



Municipal Considerations for Cannabis Retail

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Presentation Outline

1. Cannabis in Windsor and Essex County
2. WE Board of Health Resolutions
3. Retail of Other Legal Substances
4. Cannabis and Vulnerable Populations/Areas
5. Opt In/Opt Out



Prevalence of Cannabis Use

Most commonly used illegal substance in Canada

- Past year use: 12% (15 years+)
- Higher rates among:
 - Men (15%) vs. Women (10%)
 - Youth, 15-19 (21%) and Young Adults, 20-24 (30%) vs. Adults (10%)
(Canadian Tobacco Alcohol and Drugs Survey, 2015)
- In **Windsor-Essex:**
 - Young Adults, 15-29 (23%) [95% CI: 14.6-31.4%] vs Adults, 18+ (9.5%) [95% CI: 7.9-11.3%]
(WECHU Community Needs Assessment, 2016)

Health Effects

Mental Health	Physical Health	Risk of Injury
Difficulty Concentrating	Coughing, Wheezing Shortness of Breath	Unintentional consumption/Poisoning
Poor Coordination and Psychomotor skills	Hyperemesis	Overdose
Impaired Memory	Bronchitis	Motor Vehicle Collision
Reduced Cognitive Function	Heart Disease	
Psychosis, Depression, Anxiety	Chronic Obstructive Pulmonary Disease (COPD)	
Addiction/Dependence <i>Cannabis Use Disorder</i>	Cancer	



Windsor-Essex Board of Health Resolutions

January 2016

- Public Health approach to legalization
- Strong, health-centered, age-restricted regulation

October 2017

- Strict licensing, planning, and zoning regulations
- Collaboration amongst law enforcement and other stakeholders
- Promotion of *Lower Risk Cannabis Use Guidelines*

October 2018

- Municipalities OPT OUT of cannabis retail outlets
- Province limits: number, density, and proximity of retail outlets in a municipality or region
- Province allows municipal regulation through zoning and licensing regulation

Cannabis Retail in Ontario

- Minimum distance of 150 m (500 ft) between cannabis retail stores and schools.
- No cap on the number of retailers per municipality.
- Municipalities are prohibited from using licensing or land-use by-laws to control the placement or number of cannabis retail outlets.
- All private recreational cannabis retail storefronts to be stand-alone stores only.
- Retailers will not be permitted to allow anyone under the age of 19 to enter their stores.
- Zero-tolerance (enforced by AGCO) for any retailer who provides cannabis to anyone under the age of 19.

Cannabis Retail in Ontario

- Private stores will be permitted to open between 9:00 a.m. and 11:00 p.m. on any day.
- 15-day consultation window for municipalities, stakeholders, and the public to provide feedback on retail outlet locations
- Due to supply shortage, province will initially allow only 25 storefronts to operate starting April 1st through a lottery system.
- Only permitted in municipalities with a population of 50,000 or greater.
- West Region to receive 7 licenses for operators set to open on April 1st.
 - Populations over 50,000 - Brantford, Cambridge, Chatham-Kent, Guelph, Hamilton, Kitchener, London, Niagara Falls, Norfolk County, Sarnia, St. Catharines, Waterloo, Welland, and Windsor



AGCO - Licensing Framework

Retail Operator License

- Allows you to operate one or more retail store in Ontario.

Retail Store Authorization

- Permits store layout and location.
- 15-day public consultation window on location.

Cannabis Retail Manager License

- Most responsible person for operations of store.

Municipalities have the ability to Opt Out of cannabis retail storefronts up to January 22nd.

AGCO - Licensing Framework



Concerns for Municipalities

April 1st limitations on number and location are only temporary

- Reflects issues with supply chain
- Once remedied, retail storefronts will begin to open with limited restrictions

Minimal regulatory control for municipalities

- 150m from school is the only distance buffer
- Zoning and licensing authorities taken away from municipality
- 15-day consultation on storefront locations

Federal and provincial regulatory changes already planned for 2019

- Retail accessibility of edibles, topicals, and extracts
- Scheduled amendments to Cannabis License Act – December 13th

Concerns for Municipalities

Consumption permitted in all areas not covered by *Smoke-free Ontario Act*.

- Interaction with municipal smoking bylaws
- Smoking/loitering and nuisance concerns around retailers
- Fewer restrictions on where cannabis, tobacco and vapes can be used increases the risk of normalization, second-hand smoke exposure and impairment

Increased density and number of access points can lead to:

- Increased consumption and associated harms
- Normalization of use
- Decreased success in attempts to abstain from use
- Undermining of health warnings

Exposure to vulnerable populations:

- Children and youth
- Individuals seeking treatment for substance use
- Individuals susceptible to addiction or with mental illness
- Low income neighbourhoods



Summary of Evidence from Tobacco and Alcohol Retail

Retail outlet density contributes to increased consumption and harms.

