sentiment, but so far, the results have been

inconclusive. These studies' greatest contribution may be their suggestion that there is insufficient evidence to conclude that majorities are necessarily inclined to discriminate against unpopular minorities.

David Magleby is also strikingly critical of the initiative process for another reason. For support, he points to the individual voter's incapacity to render well-reasoned and informed judgments. He contends that most voters are insufficiently educated and knowledgeable about issues to make appropriate initiative decisions.

Those who have not learned about the measure before entering the booth will play a form of electoral roulette, casting affirmative and negative votes at random, or will decide not to vote on the measures at all. The majority of ballot measures are decided by voters who cannot comprehend the printed description, who have only heard about the measure from a single source, and who are ignorant about the measure except at the highly emotional level of the television advertising, the most prevalent source of information for those who have heard of the proposition before voting. The absence of straightforward, understandable, rational argumentation in initiative campaigns, combined with what has been discovered about voting decision making in these situations, raises serious questions about the integrity of the direct legislation process.42

Fortunately, however, not all researchers in the field share such an overwhelmingly bleak view of voter behavior and its relationship to the initiative process. While there are virtually no unbridled optimists who see no faults in the initiative process, many scholars have taken a more measured and nuanced view of direct legislation than has David Magleby. The results of this research will be discussed more fully in the third section examining initiative voting behavior.

42 David B. Magleby, Direct Legislation, 198.
Institutional Outcomes

As mentioned earlier, the second main focus of initiative research has been devoted to uncovering its institutional effects. That is, researchers have been interested in not only determining whether and to what extent the initiative process influences particular issues but also in measuring its enduring impact upon political and governmental institutions. Donovan and Bowler note that “[a]s an institution,...direct democracy is an interesting one, for not only can it shape policy outcomes directly but it can also shape future institutions.” The process of investigating the institutional ramifications of direct democracy entails a complex reckoning of to what extent the direct initiative has satisfied the goals of the Populists and Progressives. In other words, does the initiative process lead to more responsive and responsible public policy?

As it might be expected, Donovan and Bowler state that the answers depend on one’s perspective. In some ways, the direct initiative forces governments to be more responsive because citizens are capable of writing and enacting legislation themselves. Yet, this responsiveness frequently varies with the kind of issue being considered and the time-frame one uses. Initiatives that deal with only one quite independent issue may indeed find government to be more responsive. Yet, Donovan and Bowler find that the direct initiative, as with traditional legislation, frequently brings about unintended consequences. Unlike professional policymakers, however,

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the average citizen is apt to render decisions based on less complete and less accurate information. Thus, the initiative process “interacts with representative democracy in ways that might partially remedy one defect of legislatures (regulating politics) but exacerbate other things legislatures already have a difficult time doing (budgeting).”

Joseph Zimmerman also takes a moderated view of the initiative process, conceding that it is rarely as flawed as its most ardent critics suggest but that it possesses significant shortcomings nevertheless. Unlike David Broder who argues that we are progressing dangerously from a “government of laws” to a system of “laws without government,” Zimmerman asserts that the reality is less one-sided. Initiative campaigns have the potential to both inform and misinform voters, special interest groups are often more successful but only in opposing specific proposals, and initiative participation tends to be dominated by “older, better educated, and wealthier voters” but that this yields few “significant special benefits for only the elite group of voters.” Quoting Charles Beard and Birl Shultz: “Undoubtedly one may imagine a group of ignoramuses drawing together and drafting a legal monstrosity,” but Zimmerman states that this popular and sometimes scholarly fear of the initiative process is overstated. He finds that “the initiative generally has been a salutary device that has educated citizens with respect to important public issues, and the

45 Todd Donovan and Shaun Bowler, “Responsive or Responsible Government?” 271.
46 Joseph F. Zimmerman, The Initiative, 156.
47 David S. Broder, Democracy Derailed, 1.
48 Joseph F. Zimmerman, The Initiative, 152-156.
49 Joseph F. Zimmerman, The Initiative, 151-152.
electorate has been discriminating in examining the pro and con arguments about a proposition before deciding how to vote.”

Finally, Gerber, Lupia, McCubbins, and Kiewiet challenge the fundamental assumption most lay persons and many scholars take for granted — that election day results are immediately translated into law and implemented according to the wishes of the initiative’s proponents. To be fair, many researchers have recognized the importance of the courts in overturning initiatives deemed unconstitutional. However, the vast majority has focused nearly exclusively on the initiative process and its possible effects while neglecting to question the idea that winning initiatives equate directly to fully-implemented laws. Using several winning California ballot propositions as case studies, Gerber and her colleagues study the conditions under which state governments do and do not meet the terms of winning initiatives. In contrast to Zimmerman, Donovan and Bowler, Magleby, and Broder, they are not particularly interested in answering whether the public good is advanced or hindered by the initiative process. Instead, they seek to determine the degree to which state legislatures and bureaucracies adhere to the dictates of winning initiatives. Surprisingly, they discover that “full compliance with initiatives is the exception, rather than the rule.” In other words, the institutional effects of the direct initiative — whether positive or negative — are not nearly as pronounced as most scholars assume.

50 Joseph F. Zimmerman, The Initiative, 155.
The authors discover that since few initiatives are “self-enacting,” it is up to the state legislature and the relevant arms of the state government to implement the terms of the proposition. However, state governments are frequently noncompliant and choose not to implement initiatives as their drafters intended. First, if state legislators supported a particular issue, it is unlikely that it would require a popular mandate to sign it into law; the legislators could do so themselves. However, because initiatives often concern those issues to which lawmakers are either opposed or indifferent, it is not unreasonable to presume that their opposition to the issue remains even after an initiative’s electoral success. Second, lawmakers are unlikely to fully implement initiatives that entail “high technical or political costs.” If an initiative requires a state government to make difficult or painful political decisions, the chances of the initiative being fully implemented are decreased. However, this propensity is reversed when the capacity of initiative supporters to evaluate government compliance is increased and attached to this increased observation is the threat of sanctions for lack of compliance. Finally, Gerber and her colleagues argue that “as the number of people required for full compliance increases, the likelihood of full compliance goes to zero.” Increasing the number of people or agencies required for implementation also increases the likelihood that the initiative will conflict with more personal and organizational interests. In short, Gerber, Lupia, McCubbins, and Kiewiet find that the conditions under which an initiative is fully implemented

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according to the supporters’ wishes are very rare. We must be careful, then, in attaching too much institutional importance to the role of the direct initiative.

Initiative Voting Behavior

The third category of initiative research – examining individual voting behavior – is probably the most contentious area of investigation, and for our purposes, the most important. Some scholars have concluded that unlike candidate-centered elections, initiative campaign results are largely independent of a voter’s race, ideology, partisanship, or class. David Magleby, for example, argues that on noncontroversial initiatives, “most voters face an informational vacuum, and it is difficult to explain why people vote as they do.”56 Unable to determine the variables at play, he characterizes voters as making “snap judgments” in the voting booth.57 He also remains largely pessimistic even when the initiative proposal is controversial and the voter is exposed to more information about the particular proposition. In such cases, the voter is frequently unable to rely upon the heuristic that often guides voter choice in candidate elections – party affiliation. Without party cues, then, the voter’s last option is to attempt to frame the initiative proposal ideologically. “On some issues the question is poorly focused for such an analysis” and the voter’s ideology provides no useful framework for making a decision.58 At other times, the controversial ballot proposal may be more easily viewed in ideological terms, and the

56 David B. Magleby, Direct Legislation, 179.
57 David B. Magleby, Direct Legislation, 179.
58 David B. Magleby, Direct Legislation, 179.
voter’s ideology – if sufficiently developed – may be translated into a stance on the initiative in question.\textsuperscript{59}

One of the benefits unavailable to Magleby that later researchers have enjoyed is the explosion of initiative use beginning in the early 1980s. Published in 1984, Magleby was only able to examine a comparatively small number of recent initiative campaigns. Succeeding researchers, however, have available vastly increased sets of data among numerous states. No longer confined to studying a handful of California initiatives (although many still use California almost exclusively), investigators have been able to exploit the subtleties of individual voting behavior in initiative elections.

Susan Banducci, for example, argues that the central question of the initiative process is over individual voting behavior – "whether voters can make meaningful choices that reflect underlying preferences."\textsuperscript{60} Certainly, other important questions exist regarding the initiative process. Indeed, we have attempted to briefly discuss the most controversial, but many questions become meaningless if we do not know whether voters are actually expressing personal interests. Banducci agrees with Magleby’s distinction between candidate-centered elections and initiative campaigns, using similar terminology – an “information vacuum” – to describe the lack of cognitive shortcuts available to the individual voter in direct legislation elections.\textsuperscript{61} She argues that “party cues, candidate evaluations, and retrospective judgments” –

\textsuperscript{59} David B. Magleby, \textit{Direct Legislation}, 179.
\textsuperscript{61} Susan A. Banducci, “Searching for Ideological Consistency,” 132.
heuristics that voters typically rely on – are lacking in the initiative process.\textsuperscript{62}

However, she does not rule out the importance of ideology in affecting individual vote choice. We review Banducci’s research here more thoroughly because it corresponds to our suspicion that ideology or party identification is an important explanatory variable in Nevada, Arizona, and Washington’s medicinal marijuana initiatives.

