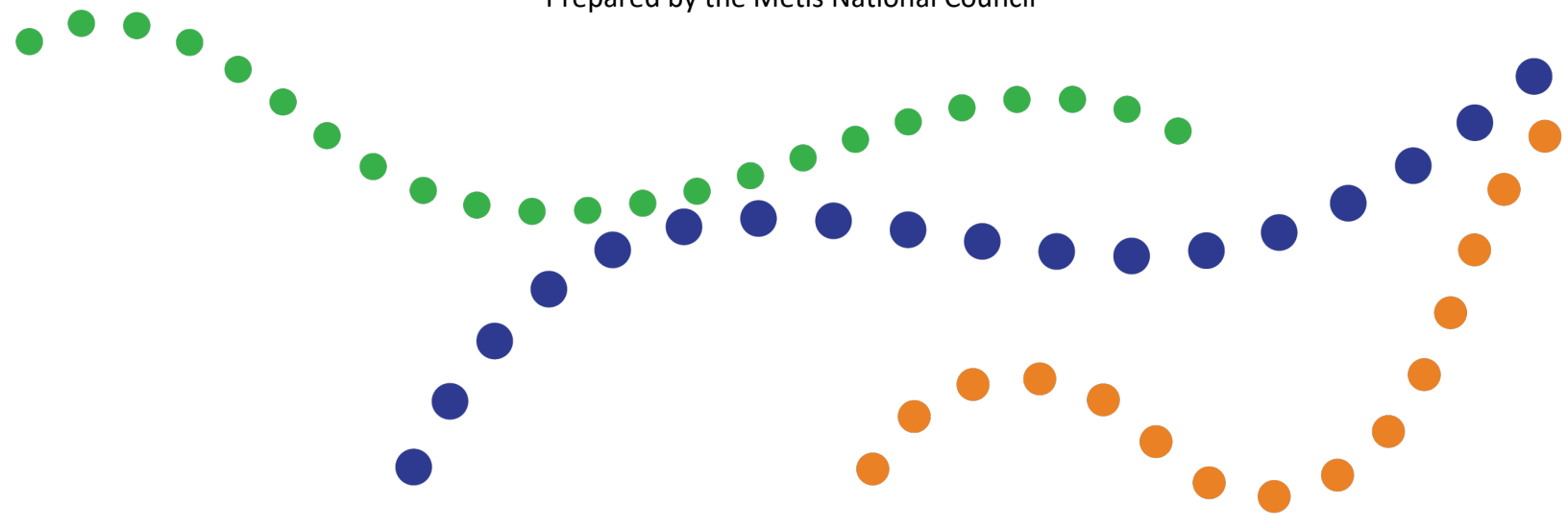




Cannabis and the Métis Nation: Impacts, Perspectives, and Recommendations for Action

Prepared by the Métis National Council





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i. Executive Summary

Cannabis, though used by many Indigenous peoples for generations, was first legalized in Canada in October 2018 under the Cannabis Act. To contribute to the Cannabis Act's legislative review, the Métis National Council brought together representatives of Métis governments, communities, and organizations, as well as partners from the federal government and other organizations. Participants gathered in four small group discussions, which were summarized and shared with the whole group to capture perspectives of the Métis Nation.

PUBLIC HEALTH, INCLUDING MENTAL WELLNESS AND SUBSTANCE USE

Currently there is very little known about the impact of cannabis legalization on the Métis Nation, including the impacts specifically on Métis youth, elders, LGBTQ2S+ Métis, and pregnant Métis. There is some data that shows there may be higher rates of use of cannabis among Métis, but much of it is either pre-legalization, focused on one geographic area, or not disaggregated by gender or Nation (i.e., pan-Indigenous). Without clearer data that is collected using methods consistent with Métis ways of doing research, as directed by Métis communities and governments based on their needs and priorities, it is difficult to say with certainty what the needs of the Métis Nation are, regarding harm reduction. Some programs and initiatives have been established, for example the Métis Nation of Ontario Community Based Intensive Addictions Program, but these are often funded with short-term funding opportunities, threatening their longevity and sustainability. Long-term, flexible, and sustainable funding is needed to pursue research on trends, needs, and priorities of Métis communities related to cannabis, and to develop, implement, and evaluate harm reduction programming based on the results of the research.

EDUCATION AND RESEARCH

Of the educational initiatives related to cannabis that exist, there are few that are relevant to the Métis community, and, to the knowledge of workshop participants, there have been none that have been developed by the Nation. In order to ensure that Métis citizens,



families, and communities are equipped with factual and culturally relevant knowledge, it is imperative for Métis governments to be provided with long-term, flexible funding that enables them to develop their own educational initiatives that are tailored to the unique contexts and needs of Métis communities.

Research on cannabis use trends in the Métis Nation must be conducted in ways that are consistent with Métis ways of doing research in order to accurately understand the patterns of use in communities, and the factors that influence these patterns of use. In particular, it is important to understand protective factors in Métis youth, such as connection to culture and opportunity for intergenerational relationship building, that can serve to prevent cannabis use during ages of crucial brain development.

ECONOMIC DEVELOPMENT

The cannabis value chain represents an opportunity for Métis entrepreneurs and communities. However, Métis entrepreneurs can face additional obstacles when entering the cannabis industry, and are in need of supports specific to their context. This could include dedicated funding to support Métis business development, and educational initiatives and materials to help Métis business owners navigate the complex regulations related to cannabis production and retail. The Métis Nation requires equitable, adequate, sustainable, and flexible funding.

GOVERNANCE AND JURISDICTION

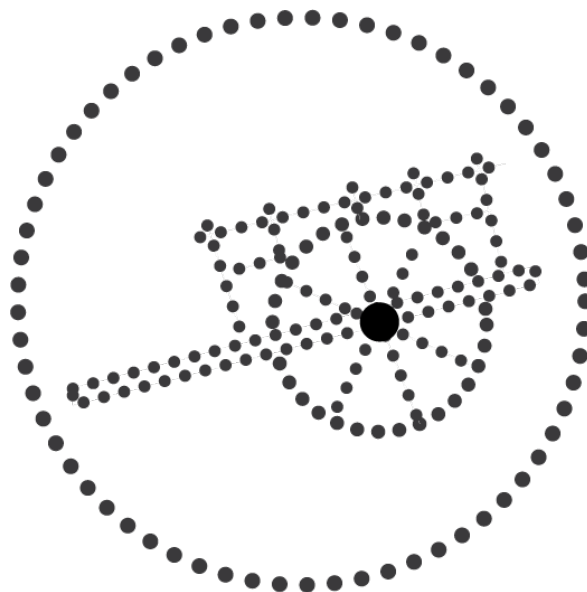
Cannabis legalization was done largely without the input of the Métis Nation, and consequently Métis governments and communities do not have clear mechanisms to assert their authority in governing cannabis within their relevant jurisdictions. Collaborative work respecting nation-to-nation relationships is required to address this issue.

The goal of the Métis Nation is to have respectful nation-to-nation relationships as equal partners, whereby funding is negotiated through an agreement and direct fiscal transfers, rather than ‘hand-outs’ based on Canada’s priorities, submitting proposals annually on a program-by-program basis. However, to this point there has been inadequate consultation on cannabis legalization with the Métis Nation, and as a result the perspective of the Métis has been excluded from the resulting frameworks. Moving forward, consideration has to be given to ensure the meaningful participation of the Métis Nation in governance issues related to cannabis, which requires providing adequate funding to support this consultation, and working on timelines that acknowledge the complexity of the process and the time it takes to do consultation well.



Based on the perspectives shared by participants, several recommendations were developed. Taking action on these recommendations will enable the Métis Nation and its partners to enhance and improve the health of the Métis Nation.

It should be noted that the information and perspectives shared in this report are not set in stone and are subject to change over time, with the acquisition of new knowledge and understanding. This report seeks to inform the Cannabis Act's Legislative Review's Expert Panel about what is known about the impact of cannabis legalization on the Métis Nation from the conversations that have occurred so far but may be subject to change following future dialogues.





ii. Acknowledgements

This position paper was developed based on the perspectives shared by participants of the Métis National Council's Mental Health and Cannabis Workshop held in Vancouver, BC in May 16 & 17, 2023. It would not have been possible without their time and contributions. We are grateful for those participants, who included Métis Citizens Métis citizens, elders, veterans, youth, The Métis National Council and the government Members leadership and staff and those from partnering organizations including Health Canada, Mental Health Commission of Canada, the Canadian Centre on Substance Use and Addictions, and others for their participation in, and contribution to, our engagement sessions.

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iii. Table of Contents

- i. Executive Summary
 - Public Health, Including Mental Wellness and Substance Use
 - Education and Research
 - Economic Development
 - Governance and Jurisdiction
- ii. Acknowledgements
- iii. Table of Contents
 - 1.0 Introduction
 - 1.1 The Cannabis Act
 - 1.2 MNC Mental Health and Cannabis Workshop
 - 2.0 Cannabis and the Métis Nation
 - 3.0 MNC Mental Health and Cannabis Workshop Themes
 - 3.1 Cannabis Research and Métis Communities
 - 3.1.1 Existing Research
 - 3.1.2 Research Gaps
 - 3.2 Cannabis Education and Métis Communities
 - 3.2.1 Cannabis Education for Métis Communities
 - 3.2.2 Education on the Métis Nation
 - 3.3 Métis Perspectives on Cannabis Regulation
 - 3.3.1 Consultation
 - 3.3.2 Current Regulations
 - 3.4 Actioning a Métis Vision for Health
 - 3.4.1 Métis Social Determinants of Health
 - 3.4.2 Métis Public Health Approaches to Cannabis
 - 3.5 Métis Youth and Cannabis
 - 3.6 A Path Forward
 - 3.6.1 Doing Research in a Good Way
 - 3.6.2 Opportunities for Reciprocal Education
 - 3.6.3 Harm Reduction Programming
 - 3.6.4 Multi-sectoral Action and Collaboration
 - 4.0 Recommendations and Rationale



4.1 Recommendations

4.1.1 Recommendations to the Federal Government

4.1.2 Recommendations specific to youth:

4.1.3 General recommendations:

4.2 Rationale

4.2.1 Need for Research

4.2.2 Need for Economic Development

4.2.3 Need for Education

4.2.4 Creating Meaningful Partnerships

4.2.5 Meaningful Consultation

4.2.6 The Need for Youth Involvement

5.0 Conclusion

6.0 References

7.0 Appendices

7.1 List of attendees

7.2 List of presentations

7.3 Workshop Breakout Group Questions and Summary of Responses

7.4 The State of Métis Knowledge on Cannabis and Mental Health in Canada Report

7.5 Métis Vision of Health Report



1.0 Introduction

The cannabis plant has long been used by Indigenous peoples, including as food, medicine, and ceremony, among other uses (1). Despite this long history of use, there is very little formal evidence about the use and perceptions of cannabis in Métis communities. The small amount of evidence that does exist has suggested that there are higher rates of cannabis use among the Métis and that the age of first use may be lower in Métis youth compared to non-Métis youth (2). This indicates that there may be a need for public health intervention aimed at preventing and reducing cannabis misuse in Métis communities.

