

Medical Cannabis Access and Experiences in Canada

Medical Cannabis Access Survey - Executive Summary

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Developed collaboratively by



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EXECUTIVE SUMMARY

Medical cannabis access is a complex issue in Canada and has been the subject of extensive debate as well as long-term regulatory and legislative review. Individual access has been protected by numerous constitutional rulings dating back to the late 1990s. In October 2018, the Cannabis Act and Cannabis Regulations came into effect, legalizing the use of non-medical cannabis in Canada as well as updating regulations pertinent to the access to, and use of, medical cannabis. As part of the legalization of non-medical cannabis, the federal government committed to conducting a review of the Cannabis Act within five years. This was to include a review of the medical cannabis framework in Canada.

To help inform this review, the Medical Cannabis Access Survey (MCAS) was launched to provide an opportunity for individuals with lived experience of taking medical cannabis to share their experiences, challenges, and suggestions regarding future improvements to the medical cannabis framework in Canada.

Eligible individuals included Canadian residents aged 16 years and older, who were currently, previously or considering taking cannabis for medical purposes. The online survey was available between March and July 2022. The survey asked about their current medical cannabis use, purpose and reasons for taking medical cannabis, their authorization and access experiences, insurance coverage and costs associated with medical cannabis, and changes experienced since legalization of non-medical cannabis in 2018.

In the Fall of 2022, it was announced that an independent expert panel had been appointed to review and provide recommendations on the Cannabis Act, including the impact of non-medical cannabis legalization on access to cannabis for medical purposes.

FINDINGS

The majority of individuals who took part in the survey were current medical cannabis consumers, with just over half holding medical authorization.

- A total of 5,744 individuals from across Canada completed the survey. Overall, 5,433 individuals (95%) reported currently taking medical cannabis and 54% of these individuals held current medical authorization.

Most of the individuals had a lengthy history of taking medical cannabis and reported taking it every day for such health conditions as chronic pain, anxiety, and sleep issues. They took a variety of cannabis products, with dried flower and oil being the most frequently reported. Estimating how much medical cannabis product they consumed on average each day, including the amount of tetrahydrocannabinol (THC) and cannabidiol (CBD), was difficult for most individuals to report.

Almost **1 in 3** individuals reported taking medical cannabis for over 10 years



Individuals perceived medical cannabis to be moderately to highly effective for many health conditions and symptoms and half of all current consumers reported taking cannabis to reduce their use of other medications. Although three quarters of individuals who took medical cannabis reported experiencing a side effect, the ones most frequently mentioned were mild, including dry mouth, a cough, or feeling tired.

- 83% of individuals reported taking medical cannabis at least once a day and 52% reported taking cannabis for more than 5 years.
- The three most common symptoms or health conditions medical cannabis was taken for were chronic pain (67%), anxiety (64%) and sleep issues (62%).
- On average, medical cannabis consumers reported taking 3 different types of cannabis products. The most reported product taken by individuals with current authorization was cannabis oil (68%). In contrast, dried flower was the most frequently reported among individuals without current medical authorization (79%).
- Individuals struggled to report the amount of cannabis they took. However, those with current medical authorization were more likely to be able to report the amount and dose of cannabis they took each day (32%) versus individuals without authorization (18%).
- Perceived efficacy was rated very to extremely effective on average for managing appetite, nausea/vomiting, agitation, epilepsy/seizures and sleep issues.
- Individuals currently taking cannabis reported they take medical cannabis to reduce to their use of other medications (50%) of which, 45% of these individuals shared it reduces their use of opioids.
- Most individuals taking medical cannabis reported experiencing unwanted side effects (73%); however, the most common side effects reported were relatively mild and included dry mouth (45%), cough (29%), and feeling tired (21%). Those with current medical authorization were more likely to report no side effects compared to those without authorization (30% vs. 23%)

Nearly **1 in 2** individuals report taking medical cannabis to reduce the use of other medications



Individuals with medical authorization were more likely to be able to report the amount of medical cannabis they take



Individuals with medical authorization were **less likely to report side effects** from taking medical cannabis



Medical cannabis consumers obtained their cannabis from numerous sources. More than half of individuals with authorization indicated accessing medical cannabis at a legal recreational store, where it is prohibited to provide medical advice about cannabis. Individuals who sought medical cannabis from multiple sources shared that they experienced more difficulties in finding the products they required.

- Amongst individuals with current medical authorization, 78% purchased their medical cannabis from a federally licensed seller, however, 50% also reported obtaining medical cannabis from a recreational source (i.e., online store, in-person store).
- Compared to individuals sourcing medical cannabis products solely from licensed sellers, those that sought medical cannabis through multiple sources reported experiencing difficulties, including finding the products they required.
- Over half of individuals (52%) without medical authorization got cannabis from unregulated sources whereas this was less common among individuals with authorization (26%).
- Overall, individuals that held medical authorization were more likely to obtain medical cannabis from legal, regulated sources than individuals without medical authorization.

2 in 3 individuals obtain medical cannabis from a recreational store

An icon depicting three stylized human figures (one white, two blue) on the left and a storefront on the right. The storefront has a blue awning and a sign that reads "CANNABIS SHOP" with a cannabis leaf symbol above the text.

Individuals who held medical authorization were more likely to be older, identify as being a man, and have a higher income and education than individuals without authorization.

- Numerous demographic factors were associated with holding current medical authorization, including identifying as a man, being over the age of 30, having a higher yearly household income, and having higher than high school education.

Individuals with past authorization no longer saw the need for authorization because they could easily purchase cannabis from recreational stores and perceived licensed sellers to be too expensive.

