Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

Released: February 13, 2024

To: Medical Cannabis Policy Advisory Board

From: Trevor Eckhoff, policy analyst, Utah Department of Health and Human

Services (DHHS), Center for Medical Cannabis

Subject: Informational memo re: public education on medical cannabis

Introduction

Public education on medical cannabis is a multifaceted topic that can be presented by various parties to different groups of people. Legality, eligibility, safety, and efficacy are major themes of medical cannabis education efforts. Public agencies, medical groups, medical cannabis businesses, and educational institutions are common bodies that engage in medical cannabis education.

This memo explores existing and past public education efforts and materials from DHHS and the Utah Department of Agriculture and Food (UDAF) and other states' cannabis public education initiatives.

Medical cannabis public education in Utah

DHHS and UDAF are the 2 regulatory agencies that oversee the Utah medical cannabis program. UDAF is statutorily tasked with regulating production establishments and pharmacies, or "from seed to sale" operations. DHHS is tasked with regulating medical providers and facilitating patient registration and renewal.

The UDAF Industrial Hemp and Medical Cannabis Division does not actively engage in medical cannabis public education at this time. The nature of UDAF's regulatory role over licensees does not provide the department as many opportunities to engage with the public when compared to DHHS. UDAF released a <u>YouTube video</u> last year where Division Director Brandon Forsyth and Deputy Division Director Cody James explain their department's role in the medical cannabis program.

Medical Cannabis Policy Advisory Board

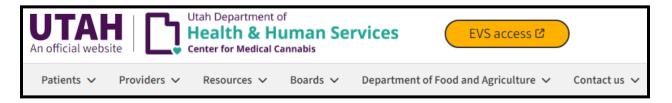
BOARD AGENDA: 2/20/24

ITEM: 8

Because the DHHS Center for Medical Cannabis works directly with providers and patients, it publishes more education resources than UDAF. DHHS Policy 06-01 defines public education as "an effort to educate, promote, raise awareness, or build recognition of a health and human services topic or problem." The DHHS Center for Medical Cannabis upholds this policy definition when designing and implementing medical cannabis education on their website, posting on social media, and by encouraging patients to talk to their medical providers or a medical cannabis pharmacist.

Medical cannabis public education: DHHS Center for Medical Cannabis website

The <u>DHHS Center for Medical Cannabis website</u> maintains numerous resources for patients and providers to better educate themselves on a variety of medical cannabis topics. The header of the website is **below**.



Electronic Verification

System (EVS)

Medical cannabis
pharmacy locations

Find a provider

Frequently asked questions

Utah medical cannabis

Program data

Program news

Resource library

Medical cannabis visit cost website

Medical cannabis guidance documents

Medical cannabis verification forms The *Resources* drop down menu, presented on the **left**, provides options including a tab entitled "*Resource library*." The *Patients* drop down menu also has a tab entitled "*Patient resources*." The tabs lead to different pages with resources. A commonly used resource is this <u>patient guide</u>.

The website also advertises how to sign-up for a quarterly newsletter on the main page. The quarterly newsletter covers 6 major topics: program updates, upcoming meetings, medical cannabis education, research and data, operations, and resources. The "medical cannabis education" section covers different topics in each newsletter. The past 3 newsletters

Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

included renewing your medical cannabis card, transporting medical cannabis, and understanding a medical cannabis product fact panel. 7,401 individuals received the latest newsletter in January 2024.

DHHS Center for Medical Cannabis is currently working with the DHHS Public Affairs and Education Program to update the website's language accessibility, facilitating easier understanding across education levels and the ability to translate the website text into multiple languages.

DHHS Center for Medical Cannabis social media use for medical cannabis public education

DHHS maintains a single social media account for the entire department on each social media platform, such as Facebook, Instagram, LinkedIn, etc. The DHHS Center for Medical Cannabis and other DHHS offices may not create their own social media accounts. Exceptions to this are very rare. The DHHS Center for Medical Cannabis uses the DHHS social media channels, including Facebook, Instagram, LinkedIn, and X, to provide public education material about the medical cannabis program, such as the steps to get a medical cannabis card or which conditions qualify for medical cannabis use. However, when posting on social media, DHHS policy states that "DHHS does not endorse specific products, brands, or companies in communications, including websites, press releases, and social media channels."

