



PRINCIPLES FOR A PUBLIC HEALTH AND EQUITY APPROACH TO CANNABIS REGULATION

NEW YORK'S LOCAL HEALTH OFFICIALS REMAIN STRONGLY OPPOSED TO REGULATED RECREATIONAL ADULT USE OF CANNABIS.

New York has supported the use of cannabis for medical purposes and moved to rectify past inequities with decriminalization and expungement measures. Broader access risks serious population harms, including neurological harms on developing brains, for women who are pregnant, and increased automobile crashes, that are not easily mitigated once the product becomes widely available.

Overall, there is a lack of substantive research on the use of marijuana and associated health outcomes, and a limited time period of data on the experience of states who have chosen to legalize recreational use of cannabis. In addition, legalization threatens to undermine New York's strong tobacco control statutory protections by introducing and renormalizing smoking and vaping through the use of the smoked and vaped versions of this dangerous product.

POTENTIAL NEGATIVE HEALTH IMPACTS INCLUDE:

1. Confirmed increases in substance use disorders
2. Established negative cognitive and academic effects
3. Documented association with serious mental illness among a narrow slice of the population, but disproportionately among adolescents
4. Adverse cardiac and respiratory effects
5. Increased unintentional poisonings in children
6. Growth in motor vehicle crashes

THE LEGALIZATION OF ADULT-USE RECREATIONAL CANNABIS IS ALSO A HEALTH NEGATIVE REVENUE PROPOSAL

in that the costs related to preventing its harmful effects reduce, and potentially outweigh, any economic benefit to the state. A 2018 report based on research conducted by the independent research firm QREM, found that for every \$1.00 of revenue gained from legalized cannabis, Colorado spent \$4.50 in mitigating the negative effects related to legalization. While the Colorado report is only one assessment, it highlights the reality that, compared to health positive revenue options, such as taxing sugar-sweetened beverages, legalized adult-use cannabis, as a revenue source, brings with it both economic and societal costs.

NYSACHO recognizes that despite serious population harms, recreational use has its proponents who defend legalization measures from a perspective of presumed safety rather than impending harm. Should adult use cannabis legislation move forward in New York State, NYSACHO believes that policy-makers must approach legalization from the perspective of presumed harm. Thus, in keeping with Governor's efforts to promote a health across all policies approach, public health and health equity need to be the first policy issues addressed, and should underpin all decision-making related to cannabis sales and use, both recreational and medical.

Cannabis, like alcohol and tobacco, is a potentially addictive substance that has known population harms; it is not an ordinary commodity. From the start of the regulatory process, New York State must place public health authorities in leadership roles (something that took centuries for tobacco). The basic philosophy underlying the following principles is that, if New York's elected officials choose to move forward with legalizing adult-use cannabis, it should be implemented cautiously to reduce the social harm of illegality, and that cannabis sale and consumption should not be normalized.

NYSACHO RECOMMENDS THE FOLLOWING:

GET IT RIGHT FROM THE START

- **Allow local governments the flexibility to be more restrictive regarding cannabis sales/use.** Much of New York's strong tobacco control policies grew out of local government policies. Continue to allow local governments to serve as innovators and test cases for public health policy by rejecting any industry efforts to insert preemption language into statute or regulation.
- **Put the following key infrastructure components in place before sales begin.** These components should be considered the necessary basic components applicable to the legalization and use of any drug, alcohol, tobacco or other product that may cause similar harm.
 - **Prevention infrastructure:** Including public health education campaigns for the general public, and high-risk populations, such as children, adolescents, pregnant women, and the elderly.
 - **Evidence-based treatment programs:** Assure that evidence-based treatment training is available to both treatment providers and the broader medical community, and that adequate capacity to meet treatment needs is in place before recreational cannabis sales begin.
 - **Robust surveillance systems:** The impacts of legalized adult-use recreational cannabis can only be assessed and addressed through a robust public health surveillance system. The New York State Department of Health should lead surveillance activities, gathering data collected through multiple agencies, to monitor for any negative public health impacts among the general population and specific high risk groups, and any public health trends related to usage. Additionally, they should establish baseline datasets to effectively monitor the impact of future policy changes on public health.
 - **Strong and comprehensive regulatory structure:** From the start of the regulatory process, place public health authorities in leadership roles (something that took centuries for tobacco). Regulations should be in place in advance of sales, with appropriate testing of infrastructure and critical staff onboarding completed.
- **Ensure that county health departments and local mental health and substance abuse agencies receive flexible funding** to expand workforce capacity in community education, prevention, intervention, enforcement and treatment. Public health is a major pillar in the success of a regulated marijuana program and must be sufficiently funded to ensure harm reduction.





FIRST, ENACT A BROAD BASED INFRASTRUCTURE

- **Direct all state agencies** involved in legalization to keep protecting the public's health as the underlying tenet of all regulation, policy, guidance, and directives issued by their agency.
- **Assure that enforcement activities related to cannabis use by individuals are focused on harm reduction**, rather than punitive measures.

