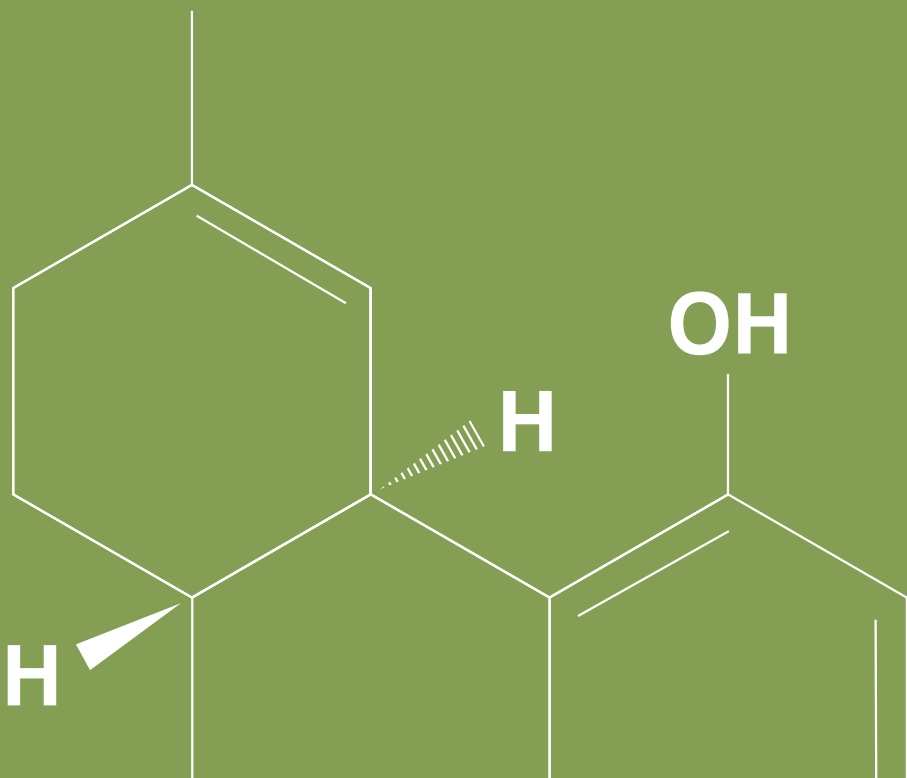


CANNABIS

THE FACTS



CANNABIS AND THE LAW

Because cannabis is harmful, it is against the law for people in Western Australia to cultivate, possess, use, sell or supply cannabis, or to possess pipes and other smoking implements containing detectable traces of cannabis. It is also illegal for shops to sell or display cannabis smoking paraphernalia.

The possession of small amounts of cannabis is still an offence. People apprehended for simple cannabis offences by police may be issued a **Cannabis Intervention Requirement (CIR)**. Under the CIR scheme, police may issue a CIR notice to eligible people found in possession or use of small amounts of cannabis, and/or possession of a smoking implement containing traces of cannabis.

A person who has been given a CIR will be required to book and complete a **Cannabis Intervention Session (CIS)** within 28 days or elect to have the matter heard in court. If you book and complete a CIS you will not be required to appear in court. No further action will be taken against you for the alleged offence and you will not receive a criminal conviction.

WHAT IS CANNABIS?

MULL, POT, DOPE, WEED, LEAF,
GUNJA, MARIJUANA

Cannabis is difficult to classify pharmacologically because it has a variety of effects. It is primarily a depressant drug. However, it can have hallucinogenic and some stimulant properties.

Delta-9 tetrahydrocannabinol (THC) is the psychoactive ingredient in cannabis. This chemical affects a person's mood and perception. Marijuana, hashish and hashish oil come from the cannabis plant.

Cannabis is made from the dried leaves and flowers of the plant. Its colour ranges from greyish-green to greenish-brown. The texture of cannabis can be fine, like dried herbs, or coarse, like tea.

Hashish (hash) is the dried, compressed resin extract from the flowering tops of the female plant. Hashish ranges in colour from light brown to nearly black. It is more potent than cannabis. Hashish is usually smoked through a pipe or cooked in foods and eaten.

Hashish oil is a thick and oily liquid extract from the cannabis plant. It is reddish-brown in colour. The THC is very concentrated and a small amount will produce marked effects. Hashish oil is usually added to joints or cooked in foods and eaten.



