

# **TRACE IV** The TRACE4Parents Study

Parents talking to kids about cannabis
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Teens Report on Adolescent Teens Report on Adolescent Cannabis Experiences
Starting a new conversation

# What was TRACE IV?

TRACE IV is the continuation of the Teens Report on Adolescent Cannabis Experiences (TRACE) a qualitative, youth-focused research program that began in Vancouver, BC, in 2006. While the first three TRACE iterations focused primarily on youth experiences, we also spoke to educators, members of parent advisory councils, and other adults involved with drug prevention and education.

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A strong thread in the early TRACE findings was that cannabis use was often left unaddressed by parents or adult caregivers, who felt ill-equipped to engage in constructive dialogue about cannabis use with the young people in their lives. To address this gap, for TRACE IV, we sought the perspectives of parents. TRACE IV took place in two parts, prior to and following cannabis legalization in Canada.

The first component of the study was based out of Simon Fraser University in British Columbia from February to June 2016, where the team interviewed 16 people recruited from a peer-based support group for parents and caregivers whose children were engaged in substance use associated with harms. The findings suggested that parents felt primarily



responsible for their children's problematic use but recognized there was a lack of resources and support for meaningfully addressing cannabis use with their adolescent children. This early research produced a paper presented at the 4th Contemporary Drug Problems Conference in Helsinki, Finland, in 2017. A subsequent manuscript was published in the International Journal of Drug Policy in 2019.

With the announcement of Canada's plans to legalize cannabis, beginning in the fall of 2018, we undertook a second round of interviews in Alberta and British Columbia with parents who identified as cannabis users. We focused on parental cannabis use among parents of teens because we identified that parent-user perspectives were missing from conversations about youth cannabis education and prevention in the context of legalization. This report summarizes the findings from the second set of TRACE IV interviews, and academic publications from this study are currently in progress.

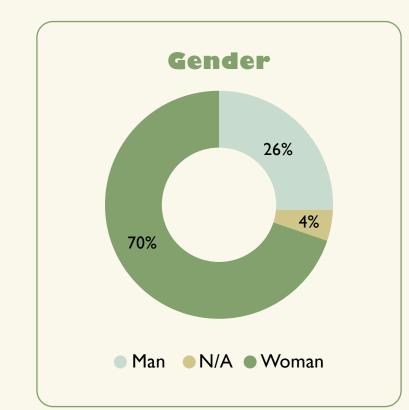


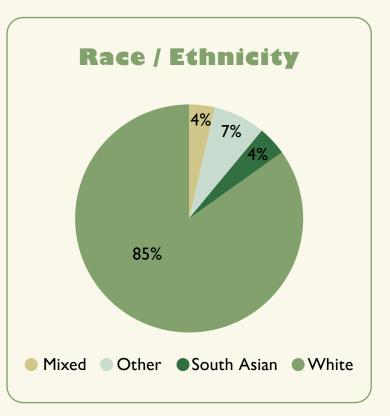
Data collection took place from October 2018 to October 2019, which coincided with the legalization of cannabis in Canada. We collected qualitative interviews out of both the University of British Columbia and the University of Calgary. We recruited participants through our research and service delivery networks and a mix of social media promotion and posters in public places and cannabis dispensaries. The interviews were conducted in person, at a location of the parent's preference, or over the phone; most often, the interviews took place at university offices and parents' homes. The interview discussions focused on understanding how parental medical and/or non-medical cannabis use shapes the context for the 'cannabis conversation' with youth and the types of educational resources and supports parents thought would be helpful to facilitate such conversations.

