



# **A Review of the *Cannabis Act*: Written Submission from the Canadian Paediatric Society**

**November 2022**

## Introduction

The Canadian Paediatric Society (CPS) is pleased to submit the following comments as a part of the legislative review process of the *Cannabis Act*. As Canada's national association of paediatricians, paediatric subspecialists and other child and youth health providers, the CPS strongly supports the focus of this review on the impacts of the *Cannabis Act* on public health, and on the health and consumption habits of youth in particular.

Given the serious risks to health and development associated with cannabis use for those under the age of 25, it is essential that the regulation, control and response to legalized cannabis products prioritize the safety and well-being of children and youth. We are therefore pleased to offer the following recommendations to help inform this legislative review.

## Discussion Areas

### A. Minimizing harms to protect Canadians

The CPS strongly supports the emphasis on protecting children and youth from harms associated with cannabis use identified within this legislative review. While the discussion paper reflects this fundamental priority well, the *Cannabis Act* itself does not adequately reflect the needs of children and youth, or the special considerations their health and safety demands.

In fact, there is no mention of children anywhere in the *Act* itself. While protecting the health of young persons (defined as those between the ages of 12 and 18) by restricting their access to cannabis and their inducement to use cannabis are identified as primary purposes of the *Act*, the implications of the *Cannabis Act* on those under the age of 12 is largely missing.

When legalized cannabis became available for Canadian adults, the Canadian Paediatric Surveillance Program (CPSP), a joint initiative of the Canadian Paediatric Society and the Public Health Agency of Canada, launched a study to monitor the number Canadian children and youth seeking medical attention for serious and life-threatening events due to recreational cannabis use and accidental ingestion. Designed to provide data to assess the health impacts of cannabis legalization on the paediatric population, this study sought to determine minimum incidence rates and clinical presentations associated with children and youth presenting with serious and life-threatening events related to non-medical cannabis exposure.<sup>1</sup>

In 2021, 33 cases were reported that met the case definition of the CPSP study, with an additional 16 pending verification (excluding cases reported in Québec). The median age was 5.5 years, with 73% of cases being 12 years of age or younger. In comparison, 10 cases met the case definition from September-December 2018, growing to 38 cases in 2019 and 50 cases in 2020.<sup>2</sup> The most common primary presentation was poisoning/intoxication (36%). In 83% of these poisoning/intoxication cases, children 12 years or younger had ingested edible cannabis – most frequently cannabis-infused

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<sup>1</sup> Canadian Paediatric Surveillance Program. Canadian Paediatric Society. CPSP 2021 Results. Ottawa, 2022.

<sup>2</sup> Ibid.

gummies.<sup>3</sup> As such, targeted efforts to minimize the risk of unintentional ingestion for infants and young children should be a much stronger focus of the *Act* and its implementation.

Other case presentations reported through the CPSP included neurologic problems such as seizures and altered level of consciousness (33%) and cannabis use disorder (21%). Cases from intentional exposure were exclusively among youth aged 13 years or older, 89% of whom had inhaled cannabis by smoking or vaping.

Cannabis vaping has become increasingly prevalent in Canada in recent years.<sup>4</sup> In 2018, 26% of adolescents and young adults who are cannabis users reported utilizing cannabis vape pens – up from 20% only the year before.<sup>5</sup> Despite legislation and regulation against cannabis products that are appealing to youth, youth-friendly designs, flavours, packaging and marketing remain, and have contributed to cannabis vaping becoming one of the most popular modes of cannabis consumption among youth.<sup>6</sup>

Cannabis vaping liquids commonly have added flavouring agents and usually have higher concentrations of THC than traditional dried cannabis.<sup>7</sup> The CPS strongly recommends a ban on all flavoured cannabis products and increased enforcement of THC limits on cannabis products. Youth use of inhaled cannabis extracts poses a significant risk to health and safety, including the unique health consequences associated with inhaling cannabis oil and e-liquids. Nicotine and cannabis vaping are related and often overlapping paediatric problems – the long-term effects of which require robust and dedicated research and public health monitoring.

