Testimony On S.B. 16: An Act Concerning the Adult Use of Cannabis
National Safety Council
Committee on Judiciary
March 3, 2020

Chair Winfield, Chair Stefstrom and esteemed members of the Committee on Judiciary, thank you for the opportunity to provide testimony regarding S.B. 16: An Act Concerning the Adult Use of Cannabis. The National Safety Council (NSC) encourages you to go further to prioritize the safety, health and wellbeing of your constituents as you consider the legalization of cannabis as outlined in SB 16. It is imperative to keep public safety at the forefront of policy decisions.

NSC is a non-profit organization with the mission to save lives, from the workplace to anyplace. We dedicate our efforts and thought leadership on impacting safety through three strategic pillars: Workplace, Roadway and Impairment. Our 15,000 member organizations represent employees at nearly 50,000 U.S. worksites, including nearly 500 in Connecticut.

Cannabis is the most widely consumed illicit substance worldwide, and nearly 55 million Americans 18 or older currently use cannabis.¹ This use affects safety on the roadways, in workplaces and elsewhere. Even in occupations governed by federal oversight (for example, those governed by U.S. Department of Transportation drug testing requirements), cannabis use has increased as state laws have changed. In other non-governmental occupations, cannabis positivity has also increased in states allowing adult recreational use.²

Marijuana positivity

![Graph](image-url)

2. [https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2484591](https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2484591)
NSC believes that all forms of impairment present a serious threat to safety at work and on the road by increasing the risk of preventable injury and death. Workers who are under the influence of alcohol and/or other impairing drugs (legal or illegal) endanger themselves and those around them. In addition, driving while under the influence of any impairing substance like cannabis or alcohol endangers all roadway users. In 2018, Connecticut lost 294 lives in motor vehicle crashes, and NSC is concerned this number will only grow if cannabis is legalized. This has been realized in Washington State with a doubling of THC positive tests for those involved in fatal motor vehicle crashes since decriminalization.

Because there is no scientific test for cannabis impairment, law enforcement relies on drug recognition experts (DREs) to evaluate the signs of impairment from drugs. NSC thanks you for recognizing the important role DREs play in identifying and prosecuting impaired driving cases, and recommends providing additional funding to increase and enhance DRE training of law enforcement now, before any changes to the legal status of impairing substances. Data are clear that drug impaired drivers are on our roadways.

NSC offers the following recommendations for consideration. Currently, there is no scientific basis for the adoption of THC per se laws, and NSC urges you not to establish THC per se limits as a means to identify cannabis impairment. NSC encourages you to ensure your impaired driving surveillance systems are updated and have the ability to monitor drug impaired driving. This includes guaranteeing data linkage (between police records and hospital data, for example) and standardizing the drug testing panel among all state labs and conduct testing on all roadway fatalities to gain a better understanding of the substance-impaired driving issues in the state. Lastly, NSC strongly recommends providing funding to educate the public about the dangers of cannabis-impaired driving.

In addition, NSC would like to make the following recommendations to ensure you allow for workplaces to prioritize safety as you consider S.B. 16. NSC believes there is no level of cannabis use that is safe or acceptable for employees who work in safety-sensitive positions. Therefore, NSC recommends this Committee clarify existing provisions in order to ensure employers have the ability to implement zero tolerance policies for people in safety sensitive jobs. NSC supports employer efforts to maintain a substance-free workplace, regardless of the legal status of impairing substances and regardless of whether substances were used on or off the job. This includes allowing employer drug testing to ensure employers can make decisions to manage their risk.

Ensuring public safety is the highest calling of public servants, and NSC applauds this committee for taking time to hear these concerns. NSC looks forward to working with you to prioritize safety.

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5 https://www.nsc.org/Portals/0/Documents/NSCDocuments_Advocacy/Divisions/AD&D/Position-on-Cannabis-and-Driving.pdf
6 "Safety Sensitive" refers to jobs that impact safety of the employee and the safety of others as a result of performing that job. For example, 49 CFR §382.107 defines safety sensitive for commercial motor vehicle operators.
7 "Safety sensitive" is defined as one that if not performed in a safe manner, can cause direct or significant damage to property, and/or injury to the employees, others around him or her, the public and/or the immediate environment. For example, 49 CFR §382.107 defines safety sensitive for commercial motor vehicle operators.
Position/Policy Statement

Cannabis Impairment in Safety Sensitive Positions

NSC Policy/Position

The National Safety Council (NSC) supports policies to mitigate and eliminate the risks of cannabis (marijuana) and other products containing delta-9-tetrahydrocannabinol (THC), the impairing component in cannabis. Safety concerns are paramount as legalization and decriminalization continues.

