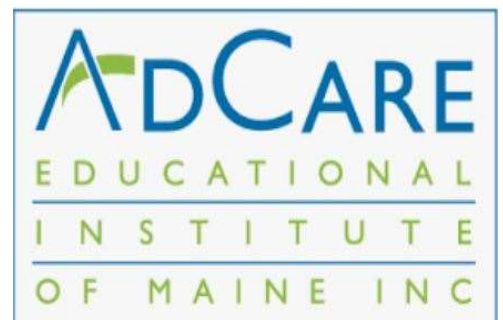


Marijuana Data Kit

New England Region

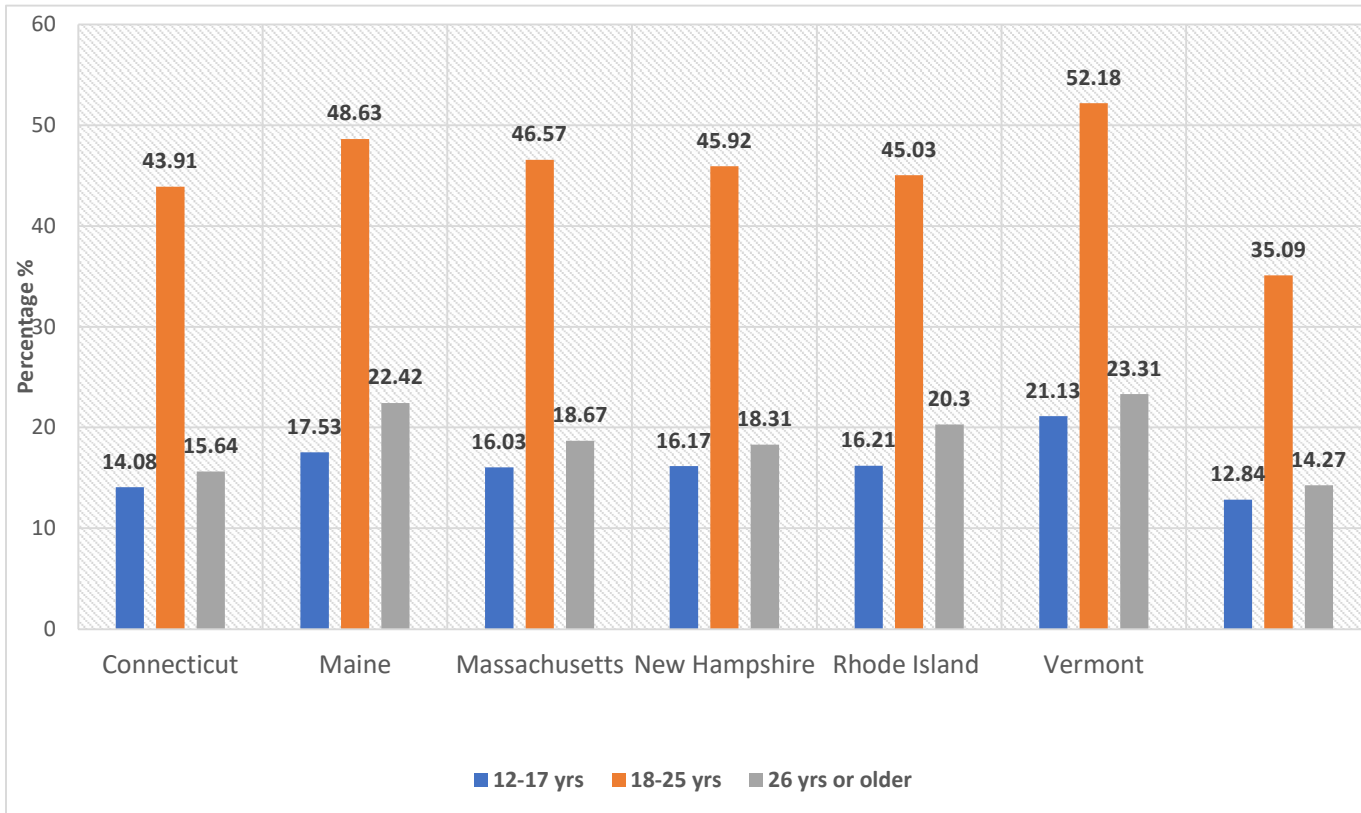
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June 2021



New England Facts Sheet

Marijuana use, by age group and state, in the past year **among New England population**: the percentages, annual averages (2018-2019): ^{1,2}



