

ILLICIT DRUG POLICIES AND SOCIAL OUTCOMES: A CROSS- COUNTRY ANALYSIS

Final report

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CATOLICA
CATÓLICA PORTO BUSINESS SCHOOL

PORTO

Illicit drug policies and social outcomes: a cross-country analysis

Research project funded by the European Research Area Network on Illicit Drugs (ERANID)

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This document is the final report of the IDPSO project funded by ERANID. Any opinions contained in this document should only be attributed to the authors and not to the institutions they are affiliated with.

Porto, 4th March 2021

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1. Introduction

1.1. Overview of the research project

1.1.1. Goal and funding

The “Illicit drug policies and social outcomes: a cross country analysis (IDPSO)” project is an international 3-year (2017-2021) research project in the illicit drug field, with the goal of measuring the impact that different drug-related legal frameworks have on society in seven different countries: Portugal, France, Italy, Netherlands, United Kingdom, Canada and Australia. This research project was selected for financing by ERANID (European Research Area Network on Illicit Drugs), following an international call for proposals in 2016.

1.1.2. Research team

Católica Porto Business School (Portugal) is the leading institution in an international research consortium that also includes Université de Paris I (France), University of Amsterdam (Netherlands) and MIPA (Italy), and advisors from the EMCDDA (European Monitoring Centre for Drugs and Drug Addiction), London School of Economics, Durham University and University of Melbourne. The main researchers involved in our research consortium are: Ricardo Gonçalves (PI), Ana Lourenço and Hélia Marreiros, from Católica Porto Business School, Universidade Católica Portuguesa; Pierre Kopp (co-PI) and Marysia Ogrodnik (Paris School of Economics, Université Paris I); Dirk Korf (co-PI), Annemieke Benschop, Nienke Liebrechts and Ton Nabben (University of Amsterdam); and Carla Rossi (co-PI), Alessio Canzonetti, Dario Cirillo, Francesca de Marinis and Fabio Massimo Lanzoni (MIPA). The project’s advisors are Mathias Siems (Durham Law School, Durham University), Cláudia Costa Storti (European Monitoring Centre for Drugs and Drugs Addiction - EMCDDA), Paul de Grauwe (London School of Economics) and Jenny Williams (University of Melbourne). For more information on the project please go to <https://www.eranid.eu/projects/idpso/>.

1.1.3. Structure of the research project

The objective of this project is to assess how differences in national drug laws and policies related to illicit drug production, distribution and consumption impact on key drug-related social indicators, with a particular focus on cannabis. In a nutshell, in order to achieve this objective, this research projects aims, first, to translate into quantitative indicators the different ‘written’ policies, typically approved and enacted by law, as well as the perceptions, by stakeholders, of policies ‘in action’. Second, this research project aims to measure their impact on key indicators for drug use.

To do so, this project involves four steps: (i) the use of leximetrics to allow cross-country comparison of national drug policies (measuring ‘law in the books’); (ii) a quantitative and qualitative study to assess the perceptions of key actors regarding those policies (capturing perceptions of ‘law in books’ and ‘law in action’); (iii) a careful analysis of key social indicators directly or indirectly related to illicit drug use (e.g., health indicators, such as HIV or hepatitis infection rates; demand indicators, such as illicit drug consumption rates; or justice system indicators, such as number of drug-law offences or imprisonments); and (iv) an in-depth understanding of the relationship between national drug laws and policies (steps (i) and (ii)) and social indicators (step (iii)).

As outlined in our research proposal, each of these steps in our analysis corresponds to a Work Package (WP), led by a consortium member, and ultimately results in a chapter of this final report:

- Chapter 2 (WP2): Cross-country comparison of national drug policies using leximetrics
 - WP leader: Ana Lourenço (Portugal); WP participants: Italy and Portugal research teams
 - Objective: to build indices of laws regarding drug production, distribution and use in the countries selected – Portugal, France, Italy, the Netherlands, England, Canada and Australia – and over a time-frame of twenty years (1996-2016)
- Chapter 3 (WP3): Qualitative and quantitative study of drug policy perceptions
 - WP leader: Dirk Korf (Netherlands); WP participants: France, Italy, Netherlands and Portugal research teams
 - Objective: to ascertain the perception of drug policy and its evolution in the selected countries. This involves empirical data gathering (qualitative expert interviews to gather actors’ perceptions on legal evolution and its impact on social indicators, and surveys on perceptions of law in action)
- Chapter 4 (WP4): Key social indicators for drug policy analysis
 - WP leader: Pierre Kopp (France); WP participants: France and Italy research teams
 - Objective: to review, develop and collect information on key social indicators directly or indirectly related to illicit drug use
- Chapter 5 (WP5): Assessing the impact of drug policies on key social indicators
 - WP leader: Ricardo Gonçalves (Portugal); WP participants: France, Italy, Netherlands and Portugal research teams
 - Objective: to develop a cross-country analysis of drug policies and their impact on social indicators.

1.2. Executive summary

There is worldwide diversity in national drug laws and policies. A brief analysis of the EMCDDA’s European Legal Database on Drugs reveals a variety of laws and inherent paradigms, ranging from crime-centred perspectives to health centred ones. Outside Europe, this diversity is even more salient, as countries with a legalisation approach coexist with countries where drug use is severely punished (UK Home Office, 2014). This diversity in national drug policies, as well as their evolution, is somewhat to be expected, insofar as

they reflect each country's social, economic and cultural drivers. Nonetheless, given that illicit drugs undoubtedly generate social costs, changes in national drug policies should be followed by a systematic method for measuring their impact on key drug-related indicators. And yet little is known about the relationship between key drug indicators and the applicable drug policy framework. Naturally, this is a complex issue. Drug policy (as other policies) has various relevant dimensions: 'written' policy is typically approved and enacted by law; policy 'in action' relates to the practical implementation of 'written policy'; and 'perceived' policy refers to how stakeholders perceive the 'written' policy as well as the policy 'in action'. Each country probably has a unique drug law and policy, resulting from the combination of these three different dimensions, built and/or changed over time depending on its society evolution or ideological position. Such policy should clearly have an impact on illicit drug production, distribution or use. Therefore, understanding the relationship between drug law and policy and key drug-related indicators is essential to inform the ongoing debate and provide scientific evidence to the discussion surrounding drug policy regimes, especially (but not only) in what concerns cannabis. Such an understanding requires an in-depth cross-country interdisciplinary approach involving stakeholders that would ultimately make a significant and impactful contribution to the field, as well as for future policy discussions. This is the goal of our research project.

[yet to be completed]

2. Cross-country comparison of national drug policies using leximetrics

2.1. Introduction

This chapter contains the work developed in Work Package 2 (WP2 - Cross-country comparison of national drug policies using leximetrics). The objective of WP2 is to build indices of laws (leximetrics) regarding drug production, distribution and use in the countries selected – Portugal, France, Italy, Netherlands, United Kingdom, Canada and Australia – over a time-frame of twenty years (1996-2016). We have named this the **CATÓLICA Illicit Drug Policy Index** ('CATÓLICA-IDPI').

The regulation of psychoactive substances has been a controversial subject-matter for several decades, most notably since the International Opium Convention was signed, in 1912, and especially since the adoption of the UN Single Convention on Narcotic Drugs, in 1961. The latter replaced the existing multilateral treaties in the field, reduced the number of international treaty organs exclusively concerned with the control of narcotic drugs, and made provision for the control of the production of raw materials of those drugs, thus establishing the foundations for coordinated international action in the field of illicit drugs.

At the international level, different perspectives on the control of narcotic drugs have coexisted, from absolutist prohibitionist approaches to those promoting drug regulation to manage drug production, trade and consumption (Bergeron & Colson, 2017). At the national level, drug policies evolve within an institutional environment characterized by legal changes, religious and socio-political pressures, and macro-economic dynamics.

We put forward two research questions guiding the work developed in this chapter: (i) how has the illicit drug policy evolved over the last two decades in each of the seven countries under analysis? And (ii) how can the illicit drug policy be converted into numbers, so as to allow for intertemporal and international comparison?

To answer these research questions, a state-of-the-art comparative law technique is used: leximetrics. This is a method of comparative law that relies on systematic quantitative methodology (Cooter & Ginsburg, 2003), turning the law into numbers and therefore allowing intertemporal and international comparison of legal change.

Understanding the trajectory of illicit drug policy may be built via a qualitative analysis of 'law in books' – including statutory law, policy guidelines and judicial precedent – using methods such as discourse analysis. However, to compare the stages of evolution of 'law in books', a quantitative method needs to be used. The basic idea of leximetrics is precisely

to turn law into numbers (Siems, 2011) allowing it to be measured. Within empirical legal research, leximetrics has been used in a number of ways, ranging from simply counting (e.g. counting cases, words, lawyers) to benchmarking of legal rules, measuring the quality of legal rules or surveying perceptions about the law.

The legal fields in which leximetrics has been used are corporate law and corporate governance (e.g. La Porta et al., 1998, 2008; Armour et al. 2009b) and labour law (e.g., Deakin et al., 2007; Mitchell et al., 2010). Leximetrics has been used in comparative corporate governance, involving cross-country comparison of legal rules regarding investor protection (e.g., Cheffins et al., 2014), as well as creditor and worker protection (e.g., Armour et al., 2009a); it has also been used to compare the evolution of labour law, namely regarding rules for worker protection. In addition, it has been used in studies that involve some kind of criminal provisions, such as self-dealing (Djankov et al., 2008). These studies have in common a purpose that also underlies our project proposal: the construction of indices of legal rules that can be used via quantitative techniques to assess the effects of specific policies.

Leximetrics is a demanding method of analysing the law. The risk of coding errors, the reduction of complexity that it involves, and the interdisciplinary approach it requires justify Cheffins' et al. warning of "use, but with care" (Cheffins, 2014). This implies that one must have a special concern with the research protocol, in particular regarding timeline validation, development and implementation of coding procedures and triangulation of sources (e.g., EMCDDA legal database and national laws). Nonetheless, the method may provide valuable insights into public policy assessment and change.

In order to construct this index, we have first identified and collected relevant legislation, court decisions and drug policy documents for each of the 7 countries. This has led to the first output of WP2: detailed drug policy timelines for each country under analysis. Second, we have developed a leximetrics coding methodology which effectively allows us to 'transform the law into numbers'. This has led to the second output of WP2: the CATÓLICA-IDPI.

Section 2.2 presents the methodology used to construct the index; section 2.3 then presents a cross-time and cross-country comparative analysis of the CATÓLICA-IDPI; finally, section 2.4 concludes. We include as Appendix A the national legislative timelines produced for each of the countries, and as Appendix B the coding template used to construct the CATÓLICA-IDPI.

2.2. Methodology

The CATÓLICA-IDPI index is constructed using a version of 'leximetric' methodology, which provides a basis for a comparative quantitative analysis of legal rules (Lele and Siems, 2007; Adams, Bishop and Deakin, 2016). The construction of the index dataset consists of two parts that include the following steps:

Part 1:

- (1) Identification of a general phenomenon of interest ('illicit drugs');
- (2) Development of a conceptual construct;

(3) Identification of indicators or variables which, singly or together, express the construct in numerical terms;

(4) Construction of a timeline that identifies the provisions of law, relevant court decisions and policy guidelines in each country for each variable;

(5) Validation of the timeline by legal experts of each country, who may suggest additional landmarks;

Part 2:

(6) Development of a coding algorithm which sets out a series of steps to be taken in assigning numerical values to the timeline events for each variable identified, for each country;

(7) Identification of a measurement scale that is embedded in the algorithm;

(8) Allocation of weights, where necessary, to each indicator or variable;

(9) Aggregation of indicators and variables, if possible, in an index that provides a measure of illicit drug policy, to be used in statistical analysis.

From a chronological viewpoint, the work carried out during WP2 consisted of:

- For each country under analysis, producing a timeline of illicit drugs' legislation (legislative timelines) – steps 1 to 4;
- Identifying legal experts in each country that could provide feedback on the legislative timeline and incorporating their feedback in a final version of the country's legislative timeline – step 5;
- Using the legislative timelines to assist in the variable selection and coding system for leximetrics – steps 6 to 9.

2.2.1. Legislative timelines

This subsection provides a description of the methodology adopted to produce illicit drugs' legislative timelines for each of the seven countries under analysis, as well as the timelines themselves.

Overview

A legislative timeline is essentially a list of key events, policy and legislative changes that have occurred in each country between 1996 and 2016.

Period

The period under analysis is, in principle, from 1996 to 2016 (or the present day if relevant policies came into place). In many countries, relevant legislative milestones occurred prior to 1996, some of which are still in force. Therefore, the initial date differs across countries depending on the date of the main legislative landmark prior to 1996.

Timeline construction

The timeline takes into consideration statutory law, coded in the year of its publication, and case law, coded in the year in which judgments are reported. It also considers elements that are deemed as functional equivalents to law: superior court decisions (in civil law-

based countries), coded in the year of their reporting, and policy guidelines and regulations issued by administrative entities, coded in the year of their publication.

Therefore, herein we identify the provisions applicable to or corresponding to the description of each of the variables in the index (Table 1), focused on illicit drugs, particularly cannabis. These can take the form of statutory law, case law, superior court decisions or policy guidelines that impact law enforcement. We identify the provisions that cover seven core variables identified and explained in Table 1: Consumption; Possession; Traffic; Money Laundering; Harm Reduction; Treatment and Prevention. We also identify the provisions that are included in the overall category of Traffic, which cover Cultivation, Production and Distribution of illicit drugs, at an industrial or at an agricultural level and at home for own consumption. The choice of the variables is explained in more detail below.

To collect the information we consulted relevant databases of national laws; the EMCDDA Legal Database on Drugs and its reports; the ILO's NATLEX database; and various secondary sources, e.g., the book by Renaud Colson & Henri Bergeron (2017) entitled 'European Drug policies: ways to reform'. Primary sources were retrieved from texts available online. Wherever possible, texts were consulted in their original language (the languages read in the original were English, French, Italian and Portuguese). We consulted texts translated by the EMCDDA, particularly in the case of the Netherlands.

Choice of variables

First and foremost, we chose variables that were typically addressed in legislation and identified as of interest by the project experts. These variables were later complemented by other variables associated with health-oriented policy objectives. Second, we chose variables that would enable us to get a representative mixture of illicit drugs legal rules and main policies adopted by any country. Third, as the purpose of this index is to examine differences across countries and over time, we chose variables where differences could be expected.

We started by identifying illicit drug laws for three main variables: Consumption, Production and Distribution, as these were the core variables within the illicit drugs 'production process' and the ones identified as of interest by the project experts. After collecting the initial legal information for most countries and reviewing the main literature and case studies on illicit drugs policies, we expanded the analysis to include Harm Reduction, Treatment and Prevention policies. This was done as most EU countries shifted at some point in the period under analysis to a more health oriented drug strategy. Next, in order to better capture differences in EU countries, we adapted and expanded the analysis in the following way: we consider Possession in addition to Consumption; we distinguish between Cultivation, Production and Distribution and include them in a more general Traffic variable (see explanation below); and we include Money Laundering as an additional relevant variable. As cannabis is the main focus of the project and where most of the differences are expected to be found, we also subdivided the variables to identify policies that refer specifically to cannabis.

It might seem surprising that the index includes a variable Traffic broken down into Cultivation, Production and Distribution. This is justified on the grounds that the definition of traffic encompasses the *cultivation, manufacture, distribution and sale* of illicit drugs (see Table 1). It is important to distinguish these concepts, which can have different prohibition regimes across countries, especially in the cannabis case. For example: the

distribution/supply of cannabis to a consumer or to a coffee shop (in the case of the Netherlands) can have a different legal framework from the traffic of illicit drugs (including cannabis) in larger quantities; in the same line of reasoning, cultivation of cannabis for own consumption, production of cannabis for medical purposes or production of synthetic drugs can have different legal implications within and across countries. Therefore, for the purpose of the timeline codification, the variable Traffic includes the sub-variables Cultivation, Production and Distribution, which in turn have a sub-code that is specific to Cannabis (see Table 1).

Timeline description

The timeline draws on provisions of laws (statutory law and case law), relevant superior court decisions, policy guidelines and regulations applicable to or corresponding to the description of each of the core variables set out in Table 1. A one-digit ID number was assigned to each core variable (from 1 to 7); a two-digit ID number was assigned to variables that were expanded from a core variable, but relevant for codification (this is only applicable to the case of Traffic) (31 to 33); the letter C is added to one-digit or two-digit ID numbers to identify variables related to cannabis specifically. The first column of the timeline indicates the year of the event. The second column indicates the variable(s) (ID number) that such event refers to. The third column indicates the legislative/policy milestone. It first refers the name of the event (Law, Act, Regulation, Guideline, etc.), followed by the date of publication, and then describes its relevance as a drug policy landmark in the country in that year. All the timelines are provided in this report in Appendix A.

Guidelines for timeline validation

Experts were asked to review the provisions of law (statutory and case law), relevant superior court decisions and policy guidelines and regulations applicable to the description of each of the core variables. Based on their knowledge and experience of the applicable provisions in their country, they were asked to check that we have not overlooked important landmarks. If we did so, they were asked to add any event they consider to have had an impact in the illicit drug policy of their country. They were also asked open questions about their country's legislation and policy guidelines and regulations.

They were asked to pay attention to the following situations in which we found more difficulties during the construction of the timeline, and which were phrased as follows:

"1) Statutory and case law. A particular legal rule can be based on statutory law or case law; therefore, for the purposes of this exercise, both must be considered. Although in civil law countries court decisions are not typically regarded as a source of law, please do take them into account while validating and completing the timeline, because they can bring about an effect which is as important as a statutory provision. An example is the prosecution of cannabis possession or cultivation.

2) Policy guidelines and regulations. We found that there are guidelines and regulations from administrative sources that do not fit the concept of law, but that have great impact in the drug policy of a country. This is particularly important for harm reduction, treatment and prevention. Moreover, as in the particular case of cannabis, we find guidelines that are aimed, for instance, at the police, which are not included in legal rules, but indeed reflect the drug policy of a country and, if ignored, would not provide a complete picture of its illicit drug policy. Examples are the first warning for a cannabis consumer in the UK; syringe-exchange programs; or safe school programs.

3) Agricultural, industrial or financial landmarks. We collected the information on drug policies in databases related to illicit drugs, such as national legal databases and the EMCDDA Legal Database on drugs. However, we found that some relevant laws and policies might not be considered within the scope of illicit drugs' regulation. They are frequently associated with parliamentary commissions or governmental departments of justice, internal administration or health, and are regulated within the departments of agriculture, industry or finance, as could be the case of industrial cultivation and production of cannabis, its retail, import and export for medical, textile or other uses, such as recreational use. Following the same line of reasoning, there may exist additional financial and banking laws related to money laundering that have eluded us.

