

Cannabis Regulation in Europe: Country Report Germany

Heino Stöver, Ingo Ilja Michels, Bernd Werse, Tim Pfeiffer-Gerschel



Legal framework¹

The German Narcotic Drugs Act (Betäubungsmittelgesetz, BtMG), the country's central legislative instrument, regulates sanctions. The German Code of Social Law (Sozialgesetzbuch, SGB) defines the conditions for financing treatment for drug dependence and drug-related illnesses. The BtMG provides for a variety of sanctions which, depending on the severity and type of offence, range from administrative fines to custodial sentences. In Germany, the consumption of narcotic drugs is not subject to sanctions. However, the purchase and possession that usually precede consumption are punishable, since they are associated with the risk of the drugs being supplied to others. The BtMG does not differentiate between different types of drugs, meaning that consumption-related offences involving all types of drugs may be dropped without going to court. However, in practice this option is mainly exercised in connection with cannabis cases (EMCDDA 2015).

Further, the BtMG makes no legal differentiation regarding the 'level of danger' posed by individual drugs (for example, between cannabis and other drugs), leaving it to the courts to determine a hierarchy of drugs based on an empirically graded scale of 'danger to public health' (c.f. on this point EMCDDA 2002). The BtMG is primarily a regulatory and administrative law to regulate the trade in narcotic drugs – for example, purchase, sale, import, export – and prescriptions. Section 31a of the BtMG provides the possibility not to prosecute narcotics offences under certain circumstances, such as when the offender has grown, produced, imported, exported, carried in transit, bought or otherwise obtained or possessed minor amounts of narcotic substances exclusively for personal use and when the guilt is deemed to be minor and prosecution serves no public interest. Almost all *Laender* have introduced threshold values for 'minor amounts' in relation to cannabis, set by guidelines from which public prosecutors and judges may deviate on a case-by-case basis. Despite the existence of these guidelines there is no legal right to insist that the possession of smaller amounts of drugs not be prosecuted. In considering how to proceed with drug offenders across the justice system, it should be noted that the police has no power to exercise discretion and thus all cases of suspected offenders must be reported to the public prosecutor. In some *Laender*, local prevention projects, such as the widespread programme 'Early Intervention with Drug Users Coming to the Attention of Law Enforcement for the First Time – FreD' (Frühintervention bei ersttauffälligen Drogenkonsumenten), are used as a way to avoid court proceedings. They allow for intervention without immediately initiating criminal proceedings. The programme is aimed at 14–18-year-olds but also adults up to 25 years of age who have come to the attention of the law for the first time due to their use of illicit drugs (Görger, Hartmann, and Karim 2010; LWL-Koordinationsstelle Sucht 2017). The FreD project, which emerged from a voluntary support service for drug users with no criminal record, was continued in many *Laender* after the conclusion of the pilot phase. Today, 15 years on, there are around 120 project locations nationwide. The project is broadly accepted by decision-makers and practitioners as well as the target group. The service, specifically aimed at younger users, comprises an 'intake conversation' and a range of courses, and aims to prevent dependence and slipping into criminality. Cannabis use in the general population^{2,3}

Cannabis is the most commonly used illicit drug in Germany by a large margin. The proportion of people who have used cannabis at least once in their lives is 27.2% for adults aged between 18 and 64 (Gomes de Matos et al. 2016) and 9.7% for adolescents aged between 12 and 17 (Orth 2016; Table 1). In relation to the last 12 months, 6.1% of adults and 7.3% of adolescents have consumed cannabis, with the 30-day prevalence rates at 3.1% and 2.2% respectively. Particularly the rates for current use among adolescents are, however, probably massively underrated, since the only nationwide survey on these age groups uses telephone interviews (Werse 2016). In all age groups, the substance was consumed by significantly more men and boys than women and girls .

Over the last 25 years, the (estimated) prevalence of cannabis use among 18–59 year-olds has increased overall. From 1990 to 2015 it increased significantly among men, from 5.6% to 8.7%, and among

Table 1 **Prevalence of cannabis use in Germany**

	Source ¹⁾	Age	Total Prevalence	Male Prevalence	Female Prevalence
Lifetime	ESA 2015	18 - 64	27.2%	31.8%	22.6%
	DAS 2015	12 - 17	9.7%	11.2%	8.2%
12-month	ESA 2015	18 - 64	6.1%	7.4%	4.9%
	DAS 2015	12 - 17	7.3%	8.1%	6.3%
30-day	ESA 2015	18 - 64	3.1%	4.0%	2.3%
	DAS 2015	12 - 17	2.2%	2.7%	1.6%

1) ESA Epidemiological Survey of Substance Abuse. DAS Drug Affinity Study.

Table source: ESA Epidemiological Survey of Substance Use, Munich 2015 (in German)

women, from 2.7% to 5.3%. A similar trend can be observed among 12–17-year-olds (Orth 2016). The highest 12-month prevalence rate in this age group was recorded in 2004 (10.1%). Following a drop to 4.6% in 2011, it once again reached 8.1% in 2014. Between 2014 and 2015, the proportion of users fell to 6.4%. Since the beginning of the 2000s, the trends for both sexes have been parallel, including among adolescents.

Cannabis use in the Laender

In all surveyed Laender, cannabis is the most widespread illicit drug (Piontek et al. 2016). When looking at differences between the Laender, we see that prevalence rates in big cities (“city states”) are substantially higher than in other Laender.

Cannabis use in specific sub-populations

The broad acceptance of cannabis can also be seen from the survey carried out in the Phar-Mon NPS project on visitors to electronic music events (Hannemann et al. 2017). With a 12-month prevalence of 80.7%, cannabis is significantly the most commonly used illicit substance. On average, it has been consumed by users on 12.2 of the last 30 days. The proportion of daily users is 23.7%. The same is true for partygoers in Frankfurt nightlife settings (Kamphausen et al. 2018). In 2018, a study carried out in the MoSyD investigated substance use in the open drug scene in Frankfurt (Werse et al. 2019), found that nearly all respondents had consumed cannabis (96%). The 12-month prevalence rate was 75%. As far as the 30-day prevalence is concerned, the starting value from 1995 is higher than in subsequent surveys, but prevalence has recently risen again to a similar value (69% Cannabis use within the previous 24 hours has also increased to a new all-time high, at 35%).

Patterns, treatment and problematic/high-risk use

Patterns of cannabis use

The Epidemiological Survey of Substance Abuse (ESA) 2015 provided information on patterns of use among adults aged 18–64. Of those who have consumed cannabis in the previous 12 months, 21.8% also consumed at least one other illegal substance in the same period (Piontek et al. 2016). The proportion was highest, at 13%, for amphetamine, followed by ecstasy (9.3%) and cocaine/crack (8.5%). The average

age of first use of cannabis was 19.2 years in the ESA 2015, of which men and younger age groups reported earlier commencement. The majority of 12-month users of cannabis used the drug on less than six occasions (52%), and 14.9% reported use of 100 or more occasions. In the Bavarian ESPAD survey, it was reported that cannabis use among pupils remained experimental in the vast majority of cases (Kraus et al. 2016); 6.9% reported frequent use of at least 20 occasions, boys more often than girls. The average age of first use of cannabis is at 14.8 years. Gender-based differences or differences between types of school have not been observed. Just over one third of adolescents surveyed (38.5%) reported that it was easy or very easy to obtain cannabis, more among boys than among girls. For pupils in Frankfurt, the proportion reporting intensive (daily) use has fallen to 1% from the previous year (3%) (Kamphausen et al. 2018). The proportion of frequent users – those that have taken cannabis at least ten times in the last 30 days – has also declined. The proportion of all 15–18-year-olds surveyed who had used it during school hours fell from 5% in the previous year to 2%. The average age of first use of cannabis in 2017 is at 15.3 years, higher than in every year since 2002. Overall, however, the changes in the intensity of cannabis use do not indicate a clear trend and are not statistically significant.

Reducing the demand for cannabis

Specialist counselling and treatment of the secondary harm from cannabis use in Germany is generally provided on an out-patient basis. In-patient admittance and treatment is provided only for severe health disorders or in cases with a high risk of relapse (Hoch et al. 2015). In Germany, according to a study of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), around 10% of cannabis users needing treatment (daily or almost daily use) receive it. In a comparison with all other European countries, Germany, together with Norway, has one of the highest percentage of people reached (Schettino et al. 2015). The documentation system for addiction prevention, Dot.sys, shows that specific services for reducing cannabis use have continued to grow.

High-risk cannabis use

Based on data from the ESA 2015 and extrapolated to the German population, there are, in the 18–64 age group, some 550,000 people (300,000 men and 250,000 women) with clinically relevant cannabis use according to SDS (Gomes de Matos et al. 2016). This corresponds to a 12-month prevalence of 1.4% and 1% among men and women respectively. Since 2006, the prevalence of clinically relevant cannabis use has remained unchanged for both genders (Kraus et al. 2016b). In the scope of the ESPAD study in Bavaria, problematic cannabis use was recorded in the Cannabis Abuse Screening Test (CAST), with a total of six unfavourable patterns of use surveyed (Kraus et al. 2016a). Overall, CAST established problematic cannabis use for 1.6% of the overall sample, and 7.6% of the 12-month users. Compared to the 2011 survey, there were no changes in the prevalence of cannabis-related problems. The majority (85.8%) of adolescents who had consumed cannabis in the previous 12 months reported not having experienced any of the symptoms or problems included in the CAST. Memory problems in connection with the use of cannabis were reported by around 30% of the 12-month users. Unfavourable patterns of use (cannabis use alone or in the morning) were more frequently reported by just under 10%. In the Hamburg SCHULBUS school survey, cannabis dependence is defined by reaching a threshold of two points on the SDS (Baumgärtner & Hiller 2016). In relation to all adolescents surveyed in 2015, 6% could therefore be classed as cannabis-dependent. This mainly affects male adolescents and older respondents. Trend analyses for Hamburg indicate that the proportion of those affected has slightly increased among both genders since 2007, irrespective of age.

A subjective estimation of dependence is used in the Frankfurt MoSyD survey. This is based on the question of whether the pupils consider that they are currently dependent on one or more drugs

(Werse et al. 2017a). Overall, 2% of respondents reported that they were dependent on cannabis. The proportion of users who were, in their own estimation, dependent on cannabis has fallen in comparison to the previous year.

Synthetic cannabinoids

Specific information on the use of synthetic cannabinoids is available from two school surveys and from one survey in the open drug scene. The prevalence of use among individual groups of new psychoactive substances was included. The results for the category 'herbal blends', which mostly include synthetic cannabinoids, are presented. Of the 9th and 10th grade pupils surveyed in Bavaria, 5.9% had used NPS (New Psychoactive Substances) in the last 12 months in the form of herbal blends (Kraus et al. 2016). Almost one in ten general secondary school pupils used herbal blends in the last year, compared to 3.1% of grammar school pupils and 6.7% of intermediate secondary school pupils. Boys smoke herb mixtures somewhat more often than girls (6.5% vs 5.2%). In the Frankfurt MoSyD survey in 2015, a total of 6% of the respondents aged 15–18 reported having consumed a herbal smoke blend at least once (Werse et al. 2017a).⁴ For 2% this was also the case for the previous 30 days; and 2% of adolescents reported frequent use (more than five times in their life). The lifetime prevalence of use of herbal smoke blends has remained unchanged from the previous year and thus is below the 2009–12 values. Compared to respondents from the Bavarian survey, students in Frankfurt of the same age group (15 to 16) showed a substantially lower rate of lifetime use (3% vs. 8%). In the MoSyD scene study in the open drug scene, NPS play only a marginal role overall (Werse et al. 2017). Synthetic cannabinoids or 'herbal smoke blends' were the most tried, at 23%, and 7% had consumed them in the last 12 months. The 30-day prevalence is at 1%.

Cannabis as Medicine

In March 2017, the 'Cannabis as Medicine' Act came into force. It regulates the use of cannabis-based pharmaceuticals in individual cases as a therapeutic alternative for patients with serious diseases. The costs of treatment can be reimbursed by the health insurance providers on request; this also applies for cannabis in the form of dried flowers. The production of cannabis for medicinal purposes will be monitored by the state; the German 'cannabis agency' has been set up for this purpose⁵. Accompanying data will be collected in order to gather further information on the effects of cannabis.

A survey by the SCM (self-help network cannabis medicine) from January 2018 shows that most former license holders for the use of cannabis flower buds from the pharmacy according to § 3 Abs. 2 BtMG have not been prescribed cannabis with a reimbursement by health insurance.