Social media posts typically have target audiences, which can be the general public or specific groups.

- One example of a social media post for the general public is <u>an Instagram</u> reel showing how to get a medical cannabis card in 5 steps.
- For a specific group example, the DHHS Center for Medical Cannabis recently worked with the DHHS Office of Primary Care and Rural Health to promote the ability of rural providers to recommend medical cannabis as a qualified medical provider or a limited medical provider. This was promoted in a blast

Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

email to rural health care stakeholders, on social media, and on the DHHS website.

DHHS Center for Medical Cannabis medical cannabis targeted education and presentations

The DHHS Center for Medical Cannabis also provides education opportunities to medical providers and other professional groups, such as law enforcement. Here are 2 examples:

- The DHHS Center for Medical Cannabis' Medical Cannabis Outreach Specialist, Sarah Dash, <u>wrote a program overview article</u> for the 2nd issue of the Utah Academy of Family Physicians Journal in November 2023.
- In 2022, the DHHS Center for Medical Cannabis worked with the Utah Medical Association to publish an article about the limited medical provider program in their magazine, *Utah Physician*.

Professional organizations <u>can also request a DHHS Center for Medical Cannabis</u> <u>speaker</u> to give a presentation on the medical cannabis program. The DHHS Center for Medical Cannabis contracts with Matt McIff, MD to provide presentations to medical societies. DHHS Center for Medical Cannabis staff give presentations to other entities. 12 presentations were given in 2023.

The DHHS Center for Medical Cannabis is working with the University of Utah Center for Medical Cannabis Research on production and dissemination of evidence-based educational materials. These materials will include 3 videos planned for production later this year and will cover the following:

- 1. How to talk to a healthcare provider about medical cannabis
- 2. How to talk to your patients about medical cannabis
- 3. How to talk to a medical cannabis pharmacist

Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

Public education in other states

Adult use cannabis public education

As a medical-only state, the Utah program naturally does not engage in the same types of cannabis public education campaigns that adult use, also known as recreational use, states do. Adult use states often have different themes in their public education efforts regarding cannabis. Adult use states often diversify their public education into 3 subjects:

- 1. The legality of cannabis use and safe consumption;
- 2. Promotion of the legal market to combat the illicit market; and
- 3. Harmful effects of cannabis use, particularly on minors.

Below are examples of how some adult use states implement each kind of these education priorities.

1. Maine's <u>Safe Storage for ME</u> program. Launched in January 2024, the Maine <u>Office of Cannabis Policy is promoting</u> its supply of free lockable bags provided to 222 medical and adult use dispensaries around the state. Along with the bags, the office provides pamphlets highlighting safe storage practices and important reminders for taking edibles.







Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

Left: a free storage bag social media graphic

Right: 2 flyers discussing secure storage and edible basics.

2. California's promotion of the legal market. The California Department of Cannabis Control has conducted multiple public education campaigns that emphasize economic vitality and human interest stories in cannabis. In 2019, the CA Department of Cannabis Control started its "#weedwise" campaign to promote cannabis purchases at licensed businesses with tested products. In 2020, "This is California Cannabis" promoted the state's legal cannabis cultivation market through sharing stories of cannabis cultivators and their journey in the industry, along with a state-created toolkit for industry members.







Top: 2 infographics encouraging purchase from the legal California market **Bottom:** an example billboard promoting a licensed cannabis cultivator.

Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

3. Washington state combating youth cannabis use. Washington has channeled significant resources towards preventing underage cannabis consumption. The WA Department of Health, which does not regulate recreational cannabis, discourages youth cannabis use through their Cannabis Prevention and Education Program on youcanwa.org. They also refer individuals to 2 other websites: starttalkingnow.org managed by the Washington Health Care Authority, and learnaboutcannabiswa.org managed by the University of Washington Addictions, Drug & Alcohol Institute. The former aims to convince parents to talk to their children about the negative impacts of cannabis use as both teens and adults, while the latter provides studies and data on the health effects of cannabis in teens and adults.





