



Legalisation of non-medical cannabis in Canada: will supply regulations effectively serve public health?

A major social and health policy experiment will begin in Canada on July 1, 2018: the legalisation of non-medical cannabis.¹ This major national cannabis policy reform, which is unique in the G20, has been framed by the fundamental objective to protect and improve cannabis-related public health and safety.¹

The prospective success of achieving this goal is an open question, as indicated by emerging evidence from other jurisdictions undergoing legalisation experiments.² Although much attention has been on possible adverse outcomes related to use (eg, use in young people, impaired driving, and brain and mental health harms), the possible effects of cannabis legalisation will depend on many implementation details, including effective regulation of cannabis production and retail distribution.³ This regulation constitutes a complex challenge, for several reasons, especially in the Canadian context. On one hand, there are obvious good reasons to restrict cannabis production and distribution as tightly as possible for the benefits of limiting consumption and related harms. At the same time, the public health and safety effects of legalisation will crucially hinge on its success in effectively shifting users from illegal to legal distribution environments, with the latter offering products that are quality controlled and predictable, and as low risk as possible.

However, conditions for legalised cannabis production and distribution are not being developed on neutral grounds in Canada. Rather, they are being built in the long-existing context of both flourishing black markets and extensive supply structures for medical cannabis, including hundreds of illegal dispensaries across Canada, which have evolved to expand their cannabis distribution far beyond supply for therapeutic purposes.⁴ Furthermore, jurisdictional challenges exist: although cannabis legalisation in Canada is principally enabled by federal legislation, many of its key practical details, especially regarding retail distribution, will be defined by provincial regulations, possibly creating lateral and vertical inconsistencies or tensions.

Some of these tensions are already emerging or present. Even before legislation of non-medical cannabis, a vast and rapidly growing landscape of (currently >60)

licensed producers of cannabis exist and are functioning under Canada's national medical cannabis distribution regime.⁵ This industry expects production of non-medical cannabis to be its primary future business and profit source. On this basis, the existing commercial cannabis industry is keen to keep its future marketplace and products as unencumbered as possible from regulatory restrictions, including those focusing on product types, advertising and promotion, and restrictions on sales—all of which are factors that influence use and subsequent harm outcomes, as ample evidence from alcohol and tobacco control shows.^{6,7}

Regulations for recreational cannabis retail distribution in Ontario, Canada's most populous province, propose to restrict distribution under a public monopoly and to operate a limited number of government-controlled outlets (similar to, but separate from the provincially-owned alcohol retail monopoly).⁸ However, these plans overlook the possible regulation and integration of the many existent private community-storefront cannabis dispensaries, which could therefore continue to operate illegally in competition with state-run outlets. Other provinces are still developing their cannabis retail distribution schemes, which might evolve to be different from Ontario's and, for example, provide to include private retail outlets.

Supply provisions for legislation of non-medical cannabis in Canada comprise another distinct element. The federal cannabis legalisation bill includes provisions for home-growing of up to four cannabis plants per adult household in private homes. Such provisions would be extremely difficult to monitor and enforce, and so could allow many (including underage) people access to mainly unregulated cannabis products, and also expose many non-users to the adverse consequences of cannabis growing and use in domestic environments.

As extensive experiences from other fields show, the restrictions around production and retail distribution of psychoactive products for recreational consumption strongly influence population-level use and health outcomes.^{7,9} Empirical evidence on these fronts in the cannabis arena is scarce, but includes (rather conflicting)

experiences. In the USA, commercialised approaches to distribution of legalised cannabis have been associated with a variety of public health-relevant problems.² In Uruguay, a starkly restricted system for distribution of legal cannabis (eg, including user registration and restricted product and distribution options) has been rejected by many users, thus lowering its potential for achievement of optimal public health benefits.¹⁰

Effective regulation of cannabis supply and distribution constitutes a pivotal determinant of the success of cannabis legalisation towards public health outcomes. Regulations must strike a meaningful balance between tightly restricting products and availability, while simultaneously creating a legal supply environment that is appealing and accessible for consumers to actively embrace and utilise. Whether existing legalisation regimes have yet found that balance is an open question, and it remains to be seen whether the proposed plans for Canada will succeed. These emerging lessons are also relevant for other jurisdictions contemplating similar fundamental cannabis policy reforms.

Benedikt Fischer

Institute for Mental Health Policy Research, Centre for Addiction and Mental Health (CAMH), Toronto, ON M5S 2S1, Canada; Department of Psychiatry, Institute of Medical Science, and Centre for Criminology & Sociolegal Studies University of Toronto, Toronto, ON, Canada; Centre for Applied Research in Mental Health and Addiction, Faculty of Health Sciences, Simon Fraser University, Vancouver, BC, Canada; and Department of Psychiatry, Federal University of São Paulo (UNIFESP), São Paulo, Brazil
 benedikt.fischer@utoronto.ca

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