

# Non-Medical Cannabis Legalization: FNHA Public Health Approach

BC Chiefs Cannabis Forum – March 27, 2019

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## What Are BC First Nations Saying about 'Legalization'?

#### **Common themes:**

- Substance Misuse
- Medicinal Benefits
- Youth and Mental Health
- Individual and Community Safety
- Secondhand Smoke
- Drug-impaired Driving
- Safe Access
- Self-Determination



#### Data - First Nations and Cannabis

% of FN adults who used cannabis during the past year (RHS)		
	2008-10	2018
Abstinent	67.7	69.7
Monthly Usage	3.2	2.4
Daily Usage	12.4	12.1

- Overall, not much change in usage rates over time
- FN usage in past year was statistically <u>significantly higher</u> than general population
- FN Youth (12-17 y/o): 72.8% had not used cannabis in the past year



## First Nations Perspectives Around Cannabis – 1 of 2

- First Nations in BC are using cannabis for medical and non-medical purposes, and often for both concurrently
- Provincial/Regional engagement suggests that many individuals feel cannabis has a positive impact on their health and wellness
- Diverse range of positive benefits:
  - Emotional and spiritual wellbeing
  - Physical health and mobility
  - Mental health and wellness
  - Social life and relationships
  - Work and school



## First Nations Perspectives Around Cannabis – 2 of 2

- For medical cannabis, common reasons for use include:
  - Problem sleeping
  - Chronic and acute pain
  - Headaches
  - Nausea
  - Muscle spasms
- Cannabis viewed as a desirable potential alternative to opioids, alcohol, other illicit drugs and prescription medications (e.g. Valium and Xanax)
- Heavy interest in using CBD products to deal with pain and other health conditions



## Key Health Considerations – 1 of 2

- Impaired driving/Motor vehicle accidents (MVAs)
- Dependence/addiction
  - ~10% of users will develop an addiction
- Mental health problems:
  - Psychosis
  - Schizophrenia
- Education problems (long-term effects of use)



## Key Health Considerations – 2 of 2

- Lung problems, including lung cancer
- Poor outcomes for babies related to use during pregnancy
- Overdose and unintended exposure: children
   & Elders
- Increased risk for young people (<25 yrs), those with personal or family history of mental illness, adverse developmental experiences (e.g. trauma)



## Implications for Mental Health and Wellness - 1 of 3

- Youth and brain development:
  - The brain is considered to be more "vulnerable" to injury (of various kinds, including substance use) as it continues to grow and makes connections between brain areas up until the mid-20's
  - Some mental health disorders typically first appear during the ages of 15-25 years
  - Regular use of cannabis while the brain is still developing can be associated with certain increased risks...



#### Implications for Mental Health and Wellness – 2 of 3

- Regular use in those younger than 16 years show increased likelihood of developing health, educational & social problems
- Effect of cannabis use on cognitive abilities: attention span, memory and overall IQ
- Increased risk of psychosis, schizophrenia; especially if there is Hx of childhood trauma, Hx of 1<sup>st</sup> degree relative with a psychotic illness
  - Marconi et al. (2016): n>66,000 found a relationship between level of use and risk for psychosis
  - Symptoms of schizophrenia may worsen with use



## Implications for Mental Health and Wellness – 3 of 3

- Anxiety, trauma (PTSD): symptoms may worsen with high THC content
- Depression: worsening of symptoms e.g. lack of motivation
- Relationship between chronic pain and mental health & wellness



#### **Cannabis Use During Pregnancy**

- THC crosses the placenta & into the baby's bloodstream
- THC also found in breast milk
- Recommend avoiding cannabis use; especially during the first trimester
- Explore alternative treatments for morning sickness
- Risks to baby: pre-term labour/delivery, low birth weight increased vulnerability to infections, difficulty feeding etc.
- Potential learning & behavior consequences for child that appear later: learning challenges, impulsivity, hyperactivity



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#### **Additional Public Health Considerations**

- Secondhand Smoke
  - Emerging research on impacts of SHS
  - Developing information campaigns



- Environmental Health and Safety
  - Hazards and contaminants from home cultivation
  - Risks of fire and electrical damage from solvents
- Access to non-medical Cannabis
  - Access and control in rural and remote settings
  - Risks of illicit trafficking and distribution networks



