

## Inquiry into the use of Cannabis in Victoria

Dr Joshua Hayward

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

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

Individual,Academic and research

**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:**

Please see the attached document for multiple points of consideration with respect to each of the terms of reference.

**Do you have any additional comments or suggestions?:**

In nations that pride themselves as free and democratic, responsible cannabis use and cultivation should be matter for individual adults. Especially where a recreational drug as individually and socially harmful as alcohol is considered to be acceptably legal within a framework of appropriate regulations, it is incumbent on us to end the hypocrisy and embrace the social benefits of legalised cannabis.

### FILE ATTACHMENTS

**File1:** [5f3b3610c2e4b-jhayward-submission.pdf](#)

**File2:**

**File3:**

**Signature:**

Joshua Hayward

## (a) Prevent young people and children from accessing and using cannabis in Victoria

As the most commonly used illicit drug in Australia, cannabis is already widely accessible for young adults in the current state of prohibition.

According to the [Australian Institute of Health and Welfare](#), 3.8% of the adult population aged 15-64 years or the equivalent of 188 million people have used cannabis at least once in 2017 <sup>[1]</sup>.

### **Legalise cannabis sales for adults (18 years and over)**

By legalising the sales of cannabis for adults, it would reduce the risk for adolescents by:

- Enforcing proof of age at the point of sale
- Preventing purchases from unknown / unsafe sources by shifting control out of the black market
- Increasing general awareness of cannabis and associated side-effects.

Severe penalties should apply for anyone supplying or selling cannabis to a person under the age of 18.

### **Advertising and packaging**

Advertising of cannabis products could be regulated to prevent branding and appeal targeted towards teenagers.

Just as [plain packaging had reduced the appeal of cigarettes amongst adolescents](#) <sup>[2]</sup>, advertising and marketing aimed at the younger market should be forbidden.

### **Case studies in legalised countries**

Several studies have been undertaken into countries with legalised cannabis and the rate of adolescent use. Although there have been mixed results - recent reports indicate legalisation does not necessarily encourage adolescent use.

- The [National Cannabis Survey conducted in Canada](#) reports a decline in cannabis use for 15-17 year olds after the first year of legalisation. Whilst cannabis use for 18-24 year olds remained constant <sup>[3]</sup>.
- Another [report based in the United States](#) concluded marijuana use among youth may actually decline after legalisation for recreational purposes <sup>[4]</sup>.

### **Accessibility to children**

Although an overdose on cannabis products is not possible, accessibility to children is still an important factor to consider. Aside from restricting sales to children below legalised age, a number of factors should be addressed.

### **Packaging and warning labels for children**

Packaging should be regulated to ensure products do not appeal to children and should include warning labels to indicate that the product may induce psychoactive effects.

This is particularly important for cannabis edibles, especially when presented in confectionery format.

Child-proof packaging and seals may also be a possible solution for products with high potency.

### **Public education**

As with the storage of alcohol, cigarettes and pharmaceutical products, caretakers should be made aware of the implications and ensure cannabis products are kept out of reach of children. This may be presented as a part of cannabis education campaigns.

Along with public education and childproof packaging - education for medical practitioners, poison support centres and emergency departments may also be required.

Reiterating on the fact that even though overdose on cannabis products is not possible, these preventions should still be in place to reduce the possibility of intoxication for minors.

### **Cultivation of cannabis plants around children**

[Raw cannabis plants do not contain THC](#) <sup>[5]</sup>. Instead, it contains its acidic precursor - THCA. Only through heat (decarboxylation) will THCA be converted to THC.

Based on this fact, live cannabis plants present a low threat to children. However, we believe the following policies should still be considered:

- Limit the number of cannabis plants per household
- Promote safe cultivation practices (e.g. safe use of pesticides, fenced-off areas)
- Safe disposing of cannabis cultivation related waste
- Promote safe post-processing and storage of raw plants (curing, drying)

### **Medical access for children**

Several scientific publications <sup>[6]</sup> have proven the effectiveness of cannabis for reducing seizure frequency, especially for supporting childhood epilepsy such as Dravet syndrome.

Down-scheduling medical cannabis products would simplify the process for patients and hopefully reduce the associated costs.

