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Prevention and Marijuana

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<p>Vermont has been a national leader in tobacco and alcohol control and we must, at the very least, ensure that the lessons we have learned from tobacco and alcohol control are in place to mitigate the harm that a new landscape with legal marijuana will present.</p>	
<p>Tobacco Control If we look at tobacco, it has taken 50 years of a well-organized and funded effort to decrease tobacco use rates, but education alone was not the answer:</p>	<ol style="list-style-type: none"> 1) Implementing 100% smoke-free air policy in public and workplaces, around youth 2) Increasing the cigarette excise tax significantly 3) Funding a comprehensive tobacco control program as recommended by the Centers for Disease Control and Prevention (CDC), including an aggressive media campaign. 4) Funding & promoting cessation services 5) Limiting and prohibiting advertising & promotion, especially in stores and in family venues 6) Education and connecting people to resources, not just info (802 Quits, 8 out of 10 campaign, Kick Butts Day) 7) A strong youth peer leadership program to educate and inspire youth to abstain from tobacco use (VKAT & OVX)
<p>Similarly, alcohol prevention utilizes an approach that helps change the environment where youth alcohol use occurs. Education is partnered with evidence-based strategies that decrease use:</p>	<ol style="list-style-type: none"> 1) Limiting outlet density 2) Restrictions on use in public spaces 3) Social host liability laws 4) Open container regulations 5) Bans on advertising and promotion 6) Responsible Retailer Training 7) Compliance checks 8) SBIRT interventions and high risk drinking education 9) Treatment & Recovery support 10) Education and connecting people to resources not just info (social marketing, skills based parent ed, sticker shock, START) 11) A strong youth peer leadership program to educate and inspire youth to abstain from alcohol use (VTLSP)

When considering marijuana policy, we must, at the very least, implement the same strategies we know work in alcohol and tobacco prevention:

- Fund a comprehensive **marijuana control, cessation, prevention, treatment & recovery program**, that utilizes evidenced based strategies, including an aggressive media campaign.
- Establish **regs that are least as stringent as our current tobacco laws**.
 - No marijuana use where tobacco smoking is banned.
 - No smoking in the presence of children and youth, limiting second hand smoke exposure. (While the value of reducing secondhand exposure to marijuana smoking is not something that science has clearly established in the way that reducing exposure to secondhand smoke from tobacco has been shown, nonusers are exposed through secondhand smoke and heavy passive exposure to marijuana can result in measurable THC concentrations in the nonusers' blood serum and urine.) We eliminated smoking lounges in our institutions – eliminated smoking in bars & restaurants, yet we are considering sanctioning marijuana lounges, where tobacco use is likely to also occur.
- Strong and clear regulations to limit the **density of outlets** within towns/cities. And specific notifications to towns and municipalities that they have the ability to restrict the locations of any retailer selling products that minors may not purchase or possess, including marijuana retailers.
- **Restrict use in public spaces** and strictly define what “public” use means.
- Enact and enforce **social host liability laws** – strict penalties and fines for furnishing marijuana to minors. Most underage alcohol and tobacco sales are known sales (id is never requested) and most youth obtain alcohol from older kids & parents – not regulated stores.
- Implement strict **restrictions on advertising and promotion**- that include, but may not be limited to: product placement, sponsorships, point-of-purchase marketing, or depictions in entertainment venues.
- **Carefully Monitor Licenses and Licensees** – including Responsible Retailer Training & Compliance checks.
- **Education** and connecting people to resources not just info (social marketing, **skills based parent ed**, sticker shock, START)
- A strong **youth peer leadership program** to educate and inspire youth to abstain from marijuana use (VTLSP)

Any regulatory system needs to be about preventing youth access, and while these strategies are strong preventive measures, we also know that these steps are in some fundamental sense are inadequate.

So expect, that even if we follow them, having a legal commercial industry will increase availability for and marketing toward Vermont's youth.

