California Drug Policy:



The Evolving Landscape of International Drug Policy Reform and Cannabis Use in California

Peter Banys, MD, MSc

Clinical Professor of Psychiatry, UCSF Senior Technical Advisor, FHI 360 Vietnam Private Practice, General & Addiction Psychiatry Past-President, CSAM



California Society of Addiction Medicine **Addiction Medicine Review Course** Friday, September 5, 2014, Anaheim, CA





Disclosure

I do not have any relevant financial relationships with any ACCME-defined commercial interest.



Presentation Outline

- UN: International Drug Conventions
- UNODC: Interdiction & Supply Reduction
- USA: Incarceration as an Industry
- New Paradigms:
 - Harm Reduction
 - Personal Possession Amounts
 - Regulation & Taxation
 - Partial Legalization

International Drug Conventions



The ASEAN Foreign Ministers, at the 31st ASEAN Ministerial Meeting in July 1998, signed the Joint Declaration for a Drug-Free ASEAN by 2020 that affirmed the Association's commitment to eradicate illicit drug production, processing, trafficking and abuse by the year 2020 in ASEAN. At the 33rd ASEAN Ministerial Meeting in July 2000, Governments reiterated their concerns on the threat from the manufacturing, trafficking and abuse of illegal drugs on the security and stability of the ASEAN region and agreed to advance the target year for realizing a Drug-Free ASEAN to 2015.

New conceptual models from Latin and South America and Europe, are creating "soft" and "hard" defections from international conventions.

Parochial Roots of International Conventions

The international regime for the control of psychoactive substances, beyond any moral or even racist roots it may initially have had, is first and foremost a system that reflects the geopolitics of North-South relations in the 20th century.

Indeed, the strictest controls were placed on organic substances – the coca bush, the poppy and the cannabis plant – which are often part of the ancestral traditions of the countries where these plants originate, whereas the North's cultural products, tobacco and alcohol, were ignored and the synthetic substances produced by the North's pharmaceutical industry were subject to regulation rather than prohibition.

Senate Special Committee on Illegal Drugs in Canada (2002)

1961 UN Single Convention on Narcotic Drugs

Schedule I	Schedule II	Schedule III	Schedule IV
Substances that are highly addictive and liable to abuse, and precursors readily convertible into drugs similarly addictive and liable to abuse (e.g. cannabis, opium, heroin, methadone, cocaine, coca leaf, oxycodone)	Substances that are less addictive and liable to abuse than those in Schedule I (e.g. codeine, dextropopoxyphene)	Preparations containing low amounts of narcotic drugs, are unlikely to be abused and exempted from most of the control measures placed upon the drugs they contain (e.g. <2.5% codeine, <0.1% cocaine)	Certain drugs also listed in Schedule I with "particularly dangerous properties" and little or no therapeutic value (e.g. cannabis, heroin)

Dave Bewley-Taylor, Tom Blickman, and Martin Jelsma (Mar 2014), *The Rise and Decline of Cannabis Prohibition: The History of Cannabis in the UN Drug Control System and Options for Reform,* Transnational Institute (TNI Amsterdam) and Global Drug Policy Observatory (GdPO Swansea Univ), http://www.tni-books.org/books/23-the-rise-and-decline-of-cannabis-prohibition.html.

1971 UN Convention on Psychotropic Substances

Schedule I	Schedule II	Schedule III	Schedule IV
Drugs presenting a high risk of abuse posing a particularly serious threat to public health with little or no therapeutic value (e.g. LSD, MDMA, cathinone)	Drugs presenting risks of abuse, posing a serious threat to public health, which are of low or moderate therapeutic value (e.g. dronabinol, amphetamines)	Drugs presenting a risk of abuse, posing a serious threat to public health, which are of moderate or high therapeutic value (e.g. barbiturates, buprenorphine)	Drugs presenting a risk of abuse, posing a minor threat to public health, with a high therapeutic value (e.g. tranquilizers, including diazepam)

Dave Bewley-Taylor, Tom Blickman, and Martin Jelsma (Mar 2014), *The Rise and Decline of Cannabis Prohibition: The History of Cannabis in the UN Drug Control System and Options for Reform,* Transnational Institute (TNI Amsterdam) and Global Drug Policy Observatory (GdPO Swansea Univ), http://www.tni-books.org/books/23-the-rise-and-decline-of-cannabis-prohibition.html.

1988 UN Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances

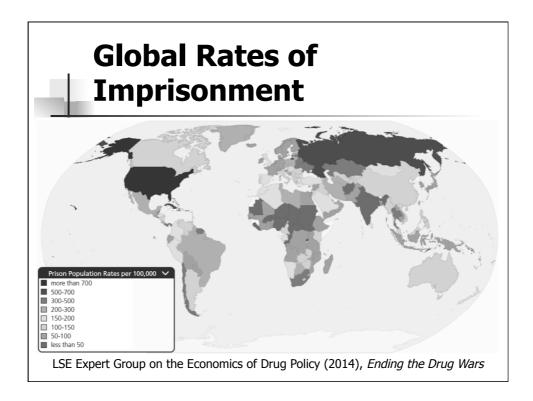
Table I	Table II
Precursors of psychotropic substances, such as ephedrine, piperonal, safrole, phenylacetic acid, lysergic acid, and a few key reagents such as acetic anhydride used in the conversion of morphine into heroin, and potassium permanganate use in the extraction of cocaine.	A wide range of reagents and solvents that can be used in the illicit production of narcotic drugs and psychotropic substances, but also have widespread licit industrial uses, including acetone, ethyl ether, toluene and sulfuric acid.

