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Cannabis and Public Health Webinar Series
Webinar 2: Developing Bylaws for Land-Use and Business
Licensing

June 6, 2018



RMA
RURAL MUNICIPALITIES
of ALBERTA

Cannabis and Public Health Webinar Series

Webinar 2: Developing Bylaws for Land-Use and
Business Licensing

June 6th, 2018

Outline

- Background: The Alberta Policy Coalition for Chronic Disease Prevention

- Land-Use and Business Licensing
 - **Michelle Fry**, Alberta Health Services
 - **Dr. Jason Cabaj**, Alberta Health Services
 - **Colton Kirshop**, City of Edmonton

- Supporting Municipal Policy Change

- Closing and Questions

The APCCP: Who Are We?

Coordinating efforts, generating evidence and advocating for policy change to reduce chronic disease risk in Alberta



APCCP: Who Are We?

- Funded 2009-2011 by the Alberta Cancer Prevention Legacy Fund
 - Population Health Innovative Intervention - Research Project
- Currently funded by Heart and Stroke for 2018
- Built on the success of tobacco control, but expanded the policy scope to other behavioural risk factors for cancer and other chronic diseases.
- Housed at the University of Alberta, School of Public Health

APCCP Objectives

- Provide leadership in the **development, implementation, and evaluation of policy-related activities** for chronic disease prevention
- **Increase the capacity** of policy makers and decision-makers in Alberta to use policy as a strategy for chronic disease prevention
- Facilitate practitioners, policy-makers, researchers, and community organizations from various sectors **working together to enhance public acceptance** of policy-related activities

2018 Strategic Priority: Smoke-free Alberta Communities

Support the creation of smoke-free communities (including cannabis)



AUMA/RMA
Cannabis & Public Health – Part II

Land-use & Business Licensing

Dr. Jason Cabaj
Ms. Michelle Fry

June 6, 2018



OBJECTIVES

- Legalization overview
- Public health approach
- AHS recommendations

Cannabis Milestones

- **April 2017:** Federal government proposes legislation to legalize cannabis by July 1, 2018
- **June 2017:** Alberta launches two-month public consultation
- **Oct 2017:** Release of draft Alberta Cannabis Framework
Second phase of engagement process
- **Nov 2017:** Introduction of Bill 26, An Act to Control and Regulate Cannabis, 2017
- **Nov 2017:** Bill 26 passes third reading
- **February 2018:** Provincial regulations released
- **Summer 2018:** Intended federal implementation date

Intent of Proposed Federal Cannabis Act

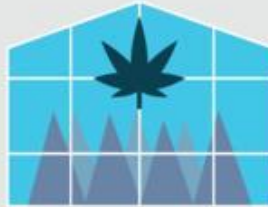
- Restrict youth access
- Protect young people
- Deter and reduce criminal activity
- Strictly regulate
- Protect public health
- Enhance public awareness of health risks
- Provide for legal production of cannabis

(Current program for medical cannabis will continue)

Alberta Cannabis Framework



Minimum age



Safeguards for sales
(AGLC)



Buying cannabis
(Storefront & Online)



Public consumption



Growing cannabis
(indoor & outdoor)



Possessing cannabis



Drug-impaired driving



Impairment in
workplaces



Advertising and
packaging

Legalization

Jurisdictional Responsibilities

Activity	Responsible		
	Federal	Provincial	Municipal
Possession limits **	✓		
Trafficking	✓		
Advertisement & packaging **	✓		
Impaired driving	✓	✓	
Medical cannabis	✓		
Seed-to-sale tracking system	✓		
Production (cultivation and processing)	✓		
Age limit (federal minimum) **	✓		
Public health	✓	✓	
Education	✓	✓	✓
Taxation	✓	✓	✓
Home cultivation (growing plants at home) **	✓		
Workplace safety		✓	
Distribution and wholesaling		✓	
Retail model		✓	
Retail location and rules		✓	✓
Regulatory compliance	✓	✓	
Public consumption		✓	✓
Land use/zoning			✓

** provinces can impose additional regulation

Health Effects

The extent of risks and harms or benefits are unclear but cannabis isn't benign either



