

Joint Legislative Budget Hearing – Local Government

Monday, February 10, 2020

11:00 am

Legislative Office Building

Albany, NY 12247

Testimony by

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We are here today to talk about 4 issues very important to Upstate New York residents. Those issues are (1) access to technology, (2) bail reform, (3) legalizing recreational marijuana, and (4) tick-borne diseases.

As an Association, #2 in our 3 Point Plan is to promote increased access to technology in Upstate New York. At the Joint Senate and Assembly Public Hearing on Rural Broadband on September 17, 2019, we made 5 recommendations:

1. Work with the FCC to get a better reporting requirement so there are more accurate maps.
2. Fund utility pole data surveys.
3. Require companies applying for State funding to describe how municipalities were involved in the application process and require sign off in the application by the chief municipal officer.
4. Move the Broadband Program Office from New York City or establish a satellite office in an Upstate town or village so the people doing this work are close to the communities with the largest broadband needs.
5. Be involved with emerging technology. Have staff from the New York State Broadband Program Office and New York State officials studied Google's Project Loon and considered trying an experiment with this technology in a high need rural area?

The complete testimony is attached. We hope progress is being made with these recommendations.

The other 3 issues we are going to talk about relate to the safety and health of residents.

Bail reform needs to be modified or amended. There are legitimate public concerns about bail reform. Judges should have the discretion to detain a person with a prior criminal record or who has been deemed a threat to public safety. Please listen to the judicial community and law enforcement to make the changes they recommend to ensure public safety.

You should question legalizing recreational marijuana. Attached to our testimony is research in the areas of education, medicine, and law enforcement that show the dangers of marijuana.

The Mayo Clinic has issued these cautions:

Don't drive or operate machinery when using marijuana.

If you have a mental health condition, use marijuana with caution.

Marijuana use might worsen manic symptoms in people who have bipolar disorder.

If used frequently, marijuana might increase the risk of depression. Marijuana use also might worsen depression symptoms.

Research suggests that marijuana use increases the risk of psychosis in people who have schizophrenia.

Smoking marijuana can affect your memory and cognitive function and cause harmful cardiovascular effects, such as high blood pressure.

Long-term marijuana use can worsen respiratory conditions.

The Harvard Medical School has stated the following: "Until more is known, it's probably best not to get caught up in the hype from sweeping legalization."

Did you know that the limo driver in the Schoharie crash that killed 20 people had high levels of marijuana in his system?

Do you want to be the legislators making recreational marijuana legal and signaling to the people it is safe when it is not safe?

Our last issue is the Ticking Time Bomb: the Lyme and Tick-Borne Disease Epidemic in New York State. In the Governor's FY 2021 Executive Budget, the \$200 million multi-year commitment to Ending the AIDS Epidemic is included. The latest statistics on communicable disease in New York State are for 2018.

2018 Newly Reported Cases

HIV	2,481
Lyme	7,320
Anaplasmosis	915

The tick-borne cases of Lyme and Anaplasmosis equal 8,235, over 3 times the reported cases of HIV.

2019 statistics are not available at this time but here is a sampling of numbers from County health departments that show Anaplasmosis is rising dramatically.

County	2018	2019
Broome	11	22
Chenango	1	11
Rensselaer	101	230

There are counties that have been told not to count Lyme cases but to take representative 20% random samples because there are too many cases to count.

We need to end the AIDS epidemic and continue the funding for that purpose. Additionally, funding is much needed to end the Lyme and Tick-Borne Disease Epidemic in our State. Yes, you face a budget deficit and funding limitations for 2021. However, when public health is at serious risk as it is with Lyme, Anaplasmosis and other tick-borne disease, funding must be included in the 2021 budget to address the Lyme and tick-borne epidemic through research, prevention, education, detection, and intervention on a statewide level.

Thank you for giving us this opportunity to address very important issues for Upstate New York and New York State as a whole.

Joint Senate and Assembly Public Hearing

Subject: Rural Broadband

Purpose: To identify current broadband needs in rural New York State

Tuesday, September 17, 2019

11:00 am

Hearing Room A

Legislative Office Building, 2nd Floor

Albany, NY 12247

My name is Carolyn Price, and I am speaking today as President of the Upstate New York Towns Association, www.upstatenyt.org and Supervisor of the Town of Windsor, Broome County. I am also speaking for people who make huge sacrifices because they have no internet access such as driving a 40 mile roundtrip to do banking.

My remarks will focus on recommendations to identify and reach the unserved and underserved with broadband in rural areas of New York State.

New York State broadband is delivered via wireline technologies and wireless technologies. However, we don't know how much broadband coverage we truly have, particularly in rural areas. To continue to move forward and have access for the unserved and underserved, we need to know what we have, where it is and options to reach the unserved and underserved areas.

Why don't we know what we have and where it is? The maps are faulty because the FCC allows internet providers to claim on Form 477 an area as served if only one home in a census block has internet service.

Recommendation #1: Work with the FCC to get a better reporting requirement so there are more accurate maps.

