| Committee Secretary<br>Senate Legal And Constitutional Affairs Committee<br>PO Box 6100<br>Parliament House<br>Canberra | Alan Roncan   |
|---|---------------|
| ACT 2600  | 10 March 2015 |
| Dear sir,   |               |
| Please find enclosed my submission to the<br><b>'Regulator Of Medical Cannabis Bill, 2014'</b>                          |               |

Your sincerely,

## Regulator of Medicinal Cannabis Bill 2014 Submission 89

Alan Roncan

Committee Secretary Senate Legal And Constitutional Affairs Committee PO Box 6100 Parliament House Canberra ACT 2600

10 March 2015

## **Regulator Of Medical Cannabis Bill, 2014**

There are really two parts to this Inquiry:

**One**, designing a regime to trial the efficacy or otherwise of Medical Cannabis; (ie, to find out "is cannabis good or bad for you?")

**Two**, what to do about the (majority of) people who will be excluded from these trials? (ie, "should you go to jail for it?")

This undertone of criminality (regarding 'Two', above) cannot simply be ignored, especially considering the changing demographic as a result of the current interest in the health benefits of cannabis ...

... up till now, the majority of the 65 thousand Australians arrested every year for cannabis have been under 25s, teenagers mostly. Children, really.

Overall, 7 million Australians have smoked cannabis at least once, and all are regarded as having committing a crime (or at the very least would have become 'known to police' if an Officer happened to be in the neighbourhood while they were smoking, even that one joint).

It's not too long a bow to draw in concluding that a third of the population is essentially officially classified as criminal. (Surely that has to set alarm bells to ringing ... what sort of society thinks a third of its population should be in jail?)

But now that Medical Cannabis is a 'thing', that demographic of possible arrestees is going to change radically. It will grow much older as parents, grandparents and other family members decide to try cannabis to help themselves or their family, for the hundreds of conditions for which cannabis is said to help.

And many of them will be too desperate to wait for the outcome of some longterm far-off trials which may or may not help them eventually.

While some will try to access limited supplies of cannabis oils and the like (limited in availability, efficacy, range, variations, types), many, or most, will end up having to grow their own plants.

And given the amount of medicine needed to treat some conditions, that could mean dozens, even hundreds, of plants a year.

Which means they too, along with their children and even grandchildren, will now be regarded as criminals, even dealers (as is happening now, all too often)

And even if at the end of the day they are finally 'allowed' to grow their own, weeks or even months of harassment, expense, stress, invasion of privacy, lawyers, courts etc would have not helped the sick persons at all.

And the numbers will be huge. The Medical Cannabis tsunami is no flash-in-the-pan fad. At the Nimbin MC workshop in January, more than 200 people turned up, and it was standing-room only.

And they were all 'ordinary' people, desperately trying to find ways to help their loved ones.

Interestingly, the only 'hippies' (or criminals) in the room were those running the workshops (actually long-term criminals, many of whom had been arrested and jailed in the past).

More than 250 turned up for the February workshop, and future workshops will doubtless see an increase in attendees.

And all of these people, more and more parents and pensioners, will be classified as criminals if they grow their own plants, arrested for trying to help a sick loved one.

## **Regulator Of Medical Cannabis Bill, 2014**

As things stand, it will be years before someone can go to the doctor and get access to Medical Cannabis, let alone grow their own.

Unfortunately, all we are expecting are a series of 'long-term far-off trials' (above), an endless process going something like this:

We'll spend a couple of months/years deciding whether to allow trials to go ahead, followed by months/years selecting a handful of really sick people and then months/years as they trial a limited range of synthetic cannabis, then months/years of discussions.

And the likely conclusion will be that results are inconclusive (because of the limited *everything*), so we'll start all over again with more years of trialing. (After all, in the early 2000s NSW Premier Bob Carr was talking about getting Medical Cannabis trials up and running; we're still waiting for those to start.)

In the meantime, sick pensioners across the country are being frog-marched down to the Police Station for another round of humiliation while sick kiddies fit and die because they can't get the proper medicine because of some 'moral'\* principle.

This Inquiry should work on the principle of trying to find out which preparations (hot, cold, oil, tincture, etc) help which illness, disease, or condition the most.

The best way to do that is statistically, thus we would need vast numbers to get the true picture.

The only way to get the numbers would be to allow "whoever needs it" can grow it, buy it, use it.

Then after a couple of years they can all get together tell us the news about which preparation helps which conditions the most.

Doctors will then have the information they need to treat specific cases most effectively.

One could have confidence in making such a recommendation, given that literally thousands of Medical Cannabis studies over literally decades (and used by millions of people over thousands of years) have already proved beyond a shadow of a doubt that MC has a huge amount to offer.

There are many arguments about the efficacy or otherwise of MC, but very few people actually claim it makes things worse (apart from those like "Reefer Madness" etc\*). So what's the harm?

At the very least, cannabis stereotypically makes you laugh and makes you hungry ... these are two things that thousands of people with serious illnesses around Australia would love to be able to be able do, even if it doesn't actually cure them (after all, "laughter is the best medicine").

But there is nothing funny about being condemned to pain, infirmity and even premature death because of some 'moral' principle dreamed up by some staggeringly immoral people in the first half of the last century in the USA. (\* I trust you will have acquainted yourselves with the role that Harry Anslinger, Du Pont and other men have played in the 1930s USA, and who are largely responsible for the disgraceful situation we still find ourselves in 80 years later?)

Thank you for your time.

Ps I'm old enough to remember when police weren't the enemy; they were there to arrest burglars, murderers, rapists etc. Now their main job seems to be stopping suspicious-looking children in the street and rifling through their pockets, like some sort of mobile customs office (as said, 65,000 Australians are arrested every year more or less this way). It would be nice if this Inquiry could somehow address this appalling situation.