

March 29, 2018

TO: Calgary City Council

**Re: AHS's Recommendations to the Combined meeting of City Council April 5, 2018  
Regarding Proposed Cannabis Business Licensing and Land-use Bylaws**

Following the February 21st, SPC PUD meeting, AHS would like to express concern about the following motions put forward by committee and offer an alternative motion:

SPC PUD recommendation	AHS alternative motion
Allow for a relaxation of the 100 m setback with respect to vacant school reserves and municipal reserve parcels	Implement at 300m set back distance from all schools and vacant school reserves
Remove the 30 m separation distance between the closest point of a Cannabis store to a liquor store	Implement a 100m minimum distance from tobacco and liquor retailers, in addition to a square kilometer density restriction, at the onset of legalization
Remove the 150m separation distance from a post-secondary institution	Reinstate Administrations initial recommendation of a 150m separation distance
Remove 10m separation distance from a Pawn Shop and Payday loan store	Reinstate Administration's initial recommendation of a separation distance

Additionally, AHS is concerned that the committee also failed to increase the separation distance from a child care service, which highlights disparity in policy protecting school aged children differently than children under 5, and those in before and after school care. AHS recommends a 300m distance from a childcare service. Further, where evidence is incomplete or inconclusive, AHS is advising that a precautionary approach be taken to minimize unintended consequences.

As follow up to the AHS Recommendations on Cannabis Regulation for Alberta Municipalities, circulated by Dr. David Strong, lead Medical Officer of Health (MOH) for Calgary Zone with Alberta Health Services, AHS would like to further address the issues of business licensing and land-use bylaws as they pertain to Cannabis.

Business licensing and land-use by-laws have the potential to impact community and its citizens in a number of ways. Where cannabis businesses are located, how many are located in Calgary and how they are distributed throughout communities, have the potential to create a number of health concerns such as: increase youth access, and increase normalization by way of increased visibility. Without strict regulation as identified in the intent behind Federal legalization, implementation of the 84 federal recommendations becomes difficult. In order to minimize the harms of use, and restrict youth access, AHS recommends the following:

- Limit the number of cannabis stores in the first phases of implementation
  - Lessons learned about alcohol, which has seen a 600% increase in the number of liquor stores since privatization, provides significant rationale for limiting the number of stores in a given community.
  - The number and concentration of alcohol outlets are likely to have a significant effect on excessive consumption and alcohol-related harms.
  - Washington State has seen consumption of THC increase 60 times by a daily cannabis user, from 4.6mg/day pre-2000, to 260mg/day post-legalization.
- Implement density and distance controls to prevent stores from clustering, while also keeping buffer zones around well-defined areas where children and youth frequent.
  - Density limits reduce neighborhood impacts and youth access
  - Physical availability of medicinal marijuana dispensaries impacts current use and increase frequency of use
  - Research done on alcohol and tobacco use highlights the need for stronger controls on density and minimum distances.
- Limit hours of operation to limit availability late at night and early morning hours.
  - Basing hours of operation on the alcohol model, repeats policy that has resulted in harms to communities and harms to Albertans.
  - International evidence on availability of alcohol indicates that longer hours of sale significantly increases the amount of alcohol consumed and the rates of alcohol related harms.
  - Most US legalized states limit hours of operation to 10pm or midnight.
- Implement a 300-500m minimum distance restriction between cannabis retail outlets
- Implement a 300m distance between cannabis stores and schools, daycares and community centers.
  - The average separation distance for schools reported in a study that listed 12 US cities was approximately 250m.
  - Shorter distances/higher density are associated with high-risk consumption behaviours – especially among youth, and facilitate greater access and possession by adolescents.
  - Concerns around product promotion and exposing youth to cannabis are well documented.
- Implement a 100m minimum distance from tobacco and liquor retailers, in addition to a square kilometer density restriction, at the onset of legalization.
  - This is an effective harm-reduction policy that will help discourage co-use.
    - Simultaneous use of alcohol and cannabis has been found to roughly double the odds of impaired driving, social consequences, and harms to self.

29 March 2018  
Page 3 of 3

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- This approach also helps to prevent clustering among liquor, tobacco and cannabis stores, with the purpose of having a positive impact on communities with few resources and vulnerable populations.
- Include community engagement and approvals as part of the business licensing process, similar the approach used in Denver Colorado.
- Commit to reviewing and evaluating all Cannabis related bylaws and policy decisions over a short and long term period to ensure no unintended harms or consequences go unaddressed.

Finally, these precautionary approaches are consistent with the recommendations of Federal Taskforce on the Legalization and Regulation of Cannabis (Government of Canada, 2016). They apply the wisdom and lessons learned from alcohol and tobacco policy, which is, applying more protective regulations to reduce harms, is never as easy or as popular as relaxing more restrictive policy in the first place.

Sincerely,



Brent T Friesen MD FRCPC  
Lead Medical Officer of Health, Provincial Tobacco Reduction Program  
Population, Public, & Indigenous Health  
Alberta Health Services

Attached:

1. AHS Recommendations on Cannabis Regulations for Alberta Municipalities
2. AHS Recommendations on City of Calgary Cannabis Regulations
3. Public Health Perspectives on Cannabis Legalization in Alberta
4. A Public Health Approach to Cannabis Legalization
5. Cannabis Regulation: Lessons Learned in Colorado and Washington State, by CCSA, November 2015

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- Nemeth, J. & Ross, E. (2014). Planning for marijuana: The cannabis conundrum. *Journal of the American Planning Association*, 80(1), 6-20.
  - U.S Surgeon General. (2018). *Preventing tobacco use among youth and young adults*. Retrieved from <https://www.surgeongeneral.gov/library/reports/preventing-youth-tobacco-use/factsheet.html>
  - Health Canada. (2016).
  - *A framework for the legalization and regulation of cannabis in Canada: The final report of the task force on cannabis legalization and regulation*. Ottawa, ON: Government of Canada.
  - Alberta Health Services. (2017). *Neighbourhood deprivation, alcohol consumption and health and social outcomes: A review of recent literature*. Calgary: Alberta Health Services
  - Caulkins, J, Kilmer, B., & Kleiman, M. (2016). *Marijuana legalization: what everyone needs to know. Second Ed.* New York, NY: Oxford University Press.