Cannabis Data and Information

California Cannabis Health Information Initiative

Surveillance System

Cannabis Public Health Surveillance System
Existing Population-Based Surveys

Youth

Youth Risk Behavior Survey (YRBS)

California Student Tobacco Survey (CSTS)

California Healthy Kids Survey (CHKS)

Adult Users Parents

National Survey on Drug Use and Health (NSDUH)

Behavioral Risk Factor Surveillance System (BRFSS)

California Adult Tobacco Survey (CATS)

Pregnancy and Breastfeeding

Maternal and Infant Health Assessment (MIHA)

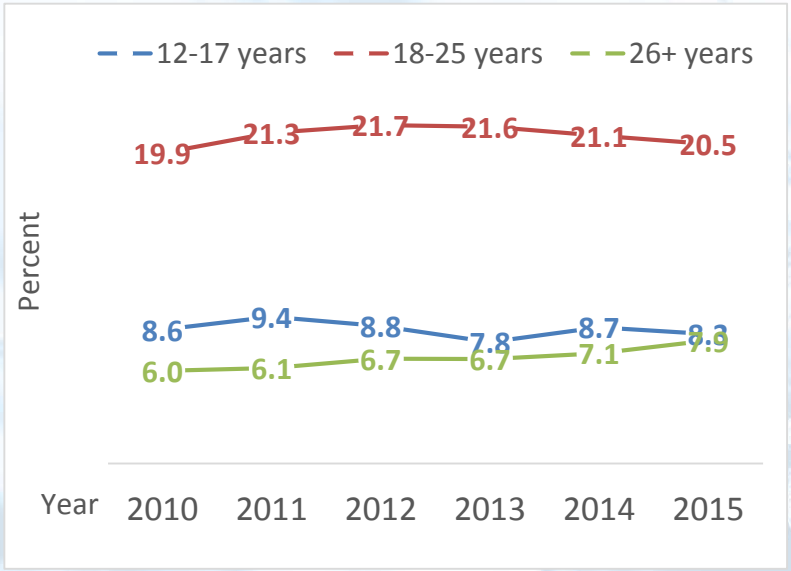
LET'S TALK CANNABIS

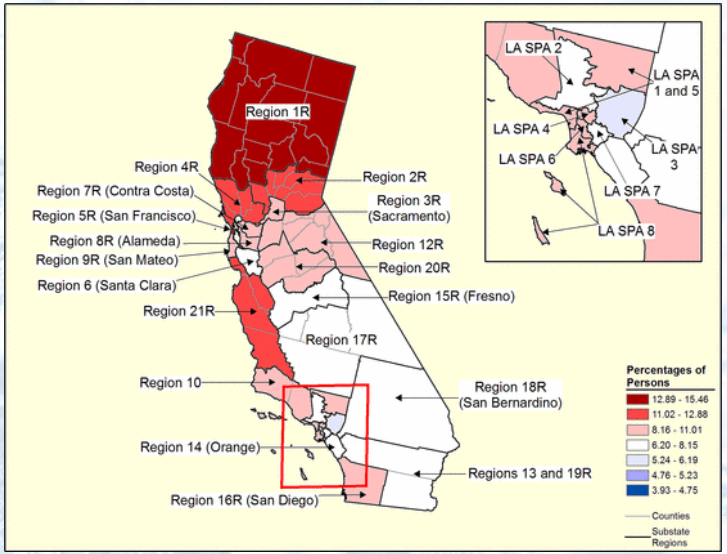
California Department of PublicHealth

Current Usage

Self-Reported Cannabis use in the Past Month Among Californians Aged 12 and Older

National Survey on Drug Use and Health, Substance Abuse and Mental Health Services Administration



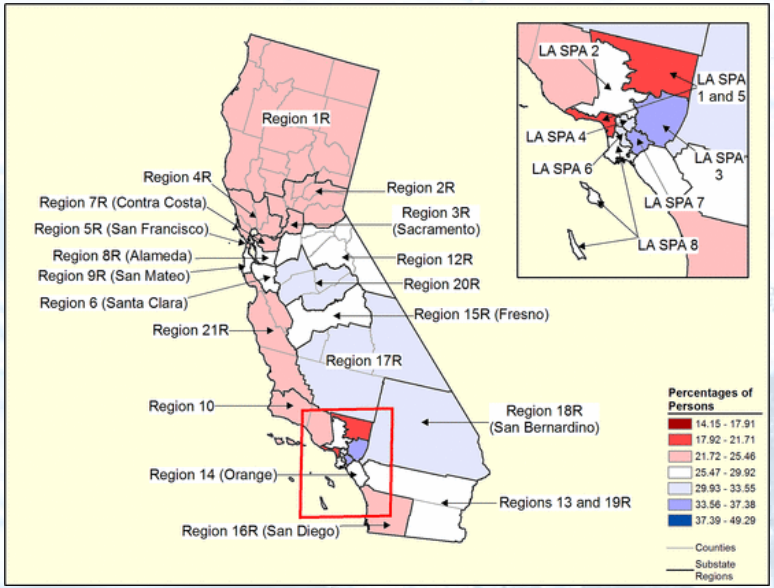


Source: Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2009-2015. https://www.samhsa.gov/data/population-data-nsduh

Perceptions of Great Risk

Perceptions of Great Risk from Smoking Cannabis Once a Month among Californians Aged 12 and Older

2012-2014 National Survey on Drug Use and Health, Substance Abuse and Mental Health Services Administration

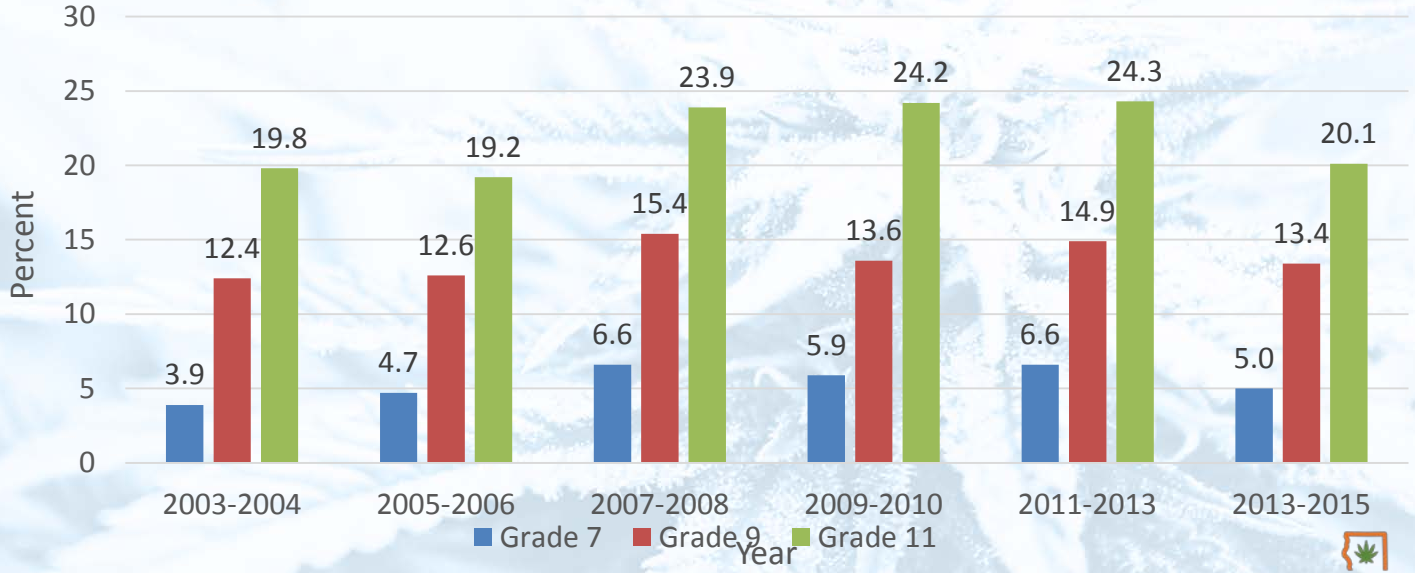


Source: Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2012, 2013, and 2014.