Relative Harms to Users & Others of Drugs

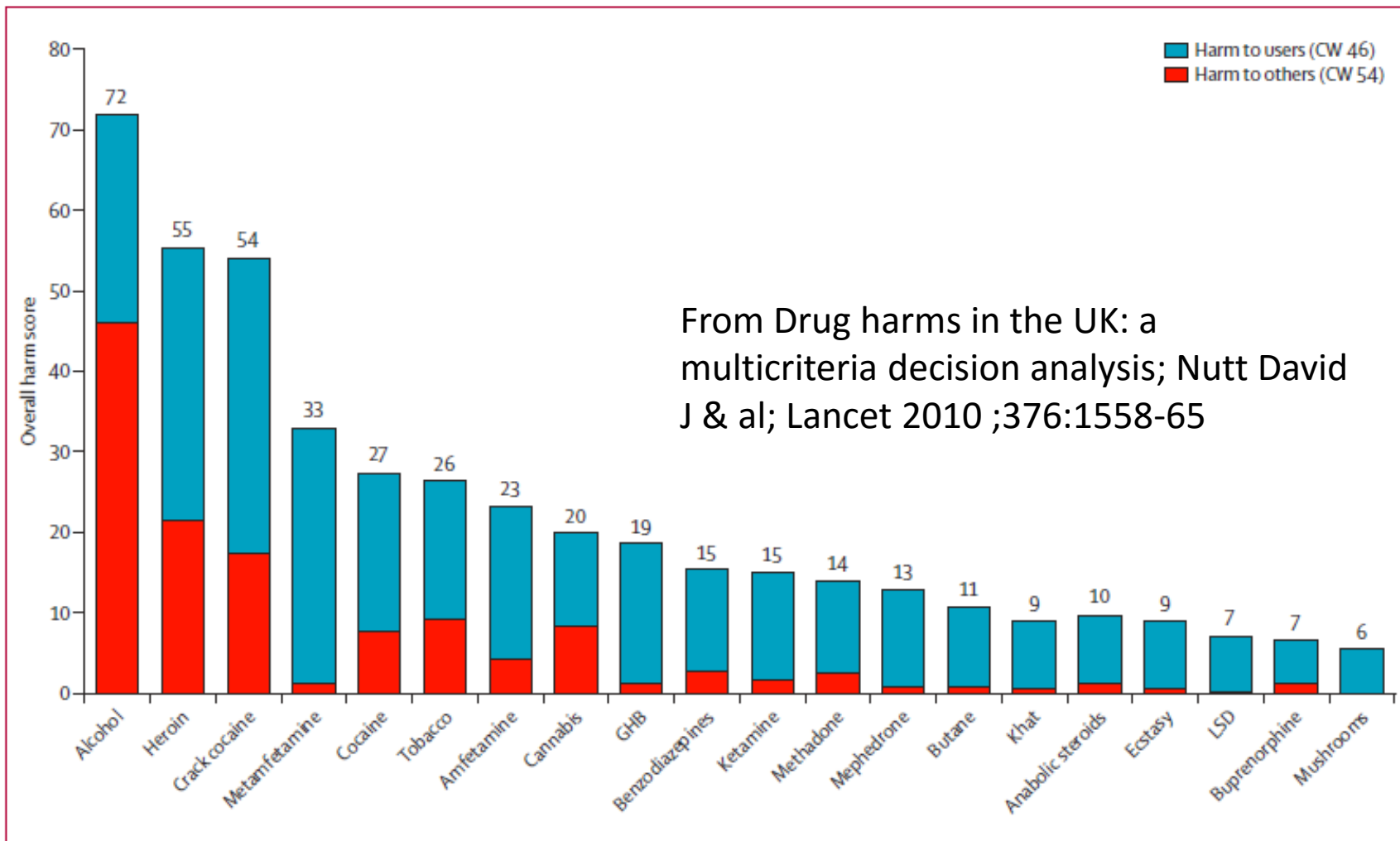


Figure 2: Drugs ordered by their overall harm scores, showing the separate contributions to the overall scores of harms to users and harm to others
 The weights after normalisation (0–100) are shown in the key (cumulative in the sense of the sum of all the normalised weights for all the criteria to users, 46; and for all the criteria to others, 54). CW-cumulative weight. GHB- γ hydroxybutyric acid. LSD-lysergic acid diethylamide.

Health Effects



Health Technology Assessment Unit
UNIVERSITY OF CALGARY
O'Brien Institute for Public Health

NO EVIDENCE OF HARM

- Overall health effects: arteritis
- Cancer: lung, head, and neck cancers

INCONCLUSIVE

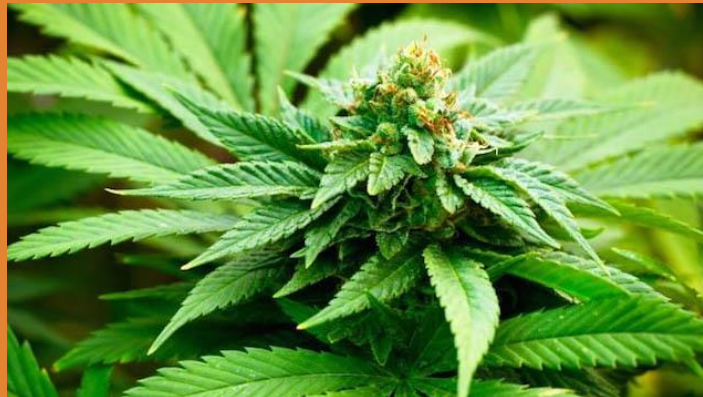
- Overall health effects: all cause mortality, atrial fibrillation, bone loss
- Mental health: psychosis in high-risk individuals, worse psychotic symptoms, suicide, depression, anxiety
- Cancer: bladder, prostate, penile, cervical, childhood cancers
- Brain changes: white matter, blood flow changes

EVIDENCE OF HARM

- Overall: driving, stroke, pulmonary function, cross-interaction with drugs, vision
- Mental health: psychosis, mania, neurological soft signs, relapse, dependency
- Cancer: testicular cancer
- Social effects: impaired driving
- Brain changes: decreased glutamate, changes in dopamine, poorer global functioning
- Neurocognitive changes: reduced memory, decreased efficiency
- Harms associated with use during pregnancy

