

NO. 32

JOURNAL
OF THE
SENATE
OF THE
STATE OF SOUTH CAROLINA



REGULAR SESSION BEGINNING TUESDAY, JANUARY 12, 2021

FRIDAY, MARCH 4, 2022

Friday, March 4, 2022
(Local Session)

~~Indicates Matter Stricken~~

Indicates New Matter

The Senate assembled at 11:00 A.M., the hour to which it stood adjourned, and was called to order by the ACTING PRESIDENT, Senator SCOTT.

ADDENDUM TO THE JOURNAL

The following remarks by Senator MALLOY were ordered printed in the Journal of January 12, 2022:

Remarks by Senator MALLOY

To explain this Resolution, that I think it is eminently important. We can be the august Body that we say that we are and tackle issues that need to be tackled. However, we must do it in a reasonable and very rational manner.

The former PRESIDENT of the Senate, who has joined me on the floor now, said to me during the debate of the Heritage Act, "I like you, and don't like you for the same reason." As the Senate began reaching conclusions on the Heritage Act, I had to file an action and I needed the former PRESIDENT's name on it -- I didn't have another option. But we worked together and we got a good result, a just result. The history of the Heritage Act Bill has nothing to do with this Resolution.

My mother, grandmother, wife, my two sisters, and my daughter are all beneficiaries of a great legacy of people. My mother taught me how to treat my sisters, and my dad beat me when I treated them poorly. I think about how times have changed, we don't discipline like that anymore. As I was conversing with my friends on the other side of this issue (neither of which are here), I said, "We've got to address issues as they relate to monuments."

I want to talk to you for a few minutes about monuments on the State House grounds. It is a tough situation because some say, "Where do you start and where do you stop?" I would like to put forth one proposal that I discussed with Senator DAVIS and Senator McLEOD. This is not the Heritage Act, this has to do with an act passed in 1928. In 1928, we had a provision for the erection of a monument to the memory of Dr. Marion Sims on the State House grounds, a small monument in the corner of the grounds near Assembly and Gervais Streets. Not to belabor the point, but in today's world we know there were major contributions to the

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medical field that were made through engagement in inhumane practices in an effort to do so. These practices do not reflect the values that we hold here in this Body today. You all know the history of Dr. Sims, it goes right along with the Tuskegee syphilis experiment and the Henrietta Lacks issue where experimentation was done on people that were not free to say no. Dr. Sims was performing gynecological surgery on women without anesthesia. This is inhumane. The question is, "Could they consent?" The question is not whether they could say "yes", but whether they could say "no". In his day, Dr. Sims was considered a hero for the work he did on enslaved women. History must be preserved, and I hope we will take a look at this Resolution so that the museum will be able to enshrine such monuments and put them in the appropriate place. I know that it is sometimes difficult to make these decisions. One argument that some may make is that, "You never know where to stop." However, I don't think anyone in this day and time could endorse what Dr. Sims was doing under any circumstances.

We have to do what is right. We are not asking folks what the State can do for us. We are asking what we can do for our State. I use that as a parallel to John F. Kennedy's words, "Ask not what your country can do for you, but what you can do for your country", but I always look at the last part of that speech, and what he is saying is that God's work must be our very own. God's work must be our own.

My grandfather said when you pray, you move your feet. I think the time is right for us to do what is right, with regard to the statue of Dr. Marion Sims on the State House grounds. Do we condone this conduct happening to our mothers, grandmothers, wives, and children, no matter how great one may become?

Therefore, I believe it is the appropriate time for all of us to join in this conversation, to have this discussion together. We need to get this Resolution into a committee and talk about it. We don't need to add anything to it. This is something we can do in a bipartisan way. I will wait for others to chime in on this. I know that we started early this morning, but I wanted to be able to explain this particular Resolution to you and I hope we are able to get it through a committee and adopted so we can make South Carolina what we really want it to be. We don't want to honor someone for inhumane practices that do not reflect the values of this Body, and at the same time, we also want to make certain we can recognize one of South Carolina's heroes. Thank you.

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ADDENDUM TO THE JOURNAL

The following remarks by Senator MALLOY were ordered printed in the Journal of January 19, 2022:

Remarks by Senator MALLOY

Thank you Mr. PRESIDENT, members of the Senate. We have done a lot of work in this Body, over time. And as I look back and reflect, I've been over here for almost 20 years. When I came in the beginning we had a conversation about CON, and I learned on that same day that it was Certificate of Need. It was one of those things that nobody touched, because every time it would come up, the Senate would almost erupt. Senator PEELER, I'm sure you remember, we had people that were dividing interests on both sides, and I watched with interest as to how it occurred. Later on in the discussion, we started talking about Adam Smith. We talked about the free enterprise system, and how you do not implement it to the detriment of the consumer. So how then, do you start working on a balance in a Body with folks that have differing views?

As I pondered, I go back to recent experiences. Unfortunately, I spent a good part of the year 2020 in the hospital. Not for myself, but with both of my parents. Both of them had strokes. As I conversed with the neurologist there at McLeod -- a wonderful young woman. She said, "I'm over here because unfortunately, this is the stroke capital of the country." As I began to educate myself and started researching where I live, Darlington County, where I'm from, Chesterfield County, both of these counties have hospitals. Marlboro County does not, and Lee county does not. That's two of the seven counties in South Carolina that do not have a hospital. McCormick County, Saluda County- where Senator MASSEY represents -- no hospital. Fairfield County, where Senator FANNING represents -- no hospital. Barnwell and Bamberg Counties where Senator HUTTO represents -- no hospital. Here's what I learned: it's a good thing that the practice of medicine advances from one year to the next. We need to look at quality of care, and the quality of care we have in our area is driven by population. I understand the concept that, "Burger King doesn't ask McDonald's if they can build a Burger King beside them." But lives aren't at stake with regard to fast food establishments. What I learned from that neurosurgeon was that if you have a stroke and you get here within a certain period of time, they can reverse it. I don't know how, but they can save your life if they can get you there on time. Folks, if you're in a rural area and you can't get there in time, it's the difference between life and death.

