



Tuscarawas Valley Local Schools

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Senate Bill 261: Law Changes-Medical Marijuana
Opponent Testimony
Hearing #4
House Government Oversight Committee
Mark A. Murphy, Superintendent, Tuscarawas Valley Local School District

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Chairman Wilkin, Vice Chair White, Ranking Member Brown, and members of the House Government Oversight Committee:

Thank you for the opportunity to speak with you today and to share testimony in opposition to components of SB261 which provides significant revisions to Ohio's current medical marijuana law.

I come to you today on behalf of Ohio's public school children, specifically the youth and families of the Tuscarawas Valley Local School District where I have had the privilege of serving as superintendent for the past 17 years. I also come to you today as a father and uncle on behalf of my own two teenage children, as well as my underage nieces and nephews.

Although initially reluctant in 2016 when Ohio legalized medical marijuana under the control of the state board of pharmacy, I ultimately came to accept (and trust) that physicians, under the authority of the state board of pharmacy and marijuana control program, would utilize approved medical marijuana to treat individuals truly suffering from a list of 22 qualifying conditions. Now, six years later, as this committee considers the changes outlined in SB261, my concerns are at an all-time high (no pun intended).

As a public school superintendent, I occasionally have the unfortunate responsibility of conducting expulsion hearings and determining a students' educational future when certain provisions of the student code of conduct have been violated. These cases normally center around the use, sale, or distribution of illegal substances. Do you know what that substance has been in every circumstance? Marijuana...and not the marijuana that used to be rolled and smoked with low levels of addictive THC, but sleek, modern, and very attractive products like marijuana gummies and vape pens with potent, very addictive levels of THC. These products were intelligently designed and marketed by whom? I can only guess that they have been manufactured through the medical marijuana dispensaries and retailers.

Within the past two months, I witnessed the incredible sadness and frustration of two sets of parents in my office when they realized their freshman and sophomore sons, through

appealing social media platforms, got sucked into personal drug use. Even more disturbing is when the parents realize their children were successfully lured into the business of illegal drug distribution to other minors.

It's horrifying enough when you're told that your child is using and distributing an illegal substance; it's even more painful when one considers the time, expense, and emotional struggle involved in drug treatment programs, professional counseling, and restoring of broken relationships within the family and at school, not to mention the adverse effect on school performance, attendance, graduation, and potential employment.

Again, I share with you from the perspective of a father, uncle, school superintendent, and community leader. Of the proposed changes in SB261 regarding the expansion of medical marijuana, I find three to be extremely disturbing.

First, let's consider the impact of using social media for advertisement. Items 15, 17, and 18 on pages 27 and 28 of the bill discuss "methods of using medical marijuana that are attractive to children," the "display of products," as well as the allowance for "licensed dispensaries to advertise, on social media or otherwise, without receiving prior approval from the division of marijuana control." And who uses social media most? No one will convince me otherwise that the use of social media is intentionally designed to attract the attention and use of underaged youth. This bill says that prior approval for social media advertising is not required; therefore, there is no accountability. Both young men who faced expulsion were lured via Snapchat.

Second, this bill promotes the increase of THC up to 90%...again, without the jurisdiction or oversight of the state board of pharmacy. It's totally absurd, especially when I think of teenagers who will increasingly become immediately addicted after just taking a limited number of marijuana gummies or "hits" from a marijuana vape pen. Just yesterday, as reported in the April 26, 2022 *Columbus Dispatch*, marijuana gummies with high levels of THC were taken to school by an elementary student who thought it was Easter candy, sending five students to the hospital.

Third, this bill extends qualifying medical conditions from the current list of 22 conditions to 29, along with the caveat of "any condition not specified...at the physician's sole discretion...if the physician believes the patient would reasonably be expected to be relieved or benefit from medical marijuana." Essentially, this bill indicates that no medical diagnoses are needed for a physician to prescribe marijuana to his/her patients. So, is marijuana really medicine if it can be recommended by a physician for "any condition?"

Perhaps I am completely wrong, yet what concerns and sickens me the most about all of this is that the real motivation is not to help people; it is driven by a money-hungry, profit-making industry designed to benefit growers and distributors. Perhaps economists would say it's good for state revenue, and it very well may be. I would argue, however, that the provisions currently outlined in SB261 are reckless and harmful, not only to adults and Ohio's workforce where there is a shortage of people willing and able to work, but to the future of our great state, Ohio's youth, those most vulnerable to the expansion of this type of legislation.

I thank you for your time and ask that you please maintain Ohio's medical marijuana laws.