

# Washington's Young Adult Health Survey: Lessons Learned from a Decade of Data

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## Before we get started...

• Special thank you to:

- Sandy Salivaras
- Sarah Mariani
- Kristen Haley
- Dustin Dickson

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## Washington Young Adult Health Survey (YAHS)

• Funded by Division of Behavioral Health & Recovery (DBHR):

- Sarah Mariani
- Sandy Salivaras

• Young Adult Health Survey Team:

- Jason Kilmer
- Mary Larimer
- Rose Lyles-Riebli
- George Song
- Isaac Rhew

Washington State Health Care Authority (Division of Behavioral Health and Recovery) (PI: Kilmer).

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**Young Adult Health Survey Recruitment...  
A Reminder of the Main Steps**

- Participants recruited using a combination of direct mail advertising to a random sample from DOL, as well as online advertising (Facebook, Craigslist, Instagram, study web site, etc.)
- Assessed demographics on ongoing basis and modified strategies to recruit under-represented groups
- Convenience sample, not a random sample

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**Post-stratification weighting and analyses**

- To improve generalizability, used post-stratification weights based on sex, race, and geographic region
- Weighted results are consistently very similar to non-weighted

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**Young Adult Health Survey**

- Each year we collect data from a new cohort of 18-25 year olds

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Sample sizes over time	
• Cohort 1 (2014):	2,101
• Cohort 2 (2015):	1,675
• Cohort 3 (2016):	2,493
• Cohort 4 (2017):	2,342
• Cohort 5 (2018):	2,412
• Cohort 6 (2019):	1,942
• Cohort 7 (2020):	1,643
• Cohort 8 (2021):	1,756
• Cohort 9 (2022):	1,110
• Cohort 10 (2023):	1,237
• TOTAL:	18,711

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**Young Adult Health Survey**

- Each year we have followed up with previous cohorts (participants in Cohort 1, 18-25 in 2014, are largely 28-35 now)
- In Year 10, we paused on cohorts 2, 3, 4, and 5 (but got follow-up data from cohorts 1, 6, 7, 8, and 9)

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What do we see with ten years of data?

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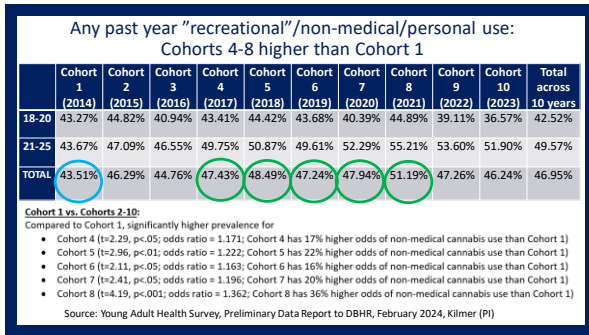
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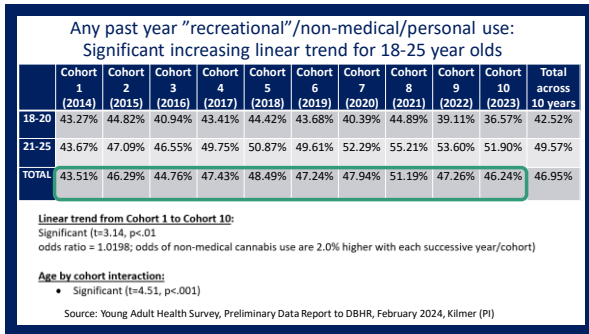
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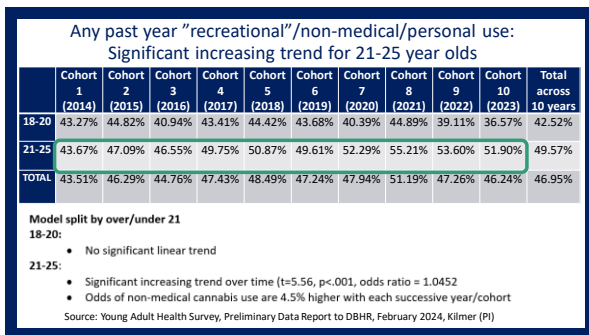
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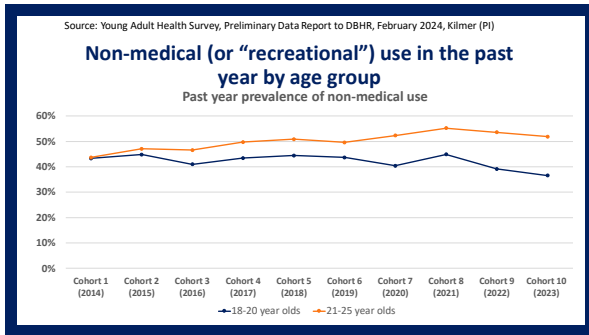
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### At least monthly "recreational"/non-medical/personal use: Cohorts 5-9 higher than cohort 1

	Cohort 1 (2014)	Cohort 2 (2015)	Cohort 3 (2016)	Cohort 4 (2017)	Cohort 5 (2018)	Cohort 6 (2019)	Cohort 7 (2020)	Cohort 8 (2021)	Cohort 9 (2022)	Cohort 10 (2023)	Total across 10 years
18-20	24.08%	24.88%	21.19%	23.56%	27.06%	23.24%	23.17%	24.16%	26.21%	20.15%	23.85%
21-25	23.63%	23.56%	25.12%	28.07%	27.88%	29.55%	33.81%	33.86%	31.65%	30.87%	28.27%
TOTAL	23.81%	24.03%	23.84%	26.46%	27.62%	27.09%	29.90%	30.11%	29.19%	26.87%	26.64%

