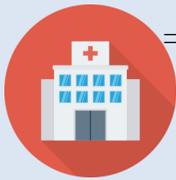


Adult Use Regulated Cannabis

NYSACHO stands in opposition of the State's proposed regulated cannabis policy in New York State due to the potential for dangerous public health outcomes. It is for this reason we recommend consideration of a slow and cautious approach, separate from the state budget process, with the interest of public health and mental health at the forefront of decision making.

Public Health Concerns



Unintentional Exposures in Children

⇒ Legal cannabis access is strongly associated with increased numbers of unintentional exposures in children which can lead to hospitalizations.



Respiratory Effects

⇒ Smoke from cannabis may deposit more particulate matter in the lungs per puff compared to tobacco smoke.



Cardiovascular Effects

⇒ Use of cannabis may be associated with increased risk of stroke in individuals younger than 55 years of age. Acute cannabis use may be associated with increased risk of heart attack among adults.



Cognitive and Academic Effects

⇒ Weekly or more frequent cannabis use by adolescents and young adults is associated with impaired learning, memory, math and reading achievement, even 28 days after last use.



Cannabis Use and Driving

⇒ Driving soon after using cannabis increases the risk of a motor vehicle crash. Using alcohol and cannabis together increases impairment and the risk of a motor vehicle crash more than using either substance alone.



Substance Use, Abuse and Addiction

⇒ Cannabis use by adolescents and young adults is associated with future high-risk use of tobacco, and other drugs.

Recommendations

- ⇒ Ensure local health departments receive flexible funding to expand workforce capacity. Protecting public health must be the first major pillar of a regulated cannabis program and funded adequately to ensure harm reduction.
- ⇒ Include statutory language to fortify State requirement to delivery funding to local health departments who will conduct surveillance, education and inspection/enforcement activities.
- ⇒ Guarantee local health departments, through NYSACHO, have a seat at the table as regulations and policies are developed.



Community Education Programming with Emphasis on Vulnerable Populations

- ⇒ Working collaboratively with New York State, local health departments will serve as the State's boots to the ground as they engage providers and community members to spread information that will protect residents. This education will be geared toward at-risk populations including pregnant and women of child-bearing age, adolescents, children and individuals living with a history of mental health or substance abuse.

Tobacco Enforcement Program Expansion to Include Cannabis

- ⇒ The Adolescent Tobacco Use Prevention Act (ATUPA) was enacted to help stop the sale of tobacco products to anyone under 18 years of age. Full service local health departments routinely visit businesses that sell tobacco to determine if they are selling to anyone under the appropriate age of sale. If regulated cannabis becomes legal, our hope is to see the age of sale of all tobacco products increased to 21 years of age in concurrence with a legalized cannabis policy. Legalization of regulated cannabis will require local health departments to expand their ATUPA programs with appropriate staff, materials, and resources needed to conduct the program effectively.

Estimated Cost:

Total Educational Expense to Local Health Departments = $\$200,000 \times 58 = 11.6M$

Total Enforcement Expense for 37 Full Service Local Health Departments: $2.1M \times 3 = 6.3M$

For more information, please contact:

Sarah Ravenhall, NYSACHO Executive Director – at 518.456.7905 x108 or sarah@nysacho.org

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