

2014/02: Should Australia legalise the sale and consumption of marijuana?

What they said

'Use of cannabis at a young age and heavy use of cannabis are associated with up to six times the risk for schizophrenia'

The Australian National Cannabis Prevention and Information Centre

'Despite its use by millions of people over thousands of years, cannabis has never caused an overdose death'

Professor Lester Grinspoon, former Associate Professor of Psychiatry, Harvard Medical School

The issue at a glance

On January 2, 2014, the president of the Help End Marijuana Prohibition (HEMP) Party, Michael Balderstone, called for a referendum on whether Australia should legalise the sale and consumption of marijuana. Mr Balderstone believes that such a referendum would result in the legalisation of the drug across the country.

Mr Balderstone's demand was made in response to a recent change to the law in the American state of Colorado, where the sale of up to 28 grams of marijuana became legal on January 1, 2014.

Those Australian political leaders who have responded to Mr Balderstone's call have been dismissive of it. Victoria's Acting Premier, Peter Ryan, rejected suggestions marijuana would be sold legally in his state. Mr Ryan stated, 'Absolutely not a chance.'

In November, 2013, the New South Wales government rejected the recommendation of a cross-party committee that the terminally ill be able to access marijuana for medical purposes.

Supporters of the legalisation of marijuana claim the views of governments are out of kilter with those of a majority of Australians.

Background information

The legality of cannabis varies from country to country. Possession of cannabis is illegal in most countries and has been since the beginning of widespread cannabis prohibition in the late 1930s. However, many countries have decriminalized the possession of small quantities of cannabis, particularly in North America, South America and Europe. Furthermore, possession is legal or effectively legal in the Netherlands, Uruguay and in the U.S. states of Colorado (Colorado Amendment 64) and Washington (Washington Initiative 502) as the federal government has indicated that it will not attempt to block enactment of legalization in those states. On 10 December 2013, Uruguay became the first country in the world to legalize the sale, cultivation, and distribution of cannabis.

The medicinal use of cannabis is legal in a number of countries, including Canada, the Czech Republic and Israel. While federal law in the United States bans all sale and possession of cannabis, enforcement varies widely at the state level and some states have established medicinal marijuana programs that contradict federal law—Colorado and Washington have repealed their laws prohibiting the recreational use of cannabis, and have instated a regulatory regime that is contrary to federal statutes.

Some countries have laws that are not as vigorously prosecuted as others but, apart from the countries that offer access to medical marijuana, most countries have various penalties ranging from lenient to very severe. Some infractions are taken more seriously in some countries than others in regard to the cultivation, use, possession or transfer of cannabis for recreational use. A few jurisdictions have lessened penalties for possession of small quantities of cannabis, making it punishable by confiscation and a fine, rather than imprisonment. Some jurisdictions/drug courts use mandatory treatment programs for young or frequent users, with freedom from narcotic drugs as the goal and a few jurisdictions permit cannabis use for medicinal purposes. Drug tests to detect cannabis are increasingly common in many countries and have resulted in jail sentences and loss of employment. However, simple possession can carry long jail sentences in some countries, particularly in parts of East Asia and Southeast Asia, where the sale of cannabis may lead to life imprisonment or even execution.

Marijuana and the law in Australia

History

In 1913 Australia signed the International Hague Convention on Narcotics, and extended importation controls over drugs other than opium. 1921 saw the first international drug treaty (the Opium Convention), and in 1925 the Geneva Convention on Opium and Other Drugs saw restrictions imposed on the manufacture, importation, sale, distribution, exportation and use of cannabis, opium, cocaine, morphine and heroin for medical and scientific purposes only.

In 1926 the Commonwealth Government banned the importation of cannabis; in 1928 Victoria passed the Poisons Act and became the first state to control cannabis, followed by South Australia (1934), NSW (1935), Queensland (1937), Western Australia (1950) and Tasmania (1959). In 1940 the Commonwealth extended import restrictions on Indian hemp, including preparations containing hemp.

In 1961 Australia signed the International Single Convention on Narcotic Drugs. This convention supports an obligation to make cannabis available as a medicine. Most current state and federal cannabis control Acts in Australia are in contradiction to this.

