

Municipal variations in cannabis regulation regarding public consumption and retail sales in Canada

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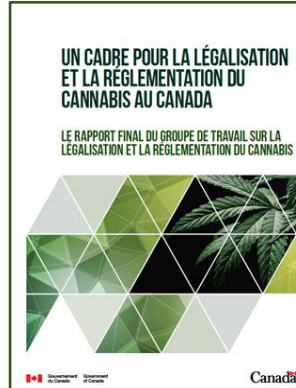
Context

Cannabis legalization for non-medical purposes in Canada



Prime Minister Trudeau announces that his party will work on cannabis legalization

April 20, 2016



Workgroup on legalization

November 20, 2016



Law project C-45 (Law on cannabis) submitted to the Parliament of Canada

April 13, 2017



Quebec law project 157

(Loi instituant la Société québécoise du cannabis, édictant la Loi encadrant le cannabis et modifiant diverses dispositions en matière de sécurité routière)

November 16, 2017



Cannabis legalization across Canada

October 17, 2018

Different competencies according to government levels

Federal

- National defence
- Foreign affairs
- Post
- First Nations' rights and
- Criminal law
- Banks
- Etc.

Provincial

- Health
- Education
- Some natural resources
- Road safety
- Etc.

Municipal

- Security, health and wellbeing of citizens
- Public spaces and activities
- Nuisances
- Transportation
- Businesses
- Municipal services
- Local police
- Etc.

Local variations can lead to differences in cannabis distribution and consumption, influencing the social health determinants of people who use cannabis.

Three models of
legalization

*Physical
accessibility*

	Alberta	Ontario	Québec
Online sales	Public	Public	Public
Brick-and-mortar sales	Private	Private	Public
Localisation of retail stores	At least 100m from provincial health care facilities, schools, or parcels of land designated as a school reserve	At least 150m from a school	At least 250m* from all educational establishments except universities <i>*150m for Montreal</i>

Considerations regarding physical accessibility

- Better access to alcohol, tobacco or cannabis is associated with higher use in the population.
(Henriksen, 2012; Rotering et al., 2021; Stockwell et al., 2019)
- Greater **store density** is associated with :
 - Higher use level
(Dilley et al., 2017; Everson et al., 2019; Freisthler & Gruenewald, 2014; Paschall & Grube, 2020; Paschall & Lipperman-Kreda, 2018; Padersen et al., 2021; Shih et al., 2019)
 - Prevalence
 - Frequency
 - Intention
 - **Favorable perceptions** and **more positive attitudes** towards cannabis use
(Fataar et al., 2021; Shih et al., 2019)

Considerations regarding physical accessibility

- **Geographic proximity** to retail stores :
 - Reduced exposure to the offer of drugs other than cannabis by illegal sellers in the Netherlands (Wouters & Korf, 2009)
 - Earlier age of initiation among Dutch individuals (Palali & vanOurs, 2015)
 - Increased likelihood of cannabis consumption (Everson et al., 2019; Young-Wolff et al., 2021)
- Retail stores tend to be located in **disadvantaged neighborhoods**, where rates of cannabis use are also higher (Firth et al., 2020; Mair et al., 2015; Morrison et al., 2014; Myran et al., 2019)

Three models of legalization

Public consumption

Alberta	Ontario	Québec
In alignment with the provincial prohibitions on public tobacco use	In alignment with the provincial prohibitions on public tobacco use	Smoking and vaping ban in all enclosed and unenclosed publicly accessible spaces
<ul style="list-style-type: none"> Prohibition in specific spaces: <ul style="list-style-type: none"> All workplaces (and within a 5m radius) Enclosed spaces where the public can access (and within a 5m radius) Hospitals Schools, child care facility properties Playgrounds, sports or playing fields, skateboards or bicycle parks Zoos Outdoor theatres Pool and splash pads Motor vehicles 	<ul style="list-style-type: none"> Prohibition in specific spaces: <ul style="list-style-type: none"> All workplaces (and within a 20m radius) Enclosed spaces where the public can access (and within a 20m radius) Residential care facilities or hotels, motels, and inns Outdoor grounds of healthcare facilities Restaurants and bar patios (within a radius of 9m of the entrances and exits) Motor vehicles 	<ul style="list-style-type: none"> Prohibition everywhere <u>except</u>: <ul style="list-style-type: none"> Designated zones in parks (with the municipal authorization) Some residential facilities