For youth age group 12-17: Marijuana use percentages were estimated between 16.21%-21.13% in Maine, Vermont, and Rhode Island and 14.08%-16.17% in New Hampshire, Massachusetts, and Connecticut.¹

For adults aged 18-25 years: Marijuana use percentages were estimated between **45.03%** - **52.18%** in Maine, Vermont, and Rhode Island, New Hampshire, and Massachusetts and **43.91%** in Connecticut.¹

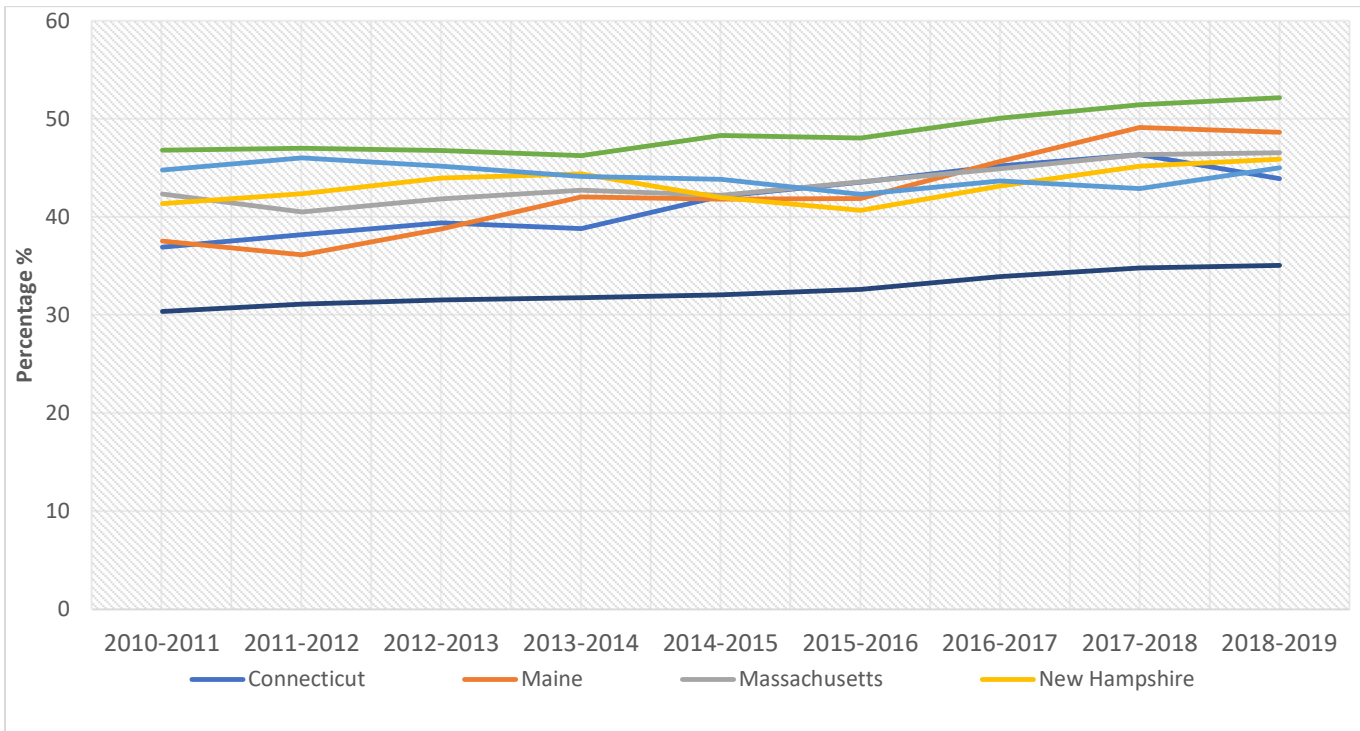
For adults aged 26 years or older: Marijuana use percentages were estimated between **20.30%** - **23.31%** in Maine, Vermont, and Rhode Island and **15.64%** - **18.67%** in New Hampshire, Massachusetts, and Connecticut.¹

The highest percentages were reported for **18 to 25 year olds** and the lowest were among individuals 12 to 17 years old in almost all New England states.¹

Maine, Vermont, and Rhode Island had the highest percentages in all age groups.¹

Prevalence Trends

1. The prevalence trends of marijuana use, in the past year, over time **among adults aged 18- 25 years** in New England region (2010-2019): ^{3,4}



