

The Center for Local, State, and Urban Policy

Gerald R. Ford School of Public Policy >> University of Michigan

Michigan Public
Policy Survey September 2018

Michigan local government leaders' views on medical and recreational marijuana

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This report presents information from Michigan's local government officials regarding the status of medical marijuana facilities in their jurisdictions as of spring 2018, as well as officials' opinions on the impacts of medical marijuana on local communities. In addition, the report looks at local officials' support for or opposition to legalizing recreational marijuana. These findings are based on statewide surveys of local government leaders in the Spring 2018 wave of the Michigan Public Policy Survey (MPPS).

>> The Michigan Public Policy Survey (MPPS) is a census survey of all 1,856 general purpose local governments in Michigan conducted by the Center for Local, State, and Urban Policy (CLOSUP) at the University of Michigan in partnership with the Michigan Municipal League, Michigan Townships Association, and Michigan Association of Counties. The MPPS investigates local officials' opinions and perspectives on a variety of important public policy issues. Respondents for the Spring 2018 wave of the MPPS include county administrators, board chairs, and clerks; city mayors, managers, and clerks; village presidents, managers, and clerks; and township supervisors, managers, and clerks from 1,372 jurisdictions across the state.

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Key Findings:

- As of spring 2018, three-quarters (75%) of Michigan cities, villages, and townships statewide report they have chosen to prohibit medical marijuana facilities, while just 8% report "opting in" to allow such facilities in their jurisdiction under Michigan's Medical Marijuana Facilities Licensing Act (MMFLA).
 - » Among Michigan's largest jurisdictions, 14% say they have opted in, compared to just 6% of the smallest jurisdictions.
 - » Among jurisdictions that have opted in, three-quarters (77%) say they have amended, or will amend, their land use zoning ordinance to regulate these facilities.
- Overall, 17% of jurisdictions report experience with medical marijuana facilities in their jurisdiction, either currently (10%) or in the past (7%).
 - » By contrast, 69% say there have never been such facilities in their jurisdiction, and none have been proposed or planned for the future.
 - » Another 5% of jurisdictions have never had facilities in the past but report that some new facilities are proposed or planned.
- When it comes to allowing medical marijuana facilities in the jurisdiction, most local officials believe there is overall opposition among their jurisdiction's Board or Council, residents, and chief law enforcement officer. Meanwhile, only 17% of local leaders support allowing facilities themselves, while 65% oppose this.
- Officials from 42% of all local jurisdictions statewide report seeing some problems related to medical marijuana in their community, while 21% say their jurisdiction has seen benefits related to medical marijuana.
 - » Compared to jurisdictions that have never had medical marijuana facilities, officials from jurisdictions with facilities either now or in the past report experiencing both more problems (55% compared to 38% in places with no facilities) and more benefits (28% versus 19%).
- Only 21% of local officials support legalizing recreational marijuana, and this is significantly lower than the 61% of Michigan residents who expressed support on a recent public opinion survey.
 - » Lower support among officials than residents remains true even when looking by partisan identification and by age category, two important factors related to citizen support of legalizing recreational marijuana.

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Background

Under the federal Controlled Substances Act, marijuana is illegal and is treated as a schedule I drug, meaning it has no medical value. However, since 1996, when California became the first state to legalize medical marijuana, a total of 31 states have legalized or decriminalized the use of marijuana for people with serious medical conditions. In November 2008, Michigan became the 13th state to legalize medical marijuana, as voters passed the Michigan Medical Marihuana Initiative. This allowed for people with certain medical conditions to possess and use marijuana¹ and was implemented under the Michigan Medical Marihuana Act (MMMA). Under the MMMA, the only legal way for patients to obtain medical marijuana was from individual registered caregivers.² Subsequently, dispensaries selling marijuana to certified patients opened in jurisdictions across the state, but in 2013 the Michigan State Supreme Court ruled that such dispensaries were illegal.³ However, not all local jurisdictions chose to strictly enforce the state or federal law, and some dispensaries remained open after this ruling.