Usage Among Youth

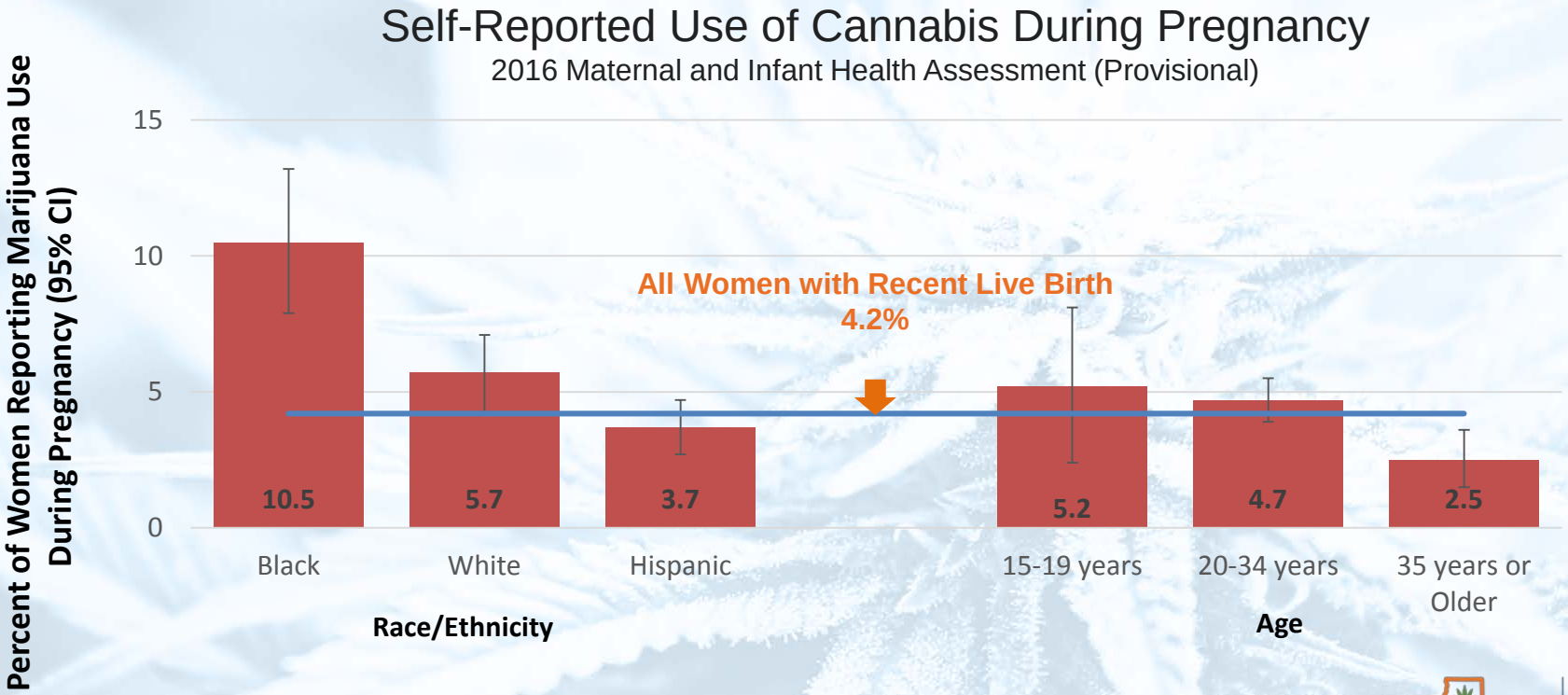
Self-Reported Cannabis Use in the Past Month Among 7th, 9th, and 11th Graders in California

California Healthy Kids Survey, California Department of Education/WestEd



Source: California Healthy Kids Survey, Biennial Statewide Survey. California Department of Education and WestEd

Usage During Pregnancy

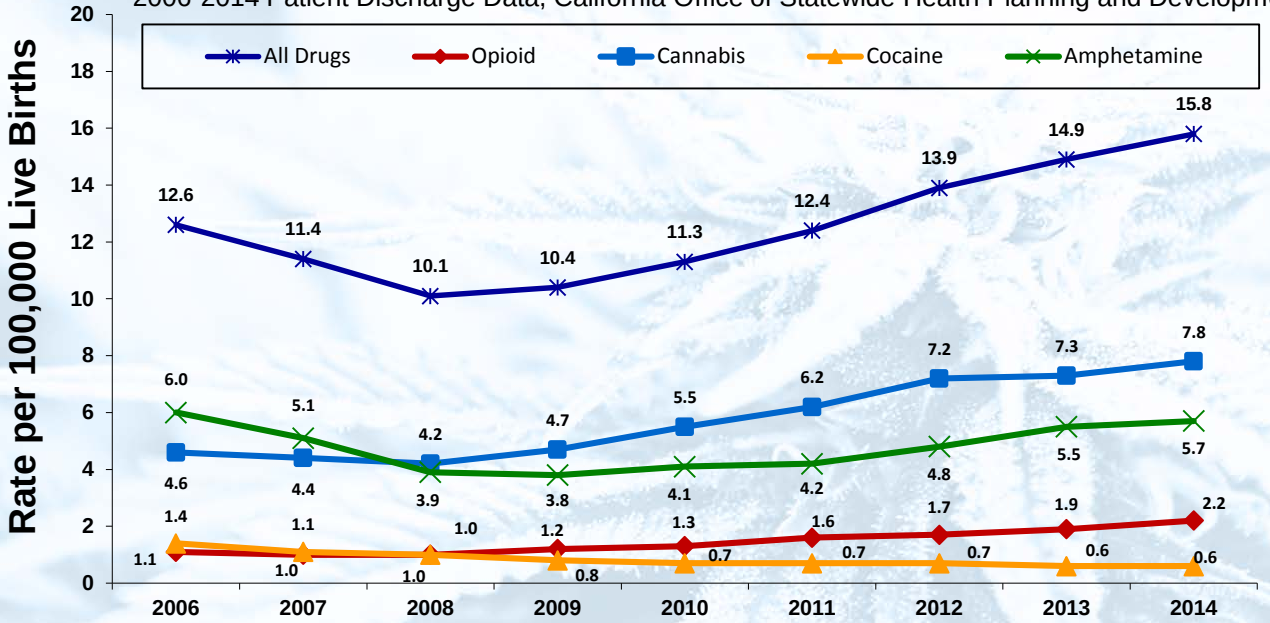


Source: Provisional 2016 Maternal and Infant Health Assessment (MIHA) Data. Provisional MIHA estimates are weighted to preliminary California birth certificate data and will differ slightly from MIHA estimates weighted to the final 2016 Birth Statistical Master File. Prepared by: Center for Family Health / Maternal, Child and Adolescent Health Division / Epidemiology, Surveillance and Federal Reporting. 2017.