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We grow from one generation to the next. It's been 20 years since this debate started in my tenure. Those that have been here longer will tell you that this issue has been here longer than that. And here we are, having yet another discussion about it. So I would like to express my deep concern as to what happens to the rural hospitals if they run at a loss and are not able to provide care. I am concerned, even though I want to vote for the repeal, about how to keep what happened to Texas, where they lost many of their rural hospitals, from happening here. I was not privy to discussions that were had in committee. I don't know to what extent this was discussed there. But I would like to know, how does this affect our rural hospitals?

Senator SETZLER proposed an amendment stating that the definition of a hospital means a facility that organizes or administers overnight medical, surgical care or nursing care for an illness, injury or infirmity, adding these words, "and must provide on campus emergency services". The Senate just passed this Bill without a roll call vote. What does this mean? What's the emphasis on how it impacts what I'm trying to accomplish as it relates to the rural hospitals? How does it affect costs? Who then goes to this hospital? If you have on site on campus emergency services, then they will have to take in all of those brought to that hospital, if that occurs.

So does that negate, or roll back, some of my concerns as it relates to the rule of hospitals? Will competition be fair if they are going to put a hospital in these areas, or can someone set up some radiological services building right next to it and take away all of patients that have are insured and/or able to pay, and not take Medicaid and self-pay patients?

And that's what I'm still learning more about is the Medicaid Disproportionate Share Hospital Payments (DSH) money and what effect does it may have.

And so it puts us in a quandary. I think the message has to be sent and will be sent. What does it mean for the rural hospitals? Are we hurting them or helping them? Does the measure we put into this amendment just a moment ago, negate the need for exempting these critical access hospitals as designated by the center for Medicare and Medicaid services? And so the outcome is -- I'm not sure. So it is my desire to give the Bill second reading today, carrying over all amendments to third reading, and essentially we'll do that.

I realize the process and procedure for this Body is that redistricting comes right behind this debate. And for those that follow it, tomorrow

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it comes in masthead if we give this Bill a second reading, so we're going to take it up.

But I think that, if we get a chance, that we waive the three-fifths requirement on the third reading vote to carry it up -- so we get a chance to have more discussion. I hope that you will indulge us in having this discussion about what effect this has on the rural hospitals. We quickly exempted the nursing homes as soon as we started this debate. And so now where does it leave us? I don't think anyone can adequately explain or predict everything that would happen to the areas that are totally underserved.

So we address the issue for a bigger group, they voluntarily came in-- medical schools, that will end up doing it, began through the joint bond review, but I'm also just curious as to making certain that when those folks that is -- if we repeal -- and we get the AFC's, will they cherry pick our most profitable patients, or to force those that will be inclined to have medical care in the rural areas because we know that it is not that profitable.

So the question becomes -- if this does not create a position where we can have better access to medical care, then what are we choosing? And so I conclude, after watching this issue flounder for many years, we should applaud the Senate for coming in and having a vote. I think the message to the community is, and I've had to explain this, it is a hard vote for everyone. For those listening outside, you saw what happened last week; before we got to this place of refining it, there was a 31 to 9 vote on a tabling motion that was a reform piece. Unless you know where the majority of the Senate is, I don't think that has changed. I think that you get a resounding vote today.

And so with that I've said today, my vote is going to be also to give the Bill a second reading. But I want the world to know that I'm very concerned about what happens to my rural areas that I represent, and when given a chance, will we choose life over the cost? I hope the Senate will indulge us for the motions that are going to be made, to make certain we can address those particular issues that we have, to see what effect Senator SETZLER's amendments have, and have some of the experts to come in and answer questions for us to see whether or not we may need to exempt those critical access hospitals, so we can encourage, not discourage, medical care in these rural areas.

Folks, we can do both. It is about our humanity. You should not be denied -- just because of the area that you live in, having access to advanced medicine. Just because South Carolinians live in a rural area,

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this should not affect their access to medical care. We are the Senate, the august Body that we are supposed to be, we must address these hard issues. We all have to end up really supporting the majority, the majority spoke last week, but please listen to the minority. It's not party, it's about those that do not have the voice. They elected us to come up here and advocate for them. So as we move forward, we will have a chance to have more discussion about this, so please consider the effect, as we repeal CON, which is about to happen -- that these amendments have, see what effect it will have on those seven counties and other rural hospitals. Thank you.

ADDENDUM TO THE JOURNAL

The following remarks by Senator KEVIN JOHNSON were ordered printed in the Journal of February 9, 2022:

Remarks by Senator KEVIN JOHNSON

Thank you, Mr. PRESIDENT, and members of the Senate. I will not be long at all. I think everybody understands the position that I have with this Bill and how I feel about it. I was almost hesitant to do this because Senator HEMBREE had already made some points that I was going to make. I was also going to say that my feelings are based on my involvement with this Bill since eight years ago when I was a member of the subcommittee. I have said it several times, and I will say it again, I would have rather been debating recreational marijuana as opposed to medical marijuana. And as Senator HEMBREE said, "I would probably vote against that Bill but based on folks who have contacted me about this Bill, it looks like that's what they wanted anyway, and what they're hoping is going to transpire from this medical marijuana." Someone mentioned Julian's law. I think that is the Bill we passed a few years ago, that legalized the oil in marijuana. We had those hearings and it was very sad to see so many parents bring their children into the meeting room in wheelchairs and some wearing protective helmets because they had so many seizures in a day. It was made clear to us that it was something about the oil, minus the THC, that it would help a young child that was having a hundred seizures a day. It was discovered that if used they may only have two or three seizures a day, and so of course, I supported that Bill. I was glad that it passed. I also supported industrial hemp, and a lot of people, who contacted me back when we were debating that Bill thought that when we passed the industrial hemp, we were passing marijuana but we did not. I just want to let you know that

