

Cannabis Legalization in Canada: A Critical Examination of Canada's Failure to Protect Youths and Reduce Harms Associated with Cannabis Use

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Abstract

This paper critically examines Canada's approach to cannabis legalization, focusing on its failure to protect youth and reduce harms associated with cannabis use. While legalization aimed to restrict access and safeguard public health, inconsistent provincial regulations, inadequate education programs, and rising youth cannabis use have seriously undermined these goals. The paper compares Canada's approach to Uruguay's centralized, health-focused model, which has successfully reduced adolescent cannabis use and reliance on the illicit market. Recommendations include implementing a standardized national legal age, effective harm reduction strategies, and comprehensive education programs to address the gaps in Canada's cannabis policy and better protect youth.

Introduction

When Canada legalized cannabis in 2018, one of the goals for the legalization was to protect access to cannabis and decriminalize legal users. However, the legalization of cannabis was rushed due to pressure from the federal elections, leading to inadequate policy review. Instead of implementing a well-structured national system, the federal government shifted responsibility to the provinces, resulting in inconsistent regulations across the country. Some provinces adopted strict policies, while others took more lenient approaches or delayed enforcement. Although the government planned to support regulations later, the initial rollout lacked uniformity and proper management. The government's lack of effort in safeguarding youths since legalization has proved highly ineffective. This paper will analyze the *Cannabis Act's* creation, integration, reinforcement, and investigate the continued appeal of cannabis to youth in Canada. The federal government's implementation of legalization may have resulted in adverse circumstances for youth in Canada, which will be further explored throughout the paper. The federal government must implement a standardized, non-comprisable legal age standard across all provinces and territories for the consumption of cannabis. In addition, the government must look at implementing non-punitive approaches to illegal consumption for minors and invest in education programs for youths and parents. Introducing this method into policy for youths will be more in line with nonpunitive approaches for adults. Looking at international models, such as Uruguay's legalization of cannabis, the Government of Canada should consider a clause for safe consumption by youths of a certain age.

Cannabis Legalization

Cannabis was legalized in Canada for several key reasons, one of which was protecting youth from cannabis related harms by implementing a standardized, government run system that

required age verification. The government aimed to restrict access to cannabis for young people and reduce the negative health impacts associated with its use (*Cannabis Act*, SC 2018, c 16, s 7; Rubin-Kahana et al., 2022). There are conflicting opinions and data regarding cannabis use by youth, with studies suggesting a decrease in cannabis use trends among youths prior to legalization. According to Health Canada (2023) the most recent data from the *2023 Canadian Cannabis Survey* shows that cannabis use among youth (ages 16-19) has increased compared to 2018, the year cannabis was legalized in Canada. In 2018, 36% of youth reported using cannabis in the past 12 months and whereas in 2023 the percentage rose to 43% (Health Canada, 2023). While this does not indicate a steady year-over-year increase, it does suggest that youth cannabis use has risen higher than pre-legalization levels. According to the *Legislative Review of the Cannabis Act* (2024), use has not decreased in the same way that youth smoking and alcohol use have. It further mentions that Canada continues to report among the highest rates of youth cannabis use in the world. Despite this, the *Legislative Review* also mentions protecting youth from cannabis, and it acknowledges that more needs to be done to reduce youth cannabis use and related harms (Health Canada, 2024). This confirms concerns about the persistently higher rates of youth use pre- legalization and post-legalization and the need for stronger prevention efforts.

