



# Gathering Red River Métis Perspectives on Canadian Cannabis Legislation

## Authors:

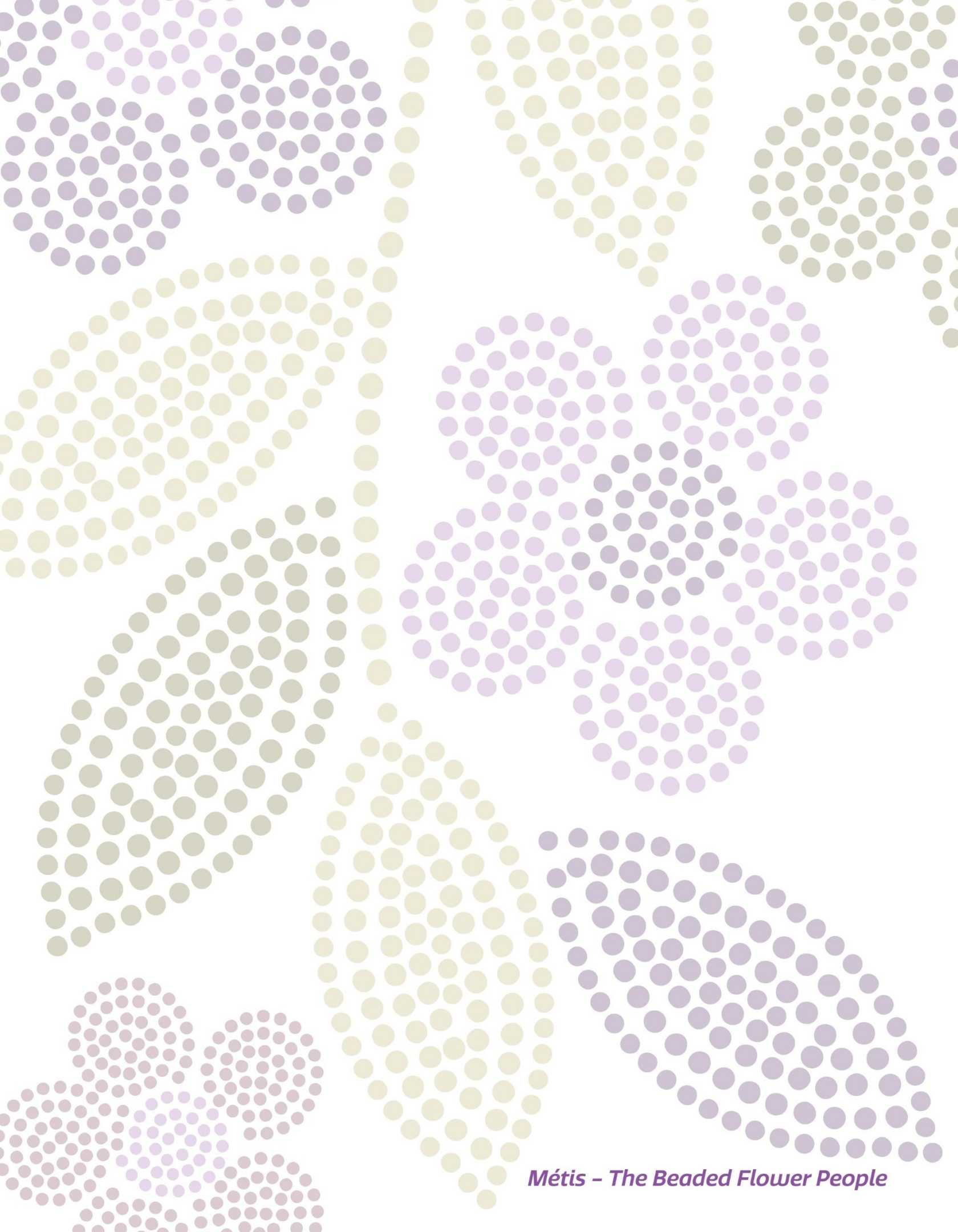
Oluwakemi Omole, MSc  
Alycia Fletcher, BSc  
Wajahah Mughal, MSc, PhD

Jasmine Langhan  
Olena Kloss, PhD  
Frances A Chartrand, BA, BSW

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Manitoba Métis Federation  
**Health & Wellness Department**







*Métis - The Beaded Flower People*



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Health & Wellness Department

Manitoba Métis Federation

150 Henry Avenue

Winnipeg, Manitoba R3B 0J7

Telephone: (204) 586-8474 ext. 2771



## A Message from the Minister of Health & Wellness

### FOREWORD FROM MINISTER FRANCES CHARTRAND

*It is with immense gratitude and a deep sense of purpose that I address the resilient and vibrant Red River Métis Citizens, our esteemed staff, and our invaluable funders through these words.*

