



Cannabis and the Law – No Evidence, No Crime?

A 'Seed our Future Campaign' Report

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With special thanks to the 'Seed Our Future' supporters, the entire 'cannabis community,' including but not limited to, every cannabis/hemp activist who has tirelessly fought for our rights, freedoms and future for decades, those who have been involved in all cannabis/hemp research, industry and promotion and finally to those in positions of power who push for changes in cannabis legislation.

Preface:

The intention of this report is to provide the truth surrounding the history of cannabis prohibition, the 'evidence of no evidence' for the foundations of all cannabis laws, the potential consequences to all those involved in the continuation and enforcement of these laws and the potential consequences for everyone if these laws are allowed to continue.

We are seeing a global shift in attitude towards cannabis as the original rhetoric, based on ideology and racism is superseded by science. In fact, it has become increasingly apparent that not only is cannabis relatively safe, it is essential to our health, our environment and our economy; it has been realised that in our present situation where health deteriorates, the toxic fossil fuel resources to which we are addicted are fast running out, our climate and environment is facing catastrophic emergency and we now face the biggest economic collapse in history; cannabis is not only our saviour, it was the prohibition of this plant which led to these atrocities all in the name of profit for shareholders and power for the very few.

We cannot, with any clear conscience, allow these crimes against humanity and the environment to continue and this is why 'Seed our Future' have implemented this strategy to compel, not only those with the power to make changes but to also inform the general public of the truth so we may unite as a collective consciousness to ensure our survival.

Now is the time for us to stand together and fight this 'war on cannabis,'

Truth is Our Sword, Unity Our Shield.

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Summary

It is now commonly known that cannabis was unfairly vilified and ultimately prohibited, based on ideological, illogical and racist reasoning for the benefit of corporate interests (especially the pharmaceutical and petrochemical industries).

This led to the 1937 Marijuana Tax Act in the US, the Schedule 1 Status within the 1961 UN Drug Convention and ultimately the 1971 Misuse of Drugs Act in the UK.

There has never been **any** convincing scientific evidence of physical, mental or social harm from cannabis use, to justify prohibition. Alcohol and tobacco are considered to be traditional drugs. The use of Alcohol and tobacco results in approximately 90% of all drug related deaths yet there is **not one recorded death** in history of toxicological mortality from the responsible natural consumption of cannabis.

Alcohol also causes a great deal of social harm due to its propensity for violence in the home and in public spaces not to mention the significant escalating costs to the NHS and Police force.

Moreover, cannabis has been used as a medicine for over 100 diseases for thousands of years.

The Police Federation advised in 2000, 'Until 1973, tincture of cannabis had been available for medical use for over 100 years. In 1973, the medical use of cannabis was prohibited in the United Kingdom following a long decline in its use in favour of what were considered more reliable drugs.'

Up until November 2018, the Government have consistently claimed that cannabis has no therapeutic value, a statement at odds with its history in the pharmacopeia.

The Home Secretary and Drugs Ministers of the time were closely related to those financially benefitting from the development of cannabis-based medicines by GW Pharmaceuticals.

The lack of access to whole plant cannabis medicines despite announcement that medical cannabis was available, combined with pressure being placed on the CBD industry to eliminate 'full spectrum' products, indicates that corporate interests continue to place pressure on Governments to continue the prohibition of cannabis. It is clearly no more harmful to health than coffee or sugar, substances that we are advised to use in moderation. It is not addictive and has clear medicinal use and so does not fit the criteria of a schedule 1 substance.

The Advisory Council on the Misuse of Drugs (ACMD) review of the classification of cannabis concluded that 'the high use of cannabis is not associated with major health problems for the individual or society', the criteria required by the MoDA. However, the ACMD report continued, 'cannabis is not a harmless substance' which would imply that any substance with a degree of possible harm could be prohibited. Putting aside the evident harms caused by substances such as alcohol, tobacco and caffeine, this would also surely include substances such as sugar?

To this day, the UK Government continue to declare that they have no intention of legalising cannabis and that they have clear scientific evidence that cannabis causes harm to physical and mental health and harm to society.

Following our assessment of available research below, it is clear that there is no and never has been any scientific evidence to justify the prohibition of cannabis and that the prohibition has caused serious harm to the physical, mental, societal and environmental aspects of our lives not to mention the damage caused to people's freedoms, families and job prospects by having persecuted otherwise law abiding citizens through the misuse of the existing criminal justice system for the past 50 years.

Section 1: Why Care About Cannabis?

1.1 Cannabis, A Brief History.

To be clear from the start, industrial hemp, medical cannabis, recreational cannabis and marijuana are all the same, *Cannabis sativa* L., an extraordinary plant which can be grown throughout the world and is arguably the most important plant we possess, as this report will make clear.

The use of hemp cord in pottery was identified at an ancient village site, dating back over 10,000 years ago, located in modern-day Taiwan. Finding hemp use and cultivation in this date range puts it as one of the first and oldest known human agriculture crops. Hemp has been used throughout human history, since the times of the ancient Chinese, Egyptian, Roman and British Empires. [\(1\)](#)

In 1977, Carl Sagan proposes that cannabis may have been the world's first agricultural crop, leading to the development of civilization itself: *"It would be really interesting if in human history the cultivation of marijuana led generally to the invention of agriculture, and thereby to civilization."* Carl Sagan, *The Dragons of Eden, Speculations on the Origin of Human Intelligence* p 191 footnote. [\(1\)](#)

Cannabis has been used in Chinese medicine for over 5,000 years (for over 120 diseases) and over 1,000 years in Indian medicine and ritual.

Cannabis (hemp) was widely grown across Britain in the Middle Ages, from at least 800 to 1800 AD, though the amount grown varied widely through the centuries. It was mainly grown for fibre which was used to make sails, ropes, fishing nets and clothes; old clothes were recycled into paper. The Gutenberg Bible (15th Century) and the King James Bible (17th Century) were printed on hemp paper and our rich history of art was painted on hemp canvas. In fact, until the late 1800's, approximately 90% of paper was made from hemp. Oil was produced from the seeds and was burned in lamps. The seeds and flowers were also used in food, as a livestock feed and as a medicine/relaxant or served to prisoners and orphans as gruel.

In 1533, King Henry VIII made the cultivation of cannabis compulsory by law. The Tudor King wanted the strong, rot resistant fibres from the plant for the ropes, sails and clothing for his new British navy which famously beat the Spanish Armada, got us through the Reformation (the Brexit of the time) and led to the colonisation of the British Empire. Every ship carried a cargo of hemp seed and this was the first crop laid down upon the discovery of new lands. [\(2\)](#) There was an early peak in hemp production in England from 800 - 1000 AD, followed by a slackening in interest by farmers as new crops were discovered. In the early sixteenth century hemp was re-introduced, and its growth recommended. Large amounts of hemp were grown in the eighteenth and nineteenth centuries, but not enough for the British Navy - the war against Napoleon's France in 1812 was fought, in part, to control the supplies of Russian hemp. In Victorian times peasant produced imported hemp undercut domestic hemp, and its growth died out in Britain. [\(1\)](#)

In Medieval times religious hospitals commonly grew hemp. Hemp features in the recommended plants section of the great religious gardening books. Many monastic houses have areas of land named after hemp, and some have remnants of hemp-retting pools. It is likely that hemp was mainly grown for its fibre, but also for medicine for the hospitals. [\(1\)](#)

In 1842, Irish physician William Brooke O'Shaughnessy publishes cannabis research in English medical journals (including the therapeutic use in childhood epilepsy) and in 1890, Sir J.R. Reynolds, chief physician to Queen Victoria, prescribed her cannabis for menstrual cramps. [\(1\)](#)

In 1856, The British Government taxed the "ganja" and "charas" trade in India. [\(1\)](#)

In 1866, George Siegerson of County Tyrone released a 32-page pamphlet entitled 'Cannabiculture in Ireland; its profit and possibility' to argue the importance of cannabis as an agricultural crop for Ireland. (3) **'Cannabiculture in Ireland; its profit and possibility'**

During the early 1900's, cannabis continued to be an important commodity for medicinal, industrial and to a lesser extent, for recreational/relaxation purposes. As technological developments progressed in pharmaceutical medicine, fossil fuels and manufacturing, especially in utilising petrochemical based products; natural resources (especially cannabis) were becoming a formidable competitor to these developing industries and as we will cover (section 2.1), this was the main reason for the phenomena of international prohibition.

1.2 Industrial Uses.

In the early 1900's, cannabis (hemp) was arguably the biggest natural competitor to multi-national corporations who monopolised the industrial revolution and it is widely believed that corporate lobbying was the main reason for prohibition.

"Why use the forests which were centuries in the making and the mines which required ages to lay down, if we can get the equivalent of forest and mineral products in the annual growth of the fields?" -Henry Ford (33)

In 1916, the United States Department of Agriculture (USDA) chief scientists Jason L. Merrill and Lyster H. Dewey created paper made from hemp pulp, which they concluded was *"favorable in comparison with those used with pulp wood"* in USDA Bulletin No. 404 it was reported that:

'one acre of hemp, in annual rotation over a 20-year period, would produce as much pulp for paper as 4.1 acres (17,000 m²) of trees being cut down over the same 20-year period. This process would use only 1/7 to 1/4 as much polluting sulfur-based acid chemicals to break down the glue-like lignin that binds the fibers of the pulp, or even none at all using soda ash. The problem of dioxin contamination of rivers is avoided in the hemp paper making process, which does not need to use chlorine bleach (as the wood pulp paper making process requires) but instead safely substitutes hydrogen peroxide in the bleaching process. ... If the new (1916) hemp pulp paper process were legal today, it would soon replace about 70% of all wood pulp paper.' (1)

However, mass production of cheap news print from hemp had not developed in any country, and hemp was a relatively easy target because factories already had made large investments in equipment to handle cotton, wool, and linen, but there were relatively small investments in hemp production.

Nikolaus August Otto, the German inventor of the combustion engine, conceived his invention to run on ethanol. Rudolf Diesel, the German inventor of the Diesel engine, conceived his invention to run on peanut oil. In a 1912 speech, Rudolf Diesel said ***"the use of vegetable oils for engine fuels may seem insignificant today, but such oils may become, in the course of time, as important as petroleum and the coal-tar products of the present time."*** (4)

Henry Ford designed the Ford Model T, a car produced between 1903 and 1926, to run on either gasoline or ethanol. Ford was reported to have said; ***"There is fuel in every bit of vegetable matter that can be fermented. There's enough alcohol in one year's yield of an acre of potatoes to drive the machinery necessary to cultivate the fields for a hundred years."*** (34)

In the 1930s the Ford Motor Company invested heavily in biomass fuels. Ford operated a successful biomass conversion plant that included hemp, at their Iron Mountain facility in Michigan. Ford

engineers extracted methanol, charcoal fuel, tar, pitch, ethyl-acetate and creosote out of hemp. All fundamental ingredients for modern industry – ingredients now supplied by oil-related industries. (35)

Not satisfied with just using biofuels, Ford made a car with a bio-composite body made from hemp, flax and ramie. It was so tough; he could attack it with an axe and not leave a dent! It was **“ten times”** stronger than steel yet one-third of the weight (which would improve mileage).

During the same period, plastics including cellophane were being manufactured from the cellulose of hemp.

In 1941, **Popular Mechanics** ran a story about Ford's hemp cars. They wrote; ***“Although no hint has been given as to when plastic cars may go into production, the experimental model is pictured as a step toward materialization of Henry Ford's belief that someday he would “grow automobiles from the soil.”*** (4)

1.3 Mitigating Climate Change and Soil Restoration.

HempTank, the UK’s think tank for the hemp industry claims that up to 80% of our carbon emissions could be reduced permanently within 10 years if cannabis (industrial hemp) was removed from licencing and regulations and the Government were to invest in the emerging technologies.

A carbon neutral society by 2050 is largely inadequate if we seriously want to try and avoid catastrophic runaway climate change. We cannot continue with a ‘business as usual approach’ and this does not mean that we need to give up on our quality of life, if anything the development of a ‘green industrial revolution’ would improve our health, reduce the toxicity of our environment and provide new jobs and a thriving economy, exactly what we need right now.

The main culprits for carbon emissions in the UK are construction, power, transport and agriculture. If we were to change construction projects that are currently using toxic, carbon emitting materials and replace these with hempcrete buildings which are non-toxic, safe and carbon negative. The thermal dynamics of the material save approx. 40% on heating bills over the lifetime of the building and would make a significant impact in our carbon emissions.

We should consider use of a hemp alternative to graphene, (a three-dimensional carbon structure with a huge surface area) which can be used to create solar energy technology and energy storage systems. These outcompete current lithium ion technology, without the need to mine for resources. We can instead grow our resources; the production is more than a fraction of the cost.

In fact, it costs approx. £2000 to produce 1 gram of this graphene from mined graphite where the hemp alternative can be produced 4 million times cheaper (1 tonne for only £500).

Below is an example of the efficiency of a typical off grid power supply for a typical home:

PARAMETERS	LEAD ACID	LITIUM ION	HEMP POWER
Installed Capacity	100 kWh	60 kWh	50 kWh
Usable Capacity	50 kWh	50 kWh	50 kWh
Lifespan	500 cycles at 50% DOD	2000 cycles at 80% DOD	100,000+ cycles at 100% DOD

We have the potential for carbon negative houses using a fraction of heating requirements and these can be powered using off grid and micro grid systems derived from the same plant. This could replace the National grid which loses approx. 2/3rds of the energy through resistance.

In transport; besides the implementation of hemp batteries should be used to power electric cars, the cellulose within the biomass can be turned into ethanol which can be used in older petrol cars and the oil from the seed can be used as a bio-diesel using current technologies. Research and development is being carried out at Birmingham University to develop advanced non-polluting alternatives to fossil fuels including bio-petrol, bio-diesel and even bio-aviation fuel whilst creating bio-gas and biochar as byproducts.

