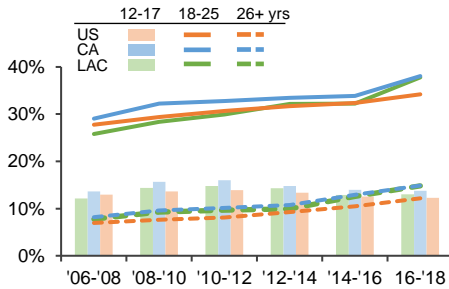


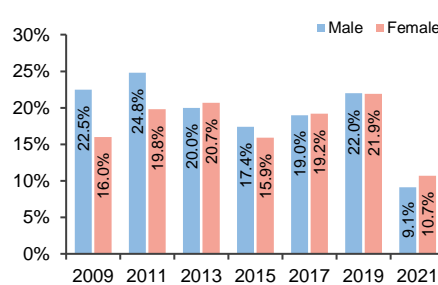
Prevalence Rate

Cannabis use in the past year, by age, 2008-2018¹



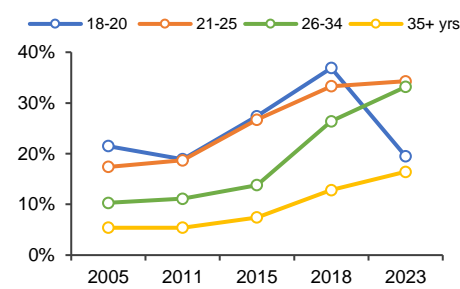
Rates of cannabis use among youth, young adults, and adults in Los Angeles County (LAC) were higher than in the US and lower than in California.

Cannabis use in the past month, by gender, 9th-12th graders, LAC, 2009-2021²



Rates of cannabis use among high school students in LAC increased and became similar between males and females in recent years.

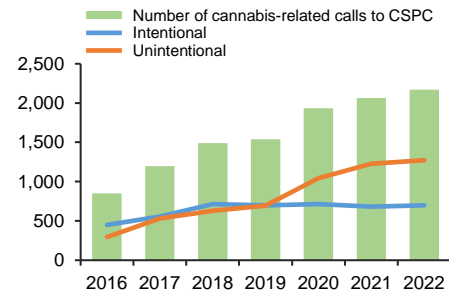
Cannabis use in the past year, by age, LAC, 2005-2023³



Cannabis use increased from 2018-2023 for all age groups, except among underage adults (18-20 years) and was highest among adults aged 21-34 years.

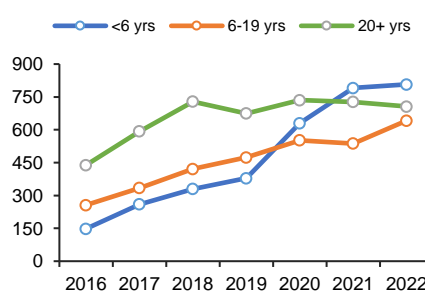
Poison Control Calls

Cannabis-related calls to the California Poison Control System (CPCS)⁴, CA, 2016-2022⁴



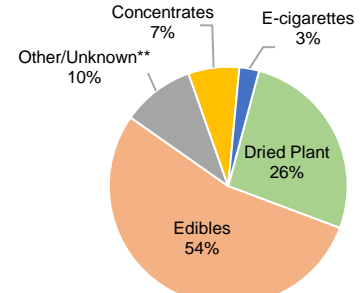
Cannabis-related calls to CPCS increased from 2016-2022, with over half of calls due to unintentional exposure of cannabis in 2022.

Cannabis-related calls to CPCS, by age, CA, 2016-2022⁴



Cannabis-related calls to CPCS increased for all age groups, but particularly for children (<6 years) and adolescents (7-19 years).

Cannabis-related calls to CPCS, by exposure type, CA, 2022⁴

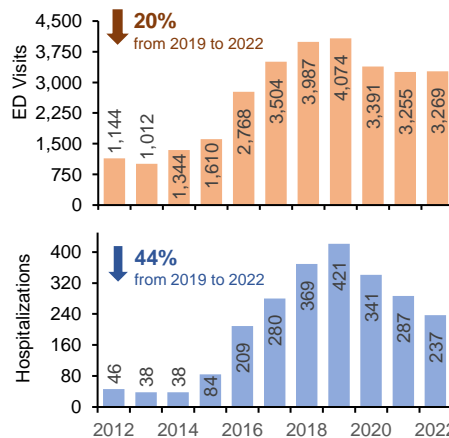


The majority of cannabis-related calls to CPCS were for exposure through cannabis edibles, followed by exposure through dried plants.