*The idea of distinctions-based healthcare is crucial to the Manitoba Métis Federation. It recognizes the history and culture of Indigenous peoples, including Red River Métis Citizens, and acknowledges systemic inequalities. The MMF is dedicated to providing culturally sensitive and respectful distinctions-based healthcare to Red River Métis Citizens. We aim to nurture a healthier and prosperous future for our Community and create relevant programs and support for our Citizens.*



*Our Red River Métis Citizens have shown time and again their commitment to the betterment of our Community's health and well-being. Your voices, stories, experiences, and active participation in our research are the foundation upon which we build a future of improved health outcomes and holistic well-being.*

*To the remarkable staff from the Health and Wellness Department who facilitate research and program development for our Citizens I extend my deepest thanks. It is through your efforts that we have been able to gather meaningful data, provide a safe space for dialogue, and offer a platform for the voices of our Red River Métis Citizens to be heard.*

*No endeavor of this magnitude can be achieved without the support of those who believe in our vision. To our esteemed funders, your belief in our mission has enabled us to take strides toward implementing distinctions-based healthcare that not only acknowledges the unique needs of our Community but also paves the way for equitable and accessible services.*

*In closing, I want to reiterate my deepest gratitude to each and every one of you. Your participation, dedication, and support have transformed research from a mere endeavor into a beacon of hope and progress.*

*With heartfelt appreciation,*

*Minister Frances Chartrand*

## **Acknowledgements**

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## **Disclosure**

The results and conclusions in this report are those of the authors and no official endorsement by the Health Canada and Indigenous Services Canada or other parties is intended or should be inferred. For the purpose of this study, approvals were obtained from the Manitoba Métis Federation to work with Red River Métis in various Regions.

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## **Abbreviations**

CBPR: Community Based Participatory Research

HWD: Health & Wellness Department

KT: Knowledge Translation

MMF: Manitoba Métis Federation

FGD: Focus Group Discussion

UNDRIP: United Nations Declaration on the Rights of Indigenous Peoples

SGRIA: Self-Government Recognition and Implementation Agreement

## Executive Summary

This report gathers the perspectives of Red River Métis on the Canadian Cannabis Legislation. The motivation for this study arises from the paucity of distinction-based Indigenous research, as most Indigenous research uses a pan-Indigenous approach that fails the Red River Métis. Currently, there is limited information regarding cannabis use among Red River Métis in Canada. Given their differing lived experiences compared to other Canadians including First Nations and Inuit, it is important to identify the impact of the legalization of recreational cannabis and its resulting outcomes on the health and well-being of Red River Métis. The findings of this study will be used to inform policy decisions and guide future research to benefit Red River Métis Citizens.

The research team analyzed responses from over 100 Red River Métis Citizens, primarily females, who participated in one of seven moderated focus group sessions. Using descriptive statistics and thematic analysis the research team identified six overarching themes: the positive and negative impact of cannabis use, the positive and negative impact of cannabis legalization, cannabis use in youth, public education, public health safety and recommendations (these themes are explored in section 4).

Though participants' opinions varied, many reported benefits to the legalization of recreational cannabis, expressing curiosity about exploring other potential benefits. Several participants also noted concerns regarding youth impact, public education gaps, public health and safety, and the need for extensive cannabis-related research. Participants sought the need to employ efficient methods to engage Red River Métis youth to address indiscriminate use as a mechanism to cope with the existing effect of intergenerational trauma and the non-availability and accessibility of quality mental health supports.

# Section 1: Introduction

## 1.1 Project Context

Red River Métis-specific research is needed, as the Canadian Cannabis Survey (CCS) indicates that individuals self-identifying as First Nations, Inuit or Métis Peoples, report higher daily cannabis use for non-medical purposes and a younger average age of first use. Moreover, the 2022 Health Canada report, *Summary from Engagement with First Nations, Inuit and Métis Peoples: The Cannabis Act and its Impacts*, highlights a substantial research gap concerning the Red River Métis Community. This underscores the need for more focused research on the specific impacts of cannabis on Red River Métis health, as well as the necessity for developing Red River Métis-specific resources, with prioritization of prevention, education, and treatment support, especially for Red River Métis youth.

## 1.2 The Red River Métis

As a rights-bearing Indigenous People, the Red River Métis share a distinct identity and a unique history in the expansive western plains, with a focal point in the Red River Valley of West Central North America **Figure 1.2.1**. The National Homeland of the Red River Métis extends throughout the historic Northwest across prairies and into the United States. However, today the Red River Métis reside in locations both within and outside their National Homeland.

In this context, the Red River Métis Community goes beyond the conventional notion of a geographically limited "brick and mortar" community, such as a village or settlement. The Red River Métis Community embodies a collective identity, culture, and history, which includes interconnected political, social, entrepreneurial, economic, and kinship networks, among other attributes. In 1869, the National Committee of the Red River Métis, under the leadership of President John Bruce and Secretary Louis Riel, justly proclaimed the jurisdiction and authority of the Red River Métis over the entirety of their National Homeland. In 1870 the Red River Métis became the founders of the province of Manitoba and Canada's negotiating partners in Confederation.