The above are the major technologies which can be implemented to mitigate climate change but there are many other end use markets which can also be incorporated from the same crops including but not limited to; bio-plastics, textiles, paper, absorbents for cleaning ocean oil spills and hardwood alternatives.

And to agriculture, which is thought to be responsible for approx. 10% of carbon emissions including methane from livestock.

It has also been widely reported that modern agriculture and the overuse of synthetic agricultural chemicals and fertilisers have seriously degraded our soils and we may soon lose our food security. One of the main factors in this is our loss of carbon within the soil.

This very serious issue could again be mitigated using hemp. The biochar byproduct mentioned above can be ground into a powder, fed to livestock (this increases the health and welfare of the livestock including the improvement of digestion) and the manure activates the biochar and at the same time, initial research conducted by the Soil Association found that the biochar can reduce the methane output by 22% in cattle and 55% in pigs and although not conclusive, it is thought that it may also reduce the ammonia output. (5)

When this activated biochar is returned to the soil, it can hugely increase the condition of the soil whilst storing and drawing carbon for thousands of years.

The technology and the willingness of the farming community is already here in the UK, we just need the political will, the investment and the removal of barriers, including the very restrictive THC cap (currently 0.2% THC) as this drastically reduces the quality of the fibre, biomass, cannabinoid production and seed production seven fold.

1.4 Medicinal Uses.

Cannabis is without a doubt the most important medicinal plant to which we possess.

Following 300 million years of evolution, it massively outshines every pharmaceutical drug ever manufactured as it has been found not only to have the potential to treat every disease known to man, it can also prevent them without unnecessary danger nor adverse side effects in comparison to man-made drugs.

'Cannabis has been used medicinally for millennia.' An article published in *The Economist* on April 27, 2006, under the heading, 'Marijuana is medically useful, whether politicians like it or not,' stated:

'If Marijuana was unknown, and bio-prospectors were suddenly to find it in some remote mountain crevice, its discovery would no doubt be hailed as a medical breakthrough. Scientists would praise its

potential for treating everything from pain to cancer and marvel at its rich pharmacopeia; many of whose chemicals mimic vital molecules in the human body.' (6) **Barrie, N. and Manolios, N. (2017) 'The endocannabinoid system in pain and inflammation: Its relevance to rheumatic disease.'**, **European journal of rheumatology. AVES, 4(3), pp. 210–218.**

Although there is a rich history of the use of cannabis as a medicine for hundreds of diseases and conditions, little was known about the pharmacological interactions with our biology.

It wasn't until the mid-1990's that arguably the most important discovery within modern history in relation to biology was made; the discovery of the Endocannabinoid system.

We humans are machines. A tightly coordinated biological machine comprised of trillions of cells. Each of these cells is in a constant state of communication with its immediate neighbours as well as with the central controlling system that is the brain. These communications are tightly regulated and balanced by the body. We are now realising that in disease, this tightly coordinated communication is often compromised and dysregulated in some way. The identification of the cannabis-based cannabinoid or phytocannabinoid, tetrahydrocannabinol (THC) ultimately led to the discovery of the system that is responsible for this delicate balancing act, the Endocannabinoid System (ECS). Since its initial discovery in the late 1900's, our knowledge of the endocannabinoid system has advanced at a startling pace. We now know the ECS to be involved in almost all diseases. This provides researchers with the unique opportunity to begin reanalysing methods of treating a variety of diseases. This is particularly exciting for conditions for which no treatments currently exist. The ECS is comprised of 3 elements that provide a feedback loop for all cellular communication, reducing signalling when cells become overstimulated, and increasing signalling when stimulation is needed. (6) **Barrie, N. and Manolios, N. (2017) 'The endocannabinoid system in pain and inflammation: Its relevance to rheumatic disease.'**, **European journal of rheumatology. AVES, 4(3), pp. 210–218.**

In layman's terms, we have an endogenous system (and this relates to all mammals on the planet) within our body which regulates all of our systems which keep us healthy and balanced and this is commonly referred to as 'homeostasis'. This endocannabinoid system can, for many reasons, be affected by external stimuli and this can put us out of balance, causing dis-ease (imbalance).

Phyto-cannabinoids from plants (cannabis being the only plant to contain a full spectrum of cannabinoids) can moderate this system and so restore balance, leading us to health and vitality whilst preventing and treating virtually all diseases.

Of course, it's not that simple, cannabis contains approx. 500 compounds (Approx 115 Cannabinoids and a range of terpenoids and flavonoids) which all work synergistically together. This amazing activity was coined by Dr Ethan Russo as 'the entourage effect.'

It is also why modern cannabis based pharmaceutical drugs using isolated or synthetic cannabinoids are less effective, save in a few instances where an isolate is preferable for medical reasons. As a broad-spectrum approach however, isolates are not effective as treatment.

This is why it is argued in the final chapter of this report (5.4) that cannabis preparations used for medicinal purposes should not and cannot fit into the 'medical model' for regulatory purposes, it should instead have its own classification system.

It is important to also point out that for these very same reasons, the pharmaceutical industry have wanted the prohibition of cannabis as a medicine since the initial production of pharmaceutical drugs derived from isolated and synthetic compounds from plants. True full plant cannabis medicines

providing 'the entourage effect' can simply not be patented and the efficacy cannot be matched with conventional drugs. No patent equals no huge profits.

1.5 Nutritional Uses.

It can be argued that the therapeutic value of cannabis is more likened to the nutritional benefits of vitamins and minerals which are essential to overall health rather than considering it a medicine per se. It can also be strongly argued that the prohibition of this plant over the past century and thus it being removed from our diets has had a huge detrimental effect on the health of our population and this would have undoubtedly led to an unmeasurable amount of avoidable mass suffering and death.

Many people eat raw cannabis (leaves and flowers) often in juices; as raw cannabis is non-psychoactive (as the cannabinoids have not been activated through heat), this is a great accompaniment to a healthy diet (as it has been for millennia including the feeding of livestock).

Then there is the cannabis seed; 'Hemp seed' is considered by many to be the safest, most digestible, balanced, natural and complete source of protein, amino acids, and essential fats found anywhere in nature, containing 20 amino acids, but also each of the nine essential amino acids that our bodies cannot produce. Hemp seed contains over 30% fat. They are also incredibly rich in two essential fatty acids, linoleic acid (omega-6) and alpha-linolenic acid (omega-3). They also contain gamma-linolenic acid (GLA) which has been linked to a number of health benefits.

Hemp Seeds not only contain a significant level of protein (approximately 33g of protein in 100g of seeds), but it is the only plant to create and store its protein in the form of Edestin and Albumin. These are the forms that the human body already uses for the proteins in our blood and immune system and are therefore easily recognized and processed using minimal amounts of energy and it does not contain enzyme inhibitors.

As the climate changes, hemp seed may be the most viable staple crop for the UK. The seed can also be pressed to produce oil and flour (protein powder) which can be incorporated into a wide variety of foods. ([7](#))

Section 2: Is Cannabis a Dangerous Narcotic?

2.1 History of Prohibition.

In 1919, the 18th Amendment to the U.S. Constitution banned the manufacture, sale, and transportation of alcohol and positioned marijuana as an attractive alternative leading to an increase in use of the substance. ([1](#))

In 1925 at the League of Nations conference, a multilateral Treaty was signed which, although cannabis was not on the agenda, it led to restricting Cannabis use to scientific and medical use only. Cannabis was included in the convention after pressure from Egypt, Turkey and South Africa.

The purpose of the treaty was to prohibit opium, cocaine and coca leaf.

Mohamed El Guindy, the delegate from Egypt, now nominally independent from Great Britain, proposed the inclusion of cannabis in the deliberations and moved to bring it under the scope of the Convention. He asserted that hashish was "at least as harmful as opium, if not more so." In his speech

presenting the proposal, he painted a horrific picture of the effects of hashish. Although he conceded that taken “occasionally and in small doses, hashish perhaps does not offer much danger,” he stressed that once a person “acquires the habit and becomes addicted to the drug [...] it is very difficult to escape.” He claimed that a person “under the influence of hashish presents symptoms very similar to those of hysteria”; that the individual’s “intellectual faculties gradually weaken and the whole organism decays”; and that “the proportion of cases of insanity caused by the use of hashish varies from 30 to 60 per cent of the total number of cases occurring in Egypt.” Cannabis not only led to insanity, according to El Guindy, but was a gateway to other drugs, and vice versa. If it was not included on the list with opium and cocaine, he predicted, cannabis would replace them and “become a terrible menace to the whole world.” (36) p.10 Kendell (2003); Mills (2003), pp. 169-71

This led to an amendment to the 1925 ‘Dangerous Drugs Act’ to criminalise the possession of cannabis in the UK.

In 1933, the U.S. congress repealed the 21st Amendment, ending alcohol prohibition; 4 years later the prohibition of marijuana was in full effect. (1)

So what happened to Ford's dream of cars grown from the soil?

Well, with US alcohol prohibition repeal in 1933, most stills were abandoned or seized by the “dry squads”. Oil was super-cheap and everywhere, so oil engines grew more popular and alcohol engines less so. And with US hemp prohibition in 1937, the best raw material for making bio plastic feedstock was removed from the economy. It was (Rockefeller's) Standard Oil, (Mellon's) Gulf Oil and DuPont who had the most to do with hemp prohibition, and the most to gain from it. (4)

Prior to 1931, Harry Anslinger was Assistant U.S. Commissioner for Prohibition. In 1931, Anslinger, was hand-picked to head the new **Federal Bureau of Narcotics (FBN)** by his uncle-in-law, Andrew Mellon, Secretary of the Treasury under President Herbert Hoover, designer of the FBN, and head of Gulf Oil. Andrew Mellon was also the owner and largest stockholder of the sixth largest bank (in 1937) in the United States, the Mellon Bank in Pittsburgh, one of only two bankers for DuPont from 1928 to the present. DuPont also owned General Motors. (37)

Anslinger and his team created a huge propaganda machine against cannabis called the ‘Gore Files,’ using lies, racism and misinformation to portray cannabis as a dangerous drug which led to crime, violence, insanity and death. Much of this propaganda was targeted at ethnic minorities.

To justify the prohibition of cannabis, false claims were made such as:

‘There are 100,000 marijuana smokers in the US and most are Negroes, Hispanics, Filipinos and entertainers. Their Satanic music, jazz and swing, result from marijuana use. This marijuana causes white women to seek sexual relations with Negroes, entertainers and anyothers.’

‘Marijuana is an addictive drug which produces in its users, insanity, criminality and death!’

‘You smoke a joint and you’re likely to kill your brother.’

‘Marijuana is the most violence-causing drug in the history of mankind.’

‘Marijuana influenced Negroes to look at white people in the eye, step on white men’s shadows and look at a white woman twice.’ (20)

Harry Anslinger worked with William Randolph Hearst (Media Mogul, think Citizen Kane) to lace the National media with news headlines to vilify cannabis.

The long history of Mellon, DuPont and Rockefeller intrigues, indicate a working relationship going back to the 1920's. During his first four years as Secretary of the Treasury, Mellon gave himself a tax refund of \$404,000, an amount second only to one of \$457,000 for John D. Rockefeller, Jr., and both of these men were tied to the **"Teapot Dome"** politicians-taking-bribes-from-oilmen scandal. (38) There is also evidence to suggest that both Rockefeller and Mellon were given advance notice to remove their savings from the stock market right before the crash of 1929.

In the 1934, DuPont and Rockefeller contributed to the newly formed anti-FDR **American Liberty League**. (40) In that same year a bunch of wealthy men including Rockefeller, Mellon and DuPont were exposed by Smedley Darlington Butler – the most decorated Marine in US coup against FDR. Butler to make him the ruler of the USA. (78) Portions of Butler's story were corroborated, and the Senate committee did take the threat seriously and did verify that a fascist coup was indeed well past the planning stage, but the Senate committee expired before it could get around to punishing anyone. (41)

The **"Business Plot"** as it came to be known, wasn't the only time DuPont and Standard Oil flirted with fascism. In 1936, these corporations were noticed by the US Federal government for aiding the Nazi war machine. The US Ambassador in Germany, William Dodd, wrote FDR in from Berlin on Oct. 19, 1936, that "The DuPonts have three allies in Germany that are aiding in the armament business.... Standard Oil Company (New York Sub Company) sent \$2,000,000 here in December 1933 "

Mellon's Alcoa, DuPont and Standard Oil had all entered into cartel agreements with **IG Farben**, the Bayer-controlled super-chemical cartel and the Nazi's biggest financial backers. (81) DuPont owned Farben stock, and Farben was a leading investor in Ford. (42)

These corporations even teamed up to put other competitors aside from history at the time – as plotters in an attempted claimed these industrialists approached him and offered hemp out of business. (4)

1937 Marijuana Tax Act

In 1937, the Marijuana Tax Act put hemp farmers out of business. It was a prohibition pretending to be a tax, similar to the machine-gun tax act created two weeks earlier. Anslinger testified at the poorly attended committee hearing, calling for a total ban on "marihuana". He stated under oath that **"Opium has all the good of Dr. Jekyll and all the evil of Mr. Hyde. This drug [cannabis] is entirely the monster Hyde, the harmful effects of which cannot be measured"**. This statement contradicted what he wrote in a confidential memorandum to the Assistant Secretary of the Treasury that **"the drug trade still has a small medical need for marihuana but has agreed to eliminate it entirely."**

The U.S. Congress passed the Marijuana Tax Act which criminalized the drug. In response Dr. William C. Woodward, testifying on behalf of the AMA, told Congress that:

"The American Medical Association knows of no evidence that marijuana is a dangerous drug" and warned that a prohibition "loses sight of the fact that future investigation may show that there are substantial medical uses for Cannabis." (8) **THE FORBIDDEN FRUIT AND THE TREE OF KNOWLEDGE: AN INQUIRY INTO THE LEGAL HISTORY OF AMERICAN MARIJUANA PROHIBITION - Richard J. Bonnie* & Charles H. Whitebread, II** - V. PASSAGE OF THE MARIHUANA TAX ACT OF 1937**

His comments were ignored by Congress. A part of the testimony for Congress to pass the 1937 act derived from articles in newspapers owned by William Randolph Hearst, who had significant financial interests in the timber industry, which manufactured his newsprint paper.

