

Public Health and Prevention + LCB Discussion on high THC: Notes from part one June 3, 2024
17 attendees from LCB and external partner agencies and associations were present.

Opening remarks

Kristen provided a quick level-setting to walk through the purpose and deliverables for the discussions and summarized the discussions that have taken place to date.

Board Member Jim Vollendroff offered further context and guidance for the discussions, underscoring that conversations around prohibition are less productive than those that aim to both allow businesses to thrive and protect youth and other vulnerable populations. He outlined the following populations and there was general agreement by the call participants that these are the groups to center efforts around:

1. Youth and young adults
2. People in recovery
3. Pregnant and parenting individuals
4. Older adults
5. People living with mental health disorders like schizophrenia and depression

During the course of the discussion, medical cannabis patients were also raised as a vulnerable population that should be centered in these discussions.

Jim also explained the strategy to coordinate with legislators pre-session and to utilize the Research Program.

From partners

Participants were asked to share what they are currently working on in the space of high THC, what they need from LCB, and to describe what they would be doing if they had more resources. These notes summarize what we heard overall:

Partners working at the local level actively talk to community members and provide presentations about the harms of high THC. These partners spoke to the sense of frustration that education is only one component and can feel inadequate when these products don't have warning labels, some aren't labeled as THC at all (e.g. school confiscated vapes) and the social norms and misperceptions about these products are pervasive.

Possible action related to these concerns:

1. Increase literacy around the products for consumers.
 - a. Center culturally appropriate strategies
2. Enact stricter labeling requirements (warnings, clearly mark the product contains THC)
3. Increased campaigns to educate consumers and youth/young adults; emphasis on moderation and harm reduction (start low, go slow); keep in mind that rural consumers have less access to safer driving alternatives.
4. Strengthen strategies that prohibit youth access
 - a. Lockbox distribution
 - b. Education to parents/guardians to shift social norm

Partners working in the policy space

spoke about the importance of building relationships with folks in the cannabis industry to make progress on this topic. They also reiterated that “the industry” is not a monolith.

These partners also expressed that not all policymakers and decision makers understand the basics about cannabis, much less the nuances and science behind the issue of high THC products.

State agency partners

Consideration for messaging when preventing fentanyl and other opioids that don’t unintentionally shift use to high THC as an alternative. Also important to understand that many legislators and the broader public are more concerned about fentanyl than cannabis.

General consensus among all on the call that regardless of where the distinction is made for “high THC,” all can agree that a line should be drawn to restrict youth access to high THC products.

Traffic fatalities are at the highest point in two decades:

- 810 traffic deaths in 2023- most since 1990
- Impairment, speed, distraction, and lack of seatbelt involved in 75% of fatalities.
- Majority of cannabis + alcohol drivers are male; 1/3 are aged 16-25.

Possible action related to these concerns:

1. Proceed with plan to have parallel conversations with industry and then a hybrid conversation later this summer.
2. Better explore ways to influence the buying habits of consumers.
3. Consider how to implement new policy in ways that increase or maintain current revenue levels to mitigate impact on state revenue overall.
4. Develop and distribute a factsheet for policy makers about cannabis and specifically high THC impact. (Underway via WHY-Cannabinoid Workgroup)
5. Develop a succinct explanation of how DCA funds are currently utilized by state agencies.

Possible action related to these concerns:

1. Within medical cannabis:
 - a. Consider how to protect access to high THC products by medical cannabis patients.
 - b. Related to that, consider the context of what is high THC beyond percentage, specifically when dose administration occurs as prescribed among patient populations.
 - c. Tailor education for patient population and prescribing medical providers.
2. Determine what is high THC
 - a. Consider ways to identify risk of high THC products within the structure of retail locations, labels, signage, point of sale materials, etc.
3. Explore creating a new license category for the producer/processors that is specific to high THC products.
4. Explore limits on advertising high THC products.
5. Support DOH in the development of budtender education.
6. Support DOH in the revamping of consumer education campaign.
 - a. Social norms and perceived norms of high THC, driving while impaired (better drivers), providing to your kids, risk of combined alcohol and cannabis use, locking up cannabis products, etc.

