

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::

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

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

Individual,Academic and research,Advocacy body,Working in the alcohol and drug services sector,Working in the health sector

Are there any additional themes we should consider?

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

File1: [5f4c992e418af-Submission for Victoria's Public inquiry into Cannabis.pdf](#)

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Submission for the Victorian Parliament Inquiry into Cannabis use in Victoria

Any individual up to date on the legalisation of recreational cannabis overseas can attest that harm minimisation of cannabis use within the community is best achieved through recreational legalisation. This submission will outline how the cannabis black market, and the inaccessible medical market continue to negatively affect youth, vulnerable groups and our community as a whole. Incentivising locally grown cannabis to sell within a legal market instead of providing to a black market is essential for public health and keeping cannabis out of the hands of our youth. Cannabis use can be harm minimised with appropriate education of the Victorian public. For clarity, both mental health and general physical health are interwoven on a somatic level, henceforth this submission will refer to both mental health and physical health under the umbrella of “health”, as they cannot be considered independently of one another in this case. Key aspects to a successful adoption of recreational cannabis will be investigated once an understanding of our current situation has been established.

For reference on my ability to speak on the matter of cannabis use within our community, I have a bachelor in sociology and I have worked in a cannabis-adjacent business for the past 3 years. Over these years I have spoken to countless community members from all walks of life seeking to use cannabis; whether for medical or recreational purposes. I regularly discuss harm minimisation strategies with clients and professional peers, alongside the difficulties and pitfalls of Victoria’s current system of cannabis legislation. I fully believe that regulated access to recreational cannabis will vastly improve health and usage outcomes across the board.

In order to protect public health and public safety, we must understand the nature of risks associated with cannabis use. Research has found that cannabis use only resulted in a low increase to risks associated with driving, psychosis and depression¹. These can all be mitigated with appropriate education, health support and driving legislation.

Interestingly, there is no statistically significant increase to lung cancer risk associated with cannabis smoking, but heavy daily smoking can result in a large increase of risk to bronchitis.² Any association between cannabis smoking and lung cancer in Australia is linked to the Australian habit of ‘spinning’ cannabis with tobacco, a common practice among adults and youth; mixing cannabis with tobacco to make the cannabis last longer, however results have varied from intent. Of the people I have discussed spinning with, many would not have begun to smoke tobacco if they hadn’t tried cannabis and wanted to cut down on its cost. These people have been delighted to find out that they can instead mix their cannabis with other inexpensive and non-addictive herbs such as mullein, damiana, mugwort, and catnip; for a range of effects from protecting the lungs, to further improving cannabis’ effect of lowering anxiety levels and improving sleep.

Cannabis users who spin with tobacco also recognise that this practice has them continuing to smoke even though they are already comfortably high, as the nicotine itch draws them back to it. This is a key aspect of cannabis consumption which requires a culture shift for the benefit of public health. Harm minimisation education which recommends consuming cannabis without tobacco, and possibly mixing with non-addictive herbs instead will cut down on the consumption rate of cannabis smoke and improve bronchitis outcomes for many users. It will also separate lung cancer risks from

¹ Table 1, Hall et al, 2019

² Table 1, Hall et al, 2019

cannabis use, and lower the impact of smoking on the public health system. A legal recreational market within Victoria which offers reliable access to harm minimised methods of cannabis ingestion such as vaping and edibles, would further reduce risk of bronchitis to cannabis users.

While consistent daily use is associated with a risk of developing dependency, risk of cannabis dependence after first use is significantly lower than risk of developing dependence on alcohol, nicotine, heroin, and cocaine; as cannabis is not chemically addictive.³ Health outcomes and quality of life of cannabis dependent users is consistently higher than those of their alcohol or nicotine addicted peers.⁴

Recent research indicates that regular cannabis use after work had no effect on the user's ability to perform the next day, either at work or socially, unlike heavy alcohol users.⁵ Negative effects on productivity are only associated with consuming cannabis before or during work. Workplace laws ensuring employees do not work under the influence of substances are already common and should remain. Even consumers dependent on cannabis are capable of limiting their use to personal hours, and our health system is already supporting dependent people who have found their use to impact their day-to-day. Legal recreational cannabis can include education about these impacts and ensure the best outcomes for all.

