



Health and Psychosocial Effects Evolving from Cannabis Legalisation and Commercialisation

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- › Legalising cannabis will lead to a rise in consumption.
- › It will bring about substantial health and psychosocial harm, especially among children and adolescents.
- › The facilitation of the access to cannabis will lower the level of perception of the deleterious effects of cannabis.
- › The increase of anxiety and depressive disorders is particularly dramatic. The same applies to chronic schizophrenic disorders and even to an increased level of suicidality.
- › The legalisation scheduled for Germany is an experiment which embraces the risk of exploitation and immiseration especially of vulnerable children and adolescents.
- › Decriminalising the possession of small quantities of cannabis and the acquisition limited to pharmacies appear to be a viable alternative to legalising and commercialising it.

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Legalising cannabis will lead to a rise in consumption and entail adverse consequences

The ruling parties have submitted a draft act aiming to control the use of cannabis (“Cannabis Control Bill” or “Can-G” in German) which is planned to come into force on 1 April 2024.¹ In contrast to the statements put out by the National Health Ministry, it will contribute neither to harm prevention nor to child and youth protection.

The United Nation’s International Narcotics Control Board (INCB) states in its report issued on 9 March 2023 that the legalisation and marketing of cannabis will lead to a rise in consumption, especially among children and adolescents.² The increase in consumption is said to be linked to significant health and psychosocial harm. Furthermore, the simplified access will mitigate risk perception among the population and will not slash illegal trade. The internationally renowned expert in drug-induced psychiatric disorders, Sir Robin Murray, professor at King’s College London, confirms with scientific studies, especially from the USA and Canada, that legalisation has brought about a rise in consumption among youths and young adults.³ INCB noted that in 2019 and 2020 cannabis consumption in the American federal states after legalising cannabis exceeded 24.5 percent of the 12-year-olds and over as compared to 16.5 percent in those states shunning legalisation.⁴ Based on numerous scientific studies, the United Nations’s *World Drug Report* (2022) has come to the conclusion that the perception of health problems triggered by cannabis consumption had decreased in those countries which had legalised its consumption. At the same time, the number of serious psychiatric conditions, admissions to hospital and suicides related to the regular use of cannabis had risen alarmingly.⁵ In the United States, out of more than 50 million consumers roughly 16 million of those using cannabis suffered from a marijuana use disorder.⁶ The German Society for Psychiatry and Psychotherapy, Psychosomatics and Neurology (DGPPN) underlines that legalising cannabis as well as a simplified access and the marketing of cannabis will entail a rise in consumption in Germany, too. An increase in consumption-induced problems will thus be unavoidable, especially among young people.⁷

Cannabis legalisation leads to dangerous increase in use among young people.

Health-related and psychosocial damage caused by the consumption of cannabis

The risk of developing addiction including severe secondary health effects is particularly high in case of an early onset of consumption, i.e. during childhood and adolescence.⁸ Cannabis is the primary drug for most drug users seeking treatment. What is particularly detrimental: the tetrahydrocannabinol (THC) content in cannabis preparations is steadily increasing and today is five to ten times higher as compared to the early 1970s.⁹ THC is the cannabinoid which demonstrably leads to more brain damage and chronic psychotic conditions than

Cannabis use in childhood and adolescence causes adverse health and psychosocial effects of particular severity.

any other cannabinoid. Medical studies converge in that they come to the result that owing to increasing consumption levels more youths suffer from cannabis use disorders which alongside chronic schizophrenic disorders result in a higher rate of depression and anxiety disorders.¹⁰ The so far most extensive study comprising nearly seven million medical data from Denmark has identified the deleterious use of cannabis as the cause of a substantial rise in schizophrenic psychoses, especially among young men. Its authors call on politicians to take scientific findings into account when regulating access to cannabis, especially for 16- to 25-year-olds.¹¹ Early initiation of regular cannabis use is associated with a two- to four-fold increased risk of developing psychosis from the schizophrenic spectrum.¹² Chronic schizophrenic disorders count among the most severe diseases. Time and again, they end up in a loss of participation in social and work life, chronic diseases, and a high rate of suicidality. Economically seen, they count among the most costly diseases because they mainly break out around age 20 and in many cases require lifelong treatment which usually just mitigates symptoms, but is not a cure. The deleterious use of cannabis impairs education, career, and social participation. In case of regular use, apathy, and mood disorders as well as severely reduced performance frequently occur (more than ten percent); the same is true of continuous concentration and memory problems as well as combinatorial thinking problems. Acute and chronic psychoses affect growing numbers of young cannabis users who are often in the midst of an intricate life situation and thus the most vulnerable members of our society when they are going through a decisive stage of their lives.

