

January 15, 2026



To the People of Georgia and the Georgia News Media:

Georgia is experiencing the fastest expansion of marijuana access in our state’s history. We are publishing this evidence to help Georgia families, business leaders, health professionals, employers, and concerned citizens understand what this shift means for our children, our communities, and our economy.

Marijuana policy impacts pediatric poisonings, roadway safety, workforce readiness, and family stability. When cannabis use disorder takes root, it does not create freedom — it takes away the ability to choose. Beyond individual health effects, increased THC availability has implications for family stability and resilience, particularly in households where caregiving responsibilities and child development may be affected by substance exposure.

Our concerns with increased availability, potency and use of THC:

Intoxicating Hemp-Derived Products	Hemp derivatives expose Georgians, including children, to intoxicating psychoactive THC. Even regulated hemp products with under 0.3% delta-9 THC can still be highly intoxicating and impairing, with serious health and safety risks.
Addiction and Cannabis Use Disorder	Increased normalization of THC contributes to the growing ease with which individuals – especially youth – can develop cannabis use disorder, a mental disorder which can include impaired functioning and eventual dependence.
Medical Marijuana	Rapid expansion of “medical” use is outpacing FDA review, medical association support, and traditional doctor–patient safeguards.
Commercial Marijuana (Recreational) Legalization	Commercial legalization in other states has not eliminated the illicit market and has introduced expanded public-health burdens and costs to taxpayers.
Youth Access & Development	Social normalization, retail availability, and expanded medical eligibility make high-potency THC products easily accessible to minors, despite well-documented harm to youth brain development and evidence linking long-term use to IQ loss.
Roadway Safety	Marijuana can impair critical driving skills, while Georgia lacks adequate tools and reporting to deter and track such drug-impaired driving.

**Workplace Productivity,
Safety & Liability**

Marijuana use can undermine labor-force reliability, both mentally and physically, and increase employers' legal exposure in safety-sensitive industries.

**Pregnancy &
Breastfeeding**

THC readily crosses the placenta and enters breast milk, yet retail staff without medical training routinely recommend marijuana for morning sickness. THC also passes into breast milk, and breastfeeding mothers face no meaningful protections or guidance limiting exposure.

**Justice &
Access to Treatment**

Accountability-focused courts connect individuals to education, support, and treatment services that reduce repeat offenses, but access remains limited. Expanding pathways to early help, both within the justice system and across communities, remains a significant concern.

Environmental Impact

Large-scale marijuana cultivation strains land, water, and energy resources at levels comparable to—or exceeding—traditional agriculture.

Closing

Our intent in publishing this letter is public education — not legislative direction. We are offering this summary of science so that the people of Georgia — voters, journalists, clinicians, employers, and families — may better understand what increased THC availability means for child development, roadway safety, workplace liability, and family resilience.

Any individual, community leader, policymaker, or news outlet who wishes to consider this evidence may do so freely. We trust Georgia citizens — when given clear, evidence-based information — to form their own judgments about the public-health and safety considerations surrounding marijuana policy. Please contact me at mmumper@GaMarijuanaPolicy.org for additional data or referrals to experts.

Sincerely,
Michael Mumper, MBA
Executive Director
Georgians for Responsible Marijuana Policy

*** Note on the usage of “marijuana” and “cannabis” terminology**

In this letter, we primarily use the term “**marijuana**” because it remains the most widely recognized and commonly understood term by the general public, the media, and many policymakers. While the term “**cannabis**” is increasingly used in legal and medical contexts, it can sometimes obscure the fact that we are referring to an **intoxicating product with known risks**, including addiction and many mental and physical harms. Where legal or scientific precision is necessary — such as referencing state law or clinical studies — we use “cannabis” to maintain accuracy and alignment with statutory or medical language. This deliberate terminology balance is intended to enhance clarity, credibility, and public understanding.



Georgians for
Responsible
Marijuana
Policy

Healthy Georgia. Bright Future.