Left: a four-square infographic from the YOU CAN campaign discouraging teen use of cannabis

Right: a social media post encouraging parents to talk to their children about marijuana.

Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

Because adult use cannabis is not legal in Utah, these examples may not fully apply to a medical-only program. Because states with recreational programs classify cannabis as a taxed commodity, their public education campaigns primarily focus on safe use and harm reduction.

Medical cannabis public education

A review of other medical-only states demonstrated varying approaches to public education and resources on medical cannabis. Generally, more mature cannabis markets offer more educational resources and conduct formal education campaigns. Smaller, younger programs often provide fewer educational resources. This may occur if they do not have the staff or resources to dedicate to patient, provider, or public education.

The most common medical cannabis education efforts in medical-only states appear to be limited to program basics prescribed by law. Few medical-only states appear to promote their program or offer details on treatment guidelines. This may be because medical-only program communication is targeted towards patients, while adult use programs target the general public.

However, some medical cannabis programs have been successful in increasing their public-facing education. 3 examples below include Florida, Minnesota, and New York.

Florida legalized medical cannabis in 2016 and requires its Department of Health to continuously conduct the "Statewide Cannabis and Medical Marijuana Education and Illicit Use Prevention Campaign."

- Statute requires this campaign to address the following 4 topics:
 - o (1) the legal requirements for illicit use and possession;
 - (2) safe use of marijuana, including preventing access by persons other than qualified patients, particularly children;
 - (3) the short-term and long-term health effects of cannabis use, particularly on minors; and

Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

 (4) other cannabis-related education determined by the department to be necessary to the public health and safety.

- The <u>2023 annual report</u> details campaign activities such as 41 different presentations to various groups around the state, campaign one-pagers, instructional guides, weekly stakeholder updates, and resources for specific audiences. Activities are conducted through website, print, broadcast, and social media channels.
- The most accessible resource is <u>"Know the Facts" educational one-pagers</u>
 which provide concise and informative information on specific topics such as
 legal use, safe storage, edibles, and health effects. The website also offers
 program <u>brochures</u> and <u>posters</u>.

Qualifying conditions Eligible patients Use the search tool Medical marijuana is available to To find a qualified physician, or It is the responsibility of a to see if your current physician permanent or seasonal Florida qualified physician to diagnose residents that are diagnosed patients with a qualifying is qualified, use the Medical with a qualifying medical medical condition and determine Marijuana Qualified Physician condition. if medical marijuana is an Search tool. appropriate treatment. **Find an MMTC** Get an ID card Know the Facts: Qualified patients and caregivers Medical marijuana may only be **Legal Use** purchased at a licensed Medical are required to have a Medical Marijuana Use Registry ID card Marijuana Treatment Centerto purchase and be in possession either at a dispensing location or of medical marijuana. via delivery. KnowTheFactsMMJ.com 800.808.9580 OMMU Office of MEDICAL Horida HFAITH Store it safely **Use it privately Keep it in Florida** Keep medical marijuana out of Although medical marijuana is Qualified patients can use children's reach and sightavailable in Florida, it remains medical marijuana at home or on private property. Public use preferably in a medication lock federally illegal. Because of this, box-and put it away after is illegal, except for low-THC you can't take it in or out of every use. cannabis. the state.

Above: a one-page graphic detailing brief, important information about legal use of medical cannabis in Florida.

Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

Minnesota legalized medical cannabis in 2014 and adult use cannabis in 2023. They maintain information sheets, brochures, patient-reported effects, and other valuable resources for patients, providers, and the public.

- The Department of Health <u>publishes one-page information sheets</u> in multiple languages that provide essential information on topics such as patient and caregiver enrollment, health care practitioner registration, and public safety questions.
- <u>Patient guide</u> and <u>caregiver guide</u> brochures are available and <u>can be</u> <u>ordered</u> from the Department of Health.