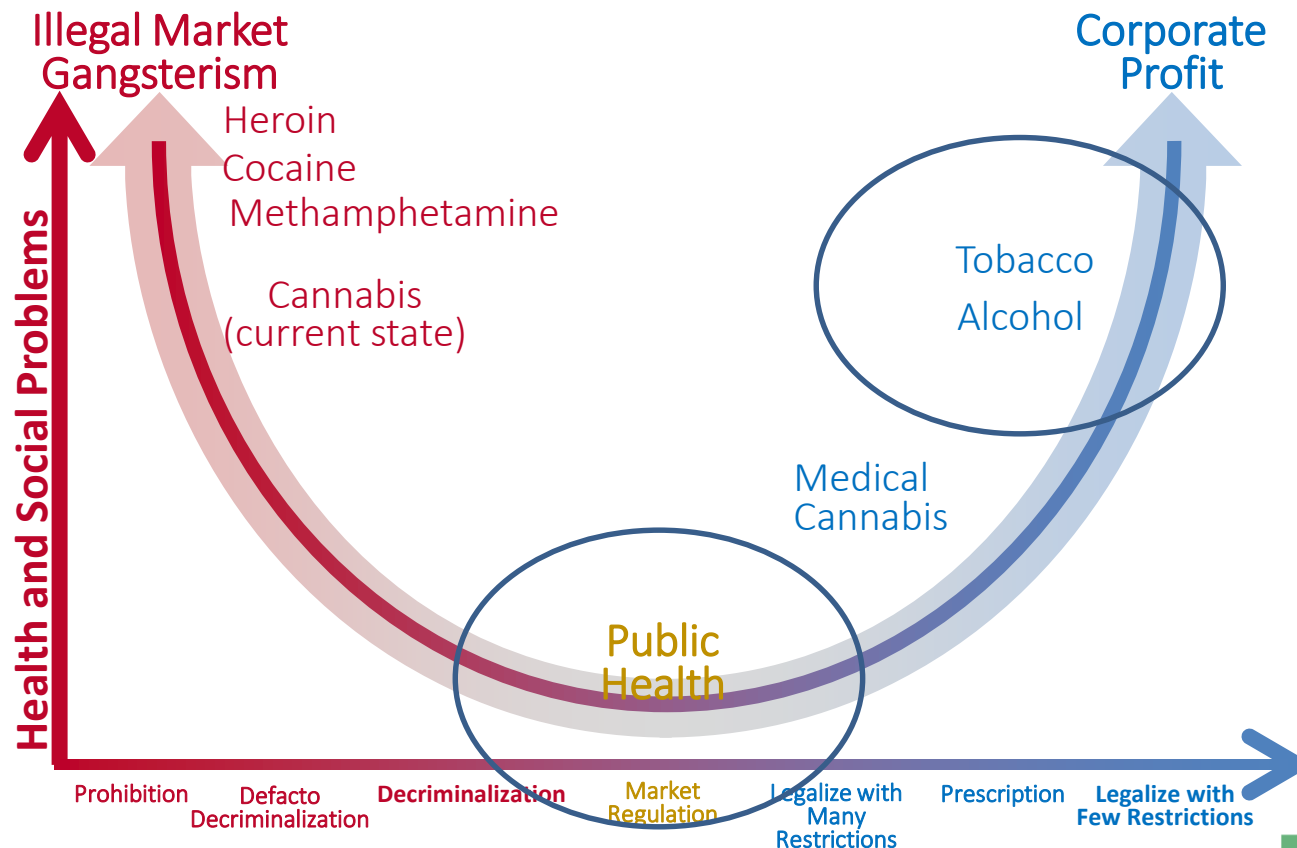
Potency

- Potency today is much greater than in pre-2000
 - Due to growing methods and selective plant breeding
- THC consumption
 - Pre-2000 4.6mg/day
 - Today in WA 260mg/day
 - = 60x increase in daily THC consumption



Public Health Approach

The Paradox of Prohibition



Canadian Drug Policy Coalition, www.drugpolicy.ca, concept from John Marks.



Public Health Priorities

Minimize
harm

Protect
health & safety of
Albertans

Prevent
likelihood of use and
problematic use

Assess
population health
outcomes

Address
determinants of health
& health equity

Provide
services

Support for Municipalities

Municipal information package

- Sent to mayors, council members and senior officials in mid-February
- Assist municipalities in making cannabis policy decisions that promote and protect the health of its citizens
- Evidence-informed public health approach
- Recommendations to help local leaders enact strong regulations that consider the potential health implications and unintended consequences on communities

AHS Recommendations - Land-use & business licensing

Limit number of
stores

Hours of
operation

Community
engagement as
part of licensing

Restrict signage
and advertising

Retail

Key public health considerations:

- Limit the number of cannabis stores, and implement density and distance controls to prevent stores from clustering, while also keeping buffer zones around well-defined areas where children and youth frequent.
- No co-location with alcohol, tobacco and pharmaceuticals.
- Consider requirements for cannabis education and community engagement as part of the business/development licensing approval process.
- Limit hours of operation to limit availability late at night and early morning hours.
- Restrict signage and advertising to minimize visibility to youth and dampen favorable social norms.

“There are more medical
marijuana dispensaries in Denver
than Starbucks and McDonald’s
stores”

The Denver Post



Limit Number of Stores

- Increased availability of medicinal dispensaries impacts current use and increases frequency of use (Morrison et al., 2014)
- Online sales are available
- Lessons learned from alcohol
 - 600% increase in the number of liquor stores since privatization in AB
 - Number & concentration of alcohol outlets likely have a significant effect on excessive consumption and alcohol-related harms
 - Research is clear, that as alcohol availability increases, so does the social and health harms to community.

Retail Cannabis Licensing Objections

AGLC does not regulate

- The number of cannabis stores in a municipality
- The location of stores and space between stores
- Municipal responsibility

Highlights the need for outlet density, and location of stores to be part of the municipal licensing process

Limiting Stores

Limit numbers by:

- Number of permits/business licenses
- Separation distance/density
- Combination of the above.

Separation Distance & Density

- Important harm reduction tool to reduce
 - Access
 - Exposure
 - Normalization
- Research on alcohol and tobacco use highlight the need for stronger controls on density and minimum distance
- Density limits reduce neighborhood impacts and youth access (CCSA,2015)

AHS Recommendations on Separation Distance

300-500m distance
between cannabis
retail outlets

300m between
schools, childcare &
community centres

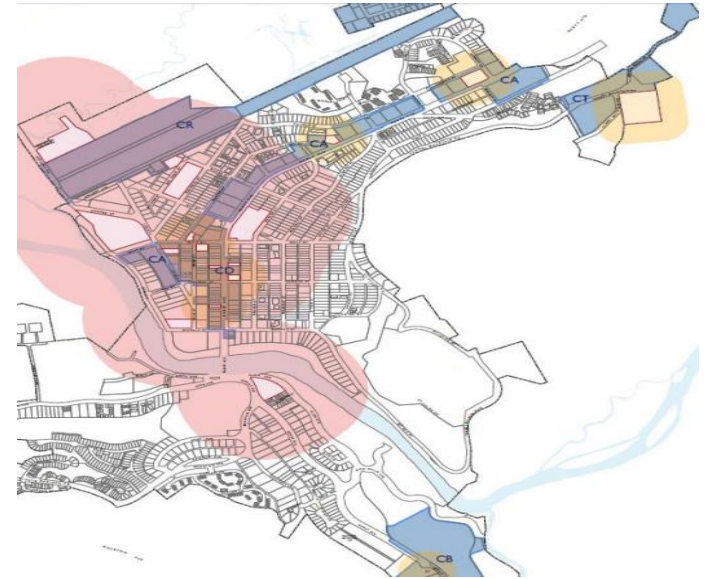
100m distance from
liquor and tobacco
retail

A square kilometer
density restriction
- reduce community
impacts & youth access

Other places: parks, recreation facilities, places of worship

Mapping Your Community

- Map buffer zones
 - Sensitive areas
 - Various distances
- Use to balance
 - Availability
 - Public health protection
 - Public engagement results



Liquor Stores

AHS recommends 100m

- An effective harm reduction policy
 - help discourage co-use
 - simultaneous use of alcohol and cannabis doubles the odds of impaired driving, social consequences and harms to self

Limit Hours of Operation

- to limit availability late at night and early morning hours
- International evidence on alcohol availability shows that longer hours of sale increase the amount of alcohol consumed & rates of alcohol related harms.
- Most US legalized states limit hours to 10pm or mid-night.
- Edmonton administration recommends 11pm
- Red Deer council supports a 10pm close
- Staggered close time can be beneficial from an enforcement perspective

Recommend 10pm close & consult with surrounding communities

Advertising and Signage

- AHS recommends that municipalities include policy/bylaw considerations to limit advertising to dampen favorable social norms toward cannabis use
- While it is important to implement the principles of Crime Prevention through Environmental Design the physical appearance should not encourage or engage patrons.

