

Testimony Neither For nor Against
January 24, 2024

LD 1952: An Act to Allow On-site Cannabis Consumption

Good morning, Senator Hickman, Representative Supica and members of the Joint Standing Committee on Veterans and Legal Affairs. My name is Patricia Buck Welton. I live in Pittston and work at Healthy Communities of the Capital Area (HCCA) in Gardiner.

HCCA is a public health nonprofit that partners with community members to improve the health and quality of life locally. Funding for HCCA comes largely from state, federal, and philanthropic grants. My area of expertise and focus is preventing alcohol, cannabis and other drug misuse among youth and creating communities where youth thrive with a special focus on towns and schools of MSAD#11.

The laws of Maine are designed to prevent underage access to cannabis through sales. Unfortunately, laws are not adequate to keep cannabis from our kids through secondary sources. Therefore, we need to think outside the box to protect our youth from underage use.

This committee's focus is largely on the business of cannabis, mine, and many others across Maine focus on protecting our youth from the risks and harms from cannabis. I am hoping we can work together on this effort now and into the future.

With each additional cannabis business approved in Maine, the community norms reflect that cannabis use is safe.

LD 1952 provides one more public way to use cannabis.

Youth Substance Use Prevention best practice recommends reducing the number and types of access points that youth see!

- Prevention overall seeks to decrease the **visibility** of use, such as limiting



outlets such as on-site hospitality establishments, and signage; even increased conversations among trusted adults contributes to youth's increased interest about what the on-site use settings look like and increases the sense that use is okay for everyone.

- Evidence-based youth prevention efforts also seek to minimize community norms that support the overall beliefs that 'everyone' is using cannabis, and that it's safe for 'everyone'.

This testimony contains brief references to

1. Risks and harms of cannabis on adolescent brains.
2. What Maine High School students think and do (2023 MIYHS)

A few of the risks and harms of adolescent cannabis use include:

- Difficulty thinking and problem-solving
- Problems with memory, learning and maintaining attention, success at school, motivation, and post-secondary goals, work readiness
- Increased risk of mental health problems, such as DEPRESSION, anxiety, AND SUICIDE

What Maine High School Students think and do (2023 MIYHS)

- **About 1 in 5** used cannabis at least once in the past 30 days.
- **Over half (54%)** stated it would be easy to get cannabis.
- **22%** said parents would not think it was wrong for them to use cannabis.
- **61%** of students stated there is little to NO harm in using cannabis once or twice a week. Clearly incorrect given impacts on the adolescent brain. This is **up from 53% in 2019**.

Youth largely do not understand that their developing brains put them at much greater risk for consequences. Community norms play a very large part in their decisions to use – and their assumptions of safety. Our youth need our joint support to thrive and mature.

Patricia Buck Welton

Email: patriciab@hccame.org

Additional information and references are attached.

References

Centers for Disease Control and Prevention (CDC). (n.d.).

<https://www.cdc.gov/cannabis/health-effects/teens.html>

Maine Integrated Youth Health Survey. (2023).

https://www.maine.gov/miyhs/sites/default/files/2023_Reports/Detailed_Reports/HS/MIYHS2023_Detailed_Reports_HS_State/Maine%20High%20School%20Detailed%20Tables.pdf

Substance Abuse and Mental Health Services Administration (SAMHSA). (2021).

<https://store.samhsa.gov/sites/default/files/pep21-06-01-001.pdf>

Risks and Harms Associated with Adolescent Cannabis Use

- The human brain is still developing until around age 25- using cannabis has the potential to impact this development (CDC, n.d.).
 - Negative effects of teen cannabis use include:
 - Difficulty thinking and problem-solving
 - Problems with memory and learning
 - Reduced coordination
 - Difficulty maintaining attention
 - Additional concerns:
 - Problems with school and social life
 - Increased risk of mental health problems, such as depression, anxiety, psychosis (hallucinations, paranoia), and schizophrenia
 - Impaired driving
 - Potential for cannabis use disorder (CUD) (CDC, n.d.)
 - Frequent cannabis use between the ages of 14 to 21 is associated with lower high school completion and college graduation (SAMHSA, 2021)
 - Cannabis use is associated with higher rates of depression and suicide, especially among youth (SAMHSA, 2021)

Maine Data (High School)

According to the 2023 Maine Integrated Youth Health Survey (MIYHS), approximately:

- 36% of Maine high school students have tried cannabis at least once.
- 19% of Maine high school students first tried cannabis BEFORE the age of 13.
- 19% of Maine high school students used cannabis at least once in the past 30 days.
- 54% of students stated it would be easy to get cannabis.
- 22% of students stated that their parents would not think it was wrong for them to use cannabis.
- 61% of students stated that there is little to NO harm in using cannabis once or twice a week.

Contributing Factors to Adolescent Cannabis Use

- Increased availability due to legalization and regulations (e.g., retail density)
- Mass commercialization of higher-potency cannabis
- Availability of an array of consumer-friendly products that often appeal to youth (e.g., candy and baked goods infused with cannabis)
- Increasing numbers of adolescent cannabis users
- Low perception of harm
- Perception of peer use as higher than actual (SAMHSA, 2021)

Evidence-Based Best Practices to Address Adolescent Cannabis Use on the Community and Environmental Level include:

1. Regulating the price of cannabis (e.g., increasing taxes, banning price promotions)
2. Regulating cannabis retail outlets (e.g., licensing and zoning restrictions)
3. Regulating cannabis manufacturing and packaging (e.g., banning synthetic flavors, THC-infused alcohol and tobacco, THC-infused edibles that are appealing to children, and including transparency on packaging labels, etc.)

Limitations on marketing and advertisements (e.g., limiting advertising with youth audiences)