

TRANSCRIPT

LEGISLATIVE COUNCIL LEGAL AND SOCIAL ISSUES COMMITTEE

Inquiry into the Use of Cannabis in Victoria

Melbourne—Wednesday, 19 May 2021

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**Necessary corrections to be notified to
executive officer of committee**

WITNESSES

Dr Devin Bowles, Chief Executive Officer, Alcohol Tobacco and Other Drug Association ACT; and

Mr Michael Pettersson, MLA, Legislative Assembly for the Australian Capital Territory (*both via videoconference*).

The CHAIR: Thank you, everyone. Welcome back. As I am sure you are aware, we are the Legislative Council's Legal and Social Issues Committee, and this is a public hearing into the use of cannabis in Victoria. We are very pleased to be joined by a panel from the ACT. We have Dr Devin Bowles, who is the Chief Executive Officer of the Alcohol Tobacco and Other Drug Association, and are delighted to welcome our colleague Michael Pettersson, a member of the Legislative Assembly in the ACT.

Here joining me today I have David Limbrick and Sheena Watt, and I am Fiona Patten, the Chair of this committee.

Just to let you know—and I am sure this will come as no surprise to you, Michael—all evidence taken today is protected by our parliamentary privilege, and that comes under our *Constitution Act* but also the Legislative Council's standing orders. Therefore any information you provide during the hearing is protected by law. However, if you were to go elsewhere and repeat the same things, you may not have the same protection. Any deliberately false evidence or misleading of this committee may be considered a contempt of Parliament.

As you can see, we are hanging onto your every word. We have transcribers from Hansard, and also our broadcasting team. You will receive a Hansard record of this hearing, and I would encourage you to have a quick look through it to make sure that we have not misrepresented you, because ultimately it will go up onto the committee's website and these transcripts do form part of our report. Just to let you know, we will be reporting in the first week of August.

I welcome you to make some opening remarks for the committee. We are also joined by Matthew Bach, who you hopefully can see on your screen. Thank you for joining us, Matthew. Michael or Devin, could I get some opening remarks from you before we open it up to a committee discussion.

Mr PETTERSSON: Sure. I have got a short opening statement.

The CHAIR: Lovely.

Mr PETTERSSON: Good morning, committee. It is an absolute delight to be here with you today. It is always a bit fun seeing how other jurisdictions conduct their committee business. In 2019 I introduced the Drugs of Dependence (Personal Cannabis Use) Amendment Bill to the ACT Legislative Assembly. This Bill sought to legalise cannabis for personal use. It allows for individuals to possess up to 50 grams of cannabis for their own personal use and to grow two cannabis plants to a household limit of four. To some this may sound radical, but for most Canberrans it was not. At the time ACT government research had shown that 54 per cent of Canberrans supported legalising cannabis for personal use and only 27 per cent were opposed to the change. The majority of Canberrans were in favour of seeing our drug laws reformed, and it definitely showed in how the community debate was undertaken.

I do not see cannabis law reform as a left-right issue, and I do not see it as a partisan issue either. To some it is an issue of personal freedom and liberties, and for others it is about breaking down stigmas and offering public health support in moments of crisis. And to some it is simply about reassessing the cost and effectiveness of our current laws. This is an issue that I hope many can find agreement on if they give themselves an opportunity to consider new perspectives. I want to be very clear: supporting cannabis law reform is not contingent upon having used cannabis or, for some committee members, having plans to consume it in the future. I think it is just good public policy.

The Bill I introduced and then was passed by the ACT Legislative Assembly came into effect on 31 January 2020, and with it the ACT became the first jurisdiction to legalise cannabis possession. To some people's surprise, the sky did not fall in. As time passed it became clear that the overall impact of legalisation was rather subtle and not as drastic as many had hoped. According to a wastewater analysis, cannabis usage rates remained the same upon the Bill's passing and consistent with trends in other jurisdictions over time.

According to ACT police, drug driving offences have remained steady. And according to ACT Health, legalisation has not increased the number of cannabis-related hospital presentations. These are of course early numbers and very blunt measures, but they do not spell the doom that many predicted.

The legal conflicts between the commonwealth and ACT laws have also proved unproblematic. No-one has been charged for unlawful possession under federal legislation, and ACT police report they have not faced any issues with implementing the new laws. Within the first year cannabis offences dropped by 90 per cent. Personal possession remains an offence for minors, and the remaining offences were due to minors being dealt with under the decriminalisation framework that still exists on the ACT's books. For some context, before cannabis possession was legalised in ACT the last report by the Australian Criminal Intelligence Commission on the 2018–19 reporting period stated that in the ACT 55 consumers of cannabis were issued a civil penalty under the decriminalisation framework and 334 consumers of cannabis were arrested.

