

***A Public Health Framework vs. Massachusetts State Marijuana Laws and Regulations: Is Massachusetts Marijuana Policy Meeting Key Public Health Standards?*** (Adapted from Barry & Glantz, 2016).

	<b>Public Health Standard</b>	<b>Massachusetts</b>
<b>Lead Agency</b>		
Department of Health	✓	No
<b>Advisory Committees</b>		
Membership solely of public health experts	✓	No
No decision-making authority of marijuana industry or vested interests	✓	No
<b>Regulatory Complexity</b>		
Creates a single system of retail marijuana	✓	No
<b>Tax Revenue</b>		
Tax covers full costs	✓	-- <sup>a</sup>
Dedicated revenue to marijuana prevention, control, and research	✓	Partially <sup>b</sup>
<b>Prevention and Control Programs</b>		
Media campaign: Aimed at general population (not just youth)	✓	Partially <sup>c</sup>
Media campaign: Modeled on social norm change	✓	No
<b>Smoke-free Laws</b>		
Prohibit any public use of marijuana	✓	Yes
Prohibit marijuana use wherever tobacco smoking is prohibited	✓	Yes
Protect local control	✓	Partially <sup>d</sup>
Prohibit indoor use in marijuana retail stores or marijuana clubs	✓	Partially <sup>e</sup>
<b>Marketing and Advertising</b>		
Prohibit free or discounted samples	✓	Yes
Prohibit cartoon characters	✓	Yes
Prohibit sport and cultural event sponsorship	✓	Partially <sup>f</sup>
Prohibit product placement in popular media and cobranded merchandise	✓	Partially <sup>g</sup>
Prohibit therapeutic claims	✓	Yes <sup>h</sup>
Prohibit outdoor advertising on billboards	✓	Partially <sup>i</sup>
Prohibit advertising on television and radio	✓	Partially <sup>j</sup>
Restrict advertising in print and digital communications with 15% threshold	✓	Partially <sup>k</sup>
<b>Licensing Rules</b>		
Impose serious penalties on retailers' underage sales	✓	Yes <sup>l</sup>
Prohibit sale of tobacco or alcohol in marijuana retail stores	✓	Yes
Prohibit tobacco and alcohol retailers from holding marijuana license	✓	No
<b>Retail Sales</b>		
Require retailer use age verification system (ID scanners) at point of sale	✓	No
Prohibit retailers within 1,000 ft of underage-sensitive areas	✓	No
Prohibit electronic commerce (internet, mail order, text messaging, social media)	✓	Yes <sup>m</sup>
<b>Product Standards</b>		
Require strong potency limits and product quality testing	✓	Partially <sup>n</sup>
Prohibit products containing additives (nicotine, alcohol, caffeine, or toxic chemicals)	✓	Mostly <sup>o</sup>
Prohibits flavored products appealing to underage persons	✓	No
<b>Warning Labels</b>		
Require warning labels modeled on state-of-the-art tobacco labels	✓	No

This analysis was produced by the Massachusetts Prevention Alliance, a private, non-partisan, 501c3 organization. For comments or inquiries, please email [info@mapreventionalliance.org](mailto:info@mapreventionalliance.org). May 2019.

<sup>a</sup> It is unknown whether “tax covers full costs”; however, it is very unlikely. Full transparency regarding the allocation of tax revenue to each item outlined in M.G.L. ch.94G §14, “Marijuana Regulation Fund”, is important.

<sup>b</sup> M.G.L. ch.94G §14, establishes the “Marijuana Regulation Fund” which includes funding for implementation, administration and enforcement of Chapter 94G by the Cannabis Control Commission (CNB) and related implementation, administration and enforcement of sections 116 to 123, inclusive, of chapter 128 and the provision of pesticide control pursuant to chapter 132B by the Department of Agriculture. Thereafter, money in the fund may be expended for five identified priority areas including substance use treatment, early intervention, and prevention but also: public safety; municipal police training; Prevention and Wellness Trust Fund; and programming for restorative justice, jail diversion, workforce development, industry specific technical assistance, and mentoring services for economically-disadvantaged persons in communities disproportionately impacted by high rates of arrest and incarceration for marijuana offenses pursuant to chapter 94C.