Following a period of peaceful governance in the province, the Red River Métis experienced a Reign of Terror, which led to many being forcibly dispersed across the Métis Homeland and even beyond, predominantly moving westward and northward in their quest for safety and stability. To this day, the Red River Métis continue to grapple with the enduring consequences of the broken promises of *the Manitoba Act of 1870*, the Reign of Terror, the dispersal, as well as the legacy of Residential and Day Schools and the Sixties Scoop. Consequently, Red River Métis still find themselves disproportionately represented within foster care and among those who are unemployed, incarcerated, and suffering from chronic illnesses. Despite these broken

promises and the colonial acts perpetrated against them, the Red River Métis continue to fight to reclaim their rightful place in Confederation as Canada’s partners and the economic powerhouse of the plains.



**Figure 1.2.1.** Artistic Rendering of the National Homeland of the Red River Métis

### **1.3 The Manitoba Métis Federation**

Decades after the Reign of Terror and the dispersal, The Red River Métis People began to regroup and reorganize with the aim of improving the lives of Red River Métis Citizens historically treated unfairly. Nearly 100 years after the National Committee of the Red River convened to assert jurisdiction, the Red River Métis used the only available avenue for representation and incorporated the MMF as a non-profit in 1967. The MMF governance structure within Manitoba is presented in **Figure 1.3.1**.

In 1981, MMF launched a court case on behalf of the Red River Métis claiming that the federal government had failed to implement the land grant provision set out in section 31 of the Manitoba Act, 1870, as per the honour of the Crown. Thirty-two years later, in 2013, the Supreme Court of Canada determined that the federal government was constitutionally obligated by section 31 to fulfill its promise to the Red River Métis. Responding to this decision, Canada and the MMF signed a memorandum of understanding as well as the November 15, 2016, *Framework Agreement for Advancing Reconciliation to Advance Exploratory Talks on Reconciliation*.

In 2021, Canada and the MMF signed the *Manitoba Métis Self-Government Recognition and Implementation Agreement (SGRIA)* to “recognize, support, and advance the exercise of the Manitoba Métis’ [or the Red River Métis] right to self-determination, and its inherent right to self-government recognized and affirmed by section 35 and protected by section 25 of the Constitution Act, 1982, in a manner that is consistent with the United Nations Declaration on the Rights of Indigenous Peoples, through a constructive, forward-looking, and reconciliation-based arrangement that is premised on rights recognition and implementation.” This same year,

Canada's *United Nations Declaration on the Rights of Indigenous Peoples Act* (UNDRIP; the Act, 2016) received royal assent and came into force. Both the Act and the SGRIA commit Canada to working with the MMF to implement the UN Declaration, to advance reconciliation with Red River Métis, and to advance Red River Métis right to self-government and self-determination. According to the Manitoba Métis Federation Constitution, a Red River Métis Citizen

1. is an individual who self-identifies as Red River Métis;
2. is of historic Red River Métis Ancestry;
3. is distinct from other Aboriginal Peoples; and
4. is accepted by the Red River Métis as determined by Red River Métis law.

Furthermore, the Canadian endorsement of the UN Declaration on the Rights of Indigenous Peoples (UNDRIP) serves as a significant step that highlights Indigenous people's entitlement to self-determination and health. Articles 21 and 24 of the UNDRIP emphasize the right of Indigenous peoples to access healthcare without discrimination and engage in their traditional health practices (UNGA, 2007). The Declaration stresses that Indigenous peoples have "the right to be actively involved in developing and determining health ... and social programs affecting them" and highlights the importance of states taking proactive measures to protect these rights. Despite these commitments by the federal government, Canada's fragmented healthcare system has yielded inconsistent services for Red River Métis, a situation further exacerbated by a lack of distinction-based health legislation. To bridge this gap a dedicated focus on creating distinctions-based health legislation to support Red River Métis health is crucial. These historical factors have culminated in the creation and persistence of the MMF's Health and Wellness Department (HWD).





### **1.3.1 The Manitoba Métis Federation – Health & Wellness Department**

In 2005, after deliberation on the historically poor health of Red River Métis, the MMF established the Health and Wellness Department (HWD). Today, the HWD continues the fight to improve the overall health and wellness of Red River Métis Citizens. The HWD is committed to developing and using culturally grounded, distinctions-based, holistic knowledge. This commitment aims to enhance the quality of life and wellbeing of Red River Métis through prevention, health service delivery, research, and innovation.

The MMF's HWD is organized into the following four teams:

Health Research: Established in 2005, this team conducts qualitative research to grasp the viewpoints and encounters of Red River Métis Citizens with the healthcare system. The aim is to generate culturally appropriate Red River Métis-specific health insights by gathering lived experiences through consultations, group discussions, and individual interviews.

Clinical Services: Includes nurses, registered foot care nurses, registered dietitians and support staff that serve the Red River Métis Citizens by implementing strategies developed by MMF-HWD's health research and policy and health information team. The goal of this team is to improve Red River Métis health outcomes.