**Regression models:**  
Cohort 1 vs. Cohorts 2-10:  
Compared to Cohort 1, significantly higher prevalence for

- Cohort 5 (t=2.56, p<.01; odds ratio = 1.221, Cohort 5 has 22% higher odds of non-medical cannabis use than Cohort 1)
- Cohort 6 (t=2.08, p<.05; odds ratio = 1.189, Cohort 6 has 19% higher odds of non-medical cannabis use than Cohort 1)
- Cohort 7 (t=3.73, p<.001; odds ratio = 1.365, Cohort 7 has 37% higher odds of non-medical cannabis use than Cohort 1)
- Cohort 8 (t=3.88, p<.001; odds ratio = 1.379, Cohort 8 has 38% higher odds of non-medical cannabis use than Cohort 1)
- Cohort 9 (t=2.99, p<.01; odds ratio = 1.320, Cohort 9 has 32% higher odds of non-medical cannabis use than Cohort 1)

Source: Young Adult Health Survey, Preliminary Data Report to DBHR, February 2024, Kilmer (PI)

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### At least monthly "recreational"/non-medical/personal use: Significant increasing trend for 18-25 year olds

	Cohort 1 (2014)	Cohort 2 (2015)	Cohort 3 (2016)	Cohort 4 (2017)	Cohort 5 (2018)	Cohort 6 (2019)	Cohort 7 (2020)	Cohort 8 (2021)	Cohort 9 (2022)	Cohort 10 (2023)	Total across 10 years
18-20	24.08%	24.88%	21.19%	23.56%	27.06%	23.24%	23.17%	24.16%	26.21%	20.15%	23.85%
21-25	23.63%	23.56%	25.12%	28.07%	27.88%	29.55%	33.81%	33.86%	31.65%	30.87%	28.27%
TOTAL	23.81%	24.03%	23.84%	26.46%	27.62%	27.09%	29.90%	30.11%	29.19%	26.87%	26.64%

**Linear trend from Cohort 1 to Cohort 10:**  
Significant increasing trend over time (t=5.10, p<.001; Odds ratio = 1.036)

**Age by cohort interaction:**  
Significant (p<.001)

Source: Young Adult Health Survey, Preliminary Data Report to DBHR, February 2024, Kilmer (PI)

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At least monthly "recreational"/non-medical/personal use:  
Significant increasing trend for 21-25 year olds

	Cohort 1 (2014)	Cohort 2 (2015)	Cohort 3 (2016)	Cohort 4 (2017)	Cohort 5 (2018)	Cohort 6 (2019)	Cohort 7 (2020)	Cohort 8 (2021)	Cohort 9 (2022)	Cohort 10 (2023)	Total across 10 years
18-20	24.08%	24.88%	21.19%	23.56%	27.06%	23.24%	23.17%	24.16%	26.21%	20.15%	23.85%
21-25	23.63%	23.56%	25.12%	28.07%	27.88%	29.55%	33.81%	33.86%	31.65%	30.87%	28.27%
TOTAL	23.81%	24.03%	23.84%	26.46%	27.62%	27.09%	29.90%	30.11%	29.19%	26.87%	26.64%

Model split by over/under 21  
18-20:  
 • No significant linear trend  
 21-25:  
 • Significant increasing trend over time (t=6.74, p<.001)  
 • Odds ratio = 1.061 (odds of non-medical cannabis use are 6.1% higher with each successive year/cohort)

Source: Young Adult Health Survey, Preliminary Data Report to DBHR, February 2024, Kilmer (PI)

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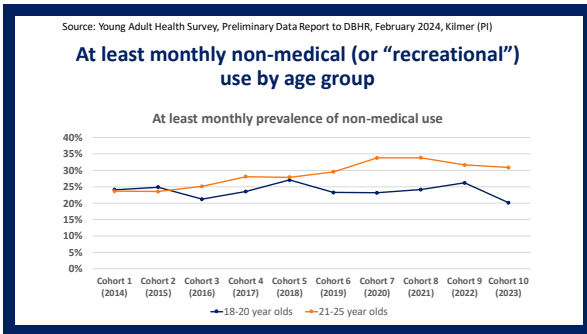
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At least weekly "recreational"/non-medical/personal use:  
Cohorts 7, 8, and 10 higher than Cohort 1

	Cohort 1 (2014)	Cohort 2 (2015)	Cohort 3 (2016)	Cohort 4 (2017)	Cohort 5 (2018)	Cohort 6 (2019)	Cohort 7 (2020)	Cohort 8 (2021)	Cohort 9 (2022)	Cohort 10 (2023)	Total across 10 years
18-20	16.51%	13.43%	13.30%	15.40%	18.56%	14.41%	15.21%	16.86%	16.40%	14.42%	15.55%
21-25	16.86%	16.21%	18.55%	18.42%	19.22%	21.39%	24.07%	24.59%	21.93%	24.89%	20.13%
TOTAL	16.72%	15.23%	16.85%	17.37%	19.03%	18.59%	20.84%	21.62%	19.47%	20.84%	18.43%

Regression models:  
 Cohort 1 vs. Cohorts 2-10:  
 Cohort 7 is significantly higher than Cohort 1 (t=2.86, p<.01, Odds ratio = 1.311)  
 Cohort 8 is significantly higher than Cohort 1 (t=3.37, p<.001, Odds ratio = 1.374)  
 Cohort 10 is significantly higher than Cohort 1 (t=2.61, p<.01, Odds ratio = 1.311)

Source: Young Adult Health Survey, Preliminary Data Report to DBHR, February 2024, Kilmer (PI)

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At least weekly "recreational"/non-medical/personal use:  
Significant increasing trend for 18-25 year olds