The current status of the survey with four alternative options after the participation of a total of 581 former license holders (from then on just over 1,000) offers the following picture:

- I cannot find a doctor who is ready to prescribe (51%)
- My doctor is ready to prescribe me cannabis, but the health insurance does not cover the costs (25%)
- Now I get cannabis on prescription and the health insurance pays (21%)
- I have a cost commitment from the health insurance, but cannot find a doctor who prescribes me (3%)⁶

A reply from Andrea Nahles (now head of the social democratic SPD) to the letter from the SCM states: 'It is clear that questions of cannabis policy will also play a role in this [coalition negotiations]. I will gladly try to work for your cause, even though I know that will be a tough job with the [Christian Democrats] Union'.

Soon after, the new coalition agreement was set up, and made no mention of cannabis.

An answer by Marlene Morter, Federal Drug Commissioner, dated 5 February 2018 states:

"The Federal Ministry of Health and I receive up-to-date information on the implementation of the cannabis-as-medicine law. There are regular consultations with the medical associations and the health insurance companies. I will continue to follow developments closely and work to ensure that the law 'cannabis as medicine' meets its claim to contribute to the better care of critically ill patients."

Application of the new law

In March 2017, doctors prescribed 564 cannabis-containing preparations or cannabis flowers in recipes on 488 occasions. In addition, around 3,100 finished medicinal products containing natural or synthetic cannabinoids were released. Previously rejected:

- to mid-2017: 25–50%
- at the end of 2017: 36%
- applications 16,000, of which 60% approved

In 2016, there were 26,040 Sativex prescriptions.

The (health insurance) 'Barmer' with nine million patients insured reported that in the initial phase of the law still two to three applications per day were submitted. There are now eight applications per day, and rising trend. Approvals and rejections held the balance 3.3 million insured 223 filed a claim for medical cannabis, 130 of which were approved and 93 refused, of which 5.8 million were insured at DAK at the beginning of May with approximately 600 applications and inquiries Lower Saxony (260 submitted applications / 50 approved), AOK Plus (240/85), AOK Hesse (164/45), AOK Rheinland / Hamburg (177/113), AOK Rhineland-Palatinate / Saarland (100 to 200 / no answer) , AOK Nordwest (74/43) and AOK Sachsen-Anhalt (55 / no information) received more than 1,100 applications together. (ÄrzteBl 2017, 114 (25))

'More and more patients in Germany are turning to their health insurance companies to get reimbursed for the costs of cannabis: according to a report (the TK, Barmer and AOK), the number of applications has risen to more than 13,000'. Of applications (to the following health insurance companies), AOK: 7,600, 64% approved; and BARMER: 3,200, 62% approved. (SPIEGEL Online, 10 January 2018). The health insurance 'Techniker Krankenkasse/TK' (covering around 10 million people) issued a report in May 2018 (Glaeske/Sauer 2018) about the therapeutic potential of cannabis, the figures of cannabis-related recipes and the indications of diseases for which doctors prescribed cannabis in the first year after the new law had been issued – 2,900 patients applied and 2,200 (64%) applications had been approved (costing about 2.3 million Euros). However, in a press conference, when the report was released, it was claimed that there are many questions regarding indications, dosage, forms of application etc. The most frequent indication to prescribe cannabis has been as a pain killer. A year since its passage, the new law still lacks clarity. While the number of prescriptions went up far

more than many had estimated, nothing had been regulated regarding the situation of patients who are willing to grow their own medication (Plenert 2018: 55).

German Key Study on Cannabis 'CAPriS'⁷: What it says and what it does not

- Impairments, and clearly in memory, attention and psychomotor control.
- Regular smoking of pot also leads to global deficits in cognition, especially memory. However, the picture of these limitations is not as consistent as with the acute effects. A decrease in intelligence as a result of regular cannabis consumption could not be proven. Cognitive functional deficits due to chronic consumption seem to be temporary.
- The influence of the entry age on long-term cognitive disorders could not be conclusively clarified. International standards on key cannabis use variables are lacking to improve the comparability of studies and their outcomes.
- Regarding the organic consequences, the study summarises: Chronic cannabis use increases the risk of respiratory symptoms. Acute cannabis use causes dilated blood vessels, high blood pressure and accelerated heart rate. A risk assessment of the cardiovascular effects associated with chronic consumption (ischemic infarction, myocardial infarction, atrial fibrillation) cannot take place on the basis of the available evidence.
- Chronic smoking apparently causes structural changes in the brain, especially in the amygdala and in the hippocampus, i.e. structures important for memory formation. Above all, changes of volume and form as well as density of the grey matter were shown. Perhaps these changes 'are directly related to the THC: CBD ratio of cannabis preparations consumed.
- Cannabis use during pregnancy may disturb foetal development. In addition, there is some evidence of disrupted child development in visual cognitive skills, attention and increased cannabis use in adolescence.
- Acute increases in the risk of traffic accidents, especially when mixed with alcohol.
- Frequent cannabis use in early adolescence often leads to dropping out of school and fewer academic degrees. Too few empirical data are available regarding cannabis-related abnormalities in social behaviour and offending.
- The risk of anxiety disorders and depression is slightly increased by cannabis use and dependence. The risk of psychotic disorders also increases.

(Source: Doctors newspaper online, 28 November 2017)

The study does not set out to justify ideologically motivated (criminal) restrictions on the consumption of adult recreational users.

Cannabis for recreational use

The background of the debate in Germany – International Conventions

In a statement by Werner Sipp (until May 2017, President of the International Narcotics Control Board, INCB, until May 2017), he said:

In the special topic on the regulation of the use of cannabis for non-medical purposes, the Board reiterates that the Parties to the 1961 Convention have assumed the obligation to limit exclusively to medical and scientific purposes production, manufacture, distribution, use and possession of drugs ...To this rule no exception is possible...It is now up to State parties to determine how to respond to the developments in those countries which disregard the treaties by permitting and regulating the non-medical use of drugs. (March 2017)

Viroj Sumyai, President of the International Narcotics Control Board (2018), stated:

"The Parties to the 1961 Single Convention on Narcotic made the decision to limit exclusively to medical and scientific purposes the production, manufacture, export, import, distribution of, trade in, use and possession of drugs. In a number of countries, recent developments are not in conformity with the treaties, in particular developments concerning the use of cannabis for non-medical purposes. INCB remains engaged in a dialogue with the concerned governments towards ensuring compliance with the treaties, to which they are party. INCB reminds State Parties that they themselves have decided to subject cannabis to the highest levels of control under the treaties, in recognition of the public health risks associated with its abuse. It is now up to State parties to determine how to respond to developments in some States in which the non-medical use of cannabis has been or is being legalized and regulated, which is in clear contravention of the conventions." (statement at the Economic and Social Council Coordination and Management Meeting on 6 July 2017 in New York)⁸

‘Not Watching Teenagers Decline Their Future’

In an interview, Marlene Mortler (Federal Government Drug Commissioner), said:

The whole debate is too half-hearted for me. Our criminal procedural law provides the judiciary with all means to suspend criminal proceedings against people who have small amounts of cannabis and other illicit drugs for their own use. The question is, however, whether one cannot use the moment in which someone stands out because of personal use even more meaningfully than before. And indeed, to offer help.

Our problem is not that all drug addicts ended up in prison, but that they have taken drugs too long, if they start a treatment at some point. In Portugal, an interesting model has been developed. There, drug users who have been picked up by the police are given the choice: help or sanction. That's a good approach. (Die Welt)⁹

New political developments of cannabis policy

In Germany, there is still a controversial public and political debate on dealing with cannabis use. Repeatedly, particularly psychiatrists and other medical experts make statements like ‘Cannabis smoking makes you stupid, cannabis use promotes psychosis, cannabis use among adolescents inhibits the maturing of the brain’ etc.

Yet many doctors have patients, some of whom vehemently demand cannabis for pain relief, says the president of the German Pain Congress in Mannheim, Winfried Häuser. ‘Practices are being overrun by people with false expectations’, he says. ‘The patients believed that cannabis was an effective painkiller available that they had been denied so far’.

‘According to Charité physician Stefan Gutwinski, several studies have shown that prolonged

consumption can reduce the cognitive performance of adolescent cannabis users.' ('Berliner Zeitung,' 04.01.18).

As mentioned, these are typical opinions from the medical sector, which usually include the call to stick to the punitive approach in drug policy. However, a) there is also a growing number of physicians, psychiatrists etc. who agree with more liberal approaches in drug policy, and b) for at least the last eight years, a vast majority of German citizens support the use of medical cannabis (TNS Emnid 2010), which is also true for German medical doctors, of whom even 53% are in favour of legal regulation for recreational cannabis (DAZ.online 2018).

On the other hand, there is a large majority of experts from all relevant fields (e.g. social science, law, criminology, psychology, drug services, etc. including some important persons from law enforcement) who call for decriminalization and/or legal regulation. For instance the head of the Association of German Criminal Investigators recently stated: 'The ban on cannabis is neither intelligent nor purposeful' (ZEIT online, 2018).

A majority of Germans oppose the legalisation of cannabis. In a 2017 survey, 63% spoke out against it. 'The demand that adults should be able to acquire cannabis for personal use as an intoxicant in selected stores, is supported by one third (34%) of German citizens', as shown by the survey (Rheinische Post 2017). However, there are considerable differences between different surveys from different institutes and different ways of asking, e.g. in a slightly older survey, 39% tended to agree with the statement 'Cannabis should be legal and regulated for adults, such as specialty stores like Colorado', while 58% tended to disagree (Infratest Dimap 2017). 52% agreed that the possession of small quantities of cannabis should no longer be prosecuted. One year later, the same institute found out that consent to legal regulation increased to 46%, while 52% disagreed (Infratest Dimap 2018). Another survey (Die Zeit 2017) detected a majority of respondents (57%) who are in favour of legalisation.

At the political level, there has been for some years a renewed debate in the German Bundestag, starting with various applications by Bündnis90 /Die Grünen and Die Linke and liberal statements by some social democrats in the last election period. After the last election, during the negotiations on a so-called 'Jamaica coalition', FDP and Bündnis90 / Die Grünen demanded that cannabis model projects should be implemented, even though the CDU/CSU opposed it. Since the dealings failed due to the FDP's exit, it is unclear whether a compromise could have been achieved on this issue.

The new coalition agreement between CDU/CSU and SPD (conservatives and social democrats) contains nothing on the subject of cannabis policy.

The new Bundestag soon had to discuss requests and applications on that issue from three parties (Die Grünen, Die Linke and FDP): German Bundestag printed matter 19/310, 19th electoral term 21 December 2017 Response of the Federal Government to the 'Small Request' by Members of Parliament (Wieland Schinnenburg, Konstantin Elias Kuhle, Dr. Marie-Agnes Strack-Zimmermann and the FDP fraction) – printed matter 19/181 – from November 2017. Controlled delivery of cannabis.'

In 2015, the Federal Institute for Drugs and Medical Devices (BfArM) adopted a rejected application from the Berlin district of Friedrichshain-Kreuzberg for a controlled cannabis-dispensing project through the states of Bremen and Thuringia (see Bundesratsdrucksache 500/17). Currently, Münster and Düsseldorf are trying to implement pilot projects for a controlled levy approved although the application for a model project in Münster was also rejected by the BfArM. The application from Düsseldorf is still pending at the time of publication.

The response of the Federal Government of 21 December.2018 to the above-mentioned Small Questions by Members of Parliament: 'The federal government rejects for reasons of health protection of the

population a legalization of the use of cannabis for pleasure/recreational purposes. The health hazards of cannabis abuse especially among adolescents are medically proven. Even recent studies have rated cannabis as not safe. Reference is made to a number of acute and long-term risks of abusive cannabis use. After that, prolonged use can lead to serious physical and mental disabilities. ' (...) 'The preventive effect of the punitive threat restricts the availability and spread of cannabis. Thus the prohibition serves the protection of the health of the population and the individual.'

There was then another 'Small Request' from Bündnis90/Die Grünen on the 'Impact of Cannabis Prohibition on Health Protection'¹⁰, to which the Federal Government replied on 20 February 2018: 'As already stated in the Federal Government's Commentary on the Small Request of the FDP Group 'Controlled Delivery of Cannabis' (BT-Drs. 19/310), the Federal Government rejects legalising the use of cannabis for enjoyment purposes for reasons of public health protection. The health hazards of cannabis abuse, especially among adolescents, are medically proven'. 'A considerable number of people suffer from a problematic use of cannabis in health consequences that cause them to visit the outpatient and inpatient facilities of the addiction treatment system.'

Applications by the FDP for cannabis pilot projects and the party Die Linke to allow possession of cannabis for personal use, as well as a Bündnis90/Die Grünen bill for a cannabis control law, were the focus of a 45-minute debate on 22 February 2018. All three papers were subsequently referred to the Health Commission for guidance.¹¹

FDP application

In its application,¹² the FDP advocates model projects for legal cannabis sale. The fight against cannabis consumption by repression has failed. It is therefore time to break new ground in addiction prevention, the group argues. The submission calls on the Federal Government to lay the groundwork for the approval of model projects for the controlled sale of cannabis for recreational use. Previous applicants should be actively supported. Other countries and municipalities wishing to implement such a model project should be supported and advised.

