



**County
Health Officials
of New York**
Leading the way to healthier communities

OPPOSES

A1617C/S1527C (Peoples-Stokes/Krueger)

Marihuana Regulation and Taxation Act

The New York State Association of County Health Officials (NYSACHO), which represents the 58 local health departments, *stands in opposition* of proposed legislation which would legalize regulated marijuana in New York State. NYSACHO is of opinion that legalization of regulated marijuana will lead to dangerous public health outcomes and therefore should not be legalized.

Both research and experience of states with legalized marijuana (such as Colorado) have substantiated these concerns. A summary of public health considerations follows:

Adverse health effects of Marijuana include:

- Risk of Addiction- evidence clearly indicates that long-term marijuana use can lead to addiction. There is also recognition of a bona fide cannabis withdrawal syndrome, which makes cessation difficult and contributes to relapse. Adolescents are particularly susceptible; as compared with persons who begin the use of marijuana in adulthood, those who begin in adolescence are approximately 2 to 4 times as likely to have symptoms of cannabis dependence within 2 years after first use⁴.
- Possible Role as a Gateway Drug- data suggests that the use of marijuana in adolescence could influence multiple addictive behavior in adulthood⁴.
- Cognitive and Academic Effects- weekly or more frequent marijuana use by adolescents and young adults is associated with impaired learning, memory, math and reading achievement, even 28 days after last use, and is strongly associated with failure to graduate from both high school and college¹.
- Relation to Mental Illness- regular marijuana use is associated with an increased risk of anxiety and depression, and is linked with psychoses, especially among people with a preexisting genetic vulnerability⁴.
- Adverse Cardiac and Respiratory effects- marijuana use may be associated with increased risk of stroke in individuals younger than 55 years of age and may be associated with increased risk of heart attack among adults. Daily or near daily marijuana smoking is strongly associated with chronic bronchitis, including chronic cough, sputum production, and wheezing¹.

Additional Public Health Considerations include:

- Unintentional Exposures in Children- legal marijuana access is strongly associated with increased numbers of unintentional exposures in children, which can lead to hospitalizations. In Colorado, at least 14,000 children are at risk of accidentally eating marijuana products that are not safely stored, and at least 16,000 are at risk of being exposed to secondhand marijuana smoke in the home¹.
- Risk of Motor Vehicle Accidents- both immediate exposure and long-term exposure to marijuana impair driving ability; marijuana is the illicit drug most frequently reported in connection with impaired driving and accidents, including fatal accidents⁴.

Currently, local health departments in NYS are committed to working to curb opioid addiction, overdose and death. In 2018, in response to this epidemic, New York State Department of Health funded 24 local health departments to run evidence-based opioid prevention projects. According to the New England Journal of Medicine, “Epidemiologic and preclinical data suggest that the use of marijuana in adolescence could influence multiple addictive behaviors in adulthood³”. As public health professionals fighting on the frontlines of our current opioid epidemic, it is counterintuitive for us to condone the use of marijuana.

NYSACHO members recognize there are possible linkages between legalization of marijuana with the advancement of social and racial justice initiatives. We too often see communities of color disproportionately impacted by arrests stemming from charges related to marijuana. There is no question, families would benefit from alleviation of marijuana-related arrests and jail time that has disproportionately affected low income and communities of color.

The proposed bill described the creation of a NYS Cannabis Revenue Fund and proposes that the Commissioners of OASAS and DOH will develop and implement a youth-focused public health education and prevention campaign. The language and wording of the bill does not clarify the appropriation of funds to Local Health Departments that will be responsible for implementing and managing the proposed programs. If policy on regulated marijuana moves forward, this will increase workload for the already taxed public health workforce. We anticipate local health departments, who are reliably at the front line of all emerging public health crises, will need to expand workforce capacity in community education, surveillance, intervention strategies, enforcement, and beyond if regulated marijuana is legalized. If this time should come, it is critical that adequate funding is dedicated to prevention strategies led by local health departments.

NYSACHO, therefore, must oppose this bill.

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¹Monitoring health concerns related to marijuana in Colorado, 2016: changes in marijuana use patterns, systematic literature review, and possible marijuana-related health effects. Colorado Department of Public Health and Environment, Retail Marijuana Public Health Advisory Committee-2017.

²Bertrand KA, Hanan NJ, Honerkamp-Smith G, et al. Marijuana Use by Breastfeeding Mothers and Cannabinoid Concentrations in Breast Milk. *Pediatrics*. 2018; 142(3):e20181076.

³Health Impact Assessment, Marijuana Regulation in Vermont, 2016. Vermont Department of Public Health.

⁴Volkow, ND, Baler, RD, Compton, WM, et al. Adverse Health Effects of Marijuana Use. *N Engl J Med*. 2014; 370:2219-27.