GRMP's Marijuana Issue letter sign-ons:

As of 1/11/26

- Georgians for Responsible Marijuana Policy
- Medical, Clinical and Toxicology:
 - Georgia Society of Addiction Medicine
 - Georgia Psychiatric Physicians Association
 - Georgia Poison Center
 - DrugImpairment.com (Georgia-based)
- Public Safety:
 - Georgia Sheriffs' Association
 - Georgia Association of Chiefs of Police
- Prevention organizations – Statewide:
 - Voices for Prevention Georgia
 - HEARTS for Families, Inc.
 - Georgia Prevention Project
- Conservative and Faith-Based:
 - FrontLine Policy
 - Georgia Baptist Mission Board
 - Georgia Faith and Recovery Collaboration
 - Citizen Impact USA
 - Conservative Republican Women of North Atlanta
- Driving Risk Reduction and Drug Testing organizations:
 - Driving Educators of Georgia, Inc. (DEOG)
 - Georgia Association of Risk Reduction and Defensive Driving Educators (GARDE)
 - North Georgia DUI School, Inc.
 - WorkRight, LLC
- Treatment and Counseling-related organizations and practitioners:
 - Atlanta Mental Health Services
 - Kenneth Frontman, Ph.D. PC (Alpharetta)
 - PathLight Counseling LLC (Woodstock)
 - Redirect Counseling Services (Valdosta)
 - Talbott Recovery Campus (Atlanta)
 - The Insight Program (Roswell and Peachtree City)

- Recovery Support and Housing organizations:
 - Arise Recovery and Behavioral Health (Fayetteville)
 - Azalea Recovery Alliance (Valdosta)
 - Coweta F.O.R.C.E. Recovery Community Organization (Newnan)
 - Freedom Through Recovery (Statesboro)
 - Hale Foundation, Inc. (Augusta)
 - iHope Inc (Warner Robins)
 - Lighthouse Recovery Community Organization (Peachtree City)
 - Rise Up (Dublin)
 - Self Discovery 24 Inc (Toccoa)
 - Your Haven (Buchanan)
- Parent Advocacy and Support organizations:
 - Equanimity Parent Coaching (Gwinnett)
 - GRASP: Grief Recovery After a Substance Passing (Newnan)
 - Helping Parents Heal - South Atlanta Affiliate
 - In Ryan's Name, Inc. (Fayette)
 - Parent Coach Atlanta (Decatur)
 - Parent Family Advocacy (Brookhaven)
 - Parker's Promise LLC
- Prevention organizations (local):
 - Camden Connection Collaborative
 - Center for Pan Asian Community Services (CPACS, Atlanta)
 - Cherokee FOCUS
 - Coffee County Youth Coalition
 - Drug Free Elbert
 - Drug Free Fayette (Fayetteville)
 - Drug Free Paulding
 - Fayette FACTOR, Inc.
 - Forsyth County Drug Awareness Council
 - H.E.A.R.T. Coalition (Atlanta)
 - Jenkins County Drug Free Coalition
 - Jenkins County Family Enrichment Center
 - One Johns Creek (Johns Creek)
 - Pathways2Life (Johns Creek)
 - Polk Prevention and Recovery Alliance
 - Trusted Sources (youth prevention, Cumming)
- Businesses and Consulting:
 - Chemical Health Associates, Inc.
 - Compass Revenue Solutions
 - Health Security Dynamics

- Travel Edge
- Tri Copy Office Equipment

And the following national organizations:

- Smart Approaches to Marijuana (SAM)
- Community Anti-Drug Coalitions of America (CADCA)
- Parent Action Network (PAN) of Smart Approaches to Marijuana
- Drug Free America Foundation, Inc.
- Save Our Society From Drugs
- Every Brain Matters
- Tampa Alcohol Coalition

Evidence Base and Scientific Findings to Support our Concerns

1. Intoxicating Hemp-Derived Products

Overarching concerns: *Two issues: (a) Unregulated, high-potency hemp derivatives expose Georgians - including children - to highly potent, psychoactive THC. And (b), even regulated hemp consumables with delta-9 THC under 0.3% can be intoxicating when taken in quantity, with health and safety ramifications.*