Drug Use Diagnosis at Delivery

Drug Use Diagnosis by Drug Type for California Women at Delivery Hospitalization

2006-2014 Patient Discharge Data, California Office of Statewide Health Planning and Development

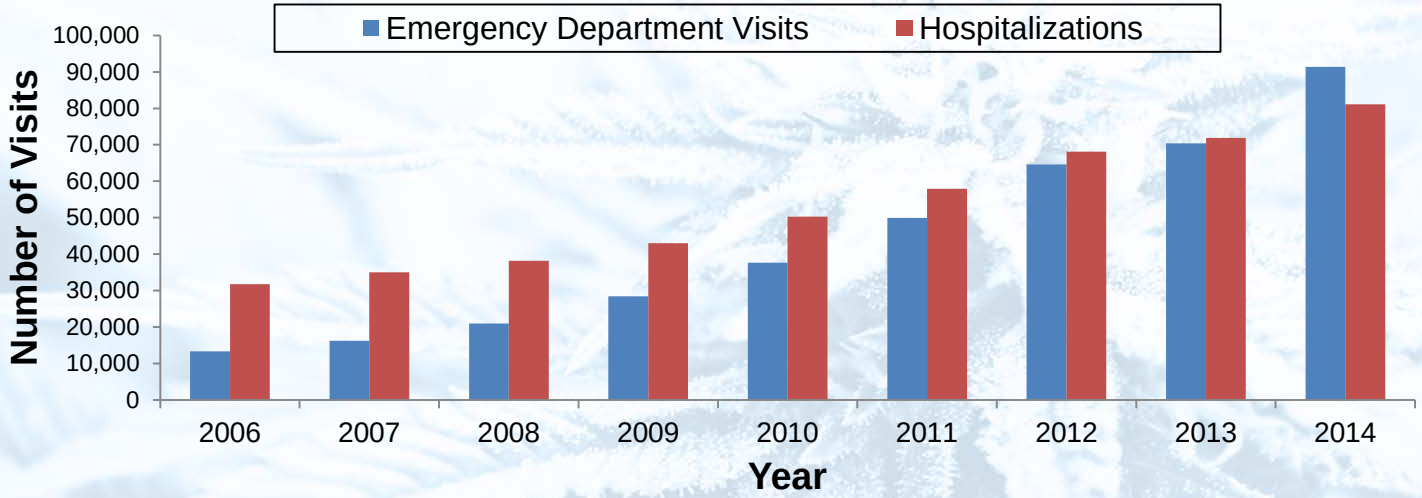


Source: CDPH Office of Statewide Health Planning and Development, Emergency Department and Inpatient Discharge data

Healthcare Visits

Emergency Department Visits and Hospitalizations with a Cannabis-Related Diagnosis in California*

Emergency Department and Inpatient Discharge Data, California Office of Statewide Health Planning and Development



*Any mention of cannabis dependence (ICD-9-CM code 304.3) or cannabis abuse (ICD-9-CM code 305.2) in patient record.
Source: CDPH Office of Statewide Health Planning and Development, Emergency Department Data and Inpatient Discharge Data
Prepared by: California Department of Public Health, Safe and Active Communities Branch. 2017.
Report generated from http://epicenter.cdph.ca.gov

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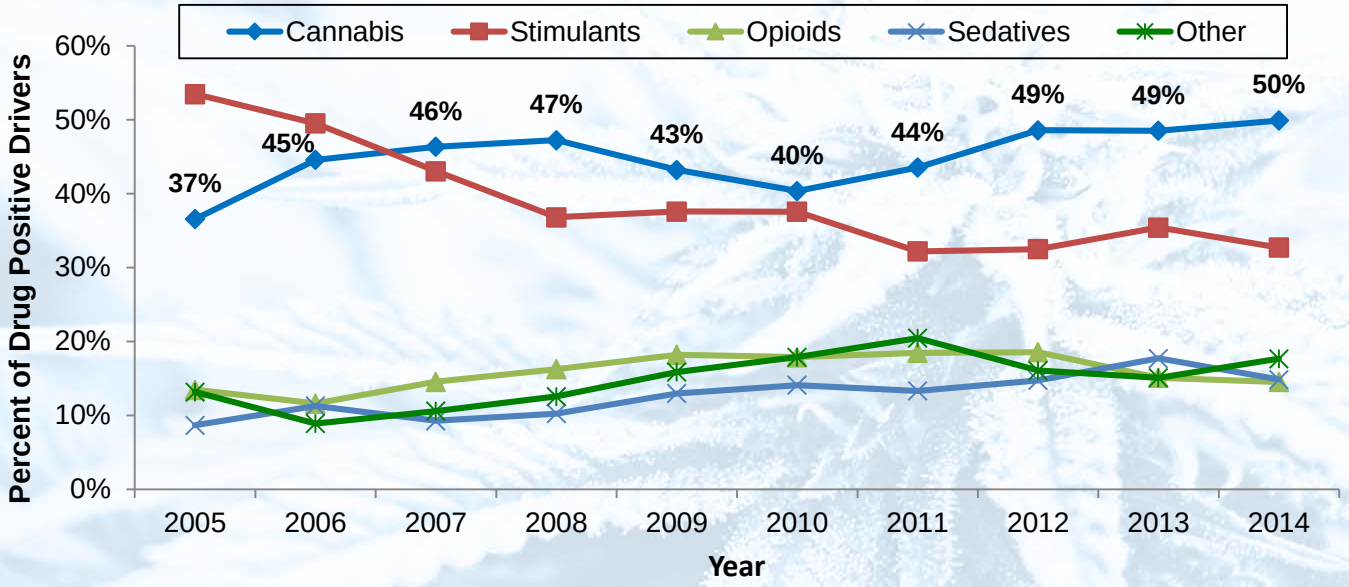
California Department of PublicHealth

Fatal Motor Vehicle Crashes

Drugs Detected among Drivers Testing Positive for Drugs in Fatal Motor Vehicle Crashes in California

2005-2014 Fatal Analysis Reporting System, National Highway Traffic Safety Administration

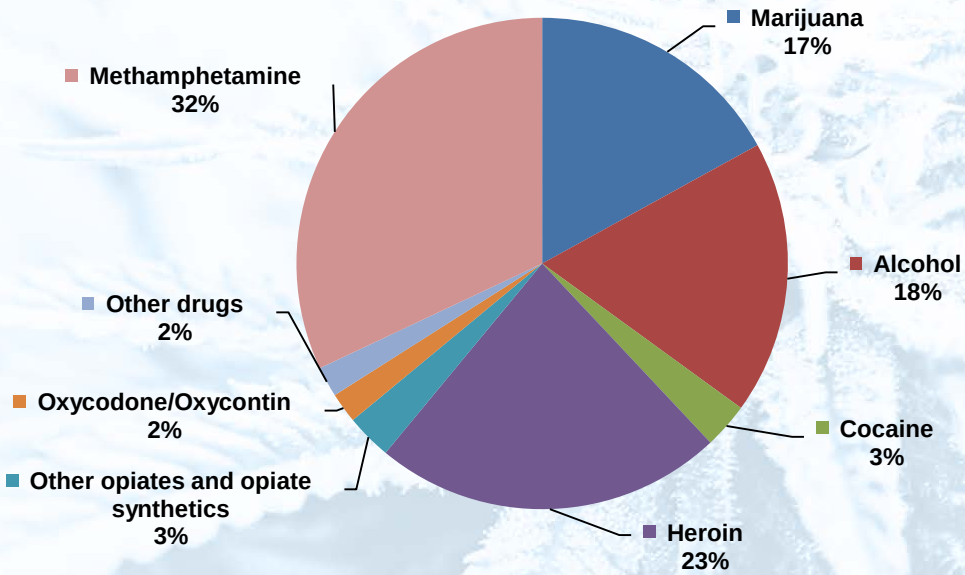


Source: 2005-2014 Fatal Analysis Reporting System data, National Highway Traffic Safety Administration

