

Inquiry into the use of Cannabis in Victoria



Organisation Name:

Your position or role:

SURVEY QUESTIONS

Drag the statements below to reorder them. In order of priority, please rank the themes you believe are most important for this Inquiry into the use of Cannabis in Victoria to consider::

Social impacts, Education, Criminal activity, Mental health, Young people and children, Public health, Public safety, Accessing and using cannabis

What best describes your interest in our Inquiry? (select all that apply) :

Individual, Working in the health sector

Are there any additional themes we should consider?

Efficacy of "The War on Drugs" - a cost/benefit analysis of criminalization and prohibition of marijuana

The benefit of greater educational focus on harm reduction in drug use rather than the seemingly ineffective educational messaging to "just say no"

Select all that apply. Do you think there should be restrictions on the use of cannabis? :

Personal use of cannabis should be decriminalised.

(Decriminalised: there are no criminal or civil penalties instead a person is referred to a drug diversion program or other health/ treatment service), Personal use of cannabis should be legal. , Sale of cannabis should be legal and regulated. , Cultivation of cannabis for personal use should be legal.

YOUR SUBMISSION

Submission:

Do you have any additional comments or suggestions?:

FILE ATTACHMENTS

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File2:

File3:

Signature:



Prevent young people and children from accessing and using cannabis in Victoria;

Currently with the availability of cannabis on the black market, it is fairly easy for young/underage people to access cannabis – as long as you know the right people it can be obtained freely and relatively cheaply. Legalisation and recreational sale of cannabis by authorised dispensaries removes market share from black market traders who will not implement any restrictions on sale and moves it into a regulated sphere, much like the sale of alcohol and tobacco, where sale can be limited to certain groups. The majority of people are likely to prefer to access cannabis safely and legally rather than continue to deal with dodgy black market traders.

Protect public health and public safety in relation to the use of cannabis in Victoria;

Current educational and societal messaging around drug use, that is, the “just say no” approach, has been shown for decades to be ineffective [1, 2]. A study in Scotland of 695 drug users who were attempting to practice abstinence users found that 33 months after recruitment, only 5.9% of females and 9% of males remained abstinent [3]. These are objectively terrible results of an abstinence focused treatment modality. Shifting to a harm reduction framework would have the benefit of teaching young people/all citizens about the risks of drug use from an evidence-based perspective while providing education on how to most safely use drugs if the person is going to do so anyway. Great benefits of a harm reduction focus can be seen in the approach to blood borne disease (HIV, hepatitis C) in injecting drug users [4]. It is likely that a similar harm-reduction approach to cannabis use could have similar impact in regards to unsafe use habits of cannabis.

In regards to cannabis, the actual health risks need to be assessed and weighed against the health risks of other legal substances such as alcohol and tobacco. It is well established that alcohol is a known carcinogen and overuse contributes to various cancers as well as liver disease. Tobacco smoking is well established to cause head and neck cancers and lung cancer as well as COPD. Cannabis has been associated with the development of mental health issues (notably schizophrenia) in some people, most notably when use it heavy and chronic, when use begins young and when the individual has an existing predisposition to the condition [5]. Cannabis use has also been associated with poorer cognitive outcomes, again notably when use is heavy, chronic and starts young [5]. With the knowledge that people who want to consume cannabis are likely to do so under prohibition anyway, does it not stand to reason that cannabis access be in control of legal authorities who can limit access to vulnerable groups? In addition, if education and public discourse is focused around how to safely consume cannabis we would likely see a reduction in people who use it in a high risk fashion, much like we have seen with the education around tobacco use. The mental health issues associated with marijuana are most often associated with heavy and/or prolonged use rather than occasional use of small amounts. This should be a focus of a harm reduction campaign so that people can make informed choices around use, as currently the harm reduction education/discourse around its use is very lacking leading to confusion in the public, with some people thinking it poses no risk at all and others thinking it is immediately dangerous with any amount of use – both views being incorrect.

Also to note, cannabis is often consumed by combustion, with negative effects on the lungs caused by inhalation of combustible plant material. However, with legalisation comes greater

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access to harm-reduced methods of consumption such as vaporizers and dose measured edibles. A harm reduction strategy could also focus on safer methods of intake for the protection of lung health.