Research needs raised:

- Explore the knowledge and attitudes within the producer, processor, and retailer audience to better understand their relationship to and intent behind high THC products. Better understand why these products are being developed in the first place.
- Explore with cannabis retail owners and budtenders what they currently do and are willing/interested in doing to keep customers safe when using these products.
- Need improved data access to understand the distribution of products by audiences and the product sale data.
- Next phase of consumer education research is beginning soon, partners should send recommended questions to LCB Research Program.

Need to further define:

- High THC threshold
 - The Network for PH Law did an assessment of THC limits in 2023:
<https://www.networkforphl.org/wp-content/uploads/2022/11/THC-limits-for-Adult-Use-Cannabis-Products.pdf>
- If product variation influences risk of high THC to consumer
- There are a lot of unknown byproducts/excipients in d-8 products. Because of that, it's important to distinguish between products with i-502 and the d-8 that is found in smoke shops.
- Prohibition – what is considered prohibition? Is there a level of prohibition that is generally acceptable?
- Who is the audience among those who consume high THC products. Not all consumers are at risk of harm.

Additional concerns/topics raised:

- Be mindful that with less concentrated products, other things get added.
- Currently, prolific advertising to easily access medical card
- Safe disposal is an area that still needs to be explored.
- Self-titration poses concerns where intoxication is immediate and can be more dangerous.
 - Dr. Cuttler's lab at WSU. She found that participants who self-administered flower joints and vaporized concentrates took a different number of hits but titrated to the same level of subjective high.
- Youth accessing products, particularly vapes, that appear to originate outside of the WA market. Possibly outside of the state altogether, purchased via internet.
- Seek to learn from other states and Canada. Kristen will follow up with California team to get an update on their status and will reach out to partners in Vermont to learn more about their structure.
- Within schools, supporting restorative discipline practices instead of traditional penalty systems.

Summary of potential activities discussed

Guiding considerations:

- Keep health equity and vulnerable populations centered in all discussions.
- Where relevant, consult a university economics lab to weigh in on recommended strategies.

The following list is ordered in terms of volume and depth of interest by partners.

Public education	Activity	<ul style="list-style-type: none"> • Social norms and perceived norms of high THC, driving while impaired (better drivers), providing to your kids, risk of combined alcohol and cannabis use, locking up cannabis products, etc. • Emphasis on moderation and harm reduction (start low, go slow); keep in mind that rural consumers have less access to safer driving alternatives.
Budtender education	Activity Rule/ legislative change if required	<ul style="list-style-type: none"> • Rely on research that has been done to date and conduct further research • Collaborate with efforts currently underway (DOH).
Packaging and/or labeling changes	Rule/ legislative change	<ul style="list-style-type: none"> • Too many products confiscated at schools are not clearly labeled. • Too many consumers don't understand what percentage of THC they are consuming, and/or they are seeking highest THC as a proxy for high quality. Modifications to the label could shift the norm and increase consumer education.
Increased research	Activity	<ul style="list-style-type: none"> • About products, existing data analysis, AND consumer behavior • See research section above.
Tiered tax structure	Legislative change	<ul style="list-style-type: none"> • Consider how to make this revenue generating or neutral. Likely not realistic to propose a model that loses revenue. • Must first define point of THC percentage to regulate. • Need to contextualize medicinal patients.
Age-gating	Legislative change	<ul style="list-style-type: none"> • In terms of reducing traffic fatalities, the highest risk drivers are 18-24 so an age gate at 25 would address that in part. • This option wasn't raised by many partners and was not thoroughly discussed on 6/3.
THC % cap	Legislative change	<ul style="list-style-type: none"> • Must first define point of THC percentage to regulate. • Need to contextualize medicinal patients. • This was not discussed on 6/3.
Structural changes in retail stores	Rule/ legislative change depending on approach	This was not discussed at 6/3 partner call specifically. However, the idea behind this is to shift the customer experience so they are able to purchase products using information about smell as opposed to THC content on the label. Partners did discuss at length the need to shift consumer norms away from THC value.
Advertising restrictions	Legislative change	The idea is that norms and perception of harm are influenced by advertising and other messaging. Restricting the promotion of high THC products could influence norms in a positive way.
Develop new licensing structure	Legislative change	Create new license structure for producers exclusive to high THC products. Would allow stricter requirements for these licensees and would separate these products within the system.