

THE PUBLIC ADVANTAGE



Marijuana Legalization in Manitoba – The MGEU Perspective

December 2016

MGEU

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Introduction

The legalization of non-medical marijuana is coming to Canada. The Government of Canada has committed to moving forward on the legalization of non-medical marijuana by enacting legislation and implementing regulations allowing more access to the drug across the country.

As provinces prepare for the implementation of a regulatory framework, the Manitoba Government and General Employees' Union (MGEU) urges the Government of Manitoba to proceed with a public model administered and operated by Manitoba Liquor and Lotteries. Manitoba Liquor and Lotteries has the expertise, capacity and a proven track-record selling a controlled product in a socially responsible way. The MGEU echoes the call from the Centre for Addiction and Mental Health in advocating for a publicly owned and operated system of marijuana sales, distribution and a robust regulatory environment that keeps public health at the forefront.¹

The risks to public health associated with easier access to non-medical marijuana are too great to leave the sale and distribution to the profit-driven private sector, and Manitobans agree. In a recent Probe Research public survey, commissioned by the MGEU, 65 percent of Manitobans surveyed agreed that marijuana should be sold in stores owned and managed by government, similar to Liquor Marts – compared to 23 percent who believed it should be sold in private, for-profit stores (Appendix A).

Manitoba Liquor and Lotteries has the expertise, capacity and a proven track-record to sell a controlled product in a socially responsible way.

This reaffirms that the Manitoba model must harness the capacity and capability of Liquor and Lotteries to mitigate the risks associated with a potential increase in non-medical marijuana use. The safest most efficient system of marijuana sales and distribution is a public system that is supported by strict regulations to protect the health and safety of all Manitobans.

"...65 percent of Manitobans surveyed agreed that marijuana should be sold in stores owned and managed by government, similar to Liquor Marts..."

¹ Centre of Addiction and Mental Health. (2014) Cannabis policy framework.

MGEU

The MGEU represents over 40,000 public sector employees in Manitoba, including those who work directly for government, crown corporations, colleges, and community agencies. MGEU members and their families live and work in communities across the Province and expect that the government will take all precautions to ensure their families and communities are kept healthy and safe.

Marijuana Legalization - The Risks

Marijuana is not a normal commodity that should be bought and sold like any other consumer product. The risks to the health, social, legal, and economic well-being of all Manitobans are real when considering the legalization of marijuana. While there are some therapeutic benefits of marijuana use, this position paper will focus on the risks.

Risk of Addiction: Marijuana is an addictive substance that features potency levels that have increased significantly in recent years.² According to the Centre for Addiction and Mental Health, “Canada has one of the highest rates of cannabis use in the world”.³ Recent research has shown that 5-9% of people who use marijuana are at risk of developing dependency to the substance and these risks are elevated when marijuana is used during adolescence.^{4,5} The addictive quality of marijuana contributes to overdosing, which may not be fatal, but may lead to symptoms of irritability, cravings, anxiety and depression.⁶

Physical and Mental Health Risks: The negative health risks linked to marijuana usage vary from short-term to ongoing long-term health complications. While there are several factors that contribute (frequency of use, age at which use begins, individual health status) to the risk level experienced by an individual, regular usage can have severe adverse health effects on users.⁷ These impacts include physical damage to the lungs, cardiovascular effects and psychological impacts like cognitive impairment, mental health issues and overall “reduced life satisfaction and achievement.”⁸

Risks to Youth: There are also important risk factors to take into consideration when assessing the overall impact that increased access to marijuana, through legalization, will have on specific segments of the population. For example, the risk to adolescent users of marijuana is greater because the brain is not fully developed until the age of 25 – leaving youth more susceptible to the adverse effects of marijuana use.⁹ Safeguards must be in place to reduce the negative impacts on youth and other populations that may be at higher risk.

Impaired Driving Risks: According to MADD Canada, alcohol and drug impaired driving is a serious concern, killing between 1,250 and 1,500 people and injuring another 63,000 annually.¹⁰ Evidence from other jurisdictions that have legalized marijuana demonstrates that a concerted effort

² World Health Organization. (2016). The health and social effects of nonmedical cannabis use.

³ Centre of Addiction and Mental Health. (2014) Cannabis policy framework.

⁴ Ibid.

⁵ George T, Vaccarino F. (Eds) (2015). Substance abuse in Canada: The effects of cannabis use during adolescence. Ottawa, On: Canadian Centre on Substance Abuse.

⁶ Ibid.

⁷ Government of Canada. (2016). Toward the legalization, regulation and restriction of access to marijuana. Discussion Paper.