To address this, and other gaps in the MMMA, the Michigan legislature passed the Medical Marihuana Facilities Licensing Act (MMFLA) in 2016. This law created a licensing and regulatory structure giving Michigan's local governments authority to regulate commercial medical marijuana facilities.⁴ The MMFLA authorized a number of types of facilities, including growers, processors, provisioning centers (also known as dispensaries), secure transporters, and safety compliance facilities. Furthermore, Michigan's Department of Licensing and Regulatory Affairs (LARA) established a set of administrative rules to regulate those facilities.

Beginning on December 15, 2017, Michigan cities, villages, and townships could "opt in" under the MMFLA and allow medical marijuana facilities to operate in their jurisdiction by enacting a facilities licensing ordinance. However, because facilities cannot open unless individual jurisdictions have actively opted in, local governments have the ability to block medical marijuana in their communities simply by taking no action to formally opt in, or they can also explicitly vote to "opt out." While cities, villages, and townships have primary authority over whether to opt in or out of the MMFLA, county governments can also play a role. As of 2017, over one-third of Michigan counties report that they manage land use zoning for at least some of their constituent townships.⁵ While these counties cannot make a decision to opt in to allowing medical marijuana facilities within the county, they can choose not to zone for or permit types of medical marijuana facilities, which can affect the ability of county-zoned townships within their boundaries to authorize facilities within the local jurisdiction.⁶

Meanwhile, in 2012, the first two states in the nation—Colorado and Washington—legalized the sale and use of recreational marijuana. Since then, six other states and Washington, D.C. have legalized or decriminalized some recreational use of marijuana.⁷ On a local level, municipalities across the U.S. have voted to decriminalize marijuana (or lower the priority level for law enforcement), including some local jurisdictions in Michigan.⁸ In November 2018, Michigan voters will decide on the Michigan Regulation and Taxation of Marijuana Act, a ballot initiative to legalize and regulate recreational marijuana statewide.

On the Spring 2018 MPPS, local officials across Michigan were asked about their jurisdiction's approach to allowing medical marijuana facilities under the MMFLA, as well as about their experiences with medical marijuana more generally. The survey also asked local officials about their support for or opposition to legalization of recreational marijuana in general.



Most local jurisdictions have chosen to prohibit medical marijuana facilities

As of spring 2018, three-quarters of Michigan's local governments statewide report that they have decided to prohibit medical marijuana facilities in their jurisdiction. Among these, 29% report they have passed a resolution to formally "opt out" of the MMFLA, while 46% chose to take no action, which has the effect of opting out (see *Figure 1a*). Meanwhile, only 8% of Michigan cities, villages, and townships report having passed a formal ordinance to "opt in" to allow medical marijuana facilities in their jurisdiction. The remaining 16% report they have not made a decision either way, with 9% currently discussing the issue, and 7% not yet having discussed it. [Note: Under the MMFLA, counties cannot make a decision to "opt in" or "opt out" for any city, township, or village within the county, although they may regulate medical marijuana facilities through a county land use zoning ordinance that may apply to some constituent jurisdictions within the county.]

As shown in *Figure 1b*, Michigan's largest jurisdictions (those with more than 30,000 residents) are the most likely to report opting in as of spring 2018, with 14% saying they have done so, compared to just 6% of the smallest jurisdictions (those with fewer than 1,500 residents). At the same time, though, the largest jurisdictions are also the most likely to report being undecided, with 23% saying they are currently discussing the issue, and 4% saying they have not yet discussed the issue.

There are also regional differences in how local governments are currently approaching the MMFLA. Officials from jurisdictions in Southwest Michigan (13%) and the Upper Peninsula (10%) are the most likely to report opting in, compared to only 4% of jurisdictions in the Northern Lower Peninsula and West Central Michigan (see *Figure 1c*).