CANNABIS IS THE SHORT NAME FOR THE HEMP PLANT CANNABIS SATIVA. IT IS THOUGHT TO HAVE ORIGINATED IN ASIA AND REACHED EUROPE MORE THAN A THOUSAND YEARS AGO.

WHERE DOES CANNABIS COME FROM?

Cannabis is the short name for the hemp plant Cannabis Sativa. It is thought to have originated in Asia and reached Europe more than a thousand years ago.

HOW IS CANNABIS USED?

Cannabis is usually smoked in hand-rolled cigarettes called joints or water pipes called bongos. The THC is quickly absorbed into the bloodstream through the walls of the lungs. The intoxicating or high effect is felt when the THC reaches the brain.

This can happen within a few minutes and the intoxicating effects may last for up to five hours.

When cannabis is eaten, the absorption of THC is much slower, taking up to three hours to enter the bloodstream. When it is eaten, the amount of food in the stomach, characteristics of the user (e.g. weight, gender and other drugs used) will determine how quickly a person feels the effects.

HOW MANY PEOPLE USE CANNABIS?

The 2007 National Drug Strategy Household Survey reported that 38.3% of Western Australians aged 14 years and above had ever used cannabis. In total, 10.8% had used cannabis in the past year and 6% in the past month. Use of cannabis in respondents' lifetime was highest among 30 to 39-year-olds (62.9%). Use of cannabis by respondents in the past year and the past month was highest among 20 to 29-year-olds (26.5% and 12.8% respectively).

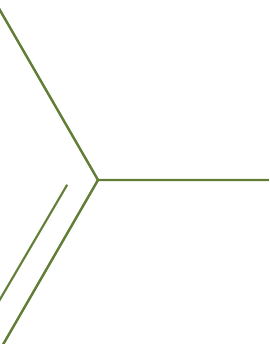
HEALTH EFFECTS OF USING CANNABIS

The effects of cannabis and the risks will vary from person to person depending on characteristics of the:

Individual (user) - Mood, physical size, physical and mental health, gender, previous experience with cannabis, expectations of the drug and personality.

Drug - The amount used, the content of THC and whether it is smoked or eaten.

Setting (environment) - Whether the person is using with friends, on his/her own, in a social setting or at home, at work or before driving.



SHORT-TERM EFFECTS	SHORT-TERM EFFECTS OF HIGHER DOSES	LONG-TERM EFFECTS
◉ loss of concentration	◉ confusion	◉ bronchitis
◉ impaired balance and reflexes	◉ restlessness	◉ lung cancer
◉ loss of inhibitions	◉ detachment from reality	◉ decreased concentration
◉ reduced coordination	◉ excitement	◉ decreased memory and learning abilities
◉ feeling of wellbeing	◉ hallucinations	◉ dependence
◉ increased heart rate	◉ anxiety	◉ interference with sexual drive and hormone production
◉ reddened eyes	◉ panic attacks	◉ mental health problems in those who are vulnerable.
◉ increased appetite	◉ respiratory problems	
◉ talkativeness	◉ mental health problems in those who are vulnerable.	
◉ tunnel awareness – where a person focuses their awareness on one thing.		

CANNABIS AND OTHER DRUGS

Using cannabis with other drugs increases risks. If cannabis is used in conjunction with other depressant drugs, the depressant action generally increases. When cannabis is combined with alcohol it can frequently lead to high risk behaviour which can result in injuries. For example, because cannabis interferes with a person's motor and coordination skills, vision and perceptions of time and space, the ability to drive safely and complete tasks that require concentration can be impaired. This impairment increases substantially when cannabis is used with alcohol.

CANNABIS AND MENTAL HEALTH PROBLEMS

Cannabis use can increase the risk of mental health problems, especially in young people. This risk increases with frequency and amount of cannabis use.

The frequent or even occasional use of cannabis can cause anxiety, depression, paranoia and psychosis in those people who have a vulnerability to mental health problems. People who use cannabis in their teens may also have an increased risk of developing mental health problems. This risk increases with frequency and amount of cannabis use.

CANNABIS AND THE BRAIN

Frequent use of cannabis can affect the brain by decreasing the user's ability to concentrate and remember things, and can also impact on learning ability.