Policy & Health Information: Created in January 2022, this team focuses on developing Red River Métis-specific information to support policies, programs, and services for Citizens.

Community Programming: Formed in 2022, this team empowers the MMF-HWD to tackle Citizens' health requirements via diverse programs. Through community engagement and attentive listening, they customize health initiatives to ensure relevance, accessibility, and a positive impact on the overall well-being of all Red River Métis Citizens.

The MMF-HWD's commitment to collaboration with the Red River Métis Community has led us to grow, acquire knowledge, and discover innovative ways to support the health of the Red River Métis People.

## **1.4 Goal and Objectives of this Project**

The main goal of the project is to ensure Red River Métis Citizens are represented and heard in ongoing and/or future cannabis legislation dialogues.

The specific objectives of this study were to:

1. Gain an understanding of the ways Red River Métis Citizens use cannabis across all seven MMF Regions.
2. Provide an opportunity for Red River Métis Citizens to share their perspectives on cannabis legislation.
3. Support the creation and dissemination of cannabis education that is culturally safe and relevant to Red River Métis Citizens.
4. Develop Red River Métis specific recommendations for Canada's cannabis legislation.

## **1.5 Overview of Sections**

**Section 1** introduces the overall goals of the project and provides the reader with context about the history of the Red River Métis, the MMF, why the MMF-HWD exists, and why its research is needed.

**Section 2** highlights a brief literature review to familiarize the reader with current information regarding the Canadian cannabis legislation, and a background on the methodology and methods applied.

**Section 3** outlines the methodologies and design of data analysis while giving context to the methods used such as focus groups.

**Section 4** presents the findings of the study and explains each theme found.

**Section 5** concludes the report and makes recommendations for future work.

**Section 6** summarizes the limitations of the findings of the report.

## Section 2: Literature Review

### 2.1 Background and Previous Knowledge

In 2001, Canadian healthcare reached a historic milestone as federal legislation legalized cannabis for medical use, driven by extensive research highlighting its therapeutic benefits. People suffering from migraine, nausea, and symptom moderation for autoimmune diseases such as multiple sclerosis and fibromyalgia found relief in this plant-based therapy. Furthermore, medicinal cannabis use became a well-documented and crucial tool in palliative care, improving the quality of life for individuals in the final stages of illness. In 2018, the *Cannabis Act* came into effect, legalizing recreational cannabis use. This national change sparked a widespread interest in the positive and negative impacts of non-medicinal cannabis usage. While numerous studies highlighted its benefits, particularly in stress reduction and pain management, a growing body of evidence has raised substantial concerns about its potential risks—especially regarding cognitive function and brain health. The balance between positive and negative impacts of cannabis use remains a subject of intense debate and ongoing research.

Inappropriate use of cannabis has been shown to affect areas of the brain responsible for memory, learning, attention span, decision-making, coordination, emotions, and reaction time (Volkow et al., 2014). It has also been reported that cannabis negatively influences educational outcomes in youth (Fergusson et al., 2003), leads to an increased risk of depression (Chadwick et al; 2013), psychosis (Fergusson et al., 2005) or schizophrenia (Volkow et al., 2014). Given that brain development continues throughout adolescence, these effects are substantially concerning for young individuals (Lubman, et al., 2015). Canadian studies reveal the most common age to try cannabis is 16 and nearly 70% of youth have tried it by age 18 (Liquor Gaming Authority of Manitoba, 2017). One in five students in grades 7-12 have reported using cannabis to get high (Healthy Child Manitoba, 2017). Approximately one-tenth of users will develop an addiction (Volkow et al., 2014); for those who begin using it before the age of 18, the rate increases to one in six (Centers for Disease Control, 2018). The risk of addiction is heightened for individuals who start using cannabis at an early age or use it frequently, underscoring the importance of addressing these trends among young people.

A 2017 study in Manitoba revealed that 34% of Manitobans used cannabis four times a week or more (Liquor Gaming Authority of Manitoba, 2017); 5.4% of Manitobans use cannabis daily compared to the national average of 1.8%. The study also reported that males and younger age groups were more likely to consume cannabis and 43.5% of cannabis/alcohol users were mixing the two substances at least occasionally (Liquor Gaming Authority of Manitoba, 2017). A British Columbia study that focused on Indigenous populations revealed that 48% of Métis youth in that province have experimented with cannabis.

Of these, 23% had used cannabis six or more times in the previous month (Tourand et al., 2016). Despite these concerning trends, there is currently no data available on how the Red River Métis population perceives the Canadian cannabis legislation, leaving a gap in understanding the full impact of cannabis use within this community.