Figure 1a

Michigan local jurisdictions' approaches to the MMFLA (among cities, villages, and townships), by jurisdiction type

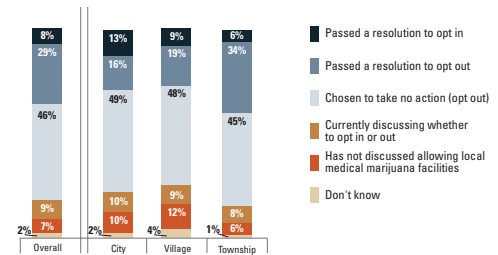


Figure 1b

Michigan local jurisdictions' approaches to the MMFLA (among cities, villages, and townships), by population size

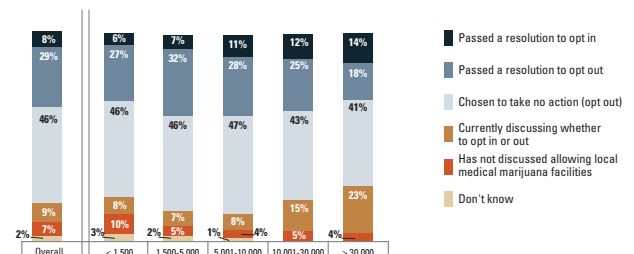
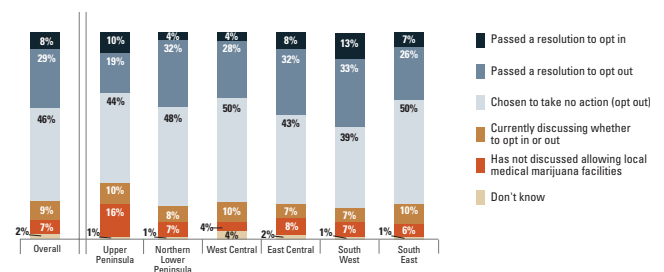


Figure 1c

Michigan local jurisdictions' approaches to the MMFLA (among cities, villages, and townships), by region



Local units are taking a range of approaches to regulating medical marijuana facilities

Michigan jurisdictions that opt into the MMFLA may choose to amend their land use zoning ordinance to regulate local medical marijuana facilities, although this is not required. Among officials from the 8% of cities, villages, and townships that have opted in, 77% report their jurisdictions have amended, or plan to amend their zoning ordinance as of spring 2018, while 6% say they have decided not to amend their ordinance (see *Figure 2*).

Although cities, villages, and townships decide for themselves whether or not to allow medical marijuana facilities in their jurisdiction, 4% of the jurisdictions that report having opted in also say the land use zoning that governs their own jurisdiction is conducted by their county. For these jurisdictions under county zoning, regulation of medical marijuana facilities is a more complex situation, dependent upon the counties' zoning code and thus a step removed from direct control by the village or township. An additional 9% are unzoned, which means that once they have passed an ordinance to opt in, they cannot further regulate those medical marijuana facilities through a zoning ordinance.

Local governments can amend their zoning ordinance in numerous ways to regulate medical marijuana facilities. As shown in *Figure 3*, jurisdictions that have amended their zoning ordinance are mostly likely to report restricting facilities to particular zoning districts (77%) within the jurisdiction. Other common approaches include: enforcing distance from schools, parks, etc. (69%), specifically limiting the number of facilities allowed (67%), and allowing multiple facilities on the same site (52%).

Figure 2
Michigan local jurisdictions' approach to regulating medical marijuana facilities (among jurisdictions that have opted in to the MMFLA)

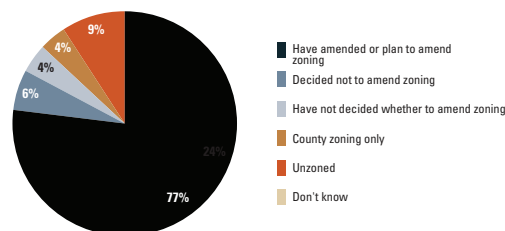
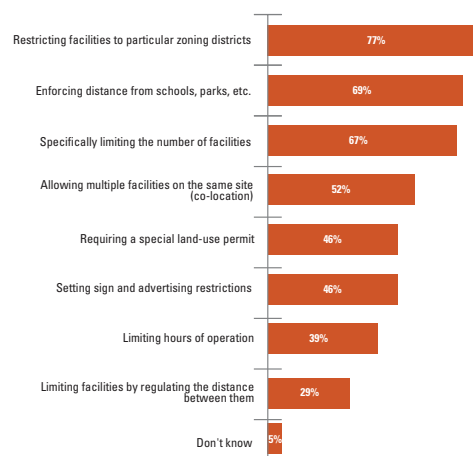


