

Adult-Use Cannabis:

Exploring Public Health Concerns,

Market Volatility, and Solutions for PA

Executive Summary of the House Health Subcommittee on Health Care Report

Prepared By:

Erika Fricke | Executive Director

House Health Committee (D) efricke@pahouse.net

Introduction.

The House Health Subcommittee on Health Care held six hearings to understand elements of an effective cannabis legalization scheme, addressing:

- Judicial impacts
- Public Health
- Implementation concerns from industry
- Social equity programs
- Potential models for legalization
- State of the market and changes in sales and use patterns post-legalization

The committee sought testimony from a broad group of stakeholders, including those who profit from commercialization, those opposed to legalization, and regulators and academics who commented on the industry without stating a position for or against legalization. The committee held one other committee meeting solely on unregulated intoxicants, such as hemp-derived cannabinoids Delta-8, which are currently widely available in the market.

Additionally, committee staff reviewed the proceedings and report from the National Academies, which occurred simultaneously to the committee hearings, with overlapping testifiers including Dr. Schauer, Dr. Caulkins, Dr. Hammond and Dr. Silver.*

Committee testifiers and members discussed a broad range of topics including public health, changes in the market, and models to address public health and other state concerns. The committee held a hearing on April 26, 2023 to discuss unregulated intoxicants, including synthetic cannabinoids.

The full Subcommittee Report is available upon request.

*This publication and associated testimony can be found at: https://www.nationalacademies.org/our-work/public-healthconsequences-of-changes-in-the-cannabis-landscape

Committee Hearings

Nov 1, 2023 - Introduction to cannabis landscape and public health concerns

Dec. 13, 2023 - Overview of cannabis regulation

✓ February 5, 2024 - Industry perspective on best policy

✓ March 20, 2024 - Correcting past harms of criminalization

✓ April 11, 2024 - Effective social equity

✓ April 25, 2024 - Models to prevent public health harms.

Executive Summary

States' experimentation with cannabis legalization provides Pennsylvania the chance to review mistakes from other jurisdictions, look at best practices and forge a path for legalization and regulation that addresses the core values and concerns for Pennsylvanians.

Cannabis legalization is not without public health concerns. Daily cannabis users now outpace daily alcohol consumers; and many experts consider cannabis use patterns as more similar to tobacco use than to alcohol use. The majority of cannabis is used by a minority of consumers who use it daily or several times daily. Use pattern is linked to age, but also to economic status, with Americans living at the poverty level using cannabis at a higher rate than any other economic group.

Public health harms linked to cannabis use, particularly high THC content cannabis, include cannabis use disorder. These potential health risks are compounded by the fact that today's cannabis products are four to ten times higher in THC potency than previous generations. Potency of this psychoactive substance is shown to have greater links to mental health diagnoses.

Youth use, in particular, seems to have potential developmental impacts, as well as links to future mental health concerns. Evidence thus far does not show cannabis legalization leading to an increase in consumption amongst younger teens. However, older teens and young adults, aged 18–25, have had a dramatic rise in consumption.

While concerns about psychoactive THC uses exist, Pennsylvanians already have broad access to THC products through one of many areas: Pennsylvania's legal medical marijuana market, neighboring states legal sales, black market sales, and sales of unregulated intoxicating THC products like Delta-8 through a proliferation of corner stores and vape shops. **Legislation must address the fact that THC access is already widespread and often unregulated.**





Even though THC, the psychoactive component of cannabis, is widely available, the criminalization of cannabis possession continues. Enforcement of cannabis criminalization laws harms many residents, disproportionately affected minority communities, and has created long-lasting impacts on individuals' ability to succeed in education or employment.

To counteract the harms of cannabis criminalization, and because Pennsylvanians currently use THC products, many of them untested and unregulated, Pennsylvania should legalize and regulate cannabis for purposes of consumer safety and public health.

Past convictions for cannabis use should be addressed to allow individuals with simple cannabis convictions to return to full employment, and communities disproportionately harmed by cannabis convictions should be strengthened.

Market volatility emerged as a critical theme in testimony, including the fact that cannabis prices often drop precipitously following legalization with a boom-and-bust business cycle, and consolidation into large vertically integrated multi-state operators. These factors make small business entrance into the market challenging.

The solution that evolved out of the public hearings was the Quebec model. Quebec's model of publicly owned retail creates a model of accountability that has shown to mitigate some of the public health harms while still capturing the same amount of black market sales to the legal market and allowing for revenue generation to support community reinvestment.

Publicly owned retail removes the pure profit motive from cannabis sales that has led to regulatory capture, increasingly high-THC content, and sales of products that might appeal to children.

Additionally, publicly owned retail ensures broad access to the consumer market for small businesses.

This hybrid, publicly owned model will be the model that the House Health Committee considers as the solution to regulating adult-use cannabis in Pennsylvania. Funds from sales can be used to reinvest in communities disproportionately harmed by enforcement against cannabis use. Meanwhile, the proposal will include a robust proposal to allow residents to eliminate records related to cannabis use and possession.