4) Non-uniform legal system and listing rules. If the legislation or policy on illicit drugs is not regulated in a uniform way in a given country because, for instance, it is a federal state, we have taken into account the law for the capital state. But if you consider that this criterion significantly constrains relevant distinctions between sub-units of that country from being made, please make that observation and complete the timeline accordingly."

Table 1 – Católica Illicit Drug Policy Index (CATÓLICA-IDPI)

Type	ID	Description
Consumption	1	Refers to the direct consumption/use of illicit/controlled drugs.
Consumption cannabis	1C	Refers to the direct consumption/use of cannabis in any form.
Possession	2	Refers to possession for personal consumption of illicit drugs.
Possession cannabis	2C	Refers to possession for personal consumption of cannabis.
Traffic	3	Refers to the global illicit trade involving the cultivation, manufacture, distribution and sale of substances which are subject to drug prohibition laws. Includes importation and exportation. "Import" and "export" mean in their respective connotations the physical transfer of drugs into or out of a national territory.
Traffic cannabis	3C	Refers to the illicit trade of cannabis.
Cultivation	31	Refers to cultivation of opium poppy, coca bush or cannabis plant.
Cultivation cannabis	31C	Refers to cultivation of cannabis plant - Cannabis sativa L.
Production	32	Refers to the act of manufacture, manipulation or obtainment of narcotic drugs, psychotropic substances or drug precursors, from natural organisms out of the plants that produce them (such as opium, coca leaf, cannabis and cannabis resin), either by way of collecting or by way of extracting or by the way of transforming through physical or chemical products.
Production cannabis	32C	Refers to the act of obtaining, manufacturing or manipulating cannabis plant or resin.
Distribution	33	Domestic supply or attempt to supply illicit/controlled drugs.
Distribution cannabis	33C	Domestic supply or attempt to supply cannabis.
Money laundering	4	Money laundering is the processing of criminal proceeds (including but not limited to drug trafficking) to disguise their illegal origin or the ownership or control of the assets, or promoting an illegal activity with illicit or legal source funds.
Harm reduction	5	Encompasses interventions, programs and policies that seek to reduce the health, social and economic harms of drug use to individuals, communities and societies.
Treatment	6	Encompasses a range of interventions used for the treatment of drug use problems, including psychosocial approaches, opioid substitution and detoxification.
Prevention	7	Drug prevention approaches range from those that target society as a whole (environmental and universal prevention) to interventions focusing on at-risk individuals (indicated prevention).

Notes:

(i) The description of the concepts in this table was elaborated by the authors, as they are not normalized across countries. We developed these descriptions taking into account information collected from different national laws and also reports produced by the EMCDDA and UNODC (United Nations Office on Drugs and Crime).

(ii) The variable traffic encompasses cultivation, production and domestic distribution. In terms of codification, this means that if a law or a specific provision or guideline refers to traffic in general, its code ID is 3; but in case it refers to traffic of cannabis its code ID is 3C; if it refers specifically to cultivation, its code ID is 31; if it refers specifically to the cultivation of cannabis its code ID is 31C (a similar logic applies to the remaining Traffic sub-variables).

In the context of international drug control and in conformity with the 1961 Single Convention on Narcotic Drugs, except where otherwise expressly indicated or where the context otherwise requires, the following definitions shall apply:

- a) "Drug" means any of the substances in Schedules I and II, whether natural or synthetic.
- b) "Schedule I", "Schedule II", "Schedule III" and "Schedule IV" mean the correspondingly numbered list of drugs or preparations annexed to the 1961 Single Convention on Narcotic Drugs.
- c) "Cannabis" means the flowering or fruiting tops of the cannabis plant (excluding the seeds and leaves when not accompanied by the tops) from which the resin has not been extracted, by whatever name they may be designated; "Cannabis plant" means any plant of the genus Cannabis; "Cannabis resin" means the separated resin, whether crude or purified, obtained from the cannabis plant.
- d) "Coca bush" means the plant of any species of the genus Erythroxylon; "Coca leaf" means the leaf of the coca bush except a leaf from which all ecgonine, cocaine and any other ecgonine alkaloids have been removed.
- e) "Production" means the separation of opium, coca leaves, cannabis and cannabis resin from the plants from which they are obtained.
- f) "Manufacture" means all processes, other than production, by which drugs may be obtained and includes refining as well as the transformation of drugs into other drugs.
- g) "Preparation" means a mixture, solid or liquid, containing a drug.

2.2.2. Leximetrics: variable selection and coding system

'Leximetrics' refers to a method of turning law into numbers, allowing it to be measured (Siems, 2011). One of its main use is for comparative purposes: this involves the complex task of coding the law alongside specific variables, thus allowing for a taxonomy of legal rules to be built in a functional bottom-up approach. It also allows for econometric tools to be used in assessing the impact of particular types or clusters of legal rules.

Leximetrics methodology

Within IDPSO, 'CATÓLICA-IDPI' is a dataset coding for laws (including statutory and case law, relevant superior court decisions and policy guidelines and regulations) on illicit drugs in the 7 countries selected. The dataset covers the period 1996-2016, though different date limits may apply in a given country, namely when relevant national milestones that are still in force precede 1996 or when relevant policies came into place after 2016.

'CATÓLICA-IDPI' builds on the work carried out at the Centre for Business Research (CBR) in Cambridge, which used leximetrics to code legal data for labour laws in 117 countries between 1970 and 2013 (the CBR Labour Regulation Index), shareholder protection in 30 countries between 1990 and 2013 (the CBR Extended Shareholder Protection Index), and creditor protection in 30 countries between 1990 and 2013 (the CBR Extended Creditor Protection Index). The CBR Leximetric Datasets are available on the University of Cambridge repository, and one of its distinguishing features is that all legal sources for the data coding are fully described in the relevant codebooks, thereby assisting transparency, external validity and replicability of results. Each dataset takes the form of an Excel spreadsheet containing the data and a Codebook containing the sources of the coding and an explanation of the coding methodology.

When constructing the 'CATÓLICA-IDPI', a number of measures – identified in the CBR's Codebook as safeguards that the index gets as close as possible to representing the real effect of legal rules in any given jurisdiction – were used as a working reference:

- Use a wide range of legal information (i.e., sources of rules): positive legal rules, other norms which are *de facto* binding, and judicial decisions; this allows consideration for relevant cross-national differences in the operation of legal rules;
- Code for a wide range of values, using intermediate score between 0 and 1; this allows for increased sensitivity to legal variation;
- Cover a wide range of types of legal rules: mandatory and default;
- Code for legal rules as they have evolved over time, so as to build a template that is sensitive to possible variations of the law over time.

The construction of the 'CATÓLICA-IDPI' started with brainstorming sessions aimed at developing a draft template for the dataset, based on questions and coding for each of the dimensions that form the backbone of public policy on drugs: consumption (1); possession (2); traffic (3), which is disaggregated into cultivation (31), production (32) and distribution (33); money laundering (4); harm reduction (5); treatment (6); and prevention (7). A total of 6 brainstorming sessions of the Portugal research team took place at Católica Porto Business School.

Inspired in the paper by Gonçalves, Lourenço & Silva (2015), the research questions that informed the brainstorming exercise were as follows: (i) for each dimension, what variables allow us to classify a country's legal approach to drugs as health-oriented/liberal as opposed to criminal-oriented/prohibitionist? (ii) Also, for each dimension, are these variables different for different types of drugs?

First, when looking into (i), we are fully aware of the politically sensitive nature of the terms we have used. Note that we are looking into 7 different dimensions of drug policy. For each dimension, the coding methodology requires us to set 'bounds' to the coding range. In other words, we need to define, for each of the 7 dimensions, what exactly corresponds to the extremes of the coding range. Upon careful reflection, we came to the conclusion that these extremes should be whether a country is health-oriented/liberal as opposed to criminal-oriented/prohibitionist. For all the dimensions, a health-oriented/liberal country would correspond to a '0' in our coding exercise, whilst a criminal-oriented/prohibitionist would correspond to a '1'.

Considering now (ii), it is natural to expect that the 'bounds' of the coding exercise differ across illicit drugs. For instance, the criteria we define for a country to be considered criminal-oriented/prohibitionist with respect to cannabis may not be exactly the same as those associated with other drugs. As an example, if one of the criteria to determine whether a country is criminal-oriented/prohibitionist is the maximum jail time for an individual caught in the possession of a small quantity of an illicit drug, then we need to adapt the maximum jail time threshold for each type of drug – as they often indeed attract different penalties. We therefore establish a difference between 'soft' and 'hard' drugs. The terms 'soft' and 'hard' are used in this context to refer to the severity of the legal consequence or penalty of drug-related behaviour (a legal-based criterion), and not to the risk for health (a medical-based criterion), notwithstanding the relationship between these two criteria. Cannabis, which is frequently object of specific regulation and whose legalization is more often discussed, was the only drug considered as 'soft'. In other words, we looked specifically at the drug policy framework associated with cannabis. The exercise

was considerably more difficult when looking at 'hard drugs', given that they are much more numerous. We have therefore simplified our analysis by considering only the following hard drugs: cocaine and heroin (which are naturally or plant-derived drugs) and MDMA (a synthetic drug). The rationale was simple: for each country within the sample, these drugs typically attract the harshest penalties.

The brainstorming exercise started with a specific drug – cannabis – and one of the identified dimensions – possession (variable 2C). The aim of the team was to develop a method for identifying the relevant questions/variables and coding, which could then be transferred for the codification of other dimensions and for 'hard' drugs.

As we outlined above, for dimensions 1 to 3 the reference point for the exercise was the dichotomy most strict-most lenient: for each question/variable addressed within each dimension, the strictest regulatory approach would be equivalent to 1, whereas the most lenient regulatory approach would be equivalent to 0. Intermediate points were used when national legislative timelines justified an increased sensitiveness of the scale. For each dimension, the degree of strictness of a country is then the average of the categories included in each dimension.

Dimension 4 (money laundering) was disregarded, given that laws associated with money laundering within national legislative timelines are not only issued to address the illicit drugs problem, but also to safeguard against terrorism and threats to national security. It is therefore difficult to interpret how and whether a change in money laundering laws may (or may not) be associated with or have an impact on illicit drugs, particularly its traffic. By definition, the traffic of illicit drugs involve two parties – the buyer and the seller – often located in different countries. It then becomes difficult – if not impossible – to make reasonable assertions regarding the possible impact of a money laundering law change in a given country on social outcomes of that country. Given this difficulty, we have not pursued our analysis involving this drug policy dimension.

For dimensions 5 to 7 the reference point for the exercise was the dichotomy less health oriented-more health oriented: for each question addressed within each dimension, the approach revealing the narrowest access to health oriented responses would be equivalent to 1, whereas the approach revealing the widest access to health oriented responses would be equivalent to 0. Intermediate points were used when national legislative timelines justified an increased sensitiveness of the scale. The degree of health orientation of a country is the average of the categories included in each dimension.

The CATÓLICA-IDPI coding template is provided in this report in Appendix B. This appendix briefly explains the template. It should be noted that the coding template is dimension-specific. In other words, for each of the 6 drug policy dimensions we are looking into, we have developed a set of questions in order to 'classify' a country (between 0 and 1). These questions are often grouped in 'categories'. Consider dimension (1) consumption for cannabis. Within cannabis consumption, we have identified 3 broad categories which would allow us to determine whether a country is health-oriented/liberal ('0') or criminal-oriented/prohibitionist ('1'): the maximum consequence foreseen in the law for an individual caught consuming it (1C.1); whether the law foresees the exemption of sanctions under specific circumstances (1C.2); and whether the law explicitly foresees a different regulatory regime for therapeutic/medicinal cannabis (1C.3). Then, within each of these categories, we have looked at particular sub-categories which reflect the legal diversity across the countries in our sample. For example, for category 1C.1, the maximum

consequence for an individual caught consuming, we considered a differential treatment under the law to addicts/non-addicts, as well as whether they were caught for the first or for the n^{th} time; in addition, we looked into particular restrictions associated with the place of consumption (e.g., near schools) or with particular professions. All these sub-categories allow us to form a more comprehensive view of whether the maximum consequence associated with cannabis consumption is closer to '0' (health-oriented/liberal) or '1' (criminal-oriented/prohibitionist).

As we outlined above, we should not expect to observe the exact same categories when we look into hard drugs. For example, whilst considering differences in regulatory regimes for therapeutic/medicinal cannabis is reasonable, such a consideration is certainly not relevant when looking at hard drugs. Therefore, dimension (1) consumption of hard drugs only contains two categories: the maximum consequence of an individual caught consuming a hard drug (1H.1) and whether the law foresees exemptions of sanctions under particular circumstances (1H.2).

This difference between cannabis and hard drugs was only established for dimensions (1) consumption, (2) possession and (3) traffic. Indeed, dimensions (5) harm reduction, (6) treatment and (7) prevention are typically not drug-specific.

Appendix B describes, for each dimension, which categories and sub-categories were considered in order to arrive at a final score for each dimension, for each type of drug (cannabis or hard drugs), for each country and for each year.

2.3. Results

The CATÓLICA-IDPI index allows for intertemporal and cross-country comparative analysis of drug policies. These analyses are presented in the next sections.

2.3.1. Cross-time results by country [1996-2016]

This section presents a comparative analysis by country, comparing the trajectory of illicit drug policy across time in the period 1996-2016.

Portugal

Figure 1 reports the evolution of three dimensions – Consumption (1), Possession (2) and Traffic (3) – of cannabis over the last two decades in Portugal. We can clearly see the change in Portugal in 2000 from a more criminal oriented policy to a more health oriented policy, when consumption and possession of small quantities was decriminalised. This is the only clearcut legislative landmark affecting these two drug policy dimensions. These changes did not affect traffic, as the laws referring to cultivation, production and distribution did not suffer any change since 1993.

Figure 1: Consumption, Possession and Traffic of Cannabis in Portugal: 1996-2016

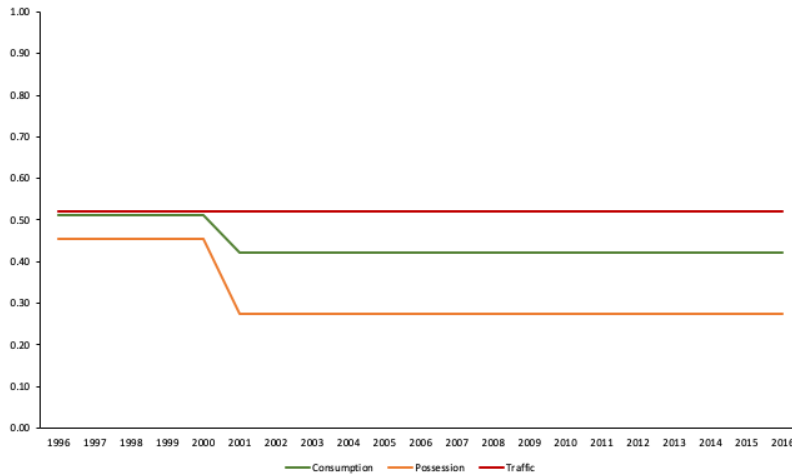


Figure 2 reports a similar evolution of these dimensions (Consumption (1), Possession (2) and Traffic (3)) for hard drugs over the last two decades in Portugal.

Figure 2 - Consumption, Possession and Traffic of Hard Drugs in Portugal: 1996-2016

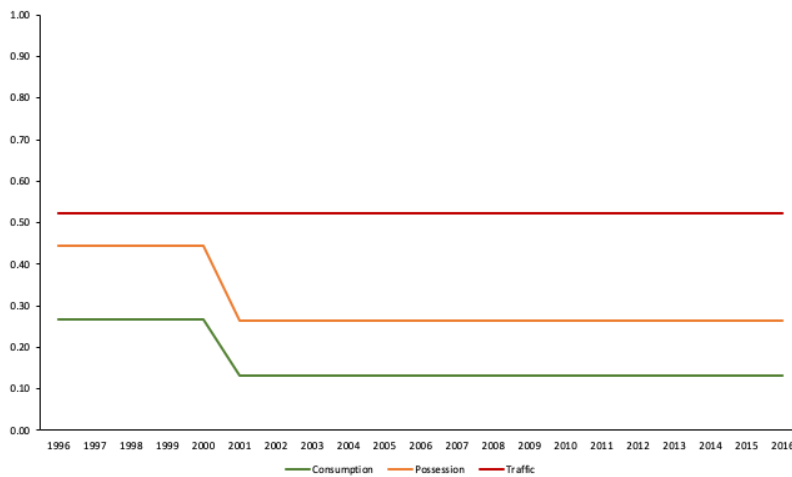
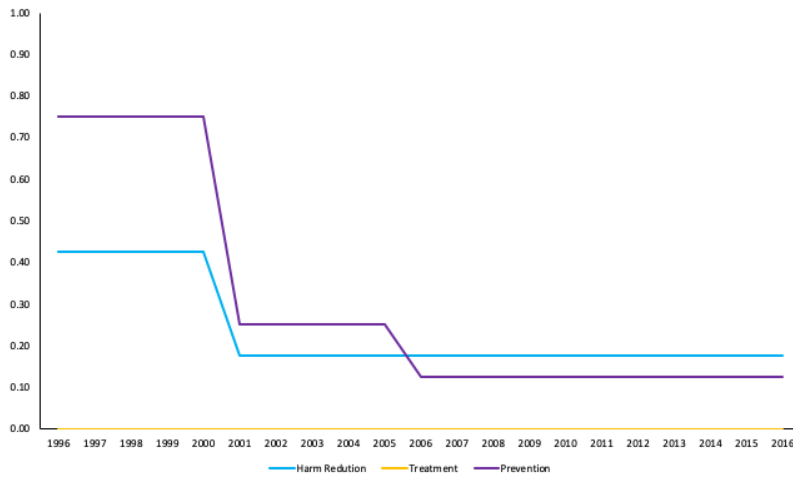


Figure 3 reports a somewhat similar pattern of evolution with regard to the harm reduction and prevention dimensions: a significant policy shift is observed in 2000. In 2006 there was an increase in prevention efforts for specific groups. In terms of treatment, the health-oriented approach started much earlier – at least since 1993 – and is not associated with the legislative change around 2000.

