



Mental Health  
Commission  
of Canada

Commission de  
la santé mentale  
du Canada



# Closing Research Gaps on Cannabis and Mental Health

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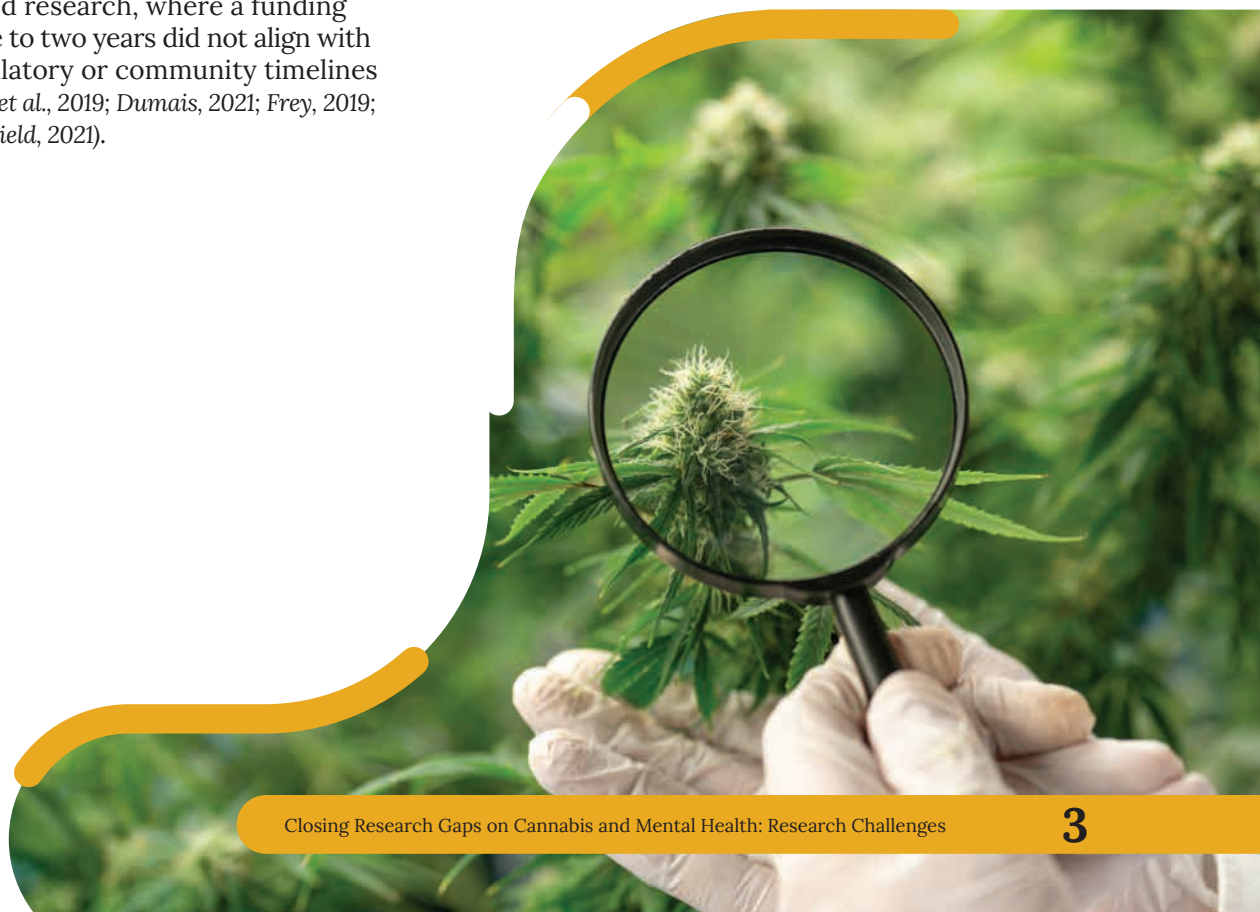
Research Challenges

Over the past five years, the Mental Health Commission of Canada (MHCC) has led a pan-Canadian program to assess the impact of cannabis legalization and use on the mental health of diverse populations. This document synthesizes the unique challenges teams experienced while conducting research in a newly legalized environment during a global pandemic. Researchers continue to call for more public funding of cannabis research to ensure that the public receives timely, accurate, representative, and unbiased information about cannabis and its potential therapeutic benefits and harms for mental health (Buchman & Grundy, 2021).



# 1. A newly legalized and regulated environment led to many unanticipated research delays and challenges.

- ✓ Several research teams reported significant delays in accessing a cannabis research licence, particularly for clinical and randomized control trials (RCTs). These challenges were compounded by additional delays in seeking ethics approvals, which could only begin after securing a research licence (De Beaumont et al., 2019; Frey, 2019; Shield, 2021).
- ✓ Some teams reported difficulty obtaining the appropriate cannabidiol (CBD) compound to use in clinical trials. One of the main CBD suppliers suddenly closed during this funding term, and that was followed by recurring delays in government approval of additional suppliers (De Beaumont et al., 2019; Frey, 2019; Shield, 2021).
- ✓ Several teams reported that their funding term was too short. This included teams who tried to conduct RCTs as well as community-based research, where a funding period of one to two years did not align with current regulatory or community timelines (De Beaumont et al., 2019; Dumais, 2021; Frey, 2019; Jama, 2020; Shield, 2021).
- ✓ One study pointed out that a significant proportion of the research underway was still being funded by large cannabis companies. Many risks remain regarding conflict of interest, bias, and scientific integrity. There is a clear need for policies to manage industry-sponsored research (Buchman & Grundy, 2021).