Further strategies for cannabis harm minimisation and education will be discussed after we have reached an understanding of the effect of black market cannabis on our youth, and the rest of our community.

³ Hall et al, 2019

⁴ Lopez-Quintero et al., 2011

⁵ Bernerth and Walker, 2020

To ban any substance is to create a black market for it. The reality is that with cannabis classified as a schedule 8 drug, there is still a diverse and booming black market. Cannabis is a plant, and as such, it can easily be grown both indoor and outdoor. Preventing its production is nigh impossible. Cannabis legislation and the consequences of being caught with it have been ineffective in curtailing its production, sale and use in Australia since it was first outlawed in 1938. Cannabis currently acts as a backbone to the entire drug black market, and provides gateway access to many schedule 11 substances via dealers. I can confirm that it takes less than an hour for a diligent searcher to find a local source for cannabis on the darknet, there is also a bustling trade via word of mouth. As young people are 'digitally native', the prevalence of black market methods continues to enable their use.

Many dealers begin trading in cannabis long before any other substance, and will continue to trade in it as they expand their inventory. It is the easiest way to ensure a stable and ever growing customer base, many of whom will also become curious about the other substances on offer.

The chemical composition of cannabis is not what causes it to act as a 'gateway drug', but rather, its illegality creates gateway access to the rest of the black market; the acceptance of one illegal act with fewer consequences than expected normalises the breaking of laws and makes those users leery of warnings of harder drugs, despite their warnings based in fact. As the prevalence of recreational cannabis overseas grows, our social stigma surrounding it continues to shift towards acceptance, our laws need to reflect this in order to cut down on black market access.

The black market does not have qualms about the customer, what their usage level is, or how old the individual may be. Cannabis use among young people is a serious issue which would be minimised by a legal recreational market. It would be simple to employ the same age restrictions on cannabis use as we already have for alcohol and tobacco; ensuring that adult customers are educated on ethical cannabis practices. Research has shown that youths accessing cannabis are more likely to develop dependence than adults, young users were also more likely “to show cognitive impairment, leave school early, use other illicit drugs, develop schizophrenia and affective disorders and have suicidal thoughts”.⁶

I was dismayed to find out that both my younger siblings were given access to cannabis by friends and tried it between the ages of 12-14. It is not uncommon for highschool aged youths to source and deal cannabis to their friends, believing that even if they are caught they’ll be given a lighter sentence due to their age. This was the case for my siblings access to cannabis, and I’ve had anecdotal confirmations of this strategy from the broader community.

While one of my siblings had a negative paranoid experience and steered clear of cannabis going forward, the other sibling used cannabis for the rest of their teenage years. Cannabis clearly affected their ability to focus on schoolwork, they gravitated towards harmful friends and environments to continue obtaining cannabis and other drugs; they did not manage to finish VCE due to these influences.

Teaching young people the mechanisms of cannabis’ effect on a still-developing mind is an essential aspect of drug education going forward and will be discussed in detail later on. Making recreational cannabis legally available and price-competitive would undercut the rest of the drug black

⁶ Hall et al, 2019

market, curtail youth access; dealers would lose business, and the public would have less access to schedule 11 substances. Furthermore, police resources would not be wasted on cannabis users who pose no threat to their community, freeing up police time to focus on protecting youths and vulnerable groups from the detrimental effects of the remaining criminal activity.

While there is a black market demand for these products, border control will continue to be burdened with preventing dangerous criminal imports. The imports range from flower and seed to concentrate; and continue to increase yearly despite border controls efforts. The growing prevalence of concentrated forms being sold on the black market should be of particular concern to all interested parties. These concentrates are imported from unverified sources or made in home labs, neither of which can assure a safe product.

The CDC confirmed that the vaping deaths we have seen in the USA were caused by young people vaping cannabis concentrate purchased through the black market, or legally obtaining unregulated products. These products were found to contain cutting agents to stretch out the product, or improve its appearance. Vitamin E acetate is a common choice, and it has led to death or serious lung issues.⁷ A recreational cannabis market must regulate and test concentrated forms of THC to ensure that consumers have access to safe products. Many users are aware of the potential dangers of these unregulated products and would be overjoyed to have a reliable safe alternative which does not endanger their community with heightened criminal activity.