### **2.1.1 Métis Specific Population Statistics**

In 2006, there were 71,805 Métis in Manitoba, representing 18% of the Métis population in Canada. Of those Métis, only 4% were 65+ years of age (Statistics Canada, 2008). By 2010, the percentage of Métis in Manitoba aged 65+ had risen to 9.1% (Martens et al, 2010). As the demographics of the Métis population evolve, this study examines the experiences of registered Red River Métis across the province. Given that mental disorders account for approximately one-third of the world's disability, resulting in both personal suffering and significant socioeconomic costs globally (Canadian Mental Health Association, 2019), understanding these experiences is crucial in addressing the broader impacts on the Métis community.

The Aboriginal Peoples Survey reports most Métis live with at least two or more chronic diseases, a finding supported by in-house chronic disease surveillance studies (Martens et al., 2010). These studies have highlighted significant differences in morbidity, health service utilization, and other factors between Métis and all other Manitobans across different levels of geography (provincial, aggregate areas, health authorities, and Winnipeg community areas (Bartlett et al., 2012; Martens et al., 2010; Sanguins et al., 2013).

Further compounding these health disparities, previous studies conducted by the MMF have identified significantly higher rates of mental disorders in Métis Citizens when compared to other Manitobans. Findings from the *Depression and/or Anxiety Disorders and Related Health Care Utilization in the Manitoba Métis* study (Sanguins et al., 2013), showed that Métis Citizens had a higher prevalence of depression (22.0% vs. 20.3%), anxiety disorders (9.3% vs. 8.0%), depression and/or anxiety disorders (24.4% vs. 22.6%), and substance abuse (13.8% vs. 10.5%) compared to all other Manitobans. In addition, Red River Métis men and women had a higher crude depression and/or anxiety disorders prevalence compared to all other Manitoban men and women, respectively. In every income quintile, both urban and rural Métis Citizens had a prevalence of depression and anxiety disorders that was 15 times higher than that of their urban and rural Manitoban counterparts (Sanguins et al., 2013).

## **2.2 CBPR**

The background of the Red River Métis Community in Manitoba and their reported experiences of health disparities compared to all other Manitobans has necessitated research guided by a commitment to culturally

sensitive methodologies. Community-based participatory research (CBPR) is one such method that has emerged as an avenue for addressing these social, structural, and environmental disparities. CBPR engages community members, representatives from various organizations, and researchers at every stage of the research process to counteract these inequalities.

In conclusion, CBPR stands as a dynamic methodology that not only addresses the health disparities for disadvantaged groups but also fosters collaborative partnerships and equitable contributions. Its emphasis on shared goals, collective expertise, and transformative potential makes it a powerful tool in advancing public health research of Red River Métis, while respecting their unique systems of knowing.

### **2.3 Focus Groups**

Focus groups are a prominent and versatile technique for collecting qualitative data, and finding application across various academic, practical, and sociological research domains (Morgan, 1996). These approaches have not only gained recognition as standalone methods but also found their place in conjunction with surveys and other research methodologies. The true power of a focus group lies in their capacity to uncover the underlying factors driving intricate actions and complex motivations, thereby providing a unique lens for comprehending the rationale behind behaviors (Morgan & Krueger, 1993).

Further, the hallmark of focus groups, often referred to as "the group effect," contributes significantly to their strength. Within focus groups, participants engage in reciprocal questioning and self-explanation, creating a dynamic that transcends the sum of individual interviews. This setting facilitates the observation of both consensus and diversity among participants, setting focus groups apart as an avenue for capturing a broad range of perspectives. In essence, focus groups stand as a powerful tool not only for exploring complex behaviors and motivations but also for promoting a depth of interaction that enriches the research process. Their capacity to foster collective insights and diverse viewpoints highlights their significance in qualitative data collection as they allow for the mutual engagement, and distinct voices of the Red River Métis to be heard through a culturally sensitive lens, further signifying their importance within the context of CBPR.

### **2.4 Knowledge Translation**

Knowledge Translation Knowledge Translation (KT) is an important aspect of community-based research. KT means using *what we know* from research to influence *what gets done* in health/social programs/services to improve health. Its goal is to focus on the interactions between the research team and participants. This use is accomplished by generating and mobilizing research findings into a structured knowledge-sharing platform, ensuring appropriate engagement amongst researchers, policy developers, program deliverers, and



communities of interest. Knowledge dissemination enables translation of evidence into policy and practice and places emphasis on “*action*.” The application of KT is synonymous with the efforts of this research to conduct CBPR, focus groups, and data analysis such that Métis ways of knowing are respected and the disparities in the social and political life of the Red River Métis are accounted for to improve the quality of research outcomes.

## **Section 3: Methods & Methodology**

### **3.1 Methodology**

In keeping with the principles of CBPR and KT, this qualitative research was conducted in collaboration with Citizens of the Red River Métis Community. This study employed a targeted approach by focusing on the English-speaking Red River Métis population in Manitoba. Qualitative focus groups were used to collect information following the processes of CBPR. Red River Métis from across Manitoba were invited to take part in the focus groups by electronic recruitment on Facebook, email, and through the MMF's Community channels. Invitations were distributed to reach as many Citizens as possible with the hope of participation from a diverse sample with respect to age, gender, rurality, and other defining characteristics representative of the Red River Métis Community. Accommodations to promote attendance were made by MMF staff to ensure maximum turnout. About 200 Red River Métis responded to the open invitation to attend the consultation. Of those attending, 114 participated in the focus group sessions responding to questions about the Canadian cannabis legislation.