In evaluating past studies of voter characteristics and behavior, Banducci discovers that researchers linked certain characteristics to specific kinds of issues. Thus, a voter’s social class helped predict where she might stand on economic issues; parental status was an important variable in explaining attitudes towards school bond issues; and, the religiosity of a voter was correlated to the extent of support or opposition to social issues like casino gambling.\textsuperscript{63} This is fine for researchers interested in a specific issue. When we examine the issue of medicinal marijuana later, we will be using many of these techniques. However, for scholars attempting to explain coherent patterns of voter behavior in initiative elections, these studies alone are insufficient. Banducci seeks to explain voter characteristics that are regularly important across an array of issues. Consequently, she argues that as an explanatory variable, voter ideology remains important in initiative campaigns no matter what the specific issue may be.\textsuperscript{64}

\textsuperscript{63} Susan A. Banducci, “Searching for Ideological Consistency,” 133.
\textsuperscript{64} Susan A. Banducci, “Searching for Ideological Consistency,” 133.
Banducci bases this hypothesis on a key assumption. Namely, it is reasonable to expect some sort of ideological coherence among a voter's choices on multiple propositions on a single ballot. For example, if a citizen votes in support of gay civil unions, it is unlikely that he would vote against hate crime legislation specifically protecting gays and lesbians. A voter's position on issues ought to be consistent if ideology acts as the underlying structure that organizes voter behavior. "If there is evidence of structure, choices across multiple issues should be more logically constrained, and election results should be more likely to 'make sense.'" Of course, whether or not voters behave ideologically has been a key topic of debate in the elections literature over the past several decades. The watershed effort by the authors of *The American Voter*, for example, argued that only a small minority of the general population thinks and votes ideologically. Campbell and his colleagues saw little constraint among issues over time. Banducci, on the other hand, argues that ideological voting occurs more often than stipulated by *The American Voter* and that we can expect it to occur for two reasons. First, psychological factors such as "cognitive consistency" and "balance theory" encourage sufficiently aware voters to make choices that do not conflict. Second, sociological factors like the tendency for average citizens to mimic the choices of elites may also lead to ideological voting on initiative proposals.

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66 Angus Campbell, et al., *The American Voter*.
Banducci also examines how the definition of ideological voting is open to interpretation as well. She notes that Philip Converse used the most popular conception of ideology: placing belief systems along a left-right continuum. One endpoint grounded the extreme liberal, the other the extreme conservative. Others have modified this basic approach, however. Edward Carmines and James Stimson basically used two dimensions, one to measure social issues and another to measure attitudes toward left-right and economic issues. Pamela Conover and Stanley Feldman argued that different ideological domains may be distinct from one another but that they can all be subsumed by the left-right typology when placed within a broader schema. Banducci’s analysis of the remaining relevant literature leads her to conclude that despite varying conceptions of ideology and the pessimism of The American Voter, a sufficient basis exists for “assuming that preferences on ballot measures are structured by ideological predispositions.” To demonstrate this, she uses factor analysis and Guttman scaling to look at the partisanship of “actual voted ballots from the 1990 general election in Oregon’s Marion County.”

Banducci’s analysis leads her to conclude that “electoral choice on ballot propositions does appear to be constrained by some underlying attitudinal

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dimensions." She finds evidence of ideological influence, but ideology does not seem to correspond to one simple left-right continuum. Instead, she differentiates among three separate continuums: issues that fall within a social framework, issues that can be placed on a regulatory dimension, and issues that are economic in nature. Each of these dimensions – social, regulatory, and economic – are in turn modeled by left-right or liberal-conservative endpoints. Banducci’s analysis is neither unambiguous nor without problematic methodology. For instance, she concedes that her “measure of partisan consistency is a poor substitute for cognitive ability, political involvement, or ideological reasoning.” However, despite these shortcomings, she does find evidence of a relationship between partisanship and attitudinal consistency. This is important for our purposes because it helps highlight what may be the salient factors that influenced voters on the medicinal marijuana initiative: partisanship and ideology. To determine whether this is indeed the case, we now turn to a brief discussion of the research design that guides our analysis of the marijuana initiative.

CHAPTER IV

RESEARCH DESIGN

As mentioned previously, this paper first uses a state-specific election as the focus of analysis. To some extent, there is a dearth of good data that looks at both voter characteristics and attitudes toward medicinal marijuana. Few studies have examined the specific case of medicinal marijuana in relation to voter characteristics; and, large-scale data on this subject are scarce. Because of this, our study is somewhat constrained by the information available. As such, we first chose to examine the 1998 Nevada general election because it satisfied two criteria: a medicinal marijuana proposition was on the ballot; and individual-level voter data were available.

Granted, in 1998, Nevada was by no means the only state in which a marijuana initiative was being considered. Data were also available for Arizona and Washington State, and we will later compare these states to Nevada's outcome. Conceivably, any of these elections could have been the initial subject of our study. However, the Nevada case study presented unique advantages in addition to fulfilling the two requirements mentioned above. First, its initiative was arguably the most representative of typical marijuana propositions. While marijuana initiatives are generally similar, some are more or less restrictive depending on the state. We consider Question 9 on the Nevada ballot to be the most mainstream.
Second, we propose that the description of the Nevada initiative on the voter exit poll surveys was one of the most informative and least confusing of all the states in which similar questions were asked. For example, Nevada’s survey question read as “How did you vote on Question 9, which allows adults, on the advice of a physician, to use marijuana for medical purposes?”\(^75\) This is a straightforward but informative question. In contrast, the survey question for Arizona, “How did you vote on Proposition 300, to prohibit the medical use of marijuana without federal government approval?”\(^76\) in part reflected the Arizona state legislature’s attempt to confuse voters and overturn the successful results of the state initiative passed two years earlier. We should note that Washington’s medicinal marijuana question was also suitable: “How did you vote on Initiative 692, which permits the medical use of marijuana?”\(^77\) Nevertheless, we chose to first examine the results of Nevada’s 1998 election.

Third, and relatedly, unlike Arizona, Nevada voters faced the marijuana initiative for the first time in 1998. As such, vote choice was not influenced by variables associated with an earlier marijuana campaign. In other words, previous voter decisions will not confound subsequent analysis. At the same time, because Nevada’s state constitution requires successful initiatives to be approved twice, there will be a second data set from the 2000 election that may be useful for future research.

\(^76\) “VNS General Election Polls,” 199.
\(^77\) “VNS General Election Polls,” 264.
In summary, then, we did not have wide latitude in selecting a case study because of data constraints. Nevertheless, the initial case we selected presents distinct advantages for understanding what specific characteristics – ideological or otherwise – influenced voters’ decisions. We will first analyze the effects of age, race, sex, education, and party identification in the Nevada election. Following the analysis of each of these voter characteristics, we will compare Nevada’s results with those of Arizona and Washington State to determine whether Nevada was unique or representative in the 1998 election. (A marijuana initiative was also on the Colorado ballot, but the individual-level data were not available from the Voter New Service study.)

Our study relies on the results of the 1998 Voter News Service General Election Exit Polls. The Voter News Service polls are the joint efforts of the major news networks and wire services. The exit polls are constructed from “interviews with a probability sample of voters exiting polling places around the state on election day.” Probability sampling was used to ensure that each voting precinct within the state had an equally likely chance of being selected for analysis. The precincts were later weighted to ensure that demographic variations among precincts remained representative of the state as a whole. Finally, “within each precinct, voters were sampled systematically throughout the voting day at a rate that gave all voters in a precinct the same chance of being interviewed.”

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78 This study, number 2780, was made available through the Inter-university Consortium for Political and Social Research at the University of Michigan.
79 “VNS General Election Polls,” 20.
80 “VNS General Election Polls,” 20.
other steps taken by the Voter News Service, we are confident that their data represent the decisions made by all of the state’s voters on Tuesday, November 3, 1998.

The exit polls conducted by the Voter News Service are helpful for a number of reasons. Most importantly, unlike aggregate data that only details the final outcomes of different ballot measures, exit polls give researchers an opportunity to examine individual-level decisions. For example, aggregate data may tell us that Proposition A garnered 55% of the vote and that a majority of the state’s residents reelected Candidate B, but it provides researchers with few useful tools to study a possible relationship between A and B. Exit poll results, on the other hand, give researchers information on how individuals voted, and this information is combined with background facts on voters. The coupling of individual decisions and voter characteristics permits researchers to test the existence of possible relationships. In the previous example, then, exit poll results would allow an investigator to determine whether voters who supported Proposition A were also more likely to support Candidate B.

There are, of course, disadvantages to using exit polls. To continue our example, exit poll data might demonstrate a relationship between Proposition A and Candidate B, but we cannot make a claim of causality on this alone. Because exit poll analysis is not experimental, we are unable to prove the antecedents of the relationship and therefore may not argue that voters supported Proposition A because they reelected Candidate B. Exit polls also require the voter to respond within a
narrow range of replies. Little room is available for open-ended answers that may more richly describe the contextual elements that precipitated a voter’s electoral decisions. Responses elicited from the voter are constrained by which questions and corresponding multiple-choice answers are included and excluded from the survey.

In addition to the theoretical drawbacks of exit polls, there are also four main sources of error to which exit polls are susceptible. Using Robert M. Groves’ classification, Daniel M. Merkle and Murray Edelman examine errors in exit polls due to “sampling error, nonresponse error, coverage error, and measurement error.”

It is beyond the scope of this paper to do little more than mention these sources of error, but we should note that it behooves both designers and users of exit polls to keep in mind the possible limitations of exit poll data. For example, sampling error is typically greater in exit polls than with simple random sampling because some voter characteristics tend to be clustered. For a sample size of 1,000, simple random sampling yields an error of 3.1%; exit poll data, on the other hand, produce an error of 4.0%. Selections of polling places may over- or underestimate specific voter characteristics and convey a distorted view of the electorate and even the election results. Similarly, users of exit polls may encounter coverage errors if a significant portion of the voting public voted early through absentee ballots, or if voters who cast ballots early were qualitatively different from the general electorate sampled at the

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polling places. In either case, the exit poll data would fail to accurately reflect the behavior of all voters.

However, in spite of these theoretical and methodological limitations, exit polls remain a powerful analytical tool. They permit researchers to determine the presence or absence of correlation among conditions. This is enough for researchers to propose what sorts of relationships do and do not exist. Explaining why certain relationships are found involves deeper analysis and more conjecture – for which exit polls are ill suited. Yet, knowing what the connections are is a powerful beginning to understanding voting behavior.