Trends in marijuana use, in the past year, among individuals aged 18-25 years

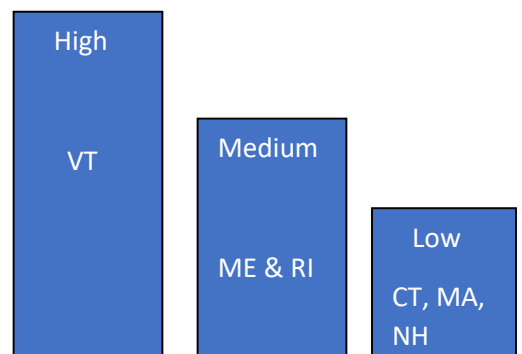
Increasing high rates, of past year use, over time were estimated in **Vermont (from 46.28% in 2013-2014 to 52.18% in 2018-2019)**.⁴

Between 2017-2018 and 2018-2019, the use in the past year increased by **2.13%** in Rhode Island (from 42.90% to 45.03%).⁴

Continuous increase in marijuana use was reported throughout many years in Massachusetts from 42.21% (2014-2015) to 46.57% (2018-2019).⁴

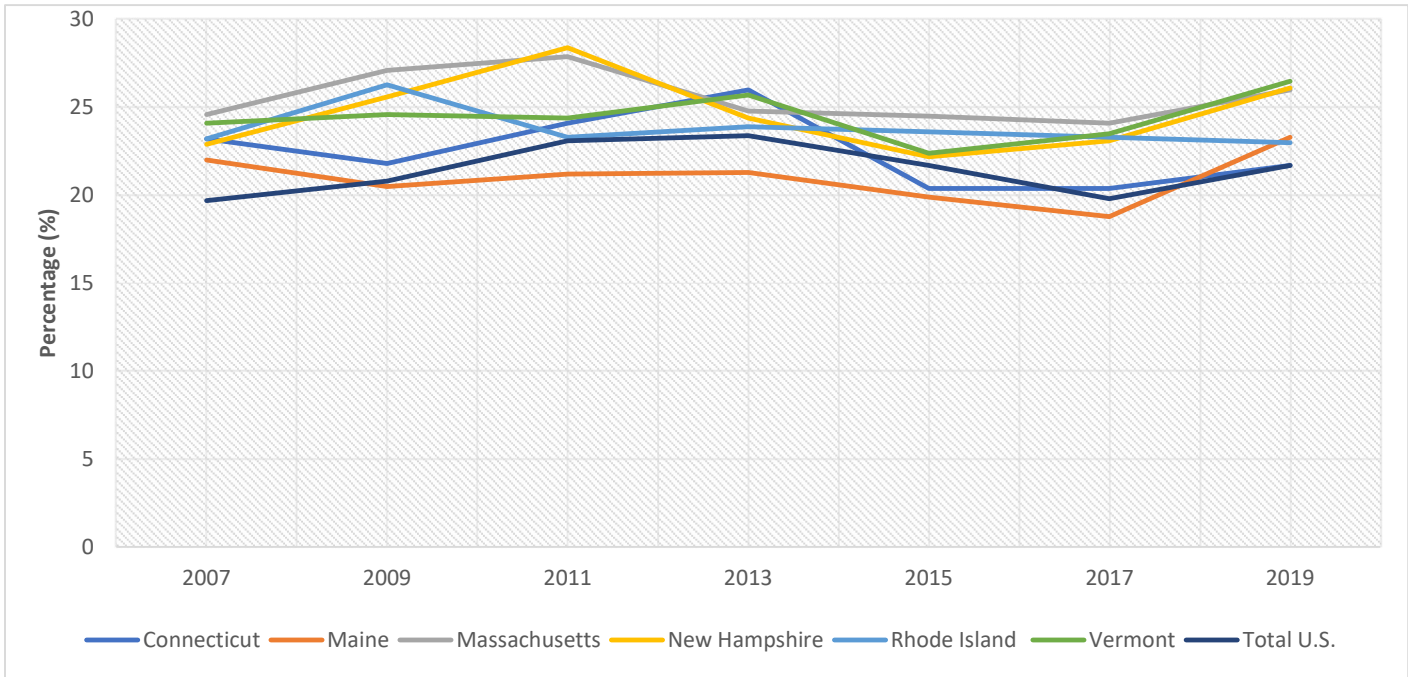
In Maine, the rate of the past year use increased by 3.48% from 2016-2017 to 2017-2018 and decreased by 0.52% during 2018-2019.⁴

Based on 2018-2019 annual estimates of marijuana use, the highest recorded percentages were among **Vermont, Maine, and Massachusetts**.



