

Steuben Prevention Coalition

Position Paper on Legalization of Recreational Marijuana in New York State

The **Steuben Prevention Coalition** is opposed to the legalization of recreational marijuana in New York State for the following reasons:

1. Drug classification

- Marijuana is classified as a Schedule 1 drug by the Food and Drug Administration. This classification means that it has a high potential for abuse.¹

2. Current Marijuana Rates Among Youth

- National research demonstrates that illegal drug use among youth increases as the perception of risk and social disapproval declines.
- According to the 2015 Monitoring the Future (MTF) Study there are more 12th grade students who smoke marijuana daily than tobacco.
- Also found in the 2015 MTF Study:
 - 1 in every 16 high school senior (6%) is a current daily or near daily marijuana user. ²

3. Marijuana is Addictive

- 1 in 10 people who ever start using marijuana become addicted. In adolescence, the addiction rates rise to 1 in 6. Increased use rates lead to higher addiction rates. This means that marijuana leads to addiction and that when the drug is discontinued it produces withdrawal symptoms and cravings. 25% - 50% of daily users will become addicted to it. ³
- More than two-thirds of treatment admissions involving those under the age of 18 cite marijuana as their primary substance of choice, more than 15 times the rate for alcohol abuse. ⁴

4. Age of Initiation Is Critical

- Children who first smoke marijuana under the age of 14 are more than five times as likely to abuse drugs as adults, compared to those that wait. ⁵
- The average age that youth begin using marijuana in Steuben County, per our most recent 2015 Prevention Needs Assessment Survey for grades 8, 10 and 12 is 13.5 years. ⁶

5. Marijuana Use Negatively Impacts School Environment

- Nationally, 66.1% of serious disciplinary actions in public high schools can be attributed to the distribution, possession or use of illegal drugs. ⁷
- In Colorado, drug related suspensions/expulsions increased 32% from school year 2008/2009 through 2012/2013. ⁸
- Students that use marijuana often have poor grades due to difficulty paying attention to what is being taught. Marijuana is known to cause short term memory loss. ⁹

6. Marijuana Potency is Increasing

- In the past 30 years (between 1983 and 2013), the average THC level has nearly tripled. Currently, the average level of THC in seized samples is 15.1%. This compares to an average of less than 4% in 1983 or 1-2% in the 1960's. ¹⁰
- Marijuana concentrates may contain more than 90% THC. These new highly potent marijuana forms include butane hash oil, shatter, crumble, dabs and wax. The THC potency varies widely. The process for making this high potency marijuana can be explosive. ¹⁰

7. Marijuana Use Negatively Impacts Highway Safety

- According to the Colorado department of Transportation, the percentage of drivers who tested positive for marijuana in fatal car crashes doubled between 2006 and 2010 (after the dispensaries were opened) while all other fatal car crashes declined for the same time period. ¹¹
- 1 in 5 (19%) of teen drivers report that they have driven under the influence of marijuana. Only 13% of teen drivers report that they have driven under the influence of alcohol. ¹²
- Marijuana is the most prevalent illegal drug detected in impaired drivers, fatally injured drivers, and motor vehicle crash victims. ¹³
- Driving under the influence of marijuana is associated with a 92% increased risk of vehicular crashes. ¹⁴

8. Marijuana is Associated with Health Problems

- Marijuana smokers report more cases of chronic bronchitis, cough and phlegm production than non-users. ¹⁵
- Marijuana use can increase the risk of heart attack and stroke four-fold within the first hour after use and causes chest pains in people with heart disease. Users report increased heart rate and blood pressure. ¹⁶
- Marijuana smoke contains 50-70% more carcinogenic hydrocarbons than tobacco smoke. ¹⁷
- Marijuana use directly affects the brain especially the parts responsible for memory, learning, attention, decision making, concentration, emotions and reaction time. ¹⁸
- Marijuana users are significantly more likely than non-users to develop chronic mental health disorders such as schizophrenia, depression, anxiety, suicidal thoughts and psychosis (loss of reality and false thoughts or delusions). ¹⁹
- Marijuana poisoning – there have been many people hospitalized due to accidentally taking too much of a product with a large THC content often from consuming edible products. Many children have consumed products looking like normal snack foods that contained a high dosage of THC. ²⁰

In states that have legalized recreational marijuana, such as Colorado (CO) and Washington State (WA), legalization has resulted in:

1. An increase in marijuana related calls to the poison control center. In Colorado, the number of calls went from 44 in 2006 to 227 in 2015. In Washington State the number of calls went from 150 in 2010 to 272 in 2015. ²¹
2. Hospitalizations related to marijuana use in CO went from 4,438 in 2008 to 11, 439 in 2014. ²²
3. An increase in arrests/citations for unlawful public display or consumption of marijuana in Denver rose from 8 in 2012 to 752 in 2015. ²³
4. Employees that use marijuana have higher incidents of accidents, injuries, absenteeism and disciplinary problems than non-users that increases costs to employers. ²⁴
5. Compared to the overall workforce, marijuana users missed work twice as much as non-users in the past 30 days (7.4% - 15%). ²⁵
6. Traffic deaths related to marijuana in CO have risen from 37 in 2006 to 115 in 2015 - representing 21% of all traffic fatalities. ²⁶
7. Business problems – large businesses in CO now state that they must hire out of state residents to find employees that can pass a pre-employment drug screen. ²⁷
8. Tax revenue windfall and decreases in crime rates did not occur. ²⁸
9. CO now leads the country in past 30-day use of marijuana by youth and WA is close behind. ²⁹

This position paper was approved by the Steuben Prevention Coalition at a meeting held on May 10, 2017.

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