



CANADIAN
PUBLIC HEALTH
ASSOCIATION

The Voice of Public Health

A PUBLIC HEALTH APPROACH TO CANNABIS

COMMUNITY CONSULTATIONS

across Canada

**“NORMALIZING CONVERSATIONS,
NOT CONSUMPTION.”**

CONSULTATION REPORT FOR [COMMUNITY], [PT] | [MONTH] 2018



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The Canadian Public Health Association is the independent national voice and trusted advocate for public health, speaking up for people and populations to all levels of government.

We champion health equity, social justice and evidence-informed decision-making. We leverage knowledge, identify and address emerging public health issues, and connect diverse communities of practice. We promote the public health perspective and evidence to government leaders and policy-makers. We are a catalyst for change that improves health and well-being for all.

We support the passion, knowledge and perspectives of our diverse membership through collaboration, wide-ranging discussions and information sharing.

We inspire organizations and governments to implement a range of public health policies and programs that improve health outcomes for populations in need.

OUR VISION

A healthy and just world

OUR MISSION

To enhance the health of people in Canada and to contribute to a healthier and more equitable world.

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cannabis. The consultation closed with a brief overview of CPHA's next steps including project timelines. See the Appendix for the consultation agenda.

Throughout the day participants worked through a set of activities that served to both facilitate dialogue amongst participants and to collect data for the CPHA project. The community consultation data collection objectives are to learn about and describe:

- 1. perspectives and perceptions related to cannabis consumption;**
- 2. current and desired community-based cannabis programs and services;**
- 3. current and desired approaches to local monitoring and surveillance of cannabis consumption; and**
- 4. desired information, tools and supports to build community capacity to respond to cannabis.**

Outlined in this report is the summary of the dialogue to inform Amherst's and CPHA's future work and ongoing conversations on cannabis.

“Huge impacts to public health are coming. We need to be really on top of what's coming [with legalization] and really work together as a whole community- especially with the knowledge that cannabis will be sold in NSLC [Nova Scotia Liquor Corporation] stores.”

Perspectives and Perceptions Related to Cannabis Consumption

Participants shared their perceptions related to medical and non-medical cannabis consumption in the context of legalization, and how their perspectives may impact their professional practice.

Perspectives on cannabis consumption

Participant perspectives related to cannabis consumption were mixed, a broad spectrum of views ranging from, “I do not support cannabis consumption even though it is very popular. I believe there are too many unknown variables, namely to negative health related risks,” to, “I feel that there isn’t necessarily risk associated with all cannabis consumption.”

Some participants identified cannabis consumption as having both harms and benefits. For example, one participant noted, “Like many things there is both risks and opportunities to the consumption.” Others viewed cannabis as having fewer associated harms in comparison to alcohol or other substances.

“I don’t feel it is as dangerous or harmful as alcohol or many other drugs.”

“I don’t believe that non-medical, occasional use, is troublesome if done while respecting laws and health and safety.”

Many participants highlighted the need for informed or educated consumption. For example, “It is important to be educated regarding the impact of marijuana use before making the choice to use, [for example] the health costs – it’s both physical and mental decision making.” Others indicated the need for key messages to inform the general public, as one participant expressed the need for, “Strong, well thought out key messages.”

“I don’t have a problem with cannabis consumption as long as the consumer is well educated on what they are taking and why. I think the public needs to gain a lot of information on medical vs recreational cannabis. I also think we need to be extremely diligent to control the industry so that cannabis consumption does not become as attractive and popular as alcohol. We don’t need more harms in our communities.”

When the benefits of cannabis consumption were discussed, they were mostly referred to in terms of cannabis for medical purposes. One participant stated that they viewed medical cannabis as “safer:” “Medical marijuana [is] anti-inflammatory, a pain reliever- I feel it is safer.” Another participant mentioned their inclination to think positively of legalization, given the medical properties of cannabis, “Now that the product has shown to have medicinal benefits I feel more inclined to believe legalization for the general population is okay.”

However, many participants expressed concern over the potential harms associated with non-medical cannabis consumption, some stating the harms outweigh the benefits. For example, “[I] want to decrease consumption, particularly inhalation of cannabis. Harms outweigh benefits in my opinion.” Most participants’ concerns largely focused on youth, for example, “Youth are going to be severely impacted in a negative way.” Specifically, this discussion focused on the

perceived increase in access and consumption of cannabis among youth, and the potential impacts that this could have on the developing brain, and their educational and social development outcomes.

