



# State of Connecticut

## SENATE

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March 14, 2011

Chairman Eric Coleman, Chairman Gerald Fox, Ranking Member John Kissel, Ranking Member John Hetherington and other distinguished Members of the Judiciary Committee.

Thank you for the opportunity to testify in opposition to *SB 952 An Act Concerning the Enhanced Penalty for the Sale or Possession of Drugs Near Schools, Day Care Centers, and Public Housing Projects*, *SB 953 An Act Concerning Nonviolent Drug Possession Offenses*, *SB 1014 An Act Concerning the Penalty for Certain Nonviolent Drug Offenses*, and *SB 1015 An Act Concerning the Palliative Use of Marijuana*.

I became involved in opposing legalizing marijuana several years ago after deeply painful appeals from local parents who lost their young children from drug use. They have experienced the devastating impact of marijuana first hand and believe it is a gateway for other drugs. You have testimony from these parents who cite marijuana as the real killer of their beloved children. Their experience and that of countless others is the reason I advocate so strongly against decriminalizing marijuana and legalizing medical marijuana. Their personal story with marijuana is validated by data and numerous research studies.

The claim that marijuana decriminalization will do no harm or reduce costs does not consider the various health risks that marijuana creates. Marijuana use has been shown to cause addiction, permanent memory loss, distorted perception, depression, psychosis and other severe long term psychological disorders. Cannabis use was a "statistically significant predictor of later depression," (University of Colorado study involving 20,000 individuals over a 14 year period) and significantly "increased the risk of any psychotic outcomes in individuals" (2007 Lancet study). Correlation between marijuana use and mental illness remained even when other factors, such as socioeconomic status, and the abuse of other drugs and alcohol had been taken into account in various studies. The British Medical Journal warned that using cannabis once or twice a week doubled the risk of developing psychotic illnesses including schizophrenia later in life.

Other research documents the harmful effect of marijuana on the body. A study by Yale states that marijuana and tobacco use cause similar respiratory problems. Another study by Dr. Zuo-

Feng Zhang of the UCLA School of Public Health found that smoking marijuana increases the risk of developing cancer of the mouth, throat and larynx. Li Mao of the M.D. Anderson Cancer Center remarked, "it appears marijuana [smoke] is a stronger carcinogen than cigarette smoke." The same study noted that marijuana deposits "four times more particulate matter in the mouth, throat and windpipe than cigarette smoke," compounding the risk of cancer. Gram for gram, marijuana contains more cancer causing agents, higher levels of ammonia, hydrogen cyanide, and nitric oxide than tobacco (and tobacco contains seventy.) There is no FDA approved medication that is smoked as dose, frequency or duration of administration cannot be determined and is detrimental to the lungs.

Marijuana proponents argue that the drug is a useful medicine, ignoring that the FDA and other major medical organizations (such as the American Medical Association, the National Multiple Sclerosis Society, American Glaucoma Society and the American Cancer Society) have all opposed medical marijuana. Marijuana bills, such as SB 1015, continue to include glaucoma as a condition for which marijuana can be recommended, even though the American Glaucoma Society warned patients that marijuana can make their glaucoma worse. In addition, marijuana produces heart problems, suppresses the immune system, and is dangerous to patients suffering from cancer and AIDS. It can even increase the risk of Kaposi's sarcoma in AIDS sufferers. Many people believe that medical marijuana is just a smoke screen for legalization.

In addition to marijuana's unsuitability as medicine, classifying marijuana as medicine creates the false impression that it is benign, and increases its use. A recent survey of 46,000 American teenagers concluded that marijuana use has risen to the point where more teens are smoking pot than cigarettes (Lloyd Johnston, lead investigator). "After nearly a decade in decline, marijuana is making a strong comeback among high school students, with growing use and softening attitudes about the risk of smoking pot starting in the eighth grade. For the first time since 1981, high school seniors that reporting they had smoked marijuana in the last 30 days outnumbered those who said they smoked cigarettes" (Healy, LA Times).

We should also oppose any measure which reduces the size of drug free zones around schools and public housing projects. A single mother from a South Norwalk housing project confided to me that she wanted drug dealing out of her neighborhood, and away from her children and their schools. Drug dealing has become a magnet for violent crime and made her neighborhood a terrible place to raise her family. Instead of reducing drug free zones around schools, we should be expanding them to protect our children and hers.

Damaging the public's health aside, decriminalizing marijuana does not accomplish the goal of reducing costs. Only a small percentage of criminals are incarcerated for marijuana possession alone. Most often, they plead guilty to the charge of possession to avoid being sentenced for more serious crimes such as trafficking, assault and burglary. Decriminalizing the possession of an ounce (60 joints) of marijuana could in fact have the potential of increasing costs to our health care system, local law enforcement and DSS, that would offset any savings that decriminalization might initially achieve by emptying our jails. In states which have passed marijuana laws, marijuana related crime has skyrocketed. Drug cartels have even moved into the Sequoia National Forest. Montana, New Mexico, Colorado and 90 cities and counties in California have moved to repeal, due to drug related violence, fraud and abuse. Drug free

workplace rules have been impeded and drugged driving fatalities have gone up. Note that marijuana stays in the system for over 24 hours and can be detected in the blood for four weeks or longer.

Marijuana is a harmful, Schedule I, federally illegal drug that does not save or improve lives. It can undermine the seriously ill's best prospect of recovery and is the wrong prescription for Connecticut. I urge you, for the sake of the public's health and for the safety our vulnerable young people that you reject these proposals. We must not give Connecticut a "soft on crime" reputation where it becomes easy to obtain a get-out-of-jail free ticket.

I am tremendously grateful and proud that we have we have fought repeated attempts in the past to take our state down this dangerous path and have not broken a trust with our constituents of doing no harm. Let us all work to continue to keep our children and neighborhoods safe.

Thank you for your thoughtful consideration of this testimony. I would be happy to answer any questions you may have.