### Harm Reduction Approach

- Legalization replaces an illicit/unregulated substance for a system with known quality and dosage
- Treatment for pain management
- Increased availability of education and health information around risk mitigation and safer choices:
  - safe transportation (e.g. designated drivers)
  - choosing lower-potency products (e.g. THC:CBD ratio)
  - understanding safer methods of use
- Potential of reducing opioid dependency



#### Wealth Can Be Health

- Retail of cannabis and cannabinoids
- Micro-cultivation and local farming
- Micro-processing
- Quality control
- Policy development
- Regulation & Safety
- Policing
- Licensing
- Taxation



#### What has FNHA said?

- FNHA public education campaign www.fnha.ca/cannabis
- Promotion of Canada's Lower-Risk Cannabis Use Guidelines
- Blogs: Cannabis use and pregnancy; Mental health risks to youth
- Letter to Communities: A Public Health Approach to Non-Medical Cannabis



Learn more to make the best choices for yourself and your family

Dr. Nel Wieman

Jun 20, 2018

The legalization of non-medical cannabis in Canada is happening October 17, 2018 and we at the FNHA want to provide you with as much information as possible so you can make the best and safest choices for yourself and your family members.

During a recent webinar about the legalization of non-medical cannabis, we heard that people want to know more about two important areas of concern related to cannabis use: 1) the risks to moms and babies through prenatal exposure and, 2) the risks to mental health, especially you

Let's talk about moms and babies first.



## **Activities and Engagement**

- Cannabis Public Education Campaign (Nov 2018 June 2019)
  - MHW with a focus on youth; maternal health
  - Web content, digital ads, social media, radio, FAQ's
- Regional Caucus Engagement (Nov Dec 2018)
  - Expert panel/Q&A FNHA, Health Canada, MoH, Secretariat
  - Information booth with resources
- Nursing Education Forum (Nov 2018)
  - Panel participation and information booth
- Gathering Our Voices Youth Engagement (March 2019)
  - Youth workshops and activities focusing on health and safety
- Community Resource Guidebook (Spring 2019)
  - Issues/policies for community leadership consideration



## Community Resource Guidebook – *in development*

- Request from community leaders desire for information
- Respecting self-determination
  - There is no 'one-size-fits-all' approach
  - Diverse views and approaches among communities
- Helping leaders and communities prepare for and adapt to this new post-legalization environment
- Balancing health and safety needs with economic growth and consumer demand
- Regulating consumption and distribution
- Minimizing the harm to our communities, particularly youth



## How FNHA Is Talking About Cannabis – 1 of 2

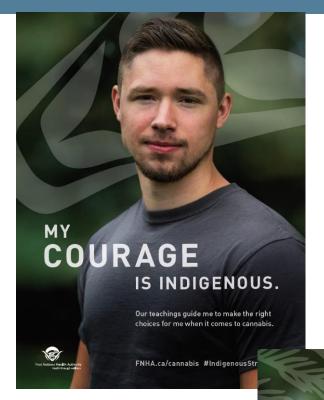
- FNHA embraces a harm reduction approach
- First Nations communities, families and individuals in BC have clearly and consistently indicated that mental health and wellness is a top priority.
- We recognize that using cannabis as a treatment mechanism may make some people feel better, but it is important to understand the associated risks



## How FNHA Is Talking About Cannabis – 2 of 2

- Although there are claims that regular non-medical cannabis use can act as a medicine, there is no evidence that the benefits outweigh the risks in the case of youth.
- Doctors are recommending that women who use nonmedical cannabis to stop using during pregnancy. There are also risks associated with using medical cannabis while pregnant.
- At this time, FNHA does not cover medical cannabis as a benefit. FNHA has assembled an expert panel in this area and is reviewing our policy against emerging clinical research.





MY
PATIENCE
IS INDIGENOUS.

Our teachings guide me to reflect on the benefits of waiting until I'm older before trying cannabis.

MY
HEALTH
IS INDIGENOUS.

Our teachings guide me to make choices around cannabis that are safer for my body and mind.

FNHA.ca/cannabis #IndigenousStrengths







