

March 6, 2023

Chairman Rulli Ohio Senate General Government Committee

Chairman Rulli, Vice Chair Schuring, Ranking Member DeMora, and members of the General Government Committee:

Thank you for allowing me to submit testimony in response to SB9, which makes significant changes to Ohio's medical marijuana program. My name is Colleen Oakes, and I am an employee of the Montgomery County ADAMHS Board, and I am here today representing as the Manager of the Montgomery County Prevention Coalition, based in Dayton. The Montgomery County Prevention Coalition, or MCPC, is a group of over 300 volunteers focused on reducing substance use and promoting mental wellness in Montgomery County. The volunteers on the MCPC are the individuals that are truly boots on the ground, working with our community members each and every day and seeing the vast impact that substance use and mental health disorders have on our community. The volunteers on the MCPC are not, though, prohibitionists. We recognize that using medical marijuana is legal and that many individuals can use recommended medical marijuana safely and responsibly. We also, however, recognize that marijuana can very negatively affect our youth and individuals with mental health and substance use disorders – some of our most vulnerable populations. We are concerned that expansion of the medical marijuana program will cause irreversible damage for those individuals, and we have recommendations for changes and safeguards to add to this bill that we believe will support our most vulnerable Ohioans.

As a Coalition that is largely focused on youth prevention, the MCPC's biggest consideration is for our youth and the potentially damaging effects marijuana use can have. No matter what side of the aisle you are on, I know that each and every one of you cares about the health and safety of Ohio's youth. That we can all agree on. In Ohio, 39% of the students who've used marijuana have done so before the age of 13 <sup>1</sup> and almost 20% of 12<sup>th</sup> graders said they used marijuana in the last 30 days. <sup>2</sup> Studies show us that adolescents who have used marijuana perform poorly in processing speed, memory, flexible thinking, attention learning and overall executive functioning. <sup>3</sup> I realize that this bill may not be targeted toward youth specifically, however, we cannot ignore the fact that adult influencers are one of the most significant impactors in our youth decision making. Any of you that are influencers to the youth in your lives no doubt understand this importance. Because of this – if Ohio expands its medical marijuana

<sup>&</sup>lt;sup>1</sup> OHYES! Entire State Report for 2020-2021 (ohio.gov)

<sup>&</sup>lt;sup>2</sup> 2020 Student Survey One page summary.pdf (prevention-first.org)

<sup>&</sup>lt;sup>3</sup> Crean, R. D., Crane, N. A., & Mason, B. J. (2011). An evidence based review of acute and long-term effects of cannabis use on executive cognitive functions. Journal of addiction medicine, 5(1), 1–8.

program and the substance becomes more available to adults- youth will not only have more avenues to access cannabis, they will also be exposed to more adults using the drug, normalizing its use, and decreasing the perception of harm.

We've seen this scenario play out in other areas of the country that have expanded their marijuana programs. A Smart Approaches to Marijuana study found that living near a marijuana dispensary increases the likelihood and frequency of use among youth. <sup>4</sup> In other states where marijuana has been legalized for medical use, studies have shown an increased sale of marijuana to juveniles and those who do not qualify for a serious medical condition. <sup>5</sup> Since legalizing marijuana, Colorado has seen an increase in traffic fatalities from individuals using marijuana and an increase in marijuana poisonings and hospital visits for children. Additionally, marijuana use in Colorado youth is rising faster than the national average and juvenile marijuana-related offenses are up. There has also been no proven reduction in crime or significant impact on tax revenues from legalization. <sup>6</sup> If we move forward with expanding our medical marijuana program, especially by allowing doctors to offer medical marijuana cards for virtually any reason, we will likely see similar results in Ohio.

My Coalition volunteers always encourage me to be solution-oriented, and that is what we hope to showcase to you in this testimony. We believe the following recommendations will truly make a difference in ensuring a healthy, safe Ohio for all.

