Submission No 58

INQUIRY INTO USE OF CANNABIS FOR MEDICAL PURPOSES

Organisation: NSW Council for Civil Liberties

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The NSW Council for Civil Liberties considers that drug use should be addressed as a health issue, not a legal issue.

The use of cannabis for medical purposes should be decriminalised to allow its use if medically-qualified people consider that it has health benefits.

The Committee should recommend that a trial of medical cannabis be commenced as soon as practicable.

The inquiry should only consider the health impacts relating to the medical use of cannabis and not any wider impacts. To consider a wider range of issues may deny patients the potential benefits of the use of cannabis.



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Submission to the NSW Legislative Council General Purpose Standing Committee no. 4 Inquiry into the use of cannabis for medical purposes

CCL is committed to protecting and promoting civil liberties and human rights in Australia.

CCL is a Non-Government Organisation in Special Consultative Status with the Economic and Social Council of the United Nations, by resolution 2006/221 (21 July 2006). CCL was established in 1963 and is one of Australia's leading human rights and civil liberties organisations. Our aim is to secure the equal rights of everyone in Australia and oppose any abuse or excessive power by the State against its people.

We thank the General Purpose Standing Committee No. 4 for the opportunity to contribute to this inquiry.

The Terms of Reference for this inquiry include the following.

- 1. That General Purpose Standing Committee No. 4 inquire into and report on the use of cannabis for medical purposes, and in particular:
- (a) the efficacy and safety of cannabis for medical purposes;
- (b) if and how cannabis should be supplied for medical use;
- (c) legal implications and issues concerning the use of cannabis for medical purposes; and
- (d) any other related matters.

The NSW Council for Civil Liberties (NSW CCL) campaigns for evidence-based drug policy. In its 2012 submission to the NSW Legislative Council Legal Committee Inquiry into law reform issues regarding synthetic drugs, the NSW CCL stated:

'Recognising the failure of prohibition, the CCL maintains that there should be a comprehensive review to identify which laws impact adversely on public health and require amendment, and should explore and seek to implement workable alternatives to current policies. The Legal Committee is urged to recommend such a review.

Harm reduction should be the standard against which we measure the success or failure of drug laws and proposals for change.

Drug addiction and the use of dangerous drugs should be addressed as a health issue, not as a legal one.

We should look to regulate the sale and use of drugs which are now banned, as we regulate the sale and use of tobacco and alcohol.

Prison should not be a sentencing option for use or possession. The offences of the use of an illicit drug and the possession of a small quantity for personal use should be abolished.

The experience of other countries, especially Portugal, in which an approach other than banning the manufacture, sale, possession and use of drugs is used, should be carefully studied. Policies on drugs should be based on research evidence.'

The NSW CCL reaffirms this stance, and considers that the use of cannabis should be decriminalised and regulated. In line with this view, the use of cannabis for medical purposes should be decriminalised and subject to the same regulatory regime as the use of any other substance for medical purposes.

The efficacy and safety of cannabis for medical purposes

We understand that cannabis has been used for thousands of years for medical purposes and may be used for medical purposes in a number of jurisdictions outside Australia. As at 2006, these included the U.K., Denmark, the Czech Republic, Austria, Sweden, Germany, Spain, Canada, Italy and New Zealand. As of now, they include at least 17 of the states and the District of Columbia in the United States.

A number of inquiries over the last two decades have examined the use of cannabis for medical purposes. In NSW, the 2000 *Report of the Working Party on the Use of Cannabis for Medical Purposes* by the UNSW National Drug and Alcohol Research Centre examined the matters that form the subject of this inquiry. The NSW Parliamentary Library Research Service produced a research report in 2004 entitled *Medical Cannabis Programs: A Review of Selected Jurisdictions*. The current inquiry should consider these and more recent resources.

In 2003 the NSW Government proposed a four year trial of medical cannabis. This trial has not yet commenced and we strongly urge the Committee to recommend such a trial start as soon as practicable.

The committee should examine the potential use of cannabis for medical purposes purely as a function of its medicinal qualities and not in relation to wider social, economic, or criminal grounds. The use of these 'wider' grounds may provide a convenient way to deny people any benefits of the use of cannabis. We understand that studies indicate that while there are some benefits from using cannabis for medical purposes, there are also harmful consequences associated with long-term and inappropriate use.

If and how cannabis should be supplied for medical use

As mentioned above, we consider that cannabis should be able to be used for medical purposes. Needless to say, if it is to be supplied for medical use, it should be supplied in a way that is safe for patients – which might have implications for the mode of delivery.

Legal implications and issues concerning the use of cannabis for medical purposes

There are a number of potential legal implications and issues regarding the use of cannabis for medical purposes. Currently:

- the possession and use of cannabis, cannabis resin or hash oil may result in a fine of up to \$2,200 and/or community service or a 2 year jail term;
- growing, importing or seeling cannabis can result in higher penalties; and
- police can issue a caution to adults in possession of up to 15g of cannabis leaf.

If cannabis was permitted to be used for medical purposes, the production, supply (along the entire supply chain) and use of it for appropriate medical purposes should not attract penalties. While we advocate that its non-medical use should be decriminalised, if the non-medical use of cannabis was to continue to attract penalties, a regulatory regime may need to be developed to regulate its medical use.

Our initial view is that such a regulatory regime may have complexities, potentially requiring strict government regulation surrounding the growing of and supply of cannabis for medical purposes. There are a range of regulatory regimes in the United States surrounding the medical use of cannabis and it might be useful for the committee to consider these and other regimes.

Conclusion

The inquiry should only take into account the health impacts of the medical use of cannabis and not any wider impacts. To consider a wider range of issues may deny patients the potential benefits of its use. The use of cannabis for medical purposes should be decriminalised to allow its use if medically-qualified people consider that it has health benefits.

Dr Sacha Blumen

Co-convenor, Police Powers and Civil Rights Sub-committee