

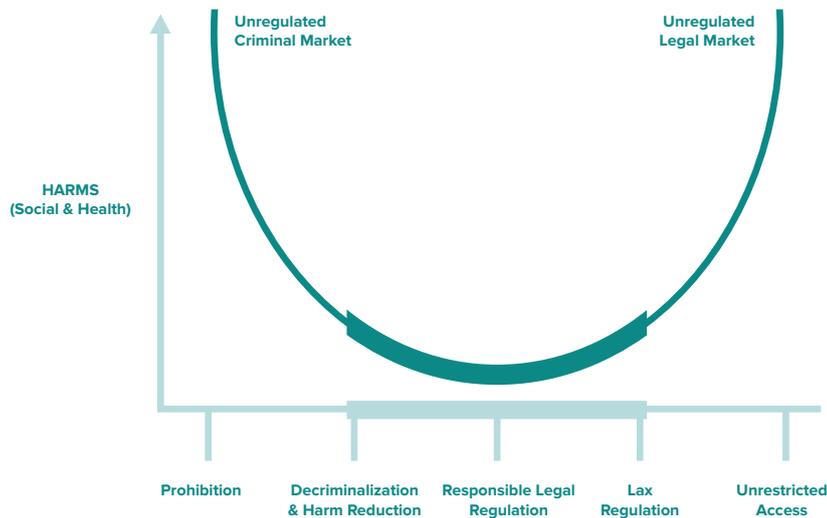
dapaanz supports a health approach that delivers equitable outcomes and reduces drug harm.

At the 2020 General Election, New Zealanders will take part in a referendum to determine whether to adopt draft legislation, which would regulate the production, supply, and use of cannabis. An affirmative majority would indicate to the Government that the public supports them introducing and subsequently enacting the legislation, following the usual law-making process.

dapaanz supports a health approach to drug use and addiction. Regulation and decriminalisation are the two most common models used internationally to achieve a health-focussed, as opposed to a punitive, approach to reducing drug-related harm.

The image overleaf is from the Global Commission on Drug Policy and outlines how different models affect social and health harms. It shows that social and health harms are most severe from both an unregulated criminal market (prohibition) and an unregulated legal market (unrestricted access).





New Zealand has already gone some way to decriminalising all drug use by recently amending the Misuse of Drugs Act 1975 to affirm police discretion to prosecute only if it's in the public interest to do so. We may also have a regulated market for cannabis soon depending on the outcome of the 2020 referendum. It is important, therefore, that we, as a sector, influence the proposed legislation, regardless of how each of us votes in the referendum. This is because our experience with alcohol and tobacco has taught us that tighter regulations are needed on legal commercialised models and increased investment in effective prevention, harm reduction and treatment models to minimise the risk of any perverse outcomes. We know, for example, that some population groups (particularly Māori) experience disproportionate tobacco- and alcohol-related harm than others and that in some respects these inequities have grown. We also know that harm reduction goals are compromised by the pursuit of profit. For example, unrestricted or insufficiently regulated commercial models can produce more aggressive marketing and/or novel products that push the market into newly established areas.

The referendum is likely to ask whether we maintain the status quo or use the model in the draft legislation to have a regulated market for cannabis. The regulatory model for the draft legislation is being developed. The Government has indicated that the parameters in the legislation will include:

- legalising personal use and purchase at age 20
- only allowing sale at licensed premises
- only allowing consumption at licensed premises or private homes
- allowing limited home-growing
- restricting marketing activities, including a ban on all advertising for cannabis products.

We want to know what you think about the proposed legislation parameters so we can advocate for what an alternative model could look like and what our sector would need to support it. We believe that it is important for you at the coalface to become familiar with what's being proposed and to become involved in the development process. For more detail on the proposed regulatory model see the Cabinet Paper.

We will also be asking our members for feedback. In preparation for this feedback please consider the following:

- In what ways could a regulated market for cannabis with the above legislation parameters be better at reducing drug harm than what is currently in place? In what ways could it be worse?
- What would you change about these parameters?
- What would help ensure more equitable outcomes across population groups?
- Would we need new approaches or new services to support this model?
- How would these changes impact on our work?
- Are there other parameters that should be in the draft legislation?
- Some examples that we favour are: having a non-profit/non-commercial model; no sponsorship or branding; ring-fencing tax received for reinvestment in effective intervention and treatment; and having mechanisms to control potency and price.