



Mental Health
Commission
of Canada

Commission de
la santé mentale
du Canada



Closing Research Gaps on Cannabis and Mental Health

4

Veteran-Specific Findings

Over the past five years, the Mental Health Commission of Canada (MHCC) has led a pan-Canadian research program to assess the impact of cannabis legalization and its use on the mental health of diverse populations. This document synthesizes key themes that emerged from six studies that explored the relationship between cannabis and mental health among Veterans in Canada.

According to these studies, Canadian Veterans are significantly impacted by a range of physical and mental health conditions, which medical cannabis is frequently used to manage. While over time, medical and recreational cannabis use have significantly increased among Veterans compared to other groups, little research into the Veteran experience exists. These studies begin to fill this gap.

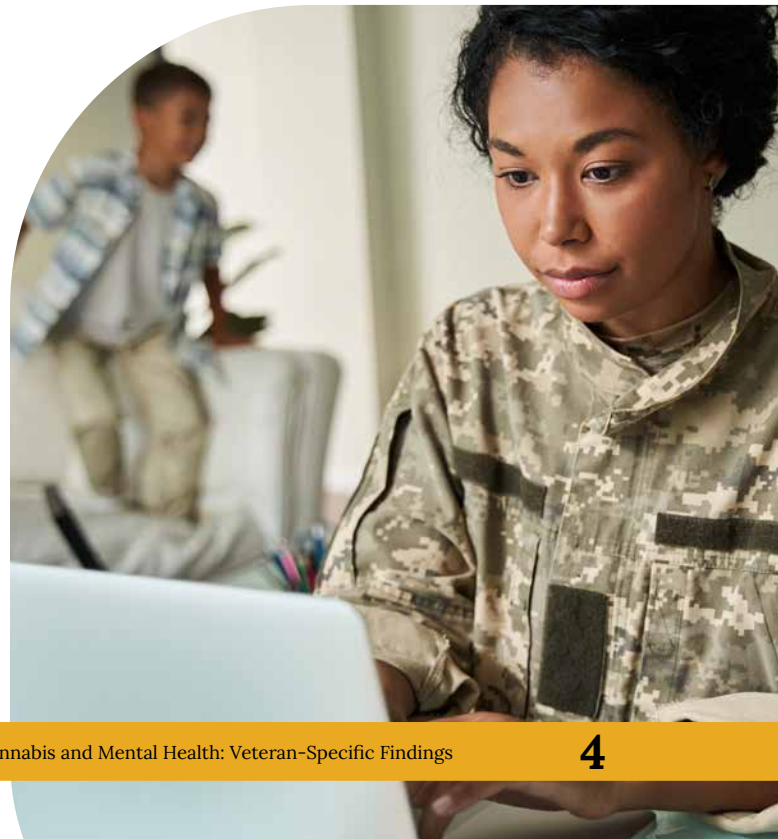


1. Veterans use cannabis for many reasons and experience a range of benefits and harms.

- ✓ Veterans participating in these studies reported using cannabis to cope with a variety of physical and mental health challenges, including chronic pain, depression, post-traumatic stress disorder (PTSD), sleep disorders, stress, anxiety, and arthritis (Brémault-Phillips, 2021; Grover, 2021; Robillard, 2021; Stewart, 2021; Whitley, 2020).
- ✓ Many reported that using cannabis relieved physical and mental health symptoms, reduced the use of prescription medication (and its associated side effects), and improved overall health, well-being, and quality of life (Brémault-Phillips, 2021; Robillard, 2021, Whitley, 2020).
- ✓ One study found that Veterans who had medical cannabis authorization (via the Cannabis for Medical Purposes [CMP] program) were more likely than non-CMP Veterans to be younger, live in a rural area, have a permanent condition, and have been deployed to special duty areas (e.g., higher risk deployment) (Robillard, 2021). Among the Veterans who used medical cannabis, those with PTSD were twice as likely to have an authorized daily dose of more than three grams compared to those without.
- ✓ Veterans using medical cannabis were less likely to use opioids, narcotics, benzodiazepines, and other medications than those who were not. Individuals with PTSD also had less problematic alcohol or illegal substance use than those who did not use medical cannabis (Robillard, 2021). Less reliance on prescription medication (including number of prescriptions) and alcohol among Veterans who used medical cannabis was also echoed in other studies (Brémault-Phillips, 2021).
- ✓ One study found that Veterans were more likely to consume edibles than non-Veterans (51% compared to 22%) (Grover, 2021). Other research determined that Veterans tend to opt for edibles to try and mitigate health concerns associated with other methods of use, such as smoking (Brémault-Phillips, 2021).
- ✓ Some participants reported negative effects from cannabis use, including drowsiness, increased anxiety, delusional thinking, dependence, and poor concentration, memory, and work performance. Some were also concerned about “greening out” and spacing out, as well as the long-term risks associated with certain methods of cannabis consumption, including smoking or vaping (Brémault-Phillips, 2021).