Figure 3
Michigan local jurisdictions' zoning ordinance amendments to regulate medical marijuana facilities (among jurisdictions that have or will amend their zoning ordinance)





Most local officials believe their jurisdiction understands current MMFLA rules, but significant uncertainty remains

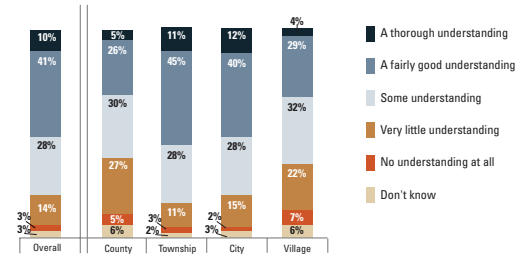
The MMFLA is new, and administrative rules were still under development when the law went into effect. Despite this, a majority (51%) of local leaders believe their jurisdiction's Board or Council has a fairly good (41%) or thorough (10%) understanding of what it legally can or cannot do to regulate local medical marijuana facilities under the current MMFLA rules (see *Figure 4*). However, 45% say their Board or Council has less than a fairly good understanding. Among this group, 28% say they have some understanding, 14% say they have very little understanding, and 3% say they have no understanding at all.

County officials are significantly less likely to say their county Board of Commissioners has either a thorough (5%) or fairly good (26%) understanding of what they legally can or cannot do to regulate local medical marijuana facilities under the MMFLA. Since counties cannot make a decision about opting in or out of allowing such facilities, it is not surprising that county officials appear somewhat less informed about the law compared with other types of local government officials.

Officials who report their jurisdiction has taken action (i.e., passing an ordinance or resolution to opt in or opt out) are more likely to say their Board or Council is informed. Among these jurisdictions, 17% of officials say their jurisdiction's governing body has a thorough understanding, while another 51% say they have a fairly good understanding. Still, over a quarter (26%) of officials from jurisdictions that have opted in say their Board or Council has only some, very little, or no understanding at all.

Figure 4

Local officials' assessments of their jurisdiction's Board or Council's understanding of what they can or cannot legally do to regulate medical marijuana facilities under the current MMFLA rules, by jurisdiction type



Few Michigan jurisdictions report having medical marijuana facilities currently operating

While applications for licenses for medical marijuana facilities under the MMFLA were not available until December 2017, unlicensed dispensaries operated in some cities, villages, and townships prior to that time. The MPPS asked local officials about their jurisdiction's past and current experience with medical marijuana facilities.

As of spring 2018, most local officials report there have never been medical marijuana facilities in their jurisdiction, with 69% saying that not only have there been none in the past, but also that none are currently proposed or planned for the future (see *Figure 5a*). Another 5% say there have never been facilities in the past, but that some new facilities have now been proposed or planned. Meanwhile, 10% of Michigan's cities, villages, and townships say they have medical marijuana facilities currently operating in their jurisdiction, while 7% report that there were previously facilities in their jurisdiction but that none are still operating today.

Looking by community size, Michigan's largest cities and townships are the most likely to report having facilities in their jurisdiction, either currently (25%) or only in the past (15%). By comparison, only 6% of the smallest jurisdictions report currently having facilities, and another 6% say they had facilities in the past.

When looking at regional differences, currently-operating facilities are most commonly reported in the Upper Peninsula (16%) and Southeast Michigan (14%), and least commonly in the Northern Lower Peninsula (3%). However, 11% of cities, villages, and townships in the Northern Lower Peninsula report having facilities in the past that are now all closed. Facilities in Southwest Michigan appear to be expanding; in addition to the 11% of jurisdictions with facilities currently operating, 9% of jurisdictions report that new facilities are currently proposed or planned (see *Figure 5b*).