¹Updated LAC-specific Poison Control data not available. ²Other/Unknown exposure includes cannabis oral capsule or pill, topical, dried plant, or other cannabis preparation.

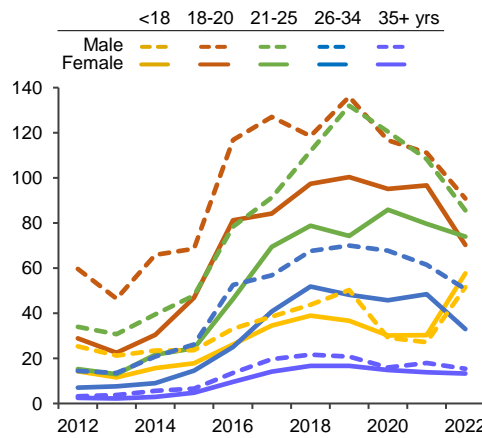
Healthcare Utilization

Cannabis emergency department (ED) visits and hospitalizations^a, LAC, 2012-2022⁵



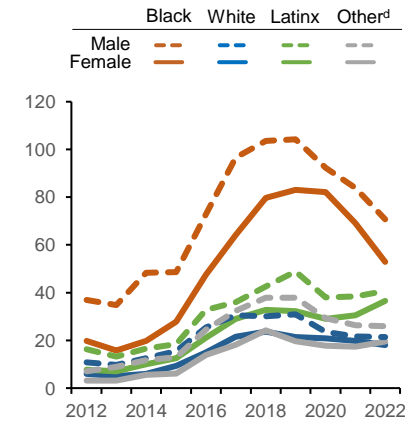
Cannabis ED visits and hospitalizations greatly increased from 2015-2019, then began to decrease in the following years.

Cannabis ED visit^b rates, by gender and age, LAC, 2012-2022⁵



Males and females aged 18-20 and 21-25 years had the highest cannabis ED visit rates per 100,000 population.

Cannabis ED visit rates^b, by gender and race/ethnicity^c, LAC, 2012-2022⁵

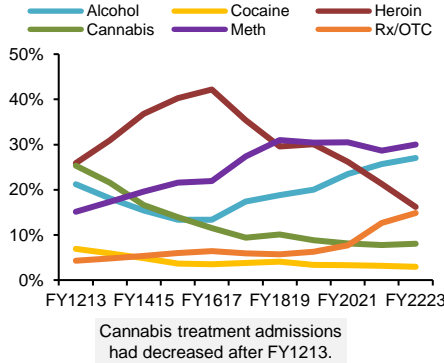


Black males and females consistently had the highest cannabis ED visit rates per 100,000 population over the past decade.

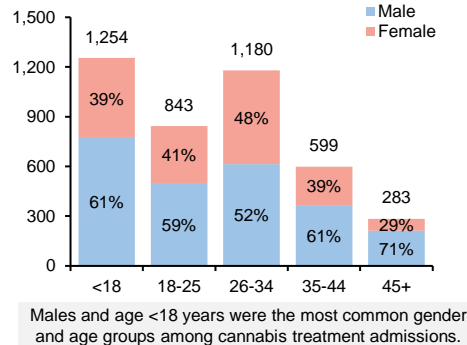
^a ED visits and hospitalizations due to cannabis include records that listed cannabis poisoning, dependence, abuse, or use as the primary diagnosis (excluding cases in remission). ^b Rates are per 100,000 population. ^c Due to methodological changes in reporting race, use caution when comparing race/ethnicity rates before and after 2020. ^d Other includes Asians, Native Americans, Alaska Natives, Native Hawaiians, Pacific Islanders, and other.

Treatment

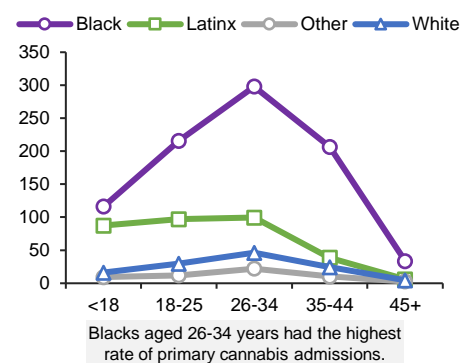
Primary drug problem at treatment admission, LAC, FY1213-FY2223⁶



Primary cannabis admissions by age and gender, LAC, FY2223⁶



Primary cannabis admission rate by age and race/ethnicity, LAC, FY2223⁶



References and Notes

1. Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health. 2008-2018 NSDUH Substate Region Estimates by Age Group

- Cannabis is the most commonly used drug in the US, especially among young adults.
- Rates of cannabis use among youth aged 12-17 years, young adults aged 18-25 years, and adults aged 26+ years in Los Angeles County (LAC) were higher than the national average and lower than the state average.
- In 2016-2018, about 13% of youth, 37.8% of young adults, and 14.8% of adults had used cannabis in the past year in LAC.
- In LAC, rates of cannabis use in the past year have increased more rapidly than those of CA and US for young adults and adults from 2008 to 2018: Young adults by 33%, and adults by 61%.