	Cohort 1 (2014)	Cohort 2 (2015)	Cohort 3 (2016)	Cohort 4 (2017)	Cohort 5 (2018)	Cohort 6 (2019)	Cohort 7 (2020)	Cohort 8 (2021)	Cohort 9 (2022)	Cohort 10 (2023)	Total across 10 years
18-20	16.51%	13.43%	13.30%	15.40%	18.56%	14.41%	15.21%	16.86%	16.40%	14.42%	15.55%
21-25	16.86%	16.21%	18.55%	18.42%	19.22%	21.39%	24.07%	24.59%	21.93%	24.89%	20.13%
TOTAL	16.72%	15.23%	16.85%	17.37%	19.03%	18.59%	20.84%	21.62%	19.47%	20.84%	18.43%

**Linear trend**  
Significant (t=5.19, p<.001); Odds ratio = 1.043

**Age by cohort interaction:**  
Significant (t=2.93, p<.01)

Source: Young Adult Health Survey, Preliminary Data Report to DBHR, February 2024, Kilmer (PI)

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At least weekly "recreational"/non-medical/personal use:  
Significant increasing trend for 21-25 year olds

	Cohort 1 (2014)	Cohort 2 (2015)	Cohort 3 (2016)	Cohort 4 (2017)	Cohort 5 (2018)	Cohort 6 (2019)	Cohort 7 (2020)	Cohort 8 (2021)	Cohort 9 (2022)	Cohort 10 (2023)	Total across 10 years
18-20	16.51%	13.43%	13.30%	15.40%	18.56%	14.41%	15.21%	16.86%	16.40%	14.42%	15.55%
21-25	16.86%	16.21%	18.55%	18.42%	19.22%	21.39%	24.07%	24.59%	21.93%	24.89%	20.13%
TOTAL	16.72%	15.23%	16.85%	17.37%	19.03%	18.59%	20.84%	21.62%	19.47%	20.84%	18.43%

**Model split by over/under 21**

18-20:

- No significant linear trend

21-25:

- Significant increasing trend over time (t=6.27, p<.001; odds ratio = 1.065, odds of non-medical cannabis use are 6.5% higher with each successive year/cohort)

Source: Young Adult Health Survey, Preliminary Data Report to DBHR, February 2024, Kilmer (PI)

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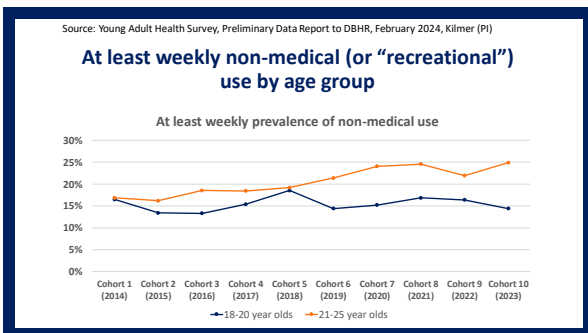
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**Non-medical use, categories of frequency, whole sample**

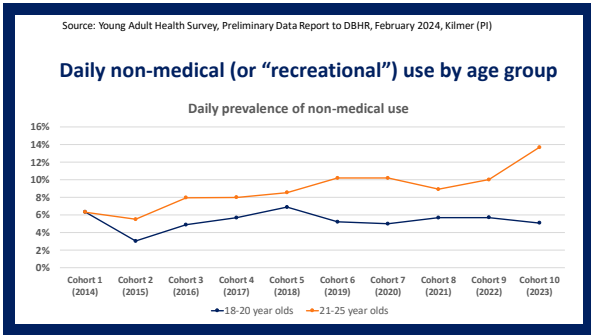
	Cohort 1 2014	Cohort 2 2015	Cohort 3 2016	Cohort 4 2017	Cohort 5 2018	Cohort 6 2019	Cohort 7 2020	Cohort 8 2021	Cohort 9 2022	Cohort 10 2023
Never	56.49%	53.71%	55.24%	52.57%	51.51%	52.76%	52.06%	48.81%	52.74%	53.76%
Once a year	7.53%	8.28%	8.00%	6.36%	6.67%	6.41%	5.86%	7.13%	5.70%	5.75%
2-3x/year	8.58%	9.60%	9.72%	10.21%	10.52%	9.77%	8.76%	9.79%	9.23%	9.38%
Every other month	3.59%	4.38%	3.20%	4.40%	3.68%	3.97%	3.42%	4.15%	3.13%	4.25%
Once a month	3.15%	3.55%	3.06%	3.58%	3.24%	3.72%	4.29%	3.67%	2.87%	2.33%
2-3x/month	3.94%	5.24%	3.94%	5.51%	5.35%	4.77%	4.77%	4.82%	6.86%	3.70%
1x/week	2.49%	2.75%	2.90%	2.38%	2.61%	2.92%	3.36%	3.23%	3.12%	3.43%
More than 1x/wk	5.26%	4.39%	4.63%	4.29%	4.81%	4.63%	5.25%	6.36%	5.16%	4.37%
Every other day	2.63%	3.44%	2.35%	3.55%	3.60%	2.85%	3.93%	4.29%	3.06%	2.64%
Every day	6.34%	4.65%	6.97%	7.14%	8.01%	8.19%	8.30%	7.74%	8.14%	10.39%

Cohort 4-10 all significantly higher odds of more frequent cannabis use than Cohort 1.