The *2023 Cannabis Survey* reports that 73% of users now obtain from legal sources compared to only 37% in 2019 among ages 16-19 years (Health Canada, 2023). A key reason for this increase is the greater availability of legal cannabis. Since legalization, the number of licensed cannabis storefronts has exploded, making it easier for the public to access cannabis. While this shift reduces reliance on the black market, it may also contribute to indirect access for youth, as they may obtain cannabis through older peers or family members who purchase legally. Additionally, diversification in products increases youth appeal. According to the *Legislative Review*, product design for appeal acknowledges the importance of maintaining strict control on product design to prevent appeal to youth and protect public health. While some adjustments to packaging and labelling rules are suggested to improve consumer information, the core restriction on promotion, packaging, and product design remain essential to achieving the Act's objectives for protecting youth from cannabis (Health Canada, 2024). Cannabis is now available in forms like flavored edibles, drinks, vape pens, and extract, which are easier to consume and more attractive to young users (Rubin-Kahana et al., 2022). One province has attempted to mitigate this through legislation that prevents using advertising, branding, and packaging that could appeal to youth. For instance, Quebec has banned most cannabis edibles that resemble desserts or confections such as brownies, gummies, and chocolates, to reduce their attractiveness to minors (Foster, 2019). No other jurisdiction has attempted similar legislation. While these restrictions aim to protect youth, they may also inadvertently push consumers towards the illicit market, where unregulated, high potency edibles remain widely available. Quebec's restrictions do not extend or regulate the illicit market, which remains highly operational throughout Canada.

The change in youth perception of cannabis risk is another contributing factor to the increased cannabis use among adolescents. Prior to legalization, cannabis carried stronger stigma, deterring some young people from experimenting with it. As cannabis has become

legally regulated with a steady decline in stigmatization of the substance, some youth may perceive it as less harmful, leading to increased use (Rubin-Kahana et al., 2022). The federal government has left marketing and distribution of cannabis in the hands of provincial governments. Provincial governments, save Quebec, have not implemented enough attention to restrictions on youth targeted marketing or harm-reduction resources for youth involved in purchasing from illicit markets. While legalization has allowed for better regulation and quality control for adults, it has also led to greater accessibility, product appeal, and shift in social attitudes that contribute to an increased use of cannabis among youth. Given all these factors, it is plausible to say that the Canadian government has not implemented a sufficient policy to address cannabis use among youth groups, thus not fully realizing its goal of protecting youth from cannabis use harms.

Health-Related Consequences of Cannabis Use Among Youth

Cannabis use among youth is associated with various health-related consequences, including an increased risk of mental disorders, clustering of substance use, and behavioral risks. Youth who engage in multiple forms of cannabis use report higher levels of depressive symptoms, suggesting a potential link between multi-model cannabis use and depression (Zuckermann et al., 2021). This type of cannabis use is also associated with a greater likelihood of binge drinking, e-cigarette vaping, and regular cannabis use, indicating a clustering of substance use behaviors (Zuckermann et al., 2021). Youth who start using cannabis from a young age also present with having early mental health symptoms. This can lead to higher externalized disorders such as difficulty paying attention and impulsive behavior. This can also lead to involvement in crime and violence-related behaviors (Hawke et al. 2020, p. 118). A severe health consequence related to cannabis use is cannabis induced psychosis. Substance-induced psychosis as defined by Beckmann (2020), involves hallucinations and/or delusions caused by intoxications or withdrawal from a substance. McDonald et al.'s (2024) study "Age-Dependent Association of Cannabis Use with Risk of Psychotic Disorder" provides evidence that cannabis use during adolescence (ages 12-19) is significantly linked to an increased risk of developing psychotic disorders. The adjusted number hazard ratio (aHR) for adolescents who used cannabis was 11.2 (95% CI 4.6-27.3), indicating strong correlation. This association was even stronger when focused on hospitalizations and emergency department visits, showing an aHR of 26.7 (95% CI 7.7- 92.8) (McDonald et al., 2024, p. 2929). The study found no significant association between cannabis use and psychotic disorders during young adulthood (ages 20-33) with an aHR of 1.3 (95% CI 0.6-2.6) due to ongoing brain development, which may increase the risk of developing psychotic disorders (McDonald et al., 2024, p. 2930). This indicates that there is a correlation between early cannabis use and mental health conditions, such as depressive and psychotic disorders, underlining the need for targeted prevention efforts and harm reduction strategies.