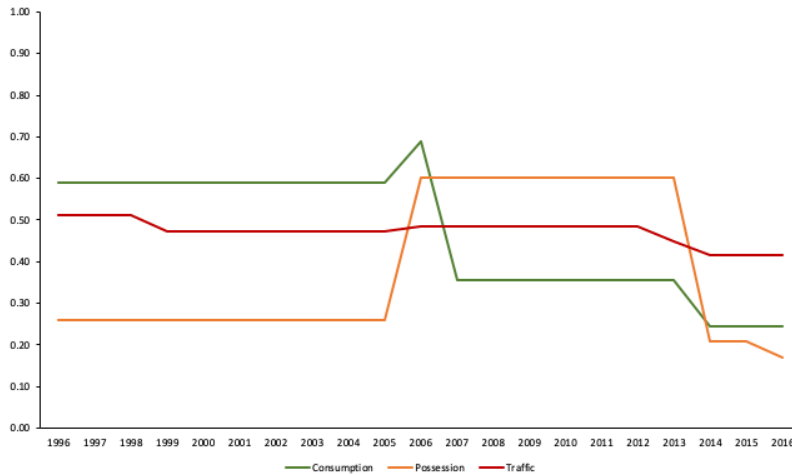
Figure 3 - Harm Reduction, Treatment and Prevention in Portugal: 1996-2016



Italy

The evolution of the Possession (2) dimension of cannabis over the last two decades in Italy shows a turning point in 2006, a year in which a more criminal oriented law was introduced, as we can see in Figure 3: the law n. 49/2006 provided the same criminal penalties for possession, cultivation, production and distribution regardless of the kind of drug. Another turning point can be observed in 2014, as the Italian Constitutional Court declared the law n. 49/2006 unconstitutional, thus effectively reverting to the previous legislation. With regards to Consumption (1), we can observe the same turning points, as the shifts correspond to the same law changes. We can also observe a clear shift in 2007, which is associated with the possibility of doctors to prescribe medicines based on cannabis that can be prepared by pharmacists. In what regards traffic, there were slight changes mostly due to allowances for distribution of low THC level products in 1999 and allowances for therapeutic cannabis cultivation in 2013.

Figure 4 - Consumption, Possession and Traffic of Cannabis in Italy: 1996-2016



This Figure is not correct as the Constitutional Court modified just the part of the law concerning art.73 but not art .75, so there is not decreasing trend for lines related to users since 2014. I send you again the Francesca de Marinis scientific report on the various laws.

Figure 5 reports the same turning points for Consumption (1) and Possession (2) in what concerns hard drugs over the last two decades in Italy.

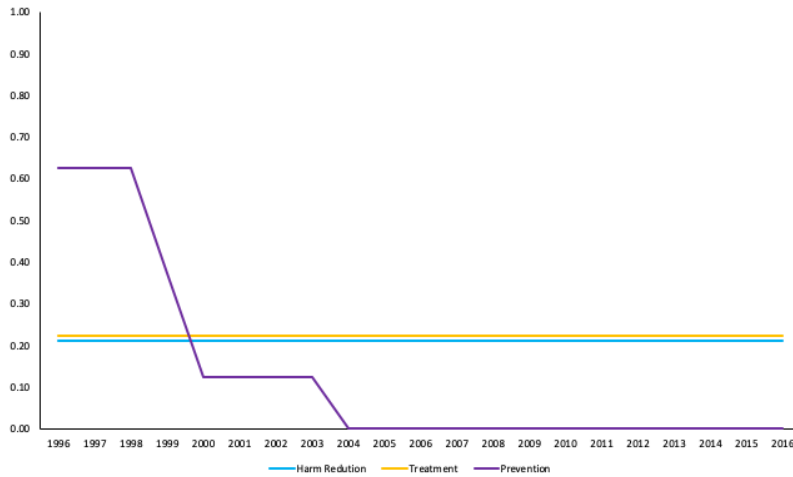
Figure 5 - Consumption, Possession and Traffic of Hard Drugs in Italy: 1996-2016



As above the lines are not correct

In relation to health oriented measures such as harm reduction or treatment, we can observe in Figure 6 that Italy has maintained them over time. By contrast, it has gradually increased its efforts in the prevention dimension, increasing prevention in recreational settings in 1999, prisons in 2000 and schools in 2004.

Figure 6 - Harm Reduction, Treatment and Prevention in Italy: 1996-2016



The behaviours of the lines are correct for what concerns prevention and treatment but not for harm reduction. In 2009 there was great increase in naloxone encouraged and used, and heroin and opioids mortality decreases.

France

Figure 7 and Figure 8 indicate that French laws did not suffer many changes in the period 1996-2016 in what regards consumption, possession and traffic of cannabis and hard drugs. We can observe a turning point in consumption to a more criminal oriented policy in 2007 due to an increase of penalties for illicit drugs consumption (cannabis or hard drugs) in specific occupations/professions.

Figure 7 - Consumption, Possession and Traffic of Cannabis in France: 1996-2016

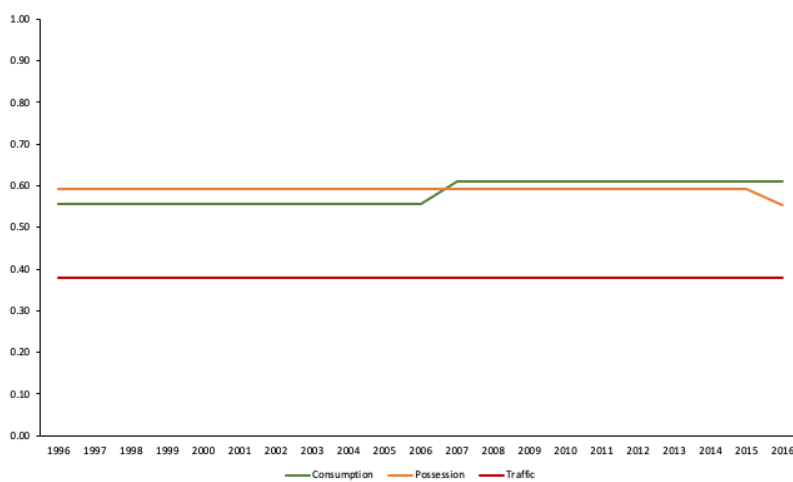
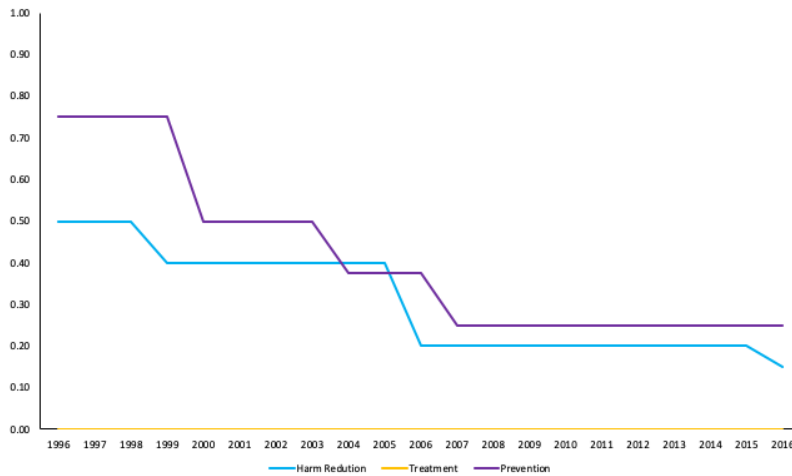


Figure 8 - Consumption, Possession and Traffic of Hard Drugs in France: 1996-2016



In relation to health oriented measures, we can observe in Figure 9 that France has maintained a broadly constant treatment framework since 1996 and has gradually increased its efforts in the harm reduction and prevention dimensions.

Figure 9 - Harm Reduction, Treatment and Prevention in France: 1996-2016



The Netherlands

Figure 10 shows that Netherlands has a relatively lenient drug policy in relation to cannabis consumption and possession. In both these dimensions, we observe an increase in the respective scores in 1999, as the laws associated with consumption in coffee shops were tightened up, and a prohibition was introduced for possession in designated areas, such as

schools and public transports. In 2001, allowances were introduced for medical cannabis. In what regards traffic, there were slight changes mostly due to allowances for therapeutic cannabis cultivation.

Figure 10 - Consumption, Possession and Traffic of Cannabis in the Netherlands: 1996-2016



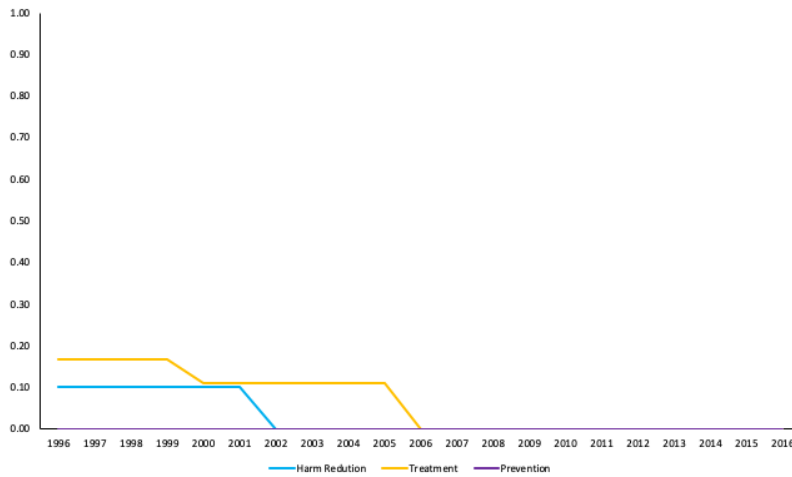
In what concerns hard drugs, we can observe in Figure 11 that the legal framework was fairly stable in the period 1996-2016. In 1997, treatment was introduced as an alternative to penalty.

Figure 11 - Consumption, Possession and Traffic of Hard Drugs in the Netherlands: 1996-2016



In relation to harm reduction, treatment and prevention, we can observe in Figure 12 that the Netherlands has a health oriented drug policy. Prevention efforts exist since before 1996 and we can also observe increased efforts on harm reduction and treatment until 2006.

Figure 12 - Harm Reduction, Treatment and Prevention in the Netherlands: 1996-2016



United Kingdom

In the United Kingdom, we can observe in Figure 13 a first turning point in 1999, both in consumption and in possession, which is related to the introduction of treatment as an alternative to penalty. We can also observe a turning point in possession in 2004, which is related to the introduction of a first time warning for possession of cannabis. In what regards traffic, there weren't many slight changes during the period in analysis.

Figure 13 - Consumption, Possession and Traffic of Cannabis in the United Kingdom: 1996-2016

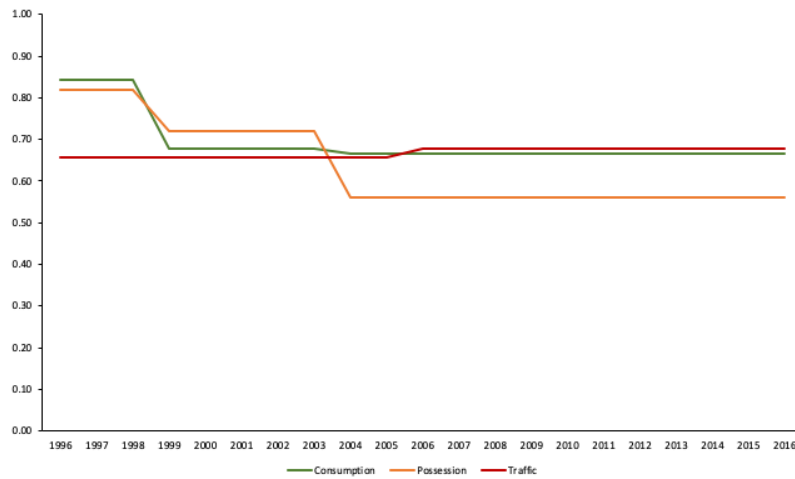
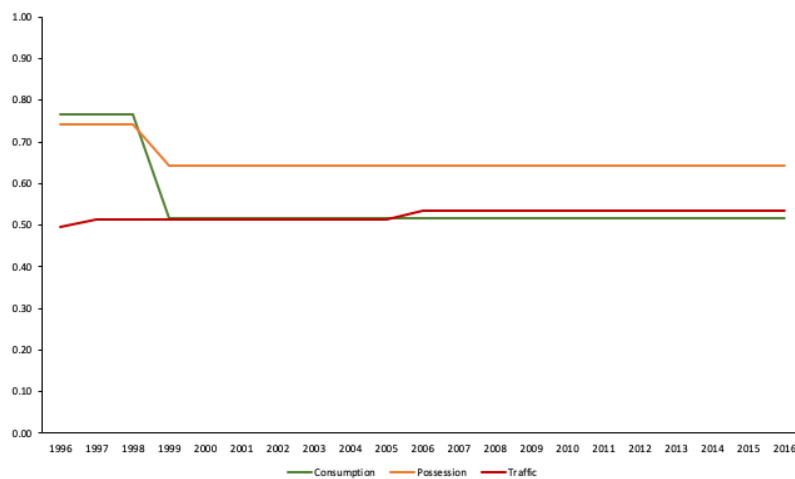


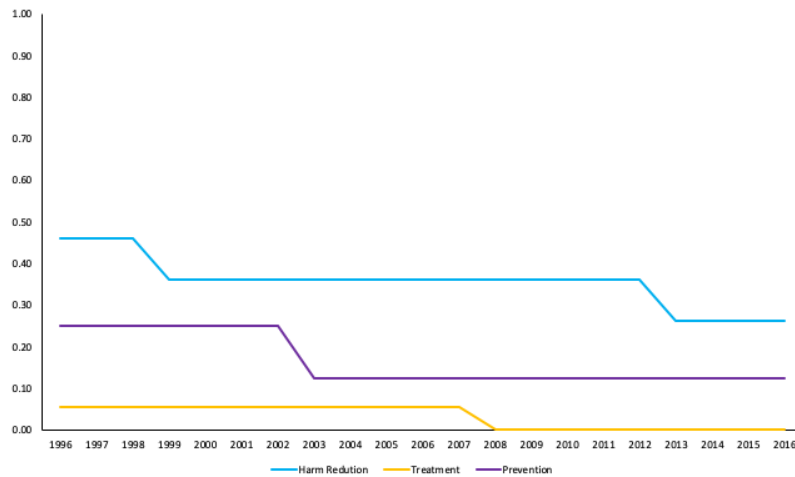
Figure 14 reports a somewhat similar evolution of the Consumption (1), Possession (2) and Traffic (3) dimensions in what concerns hard drugs over the last two decades in the United Kingdom, with a clear turning point in 1999 due to the introduction of treatment as an alternative to penalty. However, in contrast to cannabis, no significant changes were observed since then.

Figure 14 - Consumption, Possession and Traffic of Hard Drugs in United Kingdom: 1996-2016



In relation to the harm reduction, treatment and prevention dimensions, the United Kingdom has also increased gradually its efforts during the period 1996-2016.

Figure 15 - Harm Reduction, Treatment and Prevention in the United Kingdom: 1996-2016



Australia

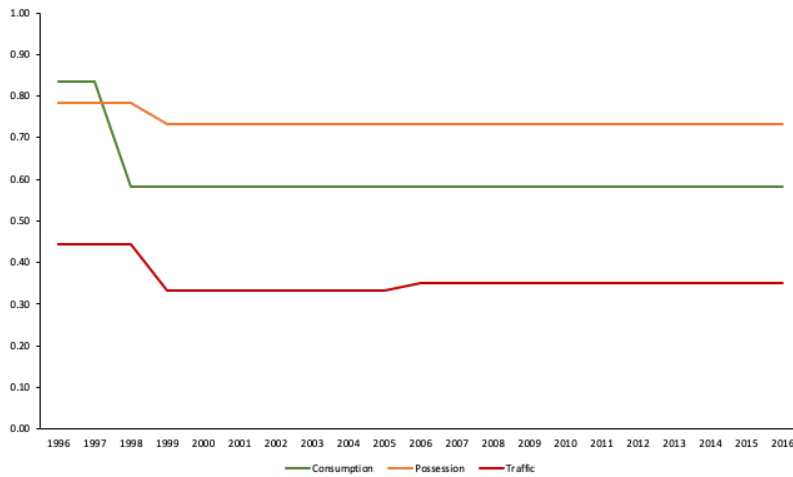
We can observe in Figure 16 that Australia has four main turning points in the direction of a more lenient drug policy regarding cannabis consumption and possession. The 1998 shift is related with the introduction of treatment as an alternative to punishment. The 1999 shift is associated with the introduction of injecting centers. The 2000 shift is related with the introduction of the Adult Cannabis Cautioning Scheme, where the police have a discretion to let consumers go with a caution. We can observe another turning point in 2014, which is linked with allowances for therapeutic cannabis.

Figure 16 - Consumption, Possession and Traffic of Cannabis in Australia: 1996-2016



In what concerns hard drugs, we can observe in Figure 17 a similar turning point in 1998-1999, but no further significant changes since then.

Figure 17 - Consumption, Possession and Traffic of Hard Drugs in Australia: 1996-2016



In relation to harm reduction, treatment and prevention, Australia has also increased gradually its efforts during the period 1996-2016.

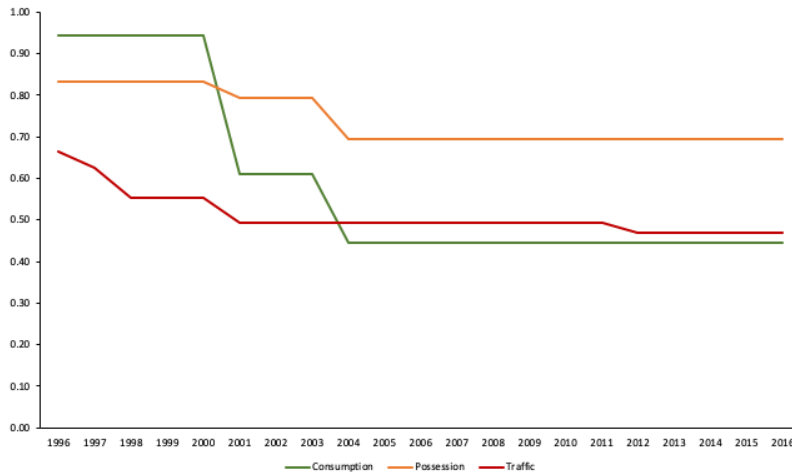
Figure 18 - Harm Reduction, Treatment and Prevention in Australia: 1996-2016



Canada

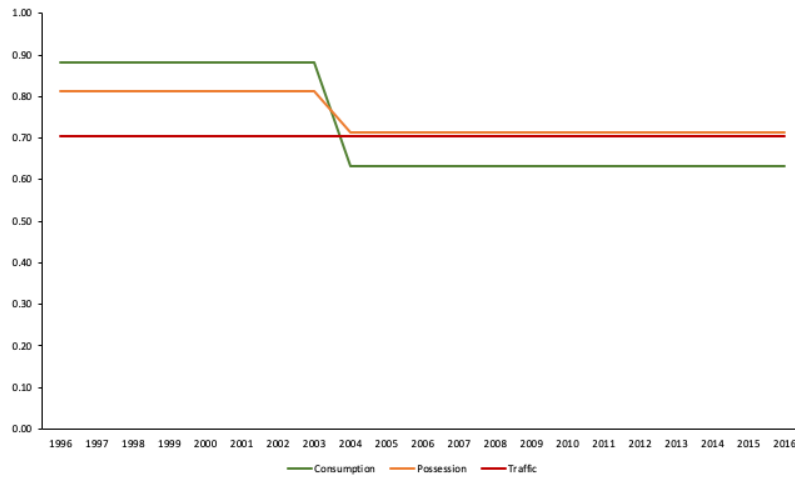
As we can observe in Figure 19, during the period 2001-2004 we can clearly observe a shift in Canada towards a more lenient drug policy in what concerns consumption and possession of cannabis. The 2001 shift is related with allowances for therapeutic cannabis. The 2004 shift is associated with the introduction of treatment as an alternative to penalty. In what concerns traffic, we can observe shifting points, which are related with permissions for non-individual cultivation in 1998 and allowances for therapeutic cannabis cultivation in 2001.