Dave Bewley-Taylor, Tom Blickman, and Martin Jelsma (Mar 2014), *The Rise and Decline of Cannabis Prohibition: The History of Cannabis in the UN Drug Control System and Options for Reform,* Transnational Institute (TNI Amsterdam) and Global Drug Policy Observatory (GdPO Swansea Univ), http://www.tni-books.org/books/23-the-rise-and-decline-of-cannabis-prohibition.html.



Incarceration

The healthcare industry (treatment) competes for the same raw materials for processing (addicts) as the incarceration industry (criminal justice).

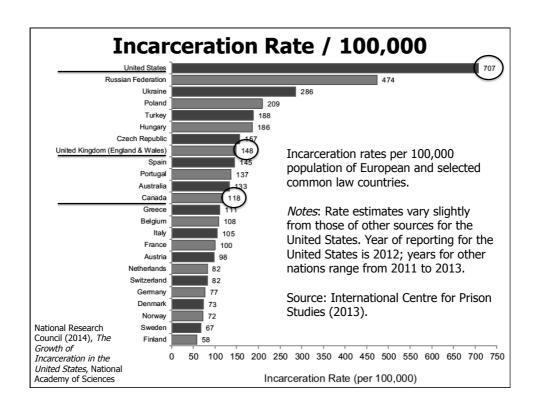


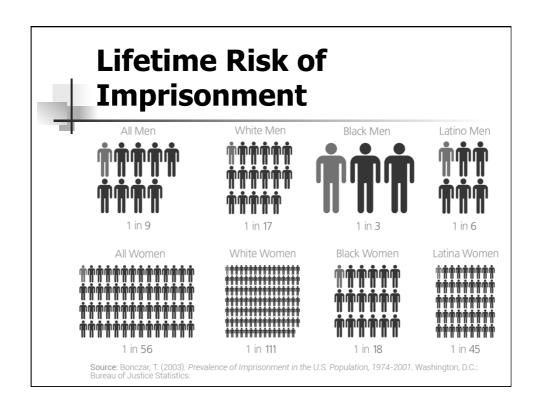
Incarceration: A Growth Industry

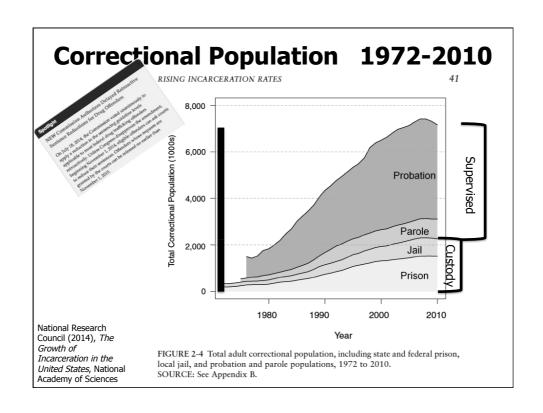
- The **U.S. penal population** of 2.2 million adults is the largest in the world. In 2012, close to 25 percent of the world's prisoners were held in American prisons, although the United States accounts for about 5 percent of the world's population.
- The **U.S. rate of incarceration**, with nearly 1 of every 100 adults in prison or jail, is 5 to 10 times higher than rates in Western Europe and other democracies.
- **Conclusion**: The growth in incarceration rates in the United States over the past 40 years is historically unprecedented and internationally unique.

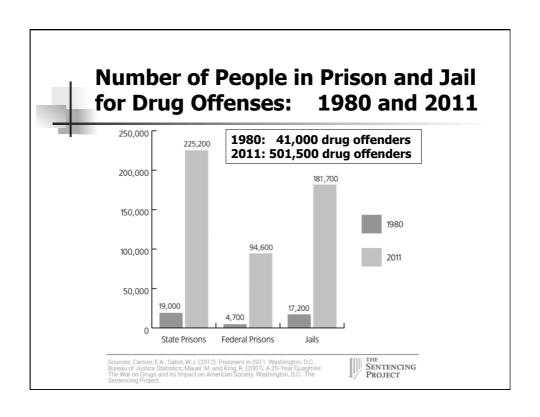
National Academy of Sciences (2014)

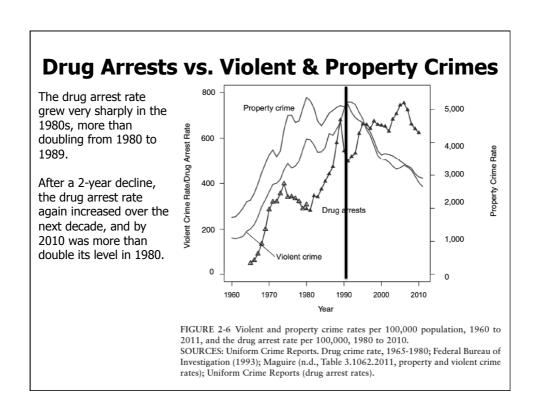
The Growth of Incarceration in the United States: Exploring Causes and Consequences (2014), Jeremy Travis and Bruce Western, Editors; Committee on Causes and Consequences of High Rates of Incarceration; Committee on Law and Justice; Division of Behavioral and Social Sciences and Education; National Research Council, National Academy of Sciences.