The classification of cannabis as an illicit drug is an unnecessary burden on the criminal justice system. Studies show that one in three Australians have used cannabis in their lifetime and one in 10 of us have used cannabis in the past year. Let that sink in for a moment. One-third of the Australian population are quite literally criminals liable for a prison sentence. I am not an expert on many things, but on this one I am almost certain we do not have enough room in prison for that many people.

Reforming drug laws to allow possession of small amounts of cannabis is a positive policy based on harm minimisation. Time and time again research has shown that criminalisation is harmful, not helpful. Generally speaking Australia's current approach to drug policy concentrates on the idea that drug use is a moral failing and a criminal issue. This detracts from the idea that drug use is first and foremost a health issue. There is no secret that tobacco use and alcohol consumption have serious ramifications for the health of Australians. These are both legal drugs with practically no chance of being made illegal. Tobacco and alcohol use contributed to 13.8 per cent of the total burden of disease within Australia in 2015; illicit drugs contributed 2.7 per cent of the total burden of disease, and of that 2.7 per cent, cannabis comprised only 8.3 per cent.

Tobacco, alcohol and cannabis are readily available to those who want to use those substances. Anyone over 18 can go for a drink at a bar or purchase cigarettes from a local convenience store. And overwhelmingly people that want to use cannabis know how to procure it through the black market, whether that be in a public transport interchange, a nightclub bathroom or even the schoolyard. When it comes to alcohol and tobacco we recognise that prohibiting these substances is ineffective. Instead of criminalising these drugs, we have other measures in place to reduce the societal and health-related harms that they cause. I want to be very clear: I know that there are adverse health effects associated with cannabis use. Cannabis is inherently dangerous. We know that it can have a negative impact on the mental health of those who have pre-existing mental health conditions or those who are genetically predisposed to have one. But when you compare the health effects of other legal drugs, the argument against legalisation based on the supposed health concerns just does not make sense.

In closing, I think it is very early days for the ACT, but the early signs are positive, and I look forward to answering the committee's questions.

The CHAIR: Thank you. Thanks very much, Michael. Devin, would you like to make some opening comments?

Dr BOWLES: I would love to. Thank you for the invitation to speak to you today about Canberra's experience in partially legalising cannabis possession. I am afraid I may repay your kind invitation with testimony that is anticlimactic at best, because the story is that we found that cannabis use has not changed, and that is important because there were some really dire predictions at the outset. But while the sky has not fallen in, people who need access to treatment are better able to achieve that access and the taxpayer is saving money. It is a win-win.

Let us go to the data. Now, Mr Pettersson has stolen some of my thunder with the wastewater data, but I will just note that I agree with his interpretation; there was no change. It is difficult tracking illicit activity, so multiple data sources are used. Another source of data is the ecstasy and related drugs reporting system interviews. These are interviews with people who use ecstasy and other illicit stimulants. It is a sample recruited over social media advertisements and word of mouth, and it is useful because the data go back to 2003, which

is much longer than the wastewater data. But because it is a sample, we should not invest too much significance in small changes.

The data show that in 2020, the first year of the legalisation, 85 per cent of respondents used cannabis in the preceding six months. Now, this was slightly higher than the year before but slightly lower than the two years before that. In fact in the preceding 10 years only three had a lower rate of cannabis use than in 2020. Again, the evidence is that the legislation had no effect on the number of people using cannabis. Importantly, this other data source also lets us look at how frequently people were using cannabis—how many days—and there actually was a drop in 2020 compared to the previous year, but looking at the data overall, I think an intellectually honest interpretation would say ‘No change’.

Finally, we come to anecdotal evidence—for instance, from drug treatment providers who ATODA represents—and the story is similar. I am sorry to be boring here. One point of interest and I think of real importance, though, is that from this anecdotal data we do get the strong impression that more people are willing to come forward now for treatment for cannabis use, and so people who may have been using cannabis for some years or decades are coming forward because of the reduced stigma. In time this could put downward pressure on the number of people using cannabis.