Substance Use Disorder Treatment

Primary Drug Reported at Admission* to Publicly Funded Substance Use Disorder Treatment Programs

2014-2015 California Outcomes Measurement System Treatment, Department of Health Care Services



*The primary drug reported at treatment admission is defined as the drug causing the greatest dysfunction to the beneficiary at the time of admission. Source: 2017 Statewide Needs Assessment and Planning Report, California Department of Health Care Services http://www.dhcs.ca.gov/formsandpubs/publications/Documents/SNAP_2017_Report_FINAL.pdf

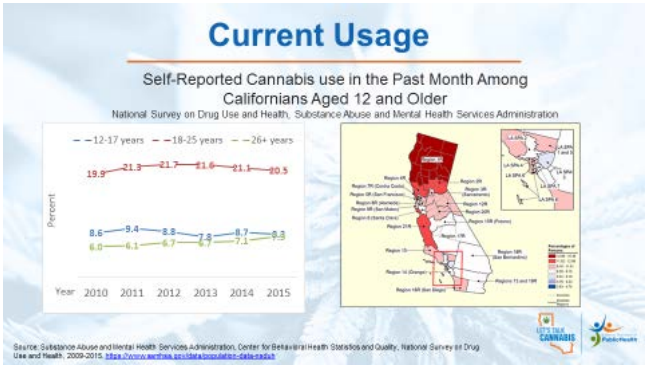
LET'S TALK CANNABIS

California Department of PublicHealth

Let's Talk Cannabis Data Slide Deck

How to Use Data

Slide Title: "Self-Reported Cannabis use in the Past Month Among Californians Aged 12 and Older"



Source Type: National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Behavioral Health Statistics and Quality

Years: 2010 - 2015

Source Description: The National Survey on Drug Use and Health is an annual population-based survey administered to randomly selected individuals age 12 and older by the Substance Abuse and Mental Health Services Administration. The survey collects information on substance use, behavior, health, attitudes and consequences. California's sample is approximately 4,500, of which the responses are weighted to provide representative population estimates.

Graph: The graph on the left shows the trend of past month cannabis use for three different age groups from 2010-2015. (Orange=12-17 years; Red=18-25 years; Green=26 years and older).

- In the years 2010-2015 the highest rate of past month cannabis use was seen in the 18-25 year old age group (19.9% to 21.7%), followed by youth aged 12-17 years (7.8% to 9.4%), and adults 26 years and older (6.0% to 7.9%).
- About 1 in 5 Californians aged 18-25 (19.9% to 21.7%) had used cannabis in the past month for the years 2010-2015.
- The prevalence of use among adults 26 and older increased by 32% from 6% to 8% over the six-year period.

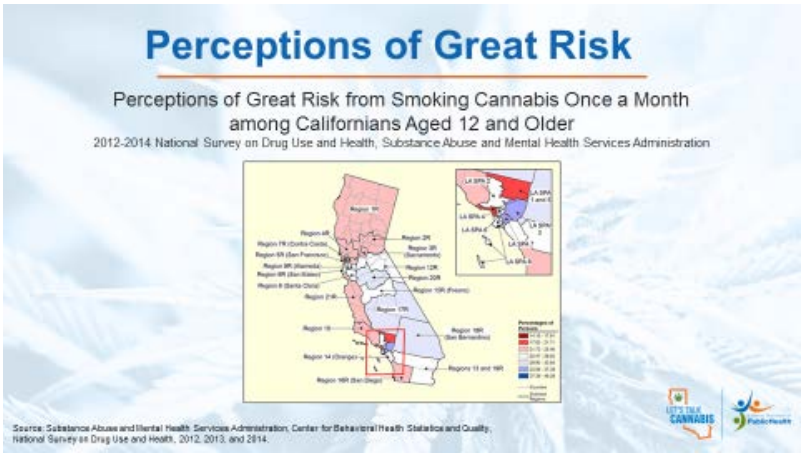
Map: The map on the right shows the geographic variation in California of the prevalence of cannabis use in the past month for the years 2012-2014 by substate regions. (Red=higher prevalence; Blue/white=lower prevalence)

- Higher rates of use occurred in the most northern counties (indicated by the darkest red color) with prevalence estimates of 12.9%-15.5%.
- Prevalence estimates of 8-11% are seen in the remaining northern areas and coastal areas (indicated by the lighter red colors).
- Much of southern California has lower prevalence of use, with the lowest prevalence (5.2%-6.2%) seen in LA county.

Let's Talk Cannabis Data Slide Deck

How to Use Data

Slide Title: "Perceptions of Great Risk from Smoking Cannabis Once a Month among Californians Aged 12 and Older"



Source Type: National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Behavioral Health Statistics and Quality

Years: 2012 - 2014

Source Description: The National Survey on Drug Use and Health is an annual population-based survey administered to randomly selected individuals age 12 and older by the Substance Abuse and Mental Health Services Administration. The survey collects information on substance use, behavior, health, attitudes and consequences. California's sample is approximately 4,500, of which the responses are weighted to provide representative population estimates.

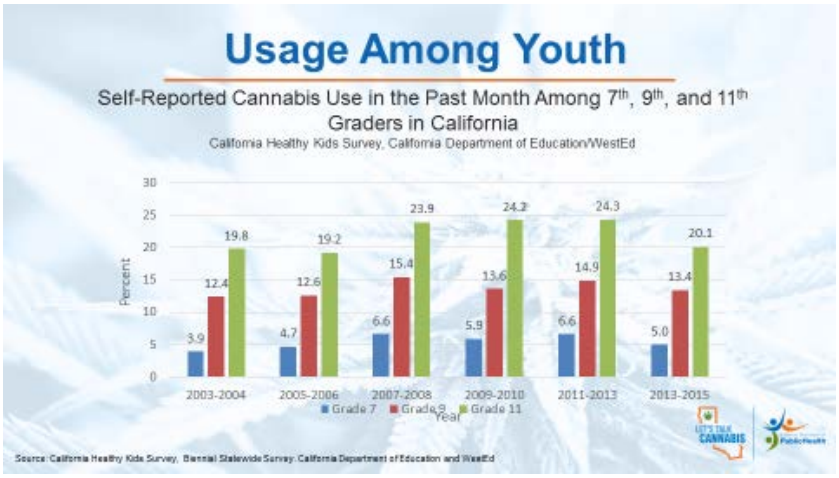
Map: The map shows the geographic variation in California of the estimates of perceptions of great risk from smoking cannabis once a month for the years 2012-2014 by substate regions. (Red=lower percentages of Californians perceiving great risk from smoking cannabis once a month; Blue/white= higher percentages of Californians perceiving great risk from smoking cannabis once a month)

- Less people in the northern counties and coastal counties perceive great risk from smoking cannabis once a month, about 21-25%.
- Much of southern California has more people that perceive great risk from smoking cannabis once a month (over 25%) compared to the rest of the state.
- Interestingly, the lowest and highest percent of people who perceive great risk from smoking cannabis once a month are both in LA County.
- This slide can be paired with slide "Cannabis use in the Past Month Among Californians Aged 12 and Older" to show relationship of perceptions of risk and prevalence of use.
- The geographic pattern of perceptions of great risk somewhat mirrors the pattern seen in the prevalence of past month use map.