ADDRESS THE FOLLOWING SPECIFIC ISSUES RELATED TO PRODUCT SAFETY, HARM REDUCTION, PREDATORY BUSINESS PRACTICES, AND ENVIRONMENTAL PROTECTION:

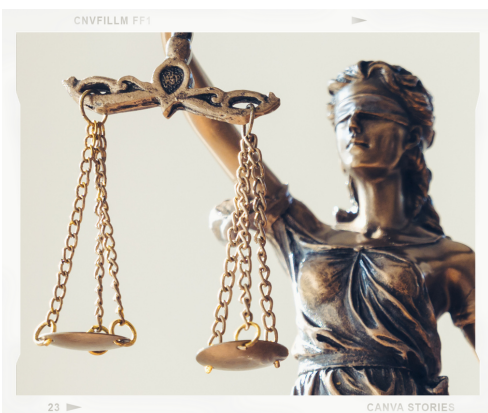
- **ENSURE APPROPRIATE REGULATION OF PRODUCTS AND USE**
 - **Formulate edible safety regulations** including child-resistant packaging and restrictions on products which may be enticing to children.
 - **Fully fund enforcement and oversight.** Enforcement regulations related to restaurant and environmental inspections must mirror inflation and industry growth.
 - **Standardize and test packaging and potency.** Strict THC concentration regulations, particularly those relating to packaging, labeling, and testing, must be in place before implementation.
 - **Set a blood level operating limit for THC.** An active-THC blood level limit for operating a motor vehicle must be based on the best available evidence.
 - **Prohibit misleading/unsubstantiated/anecdotal health claims** in all advertising and promotion of cannabis products.
 - **Limit advertising** online and prohibit child focused advertising.
- **MINIMIZE HARM AND INFORM THE PUBLIC**
 - **Minimize cannabis dependency and attendant health and social harms** by limiting potency of allowed products and aggressive marketing.
 - **Require warning labels on any advertising & prominent graphic warnings on packages.** Prohibit therapeutic health claims for recreational cannabis products.
 - **Use a specialized business model (no food or other product sales) to reduce normalization.** Require prominent health warnings in stores and to consumers.
 - **Extend smoke-free and vape-free air restrictions** to include cannabis.
- **PREVENT THE EMERGENCE OF A NEW TOBACCO-LIKE INDUSTRY**
 - **Avoid transferring control to outside investors** by favoring worker cooperatives/non-profits or similar structures.
 - **Preserve local control** so communities can be more stringent (except as regards incarceration), up to and including, bans on all commercial activities.
 - **Prohibit conflicts of interest** in regulatory bodies, advisory commissions, and for regulators and prescribers.

PROVIDE SPECIAL PROTECTIONS FOR CHILDREN, YOUTH, PREGNANT AND BREASTFEEDING WOMEN, & DRIVERS AND PEDESTRIANS

- **Prohibit any products, packaging or marketing attractive to children or youth**, such as cannabis-infused beverages, flavored combustibles, vaping products, or wrappers, and products that resemble candy.
- **Limit the number of dispensaries to fewer than 1:15,000 people** to reduce exposure and social normalization while allowing access.
- **Require buffer zones** around schools, colleges, and other youth-serving facilities.
- **Enact protections for pregnant and breastfeeding women** through education about the potential harms related to cannabis use for themselves and the potentially harmful effects on the developing brain of fetuses and infants.
- **Prevent marketing to pregnant women** regarding unsubstantiated health claims related to relief of pregnancy-related symptoms, such as morning sickness.
- **Create standards, using objective technology**, for determining cannabis-impaired operation of motor vehicles and other heavy machinery.
- **Provide support, training, technology, and tools to law enforcement** to mitigate the impact of increased use of cannabis on driving impairment and related motor vehicle crashes in the general population.



PROMOTE ECONOMIC & SOCIAL JUSTICE



- **Prioritize equity in licensing applicants** using best practices emerging from pioneering municipalities (for example, residents of communities impacted by high drug incarceration rates).
- **Direct economic benefits** from cannabis legalization to communities most negatively affected by the "war on drugs."
- **Assure that that past cannabis convictions**, which have affected the lives of so many men and women from black and Latino communities, not be a barrier to moving into the legal market.
- **Revenue should fund health.** Invest tax revenue gained from legalized recreational cannabis in public health, prevention, substance abuse treatment, mitigating negative social impacts of the war on drugs, improved access to health care, and public education campaigns.

DO NOT WORSEN HEALTH INEQUITY

- **Avoid exacerbating existing health inequity** such as low birth weight, poor mental health outcomes, or lower high school graduation rates.
- **Inform vulnerable groups of the risks of use**, such as during pregnancy, mental health effects, and immigration risks (Ex: 69% of cannabis dispensaries in Denver recommended cannabis for pregnancy-related morning sickness).
- **Enact density caps on cannabis related commercial activities** to prevent concentration in low-income neighborhoods and to avoid perpetuating past discriminatory policies.



AVOID ENVIRONMENTAL DEGRADATION

- **Establish water usage limits and protections for surface and ground water** in the growing of cannabis to protect drinking water quality.
- **Require growers** to submit and implement air quality protection plans.
- **Regularly assess energy usage and emissions from cannabis cultivation** to assure that it does not negatively impact New York's Climate Leadership and Community Protection Act goals.
- **Increase monitoring and enforcement of illegal growing operations on public lands** to reduce the risk of environmental damage to wildlife and water from illegal pesticide use.
- **Monitor and establish restrictions on the conversion of agricultural farmland from food crops to cannabis cultivation** to assure legalization does not threaten food security.



ADVANCE EVIDENCE BASED SCIENCE

- **Fund surveillance and research efforts**, through dedicated academic research centers, to closely monitor potential benefits, risks, type of use, frequency of use, and potency of marijuana used by all New Yorkers.
- **Encourage and fund the scientific study of health effects** among New Yorkers who use marijuana.
- **Establish a cannabis research review committee on the Public Health and Health Planning Council** that regularly assesses new evidence from other states and makes appropriate regulatory and statutory recommendations to assure that public health protections address any emerging public health threats related to cannabis sale or use.