⁷ Blount et al., 2019

While Victoria has attempted to provide safe medicinal cannabis, these efforts have so far been grossly ineffective at providing this medicine to vulnerable groups. Those without the privilege of above-average income and private health insurance are still finding medicinal cannabis unrealistic to access, relying on the black market for an essential health need instead. “In the period from March 2018 to January 2019, Australia’s Therapeutic Goods Administration approved 3,000 medical cannabis prescriptions. And yet, it is estimated that there are roughly 100,000 Australians that are continuing to self-medicate with cannabis products bought from the illegal market.”⁸ That ratio is unacceptable. “Australian privacy laws do not allow patients to search for an AP [authorised prescribing doctor] and a general lack of awareness surrounding the SAS has discouraged doctors from engaging with the scheme.”⁹ Countless people have no idea where to start to obtain medicinal cannabis. Even low-income patients lucky enough to get a prescription for medicinal cannabis regularly find themselves unable to afford the exorbitant prices of a legal daily dose of CBD oil priced at \$140, which utterly fail to compete with the black market alternative of \$7.50 a day for an equivalent product.¹⁰

These patients are children with epilepsy¹¹, people with disabilities and chronic health conditions, and they are slipping through the cracks of our ineffective medical system¹². As a result residential areas with low-income and disabled demographics continue to be vulnerable to illegal influence and activity.

⁸ Murphy, 2020

⁹ Murphy, 2020

¹⁰ Murphy, 2020

¹¹ Bali, 2020

¹² Morris, 2020

While Australia's legislation to lower opioid prescription rates is a necessary shift, preventing patients accessing pain relief while failing to provide accessible alternatives is medical negligence. We have long had evidence from both research and community trial programs that access to cannabis lowers opioid use and dependency, particularly in the USA's opioid case.¹³ Cannabis has an analgesic effect which can be highly effective for chronic pain conditions.¹⁴ Many people suffering chronic stress and anxiety also safely self-medicate with cannabis. Currently, these vulnerable groups are depending on the black market to self-medicate. Sadly, youths are also represented in the chronic condition category, regularly left with few options due to cost and accessibility; they'll instead turn to uneducated peers with cannabis access to try and meet the essential need of pain relief.

I personally have 3+ friends with chronic inflammatory health conditions. All of these people are on the NDIS or pursuing an application. They have opted to self-medicate with cannabis instead of relying on opioids, as they found that opioids numbed out their personality and deepened their depression. In comparison, cannabis provided pain relief while allowing them to still be cognient, active members of their communities. While they would all like to access cannabis legally, doing so has been completely out of reach for their capacity and budget. I was close to one friend while they struggled with opioid dependency to treat chronic pain. They broke into tears after their first trial of cannabis, confessing that it was the first time they had felt truly pain free in over a year.

Individuals opting to self medicate with cannabis are put through high levels of stress about discovery, and potentially dangerous situations while purchasing unregulated substances from strangers. Too often I have waited on the other end of a phone, watching the time and waiting for a friend to check in after purchasing from a new dealer.

¹³ Liang et al., 2018

¹⁴ Piomelli et al., 2018

While the spraying of cannabis with other substances is no longer a common practice among dealers, it is not unheard of. One self-medicating friend did purchase cannabis which has been sprayed with some sort of chemical; it tasted more metallic, and immediately led to headaches and nausea unlike anything they'd experienced smoking previously. They had to throw out a 3 week supply of cannabis and rely on opiates until they had the income to purchase cannabis elsewhere.

The short and long term health concerns for young people exposed to these kinds of tainted products are going by unnoticed, potentially producing far worse results in life quality expectations for young people than the regulated and monitored use of safe products.

I support recent legislation to curtail opioid over-prescription, but to change that regulation without providing patients with accessible and affordable alternatives in medicinal cannabis is leaving our most vulnerable without support¹⁵. Victoria can and needs to do better.

