

SB537_Chart_DispensariesByCounty.pdf

Uploaded by: Brian Feldman

Position: FAV

Senate Bill 537 – Cannabis – Licensee Locations – Restrictions
 Finance Committee – February 22, 2024

Current and Proposed Dispensaries by Jurisdiction

Source: Maryland Cannabis Administration

County	Senators	Current	Proposed	Total
Allegany		2	1	3
Anne Arundel	Beidle, Gile	9	5	14
Baltimore	Klausmeier	18	6	24
Baltimore City	Hayes	9	11	20
Calvert		0	3	3
Caroline	Hershey, Mautz	0	1	1
Carroll	Ready	2	2	4
Cecil	Hershey	2	2	4
Charles	Ellis	3	2	5
Dorchester	Mautz	1	1	2
Frederick	Ready	5	3	8
Garrett		0	1	1
Harford		5	3	8
Howard	Lam	7	3	10
Kent	Hershey	0	1	1
Montgomery		19	9	28
Prince George's	Washington	12	9	21
Queen Anne's	Hershey	1	1	2
Somerset		0	1	1
St. Mary's		2	2	4
Talbot	Mautz	0	2	2
Washington		1	3	4
Wicomico	Mautz	1	2	3
Worcester		2	1	3

SB537 - Cannabis Licensee Location - OSE Testimony

Uploaded by: Courtney Davis

Position: FAV



February 20, 2024

Honorable Chair Brian Feldman
Chair, Senate Education, Energy, and the Environment Committee
2 West
Miller Senate Office Building
Annapolis, Maryland 21401

Dear Chair Feldman, Vice Chair Kagan, and Members of the Senate Education, Energy, and the Environment Committee:

Testimony in support of SB 537 – Cannabis - Licensee Locations - Restrictions.

This bill seeks to clarify local authority to establish zoning laws that would unduly burden cannabis licensees. The Office of Social Equity (OSE) commends Chair Wilson for drafting a bill that builds on the framework and legislative goals set forth by the Maryland General Assembly through the establishment of the *Cannabis Reform Act of 2023* (CRA). Specifically, this legislation reinforces the commitment to fostering social equity within the cannabis industry by addressing zoning restrictions that could impede the growth of social equity licensees and aligning with the broader goal of creating an inclusive and thriving cannabis market in Maryland.

The location of a cannabis facility is becoming one of the most important questions to individuals that decide to participate in the burgeoning licensed cannabis industry. This will especially be true for the 179 social equity applicants that the Maryland Cannabis Administration will soon award with conditional licenses through a lottery as well as the HB2 operators from disadvantaged communities currently navigating the process to become operational. OSE is charged with working diligently to ensure that social equity licensees have the resources and support needed to thrive in this industry. Central to our mission is the identification and removal of barriers to entry and success. Presently, one significant impediment lies in zoning disparities compared to other established industries.

While we respect the will of localities to craft zoning laws based on the unique needs of their communities, regulatory hurdles and contradictory regulations between different levels of government can be especially burdensome for small and minority owned businesses. Restrictive zoning laws will lead to further scarcity in real estate, often priced at rates that only well-to-do financed companies can afford. This not only hinders their potential for growth but also forces



social equity licensees into potentially unfavorable partnerships with investors. These partnerships may involve short-term agreements with high-interest rates, approaching predatory levels, a concern thoroughly discussed during our extensive joint listening sessions with MCA and other state agency stakeholders. This bill serves as a crucial step towards addressing these challenges, offering a pathway to equitable and sustainable participation in the cannabis industry for all businesses, irrespective of size or background.

This bill is necessary to continue to strengthen the bold vision of economic opportunity and equity established by the CRA. We look forward to working with the localities and the state to create a cannabis industry that is aligned with the legislative intent of ensuring that individuals and communities harmed by cannabis prohibition and enforcement are able to access the economic opportunities associated with cannabis legalization.

I hope this information is useful. If you would like to discuss this further, please contact me at (443) 610-1666 or audrey.johnson1@maryland.gov or Courtney Davis, Deputy Director at (443) 610-1730 or courtney.davis@maryland.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "Audrey Johnson". The signature is fluid and cursive, with a long horizontal stroke at the end.

Audrey Johnson
Executive Director, Office of Social Equity

Carrington 2024 SB537 HB805 Cannabis Locations.pdf

Uploaded by: Darrell Carrington

Position: FAV



CARRINGTON & ASSOCIATES, LLC
Integrity.Passion.Results
Since 2006

Senate Bill 537\House Bill 805 – Cannabis Licensee Locations

Carrington & Associates, LLC is writing to express our strong support for Senate Bill 537\House Bill 805, sponsored by Senator Feldman and Delegate Willson, respectively, regarding Cannabis Licensee Locations.

Our firm has been actively involved in the cannabis industry, working closely with various jurisdictions, including Baltimore County, Baltimore City, Anne Arundel, Charles, and others across Maryland. We have been part of initiatives to enact zoning laws, navigate regulatory landscapes, and foster responsible cannabis business operations.

Senate Bill 537\House Bill 805 aims to address zoning requirements for licensed dispensaries and outdoor cannabis cultivation in political subdivisions. We believe that local control is crucial, and we fully support the provision that prevents political subdivisions from adopting ordinances more restrictive than those for other retail businesses.

Moreover, we acknowledge the importance of equal protection and due process for cannabis licensees. As legal entities, they have the right to operate under fair conditions comparable to other businesses. We believe Senate Bill 537\House Bill 805 strikes a balance between local control and the rights of cannabis licensees.

Our experience working with local governments, the Maryland Municipal League (MML), and the Maryland Association of Counties (MACo) has given us insight into the diverse needs of communities. The proposed legislation aligns with the desires of Maryland voters, with 67% supporting a seamless implementation of adult-use cannabis with widespread access.

We kindly request your favorable report for Senate Bill 537\House Bill 805. Your support will contribute to the growth of the cannabis industry in Maryland while ensuring responsible and equitable business operations.

Thank you for considering our position, and we look forward to witnessing the positive impact Senate Bill 537\House Bill 805 can have on Maryland's cannabis landscape. Please do not hesitate to contact Darrell Carrington, Founding Board Member and former Executive Director of the Maryland Cannabis Industry Association (MDCIA), at 732-763-7398 or darrell.carrington@verizon.net.

SB 537 - LOS - MCA (2-22-24).pdf

Uploaded by: William Tilburg

Position: FAV



Wes Moore, Governor • Aruna Miller, Lt. Governor • Will Tilburg, Director

February 22, 2024

The Honorable Pamela Beidle
Chair, Senate Finance Committee
3 East
Miller Senate Office Building
Annapolis, MD 21401

RE: Senate Bill 537 - Cannabis - Licensee Locations - Restrictions - Letter of Support

Dear Chair Beidle,

The Maryland Cannabis Administration (MCA) respectfully submits this letter of support for Senate Bill (SB) 537 – Cannabis – Licensee Locations – Restrictions. This bill clarifies the legislative intent of the zoning and planning provisions included in the Cannabis Reform Act, Chapters 254/255 of the Acts of 2023, and strikes an important balance between preserving local zoning authority and fulfilling the overwhelming mandate from Maryland voters to allow for the use, distribution and regulation of cannabis for adults 21 years of age or older.

Legislative Background

The Cannabis Reform Act established a commercial market and regulatory structure for the cultivation, manufacture, and distribution of adult-use cannabis, beginning July 1, 2023. The statutory framework prioritizes equity in licensing and seeks to ensure that individuals and communities harmed by cannabis prohibition and enforcement can access the economic opportunities associated with cannabis legalization. A common issue across states implementing adult-use cannabis legalization laws is local governments choosing to “opt-out” and prohibiting or severely restricting cannabis businesses through local zoning and planning measures. Local opt-outs and burdensome zoning ordinances have bolstered the illicit market and prevented social equity businesses from becoming licensed and operational in several other jurisdictions, including Illinois¹ where only 40 out of 185 social equity cannabis dispensary licensees (21%) were operational 18 months after award. (**Note:** this is the same amount of time allotted to Maryland cannabis licensees to become operational before facing license rescission).

¹ Casacchia, Chris, Progress not happening fast enough for marijuana social equity entrepreneurs, MJBizDaily, November 14, 2023, available at <https://mjbizdaily.com/progress-not-happening-fast-enough-for-cannabis-social-equity-entrepreneurs/>.

To avoid a similar fate in Maryland, the General Assembly specified in the Cannabis Reform Act that while local governments may establish “reasonable zoning requirements” for cannabis businesses, they **may not**:

- Unduly burden a cannabis licensee (36-405(b)(1));
- With the exception of on-site consumption establishments, prevent cannabis businesses from locating or operating in their jurisdiction (36-405(b)(4));
- Impose licensing, operating, or other fees or requirements on a cannabis licensee that are *disproportionately greater or more burdensome than those imposed on other businesses with a similar impact* on the area where the cannabis licensee is located (36-405(B)(2)); or
- Establish distance requirements for dispensaries *greater than*:
 - 500 feet from a school, playground, library, or public park (36-410(b)(1));
or
 - 1,000 feet from another licensed dispensary (36-410(b)(2)).

The Act, including the provisions establishing reasonable limits on local zoning authority, were passed overwhelmingly by the House (102-35) and Senate (32-12). Moreover, the maximum distance requirements permissible under law were established through committee amendments adopted by the Senate Finance Committee specifically to address community concerns about potential “clumping” of dispensaries in certain communities.

Yet, in the interim, local governments across the State adopted ordinances that unduly burden cannabis businesses (e.g., prohibiting field cultivation, which is 10 to 20 times less expensive than indoor growing; establishing a moratorium on cannabis licensing; limiting cannabis businesses to industrial areas far from population centers; prohibiting the sale of cannabis accessories or clothing; and requiring cannabis dispensaries to obtain a minimum of one (1) acre of land, while restricting the retail facility to a size of 10,000 sq. ft.), or exceed the maximum distance requirements established under State law (e.g., prohibiting a licensed dispensary from being located within 2,000 feet of school, park, or another licensed dispensary).

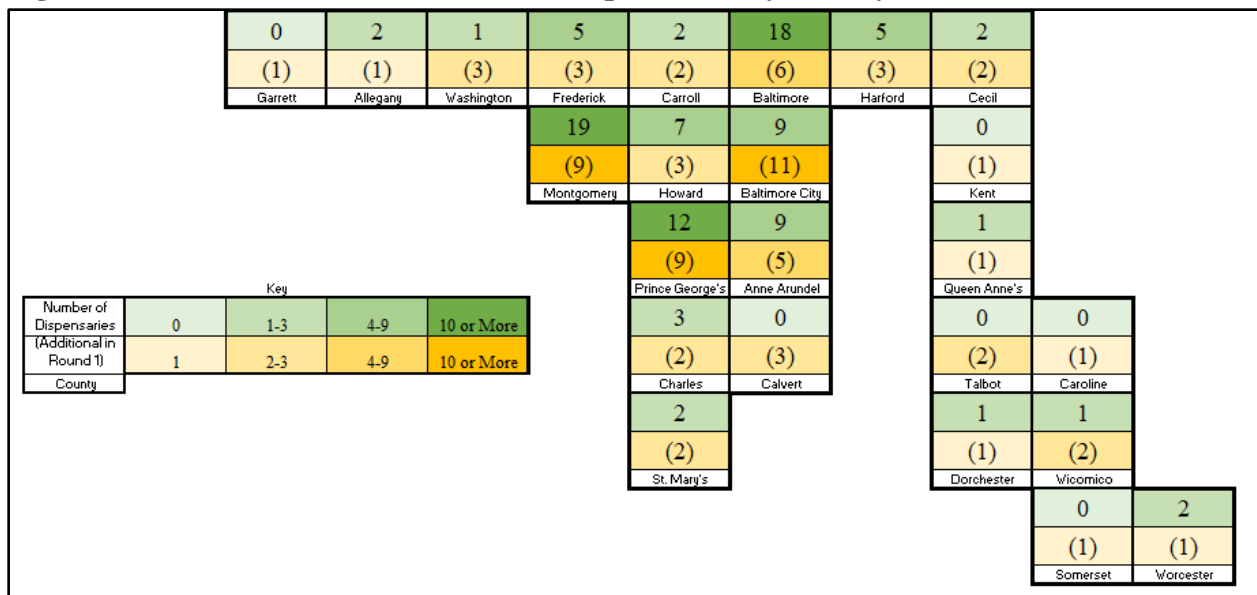
Statutory License Limits and Distribution of Licenses Across the State

The General Assembly considered cannabis legalization over multiple legislative sessions and spent significant time and resources developing a cannabis regulatory structure and licensing system that seeks to reduce or eliminate the illicit market, provide broad access for adults to safer, legal, tested cannabis, and protect public health and safety. Accordingly, the number of cannabis dispensary licenses permitted to operate in the State is (1) limited in statute, (2) based on a balance of market and public health and safety factors, (3) significantly lower than the number of retail establishments permitted for alcohol or tobacco, and (4) distributed across the State based on population and market demand in a jurisdiction.

In 2023, the House Cannabis Referendum and Legalization Workgroup commissioned a third-party demand study on the potential size of an adult-use cannabis market in Maryland. Based on modeling across 20 legal cannabis states and Maryland-specific cannabis consumer survey data, the demand study estimated that 300 cannabis dispensaries statewide would be “an optimal number of dispensaries to shift consumption from illicit markets to the adult use market without adding notable public health risks.”² The General Assembly adopted the optimal number of dispensaries, 300, as the maximum number and directed the MCA to award licenses in a manner that encourages a balanced geographic distribution based on population and market demand.

