

The logo for Prevention Alliance features a blue curved line above the text "Prevention Alliance" in a bold, blue, sans-serif font.

Prevention Alliance

POLICY BRIEF: MARIJUANA PREVENTION

June 2017

GOAL: As Washington continues to implement the legalization of recreational marijuana, there must be strong policies and funding lines in place that are focused on preventing abuse of marijuana and initiation by underage youth.

PROBLEM STATEMENT

Washington and Colorado were the first two states to legalize recreational marijuana in the U.S. Since that time, six additional states (OR, ME, CA, MA, NV, AK) and the District of Columbia have legalized marijuana for recreational use. Operating within a legalized environment is a newly emerging area of both policy and programmatic work. This new landscape presents both opportunities and challenges. Some prevention and public health advocates are concerned that legalizing marijuana will result in the normalization of marijuana use, which can lead to an increase in consumption and abuse, especially among youth. Others see opportunity in using legalization to drive out the illicit market while also establishing strong regulations to manage consumption in a manner similar to tobacco and alcohol. Rather than focusing on this debate of whether legalization was the right decision, this brief will focus on prevention strategies within the reality of a legalized environment.

Given this new landscape, it is critical that strong policies are put in place that specifically address prevention and public health. According to the 2016 Washington Healthy Youth Survey¹, 17% of 10th graders have used marijuana in the past month, and 6% have used marijuana on 10 or more days in the past month. In addition, 60% of 10th graders believe that there is no or low risk from trying marijuana once or twice, one-third of 10th graders believe there is no risk from using marijuana regularly. This data shows that the perception around marijuana is that it is not harmful. This could result in marijuana being a commonly used drug. While the numbers have not shown much change in youth marijuana use since passage of recreational marijuana in Washington,² there is still a risk for normalization of the drug and potential increase in use. Legalization presents the opportunity to put in place strong regulations and secure revenue for prevention efforts. Such regulations need to find the balance of preventing youth from initiating use, reducing abuse rates, and also working to eliminate the illicit market.

VALUES STATEMENT

There is a popular belief that marijuana use is harmless. It is partly this perception that it is a 'safe drug' that has led marijuana to be the most commonly used illicit (under federal law) drug. According to data from 2015, approximately 13.5% of people in the U.S. age 12 years or

¹ 2016. Washington Healthy Youth Survey – Marijuana Use. <http://www.askhys.net/FactSheets>

² The 2012 Washington Healthy Youth Survey showed 19% of 10th graders have used marijuana in the past month, and 6% have used marijuana on 10 or more days in the past month. Source: <http://www.askhys.net/FactSheets>

older reported using marijuana in the past year.³ This is increased from 12% in 2013.⁴ Despite popular belief, marijuana is not a ‘safe drug’. In fact, there are many negative health outcomes that have been linked to both short- and long-term marijuana use (*see Table 1 below*). It is because of these health risks that strong prevention policies need to be in place to stop youth from ever starting to use, prevent marijuana abuse and addiction amongst adults and youth, and provide support for those who want to quit.

Such efforts to curb marijuana use and abuse are not new for prevention and public health advocates. However, for decades most efforts to deter marijuana use have been rolled in with broader strategies to prevent all illegal substance use. With legalization, the conversation has shifted to more closely mirror prevention efforts relating to alcohol and tobacco use. The prevention and public health focus of marijuana regulation largely falls into five main goals:

1. Preventing youth from initiating use
2. Encouraging responsible adult use
3. Preventing substance abuse and addiction
4. Protecting the broader public health, such as with clean indoor air and safe roads
5. Support for individuals who want to quit using

Table 1: Adverse Effects of Short-Term Use and Long-Term or Heavy Use of Marijuana¹

Effects of short-term use

- Impaired short-term memory, making it difficult to learn and to retain information
- Impaired motor coordination, interfering with driving skills and increasing the risk of injuries
- Altered judgment, increasing the risk of sexual behaviors that facilitate the transmission of sexually transmitted diseases
- In high doses, paranoia and psychosis

Effects of long-term or heavy use

- Addiction (in about 9% of users overall, 17% of those who begin use in adolescence, and 25 to 50% of those who are daily users)*
- Altered brain development*
- Poor educational outcomes, with increased likelihood of dropping out of school*
- Cognitive impairment, with lower IQ among those who were frequent users during adolescence*
- Diminished life satisfaction and achievement (determined on the basis of subjective and objective measures as compared with such ratings in the general population)*
- Symptoms of chronic bronchitis
- Increased risk of chronic psychosis disorders (including schizophrenia) in persons with a predisposition to such disorders

**The effect is strongly associated with initial marijuana use early in adolescence*

³ Results from the 2015 National Survey on Drug Use and Health: Detailed Tables, SAMHSA, CBHSQ.

