

Drug Policy Innovation:

Local Barriers and International Developments

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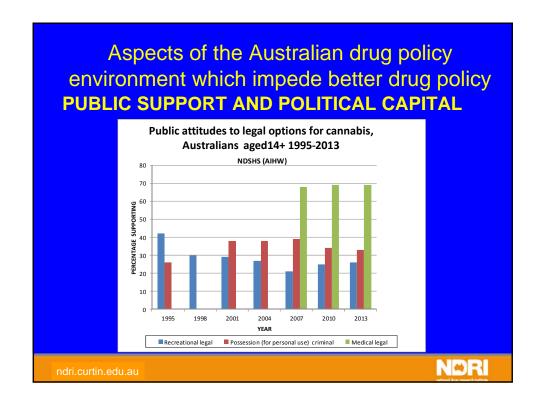
Aspects of the Australian drug policy environment which impede better drug policy

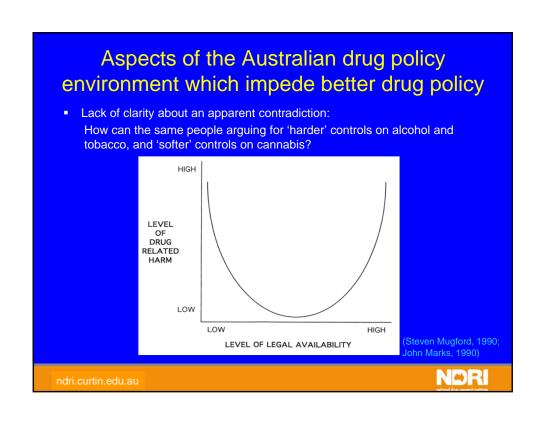
FEDERALISM

- Drug laws in Australia are controlled by both Federal and State/Territory laws that are complex and difficult to navigate
- In Australia laws regarding production/cultivation, supply, possession, use of currently illegal drugs are effectively State and Territory laws
- Federal laws tend to address importation and national border control and regulation of legal drugs

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Aspects of the Australian drug policy environment which impede better drug policy

We rest on the "THREE PILLARS APPROACH" - a balance between:

SUPPLY REDUCTION DEMAND REDUCTION HARM REDUCTION

with law enforcement and health 'working together'...

But has the THREE PILLARS APPROACH become a comfortable mantra/slogan that stifles innovation in drug policy?

Even modest, finite, contained, drug policy pilots (like drug checking at a music festival) are seemingly impossible

Why?

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Aspects of the Australian drug policy environment which impede better drug policy

Law Enforcement and Health can't work together toward better drug policy without political leadership

- They have different goals: Enforcing the law vs improving health
- They have different views of community expectations of them
- We can't expect the police to do other than enforce the (criminal) law without:
 - Political leadership and bipartisan approach
 - A public discussion which explores pros and cons of alternatives
 - Educating the media and willingness to weather the media storm
- Some are hopeful that new Ministerial Drug and Alcohol Forum will play a critical role



MACRO DRUG POLICY CHANGE?

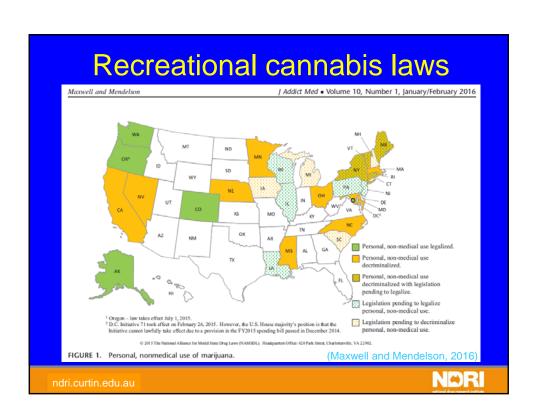
Principles of macro drug policy change

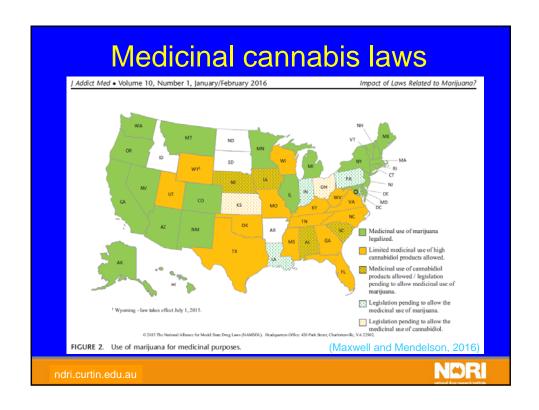
- Every model will have its unintended consequences
- We know what those things are for strict criminal penalties
- But we know less about new models
- The detail of how models are implemented is crucial to their effects both intended and unintended

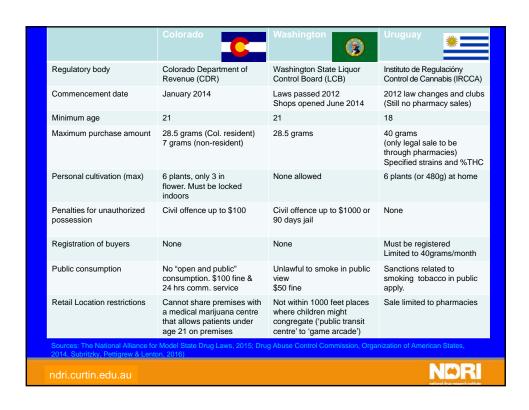
Regulation examples: Plans vs Practice:

- Colorado (cannabis)
- Washington (cannabis)
- Uruguay (includes the social clubs model)
- NZ NPS model (nps)









	Colorado	Washington	Uruguay **
Allows Marijuana Infused Products	Yes-regulations 10mg THC per serving, 100mg per packet	Yes – regulations 10mg THC per serving, 100mg per packet Products appealing to kids prohibited	Not specified
Advertising restrictions	Prohibition on mass-market campaigns that 'have a high likelihood of reaching minors'.	Not within 1000 feet places where children might congregate. No media advertising limits.	All advertising and promotion of cannabis products in any medium to be prohibited.
Product testing	Product contaminant testing at cultivation/manufacturing. Random risk based testing of retail samples. Potency testing.	Producers and processors must submit representative samples for certification testing	Yes, for retail cannabis fror pharmacies
Cannabis clubs	Not permitted	Not permitted	15-45 members having up to 99 plants
Potency restrictions	None	None	Cannabis Registry to control production and acquisition
On premise consumption	Banned	Banned	Allowed at cannabis clubs
Тах	15% excise tax from cultivation to processing or retail. 10% excise tax on sale + 2.9% sales tax	25% excise tax at each stage of sales (producer to processor to retailer to customer)	Establishes VAT taxability of psychoactive cannabis.
	ce for Model State Drug Laws, 2 ritzky, Pettigrew & Lenton, 2016)		nission, Organization of

New schemes of cannabis Legalization: Colorado: experience so far (Subritzky, Pettigrew & Lenton, 2016)



(Submitterly, 1 Strigt SW & Estition, 2016

- Too early to determine the impact of the scheme
- Major challenge: lack of overarching regulatory structure due to Federal Prohibition
- Changes:
 - Initially 70% of retailers sales had to be self grown, now separate wholesale and retail licenses
 - No standards for product testing for potency and pesticide contaminants (as no federal oversight),

Feb 19 2016 new bill tabled to certify rules for pesticide-free cannabis

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New schemes of cannabis Legalization: Some early evidence



- If we are going to learn from these examples we need to wait for at least 5yrs for the evidence to accrue.
- However, preliminary data reported by Maxwell and Mendelson (2016) suggests in Colorado with regards to cannabis use...
- Past yr cannabis use by 12yrs+ increased from 15% in 2002-3 to 19% in 2012-3 (p<.005) (NDSUH)
 - But the increase was not among 12-17yr olds
 - The increase began before the legal marijuana scheme was put in place
- How has potency been affected? We don't know
- How has the ratio of CBD to THC been affected? We don't know

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New schemes of cannabis Legalization: Some early evidence



- Preliminary data reported by Maxwell and Mendelson (2016) suggests in Colorado with regards to indicators of cannabis-related harm:
- Arrests for possession of cannabis dropped 75% from 2836 in 2006 to 703 in 2014
- Denver metro area marijuana-related emergency department (ED) visits increased 68% from 153 per 100,000 in 2011 to 256 per 100,000 in 2013
- DUI THC increase est. 370%: 675 drivers tested +ve in 2009, 1590 +ve in Jan-Jun 2013
- Cannabis-related driving fatalities increased 45% from 36 in 2008 to 52 in 2013
- Marijuana-related calls to poison centre increased 420% from 45 in 2006 to 238 in 2014

Are these observed changes due to:

- the introduction of the Legal Marijuana scheme?
- more intensive measurement, police focus etc.? (DUI THC tests)
- increased willingness for people to come forward to services? (ED & Poisons)

IT IS TOO SOON TO TELL - WATCH THIS SPACE



MACRO DRUG POLICY CHANGE

Issues & Questions to consider

- Not enough to talk in generalities The implementation detail is CRITICAL
- What will be the impacts on rates of use and harm? What will be the benefits?
- What impacts will there be on the most vulnerable?
- Will 'legal' products be substitutes or complementary to illicit substances?
- What sort of regulated model?
 - Commercialized How controlled? Regulatory costs?
 - Govt. supply/ contracted out Liability? Bureaucracy?
- Safety of legal products?
 - How determined? Binge use? How distinguish legal from illegal products?
 - How funded? Timely? Feasible?
 - Regulatory oversight? By whom? How funded? Pharmacological vigilance?
- Impact on the illicit market?
- Complex with 1 substance (cannabis), exponentially complex with more
- Young people excluded? Other strains, forms? etc. Impact of internet?
- Public support? Political feasibility? Press?
- There will be unintended consequences. How will they be reduced & managed?

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IN CLOSING

MACRO drug policy innovation

- OS examples provide early indications of implementation challenges & opportunities
- But, to learn from these examples, we must wait for the evidence to accrue
- We can learn from overseas experience but shouldn't helicopter-in policies/models
- Anything we do needs to be evaluated and tweaked to maximise benefits

MICRO drug policy innovation

- In the meantime we should address the barriers to sensible, targeted policy experiments (drug checking/testing at events; SIFs, etc.) within the current macro framework
- That means political leadership to give direction to allow new opportunities for law enforcement and health to work together toward shared goals to support and encourage drug policy experiments
- Need much more comprehensive health and law enforcement data to inform robust policy decision making
- The media framing of drug issues often challenges rational consideration of the issues at a political level

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