Figure 1 shows the distribution of dispensary licenses by county adopted by MCA. The top figure in each box is the number of medical cannabis dispensaries awarded to each county, and the bottom figure (in parentheses) is the maximum number of awards in the upcoming licensing round. The median number of additional dispensary licenses that may be awarded to each county is two (2). A total of only five (5) counties, including Baltimore City, may receive 5 or more dispensary licenses in the upcoming licensing round, and based on county population estimates the awards will result in an average of 1 additional dispensary per 100,000 residents across these jurisdictions.

Figure 1. Number of Licensed Cannabis Dispensaries, by County.



The number of grower licenses is also limited in statute, but the distribution of these licenses is by region rather than county. In the upcoming licensing round a maximum of four

² Future Adult Use Cannabis Demand & Predictive Modeling: A Behavioral Economic Study, Cannabis Public Policy Consulting, Dr. Michael Sofis, PhD and Mackenzie Slade, MPH (January 5, 2023), available at https://mgaleg.maryland.gov/meeting_material/2023/scr%20-%20133174234517847255%20-%20Market%20Study%20Report_01052023.pdf.

standard grower licenses and 6 micro grower licenses (limited to 10,000 sq. ft. of indoor canopy or 40,000 sq. ft. of outdoor canopy) may be awarded in each region. This means that a maximum of 16 standard grower and 24 micro grower licenses will be awarded *statewide* in this licensing round. See **Table 1** below for a complete breakdown of the regions and the maximum number of awards in each region.

Table 1. Distribution of Grower, Processor, and Micro Dispensary Licenses, by Region.

Eastern Region: Caroline, Kent, Queen Anne's, Talbot, Dorchester, Somerset, Wicomico, and Worcester Counties			Southern Region: Anne Arundel, Prince George's, Calvert, Charles, and St. Mary's Counties		
	Current Number	After Round 1		Current Number	After Round 1
Standard Growers	4	8	Standard Growers	3	7
Standard Processors	5	13	Standard Processors	4	12
Micro Growers		6	Micro Growers		6
Micro Processors		6	Micro Processors		6
Micro Dispensaries		2	Micro Dispensaries		2
Central Region: Baltimore, Harford, Howard, and Cecil Counties, and Baltimore City			Western Region: Carroll, Frederick, Montgomery, Allegany, Garrett, and Washington Counties		
	Current Number	After Round 1		Current Number	After Round 1
Standard Growers	4	8	Standard Growers	7	11
Standard Processors	4	12	Standard Processors	6	14
Micro Growers		6	Micro Growers		6
Micro Processors		6	Micro Processors		6
Micro Dispensaries		2	Micro Dispensaries		2

Number of Dispensary Licenses Compared to Alcohol Retailers

Opposition to SB 537 has stated that by not allowing local governments to zone cannabis dispensaries in a more restrictive manner than alcohol retailers, dispensaries will become as concentrated as liquor stores in certain communities. This is simply not true.

First, the number of on/off premises alcohol retailers statewide (6,500) is more than 20 times the maximum number of cannabis dispensary licenses authorized under law (300), and more than 30 times the number of dispensary licenses that may be awarded statewide after the upcoming licensing round (176). The number of beer and wine or beer, wine, and liquor stores statewide alone (more than 1,500) is almost 9 times the number of dispensary licenses that may be awarded statewide after this licensing round. The significant disparity between the number of alcohol retailers and cannabis dispensaries is also present in each county. For example, Baltimore County has a 30 to 1 ratio of alcohol retailers (nearly 800) to cannabis dispensaries (18 currently operating and up to 6 licenses available in the next round). Likewise, in Prince George’s County there are more than 600 retail alcoholic beverages licenses, of which more than 200 are beer and wine or beer, wine, and liquor retail licenses. This compares to a total of 12 cannabis dispensary licenses currently authorized in the county, and a maximum of 9 additional licenses in the upcoming licensing round. Even if MCA issues the maximum number of dispensary awards (9), beer, wine,

and liquor licenses will still outnumber cannabis dispensaries in the county by a ratio of more than 10 to 1.

Second, as referenced above, unlike with alcohol or tobacco retailers, the State has established distance requirements between a licensed dispensary and a school, childcare facility, public park, playground, or library, or between two licensed dispensaries. These distance requirements will prevent areas from being densely concentrated with cannabis dispensaries and help ensure fair distribution of dispensaries across the State and within each county. In addition, SB 537 proposes to extend these distance requirements to include pre-existing places of worship, which will provide further protection for local communities.

The Growing Problem

SB 537 also proposes zoning protections for outdoor cannabis cultivation. Specifically, the bill would prevent local governments from adopting zoning requirements for outdoor cannabis cultivation operations that are more restrictive than historical zoning requirements for outdoor hemp cultivation. This provision was drafted in response to several local governments banning outdoor cultivation within their jurisdiction, requiring licensees to operate growing facilities within industrial areas, or attaching undue burdens to a cannabis grow license. For example, Carroll County prohibits the outdoor growing of cannabis anywhere in the county; Somerset County requires any cannabis-related facility to operate within an industrial zone, including growing facilities; and Cecil County requires a cannabis grower to hold at least 10 acres of land (despite micro licenses being capped under State law at one acre), prohibits field cultivation, and limits growing facilities to industrial zones.

Indoor facilities are significantly more expensive to construct and operate than outdoor farms, and much more energy intensive.³ Yet, local governments are increasingly forcing cannabis to grow indoors or grow in areas where field cultivation is extremely difficult or not possible. In contrast, local governments have by and large allowed field cultivation of hemp, which is produced by the same *Cannabis sativa L.* plant (and produces the same odor) as cannabis, without any restrictions.

MCA understands that local opposition to outdoor cannabis growing operations largely stem from security concerns. While perhaps well-intentioned, these security concerns are misplaced. MCA regulations require robust security requirements for outdoor growing operations, including security and privacy fencing, lighting, continuously monitored 24-hour video surveillance of the facility perimeter, fencing, and gates, and on-site security to prevent unauthorized entry ([COMAR 10.62.10.03](#)). Based on conversations with the Maryland Municipal

³ A recent report from Massachusetts indicates that indoor cultivation facilities account for upwards of 10 percent of all industrial electricity consumption in the state. *See* Indoor cannabis grow centers draining electricity, Worcester Business Journal, June 2, 2021, available at <https://www.wbjournal.com/article/indoor-cannabis-grow-centers-draining-electricity>.

League (MML) and the Maryland Association of Counties (MACo), MCA understands that these security provisions may adequately address local security concerns and is supportive of any efforts to codify these regulatory requirements.

Zoning Challenges Faced by Initial Medical Licensees

On December 8, 2016, the Maryland Medical Cannabis Commission issued 102 pre-approvals for medical dispensary licenses. It took 1.7 years before half (51) of these dispensaries were able to open their doors, and 3 years or longer for more than one-quarter (28) of dispensaries to become operational. Challenges with local zoning and planning were overwhelmingly the driving force behind these delays.

Prince George's County provides an example of the deleterious effects that local zoning and planning requirements can have on cannabis businesses. In Prince George's, the Medical Cannabis Commission awarded a total of 14 medical cannabis dispensary pre-approvals in 2016. Today, there are only 9 operational dispensaries in the county. Thirty-six percent of the original dispensary licenses awarded have yet to open in the county. A total of 3 additional dispensaries remain in pre-approval, unable to find a location that complies with county zoning and planning requirements more than 7 years after their initial award, 1 dispensary had their pre-approval rescinded due to inability to make good faith progress to become operational as a result of zoning challenges, and 1 petitioned the Commission to transfer out of the county due to a lack of properties that complied with planning and zoning requirements. Without SB 537 clarifying the parameters of local zoning authority over cannabis businesses, the experience of these businesses in Prince George's County will likely be replicated across the State.

“Unduly Burden”

In the interim, MCA received dozens of inquiries from local governments asking for clarification on the term “unduly burden,” which is used in §36-405. The term is not defined in the Alcoholic Beverages and Cannabis Article, and absent a definition, local governments have struggled to determine whether certain planning and zoning measures are permissible under State law. Overall, these inquiries were well-intentioned, with local officials seeking to understand the zoning provisions in the Cannabis Reform Act, and what steps they could lawfully take to regulate these businesses in their jurisdiction. However, these questions, and many of the resulting ordinances passed across the State, highlight the need to clarify the zoning and planning provisions codified in §§36-405 and 36-410, and the importance of SB 537 to a successful and equitable cannabis industry in Maryland.

Moving Forward

As the State agency primarily tasked with implementing a safe, accessible, and equitable cannabis industry, MCA appreciates the challenges facing local governments that are seeking to balance the economic opportunities of cannabis legalization with its accompanying health and

public safety concerns. MCA has worked closely with MML and MACo to identify solutions to the zoning challenges that are at the heart of SB 537 and commends their efforts to craft a consensus approach that balances economic, equity, and health and public safety interests. We are committed to continuing to work with the sponsor, committee, and all stakeholders to clarify the scope of “reasonable zoning requirements” and “unduly burden” in a manner that is fair and consistent with the legislative intent of the Cannabis Reform Act.

I hope this information is useful. If you would like to discuss this further, please contact me at (410) 487-8069 or william.tilburg@maryland.gov or Andrew Garrison, Chief of the Office of Policy and Government Affairs at (443) 844-6114 or andrew.garrison@maryland.gov.

Sincerely,

A handwritten signature in blue ink that reads "William Tilburg". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

Will Tilburg, JD, MPH
Director, Maryland Cannabis Administration

cc: Members of the Senate Finance Committee

MML-SB 537 - FWA.pdf

Uploaded by: Bill Jorch

Position: FWA



Maryland Municipal League
The Association of Maryland's Cities and Towns

TESTIMONY

February 22, 2024

Committee: Senate Finance

Bill: SB 537 - Cannabis - Licensee Locations - Restrictions

Position: Favorable with Amendments

Reason for Position:

The Maryland Municipal League (MML) supports Senate Bill 537, with important amendments, which makes alterations to some of the land use provisions pertaining to the location of cannabis businesses.

The 2023 legislation that established the framework for the cannabis industry in Maryland attempted to strike a balance between state policy priorities and local authority over land use decisions and SB 537 continues in that vein. While the bill does provide clarity around some of the aspects that had ambiguity, MML requests consideration of a few amendments that would assist local governments adequately integrate cannabis businesses into the community.

MML Amendments:

Page 3, line 19: (1) ~~500~~**1,000** feet of:

Page 3, line 25: (2) ~~1,000~~ **2,000** feet of another dispensary under this title.

Page 3, after line 25: **(3) 500 FEET OF AN AREA THAT IS CURRENTLY ZONED RESIDENTIAL.**

Page 4, line 6: (F) A POLITICAL SUBDIVISION MAY NOT ADOPT AN ORDINANCE ESTABLISHING A ZONING REQUIREMENT FOR A LICENSED GROWER CULTIVATING CANNABIS **EXCLUSIVELY** OUTDOORS THAT IS MORE RESTRICTIVE THAN ANY ZONING REQUIREMENTS THAT EXISTED ON JUNE 30, 2023, GOVERNING A HEMP FARM REGISTERED UNDER TITLE 14 OF THE AGRICULTURE ARTICLE IN THE POLITICAL SUBDIVISION.



Maryland Municipal League

The Association of Maryland's Cities and Towns

The bill clarifies that local governments cannot expand the distances articulated in the law between a dispensary and sensitive properties and other dispensaries. With this preemption in place, but the local option to reduce the distances still in effect, MML seeks to expand the maximum permitted distances in law to a more reasonable amount and add areas that are currently zoned residential to the list of sensitive areas.

Additionally, MML seeks an amendment that clarifies that the restriction placed on local governments prohibiting a zoning requirement on outdoor growers that is more restrictive than that imposed on hemp growers on June 30, 2023, be applied only to growers that cultivate cannabis exclusively outside. With limited and congested space in municipalities, there are examples of growers use both indoor and outdoor facilities to cultivate cannabis both indoors. Our intent is to differentiate between those entities that grow exclusively outside and those that grow both indoors and outdoors.

The provisions of SB 537, with the above amendments, should allow for municipal governments to meet the needs of their constituents and cannabis businesses. For this reason, the League respectfully requests that the committee provide Senate Bill 537 with a favorable report, with the above amendments.

FOR MORE INFORMATION CONTACT:

Theresa Kuhns
Angelica Bailey Thupari, Esq.
Bill Jorch
Justin Fiore

Chief Executive Officer
Director, Advocacy & Public Affairs
Director, Public Policy & Research
Deputy Director, Advocacy & Public Affairs

SB0537-FIN_MACo_SWA.pdf

Uploaded by: Kevin Kinnally

Position: FWA



Senate Bill 537

Cannabis - Licensee Locations - Restrictions

MACo Position: **SUPPORT**

To: Finance Committee

WITH AMENDMENTS

Date: February 22, 2024

From: Dominic J. Butchko and Kevin Kinnally

The Maryland Association of Counties (MACo) **SUPPORTS SB 537 WITH AMENDMENTS**. This bill attempts to provide more clarity regarding certain land use elements related to the placement of cannabis dispensaries and outdoor growing facilities.

The 2023 legalization of recreational cannabis has opened the door to economic opportunity, but has also led to a realigning of views regarding the place of cannabis in communities. Similarly to leaders at the state level, county leaders continue to actively debate this subject while being sensitive to the constituent concerns. The intent of SB 537 is to provide additional guardrails so both businesses and local governments can have more certainty in the rollout of this new industry.