Figure 5a

Michigan local jurisdictions' status of medical marijuana facilities (among cities, villages, and townships), by population size

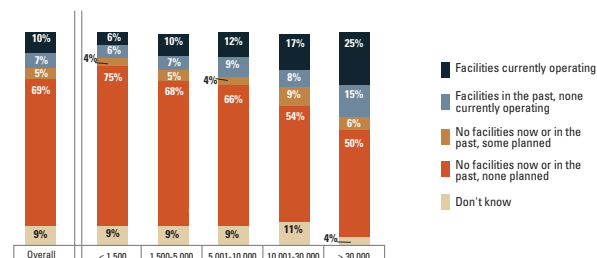
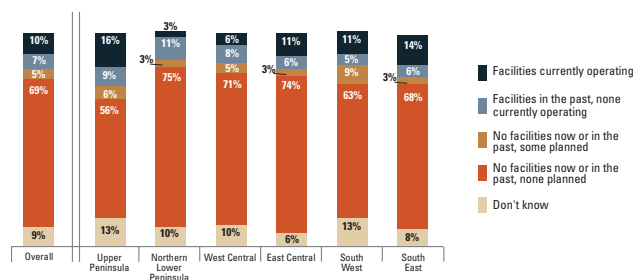


Figure 5b

Michigan local jurisdictions' status of medical marijuana facilities (among cities, villages, and townships), by region





Most local officials oppose allowing local medical marijuana facilities

There is currently considerable opposition among local government officials to allowing medical marijuana facilities in Michigan communities. Local leaders from all jurisdiction types (counties, cities, villages, and townships) report low levels of support personally, and also believe there is low support among their jurisdiction's Board or Council, their jurisdiction's residents, and the chief law enforcement officer in their jurisdiction.

In their role as a local official, just 17% themselves strongly (7%) or somewhat (10%) support allowing medical marijuana facilities in their jurisdiction. Conversely, 65% oppose this, including 50% who are strongly opposed (see *Figure 6*). Personal support for allowing medical marijuana facilities in their jurisdiction is correlated with party identification, with 28% of Democrats in support of allowing these facilities compared to just 12% of Republican officials.

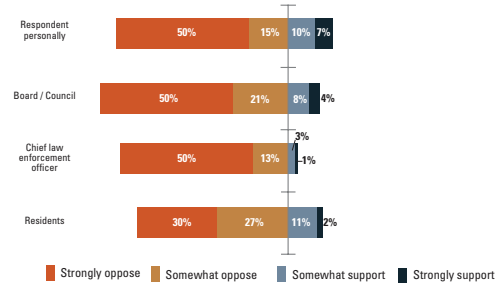
When asked to gauge support or opposition among their jurisdiction's Board or Council, 50% of local leaders say the majority of their jurisdiction's governing body is strongly opposed to allowing such facilities, and an additional 21% say their Board or Council is somewhat opposed. Just 12% believe a majority of their Board or Council supports allowing these facilities.

In addition, 50% of local leaders report their jurisdiction's chief law enforcement officer strongly opposes allowing medical marijuana facilities. Only 4% say the officer strongly (1%) or somewhat (3%) supports allowing facilities. However, a sizeable 26% of local officials are unsure about their chief law enforcement officer's support for or opposition to allowing medical marijuana facilities.

And when it comes their citizens, local officials in 57% of jurisdictions believe a majority of their residents oppose local medical marijuana facilities,, although only 30% believe their residents strongly oppose such facilities. And there is again significant uncertainty about residents' preferences, with 20% of local officials saying they don't know their residents' views.

Figure 6

Local officials' assessments of support for allowing medical marijuana facilities in their jurisdiction



Note: includes responses from county, city, village, and township officials; responses for "neither support nor oppose" and "don't know" not shown

Local leaders report both problems and benefits related to medical marijuana

Even in jurisdictions that do not have medical marijuana facilities, medical marijuana may still have a presence because of facilities in neighboring jurisdictions, because of residents with medical marijuana cards, or due to individual caregivers growing marijuana (under the MMMA). The MPPS asked local government officials from all jurisdictions about both problems and benefits their jurisdiction may have experienced related to medical marijuana.

Statewide, officials from 42% of local jurisdictions report experiencing some (28%) or significant (14%) problems related to medical marijuana in their community (see *Figure 7a*), while 35% report very few (17%) or no problems at all (18%). Officials from larger communities report seeing more problems compared with those from smaller places. And in jurisdictions that report having facilities now or in the past, over half (55%) say they have experienced problems, though only 19% report experiencing significant problems (see *Figure 7b*). However, even among jurisdictions that have never had facilities, 38% report experiencing some (25%) or significant (13%) problems.

