

Editorial

Will Germany's new cannabis policy reform plans serve public health?

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Recently, Germany's federal coalition government announced a retreat from its original proposal to fully legalize non-medical cannabis use and supply.^{1,2} The previous plan would have legalized the possession and use of cannabis by adults ages 18+ and established a regulated, commercial production and retail distribution chain, generally similar to cannabis legalization frameworks implemented in Uruguay, Canada and selected US states.

The original model was found to conflict with EU law. The revised proposal comprises a 'two-step' approach for cannabis policy reform¹: first, it will legalize personal cannabis use, including the possession of maximum 25 grams for adults 18+ years, alongside 'home-cultivation' of up to three cannabis plants; in addition, it provides for the establishment of community-based 'cannabis-clubs' where up to 500 adult members can collectively grow cannabis, and obtain up to 25 grams/day and 50 grams/month of cannabis for personal use. Second, it will facilitate a series of regional, multi-year 'model projects' to examine the commercial production and retail sale of cannabis for adults. The new policy emphasizes the protection of cannabis consumers' health and safety, youth protection and the reduction of illicit cannabis markets as principal goals.

Germany's new policy framework significantly tempers the original legalizations plans. Surely, the new provisions will facilitate a general de-penalization of cannabis use and supply, and so shield adults from adverse consequences of criminalization. In addition, cannabis-related enforcement expenditures will likely be reduced. It is less certain, however, also based on experiences and evidence from elsewhere, whether they will effectively improve public health outcomes.

Consumers: The proposed reforms shift cannabis production and supply to a combination of 'cannabis-clubs' and 'home-cultivation'. Similarly organized 'social-clubs' exist in Germany for leisure and social activities but do not involve the state-sponsored production of—rather complex and potentially hazardous—psychoactive consumption products. It is questionable whether 'cannabis-clubs' will be capable of providing safe, quality-controlled cannabis products, also in sufficient quantity, to meet the needs of Germany's—currently 4–5 million—non-medical cannabis consumers. Similarly conceived, but much smaller-scaled 'cannabis-clubs' have been implemented in Uruguay, Spain, Belgium; their experiences include

challenges in regulation, monitoring and accountability.³ Cannabis 'home-cultivation' raises issues of environmental health and safety, especially when it occurs inside homes, and concerning possible misuse or diversion difficult to regulate and control. Home-cultivation has also been associated with increased cannabis use-related risk behaviors.

Youth: It is unclear how the new plans will improve youth protection, also as they involve a general liberalization of cannabis use and supply. While evidence is mixed, such reforms have resulted in 'normalization' effects for cannabis, including increased use and decreased risk perceptions among youth, in select settings.⁴ As the minimum age for legal cannabis consumption and purchasing will be 18, minor-age users (current use prevalence 12–17: ~8%) will have to continue to rely on illegal cannabis sources.² It is also unclear what the goals and strategies of the government's 'early intervention/prevention programs' for under-age cannabis users will be, and whether these will be more effective than existing preventive programs that have only modest effects on cannabis use.

Markets: It is questionable to which extent the new plans can reduce the scale of illicit cannabis markets. In settings that have legalized cannabis production and sales (e.g. Canada), substantial majorities of consumers (e.g., circa 50% to 80%, depending on the cannabis product type) have gradually shifted their purchasing to legal sources.⁵ It is doubtful, however, whether 'cannabis-clubs' can operate on the scale needed, and provide the product range, competitive pricing and accessibility required, especially for the high-frequency/-risk cannabis users most entrenched with illicit cannabis markets, to achieve similar transitions.⁵ Experiences with cannabis clubs elsewhere suggest that absent of adequate policing, they may be instrumentalized for illegal supply activities, thus contributing to a 'grey' rather than a legal cannabis market environment.³

Finally, it is unclear how the eventual shift from 'step-1' ('cannabis-clubs') to 'step-2' ('commercial production/retail') is to meaningfully occur, also since these represent more competing than complementary supply components for cannabis legalization. This is especially so when a for-profit cannabis industry proliferates, including its preeminent goal of a maximized market share. This raises questions about the role and sustainability of 'cannabis-clubs' as an interim provision.

In sum, Germany's revised cannabis policy reform plans present a patchwork of components. They will de-penalize personal cannabis use and sourcing for adults, but it is uncertain how the proposed supply structures will serve public health objectives. It is a daring policy experiment to place production in the hands of voluntary collectives in the hopes for effectively regulated supply of safer, quality-controlled cannabis products for millions of consumers. Moreover, the transition paths within a relatively short period to a commercial cannabis production and distribution market are unclear. The route to and substance of effective strategies for youth protection also remain vague and uncertain. Germany's cannabis policy reforms involve precedent for Europe and beyond, yet raise elementary questions concerning feasibility and public health outcomes. Systematic, evidence-based policy development, monitoring and evaluation appear crucially important.

Author contributions

B.F. and W.H. jointly developed the concept for, and contributed to data presented and related interpretations in the paper. B.F. led the writing, W.H. conducted substantive review and editing of the commentary. Both authors approved the final version of the paper submitted.

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