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I did support those Bills, but I do not support this medical marijuana Bill and as you all know, I have never tried to convince anybody to agree with me. I have never tried to put my name on a Bill or block the Bill, but I just have some observations that I have made. Senator GARRETT held up a book, and well I have a book that I was given back when I was on the subcommittee. It is a book by William Bennett who is a former Secretary of Education for the United States of America, and it is entitled "Going to Pot: Why the rush to legalize marijuana is harming America." I have had a lot of information given to me about this Bill, but I found most of what I like about opposing the Bill is in this book. It makes a lot of great points, as far as why medical marijuana is bad, and then I often wonder, as I listen to the debate, why do we keep referring to this as a medicine? I don't think it's medicine but that's just my opinion, and other people have their own opinion. I think somebody said earlier, maybe Senator HEMBREE, and I agree with him that some people do find relief from marijuana. Some people may find relief, but I think a lot of people do not. I would tell you that most of the people who contacted me about this Bill -- it wasn't about any type of medicinal value, it was about getting high, and most of the folks who contact me about this Bill, I don't mean to be ugly but to be downright honest, they were potheads. They saw this Bill as a way to have access to marijuana legally and that is why they supported the Bill.

It had nothing to do with medicinal value or whatever. When I was on the subcommittee, an individual verbally attacked me personally. He was upset, and he just went off, but it did not bother me. He later apologized. He told us, he was from California, and how marijuana was so beneficial. I think the very next day somebody sent me a picture of him on Facebook with loads of marijuana, so it turns out this person stood to make a lot of money if the Bill passed in South Carolina. I also had one visit that stuck out in my mind of a guy that came to my office. He rolled into my office in his wheelchair. I think he said he was a veteran, and he explained how he has excruciating pain and other issues and the only thing that helps him is marijuana. When that guy left my office, I really felt bad for him. He didn't convince me, but I felt bad for him because I know that people do suffer from a lot of issues. I guess it was maybe ten minutes later that I got a phone call from someone in Sumter, and they said, "There's not a thing wrong with him, and he borrowed the wheelchair. He is a pothead. He wants marijuana." That weighed heavy on me. What also weighed heavy on me were some physicians that I have a lot of respect for back home, earlier on in this

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debate, seven, eight years ago, and they talked about medical marijuana and they told me how much they were against it. They told me the increasing number of young people that were coming to their practice dependent on marijuana. I told you before, by choice, I live in the neighborhood, which I grew up in. I built a house right next to my mother, and I contemplated moving several times but I stayed there. A few streets over is an apartment complex surrounded by gang activity and sometimes they do things that young people should not do. Therefore, I get to see firsthand how marijuana has just destroyed people's lives, especially young people, and more especially young black people. I go to the barbershop and because of Covid we are outside waiting to be seen. While waiting to be seen by the barber, I am sitting in my truck with my adopted grandson and all we can smell is marijuana. There were young guys -- 20, 25, 30 years old -- sitting in their cars and trucks waiting to go get a haircut and smoking marijuana. I hope the owner is not watching but if he is, I am speaking my truth. The last time I went in the barbershop I almost choked because of the strong aroma of the marijuana. I went to another barbershop and I remember one day when I was taking my grandson to school and we stopped to get a haircut, and the scent of marijuana in the barbershop was extremely strong. I thought to myself, "I'm going to take him to school and he's going to smell like marijuana and I know what they're going to think." They're not going to know that I'm a person that's never even tried it." Never even had a puff of a marijuana cigarette. I've been around enough of it in high school and college. Anyway, the other thing I want to say about this Bill is that there has been a lot of talk about the percentage of people that want to see medical marijuana. I do not think the whole story has been told. I read a study conducted by Winthrop University and it said that 70% of people would like to see medical marijuana made legal but the second half of that statement says only if it is regulated by the FDA, so I think we need to get the whole story out there. This book here says that back in 2012, 34,000 people had a medical marijuana card, 3.7% used the card to help ease cancer symptoms, 1.5% from glaucoma, 1.6% from aids, but 89.8% of those people out of the 34,000 that had that marijuana card used it for pain, just terrible pain. The other part of the story is that only 13% of those folks were over 60 years old, 73% were men between the ages of 18 and 30 years old, which is normally the healthiest part of our community. Those same men had a card saying they needed medical marijuana for pain. I already talked about medical marijuana being more expensive than how you can get recreational marijuana now but I'm

