



## Ontario Peer Development Initiative

Initiative ontarienne de développement favorisant l'aide entre pairs

Supporting Consumer/Survivor Initiatives Throughout Ontario

À l'appui de initiatives des usages survivants à travers l'Ontario

### **OPDI's Analysis of the Federal Cannabis Act, 2017**

The government webpage with complete information is [here](#). The Cannabis Act is summarized on [one page](#) in plain language. The original bill can be found [here](#).

What is important to understand is that the provinces are charged with deciding how to distribute and sell marijuana. They can also increase the minimum age for possession and use (set by the federal government at 18).

There are several key questions that could be especially concerning to PWLE (and especially those on fixed incomes and reliant on the Ontario Drug Benefit program):

1. The federal government proposes to limit each person to growing a maximum of 4 plants no higher than 100 cm for personal use. Let's say someone has chronic pain, anxiety, or has trouble sleeping – symptoms which can arguably be medicated by using marijuana. It's implausible that having such a limited supply can be sufficiently enough to be therapeutic for long-term use. Moreover, with recent concerns about levels of dangerous pesticides in commercially manufactured medical cannabis, growing a personal supply is economically sound and a healthy choice of action.

OPDI's Position: We believe a limit of 4 plants per person for personal use is too inflexible.

2. So, could medical marijuana be prescribed and paid for through the [Ontario Drug Benefit](#) plan? Or even the proposed [OHIP Plus](#) for people under 25 to start January 1, 2018? It would certainly be

controversial to be seen giving away free pot along with social assistance, and there is no guarantee such a policy would happen.

OPDI's Position: Medical marijuana's eligibility on the Ontario Drug Benefit formulary needs to be stated before January 1, 2018.

3. The jury is still out on the extent and age at which the developing brain of young people are sensitive to and affected by exposure to marijuana (which in this day and age can be [overwhelming](#)). Some stakeholders in Ontario may well be divided around at that starting age of 18 and may want to raise it.

OPDI's Position: We will monitor stakeholders' perspectives before taking a point of view.

4. Preliminary research in the United States where liberalization of marijuana laws have occurred reveals that opioid use has [fallen](#). It remains for scientists to assess whether the ingredients in marijuana can alleviate chronic pain, which is the cause of opioid abuse. Once Canadian precedents for best practices are established for medical uses, these federal guidelines will need to be revised.

OPDI's Position: If the therapeutic benefits of medical marijuana are established, it strengthens the rationale to put it on the ODB formulary.