Figure 19 - Consumption, Possession and Traffic of Cannabis in Canada: 1996-2016



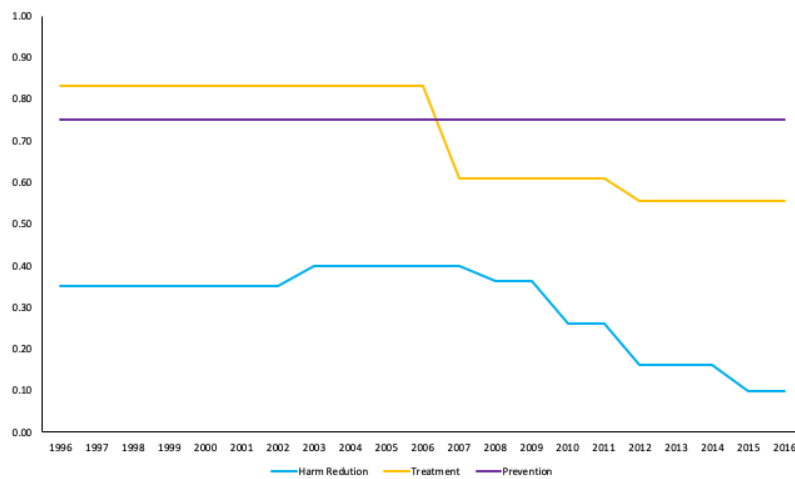
In what concerns hard drugs, we can observe in Figure 20 a key turning point in 2004 towards a more lenient drug policy for consumption and possession, which is related with the introduction of treatment as an alternative to penalty.

Figure 20 - Consumption, Possession and Traffic of Hard Drugs in Canada: 1996-2016



As we can observe in Figure 21, Canada has not exerted strong treatment and prevention efforts. Since 2007, Canada has increased its efforts associated with harm reduction and treatment.

Figure 21 - Harm Reduction, Treatment and Prevention in Canada: 1996-2016



2.3.2. Cross-country and cross-time results [1996-2016]

This section presents a cross-country comparative analysis, comparing the trajectory of illicit drug policy in the seven countries under analysis across time in the period 1996-2016.

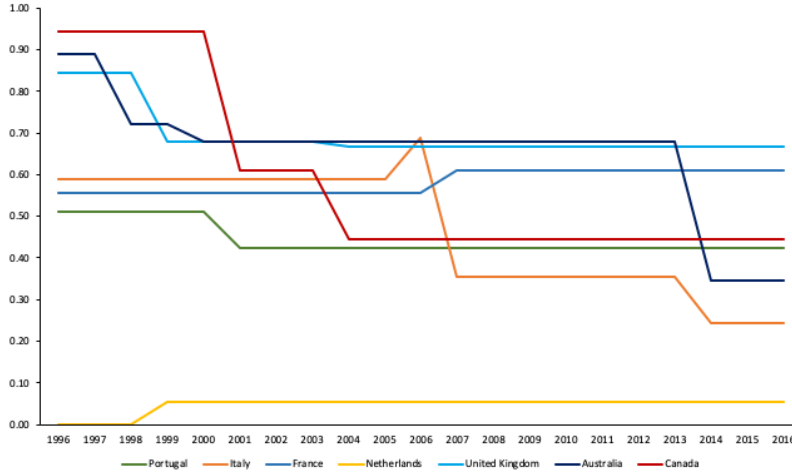
Consumption

Cannabis

Figure 22 reports the cross-country legal frameworks in what concerns cannabis consumption and the turning points from more to less criminal oriented policies or vice versa. We can observe that the Commonwealth countries (United Kingdom, Australia and Canada) had the more criminal oriented drug policies in 1996. France, Italy and Portugal were close to one another in 1996, with a ‘balanced’ (neither very strict, nor very lenient) drug policy towards drug consumption. At the time, the Netherlands had the less criminally-oriented drug policy.

As reported in the previous section (2.3.1), most countries show (different) turning points over time towards less strict drug policies. The observed asymmetric pattern of evolution dictates that the relative position of each country has changed in the period under analysis. As we can observe in Figure 22, in 2016 the country with stricter drug policies was the United Kingdom, followed by France. Canada and Portugal are grouped together slightly below 0.5, followed by Australia and Italy. In that year, the Netherlands is still the country with a more lenient drug policy towards consumption of cannabis.

Figure 22 – Consumption of Cannabis: 1996-2016

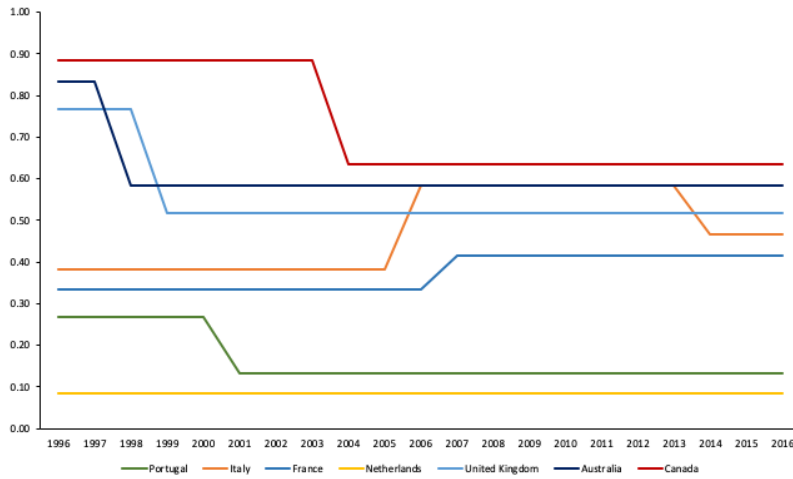


Hard Drugs

In what concerns hard drugs, we can observe in Figure 23 that the Commonwealth countries have the strictest drug policies related to consumption during the period under analysis, even though there are several turning points towards a less strict approach. In the period, Portugal and the Netherlands are the countries with a more lenient approach

towards the consumption of hard drugs. France and Italy are grouped together in the period 1996-2016, with scores slightly around 0.5.

Figure 23 – Consumption of Hard Drugs: 1996-2016

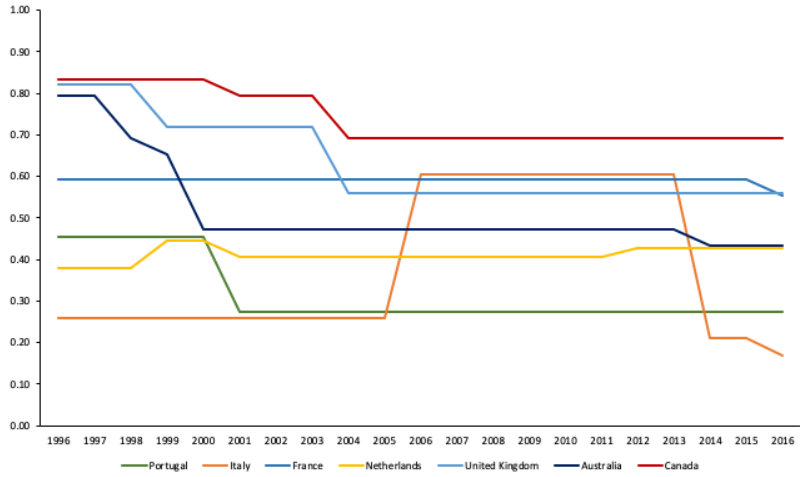


Possession

Cannabis

In what concerns possession of cannabis, we can observe a broadly similar pattern of evolution of legal frameworks, with most countries displaying shifts towards more lenient drug policies. The only exception is Italy, for which a period of more criminally-oriented policies can be observed between 2006 and 2014, as we noted in the previous section.

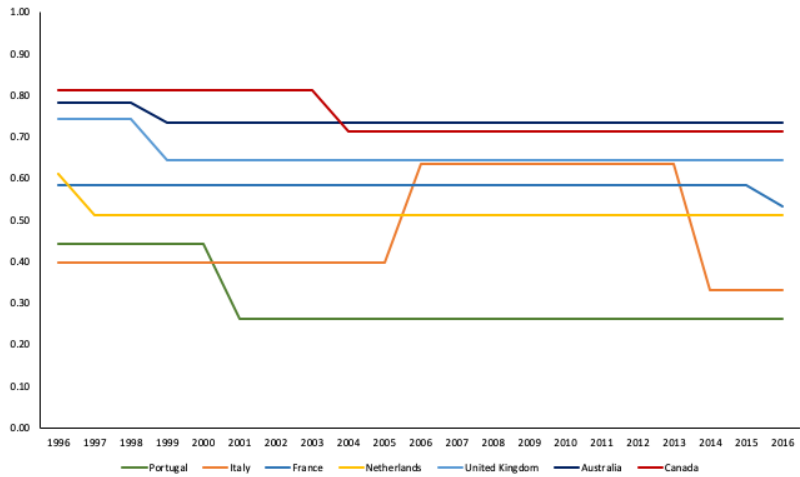
Figure 24 – Possession of Cannabis: 1996-2016



Hard Drugs

Figure 25 reports a similar pattern of evolution of the legal framework for possession of hard drugs over the last two decades in the countries under analysis.

Figure 25 – Possession of Hard Drugs: 1996-2016



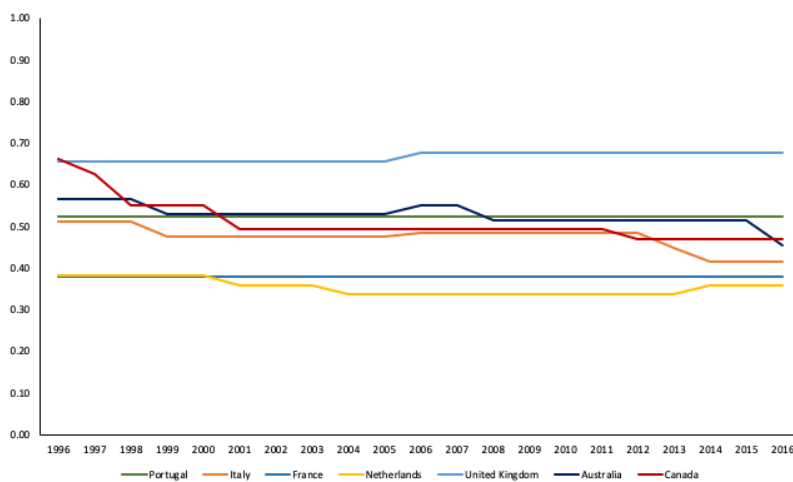
Traffic

Cannabis

In relation to the traffic of cannabis, we can observe in Figure 26 that the changes in the period 1996-2016 are relatively small. The United Kingdom is the country with the strictest approach in relation to the traffic of cannabis and the Netherlands is the less strict. Note,

however, that the differences between the countries are considerably smaller than for consumption and possession. Over time, Canada and Italy display the most pronounced shifts from a more to a less strict legal framework, but the changes are relatively small in absolute terms.

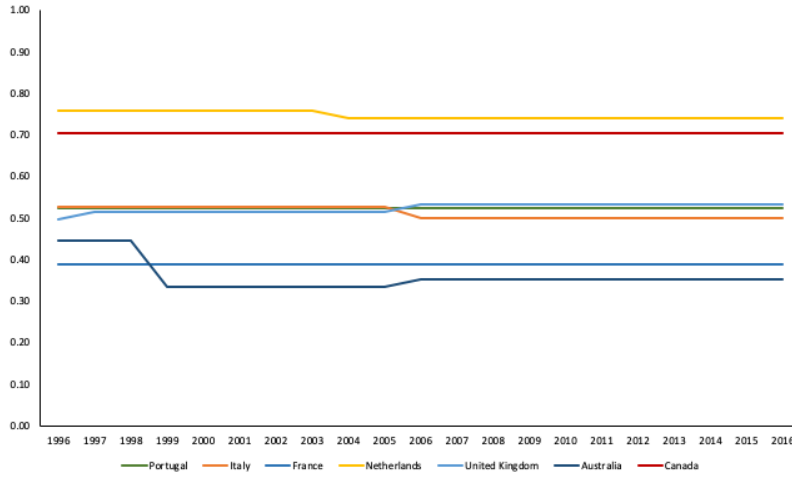
Figure 26 – Traffic of Cannabis: 1996-2016



Hard Drugs

In relation to hard drugs, we can observe in Figure 27 that the Netherlands is the country with the strictest legal framework for traffic, alongside Canada. By contrast, Australia, followed by the United Kingdom, have the more lenient approaches to traffic. Note, however, that similarly to the traffic of cannabis, the countries are closer to one another than when we look at the consumption and possession dimensions.

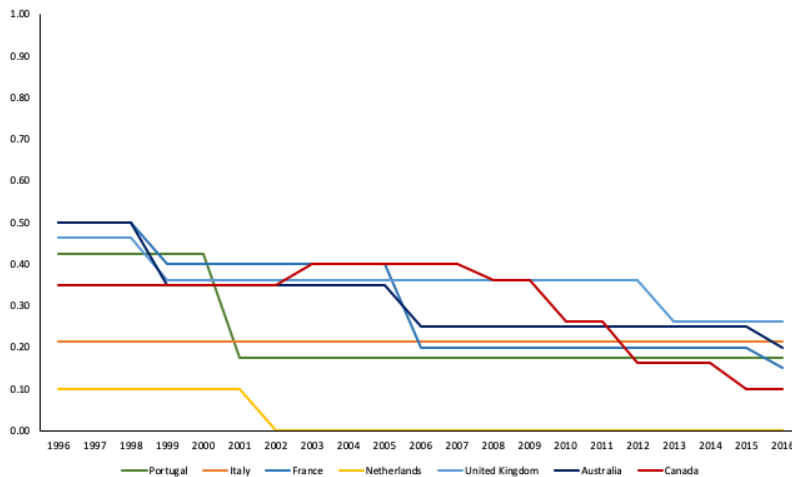
Figure 27 – Traffic of Hard Drugs: 1996-2016



Harm Reduction

As we can observe in Figure 28, all the seven countries under analysis display increased efforts in harm reduction in the period 1996-2016. In relative terms, Australia and the United Kingdom are the countries for which the score has decreased by less, suggesting that their harm reduction efforts did not increase as much as in the other countries. Throughout the period, the Netherlands is the country exhibiting higher efforts regarding harm reduction.

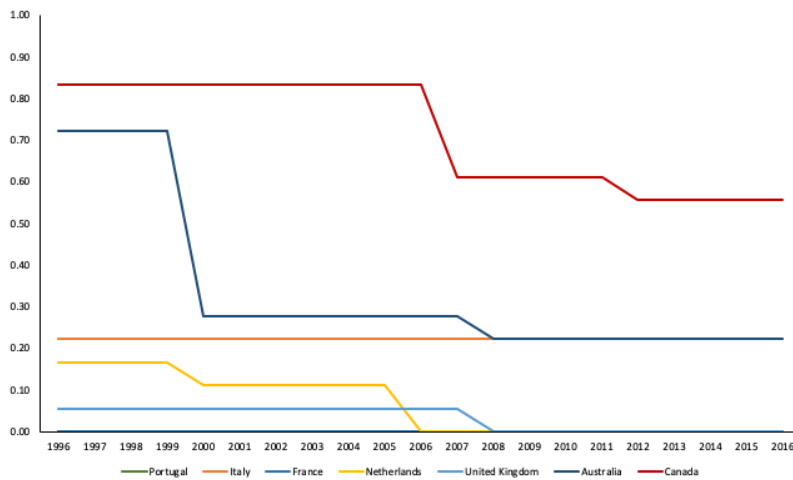
Figure 28 – Hard Reduction: 1996-2016



Treatment

In relation to treatment, Figure 29 shows that Canada and Australia are the countries which have increased the most their efforts towards a more health oriented approach. Portugal and France form a group of countries in which since before 1996 there has been a health oriented approach.

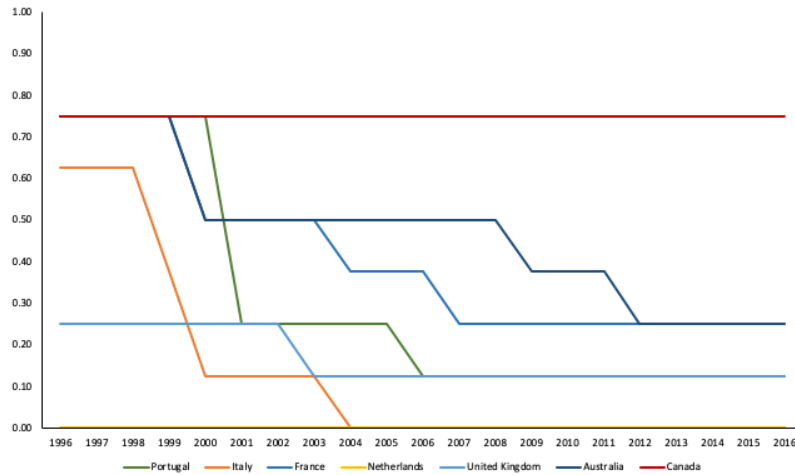
Figure 29 – Treatment: 1996-2016



Prevention

Figure 30 reports the various countries' efforts on prevention in the period 1996-2016. We can observe that Canada is the country displaying the lowest effort associated with drug prevention. Australia had a score similar to that of Canada in 1996, but has clearly increased its prevention efforts over time. The Netherlands is the country displaying the highest efforts on prevention since before 1996.