- Semi-synthetic cannabinoids like Delta-8, sold in gummies and vapes, can contain **THC concentrations exceeding 90%** by weight, and are available in gas stations and online without regulated potency or contaminant testing (National Academies, 2017).
- In October 2025, **39 State Attorneys General — including Georgia Attorney General Chris Carr — sent a joint letter to Congress warning that the 2018 Farm Bill is being exploited to flood states with highly intoxicating synthetic THC products.** The Attorneys General urged Congress to *clarify federal law to ensure that all intoxicating hemp-derived THC products are explicitly illegal and removed from the market*, that these products endanger children, undermine public health, and evade state cannabis laws (NAAG, 2025).
- A 2024 national survey found **11.4% of 12th-graders had used Delta-8 THC** in the prior year (Harlow et al., 2024).
- More than **250 Delta-8 THC poison-control calls involving children under six** have been logged in Georgia since 2021 (Dr. Gaylord Lopez, Georgia Poison Center, personal communication, 2024).
- Research shows that even a single serving (7.2mg) of hemp-derived product with THC under 0.3% produced moderate cognitive impairment and subjective intoxication, confirming that even regulated hemp can impair function in adults (Elder et al., 2025).

2. Addiction and Cannabis Use Disorder

Overarching concern: *Increased normalization of THC contributes to the growing ease with which individuals – especially youth – can develop cannabis use disorder, a mental disorder which can include impaired functioning and eventual dependence.*

- According to the CDC, about **3 in 10 people who use marijuana develop some form of cannabis use disorder**, with higher risk for those who begin use in adolescence or use frequently (Hasin et al., 2015, as cited by CDC, 2024).
- Adolescents who start using marijuana are **2–4 × more likely than adults to develop cannabis use disorder** within two years (Connor et al., 2021)
- Liberalization of marijuana laws is associated with increased rates of CUD, particularly among young adults, and highlighted a **rise in treatment admissions in jurisdictions with legal recreational markets** (Hall & Lynskey, 2020).

3. Medical Marijuana

Overarching concern: *Rapid expansion of “medical” use is outpacing FDA review, medical association support, and traditional doctor–patient safeguards.*

- Georgia’s patient registry has grown to **over 34,000 enrollees** in 2025, with **74% certified for intractable pain or PTSD**, two diagnoses that lack high-quality randomized-trial evidence for marijuana. (Georgia Department of Public Health, personal communication, 2024 and 2025).
- The U.S. Departments of Veterans Affairs & Defense **strongly recommend against marijuana for PTSD** because benefits remain unproven and risks remain high (Department of Veterans Affairs & Department of Defense, 2023)
- There are rising concerns that for-profit providers of medical marijuana registration cards can have financial conflicts of interest that **blur clinical judgement and fragment patients’ primary care**. (Withanarachchie, Rychert, & Wilkins, 2023)

4. Commercial Marijuana (“Recreational”) Legalization

Overarching concern: *Commercial legalization in other states has not eliminated the illicit market and has introduced new public-health burden and costs to taxpayers.*

- Recent empirical and economic-model research suggests that legalization often fails to eliminate the illicit cannabis market. For example, a 2024 study found that even in legalized states, illegal-market sales remain “sizable or even larger than legal markets” (Xing et al., 2024)
- According to a study by the Federal Reserve Bank of Kansas City, for states that have legalized marijuana, average state income per capita grew by 3 percent, house prices by 6 percent, and population by 2 percent. However, **substance use disorders, chronic homelessness, and arrests increased by 17%, 35%, and 13%, respectively** (Brown, Cohen, & Felix, 2023).
- A comprehensive 2025 meta-analysis of 24 observational studies involving ~200 million individuals found that cannabis use is associated with a 29% increased risk of acute coronary syndrome, a 20% higher risk of stroke, and a doubling in cardiovascular disease–related mortality, demonstrating that **regular marijuana use contributes to serious, chronic cardiovascular disease** (Storck et al., 2025)
- **Emergency department visits related to marijuana use rose by 521%** in California from 2008 to 2022. (California High Intensity Drug Trafficking Areas, 2025)
- Emergency-department visits for cannabis-related psychosis among youth rose **43% in Colorado after retail sales began** (Joshi et al., 2025).
- The most commonly detected non-alcohol **substance found in toxicology screens of Colorado high school students who died by suicide (ages 10–19) was THC**, found in 37% of 2019–2020 cases. (Rocky Mountain HIDTA, 2021)
- Secondhand marijuana smoke carries **many of the same toxicants as tobacco smoke** and can deliver psychoactive THC to bystanders (Cone et al., 2015; Moir et al., 2008).