Draft Bill of the Bündnis90/Die Grünen (Green Party)

The Greens Bill (19/819) envisages removing cannabis from the criminal law provisions of the Narcotics Act and instead opening a strictly controlled legal market for cannabis, the only way to effectively monitor the ban on selling cannabis to minors. The Greens want the whole cannabis supply chain to be regulated from cultivation to wholesale, import, export and retail. The sale to minors must be banned and this ban must be effectively controlled.

The group argues for a minimum distance of the cannabis shops from schools and youth institutions, for a prohibition of advertising and for access only with proof of age. The Bill would specify information about the ingredients and their concentration. Extensive leaflets, warnings and quality standards are necessary. The cannabis retailers would have to comply with numerous requirements regarding the sale and training of their sales staff. In addition, a cannabis limit should be introduced similar to the alcohol limit.

Request of the party 'Die Linke' (Left Party)

The Left regards the prohibition policy in the cannabis field as failed. Cannabis is the most commonly used illegal drug, it says in its application 'Health Protection Instead of Law Enforcement - For a

Progressive Approach to Cannabis Use¹³. This contrasts with a prohibitive drug policy that is ideologically motivated and bypasses the realities of citizens' lives. The Group calls for legal possession of cannabis for personal use, legal cultivation of up to three plants, enabling of cannabis social clubs and reinforcement of the pillars of drug prevention, advice and treatment in drug policy, against the pillar of repression and stigmatization.

How did the debate go? Some relevant statements

In favour of the request

Dr Wieland Schinnenburg (FDP)¹⁴

'The repression-based cannabis policy in this country has failed, for several reasons. First, it failed because, after decades of prosecution, several million people still consume cannabis. On the other hand, it has failed because these people are also endangered by the fact that they have to get cannabis on the black market and often get cannabis there with impurities. Thirdly, it failed because in this way the judiciary and police are unnecessarily burdened with work. (...) The Free Democrats decided a few years ago: we want a different drug policy. We want a controlled release of cannabis. Attention: controlled delivery, not release. We do not want cannabis on the shelves anywhere in the supermarket; no, we want cannabis to be controlled in pharmacies and other specially licensed stores and delivered to adults in a manageable amount.' ... 'We need a drug policy that focuses on people's interests rather than, as is currently the case, on dogma.'

Sabine Dittmar (SPD)¹⁵

'It is undisputed that the use of cannabis brings with it health risks and an addictive potential, as well as alcohol and nicotine. (...) All the more worrying is the finding of the German main office for addiction issues that the illegal procurement market is used by broad social groups and is available in its present form also to children and young people without restriction. (...) Therefore, it should give us, powerful thinking, if a significant part of experts from the field and research, ie associations and organizations, people who are involved day in, day out with victims, but also well-known criminal lawyers and Last but not least, the Bund Deutscher Kriminalbeamter comes to the conclusion that our currently practised prohibition policy has failed. (...) In my party has long been controversial and passionate about the correct handling of the drug problem discussed. I do not want to prevent that there are still voices - thank God less and less - who are speaking in favor of a restrictive drug policy. I am grateful that the progressive voices in my party call for people to be guided by social realities and to break new ground in drug policy. In the Health Working Group, we worked closely with the policy makers from the Legal Affairs Group and the Internal Affairs Committee to deal intensively with the topic and also drafted a corresponding position paper. Together, we spoke out in favor of allowing communities to initiate model projects on the regulated delivery of cannabis to adults and to evaluate the results. (...) That the threat of punishment as a way of prevention has clearly failed, the numbers show.'

Dirk Heidenblut (SPD)¹⁶

'I have already found many reasons why I am grateful that the FDP, the Greens and the Left have submitted these applications. I am grateful that we can move towards a sensible new drug policy. I am grateful because we can discuss the topic. And now I'm even more grateful, because what we can do now, on top of that is a training for the CDU / CSU and AfD colleagues in drug policy and addiction issues. (...) All the arguments put forward against a controlled release are conversely arguments that can be used excellently for a ban on alcohol and tobacco. (...) I did not say that there are no problems and that there are no health costs when trying to help people with different addictions to cope with the addiction. (...) Because we drive cannabis users into illegality, and because we expect people to catch up on other things in procurement, we're raising health care costs in that country and making it worse. (...) It is good and right that we return to the question of how to run a drug policy, especially with regard

to the use of cannabis, which is really there for people who do not criminalize people but ensure it that they are protected and not endangered. That would be the right way; because that would be a sensible protection of minors.'

Niema Movassat (Die Linke)¹⁷

'We want to decriminalize the consumption of cannabis and allow a controlled delivery. We say: It must finally come to an end that people are punished just because they have a bit of cannabis. (...) What we experience today in dealing with cannabis users is not allowing adult people to decide independently about their lives. (...) The current cannabis policy is an incredible waste of police and judicial resources. (...) It is, of course, true that people who are addicted to certain drugs cause costs in the health system. But that is also the case with alcohol and tobacco. In this case, this problem is not solved by prohibitions, but by health offers. (...) The previous prohibition policy is harmful to health; because by criminalising the state completely abandons the control and regulation of the cannabis market.'

Dr Kirsten Kappert-Gonther (Bündnis90/Die Grünen)¹⁸

'It is quite clear that the prohibition policy has failed on the whole. The black market is flourishing, and there is no health or youth protection on the black market. Reason and evidence finally demand the controlled release of cannabis. To this end, we today present a comprehensive bill to the Greens. Our bill regulates everything from cultivation to sale, always with the health and youth protection firmly in view. (...) We are open to joining forces with everyone in the house who wants a sensible, progressive drug policy. (...) Why am I as a specialist in psychiatry and addiction with at least 20 years of practical experience so vehemently for the controlled release? I do, because under the conditions of prohibition - that's the joke - it comes to the problems you describe here. (...) We do not need new pilot projects.'

Against the request:

Stephan Pilsinger (CDU / CSU)¹⁹

'As the recently published CaPRis study by LMU Munich shows, cannabis use can lead to mental disorders such as anxiety disorders, depression, suicidality, bipolar disorder and psychosis. (...) The fact is that cannabis use leads to versatile cognitive impairments. (...) Almost all serious studies are more than clear: Intensive cannabis use makes stupid! (...) The fact is that the social consequences of cannabis use are not negligible, as the CaPRis study also confirms. Early onset and frequent cannabis use in adolescence are associated with low educational opportunities. (...) It is also claimed that cannabis does not lead to dependencies or that they are at least negligible. But the fact is that (...) that in Europe, the number of people starting addiction treatment for cannabis-related problems has risen from 43,000 in 2006 to 76,000 in 2015. (...) I do not want to wrongfully adore me. I'm concerned with people's health. That's why I want a world with less than more drugs.'

Alexander Krauss (CDU / CSU)²⁰

'I was in Colorado a few months ago, a federal state that liberalised drug policies four years ago, and drove home with two findings: drug use has increased and adolescents are finding it easier to use drugs. (...) I was in San Francisco too. (...) I was shocked by this city. A walk through the streets smelled of cannabis and urine everywhere. There were hundreds of homeless people in this city who were treated like human garbage. I do not want this image of man and the effects of drug policy in Germany. (...) Every week in the US there are 1,000 deaths from opiates. The president proclaimed the health emergency. There is a real drug epidemic. That's the result of trivialising drugs. Those who take hard drugs have started their drug career mostly with cannabis. Therefore, a liberalised drug policy leads to more drugs, more suffering and more drug-related deaths. (...) Cannabis harms your health. That's very clear. Cannabis harms young people. Their applications harm both the health and the youth. Therefore, we will reject it with a good heart.'

Dr Axel Gehrke (AFD)²¹

'From a medical point of view, it's pretty clear. Cannabis and derived products are psychoactive substances that pose a particular threat to adolescents in their maturation process, and indeed the younger they are. (...) Rather, it is to be feared that cannabinoids are to be regarded as a starter drug for harder gaits. (...) Do not open the Pandora's box! (...) Actually, alcohol and nicotine should also be banned; that is very clear. But we have no reason to admit a third drug, and that's what it's all about. (...) We already have a very liberal drug law. We have the release of cannabis for medical purposes. This is already controversial enough and, if at all, secured for only a few indications. But at least: It is possible. The fact that the possession of cannabis is subject to criminal prosecution has so far shown clearly good, dissuasive effects. It is repeatedly disproved misconception that legalisation of the drug market is dehydrated. The opposite is the case: Dealers resort to cheaper material and tougher drugs. The Netherlands sends its regards.'

Rudolf Henke (CDU / CSU)²²

'The positioning of the Greens and the FDP was the subject of exploratory discussions for a coalition treaty (Jamaica Coalition). But all the points were yellow, so they were open points. The termination of negotiations by the FDP has meant that we will never know what the exploratory talks on this point would have been. (...) For the first time, we also do not notice the tension that we have as a Union with the SPD on this point; that already existed in the last legislative period. (...) The dangerousness of drugs is in fact decided not only on the question of legality / illegality, but it results from the Wirkmustern. (...) One of the parts that we are going to discuss concerns the question of whether we want to lift the bans on model testing or, in general, as others ask for it. (...) I think we have to take note of the fact that there are four or five Scandinavian countries where even less regularly than in Germany. But especially the states that deliver cannabis in a controlled manner, who maintain a very careless handling of cannabis and provide little prevention and offer little help, such as the Czech Republic, Portugal, Spain or Italy, have significantly higher consumption rates. (...) The fact that we have an unsolved problem in the area of tobacco and alcohol does not change the fact that it is wrong to make a completely unsolved problem in the area of cannabis from a moderately to poorly controlled problem. (...) I think we need the committee deliberations. I think we should not smoke her with one. I think we should not lead them with an ideological predestination, (applause by members of Bündnis90/Die Grünen), namely, 'the narcotics law must go away.'

NGOs working for a cannabis regulation

In Germany, there is growing resistance to cannabis prohibition. There are several NGOs working on the topic of regulation at different levels. The largest one, 'Deutscher Hanfverband (DHV)²³ is aiming at a legal, user-friendly regulation of the cannabis market, which should cover home-growing regulation, legal production, distribution and sale, and should take youth protection into account. Furthermore, the DHV is campaigning against the discrimination and stigmatisation of cannabis users as well as fighting for the medical use of cannabis and promoting cannabis as raw material. DHV has a website with all topics related to cannabis (driving license, relevant information for users etc.) produces brochures and leaflets, and organises conferences on the topic of cannabis.

Another key NGO is 'akzept e.V. – Bundesverband für akzeptierende Drogenarbeit und humane Drogenpolitik',²⁴ which is the national umbrella organization of organizations working in the harm reduction field and is working on the regulation of all drugs. Annually, akzept together with Deutsche Aids-Hilfe²⁵ and 'JES'²⁶, edits the alternative report on drugs and addiction/'Alternativer Drogen- und Suchtbericht (ADSB)²⁷. This report is probably the most widely read and discussed alternative to the governmental drugs report. The ADSB is usually released a few days before the official governmental report and attracts widespread media attention (even in prime-time news²⁸). In most of the reports over the last five years, the criminalisation of drug users is a key topic of critique.

The process of criminalisation of cannabis users

In May 2018 the Federal Criminal Police Office released the offences against the narcotics law.

	Heroin	Kokain	Crack	Amphetamin	Ecstasy	Crystal	LSD	Cannabis	Sonstige
2008	28.177	16.173		26.791	6.511		305	132.519	10.815
2009	27.330	16.838		28.257	4.921		231	130.963	12.114
2010	24.574	11.490	2.770	32.067	3.436		218	128.868	12.079
2011	18.589	11.480	2.450	38.827	3.750		255	131.951	13.786
2012	13.902	12.017	1.812	38.706	4.908		244	134.739	14.676
2013	12.064	11.949	2.180	42.594	5.903		337	145.013	16.577
2014	11.305	11.489	2.422	33.520	7.106	12.137	466	161.040	18.909
2015	10.630	11.088	2.084	33.499	8.755	12.180	501	163.702	21.215
2016	11.051	13.379	2.018	34.146	10.745	11.071	704	177.776	22.779
2017	11.206	15.768	2.538	36.145	11.394	11.335	905	198.782	21.876

Table 2: Offences against the narcotics law. Source: Federal Criminal Police Office 2018

Offences related to cannabis (198,782) account for the vast majority of the total drug-related offences of 330,580 in 2017, an increase of 9.2 % over the previous year. The police force is making enquiries about 263,255 individuals who committed drug-related crimes in 2017. Overall, drug-related crimes accounted for 6 % of all criminal offences in Germany in 2017 (Bundeskriminalamt 2017, p.6).