Figure 30 – Prevention: 1996-2016



2.4. Conclusion

This report presents the methodology involved in the construction of an index of illicit drug policy – the Católica Illicit Drug Policy Index (CATÓLICA-IDPI) 1996-2016. This index allows for an intertemporal and cross-country quantitative analysis of drug policy.

In a nutshell, we identify various turning points in each of the various drug policy dimensions over time. Typically (but not always) these turning points are in the direction of a more lenient (or less strict) approach towards drug policy. Comparisons across countries show that these shifts were not uniform: some countries took larger steps than others in that direction, thus changing their relative position for each dimension of drug policy.

From the viewpoint of this research project, the development of this index was an instrument rather than an end in itself. Indeed, this index was developed in order to understand, in a quantitative way, how different countries evolved over time in each dimension of drug policy. This instrument will be used, in chapter 5, to understand the extent to which such changes in drug policy resulted in tangible changes on social outcomes.

3. Qualitative and quantitative study of drug policy perceptions

[Dirk Korf chapter to appear here]

4. Key social indicators for drug policy analysis

[short summary of the data collected – to be written]

5. Assessing the impact of drug policies on key social indicators

[WP5 to appear here]

6. Discussion and conclusions

[to be written]



References

- Adams, Z., Bishop, L. and Deakin, S. (2016) CBR Labour Regulation Index (Dataset of 117 Countries) (Cambridge: Centre for Business Research)
- Armour, J., Deakin, S., Lele, P.; Siems, M. (2009a). How do legal rules evolve? Evidence from a cross-national comparison of shareholder, creditor and worker protection. *American Journal of Comparative Law*, 57, 579-630.
- Armour, J., Deakin, S., Sarkar, P., Siems, M.; Singh, A. (2009b). Shareholder protection and stock market development: an empirical test of the legal origins hypothesis. *Journal of Empirical Legal Studies*, 6, 343-380.
- Bergeron, H. & Colson, R. (2017). European drug policies in context. In Colson, R. & Bergeron, H. (eds.) *European Drug Policies: The Ways of Reform*. Oxon; New York: Routledge.
- Cheffins, B., Bank, S. & Wells, H. (2014). Law and history by numbers: Use but with care. *U. Ill. L. Rev.*, 1739-1764.
- Colson, R. & Bergeron, H., eds. (2017). *European Drug Policies: The Ways of Reform*. Oxon; New York: Routledge.
- Cooter, R. & Ginsburg, T. (2003). Leximetrics: Why the same laws are longer in some countries than others. *Illinois Law & Econ. Working Papers Series*, Working Paper No. LE03-012, June.
- Deakin, S. (2009). Legal origin, juridical form and industrialisation in historical perspective: the case of the employment relationship and the joint stock company. *Socio-Economic Review*, 7, 35-65.
- Djankov, S., LaPorta, R., Lopez-de-Silanes, F. & Shleifer, A. (2008). The law and economics of self-dealing. *Journal of Financial Economics*, vol. 88(3), 430-465.
- Félix, S. & Portugal, P. (2017). Drug decriminalization and the price of illicit drugs. *International Journal of Drug Policy*, 39, 121-129.
- Gonçalves, R., Lourenco, A. & Silva, S. (2015). A social cost perspective in the wake of the Portuguese strategy for the fight against drugs. *International Journal of Drug Policy*, 26, 199-209.
- La Porta, R., Lopez-de-Silanes, F., Shleifer, A. & Vishny, R. (1998). Law and Finance. *Journal of Political Economy*, 106 (6), 1113-1155.
- La Porta, R., Lopez-de-Silanes, F. & Shleifer, A. (2008). The Economic Consequences of Legal Origins. *Journal of Economic Literature*, 46 (2), 285-332.

Lele, P.; Siems, M. (2007). Shareholder protection: a leximetric approach. *Journal of Corporate Law Studies*, 7, 17-50.

Mitchell, R., Gahan, P., Stewart, P., Cooney, S. & Marshall, S. (2010). The Evolution of Labour Law in Australia: Measuring the Change. *Australian Journal of Labour Law*, 23 (1), 61-93.

Siems, M. (2011). Measuring the immeasurable: how to turn law into numbers. In Faure, M. & Smits, J. (eds.) *Does law matter? On law and economic growth*. Cambridge: Intersentia, 115-136.

Appendixes

TO CORRECT ACCORDING TO MY
COMMENTS REPORTED ABOVE

A. National legislative timelines

The main laws are identified in **bold**; the other relevant laws are identified in underline and the main national guidelines are identified in *italic*.

A. 1. Portugal

Date	Type/ID	FRANCESCA DE MARINIS
1987	3;6;7	<i>Resolução do Conselho de Ministros n.º 23/87, de 31 de Março</i> É criado o Projecto Vida - Programa Nacional de Combate à Droga - um plano integrado de combate à droga, que contemplava 30 medidas nos domínios da prevenção, do tratamento, reabilitação e inserção social dos toxicómanos, e ainda no domínio do combate ao tráfico.
1990	6;7 3;6;7	<i>Decreto-Lei n.º 83/90, de 14 de Março</i> Criação do SPTT (Serviço de Prevenção e Tratamento da Toxicodependência) para reorganizar, coordenar, desenvolver e estender a outras regiões os diversos centros de prevenção e tratamento. <i>Resolução do Conselho de Ministros n.º 17/90, de 21 de Abril.</i> Esta resolução procede à remodelação do Projecto Vida. Foram alteradas algumas das medidas, sendo cometida a um Coordenador Nacional para o Combate à Droga a coordenação das referidas medidas, a desenvolver no âmbito do Programa Nacional de Combate à Droga.
1993	1;2;3;4 4 5	Decreto-Lei n.º 15/93, de 22 de Janeiro: novo regime jurídico do consumo e tráfico de droga – Em vigor, com alterações (última alteração: Lei n.º 7/2017, de 2 de Março) Adapta o regime jurídico interno às convenções internacionais sobre estupefacientes e às convenções europeias relativas ao branqueamento de capitais; possibilidade de suspensão de pena para o crime <i>por causa</i> do consumo. <i>Decreto-Lei n.º 313/93, de 15 de Setembro</i> Transpõe para a ordem jurídica interna a Directiva n.º 91/308/CEE do Conselho, de 10 de Junho, relativa à prevenção da utilização do sistema financeiro para efeitos de branqueamento de capitais. <i>“Diz não a uma seringa em segunda mão”, de Outubro de 1993: Programa de troca de seringas criado pela Associação Nacional de Farmácias em colaboração com a Comissão Nacional de Luta Contra a SIDA.</i>

Date	Type/ID	Event
	5	<i>Projeto "STOP SIDA", de Maio de 1993: Criou o Centro Laura Ayres que foi uma iniciativa pioneira em Portugal, da responsabilidade da Comissão Nacional de Luta Contra a SIDA (CNLCS), com a colaboração da Administração Regional de Saúde (ARS) e do Centro de Estudos da Profilaxia da Droga (CEPD) do Centro. Efetuava-se a troca de seringas e o teste VIH gratuitamente.</i>
	6	<i>Decreto-Lei n.º 13/93, de 15 de Janeiro</i> Regulamenta o licenciamento e fiscalização das unidades privadas de saúde, incentivando a sua criação e funcionamento com padrões de qualidade.
	6	<i>Decreto-Lei n.º 43/93, de 12 de Novembro</i> São estabelecidas as regras específicas relativas ao licenciamento e fiscalização das unidades privadas de saúde com atividades no âmbito do tratamento da toxicod dependência.
	6;7	<i>Decreto-Regulamentar n.º 42/93, de 27 de Novembro</i> Estabelece as regras relativas ao licenciamento e fiscalização das unidades privadas, com ou sem fins lucrativos, que actuem no campo da prevenção secundária através da prestação de cuidados de saúde na área da toxicod dependência.
1994	3 31;32;33	Decreto Regulamentar n.º 61/94, de 12 de Outubro --> Regulamenta o Decreto-Lei n.º 15/93 de 22 de Janeiro nos seus artigos 2.º, n.ºs 4 e 5, 4.º a 20.º e 65.º a 68.º Estabelece as regras relativas ao controlo do mercado lícito de estupefacientes e substâncias psicotrópicas, compreendidos nas tabelas I a IV anexas ao Decreto-Lei n.º 15/93, de 22 de Janeiro, e aos precursores e outros produtos químicos susceptíveis de utilização no fabrico de droga, definidas nos Regulamentos (CE) n.ºs 273/2004, do Parlamento Europeu e do Conselho, de 11 de Fevereiro, e 111/2005, do Conselho, de 22 de Dezembro de 2004. 1 - O cultivo, a produção, o fabrico, o emprego, o comércio, a distribuição, a importação, a exportação, a introdução, a expedição, o trânsito, a detenção a qualquer título e o uso de plantas, substâncias e preparações compreendidas nas tabelas I a IV ficam sujeitos aos condicionamentos, autorizações e fiscalização constantes do Decreto-Lei n.º 15/93, de 22 de Janeiro, e do presente decreto regulamentar. 2 - A produção, o fabrico, a importação, a exportação, a colocação no mercado, o trânsito e a detenção a qualquer título das substâncias compreendidas nas tabelas V e VI ficam sujeitos a licenciamento, autorização, regime de vigilância estatística e fiscalização constantes daquele diploma e do presente decreto regulamentar. (Alterado pelo Decreto Regulamentar n.º 28/2009, de 12 de Outubro).
	4	<i>Lei n.º 36/94, de 29 de Setembro</i> Medidas de combate à corrupção e criminalidade económica e financeira (alterada pela Lei n.º 90/99, de 19 de Julho, e pela Lei n.º 5/2002, de 11 de Janeiro).
	6;7	<i>Decreto-Lei n.º 43/94, de 17 de Fevereiro</i> Aprovada a Lei Orgânica do SPTT. (Alterada pelo Decreto-Lei n.º 67/95, de 8 de Abril).

Date	Type/ID	Event
1995	1;2;3 4 6	<p><i>Deliberação da Assembleia República n.º 9-PL/1995, de 2 de Dezembro</i> Criação da Comissão Eventual para o acompanhamento e avaliação da situação da toxicodependência, do consumo e do tráfico de droga. Numa primeira fase dos seus trabalhos, a Comissão entendeu como prioritária a avaliação da situação global, tal como ela se apresentava até ao momento, ouvindo, não só os responsáveis pela área do combate ao tráfico (Polícia Judiciária, Guarda Nacional Republicana, Polícia de Segurança Pública e Direção Geral das Alfandegas), como também os responsáveis pelo Sistema Prisional, ou pela representação de Portugal em instâncias internacionais, como as Nações Unidas (Comissão de Estupefacientes e Órgão Internacional de Controlo de Estupefacientes) ou o Conselho da Europa (Grupo Pompidou). Competia também a esta comissão a elaboração de um relatório final sobre a situação do consumo e tráfico de drogas.</p> <p><i>Decreto-Lei n.º 325/95, de 2 de Dezembro</i> Estabelece medidas de natureza preventiva e repressiva contra o branqueamento de capitais e outros bens provenientes dos crimes (alterado pela Lei n.º 65/98, de 2 de Setembro, pelo Decreto-Lei n.º 272-A/2000, de 9 de Novembro, pela Lei n.º 104/2001, de 25 de Agosto, pelo Decreto-Lei n.º 323/2002, de 17 de Dezembro e pela Lei n.º 10/2002, de 11 de Fevereiro).</p> <p><i>Despacho do Ministro da Saúde n.º 21/95, de 30 de Agosto</i> Fixa os requisitos de funcionamento das unidades privadas de saúde com atividades no âmbito do tratamento da toxicodependência.</p>
1996	1;6 1;2;3;4	<p><i>Portaria n.º 94/96, de 26 de Março</i> Define os limites quantitativos máximos para cada dose média individual diária de plantas, substâncias ou preparações constantes das tabelas I a IV anexas ao Decreto-Lei n.º 15/93 e define os procedimentos de diagnóstico do estado de toxicodependência como modos de intervenção dos serviços de saúde especializados.</p> <p><i>Lei n.º 45/96, de 3 de Setembro</i> Altera o Decreto-Lei 15/93 (regime jurídico do tráfico e consumo de estupefacientes) - 4ª versão. As penas previstas nos artigos 21.º, 22.º e 23.º são aumentadas de um terço nos seus limites mínimo e máximo.</p>
1997	4 5;6,7	<p><i>Resolução da Assembleia da República n.º 70/97, de 13 de Dezembro</i> Aprova para ratificação a Convenção Relativa ao Branqueamento, Detecção, Apreensão e Perda dos Produtos do Crime, do Conselho da Europa, assinada por Portugal em 8 de Novembro de 1990.</p> <p><i>Lei n.º 7/97, de 8 de Março</i> Alarga a rede de serviços públicos para o tratamento e a reinserção de toxicodependentes. Esta rede está integrada no SPTT sob a tutela do Ministério da Saúde</p>
1998	5 5	<p><i>Resolução do Conselho de Ministros n.º 136/98, de 4 de Dezembro</i> Cria o Programa VIDA-EMPREGO que visa à reinserção social e profissional dos toxicodependentes em idade activa.</p> <p><i>Decreto Regulamentar n.º 24/98, de 30 de Outubro</i> Regulamenta os procedimentos para a fiscalização da condução sob a influência do álcool ou de substâncias estupefacientes ou psicotrópicas.</p>

Date	Type/ID	Event
1999	1;2;3; 5:7	<i>Decreto-Lei n.º 31/99, de 5 de Fevereiro</i> Criação do IPDT (Instituto Português da Droga e da Toxicodependência). Este organismo sucede ao Gabinete de Planeamento e de Coordenação do Combate à Droga (GPCCD) e surge no contexto dos trabalhos entretanto desenvolvidos quer pela Comissão Eventual para o Acompanhamento e Avaliação da Situação da Toxicodependência, do Consumo e do Tráfico de Droga (criada em 1995 e cujo relatório é publicado em 1998), quer pela Comissão para a Estratégia Nacional de Combate à Droga (presidida por Alexandre Quintanilha e cujo relatório é publicado também em 1998).
	1;2;3;4; 5;6;7	<i>Resolução do Conselho Ministros n.º 46/99, de 26 de Maio</i> Aprovação da Estratégia Nacional de Luta contra a Droga. A estratégia nacional de luta contra a droga pretende ser um instrumento orientador das diversas políticas sectoriais relativas à droga e à toxicodependência, vocacionado para nortear a actividade dos diferentes organismos da Administração Pública com competência nesta área e servir de referência para a sociedade portuguesa.
	3; 31;32;33 3C;31C; 32C;33C	Decreto Regulamentar n.º 23/99, de 22 de Outubro Altera o Decreto Regulamentar n.º 61/94, que estabelece as regras relativas ao controlo do mercado lícito de estupefacientes, substâncias psicotrópicas, precursores e outros produtos químicos suscetíveis de utilização no fabrico da droga. Clarifica as regras de aplicação do regime ao controlo do mercado lícito de estupefacientes, substâncias psicotrópicas, precursores e outros produtos químicos suscetíveis de utilização no fabrico da droga, estabelecendo que no caso do cultivo de cânhamo para fins industriais, das variedades de Cannabis sativa L, incluídas no anexo B do Regulamento (CEE) n.º 1164/89, da Comissão, de 28 de Abril, na redacção que lhe foi dada pelo Regulamento (CEE) n.º 2814/98, da Comissão, de 22 de Dezembro, as funções de controlo serão efetuadas pelo Instituto Nacional de Intervenção e Garantia Agrícola conjuntamente com a Polícia Judiciária, em termos a definir por despacho conjunto dos Ministros da Justiça e da Agricultura, do Desenvolvimento Rural e das Pescas.
	4	<i>Lei n.º 90/99, de 10 de Julho</i> Primeira alteração à Lei n.º 36/94, de 29 de Setembro, que estabelece medidas de combate à corrupção e à criminalidade económica e financeira.
	1;2;3;4	<i>Lei n.º 144/99, de 31 de Agosto</i> Aprova a lei da cooperação judiciária internacional em matéria penal.
	5	<i>Lei n.º 170/99, de 18 de Setembro</i> Adopta medidas de combate à propagação de doenças infecto-contagiosas em meio prisional.
	6	<i>Decreto-Lei n.º 16/99, de 25 de Janeiro</i> É revisto o licenciamento, funcionamento e a fiscalização do exercício da atividade das unidades privadas que atuam na área do tratamento ou da recuperação de toxicodependentes, definindo também os requisitos a que devem obedecer as suas instalações, organização e funcionamento.