Emergency Visits

Canada's failure to implement effective regulations in its cannabis legalization has led to a troubling increase in cannabis related emergency department (ED) visits among youth, exposing the policy's inability to reduce harm and protect vulnerable populations. A national

scoping review on youth and young adults' cannabis use found clear evidence that legalization has been accompanied by increases in cannabis-related ED presentations, including acute intoxication, anxiety, and poisoning, particularly from high-potency products and edibles (Kourgiantakis et al., 2024). These harms are closely tied to the post-legalization commercialization of cannabis, which made potent extracts and edibles far more accessible to young people. The review also identified provincial differences. In Alberta, there was an increase in unintentional ingestions among children aged 0-11 years and adolescents aged 15-17 years (Kourgiantakis et al., 2024). Similarly, research from Quebec found that 70% of the substance-related hospitalization among boys aged 10-14 years involved cannabis post-legalization, compared to 39.3% prelegalizations years (Kourgiantakis et al., 2024). Together these findings demonstrate that legalization has not reduced harm for youth; rather, it has increased the rate of cannabis-related health risks and placed greater pressure on emergency health services. These numbers may even underestimate the true extent of harm, as youth are less forthcoming about cannabis use when visiting health services, especially those considered to be minors chaperoned by their guardians which can lead to underreporting in clinical settings. Legalization has certainly given us some baseline data to work with; however, it may be several years before realizing more in-depth research into youth cannabis use and hospitalization may be generated. Another study found that post-legalization, youth emergency visits for cannabis-related disorders and poisoning increased by approximately 20% in Ontario and Alberta (Callaghan et.al., 2023), translating to nearly 15 additional hospital visits per week. This suggests that the government failed to anticipate the unintended consequences of legalization. Instead of reducing harm, legalization contributed to riskier consumption patterns, caused by access to higher THC products and misconceptions about cannabis among youth. This raises critical questions not only whether more youth are using cannabis also whether they are consuming it in riskier ways, leading to more severe health consequences. Despite the government's claim that cannabis legalization was to protect the youth by increasing regulation and safety measures, this does not align with the results of the *2023 Canadian Cannabis Survey*.

To address these failures, Canada must first critically reassess its approach to cannabis education and regulation. Having stricter regulation will not necessarily reduce cannabis use among youth, as those who wish to use the substance will find a way of obtaining it whether it is through regulated suppliers, or more likely, the illicit market. The government should be developing and providing interactive, evidence-informed, harm reduction-focused cannabis education for youth (Howe et al., 2023, p. 767). This includes creating resources that address micro- (resources for youths), meso- (resources for parents/educators), and macro-level (resources for medical professional/community leaders) influences on health literacy including materials for youth, educators, parents, and communities (Howe et al., 2023, p. 772). The government must also conduct formal evaluations of cannabis education programs to determine their effectiveness and improve future initiatives (Howe et al., 2023, p. 774). Introducing stronger penalties for adults who provide cannabis to minors, like alcohol regulations, could potentially limit indirect youth access. If the government does not take accountability for this problem, the rising trend of cannabis related hospitalizations among youth will likely continue, undermining the very purpose of legalization.