Let's Talk Cannabis Data Slide Deck

How to Use Data

Slide Title: "Self-Reported Cannabis Use in the Past Month Cannabis Use Among 7th, 9th, 11th Graders in California"



Source Type: California Healthy Kids Survey (CHKS), California Department of Education and WestED

Years: 2012 - 2014

Source Description: The California Healthy Kids Survey is a biennial statewide survey administered to randomly selected representative sample of students in grades 7, 9, and 11 throughout California. The survey collects information on students' attitudes, behaviors, and experiences, of which substance use is a key area assessed. The sample for the 2013-2015 survey was approximately 36,000 students.

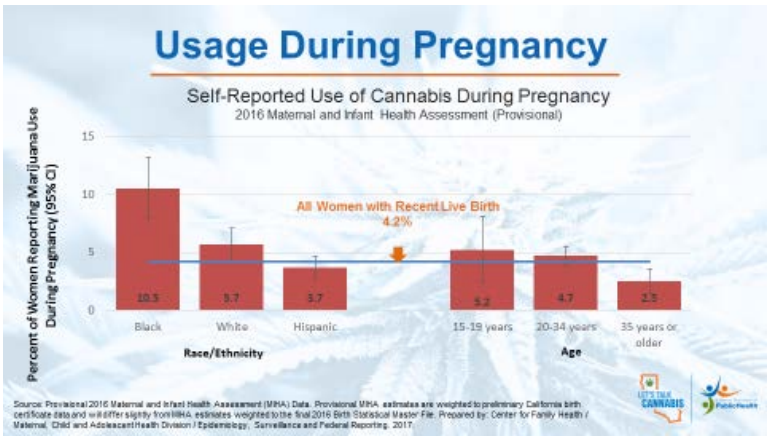
Graph: The graph displays the trend of past month cannabis use for students in grades 7, 9, and 11 from 2003-2015. (Orange= Grade 7; Blue=Grade 9; Green= Grade 11)

- The prevalence of past month cannabis use increases with age, with the highest rates of use seen among 11th graders (greater than 20%).
- The rate of past month cannabis use among 11th graders was four times that of 7th graders throughout 2003-2015.

Let's Talk Cannabis Data Slide Deck

How to Use Data

Slide Title: "Self-Reported Use of Cannabis During Pregnancy"



Source Type: Maternal and Infant Health Assessment (MIHA), California Department of Public Health, Maternal, Child and Adolescent Health Division

Year: 2016

Source Description: The Maternal and Infant Health Assessment is a statewide representative survey of women with a recent live birth in California aged 15 years and older. The survey collects information about maternal and infant experiences and maternal attitudes and behaviors before, during and after pregnancy. MIHA is California's equivalent of CDC's Pregnancy Risk Assessment Monitoring System (PRAMS). Nearly 7,000 women are surveyed annually, of which the responses are weighted in order for the findings to be representative of the more than half million women who give birth in California each year.

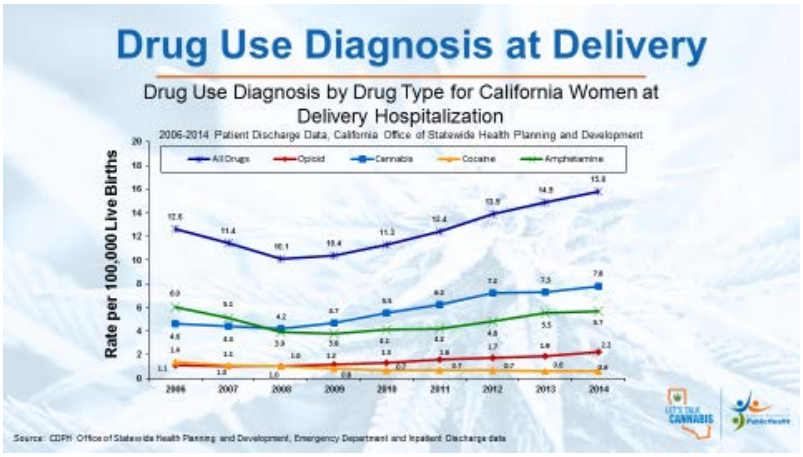
Graph: The graph displays new (provisional) data reflecting the addition of one cannabis-related questions in the 2016 MIHA survey ("During your most recent pregnancy, did you use marijuana or weed in any way (like smoking, eating or vaping)?")

- Overall in 2016, the rate of marijuana use among women with a recent live birth in California was 4.2%.
- Preliminary data show that there are significant disparities in the use of cannabis during pregnancy, with higher rates of use among Black women and younger women.
    - Five percent of youth (age 15-19) reported use during pregnancy, which is slightly higher than the proportion of childbearing women represented in that age group (4.2%).
    - In terms of race/ethnicity, Black women self-reported the highest proportion of cannabis use with 10.5% of respondents reporting use during pregnancy. This is nearly twice the 'rate' of the population of Black women who give birth (5.6%).
- Estimates for other race/ethnicity groups (e.g., Asian/Pacific Islander and American Indian/Alaska Native) are not shown due to small samples sizes and low statistical reliability.

Let's Talk Cannabis Data Slide Deck

How to Use Data

Slide Title: "Drug Use Diagnosis by Drug Type for California Women at Delivery Hospitalization"



Source Type: Patient Discharge Data (PDD), California Office of Statewide Health Planning and Development

Years: 2006-2014

Source Description: The California Office of Statewide Planning and Development patient discharge data contains information on patients discharged from all non-Federal hospitals in California. Drug diagnoses are based on ICD-9-CM codes found in the patient record. There are two codes for cannabis diagnosis: cannabis dependence (304.3) and cannabis abuse (305.2).

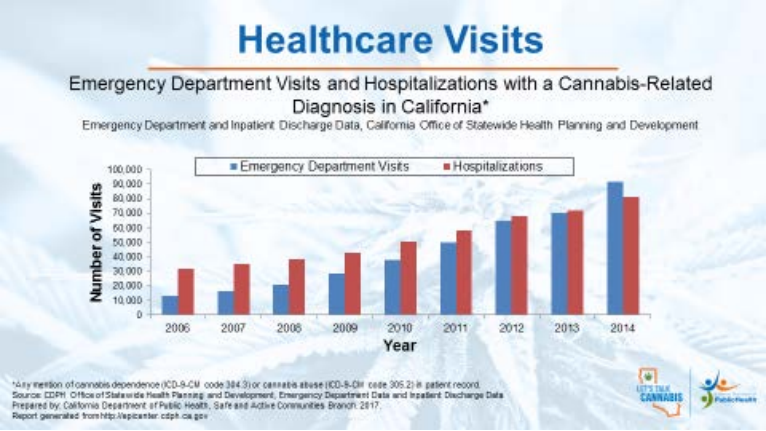
Graph: The graph shows the prevalence of drugs present at the time of deliver hospitalization for resident California women in 2006-2014.