MACo has been working with the Maryland Cannabis Administration on amendments to provide more clarity in the implementation of these provisions. The MACo amendments include:

Amendment #1: Expand the 500ft buffer to 1000ft. Clarify the buffer's applicability.

This amendment expands the 500ft buffer to 1000ft and clarifies that the buffer applies not only to certain preexisting sites but also to property purchased specifically for the construction of certain sites. This amendment is not intended to impact cannabis dispensaries that may already be constructed within the buffer of a later planned certain site.

Amendment Language:

On page 3, STRIKE lines 19 through line 24 and INSERT:

“(1) 1000 FEET OF:

(I) A PRE-EXISTING PRIMARY OR SECONDARY SCHOOL SITE IN THE STATE THAT IS PRE-EXISTING, OR A SITE OWNED BY THE POLITICAL SUBDIVISION, A LOCAL BOARD OF EDUCATION, OR THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION OR OTHER STATE OR LOCAL GOVERNMENTAL UNIT FOR THE SPECIFIC PURPOSE OF A FUTURE SCHOOL SITE, OR A SITE DESIGNATED FOR A PRIMARY OR

SECONDARY SCHOOL IN THE POLITICAL SUBDIVISION'S ADOPTED COMPREHENSIVE LAND USE PLAN OR CAPITAL IMPROVEMENT PLAN, OR

(II) A PRE-EXISTING LICENSED CHILD CARE CENTER OR REGISTERED FAMILY CHILD CARE HOME UNDER TITLE 9.5 OF THE EDUCATION ARTICLE; OR

(III) A PRE-EXISTING PLAYGROUND, RECREATION CENTER, LIBRARY, PUBLIC PARK, OR A SITE OWNED BY THE POLITICAL SUBDIVISION, A LOCAL BOARD OF EDUCATION, OR THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION OR OTHER STATE OR LOCAL GOVERNMENTAL UNIT FOR THE SPECIFIC PURPOSE OF A FUTURE PLAYGROUND, RECREATION CENTER, LIBRARY, OR PUBLIC PARK, OR A SITE DESIGNATED FOR PLAYGROUND, RECREATION CENTER, LIBRARY, OR PUBLIC PARK IN THE POLITICAL SUBDIVISION'S ADOPTED COMPREHENSIVE LAND USE PLAN OR CAPITAL IMPROVEMENT PLAN; OR

(IV) A PLACE OF WORSHIP; OR"

Amendment #2: Expand the allowable distance between dispensaries.

This amendment expands the required buffer between cannabis dispensaries, providing guardrails so that communities do not become overwhelmed with an overabundance of dispensaries.

Amendment Language:

On page 3, STRIKE line 25 and INSERT,

“(2) 2,000 FEET OF ANOTHER DISPENSARY UNDER THIS TITLE.”

Amendment #3: Create a buffer between purely residential zoning and cannabis dispensaries.

In historic communities with older patterns of development, commercial and residential zones may be abutting each other with little to no buffer. In some communities in the Baltimore region, for example, it is not uncommon to have commercial development on one side of a street or alley and have residential development on the other side. Unlike traditional commercial development, like liquor stores, cannabis operates under much stricter access and security requirements. It is not unusual to have long lines of people waiting to enter a dispensary, due to that dispensary being filled to capacity. These lines and congestion present circumstances unique to cannabis, which may present unintended consequences for neighbors. To prevent these consequences, counties request a minimal buffer between dispensaries and purely residential communities be required.

Amendment Language:

On page 3, line 26, INSERT,

“(3) 100 FEET OF AN AREA ZONED FOR RESIDENTIAL USE.”

Amendment #4: Clarify that the buffers authorized in subsections (b) & (c) are applicable regardless of current county policy.

As currently drafted, it is not clear that counties can enforce subsections (b) and (c) unless they already had these requirements for liquor stores. Counties request that clarifying language be added to reflect the legislative intent and ensure these provisions are implementable.

Amendment Language:

On page 4, in line 2, after “(E)” and before “A POLITICAL SUBDIVISION” INSERT:

“EXCEPT AS AUTHORIZED UNDER SUBSECTIONS (B) AND (C) OF THIS SECTION,”

Amendment #5: Ensure certain provisions related to security and safety are preserved in state statute.

Public safety is of the utmost concern for local governments. Counties request that certain requirements adopted via regulations related to security at cannabis cultivation sites be preserved in state statute.

Amendment Language:

The bill should incorporate, either through new language or by reference, the following regulations under COMAR 10.62.10.03 – 10.62.10.08 governing facility security:

10.62.10.03

Additional Provisions for Field or Greenhouse Cultivation Premises.

- A. Licensed premises for field cultivation of medical cannabis shall be situated to maintain the greatest achievable level of privacy and security.
- B. Physical Security. An area of cultivation shall be securely surrounded by fencing and gates constructed to prevent unauthorized entry.
- C. Fencing and gates shall be equipped with a security alarm system that:
 - (1) Covers the entire perimeter;
 - (2) Is continuously monitored; and

(3) Is capable of detecting power loss.

D. The premises shall be protected by a video surveillance recording system to ensure:

(1) Surveillance of the entire perimeter of the area of cultivation;

(2) Surveillance over all portions of the security fence and all gates; and

(3) Adherence to the video surveillance requirements of this chapter.

E. A video surveillance system shall be supported by adequate security lighting which may be modified as necessary to include motion control sensors to protect light-dark cycles for proper cultivation.

10.62.10.06

Security Alarm Systems.

A. A licensee shall maintain a security alarm system that covers all perimeter entry points and portals at all premises.

B. A security system shall be:

(1) Continuously monitored;

(2) Capable of detecting smoke and fire; and

(3) Capable of detecting power loss.

C. A security alarm system shall include panic alarm devices mounted at convenient, readily-accessible locations throughout the licensed premises.

D. A second, independent security alarm system shall be used to protect:

(1) A location where records are stored on-site;

(2) A location where records are stored off-site; and

(3) A cabinet or room that holds medical cannabis.

E. A security alarm system shall remain operational until a licensed premises no longer has any medical cannabis, seeds, or cuttings on the premises.

F. A security alarm system shall be equipped with auxiliary power sufficient to maintain operation for at least 48 hours.

10.62.10.07

Video Surveillance Requirements.

A. A licensee shall maintain a motion-activated video surveillance recording system at all premises that:

- (1) Records all activity in images of high quality and high resolution capable of clearly revealing facial detail;
- (2) Operates 24-hours a day, 365 days a year without interruption; and
- (3) Provides a date and time stamp for every recorded frame.

B. A licensee shall post appropriate notices advising visitors of the video surveillance.

C. A surveillance camera shall be located and operated to capture each exit from the premises.

D. A surveillance camera shall capture activity at each:

- (1) Entrance to an area where medical cannabis is grown, tested, cured, manufactured, processed, or stored; and
- (2) Area where medical cannabis is trimmed, packaged, cured, or stored.

E. The storage of all recordings of security video surveillance shall be:

- (1) Access-limited;
- (2) Secured by a security alarm system that is independent of the main premises security alarm system;
- (3) In a format that can be easily accessed for investigational purposes; and
- (4) Retained for a minimum of 90 calendar days.

F. Any recording of security video surveillance shall be made available to the Commission or law enforcement agency for just cause as requested within 48 hours.

G. Violation.

- (1) Failure to provide the Commission with any recording of video surveillance within 48 hours of a request from the Commission is a violation of COMAR 10.62.34.01.

(2) Each day of recording that a licensee fails to provide to the Commission, within the minimum of 90 calendar days that shall be retained, constitutes a separate violation.

10.62.10.08

Visitor to a Non-Public Area of the Premises.

A. When a visitor is admitted to a non-public area of the premises of a licensee, a registered grower agent shall:

- (1) Log the visitor in and out;
- (2) Retain with the log a photocopy of the visitor's government-issued identification;
- (3) Continuously visually supervise the visitor while on the premises; and
- (4) Ensure that the visitor does not touch any plant or medical cannabis.

B. A Commission inspector as defined in COMAR 10.62.33.01 is not subject to the visitor requirements established in §A of this regulation.

C. The licensee shall maintain a log of all visitors to non-public areas for 2 years.

Counties thank both the Maryland Cannabis Administration and sponsors for considering county concerns and for working with MACo on this set of reasonable and targeted amendments. By making the modifications referenced herein, SB 537 will be an implementable piece of legislation that provides clarity and certainty for industry and local governments alike. For this reason, MACo urges the committee to give SB 537 a **FAVORABLE WITH AMENDMENTS** report.

MMCC-Seven-Points-Agro_Consent Order_Redacted.pdf

Uploaded by: Anthony Damron

Position: UNF

IN THE MATTER OF

SEVEN POINTS AGRO-THERAPEUTICS,
LLC

Respondent

* * * * *

* BEFORE the
*
* MARYLAND MEDICAL
*
* CANNABIS COMMISSION
*
* Case no. 20-00316
*

CONSENT ORDER

Pursuant to its authority to issue and regulate medical cannabis grower licenses under the Natalie M. LaPrade Medical Cannabis Commission Act (the “Act”) codified at Md. Code Ann., Health-Gen. § 13-3301 *et seq.* (2015 Repl. Vol. and 2018 Supp.), the Maryland Medical Cannabis Commission (“Commission”) issues the following consent order. On October 2, 2020, the Commission presented Seven Points Agro-Therapeutics, LLC (“Respondent”) with a notice informing Respondent that the Commission had voted to deny its Stage Two application for a medical cannabis grower license due to various alleged violations of Section 9(b) (uncodified) of House Bill 2 signed into law on May 15, 2018, the Act, and the Code of Maryland Regulations (“COMAR”). By letter dated October 21, 2020, the Respondent formally appealed the Commission’s determination, requesting an administrative hearing and a pre-hearing case resolution conference (“CRC”). On April 9, 2021, the CRC panel convened with the Commission’s administrative prosecutor, Respondent’s counsel and principal owners, and Commission staff and counsel present. Following the CRC, the Commission and Respondent agreed to resolve the matter by agreement.

The pertinent provisions of House Bill 2, the Act, and COMAR state as follows:

House Bill 2, Section § 9(b) (2018 Regular Session):

- (1) [The Commission shall] grant a person Stage One preapproval for licensure as a medical cannabis grower under § 13-3306 of the Health – General Article, as enacted by Section 1 of this Act, if the person:
 - (i) is licensed as a processor under § 13-3309 of the Health – General Article, as enacted by Section 1 of this Act; and
 - (ii) applied for a medical cannabis grower license and was initially among the top grower applicants by the Regional Economic Studies Institute in July 2016; and

- (2) grant a person Stage One preapproval for licensure as a processor under § 13-3309 of the Health – General Article, as enacted by Section 1 of this Act, if the person:
 - (i) is licensed as a medical cannabis grower under § 13-3306 of the Health – General Article, as enacted by Section 1 of this Act; and
 - (ii) applied for a processor license and was ranked among the top 30 processor applicants by the Commission in August 2016.

Maryland Code, General Provisions Article § 1-114. Person

“Person” includes an individual, receiver, trustee, guardian, personal representative, fiduciary, representative of any kind, corporation, partnership, business trust, statutory trust, limited liability company firm, association, or other nongovernmental entity.

COMAR 10.62.08.05

“The burden of proving an applicant’s qualifications rests on the applicant.”

COMAR 10.62.08.05B

“The Commission may deny an application that contains a misstatement, omission, misrepresentation, or untruth.”

COMAR 10.62.08.05C

“An applicant shall be complete in every material detail.”

COMAR 10.62.08.06C(3)

“The Commission may deny issuing a pre-approval of a license if any individual identified in the applicant . . . [f]raudulently or deceptively attempts to obtain a license.”

In lieu of proceeding with an evidentiary hearing in this matter, the parties agree to the following Findings of Fact, Conclusions of Law, and Order as set forth herein.

I. FINDINGS OF FACT

The Commission finds as follows:

A. The Stage Two Application Submitted by Seven Points Agro-Therapeutics II, LLC.

1. In 2015, Respondent submitted applications for both a medical cannabis grower license and a medical cannabis processor license.

2. In 2016, Respondent was awarded a Stage One pre-approval for a medical cannabis processor license. After being awarded the pre-approval, Respondent was awarded a medical cannabis processor license on or about April 10, 2018.

3. In 2016, Respondent was initially ranked among the top-30 grower applicants by the Regional Economic Studies Institute.

4. After House Bill 2 took effect, the Commission held an open meeting on May 24, 2018, at which time it voted to grant Respondent, a Stage One pre-approval for a medical cannabis grower license in accordance with Section 9(b) of House Bill 2.

5. Respondent, is a limited liability company owned in equal parts by Arrington Herry, Michele Dozier, and Reginald Alston (collectively, the “Principals”), through their holding company, Agro-Therapeutics Holdings, LLC, with each Principal holding one-third or 33.33% shares of the Respondent.

6. On September 24, 2018, the designated point of contact for Respondent requested permission to transfer the preapproval to another entity and represented that the proposed transferee was wholly-owned by the Principals.

7. The Commission did not approve this request.

8. On September 2018, Seven Points Agro-Therapeutics II, LLC, submitted a Stage Two application for a medical cannabis grower license listing Arrington Herry, Michele Dozier, and Reginald Alston as the principal owners, with each Principal holding one-third or 33.33% shares of the Respondent.

9. Seven Points Agro-Therapeutics II, LLC subsequently amended its Stage Two application to indicate that its theretofore 100% parent, Greenhouse Partners, LLC, had taken on new investment to fund its build-out, which altered the beneficial ownership structure of Seven Points Agro-Therapeutics II, LLC. Namely, Greenhouse Partners, LLC sold 19% of its equity interests to a new investor, Abell Agro, LLC, an unrelated entity that is owned in major part by Charlie Mattingly and Rick Mai. Charlie Mattingly and Rick Mai have no ownership stake in Respondent and, therefore, were not included on the Stage One preapproval application.