Date	Type/ID	Event
	5;6	<i>Decreto-Lei n.º 72/99, de 15 de Março</i> Revê o quadro jurídico de apoio às instituições privadas, na área do tratamento e da reinserção social de toxicodependentes.
	5;6	<i>Lei n.º 109/99, de 3 de Agosto</i> Garante a assistência médica aos toxicodependentes reclusos.
2000	1;2	Lei nº 30/2000, de 29 de Novembro: descriminalização do consumo de droga Esta lei, em vigor em 1 de Julho de 2001, define o consumo privado de drogas como um ilícito de mera ordenação social (art. 2º, nº 1), estabelecendo que a aquisição e a detenção de drogas para consumo próprio não poderão exceder a quantidade necessária para o consumo médio individual durante o período de 10 dias (art. 2º, nº 2). A lei comete o processamento das contra-ordenações e a aplicação das respectivas sanções à comissão para a dissuasão da toxicodependência (art. 5º, nº 1), cuja organização e regime de funcionamento vêm a ser regulados pelo Decreto-Lei nº 130-A/2001, de 23 de Abril. Esta comissão – ou ‘comissões’, já que se prevê a sua existência em cada distrito – tem competência para suspender provisoriamente o processo e para o arquivar se, findo o tempo estabelecido, o consumidor não toxicodependente não tiver reincidido ou, tratando -se de consumidor toxicodependente, este se tiver sujeitado ao tratamento e não o tiver interrompido (art. 13º). A comissão pode ainda suspender a determinação da sanção, se o consumidor toxicodependente aceitar sujeitar-se, voluntariamente, a tratamento (art. 14º, nº 1), bem como aplicar, no caso de consumidor não toxicodependente, uma coima ou, em alternativa, uma sanção não pecuniária ou, no caso de consumidor toxicodependente, uma sanção não pecuniária (art. 15º), tendo ainda margem de manobra na imposição de sanções alternativas (art. 17º e 18º). A comissão pode ainda, em certos casos, suspender a execução da sanção, sempre em ordem a prevenir o consumo e a proteger a saúde pública (art. 19º). O funcionamento destas comissões é apoiado administrativamente pelos governos civis (a quem cabe a execução das coimas e das sanções alternativas) e tecnicamente pelo Instituto da Droga e da Toxicodependência (IDT) (art. 5º, nºs 2 e 4). O consumo de drogas não deixa de ser punido, apenas deixam de ser aplicadas sanções penais ao uso, posse e aquisição ilícita de todas as drogas para uso próprio. O consumo passa a ser sancionado através de coimas e/ou outras medidas acessórias, competindo às comissões de dissuasão da toxicodependência o processamento das contraordenações e a aplicação das respetivas sanções.
	1;2;3;4	<i>Decreto-Lei nº 214/2000, de 2 de Setembro: -- Adita substâncias psicotrópicas (4-MT A) às tabelas anexas ao Decreto-Lei nº 15/93 (5ª versão).</i>
	3;5;6,7	<i>Decreto-Lei n.º 88/2000, de 18 de Maio</i> Criado o Conselho Coordenador da Estratégia Nacional de Luta Contra a Droga para assegurar a coordenação da política do Governo em todas as áreas em que se divide a Estratégia: prevenção, combate ao tráfico e criminalidade conexas, tratamento e reinserção dos consumidores. Prevê-

Date	Type/ID	Event
	3;5;6;7	<p>se ainda a coordenação da representação externa do Estado Português em matéria de luta à droga e à toxicodependência.</p> <p><i>Decreto-Lei n.º 89/2000, de 18 de Maio</i></p> <p>Criado o Conselho Nacional da Droga e da Toxicodependência. Órgão de consulta do Primeiro-Ministro sobre a política de droga e toxicodependência e a ele compete pronunciar-se sobre a definição e execução da Estratégia Nacional de Luta contra a Droga, bem como sobre todos os assuntos que, em matéria de droga e toxicodependência, lhe sejam submetidos pelo Primeiro-Ministro.</p>
2001	<p>1;2;3; 5;6;7</p> <p>1;2;3; 5;6;7</p> <p>1;2;3;4</p> <p>1;2</p> <p>1</p> <p>1;2;5</p> <p>1;2;3;4</p> <p>1;6;7</p>	<p><i>Resolução do Conselho de Ministros n.º 30/2001, de 13 de Março:</i> São fixados os 30 principais objetivos da luta contra a droga e toxicodependência no horizonte 2004</p> <p><i>Resolução do Conselho de Ministros n.º 39/2001, de 9 de Abril:</i> Horizonte 2004 Aprova o Plano de Acção Nacional de Luta contra a Droga e a Toxicodependência até 2004. O Plano de Acção "Horizonte 2004" tem por finalidade "melhorar a eficácia e a articulação dos dispositivos no domínio da prevenção, da redução de riscos e minimização de danos, do tratamento e saúde pública, da reinserção social, da repressão, bem como da formação, da investigação, da aplicação da lei e do intercâmbio internacional, no sentido da racionalidade dos meios e de uma maior disponibilidade dos recursos para aumentar as exigências e responsabilidades de todos os que intervêm neste domínio".</p> <p><i>Lei n.º 104/2001, de 25 de Agosto</i> Primeira alteração à Lei n.º 144/99, que aprova a lei da cooperação judiciária internacional em matéria penal e altera ao Decreto-Lei n.º 15/93 e ao Decreto-Lei n.º 325/95.</p> <p><i>Portaria n.º 604/2001, de 12 de Junho</i> Procede à regulamentação do registo central dos processos de contra-ordenação previstos na Lei n.º 30/2000, de 29 de Novembro.</p> <p><i>Portaria n.º 540/2001, de 28 de Maio</i> Estabelece procedimentos no âmbito do consumo de estupefacientes e substâncias psicotrópicas, na aplicação da Lei n.º 30/2000.</p> <p><i>Decreto Legislativo Regional n.º 7/2001/A, de 27 de Abril (Região Autónoma dos Açores)</i> Regula o novo regime jurídico aplicável ao consumo de estupefacientes e substâncias psicotrópicas e introduz medidas de protecção sanitária e social das pessoas que consomem essas substâncias sem prescrição médica, aprovado pela Lei n.º 30/2000.</p> <p><i>Decreto-Lei n.º 69/2001, de 24 de Fevereiro</i> Adita novas substâncias às tabelas anexas II-A, II-B e IV ao Decreto-Lei n.º 15/93 que aprova o regime jurídico aplicável ao tráfico e consumo de estupefacientes e substâncias psicotrópicas.</p> <p><i>Decreto-Lei n.º 130-A/2001, de 18 de Abril</i> Estabelece a organização, o processo e o regime de funcionamento da comissão para a dissuasão da toxicodependência, a que se refere o n.º 1 do artigo 5.º da Lei n.º 30/2000, e regula outras matérias complementares.</p>

Date	Type/ID	Event
	1;7	<i>Portaria n.º 428-A/2001, de 23 de Abril</i> Estabelece o estatuto dos membros das comissões para a dissuasão da toxicodependência.
	4	<i>Lei n.º 101/2001, de 25 de Agosto</i> Aprova o regime jurídico das ações encobertas para fins de prevenção e investigação criminal
	5	<i>Decreto-Lei n.º 265-A/2001, de 28 de Setembro</i> Regula o procedimento no caso da conduta sob influência de substâncias ilícitas e altera os Decretos-Leis nº 114/94, de 3 de Maio, e nº 2/98, de 3 de Janeiro, bem como o Código da Estrada, e revoga os Decretos-Leis nº 162/2001, de 22 de Maio, e nº 178-A/2001, de 12 de Junho.
	5;6,7	<i>Portaria n.º 1112/2001, de 20 de Setembro</i> Aprova o Regulamento da Criação e Certificação de Pontos de Contacto e Informação.
	5;6,7	<i>Portaria n.º 1114/2001, de 20 de Setembro</i> Aprova o Regulamento da Criação e Funcionamento das Equipas da Rua.
	5;6,7	<i>Portaria n.º 1115/2001, de 20 de Setembro</i> Aprova o Regulamento do Financiamento das Equipas da Rua.
	5	<i>Decreto-Lei n.º 183/2001, de 21 de Junho</i> Aprova o regime geral das políticas de prevenção e redução de riscos e minimização de danos. Regula o programa de troca de seringas.
2002	4	<i>Lei n.º 10/2002, de 11 de Fevereiro</i> Aperfeiçoa as disposições legais destinadas a prevenir e punir o branqueamento de capitais provenientes de actividades criminosas e quinta alteração ao Decreto-Lei n.º 325/95, de 2 de Dezembro, alterado pela Lei n.º 65/98, de 2 de Setembro, pelo Decreto-Lei n.º 275-A/2000, de 9 de Novembro, pela Lei n.º 104/2001, de 25 de Agosto, e pelo Decreto-Lei n.º 323/2001, de 17 de Dezembro.
	4	<i>Lei n.º 5/2002, de 11 de Janeiro</i> Estabelece medidas de combate à criminalidade organizada e económico-financeira e procede à segunda alteração à Lei nº 36/94, de 29 de Setembro, alterada pela Lei nº 90/99, de 10 de Julho, e quarta alteração ao Decreto-Lei nº 325/95, de 2 de Dezembro, alterado pela Lei nº 65/98, de 2 de Setembro, pelo Decreto-Lei nº 275-A/2000, de 9 de Novembro, e pela Lei nº 104/2001, de 25 de Agosto.
	5;6,7	<i>Decreto-Lei n.º 269-A/2002 de 29 de Novembro</i> Criação do Instituto da Droga e da Toxicodependência (IDT), que resulta da fusão do Serviço de Prevenção e Tratamento da Toxicodependência (SPTT) e do Instituto Português da Droga e da Toxicodependência (IPDT), com a missão de garantir a unidade intrínseca do planeamento, da conceção, da gestão, da fiscalização e da avaliação das diversas fases da prevenção, do tratamento e da reinserção no domínio da droga e da toxicodependência.
2003	1;2;3; 5;6,7	<i>Decreto-Lei n.º 1/2003, de 6 de Janeiro:</i> Criação do Conselho Interministerial do Combate à Droga e à Toxicodependência. Tem como objetivo fundamental reorganizar as estruturas de coordenação de combate à droga e à toxicodependência. A concretização

Date	Type/ID	Event
	<p>1C;2C;3C 31C;32C; 33C 1;2;3;4 1;2;3;4</p>	<p>da estratégia nacional de luta contra a droga e do Plano de Ação Horizonte 2004, bem como o Programa do XV Governo Constitucional, a que se associa a Estratégia Europeia e Planos de Ação Europeu 2000-2004, não se compadece com a manutenção de estruturas diversificadas e dispersas, funcionando isolada e de forma descoordenada. Compete-lhe coordenar a definição e a eficaz execução da política nesta matéria. É criado o cargo de Coordenador Nacional do Combate à Droga e à Toxicodependência, que é, por inerência de funções, o Presidente do Conselho de Administração do IDT e cuja atividade visa garantir uma eficaz coordenação e articulação entre os vários departamentos governamentais envolvidos no combate à droga e à toxicodependência. O Conselho Nacional do Combate à Droga e à Toxicodependência, presidido pelo Primeiro-Ministro, é o órgão de Consulta do Primeiro-Ministro e do Governo sobre a política de combate à droga e à toxicodependência.</p> <p><i>Lei n.º 47/2003, de 22 de Agosto</i></p> <p>Adita as substâncias sementes de cannabis não destinadas a sementeira e a substância PMMA às tabelas anexas ao Decreto-Lei 15/93.</p> <p><i>Lei n.º 48/2003, de 22 de Agosto</i></p> <p>Segunda alteração à Lei n.º 144/99, de 31 de Agosto, que aprova a lei da cooperação judiciária internacional em matéria penal.</p> <p><i>Lei n.º 3/2003, de 15 de Janeiro</i></p> <p>Alteração da tabela V anexa ao Decreto-Lei 15/93. Transpõe para a ordem jurídica interna a Directiva 2001/8/CE, da Comissão, de 8 de Fevereiro, relativa à produção e colocação no mercado de certas substâncias utilizadas na produção ilegal de estupefacientes e psicotrópicos.</p>
2004	<p>1;2;3;4 1;2;3 1C;2C;3C 31C;32C; 33C</p>	<p><i>Lei n.º 17/2004, de 11 de Maio</i></p> <p>Adita as substâncias 2C-B, GHB, zolpidem às tabelas anexas ao Decreto-Lei 15/93, que aprova o regime jurídico aplicável ao tráfico e consumo de estupefacientes e substâncias psicotrópicas.</p> <p>Decreto Regulamentar n.º 19/2004, de 30 de Abril</p> <p>Altera o Decreto Regulamentar n.º 61/94, que estabelece as regras relativas ao controlo do mercado lícito de estupefacientes, substâncias psicotrópicas, precursores e outros produtos químicos susceptíveis de utilização no fabrico de droga.</p> <p>Através da Lei n.º 47/2003, de 22 de Agosto, foram aditadas à tabela I-C anexa ao Decreto-Lei n.º 15/93, de 22 de Janeiro, as sementes de cannabis não destinadas a sementeira, sujeitando-as ao regime de controlo e fiscalização bem como às sanções respectivas previstos naquele diploma, dando cumprimento às disposições comunitárias dos Regulamentos (CE) n.º 1673/2000, de 27 de Julho, do Conselho, que estabelece a organização comum de mercado no sector do linho têxtil e cânhamo destinados à produção de fibras, e n.º 245/2001, da Comissão, de 5 de Fevereiro, que estabelece as respectivas normas de execução, alterado pelo Regulamento (CE) n.º 1093/2001, de 1 de Junho, da Comissão.</p> <p>Art. 23 - Os pedidos específicos de importação de sementes de cannabis não destinadas a sementeira são apresentados junto da Direcção-Geral das</p>

Date	Type/ID	Event
	4 1;2;3; 5;6;7 4	<p>Alfândegas e dos Impostos Especiais sobre o Consumo (DGAIEC), que emite o respectivo certificado para importação.</p> <p>4 — Os pedidos referidos no número anterior devem ser acompanhados de: a) Cópia da autorização genérica de actividade, prevista no n.º 2 do artigo 8; b) Declaração de compromisso de apresentação de documentos demonstrativos de que as sementes de cannabis foram sujeitas, com vista à sua inutilização para sementeira, a uma das seguintes operações: i) Redução total do seu poder germinativo ou redução a um valor inferior a 10 %, por terem sido submetidas a um processo físico ou de outra natureza que inviabilize a sua germinação; ii) Mistura destinada à alimentação animal com sementes que não as de cânhamo, com uma percentagem máxima de 15 % de sementes de cânhamo relativamente ao total; iii) Reexportação para um país terceiro.</p> <p><i>Lei n.º 11/2004, de 27 de Março</i></p> <p>Estabelece o regime de prevenção e repressão do branqueamento de vantagens de proveniência ilícita e procede à 16.ª alteração ao Código Penal e à 11.ª alteração ao Decreto-Lei 15/93, de 22 de Janeiro (transpondo a Directiva n.º 2001/97/CE).</p> <p><i>Despacho n.º 358/2004, de 27 de Abril (Ministro da Saúde)</i></p> <p>Avaliação da Estratégia Nacional de Luta Contra a Droga</p> <p><i>Lei n.º 27/2004, de 16 de julho</i></p> <p>Primeira alteração à Lei n.º 11/2004, de 27 de Março (que estabelece o regime de prevenção e repressão do branqueamento de vantagens de proveniência ilícita e procede à 16.ª alteração ao C.P. e à 11.ª alteração ao DL 15/93, 22/1)</p>
2005	1;2;3;4	<p><i>Lei n.º 14/2005, de 26 de Janeiro</i></p> <p>Altera pela décima terceira vez o Decreto-Lei n.º 15/93, de 22 de janeiro, que aprova o regime jurídico aplicável ao tráfico e consumo de estupefacientes e substâncias psicotrópicas, acrescentando novas substâncias à tabela II-A anexa ao decreto-lei.</p>
2006	1;2;3; 5;6;7	<p><i>Resolução Conselho Ministros n.º 115/2006, de 18 de Setembro: Horizonte 2008</i></p> <p>Aprova o Plano Nacional Contra a Droga e as Toxicodependências no médio prazo até 2012, bem como o Plano de Acção contra a Droga e as Toxicodependências no curto prazo até 2008.</p>
2007	1;5;6;7 5 5;6;7	<p><i>Decreto-Lei n.º 221/2007, de 29 de Maio</i></p> <p>Atribuição da natureza de instituto público ao IDT - Instituto da Droga e da Toxicodependência – que passa a assumir a designação de Instituto da Droga e da Toxicodependência, I.P. (IDT, IP), com a missão de promover a redução do consumo de drogas lícitas e ilícitas, bem como a diminuição das toxicodependências, absorvendo as atribuições dos Centros Regionais de Alcoologia do Norte, Centro e Sul.</p> <p><i>Lei n.º 3/2007, de 16 de Janeiro</i></p> <p>Adopta medidas de combate à propagação de doenças infecto-contagiosas em meio prisional</p> <p><i>Portaria n.º 648/2007, de 30 de Maio</i></p> <p>São aprovados os Estatutos do Instituto da Droga e da Toxicodependência. Assim, o IDT, IP dispõe de serviços centrais e de serviços desconcentrados, estes designados por delegações regionais e por</p>

Date	Type/ID	Event
		unidades de intervenção local. As unidades de intervenção local são organizadas por Centros de Respostas Integradas, Unidades de Desabilitação, Comunidades Terapêuticas, Unidades de Alcoologia.
2008	4 1C;2C;3C 31C;33C	<p><i>Lei n.º 25/2008, de 5 de junho</i></p> <p>Estabelece medidas de natureza preventiva e repressiva de combate ao branqueamento de vantagens de proveniência ilícita e ao financiamento do terrorismo (Retificada pela Declaração de Retificação n.º 41/2008, de 4 de Agosto, e com as alterações introduzidas pelo Decreto-Lei n.º 317/2009, de 30 de outubro, pela Lei n.º 46/2011, de 24 de junho, e pelos Decretos-Lei n.º 242/2012, de 7 de novembro, e n.º 18/2013, de 6 de fevereiro).</p> <p><i>Acórdão do Supremo Tribunal de Justiça n.º 8/2008, de 5 de Agosto (Processo n.º 1008/07)</i></p> <p>Não obstante a derrogação operada pelo artigo 28.º da Lei n.º 30/2000, de 29 de Novembro, o artigo 40.º, n.º 2, do Decreto -Lei n.º 15/93, de 22 de Janeiro, manteve-se em vigor não só 'quanto ao cultivo' como relativamente à aquisição ou detenção, para consumo próprio, de plantas, substâncias ou preparações compreendidas nas tabelas I a IV, em quantidade superior à necessária para o consumo médio individual durante o período de 10 dias.</p>
2009	3 31;32;33 3C;31C; 32C;33C	<p>Decreto Regulamentar n.º 28/2009, de 12 de Outubro</p> <p>Altera o Decreto Regulamentar nº 61/94, que estabelece as regras relativas ao controlo do mercado lícito de estupefacientes, substâncias psicotrópicas, precursores e outros produtos químicos susceptíveis de utilização no fabrico de droga.</p> <p>SECÇÃO II - Cultivo, produção e fabrico. Artigo 13.º Cultivo: Quem pretender autorização para o cultivo de espécies vegetais incluídas nas tabelas I e II para fins médicos, médico -veterinários ou de investigação científica deve requerê-la ao INFARMED. No caso do cultivo de cânhamo para fins industriais, das variedades de Cannabis sativa L., incluídas no anexo B do Regulamento (CEE) n.º 1164/89, da Comissão, de 28 de Abril, na redacção que lhe foi dada pelo Regulamento (CE) n.º 2814/98, da Comissão, de 22 de Dezembro, as funções de controlo serão efectuadas pelo Instituto Nacional de Intervenção e Garantia Agrícola, conjuntamente com a PJ, em termos a definir por despacho conjunto dos Ministros da Justiça e da Agricultura, do Desenvolvimento Rural e das Pescas.</p> <p>Artigo 23.º Pedidos de importação e exportação: 3 — Os pedidos específicos de importação de sementes de Cannabis não destinadas a sementeira são apresentados, junto da DGAIEC, que emite o respectivo certificado para importação. 4 — Os pedidos referidos no número anterior devem ser acompanhados de: a) Cópia da autorização genérica de actividade, prevista no n.º 2 do artigo 8.º; b) Declaração de compromisso de apresentação de documentos demonstrativos de que as sementes de Cannabis foram sujeitas, com vista à sua inutilização para sementeira, a uma das seguintes operações: i) Redução total do seu poder germinativo ou redução a um valor inferior a 10 %, por terem sido submetidas a um processo físico ou de outra natureza que inviabilize a sua germinação; ii)</p>