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concerned that if this Bill passes -- how are the people in my community and that I live next door to are going to afford to get medical marijuana? Shouldn't they have relief? But it will be more expensive. This book was written in 2012 when I was on the subcommittee so maybe things have changed, but it said that every single state that passed medical marijuana now has recreational marijuana. Therefore, just as people are hoping, we pass medical marijuana, and the next thing we are going to pass is recreational use, making marijuana fully legal. There was an article in the Denver Post that stated that nearly three-quarters of teens in two metro area substance abuse programs said that they use medical marijuana that was bought or grown for someone else and that's what's going to happen in this case with marijuana just like it happens with drugs like opioids and even Viagra. People have prescriptions for these types of drugs, and then they end up in the hands of people who shouldn't have them. So a lot of young people are going to have access to this medical marijuana because somebody they know will have a prescription for it and they'll either give it to them, sell it to them, or the kid is going to take it from them. Marijuana used by 12 to 17 year olds is dramatically higher in states that have legalized marijuana. Young people are going to have access to marijuana more than ever before and this all may lead to improper brain development, becoming more dependent on marijuana, and trying other harsh drugs. Nationwide, over 70% of teens admitted to a substance abuse program claim that marijuana is their drug of choice, not alcohol, not cigarettes, not prescription drugs, but marijuana. In 2010, marijuana contributed to nearly 3,000 traffic fatalities or 12% of all traffic deaths. So my thought process is that the more we make marijuana available, the more we are going to have people out on the highways and byways driving under the influence of marijuana. I just told you all about being rear-ended in Charlotte, NC. When the accident happened, I got out of my car and all I could smell was marijuana and the sad part of that story is that the lady that hit me had a three or four year old daughter in the car with her, and she was driving around smoking marijuana. Doctor Sanjay Gupta said back in 2009 that he supported the concept of medical marijuana. After he made that comment, he did some research and studies and came back in 2013 and apologized for saying that medical marijuana was a good thing because he realized that it wasn't. I don't agree with the concept that's being implied that medical marijuana is a cure for everything. I will agree that some people get relief from marijuana; however, I do not know if they are just in such a state of high that they do not know they are in pain. I

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do understand that some people get relief. I got a letter today from a person back in my district, asking me to support this Bill because he is a 100% disabled veteran, and he has to smoke two joints a night so that he can sleep. Then, I got another email from someone else saying just the opposite, and they did not want to see this Bill passed. I believe marijuana is a gateway drug. I know people who started with marijuana, then went to crack, then went to heroin, then went to meth, and then they went to their grave. We know of people, and I will not call names because they have families, but we know of celebrities that started with just alcohol and marijuana and then one thing led to the other, and they ended up killing themselves or they committed suicide or whatever. I had a question about the fiscal impact, but I think that question was addressed a while ago. I have a question but I'll have to look back at the Bill, to see if this Bill will even allow tracking, so we would know how much marijuana a person has, and is there anything to say how much someone can get. If I have a bad back, then I can get x amount and if you have a bad back and your problem is worse than mine, then do you get more or does everybody get the same amount? From what I read, the amount of medical marijuana people can get every two weeks is alarming to me. Therefore, we know that the South Carolina Medical Association is against the Bill, the South Carolina Pediatric Association, the American Academy of Pediatrics, and the American Ophthalmological Society are all against the Bill. The American Medical Association, the American Society of Addictive Medicine, and we all got the correspondence from the South Carolina Baptist Convention where they are adamantly opposed to medical marijuana that is not regulated by the FDA.

ADDENDUM TO THE JOURNAL

The following remarks by Senator GUSTAFSON were ordered printed in the Journal of February 22, 2022:

Remarks by Senator GUSTAFSON

Russian President Vladimir Putin ordered combat forces into Eastern Ukraine. For weeks, the United States intelligence services have been informing our nation's leaders that the Kremlin would likely begin false-flag operations to justify a conflict in the newly democratic Ukraine. To the point, this Russian war machine is invading pro-Russian separatist regions of Ukraine this very moment. Lest we forget the Russian invasion of Crimea -- didn't we learn anything? Again, Russia's war

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mongering tendencies are on full display to the world, fueling their sickening propaganda machine.

We now stand on the precipice of what could be the largest, costliest European military action since World War II. What we, as American leaders say and do today, can make its mark on history for decades, maybe even centuries. With deep conviction, I must implore that we must move forward boldly, and without further hesitation, for the protection of democracy. The Ukrainian people have endured this crisis like so many others before it. History will favor those that are brave enough to call this terrible situation what it is: a battle between good and evil. I want to also express the sheer and unabashed gravity of the situation.

There are elementary schools in Russian occupied regions, with holes blown in the walls from Russian-backed artillery fire. Citizens face the imminent threat of being once again transformed into a stifled population under the boot of Putin's violent and authoritative rule. Dr. Tim Mousseau has experienced the Russian military firsthand. Dr. Mousseau has been conducting research over the last 15 years at the site of the Chernobyl nuclear disaster. He has been unable to return and finish his research because coincidentally, this location is in the most direct path from the Russian border to Kyiv. In one instance, Dr. Mousseau and his team were detained for three days after being falsely accused of being CIA operatives.

Ladies and gentlemen, we are dealing with a de facto dictator with delusions of grandeur. For the good of our Nation, all allied countries, and especially the Ukrainian people, I'm calling on our leaders and our assembly to put our foot down, lead boldly, as a signal to Russia and Vladimir Putin himself, that we will not stand idly by and allow democracy in Eastern Europe to dissolve before our eyes. We owe that, not only to ourselves, but to our Nation.

ADDENDUM TO THE JOURNAL

The following remarks by Senator MATTHEWS were ordered printed in the Journal of February 16, 2022:

Remarks by Senator MATTHEWS

I hesitated coming before you for a couple weeks in reference to this issue because I know we have been dealing with a lot of issues that affect the lives of many hurting South Carolinians. I am not going to be one of

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those ones who again downplay the hard work of all of the Senators who worked so hard on the legislation that was previously before us.

I would like for you to follow with me for a little bit. I will try to be short. All of you know that I am a volleyball mom and that I have four girls. Imagine, a mother who has four girls like myself -- all of the girls about the same age. We did the volleyball circuit together since our daughters were ten years old. Her oldest daughter started with mine and in June of 2016 was 15 years old. We dropped our kids off to the Mount Pleasant Center and we'd usually sit in the stands and just chat and lollygag -- she had been going through a divorce -- just talking about life in general, being a single mom, and getting it done if you know what I mean. We would talk about how crazy the girls were -- their going through puberty. We would talk about how crazy her husband was and about how she had just finished at MUSC, had gotten her degree, and was opening her counseling center as a psychotherapist. She was from a very religious family on Wadmalaw Island.