Fiber is the optimal broadband technology. There is fiber in parts of rural communities. Do we really know where fiber is and where it doesn't exist? Through utility pole data surveys we could get answers. These surveys entail getting the GPS location of each pole, identifying the pole numbers, finding out who owns the poles, and determining what is actually on the poles.

These utility pole data surveys help to develop efficient fiber route design by minimizing the number of poles that need to be attached to and provide the details of the amount of miles of fiber that need to be built to complete a network.

Recommendation #2: Fund Utility Pole Data Surveys

Municipalities have not been involved in the application process for funding through New York State's Broadband Program Office. We find out what projects

have been awarded funding when those announcements are made publicly. Sometimes the funded locations make sense and other times high need areas are overlooked.

Recommendation #3: Require companies applying for State funding to describe how municipalities were involved in the application process and require sign off in the application by the chief municipal officer.

The New York State Broadband Program Office is located in New York City. The Upstate New York Towns Association had a speaker from that office, and it was a most informative meeting. The speaker was from the New York City area and was surprised to learn how bad the lack of broadband and the underserved is in rural Upstate towns. Remember the Upstate rural resident driving a 40 mile roundtrip to do banking. Would that happen in New York City?

Recommendation #4: Move the Broadband Program Office from New York City or establish a satellite office in an Upstate town or village so the people doing this work are close to the communities with the largest broadband needs.

There is emerging, promising technology such as Google's Project Loon. Antennas are placed inside of giant balloons which are solar powered. The balloons are in the stratosphere and communicate with antennas on the ground which connect to local internet providers.

Recommendation #5: Be involved with emerging technology. Have staff from the New York State Broadband Program Office and New York State officials studied Google's Project Loon and considered trying an experiment with this technology in a high need rural area?

Thank you for giving me the opportunity to speak about this very important topic. Expanding access to high speed internet remains a task as large as rural electrification 100 years ago. We must ensure that every home, business, school, municipality, not for profit in Upstate New York is connected with reliability at an acceptable speed.

Adverse Effects of Marijuana

Significant marijuana usage lowers dopamine levels in the brain which impacts neurochemical levels in the brain and reduces motivation.

Christopher Bergland, "Does Long-Term Cannabis Use Stifle Motivation?," *Psychology Today*, July 2, 2013.

Using marijuana causes impaired thinking and interferes with a person's ability to learn and perform complicated tasks.

Marijuana, National Institute on Drug Abuse (NIDA), February 12, 2018, 8.

Persistent marijuana use disorder was found to occur among individuals who used pot frequently starting in adolescence. Their average loss was six to eight IQ points as measured in mid-adulthood. *Marijuana*, NIDA, 17.

Those who used marijuana early showed a decline in verbal ability (equivalent to four IQ points) and in general knowledge between preteen and early adulthood.

Marijuana, NIDA, 17.

A permanent decline in IQ among persistent users has been demonstrated.

Madeline H. Meier, Avshalom Caspi, Antony Ambler, et. al., "Persistent cannabis users show neuropsychological decline from childhood to midlife," *Proceedings of the National Academy of Sciences of the United States of America* 109. no. 40 (October 2, 2012): E2657-E2664.

"Cannabis-use disorder" can lead to an addiction in which the individual user finds it frequently interfering with aspects of day-to-day life. Studies suggest that about 17 percent of those who start using the drug in their teens will become dependent.

J.C. Anthony, "The epidemiology of cannabis dependence," *Cannabis Dependence: Its Nature, Consequences and Treatment*, ed. R.A. Roffman, R.S. Stephens (Cambridge, UK: Cambridge University Press, 2006), 58-105.

Exposure to THC (tetrahydrocannabinol) prior to maturity increased the likelihood that the individual would self-administer other drugs to acquire the same or greater effect.

Susan F. Tapert, Alecia D. Schweinsburg, Sandra A. Brown, "The Influence of Marijuana Use on Neurocognitive Functioning in Adolescents," *Current Drug Abuse Reviews* 1, no. 1 (2008): 99-111.

Marijuana smoke contains carcinogenic combustion products, including about 50 percent more benzoprene and 75 percent more benzantracene (and more phenols, vinyl chlorides, nitrosamines, reactive oxygen species) than cigarette smoke.

Marijuana, NIDA, 29.

Several studies done in the United States and Canada have shown that because legalization has happened or is impending, people believe that it is a signal from their governments that cannabis is a safe and benign substance. Meanwhile, users are frequently unaware that the potency level of marijuana-the concentration of the hallucinogenic ingredient THC-is now up to five times higher than it was in the 1960s.

Marijuana, NIDA, 15.

Marijuana and Health Effects

People who have taken large doses of marijuana may experience an acute psychosis, which includes hallucination, delusions, and a loss of the sense of personal identity. These unpleasant but temporary reactions are distinct from longer-lasting psychotic disorders, such as schizophrenia, that may be associated with the use of marijuana in vulnerable individuals.

Marijuana, National Institute on Drug Abuse (NIDA), February 12, 2018, 8.

Several studies have been published that link marijuana to increased risk for psychiatric disorders, which include psychosis (schizophrenia), depression, anxiety and other mental disorders that lead to substance abuse.