Date	Type/ID	Event
	1;2;3;4 4 4	<p>Mistura destinada à alimentação animal com sementes que não as de cânhamo, com uma percentagem máxima de 15 % de sementes de cânhamo relativamente ao total; iii) Reexportação para um país terceiro.</p> <p><i>Lei n.º 18/2009, de 11 de Maio</i> Procede à décima sexta alteração ao Decreto-Lei n.º 15/93, de 22 de Janeiro, que aprova o regime jurídico aplicável ao tráfico e consumo de estupefacientes e substâncias psicotrópicas, acrescentando as substâncias oripavina e 1-benzilpiperazina às tabelas anexas</p> <p><i>Lei n.º 25/2009, de 5 de junho</i> Estabelece o regime jurídico da emissão e da execução de decisões de apreensão de bens ou elementos de prova na União Europeia, em cumprimento da Decisão Quadro n.º 2003/577/JAI, do Conselho, de 22 de julho de 2003</p> <p><i>Resolução da Assembleia da República n.º 82/2009, de 27 de Agosto</i> Aprova a Convenção do Conselho da Europa Relativa ao Branqueamento, Detecção, Apreensão e Perda dos Produtos do Crime e ao Financiamento do Terrorismo, adotada em Varsóvia em 16 de Maio de 2005.</p>
2010	1;2;3; 5;6;7 1;2;3; 5;6;7	<p><i>Decreto-Lei n.º 40/2010, de 28 de Abril</i> Reorganiza as estruturas de coordenação do combate à droga e às toxicodependências, alargando as respetivas competências à definição e à execução das políticas relacionadas com o uso nocivo do álcool.</p> <p><i>Conselho Interministerial, de 26 de Maio de 2010</i> Aprova o Relatório de Avaliação Interna do Plano de Ação contra a Droga e as Toxicodependências Horizonte 2008, o Plano de Ação contra a Droga e as Toxicodependências 2009 - 2012 e o Plano Nacional para a Redução dos Problemas Ligados ao Álcool 2010 - 2012.</p>
2011	5;6;7 6	<p><i>Decreto-Lei n.º 124/2011, de 29 Dezembro</i> Aprova a nova estrutura do Ministério da Saúde e cria a Direcção Geral para a Intervenção nos Comportamentos Aditivos e Dependentes, extinguindo o IDT, I.P.</p> <p><i>Aviso n.º 21552/2011, de 31 de Outubro</i> Autorização para aquisição directa de substâncias estupefacientes, psicotrópicas e seus preparados concedida à entidade Instituto da Droga e da Toxicodependência, I. P., para uso exclusivo dos doentes internados nas Direcções Regionais de Lisboa e Vale do Tejo, do Norte e do Algarve.</p>
2012	1;2;3;4 5;6;7	<p><i>Lei n.º 13/2012, de 26 de Março</i> Altera pela décima nona vez o Decreto-Lei n.º 15/93, de 22 de janeiro, que aprova o regime jurídico aplicável ao tráfico e consumo de estupefacientes e substâncias psicotrópicas, acrescentando a mefedrona e o tapentadol às tabelas que lhe são anexas</p> <p><i>Decreto-Lei n.º 17/2012, de 26 Janeiro</i> Aprova a orgânica do Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências (SICAD). Concretiza uma inovação assente na opção de reforço da componente de planeamento e acompanhamento de programas de redução do consumo de substâncias psicoativas, na prevenção dos comportamentos aditivos e na diminuição das dependências. Por sua vez, a componente de operacionalização das</p>

Date	Type/ID	Event
		intervenções é concentrada no âmbito de atuação das Administrações Regionais de Saúde (ARS).
2013	1;2;3;4 31;32;33 5;6;7 6	<p><i>Decreto-Lei n.º 54/2013, de 17 de Abril</i> Proíbe a produção, exportação, publicidade, distribuição, venda ou simples dispensa de Novas Substâncias Psicoactivas nomeadas na lista anexa à Portaria n.º 154/2013, de 17 de Abril, e regula o mecanismo de controlo das Novas Substâncias Psicoactivas, incluindo sanções administrativas.</p> <p><i>Portaria n.º 27/2013, de 24 Janeiro</i> Regulamento que estabelece as condições de financiamento público dos projetos que constituem os Programas de Respostas Integradas (PRI)</p> <p><i>Aviso n.º 4295/2013, de 26 de Março</i> Autorização para aquisição direta de substâncias estupefacientes, psicotrópicas e seus preparados concedida à entidade SICAD - Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências, para uso exclusivo dos doentes em programas de tratamento com estupefaciente substituto (metadona).</p>
2014	1;2; 1C;2C; 31;33 31C;33C 1;2;3;4 1;2;3;4 1;2;3; 5;6;7	<p><i>Acórdão do Tribunal Constitucional n.º 587/2014 (Processo n.º 230/14)</i> Não julga inconstitucional, por violação do princípio da legalidade criminal, consagrado no n.º 1 do artigo 29.º, da Constituição, a norma constante do artigo 28.º, da Lei n.º 30/2000, de 29 de novembro, quando interpretada no sentido de que se mantém em vigor o artigo 40.º, n.º 2, do Decreto-Lei n.º 15/93, de 22 de janeiro, relativamente à aquisição ou detenção, para consumo próprio, de plantas, substâncias ou preparações compreendidas nas tabelas I a IV, em quantidade superior à necessária para o consumo médio individual durante o período de 10 dias. Manteve o entendimento do STJ: são puníveis a título de crime de consumo as situações de detenção ou aquisição de droga para consumo próprio em quantidade superior à necessária para o consumo médio individual durante o período de 10 dias.</p> <p><i>Lei n.º 22/2014, de 28 de Abril</i> Vigésima alteração ao Decreto-Lei n.º 15/93, de 22 de Janeiro, que aprova o regime jurídico aplicável ao tráfico e consumo de estupefacientes e substâncias psicotrópicas, aditando a substância 5 (2-aminopropil) índole à tabela anexa II-A e a substância 4 metilamfetamina à tabela anexa II-B.</p> <p><i>Lei n.º 77/2014, de 11 de Novembro</i> Vigésima primeira alteração ao Decreto-Lei n.º 15/93, de 22 de Janeiro, que aprova o regime jurídico aplicável ao tráfico e consumo de estupefacientes e substâncias psicotrópicas, aditando a substância alfa-fenilacetacetoneitrilo à tabela anexa V.</p> <p><i>Resolução do Conselho de Ministros n.º 79/2014, de 29 de dezembro</i> Aprova o Plano Nacional para a Redução dos Comportamentos Aditivos e das Dependências 2013-2020 e o Plano de Ação para a Redução dos Comportamentos Aditivos e das Dependências 2013-2016.</p>
2015	1;2;3; 5;6;7	<p><i>Declaração de Retificação n.º 8/2015, de 27 de fevereiro</i> Retifica a Resolução do Conselho de Ministros n.º 79/2014, de 29 de dezembro, do Conselho de Ministros, que aprova o Plano Nacional para</p>

Date	Type/ID	Event
	4	a Redução dos Comportamentos Aditivos e das Dependências 2013-2020 e o Plano de Ação para a Redução dos Comportamentos Aditivos e das Dependências 2013-2016, publicada no Diário da República n.º 250, de 29 de dezembro de 2014. <i>Lei n.º 61/2015, de 24 de junho</i>
	4	Segunda alteração à Lei n.º 101/2001, de 25 de agosto, que estabelece o regime jurídico das ações encobertas para fins de prevenção e investigação criminal, permitindo que nelas sejam incluídos todos os ilícitos criminais relacionados com o terrorismo. <i>Lei n.º 62/2015, de 24 de junho</i>
	4	Sexta alteração à Lei n.º 25/2008, de 5 de junho, que estabelece medidas de natureza preventiva e repressiva de combate ao branqueamento de vantagens de proveniência ilícita e ao financiamento do terrorismo
2016	6	<i>Decreto-Lei n.º 74/2016, de 08 de novembro</i> Procede à primeira alteração ao Decreto-Lei n.º 16/99, de 25 de janeiro, que regula o licenciamento, o funcionamento e a fiscalização do exercício da atividade das unidades privadas que atuam na área do tratamento ou da recuperação de toxicodependentes e define os requisitos a que devem obedecer as suas instalações, organização e funcionamento, clarificando a efetiva competência da Entidade Reguladora da Saúde
2017	1;2;3;4	<i>Lei n.º 7/2017, de 2 de Março</i> Vigésima segunda alteração ao Decreto-Lei n.º 15/93, de 22 de Janeiro, que aprova o regime jurídico aplicável ao tráfico e consumo de estupefacientes e substâncias psicotrópicas, aditando várias substâncias à tabela II-A.
	4	<i>Lei n.º 83/2017, de 18 de Agosto</i> Estabelece medidas de combate ao branqueamento de capitais e ao financiamento do terrorismo, transpõe parcialmente as Diretivas 2015/849/UE, do Parlamento Europeu e do Conselho, de 20 de Maio de 2015, e 2016/2258/UE, do Conselho, de 6 de Dezembro de 2016, altera o Código Penal e o Código da Propriedade Industrial e revoga a Lei n.º 25/2008, de 5 de Junho, e o Decreto-Lei n.º 125/2008, de 21 de Julho.

A.2. Italy

Date	Type/ID	Event
1990	1;2;3;5;6;7	<i>LEGGE 26 Giugno 1990, n. 162</i> Aggiornamento, modifiche ed integrazioni della legge 22 Dicembre 1975, n. 685, recante disciplina degli stupefacenti e sostanze psicotrope, prevenzione, cura e riabilitazione dei relativi stati di tossicodipendenza.
	1;2;3;5;6;7	DECRETO DEL PRESIDENTE DELLA REPUBBLICA 9 Ottobre 1990, n. 309 Testo unico delle leggi in materia di disciplina degli stupefacenti e sostanze psicotrope, prevenzione, cura e riabilitazione dei relativi stati di tossicodipendenza.

Date	Type/ID	Event
		<p>Art. 72 (Legge 26 Giugno 1990, n. 162, art. 13, comma 1 - Attivita' illecite) – (comma abrogato dal d.p.r. 5 Giugno 1993, n. 171 a seguito di referendum popolare).</p> <p>1. L'articolo 70 della legge 22 Dicembre 1975, n. 685 e' sostituito dal seguente: "Titolo VIII - DELLA REPRESSIONE DELLE ATTIVITA' ILLECITE Capo I - Disposizioni penali Art. 70 - (Attivita' illecite). –</p> <p>1. E' vietato l'uso personale di sostanze stupefacenti o psicotrope di cui alle tabelle, I, II, III, e IV previste dall'articolo 12. E' altresì vietato qualunque impiego di sostanze stupefacenti o psicotrope non autorizzato secondo le norme della presente legge.</p> <p>2. E' consentito l'uso terapeutico di preparati medicinali a base di sostanze stupefacenti o psicotrope di cui al comma 1, debitamente prescritti secondo le necessita' di cura in relazione alle particolari condizioni patologiche del soggetto".</p> <p>Art 73 (Legge 26 giugno 1990, n. 162, art. 14, comma 1) -Produzione e traffico illecito di sostanze stupefacenti o psicotrope.</p> <p>1. Chiunque senza l'autorizzazione di cui all'articolo 15 (art 75) coltiva, produce, fabbrica, estrae, raffina, vende, offre o mette in vendita, cede o riceve, a qualsiasi titolo, distribuisce, commercia, acquista, trasporta, esporta, importa, procura ad altri, invia passa o spedisce in transito, consegna per qualunque scopo o comunque illecitamente detiene, fuori dalle ipotesi previste dagli articoli 72 e 72 bis, sostanze stupefacenti o psicotrope di cui alle tabelle I e III previste dall'articolo 12 e' punito con la reclusione da otto a venti anni e con la multa di cinquanta milioni a lire cinquecento milioni.</p> <p>5. Quando, per i mezzi, per la modalita' o le circostanze dell'azione ovvero per la qualita' e quantita' delle sostanze, i fatti previsti dal presente articolo sono di lieve entita', si applicano le pene della reclusione da uno a sei anni e della multa da lire cinque milioni a lire cinquanta milioni se si tratta di sostanze stupefacenti o psicotrope di cui alle tabelle I e III previste dall'articolo 12, ovvero le pene della reclusione da sei mesi a quattro anni e della multa da lire due milioni a lire venti milioni se si tratta di sostanze di cui alle tabelle II e IV.</p> <p>Art 75 (Legge 26 Giugno 1990, n. 162, art 15) - Sanzioni amministrative</p> <p>1. Chiunque, per farne uso personale, illecitamente importa, acquista o comunque detiene sostanze stupefacenti o psicotrope in dose non superiore a quella media giornaliera, determinata in base ai criteri indicati al comma 1 dell'articolo 72-quater, e' sottoposto alla sanzione amministrativa.</p> <p>2. Se i fatti previsti dal comma 1 riguardano sostanze di cui alle tabelle II e IV e ricorrono elementi tali da far presumere che la persona si asterra', per il futuro, dal commetterli nuovamente, in luogo della sanzione, e per una sola volta, il prefetto definisce il procedimento con il formale invito a non fare piu' uso delle sostanze stesse, avvertendo il soggetto delle conseguenze a suo danno.</p> <p>DECRETO DEL PRESIDENTE DELLA REPUBBLICA 9 Ottobre 1990, n. 309</p>

Date	Type/ID	Event
	5;6;7	<p><i>[In English]</i> Law n. 162/1990 (T.U.¹ n. 309/90) of 26 January Consolidated Law, adopted by Presidential Decree N°309 on 9 October 1990 and subsequently amended, provides the legal framework for <i>consumption; possession; cultivation, production; distribution and trade; import and export; harm reduction, treatment and prevention</i>. It regulates the penalties for illegal activities in the field of drugs and psychoactive substances.</p> <p>Art. 72 T.U. provided an absolute prohibition for the consumption of drugs without providing a sanction. (It is called the 'manifesto law')</p> <p>Art 73 T.U provided (and still does) all the conducts that led to a criminal sanction. The sanctions range from 8 to 20 years of imprisonment and a fine from about 25.000 to 250.000 euros for crimes related to substances in Schedule I and from 1 to 6 years and a fine from about 5.000 to 25.000 euros for substances in Schedule II (e.g. cannabis). It also provided that the possession of psychoactive substances under a "daily average dose" (that corresponded to the average amount of drugs consumed by a drug user per day) as it was supposed to be for personal use, was considered as an administrative offence, subject to the sanctions provided by art. 75 T.U..</p> <p>Art. 73, par. 5, T.U. provided less strong penalties in case the offence made was of a small extent (detention from 1 to 6 years for "hard drugs" – Schedules I and III and from 6 months to 4 years for "soft drugs" – Schedules II and IV).</p> <p><i>DECRETO 30 Novembre 1990, n. 444</i> - Il ministro della sanita' di concerto con il ministro per gli affari sociali</p> <p>Regolamento concernente la determinazione dell'organico e delle caratteristiche organizzative e funzionali dei servizi per le tossicodipendenze da istituire presso le unità sanitarie locali.</p> <p>Visto l'art. 27 della legge 26 Giugno 1990, n. 162, il quale prevede che, mediante decreto del Ministro della sanita' di concerto con il Ministro per gli affari sociali, sono adottate norme regolamentari per la determinazione dell'organico e delle caratteristiche organizzative e funzionali dei servizi per le tossicodipendenze;</p>
	1;2;6	<p><i>DECRETO 29 Dicembre 1990, n. 448</i> - Il ministro della sanita' di concerto con il ministro di grazia e giustizia</p> <p>Regolamento concernente le modalita' di redazione della relazione sulla verifica del trattamento dei tossicodipendenti in regime di sospensione del procedimento o di sospensione dell'esecuzione della pena.</p>
1991	4	<p><i>DECRETO-LEGGE 3 maggio 1991, n. 143</i> Provvedimenti urgenti per limitare l'uso del contante e dei titoli al portatore nelle transazioni e prevenire l'utilizzazione del sistema finanziario a scopo di riciclaggio.</p> <p><i>DECRETO-LEGGE 3 maggio 1991, n. 143</i> <i>[In English]</i> Urgent measures to contain the use of cash and bearer securities in transactions and to prevent the use of the financial system for the purpose of money laundering.</p>

¹ T.U. means 'testo unico', that is, consolidated law.