In 1938, The U.S. company DuPont patented the processes for creating plastics from coal and oil and a new process for creating paper from wood pulp.

Anslinger continued to vilify the cannabis plant until his ultimate goal was realised in 1961 when cannabis became a schedule 1 drug globally.

2.2 1961 UN Drug Convention – Schedule 1 Status

In 1955 the World Health Organisation's report 'Physical and Mental Effects of Cannabis' stated "*under the influence of cannabis, the danger of committing unpremeditated murder is very great; it can happen in cold blood, without any reason or motive, unexpectedly, without any preceding quarrel; often the murderer does not even know the victim, and simply kills for pleasure*". Six years later the first UN drug Convention criminalised cannabis. In contrast WHO's 1995 cannabis report states "*cannabis appears to play little role in injuries caused by violence, as does alcohol*". (9)

Some other excerpts from the WHO document:

A series of atrocious cases is mentioned in the important book recently published by H. J. Anslinger and W. F. Tompkins, " A few of many cases which illustrate the homicidal tendencies and the generally debasing effects arising from the use of marihuana"; for instance, a bellboy shot a federal guard, who was unknown to him, working in another building, not remembering later what he did; the officers of a merchant vessel were under continuous danger of being attacked by members of the crew using marihuana; murder of a man of 74 years, unknown to the murderer; a cotton-picker of 25 years of age drank, then smoked a "reefer", picked up a 17 months old baby girl which had been left in the family car, violated and suffocated her; "the real criminal in this case is marihuana", said the murderer's own counsel. (pg.24)

Bulimia is a typical cannabis symptom; there are cannabis smokers who say that because of the hunger they develop they are capable of stealing and even of killing. They have a particular longing for sugar and sweet things in general, due to hypoglycemia cannabica, for instance, bunches of bananas; such as are found in Brazilian markets. Parreiras also refers to the cannabis cachexia observed in Brazil among inveterate smokers, which can appear even some time after withdrawal, taking the form of pro-stration, low spirits, dyspepsia, frequent attacks of diarrhoea, inappetence, bronchitis -in short, a picture of human ruin, with a grave prognosis. (pg.9) (10)

In 1961, Cannabis was classified as a schedule 1 drug. Schedule 1 drugs are supposedly the most dangerous category with a high potential of abuse and no medicinal value. If the above statements within the 1955 WHO document (above) were to be factual, cannabis would have clearly met the criteria for schedule 1 and would have been considered the most dangerous drug in the world.

As the questionable evidence was based on ideological, racist and political views held by a few in power able to unduly influence others cannabis was deemed dangerous and made unlawful.

Even worse, so-called ' traditional drugs' such as alcohol and tobacco, the most dangerous drugs by far, were excluded, irrespective of their harmfulness, due to their traditional use in Western countries (even though there is clear evidence of cannabis being as traditional as alcohol and more traditional than tobacco).

2.3 1971 MoDA Classification and Scale of Harm

The Misuse of Drugs Act 1971 (MoDA) drug classification was initially based upon UN drug Conventions. The intention was that the classification system would evolve with the scientific evidence base, with independent scientific advice provided by the Advisory Council on the Misuse of Drugs (ACMD). ACMD have a statutory duty to advise Government about harmful drug use “sufficient to constitute a social problem” and to provide Government with regulatory recommendations for “restricting the availability of such drugs”.

Cannabis was placed within the act as a Schedule 1 substance with a class B penalty and it remains so almost 50 years later.

The damning report ‘**Drug Classification: Making a hash of it?**’ Published 2006 by the House of Commons Science and Technology Committee’ makes it clear that the MoDA classification system and scale of harm are based on political objectives with no scientific evidence on which to draw in making policy decisions.

Colin Blakemore, Chief Executive of the Medical Research Council described the MDA’s classification saying “***It is antiquated and reflects the prejudice and misconceptions of an era in which drugs were placed in arbitrary categories with notable, often illogical, consequences***”. [\(9\)](#)

Below are some findings from the report:

With respect to the ABC classification system, we have identified significant anomalies in the classification of individual drugs and a regrettable lack of consistency in the rationale used to make classification decisions. In addition, we have expressed concern at the Government’s proclivity for using the classification system as a means of ‘sending out signals’ to potential users and society at large—it is at odds with the stated objective of classifying drugs on the basis of harm and the Government has not made any attempt to develop an evidence base on which to draw in determining the ‘signal’ being sent out.

We have found no convincing evidence for the deterrent effect, which is widely seen as underpinning the Government’s classification policy and have criticised the Government for failing to meet its commitments to evidence-based policy making in this area. More generally, the weakness of the evidence base on addiction and drug abuse is a severe hindrance to effective policy making and we have therefore urged the Government to increase significantly its investment in research.

*Finally, we have concluded that **the current classification system is not fit for purpose** and should be replaced with a more scientifically based scale of harm, decoupled from penalties for possession and trafficking. In light of the serious failings of the ABC classification system that we have identified, we urge the Home Secretary to honour his predecessor’s commitment to review the current system, and to do so without further delay.*

The Government’s desire to use the Class of a particular drug to send out a signal to potential users or dealers does not sit comfortably with the claim that the primary objective of the classification system is to categorise drugs according to the comparative harm associated with their misuse. It is also incompatible with the Government’s stated commitment to evidence based policy making since it has never undertaken research to establish the relationship between the Class of a drug and the signal sent out and there is, therefore, no evidence base on which to draw in making these policy decisions.

If, as the ACMD Chairman indicated to us, the Council's work has been seriously hindered by the lack of evidence, the ACMD should have been far more vocal in pressing Ministers to ensure that more research was commissioned to fill the key gaps in the evidence base.

We understand that the ACMD operates within the framework set by the Misuse of Drugs Act 1971 but, bearing in mind that the Council is the sole scientific advisory body on drugs policy, we consider the Council's failure to alert the Home Secretary to the serious doubts about the basis and effectiveness of the classification system at an earlier stage a dereliction of its duty.

We urge the new Home Secretary to honour his predecessor's promise to conduct the review—our findings suggest that it is much needed. Although we are, of course, pleased that the Home Office is placing such store by our recommendations, the long delay in publishing the consultation paper on the review of the classification system has been unfortunate and should be rectified immediately.

It is vital that the Government's approach to drugs education is evidence based. A more scientifically based scale of harm would have greater credibility than the current system where the placing of drugs in particular categories is ultimately a political decision. (9)

On 19 January 2006, following his statement on the classification of cannabis, the then Home Secretary Charles Clarke announced that he was initiating a review of the ABC classification system: ***"The more that I have considered these matters, the more concerned I have become about the limitations of our current system. [...] I will in the next few weeks publish a consultation paper with suggestions for a review of the drug classification system, on the basis of which I will make proposals in due course."*** (9)

This review did not happen, and the classification system remains the same 15 years later. It is clear that in relation to cannabis, the inclusion within the 1971 MoDA was based on the non-evidenced scheduling from the 1961 UN Drug Convention and both the Home office and the ACMD have not only failed in carrying out their duties, failed to respond to the evidence or lack thereof but have also failed the credibility of the entire judicial system when it comes to drug laws for half a century; more importantly, they have failed the community they have sworn to serve.

Cannabis wasn't the only drug within the classification system without evidence of harm:

The ACMD told us that the evidence base available for making decisions about classification was often inadequate. For example, Sir Michael, ACMD Chairman, said of the decision to clarify the law resulting in fresh magic mushrooms being placed in Class A: ***"It may be better in B rather than A. The trouble is that the evidence now is so old. It all dates back to the 1960s and there was not very much evidence then"*** On the matter of why psilocin, one of the hallucinogenic compounds found in magic mushrooms, was in Class A, Sir Michael told us: ***"it is there because it is there [...] there have been very few publications on psilocin. It has hardly been investigated at all"*** (9)

2.4 Claims of Harm.

Even with the sheer lack of foundation evidence for harm caused by cannabis use, the Home Office consistently claim the contrary and the generic response (below) is also cited by MP's whenever they are asked a question from a constituent in relation to cannabis law:

'The Government has no intention of legalising cannabis. Cannabis is controlled as a Class B drug under the Misuse of Drugs Act 1971 as there is clear scientific and medical evidence that cannabis is a harmful drug which can damage people's mental and physical health, and harms individuals and communities.'

Following a recent petition to allow a public vote on the issue of legalisation, the extended response included:

*'The Government has no plans to change cannabis policy or allow a public vote on the issue of legalisation. The legalisation of drugs in the UK would not eliminate the crime committed by the illicit trade, nor would it address the harms associated with drug dependence and the misery that this can cause to families and communities. Legalisation would send the wrong message to the vast majority of people who do not take drugs, especially young and vulnerable people. As such, the Government would not establish a system for the production and distribution of cannabis for recreational use. In relation to low level cannabis offences and associated convictions, the police have a range of powers at their disposal to deal with drug-related offences in a way that is proportionate to the circumstances of the offender and the public interest. **We have confidence in our police officers to assess as appropriate any necessary enforcement action, whether it is a public order or protection or local drug issue that needs addressing.**'*

Many people have tried to acquire this 'clear scientific evidence' of harm over the years but even through FOI's, the requests are either ignored or some excuse is given. The fact is, there is no and never has been any conclusive evidence of harm which would justify cannabis being placed within MoDA and this fact and as stated in the Runciman Report 2000,

'If, as we argue, the present classification of cannabis is not justified, it follows that the response of the law is disproportionate to the drug's harm and may bring the law into disrepute.' ([11](#))

It has been claimed that cannabis can cause schizophrenia but there is evidence to the contrary (see section 3.2). However, there is some evidence that cannabis may exacerbate pre-existing mental illnesses such as psychosis and schizophrenia, as pointed out by the Runciman report when they quote the House of Lords:

'...cannabis is neither poisonous..., nor highly addictive, and we do not believe that it can cause schizophrenia in a previously well user with no predisposition to develop the disease.'

'It can have adverse psychic effects ranging from temporary distress, through transient psychosis, to the exacerbation of pre-existing mental illness...;' ([11](#))

Clearing the smoke: What do we know about adolescent cannabis use and schizophrenia?

"What can be said is that the extreme opinions on this subject are not rooted in science. There is little evidence that, at a population level, cannabis use during adolescence is a primary contributing factor in the development of psychiatric illness. In fact, it has even been suggested that at a societal level, the prevention of 3000-4000 adolescents from consuming cannabis may prevent only 1 case of psychosis from emerging. At the same time, however, there is evidence that in high-risk populations, cannabis can be highly adverse, so arguments claiming that cannabis is innocuous are equally flawed... once a diagnosis of schizophrenia is present, cannabis use is clearly adverse" ([12](#))

Of course, if we had a regulated market for cannabis products, clear warnings could be made in relation to high THC products for those with existing mental health products whom would be better to take products containing predominantly CBD (anti-anxiety and anti-psychotic) to treat their condition without a risk of harm. The benefit of regulation following legalisation.

2.5 Harms of Enforcement

“Penalties against possession of a drug should not be more damaging to an individual than the use of the drug itself” President Jimmy Carter. (13)

The greatest harms relating to cannabis are not its uses but the enforcement of unsubstantiated laws to prevent its uses.

Stops and searches bear disproportionately on young people from minority ethnic communities in inner city areas. They certainly appear to be discriminatory, although there may be demographic and socio-economic reasons which would make it hard to eliminate the appearance of discrimination altogether. (11)

Cannabis prohibition has always been closely linked to racism and although the above paragraph was written by the Police Federation 20 years ago, a recent FOI to the Metropolitan Police shows that approx. 75% of cannabis related arrests between 2016-2018 were with those from black and ethnic minorities which demonstrates that this institutional racism within the UK Police force continues today. (14)

Cautions are part of an offender's criminal record. There is no provision at present for these records to expire under the Rehabilitation of Offenders Act 1974. The Government has recently issued a consultation paper proposing that this anomaly should be corrected and that cautions should be immediately spent. This would also apply to reprimands and warnings, which are to replace cautions for young people under 18 under the Crime and Disorder Act 1998.

*More than half of the arrests for cannabis offences result in a caution. We do not criticise the police for their extensive use of cautioning. It is currently the only realistic and proportional response. **Without it, the courts would have ground to a halt.** However, the use of discretion does not lessen the disproportionate attention that the law and the implementation of the law unavoidably give to cannabis and cannabis possession in particular.*

Even with the use of discretion on this scale, the law's implementation damages individuals in terms of criminal records and risks to jobs and relationships to a degree that far outweighs any harm that cannabis may be doing to society. Moreover, young people, particularly young black and Asian people and particularly where stop and search are concerned, perceive the law as unfair. (11)

Besides the harms from institutional racism, unfounded criminal action or caution, destruction of freedoms, human rights and loss or damage to property, by far the biggest harm is to those who are denied cannabis as a treatment for medical reasons. The effect on the health of our population over the past 50 years of those who could have been treated naturally for a significant spectrum of known disease, including a range of cancers. The costs this has had on our NHS is incalculable.

How can a law be justified, without any scientific reasoning? Prohibition has clearly not prevented insurmountable suffering and death, especially when the medicinal and therapeutic evidence was always there?

Finally, it can be strongly argued that current sustained prohibition, providing toxic and unethical corporations to have the monopoly over their industries has caused irreparable damage to our environment over the past century and the continued irrational restrictions preventing the development of the industrial applications of cannabis is literally destroying our home.

