



Maine Medical
Association



**Testimony of Maine Public Health Association,
Maine Medical Association,
Maine Osteopathic Association, and
Maine Chapter-American Academy of Pediatrics**

**in Support of:
LD 903: An Act to Regulate the Advertising of Cannabis Products**

Joint Standing Committee on Veterans and Legal Affairs
State House, Room 437
Wednesday, March 19, 2025

Good morning, Senator Hickman, Representative Supica, and distinguished members of the Joint Standing Committee on Veterans and Legal Affairs. On behalf of Maine Public Health Association (MPHA), Maine Medical Association (MMA), Maine Osteopathic Association (MOA) and Maine Chapter-American Academy of Pediatrics (MAAP), we write in support of LD 903: “An Act to Regulate the Advertising of Cannabis Products.”

MPHA is the state’s oldest, largest, and most diverse association for public health professionals. MPHA represents more than 850 individuals and 70 organizational members across the state. MPHA’s mission is to advance the health of all people and places in Maine. MMA is a professional organization representing over 4,000 physicians, residents, and medical students in Maine. MMA’s mission is to support Maine physicians, advance the quality of medicine in Maine, and promote the health of all Maine people. MOA is a professional organization representing more than 1,200 osteopathic physicians, residents, and medical students in Maine whose mission is to serve the Osteopathic profession of the State of Maine through a coordinated effort of professional education, advocacy, and member services to ensure the availability of quality osteopathic health care to the people of this State. The Maine AAP is a membership organization of 300 pediatricians and subspecialists across the state working to promote the health of Maine children.

LD 903 restricts some types of cannabis marketing and advertising.

We support efforts to restrict cannabis advertising to children. There have been multiple studies exploring the impact of the legal cannabis market on youth, including research that shows medical cannabis market size increases youth use¹ and cannabis advertisements influence youth use.² One study demonstrated the prevalence of cannabis marketing that appeals to kids, with 74% of cannabis stores in the study having at least one instance of child appealing products, packages, or paraphernalia (e.g., packaging that mimics popular cartoon characters or kid-friendly food products).³ Lastly, a 2024 content analysis of cannabis edibles found “...marketing tactics historically used by the tobacco industry are being used by the cannabis industry, but there is also the additional layer of marketing used by the food industry that capitalizes on the ‘health halo.’ While packaging is the primary way that brands communicate with consumers and distinguish themselves from other brands, plain packaging restrictions like those enacted in Canada should be considered not only to make edibles unappealing to youth, but to prevent misperceptions among adults that they are associated with reduced harm.”⁴

Together, these data show that we need to be doing more to prevent youth exposure, access, and use of cannabis, which is why we support this legislation. We encourage the committee to consider additional provisions, including:

- Restricting indirect marketing, such as cannabis paraphernalia, products, and cross-promotions
- Restricting patient testimonials, especially patient testimonials about pediatric patients
- Clarifying the delivery of patient testimonials (e.g., static signage vs. social media influencers)
- Clarifying “internet-based presence”

Maine youth cannabis use data from the 2023 Maine Integrated Youth Health Survey⁵ are provided below:

High School

- 32% report having used cannabis at least once; 19% used in the past 30 days.
- 19% started using cannabis before age 13.
- 30% report vaping THC, cannabis, or hash oil.
- 54% report it would be “sort of easy” or “very easy” to get cannabis.
- 22% report their parents or guardians would feel it would be “a little bit wrong” or “not wrong at all” for them to use cannabis.
- 54% report their friends would feel it was “a little bit wrong” or “not wrong at all” for them to use cannabis.
- 61% report there’s “no risk” or a “slight risk” to harming themselves (physically or in other ways) if they use cannabis once or twice a week.
- 18% report riding in a car or other vehicle driven by someone who had been using cannabis at least once in the past 30 days.
- 10% report driving a car or other vehicle when using cannabis at least once in the past 30 days.

Middle School

- 9% report having used cannabis at least once; 5% used in the past 30 days.
- 22% started using cannabis before age 11.
- 18% report vaping THC, cannabis, or hash oil.
- 22% report it would be “sort of easy” or “very easy” to get cannabis.
- 8% report their parents or guardians would feel it would be “a little bit wrong” or “not wrong at all” for them to use cannabis.
- 21% report their friends would feel it was “a little bit wrong” or “not wrong at all” for them to use cannabis.
- 38% report there’s “no risk” or a “slight risk” to harming themselves (physically or in other ways) if they use cannabis once or twice a week.
- 21% report riding in a car or other vehicle driven by someone who had been using cannabis at least once in the past 30 days.

Please vote “Ought to Pass” on LD 903. Thank you for considering our testimony.

¹ Smart R & Doremus J. The kids aren't alright: The effects of medical marijuana market size on adolescents. *J Health Econ.* 2023 Jan;87:102700. doi: 10.1016/j.jhealeco.2022.102700.

² D’Amico EJ, Rodriguez A, Tucker JS, Pedersen ER & Shih RA. Planting the seed for marijuana use: Changes in exposure to medical marijuana advertising and subsequent adolescent marijuana use, cognitions, and consequences over seven years. *Drug Alcohol Depend.* 2018 Jul 1;188:385-391. doi: 10.1016/j.drugalcdep.2018.03.031.

³ Cao Y, Carrillo AS, Zhu SH & Shi Y. Point-of-Sale Marketing in recreational marijuana dispensaries around California schools. *J Adolesc Health.* 2020 Jan;66(1):72-78. doi: 10.1016/j.jadohealth.2019.07.023.

⁴ Reboussin BA, Lazard AJ, Cornacchione Ross J, Sutfin EL, Alfonso Romero-Sandoval E, Suerken CK, Lake S, Horton OE, Zizzi AR, Wagoner E, Janicek A, Boucher M, Wagoner KG. A content analysis of cannabis edibles package marketing in the United States, *Int J Drug Policy.* 2024;130. <https://doi.org/10.1016/j.drugpo.2024.104526>.

⁵ Maine Department of Health and Human Services & Maine Department of Education. 2023. [Maine Integrated Youth Health Survey Results](#).