Cannabis intoxication can impair short-term memory, attention, motor skills, reaction time and skilled activities, increasing the risk of injury. People with a cannabis dependency are also at an increased risk of impairing their short-term memory.

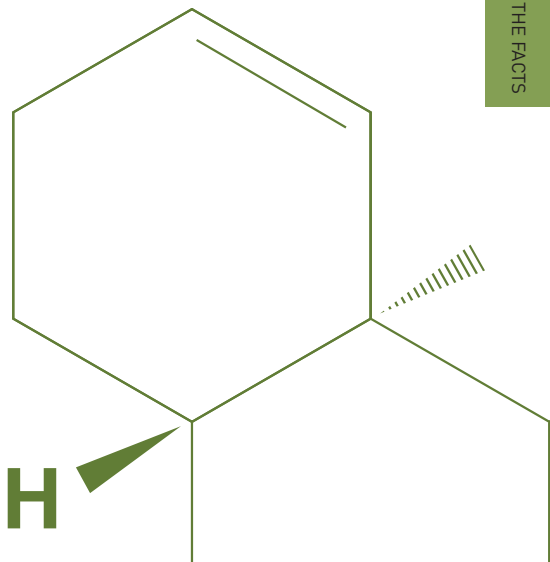
CANNABIS AND RESPIRATORY PROBLEMS

Frequent use of cannabis can increase the risk of cancer and respiratory disorders such as asthma, bronchitis and emphysema.

CANNABIS AND RELATIONSHIP PROBLEMS

Drug use can lead to social and emotional problems and affect a person's relationship with their partner, family and friends. For example, one of the effects of cannabis can be loss of inhibitions. This may lead to a person saying or doing something that they would not normally do. This in turn may lead to embarrassing or regrettable situations.

Cannabis can also impact on other things in a person's life. Some adolescents have commented that their friends who are cannabis users won't go out with them as often and can't be bothered doing things. Cannabis use can create major problems in families.



CANNABIS AND TOLERANCE, DEPENDENCE AND WITHDRAWAL

Cannabis use can lead to tolerance and dependence:

Tolerance – This means that more cannabis is needed to produce the same effects felt previously with smaller amounts.

Dependence – This means that cannabis becomes central to a person's life, making it difficult to function normally.

Withdrawal – This occurs when a person either significantly reduces the amount of cannabis they use, or stops using cannabis altogether. When withdrawing from cannabis, symptoms can include sleep and appetite disturbances, anxiety and depression.

CANNABIS AND OVERDOSE

The toxic effect of cannabis is low relative to many other substances. There have been no confirmed deaths directly from cannabis overdose. However, cannabis use can lead to a number of serious negative health consequences and can increase the risk of injury to the user and to others.

CANNABIS, PREGNANCY AND BREASTFEEDING

Only a limited amount is known about the effects of cannabis on the unborn child. However, the use of cannabis during pregnancy is not recommended. If cannabis is used in pregnancy the baby may be born smaller and weigh less than other babies. Low birth weight can be associated with infections and breathing problems.



Little is known about the effects of cannabis smoking on breastfeeding. It is believed that some of the drug will pass through the breast milk to the baby, with risks to the child.

It is recommended that women discuss with their doctor (or other health professional) if they are using or planning to use any drugs while pregnant or breastfeeding, including prescribed and over-the-counter medicines.

CANNABIS AND FINANCIAL PROBLEMS

The street price of cannabis varies depending on availability, how it is grown and market trends. The cost of purchasing cannabis can lead to financial problems for both occasional and regular users.

CANNABIS USE
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CANNABIS AND DRIVING

Using cannabis affects a person's driving ability by:

- slowing the driver's reaction time.
- distorting the driver's perceptions.
- decreasing ability to coordinate appropriate reactions when driving.

Driving while under the influence of cannabis is dangerous and greatly increases risk to the user and others on the road. When combined with alcohol use, the risk increases significantly.

In Western Australia, it is against the law for anyone to drive under the influence of drugs, including cannabis.