In fact the legislation was such a non-event in Canberra that I know some epidemiologists and other people working in public health in Canberra did not know when the legislation came into effect. Now, to be fair to them we had just had the bushfires and they were growing increasingly interested in a little virus in Wuhan, but it still points to the brilliance, I think, of the ACT’s partial legalisation scheme. For people who do not use cannabis and who are not close to anyone who does, the legislation has had no effect on our lives. For those who do use cannabis or love someone who does, the legislation is potentially life-changing. It means that the threat of criminal conviction that would severely impede and restrict people’s life trajectories is off the table.

Now, Michael has talked about how one in three people have used cannabis in Australia. According to the AIHW, in 2019, 43 per cent of Australians 14 and up had used illicit drugs. Now, this is mostly cannabis, I would suggest, and likely an undercount because—surprise, surprise—people are sometimes hesitant to disclose an illicit activity on a government survey. Now, I grew up in circles that might be considered upper middle class or lower upper class and knew many people growing up who used cannabis at one point in their lives. Now, thank goodness most of them did not have any interaction with the police. They are now doctors, lawyers, midwives—there might even be a politician in there. The point is that they are now making great contributions to society because they did not get arrested. I also know someone who was arrested, and it has stunted his ability to make the contribution that he wants to make to society many years later—decades later. It is tragic.

Now, legislation that criminalises an activity that anywhere between a third and half of Australians have engaged in clearly needs rethinking from a human rights perspective. We do not want half the population to be in a lottery where there are no winners and losers get a criminal record. This is especially true when there are no health benefits to the criminalisation and if the arrests are unevenly applied. Most of my friends who used drugs did not get arrested because their families had the social status and money to insulate them from frequent police contact. Those of you who have a natural focus on equity have a lot to run with here, because disadvantaged people are arrested at much higher rates for the same activity that about a third to a half of Australians undertake. So pick your favourite disadvantaged group and see what the arrest data say. In examining whether criminalising an activity is reasonable, one approach is to ask: what would happen if enforcement were perfect? What if we could arrest everyone who should be arrested under the legislation? As Mr Pettersson has pointed out, that would see one in 10 of us behind bars.

Now, you do not need a focus on equity to be alarmed by the current situation in most Australian jurisdictions, including Victoria. All we need to know is that we are spending over a billion dollars a year imprisoning people because of cannabis, with many other associated costs, like almost half a billion dollars on policing. Over 20 per cent of drug arrests are for possession, not dealing. At the same time we are at best arbitrarily limiting the life chances of some Australians and limiting their ability to contribute to the economy with these arrest records. So it is costing a lot, and we are curtailing economic inputs—what a waste. You do not even need to care about people—you can care only about money, and it is really obvious. We could debate whether this is a worthwhile trade-off if there were health benefits, but Canberra’s experience shows that there are not any.

So a more rational approach I think for Victoria would be to adopt legislation similar to that in Canberra and pivot the approach to working with people who use drugs instead of against them. While many people can use drugs without problematic drug use, for some people drug use is problematic. In Canberra cannabis is the third most common drug for which people seek treatment, and about one in six people seeking alcohol and other drug treatment services attend for cannabis. Now, I understand you have heard from Mr Sam Biondo about the Australia-wide need to substantially increase investment in the availability of treatment and harm-reduction services. The best estimate is that capacity nationally would need to double. It is beyond my area of expertise, but I believe you have heard previous testimony that Victoria is behind the comparable states in this, and this is of course concerning. Now I welcome your further questions. Thank you.

The CHAIR: Thank you, Devin, and thank you both very much for your opening remarks and also the submissions that we have received. I will kick off the questions right now. I just wondered: in those first 12 months—given how anticlimactic it was and how, sadly, some people were not even aware that you had made this pioneering change in drug law reform in the ACT—what sort of public campaigns and education campaigns were undertaken? I am assuming the government actually did put in place some campaigns.

Mr PETERSSON: Yes. I will speak to that. Before the legislation came into effect, the ACT government commenced a public health campaign where we went out to the public with communications, TV ads, radio ads and online ads—just kind of a general government communications campaign—and we spoke to the wider population about some of the dangers of cannabis use. Those are well documented and well studied. We reiterated to the community, with this change, that there are dangers to cannabis consumption. I would say that it was a shame with this government that we were not proactively saying those things beforehand. I do not think in Australia you need to change the law to start having an honest and frank conversation about these substances. For the most part I do not think we do accurately talk about the harms of these substances. We kind of shroud everything with a ‘Just say no’ approach. That is what the ACT government did: we went out with a big public health campaign.

