

Representative Peter Fischer, Chair Human Services Policy Committee Feb. 13, 2023

Dear Chair Fischer and Committee Members,

On behalf of the Hazelden Betty Ford Foundation, I am writing to share input on HF100 and all related proposals that would seek to expand access to cannabis in Minnesota.

My name is Dr. Sara Polley, and I am the medical director of the youth continuum for the Hazelden Betty Ford Foundation. I am a psychiatrist by training and have board certifications in adult psychiatry, child and adolescent psychiatry, and addiction medicine.

As an expert on young brains and the role substances—including cannabis—play in brain development, I am grateful for the opportunity to share my experience and concerns.

Most importantly, I want to emphasize that cannabis impacts the brains of people under the age of 25 differently than it does older adult brains.

We know from research that using cannabis as a teen or young adult alters brain development, with impacts that can last a lifetime. For example, young people who use cannabis are at increased risk of developing of schizophrenia, which is chronic and debilitating degenerative disease of the brain. Use of cannabis as a young person also increases the risk of developing lifelong depression and anxiety, and it makes these mental health conditions more difficult to treat.



In addition, cannabis use under the age of 25 can derail development of the prefrontal cortex. This is the part of the brain that oversees regulation of emotions and impulses and that helps with decision-making, attention and concentration. Using cannabis as a young person also primes the brain for the development of addiction in adulthood. This is because cannabis overwhelms the reward pathway in the brain and limits the prefrontal cortex from controlling the reward pathway like it should. The result is a powerful gas pedal and a weak brake when it comes to the use of mood- and mind-altering substances. Data indicates this change increases the risk of becoming addicted to substances as an older adult.

It's also important to note that the more often young people use cannabis and the higher the potency of the product, the more likely they are to experience significant brain changes.

I understand that the committee does not seek to legalize cannabis for youth, and probably wants to ensure consequences for adults or businesses that provide cannabis to minors. But I can tell you as an expert who sees patients every day, those precautions are not as protective as I wish they were.

We know the availability of substances greatly contributes to use among young people, regardless of the legality. There is a reason alcohol is the most likely to be used by teens and most likely to cause morbidity and mortality: it is widely available, normalized, legal for adults, and portrayed as fun and safe in popular media, entertainment and advertising.

Opioids used to be perceived as safer than they actually were, too. As you'll recall, our overdose epidemic started when the risks of opioid use were inaccurately downplayed, over-prescribing became common, and keeping an extra bottle of pain pills in the cabinet became normal. Young people found them and tried them, and a national tragedy ensued.

I worry about young people feeling that cannabis use is "normal" and that it comes with little risk. We know from research that youth develop these ideas when they watch adults engage in substance use in public places, and when use is glorified in advertisements and on social media.

For all these reasons, I urge strong guardrails on any plan to legalize and commercialize cannabis. Guardrails might include setting the age of legal use to 25—which would still have the limitations I mentioned but serve the purpose of normalizing cannabis to a lesser degree. We can have rules about potency limits. We can limit or prohibit product advertising in our state. We can limit public consumption of cannabis, so our young people don't grow up regularly seeing and smelling it. I believe a thoughtful collection of guardrails can make a difference in reducing the negative impact on public health that we should expect with any major expansion in access to cannabis.

As you consider changes in cannabis policy and the future of our state, I hope you will be mindful of the potential impact on young people. Thank you for your consideration.

Sincerely,

Sara Polley, MD Youth Continuum Medical Director Hazelden Betty Ford Foundation