The repercussions of current cannabis legalisation and the prevalence of our black market has been effectively demonstrated above. Cannabis use is common and accepted by many members of our community seeking to self medicate, or just enjoy a quiet night in. We will now investigate how we can appropriately introduce recreational cannabis and improve our medical cannabis access for the benefit of youths, medicinal users and our community as a whole. Victoria has an incredible opportunity to learn from and adapt the methods of legalisation internationally. Regulated recreational cannabis would put power back into the hands of the consumer, enabling them to purchase safe products and make informed choices for their health. While Canada has legalised recreational cannabis, their rollout was ineffective, and many users continue to purchase their cannabis through the black market.

¹⁵ Ribeiro, 2020

Canadian users' complaints primarily focus around the low quality of the product, expense, and lack of brand information available.¹⁶

As suggested by the Greens in 2014, cannabis will require an independent regulator to ensure quality and safety of products¹⁷, both for medical and recreational use. This regulator should have values around transparency, integrity, education, and supporting small local cannabis businesses; with the intent to prevent monopolies and horrendous price-gouging that our medical market has experienced¹⁸. It is essential to public health that the hundreds of thousands of people currently self-medicating with cannabis gain access to an affordable and regulated product. This regulator will need to have access to lab spectroscopy or chromatography equipment to confirm THC and CBD levels within cannabis products, as well as publish a list of approved testing equipment for businesses to rely on such as the Sage Analytics devices¹⁹ or the TCheck kit²⁰. Clear and easy to understand processes empower the buyer, grower and everyone in between.

Victoria already has a proud growing culture, to successfully roll out recreational cannabis, small growers need support to sell legally and remain competitive with larger corporations rather than providing to the black market. Canada failed to provide this and their adoption of recreational cannabis has stumbled back to the black market as a result.²¹ Home grown cannabis can be of incredibly high quality, and these entrepreneurs should be allowed to grow and sell cannabis under

¹⁶ Turvill, 2020

¹⁷ Gothrinet, 2020

¹⁸ Bali, 2020

¹⁹ Herrington, July 2017

²⁰ Herrington, May 2017

²¹ Murphy, 2020

their own brand. The Canadian rollout suffered greatly because local growers were not empowered to build their own brand and customer base.²² Cannabis branding should sit in a similar regulation to alcohol branding, the advertisement of it restricted to adult only spaces. It is essential that consumers are allowed to view their product before purchasing. Connoisseurs need to be confident in the grower, the strain and the quality of their flower; much of this can be judged visually by the amount of trichomes present, colouration and hydration level.

Regulation will be necessary to prevent the use of harmful pesticides on consumable products, but this should not cut local growers out of the industry. Victorians already take pride in locally sourced food, clothing and microbrew beer, it can be the same for cannabis.

An independent regulator can also spearhead public education standards on cannabis harm minimisation. Much like with alcohol and cigarettes, messages of moderation and strategies to support moderation are key. Many cannabis users comfortably self regulate, only smoking in personal time as previously discussed. As THC is stored in the fat cells of the body, heavy users will feel the pleasant effects minimised over long periods of constant use. Tolerance breaks are already a commonly adopted strategy within the cannabis community. Advice on consumption rates and regular tolerance breaks can be incorporated into the packaging and purchasing process of cannabis.

While chronic cannabis smoking is associated with bronchitis, many other ingestion methods are free from this drawback. Developing a market which promotes harm minimisation methods and enables easy access to the following consumption methods will greatly benefit public health outcomes.

²² Turvill, 2020

Dry herb vaporisers are an effective way to harm minimise; they do not produce carbon and always taste better than smoking. People who switch to dry herb vaping instead of smoking cannabis can feel the difference in their lungs within a fortnight. While dry herb vaporisers are an investment upfront, many users see the benefits to their health. These devices also consume far less cannabis than if the user smoked, so the cost over time is lower, and other potential adverse health effects are lessened.

Edibles are also an effective harm minimisation strategy within a recreational legal market. If their dosage is accurately advertised, consumers can gauge exactly how much they are consuming and develop a nuanced understanding of cannabis' effect on their body. Edibles are also a common method for medical patients who do not desire a high dose but are interested in the longer controlled release of the medication into the body. Edibles will not affect the lungs; removing risk of bronchitis, and are an incredibly pleasant way to enjoy an afternoon on cannabis. THC and CBD levels in edibles can be calculated with the same lab methods discussed earlier, as butter and oils can all be tested for their potency. Many bakers are already turning their talents to cannabis, pleased to offer lung-easy alternatives. Small scale edibles production with appropriate dosage information should be a supported avenue in legalisation.

