

From: philip.hornbeck
To: [Debbie Bartuccio](mailto:Debbie.Bartuccio)
Subject: oral and written testimony in favor of HB2330
Date: Monday, January 23, 2012 10:10:36 AM

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To: "hauxwell@ruraltel.net" <hauxwell@ruraltel.net>; "cheryl@medcankan.org" <cheryl@medcankan.org>
Sent: Monday, January 23, 2012 9:20 AM
Subject: my testimony for review

My name is Philip E. Hornbeck a lifelong resident of Kansas I reside at 220 Western Ave., Haysville, Kansas. I am here in support of HB2330.

Medical cannabis will eventually be allowed in Kansas. Over one-third of the U.S. population now live in states that no longer want to restrict an individuals right to choose medicine that provides relief for many serious medical conditons. Nor do these compassionate states want to waste resources in all stages of the judicial process to prosecute people who choose a safer medicine with far fewer adverse side effect than "legal" alternatives. Polls consistently reflect that people recognize the blessings of medical cannabis and with the supervision of a doctor have acted to approve allowance. Here an ill advised legislative body appears to need a long toe to toe battle to allow what has been thoroughly vetted in many states and is settled law overriding federal objections. Kansans are a reasonable people.

One area of objection by a con expert asserts admissions a up for chemical dependance since medical usage was allowed. This is referencing California where law enforcement priorities in some jurisdictions have shifted from violent crime and hard core cartel operations in favor of a blitz on simple possession. And no, these convictions are not simply really bad guys who plead down to possession. According to the Center for Juvenile and Criminal Justice in a report to the California legislature, researchers discovered "arbitrary, biased, and a rising pattern of arrest for small quantity marijuana possession" with "widely desperate arrest rates".

Continuing on the Centers report, "In major counties arrest rates surge and plummet by 40% or more from year to year. Counties with similar demographics with similar arrest rates can vary 10 fold or more. It appears the odds getting arrested for marijuana are a function of geography, race , year, and local practices." This shift has nothing to do with medical marijuana, unless it is driven by a punitive resentment on the part of certain enforcers.

A person convicted of possession is likely to be presented with an alternative to jail--treatment. Which would you choose? 70% of those admitted for marijuana dependence treatment are court referred. One of three of those have not even used marijuana in the last 30 days. The treatment industry--for such it is-- virtually never assesses a new admission and then informs the court the person does not meet the criteria for addiction or treatment. This implies the court never errors by sending a non addicted person to treatment--we only wish our courts we so consistently infallible. If a client insists they are not addicted, that will

be dismissed as denial.

In closing I support HB2330 and pray for relief for the many seriously ill people who now and in the future will choose medical cannabis instead of the overbearing pharmaceutical offerings which certainly have more adverse, often life threatening, side effects.