

OKLAHOMA



PREGNANCY RISK ASSESSMENT MONITORING SYSTEM

PREPREGNANCY MARIJUANA USE

Marijuana, which comes from the cannabis plant, is usually smoked or consumed. In June 2018, Oklahoma made medical marijuana legal. Since then, its use has grown quickly. Oklahoma now has 12 times more licensed growers and over 5 times more dispensaries than Colorado, which legalized medical marijuana in 2000.¹ This fast growth underscores the potential impact on public health.

Using marijuana can change behavior and how the body works. It can affect focus, time perception, heart rate, blood pressure, breathing, and even the immune and hormone systems.² Pregnant women who use marijuana are more likely to have preterm births and babies with low birth weight,³ which increases the risk of infant death. THC, the main mind-altering part of marijuana, can stay in the body for 5 to 13 days in frequent users and can reach the baby during pregnancy.^{2,4} Since 29% of pregnancies in Oklahoma between 2018 and 2022 were unplanned,⁵ this is a serious concern.

In 2021–2022, Oklahoma adults were 11th in the U.S. for marijuana use in the past month.¹ In 2023, Oklahoma PRAMS began asking mothers about their marijuana use in the 3 months before pregnancy to better understand the issue.

Any Marijuana Use 3 Months Before Pregnancy by Demographics

Age

<20	20-29	≥30
*	25.5%	9.3%

Education

<HS	HS	>HS
24.6%	26.5%	13.7%

Marital Status

Married	Other
8.8%	32.4%

Annual Household Income

<\$23,000	\$23,001–\$48,000
33.2%	21.9%
\$48,001–\$85,000	>\$85,001
12.1%	*

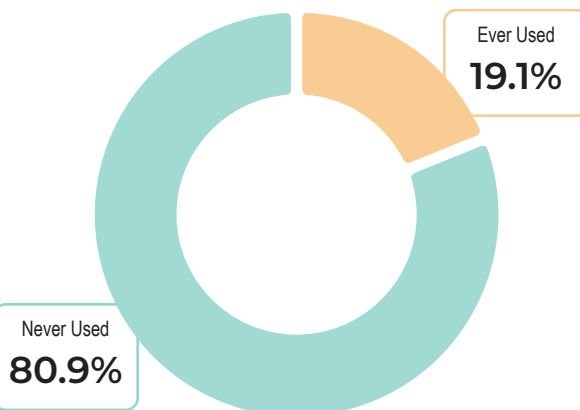
Race/Hispanic Origin

NH White	NH Black	NH AI
18.6%	35.0%	27.9%
NH Other	Hispanic	
17.5%	11.0%	

* = sample size <30
NH = Non Hispanic

AI = American Indian
HS = High School

Overall Marijuana Use 3 Months Before Pregnancy



What a PRAMS Mom Had to Say

"I've had 4 pregnancies and given birth to 3 healthy children. The advice I give to any mother for a healthy lifestyle before, during, and after pregnancy is to regularly take your prenatal vitamins, drink plenty of water, don't intake tobacco, street drugs/marijuana, and alcohol. Also, utilize the available resources/information that prepare you for your pregnancy, baby, as well as your mental health."

References

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OKLAHOMA.GOV/HEALTH/PRAMS
Prams@health.ok.gov

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PRAMS collects population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy. Approximately 250 Oklahoma mothers are randomly selected each month to participate and can respond via mail, phone, or web survey in either English or Spanish. Information included in the birth registry is used to develop analysis weights that adjust for selection probability and non-response. Prevalence rates were calculated using SAS callable SUDAAN. The response rate for 2023 was 53%. Special assistance for this publication was provided by Ayesha Lampkins, DPA; April Lopez, MPH; Biniitha Kunnel, MS; and Rebekah Rodriguez. Funding was made possible by PRAMS, grant number U01DP006591, and by the Maternal and Child Health Bureau, Department of Health and Human Services, Maternal and Child Health Services Title V Block Grant. This publication was issued by the Oklahoma State Department of Health (OSDH), an equal opportunity employer and provider. A digital file has been deposited with the Publications Clearinghouse of the Oklahoma Department of Libraries in compliance with section 3-114 of Title 65 of the Oklahoma Statutes and is available for download at www.documents.ok.gov | Issued July 2025