The *Road Traffic Act 1974 Section 63* states that, 'a person who drives or attempts to drive a motor vehicle while under the influence of alcohol, drugs, or alcohol and drugs to such an extent as to be incapable of having proper control of the vehicle commits an offence, and the offender may be arrested without warrant'. Breaking this law carries penalties including disqualification from driving, fines and/or imprisonment. A person convicted of an offence under the *Road Traffic Act 1974* is liable for the following:

Drug-related offences: Random roadside drug testing using oral fluid

A person who drives a motor vehicle or is in charge of a motor vehicle with the presence of a prescribed illicit drug in oral fluid or blood commits an offence.



New penalties will apply from 1 October 2011, as follows:

Offence: Driving with the presence of a prescribed illicit drug.

Offence: Failure to comply with requirement for sample of Oral Fluid or Blood for drug testing.

OFFENCE	MINIMUM	MAXIMUM	DEMERITS/LICENCE DISQUALIFICATION
First offence	N/A	\$500	3 Demerit points*
Second or subsequent offence	\$500	\$1000	Minimum 6 months disqualification

* Demerit points are doubled on long weekends and other prescribed holiday periods.

Offence: Driving while impaired by a drug.

Offence: Failure to comply with requirement for driver assessment or provision blood or urine for drug analysis.

OFFENCE	MINIMUM	MAXIMUM	LICENCE DISQUALIFICATION
First offence	\$900	\$2500	Minimum 10 months
Second offence	\$2100	\$3500 or 9 months imprisonment	Minimum 30 months
Subsequent offence	\$2100	\$5000 or 18 months imprisonment	Life

AN ADULT CAN ONLY RECEIVE ONE CIR WHILE A YOUNG PERSON (AGED 14 TO 17 YEARS) CAN BE GIVEN A CIR ON TWO SEPARATE OCCASIONS.

The Cannabis Intervention Requirement (CIR) Scheme

Under the CIR scheme, police may issue a CIR notice to eligible people found in possession or use of small amounts of cannabis, and/or possession of a smoking implement containing traces of cannabis.

A person found in possession of a small amount of cannabis may still be charged with the more serious offence of possession of cannabis with intent to sell or supply, if police have relevant evidence. The CIR scheme does not apply to offences involving the possession or cultivation of cannabis plants, or possession of any quantities of cannabis resin (hash), hash oil, or other cannabis derivatives. These offences will be prosecuted through the courts.

Who is eligible for a CIR?

Police have the discretion whether or not to issue a CIR to an eligible person. A person is eligible for a CIR if they are aged 14 years or over, and are found using, or in possession of not more than 10 grams of cannabis, and/or found in possession of a smoking implement containing detectable traces of cannabis.

An adult can only receive one CIR while a young person (aged 14 to 17 years) can be given a CIR on two separate occasions.

An adult who previously received a CIR, and commits a second or subsequent minor cannabis related offence, will be prosecuted through the courts. A young person who commits a third or subsequent minor cannabis related offence will be referred to a Juvenile Justice Team, where appropriate under the *Young Offender's Act 1994*, rather than being charged.



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If a person has previously been convicted of a minor cannabis-related offence and was an adult at the time of conviction, he or she would be ineligible to receive a CIR. Previous convictions for serious drug offences and offences of a violent and/or sexual nature may also preclude a person from being given a CIR.

What can I do if I receive a CIR?

A person who has been given a CIR will be required to book and complete a Cannabis Intervention Session (CIS) within 28 days or elect to have the matter heard in court. If you are unable to complete a CIS within the 28-day period, you may apply in writing to police for an extension of time.

However these are only issued in extenuating circumstances (for more details visit www.police.wa.gov.au).

If you book and complete a CIS you will not be required to appear in court. No further action will be taken against you for the alleged offence and you will not receive a criminal conviction.

If the 28-day period has expired and you have not completed a CIS or elected to have the matter heard and determined in court you will be prosecuted through the courts or, if you are a young person, the matter may be referred to a Juvenile Justice Team.

CANNABIS AND TAKING CARE

There is no safe level of cannabis use.

If you use the drug or know someone who does, remember the following:

- ◊ Smoking cannabis can lead to similar health effects as smoking tobacco.
- ◊ Don't drive or operate machinery. These activities can be dangerous while under the influence of cannabis.
- ◊ Because using cannabis can have harmful effects, users may find themselves in dangerous situations. Therefore, they should not be left alone. If the situation becomes unsafe call for help immediately.
- ◊ If you suspect any bad effects, call an ambulance immediately (000). Don't delay, you could save a life. The ambulance officers are there to help you. Be sure to describe what drug the person has taken.