These figures illustrate that the police and law-enforcement agencies continue the same level of involvement, despite an ongoing debate about the need for and appropriateness of the drug prohibition.

	Heroin	Kokain	Crack	Amphetamin	Ecstasy	Crystal	LSD	Cannabis	Sonstige
2008	20.490	12.895		22.509	4.598		221	100.651	8.022
2009	20.125	12.316		22.387	3.511		149	102.096	9.105
2010	18.171	8.106	2.391	25.695	2.577		162	99.562	9.216
2011	13.609	8.043	2.156	31.330	2.865		173	101.186	9.216
2012	10.096	8.832	1.693	30.928	3.770		160	106.215	11.643
2013	8.978	8.706	1.992	34.679	4.479		268	117.443	13.238
2014	8.806	8.623	2.310	28.119	5.405	9.489	377	131.130	15.255
2015	8.283	8.546	1.898	28.095	6.643	9.880	402	132.745	17.358
2016	8.654	10.370	1780	28.891	8.111	8.962	547	145.915	18.696
2017	8.691	12.209	2.337	29.907	8.415	9.208	693	166.236	17.648

Table 3: General Offences against the narcotics law. Source: Federal Criminal Police Office 2018

A more detailed analysis of drug offences makes clear that cases that include quantities for personal use (255,344) account for around 80% of all drug offences. This number has increased by 10.1 % compared to the previous year's figures.

Looking at the historical development (1971–2016) of the percentages of general offences recorded against the narcotics law compared to the total number of drug offences (Table 3), more three of four cases (76.6% in 2016) refer to possession of quantities for own consumption.



Table 4: Historical development (1971–2016) of the percentage of general offences against the narcotics law compared to the total number of drug offences (source: Hans Cousto/Heino Stöver 2017)

Cannabis-related drug offences for personal use account for 178 cases per 100,000 inhabitants. Trafficking and smuggling accounted for 38 cases in 2016, whereas growing and imports of cannabis range almost to zero (Table 5).

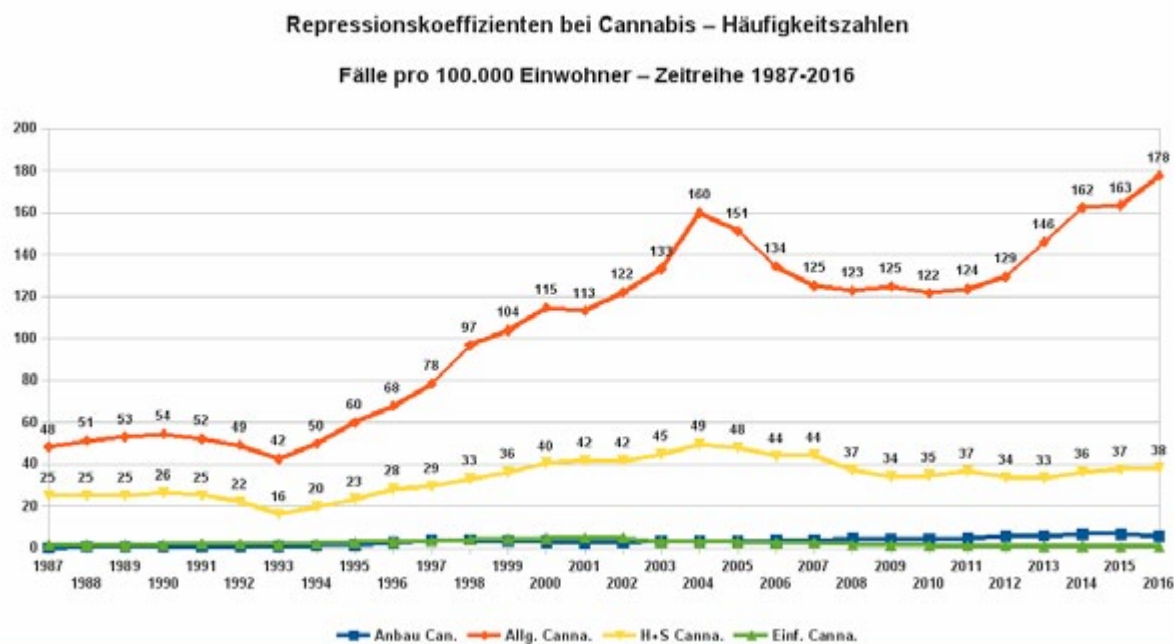


Table 5: Cannabis-related cases per 100,000 inhabitants (1987–2016) as a percentage of general offences against the narcotics law compared to the total number of drug offences (source: Hans Cousto/Heino Stöver 2017).

The percentage of cannabis-related offences out of the total number of drug-related offences has risen since 1992 from 39.3% to 60.3% in 2016 (Table 6).

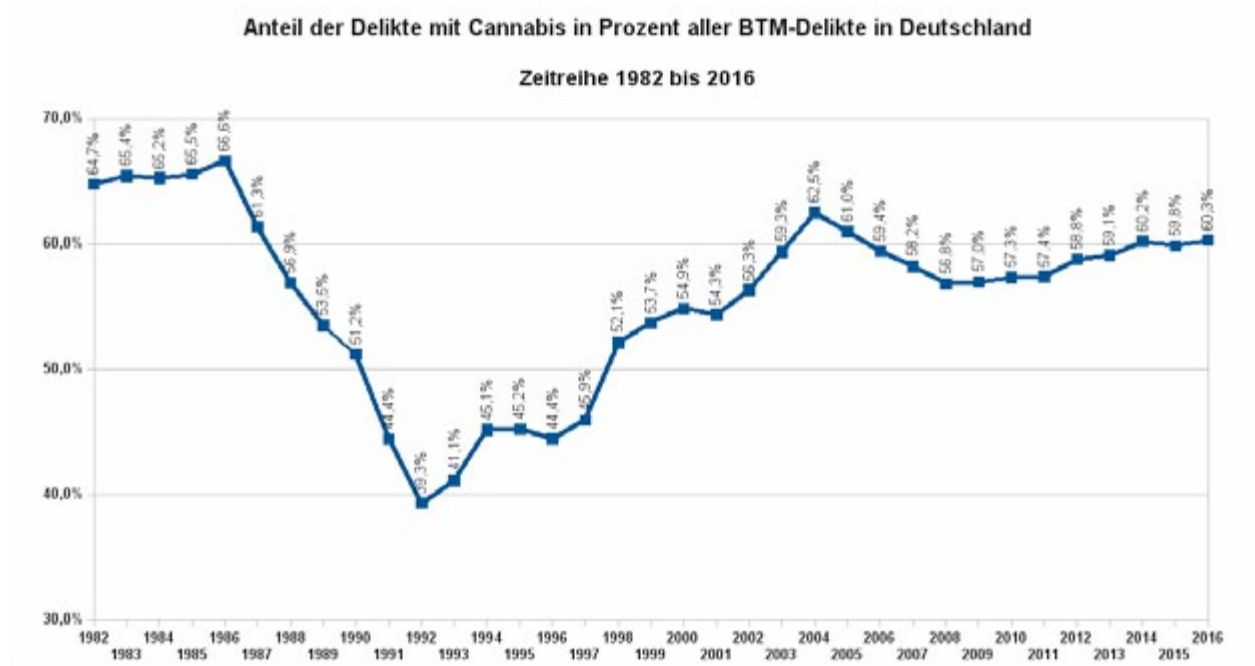


Table 6: Percentage of cannabis-related offences out of the total number of drug-related offences (192–2016).

Public Hearing in the Health Committee of the German Bundestag (27 June 2018)

For some experts, the discussion on the prohibition of cannabis in the Health Committee of the Bundestag felt like ‘Groundhog Day’: The arguments have been the same for decades. Both legalisation advocates and opponents are convinced that their policy would contribute to health and youth protection. However, the debate has been buoyed by relatively recent findings from other countries, such as the US State of Colorado and Uruguay, which have already legalised.

What was the hearing about?

Specifically, it was about the proposals of the parliamentary groups FDP (Liberals), the Left and Green Party to deal with marijuana. The three opposition parties envisage a loosening of the ban to varying degrees. While the FDP proposal demands only isolated model projects for controlled delivery, the Left want complete impunity for the possession of up to 15 grams of cannabis. The Greens have drafted a comprehensive cannabis-control law designed to regulate the entire marijuana supply chain to consumption, which was put on the agenda for the second time after 2015. As yet it is unclear when the three applications will go to a vote. The three groups agree that the black market will be suppressed in the case of a controlled levy. The opponents of legalisation predict the opposite effect.

Experts rate international experiences differently

Dr Erik Bodendieck (German Medical Association) thinks that if cannabis is legalised the dealers would turn more to children (without any proof for this). He also took the view that the legalisation debate

fuels a 'trivialization of the highly problematic substance', which leads to increased consumption.

Prof. Dr Ursula Havemann-Reinecke (an addiction physician in the German Society of Psychiatry, Psychotherapy and Neurology, DGPPN) pointed out that according to the World Health Organization (WHO), 10% of regular cannabis users develop cannabis-related disorders and other comorbid psychiatric disorders, especially in mixed alcohol and tobacco use.

Addiction physician **Prof. Dr Rainer Thomasius** from the University Medical Centre Hamburg-Eppendorf warned that socially disadvantaged children are at particular risk if legalisation takes place. He also claimed that consumption in the US State of Colorado would have increased dramatically since legalisation. In addition, cannabis-associated poisoning emergencies had increased. These are 'very unfavourable developments', which he does not want for Germany.

The State of Colorado, however, provides different information. According to the official report of the Ministry of Health, adolescent consumption has even fallen slightly after legalisation and remained constant among adults. The fact that more cannabis-related emergencies are reported could also be explained by the decriminalisation of the drug.

The addiction physician **Konrad Cimander** (Hannover), on the other hand, considered that cannabis use was not very problematic from his clinical experience, was often used to self-medicate patients with mental disorders, and that criminal proceedings and experiences of imprisonment were more harmful. The illegal procurement leads to the uncontrollability of cannabis products.

The head of a drug-treatment facility in Saxony, **Uwe Wicha**, argued that as soon as a drug was legally available, the availability in the society would increase – not only for consumers actually addressed by the legislation, but for all members of society: children, teenagers, pregnant women, people with mental health problems. There would no longer be any difference between cannabis and alcohol.

The Hamburg-based addiction physician **Dr Hans-Günter Meyer-Thompson** explained that in the last 20 years of the current prohibition regime, consumption has increased, the black market substances have become more harmful, the 'current drug policy does more harm than good' and that cannabis use would be particularly harmful if it starts early, with high doses and high frequency of use. This is also the position of addiction experts in 'Deutsches Ärzteblatt'. The harm for adult, occasional consumers is 'comparatively low'. Prevention work is made more difficult by this policy. He opted for the permission to carry out model experiments as a first step.

This view was also supported by **Dr Raphael Gaßmann** from the German Centre for Addiction Issues (DHS). He also addressed the lack of evaluation of the effects of the Narcotics Act, although this was required by the Federal Constitutional Court 25 years ago. 'We urgently need to do something'. A repressive drug policy does not lead to a reduction in consumption, as shown in a study by the European Monitoring Center for Drugs and Drug Addiction (EMCDDA). In his speech, he referred to the cannabis 'flashback' thesis that have been discredited by scientists many years ago, but: 'I feel like I'm on a flashback when looking at all the arguments that have been exchanged again and again in many commission meetings'.

The economist **Prof. Dr Justus Haucap** (Dusseldorf) held that because cannabis –for non-medical purposes – may be hazardous to health, many economists advocate effectively removing organised crime from the market introducing strict legal regulation of the market. In fact, cannabis is readily available, especially for young people. The consumption of cannabis products had not fallen noticeably under the prohibition policy. This applies in particular to problematic use among young people and with intensive users.

The former police chief of Münster, **Hubert Wimber**, stated that, although there is no solid evidence that the black market for cannabis would largely disappear in the event of legalisation, experiences

from Colorado show that this is a likely scenario. According to the Drug Policy Alliance (DPA), cannabis-related arrests have halved and all drug-related offences have fallen by 23% two years after legalization. According to the report, the developments are comparable to those in the US states of Washington, Oregon and Alaska, which have also legalised cannabis.

‘Incredible’ drug policy

Legal expert **Prof. Dr Lorenz Böllinger** of the University of Bremen interjected that the threat of punishment was the wrong way to reduce consumption. He has represented this view for years. In addition, cannabis should not be prosecuted in his view, since the users harm only themselves but not others. And damage caused to third-parties is a decisive criterion in criminal law. Law enforcement, on the other hand, promotes organised crime, whose main area of activity is drugs. ‘The state must not harm its citizens’, he stressed.