⁸ Ibid.

⁹ Ibid.

¹⁰ MADD Canada. (2016). Need for new measures to detect drug-impaired drivers is greater than ever.

to minimize impaired driving must be part of the implementation plan.¹¹ Colorado, for example, has experienced a marked increase in marijuana-related traffic deaths since legalization.¹² Public education, a legal framework and effective testing methods must be implemented in tandem with legalization to mitigate risks on Manitoba's roadways.

These are just a few examples of the risks associated with the unrestricted access to marijuana products. The role of the government must be to ensure that appropriate steps are taken to mitigate these risks. Reducing cannabis related harm must be paramount in planning how to manage access to marijuana in Manitoba.

Mitigating Risk - A Public Marijuana Retail and Distribution System

The MGEU is calling on the Government of Manitoba to implement a public system of sales and distribution of marijuana once it is legalized. The public model has proven to provide the safest and most responsible system to regulate, distribute and sell controlled substances.¹³ We stand with organizations like Mothers Against Drunk Driving (MADD) and the Centre for Addiction and Mental Health in advocating for a public system. We urge the government to task Manitoba Liquor and Lotteries with the development of a comprehensive strategy within the public model including: Safe Sales, Impaired Driving Strategy, Improved Treatment Options, Public Education, and Good Jobs.

- A. Safe Sales:** Many of the risks associated with the abuse of marijuana can be mitigated at the point of sale. A public system where public health, not profit, is the number one priority, will lead to better public health outcomes. A culture of safety must be built into the sales model of marijuana products including the following features:
- i. *Legal Age (21):* Set the legal age for purchase and consumption of marijuana at 21 as recommended by the Canadian Medical Association.¹⁴ This will help dissuade usage amongst youth, the population with the highest risk, while limiting marijuana sales in the unregulated black or grey market.
 - ii. *Stand-Alone Points of Sale:* Utilize stand-alone storefronts/kiosks dedicated to the sale of marijuana. The states of Washington and Colorado prohibit the sale of both alcohol and marijuana at the same store to mitigate the heightened risks presented when these substances are used together at the same time.¹⁵ This will also simplify the proof of age process and ensure that well-trained staff are present to sell marijuana products in a safe manner. We asked Manitobans about their preferences and a clear majority (51%) indicated a preference for stand-alone stores, while 38% believed it should be sold alongside liquor in Liquor Marts (Appendix A).

¹¹ Legalization and Regulation of Marijuana (2016). Canadian Medical Association: Submission to the Government of Canada Task Force on Marijuana Legalization and Regulation

¹² Ibid.

¹³ Solomon, R., Chamerlain, E., Al-Azem, N., Submission to the Task Force on Marijuana Legalization and Regulation. MADD Canada.

¹⁴ Legalization and Regulation of Marijuana (2016). Canadian Medical Association: Submission to the Government of Canada Task Force on Marijuana Legalization and Regulation.

¹⁵ Government of Canada. (2016). Toward the legalization, regulation and restriction of access to marijuana. Discussion Paper.

Recommendations from other jurisdictions, and most recently, the Government of Canada Task Force on Marijuana Legalization and Regulation, strongly point to a model that incorporates stand-alone public stores as the point of sale for non-medical marijuana.

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- iii. *Well-trained Sales Staff:* Ensure employees are well trained to: 1) Check identification 2) Deny sales to intoxicated customers 3) Have product experts who can educate customers on products. Research has shown that the public system of alcohol sales incentivizes employees to check for identification and deny sales to minors. Meanwhile, the profit motive of the private sector “will overtake commitments to social responsibility programming and staff training on important issues such as identifying underage drinkers.”¹⁶
- iv. *Limit Access to Marijuana:* Control the density of stores and limit hours of operation to restrict access to marijuana products - decreasing potential misuse and abuse. As in the case of alcohol sales, experts recommend limiting the number of stores, hours of service and control the price of products to ensure a balance of access and safety is achieved.¹⁷ This same model should be applied to the sale of marijuana to mitigate risks associated with abuse.
- v. *Child Proof Packaging:* Include risk-of-use messages on packaging and other relevant information, and require packaging that is child-proof and does not appeal to children. American states that have legalized marijuana found that the market for edible marijuana products was significant and required strong rules to avoid accidental ingestion of marijuana.¹⁸
- vi. *Avoid Commercialization:* Strictly regulate the advertising and marketing of products containing marijuana with regulations similar to those placed on the advertising and marketing of tobacco products in Canada. Stakeholders in Colorado agreed that avoiding the promotion and marketing of cannabis is the most important factor in preventing considerable public health impacts such as those seen with other legal drugs.¹⁹
- vii. *Regulate Potency of Products:* Regulate the production of marijuana products to ensure safeguards are in place to manage the potency of products. Clearly labeling products and displaying contents on product packaging, combined with sales experts

¹⁶ Flanagan, G. (2003). The Alberta liquor retailing in industry ten years after privatization. Canadian Center for Policy Alternatives.