## **B. Education and awareness to support informed choices**

The use of high potency cannabis products by youth, and the low perceived risks associated with these products is of significant concern. High-potency products have a disproportionate impact on the health and development of youth. Risks for cannabis use problems and anxiety disorders are higher among those reporting use of high-potency cannabis.<sup>8</sup> Public health messaging focused on increasing awareness about the importance of reducing both frequency of cannabis use and potency, as well as strengthened and enforced regulations limiting the availability of high-potency cannabis would be beneficial to support informed choices and mitigate risk.

Data from the 2021 Québec Cannabis Survey indicates that the number of cannabis users in Québec aged 15-17 and 18-20 has remained largely stable between 2018-2021, hovering at approximately 20 and 35 percent respectively. In contrast, the percentage of those aged 21-24 who report having used

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<sup>3</sup> Canadian Paediatric Surveillance Program. Canadian Paediatric Society. CPSP 2021 Results. Ottawa, 2022.

<sup>4</sup> Lim CCW, Sun T, Leung J, et al. Prevalence of Adolescent Cannabis Vaping: A Systematic Review and Meta-analysis of US and Canadian Studies. *JAMA Pediatr.* 2022;176(1):42–51. doi:10.1001/jamapediatrics.2021.4102

<sup>5</sup> Chadi N, Minato C, Stanwick R. Cannabis vaping: Understanding the health risks of a rapidly emerging trend. *Paediat Child Health* 2020;25(Suppl 1):S16–S20.

<sup>6</sup> Ibid.

<sup>7</sup> Breitbarth AK, Morgan J, Jones AL. E-cigarettes – An unintended illicit drug delivery system. *Drug Alcohol Depend* 2018;192:98-111.

<sup>8</sup> Hines LA, Freeman TP, Gage SH, et al. Association of High-Potency Cannabis Use with Mental Health and Substance Use in Adolescence. *JAMA Psychiatry.* 2020;77(10):1044-1051.

cannabis in the past year increased from 39 to 43 percent from 2018 to 2021.<sup>9</sup> There is reason to believe that the significant public education efforts geared towards those aged 12-17 immediately before and after legalization had a positive impact. A renewed public health and education campaign geared towards increasing awareness about the negative consequences of cannabis use for all those under the age of 25 is therefore recommended.

Scaled up investment in youth-friendly, accessible, informative, and culturally appropriate public education about cannabis use by youth, and the increased risks associated with high-potency cannabis is needed. Recognizing the disparities in the regulation of cannabis products across jurisdictions, a national task force or working group to share knowledge and coordinate measures across provinces and territories would be another concrete step towards improving the effectiveness of efforts to protect the health of young persons.

Similarly, robust long-term and comprehensive monitoring and evaluation to track and respond to trends in cannabis use by those under the age of 25 must be supported. Such data – particularly when it is disaggregated by age range – helps to ensure that policy, practice, regulation, and legislation is evidence-based, timely, and able to effectively reduce risks to health and safety.

### **C. Protecting public safety**

Since legalization of cannabis edibles in Canada, there has been an increase in the number of children hospitalized or presenting to emergency departments with cannabis poisoning. A study of changes in the rate of hospitalizations for unintentional cannabis poisoning in children 0-9 years of age across Ontario, British Columbia and Alberta saw a 7.5x increase in the rate of hospitalizations in January 2020-September 2021 as compared to the rate in January 2015-September 2018.<sup>10</sup> Even at the beginning of the pandemic when total poisoning-related paediatric emergency department visits decreased, paediatric emergency departments visits due to cannabis exposures increased.<sup>11</sup>

The findings of multiple studies suggest that the introduction of legal commercial edible cannabis products was a key factor associated with the frequency and severity of paediatric cannabis exposures and emergency department visits. There is a serious need to expand and strengthen efforts to better protect infants and young children from the risks associated with the unintentional ingestion of cannabis edibles. Alongside scaled up enforcement mechanisms, more and varied public education initiatives are needed to increase awareness among adult cannabis users of the importance of safe storage and child-resistant packaging, and the risks associated with keeping products that may be appealing to youth in a place where children live or play.

To protect public safety, it is important to also address the risk cannabis vaping products pose to the health and development of adolescents and youth. Among secondary students in Ontario, the most

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<sup>9</sup> Gouvernement du Québec, Institut de la statistique du Québec. Enquête québécoise sur le cannabis 2021. Québec, 2022.