The Métis National Council (MNC) and its governing members work to advance the rights, needs, and interests of Métis citizens across the homeland, working collectively with other organizations like Les Femmes Michif Otipemisiwak (LMFO; Women of the Métis Nation). This work includes taking action on the health priorities of the Nation, such as facilitating supports for those who use substances and ensuring the voice of the Métis is heard at federal tables.

The United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) is a comprehensive document that outlines the individual and collective rights of Indigenous peoples worldwide. Implementing UNDRIP, as the federal government has committed to doing (3), requires that all federal policies, programs, laws, and regulations are consistent with UNDRIP and support the prosperity and well-being of Métis. It is important to note that the specific application and interpretation of UNDRIP may vary across Métis governments and jurisdictions. The connection between UNDRIP and cannabis legalization lies in the broader principles of self-determination, free, prior, and informed consent, protection of culture, and land and resource rights, which can guide the engagement collaboration and building meaningful partnerships between Federal and provincial governments and Métis communities, in the context of cannabis policies and regulations.

UNDRIP also emphasizes the importance of obtaining proper and respectful consultations of Indigenous people before adopting and implementing laws, policies, or projects that may affect their lands, resources, or cultural practices. In the context of cannabis legalization, this principle implies that governments should engage in meaningful consultation and collaboration with Métis communities, to seek their input and consent regarding regulatory frameworks, licensing processes, and potential economic opportunities in the cannabis industry. It includes the Cannabis Act legislative review.



UNDRIP highlights the rights of Indigenous peoples to maintain, protect, and develop their cultural traditions, practices, and institutions. Cannabis holds cultural significance for many Indigenous communities, and they may have traditional practices or medicinal uses associated with it. Cannabis legalization should respect and protect the cultural rights and practices of Indigenous communities, including Metis communities, regarding cannabis use, cultivation, and trade.

UNDRIP recognizes the rights of Indigenous peoples to the lands, territories, and resources they traditionally own, occupy, or use. Cannabis cultivation and industry activities may take place on Indigenous lands, and it is crucial to ensure that the rights of Indigenous communities, including Metis communities, to their lands and resources are respected, protected, and upheld during the process of cannabis legalization and regulation.

It is important to note that the specific application and interpretation of UNDRIP may vary across Métis governments and jurisdictions. The connection between UNDRIP and cannabis legalization lies in the broader principles of self-determination, free, prior, and informed consent, protection of culture, and land and resource rights, which can guide the engagement collaboration and building meaningful partnerships between Federal and provincial governments and Metis communities, in the context of cannabis policies and regulations.

The Canada-Métis Nation Accord is an agreement signed by MNC and the governing members, Métis Nation British Columbia, Métis Nation of Alberta, Métis Nation-Saskatchewan, and Métis Nation of Ontario, and the government of Canada that sets out a permanent bilateral mechanism that guides collective work on policy priorities, development, and funding commitments. Under this accord, the relationship between Canada and Métis governments is defined as nation-to-nation and government-to-government relationships. This accord recognizes that the Métis have inherent rights to self-government and control over Métis health. The Métis Nation maintains its inherent right to self-determination, which includes the right to govern and make decisions concerning the well-being and health of its citizens.

There are several articles of UNDRIP that relate to the health of the Métis Nation. These include:

- Article 21
- Article 23
- Article 24

These articles speak to the inherent rights of the Métis to pursue improvement of economic and social conditions, determine, and develop priorities regarding development and health, and the inherent right to practice their culture, including traditional medicines, harvesting, and conservation.





1.1 THE CANNABIS ACT

The Cannabis Act (“the Act”), passed in 2018, legalized non-medical cannabis in Canada. The federal government has a set of minimum regulations regarding the production, sale, and possession of cannabis that must be implemented by provinces and territories, with the ability to enact stricter regulations at their discretion.

The Act aims to minimize the harm to public health and public safety of cannabis while removing the criminalization of it. The Act has four main objectives: restricting access, governance of the industry, promoting informed decision-making, and monitoring and evaluating the impact of legalization.

As part of the Act, it is required that a legislative review be started three years after enactment, and the report be presented in the Canadian parliament and senate within 18 months. This review must specifically address the impact of the Act on Indigenous peoples and communities. Following that, Health Canada has undertaken limited engagement with Métis governments and communities and has come up with a list of priorities related to cannabis use and the Métis Nation:

- Public health, rooted in Métis culture and history to promote health and wellness and to reduce the burden of illness.
- Additional public education funding and Métis-specific resources to minimize the harms associated with cannabis use in the Métis population.
- Federal funding for prevention, education and treatment supports, especially for Métis youth.
- Greater research in exploring the impacts of cannabis on public health in Métis populations.
- Cannabis and industrial hemp as opportunities for economic development.

1.2 MNC MENTAL HEALTH AND CANNABIS WORKSHOP

On May 16-17, 2023, MNC brought together representatives of Métis governments from Alberta, British Columbia, Saskatchewan, and Ontario, LMFO, and other participants from the federal government and partnering organizations in a workshop to discuss cannabis and mental health in the Métis Nation. Métis representatives comprised elected leaders, elders, women, youth, veterans, and staff. The list of attendees, both in-person and virtually, can be found in Appendix 1.



The objectives of the workshop were:

- Explore the Métis perspective about mental health and cannabis based on the Métis holistic approach rooted in culture and history to promote health and wellness, and to reduce the burden of illness.
- Understand Métis-specific health models and how cannabis and mental health and wellness are perceived in Métis communities.
- Identify potential research and knowledge exchange regarding how cannabis intersects and impacts mental health and wellness in the Métis context: past, present, and future of Métis research priorities and projects.
- Identify challenges, gaps, and opportunities to work in partnership with the Métis Nation.
- Explore culturally informed strategies and actions that can help to promote Métis health and wellness, participatory research, and increase Métis evidence about mental health and cannabis to reduce health disparity in Canada.
- Develop a Métis Nation position paper about the Cannabis Act's health impact and Métis citizens' perceptions. It will be submitted to the Expert panel in June.
- Contribute to the legislative review of the Cannabis Act on health.

The workshop took place over two days, with four sessions that included one or two presentations and the opportunity for small group discussions; groups would then reconvene as a whole group to share high-level overviews of the small group conversations. The list of presentations can be found in Appendix 2, and the questions provided to guide breakout group discussions can be found in Appendix 3.

2.0 Cannabis and the Métis Nation

The little that is known about cannabis use and its impacts in Métis communities is based on limited data that is pieced together from several different sources and thus does not provide a comprehensive picture of what Métis cannabis use looks like. The existing body of evidence is almost entirely composed of research that does not specifically look at the impacts on Métis communities, instead examining cannabis use using pan-Indigenous approaches.

The State of Métis Knowledge on Cannabis and Mental Health report, released in 2022 by MNC and partners from the Mental Health Commission of Canada and Canadian Centre on Substance Use and Addiction pulls together the available information on Métis cannabis use (2). Prior to legalization, the Aboriginal Peoples' Survey showed that 78% of Metis reported having never used cannabis, with similar trends in use as the non-Métis population with respect to age and gender - younger Métis tended to report using



cannabis more often, and males were more likely to report use than females (2). Based on 2021 data from Health Canada’s Canadian Cannabis Survey and 2017 data from Statistics Canada’s Indigenous Peoples’ Survey, it would appear that the rates of Métis who have used cannabis in the previous 12 months have risen proportionally with the general population, though it should be noted that this could be in part due to a reduction in the stigma associated with use as a result of legalization (2).

Of what is known about cannabis use among Métis youth, much comes from the 2018 BC Adolescent Health Survey (AHS). This survey, which sampled 38,000 school-aged adolescents in grades 9-12, showed that Métis youth report using cannabis at a much higher rate than non-Métis youth (42% vs. 25%, respectively), at the age of first use was younger among Métis youth (14 years old, vs. 15 years old among non-Métis youth) (2). The BC AHS was also unique in that it included a “non-binary” gender option for respondents, which showed that both Métis and non-Métis non-binary youth use cannabis at higher rates (1). The AHS also showed that rates of use were highest in the northwest region of the province, followed by the interior and coastal areas, with the lowest rate of use among urban Métis youth (2).

Despite the little published evidence available regarding cannabis and the Métis Nation, there is ample anecdotal evidence based on personal experiences and perspectives. Some of these stories were shared by participants during the MNC Mental Health and Cannabis Workshop, some of which were common amongst multiple participants. Generally, it was thought that:

- There are many different motivations for using cannabis, and perspectives on cannabis use are influenced by personal beliefs, cultural traditions, and experiences.
- Different groups, including women, youth, elders, veterans, gender-diverse, and lesbian, bisexual, gay, transgender, queer, and two-spirit (LGBTQ2S+) Métis, may all use cannabis in different ways for different reasons.
- Métis communities have a rich history of using traditional medicines such as cannabis for healing and well-being.
- Medicinal use of cannabis is common amongst Métis and provides substantial benefit, though not all medicinal use is at the direction of/supervised by a healthcare provider (i.e., there are Métis who use cannabis to self-treat medical conditions).
- Perspectives on the medicinal use of cannabis are varied; some believe it causes harm, while others may recognize its potential benefits in treating various ailments and conditions, including chronic pain, epilepsy, multiple sclerosis, and mental health issues.



