

The Canadian Cannabis Survey 2020 Executive Summary

Prepared for Health Canada

Supplier name: Advanis Inc.

Contract number: HT372-194392 001 CY Contract value: \$249,730.00 (including HST)

Award date: March 10, 2020 Delivery date: July 6, 2020

Registration number: POR 114-19

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Ce rapport est aussi disponible en Français.



Background

Use of cannabis is common in Canada. In 2017, Health Canada's Canadian Tobacco, Alcohol and Drugs Survey (CTADS) found that 15% of respondents 15 years of age and older reported using cannabis in the past year, with males reporting use more often than females. Canadians 15 to 24 years old were significantly more likely to use cannabis in the past 12 months than those 25 years of age and older. Use is also common in students, with 18% of students in grades 7 to 12 reporting past year use in the 2018-2019 Canadian Student Tobacco, Alcohol and Drugs Survey (CSTADS). International data for cannabis from 2017 shows the United States had a lifetime prevalence rate of 45.2%¹, while Canada had a similar prevalence rate of 46.6%². Prevalence rates for past year cannabis use were highest in North America (13.8%) when compared to other regions (Oceania (10.9%); Africa (6.4%); Europe (5.4%); Asia (1.8%)) around the world³.

In the 2015 Speech from the Throne, the Government of Canada committed to legalizing, regulating, and restricting access to marijuana. In 2016, the Government's Task Force on Marijuana Legalization and Regulation issued a discussion paper entitled "Toward the legalization, regulation and restriction of access to marijuana" that initiated wider consultations and dialogue regarding its intention in this area (see: http://healthycanadians.gc.ca/health-system-systeme-sante/consultations/legalization-marijuana-legalisation/alt/legalization-marijuana-legalisation-eng.pdf for more information). In 2017, Bill C-45, an Act respecting cannabis and to amend the Controlled Drugs and Substances Act, the Criminal Code and other Acts, was introduced in the House of Commons. Implementation of the new Cannabis Act occurred in October 2018, creating a regulated legal market for non-medical cannabis for adults in Canada.

The legalization and regulation of cannabis in Canada has also prompted a policy and scientific requirement to collect new comprehensive data on the subject of cannabis use and non-use, including indicators in the areas of health, public safety, and markets. New research on cannabis use is helping the government better evaluate the possible impacts associated with its legalization, regulation, and restriction. In May and June 2016, Health Canada conducted the *Baseline Survey on Awareness, Knowledge and Behaviour Associated with Recreational Use of Marijuana* (administered by Ekos Research Associates). This study examined knowledge, perceived acceptability and health risks, patterns of recreational use, and information-seeking behaviours. This study found that 58% of respondents reported cannabis use in their lifetime and 22% reported use in the past 12 months. Among those who did not report use in the past 12 months, 85% felt they were unlikely to use cannabis once it becomes legal.

¹ United States Department of Health and Human Services. Substance Abuse and Mental Health Services Administration. National Survey on Drug Use and Health, 2017. Available from https://www.drugabuse.gov/national-survey-drug-use-health. Accessed December 12, 2019.

² Health Canada. Canadian Tobacco, Alcohol and Drugs Survey: detailed tables for 2017. Available from https://www.canada.ca/en/health-canada/services/canadian-tobacco-alcohol-drugs-survey/2017-summary/2017-detailed-tables.html#t13. Accessed December 12, 2019.The CTADS is conducted on a biennial basis.

³ United Nations Office on Drugs and Crime, World Drug Report 2019: annual prevalence of the drugs by region and globally. Available from https://dataunodc.un.org/drugs/prevalence_regional-2017. Accessed December 12, 2019.

The Canadian Cannabis Survey was first conducted in 2017. It examined, in more depth, patterns of use, such as the quantities of cannabis consumed and the use of cannabis for medical purposes; the cannabis market, such as sources of cannabis and pricing; and issues of public safety, such as impaired driving. The 2018 Canadian Cannabis Survey aimed to gather additional data, such as changes to willingness to publicly report cannabis use since legalization; exposure to education campaigns, public health or safety messages; respondents' usual source of cannabis products since the Cannabis Act came into effect; and relative levels of THC and CBD typically used. In 2019, Health Canada conducted the third cycle of the Canadian Cannabis Survey (CCS). It was in the field from April 4, 2019 to June 17, 2019 and collected data from approximately 12,000 people 16 years of age and older. Of the responses that were received, 3,968 responses were from people who indicated that they had used cannabis in the past 12 months for either non-medical or medical purposes. In 2020, as in previous cycles, all respondents were asked questions regarding cannabis use and non-use in Canada; patterns of use (e.g., age of initiation, frequency of use, quantities and products used); public concerns related to cannabis (including problematic use and drug-impaired driving); perception of risk and normalization; and use of cannabis for medical purposes and reasons for this use. In addition, the 2020 Canadian Cannabis Survey collected additional information on cultivation of cannabis plants in/around the home, impacts of the COVID-19 pandemic on cannabis use and relative levels of THC and CBD in each of the cannabis products used.

Objectives of the survey

The *2020 Canadian Cannabis Survey* aimed to gather additional information to track changes in data collected from the 2017, 2018 and 2019 surveys, more specifically patterns of use, such as the quantities used; sources and pricing; and issues of public safety, such as impaired driving.

In conducting this research, Health Canada's objective was to collect information on the following:

- Cannabis use and non-use in Canada;
- Patterns of use (e.g. age of initiation, frequency of use, quantities, and products used);
- Public concerns related to cannabis, including problematic use and drug-impaired driving;
- Perception of risk and normalization;
- Use of cannabis for medical purposes and the reasons for this use.

Methodology

The CCS was designed using a two-step recruitment process where respondents were first recruited by phone (land line or mobile) from lists of random telephone numbers. Respondents who passed a set of screening questions were then deemed eligible and were sent a link to an online survey, either by email or SMS (short message service) to their mobile phones. Respondents were asked if they used cannabis for either medical or non-medical purposes. A separate list of questions was asked of respondents who indicated they used cannabis for non-medical purposes. The average

time to complete the survey was 25 minutes for respondents who reported using cannabis within the past 12 months and 12 minutes for respondents who reported that they had not used cannabis.

Data collection commenced April 30, 2020 and ended June 22, 2020, and was conducted by Advanis. Survey findings were weighted by region, age groups, and sex at birth. The results for 2020 are based on online responses from 10,930 respondents aged 16 years and older across all provinces and territories. The CCS was designed to obtain a sufficient number of respondents from key sub-populations, and quotas were determined and met in order to ensure statistical relevance of results and representativeness.

Total expenditure

The total cost of this research was \$249,730.00 including HST.