10. Seven Points Agro-Therapeutics II, LLC has no direct or indirect ownership interest in Respondent, which is the corporate person that holds the medical cannabis processor license and the Stage One pre-approval for the grower license.

11. Seven Points Agro-Therapeutics II, LLC is not itself “licensed as a processor under § 13-3309 of the Health General Article,” as required by House Bill 2.

12. Seven Points Agro-Therapeutics II, LLC does not hold a Stage One pre-approval for a medical cannabis grower license—a prerequisite for Stage Two approval.

13. The Respondent and Seven Points Agro-Therapeutics II, LLC are distinct and separate corporate entities and, therefore, are two different legal “person[s]” within the meaning of Section 9(b) of House Bill 2 and the Maryland Code.

14. By letter dated October 2, 2020, the Commission informed Respondent that it had voted to deny the Stage Two application for medical cannabis grower license for the above-recited reasons.

B. Respondent’s Misstatements, Misrepresentations, Omissions, or Untruths in Connection with the Stage Two Application and the Commission’s Investigation Related Thereto.

15. On August 28, 2019, the Commission was informed of the St. Mary’s County Sheriff’s seizure of approximately 760 suspected cannabis plants, invoices and cultivation equipment from a property that is owned by one of the Principals.

16. The Commission’s Bureau of Enforcement and Compliance conducted an investigation, which included witness interviews, to determine whether the Respondent had attempted to start growing cannabis plants before obtaining a license.

17. The Principals consistently stated that the seized plants were hemp and not medical cannabis.

18. In support of these statements, witnesses presented an invoice for Oregon Cherry hemp seeds from a vendor in Colorado. Witnesses stated that the seeds purchased through the transaction reflected on the invoice were hemp seeds that produced the hemp plants grown at and seized from the residential property of the applicant’s principal.

19. Further investigation confirmed that information to be a misrepresentation. The seed vendor who generated the invoice confirmed to Commission investigators that the sale

reflected on the invoice was cancelled at the customer's request. The vendor did not receive payment for the hemp seeds listed on the invoice and did not ship the hemp seeds on the invoice. The hemp seeds reflected on the Colorado invoice could not have yielded hemp plants at the residential property of the principal.

20. A representative of the Respondent thereafter provided the Commission with a different invoice along with verification of wire transfer showing that Respondent's parent company had purchased hemp seeds from a different licensed hemp seed provider on May 24, 2019. Respondent has since contended that the misrepresentation regarding the above-referenced Colorado invoice was inadvertent.

21. The Maryland Department of Agriculture (MDA), however, confirmed to the Commission that none of the Respondent, the applicant, the Principals, or the location in question had been issued a registration to grow industrial hemp. MDA also confirmed that neither the Respondent, nor any of the Principals had been licensed to grow industrial hemp through MDA's Hemp Research Pilot Program.

22. Without having applied to or been approved for participation in MDA's Hemp Research Pilot Program, any hemp plants grown at the residential property of the principal would have been grown without the necessary regulatory approvals.

23. Additionally, the application materials initially submitted to the Commission failed to provide complete criminal history information and civil litigation history information for each of the principals as required. Seven Points Agro-Therapeutics II, LLC thereafter provided to the Commission updated versions of its Stage Two Application that included information omitted from its initial application.

24. By letter dated, October 2, 2020, the Commission informed Respondent that it had concluded that Seven Points Agro-Therapeutics II, LLC had presented numerous misstatements, omissions, misrepresentations, or untruths in its application and during the Commission's investigation of the application. The Commission informed Respondent that it was authorized to deny the Stage Two application on this basis.

25. The Commission also informed Respondent that it had concluded that the misstatements, misrepresentations, omissions, or untruths offered regarding the acquisition of hemp seeds indicated that Respondent had "[f]raudulently or deceptively attempt[ed] to obtain a license." The Commission informed Respondent that it was authorized to deny the Stage Two application on this basis as well, pursuant to COMAR 10.62.08.06C(3).

II. CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, the Commission concludes that:

26. Seven Points Agro-Therapeutics II, LLC is a distinct and separate legal "person" from the Respondent.

27. Seven Points Agro-Therapeutics II, LLC is not "licensed as a processor under § 13-3309 of the Health General Article, as enacted by Section 1" of House Bill 2 and is therefore not entitled by law to the Stage One pre-approval issued to the Respondent.

28. Seven Points Agro-Therapeutics II, LLC also does not hold a Stage One pre-approval for a medical cannabis grower license—a prerequisite for Stage Two approval.

29. Therefore, under Section 9(b) of House Bill 2, the Stage Two application cannot be granted to Seven Points Agro-Therapeutics II, LLC, but may only be granted to either the Respondent directly, or to a direct subsidiary of the Respondent.

III. ORDER

Based on the foregoing Findings of Fact and Conclusions of Law by the Commission, it is hereby

ORDERED that the Stage Two application for medical cannabis grower license, if approved, may only be awarded to the Respondent, as the entity that holds the medical cannabis processor license under House Bill 2 and the Stage One pre-approval for the grower license or, alternatively, to a wholly owned, direct subsidiary of Respondent; and be it further

ORDERED that the Respondent's Maryland medical cannabis grower's license, if approved, will be placed on **PROBATION** for a period of **TWO (2) YEARS** beginning on the effective date of the approval of the license, subject to the following terms and conditions:

1. The Respondent's status as a medical cannabis grower be listed in the Commission's computer records and website as being on "**PROBATION;**"
2. For the pendency of Respondent's probation, Respondent shall be subject to **TWENTY-FOUR (24) MONTHS** of enhanced inspections by the Commission and/or its designee(s), to include monthly self-reporting compliance checklists to be completed as reasonably directed by the Commission's Bureau of Enforcement and Compliance; and be it further

ORDERED that Respondent may petition the Commission no fewer than **TWELVE (12) MONTHS** from the effective date of the license with documentation and evidence showing that Respondent has made significant measurable progress in improving its commitment to compliance with the Consent Order, for the Commission to consider lifting the probation, in the Commission's sole discretion, which shall not be subject to challenge or appeal; and be it further

ORDERED that within **NINETY (90) DAYS** of the effective date of this Consent Order, Respondent will designate a Chief Compliance Officer to oversee and direct all of Respondent's operations under the license. Respondent's Chief Compliance Officer will have a background in law enforcement or Maryland regulatory compliance matters and will be trained in the industry's best practices and procedures; and be it further


ORDERED that Respondent's Stage Two medical cannabis grower license, if approved, is contingent on there being no criminal convictions against Respondent or any of the Principals, provided that the Principals hold ownership or control of the Respondent at the time, by any law enforcement agency, federal or state, in connection with the 2019 seizure of suspected cannabis plants described herein above. In the event that any such criminal convictions are imposed after the date hereof, the Commission, in its discretion, after notice and an opportunity for an evidentiary hearing before the Commission, may impose any other disciplinary sanction(s) that the Commission is authorized to impose under Md. Code Ann., Health-Gen. § 13-3301 *et seq.*, including additional probation, suspension, revocation, and/or monetary fine, said violation being proven by a preponderance of the evidence; and be it further

ORDERED that if Respondent violates any of the terms and conditions of this Consent Order, the Commission, in its discretion, after notice and an opportunity for an evidentiary hearing before the Commission may impose any other disciplinary sanction that the Commission is authorized to impose under Md. Code Ann., Health-Gen. § 13-3301 *et seq.* including additional probation, suspension, revocation, and/or monetary fine, said violation being proven by a preponderance of the evidence; and be it further

ORDERED that the Respondent shall incur all costs associated with this Consent Order;
and it is further

ORDERED that this Consent Order is a **PUBLIC DOCUMENT** pursuant to Md. Code
Ann., Gen. Prov. Art., §§ 4-401 *et seq.* (2014).

5-6-2021
Date



Brian Lopez
Commission Chair

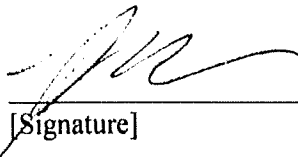
CONSENT

I, Reginald Alston am the Co-Chief Executive Officer of Seven Points Agro-Therapeutics, LLC, and have legal authority to enter into this agreement on behalf of Seven Points Agro-Therapeutics, LLC (hereinafter "Respondent"). Respondent acknowledges that it has had the opportunity to seek advice of counsel in this matter. By this Consent, Respondent agrees and accepts to be bound by this Consent Order and its conditions and restrictions. Respondent waives any rights it may have had to contest the Findings of Fact and Conclusions of Law.

Respondent acknowledges the validity of this Consent Order as if entered into after the conclusion of a formal evidentiary hearing in which the Respondents would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on its own behalf, and to all other substantive and procedural protections as provided by law. Respondent acknowledges the legal authority and the jurisdiction of the Commission to initiate these proceedings and to issue and enforce this Consent Order. Respondent also affirms that it is waiving its right to appeal any adverse ruling of the Commission that might have followed any such hearing.

I sign this Consent Order with authority on behalf of Respondent after having had the opportunity to consult counsel, without reservation, and I fully understand and comprehend the language, meaning and terms of this Consent Order. I voluntarily sign this Consent Order and understand its meaning and effect.

08/30/21
Date


[Signature]

Co - Chief Executive Officer
Reginald Alston, Co-CEO

NOTARY

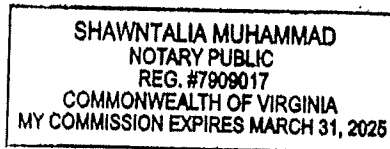
STATE OF Virginia

CITY/COUNTY OF: Alexandria

I HEREBY CERTIFY that on this 30th day of April, 2021, before me, a Notary Public of the State and County aforesaid, personally appeared Reginald Abten, the Co-Chief Executive Officer of Seven Points Agro-Therapeutics, LLC, upon behalf thereof, and gave oath in due form of law that the foregoing Consent Order was his voluntary act and deed.

AS WITNESS, my hand and Notary Seal.

S. Muhammad
Notary Public



My commission expires:

SB537_CPGCCO_UNF

Uploaded by: Dr. Douglas Edwards

Position: UNF



Douglas E. Edwards, President Emerita

Belinda Queen Cunningham Vice President

708 Quarry Avenue, Capitol Heights, MD 20743 • P. 301.350.2362 • C. 301.502.9290 •

E-mail: coalition.central@gmail.com or douglasedwards708@gmail.com

www.thecoalition-central.org

February 19, 2024

Greetings Members of the Maryland General Assembly, Prince George's County Executive Angela S. Alsobrooks, and Members of the Prince George's County Council, including At-Lodge members, we the members of the Coalition of Central Prince George's County Community Organizations, would like to request your indulgence in opposing House Bill 805 and Senate Bill 537 for numerous reasons which we will state below in our collective opposition.

It has been brought to our attention that Senator Brian Feldman (Montgomery County) and Delegate CT Wilson (Charles County) have introduced legislation to allow marijuana dispensaries to open anywhere a liquor store is allowed to operate. Their bills are designed specifically to circumvent current Prince George's County zoning laws regarding where Marijuana businesses can operate. Specifically, the passage of this legislation will allow marijuana dispensaries to open in neighborhood shopping centers, near homes, places of worship, daycares, and schools, and we have seen what liquor stores and tobacco stores can do to a community, so let us not allow the marijuana lobby to do the same to our community.

According to my information, Montgomery County has four (4) cannabis dispensaries, 1) Sweetspot Cannabis Dispensary Olney, 2) RISE Medical Marijuana Dispensary Bethesda, 3) RISE Medical Marijuana Dispensary Silver Spring, and 4) Harvest HC of Rockville Dispensary which includes both medical and recreational cannabis dispensaries. On the other hand, Charles County has three (4) cannabis dispensaries, 1) Dispensary Works, 2) Haven Marijuana Dispensary Maryland, and 3) Spiff Nation Dispensary. It should also be noted that the Charles County Advances Cannabis Reform with New Zoning have set the stage for implementing Maryland's Cannabis Reform Act, following a detailed briefing on zoning.

If House Bill 805 and Senate Bill 537 pass, within Central Prince George's County, what will keep cannabis dispensaries from opening within blocks of each other? Our communities have an overabundance of liquor stores, and these bills would generate that same overabundance of cannabis dispensaries as well, especially in high business areas that are near residential areas, such as shopping centers and strip malls. For example, Warehouse Liquors is located at 7619 Marlboro Pike in Forestville. Freddies Liquors is located at 7700 Marlboro Pike, also in Forestville. If such bills are passed, there could be a cannabis dispensary on either side of both liquor stores and within walking distances of each other. There should not be a rush to allow the availability of cannabis dispensaries to disrupt the wellbeing of the larger community.

We are respectfully asking the Maryland General Assembly, Prince George's County Executive Angela Alsobrooks, the At-Large Council Members, and the County Council to vote against changing the county zoning to allow Marijuana Dispensaries to be placed in the same locations as Liquor Stores.

Best regards,

Douglas E. Edwards (Electronically Signed)

Douglas E. Edwards

President Emeritus & Community Activist

sb 537 restricting the grow of marijuana shops.pdf

Uploaded by: Dwight Jones

Position: UNF

Senate 537 -limiting the development of marijuana shops

As a Vice President of the Ritchie Heights Ritchie Manor Civic Association, a community consisting of 240 single family homes, in Prince Georges County. I am opposing the senate bill 537. I am in favor of the County to restricting the proliferation of marijuana stores/tobacco shops in our community. Currently marijuana stores/tobacco shops have saturated Marlboro Pike, a stretch of county roadway southeast of the District of Columbia city line. In one block we have marijuana stores/tobacco shops in each block and in one case, directly across the street from each other. This is another example of unchecked growth in our county that is having a negative effect on the overall wellness of our communities. Again, I opposed this bill and support our County Council authority to restrict the expansion of these stores/shops.