Section 3: The Evidence that Cannabis is Safe.

3.1 Statistics – Let's Put This in Perspective.

The Runciman Report 2000 stated:

The British Medical Association has said *'The acute toxicity of cannabinoids is extremely low: they are very safe drugs and no deaths have been directly attributed to their recreational or therapeutic use.'* The Lancet published an article summarising the evidence on the most probable adverse health and psychological consequences of acute and chronic use, and its editorial in the same issue comments that *'...on the evidence summarised by Hall and Solowij, it would be reasonable to judge cannabis less of a threat than alcohol or tobacco....We...say that, on the medical evidence available, moderate indulgence in cannabis has little ill-effect on health, and that decisions to ban or legalise cannabis should be based on other considerations.'*

In their evidence to the House of Lords Select Committee on Science and Technology, the Department of Health said, 'cannabis is now the third most commonly consumed drug after alcohol and tobacco'. [\(11\)](#)

Transform Drug Policy Foundation stated: *"It is this omission from the classification system that, perhaps more than any other, truly lays bare its fundamental lack of consistency, reasoning or evidence base" on the grounds that together tobacco and alcohol cause "approximately 40 times the total number of deaths from all illegal drugs combined"* (this equates to approx. 90% of all drug related deaths). [\(9\)](#)

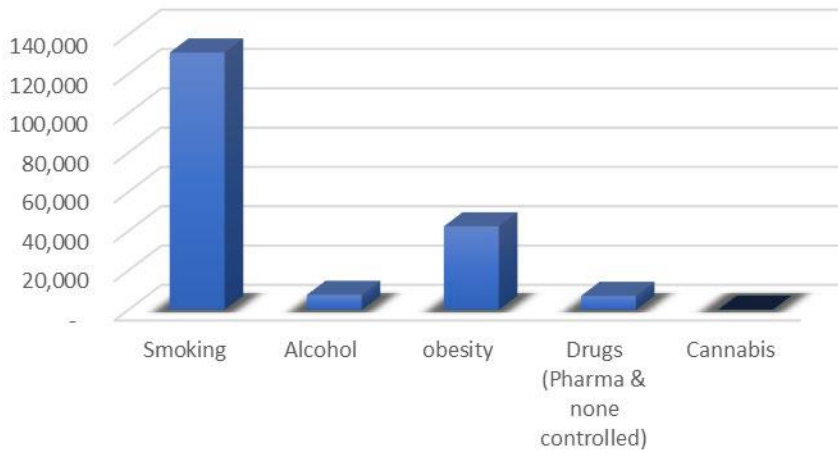
Transform continue in their written evidence:

Any and all medical authorities will acknowledge that by far the greatest harm to public health from drugs stems from alcohol and tobacco use. In the UK they are estimated to be responsible for 30,000 and 100,000 premature deaths each year respectively, more than 300 a day. This figure is approximately 40 times the total number of deaths from all illegal drugs combined, and even if relative numbers of users are taken into account, if classified under any realistic assessment of toxicity, addictiveness and mortality rates both drugs would certainly be criminalised and prohibited under the current system. The reason they are absent from the classification system is that they are, for entirely political/ historical reasons, absent from the international prohibitionist legal system. This distinction is arbitrary, perverse and illogical.

"Why not criminalise tobacco, place it within the Misuse of Drugs Act, put it into Class C and have two years for simple possession of this dangerous drug?". . . it is an awkward question in the debate that needs to be asked." Stated Griffiths Edwards (former chair of the ACMD).

It should also be noted that the special place of alcohol and tobacco in drug policy extends beyond the absurd exception from the UN and MDA classification system. Alcoholic beverages are the only food or beverage not required to list ingredients. Alcohol is also the only widely consumed dangerous drug not required to have standard pharmaceutical health warnings on the packaging. Tobacco products similarly are not required to list the many hundreds of potentially harmful additives which can constitute up to 30% of their content. These policy anomalies further expose the bizarre a-scientific world in which UK and international drug policy is formulated. [\(9\)](#)

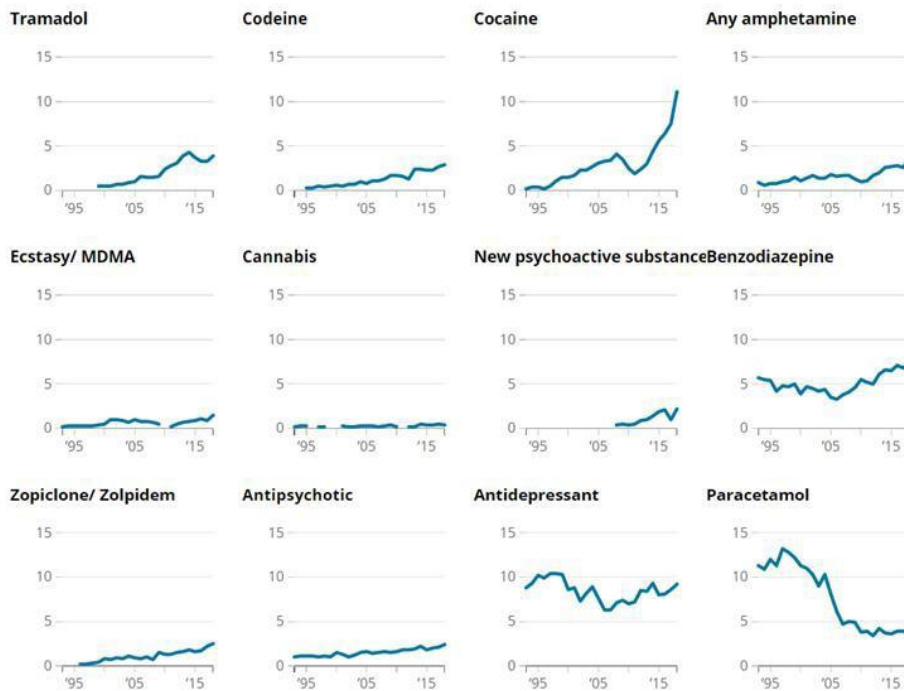
Avoidable deaths 2018 England & Wales



To place the harm of tobacco in perspective, there were 77,800 deaths and almost 500,000 hospital admissions attributed to smoking tobacco in 2017

Alongside socially acceptable alcohol and tobacco, many pharmaceutical drugs are highly toxic, often causing horrendous side effects and often morbidity.

Age-standardised mortality rates for selected substances, England and Wales, deaths registered between 1993 to 2018



Then there are endless products available in shops containing toxic chemicals, highly poisonous trees (3 yew berry seeds will kill the average adult human), plants and fungi which can and do cause deaths every year.

In the UK there are **100 food allergy deaths** each year, **4,500 UK hospital admissions** from food allergies and **8% of children** are affected by food allergies or intolerances. (15)

In addition, many common toxic foods are known to be carcinogenic, addictive and so cause many health issues throughout the population such as sugar, sugar alternatives such as aspartame, MSG and the many E-number chemicals to name but a few.

We can thereby make a confident statement that cannabis is in fact safer than many foods, drinks and pharmaceutical drugs.

In 1988, DEA Administrative Judge Francis Young wrote “In strict medical terms marijuana is far safer than many foods we commonly consume. For example, eating ten raw potatoes can result in a toxic response. By comparison, it is physically impossible to eat enough marijuana to induce death.

“Marijuana, in its natural form, is one of the safest Therapeutically active substances known to man. By any measure of rational analysis marijuana can be safely used within a supervised routine of medical care.” (16)

3.2 Counter Evidence of Harm

There is clearly little to no scientific evidence of harm from using cannabis but there is a huge amount of evidence for the contrary and this is increasing year upon year as global research finally flourishes. In fact, the growing evidence that cannabis is essential to health and can treat virtually every disease known to man literally tips the scales in the other direction to move the discussion from harm to necessity.

We must be careful to distinguish the empirical evidence from studies of the health effects of herbal and pure cannabis on people who smoke it and anecdotes or hypotheses based on studies using synthetic THC and other unnatural extracts on mice and monkeys in the laboratory.

Here we counteract some of the common misconceptions in relation to harms from cannabis:

Myth: Cannabis causes psychosis/schizophrenia

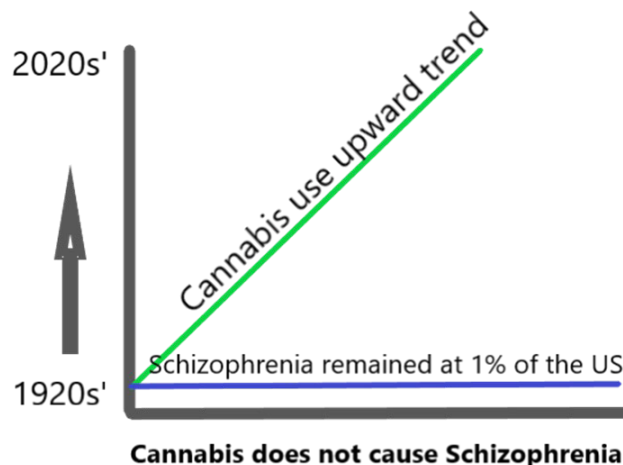
Lester Grinspoon, MD, professor of psychiatry emeritus at Harvard who has been studying marijuana since 1967 and is the co-author of Schizophrenia: Pharmacotherapy and Psychotherapy and other textbooks. “It is hard to refute a study that alleges certain things are going to happen in the years ahead,” he says, **“but smoking marijuana does not cause schizophrenia.”**

The Lancet paper is “a meta-analysis of studies that are themselves flawed,” says Grinspoon (who discredited some of them himself). “It greatly exaggerates the risk to the individual.”

According to Grinspoon, the cannabis-causes-psychosis line is disproved by the absence of “even a blip in the incidence of schizophrenia in the US after millions of people started smoking marijuana in the 1960s.” **The prevalence of schizophrenia in adults is about 1% worldwide and seemingly independent of whether or not cannabis use** is widespread in a given country.

A meta-analysis published in the Lancet in 2004 (Macleod, et al) stated, **“Cannabis use appears to have increased substantially amongst young people over the past 30 years, from around 10%**

reporting ever use in 1959-70, to around 50% reporting ever use in 2001 in Britain and Sweden. If the relation between use and schizophrenia were truly causal and if the relative risk was around five-fold, then the incidence of schizophrenia should have more than doubled since 1970. However, population trends in schizophrenia incidence suggest that incidence has either been stable or slightly decreased over the relevant time period.”



Information source - Dr. Lester Ginspoon - Professor Emeritus of Psychiatry, Harvard

Prof. David Nutt of UK, studied 2000 cases to arrive at same conclusion of the UK.

Myth: Cannabis is toxic / poisonous

‘Nearly all medicines have toxic, potentially lethal effects. But marijuana is not such a substance. There is no record in the extensive medical literature describing a proven, documented cannabis-induced fatality.’

‘This is a remarkable statement. First, the record on marijuana encompasses 5,000 years of human experience. Second, marijuana is now used daily by enormous numbers of people throughout the world. Estimates suggest that from twenty million to fifty million Americans routinely, albeit illegally, smoke marijuana without the benefit of direct medical supervision. Yet, despite this long history of use and the extraordinarily high numbers of social smokers, there are simply no credible medical reports to suggest that consuming marijuana has caused a single death.’

‘By contrast aspirin, a commonly used, over-the-counter medicine, causes hundreds of deaths each year.’

‘Drugs used in medicine are routinely given what is called an LD-50. The LD-50 rating indicates at what dosage fifty percent of test animals receiving a drug will die as a result of drug induced toxicity. A number of researchers have attempted to determine marijuana’s LD-50 rating in test animals, without success. Simply stated, researchers have been unable to give animals enough marijuana to induce death.’

'At present it is estimated that marijuana's LD-50 is around 1:20,000 or 1:40,000. In layman terms this means that in order to induce death a marijuana smoker would have to consume 20,000 to 40,000 times as much marijuana as is contained in one marijuana cigarette. NIDA-supplied marijuana cigarettes weigh approximately .9 grams. A smoker would theoretically have to consume nearly 1,500 pounds of marijuana within about fifteen minutes to induce a lethal response.'

'In practical terms, marijuana cannot induce a lethal response as a result of drug-related toxicity.'

'Another common medical way to determine drug safety is called the therapeutic ratio. This ratio defines the difference between a therapeutically effective dose and a dose which is capable of inducing adverse effects.'

'A commonly used over-the-counter product like aspirin has a therapeutic ratio of around 1:20. Two aspirins are the recommended dose for adult patients. Twenty times this dose, forty aspirins, may cause a lethal reaction in some patients, and will almost certainly cause gross injury to the digestive system, including extensive internal bleeding.'

'The therapeutic ratio for prescribed drugs is commonly around 1:10 or lower. Valium, a commonly used prescriptive drug, may cause very serious biological damage if patients use ten times the recommended (therapeutic) dose.'

'There are, of course, prescriptive drugs which have much lower therapeutic ratios. Many of the drugs used to treat patients with cancer, glaucoma and multiple sclerosis are highly toxic. The therapeutic ratio of some of the drugs used in antineoplastic therapies, for example, are regarded as extremely toxic poisons with therapeutic ratios that may fall below 1:1.5. These drugs also have very low LD-50 ratios and can result in toxic, even lethal reactions, while being properly employed.'

'By contrast, marijuana's therapeutic ratio, like its LD-50, is impossible to quantify because it is so high.'

Myth: Cannabis intoxicates

This is really a matter of semantics, as, strictly speaking, a non-toxic substance cannot 'intoxicate'.

'intoxication' is usually and often detectable simply by a detrimental effect upon motor and cognitive skills; these are covered below.

Myth: Cannabis is addictive

Here we must distinguish between firstly, addictiveness and dependency, and secondly, between medical and psychological dependency.

