



State of Connecticut

HOUSE OF REPRESENTATIVES STATE CAPITOL

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March 22, 2019 * 10:00am * 2E

Testimony in opposition of Raised HB 7371 AN ACT CONCERNING THE RETAIL SALE OF CANNABIS.

Dear Chairmen Fonfara and D'Agostino, Ranking Member Witkos, and distinguished members of the General Law Committee:

I appreciate having the opportunity to submit testimony in opposition of Raised HB 7371 on your public hearing agenda today.

The arguments made by proponents for allowing the retail distribution of marijuana are manifold: the actions of neighboring states -other states are doing it and we don't want to miss the boat; criminal justice reform – minorities were/are more likely to be arrested and prosecuted for possession of small quantities of marijuana and that is unjust; job creation – there are thousands of jobs that would result in a new industry; and revenue – the state will make millions of dollars from taxation and the black market will be eliminated.

Let's take these arguments in order. Other states' decision to go down this path is not a valid reason for Connecticut to follow suit. As my grandmother used to say, "Just because your best friend jumped off the Brooklyn Bridge, that is no reason to do it yourself." As legalization has played out across the country, the negative effects have become starkly apparent. Since 2012, when the retail sale of marijuana became legal, Colorado has seen violent crime rise by 20 percent, compared with a decrease of about 1 percent in violent crime nationally over the same period. In Alaska, since legalization in 2014, violent crime is up 30 percent, while it has jumped 21 percent in Oregon. Proponents of legalization will argue that correlation is not causation; that is true, but do we want to take that chance? In addition, research increasingly shows that frequent and persistent marijuana use, rather than being benign or even beneficial, has serious long-term ill effects on users, and most dramatically on adolescents.

Approximately 10-15% of the population is prone to addictive disorders (http://americanaddictioncenters.org/rehab_guide/addiction-statistics/) and of these, "approximately 4.2 million Americans (over the age of 11) battled a marijuana use disorder in 2014...marijuana abuse disorders accounted for the third highest number of treatment admissions (18%) to substance abuse programs in 2010."

(www.samhsa.gov/data/sites/default/files/2010_Treatment_Episode_Data_Set_National/2010_Treatment_Episode_Data_Set_National.html). In response to legalization and the growing concern over the negative effects, the National Academy of Medicine (NAM), in 2017 commissioned an exhaustive 487-page report, *The Health Effects of Cannabis and Cannabinoids*. “The former head of the Centers for Disease Control, Thomas Frieden, tweeted the report’s conclusions about pot as “way too little known; potential benefits unproven, some serious harms definite, many serious risks possible.” Among those concerns, [summarized](#) by the Centers for Disease Control:

Learning, memory, and attention are impaired after using cannabis, and the damage may last even after people stop using it.

Cannabis use can negatively affect adolescents’ and young adults’ health and well being, including their school performance, education level, social lives, and future employment and income.

Smoking cannabis during pregnancy is linked to lower birth weight in babies.

Smoked cannabis has many of the same cancer-causing substances as smoked tobacco.

Cannabis use is associated with the development of schizophrenia and other psychoses (loss of reality). The risk is highest for the most frequent users.

The more a person uses cannabis, the more likely they are to develop problem cannabis use. Heavy cannabis users are more likely to report thoughts of suicide than non-users. Frequent and long-term cannabis use may be linked to worsened symptoms in individuals with bipolar disorder.

There may be a link between using cannabis and becoming dependent and/or abusing other substances, including alcohol, tobacco, and other illicit drugs.” (<https://www.city-journal.org/marijuana-legalization>) Adolescents are particularly vulnerable to the ill effects. The American Academy of Pediatrics continues to oppose the legalization of recreational marijuana. “The adverse effects of marijuana have been well documented. Numerous published studies have shown the potential negative consequences of short- and long-term use of recreational marijuana in adolescents.⁸ These consequences include impaired short-term memory and decreased concentration, attention span, and problem-solving skills, all of which interfere with learning. Alterations in motor control, coordination, judgment, reaction time, and tracking ability have also been documented. These effects may contribute to unintentional deaths and injuries among adolescents, especially those who drive after using marijuana. Negative health effects on lung function associated with smoking marijuana also have been documented⁹; in addition, longitudinal studies linking marijuana use with higher rates of mental health disorders, such as depression and psychosis, recently have been published, raising concerns about longer-term psychiatric effects.^{8,10} Secondhand marijuana smoke can also be detected in adults who are passively exposed, and new data also suggest that secondhand marijuana smoke may be harmful to children.¹¹ A recent study found that in an inpatient sample of infants admitted for respiratory compromise, 1 in 6 had detectable traces of marijuana in their systems.¹²...” As harmful as the documented physical adverse effects are, the danger to the developing brain is even more pronounced. Long-term use can cause irreparable damage to the pre-frontal cortex and significantly increases the risk of drug dependence and addiction in

later life. Changes in the legal status of marijuana, even if only among adults, increase the risk of use by adolescents by lessening the perception of harm.