- Prevalence of cannabis has increased in the childbearing population since 2008 through 2014.
- In 2014, 7.8% of women with a delivery hospitalization tested positive for cannabis, a 70% increase from 2006 (4.6%).
- It is unknown who is getting tested and why, so increased prevalence trends may reflect an actual increase in the prevalence of use among pregnant women or an increase in testing for cannabis. Some counties have universal screening. It is also difficult to know how recent the cannabis use was, given that cannabis can stay in the body for a while and with greater use, the longer it will stay in the body. Finally, there are a number of lab tests for cannabis which may vary in sensitivity and specificity and which measure different metabolites of cannabis.
- Codes used for the rates were identified via national measures as published by:
    - Thompson J.L., Kuklina E.V. & Bateman B.T., et al. (2015). Medical and Obstetric Outcomes Among Pregnant Women With Congenital Heart Disease. Obstet Gynecol., 126:346–54. (Numerator)
    - Kuklina E.V., Whiteman M.K. & Hillis S.D., et al. (2008). An enhanced method for identifying obstetric deliveries. Matern Child Health J., 12(4):469-77. (Denominator)

Let's Talk Cannabis Data Slide Deck

How to Use Data

Slide Title: "Emergency Department Visits and Hospitalizations with a Cannabis-Related Diagnosis in California"



Source Type: Patient Discharge Data (PDD) and Emergency Department (ED) Visit data, California Office of Statewide Health Planning and Development

Years: 2006-2014

Source Description: The California Office of Statewide Planning and Development patient discharge data contains information on patients discharged from all non-Federal hospitals in California. The emergency department data contains information on patients who were admitted to an emergency department in California, then treated and released, or transferred to another facility. Data were obtained from California Department of Public Health's EpiCenter: California Injury Data Online: http://epicenter.cdph.ca.gov/

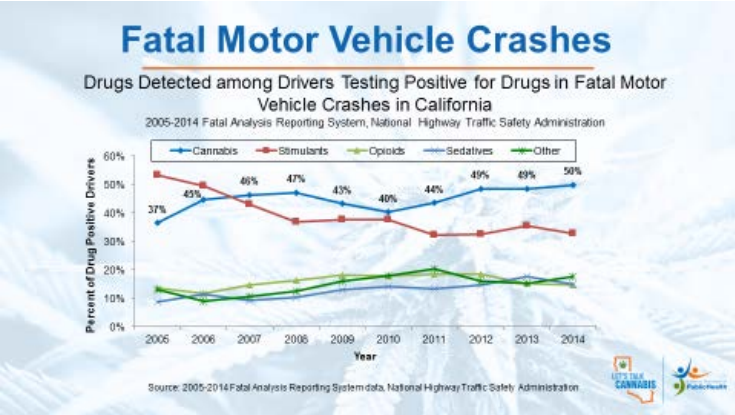
Graph: The graph shows the number of emergency department visits and hospitalizations that had any mention of a cannabis diagnosis (cannabis dependence or cannabis abuse) in the patient record in 2006-2014.

- Both emergency department visits and hospitalizations with any mention of a cannabis diagnosis have increased over the time period 2006-2014.
    - Emergency department visits increased from 13,316 to 91,361 (a 586% increase)
    - Hospitalizations increased from 31,728 to 81,137 (a 156% increase)
- In 2014, the number of emergency department visits with any mention of a cannabis diagnosis (n=91,361) surpassed the number of hospitalizations (n=81,137) for the first time in this time period.
- Drug diagnoses are based on ICD-9-CM codes found in the patient record. There are two codes for cannabis diagnosis: cannabis dependence (304.3) and cannabis abuse (305.2).

Let's Talk Cannabis Data Slide Deck

How to Use Data

Slide Title: "Drugs detected among Drivers Testing Positive for Drugs in Fatal Motor Vehicle Crashes in California"



Source Type:
Fatality Analysis Reporting System (FARS), National Highway Traffic Safety Administration

Years: 2005-2014

Source Description:
The Fatality Analysis Reporting System is national data system that collects annual data on fatal injuries occurring in motor vehicle traffic crashes. Drug test information is available for approximately 40% of drivers involved in fatal crashes.

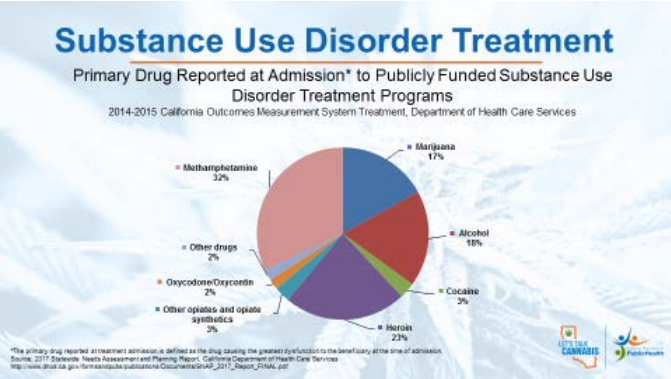
Graph: The graph shows the drugs detected among drivers who tested positive for drugs that were involved in a fatal motor vehicle crash in 2005-2014.

- Cannabis was the most common drug detected among drivers who tested positive for drugs (45% overall), and since 2007 has been the most prevalent drug among drug positive drivers.
- There was a 36% increase over the ten-year period in the presence of cannabis among drivers who tested positive for drugs, from 37% to 50%.
- In 2014, 50% of drivers who tested positive for drugs had cannabis in their system.
- A drug positive driver is one that tested positive for at least one drug. A positive drug test indicates that a drug was present in a driver's system, but does not indicate the person was impaired by the drug, concentrations or amount of drug are not recorded in the data.

Let's Talk Cannabis Data Slide Deck

How to Use Data

Slide Title: "Primary Drug Reported at Admission to Publicly Funded Substance Use Disorder Treatment Programs"



Source Type: California Outcomes Measurement System Treatment (CalOMS Tx) data, Department of Health Care Services (Reported in 2017 Statewide Needs Assessment and Planning Report)

Years: 2014-2015

Source Description: The California Outcomes Measurement System Treatment data system is the statewide database that provides data on all beneficiaries receiving substance use disorder treatment services from publicly monitored treatment programs and all narcotic treatment programs. Data collected includes treatment utilization, admission and discharge information, outcome measures and program performance measures. Data are pulled from the Department of Health Care Services' 2017 Statewide Needs Assessment and Planning Report.

Graph: The graph shows the primary drug that was reported by beneficiaries of substance use disorder treatment at the time of treatment admission in 2014-2015.

- Cannabis is the third most prevalent primary drug for treatment (17%), following treatment for methamphetamine (32%) and heroin (23%).
- The primary drug reported at treatment admission is defined as the drug causing the greatest dysfunction to the beneficiary at the time of admission, there may be poly-drug treatment occurring.