Thank you. Dwight Jones

testimony cannabis.pdf

Uploaded by: Kimberly Gibson

Position: UNF

Testimony

The 52,000 square foot industrial cannabis warehouse erected at the entrance to my neighborhood, has significantly changed the rural nature of our small town, the one that I had grown up in since birth, the one I had come to love.

I've lived off of the same road for 38 years. I currently live in the home my father was raised in, the one my grandparents built in 1959. This was the reason that I did not move away when I got married, my husband and I felt this quiet road was the perfect place to raise a family. We had dreams of continuing to raise our young children here, but gone are the days of serene quiet, and fresh air. These are treasured qualities I used to enjoy at my property that I will never get back.

There is not a day that goes by that we do not hear the buzzing of air compressor units or smell the stench of marijuana in the air.

There is now an industrial, commercial operation, improperly placed in the critical area.

The warehouse is located on the same tributary where I enjoyed fishing and crabbing with my son. It is less than a half a mile from the farm my husband hunts deer on. It is located in an area where the road is not substantial enough to handle the influx of traffic to the facility. It is located where public water and sewer are not available. How did this happen? Because it was approved as agriculture, and it has now grown to an industrial operation which was initiated in the permitting process under the guise of a proposed greenhouse.

I am not providing this testimony because I am opposed to what marijuana is. I worked as a hospice nurse for 10 years and saw patients benefiting from symptom management with its use. I am giving my testimony because the improperly placed industrial warehouse affects the ability of Abell residents to enjoy their property without being burdened. We never had an opportunity to participate in a public hearing prior to the monstrosity being erected, there were no studies done, no informational sessions, it was not required when it pushed through as "agriculture." And now, any effort on behalf of citizens leaves us with dead end phone calls going back and forth with finger pointing between the County and the State because of the confusion as to who has the authority on these decisions. This needs to be clarified and properly defined.

If we decide we can no longer stay in our homes because of the effects, what financial loss will we suffer because of the decrease in property value? If we stay, how much longer do we endure the burdens placed on us? Who takes the responsibility to uphold our rights as property owners?

The decisions made on these Bills affect the lives of citizens all across the State of Maryland, please don't let yourself be so consumed by the industry that you forget that.

It is critical that the Counties of Maryland be permitted to establish reasonable zoning requirements for these types of facilities. It is only at the County level that the character and nature of that said area can genuinely be represented and protected.

SB537 Cannabis Opposition.pdf

Uploaded by: Lory Ebron

Position: UNF

COMMISSIONERS FOR SOMERSET COUNTY

11916 SOMERSET AVENUE, ROOM 111
PRINCESS ANNE, MARYLAND 21853
TELEPHONE 410-651-0320, FAX 410-651-0366

COMMISSIONERS

CHARLES LAIRD, PRESIDENT
RANDY LAIRD, VICE-PRESIDENT
CRAIG N. MATHIES, SR.
ELDON WILLING
DARRYL K. WEBSTER



COUNTY ADMINISTRATOR
RALPH D. TAYLOR

DEPUTY COUNTY ADMINISTRATOR
ERNEST J. LEATHERBURY, JR.

COUNTY ATTORNEY
KIRK G. SIMPKINS

February 20, 2024

Senator Pamela Beidle, Chair
Senate Finance Committee
3 East
Miller Senate Office Building
Annapolis, Maryland 21401

RE: SB0537 – Cannabis – Licensee Locations – Restrictions- **Letter of Opposition**

Dear Chairwoman Beidle and Committee Members:

The Board of County Commissioners for Somerset County wish to express their opposition regarding Maryland Senate Bill 0537. Effectively this bill undermines the ability our county has to regulate cannabis as we believe is in the best interest for our county.

Our Planning Commission and Department of Technical and Community Services has done extensive research and conducted meetings over the past 5 months for the siting and regulation of cannabis in Somerset County, which was ultimately felt to be best located in our industrially zoned areas. It remains the opinion of the Planning Commission and Somerset County that cannabis is an industrial product and should be sited as such.

Passing this bill would defeat all of the work done by our county to regulate and control cannabis as we see best for our county.

Respectfully,



Charles Laird
President

Cc: Senator Carozza

UNFAVORABLE SB 537.pdf

Uploaded by: Michelle Caracaus Long

Position: UNF

Michelle Caracaus Long
38790 Van Ward Road
Abell, MD 20606
UNFAVORABLE SB 537

Hello, I'm Michelle Caracaus Long. I spoke last week in support of Senate Bill 158 with suggested amendments and shared my personal negative experiences from the cannabis growing and processing facility that established itself a mile away from my home in a critical area. Today I'm here to oppose SB 537 cross-filed with HB 805. Please understand I'm not here as the angry resident using this as my personal forum against cannabis. I'm here to remind you that there are real people, like me, on the end of this bill that are about to be significantly and negatively impacted if this is passed.

First, this bill unfairly supports only the cannabis licensees and cannabis related businesses and dispensaries. Where are the considerations for the people, other businesses, and environment this bill will impact with these proposed zoning and distance alterations? If children and families are the underlying theme for the locations that prohibit dispensaries to be located 500ft from, then why is it acceptable for this bill to allow dispensaries to essentially be zoned for areas closer to their homes? How does this make sense? Which demographic and/or locations will these zoning and distance alterations favor? How will this bill address the increase in crime that other Maryland localities have already seen? Can you guarantee that

these dispensary zoning re-designations won't inadvertently depreciate neighboring home and land values, if not devastate them? These questions can't be answered by this bill because stripping the powers from political subdivisions silences the voices of those who could be heard and that this bill directly impacts.

So let's look at the language in line 9 and 10 for B1. What is the reasonableness standard that will be used for the political subdivision to establish reasonable zoning requirements that doesn't unduly burden a cannabis licensee? I'm sure the term 'reasonable' will be open for the political subdivision to interpret, but that unduly burden clause makes it impossible for any argument that supports "reasonable" zoning requirements to carry any weight or merit against language structured to supersede anything that makes it difficult for cannabis businesses to open and operate.

Additionally, if this bill is passed and allows for outdoor cannabis cultivation that prohibits my county from imposing more restrictive zoning requirements, you have just further shifted the undue burden onto neighboring residents regarding nuisance subsequently depriving us of life, liberty and property without any recourse or due process.

Testimony SB537 2.22.24.pdf

Uploaded by: Patrice Murray

Position: UNF

Patrice Little Murray
15010 Jerimiah Lane
Bowie, Maryland 20721
February 21, 2024

Senate Finance Committee

I am Patrice Little Murray, a lifelong Maryland resident. Thank you for allowing me the time to express my opinions as you consider legislation that will affect my, and ultimately your community.

Today I come in opposition of Senate Bill 537, Cannabis – Licensee Locations – Restrictions. As you will gather, my vote did not count among those in favor of legalizing ‘cannabis’. I feel there are enough vices that have been legalized that effect the wellbeing of, not only the children that are directly exposed to them in their neighborhoods, but those who go to school, scouts, and church, with them. This means my children and yes, your children also.

I have to move beyond the fact that you, as a governing body, did not use your power to stop the legalization of cannabis – and let’s get real – call it what it is – marijuana, because changing the name does not change the outcome. What I have to do today is try to keep it out of my neighborhood.

I oppose this bill because

- ...“UNDULY BURDEN” In my county, appropriate zoning is a requirement. I can’t open a dog pound next to my local grocery store even if we had a local store.
- A political subdivision may not impose... fees or licensees that are burdensome nor establish zoning that “they” feel is unduly burdensome. Yet I cannot have a dog without a license and am required to have them vaccinated. Nor can I drive a truck through the Baltimore tunnels carrying certain flammable liquids.
- My elected representatives can not even prevent license conversion. Which means every smoke/vape/or even gas station would be able to sell marijuana!

I could go on but I think you get where I’m coming from. It looks to me that marijuana licensees would have more rights and the backing of the members of this body than the voters themselves.

I am asking that you consider the effects of this substance, that you consider whom it will harm. I am asking you to think of Your children and the harm it may cause them.

Thank you for your consideration of my comments and for your opposition of SB 537.

Opposition to SB 0537 and HB 0805 Feb 2024 Rose Gu

Uploaded by: Rose Guyther

Position: UNF

My name is Rose Ellen Guyther, 38530 Pleasant Harbor Way, Abell MD 20606

I would like to express my opposition to SB 0537 and HB 0805, specifically to the following provision:

Page 4, lines 6 to 11

**6 (F) A POLITICAL SUBDIVISION MAY NOT ADOPT AN ORDINANCE
7 ESTABLISHING A ZONING REQUIREMENT FOR A LICENSED GROWER
8 CULTIVATING
9 CANNABIS OUTDOORS THAT IS MORE RESTRICTIVE THAN ANY ZONING
10 REQUIREMENTS THAT EXISTED ON JUNE 30, 2023, GOVERNING A HEMP
11 FARM
12 REGISTERED UNDER TITLE 14 OF THE AGRICULTURE ARTICLE IN THE
13 POLITICAL
14 SUBDIVISION.**

Please make every effort to oppose this provision in these bills to ensure they are not enacted including informing your fellow legislators the oppressive burden these two bills would place on the impacted citizens of MARYLAND and I know it is impacting those in St. Mary's County. Please Kill them.

I would invite the lawmakers to spend a week in my home to fully understand what we are living with.

For background.....There has been much controversy with the cannabis business in my area. It is obtrusive and the state would love to have them anywhere.

As there have never been any hemp farms in St. Mary's County prior to 2023, and there have never been any zoning requirements governing hemp farms, the above referenced provision of the said bills prohibits or nullifies any local regulation of outdoor cannabis cultivation. This additional obtrusion is detrimental to the citizens of Maryland.

These bills are a clever attempt to allow Story Cannabis to cultivate cannabis plants outdoors, which will greatly affect me and my community.

Of all of the affronts to the local community surrounding the existing cannabis indoor grow facility in St. Mary's County, the pervasive smell emitted by the facility is perhaps the worst. There is no way for the nearby community to avoid it. It seeps into the air we breathe, inside our homes, and on our property. Outdoor growing of cannabis would exacerbate the affront many times over. Outdoor growing would not even have the benefit of the minimal mitigation of the smell applied to the indoor facility.

Additional work is needed by the State of Maryland to **eliminate smell and reduce noise coming from any and all hemp growing facilities.** It is detrimental to the

citizens of our state to have clean, fresh air in their neighborhoods, and not feel like we live in a beehive from the equipment operations.

Additionally, I can testify that 500 feet is not enough space to minimize the affects of the cannabis industry and especially outdoor growing!! **TWO MILES (from all directions) is more appropriate to allow the grow house to operate and minimize the effects** on any property owners, businesses, schools, etc. I live 1200 feet away from the Story grow house in St Mary's County and the smell is awful. **It takes my breath away and forces me inside.** I can no longer take my 2 mile walk outside, take my bike rides that encompassed 10 to 15 miles of back road riding from my home, or just enjoy sitting in my yard. The smell is awful. The noise is irritating. I have lived here for 40 years, as of May 2024, and taking away my ability to enjoy MY property was something I NEVER thought would occur.

Kill these bills, think first of how the cannabis industry and the citizens can live together, and give the citizens of Maryland back their rights to enjoy their properties.

Associations Between Cannabis Use and Mental Distr

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Original article

Associations Between Cannabis Use and Mental Distress in Young People: A Longitudinal Study

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A B S T R A C T

Purpose: Despite a large number of studies on the relation between cannabis use and mental distress in adolescence, results are inconclusive regarding the nature of this association. The aim of the present study is to expand this body of research by analyzing the within-person association between changes in cannabis use and changes in mental distress among young people.

Methods: We used longitudinal data from a national sample of young people in Norway. The cohort was assessed in 1992 (T1), 1994 (T2), 1999 (T3), and 2005 (T4). The cumulative response rate was 60%. Respondents who participated in all four waves, aged 11–18 years at T1 (N = 1,988) were analyzed. Within-person association between changes in cannabis use and changes in mental distress in terms of symptoms of depression, anxiety, suicidal ideation, and deliberate self-harm were estimated by applying fixed-effects modeling.

Results: For males, an increase in cannabis use from no use to more than 10 times/year was significantly associated with increased risk for anxiety (relative risk [RR]: 1.72, $p = .009$), depressed mood (RR: 1.49, $p < .001$), and suicidal ideation (RR: 3.43, $p = .012$). For females, the corresponding increase in cannabis use yielded an increased risk for anxiety (RR: 1.38, $p = .023$) and suicidal ideation (RR: 2.47, $p = .002$).

Discussion: Increased cannabis use during adolescence and young adulthood seem to increase the risk for symptoms of mental distress. Although the associations appear to be more pronounced among males, it was only for depression that there was a statistically significant gender difference in the association.

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IMPLICATIONS AND CONTRIBUTION

The present study lends support to the hypothesis of an association between cannabis use and mental distress. In men, increasing cannabis use was associated with increased risk for anxiety, depressed mood, and suicidal ideation. In women, increased cannabis use was associated with an increased risk for anxiety and suicidal ideation. The findings from the present study highlight that adolescent cannabis use is an important public health issue.