Prohibition also stands in the way of prevention, said **Kerstin Jüngling**, head of the addiction-prevention office in Berlin, because criminalisation scares schools away from a balanced education on cannabis. In addition, prohibition misses its purpose in her opinion: ‘I think today’s drug policy is not credible for the young’. For years, Jüngling has represented the view that criminalisation does not work.

‘Schizophrenia between cannabis and alcohol’

‘I am a flashback victim, too’, stated **Georg Wurth**, managing director of the German Hemp Association (*Deutscher Hanfverband/DHV*). In recent decades, drug policy showed no success, because young people’s consumption has increased. The original aim of protecting the young was therefore wrong. Moreover, prosecution requires high costs and criminalises predominantly adults, at least 90% of whom showed no pathological patterns of use.

In the meantime, changes are taking place in German politics, said Wurth. He particularly addressed the Social Democrats. Individual SPD state associations such as Saxony, Bavaria and Berlin have endorsed cannabis model projects. Even the Federal Drug Commissioner Marlene Mortler (CSU) considered allowing cannabis users to choose between fines or counselling rather than prosecuting them, a few days before the hearing. Unlike cannabis, the legal drugs alcohol and tobacco cause thousands of deaths every year. ‘There are more and more people who recognise the schizophrenia between alcohol and cannabis policy’, Wurth said.

DHV: No consumer cannabis from the pharmacy

With regard to where consumers should obtain cannabis in the case of legalisation, the FDP, Greens and Left are of different opinion. While liberals can well imagine cannabis sale in pharmacies, according to the Greens and the Left, consumers should turn to cannabis stores or clubs. The German Hemp Association (DHV), which has been fighting for marijuana clearance for decades, also has a clear position. ‘I do not think pharmacies are the right place to sell cannabis as a recreational drug. Pharmacies are essentially there to sell healing or soothing substances. It is about an alignment in dealing with alcohol and cannabis. And the sale of beer and liquor in pharmacies would probably also an absurd idea’, explains the DHV managing director Georg Wurth after the hearing.

Source: Dr med. Bettina Jung, pharmacist, editor DAZ.online and Dr Ingo Ilja Michels & Dr Bernd Werse for additional report.

Hearing in the Petitions Committee (11 June 2018)

The federal government rejects cannabis legalization. This became clear (again) during a public meeting of the Petitions Committee chaired by Marian Wendt (CDU / CSU) on Monday, 11 June 2018. The Parliamentary State Secretary in the Federal Ministry of Health (BMG), Dr. Thomas Gebhart (CDU), stated that the health hazards of cannabis abuse have been proven. In the case of legalization, according to the Secretary of State, an increase in the number of consumers is to be feared, as the general preventive effect of the ban would be lost. In view of this, the government plans no model projects or any further steps towards legal regulation.

‘Regulate the market properly’

The meeting was based on a public petition submitted by Georg Wurth, managing director of the DHV, which has more than 79,000 supporters and calls for the legalisation and regulation of cannabis. Wurth was convinced that, sooner or later, legalisation would come, ‘also in Germany’. Canada will be the first large western industrial nation to start legal cannabis sales this year. In some US states, cannabis is already legalised. The question is therefore, ‘whether Germany will be the last of the Mohicans’.

The petitioner referred to the ‘100,000 criminal cases per year for purely consumer-related cannabis offences’, which were ‘nonsensical job-creation measures for the police’. In addition, legalisation could deprive the black market of billions of turnover. Wurth demanded: ‘We should do our utmost to regulate the market properly.’ The goal of reducing consumption is better achieved than in illegality. In addition, in a regulated market with clearly labelled product, the consumer protection idea can be addressed.

‘No measurable success of repression’

As for the government's feared increase in the number of consumers if cannabis is legalised, the petitioner opposed the numbers from the State of Colorado. According to him, the number of adolescent consumers has not increased since legalisation. In Germany, the prohibition policy had failed, Wurth judged. There are ‘millions of consumers who consume hundreds of tons of cannabis’. Especially among adolescents, no measurable success of repression is discernible.

Source: Website of Deutscher Bundestag

Cities are developing political power to introduce cannabis for recreational use as pilot projects

A growing number of cities play a role in the cannabis policy while the federal level remains opposed. The cities are confronted with the public cannabis trade and the criminalisation of their citizens. During a conference in Hamburg (‘Schluss mit Kriminalisierung – Drogenmärkte regulieren’: 21-22 October 2016) several representatives of city initiatives and administrators (representatives from city council and administration) met to discuss models of regulation of cannabis for recreational use and to discuss the way forward (Karlsruhe, Heidelberg, Tübingen, Düsseldorf, Frankfurt, Berlin and other cities). Within these cities the resistance against the federal no-go policy was obvious.²⁹

The discussion about legal modalities of cannabis provision for recreational use is widespread in many German municipalities and cities (see Table 6). Especially the discussion about the first application of the Berlin district Friedrichshain-Kreuzberg to the responsible institution (Federal Institute for Drugs

and Medical Devices/Bundesinstitut für Arzneimittel und Medizinprodukte – BfArM³⁰) raised public awareness (see Schemmel/Graf 2015). At the municipal level, Berlin (Bezirk Friedrichshain-Kreuzberg) issued an application to the BfArM, which has been rejected. However, this has led to several enquiries at the municipal, regional, and federal level. It seems that the time is ripe for an introduction of at least pilot projects according to the German narcotics law (Betäubungsmittelgesetz; see also Wurth 2018, pp76ff). Paragraph 3 of this law allows pilot projects under strict rules to test the effects of certain changes in the regulation. In the 1990, the state of Schleswig-Holstein (Kalke 2013) had foreseen provision of cannabis for recreational use in pharmacies under certain conditions. This was rejected by the BfArM in 1997. For a long period of time, nothing happened at the political level. However, with the two applications from the Berlin district Friedrichshain-Kreuzberg and later of Münster, the public debate started again.

In several cities, several politicians of different parties called for cannabis pilot projects. They were followed by decisions in district parliaments of Hamburg, Cologne, and Frankfurt/Main, as well as cities like Bremen, Düsseldorf, Münster and Berlin. There is a lot of interest in several other cities. However, the municipalities are insecure because of the opposition of the federal government. The district parliaments in Cologne, Frankfurt and Hamburg need, contrary to Berlin Friedrichshain-Kreuzberg, the support of their city councils, which has been rejected. The quarter of Cologne-City Centre (Innenstadt) started a new approach in March 2018.

Bremen started a new approach in the federal council in 2017 to clarify the situation for pilot projects. However, no majority was achieved for that. The city of Düsseldorf is still seeking a partner for the scientific evaluation (Wurth 2018, 78).

The application of the city of Münster has also been rejected. The arguments of the BfArM for rejection of the three applications (Schleswig-Holstein, Berlin-Friedrichshain-Kreuzberg and Münster) were basically the following:

- Lack of public interest in a pilot project (Schleswig-Holstein)
- Lack of scientific strength of accompanying the project (Berlin Friedrichshain-Kreuzberg)
- The purpose of the project is an objection to the narcotics law and is neither medically nor ethically justifiable (BfArM 2017) (Münster)

Currently the health senate of the state of Berlin (Senatsverwaltung für Gesundheit, Pflege und Gleichstellung) has set a budget to prepare a new application to the BfArM to carry out a pilot project, scientifically accompanied, to provide cannabis for recreational use ('Erarbeitung eines Antrages an das BfArM zur Durchführung eines wissenschaftlich begleiteten Modellprojektes zur Angabe von Cannabis'). For 2018 the budget is 200,000 € and in 2019: 100,000 €

Acknowledgments

The authors would like to thank Georg Wurth (Deutscher Hanfverband – DHV, Berlin), and Nina Pritzens (Vista gGmbH, Berlin) for their valuable contributions.

ANNEX 1: Overview of discussion of cannabis model projects

Level	Content	Sites	Links
Federal Level			
Public Hearing in the Health Committee of the German Bundestag on 27 June 2018	3 proposals of the 3 parliamentary groups Liberals FDP: Antrag (http://dip21.bundestag.de/dip21/btd/19/005/1900515.pdf 19/515), Left (19/832 http://dip21.bundestag.de/dip21/btd/19/008/1900832.pdf) and Green Party (http://dip21.bundestag.de/dip21/btd/19/008/1900819.pdf 19/819) to deal with marijuana in a different way. The three opposition parties envisage a loosening of the ban to varying degrees.	BT-Drucksachen: 19/515 19/832 19/819	https://www.bundestag.de/mediathek?videoid=7249169#url=bWVkaWF0aGVrb3ZlcmxheT92aWRlb2lkPTcyNDkxNjk=&mod=mediathek https://www.bundestag.de/dokumente/textarchiv/2018/kw08-de-cannabis-542302
Public meeting of the Petitions Committee chaired by Marian Wendt (CDU / CSU) on Monday, 11 June 2018	The Parliamentary State Secretary in the Federal Ministry of Health (BMG), Dr Thomas Gebhart (CDU), stated that the health hazards of cannabis abuse have been proven. In the case of legalization, according to the Secretary of State, an increase in the number of consumers is to be feared, as the general preventive effect of the ban would be lost. In view of this, the government also plans no model projects	Petitions Committee	
Federal government	Response from the federal government on the small request of the FDP from 21.12.2017	BTag Drs. 19/310	http://dip21.bundestag.de/dip21/btd/19/003/1900310.pdf
	Drug commissioner Mortler rejects Model experiments		https://www.br.de/radio/bayern2/sendungen/zuendfunk/drogenbeauftragte-marlene-mortler-ueber-cannabis-entkriminalisierung100.html
CDU/CSU fraction	Rejection of model projects by the Deputies Stephan Pilsinger, Alexander Krauss and Rudolf Henke	DBTag PIPr. from 22.02.18, p. 1196 ff.	http://dipbt.bundestag.de/doc/btp/19/19023.pdf
AfD fraction	Rejection by the Deputies Axel Gehrke und Karsten Hilse	DBTag PIPr. 22.02.2018 p. 1196 ff.	http://dipbt.bundestag.de/doc/btp/19/19023.pdf
SPD fraction	Basic approval by the Deputies Sabine Dittmar and Dirk Heidenblut	DBTag PIPr. 22.02.2018 p. 1196 ff.	http://dipbt.bundestag.de/doc/btp/19/19023.pdf
	In the plenary debate: reference to the Resolution of the Health Working Group of the SPD parliamentary Group	DBTag PIPr. 22.02.2018 p. 1196 ff.	http://dipbt.bundestag.de/doc/btp/19/19023.pdf
FDP fraction	Approval by Dr Wieland Schinnenburg and Dr Marie-Angnes Strack-Zimmermann	DBTag PIPr. 22.02.2018 TOP 11 p. 1196 ff.	http://dipbt.bundestag.de/doc/btp/19/19023.pdf
	Application to realise cannabis model projects	BTag Drs. 19/515	http://dip21.bundestag.de/dip21/btd/19/005/1900515.pdf

Level	Content	Sites	Links
FDP federal party	FDP election programme 2017	p. 91	https://www.fdp.de/sites/default/files/uploads/2017/08/07/20170807-wahlprogramm-wp-2017-v16.pdf
Fraction Die Linke	Approval by Niema Movassat	DBTag PIPr. 22.02.2018 ZusatzTOP 5 zu TOP 11 pp. 1196 ff.	http://dipbt.bundestag.de/doc/btp/19/19023.pdf
	Application: Health protection instead of Law Enforcement - For a Progressive Approach to Cannabis Use	BTag Drs. 19/832	http://dip21.bundestag.de/dip21/btd/19/008/1900832.pdf
Die Linke federal party	Election programme Die Linke	p. 120f.	https://www.die-linke.de/fileadmin/download/wahlen2017/wahlprogramm2017/die_linke_wahlprogramm_2017.pdf
Fraction Bündnis 90/Die Grünen	Approval by Dr Kirsten Kappert-Gonther	DBTag PIPr. 22.02.2018 TOP 11 p. 1196 ff.	http://dipbt.bundestag.de/doc/btp/19/19023.pdf
	Application in Bundestag Cannabis Control Law	BTag Drs. 19/819	http://dip21.bundestag.de/dip21/btd/19/008/1900819.pdf
Bündnis 90/Die Grünen federal party	Election programme 2017 B90/Grüne	p. 125f.	https://www.gruene.de/fileadmin/user_upload/Dokumente/BUENDNIS_90_DIE_GRUENEN_Bundestagswahlprogramm_2017_barrierefrei.pdf
	Deutscher Hanfverband to the debate		https://hanfverband.de/nachrichten/news/die-grosse-cannabisdebatte-im-bundestag-dhv-video-news-155 https://hanfverband.de/nachrichten/news/grober-unfug-und-feinnuancen-im-bundestag-dhv-video-news-156
Federal Council	<ul style="list-style-type: none"> Application from the federal states of Bremen, Thuringia Resolution of the Federal Council on a possibility of scientifically accompanied experimental projects with controlled release of cannabis The state of Berlin joined the application 	BRat Drs. 500/17	https://www.bundesrat.de/SharedDocs/drucksachen/2017/0401-0500/500-17.pdf?;jsessionid=735A8FE0AAEB018EF4F4C90CFEE25387.1_cid374?__blob=publicationFile&v=5 https://www.bundesrat.de/SharedDocs/beratungsvorgaenge/2017/0401-0500/0500-17.html?cms_templateQueryString=Suchbegriff&cms_fromSearch=true https://www.berlin.de/sen/gpg/service/presse/2017/pressemitteilung.608807.php