<http://www.samhsa.gov/data/sites/default/files/NSDUH-DetTabs-2015/NSDUH-DetTabs-2015/NSDUH-DetTabs-2015.htm>. Accessed June 2017.

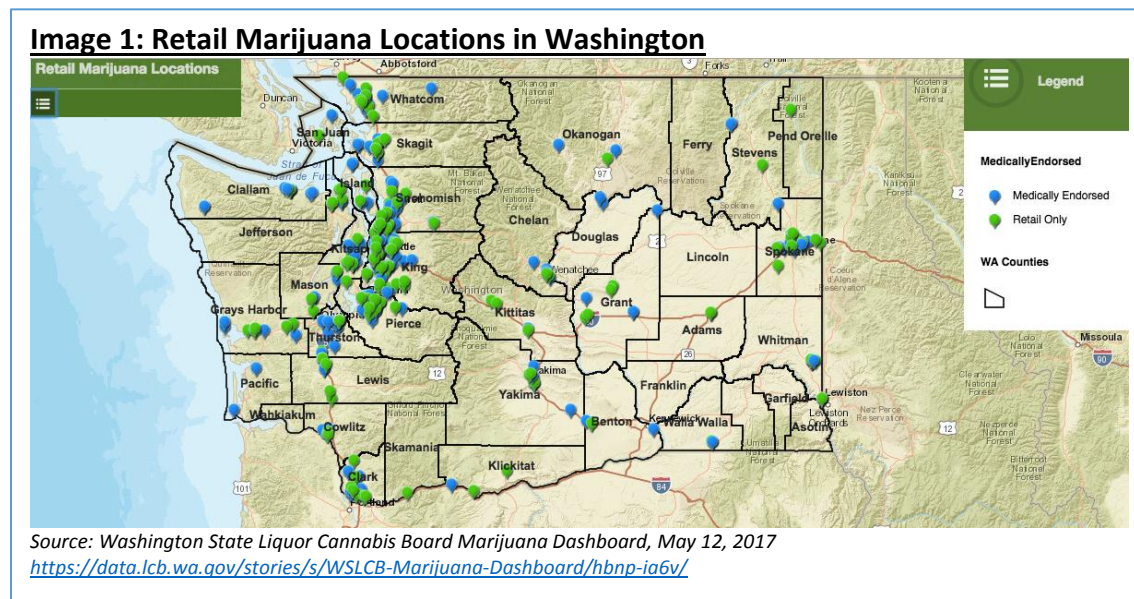
⁴ Volkow, et al. *Adverse Health Effects of Marijuana Use*. New England Journal of Medicine, 2014 Jun 5; 370(23): 2219–2227. Accessed at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4827335/>

Strong and smart policies in these areas can help create a solid prevention and public health framework for marijuana regulation in a legalized environment, which in turn will improve health outcomes of individuals and the public.

BACKGROUND ON RECREATIONAL MARIJUANA POLICY IN WASHINGTON

On November 6, 2012, Washington voters approved [Initiative 502](#) which established a system, overseen by the Washington State Liquor Control Board (*now called the Washington Liquor and Cannabis Board*), to license, regulate, and tax the production, possession, and sale of marijuana. The measure passed with 55.7% voting in support statewide. Under the initiative, marijuana possession and use by adults 21 years of age and older became legal starting December 2012. At this point it was still illegal to buy and sell marijuana, but a legal-aged adult could possess and use marijuana for non-medical purposes. Starting on July 8, 2014, after a year-and-a-half spent adopting numerous regulations and issuing licenses, the first retail marijuana stores opened their doors.