Current legislation

Australia has largely avoided a punitive drug policy, developing instead harm-minimisation strategies and a treatment framework embedded in a law-enforcement regime. Import and export of cannabis is illegal, and federal penalties apply. Offences can lead to sentences of up to life imprisonment for cases involving import or export of commercial quantities (100 kg and above for cannabis, 50 kg and above for cannabis resin and 2 kg and above for cannabinoids). Offences for quantities below a commercial quantity have lesser penalties attached. Federal offences also target the commercial cultivation of cannabis, domestic trafficking and possession. However, most cannabis offences committed are dealt with under state and territory legislation.

Penalty systems in Australian states and territories

Australian Capital Territory (ACT)

A civil-penalty system for possession of small amounts of cannabis was introduced in 1993. Possession of up to 25g or two non-hydroponic plants attracts a fine of 100 Australian dollars, due within 60 days. Offenders can choose to attend the Alcohol and Drug Program. In South Australia possession of small quantities of cannabis is decriminalised, attracting a fine similar to that for a parking ticket. However, penalties for growing cannabis have become harsher since the advent of widespread large-scale cultivation. There is much confusion on the subject, with many believing that possession of a small amount of cannabis is legal.

Western Australia

As of August 2011, a person found in possession of 10g or less of cannabis will receive a Cannabis Intervention Requirement notice to attend a mandatory one on one counselling session. Quantities larger than this attract a penalty of \$2000 or two years in jail, or both. A person found in possession of more than 100g of cannabis would be deemed to have that quantity for supply and could face a penalty of \$20,000 or two years in jail. It is also illegal for cannabis smoking implements to be displayed in shops or sold, with fines up to \$10,000 for sales to adults and jail for up to two years or a fine of up to \$24,000 for selling to minors. Opposing political sides have accused the government of changing the laws to appear tough on drugs in response to an increased public fear of clandestine drug labs following a number of them exploding in suburban areas.

New South Wales, Queensland, Victoria and Tasmania

Possession and use of cannabis is a criminal offence; however, it is unlikely that anyone caught with a small amount will be convicted. Diversion programs in these states aim to divert offenders into education, assessment and treatment programs. In *New South Wales*, if one is caught with up to 15g of cannabis, at police discretion up to two cautions can be issued. In *Tasmania* up to three cautions can be issued for possession of up to 50g of cannabis, with a hierarchy of intervention and referrals for treatment with each caution.

Similarly, in *Victoria* up to 50g of cannabis will attract a caution and the opportunity to attend an education program; only two cautions will be issued. In *Queensland*, possession of cannabis or any schedule 1 or 2 drug specified in the Drugs Misuse Regulation 1987 carries a maximum prison sentence of 15 years; however, jail terms for minor possession is very rare. Possession of smoking paraphernalia is also a criminal offence in Queensland. However, under the Police Powers and Responsibilities Act 2000 a person who admits to carrying under 50g (and is not committing any other offence) must be offered a drug diversion program.

Adults in the *Northern Territory* found in possession of up to 50g of marijuana, one gram of hash oil, 10g of hash or cannabis seed, or two non-hydroponic plants can be fined \$200 with 28 days to expiate rather than face a criminal charge.

With the rapid expansion in hydroponic cannabis cultivation, the Australian Drug Misuse and Trafficking Act (1985) was amended in 2006; the amount of cannabis grown indoors under hydroponic conditions that qualifies as a 'commercial quantity' or as a 'large quantity' was reduced.

Internet information

Youth Beyond Blue has an information sheet giving the possible mental health impacts of marijuana use for young people.

This information can be accessed at <http://www.youthbeyondblue.com/factsheets-and-info/fact-sheet-10-cannabis-and-your-mental-health/>

The Australian National Cannabis Prevention and Information Centre has information on the extent of marijuana use in Australia and police and legislative attempts to minimise it.

This information can be accessed at <http://ncpic.org.au/ncpic/publications/aic-bulletins/article/policing-and-cannabis-use-in-australia>

The site also includes information on the health effects of marijuana.

On January 18, 2014, The Sydney Morning Herald published an opinion piece by Jen Vuk titled 'Legalising marijuana creates big problems in preventing teen access'

The comment argues that legalising marijuana would make it more difficult to stop young people accessing it.