Note: \*\* Daily use is higher in Cohort 10 than at any time \*\*

Linear trend from Cohort 1 to Cohort 10:  
Significant increasing trend over time (t=4.70, p<.001, Odds ratio = 1.028)

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### Perceived norms of non-medical cannabis use

PERCEPTIONS OF NON-MEDICAL CANNABIS

	Cohort 1 2014	Cohort 2 2015	Cohort 3 2016	Cohort 4 2017	Cohort 5 2018	Cohort 6 2019	Cohort 7 2020	Cohort 8 2021	Cohort 9 2022	Cohort 10 2023
Never	2.41%	2.42%	1.61%	2.31%	2.06%	1.50%	2.38%	1.92%	3.05%	2.44%
Once a year	1.82%	2.10%	1.74%	1.92%	1.27%	0.75%	1.22%	1.15%	1.37%	1.01%
2 to 3 times a year	8.22%	10.12%	6.73%	6.40%	3.89%	3.31%	2.23%	3.87%	3.95%	4.53%
Every other month	6.98%	7.29%	5.32%	4.59%	3.14%	3.90%	4.42%	3.48%	2.93%	3.37%
Once a month	9.74%	11.15%	10.41%	9.07%	6.88%	5.51%	6.39%	7.07%	6.63%	6.66%
2-3x/month	17.98%	19.68%	19.83%	18.91%	13.47%	13.93%	14.32%	14.04%	14.38%	12.69%
Once per week	12.65%	12.72%	15.43%	13.89%	14.28%	12.81%	12.64%	14.11%	13.24%	11.51%
More than 1x/wk	22.08%	20.70%	21.42%	23.94%	27.12%	25.90%	28.57%	29.17%	25.76%	26.73%
Every other day	9.77%	6.87%	8.56%	8.65%	11.10%	12.25%	13.10%	10.45%	13.14%	12.03%
Every day	8.84%	6.95%	8.96%	10.31%	16.79%	20.03%	14.62%	14.75%	15.57%	19.02%

\*\* In ordinal logistic models, Cohort 4 (t=2.57, p<.01), Cohort 5 (t=10.67, p<.001), Cohort 6 (t=12.36, p<.001), Cohort 7 (t=9.72, p<.001), Cohort 8 (t=9.02, p<.001), Cohort 9 (t=8.10, p<.001), and Cohort 10 (t=9.55, p<.001) have higher perceived non-medical cannabis norms compared to cohort 1; but cohort 2 has lower norms compared to cohort 1 (t= -3.35 p<.001) \*\*

\*\* Overall, a significant increasing linear trend over time (t=18.72, p<.001) \*\*

In Cohort 10, 20.84% use at least weekly (meaning most don't), yet 69.29% think the typical person their age uses weekly

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### Medical cannabis

- Cohort 9 past year medical cannabis use (11.96%) is significantly lower than Cohort 1 (14.74%)
  - Same difference on overall frequency such that Cohort 9 is different than Cohort 1
- Perceptions of medical use increasing significantly (both a linear trend, and past 7 cohorts higher than cohort 1)

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### Other substances

- Significant decreasing trend in:
  - Alcohol, at least once in past year
  - Alcohol, at least monthly
  - Cigarettes, at least once in the past year
  - Pain relievers to get high, at least once in the past year
  - Heroin use, at least once in the past year

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### Perceived risk

- **Cannabis**
  - Physical risk of occasional cannabis use
  - Psychological/emotional risk of occasional cannabis use
  - Physical risk of regular cannabis use
  - Psychological/emotional risk of regular cannabis use
- **Alcohol**
  - Physical risk of 2 drinks every day
  - Psychological risk of 2 drinks every day
  - Physical risk of 5+ drinks every weekend
  - Psychological risk of 5+ drinks every weekend

Source: Young Adult Health Survey, Preliminary Data Report to DBHR, Kilmer (PI)

\*\* significant decreasing linear trend \*\*  
\*\* significant increasing linear trend \*\*

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Some frequency data of note from Cohort 10 (2023)

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At least yearly use of various substances

Substance	18-20	21-25
Alcohol	57.39%	86.81%
E-cigarettes/nicotine vaping	24.61%	27.67%
Cigarettes	10.65%	17.23%
Cannabis for medical purposes	9.11%	14.21%
Cannabis for non-medical purposes	36.57%	51.90%
"Synthetic marijuana" (K2, spice, etc.)	2.32%	2.99%
Heroin	0%	0.50%
Pain relievers to get high	2.09%	2.73%
Methamphetamines	2.24%	1.49%

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At least yearly use of various substances

Substance	18-20	21-25
Cocaine	2.05%	5.88%
Kratom	1.65%	2.31%
Hallucinogens (LSD, psilocybin, mushrooms, DMT, etc.) at full dose	7.44%	11.67%
Hallucinogens (LSD, psilocybin, mushrooms, DMT, etc.) as microdose	7.15%	11.31%
Fentanyl	0.89%	0.73%

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44) During the **past 30 days**, what type of alcohol did you **usually** drink?

	18-20 (n=167)	21-25 (n=530)
<input type="checkbox"/> I did not have a usual type	7.60%	4.97%
<input type="checkbox"/> Beer	18.93%	24.35%
<input type="checkbox"/> Flavored malt beverages, such as Smirnoff Ice, Bacardi Silver, or Hard Lemonade	6.46%	7.68%
<input type="checkbox"/> Wine coolers, such as Bartles & Jaymes or Seagrams	0.28%	1.27%
<input type="checkbox"/> Wine	6.13%	14.27%
<input type="checkbox"/> Liquor, such as vodka, rum, scotch, bourbon, or whiskey	39.77%	25.36%
<input type="checkbox"/> Some other type (please specify) _____	2.88%	4.70%
<input type="checkbox"/> Hard cider	6.76%	9.66%
<input type="checkbox"/> Hard seltzer	11.19%	7.74%