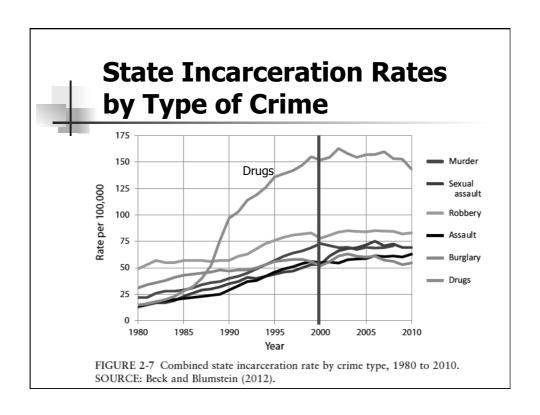


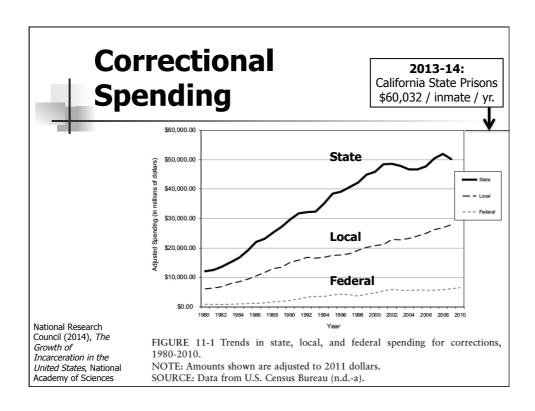


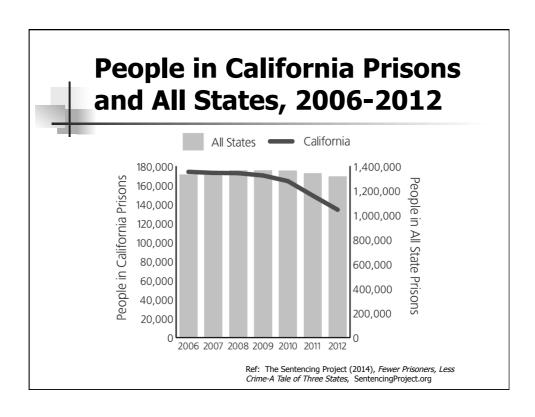


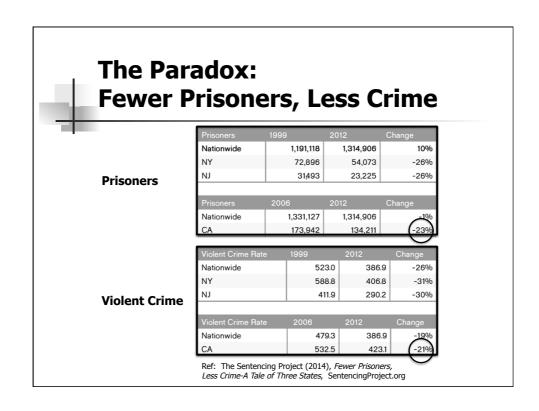














Selective Enforcement

In recent years, **drug-related arrest rates for blacks** have been three to four times higher than those for whites In the late 1980s, the rates were six times higher for blacks than for whites (Blumstein and Wallman, 2006).

The recent relative decrease in racial disparity in drug arrests did not result from reduced police emphasis on black sellers but from increases in total drug arrests and greater emphasis on crimes related to marijuana.

Marijuana arrestees are preponderantly white and are much less likely than heroin and cocaine arrestees to wind up in prison (Room et al., 2013). Absolute numbers of blacks arrested for trafficking in cocaine and heroin have not fallen significantly; they simply make up a smaller percentage of overall arrest numbers that are rising.



National Academy of Sciences

- The growth in incarceration rates in the United States over the past 40 years is historically unprecedented and internationally unique.
- The unprecedented rise in incarceration rates can be attributed to an increasingly **punitive political climate** ... that significantly increased sentence lengths, required prison time for minor offenses, and intensified punishment for drug crimes.
- The increase in incarceration may have caused a **decrease in** crime, but the magnitude of the reduction is highly uncertain and
 the results of most studies suggest it was unlikely to have been
 large.

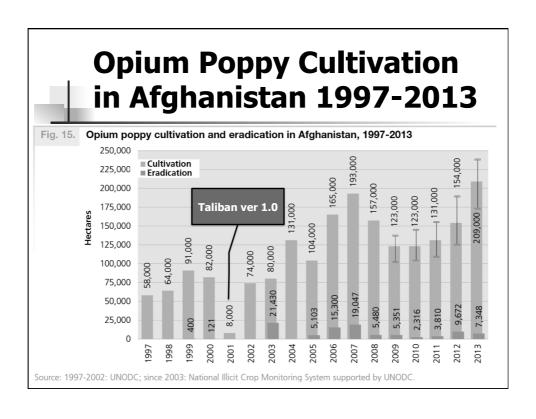


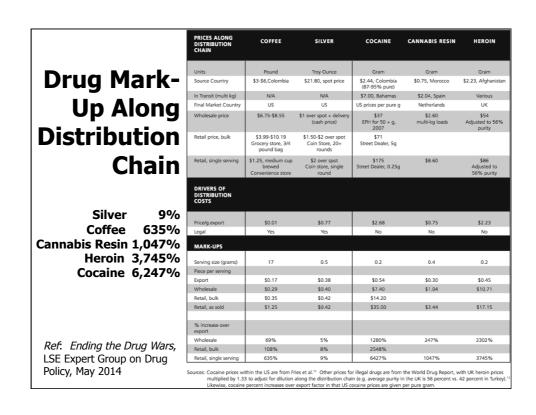
National Academy of Sciences

- 4. The incremental **deterrent effect** of increases in lengthy prison sentences is modest at best. ... an inefficient approach to preventing crime by incapacitation.
- 5. People who live in **poor and minority communities** have always had substantially higher rates of incarceration than other groups.
- 6. The change in penal policy over the past four decades may have had a wide range of **unwanted social costs**, and the magnitude of crime reduction benefits is highly uncertain.

