

March 15, 2023

The Honorable William C. Smith Chair, Judicial Proceedings Committee 2 East, Miller Senate Office Building Annapolis, Maryland 21401

RE: Senate Bill 653 – Child in Need of Assistance – Neglect – Cannabis Use – Letter of Support

Dear Chairman Smith and Committee Members:

The Maryland Medical Cannabis Commission (the Commission) is submitting this letter of support for Senate Bill 653 – Child in Need of Assistance – Neglect – Cannabis Use.

Senate Bill (SB) 653 would prohibit cannabis use by a parent or guardian from impacting child custody or visitation rights unless as a result of the use of cannabis: 1) the child's health or welfare is harmed or placed at substantial risk of harm; or 2) the child has suffered mental injury or been placed at a substantial risk of mental injury. The bill's legal protections would extend to both medical cannabis patients and those who use cannabis for personal adult use.

Currently, there is no uniformity and consistency in how courts consider cannabis use in child custody and visitation cases. Absent clear statutory direction it is left up to the substantial discretion of the judge. Depending on the Court and judge, a parent or guardian may lose custody or visitation for cannabis use. Although Maryland law is not explicit with respect to how cannabis use may impact child custody and visitation, State statute offers broad protection for medical cannabis patients by stating that a medical cannabis patient "may not be subject to arrest, prosecution…or any civil or administrative penalty…or may not be denied any right or privilege" for the use of medical cannabis. This broad protection could reasonably be interpreted to apply to child custody and visitation rights. *(See* Health-General Article \$13-3313(a))

There is no evidence that cannabis use itself impacts an individual's ability to care for

children. Yet unlike alcohol, tobacco, and prescribed controlled dangerous substance use – which carry significant risks and harms - the use of cannabis carries a lingering heightened stigma grounded in racial prejudice as the result of the misguided War on Drugs. Child custody and visitation rights are just one of a myriad of areas in which cannabis users have faced undue prejudice and damage. Similar discrimination against those who use cannabis exists in employment, housing, education, and other major life areas. There are approximately 160,000 medical cannabis patients in Maryland and personal adult-use cannabis legalization was approved by the voters under Question 4 this past November. MMCC - Letter of Support - SB0653

Given the increased prevalence and acceptance of both medical and adult-use cannabis, courts should be expressly prohibited from considering cannabis use alone as a factor for determining parental fitness.

At least fifteen states already provide the similar child custody and visitation protections as those afforded under SB 653 for individuals participating in the medical program, or for cannabis-use more broadly. (See – Attachment – Legal Protections for Cannabis Users in Child Custody and Visitation) The Commission believes that social justice in cannabis reform should extend to the family courts by guaranteeing legal protections in child custody and visitation cases to individuals who lawfully use cannabis.

I hope you and the committee find this information useful. If you would like to discuss this further please contact Andrew Garrison, MPA, Deputy Director, Office of Policy and Government Affairs at <u>andrew.garrison@maryland.gov</u> or (443) 844-6114.

Sincerely,

William Till

Will Tilburg, JD, MPH Executive Director Maryland Medical Cannabis Commission

This position does not necessarily reflect the position of the Maryland Department of Health or the Office of the Governor.

Attachment

Legal Protections for Cannabis Users in Child Custody and Visitation

State	Legal Protections
Arizona	No person may be denied custody of or visitation or parenting time with a minor, and there is no presumption of neglect or child endangerment for conduct allowed under this chapter, unless the person's behavior creates an unreasonable danger to the safety of the minor as established by clear and convincing evidence. <i>See</i> ARS §36-2813
Arkansas	A person otherwise entitled to custody of, or visitation or parenting time with, a minor shall not be denied custody, visitation, or parenting time solely for conduct allowed under this amendment, nor shall there be: (1) A finding of abuse solely for conduct allowed under this amendment; or (2) A presumption of neglect or child endangerment for conduct allowed under this amendment. <i>See</i> Arkansas Constitution of 1874 Amendment 98, § 3. Protections for the medical use of <u>marijuana</u>
California	Medical Marijuana Program. The status and conduct of a qualified patient who acts in accordance with the Compassionate Use Act shall not, by itself, be used to restrict or abridge custodial or parental rights to minor children in any action or proceeding under the jurisdiction of family or juvenile court. See CA HLTH & S § 11362.84
Delaware	A person otherwise entitled to custody of or visitation or parenting time with a minor shall not be denied such a right, and there shall be no presumption of neglect or child endangerment, for conduct allowed under this chapter, unless the person's actions in relation to marijuana were such that they created an unreasonable danger to the safety of the minor as established by clear and convincing evidence. <i>See</i> 16 Del. Code § 4905A
Hawaii	No qualifying patient or primary caregiver under this part shall be denied custody of, visitation with, or parenting time with a minor, and there shall be no presumption of neglect or child endangerment, for conduct allowed under this part; provided that this subsection shall not apply if the qualifying patient's or primary caregiver's conduct created a danger to the safety of the minor, as established by a preponderance of the evidence. <i>See</i> Title 19 Health §329-125.5(c)