Required Community Outreach/Engagement

AHS recommendation:

- Community engagement as part of the business licensing approval process

Example:

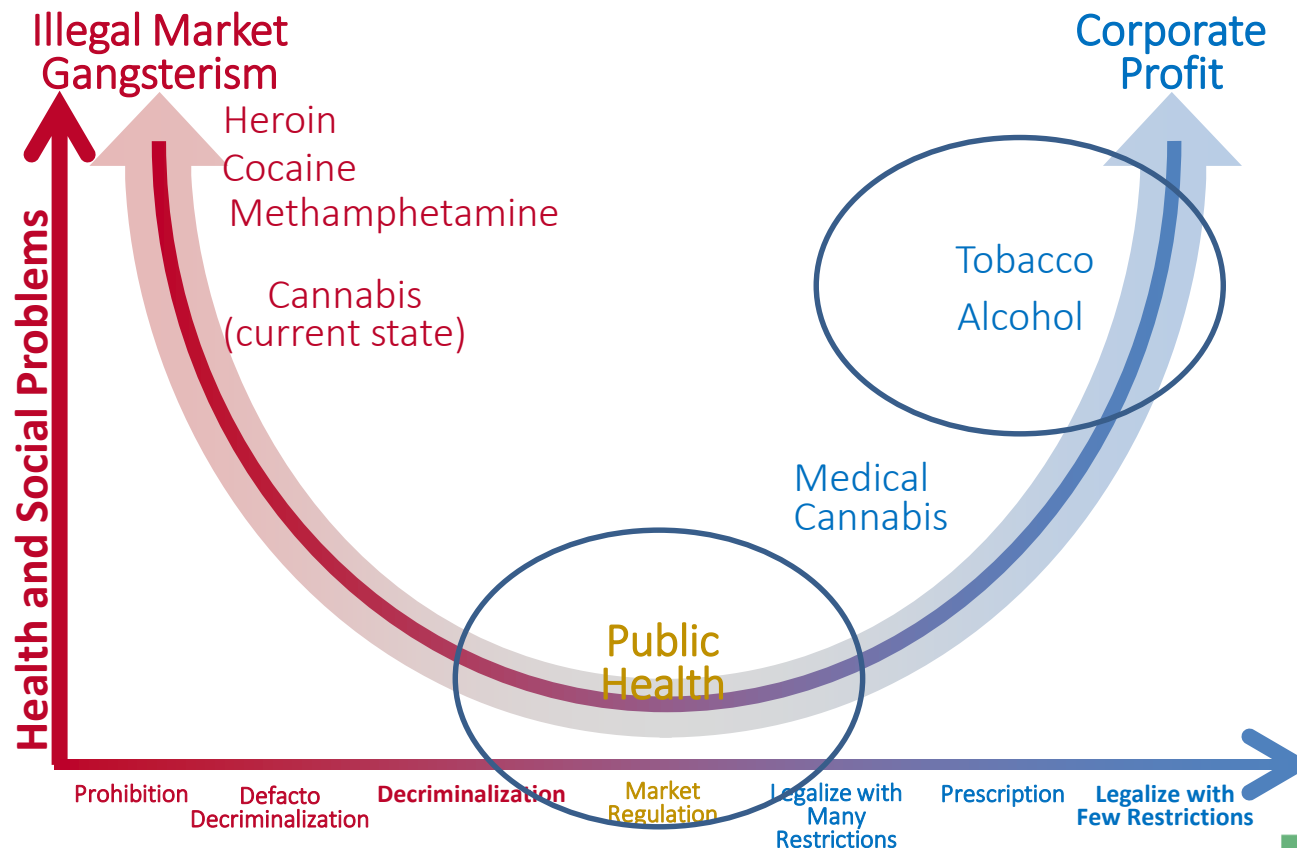
- Good Neighbour Agreements with affected community stakeholders at initiation, prior to application submission
- City of Denver requires applicants to list all registered neighborhood organization whose boundaries encompass store locations and outline their outreach plans to create positive impacts in the neighbourhood.

AHS Recommendations – Summary

- Limit the number of cannabis stores, and implement density and distance controls to prevent stores from clustering, while also keeping buffer zones around well-defined areas where children and youth frequent.
- Consider requirements for cannabis education and community engagement as part of the business licensing approval process.
- Limit hours of operation to limit availability late at night and early morning hours.
- Restrict signage and advertising to minimize visibility to youth.

Public Health Approach

The Paradox of Prohibition



Canadian Drug Policy Coalition, www.drugpolicy.ca, concept from John Marks.



Thank you

Questions?



Cannabis Legalization Amendments to Zoning Bylaw 12800

Cannabis and Public Health Webinar Series
June 6th, 2018



Edmonton



**Public Health
and Safety**



**Balanced
Approach to
Community
Livability**



**Business
Friendly**



**Drug, Alcohol
and Tobacco
Free Youth**

NOV/DEC 2017	<ul style="list-style-type: none">- Online survey 4100+ responses- 4 stakeholder workshops 75+ attended- 5 public information sessions 600+ attended
FEB/MARCH 2018	<ul style="list-style-type: none">- Circulation of land use framework
APRIL 2018	<ul style="list-style-type: none">- 3 Cannabis Stores information sessions
ONGOING	<ul style="list-style-type: none">- Sharing project updates- Responding to inquiries

ZONES	<ul style="list-style-type: none">- Ideal locations are main streets, and commercial areas along major roadways- Do not restrict to industrial/out of the way locations
SEPARATION DISTANCES	<ul style="list-style-type: none">- Most important separation distance is from schools- Some separation between stores is needed to prevent clustering
APPLICATION PROCESS	<ul style="list-style-type: none">- Want an efficient, fair process- Clear communication with applicants desired- Allow opportunity for smaller operators to compete

COMMERCIAL	CSC, CB1, CB2, CHY, CO, CCA, JAMSC, UW, AED	- Key commercial zones throughout Edmonton and downtown
MIXED USE	CB3, CMU, HA	- Found in downtown/main street areas
INDUSTRIAL-BUSINESS	IB	- Transitional zone, contains other commercial uses and in areas with good access

LEGEND - CITY WIDE

 Zoned for cannabis stores
(based on current zoning)