National Research Council (2014), *The Growth of Incarceration in the United States*, National Academy of Sciences









Stage of Purchase	Raw Price \$	Purity %	100% Pure	Location
Farm Price	\$ 900	100	\$ 900	Afghanistan
Export	3,400	73	4,700	Afghanistan's Neighbors
Import Wholesale	10,000	58	17,000	Turkey
Mid-level Wholesale	33,000	50	16,000	England/Wales
Typical Retail Price	105,000	44	239,000	United Kingdom

from Kilmer & Reuter, 2009

Keefer, P. and N. Loayza (2010). *Innocent bystanders : developing countries and the war on drugs*. Basingstoke ; New York, Washington, DC, Palgrave Macmillan; World Bank.

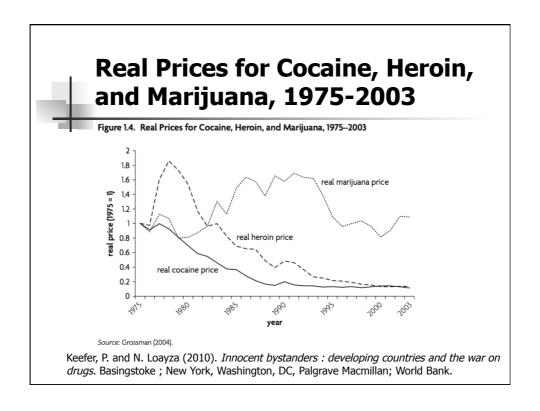
Farm-Gate to Consumer: 1 kg. Cocaine & 1 kg. Heroin

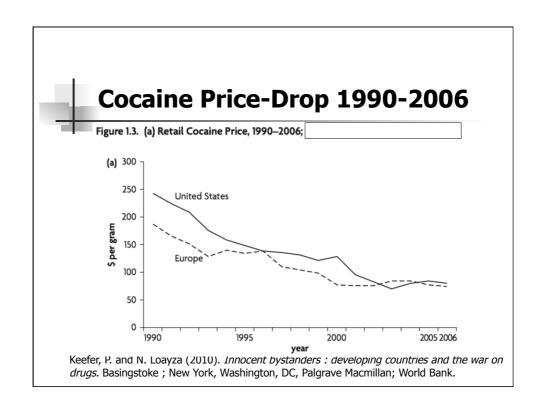
Table 1.1. Price Structure of 1 Kilo of Pure Cocaine and 1 Kilo of Pure Heroin, Selected Countries and Cities, Mid-1990s and 2000 (dollars)

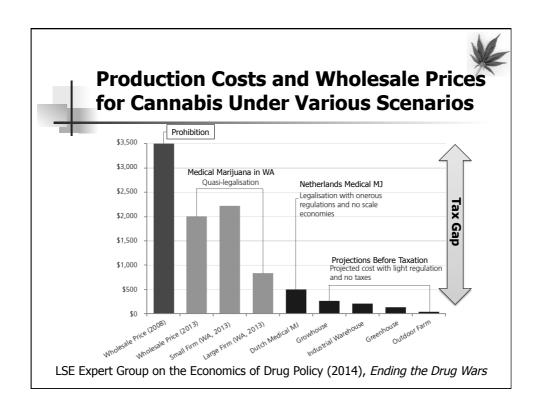
Stage	Cocaine (mid-1990s)	Cocaine (2000)	Heroin (2000)
Farm-gate	370 (Leaf in Peru)	650 (Leaf in Colombia)	550 (Opium in Afghanistan)
Export	1,200 (Colombia)	1,050 (Colombia)	2,000–4,000 (Afghanistan)
Import	20,500 (Miami)	23,000 (Miami)	10,000 (Turkey export)
Wholesale (kilo)	31,000 (Chicago)	33,000 (Chicago)	50,000 (London)
Wholesale (oz.)	62,000 (Chicago)	52,000 (Chicago)	65,000 (London)
Final retail value	148,000 (Chicago)	120,000 (Chicago)	135,000 (London)

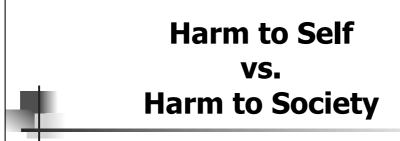
Source: Reuter (2010); Smith (2005).

from: Keefer, P. and N. Loayza (2010). Innocent bystanders: developing countries and the war on drugs. Basingstoke; New York, Washington, DC, Palgrave Macmillan; World Bank.