The CHAIR: Great. Thank you. As you both mentioned, this is not about making cannabis available in the ACT. It already was available. This was actually just about setting some parameters over its availability and not criminalising people who were using cannabis but also cultivating it. I note, Devin, in your submission to the ACT inquiry into the amendment Bill, you mentioned that the vast majority of Canberrans did not grow cannabis and in fact probably continue to not grow cannabis, so this leads us still into a black market in cannabis. I wondered if you could speak to some of the things that we could learn from that approach. I note that certainly the report and your submission talked about not-for-profit social clubs. Again, if we are going to try and keep people away from the illicit market, what else could we in Victoria do, and what could we learn from the ACT approach?

Dr BOWLES: Thank you. I think we are still learning about the ACT approach and exactly how things will balance out, because you are right, there is a little bit of legislative tension in that people are allowed to possess cannabis that maybe they are not allowed to acquire. What this does on the ground is substantially reduce the number of people who are arrested for cannabis, and that is really useful. I guess it contrasts with other approaches to cannabis that have legalised other methods, more commercial methods potentially, of distribution, and that has occurred in some jurisdictions outside of Australia. I guess there are costs and benefits to that. I think there is some evidence that, depending on the way that that legalisation of distribution is done, it can lower the cost of cannabis but by the same token it can reduce the amount of black market activity. I guess my approach is to consider what is going to reduce harms as far as possible, and those harms can be directly from drug use and they can also be from interaction with the criminal justice system for something that ought not be criminalised.

The CHAIR: Thank you, Devin. Hopefully, I will have time to come back, but I might go to David, then Matthew, then Sheena. So, David.

Mr LIMBRICK: Thank you. One aspect that was quite interesting about the ACT legislation was the idea you are able to grow two plants up to a limit of four for a household. Do we have any evidence of people taking this up and becoming better gardeners and things like that? Because I can grow tomatoes at home, but I still choose to go to the supermarket because I am a terrible gardener. I suppose what I am getting at is: how much of that black market has been taken away by people gardening at home? Is it substantial, or is it still mostly the black market that is happening here?

Mr PETTERSSON: I might have a go at answering that, first and foremost. I do not think it would shock anyone to learn that people were growing cannabis in the ACT before these reforms, and people have continued to grow cannabis with these reforms. Anecdotally, I have heard stories of some people who are now very enthusiastic and keen to try growing cannabis. I would not say it is a particularly large or startling number. I would say it is quite a small number. The biggest complaint that I actually hear about growing cannabis is that Canberra's climate is not particularly conducive to growing cannabis. I think that is the primary concern of most people interested in growing cannabis.

Mr LIMBRICK: On that topic, why was it chosen to only allow outdoor cannabis and not hydroponic? My understanding is that most of it is grown hydroponically because you can control the environment and the nutrients and all that sort of stuff. Why was that distinction made?

Mr PETTERSSON: Yes. That amendment was not in my initial proposal, but that amendment was made. The reasoning made by those who put forward that amendment was that they wanted to better enable police to identify commercial growers from people growing for their own personal consumption.

Mr LIMBRICK: Another aspect of decriminalisation that we have heard a lot about is about the idea that large amounts of police resources go into arresting people for possession and then all of the criminal justice consequences of that. Assuming that there have not been changes in the police budget, do we have any evidence yet—it is probably a bit early, I understand—that the police are able to focus on other more important and more serious issues than what they were focusing on before, because presumably if they are not arresting people for possession of weed, then they will be doing something that is more serious. Is there any evidence from the police that we have heard that they are becoming more effective?

Mr PETTERSSON: I am happy to answer that if you do not want to chime in, Devin. I will let you in on the big secret of the ACT. For the most part, ACT police have been operating under guidance not to go after individual consumers of drugs. For the most part, ACT courts have been doing their very best to keep people that use drugs out of jail. ACT police for a very long time have been doing their very best not to catch people using drugs. It is actually an implicit instruction for them that they do not go out to pursue individual consumers of drugs. So there has not been a complete reallocation of police resources, but the honest answer is they were already kind of doing that anyway.

Mr LIMBRICK: Yes, that is an interesting point.

The CHAIR: Matthew.

Dr BACH: Thanks, Chair, and thanks, Michael and Devin. It is fascinating to hear from you and your experiences in the ACT. Obviously a big focus has been on the legislative process in your jurisdiction and legalisation. You just now, Michael, and I think Devin in response to the Chair's earlier question, spoke a little bit more broadly about some of the other things that we could also look at in an effort to reduce the harm from cannabis. I wonder if you would not mind talking a little bit more about that. What are some other measures you would suggest we look at really closely as ultimately we reach the point where we finalise our report to Parliament?