Age Inconsistencies Across Jurisdictions

A major malfunction of the legislation was the federal government handing over execution, implementation and enforcement of cannabis legalization to the provinces without additional clarifications and standardization in the policy. This allowed provincial governments to do as they please with the federal regulation. The federal government's approach, which allowed provinces and territories to set their own minimum age for legal cannabis purchases have contributed to inconsistencies that exacerbated existing issues. While some provinces have an equal minimum age for cannabis and alcohol at 18 like Alberta, most other provinces have a minimum age of 19, and Quebec has the highest minimum legal age (MLA) of 21 years old. This inconsistency can contribute to the persistence of purchasing from the illicit market among youth, as those within provinces with higher minimum ages might turn to illegal sources to obtain cannabis. Additionally, there is nothing restricting a resident in one province from traveling to another province where they may be considered of legal age for consumption. One study found that the provincial public health institute in Quebec opposed the increase to 21 years of age, suggesting that allowing youth aged 18-20 years purchase lower risk products would be a better approach to reduce the illicit market reliance (Rubin-Kahana et al., 2022). Quebec having a minimum consumption age of 21 years old is understandable and shows a level of caution not taken by other provinces; but its strictness may push youth to the illicit market or lead to more dangerous consumption patterns. Higher MLA's may drive youth toward illegal sources to obtain cannabis, as they are unable to purchase legally until they reach the required age (Wadsworth et al., 2022). Another issue is that higher minimum ages can lead to more youth being penalized for possession of cannabis even in small amounts, which can have long-term legal and social consequences (Rubin-Kahana et al., 2022).

According to Rubin-Kahana et al. (2022), despite its negative impacts, raising the minimum age could delay the onset of cannabis use, which is beneficial as early imitation is associated with higher risks of dependence and adverse cognitive mental health outcomes. Having higher age regulations has been shown to have little effect, and it is instead early education that has shown to be most effective. While raising the minimum age aims to protect youth, it must be balanced with strategies to mitigate the potential negative consequences, such as the increased reliance on the illicit market (Rubin-Kahana et al., 2022). A balanced approach that combines regulations, education, prevention, and enforcement is essential to protect youth effectively.

After legalization, the number of regulated suppliers has increased, and more drastically in some provinces such as Alberta. This visibility of regulated cannabis suppliers may act as an advertisement of availability for youth. While perception may not be studied in relation to retail cannabis suppliers, it is important to note that there is some connection between the visibility of suppliers and the public (Wadsworth et al., 2022). Yet, many youths who are below the MLA may find it more convenient to purchase from illegal sources, which do not have age restrictions, meaning a restriction on stores cannot fully fix the problem. This turn to illicit markets has clear adverse effects as youth who cannot access legal cannabis may miss out on higher quality and safer products available in the legal market, potentially leading them to consuming lower quality and riskier illegal cannabis. Lastly, the major issue is price; legal

cannabis is generally perceived as more expensive than illegal cannabis, although the price differential has narrowed over the years (Wadsworth et al., 2022). Some youths are therefore driven to the black market due to the higher cost of legal cannabis especially if they are already impeded by MLA restrictions (Wadsworth et al., 2022). While the increased availability of legal cannabis through retail stores is a positive development it is not a comprehensive solution to the challenges faced by youth seeking access to cannabis. The convenience of illegal sources, combined with the higher costs of legal options and the age restrictions imposed by the MLA, contribute to a continued reliance on the illicit market. Looking into this issue requires a varied approach, including efforts to make legal cannabis more accessible and affordable for young people, alongside education about the benefits of legal products. Clearly efforts to raise the minimum age are ineffective due to the ease with which youth can still obtain cannabis through social sources, such as older peers and family members. Instead of focusing on restrictive policies, the government should prioritize harm reduction strategies, including comprehensive education.

Lack of Education

Despite the legalization of cannabis in Canada, public education efforts have fallen short in effectively informing youth about its risks and responsible use. The increase in cannabis use among young adults aged 18-21 since legalization suggests that many are experimenting with cannabis without fully understanding the potential harm (Kourgiantakis et al., 2024). This indicates that there is a gap of awareness, as legalization does not equate to safety particularly when it comes to health consequences. While youth under 18 have shown mixed trends in usage, emergency department visits related to cannabis, especially among young children and teens have risen, showing the consequences of misuse (Kourgiantakis et al., 2024). This demonstrates that there is also parental and societal lack of awareness regarding safe storage and responsible consumption. The lack of a strong standardized educational structure has also led to conflicting perceptions of youth (Kourgiantakis et al., 2024). Without proper evidence-based guidance, young people are left to navigate conflicting messages, which are often influenced by peers, media, or even the cannabis industry itself. There are studies such as McDonald et al. (2024) that indicate concerns about cannabis risks brain development, mental health, dependency and addiction, impaired decision making and increased risk taking and long term social and economic impacts.

