

MARYLAND CANNABIS PUBLIC HEALTH ADVISORY COUNCIL

Deondra P. Asike, M.D.

February 25, 2025

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The Honorable C. T. Wilson
Chair, House Economic Matters Committee
Room 231, House Office Building
Annapolis, MD 21401-1991

RE: HB 1377 - Cannabis - Advertising - Prohibited Locations (Equity in Cannabis Advertising Act) - Letter of Opposition

Dear Chair Wilson and Committee members:

The Maryland Cannabis Public Health Advisory Council (the Council) is submitting this letter of opposition for **House Bill (HB) 1377 - Cannabis - Advertising - Prohibited Locations (Equity in Cannabis Advertising Act)**. HB 1377 repeals Maryland's current ban on outdoor cannabis advertising and instead proposes a 500-foot advertising exclusionary zone around substance use treatment facilities and select child focused locations, including schools, childcare centers, playgrounds, and public parks.

The Council opposes HB 1377 because of the risk it presents for Maryland's youth. Research shows that exposure to cannabis advertising is associated with higher average use, intentions to use, positive expectancies about cannabis use, and negative consequences in children.¹ This is troubling because cannabis use in youth is associated with psychosis, anxiety, depression, impaired cognitive development, and other serious health challenges.^{2,3}

Public health data regarding the impact of adult-use cannabis is still sparse, but over 70 years of public health data demonstrates the harms caused by youth exposure to tobacco advertising.^{4,5,6} These harms are further compounded in communities of color where tobacco advertisements are concentrated.⁷ HB 1377 is presented as a bill to address social equity through cannabis advertising, however, this bill will perpetuate existing health outcome disparities among vulnerable communities.

The proposed 500-foot exclusionary zone is not supported by evidence of being protective for youth from exposure to cannabis billboards for two reasons. First, it assumes that minors never travel more than 500-feet from their school, playground, library and other protected location. This is patently false. Second, the bill leaves out many locations frequented by Maryland's children, such as museums, places of worship, and sports facilities. The Council believes maintaining the current ban on billboards is essential.

We note that 15 states (AL, DE, FL, HI, KY, MD, MN, MS, MT, NJ, NY, OH, SD, UT, and VA) prohibit the use of billboards for cannabis advertising because of the risk they present.⁸ Current law permits advertising by Maryland's cannabis industry that has allowed cumulative legal cannabis sales of \$1.1 billion from July 2023 through December 2024.⁹ The current cannabis outdoor advertising ban prevents youth exposure while allowing the cannabis industry to prosper.

HB 1377 contains three provisions that replicate existing laws relating to marketing cannabis and so do not, in fact, strengthen public health protections. Advertising to minors¹⁰ and making false or misleading statements in advertisements¹¹ are already prohibited by law. Making claims regarding the health benefits of a product in a cannabis advertisement is already severely limited. Current law requires such claims to be "supported by competent and reliable scientific evidence and include information on the most serious and most common side effects or risks associated with the use of cannabis."¹² To date, no health claim has appeared in a cannabis advertisement in Maryland.

Maryland has a law in place to safely allow the legal cannabis industry to grow while protecting youth from the harmful effects of outdoor cannabis advertising. The Council respectfully urges this Committee to issue an unfavorable report on HB 1377.

Sincerely,

A handwritten signature in black ink, appearing to read "DAsike", written in a cursive style.

Deondra Asike, M.D.
Chair, Maryland Cannabis Public Health Advisory Council

References:

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4. Meng CFY, Bannon O, Laverty AA, et al Association between tobacco advertising policies, health warning mandates and adolescents' exposure to tobacco advertising and warning labels in 80 countries *Tobacco Control* Published Online First: 09 January 2025. doi: 10.1136/tc-2024-058786
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6. National Cancer Institute. (2020). Influence of tobacco marketing on smoking behavior (Report No. M19_7). U.S. Department of Health and Human Services. https://cancercontrol.cancer.gov/sites/default/files/2020-06/m19_7.pdf
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8. Ala. Admin. Code r. 538-X-4.17; 4 Del. Admin. Code 5001-10.0; Fla. Stat. Ann. § 381.986; Haw. Code. R. §§ 11-850-141, 145; 915 Ky. Admin. Reg. 1:090; MD Code, Alcoholic Beverages, § 36-903; Minn. Stat. § 342.64; 15 Miss. Code R. § 22-9- 9.2.1; Mont. Admin. R. 42.39.123; N.J. Admin. Code § 17:30–17.2; N.Y. Comp. Codes R. & Regs. Tit. 9, §§ 129.3, 129.4; Ohio Admin. Code 3796:5-7-01; S.D. Admin. R. 44:90:10:14.01; Utah Code Section 4-41a-403; Va. Code Ann. § 4.1-1401
9. MCA Medical and Adult-Use Cannabis Data Dashboard, Maryland Cannabis Administration, available at <https://mmcc.maryland.gov/Pages/Data-Dashboard.aspx>.
10. MD Code, Alcoholic Beverages, § 36-903
11. MD Code, Commercial Law, § 13-301-320
12. MD Code, Alcoholic Beverages, § 36-902