The full text of this article can be accessed at <http://www.smh.com.au/comment/legalising-marijuana-creates-big-problems-in-preventing-teen-access-20140117-310d7.html>

On January 13, 2014, The Observer published an article looking at the effect that the legalisation of marijuana in Colorado and Washington State has had on the marijuana debate in Australia. The article is titled 'Cannabis debate lights up after US states change laws'

The full text of this article can be accessed at <http://www.gladstoneobserver.com.au/news/cannabis-debate-lights-up-us-changes-law/2137272/>

On January 11, 2014, The Courier Mail published an opinion piece by Paul Syvret titled 'Legalising marijuana would have huge benefits for the Australian economy, while cutting criminals out of the drug supply'

The full text of this article can be accessed at <http://www.couriermail.com.au/news/opinion/opinion-legalising-marijuana-would-have-huge-benefits-for-the-australian-economy-while-cutting-criminals-out-of-the-drug-supply/story-fnihsr9v-1226799227264>

On January 2, 2014, Australian Times UK published an article titled 'Pot shops in Australia? New calls to legalise marijuana in Oz' which reports on the HEMP party calling for the legalisation of marijuana in Australia in response to the legalisation of the drug in Washington State and Colorado.

The full text of this article can be accessed at <http://www.australiantimes.co.uk/news/news-from-australia/news-in-australia/pot-shops-in-australia-new-calls-to-legalise-marijuana-in-oz.htm>

On December 4, 2014, The Conversation published an opinion piece titled 'Free the weed, but growing an effective market would be tough'. The comment was written by Craig Ancrum, Senior Lecturer in Criminology at Teesside University.

The article explores the difficulties of establishing a legal marijuana industry in Britain.

The full text of this article can be found at <http://theconversation.com/free-the-weed-but-growing-an-effective-market-would-be-tough-20862>

On November 24, 2013, The Daily News published an article titled 'More drivers test positive for pot since Washington legalized cannabis: cops' The article details an increase in the number of drivers detected driving under the influence of marijuana since the drug was legalised in Washington State.

The full text of the article can be accessed at <http://www.nydailynews.com/news/national/drivers-test-positive-pot-cannabis-legalization-wash-cops-article-1.1527867>

On November 14, 2013, The Conversation published a comment by Stephen Pudney, Professor of Economics at the University of Essex. The article is titled 'Analysis reveals economic benefits of legalised cannabis'.

It outlines the economic benefits to be gained by legalising marijuana distribution and use.

The full text of the article can be accessed at <http://theconversation.com/analysis-reveals-economic-benefits-of-legalised-cannabis-20281>

On September 19, 2013, The Conversation published an article by Ian Hamilton, a Mental Health Lecturer at the University of York. The article is titled 'There's still too much haze around cannabis psychosis' and it explains the difficulties associated with determining the extent to which cannabis use poses a risk to health.

The full text of the article can be accessed at <http://theconversation.com/theres-still-too-much-haze-around-cannabis-psychosis-18386>

On August 27, 2013, The Conversation published an article by Peter Watt, lecturer, Department of Hispanic Studies at the University of Sheffield. The opinion piece is titled 'What Uruguay's legal weed means for the war on drugs'. It analyses the broader implications of Uruguay having legalised marijuana.

The full text of this article can be accessed at <http://theconversation.com/what-uruguays-legal-weed-means-for-the-war-on-drugs-16646>

On July 25, 2013, Independent Australia published a comment by Grant Wyeth titled 'Legalising marijuana is the only way'. The opinion piece argues that legalising marijuana is the only way to stop the increasing use of synthetic cannabis.

The full text of this comment can be accessed at <http://www.independentaustralia.net/life/life-display/legalising-marijuana-is-the-only-way.5556>

On July 18, 2013, The Conversation published a comment by Robin Room, a sociology professor, who has directed alcohol and drug research centres in the United States, Canada and Sweden. The article is titled 'Could a regulated cannabis market help curb Australia's drinking problem?' and it considers the extent to which regulating Australia's

consumption of marijuana could reduce alcohol consumption.

The full text of the article can be accessed <http://theconversation.com/could-a-regulated-cannabis-market-help- curb-australias-drinking-problem-15988>

On July 18, 2013, The Conversation published an article by Susan Macgregor titled 'Synthetic cannabis: even regular drug users don't trust it'. The article looks at the risks associated with using synthetic cannabis.

The full text can be accessed at <https://theconversation.com/synthetic-cannabis-even-regular-drug-users-dont-trust-it-15122>

On May 6, 2013, The Conversation published a comment by Emeritus Consultant at St Vincent's Hospital Darlinghurst. The piece is titled 'Get smarter about illicit drugs to help balance the budget'. The comment argues for more money to be spent on the treatment of illicit drug users (including those using marijuana) rather than their prosecution.