Many countries have liberalized their cannabis legislation since the millennium shift, and regular cannabis use has become more prevalent in jurisdictions that have legalized the drug [1]. In the European Union, 15.5% of young adults (aged 15–34 years)

report past year cannabis use; in comparison, prevalence in Norway is among the lowest third, with 10.1% past year cannabis users among young adults [2]. In addition, the concentration of the main psychoactive component $\Delta 9$ -tetrahydrocannabinol (THC) of cannabis has escalated [2,3].

Because cannabis may be particularly harmful to individuals whose brain development is in progress [4], studies of adolescents and young adults are important. The present study aims to

Conflicts of interest: The authors have no conflicts of interest to declare.

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expand this body of research by analyzing the association between cannabis use and mental distress, using panel data on young people in the Norwegian general population.

Previous research

The literature on the association between cannabis use and mental health problems is huge. However, as noted by Meier et al. (2020), a large fraction of this research is based on cross-sectional data with their well-known limitations for causal inferences [5], and many studies have assessed clinical samples or other selected groups. However, previous research provides evidence that cannabis use in adolescence is prospectively related to an increased risk of psychotic disorders [6,7].

Associations with later anxiety and depression are less clear. Gobbi and co-workers' (2019) meta-analysis showed that adolescents' use of cannabis was predictive of depression in young adulthood, while there was no statistically significant link to anxiety [8]. Similarly, Shalit and Lev-Ran (2020) reported that associations between cannabis use and anxiety generally seemed to reflect confounding, but their narrative review was not confined to studies of young people [9]. On the other hand, another recent meta-analysis, that included high-quality longitudinal studies of the general youth population, found support for an association between cannabis use and increased risk for anxiety [10]. Regarding adolescent cannabis use as a potential risk factor for later depression, yet another review concluded that "there appears to be some association [...] if there has been an early onset of cannabis use, although current results tend to be contradictory." [11].

The bulk of the studies in the aforementioned meta-analyses and literature reviews mainly relied on diagnostic outcomes. However, less severe mental health problems are also important. Since they are more common, they may contribute to the total burden of cannabis-related harm at least as much as the clinical cases. For example, among European and Canadian adolescents aged 11–15 years, one in four reported feeling nervous, irritable, or having difficulties getting to sleep every week according to the survey Health Behaviour in School-aged Children [12]. Moreover, a systematic review and meta-analysis of the global prevalence of depression and elevated depressive symptoms among adolescents showed that 34% experience elevated symptoms of depression, whereas 8% suffered from major depressive disorder [13].

Three studies of young people are particularly interesting in this context. These studies used panel data to estimate within-person associations and found that cannabis use was significantly associated with depression symptoms [5,14], major depressive disorder, and suicidal ideation [14,15]. The statistical modeling in these studies provides a strong basis for causal inferences because confounding due to time-invariant ("fixed") covariates is eliminated. However, this type of statistical model cannot eliminate confounding due to factors that vary across individuals or over time, and the model can thus be strengthened by including such factors. To our knowledge, no additional general population studies on the associations at issue have relied on such modeling.

There is also some evidence that cannabis use is associated with an increased risk of deliberate self-harm among young people [16–18]. A few other longitudinal studies have also assessed the association between cannabis use and suicidal ideation. Pedersen (2008) found that use of the drug was

prospectively related to suicidal ideation in young adulthood, but not in adolescence [18]. Another longitudinal study reports a statistically significant association between adolescent cannabis use and suicidal ideation among males only [19]. Similar results, with a statistically significant association among males, have been found in the adult population [20].

Moreover, gender-specific analyses on the associations between adolescent cannabis use and anxiety and/or depression in young adulthood show mixed results. A study based on an Australian cohort of adolescents found a statistically significant association between daily cannabis use and anxiety and depression, and the risk was significantly higher among females compared to males [21]. Conversely, a study of African American adolescents found a statistically significant increased risk for depressive symptoms among males who used cannabis, but not for females using cannabis [22].

Underlying mechanisms and the issue of directionality

Various mechanisms underlying the association between cannabis use and mental health problems have been suggested. One starts out from a neurophysiological perspective, suggesting that intake of THC affects brain functions and perhaps interacts with other risk factors in a way that increases the risk of mental health symptoms. There is evidence that extensive use of cannabis high in THC increases the risk for psychosis; there is also evidence of an increased risk for suicide [23]. Another suggested explanation is common risk factors, such as parental mental health problems, affecting both cannabis use and mental distress through either genetics or environment [24]. Hence, studying the association between cannabis use and mental distress using methods that can account for such stable common risk factors is warranted. Yet another suggested pathway is that cannabis use is indirectly associated with mental distress through social mechanisms such as difficulties in the labor market [25] and school failure [26]. In line with this reasoning, it seems important to study the link between cannabis use and mental distress in various settings, for example, also in countries where prevalence is relatively low.

A critical issue in this kind of research concerns the directionality of the relations at issue. There are scattered findings suggesting that the relationship between cannabis use and mental health problems could be due to a reversed association [27,28], which underlies the so-called "self-medication hypothesis" [29]. However, the general conclusion of studies that address this issue is that the causal direction goes from cannabis use to mental distress [5,22,30].

The present study

The overarching aim of the present study is to estimate the association between changes in cannabis use and changes in mental distress during adolescence and young adulthood. Below, we outline the key features of our study, and how these can contribute to a better understanding of the association at issue.

- (1) Although previous longitudinal studies of the association at issue have taken various potential confounders into account, fixed-effects modeling to assess within-person associations provides stronger basis for causal inferences. The model compares each individual to himself or herself between time points. By using this technique, time-stable characteristics of

a person such as genetic factors, family background, and personality traits are controlled for in the analysis, irrespective of whether they are measured or not [31]. To our knowledge, only three previous studies have relied on this technique to estimate the associations between cannabis use and mental health problems [5,14,15].

- (2) Almost all studies in this field use a dichotomous outcome, which may be useful in a clinical setting. However, in epidemiological research, the situation is different, and a dichotomization of, for example, a depression scale is at odds with the contemporary conception of psychopathologies where depressiveness is regarded as a condition that comes in degrees rather than being a discretely delineated diagnostic category [32]. Furthermore, dichotomization yields loss of information, and decrease in statistical power, as pointed out in the methodological literature [33]. Thus, we have retained scales that are continuous as far as possible.
- (3) Extant studies typically estimate the association between cannabis use and mental distress in terms of an odds ratio or relative risk. We will take this a step further by calculating the population-attributable fraction, expressing how large fraction of the outcome at issue that is attributable to cannabis use.
- (4) Most studies report estimates of the association between cannabis use and mental distress for females and males together. However, as outlined above, the association between cannabis use and mental distress may differ between males and females; this is an issue that we will explore.

In this study, we will use data from a population-based cohort with data on cannabis use and mental distress at baseline (in 1992) and follow-up (in 1994, 1999, and 2005) to investigate (1) whether there is an association between changes in cannabis use and changes in mental distress, (2) if possible associations are different for males and females, and (3) how large fraction of the different types of mental distress that is attributable to cannabis use.

Data and Methods

We used data from the Young in Norway Longitudinal Study, which has followed a cohort of young people prospectively over 13 years and cover a broad range of topics (see [34] for a detailed description). The cohort was assessed in 1992 (T1), 1994 (T2), 1999 (T3), and 2005 (T4). The survey at T1 included 8th to 13th graders in 67 schools, and the sample was selected to generate a national representative cross-section of this student population (response rate: 97%). At T2, students who had left their original school received postal questionnaires, while those who were still in their original school filled in questionnaires in the classroom in the presence of a supervising teacher—as they did at T1. Only the latter group achieved a high response rate (92%). Therefore, the subsequent follow-ups were restricted to students who attended the same school at T1 and T2 (i.e., 8th and 11th graders at T1). The vast majority (91%) of these students consented to be traced for future participation in the study, of which 84% responded at T3 and 82% responded at T4. The cumulative response rate was 60%. A study analyzing the attrition in the Young in Norway Longitudinal Study found that, for example, being male, older age, having poor grades, and suburban or urban residency predicted attrition between 1992 (T1) and 2005 (T4) [35]. Our analyses were confined to respondents who

participated in all four waves and who were aged 11–18 years at T1 (N = 1,988).

Ethical approval

The study was conducted in accordance with the National Guidelines for Research Ethics in the Social Sciences and approved by the Norwegian Social Science Data Services (#S-05030).

Key measures

Depressive mood was measured as an additive index based on six items from the Depressive Mood Inventory [36]. The question was: “During the past week, have you not been bothered at all, a little bit bothered, quite bothered, or extremely bothered by some of these things?: (1) Felt too tired to do things; (2) Had trouble sleeping; (3) Felt unhappy, sad, or depressed; (4) Felt hopeless about the future; (5) Felt tense or keyed up; and (6) Worried too much about things. There were four response options: Not bothered at all (coded 0); A little bit bothered (1); Quite bothered (2); and Extremely bothered (3). The reference period was the past week (The internal consistency showed little variation across the four waves; Cronbach’s alpha = 0.774–0.841).

Anxiety was measured as an additive index based on the following three items from the Hopkins Symptoms Check List [37]. The question was: “During the past week, have you not been bothered at all, a little bit bothered, quite bothered, or extremely bothered by some of these things?: (1) Suddenly scared for no reason; (2) Constantly scared or worried; and (3) Nervousness or shakiness inside. The reference period was the past week, and there were the same four response options as for depressive mood (Cronbach’s alpha: 0.679–0.771).

Suicidal ideation was measured by the following item: “[Have you] Had thoughts of ending your life?” The reference period was the past week, and there were the same four response options as for depressive mood and anxiety. The variable was coded 0 (not been bothered at all) to 3 (extremely bothered).

Deliberate self-harm was measured by the question: ‘Have you ever on purpose taken an overdose of pills or in another way tried to hurt yourself?’ Those who responded affirmatively were asked how long it had been since the (most recent) episode of deliberate self-harm. Based on the responses, a variable on the past-year incidence of deliberate self-harm (yes/no) was constructed. This measure captures both suicide attempts and non-suicidal self-inflicted injuries and has been used in previous studies [38].

Cannabis use was measured by the following question: “During the past 12 months, have you used hashish or marijuana?” There were six response options: never (coded 0), once (1), 2 to 5 times (3.5), 6 to 10 times (8), 11 to 50 times (30), and more than 50 times (55). In the analyses, we used a three-level measure: Never; 1–10 times; and 11 times or more.

Time-varying covariates

Assessment year was controlled for by using dummy variables for each assessment year (except the first).

Heavy episodic drinking was measured by the following question: “During the past 12 months, have you had so much to drink that you felt clearly intoxicated?” There were the same six

response options as for Cannabis use: never (coded 0), once (1), 2 to 5 times (3.5), 6 to 10 times (8), 11 to 50 times (30), and more than 50 times (55).

Loneliness was measured as an additive index based on the following four items from the UCLA (University of California, Los Angeles) Loneliness Scale [39]: (1) I feel in tune with the people around me; (2) I can find companionship when I want it; (3) No one really knows me very well; and (4) People are around me but not with me. There were four response options, ranging from Never (1) to Often (4) about how often the respondent felt this way.

All measures were available for all four waves, except for deliberate self-harm, which was missing for T1.

Statistical analyses

We estimated the effect of changes in cannabis use on changes in the various outcomes by applying fixed-effects modeling [31] which is briefly described below, taking depression as an example. The following model depicts the relation at issue:

$$D_{it} = \beta_0 + \beta_1 C_{it} + U_i + \varepsilon_{it} \quad (1)$$

D is the measure of depression of individual i during wave t , C is cannabis use, and U represents unobserved factors that do not vary across time within individuals. The parameter of interest is β_1 , capturing the effect of cannabis on depression. A potential estimation problem is the possible correlation between U and C ; that is, depression and cannabis use are likely affected by stable common unobserved factors, such as genetic setup and personality traits. Estimation of model (1) on cross-sectional data will thus probably yield a biased estimate of β_1 . As a remedy, we will use the longitudinal feature of our data to cancel out the distorting impact of U . First, we calculated the average of the time-varying factors for each individual across waves:

$$\bar{D}_i = \beta_0 + \beta_1 \bar{C}_i + U_i + \bar{\varepsilon}_i \quad (2)$$

(2) Next, we subtract eq. 2 from eq. 1, which yields the fixed-effects model:

$$D_{it} - \bar{D}_i = \beta_1 (C_{it} - \bar{C}_i) + (\varepsilon_{it} - \bar{\varepsilon}_i) \quad (3)$$

As can be seen, U is eliminated by this operation, and thereby that specific source of bias. Thus, this method implies that the effect estimate of cannabis use is entirely driven by the temporal variance that is induced by change over time. Although the fixed-effects technique eliminates the risk for bias caused by covariates that are stable within individuals across time, it does not remedy confounding that is due to time-varying factors that affect the outcome as well as the explanatory variable. The design can thus be strengthened by including time-varying covariates. We considered two variables as potential covariates: heavy episodic drinking and loneliness. Previous research suggests that heavy episodic drinking may be linked to mental illness [40,41] as well as cannabis use [42]. Likewise, loneliness is likely to affect the risk of mental illness [43,44], and possibly substance use, including cannabis use [45]. In addition, we controlled for time (assessment year) to eliminate bias from unobserved variables

that change over time but are constant over individuals, such as, for example, the fact that all respondents are getting older.