Considerations regarding public consumption

- Second-hand cannabis smoking
(Cabrera-Freital et al., 2019; Hoffman et al., 2018; Holitzki et al., 2017; Johnson et al., 2021; Posis et al., 2019; Wei et al., 2019)
 - Cannabis smoking releases many carcinogens
 - Second-hand exposure is associated with increased heart rate, a « pleasant » psychoactive effect, psychomotor and working memory impairment, eye and mucous irritation, severe allergic reactions in children and adolescents
- Smoking re-normalization and vaping normalization
 - Mainly concerns, but few studies supporting them
- Penal sanctions to marginalized groups
 - Ethnic minorities in the United States of America
(Golub et al., 2006; Firth et al., 2019; Johnson et al., 2008)

Objectives of the current study

- Provide a comparative analysis of three Canadian provinces' municipal regulations related to cannabis retail sales and public consumption
- Offer insights into the potential effects these regulations have on public health outcomes

Methods

Data collection

- **Summer 2019 – *Alberta Health Services***
 - Elected officials and leaders from all Alberta municipalities were contacted via email
 - Municipalities' websites
- **Summer and Fall 2021 – Project supported by the RRSPQ**
 - Official texts and websites
 - Municipalities of 2,000 or more residents of Ontario and Québec
 - Update for Alberta (municipalities of 10,000 residents or more)
 - Very minor changes in 10 municipalities

Extraction grid

- Inductive coding to identify key categories

**Percentage of
municipalities of
2,000 residents or
more**



Extraction grid

Separation distances

Separation distance
100 m or less
101 to 250 m
251 m or more

Distances between retailers and other places of different nature	
Retail stores of psychoactive substances	<ul style="list-style-type: none">• Other cannabis retail stores• Pharmacies• Liquor and tobacco outlets
Places designated for children and youth	<ul style="list-style-type: none">• Schools• Other educational institutions• Day cares• Youth centers• Playgrounds or splash pads
Places where children and youth are likely to be the main populations	<ul style="list-style-type: none">• Sport facilities• Active use parks• Recreational or leisure facilities (e.g. pools)
Places associated with other vulnerable groups	<ul style="list-style-type: none">• Addiction and mental health facilities• Hospitals• Other health or social care services• Correctional facilities
Places not associated with youth or other vulnerable groups	<ul style="list-style-type: none">• Libraries, community centers, and farmers markets• Parks, rivers and trails• Places of worship for remembrance• Streets, roads, and interchanges• Municipal offices (e.g., police stations)

Extraction grid

Public consumption

Types of prohibition

General prohibition	<ul style="list-style-type: none">• All public spaces, unless indicated otherwise (designated places)
Specific places	<ul style="list-style-type: none">• Selected places where consumption is prohibited• Consumption is allowed in all other non-cited places

Population targeted in specific places

Places where children, youths and vulnerable groups are likely to be the main population

Places where children, youths and vulnerable groups are unlikely to be the main population

Types of consumption

All forms (smoking, vaping, ingesting, etc.)