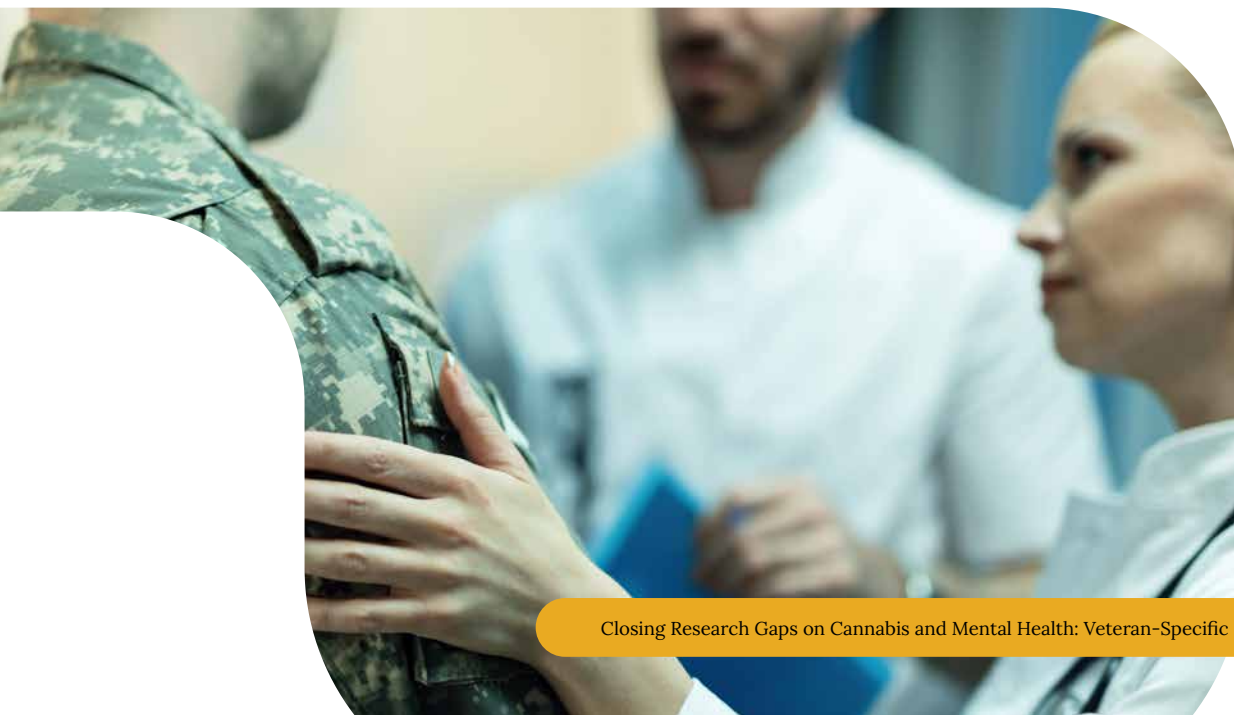
2. The relationship between cannabis use and trauma is unique and nuanced for Veterans.

- ✓ Due to the nature of deployment, Veterans are significantly impacted by physical and mental health conditions, which medical cannabis is used to manage. One study found that Veterans and non-Veterans perceived cannabis as most effective for conditions associated with deployment experiences such as insomnia, PTSD, depression, anxiety, and acute and chronic pain (Grover, 2021).
- ✓ Another study that specifically looked at the relationship between Veterans, trauma, and cannabis use found that those who had experienced early child maltreatment or deployment-related traumatic events were more likely to report cannabis use within the past 12 months, regardless of demographic factors (Afifi, 2021).
- ✓ In a different study, early childhood trauma was determined to have the most significant impact on an individual's mental health and cannabis use, independent deployment-related trauma. This study also suggested that early life trauma may result in a heightened vulnerability to mental illness and chronic pain, especially when exposed to additional trauma in deployment, which in turn contributes to increased cannabis use among Veterans (Afifi, 2021).
- ✓ Across several studies, past-year cannabis use among Veterans was associated with trauma (childhood and adult), PTSD diagnosis, and deployment (Afifi, 2021; Grover, 2021; Robillard, 2021; Stewart, 2021).
- ✓ One study found that cannabis can decrease symptoms of PTSD (e.g., anxiety, insomnia, flashbacks) by decreasing arousal states. However, these benefits may only be temporary, and other evidence suggests a worsening of PTSD symptoms among some Veterans (Brémault-Phillips, 2021).