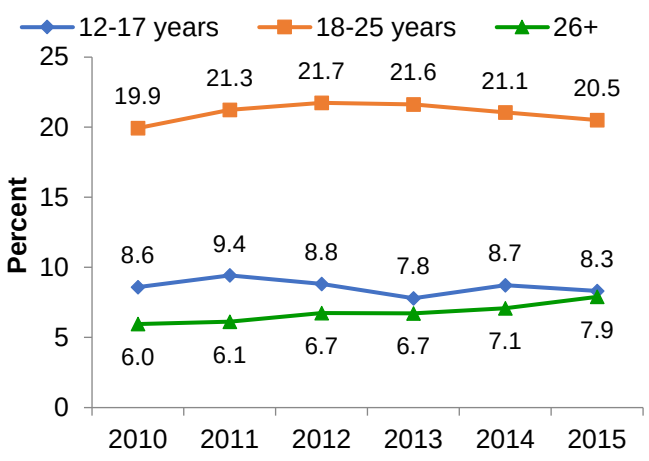
Cannabis in California

Prevalence of Use and Health Consequences

Prevalence of Cannabis Use in California

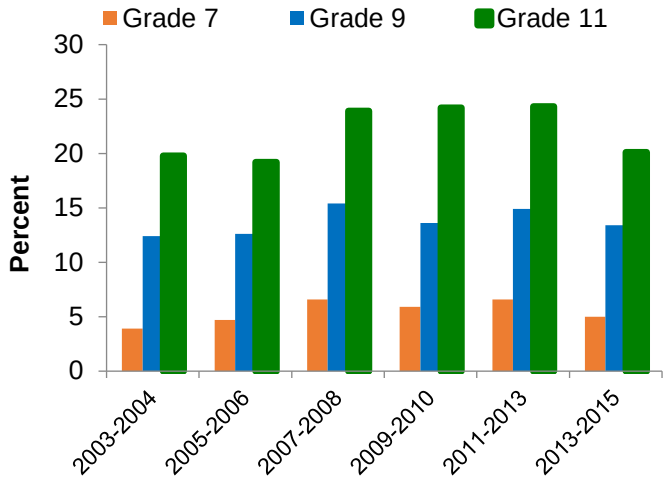
1 in 5	4x	4%	10%
Californians aged 18-25 had used cannabis in the past month.	more 11th graders than 7th graders used cannabis in the past month.	of women in California reported using cannabis during pregnancy.	of Black women reported using cannabis during pregnancy.

Cannabis Use in the Past Month Among Californians Aged 12 and Older, 2010-2015



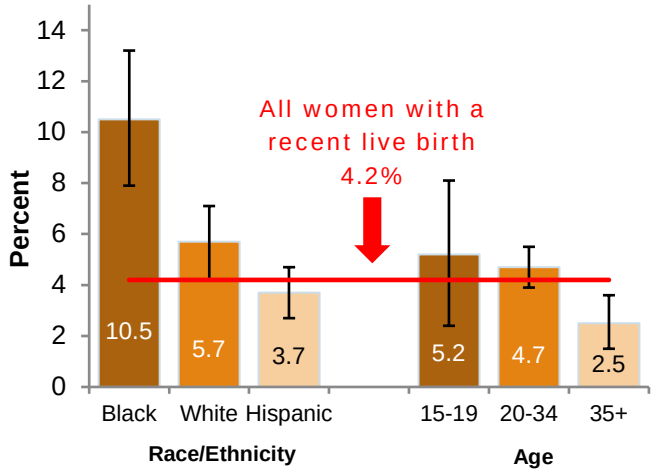
Source: National Survey on Drug Use and Health, 2009-2015. Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality
https://www.samhsa.gov/data/population-data-nsduh

Cannabis Use in the Past Month Among 7th, 9th, and 11th Graders in California, 2003-2015



Source: California Healthy Kids Survey, Biennial Statewide Survey. California Department of Education and WestEd
http://chks.wested.org/

Cannabis Use During Pregnancy Among California Women with a Recent Live Birth, 2016



Source: 2016 Maternal and Infant Health Assessment Data (Provisional). California Department of Public Health, Center for Family Health, Maternal, Child and Adolescent Health Division.
https://www.cdph.ca.gov/Programs/CFH/DMCAH/MIHA/

LET'S TALK CANNABIS

California Department of PublicHealth

Website: www.letstalkcannabisca.com
Email: letstalkcannabis@cdph.ca.gov

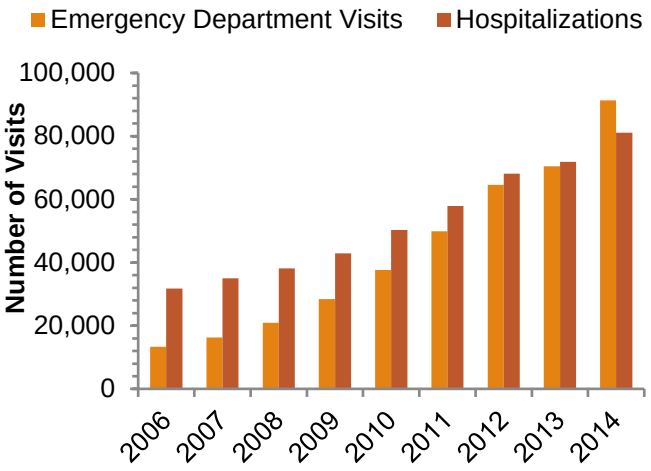
Cannabis in California

Prevalence of Use and Health Consequences

Health Consequences of Cannabis Use in California

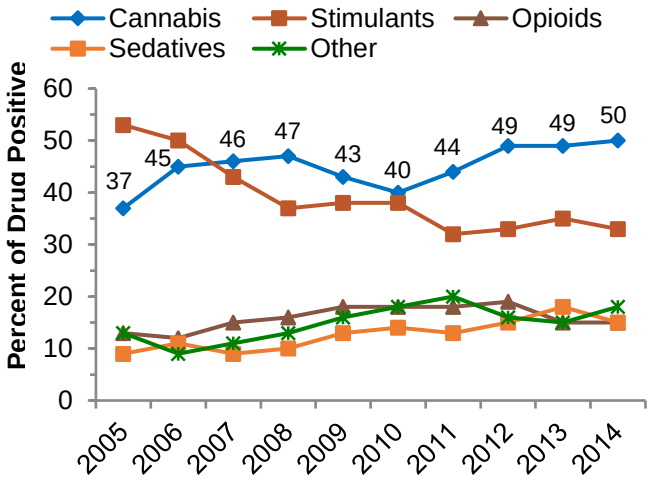
91,361	81,137	50%	#3
Emergency department visits in 2014 with a cannabis diagnosis*, a 586% increase from 2006.	Hospitalizations in 2014 with a cannabis diagnosis*, a 156% increase from 2006.	of drug positive drivers tested positive for cannabis in 2014, a 36% increase from 2005.	Cannabis was the third most prevalent drug reported¥ at time of admission to substance use treatment.