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CHAPTER V

ANALYSIS I: VOTER DATA

For these reasons, we selected the Voter News Service exit polls to first examine the 1998 medicinal marijuana initiative in Nevada and later in Washington and Arizona. The Nevada survey is reprinted in whole in Appendix A, but we will highlight the questions with which we are most interested. A total of 1,014 Nevadan voters were interviewed for this study. Arizona’s questionnaire garnered 1,160 responses, and the data for Washington were based on 1,526 respondents. Nevada’s survey consisted of twenty questions, but it differed only minimally from the questionnaires used in Arizona and Washington with respect to state-specific officials and issues. All respondents were asked about their gender, racial background, age, level of education, financial status, how they voted in some of the state and national elections, and their opinions on different issues including the Clinton/Lewinsky affair. For example, in addition to asking voters for whom they voted in the U.S. Senator and gubernatorial elections, they were also asked if specific issues or their opinion of President Clinton influenced their decisions. In short, despite the survey’s brevity, it covers a wide range of topics that tap into potential determinants of voting behavior.

To help uncover the factors most closely linked to support or opposition to medicinal marijuana, we ran a bivariate analysis of each question with respect to Question 9 (Q9), Nevada’s medicinal marijuana initiative. We also performed
identical bivariate analyses of Q9’s equivalents on the Arizona (Proposition 300) and Washington (Initiative 692) surveys.\textsuperscript{84} We suspected that ideology and partisanship would be strongly related to voters’ attitudes toward medicinal marijuana, and the evidence seems to support this for all three states. Yet, we were surprised to discover that factors other researchers have found to be important – age, sex, race, class, and especially education – played a relatively minor role in influencing attitudes toward medicinal marijuana in Nevada, Arizona, and Washington. (Data tables for each of these states are included in Appendix B.) A second round of analysis was also run to determine whether marijuana support was influenced by opinions of Clinton as a person, independent of party identification. Similarly, we attempted to isolate party ID in order to examine the relationship between senatorial votes and medicinal marijuana attitudes. The results of these analyses were neither as clear-cut nor as statistically significant as the simpler bivariate analyses run earlier. A more thorough, individual analysis follows.

Before proceeding, however, it should be noted that while a bivariate analysis was performed for each survey question with respect to Question 9 (or its state-specific equivalent), the following discussion includes only those factors we initially thought might be, or actually were, most influential in shaping voting behavior. Thus, our analysis looks primarily at the effects of age, race, sex, education, and party identification on support for medicinal marijuana. A meticulous examination of each

\textsuperscript{84} Dr. John Clark helped run these analyses.
survey question’s relationship to medicinal marijuana would be both unwarranted and as well as exceed the scope of this paper.

Bivariate Analysis 1: Effects of Age on Q9 Support

In the first round, we examined whether a voter’s age influenced her attitudes toward medicinal marijuana. We suspected that as most voters aged, they would become increasingly conservative on social issues and would be less likely to support “liberal” policies like medicinal marijuana. However, the data do not generally appear to support this hypothesis. In keeping with our assumption, the group that supported Nevada’s Q9 the least were those voters aged 65 and over. However, this group still approved of the measure by 54%. Predictably, Q9 found its greatest support among voters between the ages of 18 and 24 with nearly 77% approving the initiative, generating a difference in support between the youngest and oldest voters of 22.8%. While this is a considerable margin, the data for the remaining age groups do not seem to show a trend towards increasing or decreasing social conservatism. Support for Q9 remained fairly constant among advancing age groups with most support rates ranging from the high 50s to the mid 60s.

Interestingly, the greatest change between any two consecutive age cohorts again involved voters aged 18 to 24. Support for medicinal marijuana among the next group, aged 25-29, saw the greatest consecutive drop in support to approximately 59%. It is difficult to say with any certainty what caused this 18 percent decline. It could be due to increased social conservatism by young parents in this category. Or,
it may simply be a consequence of the unusually high support found among the youngest voters. However, the relatively small sample sizes of the first two age categories with respect to other voters counsels against excessive interpretation. Regardless, there was no clear relationship between advancing age and support for medicinal marijuana.

In this respect, Nevada was by no means unique in the 1998 election. The age of a voter also failed to appreciably influence voter attitudes toward medicinal marijuana in Arizona. Because of the negative wording of Arizona's referendum, that state's voters registered support for medicinal marijuana by voting *against* Proposition 300. Except for the group of 40-44 year-olds, voters of all ages supported medicinal marijuana by a clear majority. Those least likely to oppose Proposition 300 were in their early to mid-40s, but even 50% of that group remained in favor of medicinal marijuana. All other age categories, however, were decidedly opposed to Prop 300. Close scrutiny of the effects of age on medicinal marijuana support in Arizona reveals that despite the absence of some of the trends observed among Nevada's age groups, a striking similarity remains: the age of the voter exerted minimal influence in shaping voters' attitudes toward Prop 300.

Likewise, the age of the voter did not seem to explain Washington voters' support for Initiative 692 – the legislation that authorized the medicinal use of marijuana. As in Nevada, Washington voters aged 65 and over confirmed our initial suspicion by supporting medicinal marijuana legislation the least. Unlike Nevada, however, a majority of Washington's senior citizens actually opposed 1692. Less
than 45% voted in favor of medicinal marijuana, but the level of support among this
group still exceeded our early speculations. However, all other age groups in
Washington clearly supported Initiative 692 with percentages of support failing to
ascribe to any apparent pattern. In other words, except for Washington’s oldest
voters, an 18 year-old voter was no more likely to support I692 than a 39 year-old, or
a 44 year-old to oppose medicinal marijuana than a 60 year-old. In short, voter age
failed to demonstrate any discernable influence upon medicinal marijuana support in
Washington.

Finally, the statistical significance of the bivariate analysis of age and
medicinal marijuana support for Nevada and Washington should be noted. Those
states’ Pearson Chi-Square values were statistically significant at the 0.026 and 0.000
levels, respectively – well under the 0.05 threshold. This would lead us to think that
the results of these analyses were not due to chance. However, because the age of the
voter is an ordinal variable – unlike sex, race, or party ID which are nominal – then it
is helpful to consider an additional measure of statistical significance. For analyses
involving ordinal variables, Gamma is a useful statistical tool. As with Pearson Chi-
Square values, Gamma values with significance levels below 0.05 are considered
statistically significant. The Gamma value for Nevada’s analysis was 0.14 (p =
0.002). Washington’s Gamma was 0.15 (p = 0.000). Thus, with the significance
levels of the Gamma and Pearson Chi-Square coefficients under 0.05, we consider
Nevada and Washington’s analyses to be statistically relevant.
The Pearson Chi-Square value for Arizona, on the other hand, had a significance level in excess of 0.05 by a narrow margin, and as such, we hesitate to draw too much from its results. Likewise, its Gamma value was only \(-0.08\) (\(p = 0.062\)). In any case, analysis of voters’ ages seems to provide only limited support for our initial assumption that age may be a predictive variable. Nearly all age groups in all three states supported medicinal marijuana while defying any particular pattern. In the hopes of finding a more powerful explanatory variable, then, we now turn to two other potential sources of influence — the sex and race of the voter.

Bivariate Analysis 2: Effects of Race on Q9 Support

Before conducting our analyses, we were unsure how the race of a voter would influence attitudes toward medicinal marijuana. Some studies have found a link between community leadership and minority political participation, and conventional wisdom suggests that minorities may be more inclined to support left-leaning policies. Yet, more studies are needed to determine whether this is indeed the case and if so, what sorts of issues garner minority support. More importantly, medicinal marijuana is very much unlike other social policies, and this further confounds conventional wisdom. Unlike welfare policy, for example, where support or opposition may subsume racial components, medicinal marijuana is unique in that it appears to have few, if any, racial linkages. Furthermore, although medicinal marijuana centers on a currently illicit substance, this issue is rarely associated with a
particular ethnic or minority group, as have other drugs. For example, recreational marijuana use and the practice of smoking opium in the early twentieth century were frequently associated with Mexican and Chinese immigrant laborers, respectively. Likewise, the crack epidemic raging at that century’s conclusion was often framed as a problem confined to inner-city blacks. Yet, the issue of medicinal marijuana has largely avoided similar racial stereotyping, and our bivariate analysis seems demonstrate that medicinal marijuana is definitely not a “black or white thing,” or, for that matter, any other racial group’s pet project.

First, there was little change in support for Q9 among whites, blacks, Hispanics, Asians, or “others” in Nevada. Support among whites, blacks, and Hispanics was especially close to the state average of approximately 63%. Asians were least inclined to support Q9 with 56% voting in favor, and those who self-identified as others were most supportive with nearly 74% voting in support of the initiative. However, these two samples were significantly smaller than the other racial groups represented, suggesting that these percentages may be insignificant. Nevada’s most numerous groups – whites, blacks, and Hispanics – favored medicinal marijuana with surprising similarity, the greatest difference in support being a margin of less than seven percentage points.

The story was much the same for Washington and Arizona voters as well. With less than 48% voting in favor of Washington’s I692, Asians were again least

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likely to endorse the marijuana initiative. Likewise, less than a third of Asians living in Arizona supported medicinal marijuana. However, because the sample of Asian voters in all three states was relatively small, we refrain from unwarranted speculation about these particular results. Support also dipped among Arizona’s Hispanic population, but the other groups in Washington and Arizona responded to medicinal marijuana much as they had in Nevada. Voters responded positively to the state marijuana initiatives, and except for Asians, they did so regardless of race. It appears, then, race exerted little to no effect upon voting behavior.