On this particular night I was like, "Where are you going?" because we would usually sit there, drink, hang out, and eat snacks while the kids were in practice. And she said, "Girl, I'm getting ordained. I am getting ordained tonight." As she left her daughter at practice that night, I said to her, "Well, let me know if I need to bring Kaylin downtown." She said, "No, her sister is going to come and get her." I waited -- I hung out with the other parents in Mount Pleasant, at Park West, as you know very well Senator SENN -- for practice to be over. As my daughter and I left practice and came through Charleston, it just seemed so eerie. You know how something hits you and you know something is wrong? I got to Walterboro and was sitting on my sofa, as I usually do, looking at the news on TV, and I got a call. I start calling Senator MALLOY, all the while I am getting calls from our neighbors in Colleton County and Charleston that something horrific has happened at Mother Emanuel. I started screaming and yelling because I had just talked to Senator Pinckney. We were to meet that next week regarding some issues in Colleton County. I also knew that my friend, Dr. Depayne Middleton, was at the church with Senator Pinckney because he was ordaining them. I knew what Senator Pinckney was going through, having to rush from this Body to get to an ordination of all of those ministers at that Bible study that night. I knew how important it was to everybody there. I felt it. He was very conscientious. From my conversations with him, I also knew what he was going through with the threats he was receiving when he stood on this floor and did such a great job talking about his beliefs

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regarding the gun issue and the problems that we have. I know firsthand, what I have gone through, and I am just a baby Senator. I have had emails sent to me, calls that came in, and my cars keyed for the positions that I have taken. I don't belittle the fact that I know everyone in here has been contacted by the people who I call, "the fringes." But we do our job anyway. And we showed last week that we really care about the people of South Carolina.

I just don't represent the six areas of the Lowcountry; I represent South Carolina. I apologize to my people on all sides of the aisle, if I cannot come to you and beg you to think, not about politics, but to think about the sacrifices that you are making today. The sacrifices you have to make tomorrow for your political positions and the positions of your people. I can't sit and beg you to set aside politics to do the right thing. There are 48 states in America that have passed Hate Crimes Bills. I cannot believe that we have ten from this Body, and for the listening audience -- see Bill H. 3620 -- who have opposed legislation that would give our law enforcement officers -- it would give our solicitors the right to further investigate and do their jobs.

Imagine going to a synagogue on a morning with your family in tow. In the last week and last year, we have had incidents in America where you go to a church on Easter or you go to a synagogue and while you are sitting there, an ISIS person comes in and blows you away. If that were to happen here in the State of South Carolina, in Walterboro, are you trying to tell me that my solicitor and my sheriff's department cannot prosecute that person for a hate crime? Is that fair?

Is it right for a police officer who is doing his job as he normally does -- an officer who is not a bad cop -- because you know there are both good and bad in every sect of our employment spectrum -- for some far-right person -- I do not care whether they are white or black. They are involved in these incidents at Walmart, in Texas, and other places. I have a list of all of them or you can research them; or, after the George Floyd killing -- to come up and assault officers? That's wrong! That's a hate crime because of an animus. I'm not going to get into the facts of it; it's just common sense. This is low-hanging fruit for this body. It is low-hanging fruit.

I cannot believe we are worried about texting and everything else and we do not care about protecting law enforcement. We are not caring about the Easter Sunday goers. We are not caring about taking care of the people we're supposed to. Somebody said something to me that this is about constitutional rights. This doesn't have constitutional issues.

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This is the same thing law enforcement and solicitor's offices do with other types of offenses to enhance when a person does something they didn't have to do. For instance, if I hit a police officer in an arrest without any reason -- it is only a one-year offense -- I go to jail for one year. But, if it can be proven that I did that because I am just mad about what police officers are doing, that solicitor and that officer can show a pattern to get more time. So, I don't understand where we're going. We can do better! We owe Senator Pinckney that. We owe the State of South Carolina and we owe law enforcement officers that. This is not a political issue. It is a human rights issue. Why can't we stop pandering to those other sources out there and do what's right? I'm not going to beg. I cannot do it. You're going to be judged by this one day. I hope your car doesn't get scratched and I hope your children don't get shot in a church over some issues behind this. I hope the State of South Carolina will have at its means the way to prosecute people as they should be prosecuted. I am sorry if I took more time but this really does bother me.

ADDENDUM TO THE JOURNAL

The following remarks by Senator KIMBRELL were ordered printed in the Journal of February 23, 2022:

Remarks by Senator KIMBRELL

Good afternoon. I wanted to briefly talk about something I would normally discuss when I introduce legislation but given it is the second year of a two-year session, I will work with people between now and next year to figure out how to address this issue. It came up in numerous conversations I had at the Capital City Club with the Economic Development Association and that is something called economic, social and governance or ESG scores. This is something many of us are starting to learn about. I have recently become familiar with the concept. Apparently 82% of companies are adopting some form to determine credit worthiness, access to capital, how people may be promoted or employed in businesses and banks across the United States. Essentially this is going to be a way we determine whether someone is credit or employment worthy beyond a background check. Essentially it will have a rating. Many companies will also wave your score on certain environmental issues. For example, if you support or have given investment capital to Exxon Mobil, you get a deduction. If you have invested in a company that does solar panels or green energy, you get a credit. If you support certain positions considered to be favorable to certain law enforcement agencies, you get a deduction for that. If you oppose certain law enforcement agencies and certain practices they adopt, you get a credit. In other

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words, you are being rated on your ideological belief not on your ability to pay back a loan or do a job.