The full article can be found at <http://theconversation.com/get-smarter-about-illicit-drugs-to-help-balance-the-budget-13841>

On November 21, 2012, The Sydney Morning Herald published a comment by Dr Alex Wodak, president of the Australian Drug Law Reform Foundation. The opinion piece is titled 'High time cannabis was legalised, so let's weed out the problems' and it argues for the legalisation of marijuana and suggests a variety of measure which might reduce any problems associated with such a change to the law.

The full text of this comment can be accessed at <http://www.smh.com.au/federal-politics/society-and-culture/high-time-cannabis-was-legalised-so-lets-weed-out-the-problems-20121120-29ny5.html>

On November 12, 2012, The Conversation published an opinion piece by Monica Barrett, Research Fellow at the National Drug Research Institute and Stephen Bright, registered Psychologist and sessional academic at Curtin University.

The article is titled 'Legal highs: what should we do about synthetic cannabis?' and considers the health and legal problems posed by synthetic marijuana.

The full text of the article can be accessed at <http://theconversation.com/legal-highs-what-should-we-do-about-synthetic-cannabis-10386>

On March 1, 2012, Scientific American published an article titled 'Experts tell the truth about pot' which seeks to clarify which claims made about marijuana are accurate and which are not.

The full text of this article can be accessed at <http://www.scientificamerican.com/article/the-truth-about-pot/?page=1>

On January 9, 2012, The Mail Online published a report titled 'The land of surfing, barbies... and dope. Study shows more Australians take marijuana than any other nationality'

The full text of this article can be accessed at <http://www.dailymail.co.uk/news/article-2083914/More-Australians-marijuana-nationality.html>

In 1997 the ABC's science program Quantum conducted an interview with Professor Wayne Hall on the effects of marijuana use.

A full transcript of this interview can be accessed here <http://www.abc.net.au/quantum/poison/marijuan/wayne.htm>

Arguments against legalising marijuana in Australia

1. Marijuana use can have adverse physical and psychological effects

It has been claimed that marijuana smoking has the potential to cause cancer. Research has yet to prove conclusively that marijuana smoking causes cancer; however, critics of the drug argue that the circumstantial case is strong enough to rule out legalisation. Lung, head and neck cancers have been associated with marijuana use.

One of the potentially cancer-causing agents in marijuana is benzyprene. Benzyprene is in the tar of both tobacco and cannabis cigarettes. It alters a gene called p53, which is a tumour suppressor gene. Seventy-five percent of lung cancers occur in people who have faulty p53 genes. The p53 gene is also linked to many other cancers.

Cannabis smoke contains 50% more of the same carcinogens as tobacco smoke. It has also been noted that marijuana smokers tend to inhale smoke for longer than cigarette smokers do. This is to get the full effect of the cannabis. However this smoking practice means that the smoke is in contact with the lungs for longer, increasing its capacity to cause harm.

In early 2006 doctors reported on a possible link between cannabis and bladder cancer. This study looked at men with bladder cancer under the age of 60, who had smoked marijuana, and compared them to men who hadn't smoked it.

The rate of cancer was higher among the marijuana smokers. A 2009 study showed an increase in risk of testicular cancers in cannabis smokers compared to non cannabis smokers.

Marijuana use increases blood pressure and pulse rate. In the hour following the smoking of a joint, middle-aged people are five times more likely to suffer a heart attack.

Many studies have reported clear links between cannabis use and anxiety or panic attacks in the short term, and have observed problems with short-term memory, cognition and motivation in the long term. Concentration, learning and

memory are all severely affected by regular cannabis use.

The Australian National Cannabis Prevention and Information Centre has noted 'Evidence suggests that using cannabis may trigger schizophrenia in those who are already at risk of developing the disorder, and they may experience psychosis earlier. Any use of cannabis can double the risk of schizophrenia in those who are vulnerable, and bring on a first episode up to two and a half years earlier. Use of cannabis at a young age and heavy use of cannabis are associated with up to six times the risk for schizophrenia; especially smoking three or more times per week before the age of fifteen.'

2. Marijuana use can lead to the use of other drugs

It has been claimed that marijuana use can act as a precursor to experimenting with and becoming a regular user of harder drugs.