2. Centers for Disease Control and Prevention. High School Youth Risk Behavior Survey, 2009-2021. Youth Online Data Analysis Tool.

- Cannabis use in the past month among high school students in the Los Angeles Unified School District was higher among males compared to females in LAC during the school years 2009-2011, then became similar between males and females thereafter. In 2021, past month use was higher among females than in males.
- In 2021, among males, current use of cannabis was highest for 11th graders (12%). Among females, those in 10th grade had the highest rates of current use (12.8%).

3. Los Angeles County Health Survey, 2005-2023. Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

- Cannabis use in the past year increased for all age groups from 2018 to 2023, except for underage adults (18-20 years) which experienced a 47% decrease. Past year use in 2023 was highest among young aged 21-25 years and adults aged 25-34 years.

4. California Department of Public Health, Substance and Addiction Prevention Branch. Cannabis Poison Control System Calls Dashboard 2023.

- From 2016 to 2022, a total of 11,241 calls for cannabis exposure were received by the California Poison Control System (CPCS) 24/7 hotline for expert poisoning treatment advice and referral.
- Calls for cannabis exposure to CPCS greatly increased after 2016, when recreational cannabis use was legalized, by 155% from 850 calls in 2016 to 2,169 calls in 2022.
- In 2016, most calls were for intentional exposure to cannabis. However, calls related to unintentional exposure of cannabis gradually increased and surpassed the number of calls for intentional exposures in 2019. By 2022, over half (59%) of cannabis-related calls were for unintentional exposure.
- Cannabis-related exposure calls to CPCS in 2016-2022 were more frequently made for males (52%) than females (47%).
- From 2016-2022, cannabis-related calls to CPCS sharply increased for children (aged <6 years) by 445%, and for adolescents (aged 6-19 years) by 151%. In 2022, cannabis-related calls were highest for children compared to all other age groups.
- Over half (54%) of calls in 2022 were for exposure to cannabis edibles, and 26% of calls for exposure to dried plants.
- About 99% of calls in 2016-2022 for young children under 6 years were reported as unintentional exposures to cannabis with the most common type of exposure being cannabis edibles.
- Legalization of cannabis retail sales in 2018 may have increased the potential for exposure to cannabis among younger individuals, who are likely to mistake cannabis edibles for normal candy and consume an entire package.

5. Department of Health Care Access and Information (previously OSHPD). Emergency Department and Inpatient Discharge Data Set. California Department of Public Health.

- In LAC, ED visits due to cannabis (records that

listed cannabis poisoning, dependence, abuse, or use as the primary diagnosis) increased by 256% from 2012 to 2019 then decreased by 20% from 2019 to 2022.

- Hospitalizations due to cannabis increased by 815% from 2012 to 2019 then decreased 44% from 2019 to 2022.
- Rates per 100,000 population of cannabis ED visits were highest among underage adult males aged 18-20 years from 2012 to 2022 (except 2020). By 2018, rates for male young adults aged 21-25 years had consistently increased and became similar to that of underage adult males aged 18-20 years.
- Males generally had higher rates of cannabis ED visits than females across all age groups over the past decade. However, in the last two years (2021-2022), among youth younger than 18 years, females had higher cannabis ED visit rates than males.
- From 2012-2022, Black males and females had the highest rates of cannabis ED visits compared to other gender and racial/ethnic groups. Cannabis ED visit rates for Black males and females were over double those for Latinx, and over triple those for Whites.

6. Los Angeles County Participant Reporting System (LACPRS) and Sage data. Substance Abuse Prevention and Control, Los Angeles County Department of Public Health.

- The proportion of admissions to publicly funded SUD treatment programs with cannabis as the primary drug began decreasing in FY1213.
- Primary cannabis admissions in LAC were most common among youth clients aged 17 and under in FY1213 to FY1920 and again in FY2223. Primary cannabis admissions were also high for adults aged 26-34 years.
- In FY2223, the rate of primary cannabis treatment admissions in LAC per 100,000 was highest among Blacks for all age groups, particularly Blacks aged 26-34 years. The primary cannabis treatment admission rate among those aged 26-34 years for Blacks was 3 times higher than that for Latinxs, and over 6 times than that for Whites.