I feel this is a dangerous precedent. Many are taking action against implementation of ESG scores. Kansas recently passed legislation to this effect. I think about Jefferson's quote, "I have sworn upon the altar of God eternal hostility against every form of tyranny over the mind of man." I truly believe that an ESG score becomes a form of tyranny over people's beliefs, deeply held religious convictions -- over beliefs even on oil and gas exploration. I do not believe in this State we want to go down the road of making it a precondition of economic development that you have the right kind of ESG score versus a good credit score or good business plan. Currently one of the first countries in the world to implement an ESG and call it that was China under the Chinese communist party. I certainly don't believe we want to be following that precedent so I would love to discuss this with members during the off-season and we can hopefully address this in the new session next year. Thank you, Mr. PRESIDENT.

ADDENDUM TO THE JOURNAL

The following remarks by Senator McLEOD were ordered printed in the Journal of February 9, 2022:

Remarks by Senator McLEOD

Thank you, Ladies and gentlemen of the Senate. It's been a long three weeks. I was hoping that I could wait and speak on the Bill. That was before this amendment and since it's a referendum on the Bill, I am going to go ahead and speak. It is nice to see all you all. I don't get down here much anymore. I want to start by saying, thank you, Senator DAVIS. I mean that sincerely. I appreciate your three years of hard work and perseverance. Thank you for caring enough to try and usher our State into the 21st century. Your patience here at the well and your passion for the people of South Carolina and compassion for the people, is truly admirable. It should challenge all of us to do and be better. I've taken copious notes. I appreciate those of you who sent copies of the amendments up to the gallery so that I could participate and engage from up there. What I am about to say, not just about this amendment, but about the Bill -- what I am about to say is not a reflection of you, Senator DAVIS or your efforts. It's not an indictment of anyone in particular, inside or outside of this Chamber. And certainly not of those of us who have been fighting with you to legalize medical marijuana. I am not one to mince words and let's be real -- this amendment is just another effort to kill the Bill. And the Bill is already a much weaker version than the

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original proposal. In fact, it's already the most conservative Bill in the country and a fraction of our original proposals. And yet, for the past two weeks, I've watched and listened, as some of you try to dilute it even more. I've co-sponsored this Bill each time Senator DAVIS has sponsored it -- has introduced it, but this time I am listed last. And the reason that I am listed last on this Bill is because it took me a minute, it took me a minute, to decide whether I wanted to even co-sponsor this version. I added my name to it again, reluctantly, in spite of my reservations. Because if our efforts move the needle, even slightly in a better direction, we'll significantly improve the quality of life for so many South Carolinians. So that means our first big step in the right direction is definitely one worth taking. For years, I've sponsored and advocated for each version of our Medical Cannabis Bill. And for years, many of us have listened, even in the House, to so much testimony from people who traveled from all over the State about the life changing benefits of medical cannabis for South Carolinians who suffer. They continue to suffer in silence with cancer, PTSD, Lupus, Crohn's, Epilepsy, chronic pain, nausea, Sickle Cell Anemia and so much more. I've been listening intently up there to this debate from the gallery while trying to protect myself from Covid. Because, there seem to be no governmental protections or compassion for people with chronic medical conditions like mine. To hear some of you bash, and stigmatize those of us who benefit from medical marijuana hurts. Because the reality is, I wouldn't wish the pain and suffering I've personally endured with sickle cell anemia -- I wouldn't wish it on anybody. And, to think that some of us in this Body would obviously have to feel that kind of pain firsthand. Just to have an ounce of compassion and empathy for people, across the State, who struggle like I do is disheartening. So for those who have expressed judgment, disdain and disregard for anyone who would use marijuana for any reason, shame on you. Shame on us in this Body. Will there be some who abuse or try to beat the system? Of course! That is the case for just about everything. There will be some, there are already some who do it when it comes to opioids and narcotics and other regulated substances. This one is going to be no different. While it's great that neither you nor anyone close enough to you knows what it feels like to have pain so intense -- so excruciating and debilitating -- that it can only be managed in a hospital, please understand that some of us know that level of pain all too well. So well, in fact, that ER docs have asked when I've gone to the ER, many times, Ms. Mcleod, "What's your pain on a scale of 1 to 10?" Believe it or not, I didn't have the words or the

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numbers that were high enough to express it. But how -- how can I prove that? How can I prove to a doctor or anybody else that I am in that much pain? And if sickle cell wasn't a qualifying condition, am I limited to just opioids? To deny those of us who do know that kind of pain one of the few natural remedies that would allow us to live, work, and actively engage in life is a frightening misuse of our legislative powers. So while you may not know what it feels like to stare at a bottle of opiates and wonder if your pain would finally stop -- big bottle. And wonder whether or not your pain would finally stop -- maybe it would if you took the whole bottle, because that's what the kind of pain you're feeling requires or demands. Maybe some of you know what it feels like to have one of your limbs hurt so badly that you'd consider cutting it off, if severing it would make the pain stop just for a minute. So to hear some of you boast about never having used marijuana, and assuring us that you never will, speaks volumes about the level of ignorance and misinformation that's out there. Let me assure you, the majority of those who find hope and relief in medical marijuana aren't pot heads. They aren't weed heads or criminals or characters in a Cheech and Chong movie. And quite frankly, referring to any South Carolinian who is reaching out to us for help in such a demeaning and derogatory manner is beyond offensive. The majority of us -- believe it or not -- are law abiding citizens, taxpayers and voters. We're moms, dads, grandparents, aunts, uncles and daughters. We're neighbors, constituents, parishners and hard working South Carolinians who love our State and are committed to doing our part to make it better. Just because stronger more dangerous and addictive drugs are the preferred or acceptable prescriptions by law, obviously doesn't mean they are better or safer. Fortunately there's another option. When it becomes marijuana, we become particularly interested in those that might drive while under the influence or work while under the influence. Truth is, they would be breaking the law, like too many other South Carolinians. Apparently since South Carolina is the fifth highest in the country for DUI's. Despite our DUI stats, alcohol has never been and probably never will be illegal. Neither have we penalized or vilified those who consume it. Yet we question or challenge the validity of every qualifying condition, because some of you want or seem to think that everybody who wants medical marijuana will lie, cheat and steal to get it. Accusing South Carolinians of faking or embellishing symptoms, possibly using it for purposes that are outside of the prescribed conditions is interesting. Actually, it is ironic -- a better word. Hypocritical, that's a better word. Take Viagra, for instance. When