Above: one side of a <u>Patient Guide brochure</u> produced and distributed by the Minnesota Department of Health. **Below:** the other side of the brochure, detailing who can and how to become a patient.

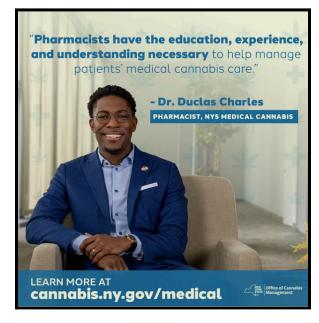
Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8



New York legalized medical cannabis in 2014 and adult use cannabis in 2021. They are currently conducting a \$160,000 bilingual <u>digital advertising campaign</u> "highlighting the potential benefits of medical cannabis and improvements to the Empire State's Medical Cannabis Program," <u>according to a press release</u>.





Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

Above: 2 graphics promoting the New York medical cannabis program.

On the home page of the New York state medical cannabis program, there is a graphic promoting reasons to join the program.



Above: a graphic on the home page of the New York state medical cannabis program website.

Limitations on cannabis public education

Public agencies are limited in what educational material and campaigns they can publish or engage in for many reasons, particularly when it comes to cannabis.

1. Promote evidence-based information. A public agency must provide clear and evidence-based information when educating the public. Using evidence

Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

based information includes providing information from reputable organizations while avoiding incomplete, subjective, or outdated information. The nature of cannabis' quasi-legality, restrained scientific and medical research, and unique effects are considerable barriers for agencies tasked with facilitating public health and safety. An entity tasked with public service could unintentionally cause harm if it were to authoritatively or unilaterally declare conclusions on topics of ongoing debate and scientific scrutiny.

2. Trust and confidence in public health agencies can be difficult to establish. Patients often turn to their medical providers, friends, and the internet to gather information on cannabis. Preliminary results from a University of Utah Center for Medical Cannabis Research survey of 191 medical cannabis patients indicated low reliance on information provided by the DHHS Center for Medical Cannabis. Trust in pharmacy medical providers and recommending medical providers was considerably higher. The data from this survey indicates that there may be certain types of education that is better communicated by medical providers to patients rather than if DHHS provides education to patients directly.

Information Source	Trust/Strong Trust (%)	Reliance on Information (%)
Dispensary Pharmacists	90.1	56.5
Card-Issuing Medical Providers	88.5	45.5
State MC Program (Center for Medical Cannabis)	62.3	17.8
- riend/Peer	64.9	38.2
nternet/Google	29.8	28.8

Medical Cannabis Policy Advisory Board

BOARD AGENDA: 2/20/24

ITEM: 8

3. Regulators are not advertisers. The majority of cannabis-regulating agencies are statutorily tasked with program implementation and enforcement, not promotion, per se. In medical-only states, cannabis is not a commodity, but a highly regulated medical product. Medical providers are responsible for determining if cannabis is an appropriate medicine for a patient. Generally, the role of cannabis regulators is to carry out their statutory duties and facilitate access to cannabis while making sure the public and consumers have access to safe products.

Conclusion

Medical cannabis public education is a multilayered topic with contextual factors. In general, medical-only states do not provide the same types of cannabis education as adult use states. There are a few medical-only states that conduct bona fide education campaigns, whether optionally or as required by their state statute.

The DHHS Center for Medical Cannabis publishes resources, gives presentations about the program, and occasionally posts on DHHS social media. When compared to other medical-only states, the Utah program appears to provide more patient and provider-focused resources than many. However, it is noteworthy that the Center for Medical Cannabis Research survey indicated that patients trust and rely on their medical providers more than certain types of medical cannabis education provided by the DHHS Center for Medical Cannabis. Streamlining resource access through simplification, reorganization, and promotion may help boost the number of active and prospective patients who value the DHHS Center for Medical Cannabis' information.