MPI
Marijuana Prevention Initiative
San Diego County

CCR
Center for Community Research

Key Data: 2016 Marijuana Prevention Points of Consideration

The Marijuana Prevention Initiative (MPI) works with partners in each of San Diego County's six regions to reduce youth marijuana use and increase knowledge of its harmful effects. This document provides selected county, state, and national data regarding youth marijuana use and related health and community impacts. These data points provide relevant marijuana use/perception statistics to help inform marijuana prevention efforts currently underway across San Diego County. It is important to note that data trends can be impacted by a number of variables (e.g., cultural, fiscal, and local factors).

San Diego County Data

Youth Marijuana Use

- ***Nearly one in five 9th graders (18%) and one in three (32%) 11th graders reported using marijuana*** sometime in their life (CHKS, San Diego County, 2015).
- ***Current marijuana use*** (i.e., used sometime in the past 30 days) **was reported by *9% of 9th graders and 16% of 11th graders*** (CHKS, San Diego County, 2015).
- ***Marijuana use among 7th graders has remained fairly constant since 2009***, with 5% reporting that they have used marijuana sometime during their life in 2015 (CHKS, San Diego County, 2009-2015).
- Among San Diego Unified School District (SDUSD) students, ***11% of 9th graders and 17% of 11th graders reported using marijuana in the past 30 days,*** *and* ***4% of high school students*** reported **using marijuana on school property** in the past 30 days (CHKS, SDUSD, 2015).
- Nearly ***10% of high school students*** in the San Diego Unified School District ***reported trying marijuana for the first time before they were 13 years-old*** (CHKS, SDUSD, 2015).

Access to Marijuana and Perception of Harm

- ***High school students*** in San Diego County (9th and 11th graders) ***perceive occasional marijuana smoking as less harmful than occasional cigarette smoking*** (CHKS, San Diego County, 2015).
- Approximately half of 7th and 9th graders ***do not believe that using marijuana 1or 2 times a week is very harmful*** (CHKS, San Diego County, 2015).
- Approximately ***1 in 3 adults*** in San Diego County (33%) ***do not believe that smoking marijuana daily or weekly is harmful*** (CCR, Community Survey, 2014).
- Half (50%) of 9th graders and two-thirds (66%) of 11th graders in San Diego County reported that ***marijuana is "very" or "fairly" easy" to get*** (CHKS, San Diego County, 2015).
- Among San Diego County adults surveyed, ***31% perceived recreational marijuana use as a problem in their community*** (CCR, Community Survey, 2014).
- ***More than 40% of high school students attending non-traditional schools have driven or been driven by someone while under the influence of marijuana*** (CHKS, San Diego County, 2015).

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Treatment Admissions Data

- ***Marijuana/hashish is overwhelmingly the drug of choice for adolescents (12-17) admitted into drug treatment programs***, accounting for **3/4 (75%)** of adolescent admissions in FY 2014/15 (HHSA ADS SanWITS, 2016).
- **Marijuana was the primary drug of choice for 80% of males (12-17)** admitted into treatment programs in FY 2014/15 (HHSA ADS SanWITS, 2016).

National Data: Youth Marijuana Use and Implications

Trends

- ***Perception of great harm*** from regular marijuana use among high school graduates, ages 19-22, ***has declined to 35% in 2014 from 55% in 2006*** (Johnston et al., 2015).
- ***12th graders who live in states where medical marijuana is legal report consuming more marijuana edible products*** (40%) than their peers who live in non-medical marijuana states (26%)(Johnston, et al., 2015).
- Among high school students who had used marijuana at least once in their lifetime, **23% reported using e-cigarettes to vaporize dried cannabis leaves**; 15% reported using e-cigarettes to vaporize hash oil; and, 10% reported using e-cigarettes to vaporize "wax" (a high-potency marijuana product)(Morean, et al., 2015).

- Between 1985 and 2013, the potency of federally-seized and tested (non-domestic) marijuana has increased by 260% from 3.5% to 12.5%, ***which may contribute to higher rates of youth addiction*** (University of Mississippi, 2014; 2010).
- **Marijuana use among adults ages 18 and older has more than doubled since 2001,** and **nearly 7 million** adult marijuana users **were diagnosed with a marijuana use disorder in 2012/13.** Of note, **young adults were at highest risk for marijuana use disorder** (Hasin et al., 2015).