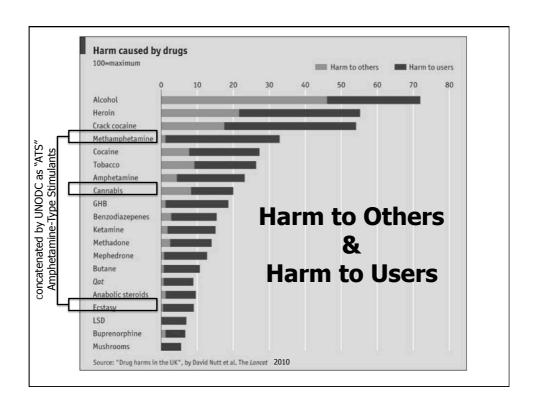


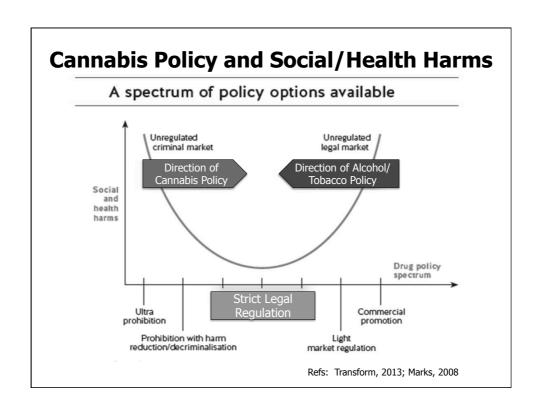


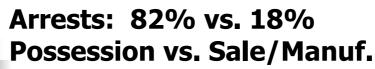


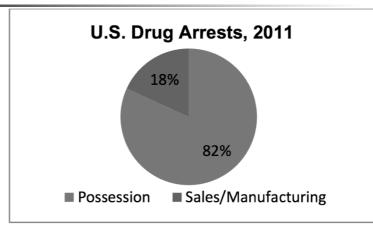


Hard vs. Soft Drugs
Personal Possession Amounts
Youth Marijuana Use & Vulnerability









National Research Council (2014), *The Growth of Incarceration in the United States*, National Academy of Sciences

Source: Federal Bureau of Investigation, Uniform Crime Report, Crime in the United States, 2011

4

Personal Possession Amounts

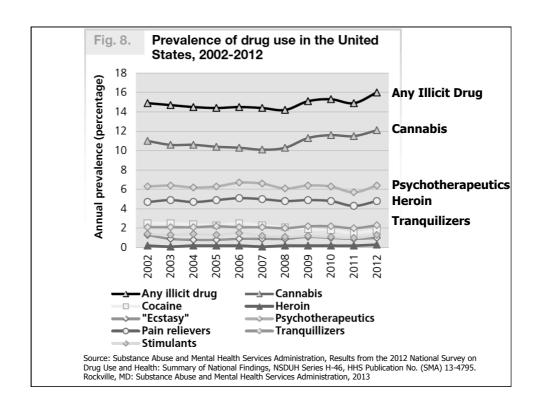
- Simple possession (for personal use), and
- Possession with intent to distribute. Much stiffer penalties upon conviction, as compared to simple possession, in the interest of both punishing and deterring drug dealers.
 - To prove intent to sell, prosecutors may present evidence such as digital scales, baggies, large quantities of the drug, large amounts of cash in small bills or testimony from witnesses.
- **Quantities:** Highly variable by country and state jurisdictions.
 - **Total Supply**: Often rated as 3-5 day of personal use
 - **Heroin**: Many countries set limit at 1.0 gm.
 - **Marijuana**: Highly variable across countries. <1 oz. (28.5 gm.) in California is an infraction (adults) with a \$100 fine.





Cannabis / Marijuana

Cannabis is the basis for "soft" and "hard" defections from international conventions and for "outlaw" international and domestic drug policy reforms.



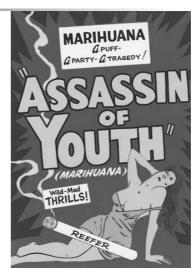
Cannabis circa 1937-1944 Demonization vs. Evidence

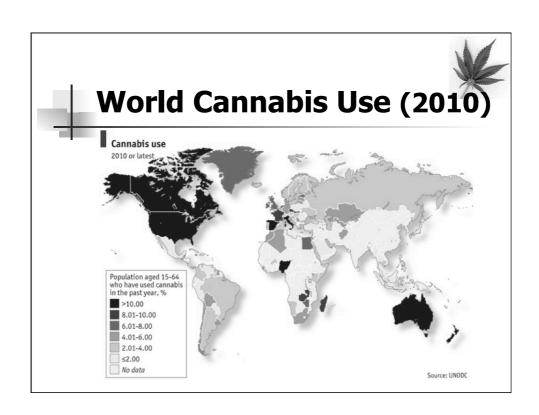
Most marijuana smokers are Negroes, Hispanics, jazz musicians, and entertainers. Their satanic music is driven by marijuana, and marijuana smoking by white women makes them want to seek sexual relations with Negroes, entertainers, and others. It is a drug that causes insanity, criminality, and death – the most violence-causing drug in the history of mankind.