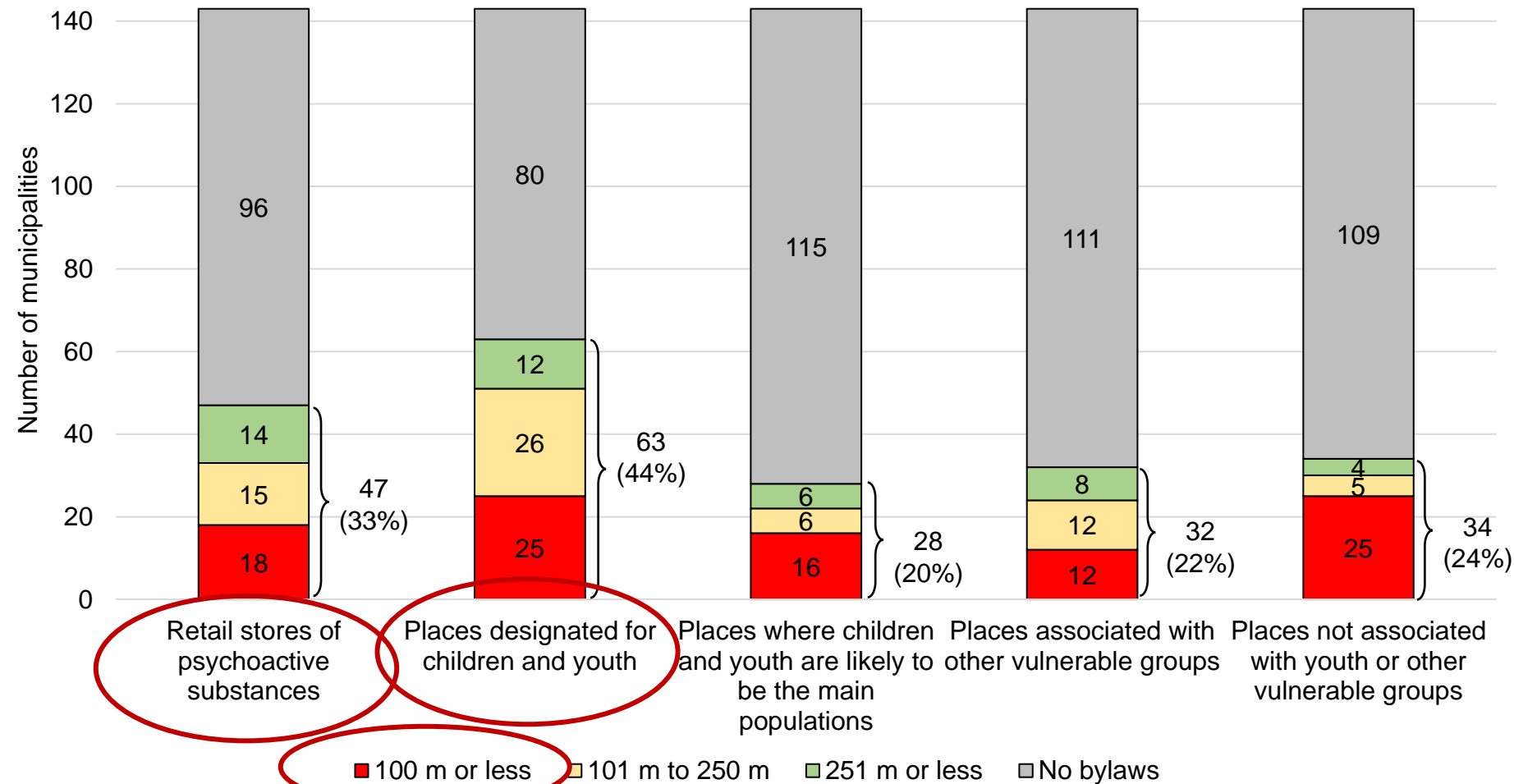
Smoking or vaping

Results

Separation distance

Alberta

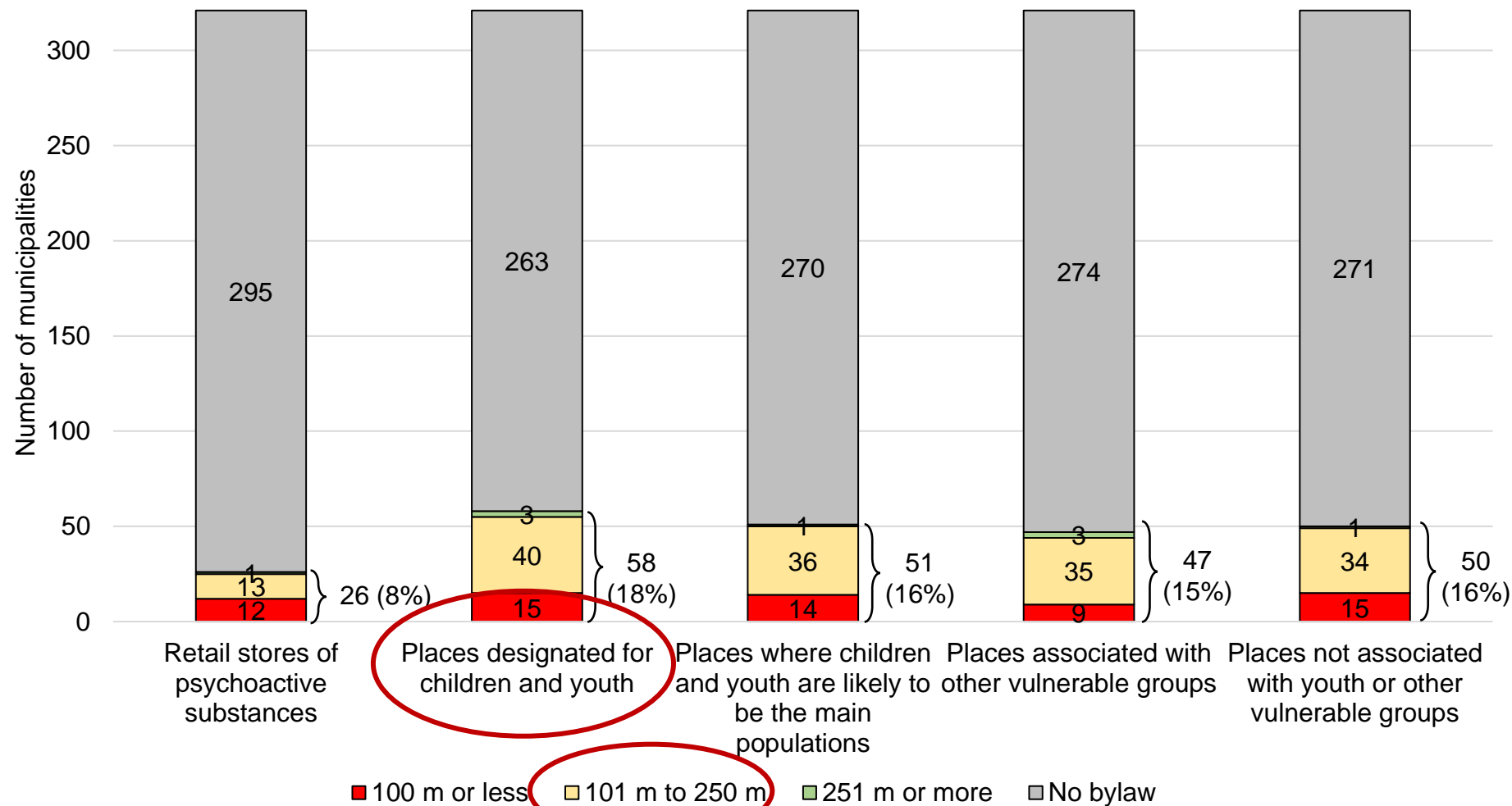
- 143 municipalities of 2,000 residents or more in Alberta
- 49%** (n=70) have enacted bylaws mandating additional minimum separation distances