The MPPS also asked local leaders to describe any problems their community has experienced related to medical marijuana in an open-ended survey question. Among the most common problems cited are concerns about illegitimate use of medical marijuana cards, illegal growers and dispensaries, crime, and neighborhood or community concerns (including odor of marijuana and electricity use for marijuana growing operations).

Figure 7a

Local officials' assessments of problems regarding medical marijuana in their community, by population size

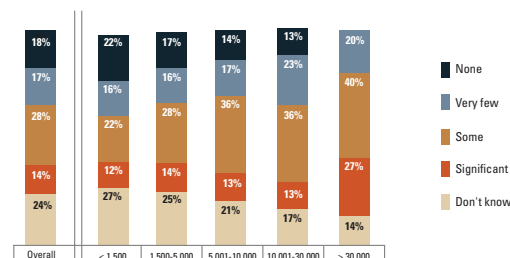
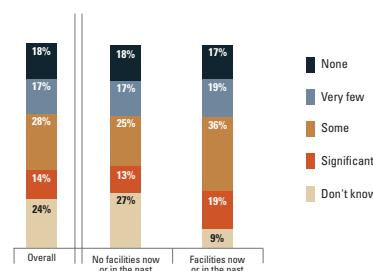


Figure 7b

Local officials' assessments of problems regarding medical marijuana in their community, by history of medical marijuana facilities in their jurisdiction



Voices Across Michigan

Quotes from local leaders discussing problems regarding medical marijuana in their jurisdiction

“Providers for medical marijuana have openly sold for recreational use. This has forced law enforcement providing cease and desist orders, thus no facilities are available for the patients that do request their medicinal uses.”

“The current confusion regarding marijuana has left our local law enforcement in a situation where they are pretty much washing their hands of it and trying not to get involved.”

“We have had a lot of problems with home growing facilities. The police have closed multiple grow houses in the township. Other violations around the township that we have no control over have caused hostility from residents.”

“I feel strongly that marijuana used as a prescription means for a medical problem that is between a doctor and their patient is a wonderful thing. I have had complaints about people having issues with their electricity when their neighbor turns on the grow lights. I don’t know that our rural, outdated infrastructure can handle it.”



In terms of benefits, as shown in *Figure 8a*, just 21% of local leaders report experiencing some (16%) or significant (5%) benefits to their community related to medical marijuana, while 51% report very few (20%) or no benefits at all (31%). And, while jurisdictions with facilities now or in the past report more problems than other jurisdictions, they are also more likely to report benefits (28%), compared to 19% of communities that report never having had such facilities (see *Figure 8b*).

When asked to describe the benefits their community had seen related to medical marijuana, many local officials cited the medical benefits to residents. Some local officials also cited current or expected economic benefits to their jurisdiction, particularly when it comes to revenue sources such as local administrative fees on medical marijuana providers, property tax revenues paid on facilities, and shared state tax revenues on products.⁹

Figure 8a

Local officials' assessments of benefits regarding medical marijuana in their community, by population size

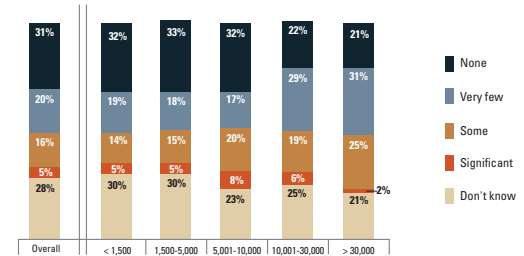
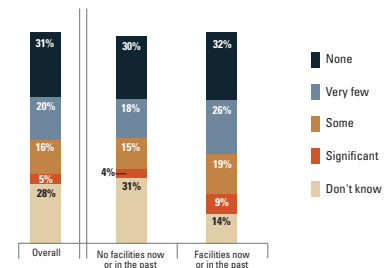


Figure 8b

Local officials' assessments of benefits regarding medical marijuana in their community, by history of medical marijuana facilities in their jurisdiction



Voices Across Michigan

Quotes from local leaders discussing benefits regarding medical marijuana in their jurisdiction

"The benefit lies with people having the choice to use medical marijuana as a treatment for their illness without prosecution. There has not been an increase in marijuana related crime since the implementation of medical marijuana."