Cannabis, smoking, and alcohol

Because cannabis is predominantly smoked, the risks of smoking are added to the risks of cannabis use. In this respect too, the legalisation and commercialisation of cannabis run counter to scientific evidence and clinical experience. The German Cancer Research Institute (DKFZ), the largest biomedical research centre in Germany, assumes that roughly 127,000 deaths per year are caused by smoking – this includes hookahs, e-cigarettes, etc. In 2021 the DKFZ joined the global action plan propounded by the World Health Organization (WHO) aiming to reduce smoking rates drastically.¹³ They claim that the average age of onset is around 16 years, and the younger a person is when starting smoking, the higher the risk for addiction. According to the DKFZ's plan, one of the most important measures to be taken is a massive cut in availability through far-reaching prohibitions as well as the consistent implementation of child and youth protection.¹⁴

Alcohol is also a toxic substance, particularly in high quantities. Child and youth protection has not succeeded in its endeavours to sufficiently curb excessive use among children and youths.¹⁵ It is misleading, though, to equate harm caused by cannabis with that caused by alcohol. The mere fact that cannabis is mainly smoked clearly exceeds its noxiousness when compared to a moderate consumption of alcohol. Apart from that, both alcohol and cannabis unfold diverging effects: small amounts of alcohol do not lead to a perceptible intoxication of the cerebrum, accompanied by states of confusion and delusion. Primarily, reversible interference with cerebellar and diencephalic functions can be noticed, symptoms of which are for example fatigue and coordination malfunctions. Recent examinations¹⁶ have revealed that even small quantities of alcohol may damage brain cells, though alcohol only leads to permanent brain damage if abused in high quantities during decades. It is important, too, to make a difference when it comes to the disease onset age in case of cannabis and alcohol abuse. The burden of disease expressed in lost years of a person's life is virtually different, depending on whether disorders appear at age 20 such as cannabis-induced psychoses or types of alcohol-induced dementia emerging at an advanced age. From the viewpoint of child and youth protection, it is an altogether dire decision to make light of

Limited availability of cannabis instead of promotion downplaying its impact through deregulation.

cannabis and to make it more accessible – considering child and youth protection’s failure to curb smoking and the noxious use of alcohol, particularly among vulnerable groups. A synopsis of scientific evidence and clinical experience¹⁷ leads to the conclusion that cannabis availability to children and youths and, as the case may be, to young adults up to age 25 has to be restricted as far as possible.

Cannabis and crime

In countries which legalised cannabis, it can be seen that illegal drug trafficking was far from being curbed, but even flourished.¹⁸ Further studies revealed that following the legalisation of cannabis use in US federal states the number of emergency admissions and of partially fatal traffic accidents had risen.¹⁹ A striking parallel between the legalisation of so called “recreational marijuana”²⁰ and a rise in property offences was noticed in Oregon.²¹ The German police union draws the conclusion that “staff shortages, a lack of technical equipment and inadequate laws are the reason why the illegal drug market in Germany keeps flourishing and why consumption keeps increasing”.²² Even though the present parliamentary bill claims controls, sufficient staff are not and will not be made available. Children and youths will not be protected. An 18-year-old can consume up to 90 joints per month if the dispensed quantity is 25 grams, and nobody will be able to carry out checks to determine whether and how these quantities are passed on to children and youths, too. The planned laws are not in line with child, youth and health protection and are unsuitable for pushing back the black market. Ipso facto, criminal proceedings will then lose the general deterrent effect. This would be a fateful sign for young people.