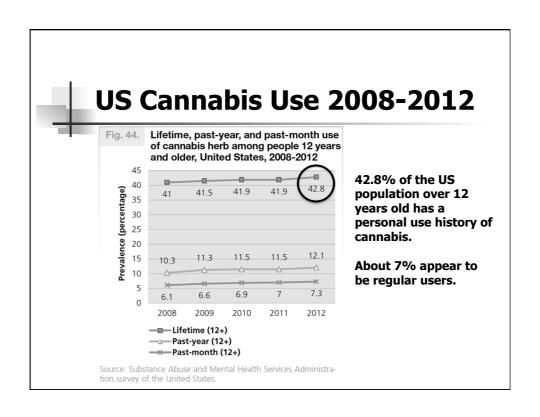
Harry J. Anslinger, Head of Federal Bureau of Narcotics (FBN) Testimony to U.S. House of Representatives Committee (April 1937)

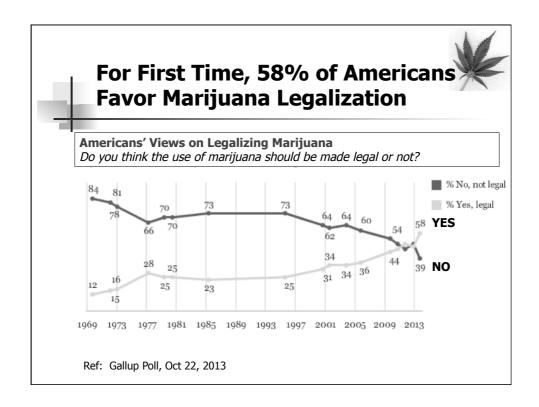
"Practice of smoking marijuana does not lead to addiction in the medical sense of the word" and that the drug was "not the determining factor in the commission of major crimes." Moreover, "the publicity concerning the catastrophic effects of marijuana is unfounded [...] There [is] no direct relationship between the commission of crimes of violence and marihuana [... M]arihuana itself has no specific stimulant effect in regard to sexual desires" and that "use of marihuana does not lead to morphine or cocaine or heroin addiction."

NYC Mayor LaGuardia's Report (1944)









News > World news > United States

27 July 2014

New York Times says US must 'repeal prohibition' of federal marijuana ban

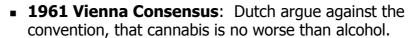
- 'Grey Lady' editorial calls for dropping of 44-year ban
- · Rating of drug with LSD and heroin 'an increasing absurdity'



The New York Times has called for the legalisation of marijuana. Photograph: Emmanuel Dunand/AFP/Getty Images

One of America's most influential newspapers, the New York Times, on Sunday called the federal ban on marijuana a "laughing stock" and urged the White House to drop the law and give permission for states to legalise the drug.

Soft Defections from International Conventions



■ 1969 Wootton Report (U.K.):

■ 1970 Baan Commission (Netherlands):

■ 1971 Hulsman Commission (USA)

■ 1972 Shafer Commission (USA):

■ 1973 LeDain Commission (Canada):

1977 Senate Social Comm. on Social Welfare (Aus)

2013 OAS Organization of American States



Marijuana & the Law

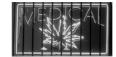
De-Criminalization

- Netherlands
- Portugal
- Spain
- California



Medical marijuana

21 USA States



Legalization (CO, WA, Uruguay)

- Regulation
- Taxation



Hard Defections from International Conventions

Netherlands: Brown Cafes

Portugal: Dissuasion commissionsSpain: Cannabis growers' clubs

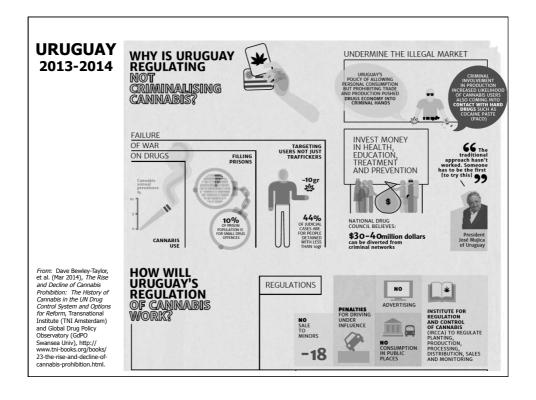
Canada: Vancouver Insite Heroin Maintenance

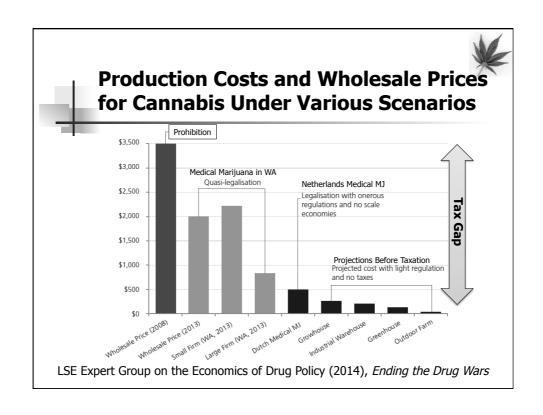
USA: Medical Marijuana in 21 statesUruguay: Regulations/Taxation (2013-14)

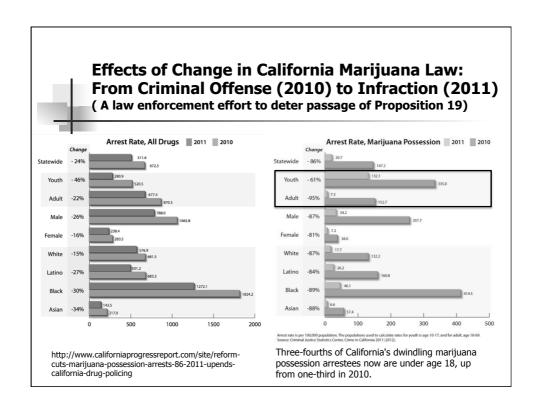
■ **USA:** Regulation/Taxation in CO & WA (2013-14)