Academic Achievement

- Among adolescents, ***marijuana use is associated with attention and memory problems, slower brain processing, and difficulty with problem-solving*** – all of which may affect academic performance (Medina, et al., 2007).
- ***Heavy marijuana use is associated with higher rates of skipping class, lower GPAs, and failure to complete college*** (Arria, et al., 2013; Hunt, et al., 2010).
- Adolescents who ***have smoked marijuana more than 100 times are less likely to enter college or earn a college degree*** and are ***more likely to drop out of college*** than their peers who have not (Fergusson, et al., 2003).
- Middle and high school ***students (ages12-17) with an average grade of "D" or lower reported significantly higher rates of current marijuana use in the past month*** *compared* to those with an average grade of "C" or higher (SAMHSA, 2009).
- ***Young adults (ages 18-23) who did not complete high school reported significantly higher rates of current marijuana use*** than those who completed high school (SAMHSA, 2009).

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Impact on the Developing Brain

- ***Smoking marijuana is significantly associated with the onset of psychotic disorders***, particularly schizophrenia (*Large et al., 2011; Moore et al., 2007; Semple et al., 2005*).
- ***Children and adolescents can become addicted to marijuana more often and more rapidly than adults*** because their brains are still developing (CSAM, 2012).
- The ***combination of marijuana and alcohol is more addictive in adolescents than in adults*** (Muoio, 2012).

Drugged Driving Across California and the United States

Increased Trend

- In 2013, 63% of fatally injured drivers in the U.S. were tested for drugs, and ***more than one-third (35%) tested positive for marijuana*** (GNHA, 2015).
- Nationally, ***marijuana is by far the drug most commonly found in both randomly tested drivers and fatally-injured drivers*** (GNHA, 2015).
- Of approximately 9,500 drivers who participated in the 2013-14 National Roadside Survey, nearly ***13% tested positive for marijuana, up from 8.6 percent in 2007*** (Berning et al., 2015).
- Drugs play an increasingly prevalent role in fatal crashes. In a study of 23,500 drivers from six different states, ***drugged driving accounted for more than 28 percent of traffic deaths in 2010, up from more than 16 percent in 1999***. → ***Marijuana*** was the main drug involved in the increase, ***contributing to 12 percent of 2010 crashes compared with 4 percent in 1999*** (Brady and Li, 2014).
- Of the people who tested positive for THC (the psychoactive ingredient in marijuana) in the California Roadside Survey, ***only 11% said they believe that driving under the influence of marijuana is harmful*** (Lacey et al., 2012).
- ***Among CA counties, cases involving driving under the influence of marijuana are more likely to settle, not be charged, or be dismissed than those involving alcohol*** (Tashima and Hanson, 2011).

Driving Under the Combined Influence of Alcohol and Marijuana

- ***Using alcohol and marijuana together significantly increases impairment levels*** and produces much higher blood concentrations of THC than does marijuana use alone (Hartman, et al., 2015; Ramaekers, et al., 2000).
- ***Youth who reported positive views about marijuana when they were in sixth grade were 63% more likely to drive under the influence*** or ride in a car with an impaired driver when they were in high school than their peers who had reported less positive views (Ewing et al., 2015).
- The risk of a fatal crash to a driver under the influence of alcohol is 13 times higher than the risk of the driver who is not under the influence of alcohol. ***For the driver who is under the influence of both alcohol and marijuana, their risk increases to 24 times that of a sober person*** (Brady and Li, 2014).

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- California ***drivers are as likely to test positive for THC as alcohol***, and approximately ***25% of persons testing positive for THC also tested positive for alcohol or another drug*** (Lacey et al., 2012).

- ***Severe marijuana-induced driving impairment is observed with high doses, chronic use and in combination with low doses of alcohol*** (Couper and Logan, 2004).

Implications of Drugged Driving

- ***Marijuana impairs psychomotor skills and cognitive functions associated with driving*** (Compton and Berning, 2015; Hartman and Huestis, 2013; Kelly-Baker, 2014). Driving under the influence of THC is associated with:

  - *Decreased car handling performance*
  - *Delayed reaction times*
  - *Driving more slowly to compensate for being high*
  - *Impaired coordination*
  - *Impaired perception of time and distance*
  - *Weaving in and out of one's lane*

★ For more information and resources, visit our MPI website at **www.mpisdcounty.net**

Data Sources

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