Trends in the mean treatment admissions rate for marijuana among adolescents (aged 12-17) in New England States (2008-2017).⁵

The prevalence trends of current marijuana use over time among **high school students** in New England region, (2007-2019).⁶



Marijuana use rate began rising

- From 18.8% and 24.1% in 2017 to 22.3% and 26% in 2019 in Maine and Massachusetts respectively).⁶
- From 22.2% and 22.4% in 2015 to 26.5% and 26.1% in 2019 in Vermont and New Hampshire in a respective manner.⁶

Decreased prevalence rates

- From 2013 to 2019, marijuana prevalence rate reduced by 0.9% in Rhode Island (from 23.9% to 23%).⁶
- From 2013 to 2015 the rate decreased by 5.6% (from 26% to 20.4%) in Connecticut and started to increase again in 2019 (from 20.4% in 2015 to 21.7% in 2019).⁶

The highest prevalence rates

- In 2019, the highest rates of current marijuana use were reported in Vermont (26.5%), New Hampshire (26.1%), and Massachusetts (26%).⁶

Prevalence by Gender and Race Among High School Students (2019)

Males used at higher rates than females

Estimated rates of current use were higher in males than females in all New England states except for Connecticut where estimated rates were 20.5% males and 22.9 % females).⁶

At the national level, current use of marijuana among high school students was higher in males (22.5%) than females (20.8%) in 2019.⁶

American Indian and Hispanic were the most at risk population

The higher percentages for current marijuana use were reported among American Indian and Hispanic in all New England states. The highest rates were estimated in Vermont, American Indian (35.6%) and Hispanic (35.2%), and New Hampshire (33.4% for American Indian and 33.2% for Hispanic).⁶

Nationally, highest current use of marijuana was reported among high school students of American Indian (33.8%) and multiple racial (27.8%) groups.⁶

National Usage Characteristics

Marijuana is recognized as the third, most commonly, addictive drug used in the US after tobacco and alcohol.⁷

In 2018, marijuana use in the past year was reported among **more than 11.8 million young adults** across the country; marijuana prevalence rates were higher among males than females.⁷

Lifetime marijuana use among youth decreased by **3.9%** during 2013-2019 (40.7% to 36.8%).⁸

From 2010-2017, marijuana use among US women was more than doubled.⁹

From 2002-2003 through 2016-2017, overall marijuana use **in the past month** and **during the first trimester** increased by **3.6%** and **6.4%** respectively among US pregnant women.⁹

In 2019, 29.2%, **21.7%**, 13.7%, and 7.2% of US population reported current alcohol use, current marijuana use, current binge drinking, and current opioid misuse respectively.⁸

General Facts About Marijuana

Marijuana: “is a greenish-gray mixture of the dried flowers of *cannabis sativa*”; the most commonly addictive drug after tobacco and alcohol; and acts as both stimulant and depressant substance.¹⁰

The major intoxicating psychoactive chemical in marijuana is delta-9-tetrahydrocannabinol (THC) that is found in the female cannabis plant (buds and leaves).¹⁰

Active ingredients of marijuana include honeylike hash oil, hard amberlike shatter and waxy budder.¹⁰

Slang names for marijuana include *weed*, *herb*, *pot*, *grass*, *bud*, *ganja*, *Mary Jane*, and others.¹⁰

Several marijuana-based medications have been approved by FDA (like Marinol, Cesamet, Epidiolex) and others are undergoing clinical trials like Sativex.¹⁰

Marijuana Risks

Health risks of marijuana dependence may include acute cognitive and psychomotor impairments, motor-vehicle accidents (MVAs), brain development and functioning impairment, dependence and psychosis, pulmonary or bronchial system problems, and poor pregnancy outcomes.^{11,12}

A range of mild to severe neuropsychiatric, cardiovascular, renal, and other effects is associated with acute exposure of synthetic cannabinoids.¹³

An increase of motor vehicle crashes, a dependence syndrome, cardiovascular disease, impaired respiratory function, and adverse effects on adolescent mental health and psychological development are the most likely adverse health outcomes.¹⁴

Increased risk for psychiatric disorders, including psychosis (schizophrenia), anxiety, depression, and substance use disorders has been linked to marijuana use.¹⁵

The amount of marijuana used, the age of the first use, and genetic vulnerability are the major factors associated with developing psychiatric disorders due to misuse.¹⁵

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