Simultaneously, some studies point to a growing normalization of its use, suggesting that the misinformation may be leading to the increase. The education gap is a huge concern, especially during the COVID-19 pandemic. As discussed earlier, studies have shown a rising trend, while others show mixed trends, in cannabis use among youths. If there is no proper education, first-time users, especially the youth, may be more vulnerable to developing risky consumption habits. There has been improvement in some places and there has been declines towards cannabis related offenses among youth, but it does not indicate a reduction in harm. The government needs to have more prevention tools that indicate that education programs can be effective if implemented correctly. However, the government still lacks in the provision of harm-reduction education. If there were more education programs regarding cannabis consumption for youth, maybe there would be a decrease in cannabis use, cannabis-related

hospitalization or cannabis-related harms. One sign of this lack of education is the prevalence of youth driving under the influence (Donnan et al., 2022). However, research done showed mixed messaging received in differentiating the overall safety of cannabis compared to alcohol has led some youth to believe that driving under the influence of cannabis (DUIC) is safer than driving after consuming alcohol (Donnan et al., 2022). This is not to say that driving under the influence of any substances is a safe mode of functioning. This is to say that more education programs are required to prevent any sort of driving under the influence of any substance for the protection of youths and the public. The key challenge in cannabis education for youth is focused on narrow messaging, because many current cannabis related messages adopt a narrow view of youth cannabis use, focusing solely on risks and harms, which may not align with how youth experience cannabis (Watson et al., 2019, p. 472). Most provinces and territories have not fully revealed concrete details regarding youth engagement in developing and delivering educational initiatives (Watson et al., 2019, p. 474). Youths desire reliable, evidence-based educational material and can be credible partners in creating resources (Watson et al., 2019, p. 474).

There is also a need for balanced discussion that not only shares information on risks and harms but also acknowledges potential benefits of cannabis (Watson et al., 2019, p. 474). The government needs to look into reality-based programs that recognize both harms and benefits of substance use, emphasizing harm reduction for those contemplating or currently engaging in cannabis use (Watson et al., 2019). While the public health campaign has primarily focused on dangers of cannabis use, the government should prioritize reality-based programs that provide an honest approach on the benefits and risks of cannabis use because this kind of initiative can bring a huge difference. Some provinces are improving, like Manitoba which unveiled the “Know the Risks” campaign, which warns young people about the potential risks of cannabis, such as addiction and effects on brain development (Watson et al., 2019, p. 474). Quebec also launched a cannabis risk awareness campaign that has been described as “Bizarre and Confusing” (Watson et al., 2019, p. 474). However, I think education on cannabis should begin at home first, yet many parents might not have the necessary knowledge. Some provinces are working on that also, like Quebec, which offers advice to parents on how to talk to their youth about cannabis in a way that encourages open dialogue (Watson et al., 2019, p. 474). Parents’ attitudes, behaviors and conversations influence how youth perceive and engage with cannabis. When parents fail to discuss cannabis, which has become increasingly accessible and normalized, children turn to their peers, social media, or unreliable resources that provide misinformation, further worsening the lack of education.

Uruguay and Canada

While both Canada and Uruguay have legalized cannabis, the Uruguayan model has been more successful than Canada’s. Uruguay’s approach to legalization is more effective because it did not lead to an increase in adolescent cannabis use. Uruguay controls all large-scale productions, requires registration, limits weekly purchases quantities, and prohibits advertising (Laqueur et al., 2020). Whereas Canada implements stricter government control over cannabis production and distribution, limits advertising, and enforces purchase limits to reduce youth exposure and access. In Uruguay, legal access to cannabis is restricted to persons 18 years of

age or older, with mechanisms like home cultivation, cannabis social clubs, and pharmacies (Laqueur et al., 2020). Canada ensures that legal access is strictly limited to adults, with robust age verification processes and clear regulations on home cultivation and social clubs. In Uruguay, the legislation campaign emphasized public health, aiming to eliminate the illicit drug trade and associated harms. For Uruguay, there is an acknowledgement of youth use of cannabis comparatively to that of Canada. While Canada's goal was to prevent and decrease use, it implemented little in the way of ensuring illicit market access was unobtainable by youth.