Mr PETTERSSON: I will let Devin take that one, because I am biased.

Dr BOWLES: Well, I guess one of the benefits of the legislation in the ACT is that it appears not to have substantially changed the price of cannabis or the availability of cannabis. You know, I have not canvassed the views of my members on this, so I am speaking personally here. But when I was a boy growing up in California, driving down the freeway we would see billboards advertising cigarettes. Now, thankfully California, like Australia, has made that no longer possible. You are not allowed if you are a cigarette company to advertise on billboards. But when I return to visit California now, on those same billboards I see cannabis advertised, and that is one path to take. I think it has some disadvantages. As Michael has said, cannabis is not health food, it has health harms, even if it can be used in some instances medicinally. So I guess what I would encourage you all to think about is how to maximise the safety for people who are using cannabis and to think about how reforms can reduce the demand for cannabis.

One thing that I think is really important is peer education. Peer-to-peer approaches, when implemented in [Zoom dropout] context are really helpful. In the ACT we have a great peer user group, and just announced in

the federal budget, Victoria is looking at some extra money for extending the take-home naloxone trials. That is fantastic. Congratulations. That work started in Australia at the ACT's peer-based group for people who use drugs, and what they have done is educate much of Canberra about some of the risks of opioid use and educate people about how an overdose can be reduced or ended with naloxone and educate people and provide people with naloxone so that they can give it to their friends when they need it. This has saved lives, and the work of Dave and Damien at CAHMA has been massive in this space.

I know that is not cannabis, but it really shows the power of what peer-to-peer education can do. I guess I would say overall that school-based drug education programs generally fall into the category of popular but not proven. A lot of programs have a sort of implicit appeal, but the studies we have done on them show only moderate amounts or very modest cost benefit and cost effectiveness and small effect sizes. There have been a few education programs, and I can provide some detail on the research literature on this that shows that some drug programs can be useful in Australia, but a lot of it is a waste of money. So you need to be really sure that you are picking the right one, and I will send you that data out of session.

Dr BACH: That is great. That is fantastic. But then, Michael, you made some comments about education campaigns earlier in response to a question from the Chair. Noting that you say on this question you are biased, would you be able to talk a little bit more about school education campaigns, because that is an element in terms of education campaigns more broadly, and certainly as a former schoolteacher myself, Dr Bowles, I would agree with your analysis of current approaches to drug education in our schools entirely.

Mr PETTERSSON: Could you just repeat the specific question for me?

Dr BACH: Just whether you have any further views, Michael, about the way we could engage with people, especially young people, educationally, in particular because that was a point that you did reference earlier.

Mr PETTERSSON: I do not want to speak to the specifics of what an education campaign should and should not contain in general. The remark that I would make is that our drug discourse for the most part is dishonest. We do not actually talk about the real dangers and the real issues behind these substances. We hide behind the veil of 'Just say no' and we do not talk about what the problems at hand actually are, and I would say that probably starts in school. I went to public schools and I reflect on the education I received and the health information that I received, and I would not describe it as fulsome. It was for the most part grounded in the 'Just say no' approach, so I think if we started to have a healthier conversation with young people about these substances—what that looks like for the detail, I do not know, but I think talking to kids, talking to young people in an honest, up-front way is the best way to engage with them.

Dr BACH: That is great. Many thanks to both of you. Thanks, Chair.

The CHAIR: Thank you. Sheena.

Ms WATT: Thank you to you both for your comments today and for your submission. I did have a question just for Mr Pettersson, if you are about, which was: obviously there are still penalties in place for cannabis-related offences; have you found that compliance with the law has increased since the implementation of the Act earlier on?

Mr PETTERSSON: Could you potentially explain what you mean by 'compliance with the law'?

Ms WATT: Other areas of the law that are around cannabis-related offences, whether that is supply or those that have larger quantities. What is going on in the rest of the cannabis use broadly in the ACT, separate to those that are falling within this legalised structure?

Mr PETTERSSON: Yes. I think I understand the question. Feel free to stop me if I am heading off on the wrong path. Whilst the ACT—

Ms WATT: Are the bad guys still doing bad guy stuff, or has that number dropped? That is kind of the question broadly.