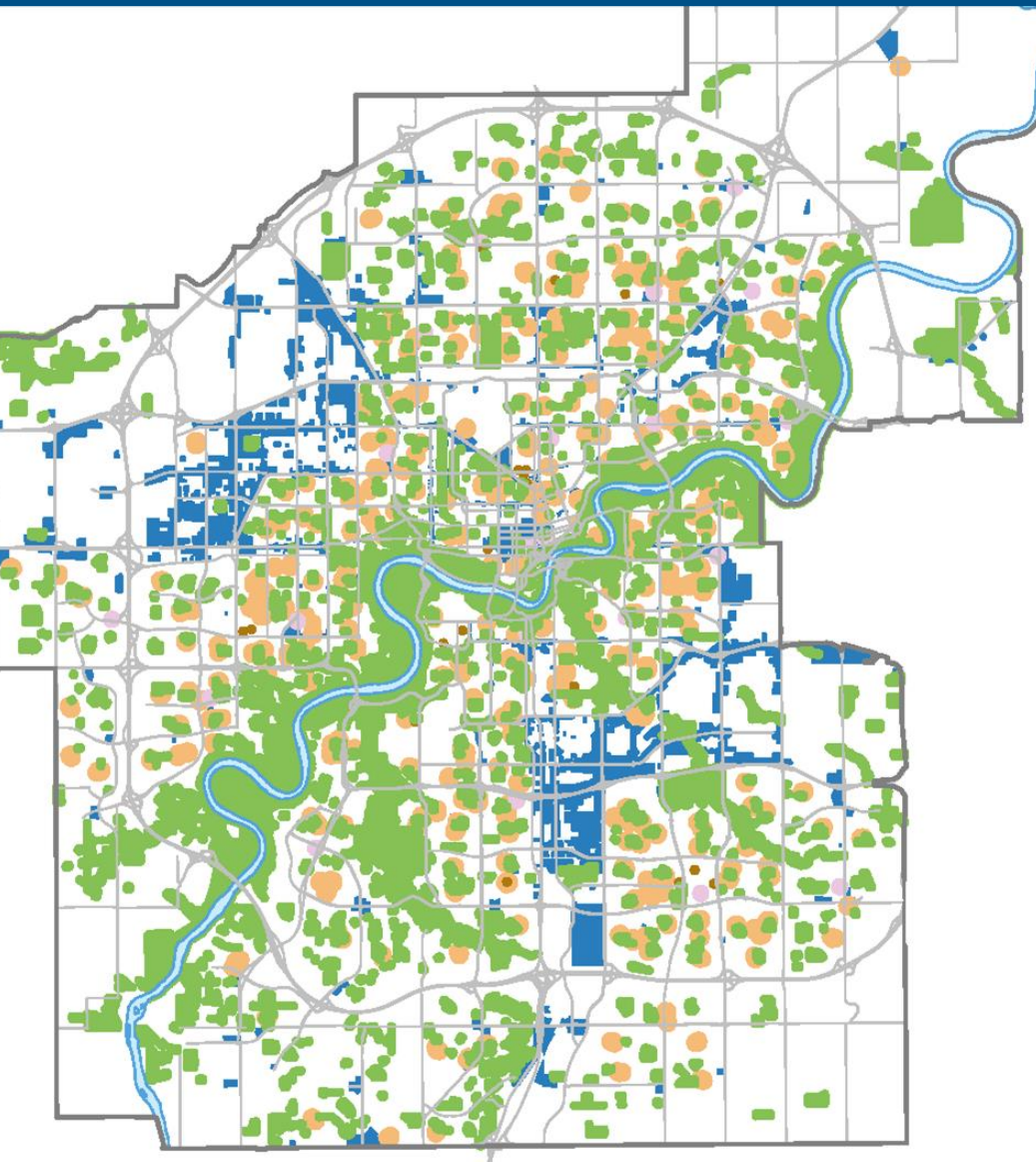
FROM SENSITIVE USES

200 m






- Schools (elementary through high school)
- Public Libraries

100 m

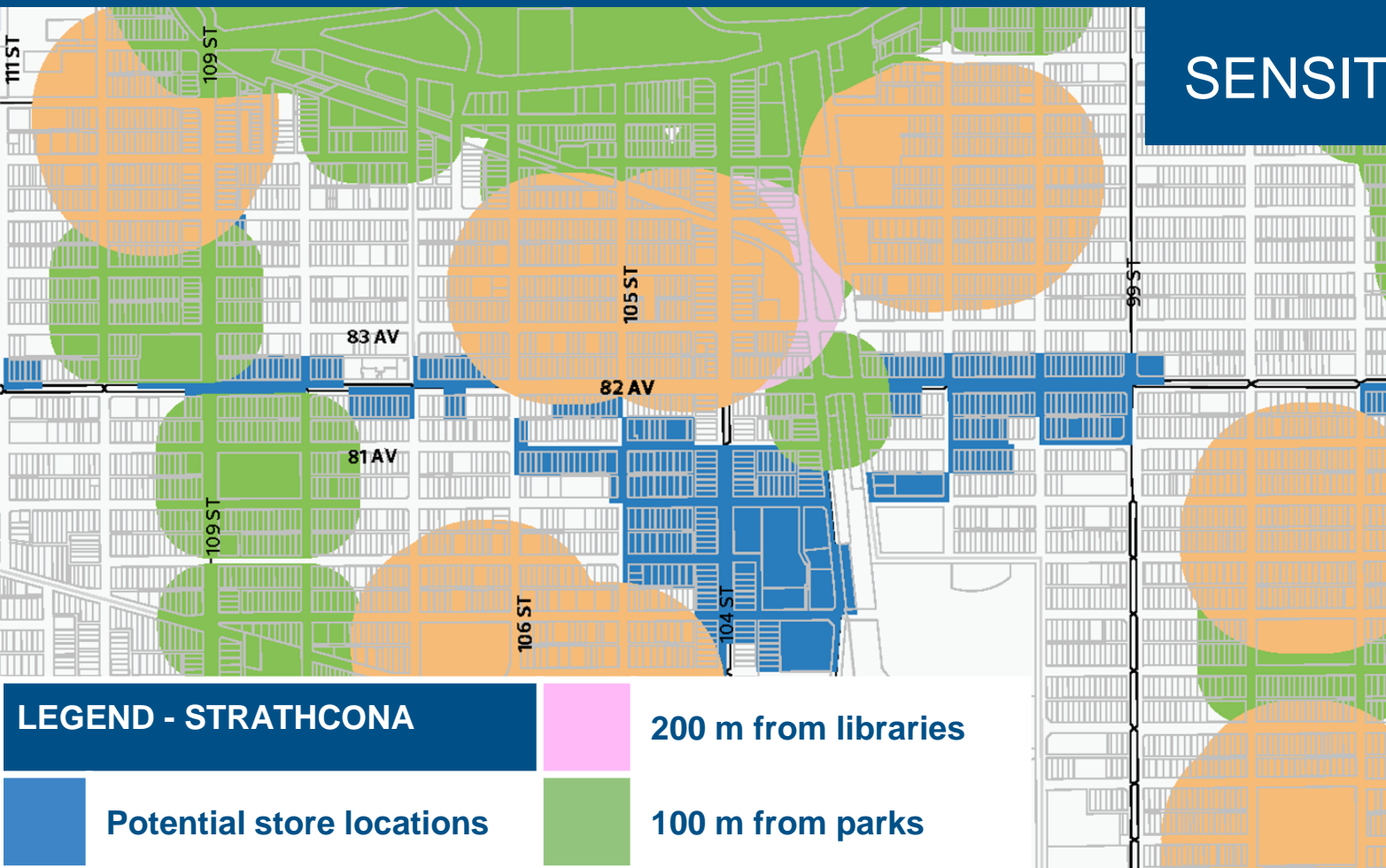
- Public parks
- Public recreation facilities
- Provincial health care facilities