Since 2014, the number of licensed marijuana businesses has grown dramatically with over 1,800 marijuana businesses licenses are currently issued as of May 2017⁵. These businesses include producers, processors, and retailers, and they are spread located throughout the state (*see Image 1*). In turn, these businesses have generated significant business revenue as well as revenue for the state through the imposed excise tax. In fiscal year '17 (running from July 1, 2016 - June 30, 2017), total marijuana sales is estimated at \$1.3 billion and excise taxes are estimated at almost \$305 million.⁶ Such rapid growth of the recreational marijuana industry in just three years shows the popularity of the law, but also reiterates the need for strong prevention and public health policies.



⁵ Washington State Liquor Cannabis Board. Marijuana Dashboard, May 12, 2017. <https://data.lcb.wa.gov/stories/s/WSLCB-Marijuana-Dashboard/hbnp-ia6v/>

⁶ Washington State Liquor Cannabis Board. Marijuana Dashboard, May 12, 2017. <https://data.lcb.wa.gov/stories/s/WSLCB-Marijuana-Dashboard/hbnp-ia6v/>

Prevention Regulations

In looking at the five prevention and public health goals outlined above, Washington has already put in place several policies that seek to directly address them. Most of these prevention-focused policies fall into the framework of “The 4 P’s”, which involves looking to establish policies that regulate *price, place, product, and promotion*. This framework is often applied to alcohol and tobacco prevention.

Examples of some of the prevention and public health policies already in place in Washington are outlined below according to which of “The 4 P’s” the policy falls under. *(Please note this is not a comprehensive list of marijuana policies in Washington State.)*

Price: *Increasing the unit price through an excise tax to discourage initiating use, manage use amongst legal-aged adults, and encourage people to quit. It is important to be cautious to not increase the price so high as to drive people to the illicit market*

- ✓ There is currently a 37% marijuana excise tax that is collected at the retail level in Washington.

Place: *Limiting where marijuana can be sold and used in order to limit and control access, especially among youth, and also reduce the exposure to and normalization of marijuana.*

- ✓ Washington law currently states that it is unlawful to open and/or consume marijuana products in view of the general public. This includes parks, streets, bus stops, and any other place in public view.
- ✓ Washington law prohibits stores from being located within 1,000 feet of any elementary or secondary school, playground, recreation center or facility, child care center, public park, public transit center, library, or game arcade that allows minors to enter. However, legislation was passed in 2015 that allows local governments to reduce the 1,000-foot buffer requirements to as low as 100 feet around all entities except elementary and secondary schools and public playgrounds.
- ✓ The WA State Liquor and Cannabis Board has limited the number of marijuana retail outlets to 556 statewide (this is up from the original limit of 334).
- ✓ Retailers in Washington are limited to conducting sales between the hours of 8:00am and midnight. They are able to conduct sales 7 days a week.

Product: *Imposing tight regulations on various aspects of the product itself helps minimize appeal to youth and prevent overuse and abuse. Such regulations on the product include tamperproof packaging requirements, labelling requirements for dosage, age restrictions for purchase, limiting products that appeal to youth, limiting the quantity that can be purchased, and establishing legal limits for drugged driving.*

- ✓ Washington law requires all edibles and liquids to be pre-packaged in childproof containers. In addition, for solid edible products that contain more than one serving per package, each serving must be individually packaged in childproof packaging.
- ✓ Washington law defines a single dose as containing no more than 10mg of THC or Delta 9, and the maximum number of servings per product is limited to 10 servings (100mg). There are strict labelling requirements including public health warnings, concentration, serving size, etc.
- ✓ Washington law has in place the following limits on the amount of marijuana that is allowed to be purchased: one ounce of useable marijuana (the harvested flowers, or “bud”), 16 ounces of marijuana-infused edibles in solid form, 72 ounces in liquid form, and 7 grams of marijuana concentrates.
- ✓ Washington law has established that it is illegal to drive under the influence of marijuana if a driver has more than 5 nanograms of active THC per milliliter of blood.

Promotion: Restricting packaging, advertising, discounting, and other means of promotion, especially those that might appeal to, or target, youth can be very effective in limiting initiation of use by both youth and adults.

