

Public Health Position regarding Marijuana Use

October 24, 2016

BACKGROUND

In November 2013 H&SS presented a position statement regarding the establishment of medical marijuana dispensaries in unincorporated areas of Solano County. This current document represents Public Health's position that recognizes and respects California law with respect to medical marijuana use; in contrast Public Health does not favor increased access to marijuana for recreational purposes because of the consequent health problems posed to individual users and the general public.

Adverse Health Impacts and Other Risks of Direct Use

- Increased risk for cardiovascular, cerebrovascular and respiratory disease
- Increased testicular cancer risk
- Decreased fertility in women and men (reduced sperm count)
- Changes to the developing brain in areas involved in executive functions like memory, attention, learning, retention, and impulse control
- Decreased Intelligence Quotient of heavy and early onset users
- Impaired school performance and increased likelihood of dropping out of high school
- Increased risk of anxiety disorders, psychoses, suicidal thoughts and depression especially among adolescents and young adults
- Transmission of THC (tetrahydrocannabinol), the chemical responsible for most of marijuana psychological effects, through the placenta and through breast milk with consequent impacts on the fetus and infants
- Impaired judgment
- Increased traffic collisions due to impaired driving
- Impacts on drug free work place related to users not being aware of the duration of THC presence in urine and that non-users with secondhand exposure may be unaware that their urine will also be positive for an extended period
- Marijuana dependency and a gateway to tobacco and other drug use
- Increased incidence of fires and home explosions caused by manufacturing of butane hash oil often resulting in death or severe burn injuries
- Risk of children ingesting edible marijuana products

Health Impacts of Exposure to Secondhand Marijuana Smoke

Secondhand marijuana smoke contains many of the same chemicals and carcinogens as secondhand tobacco smoke and thus poses similar health consequences as direct use.

- An experiment in which nonsmokers were exposed to secondhand marijuana smoke resulted in detectable cannabinoid levels in blood and urine.
- Exposure to secondhand marijuana smoke adversely affects cardiovascular health and impairs blood vessel function.

Additional Concerns

- Nonexistence of an adequate way to measure marijuana impairment in drivers
- Marijuana today has more than 5 times the amount of THC than it did in 1960.
- Changing community norms regarding marijuana use can decrease youth perception of harm of marijuana use and thus could lead to increased youth marijuana use
- The Board of Supervisors has been working for over 16 years on the express goal of achieving the lowest rates of use of Alcohol, Tobacco and Other Drugs (ATOD) by youth in California.
 - Solano County's *Strategic Prevention Plan for Alcohol, Tobacco, and Other Drug Prevention FY 2012/13 through FY 2017/18* identifies marijuana use among youth as a concern based on trends of increased youth use, decreased perception of harm and reported ease of access. As a result the plan contains the following goal and objectives:
 - Reduce the access and availability of marijuana to youth in Solano County.
 - By June 30, 2018, implement in 4 jurisdictions a campaign to reduce access and availability to marijuana.
 - By June 30, 2018, reduce the percentage of 11th graders who report marijuana use is easy or fairly easy to obtain from 74% to 69%, the % reported in 2009 for California 11th graders. (California Healthy Kids Survey)
 - By June 30, 2018, reduce the percentage of 11th grade students who report past 30 day marijuana use from 23% to 19%, the % reported in 2009 for California 11th graders. (California Healthy Kids Survey)

- Should recreational use of marijuana be approved by voters, Public Health supports that significant restrictions should be established and rigorously applied. Restrictions should include but not be limited to the following:
 - Restrict the density of marijuana retail outlets as well as designating that marijuana outlets cannot be located within 1000 feet of each other or of the following:
 - a school, vocational school, college or university (public or private)
 - child care facility
 - library
 - playground
 - public park
 - youth center
 - public swimming pool
 - video arcade family; or
 - similar facility in which minors commonly congregate.
 - Specify minimum distances of marijuana establishments from the following:
 - Private residences
 - Churches
 - Substance abuse treatment centers
 - Establish security measures which include safe monitoring of the premises, which may include security personnel and/or security cameras
 - Restrict hours of operation
 - Prohibit price promotions
 - Enforcement mechanisms that ensure that non-compliant establishments have their permit rescinded after repeated violations within a specific look-back period
 - Place restrictions on promotion, advertising and signage

Taxes or fees received should be earmarked for the following:

- Targeted education regarding the much higher potency of THC in 2016 compared to prior decades, the risks of use to adolescents as well as pregnant and breastfeeding women, as well as exposure of non-users to secondhand smoke exposure
- Targeted education to couples of childbearing age regarding decreased fertility, increased risk of stillbirth and impairment of brain development
- Surveillance of health impacts
- Adolescent and adult substance abuse treatment
- Adolescent and adult mental health services