LEGEND - CITY WIDE

-  Zoned for cannabis stores
-  200 m buffer around schools
-  200 m buffer around libraries
-  100 m buffer around parks
-  100 m buffer around AHS

SENSITIVE USES

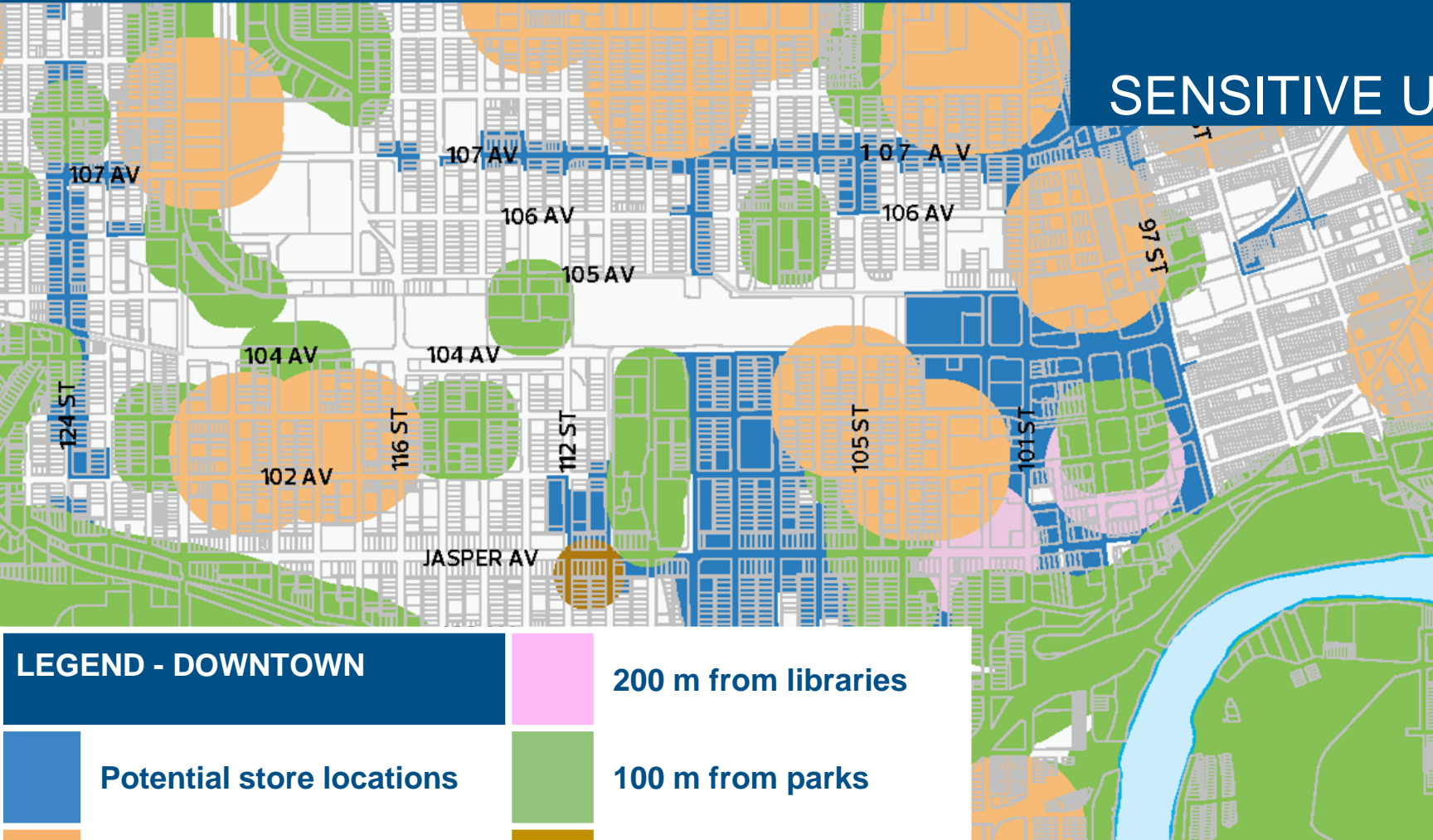


LEGEND - STRATHCONA

- Potential store locations
- 200 m from schools

- 200 m from libraries
- 100 m from parks
- 100 m from AHS

SENSITIVE USES



LEGEND - DOWNTOWN

-  Potential store locations
-  200 m from schools
-  200 m from libraries
-  100 m from parks
-  100 m from AHS




200 m

- Between cannabis stores
- Development Officer can reduce separation distance by up to 20 m