5. Youth Access & Development

Overarching concern: *Current social normalization makes high-potency THC products easily accessible to minors despite well-documented harm to youth brain development and, with long term use, to IQ.*

- Hemp consumables—including gummies with up to **0.3% Delta-9 THC per serving**—**are sold in grocery and convenience stores**; age-21 signage is common, yet **online vendors often do not verify age**. (Egan, Villani, & Soule, 2023)
- Adolescents who start using marijuana are **2–4 × more likely than adults to develop cannabis use disorder within two years** (Connor et al., 2021).
- **48.8% of current teen users report driving while high** (Li et al., 2020).
- **Colorado youth (ages 12–17) ranked #1 in the nation for marijuana use**, 74% above the national average in 2019/2020. (Rocky Mountain HIDTA, 2021)
- Georgia law sets **no minimum age for “low-THC” product certification** for most eligible conditions. (O.C.G.A. § 31-2A-18, 2024)
- More Georgia 12–17-year-olds enter treatment for marijuana than all other drugs combined (SAMHSA, TEDS, 2023)

6. Roadway Safety

Overarching concern: *Marijuana can impair critical driving skills, while Georgia lacks adequate testing and reporting to deter and track such drug-impaired driving.*

- Marijuana slows reaction time and decision-making, increasing crash risk; it is now the **most common drug detected (after alcohol) in fatally injured drivers** (Brooks-Russell et al., 2024).
- One quarter of Colorado **traffic deaths involved THC** in 2022, up from 13% a decade earlier (National Safety Council, 2023).
- **THC impairment remains difficult to confirm** in both fatal and non-fatal crashes, and current chemical testing methods have limited ability to detect real-time impairment. (GRMP internal analysis, 2025).
- **Crash-related toxicology data is often incomplete or missing** due to testing refusals, procedural barriers, and inconsistent follow-up by reporting agencies (GRMP internal analysis, 2025).

7. Workplace Productivity, Safety & Liability

Overarching concern: *Marijuana use can undermine labor-force reliability and increase employers' legal exposure in safety-sensitive industries.*

- Employees testing positive for marijuana had **55% more industrial accidents, 85% more injuries, and 75% greater absenteeism** (National Institute for Occupational Safety and Health [NIOSH], 2020).
- Because THC is fat-soluble and remains in the brain, **complex cognitive and motor impairment can last ≥6 hours after smoking** even when blood levels fall (National Academies of Sciences, 2017).

- **No rapid breath- or blood-based test can yet indicate real-time impairment**, complicating workers-compensation and OSHA compliance (Smart Approaches to Marijuana, 2024).

8. Pregnant & Breastfeeding Mothers

Overarching concern: *THC readily crosses the placenta and enters breast milk, yet retail staff without medical training routinely recommend marijuana for morning sickness.*

- THC exposure in utero is associated with **lower birth-weight and later neuro-behavioral problems** (National Academies of Sciences, 2017).
- Secret-shopper studies show **nearly 70% of dispensary “budtenders” suggest marijuana for pregnancy-related nausea** despite professional-society warnings (Dickson et al., 2018)

9. Justice & Access to Treatment

Overarching concern: *Some policy approaches that remove criminal accountability may unintentionally reduce the ability of courts to connect individuals to education and treatment services—missing a critical opportunity for early intervention.*

- Of 19 Georgia localities that have lowered penalties, **only 2 integrate formal drug education, screening and treatment referral**, missing a chance to intervene early (GRMP internal analysis, 2023).
- National data show **52% of people who knew they needed treatment did not know how or where to get it**, and **42% do not have health insurance that covers SUD treatment** (SAMHSA, NSDUH, 2023).
- Up to 90% of people with a substance use disorder—including cannabis use disorder—do not believe they need treatment or are unaware of their condition, making it **unlikely they will seek help voluntarily without structured interventions** such as court-mandated diversion or screening programs (SAMHSA, NSDUH, 2023).
- Drug courts that retain criminal accountability while offering diversion have approximately a **12-percentage point drop in recidivism** compared to traditional case processing (Mitchell et al., 2012)

10. Environmental Impact

Overarching concern: *Large-scale marijuana cultivation strains land, water, and energy resources at levels comparable to—or exceeding—traditional agriculture.*

- Outdoor grows in western states have contributed to **deforestation, stream-flow reduction, and pesticide runoff harmful to wildlife** (Carah et al., 2017).
 - Indoor cultivation can consume **ten times more electricity per square foot than an average office building**, raising both carbon emissions and utility costs (Mills, 2012).
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Additional information sources available upon request.