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Typical potency (among those with past 30 day use)

Typical potency in preferred method of use	18-20	21-25
1-10% THC	5.05%	8.97%
11-20% THC	6.82%	5.12%
21-30% THC	7.49%	19.35%
31-40% THC	5.67%	5.40%
41-50% THC	2.13%	2.59%
51-60% THC	0.86%	0.45%
61-70% THC	1.49%	3.17%
71-80% THC	13.36%	6.43%
81-90%+ THC	16.33%	14.02%
Don't know	40.80%	34.51%

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At least yearly use of various substances

Substance	18-20	21-25
CBD applied topically	15.15%	19.20%
CBD used any other way	13.50%	23.08%
Delta 8 THC	11.31%	9.12%
Delta 10 THC	8.40%	6.19%

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Stepping out of our dataset for a bit...National Center for Health Statistics (NCHS) and Centers for Disease Control (CDC) Household Pulse Survey

https://www.cdc.gov/nchs/covid19/pulse/mental-health.htm

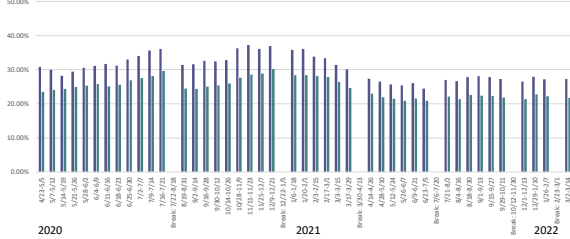
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Indicators of anxiety or depression based on reported frequency of symptoms in last 7 days

UNITED STATES DATA - ALL AGES

Symptoms of Anxiety Disorder Symptoms of Depressive Disorder

Source: National Center for Health Statistics w/Census Bureau, Household Pulse Survey



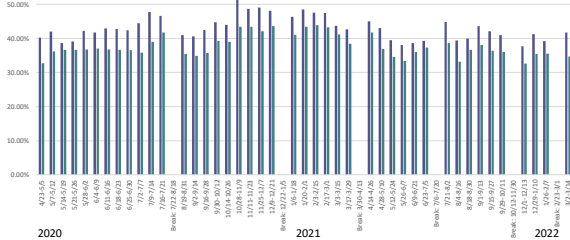
38

Indicators of anxiety or depression based on reported frequency of symptoms in last 7 days

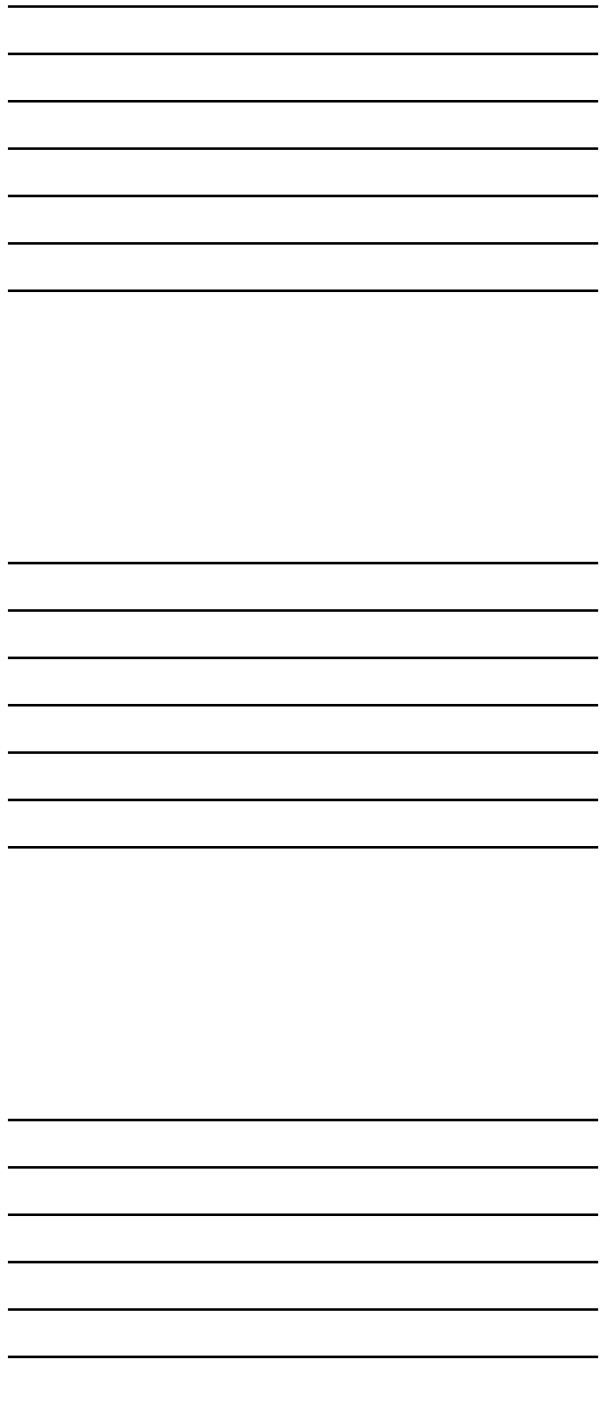
Nationwide: 18-29 year olds only

Symptoms of Anxiety Disorder Symptoms of Depressive Disorder

Source: National Center for Health Statistics w/Census Bureau, Household Pulse Survey



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Over the last two weeks, how often have you been bothered by any of the following problems