## 2. The COVID-19 pandemic caused immediate delays and additional research challenges.

- ✓ As all research projects were conducted during the pandemic, most teams reported several challenges that delayed timelines, limited study scope, or required them to use new methods and tools. For example, many projects transitioned data collection methods and participant engagement from in-person to online, phone, or hybrid formats.
- ✓ For some, virtual engagement and data collection was a benefit that offered an opportunity to learn new skills, use innovative tools, and expand research to be more inclusive of diverse participants. Many reported that online methods helped researchers connect with communities they may not have otherwise been able to reach (e.g., individuals living in northern and remote communities) and reduce costs, risk, and travel time compared to in-person meetings (Ferlatte, 2020; Whitley, 2020).
- ✓ Other teams reported challenges associated with virtual participant engagement, especially in communities that place a high value on in-person interactions or in remote communities with less internet connectivity and technology. For example, one research team said that a virtual environment “masked the energy” that was crucial for building trust and developing meaningful relationships among youth (Salmon, 2021). Another project reported that virtual engagement was a new experience for both research team members and participants, which they initially struggled to adapt to (Sanguins, 2020).
- ✓ Due to the nature of the pandemic, many research teams found it more difficult to recruit participants. Several teams shifted their plans to recruit via public advertisements, social media, and word of mouth.
- ✓ Some teams feared that online engagement may have hindered the recruitment of remote, homeless, or low-income individuals, who may not have access to the internet and technology, especially during lockdowns when access to public libraries and computers was limited (Canadian Mental Health Association Ontario [CMHA Ontario] et al., 2020).
- ✓ Some communities were less able to participate in research, since they were actively responding to the ongoing impacts of COVID-19, natural disasters (e.g., flooding and wildfires), and the discovery of residential school burial sites. Such circumstances put intense demands and pressure on limited health and social services (Gaddes, 2020; Hopkins et al., 2020).
- ✓ Some teams experienced challenges with participant retention due to participants’ mental health challenges and the difficulty of committing to project timelines during the pandemic (Pakhale, 2021).
- ✓ Many projects experienced attrition in their research team due to staff turnover and shortages, burnout, illnesses, other personal challenges, and caregiving responsibilities during the pandemic (Gillis & Huang, 2020; Hopkins et al., 2020; Rueda, 2021a, 2021b).

### 3. Despite the legalization of cannabis, persistent fear and stigma presented an additional barrier to participant recruitment and engagement.

- ✓ Researchers found it more difficult to recruit populations that face discrimination and stigma, and have distrust in institutions and systems. In addition, the COVID-19 pandemic amplified systemic barriers among equity-deserving groups, which limited their ability to participate in research.
- ✓ Some researchers said participant recruitment was impacted by fear that the data provided could be used to restrict access to medical cannabis (*Brémault-Phillips, 2021*).
- ✓ Some participants indicated that it was hard to speak about their lived experience with mental health and cannabis in group settings due to fear of judgment (*Pakhale, 2021*).



## 4. Despite challenges, research teams persisted and used innovative approaches.

- ✓ Many research teams shifted the scope of their project and sought extensions where possible.
- ✓ Some teams applied for additional grants outside this research initiative so they could continue their research (*De Beaumont et al., 2019; Dumais, 2021; Ferlatte, 2020; Frey, 2019; Shield, 2021*).
- ✓ Many teams pivoted to new participant recruitment strategies, such as email outreach, paid social media advertising, and snowball sampling (where current participants refer people they know to join the study) (*First Nations Information Governance Centre [FNIGC], 2020; Native Women's Association of Canada [NWAC], 2021; Salmon, 2021*).
- ✓ To support effective recruitment, researchers offered an honorarium for participants' time and expertise (*Aw-Osman, 2020; FNIGC, 2020; Larose & Elford, 2020; NWAC, 2021; Pakhale, 2021*).
- ✓ Researchers applied community-based and peer research methods that prioritized building rapport and sharing research oversight and decision-making powers with participants (*Archie, 2021; Aw-Osman, 2020; Benoit, 2021; Castellanos Ryan & London-Nadeau, 2021; Jama, 2020; Larose & Elford, 2020; Pakhale, 2021; Salmon, 2021*).
- ✓ Teams trained, hired, and engaged people with lived and living experience as co-researchers who led multiple stages of each project. This included (but was not limited to) participant recruitment, data collection, knowledge product development, and the sharing of results. Many of these teams reported richer findings and higher rates of participation and retention because of the peer researchers (*Archie, 2021; Aw-Osman, 2020; Benoit, 2021; Castellanos Ryan & London-Nadeau, 2021; Jama, 2020; Pakhale, 2021; Salmon, 2021*).
- ✓ One study involving marginalized and homeless youth provided peer researchers with paid public transit and participants with free psychotherapy if needed (*Pakhale, 2021*).
- ✓ Many MHCC-funded researchers joined hundreds of other researchers in signing an open letter to the federal government highlighting federal regulations as barriers to cannabis research, which resulted in the revision of some approval requirements (*Frey, 2019*).



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

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