Concentrated THC in a pure form can be a highly enjoyable experience, as the consumer inhales less of the product, and it must be vaporised rather than smoked, it also produces no carbon and lighter on the lungs. Regulation on concentrated forms of THC requires more stringent cross-checking methods than edibles and flower. As mentioned earlier, keeping these products pure and free from vitamin E and other toxic cutting agents is key to the interests of public health and safety.

Youth education and outreach programs require further funding and realistic strategy. For youths to abide by laws on substance use, they must believe those laws exist for a legitimate reason.²³ Countering the perceived positive expectancies with honest and realistic information about the negative health effects and social disbenefits is a key aspect of youth drug education. While recreational cannabis use is banned but usage continues behind closed doors, youths are witness to inconsistencies in laws and adult behaviour, this undercuts the legitimacy of all laws around substance use; further complicating youth relationships with authority.

By bringing recreational cannabis into the legalised light, and creating laws which protect against youth use, the legitimacy of the system is re-established. Youths who believe that it is morally wrong to shortchange their future for short-term enjoyment will be content to wait until their brain development reaches the appropriate point for cannabis exploration.²⁴ Students who are engaged in their schoolwork and have hope for the future are less likely to try and/or develop dependence on substances.²⁵ Continuing to support young Victorians in unstable home situations and struggling with health will create a safety net for youth still vulnerable to substance use. It is essential that young Victorians are given accurate information, not scare campaigns. Youth sex education has demonstrated that informative education with focus on harm minimisation is effective for reducing risk behaviour, while scare tactics result in teenage pregnancy. Model desirable behaviour and treat these young people with the thoughtful respect and discernment you would like them to demonstrate, and they will rise to the occasion.

²³ Amonini and Donovan, 2005

²⁴ Amonini and Donovan, 2005

²⁵ Feemster, Proctor and Hoffmann, 2016

The legalisation of recreational cannabis is an opportunity to shift our narratives and understanding of this plant. Cannabis education can be incorporated into this culture shift. Cannabis use can be harm minimised, much more effectively than other legal substances. There is certainly variety in how people are affected by cannabis, some relax, some are excited and joyful; I'm yet to meet an angry stoner, unlike the angry and violent drunks I have encountered who continue to pose a public health risk. We must be pragmatic and resist fairy-tale narratives of absolute control, which illegal activity continues to disprove; every substance will have people who find a way to abuse it. In the case of cannabis, studies have proven that this is due to addictive personalities and psychological dependency rather than chemical dependency. These aspects can be assisted with therapy and educational campaigns. By bringing cannabis use into the light, individuals dealing with dependency will be empowered to seek help in supportive environments, and we prevent the formation of shadowy antisocial spaces where that dependency can be formed in youth.

Strains of Cannabis high in cbd and other key terpenes have been proven to greatly benefit individuals suffering depression, anxiety, chronic inflammation and stress. The number of Victorians suffering these ailments is only increasing during the Covid pandemic and lock down, and may potentially increase with the yet-unknown long-term health effects of Covid on survivors. Educate Victorians on the joys and the drawbacks of cannabis use, and a larger portion will approach cannabis use with informed moderation and mindfulness for the behaviour they model to the younger community.

Cannabis has a bright future and more of the world is legalising. Research is booming into the possible health benefits of various terpenes and other micro-ingredients naturally occurring in

cannabis. Victoria's public health will greatly benefit from legal recreational cannabis. Victoria's criminal activity will drop when a legal cannabis market outcompetes the black market.

Everyone deserves the opportunity to manage their own uses and exposure around cannabis in an informed and safe environment. Victoria has the opportunity to join the rest of the legal recreational world in providing that informed safe environment. The professionals capable of creating a rich and safe cannabis culture within our state are already here working behind the scenes. When recreational cannabis is legalised they will step up to make it a reality, one in which young people are protected in every way possible.

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