The Pearson Chi-Square significance levels for the effects of race on Q9 and I692 support in Nevada and Washington were 0.646 and 0.697, respectively – well over the standard 0.05 limit. This means that we cannot disprove the null hypothesis: there is no evidence to support a racial component for medicinal marijuana voting in the 1998 Nevada and Washington elections. Arizona’s Chi-Square significance level was a more respectable 0.094, but we still have good reason to suspect that its results may have been due to chance. Thus, our bivariate analyses fail to demonstrate any substantial difference in voting patterns among different racial groups. As such, all three states followed the same story line – the race of a voter was largely unimportant in predicting how he was likely to vote on medicinal marijuana legislation.

Bivariate Analysis 3: Effects of Sex on Q9 Support

As with race, we were equally unsure whether the sex of a voter would influence medicinal marijuana support. Conventional wisdom suggests that women
are more likely to pursue liberal social policies, but as with race, this requires further study. Because of the uniqueness of medicinal marijuana, we did not automatically assume that women would support Q9 or its state counterparts in the same manner that they reliably support education in greater numbers. Indeed, our reluctance to suggest any substantial difference between male and female voters was well conceived. Similar to the results of racial influences on marijuana support, there was negligible difference between men’s support for Q9 at 61.2% and women’s support at 64.9%. Moreover, at 0.232, the Pearson Chi-Square significance level was greater than 0.05, meaning that we cannot conclude that these observed differences are not simply due to chance. Thus, as with race, there does not appear to be any evidence of gender-influenced voting in Nevada.

To determine whether Nevada was representative of other states or whether its men and women shared a particularly unique pattern of convergent voting, we also looked at how the sexes voted on Washington and Arizona’s medicinal marijuana initiatives. Unsurprisingly, the results changed little. In Washington, only two tenths of one percentage point distinguished the women from the men, with over 59% of each group supporting I692. Likewise, only four tenths of one percent separated the men and women of Arizona. Approximately 57% of each sex opposed the Arizona legislature’s Proposition 300, and while 0.40% more women opposed Prop 300 than did men, this hardly seems to qualify as an affirmation of women’s liberalness. It seems, then, that regardless of the state, voters supported and opposed medicinal marijuana irrespective of gender. As with Nevada, Washington and Arizona’s
Pearson Chi-Square significance levels rose above 0.05. Thus, we cannot reject the null hypothesis that gender was not a predictive variable for medicinal marijuana voting in the 1998 election. As such, we presently turn to our fourth possibility – a variable regularly cited in studies of voting behavior.

Bivariate Analysis 4: Effects of Education on Q9 Support

Countless reports have concluded that education is an essential variable in explaining voting behavior. Researchers have argued over the ways in which education influences voting decisions, but most have contended that its effects cannot be ignored. Whether it is related to ideology,\textsuperscript{87} sophistication,\textsuperscript{88} or voter turnout,\textsuperscript{89} the literature has regularly emphasized the significance of education as an explanatory variable. With this in mind, we expected a strong pattern to emerge when we ran a bivariate analysis of the level of educational attainment and voter support for marijuana initiatives. For example, we thought that an increase in educational attainment might correspond to an increase in support for medicinal marijuana. We were surprised to discover, then, that as Figure 1 illustrates, the data analyses suggested no clear and consistent pattern.

For each category – no high school diploma, high school graduate, some college, college graduate, and postgraduate – there were virtually no consistent


differences in levels of support for medicinal marijuana in Nevada, Arizona, and Washington. In Nevada, the most highly educated and the least educated showed roughly the same amount of support. Those having no high school diploma were only four percent more likely to support Q9 than those with postgraduate educations.

![Percentage of Support](image)

Figure 1. Medicinal Marijuana Support by Education.

The rest of Nevada’s voters – those falling within these two extremes – also hovered near the statewide average of the 63rd or 64th percentile. Thus, support for Q9 was remarkably uniform, neither increasing nor decreasing with the education of the voter. Furthermore, the Chi-Square significance for this analysis exceeded 0.05 with a value of 0.953. Yet, as with age, we must also look at the Gamma value because the education variable uses ordered categories. With a Gamma of 0.03 (p =

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0.608), we have no evidence that these results are not statistically insignificant.
Unable to reject the null hypothesis, we must conclude that the level of education a
Nevadan voter received did not substantially influence her attitudes toward medicinal
marijuana in this election.

Education also failed to explain support for medicinal marijuana in Arizona
and Washington. As Figure 1 depicts, voters with postgraduate educations in both of
these states were most likely to favor the marijuana initiative, but this increased
likelihood was only marginal. For example, 61.6% of Arizona’s postgraduate voters
opposed Proposition 300, but this was only 6.0% more than those without a high
school education and merely 2.4% more than voters with some college experience.
Regardless, because of this state’s low Gamma value of 0.04 (p = 0.423), we have
little confidence that these results were not due to chance.

In Washington, 65.8% of postgraduate voters supported Initiative 692, but this
was only 4.1% more than voters without a high school education.\(^9^0\) Interestingly, less
than 52% of Washington voters with only a high school diploma supported 1692,
making this group the least likely of all three states to favor medicinal marijuana.
However, aside from this relative outlier, Washington and Arizona voters endorsed
medicinal marijuana with unmistakable similarity. We are able to place greater
confidence in Washington’s results because at 0.028, its Pearson Chi-Square
significance level remained acceptable. More importantly, its Gamma value was -
0.12 (p = 0.003). Yet, this does not alter the fact that we failed to observe a clear link

\(^{90}\) The least educated group comprised only 3.5% of Washington voters.
between education and I692 support. Thus, because a consistent relationship between
education and marijuana support failed to emerge from any of the three states, we
must again accept the null hypothesis: education level cannot explain medicinal
marijuana voting behavior in the 1998 state elections. As such, we turn to our last
variable – party identification – in the hopes of detecting some effects upon medicinal
marijuana support.

Bivariate Analysis 5: Effects of Party ID on Q9 Support

With the past four analysis results showing no evidence of any noteworthy
relationships, we arrive at party identification as a possible explanatory variable.
Party identification is arguably one of the most discussed factors in the voting
literature. It seems that no matter what the specific focus of study, most researchers
must mention party ID, if only to dismiss it as not being particularly relevant for their
purposes. For example, Niemi and Jennings looked at the influence of parents in
party ID formation,\(^9\) while Wendy Rahn and her colleagues examined the role of
partisanship in determining vote choice in candidate-centered elections.\(^2\) With the
overwhelming emphasis the field has placed on party identification, we would have
been amazed to find that it did not somehow influence support for the medicinal
marijuana initiatives as well. We suspected that party leaders and political candidates


may have seized upon the issue of medicinal marijuana and that it subsequently came
to be portrayed as a partisan issue. While the next chapter examines this possibility
more closely, we were not disappointed for a lack of differences among the parties.
For each state, bivariate analysis of the effects of party identification shows that while
many voters supported medicinal marijuana regardless of party affiliation, there were
distinct and statistically significant differences among Democrats, Republicans, and
Independents. Figure 2 below perhaps best illustrates these differences. Even a
cursory examination of Figure 2 immediately reveals that while Democrats and
Independents shared roughly equal support for medicinal marijuana in Nevada,
Arizona, and Washington, Republicans were far less inclined to endorse the
medicinal use of marijuana.

![Bar chart showing percentage of support for medicinal marijuana by party in Nevada, Arizona, and Washington.]

**Figure 2.** Medicinal Marijuana Support by Party.
For example, a remarkable 72.2% of Democrats in Nevada supported Question 9. A slim majority of Republicans also approved the measure but at a much lower rate of 53.4%. Independents also voted overwhelmingly in favor of Q9 with support nearing the 73rd percentile. Their level of support closely mirrored Democratic voters despite Democrats outnumbering Independents by a margin greater than two-to-one.93 Finally, voters who could not identify with any of these three categories, lumped together as “something else,” also supported medicinal marijuana at approximately 70%. (Because of their inconsequential turnout – a total sample size of only 137 persons for all three states – we will not examine the choices of the “something else” voters for the remainder of this analysis.)

Clearly, then, among these groups, Republicans were the least likely to favor the initiative, with barely more than half voting in the affirmative. Indeed, a margin of nearly 20% separated Republican voters from Nevada’s other political groups. On the whole, they supported medicinal marijuana but remained more conflicted than those voters identifying with other groups. Finally, the Pearson Chi-Square value reinforces the unmistakable relationship between party identification and Q9 voting. With a significance level of 0.000, we can be quite confident that the relationship between party ID and Q9 voting in Nevada was not due to chance. The evidence, then, indicates that of all the possible variables, party identification seemed to be most closely related to medicinal marijuana support in Nevada. Republican voters –

93 Of the 906 Nevadans who chose a partisan label, 345 were Democrats, 378 were Republicans, and 150 were Independents. The remaining 33 voters described themselves as “something else.”
typically considered more conservative – were less likely to favor Question 9 than their more liberal Democratic and Independent counterparts.

Moreover, the pattern of party voting in Nevada was replayed in Washington and Arizona as well. At 73.7%, Washington’s Democrats supported Initiative 692 to the same extent as Nevada’s. A majority of Democrats in Arizona also supported medicinal marijuana by voting against Proposition 300, but at 64.0%, they were somewhat less supportive than Democrats in Nevada and Washington. Likewise, Figure 1 illustrates how Republican voters in Washington and Arizona were markedly less likely to endorse medicinal marijuana, opposing marijuana in greater numbers than even in Nevada. For example, unlike Nevada, a majority of Republicans in Washington and Arizona voted against medicinal marijuana. Indeed, the particularly low amount of support among Washington’s Republicans led to that state witnessing the greatest divergence between Democratic and Republican voting. Of all three states, Washington observed 33.7% more Democrats supporting medicinal marijuana than Republican voters. Finally, the Pearson Chi-Square values for Washington and Arizona inspire equal confidence. With each state enjoying a significance level of 0.000, we are convinced that the results of our bivariate analyses are statistically significant and deserving of further examination.