A recent United States federal report concluded that the younger children are when they first use marijuana, the more likely they are to use cocaine and heroin and become dependent on drugs as adults. The report, 'Initiation of Marijuana Use: Trends, Patterns and Implications,' found that 62% of adults aged 26 or older who initiated marijuana before they were 15 years old reported that they had used cocaine in their lifetime. It further stated that long-term studies of high school students and their patterns of drug use show that very few young people use other drugs without first trying marijuana.

The FAS Drug Policy Analysis Bulletin of June, 1999, included the statement, 'Marijuana users are sixty-six times more likely to use cocaine subsequently than subjects who have never consumed marijuana.'

Dr Denise Kandel, in an opinion piece published in 2003 in the Journal of the American Medical Association, has stated, 'A developmental sequence of involvement in drugs is one of the best replicated findings in the epidemiology of drug use. Regular sequences and stages of progression in which the use of alcohol and cigarettes precedes the use of marijuana, and, in turn, the use of marijuana precedes the use of other illicit drugs, has been observed in the United States as well as in other Western societies.'

Critics of legalising marijuana claim that the drug develops a mindset among users and, perhaps, even a physiological predisposition which encourages them toward substance abuse for recreation and as a means of dealing with personal issues.

The same FAS Drug Policy Analysis Bulletin stated, 'It appears that the biochemical changes induced by marijuana in the brain results in a drug-seeking, drug taking behaviour, which in many instances will lead the user to experiment with other pleasurable substances. The risk of progressing from marijuana to cocaine or heroin is now well documented.'

Moreover, a study of over 300 fraternal and identical twin pairs found that the twin who had used marijuana before the age of 17 had elevated rates of other drug use and drug problems later on, compared with their twin who did not use before age 17.

3. Marijuana use increases the likelihood of accidents on the road and elsewhere

It has been claimed that cannabis use impairs concentration and co-ordination, thus making the user more prone to physical accidents of all kinds, but especially to road accidents.

According to a review conducted in 2004, 17 laboratory studies examining the effects of cannabis on skills utilised while driving detected impairments in tracking, attention, reaction time, short-term memory, hand-eye coordination, vigilance, time and distance perception, decision making, and concentration.

More recent controlled laboratory research has suggested similarly that cannabis impairs tasks of selective and divided attention, time estimation, and executive function.

Canadian surveys suggest that drivers who use cannabis are at increased risk of crashing. Asbridge and colleagues surveyed Canadian students and found that those who drove after using cannabis were almost twice as likely to have crashed their car. Mann and colleagues analysed surveys of Ontario adults and also found that cannabis-using drivers were more likely to crash.

Results from the 2010 Australian National Drug Strategy Household Survey indicate that 2.2% of Australians aged at least 14 years have driven a motor vehicle while under the influence of illicit drugs in the last 12 months; while a recent review of drug use, impaired driving and traffic crashes by the European Monitoring Centre for Drugs and Drug Addiction revealed that between 0.3% and 7.4% of drivers tested positive for cannabis across seven roadside surveys conducted between 1997 and 2007 in Australia, Denmark, the Netherlands, Norway, the United Kingdom, and the United States, using blood, urine or saliva tests (3.9% on average; Australia had the lowest rate among these studies).

Opponents of legalising marijuana use argue that such a measure can only increase the number of marijuana users driving vehicles on Australian roads and so increase the number of accidents they cause.

4. Marijuana use can become addictive

Studies have indicated that long-term use, especially by those who start at a young age, can lead to addiction, with an estimated one out of 11 people who use it becoming dependent on it. Withdrawal symptoms are similar to those of withdrawal from smoking and include irritability, sleep difficulties and anxiety.

The United States National Institute on Drug Abuse (NIDA) has claimed, 'The number goes up to about 1 in 6 in those who start using young (in their teens) and to 25-50 percent among daily users.'

United States data indicates that in 2009, approximately 18 percent of people aged 12 and older entering drug abuse treatment programs reported marijuana as their primary drug of abuse; 61 percent of persons under 15 reported marijuana as their primary drug of abuse.

An Australian study, published in the journal PLOS ONE, surveyed nearly 50 marijuana users on their withdrawal symptoms before, during and after a two-week abstinence period. The authors showed that marijuana withdrawal symptoms can interfere with the lives of regular users who are trying to quit.

Study co-author Alan J. Budney, a professor of psychiatry at the Geisel School of Medicine at Dartmouth College in Lebanon, New Hampshire, has stated, 'It is very similar to what people experience with tobacco. It makes you irritable. It makes you restless. It makes it hard to sleep.'

