

Short description of the organisation *

GREA (Groupement Romand d'Etudes des Addictions) with their Swiss-German and Swiss-Italian counterparts (Fachverband Sucht and Ticino Addiction) represents Swiss professionals and people active in the field of prevention and addiction. It promotes innovation and good practice, provides professional training and takes positions on current addiction-related affairs as well as societal issues related to addictions.

In a context where the reform of the Swiss cannabis policy is under discussion, GREA with Fachverband Sucht and Ticino Addiction gather the questions, needs, and observations of Swiss professionals in the field of addiction to bring them to the decisional level, in order for their interests to be taken into account in the drafting of a future policy.

GREA collaborates with others actors such as politicians, security forces, administrative and public health bodies, organizations of civil society, to name a few. Its particular competence is in issues related to youth protection, harm reduction, early intervention, tax redistribution and consumer protection.

Short resume of NGO representative *

Simon Anderfuhren-Biget is a sociologist, specialist in public management, doctor in political sciences.

Since 2015 his research focus is on analysing cannabis regulations practices, discourses, and actors in Switzerland and around the world. He has worked for different institutions on projects related to cannabis politics and policies: a pilot regulation project for the Canton of Geneva, the development of an expertise hub at GREA, the "2019 Cannabis Report" commissioned by the Federal Commission for Addiction Issues (EKSF) to advise the Swiss Federal Government.

Abstract: Cannabis politics, policies and policing in Switzerland

In Switzerland, the cannabis question is a hot topic:

- Political initiatives at all governmental levels,
- Launch of a popular initiative to regulate adult use and access,
- Increasing demand for cannabis for therapeutic purposes from the patient's side,
- And last but not least, the recent development of the low THC/high CBD cannabis market.

This presentation proposes an overview of these processes, focusing on how cannabis policy reforms constitute both a source of interrogation and of hope for professionals and institutions operating in the field of addiction and prevention in Switzerland.

Discourse

Good morning esteemed members of the INCB, distinguished State representatives, ladies and gentlemen.

Political outcomes in Switzerland are constrained by the nature of its institutions. Addicted to voting and democracy, we are one of the only countries that rely on popular votes to formulate our policies, and on a federal system to implement them. We are a Confederation composed of 26 independent States and of 2'500 municipalities with real autonomy. We are also a multicultural country with four official languages.

That being said, consensus building among all concerned actors is the key to all political changes. But such responses take time, particularly when issues are divisive or do not require an urgent response. Nonetheless, when it comes to Switzerland, everyone knows that time equals quality.

In drug policy, the four pillars model (prevention, harm reduction, treatment and repression) is a consensual and coherent response of all the Swiss democratic forces to the 90's heroin crisis. Approved by popular vote in 2008, this model has been experimented with since the beginning of the nineties, with excellent public health outcomes.

For cannabis, the willingness to experiment with alternative approaches has been officially discussed and assessed in Switzerland for more than 20 years. Today, in 2018, the situation seems to be a turning point. Various political actors are questioning the current cannabis policy and asking for new ways to address contemporary issues.

Having to bear most of the social and economical costs related to drugs, the debate emerged in cities, at the lowest level of the Swiss governance structure. In fact, the majority of Swiss citizens reside in urban centres. They study, work, and raise their children there. It is thus obvious that urban settings are places where drug issues are the most prominent. In a nutshell, the exchange of illegal substances in the public domain is visible and causes feelings of insecurity among the population.

In an effort to find solutions to these concerns, local level governments democratically decided to handle the problem as pragmatically as possible and proposed to experiment with alternatives to the prohibition.

This movement began in 2010 in the city of Zürich. Since then, each year a new wagon joined the train: Basel (2011), Geneva (2012), Bern (2013), Bienne and Luzern more recently. The case of Geneva is emblematic of how effectively regulating cannabis markets is a non-partisan issue: in 2012 an interparty group held meetings to draft a report demanding the creation of cannabis user's associations to compete with a flourishing and dubious illegal

street-market. These democratic inputs were then formulated as pilot-studies to experiment with the impact of cannabis regulation.

In the meantime, the federal parliament has begun to evaluate cannabis legal framework in terms of public health and public order, and has started looking for more effective means to protect the population, organize the supply and control the quality of the products. Besides the populist right, all political parties support a new debate on the regulation of cannabis even if it's for different reasons: to provide revenue to mountain farmers, to increase prevention effectiveness, or for fiscal and economical reasons. They propose to regulate cannabis like hard liquor or tobacco, or more recently to make it possible to export medical cannabis to countries that have reincorporated it in their official pharmacopeia. All these interventions call for a reinforcement of State control over an otherwise unregulated market. Yet undecided, the regulatory model that could be put in place has to first be experimented with at the local level. Meanwhile, a coalition of civil society groups has formed to launch a popular initiative to regulate the adult and medical use of cannabis.

On the patient side, a federal authorization is needed for the prescription of cannabinoids-based medication. Currently more than 4'000 patients get these prescriptions. Still, for 90% of them, the (very expensive) medications are not reimbursed by health insurances. In parallel, according to unofficial estimates, about 100'000 people treat themselves with cannabis which is illegally homegrown or bought from the black market. In these circumstances, the prohibition model is also problematic for medical practitioners. The capacity to develop and investigate the effectiveness of new treatments to ease or improve the health conditions of patients is constrained by a regulation that does not reflect the opportunities offered by new research on the benefits of cannabinoids for various diseases.

Last but not least, right now Switzerland is experiencing the rapid development of a legal market of low THC/high CBD strains of cannabis. These products seem to meet the needs of an older population who are, among others, looking for pain relief. It also seems that some cannabis users who are dependant on THC can effectively use these products as a substitute, which is very encouraging. However, this makes the regulatory framework even more difficult to understand right now. With the changes in the US and Canada, teenagers in Switzerland have less and less understanding of the prohibition model in place. From a prevention perspective (early intervention and harm reduction), the existing confusion is detrimental to access to health and overall respect of human rights.

For all these reasons, stakeholders in medicine, education and prevention are now urging the political circles to find a new path, beyond pure prohibition, so as to increase the protection of the health of our youth, and provide fair access to medical substances for patients in need.

To conclude, Swiss addiction professionals have great hope in legally regulating cannabis. It would increase the effectiveness of early interventions for vulnerable youth, reduce the stigmatisation of users and thus ease social inclusion while reinforcing peer support.

Thank you for your attention.