Emergency Department Visits and Hospitalizations with a Cannabis Related Diagnosis*, 2006-2014



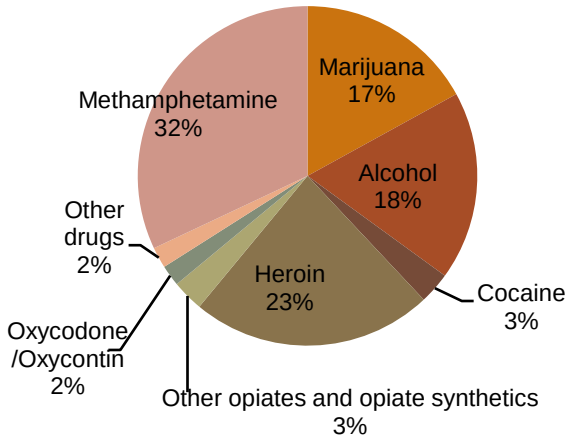
Source: Emergency Department Data and Inpatient Discharge Data, 2006-2014. California Office of Statewide Health Planning and Development
http://epicenter.cdph.ca.gov/

Drugs Detected Among Drivers Testing Positive for Drugs in Fatal Motor Vehicle Crashes, 2005-2014



Source: Fatal Analysis Reporting System data, 2005-2014. National Highway Traffic Safety Administration
https://www.nhtsa.gov/research-data/fatality-analysis-reporting-system-fars

Primary Drug Reported¥ at Admission to Public Funded Substance Use Treatment Programs£, 2014-2015



Source: 2017 Statewide Needs Assessment and Planning Report, California Outcomes Measurement System Treatment. California Department of Health Care Services
http://www.dhcs.ca.gov/formsandpubs/publications/Documents/SNAP_2017_Report_FINAL.pdf

LET'S TALK CANNABIS

California Department of PublicHealth

Website: www.letstalkcannabisca.com
Email: letstalkcannabis@cdph.ca.gov

* Cannabis diagnosis includes any mention of cannabis mental disorders of dependence (ICD-9-CM 304.3) or abuse (ICD-9-CM 305.2) in patient record.

¥ The primary drug reported at treatment admission is the drug reported to be causing the greatest dysfunction to the beneficiary at time of admission.

£ Public funded substance use disorder treatment only, does not represent private or all treatment available.

Cannabis Public Health Surveillance: Existing Data Sources

Current Population-Based Surveys, Administrative and Crash Report Data for California

Data Source	Type of Data	Population	Frequency and Year of Most Recent Data	Cannabis Topics Covered	State and Local Data Availability	Data Administrator and Online Data Resources
Youth Risk Behavior Survey	Population-based survey	Middle School students High School Students	Bi-Annual 2015	2 questions (Middle School): • Use (ever) • Age of first use 4 questions (High School): • Use (ever and recent) • Age of first use • Frequency of use	• Statewide • 4 larger urban school districts (Los Angeles, San Diego, San Francisco, Oakland)	Centers for Disease Control and Prevention https://www.cdc.gov/healthyyouth/data/yrbs/data.htm California Department of Education http://s-r-g.org/data-analysis/?page=projects_yrbs
California Student Tobacco Survey	Population-based survey	Middle School students High School Students	Bi-Annual 2015-2016	10 questions: • Use (ever and recent) • Frequency of use • Social • Health education in school	• Statewide	California Department of Public Health, California Tobacco Control Branch https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/CTCB/Pages/SurveyInstrument.aspx
California Healthy Kids Survey	Population-based survey	Middle School students High School Students	Annual 2013	7 questions (Middle School): • Use (ever and recent) • Frequency of use • Method of use • Perceptions • Access 8 questions (High School): • Use (ever and recent) • Frequency of use • Method of use • Perceptions	• Statewide • County • School District	California Department of Education http://chks.wested.org/ Online query http://chks.wested.org/query-chks/

Cannabis Public Health Surveillance: Existing Data Sources

Current Population-Based Surveys, Administrative and Crash Report Data for California

Data Source	Type of Data	Population	Frequency and Year of Most Recent Data	Cannabis Topics Covered	State and Local Data Availability	Data Administrator and Online Data Resources
				• Access • Cessation attempts		
National Survey on Drug Use and Health	Population-based survey	12 years and older	Annual 2015	40 questions: • Use (ever and recent) • Age of first use • Frequency of use • Attitudes and perceptions • Access • Recommendation by a healthcare professional • Cessation attempts • Mental and physical health problems • Behavior and social relationships • Substance abuse treatment or counseling	• Statewide • 20 Substate regions	Substance Abuse and Mental Health Services Administration https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR1-2015/NSDUH-FFR1-2015/NSDUH-FFR1-2015.pdf California Report https://www.samhsa.gov/data/sites/default/files/California_BHBarometer_Volume_4.pdf California Substate Regions https://www.samhsa.gov/data/population-data-nsduh/reports?tab=38

Cannabis Public Health Surveillance: Existing Data Sources

Current Population-Based Surveys, Administrative and Crash Report Data for California

Data Source	Type of Data	Population	Frequency and Year of Most Recent Data	Cannabis Topics Covered	State and Local Data Availability	Data Administrator and Online Data Resources
Behavioral Risk Factor Surveillance System	Population-based survey	18 years and older	Annual 2016	2 questions (Track II) • Recent use • Frequency of use 16 questions (Track III) • Recent use • Frequency of use • Method of use • Age of first use • Recommendation by a healthcare professional • Driving after use • Attitudes and perceptions • Secondhand smoke	• Statewide • County	California State University Sacramento http://www.csus.edu/research/phsrp/brfss.html Centers for Disease Control and Prevention https://www.cdc.gov/brfss/index.html California Department of Public Health, Center for Chronic Disease and Health Promotion https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/CDSRB/Pages/Program-Landing2.aspx
California Adult Tobacco Survey	Population-based survey	18 years and older	Annual 2016	17 questions • Recent use • Method of use • Frequency of use • Age of first use • Recommendation by a healthcare professional • Driving after use • Attitudes and perceptions	• Statewide	California Department of Public Health, California Tobacco Control Branch https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/CTCB/Pages/SurveyInstrument.aspx

Cannabis Public Health Surveillance: Existing Data Sources

Current Population-Based Surveys, Administrative and Crash Report Data for California

Data Source	Type of Data	Population	Frequency and Year of Most Recent Data	Cannabis Topics Covered	State and Local Data Availability	Data Administrator and Online Data Resources
				• Advertising • Secondhand smoke		
Maternal and Infant Health Assessment	Population-based survey	Women 15 years and older who had a recent live birth	Annual 2016 (provisional)	2 questions • Use during pregnancy • Use postpartum	• Statewide • 35 Counties • 9 Regions	California Department of Public Health, Maternal Child and Adolescent Health Division https://archive.cdph.ca.gov/data/surveys/MIHA/Pages/MaternalandInfantHealthAssessment(MIHA)survey.aspx
Inpatient Discharge Data	Administrative Health	All California residents	Annual 2014	Cannabis dependence (ICD-9-CM 304.3) Cannabis abuse (ICD-9-CM 305.2)	• Statewide • County	California Office of Statewide Health Planning and Development https://www.oshpd.ca.gov/HID/Patient-Discharge-Data.html California EpiCenter: Injury Data Online http://epicenter.cdph.ca.gov/
Emergency Department Visit Data	Administrative Health	All California residents	Annual 2014	Cannabis dependence (ICD-9-CM 304.3) Cannabis abuse (ICD-9-CM 305.2)	• Statewide • County	California Office of Statewide Health Planning and Development https://www.oshpd.ca.gov/HID/ED-AS-Data.html California EpiCenter: Injury Data Online http://epicenter.cdph.ca.gov/

Cannabis Public Health Surveillance: Existing Data Sources

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Data Source	Type of Data	Population	Frequency and Year of Most Recent Data	Cannabis Topics Covered	State and Local Data Availability	Data Administrator and Online Data Resources
Fatality Analysis Reporting System Data	Crash Reports	Fatalities occurring in motor vehicle traffic crashes	Annual 2015	Drug testing results (cannabis positive or negative) for drivers and fatal victims involved in motor vehicle traffic crashes	• Statewide • County	National Highway Traffic Safety Administration, Fatality Analysis Reporting System https://www.nhtsa.gov/research-data/fatality-analysis-reporting-system-fars