MIDDLESEX-LONDON HEALTH

MIDDLESEX-LONDON HEALTH UNIT

REPORT NO. 013-17

TO: Chair and Members of the Board of Health

FROM: Dr. Gayane Hovhannisyan, Acting Medical Officer of Health

Laura Di Cesare, Acting Chief Executive Officer

DATE: 2017 March 16

THE LEGALIZATION AND REGULATION OF CANNABIS IN CANADA

Recommendation

It is recommended that the Board of Health:

- 1. Receive Report No. 013-17 re: "The Legalization and Regulation of Cannabis in Canada" for information; and
- 2. Direct staff to continue to work with partners at the local and provincial levels to advocate for and support the development and implementation of evidence-informed regulations.

Key Points

- In its December 2015 Throne Speech, the federal government set out its commitment to "legalize, regulate, and restrict access" to cannabis.
- The <u>Federal Task Force on Cannabis Legalization and Regulation</u> released a <u>report</u> that contains recommendations to the government for a framework to legalize, regulate and restrict access to cannabis.
- On February 28, Mr. Bill Blair, Parliamentary Secretary to the Minister of Justice and Attorney General of Canada, met with invited local stakeholders, including representatives from the Health Unit and the Board of Health, to gather input and feedback.
- Enabling legislation will be tabled in spring 2017 to provide parliamentary approval to proceed with the development of the framework to support legalization and regulation of cannabis by 2019.

A Public Health Approach to the Regulation of Cannabis

Criminal prohibition of cannabis has resulted in well-documented health and social harms. Despite prohibition, Canada has one of the highest rates of recreational cannabis use worldwide. In July 2015, the Board of Health was advised that staff would be bringing forward an evidence-based position on cannabis policy (Report No. 047-15). A comprehensive report was prepared and presented to the Board of Health in January 2016 (Report No. 003-16 and Appendix A). At that time, the Board of Health authorized staff to advocate for an evidence-based public health approach to cannabis legalization, including strict regulation for non-medicinal use and a legislative framework that enacts strict controls on the production, distribution, promotion and sale of cannabis.

Federal Government Commitment to Legalize and Regulate Cannabis

In its December 2015 Throne Speech, the federal government committed to "legalize, regulate, and restrict access" to cannabis. In June 2016, the government created a nine-member Task Force on Cannabis Legalization and Regulation to consult and provide advice on the requirements of a new legislative and regulatory framework for legal access to cannabis. Nine principal objectives guided the Task Force's work, chief among these being "keeping cannabis out of the hands of children and keeping profits out of the hands of organized crime." The Task Force has incorporated lessons learned from other jurisdictions that have already legalized cannabis (e.g., Colorado, Washington state) to inform recommendations for the Canadian government. The Task Force engaged with provincial, territorial and municipal governments, experts,

patients, advocates, Indigenous governments and representative organizations, and industry, and reviewed over 30,000 online submissions from individuals and organizations, including the Canadian Public Health Association, the Canadian Medical Association and the Centre for Addiction and Mental Health. The Health Unit provided input as a member of the Ontario Public Health Unit Collaboration on Cannabis (the Collaborative), a group of substance misuse professionals from thirty-two public health units who are working together as a unified voice to recommend a comprehensive public health approach.

The Task Force's report, "A Framework for the Legalization and Regulation of Cannabis in Canada," was released on November 30, 2016, and contains recommendations in five key areas: minimizing harms of use; establishing a safe and responsible supply chain; enforcing public safety and protection; medical access; and implementation. Task Force recommendations are summarized in Appendix A. The Task Force recognizes that successful implementation of the framework will take time and require federal, provincial and municipal governments to work together to meet a number of challenges regarding capacity and infrastructure, oversight, coordination and communications.

Stakeholder Consultations

On February 28, as part of a cross-country tour, Mr. Bill Blair, Parliamentary Secretary to the Minister of Justice and Attorney General of Canada, convened a meeting with representatives from the Health Unit and the Board of Health, the Thames Valley District School Board, the Mayor's office, London City Council, Addiction Services of Thames Valley and local Members of Parliament Kate Young and Peter Fragiskatos. Blair met separately with the London Police Service. The meeting served to give context to the impending legalization and its proposed timelines; to discuss Task Force recommendations; and to hear concerns and suggestions from invited participants. Enabling legislation will be tabled in the spring of 2017 to provide parliamentary approval to proceed with the development of the framework to support legalization and regulation of cannabis by 2019. According to Mr. Blair, the creation of this system will take time. Reducing public health and social harms is the sole motivation behind legalization, not revenue generation and economic benefits through taxation. The Health Unit commented specifically on the Task Force's recommended minimum age of purchase of cannabis (18 years) and the recommendations related to personal cultivation, encouraging the federal government to weigh the evidence carefully and consider the impact that these policy directions could have on youth and young adult brain development and on normalization of the cannabis culture. The Health Unit expressed caution that changes to cannabis policy may have unintended consequences on infant and maternal health outcomes. The Health Unit expressed the need for ethical distribution of revenues generated from cannabis sales and reinvestment in health promotion, prevention of substance misuse, treatment and enforcement. Last, the Health Unit emphasized the need for investing in baseline surveillance systems and research, and the importance of a comprehensive policy monitoring and evaluation framework.

Boards of Health are mandated under the Ontario Public Health Standards to reduce the frequency, severity and impact of substance misuse; criminal prohibition of cannabis is a barrier to meeting these objectives effectively. A public health approach acknowledges that cannabis is not a benign substance and that policy built upon evidence-based regulations and controls is the best approach to minimize the risks and harms associated with use. Federal government policy should be restrictive enough that it minimizes the risks and harms associated with normalization and use of cannabis, while being adaptable in the event that changes are required to mitigate unintended consequences of policy change.

This report was by the, Chronic Disease Prevention and Tobacco Control Team; and the Healthy Communities and Injury Prevention Team, Healthy Living Division.

Dr. Gayane Hovhannisyan, MD, MHSc, CCFP, FRCPC Acting Medical Officer of Health

Laura Di Cesare, CHRE
Acting Chief Executive Officer

This report addresses the following requirements of the Ontario Public Health Standards (revised May 2016): Foundational Standard; Chronic Disease Prevention; Prevention of Injury and Substance Misuse.