1. Feeling nervous, anxious or on edge		
	<u>18-20-year-olds (n = 469)</u>	<u>21-25-year-olds (n = 764)</u>
<input type="checkbox"/> Not at all:	28.10%	21.67%
<input type="checkbox"/> Several days:	41.09%	40.04%
<input type="checkbox"/> More than half the days:	18.15%	21.71%
<input type="checkbox"/> Nearly every day:	12.66%	16.58%
2. Not being able to stop or control worrying		
	<u>18-20-year-olds (n = 469)</u>	<u>21-25-year-olds (n = 764)</u>
<input type="checkbox"/> Not at all:	45.35%	35.69%
<input type="checkbox"/> Several days:	29.41%	37.37%
<input type="checkbox"/> More than half the days:	16.50%	14.15%
<input type="checkbox"/> Nearly every day:	8.74%	12.78%

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Over the last two weeks, how often have you been bothered by any of the following problems

3. Little interest or pleasure in doing things		
	<u>18-20-year-olds (n = 469)</u>	<u>21-25-year-olds (n = 764)</u>
<input type="checkbox"/> Not at all:	40.26%	38.47%
<input type="checkbox"/> Several days:	37.75%	36.48%
<input type="checkbox"/> More than half the days:	14.87%	15.64%
<input type="checkbox"/> Nearly every day:	7.12%	9.41%
4. Feeling down, depressed, or hopeless		
	<u>18-20-year-olds (n = 468)</u>	<u>21-25-year-olds (n = 764)</u>
<input type="checkbox"/> Not at all:	46.27%	41.17%
<input type="checkbox"/> Several days:	34.32%	37.40%
<input type="checkbox"/> More than half the days:	13.06%	12.40%
<input type="checkbox"/> Nearly every day:	6.35%	9.03%

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**Young Adult Health Survey**

- 2024 will see our 11<sup>th</sup> year of data collection
- We had paused on longitudinal follow-up of Cohorts 2-5, and, with a partnership between DOH and DBHR, will collect data from all previous 10 cohorts and a new cohort 11

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### Young Adult Health Survey

- Dr. Katarina Guttmannova applied for and obtained a secondary data analysis grant (NIDA grant R01DA047996, PI: Guttmannova) that has led to several publications using YAHS (beyond what we pass on as part of the contract).

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### Young Adult Health Survey

- Dr. Guttmannova also received a second secondary data analysis grant (NIDA R01DA057705) focusing on changes before and during the COVID-19 pandemic among young adults
- Findings from this project will inform tailoring and development of prevention and intervention efforts aimed at reducing health risk behaviors and improving public health

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**Associations of cannabis retail outlet availability and neighborhood disadvantage with cannabis use and related risk factors among young adults in Washington State**  
 Rhew IC, Guttmannova K, Kilmer JR, Fleming CB, Hultgren BA, Hurvitz PM, Dilley JA, Larimer ME. *Drug and Alcohol Dependence*. 2022 Mar 1;232:109332. doi: 10.1016/j.drugalcdep.2022.109332. Epub 2022 Jan 29. PMID: 35123361; PMCID: PMC8890768.

**Cannabis Use Among Young Adults in Washington State After Legalization of Nonmedical Cannabis**  
 Kilmer JR, Rhew IC, Guttmannova K, Fleming CB, Hultgren BA, Gilson MS, Cooper RL, Dilley J, Larimer ME. *Am J Public Health*. 2022 Apr;112(4):638-645. doi: 10.2105/AJPH.2021.306641. PMID: 35319936; PMCID: PMC8961820.

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Journal Pre-proof

**Trends in Alcohol, Cigarette, E-Cigarette, and Nonprescribed Pain Reliever Use Among Young Adults in Washington State After Legalization of Nonmedical Cannabis**

Charles B. Fleming, M.A.<sup>1,2</sup>, Jason J. Ramirez, Ph.D.<sup>1,2</sup>, Isaac C. Rhew, Ph.D.<sup>1,2</sup>, Britney A. Hultgren, Ph.D.<sup>1,2</sup>, Steven C. Rayson, M.A.<sup>1,2</sup>, Mary E. Larimer, Ph.D.<sup>1,2</sup>, Jason K. Kilmer, Ph.D.<sup>1,2</sup>, and Katherine Guttmanova, Ph.D.<sup>1,2</sup>

<sup>1</sup>Center for Health and Behavior Research, University of Washington, Seattle, WA  
<sup>2</sup>Center for Tobacco Research and Prevention, University of Washington, Seattle, WA

**Abstract**  
 Laws regulating cannabis use rapidly changed in the USA in three states leading to increases in cannabis use for adults aged 21 and older. However, research has examined whether legalization led to an increase in cigarette use or a shift in the type of alcohol consumed. The current study examined changes in cigarette and alcohol use among young adults following legalization of nonmedical cannabis. We used 5 years of cross-sectional surveys from 2014 to 2019 among adults aged 18 to 24 in the region of Washington state. Data were representative for marijuana use but non-representative for other products including non-medical cannabis, binge drinking, and alcohol use. We examined changes in cigarette use, alcohol use, and non-prescribed pain reliever use among young adults in Washington state. Results showed that cigarette use increased among young adults in Washington state after legalization of nonmedical cannabis. Alcohol use, including binge drinking, increased among young adults in Washington state after legalization of nonmedical cannabis. Non-prescribed pain reliever use also increased among young adults in Washington state after legalization of nonmedical cannabis.