We used Poisson regression with robust standard errors [46] to estimate the associations between cannabis use and the various outcomes. The resultant effect estimate, relative risk, is easy to interpret and serves as input in the computation of the population attributable fraction (PAF), which was computed following standard procedure [47]:

$$PAF = \frac{p^*(RR - 1)}{p^*(RR - 1) + 1} \quad (4)$$

Where p is the proportion that is exposed to the risk factor and RR denotes the relative risk. The RR is defined as:

$$RR = \frac{\text{Incidence rate among the exposed}}{\text{Incidence rate among the unexposed}} \quad (5)$$

The PAF is often multiplied by 100, and then expresses by how many percent the incidence rate would decrease in the population if the exposure were eliminated.

To compare relative risks between females and males, we computed the ratio of relative risks (RRR):

$$RRR = \frac{RR_{males}}{RR_{females}} \quad (6)$$

To determine whether an RRR was statistically different from 1, the RR for males and the RR for females, along with their 95% confidence intervals were used as input to calculate the z-score and its p value. This was accomplished through the online resource: Calculator for comparing two estimated relative risk (hutchon.net) (Described in [48]).

One of the study aims is to assess whether the associations between cannabis use and mental distress differ between females and males. Methodologically, there are two basic ways to approach this issue: (1) to analyze the whole sample and include an interaction term (gender*cannabis use) and (2) to analyze females and males separately, and test whether the RR s for females and males are significantly different from each other (following the procedure described above). We applied a combination of the two approaches; that is, we first analyzed the whole sample, including an interaction term. If these analyses would suggest a statistical difference between females and males in the association between cannabis use and mental distress, we would proceed to the gender-specific analyses. This follows the recommendation of the methodological literature (e.g., [49]); finding a significant interaction term should be followed by subgroup analyses. One reason not to base the estimate of the effect of the predictor (cannabis use) on the outcome from the model including the interaction term is the following: the predictor and the interaction term will be strongly correlated (as the predictor is a constituent part of the interaction term), and the ensuing collinearity will yield interpretational problems by the interaction and predictor main effects being confounded [49].

The statistical analyses were conducted using Stata (version 17).

Results

Table 1 presents descriptive statistics. Cannabis use was more common in men, increased from T1 to T2 and peaked at T3

Table 1
Descriptive statistics

	Males (n = 836)				Females (n = 1,152)			
	T1	T2	T3	T4	T1	T2	T3	T4
Age at T1 M (SD)	14.42 (1.65)				14.51 (1.70)			
Cannabis use past 12 months. (%)	3.35	5.98	19.50	16.87	2.43	4.77	12.59	7.99
0 times (%)	96.65	94.02	80.50	83.13	97.57	95.23	87.41	92.01
1–10 times (%)	2.87	5.02	6.82	11.60	2.00	4.08	10.07	6.08
11+ times (%)	0.48	0.96	6.80	5.26	0.43	0.69	2.52	1.91
Depression, Mean (SD)	3.59 (2.93)	3.45 (2.97)	3.61 (3.22)	3.32 (3.24)	4.73 (3.39)	5.31 (3.47)	4.75 (3.69)	3.70 (3.37)
Anxiety, Mean (SD)	0.72 (1.11)	0.65 (1.06)	0.78 (1.31)	0.75 (1.29)	1.26 (1.54)	1.30 (1.55)	1.12 (1.55)	0.85 (1.37)
Suicidal ideation Mean (SD)	1.16 (0.54)	1.10 (0.39)	1.08 (0.32)	1.07 (0.31)	1.23 (0.63)	1.18 (0.56)	1.07 (0.34)	1.05 (0.27)
DSH, (%) y	–	2.39	3.47	2.87	–	5.90	8.16	4.08
HED, frequency past 12 months, Mean (SD)	4.34 (10.75)	7.42 (12.92)	20.38 (17.11)	17.43 (16.72)	4.06 (9.83)	6.65 (11.95)	13.92 (15.69)	10.62 (14.10)

DSH = deliberate self-harm; HED = heavy episodic drinking; SD = standard deviation.

among both men and women. Symptoms of depression, anxiety, and deliberate self-harm were more common in women. Levels of anxiety and depression were fairly stable across all four waves, whereas deliberate self-harm clearly peaked in T3; the increase between T2 and T3 was most pronounced in women. Suicidal ideation showed a slight decrease between T1 and T4 and means were similar between men and women. Like cannabis use, heavy episodic drinking was more common in men and increased from T1 to T2 and peaked at T3 among both men and women. Table 2 presents the prevalence of increased, decreased, or unchanged cannabis use, symptoms of depression, anxiety, suicidal ideation, and deliberate self-harm between T2 and T3 and between T3 and T4. The prevalence of increased cannabis use was highest between T2 and T3.

Initial analyses showed that cannabis use was not associated with any of the outcomes during the transition between T1 and T2. Subsequent analyses were thus performed on data for the three last waves, T2 to T4. Furthermore, fixed-effects modeling revealed that heavy episodic drinking had a positive and statistically significant ($p < .05$) association with cannabis use and all outcomes except suicidal ideation in females (Table 3). Thus, heavy episodic drinking was included in all models except for suicidal ideation in females. Loneliness was significantly, and positively associated with all outcomes, but not with cannabis use, and was thus not included as a covariate.

As noted above, we first analyzed the whole sample estimating models including the interaction term (gender*cannabis use), where females are coded 0 and males coded 1. Table 4 (Panel A) shows that the interaction term was statistically significant in three of the four outcomes (i.e., all except deliberate self-harm). For the sake of consistency, we proceeded to gender

Table 2
Prevalence of changes in cannabis use and the indicators of mental distress across time points

	Change from T2 to T3 (%)			Change from T3 to T4 (%)		
	Decrease	Stable	Increase	Decrease	Stable	Increase
Cannabis use	3.0	82.3	14.7	11.7	81.1	7.2
Depressed mood	47.6	13.3	39.0	50.3	16.2	33.5
Anxiety	30.9	41.9	27.2	30.7	47.7	21.6
Suicidal ideation	8.8	87.6	3.6	4.6	92.0	3.4
Deliberate self-harm	2.7	92.9	4.4	4.5	93.6	1.9

specific for all four outcomes. For all outcomes except deliberate self-harm, the value of the interaction term was more than 1, suggesting an excess risk for men.

Estimation of the fixed-effects models for males (Table 5) showed that increased cannabis use was significantly related to all outcomes except for deliberate self-harm. For depressed mood and suicidal ideation, it was only an increase from no use to the highest exposure level that had a statistically significant effect. For anxiety an increase from no use to either 1–10 times or 11+ times were significant. For example, males who increased their use from no use to 11+ times there was an increase in anxiety of 72%. Conversely, it means that those who reduced their use of cannabis from 11+ times to no use had reduced their risk of mental distress in terms of depression, anxiety, and suicidal ideation. For females (Table 6), increased cannabis use was only significantly associated to anxiety and suicidal ideation. Females who went from no cannabis use to 11+ times had an estimated 38% higher risk for increased symptoms of anxiety and 2.47 times higher risk for suicidal ideation. There was no significant association between changes in cannabis use and deliberate self-harm, neither among men nor among women.

Now turning to the PAFs, we note that it is less than 1% for anxiety and about 3% for suicidal ideation in females. For males, we observe the highest magnitude for suicidal ideation (10%), followed by anxiety (6%), and somewhat lower for depressed mood (about 2%).

As detailed above, we compared the estimates for females and males through computing the RRR to find out whether the gender differences were statistically significant. Although we generally found stronger associations between changes in cannabis use and mental distress for males than for females, with the exception for deliberate self-harm (Table 4, Panel B), only the effect on depression was significantly different between males and females (RRR = 1.41, $p = .005$).

Discussion

In the present study, we assessed the within-person association between changes in cannabis use and changes in various types of mental distress during adolescence and early adulthood, using fixed-effects modeling. We found that increased cannabis use was associated with increased risk for symptoms of anxiety and suicidal ideation among both males and females. Among

Table 3

Bivariate analysis of the associations among covariates, mental distress, and cannabis use. Based on fixed-effects models estimated on three waves spanning the period 1994–2005

Outcome	Predictor	Males			95% CI		Females			95% CI	
		RR	SE	p	Lo.	Up.	RR	SE	p	Lo.	Up.
Depressed mood	Loneliness	1.10	0.01	< .001	1.08	1.13	1.09	0.01	< .001	1.07	1.11
	HED	1.01	0.00	< .001	1.00	1.01	1.01	0.00	< .001	1.00	1.01
Anxiety	Loneliness	1.16	0.03	< .001	1.10	1.21	1.15	0.02	< .001	1.13	1.18
	HED	1.01	0.00	< .001	1.01	1.02	1.01	0.00	.001	1.00	1.01
Suicidal ideation	Loneliness	1.24	0.08	< .001	1.10	1.40	1.26	0.07	< .001	1.14	1.40
	HED	1.02	0.01	.001	1.01	1.03	1.01	0.01	.190	1.00	1.02
DSH	Loneliness	1.36	0.09	< .001	1.19	1.56	1.06	0.04	.149	0.98	1.13
	HED	1.01	0.01	.183	0.99	1.03	1.01	0.00	.009	1.00	1.02
Cannabis use	Loneliness	1.04	0.03	.171	0.98	1.11	1.03	0.04	.526	0.95	1.12
Cannabis use	HED	1.03	0.00	< .001	1.02	1.03	1.03	0.00	< .001	1.03	1.04

DSH = deliberate self-harm; HED = heavy episodic drinking; RR = relative risk.

males, we also found a significant association between changes in cannabis use and changes in depressive mood.

The significant associations that we found between cannabis use and suicidal ideation for both males and females are by and large consistent with previous findings pertaining to the general youth population [8,18]. Yet some previous findings suggest associations only for males [19,20]. Regarding the association between cannabis use and anxiety, previous findings are inconclusive. Some recent studies of the association in question suggest no significant relationship between cannabis use and anxiety [8,9], whereas other studies are in line with our findings of a significant association [10]. Moreover, previous findings pertaining to the general youth population suggest an association between cannabis use and deliberate self-harm [17,18], while our results did not give any support for such an association. A possible explanation could be that the measure of deliberate self-harm was dichotomous in our study, which decreases statistical power. The association between cannabis use and depression was the only one where we also found an unequivocally significant difference in the estimates between females and males. This finding is in line with previous conclusions from some US studies [5,22]. Our study cannot establish why the association between cannabis use and depression differs between males and females but lends support for the idea that the link between cannabis use and depression is moderated by gender [22]. The outcome based on the interaction term (cannabis use*gender) suggested significantly different estimates between females and males also with respect to the association between cannabis use and the two outcomes anxiety and suicidal ideation. However, this outcome was not supported by the relative risk ratios, possibly suggesting a lower power in the latter test. We examined potential gender differences in the association between cannabis use and mental distress by performing

Table 4

Panel A: estimates of interaction term (Cannabis*gender); Panel B: ratio of relative risks men versus women (RRR)

	Panel A Interaction term	SE	p	Panel B RRR	z	p
Depressed mood	1.15	0.07	.018	1.41	2.57	.005
Anxiety	1.65	0.40	.041	1.39	0.58	.282
Deliberate self-harm	1.30	0.14	.011	1.25	0.88	.189
Suicidal ideation	0.92	0.26	.751	0.82	-0.29	.382

separate analyses for females and males. However, in future research, the alternative of estimating a multiplicative interaction term should be considered, because such an approach has the potential of yielding greater statistical power compared to subgroup analyses.

Since we used fixed-effect modeling, our results strengthen the assumption of a within-person association between cannabis use and mental distress in terms of anxiety and suicidal behavior, and for men also symptoms of depression. These findings are in line with previously reported results from studies using the same statistical approach [5,14,15].

Because the model allows us to account for time-invariant characteristics of individuals, our findings indicate that the associations we observed are not due to common risk factors such as family background or genetics.

Furthermore, we calculated the PAF for each outcome, giving us an estimation of how large proportion of the outcome at issue that is attributable to cannabis use. Our results showed the highest PAF for suicidal ideation in men (9.7%) which indicates that one of 10 of the cases of increased suicidal ideation in men would have been avoided in the absence of cannabis use. Although the PAFs were lower for anxiety and depression, our findings indicate that cannabis use might play a role in the prevalence of mental distress in adolescents.

Table 5

Estimated risk ratios of within-person associations between changes in cannabis use on changes in mental distress. Based on fixed-effects models estimated on three waves spanning the period 1994–2005. Control for heavy episodic drinking and assessment year. Males

Outcome	Cannabis use	RR	SE	p	95% CI		PAF (%)
					Lower	Upper	
Depressed mood	0 (ref)	1					
	1 to 10	1.05	0.06	.428	0.94	1.17	
	11+	1.49	0.15	< .001	1.23	1.74	2.17
Anxiety	0 (ref)	1					
	1 to 10	1.28	0.13	.020	1.04	1.57	2.74
	11+	1.72	0.36	.009	1.14	2.56	3.14 5.88
Suicidal ideation	0 (ref)	1					
	1 to 10	1.49	0.40	.138	0.88	2.53	
	11+	3.43	1.68	.012	1.31	8.81	9.82
Deliberate self-harm	0 (ref)	1					
	1 to 10	1.39	0.50	.361	0.67	2.70	
	11+	1.28	0.76	.675	0.32	3.53	

PAF = population attributable fraction; RR = relative risk.