In addition, PW!VT believes that policies must include the following provisions to effectively prevent marijuana use and promote health and safety in Vermont's communities:

- Be careful of the **language** you use. Too many Vermonters, especially young Vermonters, already believe Decriminalization = legal. Legal = safe. And "recreational" use is in the eye of the user.
- Research shows that for every \$1 that federal and state governments receive from alcohol taxes, they spend between \$10-20 of taxpayers' money to fund the need for additional health care, law enforcement, treatment and incarceration. What do we really know about mj costs? We need a **more in-depth study of the social costs we can expect to see.**
- Allocate **adequate funding to implement prevention strategies well before** any further change in marijuana policy is made.
- Provide **adequate funding and resources** to accurately measure the impact of legalization of marijuana. Potential areas to evaluate/research: Impact on health, pre-natal exposure, disease rates and child development; youth and adult use/abuse rates; children's ability to succeed in school, successful college completion, safe driving; and crime. (similar to VTERB)
- Serve the **best interest of public health.** Especially for our most vulnerable populations – the elderly, children, young people, and those in recovery and treatment, and not expose them to additional and unnecessary risk. Including universal screening for substance use disorders by pediatricians, other health care providers, schools and employers. (SBIRT, SAP and EAP programs)
- **Taxation** must be sufficient to compensate the state or other parties for at least the expected costs associated with the substance, including the cost of building the regulation infrastructure. **And include automatic increases for taxation rates to keep up with the rate of inflation,** unlike the current alcohol taxes.
- Not only **restrict the location of outlets** near schools but also other institutions that serve young people and families and on safe routes to schools
- **Automatic repeal** if it is determined that marijuana use increases among young people; increases health care costs, or has a negative impact on the health and safety of Vermonters before the harm to our state's residents, workforce and/or economy continues.
- **Funding provided by the industry** to fund evaluation, prevention, intervention and treatment needs. Vermont taxpayers should not be required to pick up the tab for the problems created by increased use. This funding should be provided by those who will financially benefit from increased access to use. (For example taxation, licensing fees, fines) (Evidenced-based Rx Drug advertising fund and VTERB)
- **Ensure drug free workplaces and schools.** Support employers and employees to do their job by imposing a ban on people coming to work or school with marijuana in their systems. And provide clear definitions of impairment – which do not currently exist – to protect employers and employees.
- **A Penalty Fee on the marijuana industry for every underage user.** Penalty fees will encourage the marijuana industry to reduce underage use from current levels because the fees could be waived as use rates decline. At the same time, penalty fees will discourage the marijuana industry from marketing to children because, if underage use increases, each new underage user will cost the industry more money than it could have made getting them to start young.

<p>In addition, PWIVT believes that policies must include the following provisions to effectively prevent marijuana use and promote health and safety in Vermont's communities:</p>	<ul style="list-style-type: none"> • A comprehensive, consistent, statewide media campaign to educate Vermonters about the harms and health risks of marijuana use, prevent youth and young adult use and when to ask for help. • Marijuana sold only in licensed retail stores where no other products are sold. • Do not allow sale of edibles or THC concentrates. • Since no level of marijuana in the system has been established to denote impairment. We need a ban on driving with any amount of marijuana in the system of drivers, with an aggressive media campaign that DUI mj will not be tolerated.
<p>Recommendations of others to seek testimony from:</p>	<ul style="list-style-type: none"> • Bertha K Madras, PhD, Professor, Dept. of Psychiatry, Harvard Medical School & Drug Policy Advisor to the World Health Organization • Jon Caulkins and Rosalie Pacula (RAND and prevention researchers) • Also I suggest you seek testimony from employers, transportation workers, school staff, those in Recovery, tourism personnel, those working with homeless Vermonters, probation staff, and environmental groups (mono-culture concerns, pesticide use and runoff) • See the Then & Now dvd, posted at SMART-VT.org