Medical dependency is not really the issue here, since it is perfectly natural and acceptable for a person to be dependent upon a medicine to ease their suffering, given that the medicine is at least reasonably and acceptably safe.

TRENDS IN PHARMACOLOGICAL SCIENCES: Neurobiology of Marijuana Abuse. 1992, 13:201-206. pg. 203:

"research shows cannabis has limited potential for development of...psychological dependence due to the weak reinforcing properties of Delta-9-THC."

BRAIN RESEARCH JOURNAL: Chronic cannabinoid administration alters cannabinoid receptor binding in rat brain: a quantitative autoradiographic study. 1993, 616:293-302. pg. 300.

"cannabinoid dependence and withdrawal phenomena are minimal."

The Shafer Commission (USA) of 1970 said:

"Marijuana does not lead to physical dependency, although some evidence indicates that the heavy, long-term users may develop a psychological dependence on the drug"

The Panama Canal Zone Military Investigations (US Military, 1929) said:

"There is no evidence that Marijuana as grown and used [in the Canal Zone] is a 'habit-forming' drug."

In 1997, (R. v Clay), Ontario Justice John McCart (Canada) ruled, "Cannabis is not an addictive substance." B.C. Justice F.E. Howard in a similar case confirmed his findings in 1998.

US Department of Health and Human Services, 1991:

"Given the large population of marijuana users and the infrequent reports of medical problems from stopping use, tolerance and dependence are not major issue at present."

("Drug Abuse and Drug Abuse Research, Rockville, MD, (1991) p C3

Myth: Cannabis causes hallucinations

[Report of the Australian Government, 1996](#): "Cannabis has been erroneously classified as a narcotic, as a sedative and most recently as a hallucinogen. While the cannabinoids do possess hallucinogenic properties, together with stimulant and sedative effects, they in fact represent a unique pharmacological class of compounds. Unlike many other drugs of abuse, cannabis acts upon specific receptors in the brain and periphery. The discovery of the receptors and the naturally occurring substances in the brain that bind to these receptors is of great importance, in that it signifies an entirely new pathway system in the brain."

Myth: Cannabis smoking damages the lungs

Researchers at the University of California (UCLA) School of Medicine have announced the results of an 8 - year study into the effects of long-term cannabis smoking on the lungs. In Volume 155 of the American Journal of Respiratory and Critical Care Medicine, Dr. D.P. Tashkin reported "Findings from the present long-term, follow-up study of heavy, habitual marijuana smokers argue against the concept that continuing heavy use of marijuana is a significant risk factor for the development of [chronic lung disease. ..Neither the continuing nor the intermittent marijuana smokers exhibited any significantly different rates of decline in [lung function]" as compared with those individuals who never smoked marijuana. Researchers added: "No differences were noted between even quite heavy marijuana smoking and non-smoking of marijuana."

Myth: Cannabis suppresses the immune system.

Two studies in 1978 and 1988 showed that cannabis actually stimulated the immune system

From: "Exposing Marijuana Myths:(The Lindesmith Center)" "False: Marijuana Impairs Immune System Functioning "It has been widely claimed that marijuana substantially increases users' risk of contracting various infectious diseases. First emerging in the 1970s, this claim took on new significance in the 1980s, following reports of marijuana use by people suffering from AIDS.

"THE FACTS

"The principal study fuelling the original claim of immune impairment involved preparations created with white blood cells that had been removed from marijuana smokers and controls. After exposing the cells to known immune activators, researchers reported a lower rate of transformation in those taken from marijuana smokers.

"However, numerous groups of scientists, using similar techniques, have failed to confirm this original study. "In fact, a 1988 study demonstrated an increase in responsiveness when white blood cells from marijuana smokers were exposed to immunological activators.

"Studies involving laboratory animals have shown immune impairment following administration of THC, but only with the use of extremely high doses. For example, one study demonstrated an increase in herpes infection in rodents given doses of 100 mg/kg/day -- a dose approximately 1000 times the dose necessary to produce a psychoactive effect in humans.

"There have been no clinical or epidemiological studies showing an increase in bacterial, viral, or parasitic infection among human marijuana users. In three large field studies conducted in the 1970s, in Jamaica, Costa Rica and Greece, researchers found no differences in disease susceptibility between marijuana users and matched controls.

"Marijuana use does not increase the risk of HIV infection; nor does it increase the onset or intensity of symptoms among AIDS patients. In fact, the FDA decision to approve the use of Marinol (synthetic THC) for use in HIV-wasting syndrome relied upon the absence of any immunopathology due to THC.

"Today, thousands of people with AIDS are smoking marijuana daily to combat nausea and increase appetite. There is no scientific basis for claims that this practice compromises their immune responses. Indeed, the recent discovery of a peripheral cannabinoid receptor associated with lymphatic tissue should encourage aggressive exploration of THC's potential use as an immune-system stimulant."

Marijuana Myths, Marijuana Facts": Lynn Zimmer Ph.D. and John P. Morgan M.D.: "At the 1981 conference on marijuana sponsored by the World Health Organisation and Canada's Addiction Research Foundation, reviewers of the research literature on immunity reported "There is no conclusive evidence that cannabis predisposes man to immune dysfunction". A few years later, in approving THC (Marinol) for use as a medicine, the FDA found no convincing evidence that THC caused immune impairment. In 1992, the FDA approved Marinol as an appetite stimulant specifically for AIDS patients, who have serious immunosuppression. "Marijuana Myths, Marijuana Facts": Lynn Zimmer Ph.D. and John P. Morgan M.D. ISBN 0-9641568-4-9; page 107. Munson and Fehr (1983) note 15, page 338

Food and Drug Administration, "Unimed's Marinol (Dronabinol) Lau, R.J. et al "Phytohemagglutinin-Induced Lymphocyte Transformations in Humans Receiving Delta-9-Tetrahydrocannabinol," Science 192, 805-07 (1976) Dax, EM. Et al., "The Effects of Δ^9 -Tetrahydrocannabinol on Hormone Release and Immune Function," Journal of Steroid Biochemistry 34: 263-70 (1989) Myth: Cannabis causes impotency / infertility

From: "Exposing Marijuana Myths: (The Lindesmith Center)" page 93;"Studies of men in the general population have also failed to find differences in the testosterone levels of marijuana users and nonusers. "There is no convincing evidence of infertility related to marijuana consumption in humans. "There are no epidemiological studies showing that men who use marijuana have higher rates of infertility than men who do not. Nor is there evidence of diminished reproductive capacity among men in countries where marijuana use is common."

Abel, E.L., et al, "Marijuana and Sex: A Critical Survey," Drug and Alcohol Dependence 8: 1-22 (1981)

Ehrenkranz, J.R.L. and Hembree, W.C., "Effects of Marijuana on Male Reproductive Function," Psychiatric Annals 16: 243-49 (1986)

Cushman, P, "Plasma Testosterone Levels in Healthy Male Marijuana Smokers," American Journal of Drug and Alcohol Abuse 2: 269-75 (1975)

Block, R I, et al, "Effects of Chronic Marijuana Use of Testosterone, Luteinizing Hormone, Follicle Stimulating Hormone, Prolactin and Cortisol in Men and women, "Drug and Alcohol Dependence 28,: 121-28 (1991)

Myth: Cannabis destroys short-term memory

[The Australian Government Report 1996:](#)

"The weight of the available evidence suggests that the long-term heavy use of cannabis does not produce any severe impairment of cognitive function."

Myth: Cannabis detrimentally effects motor co-ordination / driving skill

Crancer Study, Washington Department of Motor Vehicles:

"Simulated driving scores for subjects experiencing a normal social 'high' and the same subjects under control conditions are not significantly different. However, there are significantly more errors for alcohol intoxicated than for control subjects"

Runciman report:

There is considerable concern that cannabis use may contribute to transport accidents since laboratory tests show it can impair performance including driving. However, a review of the scientific literature on drugs and driving commissioned by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) [7] found that evidence as to whether cannabis impairs driving and increases the risks of road accidents was not entirely consistent. Some studies found no significant effects on perception, and others pointed to some impairment of attention and short-term memory, although these effects are typically observed at higher doses. Still others suggest that drivers under the influence of cannabis actually drive more carefully. Interpretation of the causal contribution of cannabis to road accidents is further complicated by the concurrent presence of other drugs, especially alcohol.

[U.S. Department of Transportation, National Highway Traffic Safety Administration \(DOT HS 808 078\), Final Report, November 1993:"THC's adverse effects on driving performance appear relatively small"](#)

Sutton (1983) also found that cannabis had little effect on actual driving performance. "Driving in traffic, however, while showing a trend toward poorer performance, was not significantly affected, and the effects of cannabis were much more variable."

The Australian Government Report, 1996, page 6) "There is no controlled epidemiological evidence that cannabis users are at increased risk of being involved in motor vehicle or other accidents.

Myth: Cannabis detrimentally effects cognitive skills

US: Cannabis Use and Cognitive Decline in Persons under 65 Years of Age

Publication date: 1 May 1999

Source: American Journal of Epidemiology

Copyright: 1999 Johns Hopkins University School of Hygiene and Public Health

Ref: Am J Epidemiol 1999; 149:794-800

Mail: 111 Market Place, Suite 840, Baltimore MD 21202 U.S.A.

<http://www.jhsph.edu/Publications/JEPI/>> Website

Authors: Constantine G. Lyketsos, Elizabeth Garrett, Kung-Yee Liang, and James C. Anthony (Osler 320, The Johns Hopkins Hospital, 600 North Wolfe Street, Baltimore, MD 21287-5371)

"The purpose of this study was to investigate possible adverse effects of cannabis use on cognitive decline after 12 years in persons under age 65 years. This was a follow-up study of a probability sample of the adult household residents of East Baltimore. The analyses included 1,318 participants in the Baltimore, Maryland, portion of the Epidemiologic Catchment Area study who completed the Mini-Mental State (MMSE) examination during three study waves in 1981, 1982, and 1993--1996.

Individual MMSE score differences between waves 2 and 3 were calculated for each study participant. After 12 years, study participants' scores declined a mean of 1.20 points on the MMSE (standard deviation 1.90), with 66% having scores that declined by at least one point. Significant numbers of scores declined by three points or more (15% of participants in the 18--29 age group). There were no significant differences in cognitive decline between heavy users, light users, and non-users of cannabis.

There were also no male-female differences in cognitive decline in relation to cannabis use. The authors conclude that over long time periods, in persons under age 65 years, cognitive decline occurs in all age groups

This decline is closely associated with ageing and educational level but does not appear to be associated"

Ethiopian Zion Coptic Church Study, 1980

"Some participants had smoked at least two to four large cigarettes (each containing 1/4 to 1/2 ounce of cannabis) over 16 hours a day for periods of up to 50 years.

"...the most impressive thing... is the true paucity of neurological abnormalities.

"Heavy cannabis consumers suffered no apparent psychological or physical harm. "Schaeffer: A Neuropsychological Evaluation; A Case History"...I.Q.'s of Zion Coptics increased after they began to use ganga"

US Jamaican Study 1974:

"No impairment of physiological, sensory and perceptual performance, tests of concept formation, abstracting ability, and cognitive style, and tests of memory"

Myth: Cannabis causes a-motivation / laziness

We must of course distinguish between those people who are naturally or by habit or psychological so set as lazy or a-motivated, and any such a-motivation caused by cannabis consumption.

Dr. Andrew Weil (Rubin & Comitas Ganja in Jamaica, 1975) said "a-motivation [is] a cause of heavy marijuana smoking rather than the reverse"

In 1997, (R. v Clay), Ontario Justice John McCart (Canada) ruled, "Cannabis ... does not cause a motivational syndrome." His findings were confirmed by B.C. Justice F.E. Howard in a similar case in 1998

Myth: Cannabis use leads to the use of hard drugs

Considering the millions of people in the UK, and the hundreds of millions around the world, who have used cannabis for short or long periods, it is clear that if it led to the use of hard and addictive drugs there would be many more new addicts that we have seen.

We must, here, also remember that under the UK and other government policies of "tackling drugs together", under a regime that prohibits hard drugs alongside cannabis, where the supplies remain in criminal control, it is often the case that people may be led from one substance to another by their peers and by their suppliers. This does not of course mean that cannabis itself is a gateway or hard drug use.

We must also remember that at least a proportion of cannabis users may be people prone to trying other substances, whether by way of n, research, 'spiritual' quest, or other factor.

[The LaGuardia sub-committee of New York 1944](#) said:

"The use of marijuana does not lead to morphine or heroin or cocaine addiction and no effort is made to create a market for these narcotics by stimulating the practice of marijuana smoking"

"Marijuana: Facts for Teens." U.S. Department of Health and Human Services. Washington, D.C. 1995, p.10.: "Most marijuana users do not go on to use other drugs." :

Jack Straw, The Daily Telegraph, 3 April 2000: "While it is undoubtedly the case that many drug addicts started with cannabis, to claim that taking cannabis is bound to lead to hard drugs has always seemed to me far-fetched."

[Drugs Policy in the Netherlands \(1995\)](#): Dutch Ministry of Health, Welfare and Sport "Moreover, users of soft drugs do not as a rule tend to experiment with hard drugs, such as heroin or cocaine; this is indeed the intention of the policy of keeping the markets separate. There is little use of heroin and cocaine among minors in the Netherlands, and the trend is towards even less. "Myth: Increased availability will lead to increased usage"

Drugs Policy in the Netherlands (1995): Dutch Ministry of Health, Welfare and Sport"4.1. Extent and nature of cannabis use

"The decriminalisation of the possession of soft drugs in 1976 did not result in increased use. The level of consumption stabilised in the first few years after the Opium Act was amended. According to

national figures, use again increased somewhat between 1984 and 1994, a trend which has also been observed elsewhere. Indeed, the United States has experienced a considerable increase in recent years. "Both as regards the extent of cannabis use and trends in use, the Netherlands differs very little from other countries.