Thus, a clear pattern related to party membership emerges from the choices made by voters in Arizona, Nevada, and Washington. In each of these states, Democrats and Independents endorsed medicinal marijuana in roughly equal numbers. Approximately two-thirds or more of Democrats and Independents
consistently supported the medicinal use of marijuana regardless of the state. A majority of Republicans, on the other hand, rejected marijuana in two states and managed to muster only a bare majority of support in the third. Substantial margins of 18.8%, 17.4%, and 33.7% in Nevada, Arizona, and Washington, respectively, reveal how much more Democrats supported medicinal marijuana than did Republican voters.

We are not trying to suggest, however, that simply knowing an individual’s party of choice allows us to predict with 100% accuracy that person’s position on medicinal marijuana. Because support and opposition to medicinal marijuana crossed party lines, the data instead allow us to predict whether a community of individuals is more or less likely to endorse medicinal marijuana. We can roughly determine a community’s level of support for a marijuana initiative if we know how that community voted in a party election.

As such, party identification appears to be the most important explanatory variable discussed so far. Medicinal marijuana enjoyed support by voters of all political stripes, but unambiguous and considerable differences emerged when party affiliation was considered. Possible reasons for these results will be discussed more thoroughly in the proceeding analysis of campaign effects on the medicinal marijuana initiative.

Yet, there is room for some speculation. Although medicinal marijuana is not a garden-variety partisan issue like defense, education, or taxes, it appears that many Nevadan voters interpreted it as such. Whether this was due to the efforts of party
leaders or other elites remains to be seen, but the data suggest that the role of party identification cannot be ignored. That party ID was so closely linked to marijuana support is especially intriguing because advocates of medicinal marijuana did not explicitly frame this issue in terms of party support.

Ideology and Q9 Support

Finally, analysis of voters' ideology supports our contention that party identification and its ideological underpinnings influenced how voters responded to the marijuana initiative. Nevada's voters were given the opportunity to describe themselves as liberals, moderates, or conservatives. Predictably, liberals supported medicinal marijuana overwhelmingly at 81.3%. This remarkably high degree of support among self-described liberals exceeded the Question 9 support of Democratic voters. This is likely because some voters who voted Democratic nevertheless did not consider themselves to be liberals and were consequently more reluctant to support a left-leaning marijuana proposal. When asked to identify their ideological orientation, the largest sample of voters chose the label of moderate. This group also approved of medicinal marijuana but not nearly so much as the liberals. At 66.9%, more than two-thirds of moderates approved of Question 9. Finally, and unexpectedly, the third group composed of conservative voters was the least likely to endorse the medicinal use of marijuana. With a support level of 49.5%, conservatives were evenly split along this issue. The decreasing amount of support as voters moved rightward across
the political spectrum is what we expected based upon the relationship of party identification discussed earlier.

The relationship between ideology and medicinal marijuana support was also repeated in Washington and Arizona. Washington’s liberals also endorsed their marijuana initiative, I-692, at an extremely high percentage of 82.8%. Approximately two-thirds of that state’s moderates also voted for Initiative 692. However, unlike Nevada in which conservatives were almost evenly divided by the issue, barely one-third of Washington’s conservative voters supported their medicinal marijuana proposal. Likewise, Arizona experienced the same decreasing level of support as voters became increasingly conservative, yet their results were less pronounced than those of Washington and Nevada. Instead of a 50% difference between conservatives and liberals in Washington, Arizona’s margin was only approximately 22%. In addition, at 69.2%, Arizona’s liberals were only 8.0% more likely to support medicinal marijuana than were that state’s group of moderates.

**State Races and Q9 Support**

Results from the bivariate analyses of the senatorial and gubernatorial races seem to confirm the importance of party identification for this issue. For example, in Nevada’s U.S. Senator race, nearly identical percentages as from the party ID results supported the Democratic and Republican candidates. That is, voters who chose Democrat Harry Reid for senator also approved of Q9 by 73.3%. Voters who supported Democrat Jan Laverty Jones for governor favored Q9 by 72.6%. These
levels of support for the Democratic candidates are almost the same as the 72.2% of self-identified Democrats who voted for Question 9.

Likewise, voters who chose Republican John Ensign for senator favored medicinal marijuana by only 52.3%. Voters who supported Republican Kenny Guinn for governor chose to support Question 9 by only 55.1%. Again, these levels of support for the Republican candidates are nearly identical to the 53.4% of self-identified Republicans who voted for Question 9. In short, knowing whether a community chose the Democratic or Republican senatorial candidate allows us to predict whether they were more or less likely to endorse medicinal marijuana. We should also note that this pattern continued in the senatorial and gubernatorial races of Arizona and Washington. Without going into detail, the percentage of support for a given candidate was very similar to the percentage of support for the marijuana initiative in question. For example, if two-thirds of voters backed the Democratic candidate, we can reasonably expect approximately two-thirds of Democratic voters to support medicinal marijuana.

Regardless, it appears that party identification, and to some extent, ideology, significantly affected voter attitudes toward medicinal marijuana. At this point, we cannot distinguish between the effects of party ID and ideology, but we can be reasonably confident that their influence was substantial in the 1998 Nevada general election. The next section of this paper will explore how characteristics of the medicinal marijuana campaigns influenced voter behavior on this controversial subject.
CHAPTER VI

ANALYSIS II: CAMPAIGN EFFECTS

Role of Special-Interest Groups

So central to the medicinal marijuana campaigns waged in Arizona, Nevada, and Washington, any discussion of the 1998 elections would be woefully incomplete without first examining the role special-interest groups played. Indeed, if it were not for the efforts of one interest group in particular, it is highly unlikely that medicinal marijuana would have been a public policy issue in 1998, or 1996 or 2000, for that matter. The credit (or blame) for the slew of marijuana initiatives in the past five years rests squarely on the California-based outfit known as Americans for Medical Rights. From their Santa Monica command center, this group – then operating as Californians for Medical Rights – launched California’s winning medicinal marijuana initiative in 1996.94 Today, their efforts are directly responsible for placing similar initiatives on the ballots in Alaska, Colorado, Nevada, Oregon, and Washington State, and many of the people associated with Americans for Medical Rights also led the successful fight for medicinal marijuana in Arizona.95

However, despite its suggestive name, Americans for Medical Rights is far from being a grassroots movement organized by concerned citizen-volunteers or

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spearheaded by freedom-loving physicians. On the contrary, this organization is a classic example of an extremely well funded and professionally run special-interest group seeking to change public policy. As Richard J. Ellis notes, “special interest groups...have become adept at using the initiative in states where it has become a routine part of the political process,” 96 and Americans for Medical Rights is no exception. Instead of lobbying policymakers at the federal level, Americans for Medical Rights has instigated dramatic changes in policy one state at a time by means of the direct initiative. By circumventing state legislatures and taking their cause directly to the voter, their issue is now among the plurality of other initiatives backed by special-interest groups and managed by professional campaign consultants. 97 In so doing, Americans for Medical Rights has profoundly influenced the attitudes and behavior of the most numerous “policymaker” – the average citizen.

The Powerbrokers

The journalist David Broder characterizes Americans for Medical Rights as “part of a well-coordinated and richly financed effort organized by three men who had convinced themselves that the national ‘war on drugs’ was a dreadful mistake in policy.” 98 Indeed, that this group is “richly financed” is indicated by its principal supporters. The man most frequently associated with the special-interest group is

95 David S. Broder, Democracy Derailed, 191.
Hungarian-born billionaire George Soros. As a financier and philanthropist, Soros has been both praised for his involvement in the growth of democracy in Central Europe and the former Soviet states\textsuperscript{99} and blamed for his contribution to the Asian financial crisis of the late 1990s. Regardless, Soros routinely uses his pocketbook to support his politics. Since the early 1990s, Soros has contributed well in excess of $15 million to U.S. drug-study programs.\textsuperscript{100} In addition to supporting the marijuana initiatives of Americans for Medical Rights, he also helps fund the Lindesmith Center – a New York-based drug policy center. Yet another group, the Drug Policy Foundation headquartered in Washington, D.C., also relies on financial support from George Soros. "The capacity to outspend opponents has been an important part of [his] success...in his personal fight against the federal war on drugs."\textsuperscript{101} With his ardent interest in reforming national and state drug laws and the money to support it, Mr. Soros has become a formidable force influencing the adoption of medicinal marijuana initiatives.

Soros is not alone, however. Joining the ranks of the wealthy political entrepreneurial class are billionaires Peter Lewis and John Sperling. As the head of an insurance conglomerate, Lewis has been able to bankroll the efforts of Americans for Medical Rights in several states. Likewise, John Sperling, the founder of the for-profit University of Phoenix, has used his pocketbook to "buy" ballot space in

\textsuperscript{98} David S. Broder, \textit{Democracy Derailed}, 192.  
\textsuperscript{101} Richard J. Ellis, "The States: Direct Democracy," 145.
Nevada, Washington, and Arizona, among others. Thus, from a cursory look at the chief backers of Americans for Medical Rights, it becomes clear that this special-interest group has the financial support to aggressively promote their standard of drug policy. More importantly, their efforts have not been in vain. In their desire to reform drug laws in the United States, they have focused on a vulnerable policy area and exploited it mercilessly. The result has been the sweeping approval of medicinal marijuana in a growing number of states.

**Issue Framing: Compassionate Libertarianism**

As noted at the beginning of this paper, proponents of marijuana have long argued that U.S. drug policy is inherently flawed and especially unsound with respect to marijuana. For years, marijuana advocates have expressed their disapproval of drug laws that imprison “nonviolent” marijuana users. Until the formation of Americans for Medical Rights, however, there was no organized and well-funded effort underway to systematically reform drug policy and “make drugs socially respectable.” A handful of states had experimented with limited decriminalization of marijuana, but these policies were short-lived and the absolute prohibition of the substance remained the norm. More importantly, marijuana advocates constituted only a tiny percentage of the general population. After a nearly three decade-old “drug war,” most Americans have been conditioned to distrust any substance deemed

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103 Christopher S. Wren, “Small but Forceful Coalition Works to Counter U.S. War on Drugs,” 16.
illegal or harmful by the government. For example, even during the period of heightened sympathy towards the medicinal use of marijuana beginning in the mid 1990s, 65% of Americans opposed decriminalizing the private cultivation of marijuana plants.\textsuperscript{104}

Facing such political opposition and popular suspicion, it is not surprising that Soros and his colleagues took extra care in formulating an issue that would elicit favorable voter responses. Even more importantly, if Soros' goals were to be realized, the issue would have to be one that could garner victories in states in addition to notoriously progressive California. The result, of course, was Americans for Medical Rights and their advocacy of medicinal marijuana.