The researchers also found that heavy users were more likely to have worse withdrawal symptoms and were more likely to relapse during the abstinence period if their withdrawal symptoms were worse. Subjects would also use much more marijuana in the following month if they had worse withdrawal symptoms.

5. Legalising marijuana will increase its use

It has been claimed that legalising marijuana is likely to increase its use and thus increase the various negative consequences that come from marijuana use.

Tricia Lucas, writing for the Concord Monitor, on November 19m 2013, stated, 'Legalization would likely give rise to an active commercial network of growers, manufacturers, distributors and retail establishments, all operating with a profit motive and the incentive to increase consumption by advertising to create new users and maintain heavy users.'

Lucas also notes, 'Altria, the new name of tobacco giant Philip Morris, recently purchased the domain names of AltriaCannabis.com and AltriaMarijuana.com...[and] investment firms are actively exploring marijuana business opportunities.'

Lucas concluded, 'Price goes down, use goes up: Legalization will result in lower prices and increased use by both recreational and heavy users. When a product is legal more people will use it – think tobacco and alcohol.'

The number of Washingtonians who tested positive for cannabis use while driving has grown since the marijuana's legalisation in January authorities have stated.

Washington State Patrol says it has found THC, marijuana's psychoactive ingredient, in the bloodstream of 745 drivers pulled over in January 2014. This represents a nine percent increase from the same period the year before.

Arguments in favour of legalising marijuana in Australia

1. The health risks posed by marijuana use are significantly exaggerated

It has been claimed that though marijuana can have some adverse side-effects the level of harm attributed to it is often exaggerated.

The United States Internet site, Live Science, states, 'Unlike many abused drugs, an overdose of marijuana is not lethal, according to the National Cancer Institute. Although marijuana can be addictive for some, the potential for forming an addiction to marijuana is lower than some prescription drugs and other abused drugs.'

Professor Lester Grinspoon, M.D., Associate Professor of Psychiatry, Harvard Medical School, testifying before the Crime Subcommittee of the Judiciary Committee, U.S. House of Representatives, Washington, D.C., on October 1, 1997, stated 'Cannabis is remarkably safe. Although not harmless, it is surely less toxic than most of the conventional medicines it could replace if it were legally available. Despite its use by millions of people over thousands of years, cannabis has never caused an overdose death.'

The United States Internet site, Live Science, also notes 'Studies have produced conflicting results on whether smoking marijuana carries a significant cancer risk. According to the American Cancer Society, worldwide research into the benefits and side effects of compounds in marijuana is ongoing. Some compounds in marijuana have already been developed into pharmaceuticals.'

In 1997 The American Journal of Public Health published a report which stated 'We...say that on the medical evidence available, moderate indulgence in cannabis has little ill-effect on health, and that decisions to ban or legalise cannabis should be based on other considerations.'

In 1992, in the journal Fundamental And Applied Toxicology, Dr. William Slikker, director of the Neurotoxicology Division of the National Center for Toxicological Research (NCTR), described the health of monkeys exposed to very high levels of cannabis for an extended period: 'The general health of the monkeys was not compromised by a year of marijuana exposure as indicated by weight gain, carboxyhemoglobin and clinical chemistry/haematology values. There's just nothing there. They were all fine.'

It has also been argued that those who develop schizophrenia or other mental disorders after using marijuana may have been genetically predisposed to do so and may have even been self-medicating in their initial use of marijuana.

2. Legalising marijuana would control the quality of the product and reduce sales of dangerous synthetic substitutes

The possibility of product regulation and quality control is one of the strongest arguments for legalisation of marijuana.

In an article published in The Conversation on November 14, 2013, Stephen Pudney, Professor of Economics at the University of Essex, stated, 'The primary psychoactive component of cannabis is D9-tetrahydrocannabinol (THC), which has been linked to impaired brain function and psychotic symptoms, but research suggests that another component, cannabidiol (CBD) has a protective anti-psychotic effect. In the last decade or so, there has been a worrying rise in the market share of high-THC, low-CBD forms of cannabis (usually known as "skunk"), and this worrying trend has proved impossible to control under prohibitionist policy.'

Prior to that state legalising marijuana, the Colorado Department of Revenue's Marijuana Enforcement Division (MED) determined testing requirements for pesticides, microbials, moulds, filth, residual solvents, harmful chemicals, and

potency.