"As already indicated, the number of users of soft drugs has increased after falling in the 1970s. Patterns of consumption are overwhelmingly recreational, though among certain specific categories of young people, such as chronic truants and street children, the use of cannabis can be described as very substantial and intensive.

"The policy pursued by the Netherlands does not appear to have led to an increase in use, though there are indications that the existence of freely accessible coffee shops means that certain users continue to use the drugs for longer.

"Conclusions and policy intentions

"The decriminalisation of the possession of quantities of soft drugs for personal use and the existence of sales points tolerated under certain circumstances by the authorities have not resulted in a worryingly high level of consumption among young people. Moreover, users of soft drugs do not as a rule tend to experiment with hard drugs, such as heroin or cocaine; this is indeed the intention of the policy of keeping the markets separate. There is little use of heroin and cocaine among minors in the Netherlands, and the trend is towards even less.

"The effects of partial decriminalisation on cannabis use in South Australia, 1985 to 1993 National Drug and Alcohol Research Centre, University of New South Wales, Sydney Aust J Public Health, 19: 3, 1995 Jun, 281-7:"

In 1987 the Cannabis Expiration Notice scheme decreased penalties for the personal use of cannabis in South Australia. Data from four National Campaign Against Drug Abuse (NCADA) household drug-use surveys covering the period 1985 to 1993 were analysed to measure the effect of the decriminalisation on cannabis use. The main outcomes used were the self-reported prevalence rates of having ever used cannabis and current weekly use. Logistic regression was used to control for the potentially confounding effects of age and sex. Other outcomes were rates of having ever been offered cannabis and willingness to use cannabis if offered it. Between 1985 and 1993 the adjusted prevalence rate of ever having used cannabis increased in South Australia from 26 per cent to 38 per cent. There were also significant increases in Victoria and Tasmania, and to a lesser extent in New South Wales. The increase in South Australia was not significantly greater than the average increase ($P = 0.1$). Adjusted rates of weekly use increased between 1988 and 1991 in South Australia, but did not change through 1993. Although the effect was in the direction of a greater increase in South Australia, this was not statistically significant when compared to increases in the rest of Australia ($P = 0.07$). The greatest increase in adjusted weekly use occurred in Tasmania between 1991 and 1993, from 2 per cent to 7 per cent. Although the NCADA survey data indicate that there were increases in cannabis use in South Australia in 1985-1993, they cannot be attributed to the effects of partial decriminalisation, because similar increases occurred in other states"[\(17\)](#)

3.3 The 'War on Cannabis' is a war on us

This report has clearly demonstrated that the historical developments of cannabis laws both internationally and domestically have been based almost entirely on ideological, racist and political agendas without any conclusive scientific data on harms of use for both the individual and society.

These unfounded and unsubstantiated laws have clearly supported the monopolisation of several industries, especially the pharmaceutical and petrochemical multi-national corporations. It is these same corporations which have not only led to a huge increase in toxification, suffering and death to a large proportion of our population, but have been major contributors to the destruction of habitats through both negligent industry and wars.

The major cause of runaway climate change through primarily the petrochemical industries, the destruction of huge swathes of forests for paper production and the toxification of lands from the cotton industry and the devastation to our lands and oceans through the over use of throw away plastics are equally catastrophes of this failure to review the facts.

It is clear to see that if cannabis had not been vilified and thus prohibited almost a century ago, cannabis would have continued to be used to support our endo-cannabinoid systems, research into cannabis as a treatment for almost every disease known to man would not have been suppressed and the current technological developments of the myriad of uses for the rest of the plant would have long ago replaced the current dependence on fossil fuels.

If this were not enough, the sheer disregard of human rights, freedoms of choice and the overwhelming denial of judicial process has not only made a mockery of the entire judicial system, it has also caused irreparable damage to families, communities, economic progress and unfair incarceration to which reparations should be sought.

3.4 No Evidence, No Crime?

As with a building, a law must have strong foundations if it is to withstand the test of time. The foundations of the judicial system are the people's trust in that the system, based on truth and justice and that everyone is innocent until proven guilty. Without this trust in the Police, the Judicial system and the Government, a breakdown of law and order to some degree is inevitable.

It is everyone's responsibility to aspire to be a model citizen, to be law abiding and possess a moral compass to look out for each other as this is the lubricant to which law and order within society depends.

If laws are unjust and unfounded, it is our moral duty to disobey that law and insist that the mistake is corrected by nullification of that law. It may be easy to collect evidence to be used in a court of law to prove the possession, cultivation and/or trafficking of cannabis but surely there needs to be foundation evidence to justify the law itself. Without evidence or justification for the existence of the law, that law should be immediately repealed.

Section 4: Are Those Enforcing these laws the real criminals?

4.1 FOI's prove lack of due diligence

Seed our Future Campaign has sent out Freedom of Information (FOI) requests to every Police and Crime Commissioner (PCC) in the UK, the Crown Prosecution Service (CPS) and the Home Office requesting the following information:

I write to you under the Freedom of Information act 2000 to request five pieces of evidence:

1. FOUNDATION EVIDENCE for the claim that all genus of cannabis meets the currently accepted criteria for a schedule 1 substance in its raw form.
2. FOUNDATION EVIDENCE for the claim that cannabinoid preparations meet the currently accepted criteria for a schedule 1 substance.
3. FOUNDATION EVIDENCE for the claim that cannabis is a 'controlled' substance in the UK and who is making that claim of control.
4. FOUNDATION EVIDENCE for what is considered misuse of raw cannabis and its various preparations.
5. The Clear Scientific Evidence of physical and mental harm and harm to communities, resultant from the use of cannabis to justify the class B penalty as per the 1971 Misuse of Drugs Act.

Results:

We also sent an FOI to the ACMD:

Please provide any correspondence between the ACMD and the Home Secretary regarding reviewing the classification system within the Misuse of Drugs Act from 2005 to present.

The Home Office consistently claim that there is 'clear scientific and medical evidence that cannabis is a harmful drug which can damage people's mental and physical health, and harms individuals and communities. Can you please provide this clear evidence?

When the Misuse of Drugs Act was approved as law in 1971, what foundation evidence was available to justify placing cannabis as a schedule 1 drug with a Class B penalty as legislated for?

Results:

- Of the 45 FOI's requested; 78% have responded to Confirm No Evidence is held.
- 4% refused to provide any information.
- 22% are yet to respond.

Of the replies, 56% forwarded us to one of the respective agencies, within this circle.

- 44% telling us '**Maybe** the Police have it?'
- 2% confirming the Police **do have** the information.
- 5% forwarding us to the Home Office.
- 5% forwarding us to the ACMD.

Each agency in this circle has been asked the same questions. We are yet to receive a response from the ACMD.

Freedom of Information Requests 2020



Although we were confident following our extensive research that there was no foundation evidence for the inclusion of cannabis within the 1971 MoDA, we required confirmation from the responsible parties involved.

This comprehensive confirmation that there is **no evidence** demonstrates that the Police Constables throughout the UK are at best naïve, in not checking the lawfulness/worthiness of the law, or at worse, the Police are professionally negligent in their duty to protect their community .

4.2 Attestation

The police officer's attestation is the terms and conditions of employment/public duties of all police:

*I do solemnly and sincerely declare and affirm that I will well and truly serve the Queen in the office of constable, with **fairness, integrity, diligence and impartiality, upholding fundamental human rights and according equal respect to all people**; and that I will, to the best of my power, cause the peace to be kept and preserved and **prevent all offences against people and property**; and that while I continue to hold the said office I will to the best of my skill and knowledge discharge all the duties thereof faithfully according to law. (18)*

If there was 'clear scientific evidence of harm' to individuals and this constituted a social problem and if the laws had been based on truth opposed to ideology, racism and political objectives then police officers would be working within their attestation but as this is not the case, every police officer who enforces cannabis laws without adequate due diligence is in breach of their attestation.

4.3 Pillars of public life

The foundations of this contract can be found in the 7 pillars of public life and these pillars are not only applicable to the Police, it is part of contract law for everyone in public office:

i. Selflessness

Holders of public office should act solely in terms of the public interest.

The police are acting with a political and economic interest and not in the public interest.

ii. Integrity

Holders of public office must avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They should not act or take decisions in order to gain financial or other material benefits for themselves, their family, or their friends. They must declare and resolve any interests and relationships.

The police have breached integrity as all fines go towards paying for police pensions. They actually breach another piece of legislation here. In making a monetary demand (class B penalty) in the charges, with no evidence to back those charges up, they're making an unwarranted demand for money with threats and menaces.

iii. Objectivity

Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias.

It is incumbent on Chief officers to review information that questions the lawfulness of their actions when evidence is placed before them questioning the law. Until clarity has been provided by the law makers officers should not be enforcing a questionable law.

iv. Accountability

Holders of public office are accountable to the public for their decisions and actions and must submit themselves to the scrutiny necessary to ensure this.

Technically, every Police officer could be held to account in the pursuance of the unjustifiable Cannabis laws that are indeed illegal.

v. Openness

Holders of public office should act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for so doing.

An FOI request for the Cannabis Evidence has been requested from the Police, PCC's, CPS, ACMD and the Home Office. There are difficulties faced here, either no response or an admittance the information is not held within their office and will refer you to another of the said departments'. We keep, completing full circles on these requests. It would appear there is a purposeful lack of clarity and therefore not open nor transparent.

vi. Honesty

Holders of public office should be truthful.

How can any police officer be thought of as honest when they're either engaging in industrial scale fraud or being used as political will enforcers?

vii Leadership

Holders of public office should exhibit these principles in their own behaviour. They should actively promote and robustly support the principles and be willing to challenge poor behaviour wherever it occurs.

It is difficult to trust or have any confidence with this current format of Leadership and principles as they would appear to be distinctly lacking. Would it be considered leadership to be complicit and an active participant within this industrial scale fraud? A behaviour that could be interpreted as an act of terrorism against the very public they are deemed to serve, by their own laws.

To return to the attestation; the police are acting in a politically motivated, highly prejudicial manner in breach of several human rights laws while also breaching the peace by waging a war, via the 'war on drugs,' of industrial scale fraud and terrorism that exposes all cannabis users to multiple criminal offences by performing malicious prosecutions through abuse of process.

If they had done their due diligence, they would know this.

They are therefore acting negligently, breaching their contractual terms and conditions of employment and public duties, which under current legislation is considered misconduct in public office. A common law offence carrying a potential lifetime sentence. Of course, it can be argued that they must be able to rely on the information presented to them as accurate and this is not. As such, they may also be victims at the front line of causing harm in the name of another Government's incompetence or ulterior agenda. Hopefully, this document will rectify this.

4.4 Human Rights

Although it is currently unclear, following the implementation of the Covid-19 laws passed this year, as to whether we still have 'human rights' in the UK, the following breaches are evident in relation to cannabis laws. The United Nations Universal Declaration of Human Rights and European Convention for the Protection of Human Rights and Fundamental Freedoms (ECHR):

Article 3 of the UN Declaration recognises the right to "Life, Liberty and security of person." (Article 5 of the ECHR): How can a person be expected to feel secure when ill or when a member of the family is ill? The prohibition of a safe preventative and curative medicine is a contravention of these Rights.

Article 5 of the UN Declaration recognises the right not to be subjected to "torture, cruel, inhuman or degrading treatment" (Article 3 in the ECHR): The denial of a medicine to sick and well people is tantamount to torture and certainly results in degradation.

Article 9 of the UN declaration states: 'The Universal Declaration of **Human Rights** provides in **article 9** that "no one shall be subjected to **arbitrary arrest, detention** or exile". **Article 9** of the International Covenant on **Civil** and **Political Rights** states: "Everyone has the **right** to liberty and security of person'.

Article 12 of the UN Declaration recognises the right to privacy, family, home ..." (Article 8 of the ECHR): The implementation of the prohibition of cannabis through the sometimes armed raiding of people in their own homes and often separation from their families, without justifiable cause, is an infringement upon these rights.

Article 18 of the UN Declaration grants the right to "Freedom of thought, conscience and religion... and freedom, either alone or in community with others and in public or private, to manifest his religion of belief in teaching, practice, worship and observance." (Article 9 of the ECHR): The denial of people's rights, without justification, to use cannabis to their personal benefit, alone or in community, and the right to supply a natural plant as a therapeutic agent within a community, is a blatant contravention of this right. It is also applicable to those members of religious communities who use cannabis but not limited to religion. ([16](#))

In response to this breaches of human rights, another community campaign group called “*We The Undersigned Have a Human Sovereign Right to Cannabis*” (WTU) has begun building a human right’s based legal challenge against the political policy of cannabis prohibition laws.

In 2015, Mexicans had their human rights recognised for the development of personality and to self-determination, thus are free to recognise, utilise, cultivate and prepare cannabis for adult purposes, in their pursuit of health, well-being and happiness.

Are we British less human then Mexicans?

Consequently, WTU seek to assert our Inalienable Sovereign Human Rights, as defined by the UN, EU and UK human rights legislation listed above, also supported by Magna Carta, Henry the VIII’s Herbalist Charter and Common Law – to cause no harm or loss to another, and finally for those who believe, the Law of God, specifically through Genesis 1:29; which is, all have the God given right to sow any of the planet’s seeds, to nurture, cultivate, prepare and share any nutritious herb, which WTU believe should include the now proven to be non-toxic recreational drug, traditional herbal health remedy, creative and spiritual aide cannabis, which was present in the Holy anointing oil according to the Bible (Exodus 30:23; Sula Benet 1975).

WTU will move to assert our rights to a private life and self-determination to recognise and utilise cannabis, in whatever varieties and manner as we determine best for ourselves or our loved ones, and claim our actions should be free from the fear of arbitrary State interference, criminal or civil prosecution, insofar as much that there is no commercial activity and nor do our actions cause harm to others or their property.