The primary objective of Soros, Lewis, and Sperling has been to reform U.S. drug laws, and they have made little effort to keep this goal secret. For example, Ethan A. Nadelmann, the director of Soros' Lindesmith Center, has openly stated his hope that approval of medicinal marijuana initiatives will "help lead toward marijuana legalization."\textsuperscript{105} Where other groups have failed in the past, however, Americans for Medical Rights were able to succeed because of their careful framing of the issue. Rather than launching a full-blown assault on the U.S. drug war and thereby risk alienating the majority of voters, Americans for Medical Rights framed the issue of medicinal marijuana as being the difficult but morally virtuous choice. The desirable quality in question, and the one they have saturated their campaigns

\textsuperscript{104} Christopher S. Wren, "Small by Forceful Coalition Works to Counter U.S. War on Drugs," 16. Wren cites a poll commissioned by Ethan A. Nadelmann.

\textsuperscript{105} Christopher S. Wren, "Small but Forceful Coalition Works to Counter U.S. War on Drugs," 16.
with, is the virtue of compassion, using what columnist George F. Will describes as
“a moral theory in vogue...that...one virtue trumps all competing considerations.”

By appealing to a voter’s sense of compassion, by stressing the medical necessity,
and by defining the issue as one of individual rights, this special-interest group
beautifully framed what might otherwise be a wholly unpopular idea – that of
legalizing a psychoactive compound. In so doing, they were able to capture majority
support in nearly every state in which they waged a campaign.

Scholars of the initiative process quibble over the effects of direct democracy
and the influence of special-interest groups, but they share common ground about the
importance of issue framing in initiative elections. Discussing the utmost importance
of having a ballot title that will persuade voters to adopt a particular initiative,
Richard Ellis writes:

The critical importance of ballot titles belies the argument often made by
defenders of the initiative process that it does not really matter who places
a measure on the ballot, or where the money comes from, because it is the
citizens of the state who decide whether to vote yes or no...The trouble
with this argument is that it ignores the enormous power that is bestowed
upon the individuals or organizations that frame each issue.

Because how voters perceive a particular issue determines how they vote, special-
interest groups invest considerable resources to frame their initiatives in the most
positive light. By making extensive use of focus groups and polling, well-financed

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interest groups are able to choose the precise wording of ballot titles and campaign organizations that will best resonate with voters.\textsuperscript{108}

For example, David Magleby and Kelly Patterson recall how opposing interests in California’s Proposition 226 campaign each attempted to manipulate voter behavior by “redefining” or framing the issues. Without going into detail, supporters of Proposition 226 chose the title of “Paycheck Protection” because it “evoke[d] a positive response. Moreover, their ads stressed individual freedom in deciding whether to give money for political purposes.”\textsuperscript{109} Opponents of Proposition 226, on the other hand, framed the initiative as the meddling of out-of-state tycoons.\textsuperscript{110} By bringing to the fore peripheral issues and framing their arguments in the best possible terms, each side hoped to capitalize on the preexisting fears and biases of the voters.

It is by no accident, then, that the marijuana advocates chose the innocuous and mildly patriotic sounding name of Americans for Medical Rights to front their organization. As their campaign director Bill Zimmerman noted, “You pick the name with a view toward winning support for the organization.”\textsuperscript{111} Likewise, in press releases and advertisements, Americans for Medical Rights repeatedly stressed the medical and moral necessity of supporting medicinal marijuana. Speaking to the Las Vegas Review-Journal eight months before the November 1998 election, Dan Hart, a political consultant hired by Americans for Medical Rights, overtly characterized the issue as one of medical compassion but also hinted at its libertarian origins. “This is

\textsuperscript{108} David S. Broder, Democracy Derailed, 72.
\textsuperscript{109} David B. Magleby and Kelly D. Patterson, “Campaign Consultants and Direct Democracy,” 145.
\textsuperscript{110} David B. Magleby and Kelly D. Patterson, “Campaign Consultants and Direct Democracy,” 145.
\textsuperscript{111} Christopher S. Wren, “Small but Forceful Coalition Works to Counter U.S. War on Drugs,” 16.
an issue of compassion. The state is conservative, but also fiercely defends individual rights. “112 Another spokesman for the organization, Dan Geary, also stressed the medical necessity of Nevada’s initiative, but he explicitly denied any suggestion that the issue was merely a steppingstone to a broader assault on existing drug laws.

“Nevada voters get it. They know this is a public health issue completely unrelated to the war on drugs.”113

Yet, the most compelling evidence of Americans for Medical Rights’ attempts to frame their issue in terms of compassion, medical necessity, and individual liberty comes from one of their Nevada campaign flyers. As recounted by David Broder, the flyer read:

Ginny Kochan is a nurse. Having raised her children in the 1970s, she has always been opposed to drugs. But when her husband was dying of cancer earlier this year, she watched helplessly as he suffered, unable to gain relief from a litany of painkillers. Then, at age 74, out of desperation, he tried medical marijuana — and it worked. Now Ginny has studied Ballot Question 9 and she wants Nevadans to understand one more thing: It’s only for patients. If you’re not suffering from a debilitating illness such as cancer, AIDS, or glaucoma, then you cannot use medical marijuana.114

Thus, the available evidence illustrates the meticulous efforts made by Americans for Medical Rights to portray their issue in the most favorable terms possible. To their credit, their issue enjoyed unparalleled success at the polls. Instead of perceiving medicinal marijuana as merely the first of many attempts to overhaul existing drug policy – which it is by their own accounts – voters responded very favorably to the strains of compassion, medical necessity, and individual liberty.

Money Matters

That initiative supporters hope to frame issues in a manner that makes voters more receptive to them is only reasonable. However, the ability to shape public opinion and ultimately influence voter behavior requires an army of signature gatherers, campaign consultants, pollsters, and attorneys, in addition to radio, television, and other forms of advertising. Of course, what all these requirements for a successful initiative campaign come down to is the need for money. Those familiar with the initiative industry readily acknowledge that money is an obstacle to getting a particular initiative on the ballot. Campaign consultant Tom Hiltachk explains, “When somebody walks in [with an initiative proposal], I always ask the million-dollar question, which is, ‘Where’s your million dollars?’ It’s very difficult to qualify something for less than a million dollars.”

As with traditional candidate-centered campaigns, well-financed and professionally run initiatives are more likely to succeed than volunteer, grassroots campaigns run on shoestring budgets. On the merits, a particular initiative may be more deserving of electoral success, but if it does not have sufficient financial support, then it faces an uphill fight against better-financed opposition. “Money does not always prevail in initiative fights, but it is almost always a major – even dominant

112 Brendan Riley, “Western Voters to Decide Whether to Ease Restrictions on Pot.”
114 David S. Broder, Democracy Derailed, 196.
115 David S. Broder, Democracy Derailed, 84.
factor...To a large extent, it is only those individuals and interest groups with access to big dollars who can play..."  

Indeed, as mentioned earlier, Americans for Medical Rights certainly qualifies as an interest group with "access to big dollars." Moreover, because of the enormous legal barriers and financial costs associated with launching a competitive initiative, Americans for Medical Rights needed every dollar they could find. For example, state law in Nevada required that in order to qualify for the 1998 ballot, initiative proposals had to obtain at least 46,764 signatures from registered voters. Because a certain percentage of signatures are routinely fraudulent or from unregistered voters, it was necessary to collect thousands more than the bare minimum in order to pass scrutiny by Nevada’s Secretary of State’s office. In addition, the law contained a geographical requirement; “at least 10 percent of voters from 13 of Nevada’s 17 counties” were required to sign the petitions. With signature-gathering firms charging up to $1 per signature, merely submitting the necessary amount of petitions cost Americans for Medical Rights tens of thousands of dollars.

Final campaign-finance disclosures submitted to Nevada’s Secretary of State reveal that Nevadans for Medical Rights received $609,590 in contributions and spent $598,569 during the course of the successful initiative campaign. While nearly $600,000 is no inconsequential amount of money, it is far from being an excessive sum for a winning proposal. It is even less than the “million dollar question.” For instance, leading up to the 1998 election, special-interest groups, corporations, and

116 David S. Broder, Democracy Derailed, 163.
wealthy benefactors spent over $257 million in all statewide initiatives. The most expensive initiative campaign was waged in Nevada between rival gambling interests. Topping more than $92 million, this one campaign accounted for over one-third of all money spent on initiatives during the 1998 election cycle. Clearly, then, at a price tag of $600,000, Soros, Lewis, and Sperling got a bargain on their piece of legislation. Moreover, the $0.6 million spent by marijuana advocates overwhelmed the opposition’s paltry $40,000 bankroll. Outspending Question 9 opponents by fifteen-to-one, it is not surprising that Nevada voters responded favorably to medicinal marijuana.