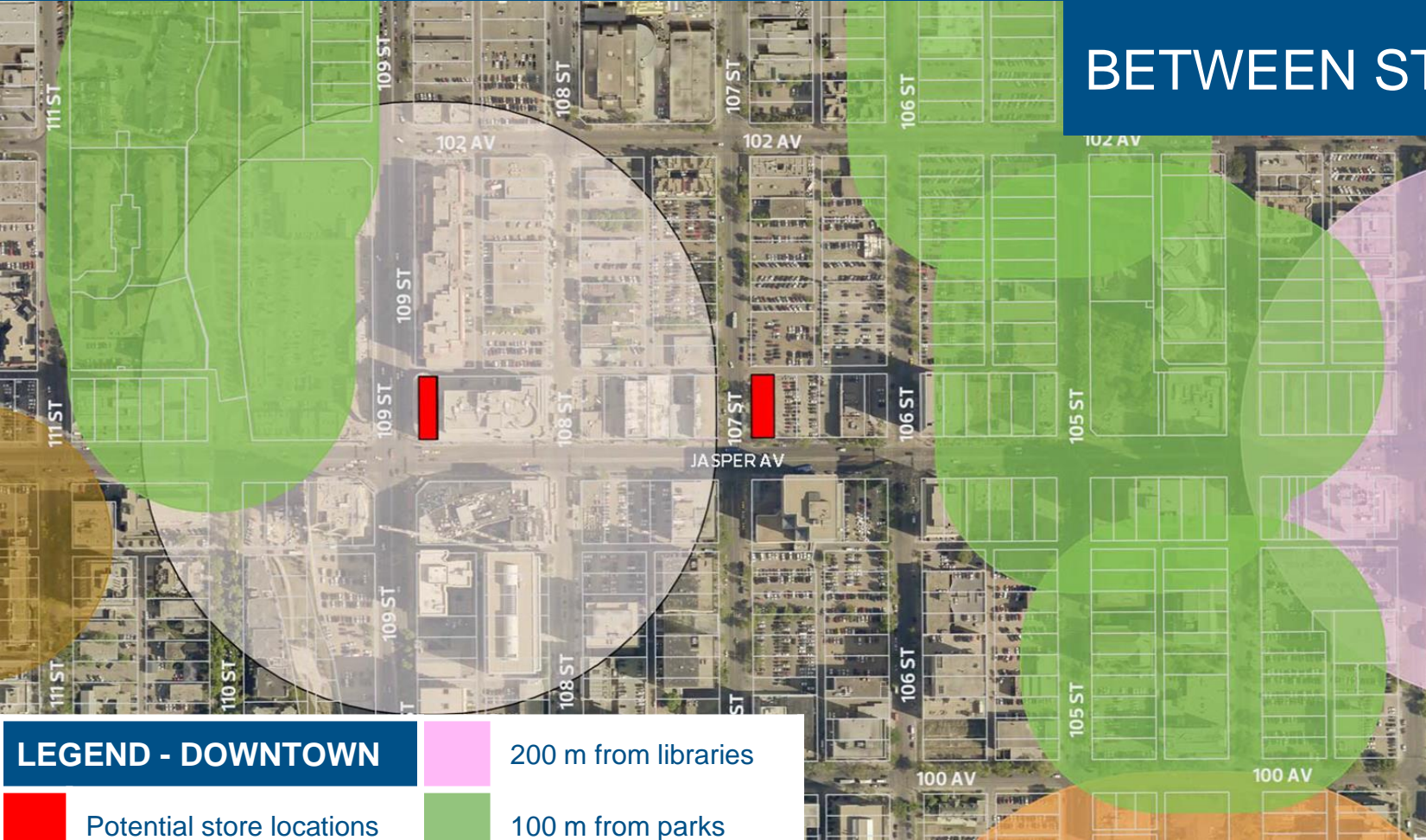
BETWEEN STORES



LEGEND - STRATHCONA

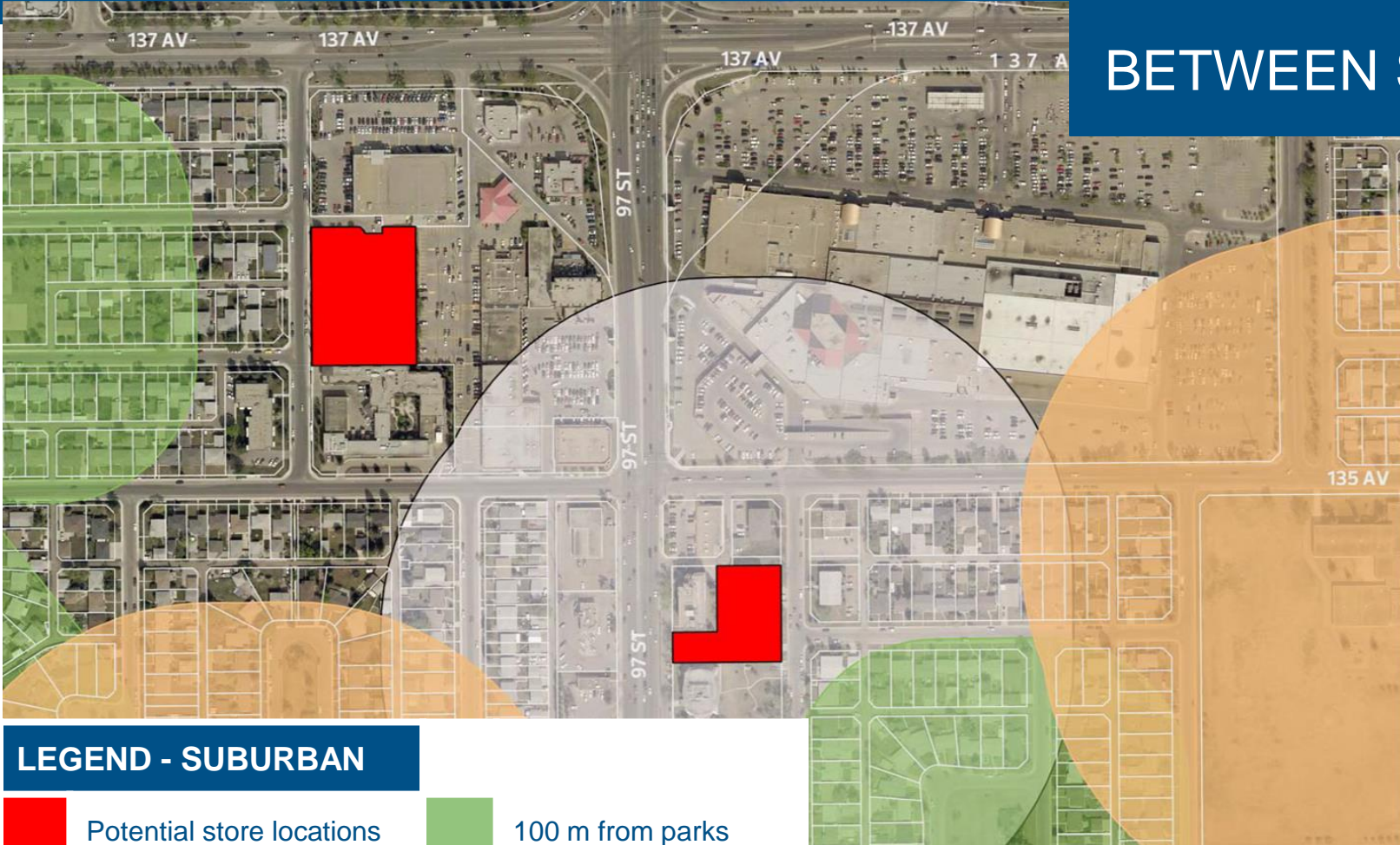
-  Potential store locations
-  100 m from parks
-  200 m from schools