(<http://pediatrics.aappublications.org/content/early/2017/02/23/peds.2016-4069>)

The most compelling arguments against legalization, in fact, come from one of the states acclaimed as the poster child for the benefits of legalization, Colorado. Since retail marijuana became legal, the problems relating to its legalization have multiplied. Marijuana-related traffic deaths when a driver tested positive for marijuana more than doubled from 55 deaths in 2013 to 125 deaths in 2016. The latest 2014/2015 results show Colorado youth ranked #1 in the nation for past month marijuana use, up from #4 in 2011/2012 and #14 in 2005/2006. • Colorado youth past month marijuana use for 2014/2015 was 55 percent higher than the national average compared to 39 percent higher in 2011/2012. School suspensions and incidents relating to marijuana use are a daily occurrence. A school resource officer commented, “Multiple students at my ‘affluent’ middle school obtain marijuana and use marijuana with their families who all seem to have their own marijuana grows. Most of these parents think their ‘medicine’ is fine for their kids to use.” “In March of 2015 a fifth grade boy offered marijuana to another fifth grader on the playground. In October of 2014 a kindergarten girl described the pipe in her grandmother’s car and the store where you go to buy pipes. In May of 2015 a first grade girl reported that her mom smokes weed in the garage. ‘It’s not a drug, it’s just a plant.’”

Nor has legalization led to a decrease in crime, quite the opposite.

”: After indicting thirteen people involved in illegally distributing around 200 pounds of marijuana District Attorney Dan May stated in a public announcement, “Colorado Springs Police Department... had 22 homicides in Colorado Springs last year, 2016. Eight of those were directly marijuana.” During the public announcement May explained that authorities are overwhelmed having to deal with the crime that is associated with marijuana and claimed that “marijuana is the gateway drug to homicide.”

(<http://www.rmhidta.org/html/FINAL%202017%20Legalization%20of%20Marijuana%20in%20Colorado%20The%20Impact.pdf>)

Let’s be guided by the experience of other states and weigh these very negative and serious effects. The next argument is criminal justice reform. Connecticut has already reformed the penal code to deal with new arrests for possession of small amount of cannabis. Expunging the records of those arrested and convicted in the past can certainly be done without legalization of cannabis. As far as the argument that legalization will allow those adversely affected by disproportionate punishment to benefit by giving them access to the retail market, cannabis sales and production are well on the way to becoming Big Tobacco and Alcohol. “Beer and wine giant Constellation Brands ([STZ](#)), which owns Corona, has made a [\\$4 billion investment in Canopy Growth](#). Budweiser brewer Anheuser-Busch InBev ([BUD](#)) has a [deal to work with Tilray](#) in Canada. And Marlboro maker Altria ([MO](#)) recently bought a 45% stake in Canada's Cronos ([CRON](#)).” (<https://www.cnn.com/2019/01/09/investing/cannabis-stocks-canopy-tilray-alcohol-tobacco-cowen/index.html>) What hope do small retailers, even with state support, have to compete with these giants? In addition, how many residents of Connecticut will lose employment opportunities because of cannabis use? Many employers, including hospitals, construction firms, and transportation companies, regularly test for drugs, as they are potentially liable for their workers’ mistakes and accidents. Prior to legalization, many such firms were having trouble finding workers who could pass drug tests; the challenge will only grow post legalization. Some of the industries with the

greatest need for skilled workers are in companies like United Technologies and Electric Boat. Due to the need for federal security clearances, a single positive drug test disqualifies an applicant from employment and would result in the termination of a current worker. A Quest Diagnostics study found that the number of job applicants testing positive for cannabis rose 20 percent after legalization in Colorado, and 25 percent in Washington State.

Finally, let's look at the much touted revenue gains and end to the black market. "As much as 80% of the marijuana sold in California comes from the black market, according to an estimate by New Frontier Data, a firm that tracks cannabis sales and trends. Analysts also found that California's illicit pot market was valued at an estimated \$3.7 billion last year, more than four times the size of the legal market. (<https://www.latimes.com/politics/la-pol-ca-gavin-newsom-crackdown-pot-black-market-20190219-story.html>) The former U.S. attorney for Colorado, Bob Troyer, [wrote](#) in a September 2018 *Denver Post* op-ed, that the black market in Colorado has exploded, as Colorado has become "a source-state, a theater of operation for sophisticated international drug trafficking and money laundering organizations from Cuba, China, Mexico, and elsewhere..." Nor have the much touted revenue gains materialized; income from the sale of marijuana amounts to less than 1% of the state's budget. This revenue gain is dwarfed by the ever-increasing cost of dealing with the public health and safety and regulatory costs of the legal trade. (<https://www.denverpost.com/2018/09/28/colorado-marijuana-commercialization/>)

There is extensive research available that establishes the dangers of legalization of retail marijuana. If proponents choose to maintain that this is in the best interest of the state of Connecticut and its residents, I invite them to refute that data. Given the experience of other states, the growing evidence of the drug's negative effects, the danger its use presents on our roads, why are we even contemplating this move?

Therefore I respectfully urge committee members to join me in opposing **HB 7371**.

Sincerely,



Holly Cheeseman
State Representative, 37th District
East Lyme, Niantic, Salem