



Commission de la santé mentale du Canada

Summary Report on the Inuit Forum on Cannabis and Mental Health

Mental Health Commission of Canada mentalhealthcommission.ca





Ce document est disponible en français

Citation information

Suggested citation: Mental Health Commission of Canada. (2020). *Summary report on the Inuit Forum on Cannabis and Mental Health*. Ottawa: Author.

© 2020 Mental Health Commission of Canada

The views represented herein solely represent the views of the Mental Health Commission of Canada.

ISBN: 978-1-77318-148-6 (Print), 978-1-77318-147-9 (Online resource)

Legal deposit National Library of Canada



Health Canada Santé Canada

Background

On October 9-10, 2019, representatives from the Mental Health Commission of Canada, Inuit Tapiriit Kanatami, the Canadian Centre on Substance Use and Addiction, and the Nunatsiavut Department of Health and Social Development hosted an Inuit forum on cannabis and mental health in Happy Valley-Goose Bay, Newfoundland and Labrador. This two-day dialogue marked the first opportunity for Inuit across Inuit Nunangat to come together to discuss cannabis.

The purpose of the forum was to have the participants exchange knowledge and identify research gaps and priorities as a way to begin the process of developing an Inuit-specific cannabis and substance use research agenda. While the event included presentations, most of the time was spent working in small groups while engaging in wide-ranging discussions centred on cannabis, mental health, and research. Topics included cannabis use and access, risks, benefits, challenges, and best practices.

Various areas of expertise were represented, including mental health and addiction counsellors, community health representatives, public health practitioners, policy advisers, and Elders.

Perspectives on cannabis

Participants had different levels of knowledge about cannabis and were eager to discuss all aspects of this complex topic. The following key points were discussed.¹

- 1. It is essential to understand and attend to the social determinants of health:
 - Housing is a key issue to be addressed. For example, there might be three families living in one household with compounding factors affecting the health and well-being of the occupants.

Participants

- Nunatsiavut Department of Health and Social Development
- Nunavut Tunngavik Incorporated
- Inuvialuit Settlement Region
- Nunavik Regional Board of Health and Social Services
- Inuit Tapiriit Kanatami
- Pauktuutit Inuit Women of Canada
- Government of Nunavut
- Mental Health Commission of Canada
- Canadian Centre on Substance Use and Addiction

Organizers

- Inuit Tapiriit Kanatami
- Mental Health Commission of Canada
- Canadian Centre on Substance Use and Addiction
- Nunatsiavut Department of Health and Social Development

Forum Facilitator

Maureen Baikie, MD, FRCP(C)



¹ A more accurate reflection of all the participants' views is available in the full forum report.

- There is a need to understand trauma and lived experiences to understand cannabis use and mental health.
- 2. Communities must be meaningfully involved in research, and researchers must be culturally competent and trauma informed:
 - Ensure that community members carry out research when possible (e.g., interviewing participants) and that the community and participants receive the end results.
 - It is important that the people (e.g., researchers) who come into Inuit communities have cultural sensitivity and an awareness of historical and intergenerational trauma. Being aware of how the community views cannabis, both now and before legalization, is also important.
 - Clear terminology and communication are needed to ensure that people in the community understand what the research is about.
- 3. Language is key to conversations about cannabis, mental health, and research:
 - Using Inuktut allows for a comprehensive and detailed discussion.
 - Non-stigmatizing language should be used.
- 4. Understanding what works for youth is a priority:
 - Communicating the health and mental health impacts to youth is vital, as is understanding their perspectives on cannabis and their reasons for use.
 - Participants wanted to see peer-led harm reduction and land-based programs for youth.
- 5. Involving Elders is essential:
 - Ensure there are materials designed specifically for Elders that explain what cannabis is and why it was legalized.
 - Involve Elders in decision making, education, and programs related to cannabis and mental health, and invite them to speak with youth about cannabis use.
- 6. Although legal, cannabis is not necessarily accessible in Inuit Nunangat:
 - Barriers to accessing the legal market include having no stores (in many communities) or stores
 that are too far away and being unable to exchange goods for cannabis or purchase cannabis
 online (due to the lack of a credit card or internet access).
 - Despite being more expensive, the illegal market is more accessible but can lead to additional issues.
- **7.** Stigma is prevalent:
 - Stigma affects how cannabis use is seen and reported.
 - Solutions or approaches to problematic cannabis use need to consider stigma and culture.
 - Stigma is a barrier to discussions on responsible use and the reduction of harm, particularly when it comes to educating youth.
- 8. It is important to understand both the harms and potential benefits of cannabis use:
 - Perceived harms include (1) the effects on families, (2) increased consumption since legalization, (3) the sense that because cannabis is legal it must be safe, (4) more psychosis and schizophrenia

- since legalization, and (5) more acceptability for youth, who witness cannabis use or use it themselves with family members.
- Perceived benefits include that (1) cannabis is less harmful than other substances, (2) it can have a positive impact on relationships and finances, as cannabis is less expensive than alcohol, (3) legalization has improved youth understanding, (4) the workload for police and RCMP is reduced, and (5) the quality of legal cannabis is higher.

Research questions

Participants wanted more information on (1) cannabis use as a form of harm reduction (for other substances), (2) the different strains of cannabis and their uses, (3) methods of use, (4) the long-term effects of smoking cannabis, and (5) the impacts of use on pregnancy and breastfeeding.

After the discussion, participants worked to develop the following research questions:

- What are the perceptions of cannabis use among different demographics?
- What are the risks associated with using cannabis?
- What are the potential benefits of using cannabis?
- What are the broader impacts of cannabis use and legalization in different communities?
- What are the general patterns of consumption in different regions?

Needs moving forward

- 1. Communities require information on cannabis that is a lot more basic, including its relationship with mental health.
- 2. Cannabis-related programs or research must be grounded in the local culture and language and in such social determinants of health as housing. They must also take into account the community context including trauma and lived experiences and reflect regional differences.
- 3. There is considerable interest in exploring a harm reduction approach, including cannabis use as a substitute for other substances (e.g., alcohol). However, this possibility must be thoroughly studied so all harms and benefits are known and the approach can be customized to the individual.
- **4.** A comprehensive cannabis strategy similar to the Tobacco Reduction Strategy is needed. Much of the information in the full summary report can be used to inform such a strategy.
- **5.** Participants saw a need for more opportunities to come together to discuss and share knowledge related to cannabis and mental health.





Mental Health Commission of Canada

Suite 1210, 350 Albert Street Ottawa, ON K1R 1A4

Tel: 613.683.3755 Fax: 613.798.2989

mhccinfo@mentalhealthcommission.ca www.mentalhealthcommission.ca

■ @MHCC_ **I**/theMHCC ►/1MHCC **@**@theMHCC

in/Mental Health Commission of Canada