“[I’m] most concerned about side effects on youth – [their] educational and social development...and the effect and energy on overall population health.”

The perceived increase in youth consumption and how this might impact their lifestyle and the community at large was also a concern. This included concerns relating to the implications on existing poverty levels, community sense of connectedness and wellbeing, the impact on those with poor mental health and addictions, and how risks will be mitigated both locally and provincially.

“[There’s a] complex and real concern for youth and increased consumption.”

“[I’m] concerned for mental health and well-being, sense of connectedness. As a mom, I am concerned about what to teach my children and how to safely inform them of risks. As a community member, [I’m] concerned about mitigating risks and how this is going to “show-up” locally and provincially.”

When reflecting upon perceptions related to cannabis legalization participant perspectives were mixed with some participants expressing disagreement with legalization and some indicating positive opinions. Those who cited benefits of legalization perceived legalization would:

- **reduce the issue of unnecessary criminal records and the associated negative implications;**
- **increase public health control; and**
- **increase control and quality of the product.**

“I feel [cannabis] can be safe with the right supports, policies and bylaws in place – a lot of work ahead of us!”

Of those who commented on negative implications of legalization, several participants voiced concern over the retail model (co-location with alcohol at Nova Scotia Liquor Corporation (NSLC) outlets) which was announced shortly before the consultation. For example, “I feel government has ignored evidence on legalization. Minimum age should be 21, and sold separately from alcohol. I think recreational cannabis use will increase as a result.” Concerns raised included the following:

- **increase in youth perceptions that “legalization means safe”;**
- **normalization of cannabis, similar to alcohol;**
- **increase in non-medical cannabis consumption;**
- **concern over minimum age;**
- **concern for public safety and impaired driving impacts;**
- **legalization could lead to normalizing cannabis consumption;**
- **increase commercialization and the promotion of cannabis;**
- **timeline of legalization; and**
- **focus on profit over a public health approach.**

“I feel that it is being pushed through too quickly, perhaps because of the economic factors associated with production, sale and taxation.”

“It is still a drug... a crutch for some... an experience for others... a relief for a few. Yet with government legalizing it so quickly, it seems more concerned with profit or campaign promises than unintended outcomes and taking a public health approach.”

Perceived impacts of cannabis legalization and the potential impact on services

When asked about cannabis legalization and how it might impact the services they provide, participants indicated a range of impacts, some positive and some negative. Perceived positive impacts of legalization on services included increases and improvements in:

- **research potential;**
- **availability of evidence-based, locally relevant information;**
- **engagement with youth in conversations and programs; and**
- **dialogue across the community (including police and harm reduction initiatives).**

“I believe this legalization ‘amps-up’ how we connect youth to proper, current, evidence-based, locally relevant information.”

“[Legalization is] an opportunity to be recognized for local resources to discuss the science and research, as well as best

practices and evidence-based policy opportunities.”

When negative impacts were discussed, many participants perceived that legalization could lead to an increase in demand or need for services with limited resources. For example, “I expect consumption rates will increase, particularly with our youth population. Resources are stretched to maximum already so there is a great concern.” Several participants also had concerns that the tools and education that are required are not yet in place to support their client’s needs. Other negative impacts of legalization on the services that participants provide included:

- **complication of service delivery due to lack of information on community consumption rates and regulatory approach;**
- **concerns about lack of utilization of best practices for harm reduction and prevention for alcohol and tobacco; and**
- **uncertainty of changing roles for law enforcement.**

“[Legalization] will complicate issues for our services raising many questions like, when, how often, or the amount consumed? Where will [cannabis consumption] be allowed? How to weigh risks? How to approach a person? The proof needed for action?”

Current responses to individuals who disclose or ask about consumption

“[I respond] from a harm-reduction approach, because that’s the approach my work supports and that I believe in.”

When participants were asked how they are currently able to respond to an individual who discloses or asks about cannabis consumption, several participants indicated that they apply a harm reduction approach. For example, participants indicated that they are able to provide safer use or risk reduction methods, apply a non-judgmental approach, develop a plan towards recovery and care, and discuss the harms and benefits of consumption. Others indicated that they are able to provide referrals or direction to other services as needed, however, many voiced concerns that given an increase in demand, services will be strained and tools are not yet in place to respond to clients' needs.