3. Barriers to accessing medical cannabis persist after legalization.

- ✓ Participating Veterans discussed common barriers to accessing medical cannabis and support, including difficulty navigating the necessary paperwork and processes to obtain medical cannabis (e.g., accessing a medical cannabis authorizing provider, service medical records, and general medical records) and inconsistent access to supply (e.g., out of stock or discontinued products) (Brémault-Phillips, 2021).
- ✓ Participating Veterans also reported that Veteran Affairs Canada's (VAC) restrictions on daily cannabis amounts and limits on licensed providers were significant barriers to access (Brémault-Phillips, 2021). Another study found that 20 per cent of respondents felt the quantity covered by the government-funded cannabis program was insufficient, and 75 per cent reported buying additional cannabis without reimbursement (Robillard, 2021).
- ✓ Jurisdictional tensions between federal, provincial, and international cannabis legislation disrupted some Veterans' access to their authorized medical cannabis when travelling (Brémault-Phillips, 2021).
- ✓ Many Veterans with medical cannabis authorization reported receiving poor guidance and monitoring from their health-care provider. Service providers from this same study reported a lack of available clinical guidance to effectively authorize and monitor cannabis use (Brémault-Phillips, 2021).
- ✓ Veterans and service providers frequently discussed a lack of accurate and reliable cannabis information and resources to support medical cannabis use, particularly around strain selection, dosage, and monitoring (Brémault-Phillips, 2021).



4. Stigma prevents many Veterans from accessing formal health-care supports.

- ✓ Veterans who use cannabis (with or without medical authorization) reported experiencing internal and external stigma toward their cannabis use. This stigma was commonly cited as a barrier to accessing formal health-care support and seeking medical authorization (Robillard, 2021; Brémault-Phillips, 2021).
- ✓ Participating Veterans described varying levels of support from friends and family members for their cannabis use, with some still seeing it as a harmful “drug” and others witnessing some of the perceived therapeutic benefits (e.g., reduced stress, fewer flashbacks, better sleep, better family engagement) (Robillard, 2021).
- ✓ Some Veterans reported self-medicating with cannabis after experiencing difficulties accessing medical treatment for their physical and mental health concerns, particularly among those living in remote communities (Robillard, 2021).
- ✓ Some Veterans who were able to access formal health-care supports reported poor experiences, including a lack of clinical supervision or assistance on their medical cannabis use and misinformation (e.g., being told that cannabis leads to a loss of brain cells and makes those who consume it less smart, which is inaccurate). Such experiences led some to further self-medicate and hide their use from their health-care providers (Brémault-Phillips, 2021; Robillard, 2021).

For more insight into Veterans’ and their families’ perspectives and experiences, see the [Cannabis and Mental Health Dialogue Series: Insights into Veteran and Veteran Family Experiences with Cannabis and Mental Health](#).

References

To learn more about each of these projects, visit the MHCC [website](#).

Afifi, T. (2021). *Cannabis and mental health among Veterans in Canada: Understanding the role of trauma and impact on help-seeking*. University of Manitoba.

Brémault-Phillips, S. (2021). *Understanding cannabis use by Canadian Veterans and its impact on their health, well-being, and quality of life*. University of Alberta.

Grover, S. (2021). *Medical cannabis use among Canadian Veterans and non-Veterans: A national survey*. Research Institute of the McGill University Health Centre.

Robillard, R. (2021). *Patterns of use and experiences related to cannabis in Veterans with post-traumatic stress disorder*. University of Ottawa.

Stewart, S. (2021). *PTSD-Cannabis use disorder comorbidity: Associative memory mechanisms*. Dalhousie University.

Whitley, R. (2020). *A joint production: Using participatory video for stigma reduction and public education*. RADAR Mental Health.