## Participant DEMOGRAPHIC and Background Information

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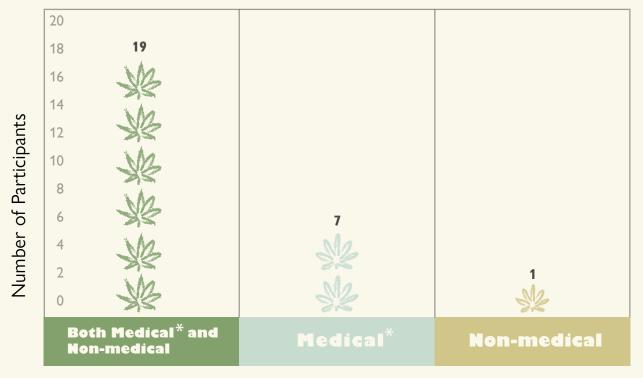
We interviewed 27 parents between the ages of 35 to 54, mainly from Vancouver, Calgary, and surrounding areas. The majority of parents identified as women (19, 70%) between the ages of 35 to 54 (18, 67%) and lived with a partner (18, 67%). Most participants were employed in some capacity (17, 63%) (full time, part-time or self-employed) and had completed post-secondary education (24, 89%). Most of the pparticipants identified as white (23, 85%); all parents reported current cannabis use (26, 96%), except one parent who solely used cannabis in the past. More than half used cannabis for both medical and non-medical purposes (19, 70%). Most participants had two children (16, 59%) with an average age of 15.





# **CANNABIS USE for Medical Purposes** and Non-medical Purposes





Type of Cannabis Use

\* Inclusion criteria encompass engaging in self-declared medical use without medical authorization.

# Codes

In qualitative research, we analyze the interview discussions using 'codes' to organize the different topics that arise. These are the common topics that parents discussed



# **Preliminary FINDINGS**



"They're going to do it if they want to do it, just like adults did when it was illegal, they still smoke it and nothing stopped them, teenagers are still going to do it."

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#### What did we learn from the INTERVIEWS?

#### 📉 Stigma

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Some parents expressed that because of their cannabis use, they experienced stigma from other parents and people within institutions (i.e., school staff, government). We also heard that parents had received the message that parental cannabis use can lead to 'unsuccessful' parenting and adverse health effects. Many participants voiced concern that their adolescent children would also experience 'stigma by proxy' because of their use of cannabis.

> "It's all the bullshit rhetoric about around, you know if somebody smokes, uses cannabis, they're a stoner."

#### Harm Reduction and 'Safer Use'

There was consensus amongst the parents that their experience as cannabis users would permit an open and 'safe place' for discussing use should their adolescent children begin to use cannabis. One parent offered that:

"If you're not that safe space then they're going to find it elsewhere, unfortunately, and that might not be such a safe space."

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An overarching theme was the desire to prevent harmful use by teaching youth moderation and by making sure that they were also modeling responsible consumption.

"Having parents kind of be able to talk to their kids about, well, why are you curious about it, why would you want to use it, why are you using it now? right, because escaping from a reality is a totally different set of dynamics than, um, occasional use or using it for medical reasons to cope with anxiety or depression or anything like that."

#### **The Changing Legal Context**

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"The legalization means that the conversation is no longer taboo, facilitates the conversation, alright, or that people can maybe (be) more aware."

Most parents agreed that legalization de-stigmatizes cannabis use and creates a context for more open discussions about parental use. However, some also commented on apparent policy disparities and were critical of the severity of criminal sentences for ŧ. providing young people with cannabis in Canada (up to 14 years, as per the Federal Cannabis Act), which are much greater than alcohol (up to six months and/or a 10,000 CAD fine under Alberta provincial law).

ŧ Some parents discussed how the history of cannabis prohibition in Canada disproportionately affected parents and families from Black and Indigenous communities, recognizing how class ŧ and racial privilege shape stigma. Despite cannabis being legal, parents remained somewhat ŧ cautious about disclosing use and apprehensive that being seen as encouraging or permitting ŧ use by their teens could result in outside intervention. Concern for their children's well-being was at the center of these conversations about stigma. ŧ

"Cause now like there's like way stricter like penalties for giving your child let's say cannabis, something someone told me it's like 15 years or something...which is ridiculous cause we don't have the same legislation for alcohol."

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#### Parental Cannabis use and Other Drug Use

When discussing their cannabis and other substance use, some parents disclosed that ŧ. they had discussions about this topic with their children. Some participants told us that their children previously voiced a dislike for the cannabis smell when they consumed ŧ. it when their children were nearby. On the other hand, some parents actively hid their cannabis use from their children, but emphasized there was no shame or ŧ. embarrassment about their use; instead, there was some discomfort in sharing it with their teen children. Participants focused conversations between themselves and their ŧ children regarding their experiences with substance use, the potential for addiction and the health risks of substance use. Parents voiced a perceived double standard in that, ŧ. generally, people do not speak about the benefits or positive aspects of cannabis use, unlike the benefits of alcohol (i.e., alcohol as a social lubricant).

