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On Behalf Of: Youth Advocate  
Committee: Senate Committee On Early Childhood and Behavioral Health  
Measure, Appointment or Topic: SB1548

February 9, 2026

Sen. Reynolds and Members of the Committee,  
I'm writing in strong support of SB 1548 that seeks to add protective measures for Oregon's youth in the face of vast cannabis commercialization. As the New York Times points out (It's Time for America to Admit That It Has a Marijuana Problem, January 10, 2026), "wider use has caused a rise in addiction and other problems." This fact is deeply evident in Oregon.

Per multiple years of SAMHSA's National Survey on Drug Use and Health, including the most recent reported year (2023-2024), Oregon youth are experiencing severely poor outcomes related to cannabis. With very little ever put in place to protect youth since we aggressively commercialized and normalized cannabis use, we continue to do our youth, our families, and our future a disservice with each passing day that we don't.

Namely:

- Oregon teens rank in the highest five states in the country in prevalence of marijuana use, and in the highest ten states in use initiation.
- Oregon teens have the 2nd lowest perception of harm regarding regular marijuana use, surpassed only by Colorado who preceded Oregon in commercialization.
- Oregon teens and young adults are in the worst 5 states in the country in diagnosed drug use disorder and need for treatment.
- Oregon youth also rank amongst the worst in the nation in mental health, including depression and suicidal thoughts.

The documented harms caused by cannabis, particularly the high potency products normalized and easily available here, are numerous and growing. The impact on youth is both acute (psychosis, cannabinoid hyperemesis, addictive impacts on neuroplastic brains, etc.). Co-occurring marijuana use disorder and other mental health challenges are common and we know that 90% of adults with substance use disorder initiated in adolescence. Meanwhile, less than 25% of affected Oregon teens are getting treatment they need and less than 10% of young adults are. We can't keep up with the harms we're allowing to happen.

But we can reduce the harms before they occur. Decades of evidence show us that primary prevention measures can better these outcomes by raising protective factors

and lowering risk factors. SB 1548 is a common-sense measure that does that. Much more is needed, but this is a great start. Thank you for considering the public health and prevention implications of SB 1548 and for your attention to the well-being of Oregon's children, youth, and families.

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