- For those individuals without a current authorization but had one in the past (n = 760), the most common reasons for no longer seeking authorization were the perception that there was no need due to the recreational market (68%) and that it was too expensive to purchase cannabis from licensed sellers (48%).

2 in 3 individuals with past authorization said there is no need for authorization due to the recreational market

An icon depicting three stylized human figures (one white, two blue) on the left and a storefront on the right. The storefront has a blue awning and a sign that reads "CANNABIS SHOP" with a cannabis leaf symbol above the text.

Nearly half of individuals with past authorization said that they did not seek authorization again because licensed sellers were more expensive

An icon depicting a blue money bag with a white dollar sign (\$) on the left and a blue laptop on the right.

Individuals who sought medical authorization but were unsuccessful wanted authorization in case of interaction with law enforcement, to obtain compassionate pricing through licensed sellers, and to avoid stigma. Healthcare professionals' lack of knowledge and unwillingness to talk about medical cannabis were cited as reasons for why individuals were denied obtaining medical authorization.

- For the 470 individuals who tried to get authorization but were not successful, the reasons they provided for seeking authorization were in case of interaction with law enforcement (54%), compassionate pricing from a licensed seller (51%), access to a licensed seller (37%), and avoid stigma (37%).
- The reasons individuals reported their request being denied were centered on their healthcare professionals' lack of knowledge about medical cannabis (50%), unwillingness to talk about medical cannabis (36%), and concerns about limited medical cannabis research (34%).

1 in 2 individuals who tried to get authorization but were unsuccessful said they were unsuccessful because their healthcare professional lacked knowledge about medical cannabis



Individuals with medical authorization were **20% more likely** to receive or seek information from healthcare professionals than those without authorization



Individuals who took medical cannabis received information from a variety of sources, however, those without medical authorization reported being less likely to obtain or seek information from healthcare professionals and more likely to use online information sources.



Very few individuals reported having any coverage for medical cannabis-related expenses. Those with medical authorization, as well as having a lower household income, reported paying more for medical cannabis. The removal of taxes was identified by many as an important way of reducing the cost of medical cannabis, making it easier to access, and reducing the use of unregulated sources. Individuals who stopped taking medical cannabis cited cost as the most common reason.

Only 6% of individuals with medical authorization received any coverage for costs



- Despite over half of individuals with current medical authorization having some form of private health insurance, only 6% reported being successful in receiving reimbursement for medical cannabis-related expenses.
- The median out-of-pocket cost of medical cannabis was \$125 per month, with 39% of participants reporting spending more than \$200 per month.
- Participants with medical authorization reported spending more on medical cannabis-related costs than those without medical authorization. Individuals who made less than \$35,000 per year reported spending about \$50 a month more on medical cannabis than participants reporting a higher income.
- Participants who held medical authorization shared that removing taxes would reduce the cost of medical cannabis (64%), make it easier to access (57%), and reduce the use of unregulated sources (35%).
- Among individuals who had a past history of taking medical cannabis (n=204), the most reported reason for why they stopped taking medical cannabis was that it was too expensive (48%).

Individuals with medical authorization reported spending 25% more on medical cannabis costs than those without authorization



As described, key differences were found between individuals with medical authorization versus those without authorization that suggest authorization may lead to individuals who are better informed and knowledgeable about medical cannabis, are obtaining medical cannabis through the intended legal, regulatory sources, and are experiencing less adverse effects. However, those with authorization end up paying more for medical cannabis, with little coverage through public and private insurance.

Individuals with low income (<\$35,000/year) reported spending more on medical cannabis per month than those with higher income



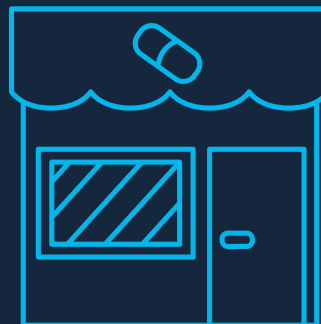
Overall, the majority of individuals in this study supported the continuation of the medical cannabis program in Canada. Individuals reported that being able to claim medical cannabis-related expenses on tax forms, receiving compassionate pricing from licensed sellers, and being allowed higher possession limits were important aspects of the medical cannabis program.

- Nearly 57% of individuals with medical authorization agreed that there was a need to retain the medical cannabis program as separate from the recreational cannabis market. Policies exclusive to the medical cannabis framework that were most relevant to these individuals included being able to claim medical cannabis on federal tax forms (47%), receiving compassionate pricing (36%), and possession limits (29%).

Individuals identified numerous improvements that can be made to the medical cannabis program in Canada, including reduction of costs by eliminating applicable taxes, introduction of access via community-based pharmacies, protections for use in public and private spaces, review of THC limits for edible products for therapeutic use, and an increased focus on medical cannabis research and education.

Participants with medical authorization shared they wanted to get their cannabis *in-person* such as at community pharmacies

"Why can't I go to the pharmacy to get my medical cannabis?"



Based on the findings of this study, six key recommendations are proposed for consideration as part of the federal review of the Cannabis Act and Regulations and to inform future medical cannabis policy and programming in Canada.

RECOMMENDATIONS

1. Design, implement, and maintain a formalized evaluation of the medical cannabis framework in consultation with patients and key experts
2. Maintain reasonable access to cannabis through a dedicated medical framework embedded within the Cannabis Regulations
3. Implement changes to cannabis regulations, tax policy, and insurance formularies to reduce out-of-pocket costs associated with medical cannabis and re-direct use away from the unregulated market
4. Develop, implement, and evaluate healthcare professional education training focused on medical cannabis across the multidisciplinary healthcare team
5. Expand reasonable access to medical cannabis by adding community pharmacy dispensing
6. Maintain and amplify a federal resource hub that provides updated, evidence-based information and resources about medical cannabis