The MMF acknowledges and honors individuals of all genders and non-binary individuals, ensuring comprehensive representation in research, engagement, and public initiatives. This project incorporated gender-sensitive indicators in data-related materials and analyzed the data based on reported gender status, facilitating a holistic understanding that encompasses the narratives and experiences of all genders and non-binary individuals. This inclusive approach aligns with MMF's commitment to diverse and equitable representation.

### **3.2 Methods**

#### **3.2.1 Focus Groups**

A total of seven focus groups were moderated by MMF staff. Demographic data including age, gender, region was collected prior to the commencement of the discussion. Following this, focus group facilitators guided their respective sessions by asking Red River Métis participants a series of pre-established questions about their experiences with and perceptions of legalized cannabis. Responses from each session was audio recorded with an additional notetaker to capture remarkable attitudes, reactions, and interactions amongst participants.

### **3.2.2 Data Analysis**

Audio recordings from the focus groups were transcribed and coded to identify key ideas and phrases. At least two separate comments or mentions of a similar topic during the focus groups were required to establish a theme. Six overarching themes were identified after thematic analysis.

## Section 4: Findings

### 4.1 Study Sample

A summary of the participant demographics is illustrated in **Table 4.1**. The participants ranged in age groups from 16-70 years (MMF considers persons under 30 as youth). Most participants were between the ages of 50-59 and 60-69, with each age group accounting for 23% and 20%, respectively. Eighty-two percent of participants were females (n=90) and 36% (n= 41) stated that they were from the Winnipeg region.

**Table 4.1: Demographic characteristics of participants**

<b>Demographics</b>	<b>n</b>	<b>Percent (%)</b>
<b>Age group</b>		
<16	5	4
16-29	12	10
30-39	7	6
40-49	16	14
50-59	26	23
60-69	23	20
>70	16	14
<b>Gender/sex</b>		
Men	20	17
Women	93	82
Two Spirit	1	1
<b>Region</b>		
Interlake	21	18
Southeast	28	24
Southwest	21	18
Northwest	3	3
Winnipeg	41	36

### 4.2 Thematic Analysis of Responses

Participants were asked questions regarding their opinions about the cannabis legislation and how it affected them and their community. **Appendix 1**. Repeating comments were categorized into 6 overarching themes. Each following subsection represents the major theme. A few notable quotations taken from the participants are included alongside the description of each theme.

## Overarching themes identified:

1. Positive and negative impact of cannabis use
2. Positive and negative impact of cannabis legalization
3. Cannabis use in youth
4. Public education
5. Public health & safety
6. Citizens' recommendations

### 4.2.1 Positive and Negative Impact of Cannabis Use

The first major theme identified was the positive and negative impact of cannabis use. The occurrence of the key statements from this theme showed a wide array of experiences from the participants on both the positive and negative impacts of cannabis use. When considering the positive and negative aspects, participants held the perspective that when used for medical purposes, the positive impact of cannabis use outweighs its negative consequences. This notion was backed up by the feedback of participants on its effectiveness in improving the quality of life, specifically in the treatment of physical pain, stress and anxiety management, and alleviating sleep disorders.

*“I use it medically for arthritis and pain medication, it helps me to sleep, and it gets me motivated to get things done.”*

*“...unlike sleeping pills, I can sleep 7-8 hrs at night, and I can wake up in the middle of the night and go to the bathroom without any issues.”*

Another point of view was the economical and social advantage of cannabis over prescription drugs, it was agreed that cannabis was more affordable and accessible for the management of sleep, pain and mental health problems compared to prescription drugs. Likewise, participants viewed that cannabis use was less addictive and resulted in fewer behavioral and domestic violence attitudes compared to alcohol and other drugs like heroin.

*“Because I don't know someone who smoked a joint and went out and beat their wife or got behind the vehicle and smashed it or robbed a liquor store.”*

*“It is a lot cheaper than sleeping pills. And it has no side effects.”*

Though the positives exceeded the negative impacts of cannabis use, the participants thought the improper use by young people could negatively impact their developing brain including among persons with underlying illnesses and health conditions.

*“You have people self-medicating for anxiety and yes it helps at that moment, but continued use will actually lead to more depression and more anxiety.”*

*“I have ADHD and I have heard that people with ADHD benefit from it, but for me I think it gives me more anxiety. It makes me too anxious. I just can't.”*

#### **4.2.2 Positive and Negative Impact of Cannabis Legislation**

The second major theme identified was the positive and negative impact of cannabis legislation. The most common perception of the participants was towards the safety, stigma, and increased use post-legalization. It was the view of the participants that legalization had decreased the stigma associated with cannabis use. However, there were disagreements on how it had alternately led to an increased use, especially amongst Red River Métis youth.

