

**Testimony of Julia MacDonald, Government Relations Director,  
American Cancer Society Cancer Action Network**

**In Opposition to LD 40 “An Act to Amend The Cannabis Laws”**

**March 4, 2024**

Senator Hickman, Representative Supica, and members of the Veterans and Legal Affairs Committee. My name is Julia MacDonald, and I am the Government Relations Director for the American Cancer Society Cancer Action Network (ACS CAN) in Maine. ACS CAN, the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society, supports evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem. As the nation’s leading advocate for public policies that are helping to defeat cancer, ACS CAN ensures that cancer patients, survivors, and their families have a voice in public policy matters at all levels of government.

I am here today to testify in opposition to LD 40. More specifically, to the amendment offered by Senator Hickman titled, “An Act To Protect Liberty and Advance Justice in the Implementation, Administration and Enforcement of the Cannabis Legalization Act and To Implement Certain Recommendations of the Subcommittee on Non-substantive Changes to the Maine Medical Use of Cannabis Act.” The amendment is a sweeping overhaul of the Maine Medical Use of Cannabis Act and includes significant changes to the Cannabis Legalization Act. The amendment includes 119 sections of proposed changes to statute that have far reaching implications for Maine consumers, public health and safety, and youth justice. Despite the assigned scope to the Subcommittee on Non-substantive Changes to the Maine Medical Use of Cannabis Act, the ensuing legislative changes are, in fact, substantive. I do not have time to address all 66 pages of the amended language. So, I have chosen a few problems from the bill. However, these are just some of many. LD 40 must be voted ought not to pass.

First and foremost, Part C of the bill convenes a task force to review how other states regulate cannabis hospitality establishments and draft recommendations for a bill to regulate cannabis hospitality establishments in Maine. Maine should be a leader when it comes to protecting public health rather than waste taxpayer resources and look to what other states are doing. In 2003 Maine passed comprehensive smoke-free laws. Title 22, Chapter 262 prohibits smoking in public places with very few exceptions. Due to the abundance of health risks posed by the smoking of cannabis, it is imperative that Maine not go backwards in regulation and the fight against cancer causing smoke. ACS CAN opposes any smoking or aerosolization of marijuana and other cannabinoids because the carcinogens in marijuana smoke poses numerous health risks to the person using the product and others in the person's presence. ACS CAN has submitted testimony already this session on LD 1952, “An Act to Allow On-site Cannabis Consumption,” about the substantial health risks and links to cancer associated with smoking cannabis. Therefore, this task force should not be convened, and no expansion of smoking should be allowed in the State. Likewise, the authority of local municipalities to protect the health of their residents should be granted and protected.

Next, Section A-5 of the amendment expands the places where caregivers may sell cannabis and cannabis paraphernalia to include trade shows, festivals, and other industry-related events. ACS CAN opposes increasing the availability of smoking products. It is well-known that easy access to a product encourages its use. Allowing the sale of cannabis, including cigarette papers and electronic smoking devices, anywhere will undermine our tobacco control laws and reverse the smoke-free social norm. Further the allowance would blur the lines between health and controlled substance use.

Further, the amendment creates a new chapter in statute that specifically addresses penalties for minors who engage in a range of prohibited activities, including consuming cannabis, but allows minors to transport cannabis for an employee or to use cannabis with parental permission. First, this would send a conflicting message to our young people and undermine prevention efforts and smoke-free social norms. Second, these provisions shift the responsibility away from retailers who sell to those under the legal age. We have learned from tobacco control that penalizing young people for purchasing products is not an effective way to prevent or reduce use and in fact creates unintended consequences. In addition, enforcement of these laws disproportionately affects youth of color, LGBTQ youth and youth from limited incomes.

Section B-14 of the amendment changes the collection and analysis of public health data. This amendment reduces the data to be collected. ACS CAN recommends collecting more data on the impact of cannabis. We urge the state be required to collect baseline data and monitor the ongoing impact of cannabis, tobacco and other substances including alcohol and opioids. Further, the state should track psychosis and other behavioral health conditions associated with the use of these substances. We also urge the state be required to collect data on the impact of health equity on communities disproportionately affected by high rates of arrest and incarceration for cannabis-related offenses, including the impact of cannabis use, sales, and all cannabis business locations in these areas. Collection of this data can help to ensure equitable enforcement. Reducing the collection and analysis of public health data is not acceptable.

For these reasons, we urge you to vote ought not to pass on LD 40. We appreciate your time and consideration of our comments. I would be happy to answer any questions about this testimony.