## (b) Protect public health and public safety in relation to the use of cannabis in Victoria;

According to a survey conducted by the University of Sydney <sup>[7]</sup>, less than 3% of medical cannabis users sourced cannabis legally between 2018-2019. The rest of the patients are placing themselves at risk by sourcing their products from the black market, or worse - the possibility of a criminal conviction by growing it themselves.

### **Cannabis cultivation and manufacturing regulations**

By regulating the cultivation and manufacturing guidelines, it would reduce the use of unsafe materials and chemicals such as synthetic plant growth regulators.

### **Remove medical cannabis approval bottleneck**

Medical cannabis patients are increasing at a significant rate year on year. Based on a report by FreshLeaf Analytics, Australia is estimated to have 25,000-30,000 active medical cannabis patients by the end of 2020 <sup>[8]</sup>.

By down-scheduling or legalising cannabis, the bottleneck in medical approvals via the ODC can be omitted to simplify the process for accessing medical cannabis.

We strongly believe allowing access to medication in an affordable and timely manner is crucial for the health and well-being of Victorians.

### **Public safety policies**

Based on the current ACT cannabis laws, Victoria should improve upon its cannabis use policies:

- Legalise cannabis use and cultivation in private residences within personal quantities
- Ban cannabis use in public
- Ban cannabis use around children
- Ban driving under the influence of cannabis

In addition:

- Licensed establishments for cannabis sales and consumption
- Commercial cannabis cultivation and manufacturing regulations
- Restricted delivery formats and types of products available

- Packaging and labelling regulation
- Serving size and potency standardisation

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

Education and public awareness campaigns should be considered to inform Australians on the effects and risks associated with cannabis use.

A [report conducted post cannabis legalisation in Denver, United States](#) <sup>[9]</sup> provided some insight into a successful cannabis education campaign. The findings showed 75% of the teenage respondents were discouraged from using cannabis after being exposed to the campaign.

The following topics should be covered for youth education:

- History of cannabis
- Cannabinoids ([THC vs CBD](#), ECS)
- Physical and mental effects of cannabis
- Common medical uses of cannabis
- Legality of cannabis
- Possible long-term mental health conditions and addiction associated with underaged cannabis use
- Dangers of driving under the influence of cannabis
- Dangers of sourcing cannabis from the black market

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

Between 2017-2018 the [ACIC reported](#) <sup>[10]</sup> a total of 66,296 consumer cannabis related arrests in Australia. By allowing personal use and cultivation, we will be able to keep consumers out of the criminal justice system. This will prevent life long criminal implications on medicinal and recreational users, and reduce the burden on prisons and courts.

**Reduce illegal trade**

As more cannabis products appear on the legal Australian market, product prices will become more competitive for consumers. By reducing the demand for cannabis products in the black market, illegal trade could potentially be minimised.

### Legal medical access for patients

As mentioned previously - based on a report by the University of Sydney <sup>[11]</sup>, less than 3% of medical cannabis users sourced cannabis legally.

Legalising medical cannabis and having more readily available products would ensure patients do not risk breaking the law to source treatment for their ailments.

### Criminal penalties

The following restrictions should remain upon legalisation to govern cannabis related criminal activities:

- Growing commercial quantities
- Possession of commercial quantities
- Selling and distribution without a license
- Selling and distribution to minors
- Restricted manufacturing practices (packaging, banned delivery methods, using illicit materials)

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

A baseline should be set and a framework established to monitor the health and social impacts of cannabis post legalisation.

Some indicators to track could include:

- Adult and adolescent recreational usage patterns
- Medical cannabis usage patterns
- Sources of consumer recreational and medical products
- Non-cannabis drug usage (to determine if cannabis acts as a “gateway” drug)
- Cannabis-related crime rates
- Driving offences and injuries related to cannabis use
- Cannabis related hospitalisation and poisoning

## Final Comment:

In nations that pride themselves as free and democratic, responsible cannabis use and cultivation should be matter for individual adults. Especially where a recreational drug as individually and socially harmful as alcohol is considered to be acceptably legal within a framework of appropriate regulations, it is incumbent on us to end the hypocrisy and embrace the social benefits of legalised cannabis.

## References

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