- Youth are at particular risk of harm resulting from cannabis use and are in need of support.
- Cannabis has beneficial applications as a harm reduce or eliminate their use of more harmful substances such as opioids or amphetamines.
- Stigma contributes to harm for those who use cannabis in multiple ways.
- There is a need for Métis-specific research on cannabis use in Métis communities to inform policies and programming.

From the perspective of LFMO, Métis women in business are underrepresented within the Métis Nation business ownership and entrepreneurialism landscape. It was identified by LFMO that in the most recent data available from Indigenous Businesses in Canada, that there are only 1,922 businesses owned by Métis women which is only 23.9% of all Métis identified businesses in Canada. Opportunities for business development for Métis women entrepreneurs is further compounded by the limited consultation and engagement to foster opportunities to capitalize on possible investments within the commercial cannabis sector. LFMO also referenced a particular resource; the Indigenous Cannabis Business Fund (ICBF) being delivered through the New Relationship Trust in BC was developed in partnership with the BC Assembly of First Nations and network of BC Aboriginal Fund Institutions. First Nations approaches and strategies such as this example cannot be applied equitably to Métis entrepreneurs and not only creates further barriers and limitations but compounds them when supporting Métis business and economic development.

It's important to note that these are not the only perspectives and experiences shared by workshop participants, nor should they be assumed to be representative of all Métis citizens and communities, but rather are a select few high-level summaries of what was shared by the limited number of participants in the

Métis knowledge holders have shared that cannabis has historically been used medicinally, not recreationally. Though there is little formal evidence about traditional Métis uses of cannabis, generally Indigenous peoples have used two main medicinal applications of cannabis:

- To treat pain associated with conditions such as arthritis, by preparing salves and other topical applications
- To lessen symptoms associated with psychiatric disorders, in ceremony (2).

While it is known that there were traditional medicinal applications of cannabis, there is a need for a greater understanding of its use as a traditional medicine, requiring more thorough research and engagement with Métis communities and knowledge holders. Understanding the Métis ways of using cannabis medicinally is important to know, to be able to present alongside western understandings of cannabis as a medicine.





workshop. Without more longitudinal, cross-sectional, and distinctions-based research, it is difficult to measure the risks that cannabis use poses to Métis adults and youth specifically.

3.0 MNC Mental Health and Cannabis Workshop Themes

Based on the discussions of small groups during the Mental Health and Cannabis Workshop, several overarching themes emerged. These were: cannabis research, cannabis education, cannabis regulation, the impacts of cannabis on the health of the Métis, and the impacts to Métis youth.

3.1 CANNABIS RESEARCH AND MÉTIS COMMUNITIES

The unique culture, history, traditions, and identity of the Métis Nation require research approaches that recognize and affirm Métis ways of knowing and being; pan-Indigenous approaches are not appropriate and do not adequately reflect the perspectives of Métis citizens and communities. Distinctions-based approaches are imperative to conducting meaningful and accurate research regarding the Métis Nation.

3.1.1 Existing Research

The consensus among workshop participants (and of research itself) is that there is little information on cannabis use and the needs of communities related to cannabis among the Métis. There are several reasons for this, as reported by workshop participants, including a lack of capacity and funding and a question of whether this area is a priority to Métis citizens and communities. Participants also expressed doubts about the relevancy and applicability of the current body of evidence on cannabis to Métis communities, as it has not been done in a way that acknowledges the priorities, knowledge, and experiences of the Métis Nation.

The Métis Nation of British Columbia (MNBC) highlighted data collected through their community-based research study on “Métis Perspectives on Cannabis Use”. It was found in 2020-21 that 54.6% of respondents used cannabis within the past year in some form (4). As well 66.7% of survey participants felt that cannabis fit or was connected to culture in some way (4). This project was undertaken by MNBC to begin to fill the existing research gaps around cannabis use amongst the Métis community. Objectives included understanding the patterns of cannabis use, existing barriers to accessing therapeutical cannabis, and providing a stigma-free space to facilitate honest and open discussions with the Métis population within British Columbia. The findings and work associated with



this project are also being utilized to inform the development of a Métis Harm Reduction Framework in British Columbia. Work such as this is viewed as a starting point, capacity and funding is imperative for the work to continue in a good way that is led by the Métis.

Participants also expressed that without knowing and understanding the research priorities of communities, they were not certain whether the necessary data is being collected through routine health data collection by provincial and federal governments. Communities may have questions related to cannabis that are difficult to answer with the currently available data, which would thus require additional resources and capacity to answer those questions.

3.1.2 Research Gaps

Despite the lack of existing evidence, there were many potential areas for research identified by workshop participants. These include, but are not limited to:

- Patterns of use in Métis communities
- Perceptions of and motivations for using cannabis in Métis communities
- Medicinal applications of cannabis among Métis citizens
- How the intersections of identities, such as Métis women, LGBTQ2S+ Métis, Métis youth, veterans, and others, influence patterns and perceptions of, and motivations for the use of cannabis
- How social determinants of health, such as housing, connection to community and culture, intergenerational trauma, and others, contribute to cannabis use
- Environmental impacts of cannabis use in Métis communities, including the potential harms from second-hand cannabis smoke and the impact large-scale cannabis production and retail have on the environment
- Traditional uses of cannabis (similar to research on traditional uses of tobacco)

It is important to note that this list of potential research questions is not intended to be representative of all Métis communities and that workshop participants explicitly stated that research questions should be generated by communities who will have different needs and priorities.

3.2 CANNABIS EDUCATION AND MÉTIS COMMUNITIES

Workshop participants did not report being aware of what existed in terms of educational materials and programming related to cannabis but indicated that what does exist is not likely to be culturally relevant or safe for Métis citizens and communities, as Métis communities and/or governments did not develop them.



3.2.1 Cannabis Education for Métis Communities

Participants noted that the need for education in Métis communities, for Métis citizens, had several important aspects.

Most prominently, participants expressed the need for education for Métis youth to empower them to make informed choices related to cannabis. This includes education on mechanisms of cannabis use and the relative risks of harm of each, how to understand proper dosing and contents (e.g., cannabidiol and tetrahydrocannabinol) of different types of cannabis, and how to prevent and address overuse and abuses of cannabis. As well, education for youth must be relevant, accessible, and delivered in a judgment-free way. Education for youth could be delivered through many forums, such as specific web pages hosted on Métis governments' websites, through schools, or as community events. Participants also expressed the need for education for whole families, not just for youth or for parents.

Participants also felt that educational opportunities should include the knowledge and perspectives of Métis elders and knowledge holders, providing an opportunity for building community and cultural connections. This would also allow for the topic of cannabis to be approached from a Métis worldview, rather than a colonial one, so people could learn the Métis history of cannabis.

It was also noted by participants that education alone will not be sufficient to address problematic cannabis use; along with education, there needs to be other programs and interventions that address structural determinants of health that contribute to cannabis use, such as access to mental health care, providing recreational and social opportunities for youth, and others.

3.2.2 Education on the Métis Nation

Participants expressed the need for more education for those working in the cannabis space with the Métis Nation, which will ultimately result in better collaborators, partners, and service providers. In particular, participants noted the need for service and healthcare providers to be educated on the contributions of trauma, cultural identity, connection to community, and other structural determinants of health to cannabis use among Métis citizens. This would enhance providers' ability to interact with Métis clients and patients and approach their work in more trauma-informed ways.



3.3 MÉTIS PERSPECTIVES ON CANNABIS REGULATION

Though cannabis legalization could have been an opportunity for “economic self-determination in Indigenous communities” (5 p. 5), the current framework was not developed with adequate consultation of Indigenous peoples and does not sufficiently address self-determination of Indigenous peoples, including the Métis (1). Cannabis legalization in Canada has involved complex jurisdictional considerations between federal, provincial, and Indigenous governments. Métis communities may face challenges in determining their role and authority in regulating and governing cannabis-related activities within their jurisdictions. Clarifying jurisdictional responsibilities and fostering effective collaboration among governments is essential to address any potential conflicts or gaps.

3.3.1 Consultation

Participants in the workshop expressed dissatisfaction with how the consultation process around cannabis has occurred to date. It was felt that consultation was nearly non-existent, and the few opportunities there were for participation were not in the spirit of reconciliation, nor did they meaningfully utilize government-to-government relationships, as laid out in the Canada-Métis Nation Accord. Many expressed feelings that this was a continuation of the long-standing practice of the federal government limiting interactions with the Métis, resulting in the belief that they are ignoring the perspectives, needs, and requirements of the Métis people.

Specifically, it was expressed that the federal government’s approach to determining the priorities of the Métis Nation was ineffective, and did not respect building stronger nation-to-nation and government-to-government relationships. By creating a list of priorities based on what were “thought” to be the priorities of the Métis Nation, without consulting the Nation in the development of this list and instead asking for confirmation after the fact, the voice of the Métis and the story of the Métis Nation was excluded. As well, participants reported either not receiving formal communications for engagement and/or consultation, or had been offered the opportunity to participate in ways that did not support meaningful input from the Métis Nation. When participants reflected on the present opportunity, they emphasized how the feedback being gathered was from only a small number of Métis citizens and bureaucrats, who are not representative of the overall Métis Nation.

Additionally, participants expressed the need for consultation efforts to explicitly solicit and include the perspectives of groups, including Métis women, youth, veterans, elders, LGBTQ2S+ Métis, and others, as they will have different lived experiences that make them impacted differently.



3.3.2 Current Regulations

Participants expressed that it was difficult to summarize a collective impact or experience resulting from the existing regulations on cannabis; this was because regulations vary across provinces and municipalities. However, irrespective of geography, it was reported their communities were impacted by the regulations and legislation of non-Métis governments.