- ◊ If the person is unconscious and you know first aid, place them in the recovery position and ensure the airway is clear. If they have stopped breathing, perform Expired Air Resuscitation (EAR). The police are not required to attend unless a death has occurred or the ambulance officers are threatened.

CANNABIS AND TREATMENT PATHWAYS

There are a variety of treatment pathways available for people with cannabis-related problems. The drug(s) used and the availability of services as well as the user's health, desired outcome, support network and unique circumstances need to be taken into consideration.

Deciding on the best treatment pathway or combination of pathways is best done in consultation with a drug and alcohol counsellor.



MORE INFORMATION

For up-to-date information about cannabis or other drugs call the Alcohol and Drug Information Service or Parent Drug Information Service, or visit

www.drugaware.com.au

Alcohol and Drug Information Service (ADIS)

- ◊ Free 24-hour, state-wide, confidential telephone service.
- ◊ Access to information about alcohol and other drugs confidentially and quickly.
- ◊ Talk to a professionally trained counsellor about alcohol and other drugs.
- ◊ Provides information, counselling and advice for people concerned about their own or another's alcohol or other drug use.
- ◊ Find out about other services.

ADIS: (08) 9442 5000

Toll-free (country callers only): 1800 198 024

E-mail: adis@health.wa.gov.au

Live Chat: www.dao.health.wa.gov.au

Parent Drug Information Service (PDIS)

- ◊ Free 24-hour, confidential alcohol and other drug information and support for parents and family members.
- ◊ Talk to a professionally trained counsellor about alcohol and other drugs.
- ◊ Talk confidentially to another parent for strategies and support.
- ◊ Find out where to go for further help.

PDIS: (08) 9442 5050

Toll-free (country callers only): 1800 653 203

Email: pdis@health.wa.gov.au

Live Chat: www.dao.health.wa.gov.au

Drug Aware Website

www.drugaware.com.au

- ◊ Access detailed information about drugs, including cannabis, and links to services in Western Australia.
- ◊ Find out about the latest issues.
- ◊ Post questions anonymously and have them answered by professionals.
- ◊ Confidentially chat online to a qualified alcohol and other drug counsellor via Live Chat.
- ◊ Find links to other useful sites.

For further information about the Drug and Alcohol Office's programs, publications or resources call (08) 9370 0333 or visit www.dao.health.wa.gov.au

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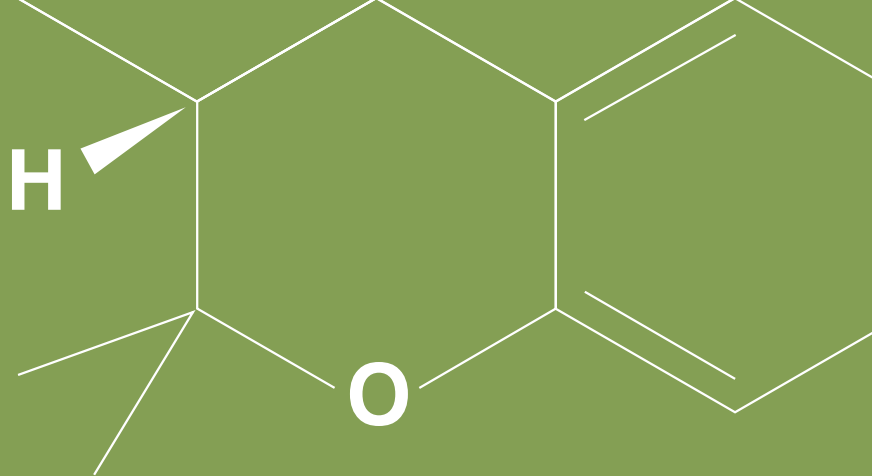
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Changes in circumstances after the date of publication of this brochure will inevitably result in this brochure becoming outdated in some respects. It is the responsibility of readers of this brochure to keep themselves updated with any changes or developments.



For information about cannabis, visit drugaware.com.au or for free confidential advice and counselling, call the Alcohol and Drug Information Service (ADIS) 24-hour helpline on (08) 9442 5000 or 1800 198 024 (country callers).



drugaware.com.au

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