NSC believes it is unsafe to be under the influence of cannabis while working in a safety sensitive position due to the increased risk of injury or death to the operator and others. Research is clear that cannabis impacts psychomotor skills and cognitive ability. However, the amount of THC detectable in the body does not directly correlate to a degree of impairment. At this time, NSC believes there is no level of cannabis use that is safe or acceptable for employees who work in safety sensitive positions.

Need for Policy Position

By adopting this position, NSC will be able to increase involvement in the policy discussion about cannabis impairment, and provide guidance for employers as they navigate changing cannabis laws.

Cannabis is the most widely consumed illicit substance worldwide. In 2015, the World Drug Report estimated over 200 million people between the ages of 15-64 have ingested cannabis. According to a study reported by the National Institute on Drug Abuse, employees who tested positive for cannabis had:

- 55% more industrial incidents
- 85% more injuries
- 75% greater absenteeism compared to those who tested negative.

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1 "Safety Sensitive" refers to jobs that impact safety of the employee and the safety of others as a result of performing that job. For example, 49 CFR §382.107 defines safety sensitive for commercial motor vehicle operators.
2 https://www.who.int/stbstance_abuse/facts/cannabis/en/
Cannabis affects the body in a number of ways. Experimental studies of subjects dosed with cannabis found, psychological effects include relaxation, sedation, disorientation, impaired judgment, and lack of concentration. The physiological effects include slowed fine motor skills, reddening of eyes, increased appetite, dry mouth, and increased heart rate. These effects contribute to impaired learning, short-term memory and attention deficits, and delayed decision-making.4

As a leader in impairment (opioids, fatigue, etc.) workplace policies and consistent with advocacy in these other areas, NSC supports moving people to non-safety sensitive operational positions when using cannabis for medical purposes.

Federal Law

Despite medical cannabis laws in 46 states, cannabis remains federally illegal. The federal government regulates drugs through the Controlled Substances Act (CSA) (21 U.S.C. § 811), which does not recognize the difference between medical and recreational use of cannabis.5 Under the CSA cannabis is classified as a Schedule 1 drug, meaning that the federal government views cannabis as having no medical value and high abuse potential.

There are no federally approved prescriptions for cannabis use. Doctors may not “prescribe” cannabis for medical use under federal law, however they can “recommend” its use under the First Amendment.

State Laws

Cannabis laws vary from state to state. At the time of writing this document, 3 states, the District of Columbia, Guam, Puerto Rico and US Virgin Islands have approved comprehensive, publicly available medical marijuana/cannabis programs. Twenty-three states and the District of Columbia have decriminalized marijuana, and ten states and the District of Columbia now have legalized small amounts of marijuana for adult recreational use. States that have approved the medical use of cannabis have allowed certain classes of medical professionals to grant a person residing in the state to purchase and use cannabis in certain controlled forms. Those states that have decriminalized or legalized recreational use of cannabis permit a person to purchase and use cannabis if:

- They are in that specific state
- The cannabis is in a legal form with regulated strengths
- It is under the maximum amount allowance, if the law stipulates an amount

Research

More comprehensive data and research is needed to better understand the effects cannabis has on the human mind and body. There are many anecdotal studies on a variety of cannabis-related subjects, including but not limited to assessing and defining the THC relationship to impairment, examining other safety implications, driving, vehicle crash rates, potential medical uses and benefits, impacts on opioid misuse and opioid overdoses, and more. However, there is not enough research to reach consensus on any of these cannabis-related subjects at this time.

5 https://www.law.cornell.edu/cfr/text/21/1308.11
There is evidence that legalization or decriminalization of cannabis may increase vehicle crash rates, hospitalizations, and other public health indicators. The Rocky Mountain High Intensity Drug Trafficking Area completed a study that found the yearly rate of emergency department visits related to marijuana increased 52 percent after the legalization of recreational marijuana. A study done by the Insurance Institute for Highway Safety (IIHS) examined 2012-2016 police-reported crashes before and after the retail sales of cannabis began in Colorado, Oregon, and Washington. IIHS estimates that these three states combined saw a 5.2% increase in the rate of crashes per million vehicle registrations, compared with neighboring states that did not decriminalize or legalize marijuana sales. In 2017, the NSC Alcohol, Drug and Impairment Division issued "Position on Cannabis (Marijuana) and Driving," which clearly evaluates leading research concluding that cannabis degrades driving performance.

NSC expects support from the American Industrial Hygienists Association, which has a similar position. Companies supporting cannabis decriminalization will oppose the position.

This position statement reflects the opinions of the National Safety Council but not necessarily those of each member organization.

Adopted by the National Safety Council, 2019

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7 In this instance, "marijuana" is used as the term for cannabis from the underlying research document.
8 Ibid.
Testimony available for public review in

Judiciary Committee
Room 2500