The present legislative proposal disregards child and youth protection.

In July 2023, the German Association of Judges, with 25,000 judges and prosecutors by far the largest professional body, published its opinion on the Cannabis Control Bill.²³ In its paper, the Association of Judges has drawn the following conclusions: (1) The Cannabis Control Bill will not alleviate the strain on the judicial system. The administrative costs stated in the ministerial draft bill are neither comprehensible nor realistic. (2) The Cannabis Control Bill will not lead to the shrinkage of the black market; on the contrary, it will lead to a growing black market. (3) It is most unlikely that the Cannabis Control Bill will enhance health protection. (4) Child and youth protection will not be bolstered up by the Cannabis Control Bill. (5) On the contrary, the range of sentences available to law courts will be shrinking – even for the (commercial) dispensing of narcotics to minors.

Legalisation, commercialisation, and youth protection

Commercialisation of cannabis as a consumer good is well underway. Big companies and powerful hedge funds are conquering the market.²⁴ The lead author of the Danish study already quoted, Carsten Hjorthøj, has drawn the following conclusion: “Increasing legalisation of cannabis during the preceding decades has turned it into one of the most consumed psychoactive substances worldwide, whereas public awareness of the detrimental effects of cannabis has dwindled [...]”²⁵ Advertising is particularly aimed at children and young people. They are the most attractive target group because their brain’s addiction control centre is conditioned by an early onset of drug use during a sensitive development phase. Early imprinting ensures that they learn at an early age to manipulate their emotions, moods, and thoughts through drugs. Their dependency not only includes certain substances but turns into a mode of conflict processing which may be served by various substances and often becomes a lifelong strategy. In this way, “lifelong customer loyalty” is achieved.

If the current legislative proposal is implemented as planned, the consequences will be the massive health and psychosocial effects that have been described above. We should not forget that it's also about intergenerational equity. When pursuing their interests, unscrupulous companies and well-to-do consumers of luxury goods do not shrink back from exploiting and pauperising children and youths who are particularly vulnerable groups. The legislative proposals were intended to serve child and youth protection, but this has turned scientific evidence and clinical experience into its opposite. Legalisation as planned today will generate high profits for companies and cannabis shops, whereas massive health care costs and production losses will have to be borne by the supportive society.

Hedonism and economic interests of the elderly will weigh heavily on vulnerable children and youths.

Political responsibility

The German Society for Psychiatry and Psychotherapy, Psychosomatics and Neurology (DGPPN) offers the following summary in its press release of 5 July 2023: "Politicians organise society's foundations, on the basis of which addictive substances are consumed; in particular, the availability and acceptance of substances and thus the social and health consequences are affected by politics."²⁶ Cannabis-based preparations could for instance be offered by pharmacies as prescription-only medicines. This would ensure that patients receive secure medicines and professional information on risks and side effects. As proposed by the United Nations Narcotics Control Board, the use and possession of small quantities could be decriminalised. The unrestricted commercialisation, especially with the help of unfair advertising, turning a deaf ear to risks and side effects, should be forbidden.

A viable alternative to legalisation and commercialisation: sale via pharmacies and decriminalisation of the possession of small amounts and the use of cannabis.

Looking ahead

Politicians should specifically promote alternatives to the consumption of cannabis. The most important factors are good social relationships and support for self-efficacy, resilience and creativity in the families, day nurseries, schools and at work. The feeling of being able to shape and achieve something yourself and the experience of doing something meaningful for the community are essential salutogenetic, i.e. health-promoting, experiences. The abuse of cannabis has a long-lasting harmful effect on them. Awareness campaigns ought to focus on the fact that there are more creative ways of overcoming personal crises and social conflicts.²⁷ Quality education at school, a wide range of sporting, musical and artistic activities and smoke-, alcohol- and cannabis-free lifeworlds are viable alternatives to cannabis use.

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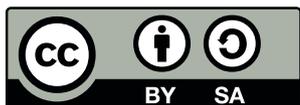
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