**Keywords:** Cannabis, Alcohol, Cigarettes, E-Cigarettes, Pain Relievers, Young Adults, Washington State

**Introduction:** The legalization of cannabis in the United States has led to a rapid increase in its use, particularly among young adults aged 18 to 24. However, research has not fully explored whether legalization led to an increase in cigarette use or a shift in the type of alcohol consumed. The current study examined changes in cigarette and alcohol use among young adults following legalization of nonmedical cannabis. We used 5 years of cross-sectional surveys from 2014 to 2019 among adults aged 18 to 24 in the region of Washington state. Data were representative for marijuana use but non-representative for other products including non-medical cannabis, binge drinking, and alcohol use. We examined changes in cigarette use, alcohol use, and non-prescribed pain reliever use among young adults in Washington state. Results showed that cigarette use increased among young adults in Washington state after legalization of nonmedical cannabis. Alcohol use, including binge drinking, increased among young adults in Washington state after legalization of nonmedical cannabis. Non-prescribed pain reliever use also increased among young adults in Washington state after legalization of nonmedical cannabis.

**Conclusion:** The legalization of nonmedical cannabis in Washington state led to an increase in cigarette use and a shift in alcohol consumption. These findings suggest that the legalization of cannabis may have broader public health implications beyond its intended effects. Further research is needed to understand the underlying mechanisms of these associations and to develop strategies to mitigate potential risks.

**Keywords:** Cannabis, Alcohol, Cigarettes, E-Cigarettes, Pain Relievers, Young Adults, Washington State

**Abbreviations:** CB, Ramirez JJ, Rhew IC, Hultgren BA, Hanson KG, Larimer ME, Dilley JA, Kilmer JR, Guttmanova K. Trends in Alcohol, Cigarette, E-Cigarette, and Nonprescribed Pain Reliever Use Among Young Adults in Washington State After Legalization of Nonmedical Cannabis. *J Adolesc Health*. 2022;71(1):47-54. doi: 10.1016/j.jadohealth.2022.03.006. Epub 2022 May 9. PMID: 35550333; PMCID: PMC9232986.

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**Substance-Specific Risk Factors for Cannabis and Alcohol Use Among Young Adults Following Implementation of Nonmedical Cannabis Legalization**

Michael S. Gilson<sup>1</sup>, Jason K. Kilmer<sup>1</sup>, Charles B. Fleming<sup>1</sup>, Isaac C. Rhew<sup>1</sup>, Brian H. Calhoun<sup>1</sup>, Katherine Guttmanova<sup>1</sup>

Journal Pre-proof

**Abstract**  
 Laws regulating cannabis use rapidly changed in the USA in three states leading to increases in cannabis use for adults aged 21 and older. However, research has examined whether legalization led to an increase in cigarette use or a shift in the type of alcohol consumed. The current study examined changes in cigarette and alcohol use among young adults following legalization of nonmedical cannabis. We used 5 years of cross-sectional surveys from 2014 to 2019 among adults aged 18 to 24 in the region of Washington state. Data were representative for marijuana use but non-representative for other products including non-medical cannabis, binge drinking, and alcohol use. We examined changes in cigarette use, alcohol use, and non-prescribed pain reliever use among young adults in Washington state. Results showed that cigarette use increased among young adults in Washington state after legalization of nonmedical cannabis. Alcohol use, including binge drinking, increased among young adults in Washington state after legalization of nonmedical cannabis. Non-prescribed pain reliever use also increased among young adults in Washington state after legalization of nonmedical cannabis.

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**Conclusion:** The legalization of nonmedical cannabis in Washington state led to an increase in cigarette use and a shift in alcohol consumption. These findings suggest that the legalization of cannabis may have broader public health implications beyond its intended effects. Further research is needed to understand the underlying mechanisms of these associations and to develop strategies to mitigate potential risks.



Journal Pre-proof

**Addictive Behaviors**

**The association between cannabis use and risk of non-medical pain reliever misuse onset among young adults in a legal cannabis context**

Isaac C. Rhew<sup>1,2</sup>, J. Jason J. Ramirez<sup>1,2</sup>, Charles B. Fleming<sup>1,2</sup>, Jason K. Kilmer<sup>1,2</sup>, Britney A. Hultgren<sup>1,2</sup>, Steven C. Rayson<sup>1,2</sup>, Mary E. Larimer<sup>1,2</sup>, Katherine Guttmanova<sup>1,2</sup>

<sup>1</sup>Center for Health and Behavior Research, University of Washington, Seattle, WA  
<sup>2</sup>Center for Tobacco Research and Prevention, University of Washington, Seattle, WA

**Abstract**  
 Laws regulating cannabis use rapidly changed in the USA in three states leading to increases in cannabis use for adults aged 21 and older. However, research has examined whether legalization led to an increase in cigarette use or a shift in the type of alcohol consumed. The current study examined changes in cigarette and alcohol use among young adults following legalization of nonmedical cannabis. We used 5 years of cross-sectional surveys from 2014 to 2019 among adults aged 18 to 24 in the region of Washington state. Data were representative for marijuana use but non-representative for other products including non-medical cannabis, binge drinking, and alcohol use. We examined changes in cigarette use, alcohol use, and non-prescribed pain reliever use among young adults in Washington state. Results showed that cigarette use increased among young adults in Washington state after legalization of nonmedical cannabis. Alcohol use, including binge drinking, increased among young adults in Washington state after legalization of nonmedical cannabis. Non-prescribed pain reliever use also increased among young adults in Washington state after legalization of nonmedical cannabis.

**Keywords:** Cannabis, Alcohol, Cigarettes, E-Cigarettes, Pain Relievers, Young Adults, Washington State

**Introduction:** The legalization of cannabis in the United States has led to a rapid increase in its use, particularly among young adults aged 18 to 24. However, research has not fully explored whether legalization led to an increase in cigarette use or a shift in the type of alcohol consumed. The current study examined changes in cigarette and alcohol use among young adults following legalization of nonmedical cannabis. We used 5 years of cross-sectional surveys from 2014 to 2019 among adults aged 18 to 24 in the region of Washington state. Data were representative for marijuana use but non-representative for other products including non-medical cannabis, binge drinking, and alcohol use. We examined changes in cigarette use, alcohol use, and non-prescribed pain reliever use among young adults in Washington state. Results showed that cigarette use increased among young adults in Washington state after legalization of nonmedical cannabis. Alcohol use, including binge drinking, increased among young adults in Washington state after legalization of nonmedical cannabis. Non-prescribed pain reliever use also increased among young adults in Washington state after legalization of nonmedical cannabis.