Article 3 Example - *Prohibition of torture* – Philip Anthony Bevington

No one shall be subjected to torture or to inhuman or degrading treatment or punishment. ([24](#))

Case: **Philip Anthony Bevington**

Profile: Age 80; Status: Charged; Crime: Production intended for self-consumption for Kidney disease

Context: Abstract of Public Support group:

“Would you prosecute an 80 year old man who grew Cannabis as a medicine to save his life?

No Financial gain, no dealing to others and no illegal intent.

With stage 3 kidney failure this medicine has stopped his pain, improved his blood readings, and overall, improved his life.

This is not in the Public Interest to do this to anyone let alone and 80 year old pensioner.

This page is to support Tony and people like him. ([22](#))

We want the charges dropped, or the law changed. Tony should not have to face any charges at all or even go to court for keeping himself alive when he had no other choice.”

This is degrading in every sense of the word. There is no excuse for a society to accept and a government to allow for this behavior by its police service to continue. This is evident in the immediate support that Philip received.

State Defense:

The defense in this instance for those enforcing the laws would be that it was in pursuit of a crime. This defense can also be found within the Human Rights Act:

Article 5 – Right to liberty and security

1. Everyone has the right to liberty and security of person. No one shall be deprived of his liberty, save in the following cases and in accordance with a procedure prescribed by law:

Section (e): the lawful detention of persons for the prevention of the spreading of infectious diseases, of persons of unsound mind, alcoholics or drug addicts or vagrants; (25)

Herein lies the issue: Society in the last 50 years has seen the addict as a criminal. An addict is a person in need of medical support and guidance, education.

The harm associated with the detainment of individuals for substance abuse, in the specific context of cannabis, is significantly more harmful to our liberty and security and is a disproportionate response to a medical need.

With a large proportion of our population being ‘users of cannabis,’ it is no longer a question of criminality. The term addict is also derogatory in its nature to the responsible cannabis user. Much the same as the citizen who enjoys a pint after work with a friend or a glass of wine would not be considered an alcoholic. A cannabis consumer of any quantity within reason should be likened only to the same stigma as someone who may stop and have a few pints at a pub. Any wider criminal activity surrounding cannabis is not related to the use of cannabis itself. Cannabis prohibition within the same historical reference, much like late 1920’s alcohol prohibition has been the cause and perpetrator of the social harm cannabis is blamed for.

If we are to consider the facts within this document and the historical inaccuracies leading to legislation it is difficult to present any other scenario than ‘cannabis enforcement is systemically unlawful’.

This leads us to the civil claim challenge outlined in this section which opens up the risk for any enforcing officer or authoritative agent, superior or not, to the following legal challenge in a civil court at a 51% balance of probabilities based on the weight of evidence. Currently plaintiffs must engage in the realms of ‘beyond reasonable doubt,’ a characteristic of criminal court. As most victims of the legislation are usually distressed and affronted at time of arrest, admitting wrong is a knee jerk reaction to the stigmatic practice of enforcement and fuel for the systemic issue. Most individuals who are arrested for cannabis offences are also unaware of this information. The exercise of our distribution is to allow all parties, both official and public, to work off the same accuracy in information as a foundation and not the fragmented approach that has been apparent in reform. (26)

People charged with a cannabis offence are also coerced into pleading guilty in a magistrate's court through fear of disproportionate fines and custodial sentences. A clear example of this is below where a 'not guilty' plea can lead to an unlimited fine and a custodial sentence 28 times that of a guilty plea:

Producing Controlled Drugs/Cultivating Cannabis: Producing a controlled drug and cultivating cannabis are either way offences. The maximum penalty depends on both the trial venue and the class of drug.

Magistrates' court:

- Class A drug: £5000 fine and/or 6 months' imprisonment
- **Class B drug: £5000 fine and/or 6 months' imprisonment**
- Class C drug: £2500 fine and/or 3 months' imprisonment

Crown Court:

- Class A drug: Unlimited fine and/or life imprisonment
- **Class B drug: Unlimited fine and/or 14 years' imprisonment**
- Class C drug: Unlimited fine and/or 14 years' imprisonment

(The penalties for cultivating cannabis under s.6 of the Act are identical to those shown above for producing a Class B controlled drug.) ([21](#))

4.5 PACE Code

The police have to follow the Police and Criminal Evidence Act (PACE) code when carrying out their duties. When it comes to enforcing cannabis laws without carrying out due-diligence, not for the offence within the 1971 MoDA but the evidence for the law itself, they are breaching PACE Code G 1.3 as they have no justification for arrest, which would mean that evidence procedures have not been followed calling in to question any arrest under G 1.4, therefore making any arrest unlawful as per G 2.1

It could be argued that the Police rely on the laws enacted being just and accurate and that their due-diligence lies with the enforcement of the law itself and that diligence of the laws themselves is unreasonable, however:

Police officers have authority under the Crown for the protection of life and property, maintenance of order, prevention and detection of crime and prosecution of offenders against the peace. With the imposition of central and politically set targets there are dangers that officers' discretion and operational independence is being compromised.

Police officers must be apolitical, impartial and accountable for their actions. If not, how and what is policed will become subject to political whim and electioneering. The operational independence of our police service comes with the Office of Constable. ([18](#))

We know that the Police Federation have been aware of the lack of evidence and harms caused by cannabis use and they themselves have called upon the Government to change laws so that possession and cultivation of cannabis no longer be an arrestable offence, as stated in the Runciman Report 2000. We could therefore say that it is unreasonable for the public to believe that Police Officers are not, following the past 20 years, aware of this information or that this level of diligence is unreasonable. The Government have left them highly vulnerable to this claim.

Police Misconduct

As per section 4.1 of this document, Police Officers must act within their attestation guiding their conduct. “...with **fairness, integrity, diligence and impartiality, upholding fundamental human rights and according equal respect to all people**”

POLICE AND CRIMINAL EVIDENCE ACT 1984 (PACE) CODE G (27)

1 Introduction

Sections

1.2 The exercise of the power of arrest represents an obvious and significant interference with the Right to Liberty and Security under Article 5 of the European Convention on Human Rights set out in Part I of Schedule 1 to the Human Rights Act 1998.

1.3 The use of the power must be **fully justified** and officers exercising the power should consider **if the necessary objectives can be met by other, less intrusive means. Absence of justification for exercising the power of arrest may lead to challenges** should the case proceed to court. It **could also lead to civil claims against police for unlawful arrest and false imprisonment**. When the power of arrest is exercised it is essential that it is exercised in a non-discriminatory and proportionate manner which is **compatible with the Right to Liberty under Article 5**.

1.4 Section 24 of the Police and Criminal Evidence Act 1984 (as substituted by section 110 of the Serious Organised Crime and Police Act 2005) provides the statutory power for a constable to arrest without warrant for all offences. **If the provisions of the Act and this Code are not observed, both the arrest and the conduct of any subsequent investigation may be open to question.**

2. Elements of Arrest under section 24 PACE

2.1 A lawful arrest requires two elements:

A person’s involvement or suspected involvement or attempted involvement in the **commission of a criminal offence**;

AND

Reasonable grounds for believing that the person’s arrest is necessary. • **both elements must be satisfied**, and • it can never be necessary to arrest a person unless there are reasonable grounds to suspect them of committing an offence.

Legal Argument:

Let's break down the arguments above into an easy to understand scenario:

If an individual is growing and consuming Cannabis for a health condition without any scientific evidence of harm, then is it reasonable to suggest that the law isn't fully justified?

Certainly, in the case of Philip Antony Bevington (Section 4.4 of this document), we see that 'less intrusive means were not even considered in due process. If Phillip wasn't hurting anyone, a frail 80-year-old man with Kidney disease, then what, other than the growing of Cannabis for his condition, was the crime?

There simply isn't one.

Failing to act within the guidelines of policing in the context of Cannabis is occurring daily. Because Phillip's story sadly is quite common and disproportionately affected across lower income demographics; the only positive hope in all of this is that most PC's are hopefully in most cases, doing this unknowingly.

Maxims of Law

A **legal maxim** is an established principle or proposition of law.

'Quamvis lex generaliter loquitur restringenda tamen est, ut cessante ratione et ipsa cessat.'

"Though the law speaks generally, it must be limited (by restrictive clauses), as, where the reason (for the law) ceases to apply, the law itself ceases" ([19](#))

In the event of Cannabis law being deemed unlawful by lack of evidential claim to the contrary (outlined in this document) then as per the above legal maxim so too does the law itself cease. As Cannabis is safer than peanuts and only hampered by incompetent regulation, then detainment becomes a criminal act.

Other Serious Breaches 4.6

Crime and Disorder Act (1998)

(1) A person is guilty of an offence under this section if he commits—

(a) an offence under **section 2 of the Protection from Harassment Act 1997 (see Below)** offences of harassment and stalking; or

(b) an offence under section 4 of that Act (putting people in fear of violence and stalking involving fear of violence or serious alarm or distress),([23](#))

Protection from Harassment Act 1997 ([28](#))

(1) A person must not pursue a course of conduct—

(a) which amounts to harassment of another, and

(b) which he knows or ought to know amounts to harassment of the other.

(1A) A person must not pursue a course of conduct —

(a) which involves harassment of two or more persons, and

(b) which he knows or ought to know involves harassment of those persons, and

(c) by which he intends to persuade any person (whether or not one of those mentioned above)—

(i) not to do something that he is entitled or required to do, or

(ii) to do something that he is not under any obligation to do.

And section 4:

4 Putting people in fear of violence.

(1) A person whose course of conduct causes another to fear, on at least two occasions, that violence will be used against him, is guilty of an offence if he knows or ought to know that his course of conduct will cause the other so to fear on each of those occasions.

(2) For the purposes of this section, the person whose course of conduct is in question ought to know that it will cause another to fear that violence will be used against him on any occasion if a reasonable person in possession of the same information would think the course of conduct would cause the other so to fear on that occasion.

(3) It is a defense for a person charged with an offence under this section to show that—

(a) his course of conduct was pursued for the purpose of preventing or detecting crime,

(b) his course of conduct was pursued under any enactment or rule of law or to comply with any condition or requirement imposed by any person under any enactment, or

(c) the pursuit of his course of conduct was reasonable for the protection of himself or another or for the protection of his or another's property

If we use the example of Philip Antony Bevington (Section 4.4) (the 80 year old man whose health condition has now deteriorated (Stage 4) due to the intolerable stress from his arrest experience and impending court case and subsequent restriction of access to his medicine; it warrants the questions:

1. What is the crime?
2. Is the rule of law correct? How can it be if it ignores the lack of evidence of potential harm?
3. Is this reasonable?

This implicates the arresting officers as breaking the law by enforcing the unfit for purpose 1971 MoDA in respect of Cannabis and contravening their attestation as well as their commitment to "... **prevent all offences against people and property.**" (See Section 4.1)

Now if in the event, once served with this document, a dual officer situation occurs and only one officer has undeniably read the contents, then they must stop their counterpart for fear of a challenge of conspiracy.

Scenario: In the event of 2 arresting officers stopping an individual for suspicion of a cannabis offence and if Officer 1 was to instigate a procedure of detainment, as such breaching the Protection from Harassment Act, then Officer 2, [**unless stating that they will not engage further with the arrest and Officer 1 is acting alone, educating the offending officer and removing themselves from the situation, must further report and document the offence to their Superior Officer via standard police reporting guidelines**], then they would be subject to a claim under The Criminal Act for Conspiracy 1977:

The Criminal Law Act (for conspiracy) 1977: (29)

(1) Subject to the following provisions of this Part of this Act, if a person agrees with any other person or persons that a course of conduct shall be pursued which, if the agreement is carried out in accordance with their intentions, either—

(a) will necessarily amount to or involve the commission of any offence or offences by one or more of the parties to the agreement, or

(b) would do so but for the existence of facts which render the commission of the offence or any of the offences impossible, he is guilty of conspiracy to commit the offence or offences in question.

Therefore, if the act of detainment is unlawful, ANY attending police are also duty bound to halt the process for an ignorant to the information officer, so as to not engage in a criminal act. ***This point highlights the need for a nationwide police training program in response to this data.***

Claims of PC's stating they are 'just doing their job' or 'it's the government not them' are prominent in street level engagement and wider discussions with officers in a casual setting. Which means the accused must acknowledge the Nuremburg defense as a counter argument to these claims.

Article 33, titled "Superior orders and prescription of law", states:

1. The fact that a crime within the jurisdiction of the Court has been committed by a person pursuant to an order of a Government or of a superior, whether military or civilian, shall not relieve that person of criminal responsibility unless:

- (a) The person was under a legal obligation to obey orders of the Government or the superior in question;
- (b) The person did not know that the order was unlawful; and
- (c) The order was not manifestly unlawful.

2. For the purposes of this article, orders to commit genocide or crimes against humanity are manifestly unlawful. (30)

Herein lies the arguments for contest:

- a) Yes, it is agreed that they are taking orders from the Government or superior in question. No contest.

- b) Provided they have read this document they would know the act is unlawful. All PCC's and MP's and parliamentary cabinet will be in receipt of this information in its public record format and will be duty bound to pass this information to all police constabulary.
- c) The challenge identified in relation to Human rights (section 5.1) envelopes all stakeholders: policy makers; enforcers (Judicial System); MP's; Government and Parliamentary Officials; The Public; even our Prime Minister. Breaching these rights through criminalising cannabis constitutes a Crime against Humanity, which contravenes the law being manifestly lawful and a breach of section c. This sentiment also opens the challenge of unclear restrictions and barriers to access through complex licensing within Hemp farming and industry. The quelling of the immediate subsequent benefits to social objectives by halting cannabis industrial progression, preventing the utilization of its diversity denies our rights to and our Governments commitment to environmental sustainability. We reiterate: These orders are a Crime against Humanity in contravention of our basic human rights.