1. Babor, T, Caetano R, Cassell S, Edwards G, Giesbrecht N, Graham K, Rossow I. (2010). Alcohol no ordinary commodity: Research and public policy (Second ed.). New York, USA: Oxford University Press. Ottawa, ON.
2. Popova S, Giesbrecht N, Bekmuradov D, Patra J. (2009). Hours and days of sale and density of alcohol outlets: impacts on alcohol consumption and damage: a systematic review. Alcohol Oct;44(5):500-16.
3. World Health Organization (2010). Global strategy to reduce the harmful use of alcohol. Available from: http://www.who.int/substance_abuse/msbalcstrategy.pdf
4. Borodovsky JT, Lee DC, Crosier BS et al. (2017). US cannabis legalization and use of vaping and edible products among youth. Drug Alcohol Depend 177:299-306. Available from: <https://www.ncbi.nlm.nih.gov/pubmed/28662974>
5. Mair C, Freisthler B, Ponicki WR, Gaidus A. NIHMS705271; The impacts of marijuana dispensary density and neighborhood ecology on marijuana abuse and dependence (2015). Drug Alcohol Depend 154:111-6. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4536157>

Retail outlet proximity to youth-serving facilities normalizes and increases substance use.

1. U.S. Department of Health and Human Services (HHS), Office of the Surgeon General (2016). Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health. Available from: <https://addiction.surgeongeneral.gov/surgeon-generals-report.pdf>
2. Canadian Paediatric Society. Cannabis and Canada's children and youth (2016) Ottawa, ON: Canadian Paediatric Society. Available from: <https://www.cps.ca/en/documents/position/cannabis-children-and-youth>.

Retail outlet proximity to other sensitive areas may negatively influence vulnerable residents.

1. Mair C, Freisthler B, Ponicki WR, Gaidus A. NIHMS705271; The impacts of marijuana dispensary density and neighborhood ecology on marijuana abuse and dependence (2015). Drug Alcohol Depend 154:111-6. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4536157>
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Fewer restrictions on where substances can be used may increase the risk of normalization, second-hand smoke exposure and impairment.

1. Smoke-Free Ontario Scientific Advisory Committee, Ontario Agency for Health Protection and Promotion (Public Health Ontario). Evidence to guide action: Comprehensive tobacco control in Ontario (2016). Toronto, ON: Queen's Printer for Ontario; 2017. Available from: https://www.publichealthontario.ca/en/eRepository/SFOSAC%202016_FullReport.pdf.
2. Sparacino, CM, Hyldborg PA & Hughes TJ. Chemical and biological analysis of marijuana smoke condensate. NIDA Res Monogr 99(1990): 121-40.
3. Smoke-Free Ontario Scientific Advisory Committee. Evidence to Guide Action: Comprehensive Tobacco Control in Ontario (2010). Toronto, Ontario: Ontario Agency for Health Protection and Promotion. Retrieved from <http://otru.org/wp-content/uploads/2012/06/Evidence-to-Guide-Action-2010.pdf>
4. Linkenbach, J. The Main Frame: Strategies for Generating Social Norms News. Montana, US: Montana State University, 2002.
5. Smoking and Health Action Foundation. Secondhand Marijuana Smoke: Health effects of exposure (2016). Smoking and Health Action Foundation. Retrieved from: <https://nsra-adnf.ca/key-issue/secondhand-marijuana-smoke/>



Concerns for Municipalities

Lessons learned from Tobacco and Alcohol control:

- Retail outlet density contributes to increased consumption and harms.
 - Positive association between alcohol outlet density and excessive alcohol consumption and related harms.
- Retail outlet proximity to youth-serving facilities normalizes and increases substance use.
 - Schools with a greater number of retailers surrounding them have higher smoking rates.
- Retail outlet proximity to other sensitive areas may negatively influence vulnerable residents.
 - Higher concentration of tobacco retailers in lower income neighbourhoods.
- Less restrictions on where substances can be consumed increases the risk of normalization, exposure, and impairment.

WECHU Recommendations:

Opt Out

- One time window to **OPT-OUT** of retail stores in your municipality
- Can opt back in at later date
- ***Deadline – January 22nd, 2019***

Opting Out Allows for:

- Time to conduct a more formal public and stakeholder engagement process
- Integrate lessons learned from other Ontario municipalities
- Learn more about provincial regulations and the potential to create a local regulatory framework that is reflective of the best interests of Windsor-Essex Residents
- Mobilize stakeholders to respond within 15-day consultation window

Thank You

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WECHU Recommendations:

Proximity and Density

That Cannabis-related businesses be:

- no less than **500m** from any *school, library, park, recreational centre* and any other *youth-serving facility*,
- no less than **500m** from *subsidized or low-income housing*,
- no less than **500m** from *correctional facilities, addiction and mental health facilities, hospitals and places of worship*, and
- no less than **500m** from any *alcohol, tobacco, or other cannabis-related business* (i.e., cannabis consumption lounges or production facility)

WECHU Recommendations:

Other Considerations

That municipalities:

- Establish limits on the *number* of retailers in a geographic area to prevent clustering and reduce retail outlet *density*.
- Amend existing smoke-free by-laws to explicitly *include the word “cannabis”* in their definition of smoking.
- Work *collaboratively* with public health and school boards to consider impacts of legalization across different sectors.