Comp	Comparison of Cannabis Regulations				
	Netherlands	Spain Cannabis Clubs	Colorado	Uruguay	
Level of Law	National Prosecutor Guidelines	No Licensing. Membership informal code of conduct	State law (conflicts with federal law)	National law	
Retail Authorization	Licensing (municipality)	No formal regulatory authority	Licensing (locality)	Licensed/registered (national institute)	
Production Authorization	Production & supply to outlets is illegal (backdoor problem).	No formal regulatory authority	Licensing (locality)	Licensed/registered (national institute)	
Age limit for possession	18	Not mentioned	21	Not mentioned	
Growing at home	Up to 5 plants for personal use	Permitted. Number unspecified	Up to 6 plants, cannot be sold	Up to 6 plants	
Maximum amount in possession	5 g. (limit for investigation) 30 g. (limit for prosecution)	Member limit 2-3 g. per day	1 oz. (28.5 g.)	40 g.	

ALICE RAP Policy Paper Series Policy Brief 5. *Cannabis – From Prohibition to Regulation*, The ALICE RAP Project is cofinanced by the European Commission, under the 7th Framework Programme; Contract Number: 266813; www.alicerap.eu.









Paradox of Marijuana Arrests and Loss of Federal College Loans

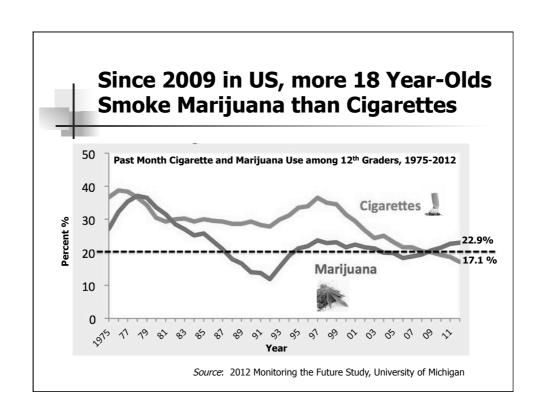
Given that 5,800 of the state's 7,800 marijuana possession arrestees were under age 18 in 2011 - and given that any drug arrest jeopardizes college loans under federal law - investigation into making low-level possession of marijuana on school property an infraction for youths and adults is needed, especially since schools can enforce their own, additional disciplinary sanctions.

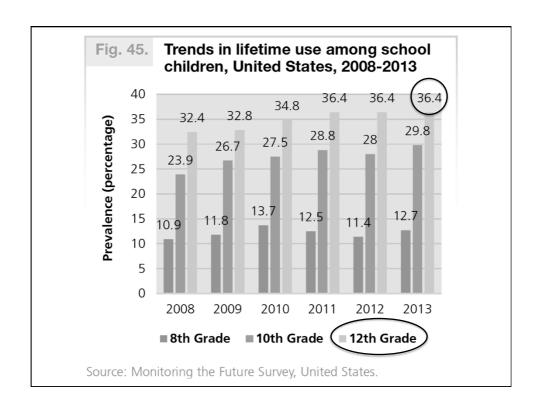


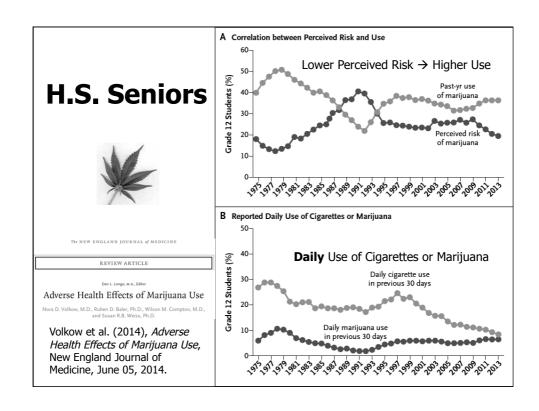
Mike Males (Dec 12, 2012), Senior Research Fellow for the Center on Juvenile and Criminal Justice in San Francisco.

http://www.californiaprogressreport.com/site/reform-cuts-marijuana-possession-arrests-86-2011-upends-california-drug-policing

Juvenile Justice in California (2011), CA Attorney General



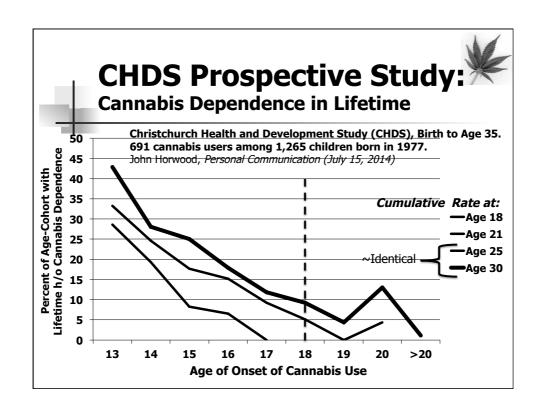


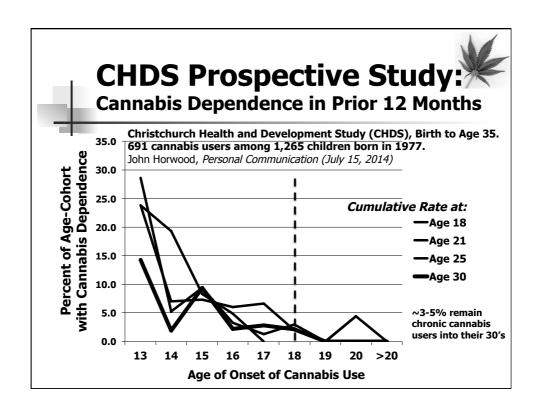




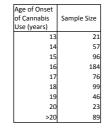
- Brain Maturation: The developing brain in adolescence may be particularly sensitive to environmental inputs such as drugs.
- Cognitive Dysfunction: Many studies, including...
 - Prospective New Zealand (Dunedin) Study (birth-to-38 y.o.)
 - Persistent use is correlated with decline in cognitive abilities
 - Decline greater for those who started cannabis use before age 18
 - Deficits persisted > 1 year for early users
- **Estimated Addiction Risk:** ~ 9% of adults. ~17% for early-onset adolescents.