Level	Content	Sites	Links
	<ul style="list-style-type: none"> Plenary consultation on the application above No majority: 07.07.2017 	Brat PIPr. 959 TOP 52 Speech given on record video recording Plenary session 3:27:48	https://www.bundesrat.de/Shared-Docs/downloads/DE/plenarprotokolle/2017/Plenarprotokoll-959.pdf?__blob=publicationFile&v=2 https://www.bundesrat.de/DE/service/mediathek/mediathek-node.html?cms_id=7128626
Federal States			
Berlin	Press release of the Senate to support the Federal Council initiative Bremen and Thuringia 'Cannabis Model Projects' from 04.07.2017		https://www.berlin.de/aktuelles/berlin/4918696-958092-berliner-senat-unterstuetzt-cannabismode.htm
	11-2016 Coalition agreement SPD, LINKE, B90/Grüne: 'The Coalition will develop a concept for the implementation of a scientifically based pilot project for the controlled delivery of cannabis to adults and promote its legal protection.'		https://www.google.de/url?sa=t&rct=j&q=&esrc=s&source=web&cd=2&cad=rja&uact=8&ved=2ahUKewjA3dTO8r7aAhXmNJoKHTMBbsQFjABegQIABA-&url=https%3A%2F%2Fwww.berlin.de%2Frbmskzl%2F_assets%2Frbm%2F161116-koalitionsvertrag-final.pdf&usg=AOvVaw3kkkyS1Ze410Jjj_wONp2
Bremen	Applications by the fractions B90/Grüne und der SPD (Bremische Bürgerschaft): 'Using Leeway for new ways in cannabis policy' Decision: 20.04.2016	Bremische Bürgerschaft Drs. 19/340	http://www.bremische-buergerschaft.de/dokumente/wp19/land/drucksache/D19L0340.pdf
	Debate in the Bremische Bürgerschaft on the application above	Plenarprotokoll 19/18 Sitzung 20.04.2016 TOP p. 1346-1363 Beschlussprotokoll: p. 4f.	http://www.bremische-buergerschaft.de/dokumente/wp19/land/protokoll/P19L0018.pdf https://www.bundesrat.de/Shared-Docs/downloads/DE/plenarprotokolle/2017/Plenarprotokoll-959.pdf?__blob=publicationFile&v=2 http://www.bremische-buergerschaft.de/dokumente/wp19/land/protokoll/b19l0018.pdf
	Response of the Senate to the Small Question from the fraction Bündnis 90/Die Grünen 'Finally taking the first steps on the new ways in cannabis policy?' from 09.05.2017	BREMISCHE BÜRGERSCHAFT Drucksache 19/1065	https://www.bremische-buergerschaft.de/drs_abo/2017-05-10_Drs-19-1065_5b9fb.pdf
Municipalities & Cities			
Dusseldorf		Press	http://www.wz.de/lokales/duesseldorf/neuer-rueckschlag-fuer-cannabis-modellprojekt-1.2626606
	Application Die Linke for the Council meeting on 28.05.2015 Licensed delivery of cannabis products		https://ratsinfo.duesseldorf.de/ratsinfo/duesseldorf/62565/QWdlbm-RhIEl0ZW0uMDEtMTlyLjIwMTU=/14/n/241113.doc
	Amendment by 28.05.2015		https://ratsinfo.duesseldorf.de/ratsinfo/duesseldorf/62687/QWdlbm-RhIEl0ZW0uMDEtMTM4LjIwMTU=/14/n/241817.doc

Level	Content	Sites	Links
	Information submitted by the Council including decision of the Health Committee 19.08.2015		https://ratsinfo.duesseldorf.de/ratsinfo/duesseldorf/64353/QWdlbm-RhIEl0ZW0uNTAtNjQuMjAxNQ==/14/n/252023.doc
	Status report of the city of Dusseldorf on the conference 'Cannabis – Health policy scope of municipalities' from 07.12.2016		https://ratsinfo.duesseldorf.de/ratsinfo/duesseldorf/69703/SXRlBSEB2N1bWVudCAoUHVibGlicSAtdUwLTEuMjAxNw==/14/n/284891.doc
	Information template Status report from 28.02.2018		https://ratsinfo.duesseldorf.de/ratsinfo/duesseldorf/73918/QWdlbm-RhIEl0ZW0uNTAtMTUuMjAxOA==/14/n/311626.doc
	Deutscher Hanfverband about Dusseldorf		https://hanfverband.de/nachrichten/news/modellprojekt-duesseldorf-startet-durch-dhv-video-news-117
Münster	Conference on 13.12.2016 to prepare the application and discussion with professionals and citizens	YouTube Channel Part 1 of 8	https://www.youtube.com/watch?v=TVg-5ZZxbw4
	-Application for an exemption according to § 3 (2) Narcotics Act incl. decision of the Council	City of Münster, Office for Health, Veterinary and Food Affairs	http://www.stadt-muenster.de/fileadmin/user_upload/stadt-muenster/53_gesundheit/pdf/projektbeschreibung-cannabis.pdf
	Rejection by the BfARM 17.10.2017	Published by the city of Münster	https://www.stadt-muenster.de/fileadmin//user_upload/stadt-muenster/53_gesundheit/pdf/ablehnungsbescheid.pdf
	Overview page with information from the Office of Public Health		https://www.stadt-muenster.de/gesundheitsfoerderung/projekte-und-massnahmen-zur-gesundheitsfoerderung.html
	Deutscher Hanfverband about Münster		https://hanfverband.de/nachrichten/news/muenster-reicht-antrag-fuer-cannabis-modellprojekt-ein-dhv-video-news-132
Districts & Neighborhoods			
Cologne city center	The district representative of Cologne city centre was in favour of a cannabis model attempt in 2014 (Grüne, Linke, GUT, Deine Freunde, FDP voted for it; CDU, SPD voted against it). The initiative should be re-launched at the beginning of February 2018.	Joint application acc. §3 der Geschäftsordnung des Rates Bezirksvertretung 1 (Innenstadt), Meeting on January 25, 2018 & Press articles	https://ratsinformation.stadt-koeln.de/getfile.asp?id=644830&type=do https://www.koeln.de/koeln/cannabis-soll-bald-in-koelner-apotheken-erhaeltlich-sein_1083990.html https://www.leafly.de/koeln-antrag-cannabis-modellprojekt/
Hamburg-Altona	In June 2015, the SPD Hamburg-Altona was in favour of a model project for the supply of cannabis..		https://hanfverband.de/nachrichten/news/spd-in-hamburg-altona-stimmt-fuer-coffeeshop-modellversuch
	In October 2015, at the request of SPD & Grünen, with the votes of Linke and FDP, the application for a model attempt was decided in the district assembly Altona.		https://hanfverband.de/nachrichten/news/altona-stimmt-fuer-ein-coffee-shop-modellprojekt

Level	Content	Sites	Links
Frankfurt / M.- Ortsbeirat 1	In spring 2014, the Ortsbeirat 1 (Bahnhofviertel, Innenstadt, etc.) requested, at the application of die Grünen, the municipal authorities to initiate a cannabis model project.		http://www.faz.net/aktuell/rhein-main/frankfurt-bahnhofsviertel-ortsbeirat-fuer-cannabis-verkaufsstellen-12810385.html http://www.fr.de/frankfurt/coffee-shops-in-frankfurt-kiffen-fuer-die-gesundheit-a-613043
Berlin district Friedrichshain-Kreuzberg		Overview & material collection of the district office for discussion	https://www.berlin.de/ba-friedrichshain-kreuzberg/politik-und-verwaltung/service-und-organisationseinheiten/qualitaetsentwicklung-planung-und-koordination-des-oeffentlichen-gesundheitsdienstes/artikel.230672.php https://www.berlin.de/ba-friedrichshain-kreuzberg/politik-und-verwaltung/service-und-organisationseinheiten/qualitaetsentwicklung-planung-und-koordination-des-oeffentlichen-gesundheitsdienstes/aktuelles/artikel.158549.php
Discussions			
Schleswig-Holstein	06-2017 Coalition Agreement CDU, Grüne, FDP / Trial Order: 'We will examine the possibility of controlled release of cannabis in a model project.'	p. 97	https://www.schleswig-holstein.de/DE/Landesregierung/_documents/koalitionsvertrag2017_2022.pdf;jsessionid=97380180C231F9F822A889D47A529E13?__blob=publicationFile&v=2
Frankfurt	In November 2014, a specialist conference on cannabis was held on the initiative of the Health Department. Afterwards, several local politicians spoke in favour.	FNP 19.11.2014	http://www.fnp.de/lokales/frankfurt/Frankfurter-Cannabis-Projekt-ist-eine-sehr-gute-Idee;art675,1135211
	In January 2015, die Grünen could not prevail over their coalition partner CDU.		http://www.fr.de/frankfurt/drogen-cdu-bleibt-bei-nein-zu-cannabis-versuch-a-515629
	Further links for discussion in Frankfurt		https://www.op-online.de/region/frankfurt/cannabis-frankfurt-bald-legal-erhaeltlich-7303622.html https://fdp-frankfurt.de/meldung/modellversuch-zur-kontrollierten-abgabe-von-cannabis/ https://www.spd-frankfurt-westend.de/meldungen/29557-themenwochenumgang-mit-genuss-und-suchtmit-teln/ https://www.frankfurt-aidshilfe.de/cannabisprojekt
Hamburg (Federal State)	Application Die Linke: Making new ways in cannabis policy possible - supporting the Federal Council initiative New version: 22.06.2017	BÜRGERSCHAFT Drucksache 21/9452	https://www.buergerschaft-hh.de/ParlDok/dokument/58208/neue-wege-in-der-cannabispolitik-erm%C3%B6glichen-%E2%80%93-bundesratsinitiative-unterst%C3%BCtzen.pdf

Level	Content	Sites	Links
	06.11.2015 Hearing on model projects in the Hamburg citizenship		Documents (including word protocol) available, but no links http://cannabis-social-club.hamburg/wp-content/uploads/2015/09/Stellungnahme_CSCHH_GesA_Modellprojekt.pdf
Brandenburg	Response of the Provincial Government to the small request No. 2083 of the deputy Benjamin Raschke of the fraction BÜNDNIS 90/DIE GRÜNEN Printed matter 6/5020 Cannabis Policy in Brandenburg - Measures of Law Enforcement	Landtag Brandenburg 6. legislature Drucksache 6/5194 p. 5f.	https://www.gruene-fraktion-brandenburg.de/fileadmin/ltf_brandenburg/Dokumente/Kleine_Anfragen/6_Wahlperiode/6_2083_KI_A_Cannabis-Politik_in_Brandenburg_-_Massnahmen_der_Strafverfolgung.pdf
Saarland	Application of B90/Grüne Parliamentary Group: Increased consideration of medical, health and social aspects in drug policy	Landtag des Saarlandes 15. legislature Drucksache 15/1678 19.01.2016	https://www.landtag-saar.de/Drucksache/Ag15_1678.pd
	02-2018 Young Liberals want Saarland as a model region there was already an online petition in 2015		https://www.change.org/p/saarland-als-modellregion-machen-sie-das-saarland-zum-modellprojekt-f%C3%BCr-die-cannabislegalisierung-saarland
Mecklenburg-West Pomerania	The FDP in MV wants to turn the country into a 'model region for the controlled release of cannabis'. 02-2018		https://www.liberales.de/content/cannabis-modellprojekte-ermoglichen
Hanover	18.09.2017 Die Grünen are requesting a hearing on model projects in the city's Social Committee		https://ratsfraktion-gruene-hannover.de/meldungen/pm-langensiepen-gruene-kontrollierte-abgabe-von-cannabis-kann-als-modellprojekt-in-hannover-moglich-sein
Trier	Grüne Jugend in Trier claims Cannabis Model Project (02/2018)		http://lokal.de/artikel/149675/cannabis-modellprojekt-bekommt-trier-einen-coffee-shop/
Wiesbaden	In February 2018, Die Linke/Piraten applied to the city council for a model attempt to set up a CSC. Grüne and FDP have apparently signaled approval		http://www.wiesbadener-tagblatt.de/lokales/wiesbaden/nachrichten-wiesbaden/soll-die-stadt-cannabis-verkaufen-parteien-in-wiesbaden-beraten-ueber-legalisierung-von-drogen_18545313.htm
Munich	Medical cannabis as a model project requested by the DHV-Munich local chapter and petition launched - April 2018	DHV	https://hanfverband.de/nachrichten/pressemitteilungen/medizinisches-cannabis-modellprojekt-in-muenchen-beantragt-onlinepetition-gestartet
Magdeburg	Application of the Council Group Linke/Future in February 2018 Rejection by the Social Affairs Commissioner in March 2018 because of 'lack of competence' / 'sovereignty of the federal legislator'.		No original documents, only press articles https://www.volksstimme.de/lokal/magdeburg/cannabis-magdeburger-absage-an-legales-kiffen https://www.volksstimme.de/lokal/magdeburg/cannabis-magdeburger-initiative-fuer-legales-kiffen