Mr PETTERSSON: Yes. While the ACT made changes to possession offences, we did not make changes to drug driving or possession for minors. We made no changes to the supply. So, I do not have any data at hand, but I can safely assure you there are still people selling cannabis in the ACT. The ACT police have continued,

like they did before the change, to go after the people that are supplying these drugs—organised criminal cartels. As to the actual number, I am not sure. I would hazard a guess that as consumption has not changed in any notable way, I would say the supply side of the equation is probably much the same as it was before, which is worth remarking upon because under the proposal there is the option for people to grow their own supply of cannabis. Some people are taking that up. I would say that they are definitely the minority of cannabis users, so most people are still acquiring their cannabis through the black market.

Ms WATT: Yes, I think that was really my question. It was around, you know, supply. Have we seen an increase in suppliers coming to the ACT because of what they might view as favourable legal conditions, or has that in fact stayed the same from what you understand it to be? But that is actually an interesting reflection, that if consumption has not changed, it makes sense that then supply has not necessarily changed in number. Obviously people have choice now around growing their own or continuing to go through measures that they have done for years and years, but that was just sort of my point, to ask that, so thank you so much for that. I will come back to another question later.

The CHAIR: Thank you. That follows on quite nicely with the other area that I would like to explore. When your Standing Committee on Health, Ageing and Community Services conducted the inquiry into your Bill, Michael, one of their recommendations was around what is colloquially called a ‘cannabis social club’. So it was around enabling people to join groups to cultivate. This I think was in response to probably what Sheena was saying and what you have been remarking on—that most people still are not growing their own. The vast majority of people are still relying on the black market to purchase their cannabis. And while that recommendation obviously was not taken up, I note that, Devin, it was also in your submission to that inquiry as well. I am wondering what the conversation was and what the reasoning was for not taking up that opportunity to really, I guess, take a real hold of that illicit market by enabling a legal supply avenue?

Mr PETERSSON: Yes. It is a very good question, and it is something that we have discussed in the ACT quite widely. Whilst the changes were about possession, possession is just one side of the coin. Supply for the most part is still controlled by organised criminal gangs, and I will put it out there: I do not particularly like organised criminal gangs. I think that is the view held by most people. Cannabis social clubs are I think a neat and practical solution to supplying cannabis to people that want to consume cannabis. I also think a retail dispensary model has some upsides as well. Why these were not pursued in the ACT is a somewhat boring answer. Whilst a lot of ACT politicians spoke about this as a problem, the supply side, we encountered a lot of resistance on a legal front trying to address the possession side. So there was a lot of uncertainty and apprehension about trying to address the supply side at the same time. I am a little bit shady myself on how the ACT would go about legislating in that space; I am a bit apprehensive of it. I have spoken quite publicly about, I think, the need for reform in that space. As to what the solution would look like in the ACT, I do not know.

The CHAIR: Thanks, Michael.

Dr BOWLES: If I could—

The CHAIR: Devin. Yes, thank you.

Dr BOWLES: I was just going to add that to a large extent the question revolves around what harms you are trying to minimise, and if the main concern is that you do not want people’s lives and life choices to be curtailed by arrest, then you look at the possession side. Similarly, if you want to save 80 per cent of the money on law enforcement and prisons, then you look at the possession side of the equation. Similarly, if you want to encourage people into treatment by reducing stigma and having, as Mr Pettersson has said, a more honest conversation about drugs, then you look at the personal possession side. So to me that is a very good place to start.

Now, are there harms associated with a black market in illicit drugs? Of course there are. But there are harms associated with a white market in tobacco—right? Like, we can demonise people who deal drugs all that we want, and I probably do not feel terribly different about the organised cartels that Mr Pettersson spoke about than he does, but really executives at Philip Morris are not my favourite people either.

The CHAIR: No. But I think, Devin, what I am getting at is that while we do not like these criminal cartels, we have said that the product is legal. But have not really provided any, I would say, practical ways for the product to be available legally. Now, we have said that you will not be prosecuted for possessing it, but given

that—I think it was in your submission to the committee—83 per cent of a sentinel group were purchasing cannabis, I guess for us if we know that the biggest harm for cannabis is not necessarily the substance itself but brushing up against the justice system and the criminal system, then we as a committee should consider how we can protect people from the criminal system and how we can, I guess, keep criminals out of people's lives. I suppose that is where I am trying to explore—where Victoria might go and where Victoria might build on the great work that the ACT has done.