¹⁷ MADD Canada. (2014). Provincial Liquor Boards: Meeting the best interests of Canadians.

¹⁸ Canadian Centre on Substance Abuse. (2015). Cannabis regulation: Lessons learned in Colorado and Washington state.

¹⁹ Ibid.

that can assist in finding a suitable product will help mitigate unintended adverse impacts of marijuana usage.²⁰

B. Impaired Driving Strategy: Task Manitoba Public Insurance (MPI) to lead development of a comprehensive strategy to reduce drug-impaired driving, including prevention, education, and enforcement, in cooperation with law enforcement and other stakeholders. This framework should include public awareness campaigns and school programs targeting youth and parents. Follow the MADD recommendation to equip law enforcement with oral fluid testing technology that can detect drug-impaired drivers.²¹ Enact strict impaired driving penalties to deter drug-impaired driving through strengthened laws and enforcement.

C. Improve Treatment Options: Rely on the expertise of drug treatment professionals to enhance treatment to those negatively impacted by marijuana abuse. Further align Manitoba's implementation plan with the advice received from Washington and Colorado and take an approach, "that builds capacity in prevention, education and treatment before implementation to minimize negative health and social impacts associated with cannabis use."²² Provide additional resources to the Addictions Foundation of Manitoba to increase the range of treatment options for youth, adults and families who are adversely impacted by marijuana abuse. This should include a whole range of options, including in-school education programs, enhanced impaired drivers programs and other drug treatment services.

Provide additional resources to the Addictions Foundation of Manitoba to increase the range of treatment options for youth, adults and families who are adversely impacted by marijuana abuse.

D. Invest in Public Education: Create a sustained and comprehensive strategy to educate the public to raise awareness of the risks associated with marijuana use. Increase Manitoba Liquor and Lotteries social responsibility budget to include advertising to increase public awareness and encourage responsible marijuana use. Develop a clear communication plan to inform the public about the implementation of regulations and how they impact Manitobans.

E. Good Jobs - Quality Service: The legalization of marijuana will be an economic driver, create good family supporting jobs and revenues to support public services. We encourage Manitoba Liquor and Lotteries to expand their workforce - currently providing services to liquor sales and distribution - to include the sales and distribution of marijuana products. These employees have experience working with a controlled substance and understand the importance of training and safe sales.

²⁰ Ibid.

²¹ MADD Canada. (2016). Need for new measures to detect drug-impaired drivers is greater than ever.

²² Canadian Centre on Substance Abuse. (2015). Cannabis regulation: Lessons learned in Colorado and Washington state.

Conclusion

The Federal Government of Canada is moving forward with legalizing marijuana. Provinces like Manitoba must prepare to implement a strict regulatory framework that puts the health of Manitobans first. Research has shown that there are significant health risks associated with the free-flowing unrestricted usage of marijuana, especially for young Manitobans. The MGEU is calling on the government to mitigate these risks by implementing a public model that ensures safe sales, an impaired driving strategy, improved treatment options, public education, and good family-supporting jobs and quality service. The public model is the only model that will mitigate the harmful impact of drug abuse and ensure that rules and regulations are enacted and enforced in a responsible and reasonable manner.

Appendix A

This province-wide Omnibus survey was designed and conducted by Probe Research via telephone interviews taken between Nov. 29, 2016 and Dec. 11, 2016 among a random and representative sampling of 1,000 adults residing in Manitoba.

Question 1:

The Canadian Government has announced that it will legalize marijuana. Once it is legalized, do you believe marijuana should be sold in stores owned and managed by government, similar to Liquor Marts or sold in private, for-profit stores?

Question	Response Rate
Sold in stores owned and managed by government, similar to Liquor Marts	65%
Sold in private, for-profit stores	23%
Neither	7%
Don't Know/Not Sure	3%
Both	2%

Question 2:

If the Provincial Government decides that marijuana will be sold through the government-managed liquor store system, do you believe marijuana should be sold in Liquor Marts, along with liquor or sold in separate, stand-alone stores.

Question	Response Rate
Sold in separate, stand-alone stores.	51%
Sold in Liquor Marts, along with liquor.	38%
Neither	6%
Don't Know/Not Sure	4%
Both	2%



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