

To win the war on drugs, we must end it - Jenny Creed Geraghty

By Jenny Creed

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Legalisation of medical cannabis could point the way to regulation of all drugs

Before prohibition, cannabis was a legal medicine. Newspaper adverts for cannabis cigarettes claimed you could inhale a cure for asthma, for a dollar a pack.

In 1937, cannabis was found guilty as a gateway drug to addiction and sentenced to nearly 60 years of prohibition. Mary Jane was thrown in the slammer along with her natural medicinal powers.

Harry Anslinger, the 'judge' of this kangaroo court, tossed away the key to therapy for millions of patients shackled to ailments. Fast forward to 2022 and medical cannabis is a multi-billion dollar legal crop.

So, who was Harry? Powerful for one, as head of the US Federal Bureau of Narcotics. Insanely racist too, by the tone of his remarks:

"There are 100,000 total marijuana smokers in the US, and most are Negroes, Hispanics, Filipinos, and entertainers.

"Their Satanic music, jazz and swing, results from marijuana use.

"This marijuana causes white women to seek sexual relations with Negroes."

Harry's racist anti-marijuana campaign led to the 1937 Marihuana Tax Act. Possession, or selling pot, was now illegal in the US.

Harry's racist "war on drugs" got perverse and personal when he set his sights on jazz icon Billie Holiday, whom he hunted down, jailed and brutally stripped of a successful career. Her crime? She was black, a jazz singer and a junkie; her heroin addiction possibly linked to memories of being chronically raped as a child.

In 1970 cannabis was further demonised and blacklisted as a Schedule I drug in the US. Accused of a strong potential for abuse, no accepted medical use and not safe for prescription. Cannabis shared a prison cell with LSD and heroin.

Re-legalisation of medical cannabis

Nowadays in the US, medical cannabis is permitted in a majority of US states.

As this “Green Revolution” sweeps across Europe, every country has their own spin on legalisation.

Spain will initially focus on three disorders: epilepsy, chronic pain and multiple sclerosis. Ukraine, an EU candidate country, is green lights go for more than 50 conditions, including post-traumatic stress disorder resulting from the war with Russia. Germany bagged its first legal harvest of medical cannabis this year, to be dispensed by pharmacies for serious illness prescriptions.

Re-legalisation adds up. The EU medical cannabis market is forecast to top €3 billion by 2025. Germany alone should hit €8 billion by 2028.

Quality is key. Medical cannabis must be pharmaceutical grade, grown under EU-Good Manufacturing Practices (EU-GMP). The UK Isle of Man is on board, with plans for a £100 million “gold-standard” facility to grow and export medicinal cannabis. Malta is expected to launch its first EU-GMP product later this year.

If we pause to peek over the European ‘fence’, we spot the Thai government shipping out one million free medical cannabis plants to patients across the nation. Grow your own meds might be a game changer.

Regulated legalisation of *all* drugs?

Could re-legalisation of medical cannabis open the floodgates for responsible regulated legalisation of *all* drugs?

Recreational cannabis is a low-hanging fruit. A growing number of countries have decriminalised possession of small amounts of recreational cannabis. Malta is the first EU country to legalise it for adult use and citizens can grow up to four plants at home. Germany will go one step further, allowing recreational cannabis to be sold to adults.

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A recent survey reflects that over 50 per cent of Europeans are in favour of legalising recreational cannabis, citing benefits like access to good quality cannabis with known THC levels and elimination of the illegal market along with its policing costs. Policing the “war on drugs” has cost the US a trillion dollars in 50 years.

It’s becoming clear that the only way to win the “war on drugs” is to end it.

Take Portugal’s radical decriminalisation of *all* drugs in 2001, which won massive victories. Addicts were treated as patients, instead of criminals. Overdose deaths dropped by 85 per cent and HIV plummeted by 90 per cent. Flipping from a criminal-legal to a public-health model was the key to success here.

Canada and Switzerland have also been treating addicts in the healthcare system for about 20 years. Vancouver opened its first safe clinic in 2003, where addicts take their own drugs under shelter from prosecution. Sterile needles are provided and medics are on standby to reverse overdoses with the ‘Lazarus’ drug (Naloxone), which revives the victim.

To date, 5,000 overdoses have been reversed with no deaths. Canada has now approved 40 safe clinics.

Switzerland's strategy over the past 20 years includes "addiction maintenance". This is a step up from safe clinics. Addicts are prescribed pharmaceutical-grade drugs, a safer option than scoring black-market drugs laced with illicit toxic fentanyl. The dose is calibrated by doctors to maintain well-being, allowing addicts to remain connected to their families and society instead of being driven into a criminal underworld in search of a fix.

A majority of addicts in the Swiss clinics eventually quit or pivoted to methadone treatment, in tune with the conclusion: "The opposite of addiction is human connection" (New York Times bestseller, *Chasing The Scream*).

Like Portugal, Switzerland's drug-related deaths and HIV took a nosedive.

A libertarian think tank, the CATO Institute, points out the obvious: a drug-free society will never exist. Criminal law is not a solution for drug abuse and addiction. This is a public health issue. The "war on drugs" created a "war *for* drugs" fought by criminal gangs for a slice of the lucrative black market.

Can regulated legalisation of *all* drugs win the "war on drugs"...by ending it?