*“It is almost like everybody wants to do it now...They did it before and now it is legal and so now everybody is like oh yea I do it. It is acceptable”*

*“I don't go anywhere that doesn't smell like marijuana everyday.”*

Another view shared was the assurance of a safe source of cannabis supply, hence less concern about the safety and quality of drugs being consumed although others viewed the legalization of cannabis to be a potential gateway for users to try harder drugs.

*“You are getting it legally and so you know it is coming from a good source and trustworthy place rather than getting it from black market.”*

*“They always start with smoking cigarettes and then marijuana and then it just escalates.”*

*“The issue I have with it is what next?... We don't see anyone fighting over marijuana but the harder drugs..... The legalization should stop at cannabis and not go into harder drugs.”*

#### **4.2.3 Cannabis Use in Youth**

The third theme identified was Cannabis use in youth. Older adults expressed their concerns about the health and well-being of the youth. They noted how legalization has encouraged an increased uptake of cannabis among Red River Metis youth. Participants noted that compared to most adults who tend to use



cannabis for medically related purposes and treatments, youth consumed cannabis recreationally and in considerably higher concentrations. Furthermore, participants expressed their concerns about the impact of cannabis use on a developing brain.

*“When they introduced the legalization, I saw firsthand both my teenage boys alongside the majority of their classmates say. Oh! They are going to legalize it. Let’s give ’er and then it was just widespread.”*

*“I worry about youth and their use. It is not a weekend thing for them. They are using a lot. Because they are mentally not doing well, they use it as a coping mechanism.”*

Additionally, peer pressure and inadequate access to mental health support was viewed as a contributing factor to the cannabis trend observed among the young population which is further exacerbated by trauma resulting from colonialization and transgenerational traumatic experiences within the indigenous population.

#### **4.2.4: Public Education**

The fourth theme identified is public education. Regarding Red River Métis-specific education, participants noted the lack of adequate public knowledge for informed decision-making. Participants emphasized the insufficient research and the need for public education that incorporates the history and teachings from a Red River Métis perspective. Participants also stressed the importance of recognizing the spiritual aspects of cannabis as a medicinal plant traditionally used by Red River Métis ancestors. This approach ensures that education is culturally relevant and acknowledges the deep-rooted connections between cannabis and Red River Métis heritage.

*“Marijuana has been there right for centuries; our ancestors used it for their pain and medicine etc....It is a sacred medicine.”*

*“This is a sacred medicine that has been stigmatized for many centuries and we need to bring that education piece of it”*

Participants also identified the huge gap in information regarding the specific short- and long-term effects of cannabis use across different demographics of the Red River Métis.

*“I have seen babies up north go into respiratory distress because of the mom smoking so much weed and it does something to the baby’s respiratory system.”*

*“Educating people on maybe the effects on the developing brain, just to make sure that youth understand that there is a consequence. It's not just therapeutic. There is also a side effect of using this.”*

It was the opinion of participants that the mode of communicating cannabis related information was ill-defined and not supportive of informed decision making. They stated that messages circulated pre-legalization portrayed cannabis as a “death sentence” which no longer applies post-legalization.

*“I remember before it was legalized, they portrayed weed as bad.....portraying the brain as eggs in a frying pan. When it became legal....it is amazing how different and acceptable it is now.”*

#### **4.2.5: Public Health & Safety**

The fifth major theme is the impact of legalization on public health and safety. Primary views revolved around the unregulated use of cannabis in open places and its potential impact on non-smokers through second-hand exposure. Participants noted that during the pre-legalization era, cannabis use was discrete and practiced within closed walls but post-legalization, had become an “open air affair”.

*“Before when it was illegal, it was done secretly...but now it’s like if you walk in the parking lot of almost anywhere you smell marijuana.”*

Another viewpoint highlighted imminent public health problem arising from the prolonged use and observed self-medication of cannabis as a substitute for seeking professional medical help on mental health issues.

*“You have people self-medicating for anxiety and yes it helps at the moment, but continued use will actually lead to more depression.”*

Participants also stressed their concerns regarding the diverse forms of cannabis such as cookies, gummies, brownies, and chocolate bars. Participants were concerned about the potential risk of these forms attracting children and teenagers to use cannabis.

*“The scariest part is... because the older ones are giving these edibles to the kids and so it is scary. I tell them not to take candy from anyone.”*

*“It is in the way it is packaged and sold, and it looks like candy. If you do not know what you are looking for, you will take that packet and it looks like your regular chocolate bar.”*

#### **4.2.6: Citizens' Recommendations**

The final theme focused on recommendations. A prevalent perspective within this theme was the necessity for extensive research on the short-term and long-term effects of cannabis use across diverse demography and the Red River Métis Community. Furthermore, Citizens emphasized the importance of conducting research using appropriate methodologies and adopting a distinction-based lens. Regarding cannabis use in youth, participants emphasized exploring effective strategies. Some participants suggested social media campaigns as a platform to raise awareness about the risks of Cannabis use among Red River Métis youth. Additionally, participants unanimously agreed that improving the availability and accessibility of mental health supports and services would help address the concerns about growing cannabis use among Red River Métis youth.