"No problems at present and we expect benefits from annual licensing fees, land returning to the tax roll, jobs, filled store fronts, customers for existing businesses, (currently empty) house sales."

"The community has not experienced any issues relative to the grow/processing and provisioning centers that have been approved in the community. The developers have been very willing to contribute to local events, charities and community planning projects both financially and with professional staffing."

Support for legalizing recreational marijuana appears lower among local officials than the public

In November 2018, Michigan residents will vote on a ballot measure to legalize, regulate, and tax recreational marijuana in the state. The MPPS did not ask local officials about this specific ballot measure, but rather about support more generally for legalization of recreational use (including regulation and taxation). Consistent with low support for medical marijuana facilities in their jurisdiction, just 21% of local officials say they would support marijuana legalization, while 54% are opposed, including 44% strongly opposed (see *Figure 9a*).

One important factor correlated to support for marijuana legalization is partisan identification. The MPPS finds that support for legalizing recreational marijuana is 35% among Democratic officials, and just 17% among Republican officials (see *Figure 9b*).

As seen in *Figure 10*, opposition among local officials stands in contrast to a recent public opinion poll on support for legalizing recreational marijuana through a possible ballot initiative. The Winter 2018 State of the State Survey (SOSS)—conducted by Michigan State University’s Institute for Public Policy and Social Research during September 2017 through January 2018—found that 61% of Michigan residents would vote “yes” on such an initiative.¹⁰

While the MPPS sometimes finds differences between local officials’ opinions and those of citizens, these often can be attributed to the different demographic characteristics of the MPPS sample compared to a statewide sample of residents (for example, Michigan local officials are more likely to self-identify as Republican than is the public as a whole). However, the differences in support for legalizing recreational marijuana still exist when comparing within different demographic groups. Looking by partisanship, support is lower among officials of all parties when compared to their counterpart Michigan residents. For Democrats, the percentage of Michigan residents who would vote “yes” is 67%, compared to just 35% of local officials who would support recreational legalization. For Republicans, support among residents is 39%, compared to 17% among local officials.

Another factor correlated to support for legalization is the respondent’s age. The MPPS finds significant variation by age group among local officials, with 24% of officials under age 30 supporting recreational marijuana legalization, compared to just 10% of officials 80 years or older. By contrast, the SOSS finds 80% support among 18-29 year olds, and 30% among residents 65 years or older.

Figure 9a

Local officials’ support for and opposition to legalizing, regulating, and taxing recreational marijuana

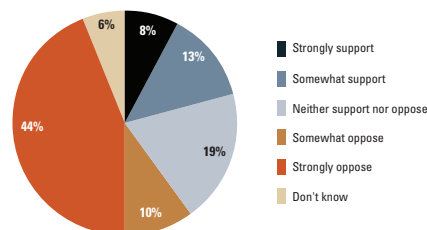
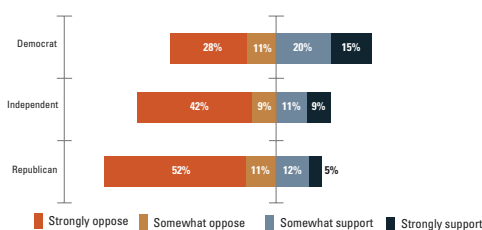


Figure 9b

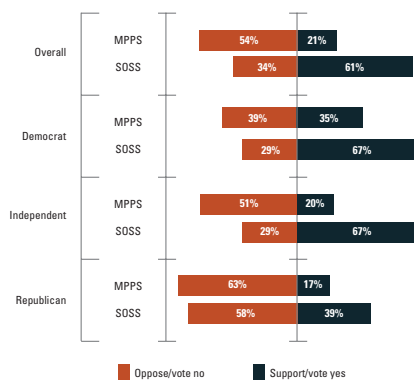
Local officials’ support for and opposition to legalizing, regulating, and taxing recreational marijuana, by partisan identification



Note: responses for “neither support nor oppose” and “don’t know” not shown

Figure 10

Support for and opposition to legalizing recreational marijuana, by local leaders’ opinions vs. public opinion



Note: The Spring 2018 MPPS questionnaire asked local officials whether they would “support” or “oppose” legalization of recreational marijuana, while the Winter 2018 SOSS survey asked citizens if they would vote “yes” or “no” on a possible ballot initiative; responses on MPPS & SOSS for “don’t know” not shown, and responses on MPPS for “neither support nor oppose” not shown.



