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Dear Mr. Clare,

The Canadian Centre on Substance Use and Addiction (CCSA) would like to thank Health Canada for the opportunity to provide feedback on the proposed [Regulations Amending Certain Regulations Concerning Cannabis \(Streamlining of Requirements\)](#) published in the [Canada Gazette, Part I](#).

In May 2023, CCSA prepared a response to the [notice of intent](#) for a public consultation on potential amendments to the cannabis regulations: [Maintaining Public Health and Safety in Cannabis Regulation: A Response to Potential Amendments to the Cannabis Regulations](#).

This subsequent submission specifically addresses aspects of the proposed amendments that intersect with substance use health and have the potential to affect public health and safety.

## Licensing

- 1. RE: Health Canada is proposing to amend the Regulations so that organizations or individual researchers would be exempt from requiring a research licence when conducting non-human research (e.g. research on bacteria) while possessing no more than 30 g of dried cannabis or its equivalent at any given time.**

CCSA supports this potential amendment. We have also heard that licensing and regulatory requirements are cumbersome for researchers (Mental Health Commission of Canada & CCSA, 2024). CCSA agrees that no longer requiring a research licence when conducting non-human research while possessing less than 30 mg of dried cannabis or its equivalent could reduce obstacles to facilitating cannabis-related research in ways that do not compromise public health and safety. This amendment would enable more research opportunities to advance knowledge and understanding of cannabis, its effects and its impact on health.



## Packaging and Labelling

2. **RE: Health Canada is proposing to simplify packaging requirements (1) to allow for differentiation in colour between the lid or cap of a container and the container itself; (2) to permit cut-out windows on packaging for dried or fresh cannabis products and cannabis seeds, while upholding the exclusion of cut-out windows for all other classes of cannabis; and (3) to allow dried or fresh cannabis products in addition to cannabis plants and cannabis seeds to be packaged in transparent containers, while maintaining existing rules prescribing opaque or translucent packaging of all other classes of cannabis.**

The purpose for allowing a different colour between the cap or lid of a container and the container itself is not made clear in the published proposal for amendments. CCSA understands the reasoning for allowing a cut-out window for dried or fresh cannabis; however, if implemented, efforts should be made to monitor and assess whether this packaging change leads to any unintended outcomes, such as increased use of dried cannabis products. It will also be important to ensure that this does **not** provide an opening for further loosening of restrictions for packaging, such as the use of bright colours or designs that might be attractive to youth, eliminating child-resistant packaging or adding transparency windows on other cannabis products (such as edible products). It will also be critical that essential information, such as potency and health warnings, remain standardized and clearly visible, regardless of packaging colour.

3. **RE: Health Canada is also proposing to extend the current provisions allowing the co-packaging of multiple immediate containers of edible cannabis products into an outermost container to dried or fresh cannabis, cannabis topical, and cannabis extract products. Health Canada is proposing removing the cumulative 10 mg THC limit for an outermost container of edible cannabis product.**

This amendment would allow co-packaging of edibles with an extremely high combined THC content. CCSA understands that each immediate package would retain the 10 mg THC limit and child-resistant packaging. We believe an additional warning should be added to the label of the outermost container of edible cannabis product specifically indicating the risks of child consumption (Myran et al., 2022; Myran et al., 2023) and the importance of safe storage (CCSA, 2023). We believe there would be value in conducting research on whether this co-packaging influences purchase and consumption behaviours, and monitoring whether this amendment is associated with changes in cannabis-related pediatric emergency department visits or hospitalizations.

4. **RE: Health Canada is proposing amendments to expand labelling options by permitting the use of quick response (QR) codes on any container used to package a cannabis**



**product, permitting information inserts to be included with cannabis products, and by expanding the allowance for accordion or peel-back labels to all sizes of packages.**

CCSA supports providing more information to adults purchasing cannabis to help them make informed choices about which products to purchase and how to consume them. To this end, given the limited space on product packages and labels, we recognize the value of QR codes as well as informational inserts and leaflets in providing factual information. However, the current wording of “the use of QR codes on cannabis products *for any purpose*” is highly concerning. We recommend that the purposes should be defined and clearly indicated in the amended regulation. For example, we agree with the expert panel’s recommendation that any information communicated through QR codes, inserts or leaflets should convey only factual information to consumers within the constraints of what is permitted in promotional materials and on labels (Health Canada, 2024). If “for any purpose” is included, this amendment may unintentionally allow for promotional and marketing materials to be distributed to anyone with access to a cannabis product package, including youth.