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I introduced the Viagra Bill in 2016, I discovered that it was originally prescribed for high blood pressure and cardiovascular disease. It just happened that one of the side effects, one of the side effects of Viagra were erections. But we don't want to debate that. We don't want to regulate that because that was a welcome side effect. Nobody in this Chamber or in this General Assembly wanted to talk about that. I am not aware of any attempts to regulate Viagra. But yet when it comes to medical marijuana, we've got folks who come to this well and bring up blunts. Why would we bring blunts into the equation here on the floor. I think there was a casual reference to smoking blunts and it just happened to be connected to some folks who were on trial for murder. It is like wow. I guess that is why we are banning the smoking of medical marijuana in this Bill. Not allowing it to be smoked is just another way of making an unnecessary distinction between those who smoke it and those who if this Bill passes, and this amendment fails, will legally consume it. The same cannabis -- same marijuana, just like the same Viagra used to treat high blood pressure and heart disease can also be abused by men because of its unintended but desirable side effects, and impact it supposedly has on those who suffer with Erectile Dysfunction. And yet I have never heard you all say that Viagra and Cialis and similar drugs can only be used or prescribed for their originally intended purposes. Not sure why we are making so many distinctions. Especially when the same rules ultimately apply to operating a motor vehicle, employment and workplace policies, school policies, and other venues where they would be prohibited. There is no safe harbor for those who abuse this or any other drug or consume it at a time or place it would otherwise be prohibited. Yet some of us continue to challenge the efficacy of medical cannabis when comes to certain conditions. We spent the past few weeks out experting the medical experts. I think Senator DAVIS talked a bit about that yesterday or maybe it was today -- my days are starting to run together. We keep looking for and talking about conditions that we don't think should be on that short list of those who medical cannabis will help. What is our end game? We could stay here from now until June, as Senator K. JOHNSON just talked about, showcasing our opinions about the efficacy of medical marijuana and the acceptable ways to consume it. Meanwhile Viagra and Cialis can be ordered online without physically seeing a medical doctor or getting an official medical diagnosis. Imagine that. Why is that? Why isn't the same access being considered for medical marijuana? So if we truly want to make a difference in the lives of South Carolinians who are suffering and

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we have a safe, effective antidote why wouldn't we do everything we can to make it available and accessible? As someone who has had excruciatingly painful sickle cell crises. I can tell you firsthand when that pain hits, you can't eat, can't sleep, can't think and can't move. Everything hurts. You can't have the quality of life so many who have never experienced that kind of pain take for granted. If this Bill had passed years ago, you may have been able to avoid so much of the pain I have endured because I was so afraid of taking too many of the opioids my doctors prescribed. When my sons played college football, they tore ACL's, LCL's, Achilles'. I didn't want to take the chance of them becoming addicted to prescription opioids or narcotics that could have seriously hurt or killed them. Take a look at the size of this bottle, please, if you will. It is a big old bottle. I still got plenty left in it. These are prescription opioids. Think about how often these are prescribed in South Carolina. Think about how many South Carolinians have overdosed and died trying to manage their pain at home and their dosages at home. When I looked up this drug, here is how it is defined. Narcotic used to treat moderate to severe pain, controlled substance, high risk of addiction and dependence, can cause respiratory distress and death when taken in high doses or when combined with other substances. Are we really going to make a dangerously strong semi-synthetic opioid like this the only option suffering South Carolinians have? Over the years I've been prescribed -- and I am just speaking for me personally, I have been prescribed Morphine, Hydrocodone, Percoset, Oxicontin and Dilaudid. When it comes to pain meds, you name it and I have probably been prescribed it. Some cause nausea and other side effects, but then some of us are damned if we do and damned if we don't. Not taking anything to help alleviate the pain for many of us is simply not an option. When I think about passing a Medical Marijuana Bill -- what it would mean for my sister, a stage four breast cancer survivor and others who have beat cancer but still struggle with chronic nausea and other complications. I am reminded there are far more of us who struggle with chronic medical conditions than you may realize. So the question before us is will we remain in the dark ages, or will South Carolina become the 38th state finally taking a bold, necessary step toward legalizing medical cannabis. For those of us who need it and those of us who deserve a different safer, effective option. Even republican-controlled states like Alabama and now Mississippi have legalized medical marijuana. Like me I am sure all of you have gotten lots of emails from folks across the State asking, "Why is South Carolina still behind the curve of medical cannabis?" A