Mr PETTERSSON: Yes. Let me jump in very quickly. Very simply, as an explanation of the law, there is an offence for possession and there is an offence for supply. There is not an offence for purchasing. So someone purchasing cannabis from a black market dealer is not inherently committing an offence. The solutions that you kind of led with, Ms Patten, can be social clubs. They are neat, novel solutions, and if that is a path that Victoria thinks is possible, then I think there are many benefits to a model like that. It would allow people to get cannabis without having to interact with organised criminal elements. I see many upsides to that. The same could be said for a retail dispensary model. But what I would caution, and this is something that I try to emphasise as much as I can, is that we need to be very careful that we do not encourage or increase cannabis use. I have similarly been to America and I have seen cannabis advertisements, I have seen a commercial market set-up that very much had a commercial imperative to try and increase cannabis use. I do not think that is the best outcome either. I think you need to find the right middle ground between treating this as a public health problem, getting people the support and the services they need, removing individual consumers from the criminal justice system, removing that large amount of money from organised criminal gangs and at the same time finding a way that people are not trying to profiteer and inherently trying increase cannabis consumption.

The CHAIR: Yes. Thanks, Michael. I think that is really well said. Certainly if we want to keep cannabis out of the hands of children and out of the hands of criminals, which is, in shorthand, what this committee is looking at, then we probably do need to work out how we keep supply out of the hands of criminals—and I agree with you—without increasing the demand for it. It is a very free market, it is not regulated at all, but the commercial market in the US is not the way that we would probably travel, and the work that we have done in tobacco and alcohol is very different to the work that has been done in the United States as well. I think we do not cherish freedom of speech in quite the same way and freedom of the market in quite the same way as the Americans do. But thank you; that was really succinct. David.

Mr LIMBRICK: One other thing. One interesting comment that you guys have made and that I have noticed is the unremarkable way that this legislation came in. As you said, it has probably had a lot to do with COVID. I was barely paying attention to it myself despite my interest in this area. But one of the criticisms of decriminalisation of possession has been around the possibility of increased consumption. I know that you have said that the current knowledge—although it is a bit early—from wastewater analysis is that consumption has not increased, and we have heard that from other witnesses about other jurisdictions. I see your point that a commercial market may increase demand, but in a decriminalised situation increased consumption sort of implies that there is a large number of people that want to purchase it now that cannot purchase it and once it becomes decriminalised will rush in and buy it. What do you say to that idea from the ACT's perspective? That just did not appear to happen, did it?

Mr PETTERSSON: I am happy to take the lead on that. I think you are right to point out that on the margins there are probably some people that exist that want to use cannabis but do not use it for fear of legal consequences. They exist. What I would say to that though is overwhelmingly people that want to use cannabis are using it right now. Cannabis is incredibly easy to get. Whether it be, and I should not laugh when I say this, quite literally in every single school in Australia, any nightclub, public transport interchange, these substances are incredibly easy to find. So if someone wants to use this substance, for the most part they are already using it.

Now, I believe that when you set up a commercial market—I think the best examples are in America—when you allow advertising, when you create this commercial imperative for people to try and increase their profits, people generally try to push this substance on people, and I suppose on people that due to circumstance might develop an interest in it. If we can stop people developing an interest in using drugs, that is a good thing. I am a politician, like most of you. I take my responsibilities to represent the best interests of my constituents just as seriously as you do, and I think all of you would know that life would be a lot easier if everyone just liked to go for a nice, gentle walk once a day and ate all of their fruit and vegetables. Unfortunately there are some people that like to use these substances. What we should do is do everything we can to try and reduce that number. The

ones that do choose to use these substances, we need to do everything we can to support them and try to keep them healthy.

The CHAIR: Thank you. Sheena.

Ms WATT: I did have a follow-up question for Mr Pettersson which is about the Aboriginal and Torres Strait Islander take-up of cannabis in the ACT. We have heard, interestingly, in Victoria that it is in fact the primary preferred choice for Aboriginal and Torres Strait Islander people in this state. I just wonder if you have any evidence around Aboriginal and Torres Strait Islander communities in the ACT and their consumption preferences and other information that might be helpful for the committee around particular groups and if there are any in fact insights of other groups. I know we have talked a little bit about low socio-economic communities, but other—

Mr PETTERSSON: I can give you a kind of basic answer on that.

Ms WATT: Yes. A basic answer would be helpful, I think.

Mr PETTERSSON: I suspect, though, Devin could actually have a far better answer than I will.