Separation distance

Ontario

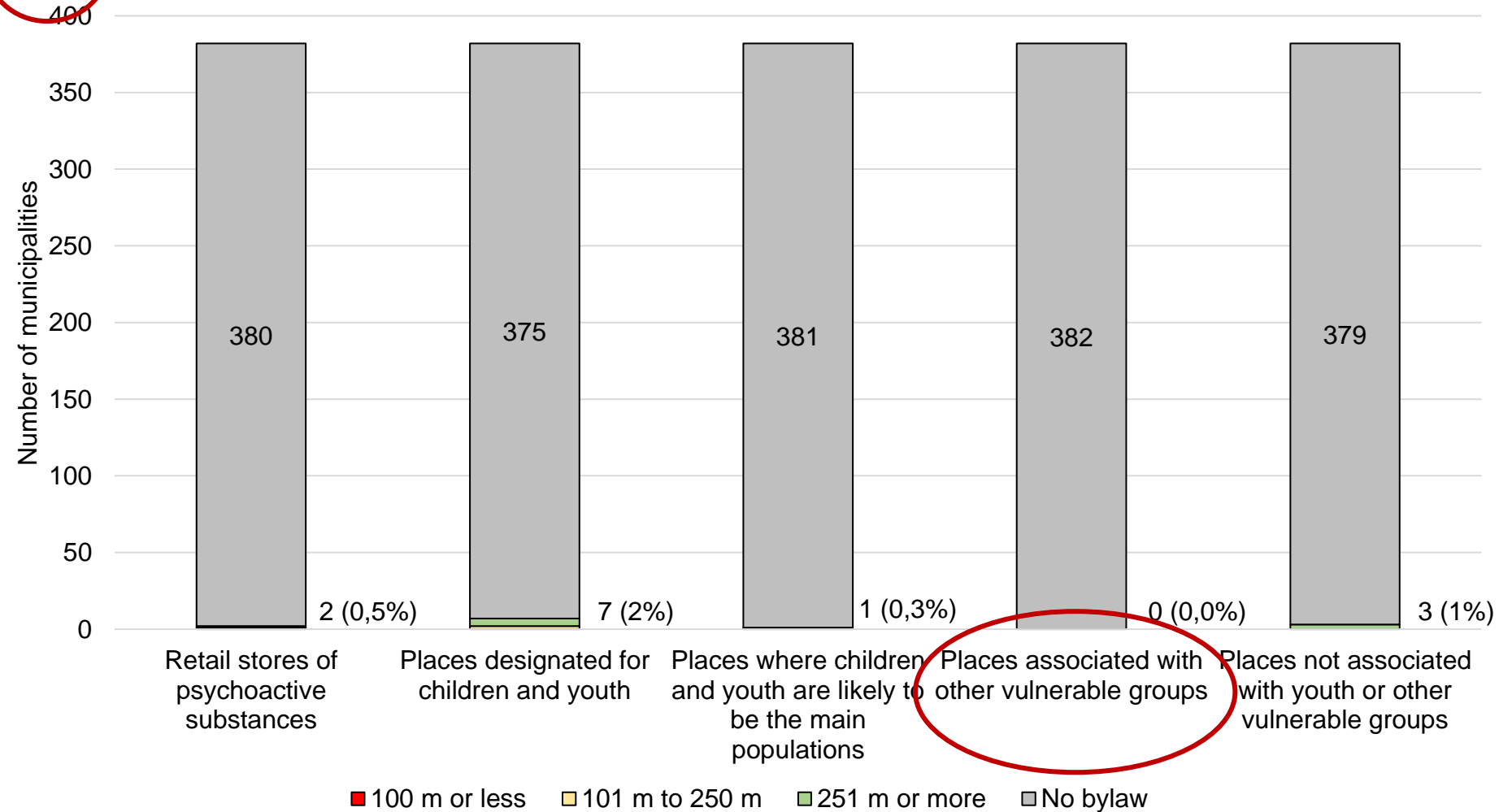
- 321 municipalities of 2,000 residents or more in Ontario.
- **20%** (n=63) have enacted bylaws mandating additional minimum separation distances.



- 382 municipalities of 2,000 residents or more in Ontario.
- **2%** (n=8) have enacted bylaws mandating additional minimum separation distances.