Marijuana, NIDA, 24.

Cannabis users who carry a variant of a specific gene are at a seven times greater risk of developing psychosis than users without the variant.

M. DiForti, C. Iyegbe, H. Sallis, et al., "Confirmation that the AKT1(rs2494732) genotype influences the risk of psychosis in cannabis users," *Biological Psychiatry* 72, no. 10 (November 15, 2012): 81-816.

Marijuana use could be problematic for people with an irregular heartbeat, or arrhythmia, because it activates the sympathetic nervous system.

"Legalized Marijuana and Your Heart," *The Beat*, University of Ottawa Heart Institute, published June 2017.

Within a few minutes after inhaling marijuana smoke, a person's heart rate speeds up, the breathing passages relax and become enlarged, and blood vessels in the eyes expand, making the eyes look bloodshot. The heart rate—normally 70 to 80 beats per minute—may increase by 20 to 50 beats per minute or may even double in some cases. Taking other drugs with marijuana can amplify this effect.

Marijuana, NIDA, 31.

Smoking marijuana may reduce the respiratory system's immune response, increasing the likelihood of the person acquiring respiratory infections, including pneumonia.

Marijuana, NIDA, 25.

Smoking marijuana has been linked to cases of air pockets in between both lungs and between the lungs and the chest wall, as well as large air bubbles in the lungs among young to middle-aged adults, mostly heavy smokers of marijuana.

"Marijuana and Lung Health," American Lung Association, last modified March 23, 2015.

Marijuana's higher-burning temperature, combined with its smoking method, causes increased loss of cilia in the lungs, leading to increases in rates of life-threatening emphysema.

M. L. Howden, M.T. Naughton, "Pulmonary Effects of Marijuana Inhalation," *Expert Review of Respiratory Medicine* 5, no. 1 (February 2011): 87-92.

THC is detectable in the body after as little as 15 minutes of exposure even if the person is not actively smoking it. Anyone exposed to second-hand smoke in a poorly ventilated room will test positive.

"Second-hand marijuana smoke can cause bystanders to fail drug test: study," *Edmonton Journal*, December 1, 2017

Marijuana and Vehicular Accidents

THC disrupts functioning of the cerebellum and basal ganglia, brain areas that regulate balance, posture, coordination, and reaction time. This is the reason people who have used marijuana may not be able to drive safely.

Marijuana, National Institute on Drug Abuse (NIDA), February 12, 2018, 10.

The frequency of collision claims per insured vehicle year rose a combined 6% following the start of retail sales of recreational marijuana in Colorado, Nevada, Oregon and Washington, compared with the control states of Idaho, Montana, Utah and Wyoming. The combined-state analysis is based on collision loss data from January 2012 through October 2017.

Highway Loss Data Institute Bulletin, Vol.35, No.8: April 2018

Colorado, Oregon and Washington combined saw a 5.2% increase in the rate of crashes per million vehicle registrations, compared with neighboring states that didn't legalize marijuana sales. The study examined police-reported crashes before and after retail sales began in Colorado, Oregon and Washington from 2012 to 2016.

Insurance Institute for Highway Safety, *Status Report Newsletter*, Vol. 53, No.6, October 18, 2018

The share of fatal accidents in which at least one driver tested positive for marijuana increased in Colorado and Washington after marijuana was legalized in both states in 2014. In Colorado the fraction of positive tests increased by 92% from 2013 to 2016; in Washington the increase was 28% during that period.

Benjamin Hansen, Keaton S. Miller, Caroline Weber, "Early Evidence on Recreational Marijuana Legalization and Traffic Fatalities," *National Bureau of Economic Research Working Paper No. 24417*, March 2018

Marijuana-related traffic deaths in Colorado when a driver was positive for marijuana more than doubled from 55 deaths in 2013 to 125 deaths in 2016.

"The Legalization of Marijuana in Colorado: The Impact," *Rocky Mountain High Intensity Drug Trafficking Area*, Vol. 51, October 2017

Drivers who test positive for marijuana or who report using marijuana are more than twice as likely as other drivers to be involved in motor vehicle crashes.

Li M, Brady, JE, Dimaggio CJ, Lusardi AR, Tzong KY, Li G. "Marijuana Use and Motor Vehicle Crashes." *Epidemiol Rev* 2012; 34(1):65-72, Columbia University Medical Center

Acute cannabis consumption nearly doubles the risk of a collision resulting in serious injury or death.

"Acute Cannabis Consumption and Motor Vehicle Collision Risk: Systematic Review of Observational Studies and Meta-Analysis," *British Medical Journal* 2012; 344:e536

Marilyn Huestis, a professor at The Lambert Center for the Study of Medicinal Cannabis and Hemp at Thomas Jefferson University, has said that many people don't realize cannabis can impair driving ability. "The truth is, if everything goes as it's supposed to go, you can make it home. But you can't respond appropriately and quickly when an unexpected event occurs. You see this over and over again in crash cases."

Linda Carroll, "Many Drivers Who Test Positive for Marijuana Have a Child in the Car, Survey Finds," NBC News, April 25, 2019.