Ms WATT: Or Devin. Yes. I would be happy if that is available.

Dr BOWLES: A specific answer is beyond my expertise. I will note, though, that problematic drug use is frequently the result of trauma and early disadvantage, and that is for any sort of drug.

Mr PETTERSSON: I will add on top of that that the ACT does have an overrepresentation of Indigenous people in our criminal justice system. The specifics of how they got into the criminal justice system are not in front of me, and I do not have the data. I suspect some of that would most definitely be due to drugs and alcohol. I have seen it in other jurisdictions. I think I saw some reporting out of New South Wales about the overrepresentation of Indigenous Australians due to cannabis possession offences. I suspect something would similarly have been occurring in ACT previously. I just do not have that data in front of me, I am sorry.

Ms WATT: That is all right. I appreciate that. Thank you.

The CHAIR: Thank you. Devin, if I could just ask you specifically about a comment that you have made in your submission to the committee, and this was in response to Jeremy Hanson arguing that cannabis use had a significant impact on psychosis particularly for young people. Your submission went on to say that there was a misunderstanding of the scientific evidence on the subject, and it went on to say that research evidence does not demonstrate a strong causal relationship, rather that cannabis use and some adverse health consequences are confounded by common antecedents. I wonder just for the committee if you might be able to expand a little bit on that. I certainly heard from another expert last week, Joe Boden, who was suggesting the same thing—that how we are testing psychosis and cannabis connections is problematic at best.

Dr BOWLES: Look, I am aware there is debate on this point. You have referenced my submission, and I am not sure which submission you mean.

The CHAIR: This was the one that you actually made to the Standing Committee on Health, Ageing and Community Services, so I appreciate that this was probably some time ago. This was in relation to your submission to Michael's Bill.

Dr BOWLES: This, I am afraid, was my organisation's submission, and it was before me. So I have sadly answered your question to the limit of my competence.

The CHAIR: Great. I think it is an interesting perspective that you have put there, and I am just wondering: could I ask if you might have a look at that on notice?

Dr BOWLES: I will do that.

The CHAIR: Because the way that your organisation did approach that question, I think, was interesting, and I would love to hear if your association did actually have some more information on that area.

Dr BOWLES: I will be very happy to provide that. Thank you.

The CHAIR: Thank you, Devin. David.

Mr LIMBRICK: Thank you, Chair. One final question from me to Mr Pettersson: what is the current situation for people who have existing possession convictions recorded? And excuse my ignorance on this—I probably could have researched it, but I did not think to beforehand. Are there any plans to purge those convictions for people who currently have possession convictions?

Mr PETTERSSON: Good question. The inquiry that has been referenced a couple of times, the health and community services inquiry into my Bill, one of the recommendations from that committee was that previous convictions be expunged. I am really trying to recall here—I think the government response was that it was noted, potentially agreed in principle. In short no convictions have been expunged. It is an idea that had been floated. I do not think there was any real community opposition to it; however, I am just not sure where that has gone to.

Mr LIMBRICK: Okay.

The CHAIR: Thank you. Finally, just a quick one, again following up on this: that committee into your Bill, Michael, also recommended that the ACT government collaborate with the ACT police to adopt a cannabis drug-driving test that determines impairment rather than presence. Is there any update in that area?

Mr PETTERSSON: I do know that Devin knows a lot more in this space than I do. There have been no changes to drug driving in the ACT; the offence and the testing regime remain the same. But there is a genuine discourse about what drug-driving offences should constitute, whether it is about the presence of these substances or about the impairment they cause. I have spoken to police about this issue. I would summarise their primary concern as they do not necessarily think they have got the technology to properly implement a scheme like that. But I can only imagine all of the amazing scientists around the world are working away to try and find an impairment test for some of these substances.

The CHAIR: Yes. Devin, did you have anything to add?

Dr BOWLES: No—well covered.

The CHAIR: Great. Look, if there are no more questions, thank you both very much for joining us today. Thank you very much for the time—and for the work that you are doing in the ACT. It has been great to see a model operating. It has been great to, I suppose, hear the expressions of disinterest about what may have been considered quite a radical model. Again, thank you so much. We have really appreciated your contributions today. As I mentioned at the outset, you will receive a transcript of today's hearing. I would encourage you to have a look at that and make sure that we have not misrepresented what you have told us today. We will send you a copy of our report. The committee will now go on a break until 1.45. Thank you.

Witnesses withdrew.