<sup>10</sup> Myran DT, Tanuseputro P, Auger N et al. Edible Cannabis Legalization and Unintentional Poisonings in Children. *N Engl J Med.* 2022 Aug 25;387(8):757-759.

<sup>11</sup> Myran DT, Cantor N, Finkelstein Y et al. Unintentional Pediatric Cannabis Exposures After Legalization of Recreational Cannabis in Canada. *JAMA Netw Open.* 2022;5(1): e2142521.

common ways of using cannabis are to use a vaping device (17%), to smoke it in a pipe/bong (17%), or to eat it in a food product such as brownies or candy (15%).<sup>12</sup>

While current legislation specifically prohibits the promotion, display, packaging and appearance of cannabis products that may be appealing to or associated with young persons, products that clearly violate these principles remain widely available. There is a great need for increased security and safety measures surrounding online sales where access to cannabis products remains extremely easy for those under the age of majority. Stricter age verification measures on legal websites and enforcement mechanisms to shut down and meaningfully penalize illegal online suppliers are needed.

Increased collaboration between jurisdictions around cannabis retail policies would also be beneficial. Approaches can vary meaningfully between provinces and territories, particularly when it comes to the regulation of cannabis vaping products and edible cannabis products. Efforts should be made to share knowledge and apply lessons learned in each region to strengthen regulations and protect the health and safety of children and youth.

#### **D. Access to cannabis for medical purposes**

Based on the current state of the existing literature, indications for medical cannabis use among children and adolescents are extremely limited. Potential benefits, risks, and side effects specific to those under the age of 25 should be carefully considered. There is a need for more research to further evidence-based knowledge on the uses and applications of medical cannabis among youth, and efforts should be made to increase public awareness around the different indications for medical cannabis use among adults as compared to children and youth.

In 2021, 1 in 7 secondary school students in Ontario reported using cannabis to cope with a mental health problem at least once in the past year.<sup>13</sup> A 2017 study by the Canadian Centre on Substance Abuse on the perceptions of Canadian youth on cannabis found that youth classified cannabis as the “safest” of all substances to use, with a number of youth considering cannabis use as a much “healthier” method for addressing medical issues than prescription drugs.<sup>14</sup> Many youth also said they used cannabis to escape reality or a negative situation, to improve concentration and focus, to boost happiness, outgoingness and positivity, or to increase appetite or stimulate hunger.<sup>15</sup>

The degree to which youth report self-managing medical issues through cannabis use, the extent to which self-medication can lead to recreational use, and the prevalence of misconceptions around the risks and benefits of cannabis use for adolescents are all areas of concern.

The use of cannabis to self-manage mental health issues also speaks to the growing mental health care access gap in Canada. Children and adolescents face unique barriers to accessing quality, appropriate, accessible, and affordable mental health care. Even before the pandemic, children and youth often faced long wait lists and limited access to quality mental health care. Fragmented services and supports

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<sup>12</sup> Boak, A., Elton-Marshall, T., & Hamilton, H. A. Centre for Addiction and Mental Health. The well-being of Ontario students: Findings from the 2021 Ontario Student Drug Use and Health Survey, 2022.

<sup>13</sup> Ibid.

<sup>14</sup> McKiernan, A., & Fleming, K. Canadian Centre on Substance Abuse. Canadian Youth Perceptions on Cannabis, 2017.

<sup>15</sup> Ibid.

and inequitable access are common problems that have left many young people languishing for years with little improvement to well-being. The direct and indirect effects of the pandemic have significantly eroded the mental health and wellness of many Canadians with specific and unique impacts on children and youth. Children's hospitals across the country are reporting increased – and in some cases unprecedented – numbers of youth presenting with anxiety, depression, suicidal thoughts, substance misuse and eating disorders.<sup>16</sup>

To ensure children and youth can receive quality mental health care and access evidence-based treatments, a full array of publicly funded mental health programs, services and supports is needed. Strengthening Canada's mental health care system and addressing persistent and discriminatory gaps in access will help young people recover from the impacts of the pandemic and support the health and development of future generations.