> "Well [Name of son] doesn't really know that I use cannabis, I don't talk about my use with cannabis, I don't use cannabis around him or anything like that."

#### **Family Cannabis Discussions**

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When parents discussed cannabis use with their children, they provided insights on how to create opportunities for new types of cannabis conversations. Parents voiced that ŧ establishing space for open and meaningful discussion about cannabis is essential. Many agreed that for the conversations to happen, creating a context of safety for their ŧ children was crucial; this enables them to speak about any topic with their parents. ŧ. Other recommendations included talking about cannabis when children initiate the ŧ. discussion, adopting a flexible and friendly attitude, being sensitive to mental distress, answering questions, and assessing maturity and age appropriateness. Parents shared ŧ their approach to these conversations was centered on honesty and transparency, ŧ helping to demystify substances. One interesting suggestion was for parents to include ŧ children when searching for cannabis information, so that their children learn how to find information from reliable sources. Other tips included listening listening more than ŧ. talking and avoiding being judgmental or overreacting. ŧ

ŧ. Some parents stated that self-awareness is critical; if the parent does not know enough about cannabis, either becoming informed or including a knowledgeable person can help ŧ. facilitate the cannabis conversation. Some parents spoke about boundaries and how 룿

these are subjective depending on the family composition (i.e. in a blended family, not all parents may have the same comfort level with this topic or even want to discuss it). We also heard from a few parents who used cannabis, but disclosed that they wanted to delay the cannabis conversations as much as possible as a way to protect their children from learning about the substance.

" [Their children] live in a blended family. So there was my, I had a lot of fear that they were going to, you know, hear things from their dad about me using cannabis, even as a medicine."

# Sources of cannabis knowledge and expertise

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"The transfer of knowledge is not there."

Parents commented on how they obtained cannabis information. Parents shared that personal experiences and online searches for published studies and accurate research evidence were the most common methods of obtaining information. Frequently, parents ŧ shared that they obtained cannabis information from people working in the cannabis industry. Parents voiced that they received conflicting information from physicians ŧ and other sources and encountered what they saw as biased information from non-users. Some parents also expressed that they did not possess much cannabis knowledge. ŧ When addressing cannabis information and resources specific to parents who may use cannabis, there was a general sense that there is not much information or supports that ŧ. is accessible.

"Dangerous for people to assume that information is correct. Just because they read it on the internet or because that teacher told them that. Right. Like not everything that a teacher tells you is, is, is accurate or factual."

"Give them all information without judgment."

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# Type of resources

Parents discussed the available resources that address youth cannabis use and resources to support parents in having the 'cannabis talk.' Some parents commented that having an anonymous and confidential helpline for children to call or text could be a helpful resource. A couple of parents agreed that printed materials (posters, pamphlets, etc.) could be an excellent support for informing children and themselves. Some parents agreed that education should integrate cannabis into the educational curriculum; which should include information that comes from evidence-based sources and experts in the subject. Parents were clear about about the necessity for resources that facilitate difficult discussions in families.

# **Publications**

The information collected during this project has allowed gaining a deeper understanding of the parent-child relationship when exploring the cannabis conversation with youth. So far, the team has published two articles based on these data. The first addresses the assumption that parents are the best prevention in the pre-legalization context, which uncovers how parents are viewed as responsible for their children's problematic cannabis use. The second is an environmental scan of the cannabis education resources available online for parents, revealing that the messages within the currently available resources are primarily abstinence-based.

Additional papers from our interviews with parents are planned and will be posted at: (http://rsaah.ucalgaryblogs.ca/)



	International Journal of Drug Policy Volume 68, June 2019, Pages 132-138	
	'Parents are the best prevention'? Troubling	
	assumptions in cannabis policy and	
	prevention discourses in the context of	
	legalization in Canada	
	Rebecca J. Haines-Saah * 우려, Sarah Mitchell *, Allie Slemon <sup>b</sup> , Emily K. Jenkins <sup>b</sup>	
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