Table 6

Estimated risk ratios of within-person associations between changes in cannabis use on changes in mental distress. Based on fixed-effects models estimated on three waves spanning the period 1994–2005. Control for heavy episodic drinking (except for the model for suicidal ideation) and assessment year. Females

Outcome	Cannabis use	RR	SE	p	95% CI		PAF (%)
					Lower	Upper	
Depressed mood	0 (ref)	1					
	1 to 10	1.09	0.06	.112	0.97	1.19	
	11+	1.06	0.10	.541	0.87	1.28	
Anxiety	0 (ref)	1					
	1 to 10	1.04	0.09	.613	0.88	1.22	
	11+	1.38	0.19	.023	1.04	1.81	0.70
Suicidal ideation	0 (ref)	1					
	1 to 10	1.19	0.36	.561	0.44	1.98	
	11+	2.47	0.73	.002	1.32	4.16	2.64
Deliberate self-harm	0 (ref)	1					
	1 to 10	1.40	0.35	.173	0.92	2.39	
	11+	1.56	0.39	.076	0.96	2.56	

PAF = population attributable fraction; RR = relative risk.

Strengths and limitations

There are some limitations to our study that need to be mentioned. Our data were collected between 1992 and 2005, and there is evidence from many countries that the concentration of the main psychoactive component (THC) of cannabis has increased substantially since then [2,3]. The link between cannabis use and mental health problems may have been affected accordingly. Indeed, a recent study of US adults showed that the association between cannabis use and depression strengthened markedly from 2005 to 2016 [50]. It is thus possible that cannabis use has grown in importance as a risk factor for mental distress since the time our data were collected.

Another limitation is that we applied a crude frequency measure of cannabis use. No data on the *quantity* of consumption were available, and it has been found that the amount consumed makes a difference as regards cannabis-related problems—above and beyond the frequency of use [51]. Furthermore, it cannot be ruled out that the panel attrition of 40% may have an over-representation of people with characteristics of importance for the present study.

Most previous studies in the current field focus on one indicator of poor mental health, for example, depression. One strength of our study is that it provides a more comprehensive assessment of the potential effect of cannabis use on mental distress by including a broad range of outcomes. Another strength of the present study is that our data allowed us to treat depressive mood, anxiety, and suicidal ideation as conditions that come in degrees rather than dichotomous outcomes. It is well known that dichotomization yields loss of information and decrease in statistical power [30]. Hence, a limitation is that deliberate self-harm was dichotomously measured. Furthermore, our analyses were based on the assumption that cannabis use increases the risk of mental distress, and not the other way around. Although this assumption seems to be well corroborated [5,22,30], others have failed to draw definite conclusions on the direction of the association [15]; thus it cannot be excluded that mental health influences cannabis use. As pointed out in the methodological literature, despite several advantages, fixed-effects modeling cannot determine the direction of causality [52].

However, a major strength of our study is indeed the analytical approach. We analyzed the data through fixed-effects modeling. Surprisingly, few previous studies have used this technique, although it is a safeguard against bias due to confounders that are temporarily stable. However, the technique is not a remedy against time-dynamic confounders. We did control for time and heavy episodic drinking, but it cannot be precluded that our estimates are biased due to other time-varying factors affecting cannabis use as well as mental distress that we were unable to control for. Hence, our results should be interpreted with some caution. By performing separate analyses for females and males, we contributed to the meager literature on gender differences in the association between cannabis use and mental distress. Although we found gender differences in the estimated cannabis effects on mental distress, it should be noted that only one of them (the effect on depression) was statistically significant, signaling a genuine absence of gender differences or insufficient power.

The findings from the present study are important in light of the recent reports of higher levels of THC in today's cannabis products [2,3] and highlight that adolescent cannabis use is an important public health issue. Moreover, our results suggested differences between males and females regarding the association between cannabis use and mental distress, in particular symptoms of depression. Hence, an important task for future research is to further probe the suggested gender differences and to uncover the mechanisms underlying such differences.

Acknowledgments

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We wish to thank Professor Tilmann von Soest for granting access to the Young in Norway data.

The study was conducted in accordance with the National Guidelines for Research Ethics in the Social Sciences and approved by the Norwegian Social Science Data Services.

Author Contributions: Each author certifies that their contribution to this work meets the standards of the International Committee of Medical Journal Editors.

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UNFAVORABLE - SB0537 - 2024 Cannabis – Licensee Lo

Uploaded by: Susan McCutchen

Position: UNF

February 22, 2024

Written Testimony - Unfavorable SB0537 – Cannabis – Licensee Locations – Restrictions
(Cross-file HB0805)

Chair Beidle, Vice Chair Klausmeier, and Members of the Finance Committee,

My name is Susan McCutchen. I am speaking in opposition to SB0537 – Cannabis – Licensee Locations - Restrictions, sponsored by Senator Feldman. I live in Bladensburg, one of the four Port Towns.

How much more can we importune environmental justice communities ravaged by highways to nowhere, pollution that causes health issues for residents, food deserts, and an overabundance of liquor stores, tobacco shops, and cheap retail? Why not pile on licensed cannabis dispensaries and certain licensed cannabis growers in those very same locations and add to the factors that consistently threaten our communities and our residents? How are we expected to thrive and improve our quality of life amidst liquor, tobacco, and marijuana businesses in lieu of economic development to establish quality grocery stores, community retail, restaurants, and recreational spaces for healthy living?

These state bills would strip zoning decisions for locations of marijuana dispensaries from our local and county officials and preclude input from residents. Communities deserve to be allowed in on the planning because we live here.

So often bills are submitted with the seemingly practical purpose of promoting positive sources of business income in communities. But these potentially money-making enterprises come with a human cost. Do you want to live and raise a family in a community trading heavily in liquor, tobacco, cannabis growing and dispensing, and cheap retail stores? Do you want these establishments next door to you and have them predominate your community? Instead of encouraging development of these enterprises in our communities, why not look to help us to a better way of life – and establish them on available set-aside county and state land where they can prosper just as well without discomfiting our residents and the livable communities we are trying to build.

Thank you for this opportunity to provide testimony unfavorable to HB0170.

Sincerely,

Susan R. McCutchen

5404 Spring Road, Bladensburg, Maryland
Tel: 301-699-9035

1-Nuriddin Opposition to SB.537 - Marijuana rights

Uploaded by: Terry Nuriddin

Position: UNF

February 20, 2024

TO: Maryland Senate Finance Committee

FR: Mrs. Terry M. Nuriddin.15201 Johnstone Lane, Bowie, MD 20721

RE: Opposition to 2024 Senate Bill 537: Cannabis – Licensee Locations – Restrictions

cc: Public Files

Preface to Our Concerns: In respect to the proposed 2024 Maryland Legislative Session, my family believes it is essential for lawmakers to create legislation that protects and promotes the health and well-being of their citizenry.

1. We oppose the 2024 Senate Bill 537: Cannabis – Licensee Locations – Restrictions.
2. We interpret this proposed legislation as a **“Bill of Rights”** for the marijuana industry with a blatant disregard for our human rights and community concerns.
3. Reference to “political subdivisions” (communities, cities, and counties) as to what they cannot do, is actually a mere cover as to what **“We The People,”** cannot do. If we oppose the close proximity of these undignified businesses to our community establishments, e.g., schools, daycares, places-of-worship, grocery stores, **“We The People,”** cannot petition our elected officials to change the content of this bill if it becomes law, even though we vote to put you elected officials in office.
4. Senate Bill 537 is bad public policy as it is intended to compel those citizens who do not want a marijuana lifestyle woven into their daily fabric of family living to accept and live under such circumstances.
5. These manmade laws are contrary to the natural rights of all citizens to **“Life, Liberty, and the Pursuit of Happiness,”** for you have intentionally designed your laws to overlay our wholesome residential life with a recreational drug-culture. You are creating laws to unnecessary harm the well-being of community life for residents, especially our children, seniors, and handicapped neighbors.
6. It is shameful that our lawmakers willingly affront our common decency for global financial and export markets. SB.537 disrespects the dignity of the individual and reflects a moral disregard for community life in Maryland. This bill increases the probability of increased crime and endangers innocent lives. It creates an unlimited free run of marijuana industry on our communities.
7. This unnecessary forced intersection of vice and entertainment venues into daily family life is a historical enslavement weapon and your bill is designed to legally enslave marijuana users and non-users into an abyss of addictive behavior and the societal consequences thereof.
8. There is no moral value or direct benefit to an individual or community using or selling marijuana. **“We The People,”** want politicians to create health and safety laws that create a **“Town Made Safe”** for all Maryland citizens.

Position Statement_SB 0537 Cannabis Lincesee Locat

Uploaded by: Jordan BaucumColbert

Position: INFO



POSITION STATEMENT

Informational

Bill: SB 0537 Cannabis – Licensee Locations – Restrictions

Position: Information

Date: February 22, 2024

Contact: Debra Borden, General Counsel

Jordan Baucum Colbert, Government Affairs Liaison

Dear Chair Pamela Beidle and Vice Chair Katherine Klausmeier,

The Maryland-National Capital Park and Planning Commission (M-NCPPC or “the Commission”) has not voted to take a position on this bill. However, Commission staff has prepared an informational statement. The Commission respectfully requests that the Finance committee consider this information and include it in the record.

What the Bill Does. This bill seeks to instruct local jurisdictions on how they may regulate cannabis licensees via zoning.

Background Information. Section 36-405(b)(1) of Alcoholic Beverages & Cannabis Article of the Maryland Code (“Article”) restricts counties from imposing zoning restrictions on cannabis licensees that would constitute an “undue burden.” This bill defines undue burden as imposing more restrictive regulations on cannabis licenses than set forth in Section 36–410 of the Article. Section 36-410 is the section of the State’s cannabis law that provides setbacks for cannabis dispensaries. (Section 36-410 can be reviewed in the bill text.)

Sample – Impact on Prince George’s County Law. This bill would revise Section 36-410 in a few notable ways. *See* Prince George’s specific implications:

- **Sec. 36-410** currently allows political subdivisions to reduce the setbacks for cannabis dispensaries in Sec. 36-410(b),(c), but is silent as to whether these setbacks may be increased. This bill clarifies that local jurisdictions may not increase the setbacks. Similarly, Prince George’s County Council (“County Council”) initially considered increasing the setbacks contained in Sec. 36-410(b),(c) through zoning in Council Bill CB-70-2023, but revised the bill to conform with the setbacks contained in Sec. 36-410(b),(c). While Prince George’s County Council did not move CB-70-2023 forward, the County Council has submitted two proposed cannabis zoning bills to M-NCPPC that contain setbacks for cannabis dispensaries that match Sec. 36-410(b),(c).
- This bill adds places of worship to the list of locations from which cannabis dispensaries must setback by at least 500’. The Prince George’s County Zoning Ordinance (“Zoning Ordinance”) does not require a setback from places of worship for Medical Cannabis Dispensaries nor has such a setback been contemplated in any of the cannabis zoning bills proposed by the County Council.
- It is important to note that Section 36-410 does not require cannabis dispensaries to setback from residential uses/residentially zoned properties. Reading this with the proposed definition of undue burden, it can be interpreted to mean the Prince George’s County Council cannot require setbacks from residential zones/uses for cannabis dispensaries. The Zoning Ordinance currently requires a 300-foot setback from residential zones for all medical cannabis uses. The County Council’s proposed cannabis zoning bills would carry this setback forward to new recreational cannabis uses.
- This bill adds that local jurisdictions may not impose requirements on cannabis dispensaries beyond “zoning requirements for a retail dealer licensed under” the Alcoholic Beverages & Cannabis Article of the Maryland Code. This is a reference to retailers licensed to sell beer, wine, and/or liquor. We recommend the sponsor conduct further analysis to determine the implications of this for drafting cannabis zoning regulations. It is important to note that there is no separate liquor store or alcoholic beverage retail use in the Zoning Ordinance, and several other uses are permitted to include alcohol sales, including grocery stores and convenience stores. Therefore, developing zoning regulations for cannabis dispensaries based on the existing zoning regulations for retailers licensed to sell beer, wine, and/or liquor would present practical challenges.
- This bill adds that Cannabis Growers (outdoor) may not be subject to more restrictive zoning requirements for hemp farms that were effective on June 30th 2023. The Zoning Ordinance did not contain separate hemp farm regulations as of June 30th 2023 nor does it today. Therefore, hemp farms are arguably encompassed by the general “agriculture” use under the Zoning Ordinance. The County Council’s proposed cannabis zoning bills would treat growers of recreational cannabis similarly to the existing medical cannabis grower and/or processor use in the Zoning Ordinance. Compared to the existing medical cannabis grower and/or

processor use, agriculture is permitted in more zones, including large lot-residential zones, and is subject to fewer additional regulations.

Principal Use Table for Rural and Agricultural and Residential Base Zones

Table 27-5101(c): Principal Use Table for Rural and Agricultural, and Residential Base Zones													
P = Permitted by Right SE = Allowed only with approval of a Special Exception X = Prohibited													
Principal Use Category	Principal Use Type	Rural and Agricultural Base Zones			Residential Base Zones								Use-Specific Standards
		ROS	AG	AR	RE	RR	RSF-95	RSF-65	RSF-A	RMF-12	RMF-20	RMF-48	
Rural and Agricultural Uses													
Agriculture/ Forestry Uses	Agriculture	P	P	P	P	P	X	X	X	X	X	X	
	Community garden	P	P	P	P	P	P	P	P	P	P	P	27-5102(b)(1)(A)
	Forestry	P	P	P	P	P	X	X	X	X	X	X	
	Keeping of horses or ponies	P	P	P	P	P	X	X	X	X	X	X	
	Medical cannabis grower and/or processor	X	P	P	X	X	X	X	X	X	X	X	27-5102(b)(1)(B)
	Nursery and Garden Center	SE	SE	SE	SE	SE	SE	SE	SE	SE	SE	SE	Refer to special exception standards
	Urban agriculture	P	P	P	P	P	P	P	P	P	P	P	27-5102(b)(1)(C)