Most importantly, the Uruguay government established the institute for the regulation and control of Cannabis (IRCCA) to oversee all aspects of cannabis production, distribution, and consumption. The policy focuses on public health and reducing illegal drug trade (Wasisto & Jans, 2022, p. 114). Canada's cannabis industry has contributed to the national GDP and created thousands of jobs, but the high cost of legal cannabis has allowed the black market to persist. Uruguay the policy has successfully reduced cannabis use among teenagers under 12 years old, with strict controls on access (Wasisto & Jans, 2022, p. 110). The *Cannabis Act* in Canada sets a minimum age of 18 years for cannabis use, with a notable exception for Quebec, whose minimum age requirement is 21 years old. For Canada and despite these measures, youth cannabis use has increased slightly, and the black market remains accessible to minors (Wasisto & Jans, 2022, p. 113). Given the evidence of Uruguay's model, Uruguay's centralized and health focused approach has been more effective in reducing youth cannabis use and protecting young people compared to Canada's decentralized and inconsistent implementation.

Conclusion

While Canada's approach to cannabis legalization was intended to protect youth from cannabis related harms, its implementation of the *Cannabis Act* has fallen short of what it was trying to achieve. The Canadian government rushed the bill and passed on the bulk of implementation of the legislation to individual provinces, leading to inconsistent provincial regulations that have contributed to increased accessibility, shifting to social perceptions, and rising emergency visits among youth. The federal government had relinquished its responsibility to fully establish an equitable model across the country, thus creating disparities in minimum legal ages, education, and failure to protect and decrease youth use. Further, the lack of emphasis on comprehensive education programs has been detrimental. To achieve the intended goal of youth protection and decrease in use, the federal government must reclaim its responsibility and establish a baseline model for all provinces to follow. It must deviate away from punitive approaches towards youths, especially in light of reducing punitive approaches for adults, and direct its focus on education and harm reduction. Canada must implement a national standardized minimum age and bring a more distributed harm reduction supply for youth.

