

Marijuana: Fact Sheet

1. Newer, more precise data contradicts the notion that youth use decreases with legalization. The American Journal of Preventive Medicine reported that a “Multilevel modeling in 2019 showed that nonmedical marijuana legalization predicted a higher likelihood of self-reported past-year marijuana” among youth (Bailey, Epstein, Roscoe, Oesterle, Kosterman, and Hill, 2020). The Cato Institute reported that youth use rates in Maine, Massachusetts, Alaska, and Colorado were decreasing in the years prior to legalization. Yet after legalization, rates increased (Dills, Goffard, Miron and Partin, 2021).

States with medical marijuana laws have also seen increases in youth use. A 2017 article noted that “exposure to medical marijuana advertising and perhaps proximity to dispensaries are both associated with an increased likelihood of marijuana use among younger adolescents,” (D’Amico, Tucker, Pedersen, and Shih, 2017).

2. In fact, fatal accidents increase when marijuana is legalized. In a 2020 report, AAA found that “The raw number of fatal crash-involved drivers in the state of Washington who tested positive for THC more than tripled from five years before I-502 took effect through five years after. After inclusion of those not tested for drugs but imputed THC-positive, the estimated total number of THC-positive drivers involved in fatal crashes each year nearly tripled over the 10-year period as well,” (American Automobile Association, 2020).

Researchers at McGill University found that, in the United States, legalization was associated with a “significant increase in fatal motor vehicle collisions and fatalities.” The same researchers also found “that legalizing cannabis on a national scale could result in an additional 4843 motor vehicle fatalities per year in the US, an increase of 16%,” (Windle, Sequeira, Filion, Thombs, Reynier, Grad, Ells, and Eisenberg, 2021). In regard to driving under the influence, a 2020 study found that “Medical marijuana law enactment in US states appears to have been associated with increased prevalence of driving under the influence of cannabis,” (Fink, Stohl, Sarvet, Cerda, Keyes, Hasin, 2020).

3. Crime, in fact, has not decreased in states which have legalized marijuana. The National Criminal Justice Reference Service reported that crime has increased in Colorado and Alaska since legalization. In Washington, “drug possession and theft crimes had increased since commercialization.” The report also references a 2019 study that reported “a positive relationship between recreational dispensaries and violent crime (including robbery and aggravated assault), as well as a link between dispensaries and disorder crimes,” (NCJRS, 2020).

4. Marijuana is the most commonly used illicit substance, so any negative health consequences from use are highly concerning. Many carcinogens are present in marijuana. Thus, the effect of smoking marijuana on the lungs is substantial. One study, which compared marijuana and tobacco smoke, found that “ammonia was found in mainstream marijuana smoke at levels up to 20-fold greater than that found in tobacco. Hydrogen cyanide, NO, NOx, and some aromatic amines were found in marijuana smoke at concentrations 3–5 times those found in tobacco smoke,” (Moir, Rickert, Levasseur, Larose, Maertens, White, and Desjardins, 2008).

In fact, one study reports that “lung and upper airway cancer are relatively uncommon in young individuals (<40–45 yr),” but that several “case series have identified an unusually high proportion of regular marijuana smokers among young persons with these respiratory cancers compared with the proportion of regular smokers of marijuana in the general population,” (Tashkin, 2013).

Marijuana also has significant impacts on mental health. Cannabis-induced psychosis is a prevalent issue amongst users, especially those who use high potency marijuana. An article published in the *Journal of the American Medical Association* even wrote that, unless extreme limitations are implemented, “it seems likely that the current commercialization of recreational cannabis in North America will be followed in a few years by a rise in the incidence of new cases of psychosis and in the prevalence of people with more chronic psychoses,” (Murray and Hall, 2020).

Using marijuana to treat opioid use disorder is not widely accepted within the scientific community as a successful avenue of recovery. In fact, a study measuring the factors associated with relapses on heroin while in methadone treatment concluded that, “A goal of absolute heroin abstinence consistently predicted a lower risk of a lapse, whereas marijuana use was associated with a greater risk,” (Wasserman, Weinstein, Havassy, and Hall, 1998).