The term 'potency' concerns the strength or effectiveness of marijuana and marijuana-infused products. A potent product will be high in delta-9-tetrahydrocannabinol, or THC, the main ingredient responsible for marijuana's psychoactive, or mood-altering, effects. Also measured will be cannabidiol, or CBD, which has medicinal properties without the psychoactive effects.

Julie Postlethwait, the spokeswoman for MED, has stated, 'Our primary focus is always public safety and to make sure that communication is clear to the end user...Samples of all marijuana products for retail sale will have to be tested by a certified lab.'

Genifer Murray of CannLabs Inc., a third-party cannabis-testing lab in Denver, has stated, 'Testing and labelling potency, whether for THC or CBDs, especially in edibles, is important because patients could either overmedicate or pay for a product that will not be effective.'

Legalising marijuana would also avoid the risk to health posed by the growing use of synthetic cannabis.

Designed to mimic the effects of cannabis, synthetic cannabinoid products contain synthesised chemical compounds that are sprayed on to green herbs similar in appearance to cannabis. The products do not contain delta-9-tetrahydrocannabinol (THC), the active ingredient in cannabis and so will not show up in most drug tests administered by employers or the police.

The products are readily available via tobacconists, sex shops and various websites. This enhances their appeal to those unable to source cannabis easily, or who do not want to break the law.

These products are potentially highly dangerous as there is nothing to indicate what their active ingredients are. The most common reported negative side effects are dizziness, nausea, vomiting, paranoia, panic attacks and headaches. Other reported symptoms included heart palpitations requiring emergency care, chest pains and difficulty breathing.

3. There is little risk of becoming dependent on marijuana

It has been claimed that although there is some risk of becoming dependent on marijuana, that risk is small and far less than that associated with nicotine or heroin.

In an interview on the ABC, Professor Wayne Hall stated, 'Generally people believe that marijuana is not a drug of dependence, however I think there's mounting evidence that it is, that people can become dependent on it, probably in the order of about 10% of those who ever use the drug.'

That said, while people should certainly be made aware of the fact that there is a risk of becoming dependent on marijuana, I don't think that risk should be exaggerated.'

In a large-scale survey published in 1994 epidemiologist James Anthony, then at the US National Institute on Drug Abuse, and his colleagues asked more than 8,000 people between the ages of 15 and 64 about their use of marijuana and other drugs. The researchers found that of those who had tried marijuana at least once, about 9 percent eventually fit a diagnosis of cannabis dependence. The corresponding figure for alcohol was 15 percent; for cocaine, 17 percent; for heroin, 23 percent; and for nicotine, 32 percent.

A British study published in 2012 by the Oxford University Press stated, 'It has been claimed that regular marijuana use does not necessarily indicate dependence. Only about 30 percent of those who are estimated to have used on more than half the days in the last year self-report symptoms that suggest a diagnosis of abuse or dependence. The corresponding figure for cocaine is 88 percent.'

The same study observed, 'Someone who uses cocaine every other day or more often is probably cocaine dependent; someone who uses marijuana every other day or more often is probably not cannabis dependent. In this regard, marijuana resembles alcohol more than it does the "hard" drugs.'

4. Marijuana has not been established as a 'gateway' drug that encourages the use of other drugs

It has been claimed that there is no conclusive evidence that marijuana use leads to experimentation with other drugs.

The United States Institute of Medicine in March 1999 released a report rejecting the 'gateway' theory that says cannabis leads to the use of harder drugs, recognising that cannabis is less harmful than alcohol or tobacco.

An article published in Scientific American on March 1, 2012, stated 'Many studies have found that most people who used other illicit drugs had, in fact, used marijuana first. Although results such as these are consistent with the gateway hypothesis, they do not prove that using marijuana causes the use of other drugs. Those who are drawn to marijuana may simply be predisposed to drug use in general, regardless of their exposure to pot.'

5. Legalising marijuana would be of economic benefit to governments

In Australia the cost of enforcing laws against marijuana supply is estimated to be as high as \$4.7 billion a year, with little apparent impact on availability or use.

Brisbane author and academic, Dr John Jiggins, has noted that between January 1976 and December 2000, Australian governments spent \$13 billion prosecuting about 1.5 million drug offences with the purpose of reducing illegal drug use of all kinds.

It has been pointed out that were marijuana supply and use to be legalised, governments would be doubled advantaged. They would benefit from no longer having to meet the cost of enforcing anti-marijuana laws. They would also benefit from the tax revenues they would gain from the legal sale of marijuana. Just as the excise on cigarettes and alcohol are major sources of government revenue, were marijuana legalised, the tax on its sale would become an important source of income for Australian governments.