“From a front-line worker perspective I feel I can communicate the emerging information and refer to the right supports as needed.”

“I am able to offer information on the impact, concerns, and risk reduction strategies.”

Some participants highlighted the need for more education or updated information. Specific reference was made to youth populations in this regard. One participant stated, “Youth should not be using cannabis and they really need to be educated on why.”

“Some of our information needs to be updated; [we are] needing some quick relevant facts with the emerging legalization.”

Community-based Cannabis Programs and Services

Consultation participants shared existing substance use programs and services that include a cannabis component, perceived challenges related to delivering cannabis programs and services, and suggested cannabis program and service needs for their community.

Current cannabis-related programs and services

Many participants said they were aware of a variety of programs or services related to substance use in their community, some of which were indicated as effective or not. These included:

- **abstinence-based school presentations;**
- **individual counselling or programs;**
- **harm reduction-based programs;**
- **adventure-based programming focused on skill building;**
- **workshops;**
- **mental health and addictions services;**
- **recreational programs for youth;**
- **RCMP youth intervention and diversion programs;**
- **policies for smoke free spaces; and**
- **police talks.**

Specific programs mentioned included:

- **Healthy Living program in high schools;**
- **Racing Against Drugs;**
- **MADD: cannabis & driving;**
- **Guy Talk and Voices for Girls in high schools; and**
- **Family First programming.**

Some participants indicated cannabis-specific educational resources they refer to in their programs. These included:

- **Clearing the Smoke (Canadian Centre on Substance Use and Addiction); and**
- **Lower Risk Cannabis Use Guidelines (Centre for Addictions and Mental Health);**

Challenges of current cannabis-related programs and services

“Limited resources and long-wait time have been major challenges”

Participants noted a number of challenges relating to their community’s current cannabis-related programming and services. One challenge mentioned by several participants was in regards to Amherst as a smaller, remote community and the associated barriers to accessing programs and services. This discussion included limited resources (human, space and equipment) and concern that the tools are not yet in place to meet the needs of clients.

One participant stated, “[The] challenge is access to services for rural areas. It’s a challenge to get rural representatives to advocate or partner on meetings.” Other challenges listed included:

- **communicating with ‘hard to reach’ youth;**
- **time to process laboratory results evaluating cannabis impairment;**
- **stigma around accessing services;**
- **lack of medical guidelines; and**
- **lack of tracking data and community impacts.**

“Stigma –it prevents people from getting help.”

Desired cannabis-related programs and services

Consultation participants shared their thoughts on what cannabis consumption programs and services they would like to see available in Amherst going forward. Participants suggested the need for the following specific program or policy needs relating to cannabis:

- **employee assistance programs;**
- **adapt policy requirements to cannabis, such as tobacco smoking policies; and**
- **improve harm reduction and capacity building within other programs to apply a harm reduction approach.**

Participants expanded this conversation to include the need for more education and resources to support programming and services, including the need for:

- **evidence-based advice or guidelines to support practice;**
- **support for providers on how to have a conversation with clients;**
- **tools and resources, including the development of low-risk cannabis guidelines for the general Nova Scotia population;**
- **information on the health effects, tailored to:**
 - **physicians and health and social service providers;**
 - **intergenerational populations;**
 - **teachers; and**
 - **youth.**
- **public education that is easy to read and understandable, including:**
 - **education on cannabis consumption without promoting use;**
 - **where to go for more information;**
 - **safety messaging around safer use including the message, “because its legal doesn’t mean it’s safe”;**
 - **information to support conversations on why the legal minimum age was selected to be 18;**

- **education around driving while impaired and cannabis consumption and driving;**
- **information on pregnancy and cannabis;**
- **factual information to target common misperceptions around cannabis; and**
- **avoiding scare tactics.**
- **data to inform decision makers; and**
- **a central resource repository for health and social service providers and/or the public.**

“Data is needed to help our decision makers make enlightened decisions”

“[We need resources that are] easy to read, understandable, and [include] where to go for more information.”

Participants also mentioned the need for a multi-tiered, comprehensive approach to programming and services in their community. This included a fulsome health promotion effort that extends beyond education measures alone, and is an approach that includes:

- **social media;**
- **interactive mediums;**
- **intergenerational community forums focused on fostering unity;**
- **dialogue across sectors; and**
- **capacity building for best practices.**

“[There is a] need for capacity building on best practices around how to do a fulsome health promotion efforts beyond just education.”



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