## **Section 5: Conclusion**

MMF-HWD plays a unique role in its vision of “A well Red River Métis Community” by developing and using culturally based and holistic knowledge to advance the health of Red River Métis Citizens. Through the responses gathered from the consultation, we have gained valuable insights into the firsthand experiences, perceptions, concerns, and perspectives of Red River Métis regarding Canadian cannabis legislation and its impact on their health and well-being.

The Canadian cannabis legislation has been found to play both positive and negative roles in the lives of Red River Métis Citizens and their communities. A prevalent view was the importance and benefit of cannabis in enhancing the quality of life in areas of pain, sleep, and anxiety management. Participants thought the legalization gave a sense of relief and safety in terms of the presence of a verified and monitored source of cannabis supply. We equally gained insights into the negative impact of the legalization, legalization of cannabis was viewed as a major contributing factor to the increased and unrestricted use of cannabis in the community especially among the youths, the reliance on cannabis as a “quick fix” to avoid taking greater responsibility of their health and seeking proper mental health supports.

When asked about what needs to be implemented regarding education on cannabis use, participants concurred that there was inadequate public information, education and resources to guide informed decision-making for cannabis users. Citizens emphasized the necessity for comprehensive research to facilitate public understanding and access to quality and adequate information regarding cannabis use, and its long-term impacts on the health and wellbeing of the Red River Métis youth. Citizens called for the inclusion of teaching cannabis awareness in schools and the development of more effective measures for example social media to engage more youths and educate them on cannabis use. They also called for more mental health support, resources and services, especially in rural Red River Métis villages and settlements.

The feedback gathered during this consultation has contributed to the expanding body of distinction-based knowledge and amplified the voices of Red River Métis. Furthermore, it will support the creation of cannabis education that is culturally safe and relevant to improve the health and well-being of Red River Métis Citizens.

In conclusion, this consultation with Red River Métis Citizens ensures that their voices and perspectives are represented and heard in ongoing and/or future cannabis legislation dialogues. We hope that key points shared in this report will be utilized by MMF leadership, and provincial and federal governments to inform the development and implementation of policies and programs around cannabis.

## Section 6: Limitations

**Sample Size:** The Red River Métis Nation is large and diverse; the relatively small sample size of this study limits its generalizability across the greater population. Barriers including, geographical limitations, and time constraints may have hindered the participation of more citizens in this consultation. A larger sample size could have allowed for greater representation across demographics. This includes more participants who identify as male, and younger age groups, the skew in the gender and age distribution could impact the range of perspectives gathered, particularly concerning the impacts of cannabis use across genders and age groups. This is particularly noteworthy when considering that, in general, men are more likely to use cannabis.

**Red River Métis Beyond Borders:** This research was focused on the province of Manitoba, Canada. It is critical to note that many Citizens live outside of Manitoba within the National Homeland of the Red River Métis and beyond. However, only participants from the seven MMF Regions in Manitoba were engaged in this study. Therefore, more research on Red River Métis Citizens living throughout the National Homeland and beyond is needed. Recognizing this deficiency is particularly critical as the MMF's Beyond Borders Taskforce found that Red River Métis residing outside of Manitoba have a variety of concerns regarding health, housing, and their access to the land (Manitoba Métis Federation, Beyond Borders Taskforce, 2022). Future research endeavors should aim to capture the experiences of Red River Métis Citizens living across the Nation beyond today's colonial borders.

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## **APPENDIX**

### **Gathering Red River Métis Perspectives on Canadian Cannabis Legislation**

#### **Focus Group Guide**

1. In what ways does cannabis currently play a role in your life?
  - a. If use cannabis personally, in what ways do you consume it?
  - b. Do you use cannabis for medical and/or healing purposes?
  - c. Do you feel cannabis use has a positive or negative impact on your overall well-being?
  - d. How is cannabis use currently viewed in your community?
  - e. How do you feel cannabis use impacts Red River Métis youth?
2. What are your opinions and thoughts about the Legalization of Cannabis?
  - a. What do you think are the health benefits and risks of legalization?
  - b. How has the legalization of cannabis affected you individually?
  - c. How has the legalization of cannabis affected your community?
  - d. What impact do you feel legalization has had on our youth?
3. Given the legalization of cannabis, what do you feel needs to be implemented when it comes to education about cannabis and cannabis use?
  - a. Are there existing cannabis resources in your community?
  - b. How do you think cannabis education can be improved?
  - c. What methods or approaches to education would be most effective for our youth?
4. Is there anything else you would like to share, or any final thoughts on the topic?