- We support the prospect of a Medical Marijuana Oversight Committee. However, there is not a
  representative from the prevention field on that committee. As experts in youth substance use
  prevention and champions of individuals living with or in recovery from substance use disorders,
  a preventionist is essential to ensuring the safe implementation and enforcement of medical
  marijuana policies. We recommend that OhioMHAS select a credentialed representative from
  the prevention field to serve on this committee.
- We are extremely concerned that this bill allows for an increase in THC potency from 70 to 90%. Research shows that an increased potency leads to an increase in the negative effects of marijuana, including lapses in memory, peripheral vision, cognitive skills, reflexes and judgment. Marijuana has also been shown to increase rates of depression and suicide<sup>7</sup>, schizophrenia<sup>8</sup> and psychosis<sup>9</sup>. The bottom line is that more potency will lead to more problems for the citizens of Ohio. We recommend removing the allowance of higher potency from this legislation completely.
- We are concerned that this bill allows social media advertising for dispensaries. A 2020 study
  found that exposure to cannabis marketing on Facebook, Twitter and Instagram was associated
  with increased use of the drug. Exposure to advertising plays a significant role in shaping
  attitudes about marijuana and contributes to increased use and related negative consequences

<sup>&</sup>lt;sup>4</sup> https://learnaboutsam.org/new-study-living-near-marijuana-dispensaries-increases-likelihood-of-youth-use-favorable-opinions/

<sup>&</sup>lt;sup>5</sup> Marijuana Legalization Will Cause Many Problems for Missouri Law Enforcement and Schools - PMC (nih.gov)

<sup>&</sup>lt;sup>6</sup> Marijuana Legalization Will Cause Many Problems for Missouri Law Enforcement and Schools - PMC (nih.gov)

<sup>&</sup>lt;sup>7</sup> Major Depressive Disorder, Suicidal Thoughts and Behaviors, and Cannabis involvement in Discordant Twins: a Retrospective Cohort Study - https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5696002/

<sup>&</sup>lt;sup>8</sup> Transition of Substance-Induced, Brief, and Atypical Psychoses to Schizophrenia: A Systematic Review and Meta-analysis - https://pubmed.ncbi.nlm.nih.gov/31618428/

<sup>&</sup>lt;sup>9</sup> Association of Cannabis Use in Adolescence and Risk of Depression, Anxiety, and Suicidality in Young Adulthood - https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6450286/

throughout adolescence.<sup>10</sup> For dispensaries that choose to create social media posts, we recommend an oversight period of 12 months where a member of the Medical Marijuana Oversight Committee needs to approve any social media posts. This would ensure that ads do not target youth or individuals with substance use disorders, are factual and accurate, and adhere to the social media platform's standards and guidelines.

- We recommend removing opioid use disorders as one of the qualifying conditions for medical marijuana. This issue is especially close to our hearts because in 2017, Montgomery County was named the "Epicenter of the Opioid Epidemic." Largely due to our prevention initiatives in the County, these numbers had been steadily decreasing until 2020. We saw a spike in overdoses in 2020 and an additional spike in 2021, similar to what other communities are seeing across our state. <sup>11</sup> Our fellow residents are dying and need evidence-based, viable treatment to bring these overdose death numbers back down. We cannot take the chance with people's lives by offering a treatment option that has not been proven to be effective. Similarly, all qualifying conditions should be researched and tested before being added to the approved list of medical marijuana treatments. Ohio residents depend on our legislators to make informed decisions when crafting legislation, and we encourage you to require research and evidence before adding qualifying conditions into the legislation.
- We ask that this committee consider an extension on the allowable distance between dispensaries. The current requirement of one mile between dispensaries seems to be much too low. We would recommend changing this requirement to at least five miles between dispensaries. We also recommend a requirement that dispensaries need to be at least 1,000 feet away from schools, libraries or parks to further protect and separate our youth from the dispensaries.
- We support an Equity Study on the medical marijuana industry to support minority and women businesses. However, we recommend an additional study on how marijuana advertising and use negatively impacts minority populations. From an environmental scan conducted by the Montgomery County Prevention Coalition, we saw a substantial increase in substance use advertising in low income and minority communities. It would be beneficial for our legislators to understand how medical marijuana advertising impacts those at-risk communities.

Thank you for your concern and attention to the health and wellbeing of our Ohio residents. I appreciate the time to speak with you today and am happy to answer any questions you have.

Colleen Oakes Manager, Montgomery County Prevention Coalition preventionmc.org

Tristyn Ball
Director, Prevention and Early Intervention
Montgomery County ADAMHS Board
mcadamhs.org

<sup>&</sup>lt;sup>10</sup> Sabet, K. & Jones, W. (2019). Marijuana Legalization in the United States: A Social Injustice. University of Pennsylvania Journal of Law & Public Affairs, 5(1), 15-23.

<sup>&</sup>lt;sup>11</sup> Data & Reports | Coat (mccoat.org)