- ✓ Washington law includes several restrictions on packaging and advertising including:
 - Limiting retail stores to two signs identifying the retail outlet. The size of the sign is limited to 1,600 square inches.
 - Banning language and imagery that is false or misleading, promotes overconsumption, implies therapeutic or curative effects, or depicts a child or other images that appeal to youth.
 - Banning advertising within 1,000 feet of the perimeter of a school, playground, recreation center, child care center, public park, library, or a game arcade admission to which it is not restricted to persons aged twenty-one years or older.
 - Prohibiting advertising on or in public transportation, a public transit shelter, or publicly owned property.
- ✓ All advertising must contain specific public health warnings determined by the state.
- ✓ Washington law prohibits the sampling of products in retail stores. Retailers are allowed to keep a small sniffing jar on site, but the rest of the product must remain behind the counter.

Prevention Funding

In addition to these numerous policy levers that can be adopted, it is also important to secure and maintain adequate funding from the state for prevention programs, especially those targeted at youth prevention in communities with high use rates. Initiative 502 created the dedicated marijuana fund, which consists of revenue from the marijuana excise tax imposed at

the retail level as well as other fees, penalties, and other moneys received by the Washington State Liquor and Cannabis Board for marijuana prevention related activities. Language was included in the initiative specifying where those funds should be directed, including the following programs that are specifically targeted at public health, education, prevention, and cessation:

- Department of Social and Human Services (DSHS) for prevention and reduction of substance abuse among middle and high school age students.
- Department of Health for marijuana education and public health programs.

POTENTIAL PREVENTION STRATEGIES

The existing policies and program funding outlined above highlight that Washington has taken some initial steps toward having a prevention and public health framework within the context of legalized marijuana. However, additional strategies relating to preventing initiation and misuse of marijuana should be identified and adopted. Using the framework of “The 4 P’s”, existing regulations can be further strengthened and new policy opportunities can be pursued. For example, fines for violating current regulations could be increased, a tourism tax could be imposed, distance requirements from where youth congregate can be increased, and additional promotion restrictions could be established. As marijuana businesses continue to become more prevalent, the state and public health stakeholders could secure additional dollars to launch counter-messaging and public awareness campaigns. The possible approaches are numerous.

Given that legalization of marijuana is still relatively new, many of the policy opportunities for prevention and public health are still emerging. There are clearly lessons to be learned from alcohol and tobacco prevention that can be adapted to marijuana, but there are also some unique aspects of marijuana legalization that may call for testing out new approaches. Prevention and public health advocates should work to identify additional strategies at the state and local level to pursue in Washington in order to meet the goals of preventing youth from initiating use, encouraging responsible adult use, preventing substance abuse and addiction, protecting the broader public health such as through clean indoor air and safe roads, and supporting individuals who want to quit using.

RESOURCES

[A Public Health Framework for Legalized Retail Marijuana Based on the US Experience: Avoiding a New Tobacco Industry](#) (2016) – *PLOS Online*

[Developing Public Health Regulations for Marijuana: Lessons from Alcohol and Tobacco](#) (2014) – *American Journal of Public Health, Vol. 104, No. 6*

[I-502 Evaluation Plan and Preliminary Report on Implementation](#) (2015) – *Washington State Institute for Public Policy*.

[Local Recreational Marijuana Laws in Washington State Map](#). (2014) – *LawAtlas: The Policy Surveillance Portal*.

[Summary of Initiative 502](#) (2012) – *Washington House of Representatives, Office of Program Research*

[Toking, Smoking & Public Health: Lessons from Tobacco Control for Marijuana Regulation](#). (2015) – *Tobacco Control Legal Consortium*.

[Washington State Marijuana Impact Report](#). (2016) – *Northwest High Intensity Drug Trafficking Area*.

[Washington's Marijuana Legalization Grows Knowledge, Not Just Pot: A Report on the State's Strategy to Assess Reform](#). (2014) – *Center for Effective Public Management at Brookings*

This publication was supported by National Center for Chronic Disease Prevention and Health Promotion of the Centers for Disease Control and Prevention under award number NU58DP004830.

The content of this publication is solely the responsibility of the authors and does not necessarily represent the official views of the Centers for Disease Control and Prevention.

For more information please contact:

Julie Peterson | Senior Director of Policy | Foundation for Healthy Generations | juliep@healthygen.org