Participants expressed some feelings of futility in regards to current regulations around cannabis, stemming from both the knowledge that regulations establishing a legalized cannabis industry will not prevent entirely people from accessing the illicit market and the belief that not all regulations were developed with the health of the Métis in mind. Specifically, participants reported that though regulations on retail cannabis are meant to protect consumers by restricting amounts/dosages and contents of cannabis products, they did not believe that there were sufficient regulations in place to prevent potential harm from the use of pesticides and other chemical additives that may be used by large corporate producers whose primary concern is profit generation. However, participants also cautioned that stricter regulations will likely cause harm rather than benefit by further stigmatizing cannabis use.

Relatedly, some participants reported that many Métis citizens would likely have a preference for growing and cultivating their own cannabis, or to be able to purchase from a Métis producer and retailer in whom they have more trust. As well, complicated regulations and regulatory processes may be a deterrent to Métis entrepreneurs pursuing these opportunities. Participants expressed that Métis regulations on cannabis, created by Métis governments, would better support the needs of Métis entrepreneurs and communities. Cannabis legalization comes with regulatory frameworks and requirements that businesses must adhere to. Métis communities interested in participating in the cannabis industry may face unique challenges in navigating these regulations and complying with licensing processes. Overcoming these regulatory barriers may require dedicated resources, expertise, and support to ensure successful participation.

3.4 ACTIONING A MÉTIS VISION FOR HEALTH

To set the forum for participants' discussions on Métis public health approaches to cannabis, it is first necessary to understand how health is viewed in the Métis Nation. The Métis Vision for Health Report outlines three principles related to Métis health and well-being: health is self-determined, health is holistic and multi-faceted, and health is place-based (5). Métis definitions of health are unique and take into account that health is holistic, encompassing more than just physical and mental health (5). A proposed definition of Métis health, one that is rooted in the perspectives of Métis communities, is:



“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. It is a state of balance and interconnected relationships between physical, mental, emotional, social, financial/economic, spiritual, environmental, and cultural well-being. And it is the extent to which Métis people, families, or communities can achieve individual or collective well-being now and for future generations.” (3 p.10)

It is important to acknowledge and understand that health disparities seen between Métis citizens and the general Canadian population are not the results of individual choices or biology but are rather the product of complex interactions of different social forces and deliberate policy choices.

3.4.1 Métis Social Determinants of Health

Métis Social Determinants of Health (MSDoH) include things like income, poverty, housing, race and racism, colonialism, education and literacy, culture, and connection to land, among others. While many of these determinants also apply to non-Métis people, disparities in them between Métis and non-Métis can help explain and contextualize the health gaps seen between these two populations and provide a foundation for action to improve the health of the Métis.

Another important MSDoH is access to care. For Métis citizens, different types of care (including western medical care, mental health care, traditional healers, and others) is often harder to access compared to the non-Métis population. This is due to a combination of factors including but not limited to: a lack of extended health benefits, a lack of availability in smaller/remote communities, financial barriers, and discrimination (5). Métis citizens require access to appropriate, culturally-competent, and trauma-informed care to empower Métis citizens and communities to achieve better health.

3.4.2 Métis Public Health Approaches to Cannabis

Because there is little research into the impacts of cannabis on the Métis Nation and Métis communities, there is no clear vision of what a Métis-specific public health approach to cannabis is, and without dedicated capacity and funding to do this work, it will not be possible to create one. However, workshop participants identified aspects that would support such an approach, including addressing the MSDoH, avoiding abstinence-based messaging, and ensuring initiatives are fully and sustainably supported.

There are many underlying factors that contribute to cannabis use, such as intergenerational trauma, poor access to mental and physical healthcare, and others. These factors also influence overall health, thus actions to address them will also



contribute to addressing problematic cannabis use among Métis. Participants emphasized the importance of ensuring access to appropriate treatment and support services for individuals experiencing mental health issues related to cannabis use. This could include promoting the availability of culturally competent mental health resources and establishing Métis referral pathways to specialized care when needed.

A Métis public health approach to cannabis cannot be rooted in abstinence-based or prohibitionist perspectives and should focus on health promotion and education rather than prevention. Emphasizing prevention or cessation of cannabis use contributes to further stigmatization, which is ultimately harmful to Métis who do use cannabis.

Any public health approach taken will require ongoing capacity and funding commitments that allow communities to address the factors contributing to problematic cannabis use and poor health generally in their communities as they see fit. In addition to this needed flexibility of funding arrangements to support this, funding commitments must be long-term and sustainable to ensure that Métis citizens are able to access programs and supports for as long as they need and are not left unsupported when funding commitments expire.

3.5 MÉTIS YOUTH AND CANNABIS

Participants noted that Métis youth were particularly vulnerable to the negative health impacts of cannabis, as it has been shown to affect the crucial brain development that takes place at these ages (2). The perspective of Métis youth on cannabis use is still in the preliminary stages. It can vary, but there are concerns among many Métis youth about the potential negative impacts of cannabis use. Métis youth are aware of the potential health risks associated with cannabis use, particularly when used in excessive amounts or at a young age. They may prioritize their overall well-being and make choices that support their physical and mental health.

Métis communities have experienced the negative impacts of substance abuse, including the intergenerational effects of colonization and the historical trauma associated with the misuse of substances. This historical context may lead Métis youth to be cautious and skeptical about engaging in substance use, including cannabis. Understanding this historical context is important in dispelling predominant stereotypes about substance use among Métis youth.

Many Métis communities and organizations should prioritize prevention efforts and provide support systems to educate and empower youth in making healthy choices. These initiatives aim to create a supportive environment where youth feel valued and encouraged to make positive life choices. Emphasizing protective factors, such as



connections to culture and community, are important in making sure youth feel empowered to make decisions that are beneficial for their health.

An important way of establishing cultural and community connections is by bringing together Métis youth and elders. Dialogues between Métis elders and youth create opportunities for meaningful connections and relationship-building, and can help Métis youth develop a stronger sense of cultural identity and reconnect with their heritage. Open and respectful conversations allow for the exchange of ideas, concerns, and perspectives, fostering trust and understanding between generations. Stronger relationships between elders and youth can serve as a protective factor against substance abuse by providing a support network and a sense of belonging. Elders can share stories, teachings, and values that emphasize the importance of maintaining a balanced and healthy lifestyle.

Métis elders possess a wealth of traditional knowledge and cultural practices that can provide valuable insights and guidance regarding the responsible use of natural substances, including cannabis. Engaging in dialogue allows elders to share their wisdom, teachings, and experiences related to traditional medicines, cultural ceremonies, and the historical context of substance use within the Métis community.

It is important to note that not all Métis youth hold the same perspective on cannabis use, and individual perspectives can vary within communities. However, it is crucial to respect and acknowledge the concerns and perspectives of Métis youth and engage in open dialogue to address their specific needs and aspirations regarding substance use. This includes the perspectives of LGBTQ2S+ Métis youth, gender diverse Métis youth, youth who are involved with the justice system, and youth who are in care.

3.6 A PATH FORWARD

While there were many problems and gaps identified by participants, there were also clear recommendations that emerged from group discussions. Overall, it was felt by participants that work to address and understand cannabis use among the Métis must take assets/strengths-based and distinctions-based approaches, with dedicated flexible capacity and funding that allows work to be done at the direction of Métis communities.

3.6.1 Doing Research in a Good Way

With the knowledge that much research is needed, participants identified several aspects that are important to doing research in partnership and collaboration with the Métis Nation and Métis communities. Much of the literature on cannabis use, especially cannabis use



among Indigenous peoples, takes a deficits-based approach, looking at risk factors for problematic cannabis use rather than protective factors for preventing problematic cannabis use. It will be important for future research conducted to focus on these protective factors, which will help Métis communities empower and uplift citizens, rather than solely on risk factors or other deficits, which can contribute to the creation of stigma. Potential protective factors, such as connection to culture and community, have a large role in the overall health of the Métis, making them all the more important to address.

Additionally, much of the literature looks at cannabis use from a pan-Indigenous perspective, which does not acknowledge the unique strengths and resilience of the Métis, nor the ways in which the Métis have been impacted by colonialism in ways that are distinct from other Indigenous peoples. Future research must look at the impact of and perspectives on cannabis in Métis communities, specifically, separate from other Indigenous Nations, communities, and peoples. Furthermore, Métis communities are not monolithic, and approaches to research must be based on community needs and priorities.

Relatedly, much of the literature seeks to understand cannabis use in Métis communities from western perspectives, which does not include nor prioritize the knowledge, perspectives, or lived experiences of Métis knowledge holders and elders. Halseth and Cappe suggest that this dominance of research based in western science research “has resulted in prioritizing Western perspectives on substance use and associated harms over more holistic, relational, and strengths-based Indigenous ways of knowing,” (2 p. 38) and that this leads to areas of inquiry, such as the use of cannabis as a measure of harm reduction, being ignored in favour of research looking at “risk factors” for use (1). This research is often done at the behest of other stakeholders, such as western governments, researchers, or non-governmental institutions, and thus does not always work towards the goals and priorities as defined by the Nation and communities.

Much of the research on cannabis in Métis communities is limited to examining the health impacts of cannabis, using a western scientific definition of “health.” Research on the health impacts of cannabis from a Métis perspective would utilize the definition of health presented earlier and would thus involve collaboration with other sectors such as child and family services, justice, public safety, economic development, and others.

To be able to conduct this type of research, there are several requirements: most importantly, having flexible, broad, and sustained funding sources that support this research in an ongoing manner. Partnerships with other governments and organizations will require engagement and open dialogue to build relationships prior to undertaking research projects and to affirm and support Métis ways of doing research. Research



grounded in a Métis worldview will ensure that the evidence generated is meaningful, and helpful when informing programs and supports that meet community needs, as defined by the communities leading the research.

3.6.2 Opportunities for Reciprocal Education

Participants expressed that education initiatives for the Métis community related to cannabis should have the goal of promoting the safe use and destigmatization of cannabis rather than abstinence or cessation of use. They also described that educational initiatives should be:

- Culturally relevant and safe
- Presented in opening and welcoming spaces where people are able to ask questions freely and without fear of judgment
- Tailored to the unique needs and contexts of individual communities

Métis communities can work with partners to develop factual, informative, and culturally relevant educational materials and interventions. Additionally, education for service providers that will enable them to better support Métis patients and clients by meeting them where they're at and providing trauma-informed care is important in making sure Métis patients are well supported.

