



## Measure 91: Retail Marijuana

- Adults > 21 can possess small amounts
- OLCC to regulate
  - Licensing
  - Investigations
  - Advertising
  - DUI framework
- Cities/Counties can regulate
  - Time, place, manner, nuisance
  - Opt out through general election
- Taxes specified in measure (e.g. \$35/oz flower)
- After expenses, taxes go to:
  - Common School Fund (40%)
  - Mental Health Alcoholism and Drug Services (20%)
  - State Police (15%)
  - Cities (10%)
  - Counties (10%)
  - OHA (5%)



## 2015 House Bill 3400

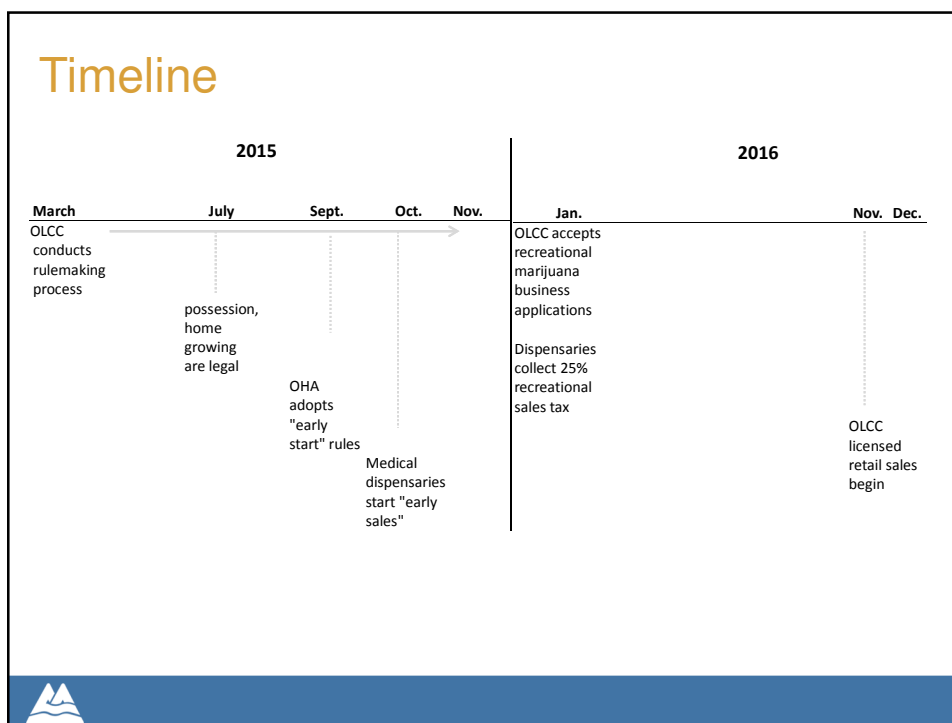
- Local Opt out
  - City or County Government
    - Must have voted >55% No on 91
    - No tax sharing
  - Local Vote referred by City/County
    - General election (even Novembers)
    - No tax sharing
- Land Use
  - Requires Land Use Compatibility Statement for license
- Local Tax up to 3%
- OLCC Expanded Duties
  - Regulation
  - Handler permit
  - Seed to Sale tracking
  - Lab licensing
  - Packaging and Dosing
  - Medical grower opt-in



## 2015 House Bill 3400, continued...

- Oregon Medical Marijuana Program
  - Requires grow site tracking
  - Requires growers, processors, dispensaries to submit info to database
  - Permits law enforcement access to database (transaction info with subpoena)
  - Limits plant number at single address
- Dispensary can lose registration for violations
- No dispensary in residential zones





## Impacts of Marijuana on Public Health

### **STRONG EVIDENCE:**

- Anxiety (short-term)
- Impairment (short-term)
- Dependence
  - Dependence increased among youth users
- Injury
  - Motor vehicle accident
  - Hash oil explosions
- Poisoning from accidental ingestion

### **CONCERNS (MIXED EVIDENCE):**

- Long-term impairment
- Mental illness
- Some cancers
- Respiratory disease
- Heart attack
- Lower educational attainment
- Gateway drug
- Marijuana-related crime
- Maternal use in pregnancy and breast feeding
- Brain development

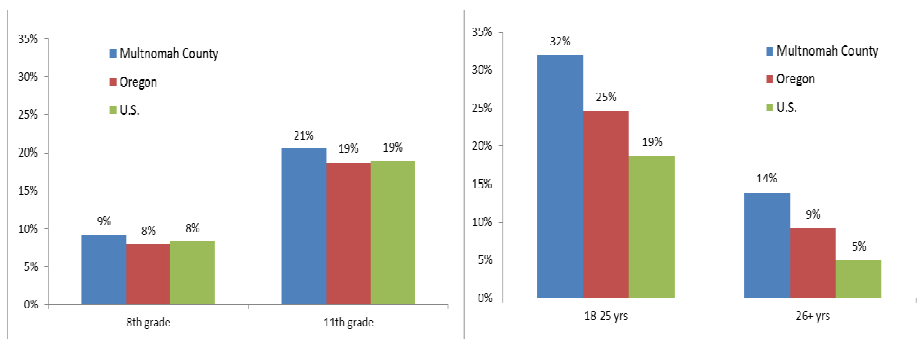


## Public Health Approaches and Priorities

- Inadequate Data
  - Cautious approach to policy (precautionary principle)
- Areas of Public Health Priority for marijuana
  1. Youth access
  2. Exposure during pregnancy and lactation
  3. Public safety, especially DUI
  4. Personal health
    - Acute anxiety
    - Dependence
    - Pesticide/chemical contamination
    - Inexperienced users
- Equity concerns



## Current Marijuana Use in Multnomah County, Oregon, and the US



### Youth

2014 Student Wellness Survey

### Adult

Source: NSDUH 2010-2012 combined. "Current use" is any use in past 30 days



## Short Term Policy Recommendations

- **Time** - weigh in with cities on limiting hours
- **Place** - weigh in with cities on expanding considerations for dispensary setbacks
- **Manner** - weigh in with cities on limiting mobile, delivery, etc - as a youth prevention strategy
- Participate in and inform rulemaking processes



## Long Term Policy Recommendations

### Vital Signs recommended policies

- Provider education
- Public education
- Limit youth access and appealing products
- Indoor Clean Air Act, vaping, multi-unit housing policies

### Work with other sectors

- Police profiling
- Housing
- Education

### Engage in Future Research

- Monitor ER Admissions, Poisoning, PRAMS data



## Conclusions and Next Steps