References

- Beckmann, D., Lowman, K. L., Nargiso, J., McKowen, J., Watt, L., & Yule, A. M. (2020). Substance-induced psychosis in youth. *Child and Adolescent Psychiatric Clinics of North America*, 29(1), 131–143. <https://doi.org/10.1016/j.chc.2019.08.006>
- Callaghan, R. C., Sanches, M., Vander Heiden, J., & Kish, S. J. (2023). Impact of Canada's cannabis legalisation on youth emergency department visits for cannabis-related disorders and poisoning in Ontario and Alberta, 2015–2019. *Drug and Alcohol Review*, 42(5), 1104–1113. <https://doi.org/10.1111/dar.13637>
- Cannabis Act*, S.C. 2018, c. 16. <https://laws-lois.justice.gc.ca/eng/acts/c-24.5/FullText.html>
- Donnan, J. R., Drakes, D. H., Rowe, E. C., Najafizada, M., & Bishop, L. D. (2022). Driving under the influence of cannabis: Perceptions from Canadian youth. *BMC Public Health*, 22(1), Article 2384. <https://doi.org/10.1186/s12889-022-14658-9>
- Forster, T. (2019, October 30). Quebec officially outlaws most of the fun marijuana edibles. *Eater Montreal*. <https://montreal.eater.com/2019/10/30/20940028/quebec-cannabis-restrictions-edibles-ban-brownies-gummies-chocolate>
- Hawke, L. D., Wilkins, L., & Henderson, J. (2020). Early cannabis initiation: Substance use and mental health profiles of service-seeking youth. *Journal of Adolescence*, 83(1), 112–121. <https://doi.org/10.1016/j.adolescence.2020.06.004>
- Health Canada (2023). *Canadian cannabis survey 2023: Summary*. <https://www.canada.ca/en/health-canada/services/drugs-medication/cannabis/research-data/canadian-cannabis-survey-2023-summary.html>
- Health Canada. (2024). *Legislative review of the Cannabis Act: Final report of the expert panel* (Cat. No. H134-37/2024E-PDF). <https://www.canada.ca/en/health-canada/services/publications/drugs-medication/legislative-review-cannabis-act-final-report-expert-panel.html>
- Howe, E. J., Bishop, L. D., Torraville, B. S., Rowe, E. C., Kinzel, E., & Donnan, J. R. (2023). Canadian cannabis education resources to support youth health literacy: A scoping review and environmental scan. *Health Education Journal*, 82(7), 766–778. <https://doi.org/10.1177/00178969231191085>
- Kourgiantakis, T., Vicknarajah, R., Logan, J., Edwards, T., Lee, E., Craig, S., Kaura, A., Williams, C. C., & Marshall, S. (2024). Understanding youth and young adult cannabis use in Canada post-legalization: A scoping review on a public health issue. *Substance Abuse Treatment, Prevention, and Policy*, 19(1), Article 30. <https://doi.org/10.1186/s13011-024-00615-9>

- Laqueur, H., Rivera-Aguirre, A., Shev, A., Castillo-Carniglia, A., Rudolph, K. E., Ramirez, J., Martins, S. S., & Cerdá, M. (2020). The impact of cannabis legalization in Uruguay on adolescent cannabis use. *International Journal of Drug Policy*, *80*, Article 102748. <https://doi.org/10.1016/j.drugpo.2020.102748>
- McDonald, A. J., Kurdyak, P., Rehm, J., Roerecke, M., & Bondy, S. J. (2024). Age-dependent association of cannabis use with risk of psychotic disorder. *Psychological Medicine*, *54*(11), 2926–2936. <https://doi.org/10.1017/S0033291724000990>
- Rubin-Kahana, D. S., Crépault, J.-F., Matheson, J., & Le Foll, B. (2022). The impact of cannabis legalization for recreational purposes on youth: A narrative review of the Canadian experience. *Frontiers in Psychiatry*, *13*, Article 984485. <https://doi.org/10.3389/fpsyt.2022.984485>
- Wadsworth, E., Fataar, F., Goodman, S., Smith, D. M., Renard, J., Gabrys, R., Jesseman, R., & Hammond, D. (2022). Consumer perceptions of legal cannabis products in Canada, 2019–2021: A repeat cross-sectional study. *BMC Public Health*, *22*(1), Article 2048. <https://doi.org/10.1186/s12889-022-14492-z>
- Wasisto, N. G., & Jans, S. R. (2022). The efficiency of marijuana legalization: Uruguay versus Canada. *Jurnal Sentris*, *3*(2), 104–117. <https://doi.org/10.26593/sentris.v3i2.6157.104-117>
- Watson, T. M., Valleriani, J., Hyshka, E., & Rueda, S. (2019). Cannabis legalization in the provinces and territories: Missing opportunities to effectively educate youth? *Canadian Journal of Public Health*, *110*(4), 472–475. <https://doi.org/10.17269/s41997-019-00209-0>
- Zuckermann, A. M. E., Gohari, M. R., Romano, I., & Leatherdale, S. T. (2021). Changes in cannabis use modes among Canadian youth across recreational cannabis legalization: Data from the COMPASS prospective cohort study. *Addictive Behaviors*, *122*, Article 107025. <https://doi.org/10.1016/j.addbeh.2021.107025>