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recurring theme. It makes no sense that our doctors have to prescribe far more dangerous medications when no one has died. No one has died of a marijuana overdose. But more than 145,000 South Carolinians or Americans, I am sorry, die every year from prescription opioids. Why is South Carolina pushing patients and doctors to the far more harmful option? DHEC has even referred to opioid misuses and overdoses in South Carolina as an epidemic. We know marijuana usage actually decreases the dependence and likelihood of overdosing on opioids. Contrary to misinformation that has been disseminated by those who oppose it, marijuana is not a gateway drug. Let me say that again for the folks in the back. Marijuana is not a gateway drug, but a safer alternative. It doesn't have the propensities opioids have. In fact, 37 other states, like I said, including Alabama and Mississippi, as late as last week have legalized it. At last check an overwhelming majority of South Carolinians support the legalization of it. Let's be real bipartisanship is hard to come by these days but this is a bipartisan effort. Republicans and Democrats alike support this Bill and this issue. Just take a look at those of us who have consistently sponsored and co-sponsored it. If passed, this Bill would create one of the most strictly regulated medical marijuana programs in the country. While I agree that legalization would be a big step in the right direction for South Carolinians. I am concerned that overregulating it will make medical marijuana too expensive for some South Carolinians, and even deny or restrict access to the very people we are trying to help. We haven't spent much time on the economic impact of legalization. We know that passing this measure would generate millions in taxable revenue not more, and create thousands of jobs in its first year, providing a huge economic boost to our state's economy. Like it or not, medical marijuana is safe and effective. Especially when compared to opioids. In 2019 South Carolina physicians prescribed more opioids than the national average. Medical marijuana should be taxed and regulated like any other prescription drug -- not more and not less. Legalization is strongly supported by veteran's groups who say the data shows suicides among combat veteran declines when they have access to medical cannabis. There are so many reasons to support this Bill. Not only am I a proud co-sponsor, I have introduced a Bill to decriminalize it because I will never forget what SLED and the South Carolina Sheriff's Association and other members of the law enforcement said during a hearing on my Schools Bill when I first introduced it in the House. I think it was 2016, and I remember them pleading with us not to remove that tool from their tool boxes. I thought,

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wow, that is an interesting request. So when I asked what they meant by that -- what tool they were referring to? They simply said that law enforcement needed to hold on to the ability to arrest students while in school, and that if my Bill passed, that tool or that ability would be removed from their tool boxes. Sadly, those offices and organizations were well aware that the old disturbing schools law had already sent more than 30 thousand South Carolina students into the school-to-prison pipeline -- had already sent over 30,000 South Carolina students to DJJ. The majority were not engaged in criminal activities at school when they were arrested. Arguably that is the same point they are making here when they voice their opposition to medical marijuana. Saying that the legalization of medical marijuana will impact their ability to distinguish between the good guys and the bad guys. If that is their rationale or reasoning, I can't help but wonder why were those same law enforcement officers and agencies noticeably silent and low key supportive of open carry? Because if there ever were Bills that would impede law enforcement's ability to perceive an eminent threat or distinguish the good guys from the bad guys it is open carry Bills that have sailed through this Chamber despite the opposition -- despite the research and with reckless disregard for those of us who'll be negatively impacted. For any law enforcement officer or elected official to sit in a medical cannabis hearing and mean mug struggling South Carolinians -- Republicans and Democrats who travel from all over the State year after year every time these Bills are introduced -- pleading with us for help and relief -- that is what seems criminal. I was curious about why medical marijuana ever became an illegal substance in the United States. According to Britannica, the answer is simple yet not surprising. The root of marijuana's illegality, Senator K. JOHNSON, is racism. In the 1930's Harry Endslinger, head of the Federal Bureau of Narcotics turned his battle against marijuana into an all out war. His motivation seemed less about safety concerns. Since the overwhelming majority of the surveyed claimed the drug was not dangerous, Endslinger however was not deterred by the science or the scientists. So he sought a federal ban on marijuana and moved full speed ahead with his high profile campaign that relied heavily on racism. Even claiming that the majority of marijuana smokers were black and brown people and that marijuana had an effect on these degenerate races -- such as inducing violence and causing insanity. He also said, "Reefer makes darkies think they are as good as white men." He went on to express his belief that smoking pot would result in white women having sex with black men. Endslinger

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eventually oversaw the passage of the Marijuana Tax Act in 1937, which effectively made the drug illegal across the United States. But it was declared unconstitutional in 1969 and replaced by the Controlled Substance Act the following year. That legislation classified marijuana, as well as Heroin, LSD and others as a Schedule I drug. Also not surprising is that racism was evident in the enforcement of the law as well. Those enforcement disparities are unfortunately still happening today. In 1996 California was the first state to the criminalize marijuana for medicinal purposes. By 2019 more than 30 U.S. states permitted some marijuana use, although it remained unlawful at the federal level. According to Britannica, African Americans in early 21st century were nearly four times more likely than whites to be arrested on marijuana related charges. Despite both groups having similar usage rates. That is why I've introduced the Bill that would take the question concerning whether to legalize medical and recreational marijuana to the people of South Carolina. Let's put the request question on the ballot so we will know once and for all where South Carolinians stand on this extremely important issue. We owe that to the people who continue to suffer without help and without hope. Before I take my seat, and I am sure you're ready for me to do that, I just want to remind all of you of the words of Greenville native civil rights icon reverend Jesse Jackson who said, "Never look down on anybody unless you are helping them up." My prayer is not that you will come to know or understand or experience our pain firsthand. My prayer for all of you is that God will give you the courage, compassion and empathy to do right by all of the people of South Carolina. Regardless, that starts by tabling this amendment and passing a bipartisan Medical Marijuana Bill that makes medical marijuana affordable and accessible to all of us who need it. Thank you.

ADJOURNMENT

At 11:04 A.M., on motion of Senator SHEALY, the Senate adjourned to meet next Tuesday, March 8, 2022, at 2:00 P.M.

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