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**Changes in Cannabis Use From 2014 to 2019 Among Young Adults in Washington State**

Katherine Guttmanova, Ph.D., Charles B. Fleming, M.A., Isaac C. Rhew, Ph.D., MPH, Miriam L.M. Delawalla, Ph.D., MPH, Jason K. Kilmer, Ph.D., Britney A. Hultgren, Ph.D., Mary E. Larimer, Ph.D., Jason K. Kilmer, Ph.D.

**Introduction:** Unexamined changes in cannabis use in the legalized nonmedical cannabis use context have implications for public health. This study examined changes in cannabis use among young adults in Washington state from 2014 to 2019. We used 5 years of cross-sectional surveys from 2014 to 2019 among adults aged 18 to 24 in the region of Washington state. Data were representative for marijuana use but non-representative for other products including non-medical cannabis, binge drinking, and alcohol use. We examined changes in cigarette use, alcohol use, and non-prescribed pain reliever use among young adults in Washington state. Results showed that cigarette use increased among young adults in Washington state after legalization of nonmedical cannabis. Alcohol use, including binge drinking, increased among young adults in Washington state after legalization of nonmedical cannabis. Non-prescribed pain reliever use also increased among young adults in Washington state after legalization of nonmedical cannabis.

**Methods:** Using repeated cross-sectional data on young adults aged 18-24 years in Washington state from 2014 to 2019, we examined changes in cannabis use among young adults in Washington state. We used 5 years of cross-sectional surveys from 2014 to 2019 among adults aged 18 to 24 in the region of Washington state. Data were representative for marijuana use but non-representative for other products including non-medical cannabis, binge drinking, and alcohol use. We examined changes in cigarette use, alcohol use, and non-prescribed pain reliever use among young adults in Washington state. Results showed that cigarette use increased among young adults in Washington state after legalization of nonmedical cannabis. Alcohol use, including binge drinking, increased among young adults in Washington state after legalization of nonmedical cannabis. Non-prescribed pain reliever use also increased among young adults in Washington state after legalization of nonmedical cannabis.

**Results:** The proportion of young adults using cannabis increased significantly from 2014 to 2019. The proportion of young adults using alcohol also increased significantly from 2014 to 2019. The proportion of young adults using cigarettes decreased significantly from 2014 to 2019. The proportion of young adults using e-cigarettes increased significantly from 2014 to 2019. The proportion of young adults using non-prescribed pain relievers increased significantly from 2014 to 2019.

**Conclusion:** The legalization of nonmedical cannabis in Washington state led to an increase in cannabis use and a shift in alcohol consumption. These findings suggest that the legalization of cannabis may have broader public health implications beyond its intended effects. Further research is needed to understand the underlying mechanisms of these associations and to develop strategies to mitigate potential risks.

**Keywords:** Cannabis, Alcohol, Cigarettes, E-Cigarettes, Pain Relievers, Young Adults, Washington State

Guttmanova K, Fleming CB, Rhew IC, Delawalla MLM, Fairlie AM, Larimer ME, Kilmer JR. Changes in Cannabis Use From 2014 to 2019 Among Young Adults in Washington State. *Am J Prev Med*. 2024 Feb;66(2):252-259. doi: 10.1016/j.amepre.2023.09.027. Epub 2023 Oct 2. PMID: 37793557; PMCID: PMC10842380.



Journal Pre-proof

**Cross-Substance Associations With Transitions in Cannabis and Nicotine Use in a Statewide Sample of Young Adults in Washington State**

Charles B. Fleming, M.A.<sup>1,2</sup>, Miriam L.M. Delawalla, Ph.D.<sup>1,2</sup>, Isaac C. Rhew, Ph.D.<sup>1,2</sup>, Jason K. Kilmer, Ph.D.<sup>1,2</sup>, Britney A. Hultgren, Ph.D.<sup>1,2</sup>, Steven C. Rayson, M.A.<sup>1,2</sup>, Mary E. Larimer, Ph.D.<sup>1,2</sup>, Katherine Guttmanova, Ph.D.<sup>1,2</sup>

<sup>1</sup>Center for Health and Behavior Research, University of Washington, Seattle, WA  
<sup>2</sup>Center for Tobacco Research and Prevention, University of Washington, Seattle, WA

**Abstract**  
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Fleming CB, Delawalla MLM, Rhew IC, Kilmer JR, Larimer M, Guttmanova K. Cross-Substance Associations With Transitions in Cannabis and Nicotine Use in a Statewide Sample of Young Adults in Washington State. *J Stud Alcohol Drugs*. 2024 Mar;85(1):272-282. doi: 10.15288/jsad.200055. Epub 2023 Oct 30. PMID: 37917015; PMCID: PMC10941821.

Hultgren BA, Calhoun BH, Fleming CB, Lyons VH, Rhew IC, Larimer ME, Kilmer JR, Guttmanova K. Young Adult Alcohol and Cannabis Impaired Driving After the Opening of Cannabis Retail Stores in Washington State. *Prev Sci*. 2024 Apr 25. doi: 10.1007/s11221-024-01679-6. Epub ahead of print. PMID: 38664365.





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