Cowley, D. (2013). "It's Not Benign: Cannabis, Cognition, and Psychosis." Journal Watch Psychiatry **14**(1).





Christchurch Cohort (n=691)



- **Early Onset of Use:** Those with an earlier age of onset of cannabis use had higher lifetime rates of cannabis dependence by any given assessment age, and were more likely to show current cannabis dependence (as reflected in the past 12 month prevalence rates).
- Lifetime Prevalence Rates: Generally peak by around age 25, and range from around 43% for those with an age of onset of 13 years down to around 5-10% for those with an onset after age 18.
- 12 Month Prevalence Rates: A tendency to be higher for those with an earlier age of onset. In general these rates tend to peak around age 21, 25 followed by a fall to age 30. This is consistent with the overall pattern of cannabis use in the cohort which was at its peak during the period from age 21-25.



Marijuana Use & Psychosis

Vulnerability to Psychosis

- Increased risk (2X) for onset of psychotic symptoms, however a doubled rate is still low.
- Worsening of existing psychotic conditions.
- Unclear causal mechanism. Possibilities include:
 - Psychosis and cannabis use caused by something else Association:
 - Early Release: Pre-existing psychotic disorder is released early by cannabis.
 - **Direct Cause**: Cannabis directly produces psychosis.
 - **Secondary Use**: Cannabis may be a self-medication for early psychosis.

Griffith-Lendering, M. F., et al. (2013). "Cannabis use and vulnerability for psychosis in early adolescence--a TRAILS study." <u>Addiction **108**(4): 733-740.</u>

Gage, S. H., et al. (2013). "Stronger evidence is needed before accepting that cannabis plays an important role in the aetiology of schizophrenia in the population." F1000 Med Rep 5: 2.

Confidence Levels for Adverse Marijuana Effects on Health

on Health and Well-Being.

NIDA Director in **New England Journal**

Adverse Health Effects of Marijuana Use

Volkow et al. (2014), Adverse Health Effects of Marijuana Use, NEJM 2014-06-05

Effect	Overall Level of Confidence*
Addiction to marijuana and other substances	High
Abnormal brain development	Medium
Progression to use of other drugs	Medium
Schizophrenia	Medium
Depression or anxiety	Medium
Diminished lifetime achievement	High
Motor vehicle accidents	High
Symptoms of chronic bronchitis	High
Lung cancer	Low

Table 2. Level of Confidence in the Evidence for Adverse Effects of Marijuana

^{*} The indicated overall level of confidence in the association between marijuana use and the listed effects represents an attempt to rank the strength of the current evidence, especially with regard to heavy or long-term use and use that starts in adolescence.





Organized Medicine:

CSAM Issue:

 Tax revenue withhold for California-based youth interventions & treatment & outcomes evaluations.

CSAM & CMA Issues:

- Elimination of physicians as gatekeepers for recreational marijuana via Medical Marijuana "recommendations."
- Elimination of damaging criminal records for youth
 - Employment
 - School Loans

ASAM (Amer Soc Addiction Medicine) Issues:

- Unequivocally opposed to regulation/taxation of cannabis
- Position similar to federal ONDCP and international UNODC



CSAM: Youth-First Initiative

State of California

 Tax revenue earmarks for health education, school assistance programs (SAPs), youth treatment, and regular outcomes evaluations by University of California researchers.

Schools

- Develop School Assistance Programs (SAPs)
- Learning/Cognitive Assessments
- Focus on school retention, a key outcomes measure.

Professional Treatment

- Treatment for small minority of youth harmfully involved with marijuana.
- Co-pay insurance resources to supplement family private insurance,
 MediCal, and Affordable Health Care Act for professional care.

http://www.csam-asam.org/evidence-based-marijuana-info-0

Addiction Experts Have a Duty for Informed Opinions:

- **Cannabis reform** is the stalking horse for *active* ongoing international drug policy reform. Europe and Uruguay are leading the way for a <u>repudiation</u> of a >40-year failure of the US-driven *War on Drugs* and a <u>revision</u> of UN conventions and international policies (UNODC).
- **Key issues** = Relative harms, damage done by arrests, skewed prosecutions, and the current over-emphasis on end-users rather than drug producers or traffickers.
- **ASAM and CSAM** have a duty to bring the evidence-base to bear in these important public policy debates:

Obligatory Discourse in an Evolving Regulatory Landscape

- Criminal justice model vs. Public health model,
- Relative harms to society vs. self, vs. harms of prosecution,
- "Hard" vs. "soft" drugs,
- Personal possession amounts vs. zero-tolerance
- Reality-based policies vs. Ideological positions,
- Responsible spending of new tax revenues.