The priorities among items outlined in M.G.L. ch.94G §14, to be appropriated from the “Marijuana Regulation Fund”, are unclear.

A Public Health Impact Assessment of the “Social Equity Program” is important to outline the public health impacts on communities choosing to view the commercial marijuana industry as an “economic development” opportunity. For example, please see, [“Cannabis Legalization In San Francisco: A Health Impact Assessment”](#).

<sup>c</sup> Media campaigns released thus far are inadequate. The statute requires that the CNB and DPH work together to create campaigns; however, Massachusetts has a well-trained network of prevention professionals. These professionals are trained in evidence-based, effective, prevention messaging strategies and should be utilized to assist with development of media campaigns.

<sup>d</sup> Public Health and prevention science show that increased availability and increased social acceptability, of substances with addiction potential, in the community environment drive up rates of use and use-related health harms. The highest degree of local control is important. Advantage is given to the industry to enter any community that has not exercised the narrow and complex provision in the law, M.G.L. ch.94G §3(a)(2), protecting communities from an otherwise state mandate that they host commercial marijuana establishments. Inadequate legal clarity has been provided to citizen groups who wish to exercise the will of local voters to prohibit commercial marijuana at the local level. It is important that residents be adequately notified and be given the opportunity for public comment as part of the decision-making process.

<sup>e</sup> Smoking/use is prohibited in retail stores. The Cannabis Control Commission reports that they will be considering licensing for social consumption, primary and mixed use. Social consumption licenses are not in the best interest of public health.

<sup>f</sup> Sport and cultural event sponsorship is allowed in MA, if this follows the requirement for an “85% audience 21 or over threshold”; these sponsorships are not prohibited per se. This does not appear to include ancillary marijuana businesses (e.g. Weedmaps).

<sup>g</sup> We could not find any language specifically related to product placement in popular media per se; however, current restrictions require that marketing/advertising must follow the “85% audience 21 or over threshold”. This does not appear to include ancillary marijuana businesses, only marijuana products. Expanding governance or regulation to ancillary marijuana businesses is important.

<sup>h</sup> Therapeutic claims are prohibited unless based in science and approved by the Cannabis Control Commission.

<sup>i</sup> Outdoor advertising on billboards is not prohibited, per se. Advertising is allowed for marijuana products if that advertising meets the “85% audience 21 or over threshold”. Ancillary marijuana businesses are not currently held to this threshold, as such, advertising of ancillary marijuana businesses is allowable on outdoor billboards (e.g., Weedmaps).

<sup>j</sup> Advertising on television and radio is not prohibited, per se. Advertising is allowed for marijuana products if that advertising meets the “85% audience 21 or over threshold”. Ancillary marijuana businesses are not currently held to this threshold.

<sup>k</sup> The “85% audience 21 or over threshold” is applied to retail marijuana products but not to ancillary marijuana businesses as the law and regulations are written currently. Ancillary marijuana businesses should be included in this restriction.

<sup>l</sup> There are penalties for retailers’ selling to those under age; however, diversion to those under 21 is occurring.

<sup>m</sup> Electronic commerce is prohibited but is not being adequately enforced.

<sup>n</sup> Product quality testing is required. There are no potency limits. In accordance with M.G.L. ch.94G §7, Limitation on Sales, a Marijuana Retailer may not sell more than one ounce of marijuana or five grams of marijuana concentrate to a consumer per transaction; however, 5g of 90% THC concentrate is equivalent to ~4,500mg THC vs. 1oz of dried marijuana at 10% THC would equal ~2800mg THC. While each package of edible marijuana product may contain 20 x 5 mg THC servings (100mg THC), there are currently no transaction limits for edible products. There is also no way to prevent multiple transactions per day or to track sales to identify potential diversion to those under 21.

<sup>o</sup> Caffeine is not included in current additive restrictions.

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