In the United States the legal marijuana market has been estimated to become enormous in the wake of legalisation in

Colorado and New York State. It is expected to grow from \$1.4-billion in medical marijuana in 2013 by 64% to \$2.34-billion in 2014 with recreational cannabis added in Colorado and Washington, according to Arcview Market Research, which tracks and publishes data on the cannabis industry.

Colorado's branch of the National Organization for the Reform of Marijuana Laws (NORML) has claimed everyone will benefit. NORML attorney Rachel Gillette stated, 'It will mean jobs, tax revenue for the state and local jurisdictions, increased tourism, and a developing progressive new industry in Colorado.'

Further implications

The relatively widespread use of marijuana in Australia, despite legal prohibitions, has resulted in significant pressure to legalise and regularise the distribution and use of the substance.

The National Cannabis Prevention and Information Centre has noted that Cannabis is the most commonly used illicit drug with one in three Australians (34%) reporting use in their lifetime. Recent use of cannabis is most common among those aged 20–29 years, while eighteen percent of secondary school students have used cannabis and 14 percent report use of cannabis in the past 12 months.

This extent of usage has led many to conclude that legislative attempts to prohibit the use of the substance have been unsuccessful. Critics have been concerned that the current prohibition and punishment regime criminalises a substantial portion of the Australian community who are doing nothing more anti-social than smoking or drinking, neither of which attracts a criminal penalty (unless, as is the case with alcohol, consumption is accompanied by other illegal activities). There is the added incentive that were marijuana distribution and use to be legalised it could then be taxed in the same way that alcohol and cigarettes are. This could become a significant source of government revenue and relieve pressure on state and federal budgets while making more money available to governments to provide services for the community.

However, the situation is more complex than the above analysis might make it appear. Firstly, though marijuana use in Australia remains significant, it is in decline. The National Cannabis Prevention and Information Centre has noted 'After a noted rise in cannabis use in 1998 among those sampled by the National Drug Strategy Household Survey (NDSHS), when 17.9 percent of respondents reported use in the past 12 months, there was a consistent decline in reported use to 12.9 percent in 2001, 11.3 percent in 2004 and 9.1 percent in 2007.' Thus, over a period of ten years, use had virtually halved. Such a pattern disputes claims that marijuana use has been unaffected by prohibition.

The second complicating factor is that the most recent research on marijuana use suggests it has a range of negative effects. It has some of the same cancer-producing chemicals as tobacco smoke. Its protracted and early use has also been linked to negative effects on concentration and memory and has been linked with the development of schizophrenia. Though not an established causal agent for schizophrenia, marijuana use may well be a precipitating factor.

In addition, there is the growing concern that marijuana use contributes to road accidents, with resultant injuries and deaths.

Finally, it seems likely that were marijuana to be legalised, its use would become more widespread. In the United States, in New York State and Colorado (the two states that have recently legalised marijuana) there is commercial manufacture and sale of the drug. Though this has allowed for greater quality control, it also seems likely significantly to increase consumption. There would be major concern if legalisation led to an increase in the number of young marijuana users, as the negative effects are greater among those who begin using the drug early in their lives.

Interestingly, however, there are those who argue that a regulated cannabis market would actually make it easier to prevent young people accessing the drug, in that sale could be restricted in the same way that sale of cigarettes to young people is prohibited.

It is uncertain whether any Australian state will follow the lead of Colorado and New York State and legalise marijuana. The complexity of this issue means that a majority of Australians prefer decriminalisation or reduced penalties for marijuana use; while not supporting full legalisation. A recent survey conducted by the University of New South Wales found that only 22 per cent of those surveyed supported the legalisation of marijuana, while 51 per cent were opposed. 72 per cent, however, favoured a reduction in penalties. The HEMP party's call for a referendum, were it to be granted, may well not give them the result they desire.

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<http://www.smh.com.au/world/uruguay-becomes-first-country-to-legalise-marijuana-trade-20131211-hv59x.html>

The Australian: January 11, 2014, page 10, news item (map of USA / American states legalising marijuana), 'Cuomo

bows to mood, eases marijuana rules'.

<http://www.theaustralian.com.au/business/wall-street-journal/cuomo-bows-to-mood-eases-marijuana-rules/story-fnay3ubk-1226799246870>

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