Level	Content	Sites	Links
Wuppertal	Grüne bring an application to the City Council on 02.06.2017.		https://www.wuppertal.de/rathaus/onlinedienste/ris/vo0050.php?_kvonr=19244
Stuttgart	03-2018 an initiative of the cannabis social club Stuttgart calls in an online petition the establishment of a pilot project by the local council		https://de-de.facebook.com/events/268931680210707/
	similarly		https://www.buergerhaushalt-stuttgart.de/vorschlag/41199
Heidelberg	06-2017 The fraction Die Linke/Piraten introduces to the city council the proposal for the model project CSC. The Committee on Social Affairs and Equal Opportunities decided to send a circular to the district for a cannabis conference.		https://www.rnz.de/nachrichten/heidelberg_artikel,-Heidelberg-Wegen-Bedenken-gegen-Legalisierung-Gemeinderat-will-keinen-Cannabis-Club-in-Heidelberg-_arid,280017.html
Main-Taunus-Kreis	02-2018 JuLis want a model region		https://main-taunus.junge-liberale.de/pressemitteilung/cannabis-modellregion/
Göttingen	Grüne claim model project	PM	http://gj-goettingen.de/pm-gruene-und-gj-fordern-cannabis-modellprojekt-fuer-goettingen/
Historical & further links			
Schleswig-Holstein	1997 model project cannabis in pharmacies		http://www.drogenpolitik.org/download/sh/Antrag_SH.pdf
	In 2016, the research initiative Cannabis Consumption GmbH applies to the BfArM for permission to carry out a study. The application was denied. An appeal against the notice of opposition is pending before the Cologne Administrative Court.		https://forschungsinitiative-cannabis-konsum.de/
model proposal	Draft of a law amending the BTMG to enable model projects, 03-2016, Ambos, Böllinger, et al.		https://www.bundestag.de/blob/413668/b57ff528ef7ff-ba01c6f430516683207/esv-prof--dr-kai-ambos-data.pdf
heroin trial	A realised scientific model project was the heroin study - as a joint initiative of different federal states and cities		http://www.heroinstudie.de/
International			
Switzerland/Bern	Representation of all Swiss cantons (Council of States) supports experimental clause	Message in 'Der Bund' from 15.03.2018 Message in 'Blick' from 25.03.2018	https://www.derbund.ch/bern/nachrichten/Staenderat-befuerwortet-Berner-CannabisVersuch/story/15995750 https://www.blick.ch/news/politik/gruenes-licht-fuer-experimentierartikel-kiffer-studien-sind-bald-legal-id8163116.html
Switzerland/Biel	Cannabis regulation: Biel supports the examination of new applications	Bieler Tagblatt from 12.12.2017	http://www.bielertagblatt.ch/nachrichten/biel/cannabisregulierung-biel-unterstuetzt-pruefung-von-neuen-studiengesuchen
Level	Content	Sites	Links

Switzerland	Further links to the discussion in Switzerland		<p>https://www.nau.ch/politik-wirtschaft/bundeshaus/2017/12/14/cannabis-bald-legal-aus-der-apotheke-65276846</p> <p>https://www.aargauerzeitung.ch/schweiz/cannabis-legalisierung-breiter-widerstand-gegen-bersets-absage-131975241</p> <p>https://www.admin.ch/gov/de/start/dokumentation/medienmitteilungen.msg-id-68781.htmlhttps://www.nau.ch/politik-wirtschaft/bundeshaus/2017/11/29/gruene-machen-druck-fur-legalen-cannabis-verkauf-65271701</p> <p>https://www.aargauerzeitung.ch/schweiz/bund-laedt-staedte-zum-hanf-gipfel-trotz-verhindertem-testverkauf-in-apotheken-131917012</p>
The Netherlands	Dutch government presents concept for cannabis supply	Hanfjournal from 03.04.2018	https://hanfjournal.de/2018/04/03/niederlaendische-regierung-legt-konzept-zur-cannabis-freigabe-vor/
	Further links to the discussion in the Netherlands		<p>https://www.wienerzeitung.at/nachrichten/welt/weltchronik/937089_Wenn-der-Staat-Gras-anbaut.html</p> <p>http://www.taz.de/!5468032/</p> <p>https://www.t-online.de/nachrichten/ausland/eu/id_82568822/drogenpolitik-niederlande-bauen-selbst-cannabis-an.html</p> <p>https://brf.be/national/1120536/</p>
Denmark/Copenhagen	Further links to the discussion in Denmark		<p>https://brf.be/national/1120536/</p> <p>http://cphpost.dk/news/local-news/legal-cannabis-rejected-by-government.html</p> <p>https://www.independent.co.uk/news/world/europe/copenhagen-legalise-cannabis-marijuana-fourth-attempt-reduce-gang-warfare-a7484746.html</p>

References

- AWMF Leitlinie Cannabis-bezogene Störungen [online]. Available at: https://www.researchgate.net/publication/284899282_AWMF-Leitlinie_Cannabis-bezogene_Störungen_im_Jahre_2015_mittlerweile_abgelaufen . [accessed 8 June 2017]
- BfArM (17.10.2017) Antrag auf Erteilung einer Ausnahmeerlaubnis vom 12.07.2017, eingegangen am 25.07.2017, zu wissenschaftlichen Zwecken nach Absatz §3 Absatz 2 Betäubungsmittelgesetz (BtMG). Bonn: Wissenschaftliche Studie zur mehrdimensionalen Erfassung von kurz- und mittelfristigen Wirkungen eines kontrollierten Cannabiskonsums bei gesunden Erwachsenen.
- BOPST (Bundesopiumstelle) (2013) Bericht zum Substitutionsregister. Januar 2013, Bonn.
- BOPST (Bundesopiumstelle) (2017). Bericht zum Substitutionsregister. January 2017 [online]. Available at: [ericht2017.pdf?__blob=publicationFile&v=2](#) [accessed: 6 June 2017]
- Baier, D., Schepker, K. & Bergmann, M. C. (2016) Macht Kiffen friedlich und Saufen aggressiv? Zum kausalen Zusammenhang von Cannabis- und Alkoholkonsum und delinquentem Verhalten. *Zeitschrift für Jugendkriminalrecht und Jugendhilfe* 4: 324-332.
- Bartsch, G. (2017) Versorgung abhängigkeitskranker Menschen in Deutschland. In *Jahrbuch Sucht 2017*. DHS (Deutsche Hauptstelle für Suchtfragen) (Hrsg.), S. 161-176. Pabst, Lengerich.
- Bartsch, G. (2017a) Suchthilfe in Deutschland. *SuchtMagazin 2017* (2&3): 5-12.
- Bergmann, M. C., Baier, D., Rehbein, F. & Mößle, T. (2017) Jugendliche in Niedersachsen. Ergebnisse des Niedersachsensurveys 2013 und 2015, Forschungsbericht Nr. 131. Hanover: Kriminologisches Forschungsinstitut Niedersachsen e.V. (KFN).
- Böllinger, L. & Quensel, S. (2002) Drugs and driving: Dangerous youth or anxious adults? *Journal of Drug Issues* 32(2): 553-566.
- Braun, B., Brand, H. & Künzel, J. (2016) Deutsche Suchthilfestatistik 2015.
- Bundeskriminalamt/BKA (2017) Rauschgiftkriminalität, Bundeslagebild, Wiesbaden 2017.
- Cousto, H. & Stöver, H. (2017) Repression und kein Ende?! Eine Würdigung der aktuellen polizeilichen Zahlen zur Kriminalisierung von Drogengebraucher_innen. In *akzept e.V. (ed.), Alternativer Drogen- und Suchtbericht*, S. 47-55. Berlin.
- DAZ.online (2018) Umfrage: Jeder zweite Arzt befürwortet Cannabis-Legalisierung. Available at: <https://www.deutsche-apotheker-zeitung.de/news/artikel/2018/02/08/jeder-zweite-arzt-befuerwortet-cannabis-legalisierung> (accessed 10 February 2019)
- Destatis - Statistisches Bundesamt (2016a) Diagnosedaten der Patienten und Patientinnen in Krankenhäusern (einschl. Sterbe- und Stundenfälle) 2015. Fachserie 12. Wiesbaden: Reihe 6.2.1, (pp. 25 and 48).
- Die Drogenbeauftragte der Bundesregierung (2016) Drogen- und Suchtbericht. June 2016. https://www.drogenbeauftragte.de/fileadmin/dateien-dba/Drogenbeauftragte/4_Presse/1_Pressemitteilungen/2016/2016_2/160928_Drogenbericht-2016_NEU_Sept.2016.pdf
- Die Zeit (2017) Umfrage: Deutsche mehrheitlich für Legalisierung von Cannabis. Available at: <https://www.zeit.de/news/2017-08/07/deutschland-umfrage-deutsche-mehrheitlich-fuer-legalisierung-von-cannabis-07110402> (Accessed 10 February 2019)
- Deutsche Rentenversicherung Bund (DRV) (2017) Statistik der Deutschen Rentenversicherung - Rehabilitation 2016, Band 210.
- DRV - Deutsche Rentenversicherung (2017) Abgeschlossene Leistungen zur medizinischen Rehabilitation sowie zur Teilhabe am Arbeitsleben in 2016.
- EMCDDA (European Monitoring Centre for Drugs and Drug Addiction) (2002) Prosecution of drug users in Europe - Varying pathways to similar objectives, Insight Series, Number 5. Luxembourg: Office for Official Publications of the European Communities.
- EMCDDA (European Monitoring Centre for Drugs and Drug Addiction) (2015) European legal database on drugs (ELDD) [online]. Available at: <http://www.emcdda.europa.eu/eldd> [accessed: 14 September 2017].