3.6.3 Harm Reduction Programming

Participants had many suggestions for how to approach cannabis harm reduction, including:

- Providing communities with information that enable them to make informed and healthy decisions for themselves.
- Meeting people where they're at in their journeys with using cannabis without judgment
- Avoiding focusing solely on abstinence from cannabis or cessation of use
- Recognizing the role that cannabis may play in healing for some, including as a method to reduce or stop the use of more harmful substances, or its use in traditions or ceremony
- Providing supports that address underlying factors that may contribute to cannabis use, such as access to culturally safe mental healthcare and opportunities for connection to culture and community

Participants emphasized the importance of cultural competency and inclusivity in these initiatives. Recognizing and incorporating Métis cultural practices, perspectives, and



traditional knowledge in the design and implementation of programs and services can enhance their effectiveness and relevance.

3.6.4 Multi-sectoral Action and Collaboration

It is recognized that cannabis use in Métis communities has impacts in areas beyond health; consequently, responses aimed at addressing cannabis use among Métis citizens should be developed in collaboration with partners from other sectors, including but not limited to social services, child and family services, public safety, justice, economic development. Such collaboration will ensure that actions taken are holistic and meaningful to Métis communities. Cannabis legalization raises important considerations regarding the potential impact on the health and well-being of Métis community members. It is crucial to address potential risks associated with cannabis use, particularly its impact on mental health. Implementing education programs, prevention strategies, and harm reduction initiatives specific to Métis communities can promote responsible cannabis use and mitigate potential negative health effects.

While the lack of and/or poor consultation that has taken place cannot be undone, the Cannabis legislative review presents an opportunity to undertake consultation and engagement with the Métis Nation in a way that has the potential for positive impacts on the lives of Métis citizens. Current regulations weren't made with consideration for Métis perspectives; rather than trying to make the two fit together, the federal government should recognize and support the ability of governing members to create their own regulations as part of self-government.

There is an opportunity to form partnerships between Métis governments, provincial and federal governments, non-governmental organizations (NGOs), and researchers to pursue action that is collectively beneficial for those who are involved. However, partnerships need to be based on mutual respect and work at the direction of the Métis Nation and Métis communities. It will also be important to establish partnerships within the nation, such as with Métis professionals working in the area of substance use and mental health, to involve them in policy discussions, program design and implementation, and to be able to more efficiently and frequently connect Métis citizens in need of support with these Métis service providers.



4.0 Recommendations and Rationale

4.1 RECOMMENDATIONS

4.1.1 Recommendations to the Federal Government

1. Provide funding for Métis-specific research on the impacts of cannabis and cannabis legalization on Métis citizens and communities. This should include funding for longitudinal research, research on traditional medicinal uses of cannabis, and others research questions as directed by Métis communities. Data collected should be distinctions-based and disaggregated by gender.
2. Provide funding for economic development, including dedicated funds to support Métis entrepreneurs entering the cannabis industry and funding to support the development of a Métis Cannabis Economic Development Strategy which priorities Métis women and 2SLGBTQQIA+ Metis.
3. Provide funding for harm reduction initiatives including education for Métis communities, families, and citizens, that is tailored to their needs and provided in a culturally-relevant way. This should include funding for the evaluation and monitoring of this programming.
4. Create and foster supportive and collaborative partnerships with the Métis Nation, respecting the nation-to-nation relationship as laid out in the Canada-Métis Nation Accord.
5. Engage in consultation meaningfully, in ways that support and enable the participation of the Métis Nation.
6. Recognize and address historical injustices and disproportionate impacts of cannabis prohibition on Indigenous communities, including Métis communities. This can involve implementing measures to rectify past harms, such as expunging cannabis-related criminal records and supporting restorative justice approaches.
7. Continue to develop and refine regulatory frameworks that ensure the safety and quality of cannabis products. This includes robust testing and quality control measures to protect consumers from potential harm associated with contaminants or misleading product labeling.
8. Clarify jurisdictional roles and responsibilities, including defining relationships between Métis, provincial/territorial, and the federal governments.
9. Engage Metis communities in the development and implementation of policies related to cannabis, public safety, and justice. This can ensure that the unique perspectives, needs, and interests of these Métis communities are considered and that decisions are made in a collaborative and inclusive manner.



4.1.2 Recommendations specific to youth:

1. Research the impacts of cannabis on Métis youth specifically, including LGBTQ2S+ Métis youth, gender diverse Métis youth, youth who are involved with the justice system, and youth who are in care.
2. Provide opportunities for fostering cultural and community connections for youth, especially in providing opportunities for intergenerational relationship building and knowledge transfer.
3. Involve the Youth Council in governance and initiatives specific to cannabis to ensure that the youth perspective is heard.

4.1.3 General recommendations:

1. Conduct research to better understand the perspectives of Métis communities regarding cannabis legalization, health outcomes, economic opportunities, and social factors that respect data sovereignty, privacy, and Métis ethics.
2. Conduct research to understand the impacts of cannabis legalization on Métis citizens and communities, including the impacts specific to Métis women, LGBTQ2S+ Métis, gender diverse Métis, Métis elders, veterans, and others.
3. Create meaningful partnerships with non-Métis governments and organizations.
4. Provide educational opportunities for non-Métis service providers so that they are educated on the Métis Nation and are equipped to provide culturally-competent, trauma-informed care to Métis citizens.
5. Create an inventory of Métis and non-Métis allied professionals and service providers.
6. Support the co-development of a distinctions-based approach that is Métis specific and GBA+ with the Métis Nation governments and representative organizations.
7. Dedicated funding to support educational initiatives and business development for Métis entrepreneurs to navigate regulations related to the production of cannabis and retail. Including supporting lending intuitions to provide support for those entering the cannabis industry,

4.2 RATIONALE

4.2.1 Need for Research

Currently, there is little data on cannabis use among Métis citizens and communities, and what does exist was not collected in a manner consistent with Métis ways of doing research. Most data used to inform knowledge about cannabis use in Métis communities, to this point, has been pulled together from various sources, out of context; none of which were designed with the intent of eliciting responses from Métis citizens. The lack of good



quality evidence impairs efforts to design and implement programs or supports for Métis citizens and communities related to cannabis use. To adequately address the issues of the paucity of evidence and lack of programs and services addressing cannabis use in Métis communities, dedicated long-term and flexible funding and capacity for Métis governments are required. The Métis Nation must be respected and recognized to successfully develop and implement programs, policies, and regulations that reflect their distinct traditions, cultural values, priorities and aspirations.

It is also necessary to conduct ongoing evaluation and monitoring of implemented initiatives. This would help assess their effectiveness, identify areas for improvement, and ensure that the intended outcomes are being achieved. Regular evaluations can also provide valuable data for future research and evidence-based decision-making.

The goal of research cannot be to collect information with no clear commitment to action. Any research undertaken must be done at the direction of Métis communities and governments to ensure their priorities and needs are the central goals of research questions and objectives.

4.2.2 Need for Economic Development

LFMO highlighted that historically, as Michif resilient entrepreneurial people; Métis cultural values and qualities reflect an openness to economic development and entrepreneurialism within communities. This is further echoed by the term Métis people use to describe themselves “*Otipemisiwak*” the people who own themselves. As well, the same opportunities for investment for commercial Cannabis economic development strategies has not been supported through targeted engagement and programming in contrast to First Nations research.

Given that Métis entrepreneurs face distinct challenges when establishing a business in the cannabis industry (2), there is also a need for support for the economic development of the Métis Nations. This should be in the form of dedicated funding for Métis business development and lending institutions or affiliates to provide support specifically for those entering the cannabis industry. These could include resources to guide entrepreneurs through the regulatory process and funding that can be specifically earmarked for Métis entrepreneurs entering the cannabis industry.

Meaningful action in the area of economic development of the Métis Nation will require a clear path forward, meaning it will be necessary to develop a Métis Cannabis Economic Development Strategy. Such a strategy will also require the necessary engagement with



Métis citizens and communities to determine where the Nation's priorities are regarding economic development within the cannabis industry.

4.2.3 Need for Education

Participants identified education as an area of particular interest and importance in addressing cannabis use in Métis communities. Creating effective and meaningful education materials and programs for Métis citizens must be driven by Métis communities and governments and be based in Métis worldviews. This includes presenting evidence in a neutral manner and incorporating traditional knowledge of Métis elders and knowledge keepers. To address the specific needs of the Métis communities that consider factors such as substance use prevention, historical trauma, stigma and harm reduction strategies; efforts must be enhanced through culturally appropriate education and awareness programs.

Participants also identified different groups who may have different educational needs relating to cannabis:

- Métis youth, who may have unique motivations for cannabis use, including coping with mental health issues such as anxiety and depression or use in social situations, and who need to be provided with adequate evidence to inform their own decision making
- Métis families who, without the proper tools and knowledge, may find it difficult to engage in honest and evidence-based conversations about cannabis
- Non-Métis service providers who may need additional education in understanding the Métis context, including who the Métis are, MSDoH, and how best to support Métis patients and clients who are struggling with problematic substance use.

Research has shown that, despite their prevalence, educational materials rooted in abstinence-based perspectives are ineffective at reducing substance use and do not empower youth to make their own decisions (6). Educational initiatives must be rooted in harm reduction based perspectives that empower youth to make their own informed decisions and that equip families with the skills and knowledge to have open discussions about cannabis use (6).

It has also been shown that educational materials related to cannabis frequently use complex language that limits their accessibility (6). Future educational materials developed should prioritize using plain language (6), as well as alternative options for families who have reading, hearing, or visual impairments and materials presented in Indigenous languages.



Educational opportunities are also needed for service providers working with Métis clients; this could take the form of mandatory cultural competency training for healthcare providers, and include such courses during the post-secondary training of these professionals (2). This training should also be expanded and mandated for other professionals who serve Métis clients or patients, including but not limited to, law enforcement, social workers, allied health professionals, and others.