Illinois	Patients' authorized use of marijuana cannot disqualify a person from receiving organ transplants or other medical care and will not result in the denial of custody or parenting time unless the patient's actions created an unreasonable danger to the minor's safety. Discrimination prohibited. Neither the presence of cannabinoid components or metabolites in a person's bodily fluids nor possession of cannabis-related paraphernalia, nor conduct related to the use of cannabis or the participation in cannabis-related activities lawful under this Act by a custodial or noncustodial parent, grandparent, legal guardian, foster parent, or other person charged with the well-being of a child, shall form the sole or primary basis or supporting basis for any action or proceeding by a child welfare agency or in a family or juvenile court, any adverse finding, adverse evidence, or restriction of any right or privilege in a proceeding
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	related to adoption of a child, acting as a foster parent of a child, or a person's fitness to adopt a child or act as a foster parent of a child, or serve as the basis of any adverse finding, adverse evidence, or restriction of any right of privilege in a proceeding related to guardianship, conservatorship, trusteeship, the execution of a will, or the management of an estate, unless the person's actions in relation to cannabis created an unreasonable danger to the safety of the minor or otherwise show the person to not be competent as established by clear and convincing evidence. This subsection applies only to conduct protected under this Act. <i>See</i> PUBLIC HEALTH – Cannabis Regulation and Tax Act, 410 ILCS 705 and 10-30.
Maine	Title 22: HEALTH AND WELFARE Subtitle 2: HEALTH Part 5: FOODS AND DRUGS Chapter 558-C: MAINE MEDICAL USE OF MARIJUANAACT 4. Person may not be denied parental rights and responsibilities or contact with a minor child. A person may not be denied parental rights and responsibilities with respect to or contact with a minor child as a result of acting in accordance with this chapter, unless the person's conduct is contrary to the best interests of the minor child as set out in Title 19-A, Section 1653, Subsection 3. Title 19-A: DOMESTIC RELATIONS, Part 3: PARENTS AND CHILDREN, Chapter 55: RIGHTS AND RESPONSIBILITIES [§] 1653-A Parental rights and responsibilities. Individuals whose conduct is authorized by the law "may not be denied any right or privilege or be subjected to arrest, prosecution, penalty or disciplinary action." Unless the person's behavior is contrary to the best interests of the child, "a person may not be denied parental rights and responsibilities with respect to or contact with a minor child."

Massachusetts	Absent clear, convincing and articulable evidence that the person's actions related to marijuana have created an unreasonable danger to the safety of a minor child, neither the presence of cannabinoid components or metabolites in a person's bodily fluids nor conduct permitted under this chapter related to the possession, consumption, transfer, cultivation, manufacture or sale of marijuana, marijuana products or marijuana accessories by a person charged with the well-being of a child shall form the sole or primary basis for substantiation, service plans, removal or termination or for denial of custody, visitation or any other parental right or responsibility. <i>See</i> MA ST 94G §7(d)
Michigan	A person shall not be denied custody or visitation of a minor for acting in accordance with this act, unless the person's behavior is such that it creates an unreasonable danger to the minor that can be clearly articulated and substantiated. <i>See</i> MI ST § 33.2642(d)
Minnesota	A person shall not be denied custody of a minor child or visitation rights or parenting time with a minor child solely based on the person's status as a patient enrolled in the registry program under sections 152.22 to 152.37. There shall be no presumption of neglect or child endangerment for conduct allowed under sections 152.22 to 152.37, unless the person's behavior is such that it creates an unreasonable danger to the safety of the minor as established by clear and convincing evidence. <i>See</i> MI ST § 152.32 Subd.
New Hampshire	NH Rev. Stat. § 126-X:2 (2019). Therapeutic Use of Cannabis Protections. –

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	VI. A person otherwise entitled to custody of, or visitation or parenting time with, a minor shall not be denied such a right solely for conduct allowed under this chapter, and there shall be no presumption of neglect or child endangerment.
New Jersey	Cannabis use was addressed in an Appellate Division case concerning parental rights termination. In New Jersey Division of Child Protection and Permanency v. D.H., a trial court upheld the removal of child from their parents based on substance use issues as well as the mother's mental health issues. The Appellate Division held that a parent's status as a recreational marijuana user cannot suffice as the sole primary reason to terminate a parent's rights unless the Division can prove with case-specific evidence, that the marijuana usage endangers the child or children. <i>See New Jersey Division of Child Protection and Permanency v. D.H.</i> , 469 N.J. Super. 107, 262 A.3 rd 427 (A.D. 2021)

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New Mexico	Participation in the medical cannabis program is not, in itself, grounds for "intervention, removal or placement into state custody" of a child. A person "shall not be denied custody of or visitation or parenting time with a child, and there is no presumption of neglect or child endangerment" for conduct allowed under the medical marijuana law. <i>See</i> NM ST § 32A-3A-15
Pennsylvania	The fact that an individual is certified to use medical marijuana and acting in accordance with this act shall not by itself be considered by a court in a custody proceeding. In determining the best interest of a child with respect to custody, the provisions of 23 Pa.C.S. Ch. 53 (relating to child custody) shall apply. <i>See</i> 35 PA ST § 10231.2103
Washington	A qualifying patient or designated provider may not have his or her parental rights or residential time with a child restricted solely due to his or her medical use of cannabis in compliance with the terms of this chapter absent written findings supported by evidence that such use has resulted in a long-term impairment that interferes with the performance of parenting functions as defined under RCW 26.09.004. <i>See</i> WA ST 69.51A.120