- Glaeske, G., & Sauer, K. M. (2018). Cannabis-report. Socium, Forschungszentrum Ungleichheit und Sozialpolitik, Universität Bremen.
- Gomes de Matos, E., Atzendorf, J., Kraus, L. & Piontek, D. (2016) Substanzkonsum in der Allgemeinbevölkerung: Ergebnisse des Suchtsurveys 2015. *Sucht* 62(5) : 271-281.
- Görgen, W., Hartmann, R. and Karim, S. (2010), Final evaluation report of the European early intervention project 'FreD goes net', Cologne.
- Grotenhermen, F., Leson, G., Berghaus, G., Drummer, O.H., Krüger, H.P., Longo, M., Moskowitz, H., Perrine, B., Ramaekers, J., Smiley, A. & Tunbridge, R. (2005) Developing science-based per se limits for driving under the influence of cannabis (DUIC). Findings and recommendations by an expert panel [online]. Available at: <http://citeseerx.ist.psu.edu/viewdoc/summary?doi=10.1.1.395.2711> [accessed: 14 September 2017].
- Hannemann, T.-V., Kraus, L. & Piontek, D. (2017) Consumption Patterns of Nightlife Attendees in Munich: A Latent-Class Analysis. *Substance Use & Misuse* 52 (8): 1532-1541.
- Hoch, E., Bonnet, U., Thomasius, R., Ganzer, F., Havemann-Reinecke, U. & Preuss, U. W. (2015). Risiken bei nichtmedizinischem Gebrauch von Cannabis. *Deutsches Ärzteblatt* 112(16): 271-278.
- INCB, INCB Report 2017, Message from the President, 02 March 2017. <https://www.incb.org/documents/Publications/AnnualReports/AR2016/LAUNCH/MessageOfThePresident.pdf>
- Infratest Dimap (2017) Globaler Drogenkampf: Mehrheit der Deutschen zieht kritische Bilanz. Available at: <https://www.infratest-dimap.de/umfragen-analysen/bundesweit/umfragen/aktuell/globaler-drogenkampf-mehrheit-der-deutschen-zieht-kritische-bilanz/>
- Infratest Dimap (2018) Legalisierung von Cannabis 2018. Eine Studie im Auftrag des Deutschen Hanf Verbands. https://hanfverband.de/sites/hanfverband.de/files/181022_hanfverband_graf.pdf
- Kalke, J. (2013) Innovative Landtage: Eine empirische Untersuchung am Beispiel der Drogenpolitik. Springer
- Kamphausen, G., Wense, B., Klaus, L. & Sarvari, L. (2018). MoSyD Jahresbericht 2017. Drogentrends in Frankfurt am Main. Centre for Drug Research, Frankfurt a.M.: Goethe-Universität.
- Körner, H., Patzak, J., & Volkmer, M. (2012). Betäubungsmittelgesetz: BtMG. Arzneimittelgesetz. Grundstoffüberwachungsgesetz. München: C.H.Beck.
- Kleiber, D. & Soellner, R. (1998) Cannabiskonsum. Entwicklungstendenzen, Konsummuster und Risiken. Weinheim: Juventa.
- Kraus, L., Piontek, D., Atzendorf, J. & Gomes de Matos, E. (2016b) Zeitliche Entwicklungen im Substanzkonsum in der deutschen Allgemeinbevölkerung. Ein Rückblick auf zwei Dekaden. *Sucht* 62(5): 283-294.
- Kraus, L., Piontek, D., Seitz, N.-N. & Schoeppe, M. (2016a) Die Europäische Schülerstudie zu Alkohol und anderen Drogen 2015 (ESPAD): Befragung von Schülerinnen und Schülern der 9. und 10. Klasse in Bayern, IFT-Berichte Bd. 188. München: IFT Institut für Therapieforchung.
- LWL - Koordinationsstelle Sucht (2017) Projekt FreD-Crystal/ATS - Erweiterung des FreD-Ansatzes für ATS (Amphetamin-Typ-Stimulantien) Konsument/innen.
- Manthey, J., Stöver, H. & Meyer-Thompson, H.-G. (2018) Cannabis and Harm Reduction in Germany. *Suchttherapie* 01:3-53.
- Orth, B. (2016) Die Drogenaffinität Jugendlicher in der Bundesrepublik Deutschland 2015. Rauchen, Alkoholkonsum und Konsum illegaler Drogen: aktuelle Verbreitung und Trends. BZgA-Forschungsbericht. Köln: Bundeszentrale für gesundheitliche Aufklärung (BZgA).
- Paoli, L. (2008) 'How to know more on drug law implementation across Europe?', in *EMCDDA Reitox Academy on sentencing statistics*.
- Piontek, D. & Hannemann, T.-V. (2017) Medikamentenmissbrauch und der Konsum von neuen psychoaktiven Substanzen (NPS) in unterschiedlichen Risikopopulationen. Ergebnisse des Projekts PharMon NPS aus den Jahren 2015 und 2016 [online]. Available at: https://www.ift.de/fileadmin/user_upload/Literatur/Berichte/PharMon-Jahresbericht_2015-2016.pdf

- Piontek, D., & Kraus, L. (2016). Themenschwerpunkt Epidemiologischer Suchtsurvey 2015. *Sucht* 62 (5): 257-294.
- Pfeiffer-Gerschel, et.al. (2017) Bericht 2017 des nationalen REITOX-Knotenpunkts an die EBDD. Neue Entwicklungen und Trends. Deutschland. Drogensituation 2016/2017. München: DBDD (Deutsche Beobachtungsstelle für Drogen und Drogensucht).
- Plenert, M. (2018) Ein Jahr Cannabis als Medizin-Gesetz – ein ambivalentes Zwischenfazit. In: akzept; DAH; JES (ed.): 5. Alternativer Drogen- und Suchtbericht 2018, pp. 54-58
- Rheinische Post (2017): Forsa-Umfrage: 63 Prozent gegen Cannabis-Legalisierung. 14 November 2017 Available at: https://rp-online.de/panorama/deutschland/forsa-umfrage-2017-63-prozent-gegen-cannabis-legalisierung_aid-20786657
- Schemmel, J.& Graf, W. (2015) Legalisierung von unten – Wie die Realität neue Wege in der Drogenpolitik aufzwingt. In: akzept/DAH/JES (2015): Alternativer Drogen- und Suchtbericht 2015. Available at:<http://alternativer-drogenbericht.de/legalisierung-von-unten-wie-die-realitaet-neue-wege-in-der-drogenpolitik-aufzwingt/>
- Schettino, J., Leuschner, F., Kasten, L., Tossmann, P. & Hoch, E. (2015) Treatment of cannabis-related disorders in Europe. Luxembourg: European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).
- Thomasius, R., Thoms, E., Melchers, P., Roosen-Runge, G., Schimansky, G., Bilke-Hentsch, O. & Reis, O. (2016) Anforderungen an die qualifizierte Entzugsbehandlung bei Kindern und Jugendlichen. *Sucht* 62: 107-111.
- TNS Emnid (2010) Tabellen: Meinungen zu Cannabis als Medizin. Available at: http://www.cannabis-med.org/german/emnid_2010.pdf
- Werse, B. (2016) Zum Sinn und Unsinn von Repräsentativbefragungen als Grundlage für Drogenpolitik. In: Akzept e.V./Deutsche AIDS-Hilfe/ JES Bundesverband (Hg.): 3. Alternativer Drogen- und Suchtbericht 2016. 29-36. Lengerich: Pabst.
- Werse, B., Kamphausen, G., Egger, D., Sarvari, L. & Müller, D. (2017). MoSyD Jahresbericht (2015) Drogentrends in Frankfurt am Main. Centre for Drug Research Frankfurt am Main: Goethe-Universität.
- Werse, B., Kamphausen, G. & Klaus, L. (2019) MoSyD Szenestudie 2018. Die offene Drogenszene in Frankfurt am Main. Centre for Drug Research. Frankfurt am Main: Goethe-Universität.
- Wurth, G. (2018) Die Zeit ist reif für kommunale Modellprojekte zur Cannabisabgabe. In: akzept; DAH; JES (ed.): 5. Alternativer Drogen- und Suchtbericht 2018, pp. 76-81.
- ZEIT online (2018) „Das Cannabisverbot ist weder intelligent noch zielführend“; 5th February 2018 <https://www.zeit.de/gesellschaft/2018-02/cannabis-bdk-chef-andre-schulz-legalisierung>

Endnotes

1. Mainly based on: Pfeiffer-Gerschel et al.: 2017 Report of the national REITOX Focal Point to the EMCDDA (Data year 2016 / 2017); Munich 2018
2. In Germany, there is a discussion about the methodology of these telephone-based surveys (like the one data are presented, especially from BzGA). The key point is that especially for juvenile users the data may be underestimated due to the fact that many juveniles and young adults are still living with their parents and answers might be biased (pp. 29).
3. Mainly based on: Pfeiffer-Gerschel et.al.: 2017 Report of the national REITOX Focal Point to the EMCDDA (Data year 2016 / 2017), Munich 2018
4. In the MoSyD-Report, issued in 2015, a comparison was made between Frankfurt and Bavaria juveniles (aged 15-/16; based on the Bavarian ESPAD study. In Bavaria the prevalence rate was much higher. (p. 129)
5. Based at the Federal Institute for Drugs and Medical Devices (BfARM), an independent federal higher authority within the portfolio of the Federal Ministry of Health
6. Newsletter of the Arbeitsgemeinschaft Cannabis als Medizin vom 27.01.2018
7. Kurzbericht: Cannabis: Potential und Risiken. Eine wissenschaftliche Analyse (CaPRis); Ergebnisse der CaPRis-Studie Cannabis: Potential und Risiken. Eine wissenschaftliche Analyse; Hoch, E., Friemel, C. & Schneider, M. (2018) Cannabis: Potential und Risiko. Eine wissenschaftliche Analyse. Heidelberg: Springer-Verlag
8. Statement by Dr. Viroj Sumyai, President, International Narcotics Control Board (INCB), Economic and Social Council Coordination and Management Meeting, Agenda item 19(d): Narcotic drugs, 6 July 2017, New York http://www.incb.org/documents/News/ECOSOC_CMM2017_statement_FINAL_for_webposting.pdf
9. Die WELT: „Nicht zuschauen, wie Jugendliche ihre Zukunft verkiffen' *Interview with Marlene Mortler, Federal Drug Commissioner; 5th February 2018*
10. Printed matter 19/658 - dated 5 February.2018
11. Deutscher Bundestag Stenografischer Bericht (German Bundestag, shorthand report); 14. Sitzung; Berlin, Thursday 22 February 2018; <http://dipbt.bundestag.de/doc/btp/19/19014.pdf>
12. <http://dip21.bundestag.de/dip21/btd/19/005/1900515.pdf>
13. BT-Drucksache 19/832 from 22 February 2018
14. Deutscher Bundestag Stenografischer Bericht; 14. Sitzung; Berlin, 22 February 2018 p.1196
15. Deutscher Bundestag Stenografischer Bericht; 14. Sitzung; Berlin, 22 February 2018 p.1198
16. Deutscher Bundestag Stenografischer Bericht; 14. Sitzung; Berlin, Thursday 22 February 2018; p.1208
17. Deutscher Bundestag Stenografischer Bericht; 14. Sitzung; Berlin, Thursday 22 February 2018; p.1204
18. Deutscher Bundestag Stenografischer Bericht; 14. Sitzung; Berlin, Thursday 22 February 2018; p.1206
19. Deutscher Bundestag Stenografischer Bericht; 14. Sitzung; Berlin, Thursday 22 February 2018 p.1197
20. Deutscher Bundestag Stenografischer Bericht; 14. Sitzung; Berlin, Thursday 22 February 2018; p.1207
21. Deutscher Bundestag Stenografischer Bericht; 14. Sitzung; Berlin, Thursday 22 February 2018; p.1203
22. Deutscher Bundestag Stenografischer Bericht; 14. Sitzung; Berlin, Thursday 22 February 2018; p.1209
23. <https://hanfverband.de/>
24. <http://akzept.org/>
25. <https://www.aidshilfe.de/>
26. <http://www.jes-bundesverband.de/>
27. <http://alternativer-drogenbericht.de/>
28. <https://www.tagesschau.de/multimedia/video/video-85811.html>
29. <https://www.swr.de/blog/recherche/2016/10/25/schluss-mit-krimi/>
30. <http://alternativer-drogenbericht.de/legalisierung-von-unten-wie-die-realitaet-neue-wege-in-der-drogenpolitik-aufzwingt/>

NEW APPROACHES ON HARM REDUCTION POLICIES AND PRACTICES

The NAHRPP project (New Approaches in Harm Reduction Policies and Practices) is a joint project of the Transnational Institute (TNI), based in the Netherlands, ICEERS (Spain), Forum Droghe (Italy) and Diogenis (Greece), supported by the European Union. The project addresses recent drug policy developments in Europe.

One section of this project, led by TNI, is focused on the role of local authorities in cannabis regulation. Local and regional authorities across Europe are confronted with the negative consequences of a persisting illicit cannabis market. Increasingly, local and regional authorities, non-governmental pressure groups and grassroots movements are advocating for regulation of the recreational cannabis market, rather than prohibition. This project analyses the possibility of cannabis market regulation models, alongside political, policy, and legal steps under exploration by local authorities in Belgium, Spain, Switzerland, Germany, Denmark and the Netherlands. It is hoped that the information collected through this initiative will help to improve the understanding of regulating drug markets as a means to reduce the negative consequences of illicit drug markets on individuals and society.

In order to better understand the situation around, and possibilities for, local and regional cannabis regulation, a series of six country reports were developed, providing background for an overarching analytical report. The country reports provide detailed information about the state of cannabis policy, and the possibilities for change, within each country. This report addresses the past, present, and future of cannabis policy in Germany.

PUBLICATION DETAILS

Contents of this draft report may be quoted or reproduced for non-commercial purposes, provided that the source of information is properly cited <http://www.tni.org/copyright>

TRANSNATIONAL INSTITUTE (TNI)

De Wittenstraat 25, 1052 AK Amsterdam, The Netherlands
Tel: +31-20-6626608, Fax: +31-20-6757176
E-mail: drugs@tni.org
www.tni.org/drugs



@DrugLawReform

Drugsanddemocracy



The Transnational Institute (TNI) is an international research and advocacy institute committed to building a just, democratic and sustainable world. For more than 40 years, TNI has served as a unique nexus between social movements, engaged scholars and policy makers.

www.TNI.org