Conclusion

While medical marijuana has been legal under state law in Michigan for the last decade, commercial facilities growing, processing, transporting, or selling medical marijuana were illegal under state law until December 2017 when the Medical Marijuana Facilities Licensing Act was enacted. Under the new MMFLA rules, these facilities are now allowed, but only if authorized by local government action. Once a local government has opted-in to allow such facilities, they can also be regulated via land-use zoning ordinances at the local or county level.

Most (75%) Michigan jurisdictions have made the decision to keep medical marijuana facilities out of their jurisdiction, while only 8% of cities, villages, and townships have voted to allow such facilities in their community. There is significant opposition to allowing such facilities, with 50% of local officials strongly opposed to allowing them. Most local officials also perceive high levels of opposition among their jurisdiction's Board or Council, law enforcement leaders, and the residents of their jurisdiction.

While many jurisdictions report having experienced some problems related to medical marijuana in their community, fewer report that these problems have been significant. Some communities also report experiencing benefits related to medical marijuana, such as medical benefits for their residents, as well as current or expected economic benefits in some jurisdictions that have allowed medical marijuana facilities.

In recent years, there has been increased support nationally for legalizing recreational marijuana, and several states have voted to allow recreational marijuana use. However, while a recent survey of Michigan residents shows high levels of public support for legalizing recreational marijuana in the state, the MPPS shows that local government leaders are less supportive, with only 21% saying they would generally support legalizing, regulating, and taxing recreational marijuana in Michigan.

Notes

1. Michigan Ballot Proposal 08-1. (2008). *A legislative initiative to permit the use and cultivation of marijuana for specified medical conditions*. Retrieved from https://www.michigan.gov/documents/sos/ED-20_11-08_Props_Poster2_251561_7.pdf
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Survey Background and Methodology

The MPPS is an ongoing survey program, interviewing the leaders of Michigan's 1,856 units of general purpose local government. Surveys are conducted each spring (and prior to 2018, were also conducted each fall). The program has covered a wide range of policy topics, and includes longitudinal tracking data on "core" fiscal, budgetary and operational policy questions and designed to build-up a multi-year time-series.

In the Spring 2018 iteration, surveys were sent by the Center for Local, State, and Urban Policy (CLOSUP) via the internet and hardcopy to top elected and appointed officials (including county administrators and board chairs; city mayors and managers; village presidents, clerks, and managers; and township supervisors, clerks, and managers) from all 83 counties, 280 cities, 253 villages, and 1,240 townships in the state of Michigan.

The Spring 2018 wave was conducted from April 9 – June 8, 2018. A total of 1,372 jurisdictions in the Spring 2018 wave returned valid surveys (65 counties, 237 cities, 177 villages, and 893 townships), resulting in a 74% response rate by unit. The margin of error for the survey for the survey as a whole is +/- 1.35%. The key relationships discussed in the above report are statistically significant at the $p < .05$ level or below, unless otherwise specified. Missing responses are not included in the tabulations, unless otherwise specified. Some report figures may not add to 100% due to rounding within response categories. Quantitative data are weighted to account for non-response. "Voices Across Michigan" verbatim responses, when included, may have been edited for clarity and brevity. Contact CLOSUP staff for more information.

Detailed tables of the data analyzed in this report broken down three ways—by jurisdiction type (county, city, township, or village); by population size of the respondent's community, and by the region of the respondent's jurisdiction—are available online at the MPPS homepage: <http://closup.umich.edu/mpps.php>.

The survey responses presented here are those of local Michigan officials, while further analysis represents the views of the authors. Neither necessarily reflects the views of the University of Michigan, or of other partners in the MPPS.



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