**Separation
distance**

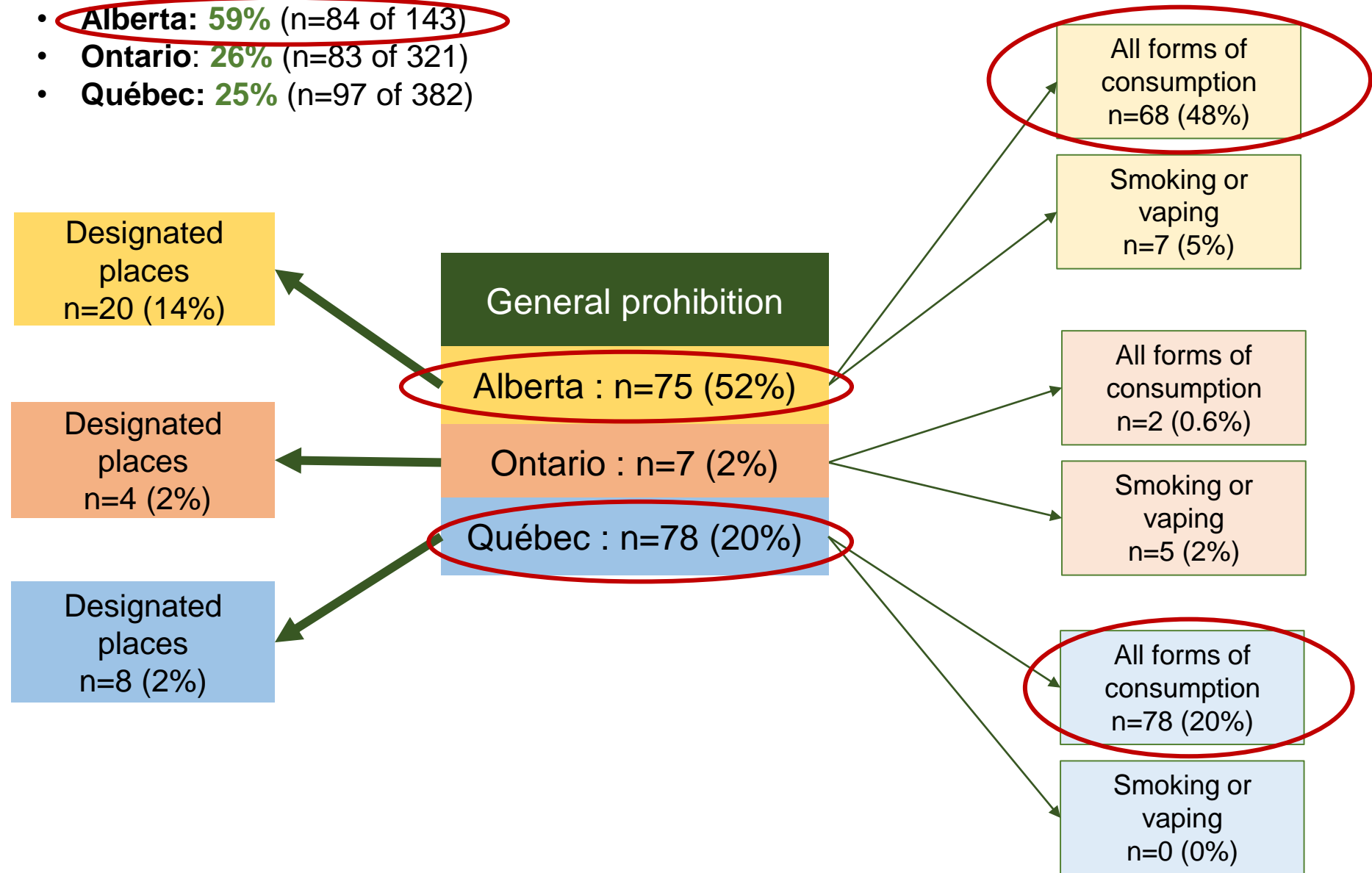
Québec



Proportion of municipalities that have enacted bylaws regarding public consumption

- **Alberta: 59%** (n=84 of 143)
- **Ontario: 26%** (n=83 of 321)
- **Québec: 25%** (n=97 of 382)

