

**Testimony to House Health and Human Services Committee**

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Chairwoman Landwehr and members of the committee, I'm Max Wilson, retired Executive Director of Shawnee Regional Prevention and Recovery Services. I retired this past July after 20 years of service.

Although retired from employment, I remain involved in a host of community initiatives and boards of directors. Substance abuse prevention is still one of my chief interests and concerns.

During my years in the field of substance abuse prevention and early intervention, I learned that marijuana is the number one presenting drug of addiction for Kansas youth entering substance abuse treatment. Medical excuse marijuana laws could directly increase use of and addiction to marijuana by young people.

In the following Exhibit 1 you'll see on the Communities that Care Youth Survey that in 2011, 9.22% of 6<sup>th</sup>, 8<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> graders reported using marijuana during the past 30 days, an increase during the past 4 years from 7.8% to 9.22%.

**EXHIBIT 1**  
**Scale: 30 Day Prevalence**  
**Question: On how many occasions (if any) have you used marijuana during the past 30 days?**  
**Percent Responding: At least once**

	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Kansas State Data	8.00	9.20	11.46	10.76	12.06	9.97	10.59	10.10	10.10	9.50	8.60	8.60	8.10	7.80	7.90	8.53	9.22

You'll also see in Exhibit 2 that in 2011, 18.1% of the surveyed youth reported using marijuana during their lifetime, an increase from 16.00% in 2009.

**EXHIBIT 2**  
**Scale: Lifetime Use**  
**Question: On how many occasions (if any) have you used marijuana in your lifetime?**  
**Percent Responding: At least once**

	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Kansas State Data	15.50	17.80	22.15	21.49	23.52	20.89	21.58	21.10	20.50	20.10	18.80	18.30	17.20	16.20	16.00	16.77	18.1

Almost every year, we've witnessed attempts to get medical excuse marijuana laws passed in Kansas. These attempts tend to drive public perception of marijuana as being less harmful than it is, as an acceptable drug for use, and an increase in availability. The weakening of medical marijuana laws, laws which violate the FDA approval process in the first place, facilitate abuse. A side effect of the medical marijuana movement is to give people, especially children and teenagers, the idea that marijuana is good for health rather than that it may relieve symptoms of some diseases, for which there are other approved medications.

The overall atmosphere with the softening of marijuana laws does put young people at greater risk as a result of diminished perception of risk or harm of using marijuana. You'll see on Exhibit 3 that the perception of risk or harm of marijuana use steadily decreased in 2011 to 79% from 83.50% in 2005.

**EXHIBIT 3**  
 Scale: **Perceived Risks of Drug Use**  
 Question: **How much do you think people risk harming themselves (physically or in other ways) if they: try marijuana once or twice?**  
 Percent Responding: **SLIGHT RISK, MODERATE RISK, OR GREAT RISK**

	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Kansas State Data	83.41	82.10	84.07	82.08	81.80	81.60	82.90	83.50	83.50	83.20	83.20	81.90	80.39	79.00

Perceived availability of marijuana has also increased in 2011 to 21.89% of youth who reported it would be very easy to get some marijuana.

**EXHIBIT 4**  
 Domain: **Community**  
 Scale: **Perceived Availability of Drugs**  
 Question: **If you wanted to get some marijuana, how easy would it be for you to get some?**  
 Percent Responding: **Very Easy**

	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Kansas State Data	26.90	29.59	26.28	27.20	24.07	24.57	23.80	23.40	23.00	21.50	21.40	19.30	19.10	18.80	20.19	21.89

During my 20 years at Shawnee Regional Prevention and Recovery Services, we provided thousands of youth evaluations during those years. We saw marijuana use as well as illicit prescription drug use increase. If medical excuse marijuana laws were passed, we would expect to see a huge upsurge in marijuana availability added to the mix of deadly illicit prescription drugs available to youth.

Current prevention science informs us that the density of alcohol and tobacco sales outlets contributes to availability and an increase in illicit use of these drugs. Reports from states that have passed medical excuse marijuana laws also indicate that the greater the number of prescription providers and outlets, the greater the increase in the number of people using marijuana illicitly.

Marijuana users of all ages perform more poorly than non-users on cognitive tasks, especially those that require executive function. New research shows that early users (people who begin marijuana use prior to age 16) have more difficulty than late onset users. Age of onset, frequency of use and amount of use were all factors in poor cognitive performance. Onset of marijuana use during adolescence is now also linked to altered brain development leading to long-term cognitive impairment.

The following Exhibit 5 shows that surveyed youth reported their average age of first use of marijuana in 2011 was 13.89 years. This is a decrease from 2010's 13.94 years which indicates greater risk.

**EXHIBIT 5**  
**Scale: Early Initiation of Drug Use**  
**Question: How old were you when you first: smoked marijuana?**  
**Percent Responding: Average Age**

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Kansas State Data	13.81	13.83	13.65	13.79	13.59	13.75	13.61	13.67	13.70	13.70	13.70	13.79	13.83	13.94	13.89

From both prevention and treatment perspectives, I know Kansas can ill afford the additional increases in risks to our children, youth and adults that medical excuse marijuana would bring to our state. I urge you to consider the costs in human lives, families, education, and health care resources that medical excuse marijuana laws would cause.

Thank you for the opportunity to share this testimony with you.