

Best Practice Public Health Regulation Options: Marijuana

*Lesson from alcohol and tobacco: "Establish regulations from the outset because of how difficult it can be to expand after."**

Strategies shown to address public health concerns	Public Health Concerns				
	(An "x" below indicates that this concern is shown to be effected by the listed strategy.)				
	Youth Access & Use	Drugged Driving	Dependence and Addiction	Unwanted contaminants and uncertain potency	Concurrent use of marijuana and alcohol
Increase prices	X	X	X		?
Create state monopoly	X	X	X	X	X
Restrict and carefully monitor licenses and licensees	X	X	X	X	X
Limit marketing	X	X	X		X
Limit types of products sold	X	X	X		X
Restrict public consumption	X	X	X		X
Measure and prevent impaired driving		X			X

*Pacula et al. "Developing Public Health Regulations for Marijuana: Lessons from Alcohol and Tobacco," American Journal of Public Health, June 2014, Vol 104, No.6

Best Practice Recommendations	How?	Current Act	GAPS to be addressed
<p>Increase prices <i>Tough due to ease of growing, easy access to "underground markets"</i></p>	<ul style="list-style-type: none"> Excise taxes Fees Ban home production Limit production licenses 	<ul style="list-style-type: none"> Sales tax 10% State cannot fix prices 	<ul style="list-style-type: none"> Should this be higher to be in line with other states?
<p>Create state monopoly</p>	<ul style="list-style-type: none"> Similar model – private stores restricted to MJ only sales, limit number of stores, monitor and frequently enforcement checks Only state can produce, and/or distribute & sell <i>(not possible due to federal prohibition)</i> 	<ul style="list-style-type: none"> Use, possession or transporting up to 2.5 oz allowed Furnishing up to 2.5 oz to those over 21 allowed Cultivation allowed 	<ul style="list-style-type: none"> Consider lowering to no more than 1.5 oz. to be consistent with other states Limit # of stores but keep municipality decision making
<p>Restrict and carefully monitor licenses and licensees</p>	<ul style="list-style-type: none"> License EVERY part of supply chain Keep number of licenses low – lower cost to regulate Restrict density and location Restrict modes of sales (e.g. no vending machines or self-service) Restrict hours of operation Restrict goods that can be sold 	<ul style="list-style-type: none"> Licenses at every part required Training of officers required State cannot limit licenses Only MJ, accessories, non-consumables allowed @ stores No vending machines Municipalities must approve all licenses, can restrict, limit or prohibit licenses Can have local licensing requirements MUST card 	<ul style="list-style-type: none"> Recommend moving to BABLO Regulate like alcohol: <ul style="list-style-type: none"> Ensure Compliance Check system License revoking ability to licensees selling to minors if necessary Consequence for clerk selling
<p>Limit marketing</p>	<ul style="list-style-type: none"> Ban: Advertising – print, television, radio, etc Promotions: Price discounts, coupons, free samples Sponsorships Indirect – merchandise Retail displays Require plain packaging 	<ul style="list-style-type: none"> Limits on retail displays required - TBD Limits on marketing required, must not appeal to youth - details TBD No mass marketing allowed No packaging implying it is a trademarked food product 21 to purchase, not to enter Personal – must restrict access by under 12 	<ul style="list-style-type: none"> Ensure marketing limits similar to tobacco No unaccompanied minors in shops Edibles (product) marketing is big concern

Limit types of products sold	<ul style="list-style-type: none"> • Limit: <ul style="list-style-type: none"> ○ What’s allowed in the product (additives, flavorings) ○ Methods of production (pesticides, mold, contaminants) ○ Bundling with other inputs (edibles, nicotine) ○ Amount of THC allowed ○ Anything that appeals to youth – candy, sodas, etc. 	<ul style="list-style-type: none"> • THC limit per serving -TBD • Testing of product required to prevent contaminants • Labeling, including THC levels, THC per serving, number of servings & warning labels • Retail and social clubs allowed, MJ ONLY • No additives designed to make product more appealing to children allowed 	<ul style="list-style-type: none"> • Consider maximum limit for THC in products • Recommend single serving edibles or divided servings • Limit amount of edibles to be in possession- similar to ounce limits
Restrict public consumption	<ul style="list-style-type: none"> • No public place where youth could see or non-user would be exposed 	<ul style="list-style-type: none"> • The prohibitions and limitations on smoking tobacco products in specified areas apply to smoking marijuana. <i>(Marijuana is now included in smoking laws; Title 22, chapters 262 and 263)</i> 	<ul style="list-style-type: none"> • Maintain municipalities to have zoning and governance • ? How does this differ from smoke from tobacco in terms of second hand exposure?
Measure and prevent impaired driving	<ul style="list-style-type: none"> • What is allowable level of THC – “impairment level” or any level? • Tools for enforcement to test? • Mandatory fines & jail time • Sobriety check points • Media campaigns – best practice/tested/high exposure • Active, visible enforcement 	<ul style="list-style-type: none"> • Tax revenue to general fund; cannot directly fund new programs but it may be appropriated to the Maine Criminal Justice Academy <ul style="list-style-type: none"> ○ For training law enforcement personnel on retail marijuana and retail marijuana products laws and rules. ○ Funds to the MCJA may only be used for actual incurred costs to provide necessary training and education to law enforcement personnel. 	<ul style="list-style-type: none"> • Re-consider impairment level • Need reliable, testing for law enforcement, with \$ allocated to testing, it is a safety issue that isn’t currently addressed <ul style="list-style-type: none"> ○ Drug Recognition Expert (DRE) testing isn’t time effective, we need other options with better capacity • Need enforcement funding for non-training issues

For more information or questions contact:

Michelle Mason, Prevention Specialist
Choose To Be Healthy Coalition, Community Health at York Hospital
15 Hospital Drive
York, ME 03909
207-351-2699

Additional GAPS identified:

- The 2016 act does not address:
 - **Youth possession and use**
 - **Prevention education and funding**
 - **Housing** related issues

*****This information is for general informational purposes. Thanks to Jennah Godo at Access Health 373.6970 for creating this resource. The information presented is not legal advice. *****