4.2.4 Creating Meaningful Partnerships

In addition to funding and capacity, work to research and address cannabis use in Métis communities will require partnerships with a variety of organizations. However, past partnerships have not always been mutually beneficial; specifically, they have not been beneficial to the Métis Nation, and to make meaningful change, this must be rectified. Improving the health of Métis citizens will require partnership across multiple sectors in ways that recognize the authority of Métis governments as governments and allow Métis governments and communities to direct research priorities and initiatives - approaches that are, as stated by workshop participants, “by us, for us.”

Further, partners must agree to work towards the improved health of the Métis Nation using a Métis definition of health and recognizing that it is distinct from western definitions of health. This is especially important when working in the realm of cannabis, as a western definition of health might set the goal of abstinence from cannabis, while a Métis vision of health could include the use of cannabis, provided it supports the well-being of an individual, their family, and their community.

Partners must also acknowledge that their more proximal priorities, for example, in reducing the use of cannabis among Métis, may not be aligned with the named priorities of communities. However, common ground can be found by examining priorities distally: which is improving the health of the Métis Nation. And to that end, common ground can be found on which to move forward and take action. In a 2021 systematic review of the literature on cannabis use in Indigenous peoples in Canada, it was identified that the risk factors for cannabis use among the Indigenous population are similar to those in the general population, such as low socioeconomic status, poor mental health, and use of other substances, all of which occur at higher rates among Indigenous peoples in Canada (7). This suggests that addressing the social determinants of health and, in particular, the Métis-specific determinants of health, such as colonialism, poverty, connection to culture, and relationship to land, will contribute to reducing cannabis use among the Métis, in addition to other health benefits. Thus, despite goals varying between Governing



Members and their communities; the ultimate goal of partners is to advance the health of Métis.

Collaboration with mental health professionals, such as psychiatrists, psychologists, and counselors, would be beneficial in developing evidence-based strategies for addressing cannabis use and its impact on mental health within the Métis Nation. In particular, having an inventory of Métis and allied service providers and supports would be beneficial in increasing the access of Métis citizens to the necessary services. Data sharing between Federal, Provincial, and Territorial governments with the Métis Nation should also be promoted to ensure accurate data collection on the cannabis industry's impact and facilitate evidence-based decision-making.

4.2.5 Meaningful Consultation

Consultation on cannabis legalization and legislation (and other areas) has not been conducted in a way that supports the meaningful and fulsome participation of the Métis Nation and has rather been conducted seemingly as afterthoughts and in tokenistic ways. Moving forward, consultation should be accompanied by adequate funding that is distributed to Métis governments to use as they see fit, ensuring that Métis communities are engaged as they want to be. Timelines for consultation must also take into account the time it takes to do consultation well - this includes providing notice to Métis governments far in advance so they have the appropriate time to bring the conversation to communities so their voices are reflected.

Failures of provincial and federal governments to adequately and meaningfully engage the Métis Nation on a variety of issues have led to the voice of the Métis being conspicuously absent from tables and conversations that impact Métis citizens. Without changing the way that engagement and consultation are conducted, so that the Métis Nation is involved as an equal partner, respecting Nation-to-Nation relationships, the mistakes of the past will continue to be repeated, and opportunities to create meaningful and impactful change in the lives of Métis citizens will continue to be squandered.

4.2.6 The Need for Youth Involvement

Because Métis youth have been identified as in need of particular attention and effort to prevent negative impacts of cannabis use, it is important to involve Métis youth in the policy decisions and program development and implementation that will affect them. This can be done through the inclusion of the Métis Nation Youth Council in governance processes related to cannabis.



Not only will creating safe and inclusive environments, where Métis youth feel comfortable sharing their thoughts and asking questions, ensure that research conducted is useful and programs implemented will be successful, ensuring that youth are and remain connected to their community and culture will serve as a protective factor to prevent cannabis consumption and promote the overall well-being of the Métis communities.

5.0 Conclusion

Though there are clear gaps in the understanding of cannabis and the Métis Nation, Métis governments have clear recommendations for how to move forward in closing that knowledge gap. Research that is grounded in a Métis worldview and done in partnership with Métis communities can help paint a clearer picture of how Métis citizens are using cannabis and how that impacts their health. With this newly created evidence, Métis governments can create educational materials and programs that address problematic cannabis use among the Métis and provide the supports and services necessary to help those who want to reduce their use. To do this work, it will be necessary to partner with provincial and federal governments, as well as other organizations, but such partnerships must be based on mutual respect, open dialogue, and principles of nation-to-nation relationship building. To ensure decisions related to cannabis legalization align with the principals of self-determination and respect Métis governance and jurisdiction, MNC emphasizes the importance of meaningful consultation and collaboration between Federal, Provincial and Territorial governments. The story of the Métis Nation has been left out of the national story of cannabis in Canada, but it is not too late to rectify this and ensure that the needs of the Métis are heard, respected, and met.

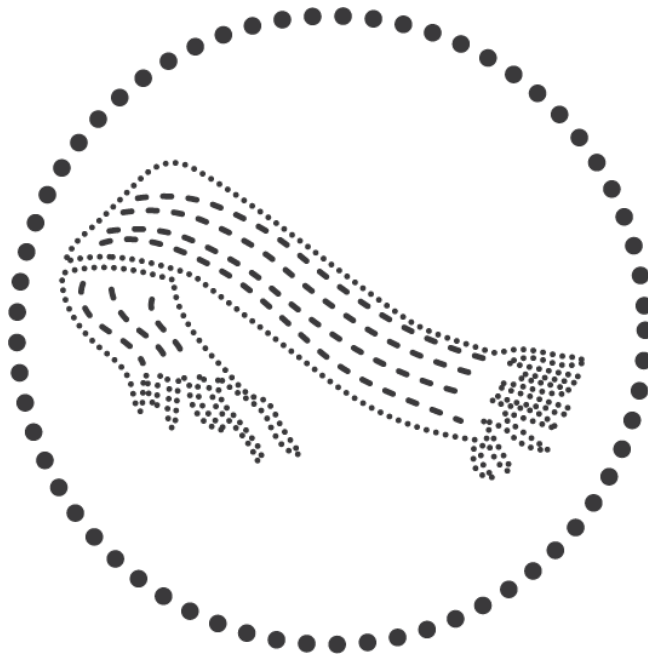


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7.0 Appendices





7.1 LIST OF ATTENDEES

| Last Name, First Name | Title | Organization |
|------------------------------|--|--|
| Accettola, Evan | MNO Youth Chair | Métis Nation of Ontario |
| Alexander, Caudarella | President and CEO | Canadian Centre on Substance Use and Addiction |
| Armstrong, Julia | Manager | Mental Health Commission of Canada |
| Bald, Tracy | Manager, Community Wellbeing | Métis Nation of Ontario |
| Bartel, Reagan | Health Director | Métis Nation of Alberta |
| Beaulieu, Tera | Director | Weaving Wellness Centre |
| Boston, Kathy | Elder | Les Femmes Michif Otipemisiwak |
| Brock, Tegan | Health Research and Data Manager | Métis Nation - Saskatchewan |
| Campbell, Jenna | Supervisor Youth Mental Health | Métis Nation of Ontario |
| Cardinal, Dan | Vice President | Métis Nation of Alberta |
| Caron, Cassidy | President | Métis National Council |
| Cordingly, Claire | Consultant | Goose Consulting |
| Edwards, Sarah | Staff Scientist | Métis Nation of Ontario |
| Folvik, Karrigan | | Métis Nation British Columbia |
| Friedle, Emily | Youth Representative | Les Femmes Michif Otipemisiwak |
| Gabrys, Robert | Senior Research and Policy Analyst | Canadian Centre on Substance Use and Addiction |
| | Manager, Indigenous Affairs, Controlled Substances and Cannabis Branch | |
| Gallienne, Jessica | | Health Canada |
| Gillis, Terri | Community Representative | Métis Nation British Columbia |
| Gonneau, Ginny | Director of Health | Métis National Council |
| Gosling, Sandra | Policy and Research Analyst | Mental Health Commission of Canada |
| Grauman, Tai Amy | Workshop Facilitator | |
| Hansen, Blae | Manager - Health Policy Implementation | Métis Nation British Columbia |
| Harnett, Jessica | | Métis Nation British Columbia |



| | | |
|----------------------------|--|---|
| Howard, Sheila | Community Organizer | Métis National Council |
| Huang, Sophia | Mental Health Program Coordinator | Métis Nation British Columbia |
| Krywucky, Andrea | Manager of Health Policy | Les Femmes Michif Otipemisiwak |
| Letendre, Angeline | Nurse | Canadian Indigenous Nurses of Canada |
| MacKillop, Dr. James | | |
| Marques Santos, Jose Diego | Indigenous Health Research Coordinator | University of Saskatchewan |
| Marwood, Madison | Health Program Coordinator | Métis Nation - Saskatchewan |
| Meyer, Joanne | Chief Operating Officer | Métis Nation of Ontario |
| Nandlall, Rheanna | Veterans Policy Advisor | Métis National Council |
| | Director of Indigenous Partnerships and Strategy | Canadian Centre on Substance Use and Addictions |
| Ochalski, Heather | President | Les Femmes Michif Otipemisiwak |
| Omeniho, Melanie | | Métis Nation of Alberta |
| Peters, Theodore | | Métis Nation of Ontario |
| Playne, Jordyn | | Centre of Excellence for Women's Health |
| | | |
| Poole, Nancy | Director | Métis Nation British Columbia |
| Pollard, Katina | Provincial Health & Wellness Manager | Métis Nation - Saskatchewan |
| Pruden, Tanya | Health Programs & Services Manager | Les Femmes Michif Otipemisiwak |
| Pruden, Victoria | Director of Operations | |
| | Gaming and Gambling Health Promotion Specialist | |
| Rawson, Taylor | President and Chief Executive Officer | Métis Nation of Ontario |
| Rodrigue, Michel, | | Mental Health Commission of Canada |
| Rogers, Korie | | Métis Nation British Columbia |
| Skjeie, Lori | Director of Mental Health and Addictions | Métis Nation - Saskatchewan |
| Smith, Amy | Mental Health Project Coordinator | Métis Nation British Columbia |
| St. Onge, Marcel | Senior Director Child and Family Services | Métis National Council |
| | | Shining Mountains Living Community Services |
| St Denys, Raye | Executive Director | |