Thus, a particular special-interest group was a decisive factor in the marijuana campaigns waged in Arizona, Nevada, and Washington State. We have focused primarily upon the Nevada example, but the influence of Americans for Medical Rights and the necessity of money and effective issue framing were equally important in Arizona and Washington as well. Americans for Medical Rights were able to use their substantial financial support to skillfully devise an appealing campaign. Their considerable monetary advantage also served as a weapon against potential opposition, and voters eventually perceived the issue in terms dictated by Americans for Medical Rights. In the end, cohesive opposition to medicinal marijuana failed to materialize, and medicinal marijuana was adopted in Nevada, Arizona, and Washington. It is important to note, however, that we are not implying that medicinal

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118 David S. Broder, Democracy Derailed, 163.
119 David S. Broder, Democracy Derailed, 164.
120 Brendan Riley, “Western Voters to Decide Whether to Ease Restrictions on Pot.”
marijuana succeeded only because of its larger bankroll. Richard Ellis observes that "massively outspending one's opponents...[does] not guarantee victory," but it certainly helps.\textsuperscript{121} The support of billionaires was certainly no detriment, but other factors also influenced the success of Question 9 and Initiative 692 and the resounding defeat of Proposition 300. We will discuss these factors – political and otherwise – in the concluding sections.

Political Effects

So far, this chapter has focused exclusively upon the actions and influence exerted by one group – Americans for Medical Rights. While this special-interest group exercised tremendous power in the 1998 state elections, it did not do so in a political vacuum. Indeed, just as any discussion of the elections would have been incomplete without mention of Americans for Medical Rights, so too would a discussion that failed to consider the political climate of the 1998 elections. In this section, then, we intend to briefly look at the political variables that influenced the course of the medicinal marijuana campaigns. We also intend to bridge our findings of the previous chapter – that party identification and ideology are fairly good predictive variables for medicinal marijuana voting. Having established the strong relationship between party ID and marijuana support, we expected to confirm the existence of partisan cues affecting voter choices. Yet, the available evidence for this

\textsuperscript{121} Richard J. Ellis, "The States: Direct Democracy," 145.
is mixed. Before proceeding, however, we must briefly establish the primary players involved with the 1998 state elections.

Strange Bedfellows

At the broadest level, the political climate of each state during the 1998 election cycle can be divided into two sides: those who generally supported medicinal marijuana and those who opposed the marijuana initiatives. While this distinction may be helpful for our purposes, it sheds little light on the actual players affecting the final outcomes of the elections. In other words, we presently know that medicinal marijuana was promoted by Americans for Medical Rights and supported by left-leaning Democrats and Independents. Likewise, conservatives in the Republican Party generally opposed the marijuana initiatives. What we do not know, and what this section seeks to uncover, are the specific actors on both sides of the issue. Surprisingly, coalitions on each side were not as clear-cut as we expected. While the electorate showed unmistakable differences between liberal and conservative voters and between Democrats and Republicans, the picture at the elite level told a different story. Among political elites, the issue of medicinal marijuana was more likely to cross ideological and partisan lines. Finally, we should note that as before, our examination focuses primarily upon the Nevada example, from which we make generalizations about Arizona and Washington State.

The coalition opposed to medicinal marijuana is not particularly surprising if we consider the positions of the officials. It primarily included elected state leaders,
the law enforcement community, and state and federal drug policy personnel. For Nevada, this meant that outgoing Governor Bob Miller and Attorney General Frankie Sue Del Papa both adamantly opposed Question 9. Likewise, the Nevada Highway Patrol Chief, the Clark County Sheriff, and Nevada’s drug commission all urged voters to reject medicinal marijuana. This is not especially noteworthy except that both Miller and Del Papa were high-ranking Democratic leaders whom we might have expected to view medicinal marijuana more sympathetically.

In this case, however, it appears that their state offices may have been a greater influence than any personal ideological leanings. That is, we ought to have expected state leaders to generally oppose any medicinal initiative despite their party affiliation or ideological orientation. As we mentioned in Chapter 2, most state officials are unlikely to sponsor bills that violate existing federal law. Moreover, most voters still expect their elected officials to be “tough on drugs.” As Mark A. R. Kleiman, a professor of public policy at the University of California at Los Angeles stated, “When you look at all these medical marijuana initiatives, they pass by big margins, but the governors and legislators go the other way...A legislator who votes for medical marijuana could lose votes from people who voted for medical marijuana.” 122 Thus, it should come as no surprise that political necessity probably dissuaded at least some leaders from publicly defending Question 9.

Unlike opponents of Q9, however, advocates of medical marijuana were a decidedly more eclectic group comprised of many ideological and partisan

122 Christopher S. Wren, “Small but Forceful Coalition Works to Counter U.S. War on Drugs,” 16.
persuasions. Journalist Christopher Wren has colorfully described these supporters as a “coalition of libertarians, liberals, humanitarians and hedonists.”\(^{123}\) Indeed, his description does not appear to be far off the mark. Libertarians who supported medical marijuana included recurrent Libertarian presidential candidate Harry Browne as well as Aaron Russo, the former movie producer and unsuccessful Republican gubernatorial candidate. Likewise, George Soros’ Lindesmith Center headed by Ethan Nadelmann has been a constant source of libertarian sentiment aimed at reforming U.S. drug laws.

Liberal advocates of Question 9 and the other medicinal marijuana initiatives included the American Civil Liberties Union whose director, Ira Glasser, is also the chairman of Soros’ Drug Policy Foundation. Glasser described the A.C.L.U.’s position as “basically that criminal prohibition is inappropriate in matters that involve a person’s own behavior.”\(^{124}\) Humanitarian supporters consisted of physicians who had personally witnessed the devastating effects of AIDS and cancer and saw marijuana as an untapped resource to combat the incapacitating nausea associated with convention treatments of those diseases.\(^{125}\) Finally, the hedonists in the group included NORML, the National Organization for the Reform of Marijuana Laws. These self-avowed marijuana smokers support the decriminalization of marijuana for medicinal as well for recreational purposes.\(^{126}\)

\(^{123}\) Christopher S. Wren, “Small but Forceful Coalition Works to Counter U.S. War on Drugs,” 16.
\(^{124}\) Christopher S. Wren, “Small but Forceful Coalition Works to Counter U.S. War on Drugs,” 16.
\(^{125}\) David S. Broder, Democracy Derailed, 191.
\(^{126}\) Christopher S. Wren, “Small but Forceful Coalition Works to Counter U.S. War on Drugs,” 16.
In Arizona, both marijuana advocates and opponents were able to enlist the support of past public officials from both parties. Marvin S. Cohen, President Carter’s chairman of the Civil Aeronautics Board came out in support of medicinal marijuana. So did John Norton, Ronald Regan’s deputy secretary of agriculture. Yet, one of the most notable advocates of medicinal marijuana was a recent convert. Dennis DeConcini, an ex-U.S. Senator from the state and a former drug policy hawk, underwent an absolute conversion and publicly declared his support for the medical use of marijuana.\textsuperscript{127} Opponents of marijuana in Arizona never formed a similarly well-organized campaign, but there were also able to recruit the nominal support of former Presidents Gerald Ford, Jimmy Carter, and George Bush.\textsuperscript{128} Their efforts amounted to little, however, and voters approved of the marijuana proposal by a resounding margin.

Media Effects

Having sketched the broad sources of support and opposition to medicinal marijuana, we find that elites’ attitudes were not necessarily prescribed by party membership or the traditional rubrics of conservatism and liberalism. For a variety of reasons, elites often appeared to take positions on medical marijuana independent of party affiliation or the crude yardstick of the liberal-conservative spectrum. What we have largely ignored, however, are how candidates for office responded to the issue of medicinal marijuana. In fact, many of the candidates themselves sidestepped

\textsuperscript{127} David S. Broder, \textit{Democracy Derailed}, 193.
this issue during their campaigns. For example, senatorial candidates Harry Reid and John Ensign did not devote any significant attention to medicinal marijuana. Likewise, gubernatorial contenders Jan Laverty Jones and Kenny Guinn focused on other issues of concern to Nevadan voters. This absence of identifiable support or opposition surprises us because of the strong relationship between party ID and marijuana voting.

Because of the clearly partisan manner in which voters went to the polls for the marijuana initiatives, we expected to find evidence of partisan cues by candidates campaigning for office at the time. Yet, as we have already recounted, those elites coming out in support or opposition to medical marijuana were generally former public servants or not even in the public service sector at all. Moreover, these individuals appeared to take policy stands independently of their party membership. In short, the marijuana campaigns waged in Nevada, Arizona, and Washington exhibited a remarkable absence of clear party labels. How, then, did voters demonstrate partisan voting with respect to medicinal marijuana while political candidates tended to focus on other issues and leave the medicinal marijuana question for others to handle? We tentatively suggest that these results were due to mass media effects, the role of money, and ideology.

Richard Ellis notes that “unlike in candidate elections, in which voters are often guided by party labels, voters in initiative elections must rely to a greater extent

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upon the mass media for information." Indeed, Americans for Medical Rights made explicit efforts throughout the 1998 campaign to present their initiative as a nonpartisan issue. They did not want voters to interpret their proposal as being sponsored by any particular party. In so doing, they hoped to capture the largest segment of the population possible. Because voters were largely dependent upon the mass media for information instead of party leaders or office-seekers, they were also very open to the campaign machine run by Americans for Medical Rights. With their superior organization and funding, marijuana advocates were able to drown out the opposition, and voters were subsequently exposed to only one side of the debate for the duration of the campaign.

Magleby and Patterson also recognize the enormous power wielded by special interest groups during initiative campaigns and how that power is frequently translated through the media without the moderation of political parties and candidates. Echoing Ellis’ sentiments, Magleby and Patterson state that “initiatives are rarely defined in partisan terms and, except for measures expressly sponsored by candidates, parties and candidates often avoid becoming identified with initiatives.” Certainly, this seemed to be the case with the 1998 elections. Candidates surely recognized the vast popularity of the marijuana initiatives among their constituents. By coming down on either side of the issue, however, they risked being perceived as either soft on drugs or uncompromising to the plight of the sick and dying. Accordingly, by appearing as disinterested parties, they hoped to not be

smeared by any potential fallout from the marijuana initiatives. Only those officials whose elected positions required them to take a stand and those who had nothing to lose like Aaron Russo were willing to identify themselves with a particular side.