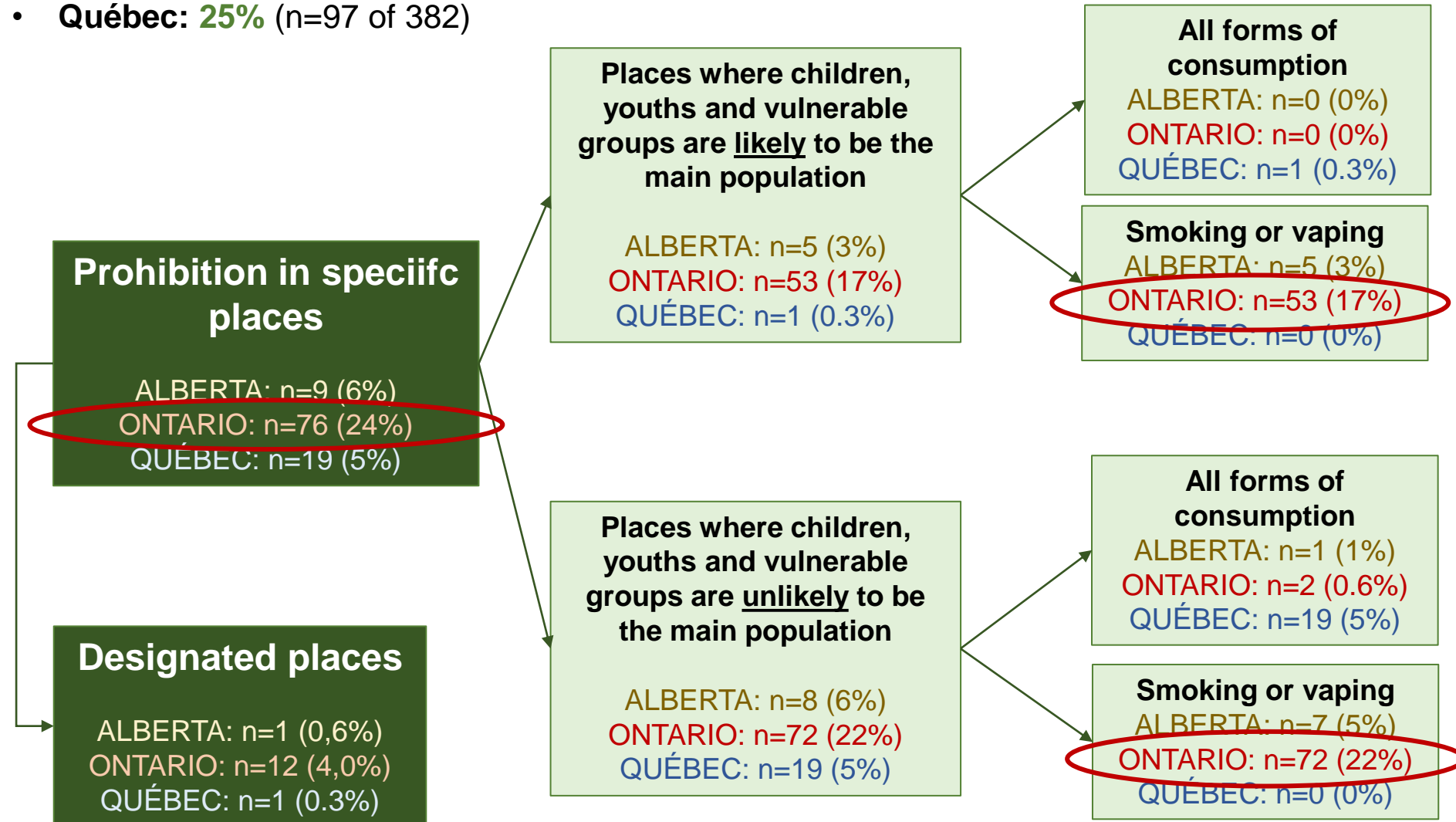
Public consumption



Public consumption

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Discussion

Balance between prohibition and authorization

Excessive liberal or prohibitive frameworks lead to undesirable effects on public health and determinants

Physical accessibility

- Access to legal products with controlled quality
- Profits for cannabis industry (with money going towards prevention and research)

vs.

- Public health protection, especially for youths and vulnerable populations
- Easier access can lead to higher use in the population

Public consumption

- Prevent second-hand cannabis smoke
- Prevent re-normalization of smoking and normalization of vaping

vs.

- Avoid exposing marginalized groups to penal sanctions and increasing stigma
- Avoid risks taken to avoid being caught consuming in public

Limitations

- Municipalities may not have updated their websites
- Only three provinces were covered, but the study includes the two most populous ones
- Differences between neighborhoods within the same city (Toronto, Montréal)
- The results show percentages of municipalities, not the proportion of the province's population being affected
- Official written municipal bylaws vs. law application in real life

Financial support

- Réseau de recherche en santé des populations du Québec (RRSPQ)



Réseau de recherche
en santé des populations
du Québec

Acknowledgements

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The background of the slide features a photograph of a tall, ornate clock tower, likely the Université de Québec clock tower, partially obscured by the large, dark silhouettes of fern fronds in the foreground. The entire image has a monochromatic green tint.

Thank you!