Steinback, Natasha
Teixeira, Merrhea
Thomson, Stephen

Thorpe, Karla
Todd, Kelsey
van de Sande, Janna
Vaughn, Lisa
Vides, Eduardo
Watson, Patrick
Wells, Pixie

Policy and Legislative Advisor, Child & Family
Services
Health Policy Analyst
Director - Health Governance
Vice President, External Affairs and
Development
Harm Reduction Program Specialist
EA/Advisor to President

Senior Health Policy Advisor
Director of Economic Development
2SLGBTQIAA+ representative

Métis National Council
Métis Nation British Columbia
Métis Nation British Columbia

Mental Health Commission of Canada
Métis Nation British Columbia
Métis National Council
Métis Nation of Alberta
Métis National Council
Métis National Council
Les Femmes Michif Otipemisiwak



7.2 LIST OF PRESENTATIONS

1.1 The Cannabis Act: Presentation to the Métis National Council - Jessica Gallienne, Manager, Indigenous Affairs, Controlled Substances and Cannabis Branch, Health Canada

2.1 The State of Métis Knowledge on Cannabis Use and Mental Health in Canada - Sandra Gosling, Policy and Research Analyst, Mental Health Commission of Canada & Robert Gabrys, Senior Research and Policy Analyst, Canadian Centre on Substance Use and Addiction

2.2 Cannabis Use & Mental Health - Tera Beaulieu, Director, Weaving Wellness Centre

3.1 Métis Youth Perceptions of Cannabis Use in Their Communities - Jordyn Playne, President, Métis Nation of Ontario Youth Council

3.2 Métis Perspectives of Cannabis Use: A Community-Based Research Study - Sophia Huang, Mental Health Program Coordinator, Métis Nation British Columbia & Terri Gillis, Métis Nation British Columbia

4.1 MNO's Community Based Intensive Addictions Program - Joanne Meyer, Chief Operating Officer, Métis Nation of Ontario & Jenna Campbell, Supervisor, Youth Mental Health & Addictions, Community Wellbeing Branch, Métis Nation of Ontario

4.2 Medical Cannabis: Fact vs. Fiction - Dr. James MacKillop



7.3 WORKSHOP BREAKOUT GROUP QUESTIONS AND SUMMARY OF RESPONSES

| | LMFO | MNBC | MNA & MN-S | MNO | MNC & Partners |
|---|--|---|---|--|----------------|
| Conversation 1 | | | | | |
| How are Métis approaching cannabis regulation in their communities? Are there different approaches for Métis in British Columbia, Alberta, Saskatchewan, and Ontario? | <ul style="list-style-type: none"> We are not aware of Métis-specific approaches to regulation We are aware of conversations on cannabis distribution as a potential economic development strategy There is a need for regulations around online purchasing and licensed vendors. | <ul style="list-style-type: none"> Has not participated in regulation discussions Are concerned about the ability to have a seat at the table and be recognized as the official governing body for Métis in BC. | <ul style="list-style-type: none"> We need the ability to develop our own regulations that align with community needs Métis self-government should engage citizens to build their own strategies. | <ul style="list-style-type: none"> Has not been engaged in regulation conversations There are research gaps regarding the impact on Métis communities. | N/A |
| What has been the Métis experience with the | <ul style="list-style-type: none"> We need more education within Métis communities | <ul style="list-style-type: none"> The current consultation process feels like a colonial structure | <ul style="list-style-type: none"> MNA has not been engaged There is a need for capacity, time, and funding to | <ul style="list-style-type: none"> The MNO's previous cannabis program educating | N/A |



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| <p>provincial and federal governments' cannabis frameworks in British Columbia, Alberta, Saskatchewan, and Ontario?</p> | <p>regarding safe cannabis use</p> <ul style="list-style-type: none"> We are curious about consumption rates after the legalization Métis Nation was not engaged before or after legalization. | <ul style="list-style-type: none"> We cannot adequately reflect the perspective of all Métis in BC There is a need to consult with the community directly to make decisions that will affect them. | <p>explore Métis needs</p> <ul style="list-style-type: none"> All indigenous communities and populations, including Youth, should be considered in framework development We need more clarity on who has been engaged in framework development and their priorities. | <p>Métis on impact has been discontinued due to a lack of funding.</p> | |
| <p>Are there barriers to participation in the federally and provincially regulated cannabis frameworks for Métis entrepreneurs?</p> | <p>N/A</p> | <ul style="list-style-type: none"> It is essential to include Métis in the decision-making processes. | <ul style="list-style-type: none"> Assess the environmental impact of regulated cannabis manufacturing. | <ul style="list-style-type: none"> We need opportunities for self-government involvement in regulatory conversations | <p>N/A</p> |
| <p>Are more economic development</p> | <ul style="list-style-type: none"> Métis people can benefit if | <ul style="list-style-type: none"> Collaboration with First Nations is | <ul style="list-style-type: none"> Need education for community | <ul style="list-style-type: none"> The Métis small business | <p>N/A</p> |



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| <p>supports needed to help Métis cannabis and hemp entrepreneurs?</p> | <p>this is done the right way.</p> | <p>crucial while still maintaining a distinctions-based approach</p> <ul style="list-style-type: none"> • There is a negative stigma with BIPOC individuals who want to enter into cannabis distribution. | <p>members owning stores</p> <ul style="list-style-type: none"> • Explore opportunities for economic development and supporting entrepreneurs • We require more support from lending organizations. | <p>support program could contribute to Métis economic development.</p> | |
| <p>Additional Comments</p> | <ul style="list-style-type: none"> • Some use cannabis for personal pain management, relaxation, and sleep • It is important to differentiate between recreational use and unhealthy use • There is concern about seeking cannabis from illicit sources | <p>N/A</p> | <ul style="list-style-type: none"> • Consider cannabis as a plant rather than a drug • Provide community education on the healthy use and administration of cannabis • There is stigma around cannabis use in the community • Explore potential health benefits and risks of cannabis | <ul style="list-style-type: none"> • A tobacco cessation program will be launched in June, and cannabis will likely be addressed. | <ul style="list-style-type: none"> • The desire for federal colleagues to explain funding solutions that are flexible and responsive to the needs of Governing Members • The importance of research that is articulated |



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| | <ul style="list-style-type: none"> • Develop a Métis-specific approach to educate Youth and families about cannabis use • Explore the full potential of the cannabis plant • Traditional medicines are never mood-altering; the cannabis plant has been modified over time to produce an intoxicating effect. | | <ul style="list-style-type: none"> • Distinguish between medicinal and recreational use of cannabis. | | <p>by Métis citizens</p> <ul style="list-style-type: none"> • Taking an asset-based approach, recognizing that the assets of Métis communities are the citizens • Solutions and investments need to benefit Métis communities directly • There is a desire to build strong relationships with partners to ensure flexible funding options. |
| Conversation 2 | | | | | |
| Tell us about cannabis use | <ul style="list-style-type: none"> • Cannabis can be a tool to | <ul style="list-style-type: none"> • Public health systems do | <ul style="list-style-type: none"> • MNA, Need to consider | <ul style="list-style-type: none"> • Almost daily cannabis use | N/A |



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| <p>among Métis and its impact on public health – including specifically for youth, women, and pregnant and parenting Métis.</p> | <p>counteract the negative effects of harder drugs or aid in recovery.</p> | <p>not support Métis individuals and communities</p> <ul style="list-style-type: none"> • Cannabis use is impacted by public health systems, and the lack of access to services. | <p>community preferences and concerns</p> <ul style="list-style-type: none"> • MNA, Difficult to know, as health information and data are protected • MNA, Cannabis is often a last resort with treatment options. | <p>is associated with health risks</p> <ul style="list-style-type: none"> • Early onset of cannabis use has associated long-term impacts • Stigma may affect the rate of self-reporting, especially among pregnant and parenting Métis. | |
| <p>How do you see cannabis use interacting with mental wellness amongst Métis?</p> | <ul style="list-style-type: none"> • Long-term use of cannabis can become a ritual and impact mental health • Can become dependent on cannabis. | <ul style="list-style-type: none"> • Cannabis use can be a way to seek connections and community that was lost with colonization • Due to a lack of mental health resources, cannabis is | <ul style="list-style-type: none"> • MNA, Focus on health promotion/education rather than prevention • MNA, High THC content can result in psychosis • MNA, Those with significant addiction all come from trauma • MNA, Some may use cannabis | <ul style="list-style-type: none"> • There is a relationship between trauma, mental health, and cannabis use • Cannabis is used for social connection and as an alternative to | <ul style="list-style-type: none"> • Métis Nation’s story on substance use and mental health is missing in the Canadian narrative. |



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| | | <p>easier to access than mental health care</p> <ul style="list-style-type: none"> • Cannabis use can be seen as a harm-reduction strategy • Need more research on the physiological impact on Youth. | <p>because of mental health and wellness (MHW) issues, and some may have MHW issues because of use.</p> | <p>prescription medications.</p> | |
| <p>Are there distinct Métis cannabis use trends in British Columbia, Alberta, Saskatchewan, and Ontario?</p> | <ul style="list-style-type: none"> • Not enough data on cannabis use among the Métis community | <ul style="list-style-type: none"> • We do not have evidence to recognize trends • We need funding to research cannabis use interwoven with identity, community, and culture • More Youth are using cannabis, and we need to | <ul style="list-style-type: none"> • MNA, Insufficient research and lack of community input • MNA, Limited access to funds is a barrier • MNA, Our community has not asked to address cannabis use; we are more concerned about opioid use, addictions, and homelessness. | <ul style="list-style-type: none"> • There is limited research on Métis cannabis use in Ontario. | <ul style="list-style-type: none"> • It is important for Métis governments and citizens to share their stories and understanding where investments need to go. |