BETWEEN STORES






LEGEND - DOWNTOWN	
	Potential store locations
	200 m from schools
	100 m from parks
	200 m from libraries
	100 m from AHS

BETWEEN STORES



LEGEND - SUBURBAN

-  Potential store locations
-  100 m from parks
-  200 m from schools

SAFE PEDESTRIAN EXPERIENCE	<ul style="list-style-type: none">- No customer access from a lane- Storefront provides transparency- Exterior lighting and low landscaping
DEVELOPMENT PERMIT CONDITIONS	<ul style="list-style-type: none">- Not valid until federal legalization- Expires within nine months of being issued

Timing remains fluid

Applicants submit
**EXPRESSION
OF INTEREST**

3rd Party completes
**RANDOM
SELECTION
PROCESS**

City accepts
applications at
**ASSIGNED
APPOINTMENT
TIMES**

City reviews
applications
and **ISSUES
PERMITS**

**CANNABIS
STORES OPEN**
subject to
fed/prov/City
approval



ZONING BYLAW CHANGES TO ACCOMMODATE CANNABIS RETAIL STORES

Supporting Municipal Policy Change

Tools & Resources



Access a database of tools and resources to help make healthy public policy change easier in your community.



The Policy Readiness Tool

- The Policy Readiness Tool is an evidence-based tool to help foster healthy public policy.
- Intent is to make participating in policy change more accessible to non-experts and experts
- Developed by Dr. Candace Nykiforuk, School of Public Health, University of Alberta, in partnership with the APCCP.



The Policy Readiness Tool

A simple self-administered tool that:

- Helps users assess an organization’s readiness for policy change using a simple, self-administered checklist
- Readiness categories = Innovators, Majority Type, and Late Adopters.

Policy Readiness Questionnaire

<p>(A) The community or organization is comfortable being among the first to try new policies and initiatives</p> <p><input type="radio"/> A</p>	<p>(B) The community or organization usually goes along with other groups' recommendations about trying new policies and initiatives</p> <p><input type="radio"/> B</p>	<p>(C) The community or organization is uncomfortable trying new policies and initiatives</p> <p><input type="radio"/> C</p>
<p>(A) The community or organization enjoys being the first in the province to try something new</p> <p><input type="radio"/> A</p>	<p>(B) The community or organization prefers to try new things after seeing other groups successfully use them</p> <p><input type="radio"/> B</p>	<p>(C) The community or organization prefers to use things it is currently using</p> <p><input type="radio"/> C</p>
<p>(A) The community or organization likes to try things that are seen on TV or read about</p> <p><input type="radio"/> A</p>	<p>(B) The community or organization prefers to try things that are seen on TV or read about only after seeing other groups successfully use them</p> <p><input type="radio"/> B</p>	<p>(C) The community or organization prefers not to try things that are seen on TV or read about until they have been thoroughly tested</p> <p><input type="radio"/> C</p>

The Policy Readiness Tool

Adopter Categories

- **Mostly A: Innovators** are described as “**adventurous**” and often serve as initiators or role models within their social networks.
- **Mostly B: The Majority** are described as “**deliberate**” because they require time to consider the evidence and determine whether to adopt a new policy.
- **Mostly C: Late Adopters** are described as “**traditional**” and may be skeptical of new ideas (without substantial evidence) or eager to maintain the status quo.

The Policy Readiness Tool

3. Provides targeted, evidence-based policy change strategies for taking action at each level of readiness.

Strategies to use with 'Innovators'

Innovators tend to be passionate and forward thinking. When working with Innovators, remember that they take pride in being viewed as leaders. Be mindful of the vision that they have for their community or organization and their desire to leave a legacy for the future. Strategies should appeal to their adventurous side and generate excitement about the actions ahead.

- + Provide Supportive Evidence
- + Frame the Issue to Appeal to the Innovative Spirit of the Community or Organization
- + Build Relationships with Champions from the Community or Organization
- + Generate Decision-Maker Support
- + Raise Public Awareness by Educating Community Members about the Issue

The Policy Readiness Tool

4. Recommends general evidence-based strategies and resources to foster healthy public policy.

General Strategies for Encouraging Policy Change

Below is a list of general strategies for working with communities and organizations (at any level of policy readiness) to encourage healthy policy change.

- + Develop Organizational Knowledge and Support
- + Understand the Social, Political & Economic Context of the Municipality
- + Watch Closely for Open Policy Windows
- + Frame the Issue in a Context that is Meaningful and in Terms of the Immediate and Long-Term Benefits of the Policy
- + Take Advantage of Changes in Leadership
- + Keep your Message Clear and Simple by Using Three to Five Key Messages
- + Show Constituent Support for an Issue and Illustrate Benefits to the Community
- + Build Partnerships with Communities

What Kind of Policies Can Be Used With the Tool?

- Designed to encourage and support healthy public policies in general, for example:
 - Smoke-free public spaces regulations
 - Injury prevention (e.g., helmet bylaws)
 - Nutrition policies (e.g., in schools or recreation facilities)
 - Social planning policies
 - Location/implementation of new green spaces or facilities
 - etc, etc
- Created with municipalities in mind, but can be used with other types of governing bodies (e.g., school boards)

Learn More

Policy Readiness Tool

www.policyreadinesstool.com

The Alberta Policy Coalition for Chronic Disease Prevention

www.apccp.ca

Thank You!

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Questions?



www.auma.ca/events

June 12 to 14	Summer Municipal Leaders' Caucus	Camrose
June 20	ICF and IDP Development Workshop	Leduc
June 21	AMSC Energy Symposium	Edmonton
September 26 to 28	AUMA Convention & AMSC Trade Show	Red Deer

<http://rmaalberta.com/events-programs/>

June 15	Asset Management: The Strategic Basics	Grande Prairie
June 21	ICF and IDP Development Workshop	Hardisty, Flagstaff County
June 27-28	Asset Management for Municipal Staff: The Technical Basics	Sherwood Park