Prevent criminal activity relating to the illegal cannabis trade in Victoria;

In 2017-2018 cannabis charges made up the bulk of Australian drug arrests, with 72381 arrests in this period – 92% of these being arrests for use rather than distribution [6]. These numbers alone show the inefficacy of cannabis prohibition, with a startling number of people being exposed to the criminal justice system for the crime of personal use. It is hard to fathom or quantify the social harms caused by exposing so many people to the criminal justice system for such a minor crime [2], with negative outcomes due to this exposure likely to occur in employment, education, family relationships and feelings of intrinsic self-worth and the mental health outcomes of this. Legalisation of cannabis for recreational and medicinal use would prevent the exposure of these thousands of Australians to the criminal justice system. Black market producers and traffickers would still of course be subject to criminal prosecution, much like black market suppliers of tobacco and alcohol are.

Implement health education campaigns and programs to ensure children and young people are aware of the dangers of drug use, in particular, cannabis use;

Current education campaigns pushing an abstinence message are ineffective, as evidenced by the high use of cannabis in the community and among young people. Shifting the message to that of harm reduction can still have a great focus on the dangers of cannabis use when it is abused and used by people who are vulnerable to the negative effects (ie, the young, people with a predisposition to mental health issues). Harm reduction offers a more realistic and believable narrative around drug use. Many people who try cannabis/use it on a semi-regular basis have no ill effects from it and do so while achieving high educational levels, working demanding jobs and maintaining fulfilling relationships. The incongruence in the governments messaging (abstinence) and the real life experience of people who use cannabis creates a sense of mistrust in the governments messaging, with people deciding to make up their own minds with regards to drug use, rather than follow a message that doesn't seem to gel with their lived experience. If education was evidence based and focused on harm reduction I believe that it would have much more benefit on the way in which people use drugs – people may still use drugs but at least they will be armed with knowledge allowing them to use drugs safely and in a way that doesn't negatively impact their lives.

Assess the health, mental health, and social impacts of cannabis use on people who use cannabis, their families and carers;

As has been acknowledged under previous subheadings, cannabis use can be associated with mental illness and impairment of cognitive function. However, evidence shows that cannabis alone is not likely to be enough to trigger a psychotic illness. Age of commencement of use, amount used and individual pre-disposition are factors that will impact the likely development of psychotic illness [5]. Under prohibition and with education focused on abstinence, these important messages that will allow for safe use of cannabis are not received

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by the general public leading to uninformed views on the safety of use. Because of this dearth of realistic public messaging, many users, including youth, do not believe there is any harm to be had from heavy, chronic cannabis use. Switching to a harm reduction message under legalisation will allow people who want to use cannabis (and who are likely to do so anyway), to make informed decisions about their use. An outcome of this strategy may be that people will leave use until later in life if they are aware of the harms of use while young, and that they will use in a more moderate fashion if they are aware of the risks of heavy and prolonged use. Social impacts of cannabis use are acutely felt in the realm of criminal justice. Those prosecuted for a cannabis related offence may end up with a criminal conviction that will then impact their ability to gain good employment and improve their life circumstances. Portugal has implemented country wide decriminalisation of all drugs, and contrary to the opinion of fearmongers and naysayers, Portugal has not seen adverse effects on rates of drug use [7]. The idea of Portugal's strategy was to redirect resources from the criminal justice sphere to primary prevention, treatment of addiction and diversion of problem users from the criminal justice system into recovery programs. Decriminalisation opened up the possibility of accessing recovery to drug addicts, both via increased availability of programs and the removal of fear of arrest [7]. Lifetime prevalence rates (use of substances at any point in life) has actually decreased in the critical age group of 13-18 in Portugal since decriminalisation, with only a slight to mild increase in other age groups [7], with absolute usage rates among 15-18 year olds also dropping. In almost every category of drug, and for drug use over all, lifetime prevalence rates were higher pre-decriminalisation than post [7]. While the social impact of drug usage will likely never be removed from society in total, there is evidence and logical basis for assuming that moving away from prohibition and a "just say no" message of abstinence will have societal benefits.

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References

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