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| | | <p>understand why</p> <ul style="list-style-type: none"> • Conduct a survey of cannabis use post-legalization | | | |
| Additional Comments | <ul style="list-style-type: none"> • Need clarity on cannabis variants, strengths, and strains • Concerns around edibles, their usage, and potency • Mistrust in government-grown cannabis and ownership • There is a lack of education and preventative measures. | <ul style="list-style-type: none"> • Look at the connection between culture, identity, and substance use • Métis youth and people have been resilient, but there is a need for proper support • Need funding to create programs for communities that can support mental health work • We need to address the root cause rather than | <ul style="list-style-type: none"> • MNA, The health data generated is not analyzed adequately • MNA, Additional data collection is needed to address these questions • MNA, Language is important in addressing stigma • MNA, Inadequate engagement can have negative consequences • MNA, Avoid overburdening the community by prioritizing engagement effectively • MNA, Explore traditional uses and plants used | <ul style="list-style-type: none"> • Concern about second-hand smoke exposure • Implications regarding abruptly quitting cannabis use • Need to focus on harm reduction • Mention of cannabinoid hyperemesis syndrome (CHS) among Youth. | <ul style="list-style-type: none"> • Explore the difference between collaboration and partnership • Long-term sustainable funding is key to allowing program accessibility • Collaboration between the Technical Health Committee and other departments can provide support • Be respectful of governance processes |



| | | managing the issue. | for medical purposes. | | and time required for approvals in Métis governments. |
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| Conversation 3 | | | | | |
| What public health education supports or initiatives concerning cannabis use are you aware of? | N/A | <ul style="list-style-type: none"> We are not aware of public health resources for cannabis use. | <ul style="list-style-type: none"> MNA, We are not aware of any cannabis education or support in Alberta. | <ul style="list-style-type: none"> Boys and Girls Club of Canada develops and delivers health promotion programs for Youth Cannabis and Mental Health is a youth-led project created in collaboration with the project "Cannabis and Psychosis: Exploring the Link". | N/A |



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| <p>Does available programming provide culturally safe support? (in particular, for Métis youth, women, and pregnant and parenting Métis)</p> | <p>N/A</p> | <ul style="list-style-type: none"> • Existing programming is not culturally safe if it does not come from the Métis community • Need funding to conduct research within communities to develop culturally safe programs • The framework needs to be conducted in a way that does not tie it to colonial roots. | <p>N/A</p> | <ul style="list-style-type: none"> • Services are often pan-Indigenous in nature, not tailored to community's needs • Need more support for pregnant Métis individuals. | <p>N/A</p> |
| <p>What are the gaps in currently available education?</p> | <ul style="list-style-type: none"> • Research needs to be done on cannabis use among pregnant women before we use false ideologies • Share the National | <ul style="list-style-type: none"> • Limited education available outside of cannabis stores • We need to reach individuals who do not interact with | <ul style="list-style-type: none"> • MNA, There are no educational resources related to recreational use • MNA, There is a lack of Métis specific education. | <ul style="list-style-type: none"> • Education lacks teachings of culture • Need cannabis education for all ages, including evidence-based and | <p>N/A</p> |



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| | <p>Aboriginal Health Centres' prepared resources for women</p> <ul style="list-style-type: none"> • MNBC's research needs to be shared with Métis governments and the Canadian public • There are gaps in education and public resources related to harm reduction. | <p>cannabis in relatable ways.</p> | | <p>wise-based knowledge</p> <ul style="list-style-type: none"> • Cover topics such as mental health, well-being, and the difference between medicinal and recreational use • Develop youth-centred cannabis education guided by the lived experiences of young people. | |
| <p>Are the public education needs of Métis in British Columbia, Alberta, Saskatchewan, and</p> | <p>N/A</p> | <ul style="list-style-type: none"> • We cannot speak for all BC Métis; we must hold dialogue sessions with community members. | <ul style="list-style-type: none"> • MNA, Need to engage with community to assess education and public health needs in a respectful and timely manner. | <p>N/A</p> | <p>N/A</p> |



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| Ontario regarding cannabis different? | | | | | |
| What are the needs of Métis (and in particular, the needs of youth, adults, Elders, and pregnant and parenting Métis) related to harm reduction? | <ul style="list-style-type: none"> • Stigma around smoking cannabis still exists • There is a need for Métis-specific, culturally safe material for parents to discuss cannabis with their children. | <ul style="list-style-type: none"> • Address stigma by facilitating open and safe conversations with Elders and Youth • More research is needed on pharmaceuticals versus recreational use • Consider safe and easy access to supply and safe consumption sites. | <ul style="list-style-type: none"> • MNA, Seek input from knowledge holders, Elders, Youth, and LGBTQ2S+ individuals • MNA, Prioritize strengths-based education and health promotion approaches. | <ul style="list-style-type: none"> • Need youth-centred harm reduction • There are misconceptions that harm reduction enables cannabis use • Provide abstinence-based and harm reduction approaches side by side • Educate on the concept of Indigenous harm reduction, promoting person-centred care, holistic well-being, and community care. | N/A |



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| <p>Additional Comments</p> | <ul style="list-style-type: none"> • We need a larger investigation into the substances Métis people are using and the relationship of use to the trauma • Indigenous people do not have support from the medical system. | <ul style="list-style-type: none"> • Centralized and easy-to-access resources are important. | <ul style="list-style-type: none"> • MNA, Recognize there is resistance within the medical community toward cannabis use. | <ul style="list-style-type: none"> • Need research done after the legalization of cannabis (rates, use, distribution, etc.). | <ul style="list-style-type: none"> • Exploring opportunities to fill in gaps by working with the Mental Health Commission of Canada (MHCC) and Health Canada (HC) • Identifying ways programs can complement each other • Continuing to focus on areas that lack capacity for MNC and Governing Members • Educating federal employees and institutions about who the Métis are to continue to better |
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| | | | | | <p>dialogue and prevent repeating past mistakes</p> <ul style="list-style-type: none">• The importance of communication and coordination• Appreciation from Canada for the opportunity to work with Métis Nation in a good way• Evaluating the Cannabis Act and the impacts of legalization• Development of a MNC National Data Strategy, and challenges with incorporating Key Performance Indicators (KPI), without |
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| | | | | | <p>clear starting points; the issue of siloed data and information needs to be addressed</p> <ul style="list-style-type: none"> • Challenges in understanding the impact of legislation due to the pandemic • A lack of capacity, time, or resources to properly engage Métis in development or review • Focussing on health and community priorities. |
| Conversation 4 | | | | | |
| Where is more | <ul style="list-style-type: none"> • Need Métis-led research | <ul style="list-style-type: none"> • Longitudinal studies are | <ul style="list-style-type: none"> • MNA, Look at existing | <ul style="list-style-type: none"> • Explore the impact of | N/A |



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| <p>research needed to understand Métis cannabis use trends?</p> | <p>with a gendered approach</p> <ul style="list-style-type: none"> • Take a holistic approach in a way that fits Métis people. | <p>needed, which require increased funding and capacity</p> <ul style="list-style-type: none"> • Community involvement in research will result in substantial evidence and data • Research on different strains of THC is necessary to explore their potential benefits. | <p>knowledge within communities.</p> | <p>cannabis on the mental health of Métis citizens</p> <ul style="list-style-type: none"> • Investigate the effects on mental health in at-risk communities | |
| <p>What questions do you have about cannabis use among Métis that future research should aim to answer? In particular, what questions do</p> | <ul style="list-style-type: none"> • Concern about self-medication with cannabis resulting from inadequate access to public supports and programs • Need LGBTQ2S+ | <ul style="list-style-type: none"> • Explore the relationship between identity, culture, and cannabis use • Anonymous research is needed on pregnant and parenting Métis people. | <ul style="list-style-type: none"> • MNA, We need the capacity to explore the economic benefits of cannabis production. | <ul style="list-style-type: none"> • Address the stigma faced by Métis people who use cannabis • Ask communities what they need • More research is needed on the effects of | <p>N/A</p> |



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| <p>you have about cannabis for medical purposes among Métis, especially youth and pregnant and parenting Métis?</p> | <p>representation in research.</p> | | | <p>prenatal cannabis exposure</p> <ul style="list-style-type: none"> • Examine the impact of second-hand smoke from cannabis. | |
| <p>Where is more research in harm reduction needed?</p> | <p>N/A</p> | <ul style="list-style-type: none"> • More harm reduction research is needed, particularly on the physiological effects of cannabis use during detox for Métis, First Nations, and Inuit populations • Ask communities what they need for harm reduction; “one-size-fits-all” | <ul style="list-style-type: none"> • MNA, All areas of harm reduction need more research, and especially language change around cannabis • MNA, Avoid deficit-based education; prioritize creating safe spaces and use methodologies to engage with communities • MNA, Economic development: understand the benefits of getting | <ul style="list-style-type: none"> • Research what harm reduction should look like for Youth • Should not focus on abstinence-only approaches • Adapt resources to be culturally relevant. | <p>N/A</p> |



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| | | <p>approaches are not effective</p> <ul style="list-style-type: none"> Recognize the importance of community and cultural connection as part of harm reduction. | <p>into cannabis production.</p> | | |
| <p>Additional Comments</p> | <ul style="list-style-type: none"> Examine the marketing of pharmaceuticals for financial gain. | <p>N/A</p> | <ul style="list-style-type: none"> MNA, We need to focus on strengths-based Métis-specific research in relation to cannabis. | <ul style="list-style-type: none"> N/A | <ul style="list-style-type: none"> Next steps for opportunities of sharing information and research Supporting nationwide meta-analysis, including a Métis Nation focus Ensuring there are broader conversations with other groups in Canada for research |



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| | | | | | <ul style="list-style-type: none">• Ensure the Métis story is included in the national story• Improving access to Métis-specific data• Use questions from existing research to generate information• Share study results and ensure accessibility of information• Develop guidance on what is important at this time for Métis people. |
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7.4 THE STATE OF MÉTIS KNOWLEDGE ON CANNABIS AND MENTAL HEALTH IN CANADA REPORT

7.5 MÉTIS VISION OF HEALTH REPORT