## E. Final Word

Any SGBA+ analysis of the impacts of legalization of cannabis should include a reflection on the higher rates of cannabis use among LGBTQ+ youth in comparison to their heterosexual, cis-gendered peers. There is also a need for further study on the bidirectional relationships between cannabis use and depression and anxiety symptoms, which studies have shown to be of a substantially larger positive association for LGBTQ+ youth.<sup>17</sup> This may represent self-medication efforts linked to the effects of discrimination and the social determinants of health,<sup>18</sup> and further underlines the need to fund and support safe spaces for all children and youth to be able to access quality, affordable, appropriate, and evidence-based mental health services.

Clinical resources to address the intersectionality between substance use and concurrent mental health concerns, specifically among LGBTQ+ youth are needed, as are preventative and education resources specifically geared towards and informed by the voices of LGBTQ+ youth to help reduce the harms associated with cannabis use in this population.

## Additional Resources

In addition to the references throughout, the following recently published resources may be helpful to strengthen the review and implementation of the *Cannabis Act*:

- Brubacher JR, Chan H, Staples JA. Cannabis-impaired driving and Canadian youth. *Paediatr Child Health*. 2020 June 15;25(Supplement 1):S21-S25. doi: <https://doi.org/10.1093/pch/pxaa017>.

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<sup>16</sup> Children First Canada. Kids are in Crisis – Canada's Top Advocates and Experts Unite to Declare #codePINK, May 2021: <https://childrenfirstcanada.org/code-pink/kids-are-in-crisis-canadas-top-advocates-and-experts-unite-to-declare-codepink/> (Accessed November 8, 2022).

<sup>17</sup> London-Nadeau K, Rioux C, Parent S et al. Longitudinal associations of cannabis, depression, and anxiety in heterosexual and LGB adolescents. *Journal of Abnormal Psychology*. 2021 May;130(4):333-345.

<sup>18</sup> Canadian Mental Health Association. Lesbian, Gay, Bisexual, Trans & Queer identified people and Mental Health, 2022: <https://ontario.cmha.ca/documents/lesbian-gay-bisexual-trans-queer-identified-people-and-mental-health/> (Accessed November 15, 2022).

- Buttazzoni A, Tariq U, Thompson-Haile A, et al. Adolescent Gender Identity, Sexual Orientation, and Cannabis Use: Potential Mediations by Internalizing Disorder Risk. *Health Education & Behavior*. 2021;48(1):82-92. doi:10.1177/1090198120965509.
- Cameron C, Finkelstein Y, Leslie K. The impact of cannabis use—a tertiary care paediatric hospital’s experience and approach. *Paediatr Child Health*. 2020 June 15;25(Supplement 1):S10-S13. doi: <https://doi.org/10.1093/pch/pxaa040>.
- Coret A, Rowan-Legg A. Unintentional cannabis exposures in children pre- and post-legalization: A retrospective review from a Canadian paediatric hospital. *Paediatr Child Health*. 2022 June 22;27(5):265-271. doi: 10.1093/pch/pxab090.
- Graves L. Cannabis and breastfeeding. *Paediatr Child Health*. 2020 June 15;25(Supplement 1):S26-S28. doi: <https://doi.org/10.1093/pch/pxaa037>.
- Rieder M. Authorizing medical cannabis for children. *Paediatr Child Health*. 2020 June 15;25(Supplement 1):S14-S15. doi: <https://doi.org/10.1093/pch/pxaa024>.
- Saran SK, Salinas KZ, Foulds J, et al. A Comparison of Vaping Behavior, Perceptions, and Dependence among Individuals Who Vape Nicotine, Cannabis, or Both. *Int J Environ Res Public Health*. 2022 Aug 20;19(16):10392. doi: 10.3390/ijerph191610392.
- Vargas G, Shrier LA, Chadi N, Harris SK. High-potency cannabis use in adolescence. *The Journal of Pediatrics*. 2022 Aug 14. doi: <https://doi.org/10.1016/j.jpeds.2022.07.034>.

## About the CPS

The Canadian Paediatric Society is the national association of paediatricians, committed to working together to advance the health of children and youth by nurturing excellence in health care, advocacy, education, research, and support of its membership. Founded in 1922, the CPS is a voluntary professional association that represents more than 3,600 paediatricians, paediatric subspecialists, paediatric residents, and others who work with and care for children and youth.