In addition, the important of ideology cannot be overlooked. As Magleby states, "voting on ballot propositions appears to be more structured by party and ideology than other factors, but each measure has a marked random and ad hoc nature." With this mind, we argue that many voters supported medicinal marijuana because of the effective campaign run by Americans for Medical Rights – hence, the high levels of support among Democrats, Independents, and Republicans. However, some voters nevertheless perceived medicinal marijuana in stark ideological terms. This is especially intriguing because of the absence of partisan cues and because traditional measures of ideology do not necessarily align neatly along support and opposition to medical marijuana. For instance, an extreme liberal and an equally extreme libertarian-conservative might each support a marijuana initiative but for very different reasons. Unfortunately, the data on which we have based this paper do not permit us to determine exactly why a particular voter supported or opposed medical marijuana and whether their reasons were ideologically based or otherwise. For example, some voters may have perceived the issue in terms of "law and order" while others acted according to the perceived moral stands of the major parties. In the final analysis, we can only make reasonable surmises from the information available, and the information available seems to point to the relevance of

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130 David B. Magleby and Kelly D. Patterson, "Campaign Consultants and Direct Democracy," 149.
partisanship and ideology as well as the other factors discussed earlier. The proportional influence of each variable, however, remains to be seen.

CHAPTER VII

CONCLUSION

As stated at the opening of this paper, the primary objective of this study was to reveal the voter characteristics that influenced attitudes toward medicinal marijuana in the 1998 state elections. To that end, we began with a brief examination of the history and continuing legacy of illicit drugs in the United States. This was followed by a similar recounting of the direct initiative and its use by groups hoping to enact favored pieces of legislation. We considered the institutional effects of the initiative process and reviewed the literature for the benefits and disadvantages inherent to initiative use. However, the primary focus of this paper has been the medicinal marijuana initiatives that Nevada, Arizona, and Washington voters faced during the 1998 election. We sought to determine the existence of any relationship between voter characteristics and voting behavior.

The first five characteristics we examined were the age, race, sex, education, and party identification of the voter. Additionally, we considered the influence of ideology. After conducting bivariate analyses of each characteristic with respect to medical marijuana voting, we were surprised to discover that only party ID and ideology were consistently predictive of the marijuana vote for all three states. Unexpectedly, there were no significant and consistent differences among voters by age, race, sex, or education. We were especially surprised by the fact that the level of
educational attainment did not correlate in any meaningful way to the level of support for medicinal marijuana. Only party identification and ideology were sufficiently predictive of a voter's marijuana vote. Although there were minor variations across states, Democrats and Independents were generally far more supportive of medicinal marijuana than were Republican voters. Correspondingly, self-identified liberals overwhelmingly advocated the medical use of marijuana. Approximately two-thirds of moderates also expressed support, but lower numbers of conservative voters registered support in Nevada, Arizona, and Washington.

With this in mind, we expected to find evidence of partisan-tinged marijuana campaigns. We suspected that party leaders and candidates for office may have used the controversial initiatives to their advantage by either publicly declaring their support or opposition. Yet, we were again surprised to find that most candidates largely avoided the subject and instead focused on other issues of concern to voters. It seems that most candidates preferred to remain detached from the polarizing issue in order to garner the greatest amount of electoral support.

Accordingly, we examined other possible factors that may have influenced attitudes toward medicinal marijuana and voting behavior. Arguably the most decisive factor of the marijuana campaigns was the special-interest group that spearheaded the fight to permit the medical use of marijuana. As an extremely well-financed and professionally organized interest group, Americans for Medical Rights were able to place their initiative on the ballot in numerous states and achieve repeated electoral success. Because of the enormous power exerted by Americans for
Medical Rights during the 1998 elections, we examined their reasons for supporting medicinal marijuana and the methods they chose to transform it from a relatively unheard of issue into a stunningly successful ballot question.

We found that Americans for Medical Rights was largely the creation of George Soros and his billionaire political activists. Using Americans for Medical Rights and the issue of medicinal marijuana, they have begun a protracted effort to vigorously reform this country’s “war on drugs.” Whether they will be ultimately successful remains to be seen, for the primary obstacle to the enactment of current medical marijuana laws as well as future marijuana initiatives is currently the U.S. Supreme Court. As this paper was nearing completion, the Supreme Court rendered its verdict in the federal government’s lawsuit against an Oakland, California “cannabis cooperative.”

The Supreme Court unanimously ruled that the cannabis club was operating illegally, despite state laws to the contrary, and that it must cease all activities immediately. This ruling has been widely interpreted as giving “the government the right to close...large-scale distribution centers,” but its potential impact upon other methods of acquiring medical marijuana is far from clear-cut. The Court rejected the medical necessity defense maintained by the Oakland Cannabis Buyers’ Cooperative, but the “decision left some wiggle room for future efforts to allow medical uses” of the substance. The Supreme Court’s ruling disappointed advocates of medicinal marijuana, but they can be heartened by the knowledge that the Court did not

explicitly prohibit all medicinal marijuana programs. Thus, it is likely that Americans for Medical Rights will continue their crusade for medical marijuana, but whether their electoral victories will produce substantive changes in U.S. drug policy remains to be seen.

Finally, we attempted to highlight the salience of medicinal marijuana in the contemporary political arena as well as place it in a larger historical context, but we realize that much future research remains to be accomplished. Most importantly, future research must seek to more concretely distinguish between the effects of party identification and ideology. We argue that ideology likely influenced party ID as well as some marijuana voting, but more evidence of this needs to be uncovered before we can state as much with any certainty. Likewise, this paper briefly looked at the role of elites in shaping voter attitudes toward medicinal marijuana, but this area of research requires much more extensive study. The effects of party leaders, elected officials, as well as newspaper endorsements should be systematically and rigorously examined. For example, we know that the Las Vegas Review-Journal endorsed Question 9 in the 1998 election, but we do not know to what extent that influenced voter behavior. Future research should look at the results of the marijuana campaigns in the 2000 elections. Whether the same trends we observed in the 1998 elections also emerged two years later offers ample investigative opportunity.

In short, we hoped this paper answered the question of how voters responded to the medicinal marijuana initiatives they were exposed to in 1998. We highlighted

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the areas we considered to be most influential, but we are certain that our word will not be the last. Indeed, we have largely ignored some of the most fundamental normative questions underlying this issue. For instance, what are the implications for our form of representative democracy when bipartisan majorities repeatedly circumvent elected, deliberative institutions in favor of the initiative process? No matter what the answer to that question might be, medicinal marijuana is far too popular and its supporters are far too motivated for it to disappear from the public agenda for the immediate future.

Appendix A

1998 VNS Nevada Questionnaire
[A] Are you:
1 □ Male 2 □ Female

[B] Are you:
1 □ White 4 □ Asian
2 □ Black 5 □ Other
3 □ Hispanic/Latino

[C] In today's election for U.S. Senator, did you just vote for:
1 □ Harry Reid (Dem)
2 □ John Ensign (Rep)
9 □ Other: Who?
3 □ None of These Candidates
0 □ Did not vote for U.S. Senator

[D] Which one issue matter most in deciding how you voted for U.S. Senator? (Check only one)
1 □ Nuclear waste
2 □ Social Security
3 □ Crime/Drugs
4 □ The Clinton/Lewinsky matter
5 □ Taxes
6 □ Education
7 □ Economy/Jobs

[E] Do you approve or disapprove of the way Bill Clinton is handling his job as President?
1 □ Approve 2 □ Disapprove

[F] To which age group do you belong?
1 □ 18-24 4 □ 40-44 7 □ 60-64
2 □ 25-29 5 □ 45-49 8 □ 65 or over
3 □ 30-39 6 □ 50-59

[G] In today's election for Governor, did you just vote for:
1 □ Jan Laverty Jones (Dem)
2 □ Kenny Guinn (Rep)
9 □ Other: Who?
3 □ None of These Candidates
0 □ Did not vote for Governor

[H] How did you vote on Question 9, which allows adults, on the advice of a physician, to use marijuana for medical purposes?
1 □ Yes
2 □ No
0 □ Did not vote on Question 9

[I] Do you approve or disapprove of the way Congress is handling its job?
1 □ Approve
2 □ Disapprove

[J] Is your opinion of Bill Clinton as a person?
1 □ Favorable
2 □ Unfavorable
[K] What was the last grade of school you completed?
1 □ Did not complete high school
2 □ High school graduate
3 □ Some college, but no degree
4 □ College graduate
5 □ Postgraduate study

[L] No matter how you voted today, do you usually think of yourself as a:
1 □ Democrat
2 □ Republican
3 □ Independent
4 □ Something else

[M] In the 1996 election for President, did you vote for:
1 □ Bill Clinton (Dem)
2 □ Bob Dole (Rep)
3 □ Ross Perot (Ref)
4 □ Someone else
5 □ Did not vote for President in 1996

[N] On most political matters, do you consider yourself:
1 □ Liberal
2 □ Moderate
3 □ Conservative

[O] Compared to two years ago, is your family's financial situation:
1 □ Better today
2 □ Worse today
3 □ About the same

[P] Was one reason for your vote for Congress today:
1 □ To express support for Bill Clinton
2 □ To express opposition to Bill Clinton
3 □ Clinton was not a factor

[Q] Should Congress impeach Bill Clinton and remove him from office?
1 □ Yes
2 □ No

[R] Should Bill Clinton resign from office?
1 □ Yes
2 □ No

[S] Should Congress censure Bill Clinton?
1 □ Yes
2 □ No

[T] 1997 total family income:
1 □ Under $15,000
2 □ $15,000-$29,999
3 □ $30,000-$49,999
4 □ $50,000-$74,999
5 □ $75,000-$99,999
6 □ $100,000 or more
Appendix B

Initiative Support Data for Nevada, Arizona, and Washington
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**Washington**

Support Initiative 692

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By Education

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