**5. RE: Health Canada is proposing that the potency labelling would only be required for total THC and total CBD for all products.**

We support simplifying the potency labelling and requiring only total THC and total CBD to be displayed on the label. Research indicates that consumers’ knowledge of THC and CBD levels is low (Hammond & Goodman, 2022). Reducing the amount of information that is not relevant to the person about the product as it is intended to be used may help support increased understanding.

At this time, CCSA acknowledges that Health Canada is not proposing any mandatory label requirements related to a standard unit or dose. CCSA reiterates the importance of implementing a standard THC unit in Canada and its inclusion in mandatory label requirements. This would support informed decision making of adults who use cannabis and reduce the risk of associated harms. CCSA recommends adopting a 2.5 mg standard THC unit in Canada as soon as possible (Wood et al., 2024a; Wood et al., 2024b).

## **Record-Keeping and Reporting**

**6. RE: Health Canada is proposing to remove the requirement for licence holders to provide an annual report to the Minister outlining the amount of money they have spent on promotion.**

Evidence shows that even with the existing requirement to provide annual reports, there are violations to the current promotions and advertising restrictions in the *Cannabis Act* (Fournier & Gagnon, 2022; Sheikhan, et al., 2021). Advertising practices are reaching



youth (Noël, et al., 2024). Evolving marketing trends have resulted in the use of promotional and advertising strategies that are not explicitly prohibited by the *Cannabis Act*. Examples include framing messaging as “education” and using vivid imagery and frequent social media posts to make lifestyle associations or enhance product or brand ambience (Asquith, 2021). Restrictions on cannabis promotion that protect public health and safety should be preserved despite growing industry pressure to relax them (Crépault, et al., 2024).

We encourage Health Canada to reconsider this amendment as it may lead to unintended consequences and potential harm. Without regular reporting, there may be an increased risk of misleading messages, inappropriate advertisements or both, which could lead to misinformation about cannabis products. This is particularly concerning for vulnerable populations, including youth, who may be exposed to appealing but inappropriate promotional ads. Without regular reporting, it could take longer to stop or flag inappropriate promotional materials, so people might be exposed to them for longer periods. Ensuring that cannabis promotions do not target or mislead consumers is important for public safety. If regular reports are no longer required, there is an added and necessary burden of more robust and frequent surveillance, and easier ways for the public to report any misleading ads they see.

Further to CCSA's recommendation to maintain the required reporting, we believe these reports should be made available to interested parties. Within Canada's Tobacco Strategy, Health Canada has committed to aiding health stakeholders' research by publicly releasing industry reports (Health Canada, 2023). Therefore, not only should Health Canada require the continued submission of reports, but Health Canada should also publicly release the reports to improve the ability to monitor trends and signal any potential emerging risks to public health and safety.

The *Cannabis Act* allows informational promotion but prohibits promotions that can encourage cannabis use. It also prohibits promotions that can be attractive to youth. Therefore, CCSA encourages Health Canada to consider specifying in the amendments that promotional and incentivizing practices are not permitted, including offering temporary rebates and presenting products outside of the packages in which they must be sold. Both are prohibited in Quebec because they are deemed incentivizing. However, both practices are widespread, notably presenting cannabis edibles in a very appealing way to youth.

CCSA supports maintaining an evidence-based public health and safety approach to cannabis legalization and regulation in Canada. We are a trusted leader in advancing research and monitoring the impacts of cannabis legalization, and we support policy makers across Canada to make informed decisions about substance use.



Should you require any further information, evidence or support, please do not hesitate to contact me.

Sincerely,

Dr. Alexander Caudarella, MDCM CCFP AM ABAM(d)  
Chief Executive Officer  
Canadian Centre on Substance Use and Addiction

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