Serious Breach Argument – State Sponsored Terrorism

If we are to follow the letter of the law and with knowing what we know now, then a more serious breach occurs from a Governmental level:

As per Section 2.1, the history of Cannabis legislation is rooted in racial ideologies. Unfortunately, it was localised to the influence of a small but powerful group of individuals and the machinations of Henry Anslinger. Political persuasion to support the vilification campaigns of cannabis and its "harms" were then built on misguided and in many cases brutal ideologies. The resulting harm from these decisions are still being felt today, hence the need for this paper.

So what does that mean?

Terrorism Act 2000

1 Terrorism: interpretation.

(1) In this Act "terrorism" means the use or threat of action where—

(a) the action falls within subsection (2),

(b) **the use or threat is designed to** influence the government or an international governmental organisation, or to **intimidate the public or a section of the public**, and

(c) **the use or threat is made for the purpose of advancing a political, religious**, racial or ideological cause.

(2) Action falls within this subsection if it—

(a) involves serious violence against a person,

(b) involves serious **damage to property**,

(c) **endangers a person's life**, other than that of the person committing the action,

(d) creates a serious risk to the health or safety of the public or a section of the public, or

(e) is designed seriously to interfere with or seriously to disrupt an electronicsystem.

Terrorism has different forms:

- •
The New Terrorism: The modern terrorist environment that arose during the end of the 20th century, culminating in the September 11, 2001 terrorist attacks in New York City. The New Terrorism is characterized by the threat of mass casualty attacks from dissident terrorist organizations, new and creative organizational configurations, transnational religious solidarity, and redefined moral justifications for political violence.
- •
State Terrorism: Terrorism “committed by governments against perceived enemies. State terrorism can be directed externally against adversaries in the international domain or internally against domestic enemies” (Martin, 2013, p. 4).
- •
Dissident Terrorism: Terrorism “committed by nonstate movements and groups against governments, ethno-national groups, religious groups, and other perceived enemies” (Martin, 2013, p. 4).
- •
Religious Terrorism: “Terrorism motivated by an absolute belief that an otherworldly power has sanctioned—and commanded—the application of terrorist violence for the greater glory of the faith. Religious terrorism is usually conducted in defense of what believers consider to be the one true faith” (Martin, 2013, p. 4).
- •
Ideological Terrorism: Terrorism motivated by political systems of belief (ideologies), which champion the self-perceived inherent rights of a particular group or interest in opposition to another group or interest. The system of belief incorporates theoretical and philosophical justifications for violently asserting the rights of the championed group or interest.
- •
International Terrorism: “Terrorism that spills over onto the world’s stage. Targets are selected because of their value as symbols of international interests, either within the home country or across state boundaries” (Martin, 2013, p. 5).
- •
Criminal Dissident Terrorism: This type of terrorism is solely profit-driven, and can be some combination of profit and politics. For instance, traditional organized criminals accrue profits to fund their criminal activity and for personal interests, while criminal-political enterprises acquire profits to sustain their movement (Martin, 2013).
- •
Gender-Selective Terrorism: Terrorism directed against an enemy population’s men or women because of their gender. Systematic violence is directed against men because of the perceived threat posed by males as potential soldiers or sources of opposition. Systematic violence is directed against women to destroy an enemy group’s cultural identity or terrorize the group into submission. [\(31\)](#)

Argument

If the ideological foundations of cannabis legislation are understood clearly, they are built on racial and political motivations. This propagates the challenge that the 1971 MoDA, in respect of Cannabis Laws and subsequent enforcement activity and social disruption falls into the category of Ideological Terrorism as stated above.

This is a serious breach of the Government on its public and should be the point of immediate debate and action. The repercussions of this knowledge have far reaching consequences in terms of claims against the crown for damages.

Section 5: Moving Forward.

5.1 Discretionary Decriminalisation by the Police

The results from the FOI's mentioned in 4.1 clearly demonstrate that the Police claim either not to be aware of any foundation evidence to support the laws in which they regularly enforce or are struggling to locate the required information without notifying the requesting party of their difficulties. To provide the Police force with the 'benefit of the doubt', this report clearly assesses the situation in regard to cannabis laws and more importantly, lack of evidence.

Each officer is responsible for carrying out due diligence before making an arrest as per PACE Code G. With the importance of the contents of this report to the Police Officer's role, it is imperative that this report is disseminated to every individual Police Officer throughout the UK.

Police officers must be allowed to police with discretion. Discretion is the bedrock of policing; it allows reasoned and fair decisions based on experience to be taken by police officers without the need to take a course of action merely to satisfy targets.

Police officers cannot legally be instructed to arrest a person. It is a decision they must take for themselves, using their experience, knowledge and discretion to take the most appropriate course of action to fulfil their function as officers of the Crown.

Police officers have authority under the Crown for the protection of life and property, maintenance or order, prevention and detection of crime and prosecution of offenders against the peace. With the imposition of central and politically set targets there are dangers that officers' discretion and operational independence is being compromised.

Police officers must be apolitical, impartial and accountable for their actions. If not, how and what we police will become subject to political whim and electioneering. The operational independence of our police service comes with the Office of Constable. (18)

Following the dissemination of this report, every Officer is legally obliged to use their full discretion and refrain from making any arrests in relation to cannabis as per the 1971 MoDA. This is not to be confused nor should it prevent any arrests being made with persons involved in other criminal offences such as serious organised crime or where harmful drugs or violence is involved.

This action would not only protect the rights of the Officers and ensure the Police are on the right side of the law, it would protect the rights and safety of the people and also help to regain public trust and confidence in the Police. We have already seen examples in the UK where discretionary

decriminalisation with certain Forces has been implemented successfully, expanding this across the UK would benefit everyone involved.

5.2 Misconduct in Public Office on a Grand Scale

Misconduct in public office is an offence at common law, triable only on indictment. It carries a maximum sentence of life imprisonment. It is an offence confined to those who are public office holders and is committed when the office holder acts (or fails to act) in a way that constitutes a breach of the duties of that office. [\(32\)](#)

When presented with the facts and the foundation of this document, the scope for misconduct from any agenda driven Head of State, bears a risk of challenge by any member from the public or a public group. In the instance of cannabis freedoms and unevidenced victimisation, it seems that malfeasance has been the appropriated response and the law has not been questioned in its entirety at any stage of development as to its viability. Until now.

5.3 De-schedule and Remove Cannabis from MoDA

There are thought to be approx. 1.4 million people in the UK who use cannabis medicinally, around 6 million who use recreationally and a further 6 million who use CBD products; this equates to roughly 20% of the UK population and these numbers are only from surveys conducted, the percentage is probably much higher.

This report, having been made public, will inevitably spread the truth not only to UK residents but globally. The people demand immediate reform to bring an end to these crimes against humanity and the environment.

We do not want a move in classification or licencing, we don't want 'legalisation' which supports corporate interests, **we demand that cannabis is immediately and completely removed from all drug scheduling and licencing**, that the people regain their right to cultivate and consume cannabis for personal use, that the ECS is added to all Biology curricula, especially within medical training and that Medical Practitioners are allowed to prescribe cannabis based medicinal products, not as a last resort but as they see fit. Finally, we ask that any cannabis products which are marketed for sale, be regulated as specified in section 5.4 below.

We would also like to recommend that the Government seriously consider investment in the infrastructure for a thriving 'green industrial revolution' in utilising the many industrial uses of cannabis.

5.4 'Let food be thy medicine, let medicine be thy food' – Cannabinoids, a new Classification and a Regulated Market

As discussed in sections 1.4 and 1.5 of this report, cannabis possesses extraordinary medicinal and nutritional properties that are both interchangeable. The flowers, leaves, seed and root all have both nutritional and medicinal value, as do many medicinal herbs but it is the understanding of the ECS which differentiates cannabis from the rest.

It was also discussed in section 1.4 that although a full plant extract is a remarkable resource for topping up our ECS, when it comes to treating specific conditions or diseases, it can be a blunt instrument as everyone's ECS is different and people will react more favourably to specific ratios of cannabinoids, terpenoids and flavonoids.

Global research is progressing at a terrific rate and we can already recommend certain cultivars for specific conditions but due to the lost decades of research due to prohibition, it will take some time to improve this knowledge and even then, we must remember that we are dealing with a complex and natural plant.

One of the many issues with prohibition is the current lack of choice as the majority of available cannabis on the 'black market' is high THC and very low amounts of CBD and this can cause short lived side effects (anxiety, paranoia and an increased heart rate) to those new to consuming cannabis.

A good analogy for this is the widespread, socially acceptable experimentation of alcohol. Young people will generally start experimenting with lower strength alcoholic drinks. The availability of everything from low strength lager to high strength spirits such as absinth in shops and supermarkets across the UK provide this opportunity to gradually increase strength as tolerance increases. If we had prohibition of alcohol here as happened in the US, the most available form of alcohol would most likely be in the form of high strength 'moonshine' which would inevitably increase side effects, violence and mortality.

The most common worry about cannabis use as mentioned in section 2.4, is the instance of the increase of psychosis and/or schizophrenia for those with a predisposition for or a previously diagnosed condition. Even though this is rare and affects only a small minority of people who experiment with cannabis, it is the ratio of high THC and low CBD which may cause this. Subsequently, if the same subjects were to take a high CBD, low THC cannabis product (such as CBD oils), the opposite is true. CBD is known to be anti-anxiety and anti-psychotic and CBD also reduces the psychoactive properties of THC and on this merit, a CBD dominant product would most likely be a safer, more effective medicine with no side effects compared to the pharmaceutical drugs offered.

This is why it is important that products from a wide range of cultivars (a range of CBD/THC ratios) are available both for those who take it as a medicine or recreationally.

Following a complete de-scheduling and removal of licencing for personal cannabis cultivation, production and possession, the challenge falls short for 'intent to supply', due to the need for regulatory controls to be in place and governed, as per any standard consumable product in the public sea of commerce.

A regulated market for all consumable cannabis products is therefore required to ensure products are safe, standardised, have correct labelling and marketing to include recommended use, dosage and safety warnings so that products are taken responsibly. Lab testing for cannabinoid profiles, heavy metals, pesticides and mycotoxins are also required to ensure safety, weights and measures and accuracy of profiles.

The groundwork and demonstration of successful compliance and regulation of cannabis products has already been proven in the UK through the work of the 'Cannabis Trades Association' who already help its members – a large proportion of the UK's CBD market – to self-regulate. This work has included extensive consultation with the FSA, MHRA, CTPA and the EFSA and as we already have a thriving professional industry who have already experienced years of 'trial and error' to become a streamlined industry, the inclusion of products with varying cannabinoid profiles would be easy to implement.

One of the biggest issues we have seen within the CBD regulations is the difficulty in fitting into a classification. Because of the uniqueness of cannabinoids supporting our ECS and thus being nutritional, medicinal and arguably essential to health, they don't fit directly into food nor medicine regulations (as we have seen with the FSA and MHRA 'passing the hot potato'). It would therefore be expedient to create a classification system specifically for cannabis products, simply 'cannabinoids' would suffice as we currently have with vitamins and minerals (vitamin C also merges between being nutritional and medicinal).

Of course the use of cannabis products would also require regulations and this should be similar to the regulatory framework already used for alcohol and tobacco and perhaps a similar approach to that used in the Netherlands could be incorporated where there are certain restrictions where cannabis products used for 'recreational use,' negating the use for CBD products and medicinal products, can be consumed or smoked. We would advise that the Cannabis Trades Association are consulted to prepare recommendations for these regulations to be consulted upon with the relevant Government departments and stakeholders.

5.5 A 'New Normal' – Health, Environment and Economy

We are repeatedly told by Government to expect a 'new normal' following the current Covid-19 situation as our health care system is on the brink of collapse as is our economy as we face the biggest global financial crash in history. Combine this with the impending collapse of our ecosystem as our climate changes at a horrific rate and we are all faced with the potential of a biblical 'end of days' as far as the civilisation we have become accustomed to. We simply don't know what to expect in the coming months, years but it is safe to say that the future looks bleak.

It is extremely frustrating to the many who understand the true value and capabilities of the cannabis plant in that our Government's continual denial and insistence that, '*The Government has no intention of legalising cannabis*' when it is our best opportunity of naturally improving the health of our Nation, both mitigating climate change and providing resilient nutrition, improve our soils and thus protect our food security for future generations and create a 'green industrial revolution' which will support our farmers, create jobs and industry which would not only prop up our dying economy but also provide a range of products which we can export (as GW Pharmaceuticals currently do with medicinal cannabis products).

It doesn't take much research to identify the rich and diverse history of cannabis and its many applications, so the burning question is: Is the Government aware of the huge benefits to us all, including politicians, of the liberation and regulation of a free cannabis market or is the Government at all levels involved in 'Grand Political Corruption' to appease the financial and power interests for multi-national corporations?

Surely, if the latter is true, those financially benefiting in the short term are soon going to find that the blood money is soon to be worthless. So what is the agenda?

There are undoubtedly corrupt, power thirsty people working within the Police force, the judicial system and at all levels of Government as there are globally but we at Seed our Future do believe that there are also people who enter these careers with good intention, morals and ethics.

This is why our strategy of informing the public, the Police, MP's and several key departments throughout Government of the truth, we are relying on those in their positions of responsibility (the-

ability-to-respond) to respond to this report and do the right thing now. Quite simply, if we don't everyone will suffer.

We'd like to thank everyone who has taken the time to read this report and we hope that it creates the ripple across the pond so needed and lives up to the ethos of the Seed our Future campaign, together we can Seed our Future.

Truth is Our Sword, Unity Our Shield.

For further information, please visit our website: www.seedourfuture.co.uk or contact: seedourfuture@mail.com or find us on social media.

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