Date	Type/ID	Event
		<p>(Current text: http://www.normattiva.it/atto/caricaDettaglioAtto?atto.dataPubblicazioneGazzetta=1991-07-02&atto.codiceRedazionale=091G0232&queryString=%3FmeseProvvedimento%3D%26formType%3Dricerca_semplice%26numeroArticolo%3D%26numeroProvvedimento%3D193%26testo%3D%26annoProvvedimento%3D1991%26giornoProvvedimento%3D&currentPage=1)</p> <p>This law is now repealed. You can find the original text in: http://www.gazzettaufficiale.it/eli/id/1991/07/06/091A3072/sg;jsessionid=d5pjjUlh24m4jpHhMdk7ldw_nfc-as2-guri2b)</p>
1993	1;2;3;5;6;7	<p>DECRETO DEL PRESIDENTE DELLA REPUBBLICA 5 Giugno 1993, n. 171</p> <p>Abrogazione parziale, a seguito di referendum popolare, del testo unico delle leggi in materia di disciplina degli stupefacenti e sostanze psicotrope, prevenzione, cura e riabilitazione dei relativi stati di tossicodipendenza, approvato con decreto del Presidente della Repubblica 9 Ottobre 1990, n. 309. Sono abrogati: l'art. 2, comma 1, lettera e), punto 4; l'art. 72, comma 1; l'art. 72, comma 2, limitatamente alle parole: "di cui al comma 1"; l'art. 73, comma 1, limitatamente alle parole: "e 76"; l'art. 75, comma 1, limitatamente alle parole: "in dose non superiore a quella media giornaliera, determinata in base ai criteri indicati al comma 1 dell'art. 78"; l'art. 75, comma 12, limitatamente alle parole: "rendendolo edotto delle conseguenze cui puo' andare incontro. Se l'interessato non si presenta innanzi al prefetto, o dichiara di rifiutare il programma ovvero nuovamente lo interrompe senza giustificato motivo, il prefetto ne riferisce al procuratore della Repubblica presso la pretura o al procuratore della Repubblica presso il tribunale per i minorenni, trasmettendo gli atti ai fini dell'applicazione delle misure di cui all'art. 76. Allo stesso modo procede quando siano commessi per la terza volta i fatti di cui ai commi 1 e 2 del presente articolo."; l'art. 75, comma 13, limitatamente alle parole: "e nell'art. 76";</p> <p>DECRETO DEL PRESIDENTE DELLA REPUBBLICA 5 Giugno 1993, n. 171</p> <p>[In English] <i>Referendum 1993</i></p> <p>The result of the referendum that took place in 1993 was the abolition of art. 72 T.U. (the manifesto norm) and the possession for personal consumption was decriminalized regardless the amount owned. Possession was punished with administrative sanctions. There was no daily quantity to determine possession. It was up to the judges to determine whether possession was to personal use or dealing. The difference between 'hard drugs' and 'soft drugs' is abolished in art 73. The provisions of the law that limited methadone prescriptions, which became the treatment of choice for heroin addiction, were also abolished.</p>
1994	31;31C	<p><i>Corte di Cassazione, sez. VI, 12 Luglio 1994, n. 3353 [In English]</i></p> <p>In this decision the Court distinguished the plantation in his technical-agricultural meaning from the domestic one. Therefore, it stated that just the former had to be considered a criminal offence, while the latter</p>

Date	Type/ID	Event
		was considered compatible with the personal use and it has been found to be an administrative offence. This interpretation of the law was based on the principle of the offensiveness of the fact (<i>principio di offensività</i>).
1995	31;31C	<i>Constitutional Court decision n. 360/1995, of 24 Luglio [In English]</i> The Court criticized the 'Corte di Cassazione n° 3353' because it considered the distinction made as arbitrary. The Constitutional Court affirmed that plantation is intrinsically more severe than the conduct of mere detention, because the former could increase the amount of drugs circulating, so it deserved a different and more severe sanction. In addition, the Court held that, in the case of cultivation, it could not be appreciated <i>ex-ante</i> the quantity of product which could be obtained, and therefore no reliable conclusions could be drawn on the destination of the plantation only to personal use, rather than retail. However, the Court pointed out that the specific conduct should be evaluated by the single judges, to verify if the plantation has a certain degree of dangerousness or, due to the small quantity of drug produced, it can be considered for personal use.
1996	32;33 5;6;7	<i>DECRETO LEGISLATIVO 12 Aprile 1996, n. 258</i> Recepimento della direttiva 92/109/CEE relativa alla fabbricazione e all'immissione in commercio di talune sostanze impiegate nella fabbricazione illecita di stupefacenti o di sostanze psicotrope e della direttiva 93/46/CEE di modifica della direttiva 92/109/CEE. <i>DECRETO LEGISLATIVO 12 Aprile 1996, n. 258</i> <i>[In English] Legislative Decree n. 258 of 12 April 1996</i> Incorporation of Directive 92/109/EEC on the manufacture and the placing on the market of certain substances used in the illicit manufacture of narcotic drugs and psychotropic substances, and of Directive 93/46/EEC amending Directive 92/109/EEC. It replaces article 70 of DPR (DECRETO DEL PRESIDENTE DELLA REPUBBLICA) n° 309 of 9 of October of 1990 and lists the substances susceptible for use in the production of narcotic drugs or psychotropic substances. <i>DECRETO-LEGGE 18 Gennaio 1996, n. 21</i> Disposizioni urgenti per la funzionalità dei servizi per le tossicodipendenze delle unità sanitarie locali (acronym: Ser.T).
1997	5;6;7 1;1C 4	<i>LEGGE 28 Marzo 1997, n. 86</i> Sanatoria degli effetti prodotti dai decreti-legge adottati in materia di prevenzione e recupero dalle tossicodipendenze e di funzionamento dei SERT. <i>Corte di Cassazione, Sezioni Unite, 18 Luglio 1997, n. 4 [In English]</i> The court attributed an administrative sanction to 'group consumption', as it was considered personal use. 'Group consumption' meant both the case of "mandated to purchase", in which the buyer immediately delivers the drugs to the components of the group, and the case of "collective use", where the substance is held by one of the members of the group on behalf of everyone. <i>DECRETO LEGISLATIVO 26 maggio 1997, n. 153</i>

Date	Type/ID	Event
		<p>Integrazione dell'attuazione della direttiva 91/308/CEE in materia di riciclaggio dei capitali di provenienza illecita. (Gazzetta Ufficiale n.136 del 13-6-1997) <i>[In English]</i> DECRETO LEGISLATIVO 26 maggio 1997, n. 153 Integration of the implementation of Directive 91/308/EEC on money laundering of illicit origin. (Gazzetta Ufficiale n. 136 of 13-6-1997) (Current text: http://www.normattiva.it/atto/caricaDettaglioAtto?atto.dataPubblicazioneGazzetta=1997-06-13&atto.codiceRedazionale=097G0203&queryString=%3FmeseProvvedimento%3D%26formType%3Dricerca_semplice%26numeroArticolo%3D%26numeroProvvedimento%3D153%26testo%3D%26annoProvvedimento%3D1997%26giornoProvvedimento%3D&currentPage=1)</p> <p>(Original text: http://www.gazzettaufficiale.it/atto/serie_generale/caricaDettaglioAtto/originario?atto.dataPubblicazioneGazzetta=1997-06-13&atto.codiceRedazionale=097G0203&elenco30giorni=false)</p>
1999	5;6;7 5;6;7 5 4	<p>Decreto ministeriale per la solidarietà sociale, del 14 Settembre 1999 Disciplina l'organizzazione e il funzionamento dell'Osservatorio permanente sulle tossicodipendenze LEGGE 18 Febbraio 1999, n. 45 Disposizioni per il Fondo nazionale di intervento per la lotta alla droga e in materia di personale dei Servizi per le tossicodipendenze. State-regional accord of 1999 to harm reduction <i>[In English]</i> The harm reduction approach was further consolidated in the state-regional accord of 1999 and the interventions were defined in draft harm reduction guidelines, although these guidelines have not yet been endorsed.</p> <p>DECRETO LEGISLATIVO 25 settembre 1999, n. 374 Estensione delle disposizioni in materia di riciclaggio dei capitali di provenienza illecita ed attività finanziarie particolarmente suscettibili di utilizzazione a fini di riciclaggio, a norma dell'articolo 15 della legge 6 febbraio 1996, n. 52. (Gazzetta Ufficiale n.253 del 27-10-1999) (<i>successivamente parzialmente abrogato dal Decreto legislativo 21 novembre 2007, n. 231</i>) <i>[In English]</i> Extension of provisions on money laundering and financial assets particularly susceptible to use for money laundering purposes, pursuant to Article 15 of the Law of 6 February 1996, n. 52. (Gazzetta Ufficiale n.253 of 27-10-1999) <i>Subsequently partially repealed by Decreto Legislativo 21 November 2007, n. 231</i> (Current text: http://www.normattiva.it/uri-res/N2Ls?urn:nir:stato:decreto.legislativo:1999-09-25:374!vig=)</p>

Date	Type/ID	Event
		(Original text: http://www.gazzettaufficiale.it/eli/id/1999/10/27/099G0450/sg;jsessionid=TI8+FNxs+2fNfguI1uc2fQ_ntc-as5-guri2a)
2002	5;6;7	DECRETO 14 Giugno 2002 - Il ministro della salute di concerto con il ministro del lavoro e delle politiche sociali. Disposizioni di principio sull'organizzazione e sul funzionamento dei servizi per le tossicodipendenze delle aziende unita' sanitarie locali (Ser.T), di cui al decreto ministeriale 30 Novembre 1990, n. 444.
2004	4	DECRETO LEGISLATIVO 20 febbraio 2004, n. 56 Attuazione della direttiva 2001/97/CE in materia di prevenzione dell'uso del sistema finanziario a scopo di riciclaggio dei proventi da attività illecite. (Gazzetta Ufficiale n.49 del 28-2-2004 - Suppl. Ordinario n. 30) Successivamente abrogato dal Decreto legislativo 21 novembre 2007, n. 231 DECRETO LEGISLATIVO 20 febbraio 2004, n. 56 [In English] Implementation of Directive 2001/97/EC on the prevention of the use of the financial system for the purpose of money laundering. (Gazzetta Ufficiale n.49 of 28-2-2004 - Supplemento Ordinario No. 30) Subsequently repealed by Decreto Legislativo 21 November 2007, n. 231 (Original text: http://www.gazzettaufficiale.it/atto/serie_generale/caricaDettaglioAtto/originario?atto.dataPubblicazioneGazzetta=2004-02-28&atto.codiceRedazionale=004G0087&elenco30giorni=false)
2005	1;1C 1;2;3;5;6;7	Corte di Cassazione, sez. IV, 5 Maggio 2005 [In English] Attributed administrative sanction to 'group consumption', as it considered it 'personal use', but the Court required a trial criteria to delimit the cases of decriminalization to the cases in which the buyer was himself a consumer and the identity of the members of the group who had given the 'mandate to purchase ' was sure from the beginning. DECRETO-LEGGE 30 Dicembre 2005, n. 272 Misure urgenti per garantire la sicurezza ed i finanziamenti per le prossime Olimpiadi invernali, nonché la funzionalità dell'Amministrazione dell'interno. Disposizioni per favorire il recupero di tossicodipendenti recidivi (e modifiche al testo unico delle leggi in materia di disciplina degli stupefacenti e sostanze psicotrope, prevenzione, cura e riabilitazione dei relativi stati di tossicodipendenza, di cui al decreto del Presidente della Repubblica 9 ottobre 1990, n. 309.)
2006	1;2;3;5;6;7	LEGGE 21 Febbraio 2006, n. 49 Conversione in legge, con modificazioni del decreto-legge 30 dicembre 2005, n. 272, recante misure urgenti per garantire la sicurezza ed i finanziamenti per le prossime Olimpiadi invernali, nonché la funzionalità dell'Amministrazione dell'interno. Disposizioni per favorire il recupero di tossicodipendenti recidivi. [In English] Law n. 49/2006 of 21 February (also known as law "Fini-Giovanardi", after the name of the proponents). Art. 73 T.U. didn't differentiate anymore "hard drugs" from "soft drugs", so it introduced just one sanction for all the criminalized conducts (e.g. to cultivate, to purchase, to produce ...): detention from

Date	Type/ID	Event
	1;2;5;6;7	<p>6 to 20 years and a fine from 26.000 to 260.000 euros. Cannabis was upgraded to Schedule I drug (hard drug).</p> <p>Art. 73 <i>bis</i> T.U. presents a list of conducts that were considered abstractly compatible with personal use, thus being punished just as administrative offences, in case the personal use was verified. Therefore the new law provided at art. 73 all the conducts that were considered <i>ex se</i> a criminal offence, regardless of the possibility that they would have been acted just for personal use, while at art. 73 <i>bis</i> identified the conducts that could be linked to personal use. From that list was (and still is) excluded plantation and transport.</p> <p>Art. 73, par. 5, T.U. increased the penalties also for the less severe offences and also in this case the sanction provided is one for soft and hard drugs (1 to 6 years and a fine from 3.000 to 26.000 euros).</p> <p>DECRETO MINISTERIALE 11 Aprile 2006 (<i>Ministero della salute</i>) Indicazione dei limiti quantitativi massimi delle sostanze stupefacenti e psicotrope, riferibili ad un uso esclusivamente personale delle sostanze elencate nella tabella I del Testo unico delle leggi in materia di disciplina degli stupefacenti e delle sostanze psicotrope, prevenzione, cura e riabilitazione dei relativi stati di tossicodipendenza, di cui al decreto del Presidente della Repubblica 9 ottobre 1990, n. 309, come modificato dalla legge 21 Febbraio 2006, n. 49, ai sensi dell'articolo 73, comma 1-bis.</p>
	4	<p>DECRETO MINISTERIALE 3 Febbraio 2006, n. 141 (<i>Ministro dell'economia e delle finanze</i>) Regolamento in materia di obblighi di identificazione, conservazione delle informazioni a fini antiriciclaggio e segnalazione delle operazioni sospette a carico degli avvocati, notai, dottori commercialisti, revisori contabili, società di revisione, consulenti del lavoro, ragionieri e periti commerciali, previsto dagli articoli 3, comma 2, e 8, comma 4, del decreto legislativo 20 febbraio 2004, n. 56, recante attuazione della direttiva 2001/97/CE in materia di prevenzione dell'uso del sistema finanziario a scopo di riciclaggio dei proventi di attività illecite.</p>
	4	<p>DECRETO Ministero dell'economia e delle finanze 3 febbraio 2006, n. 142 Regolamento in materia di obblighi di identificazione e di conservazione delle informazioni per gli intermediari finanziari previsto dall'articolo 3, comma 2, del decreto legislativo 20 febbraio 2004, n. 56, recante attuazione della direttiva 2001/97/CE in materia di prevenzione dell'uso del sistema finanziario a scopo di riciclaggio dei proventi di attività illecite. (Gazzetta Ufficiale n.82 del 7-4-2006 - Suppl. Ordinario n. 86) DECRETO Ministero dell'economia e delle finanze 3 febbraio 2006, n. 142 <i>[In English]</i> Regulation on the obligations of identification and conservation of information for financial intermediaries provided for by article 3, paragraph 2, of the legislative decree 20 February 2004, n. 56, implementing Directive 2001/97/EC on the prevention of the use of</p>

Date	Type/ID	Event
		<p>the financial system for the purpose of laundering the proceeds of illicit activities. (Gazzetta Ufficiale n.82 of 7-4-2006 - Suppl. Ordinario n. 86) (Original and current text: http://www.normattiva.it/atto/caricaDettaglioAtto?atto.dataPubblicazioneGazzetta=2006-04-07&atto.codiceRedazionale=006G0153&queryString=%3FmeseProvvedimento%3D%26formType%3Dricerca_semplice%26numeroArticolo%3D%26numeroProvvedimento%3D142%26testo%3D%26annoProvvedimento%3D2006%26giornoProvvedimento%3D&currentPage=1) DECRETO Ministero dell'economia e delle finanze 3 febbraio 2006, n. 143 Regolamento in materia di identificazione e di conservazione delle informazioni per gli operatori non finanziari previsto dall'articolo 3, comma 2, del decreto legislativo 20 febbraio 2004, n. 56, recante attuazione della direttiva 2001/97/CE in materia di prevenzione dell'uso del sistema finanziario a scopo di riciclaggio dei proventi di attività illecite. (Gazzetta Ufficiale n.82 del 7-4-2006 - Suppl. Ordinario n. 86) [In English] Regulation on the identification and conservation of informations for non-financial operators provided for by article 3, paragraph 2, of the legislative decree 20 February 2004, n. 56, implementing Directive 2001/97/EC on the prevention of the use of the financial system for the purpose of money laundering. (Gazzetta Ufficiale n.82 of 7-4-2006 - Supplemento Ordinario n. 86) (Current and original text: http://www.normattiva.it/uri-res/N2Ls?urn:nir:ministero.economia.e.finanze:decreto:2006-02-03:143:orig=http://www.gazzettaufficiale.it/eli/gu/2006/04/07/82/so/86/sg/pdf)</p>
	32C; 33C EXPERT	The DECRETO LEGISLATIVO. n. 219/2006 (that implements the EU directive 2001/83) gives the possibility to doctors to prescribe medicine based on cannabis that can be prepared by the pharmacist, also called galenic preparation ("preparazioni magistrali").
2007	31;31C	<i>Corte di Cassazione, sez. VI, sent. 18 Gennaio 2007, n. 17983 [In English]</i> Considered 'domestic' cultivation as personal use, even after the law of 2006; therefore it was necessary to ascertain whether, in the specific case, the cultivation was devoted exclusively to personal use or not.
	31;31C	<i>Corte di Cassazione, sez. VI, sent. 11 Ottobre 2007, n. 40362 [In English]</i> Considered 'domestic' cultivation as personal use – same as n. 17983
	31;31C	<i>Corte di Cassazione, sez. IV, sent. 28 Novembre 2007, n. 871 [In English]</i> Followed what was stated by the Constitutional Court in 1995 in relation to domestic cultivation.
	4	DECRETO DEL PRESIDENTE DELLA REPUBBLICA 14 Maggio 2007, n. 114 Regolamento per il riordino degli organismi operanti presso il Ministero dell'economia e delle finanze, a norma dell'articolo 29 del decreto-legge 4 luglio 2006, n. 223, convertito, con modificazioni, dalla legge 4 agosto 2006, n. 248.
	4	DECRETO LEGISLATIVO 22 giugno 2007, n. 109

Date	Type/ID	Event
4		<p>Misure per prevenire, contrastare e reprimere il finanziamento del terrorismo e l'attività dei Paesi che minacciano la pace e la sicurezza internazionale, in attuazione della direttiva 2005/60/CE. (Gazzetta Ufficiale Serie Generale n.172 del 26-07-2007) DECRETO LEGISLATIVO 22 giugno 2007, n. 109 <i>[In English]</i> Measures to prevent, oppose and repress terrorist financing and the activities of countries threatening international peace and security, implementing Directive 2005/60/EC. (Gazzetta Ufficiale Serie Generale n.172 of 26-07-2007) (Current text: http://www.normattiva.it/atto/caricaDettaglioAtto?atto.dataPubblicazioneGazzetta=2007-07-26&atto.codiceRedazionale=007G0124&queryString=%3FmeseProvvedimento%3D%26formType%3Dricerca_semplice%26numeroArticolo%3D%26numeroProvvedimento%3D109%26testo%3D%26annoProvvedimento%3D2007%26giornoProvvedimento%3D&currentPage=1) (Original text: http://www.gazzettaufficiale.it/atto/serie_generale/caricaDettaglioAtto/originario?atto.dataPubblicazioneGazzetta=2007-07-26&atto.codiceRedazionale=007G0124&elenco30giorni=false)</p> <p>DECRETO LEGISLATIVO 21 novembre 2007, n. 231, da ultimo modificato dal D. Lgs. 25 maggio 2017, n. 90 Attuazione della direttiva 2005/60/CE concernente la prevenzione dell'utilizzo del sistema finanziario a scopo di riciclaggio dei proventi di attività criminose e di finanziamento del terrorismo nonché della direttiva 2006/70/CE che ne reca misure di esecuzione. (Gazzetta Ufficiale Serie Generale n.290 del 14-12-2007 - Suppl. Ordinario n. 268) DECRETO LEGISLATIVO 21 November 2007, n. 231, <i>[In English]</i> Implementation of Directive 2005/60 / EC concerning the prevention of the use of the financial system for the purpose of money laundering and terrorist financing as well as of Directive 2006/70 / EC which contains implementing measures. (Gazzetta Ufficiale Serie Generale n.290 of 14-12-2007 - Supplemento Ordinario n. 268) <i>Amended by Legislative Decree 25 May 2017, n. 90</i> (Original text: http://www.gazzettaufficiale.it/eli/id/2007/12/14/007X0246/sg)</p>
2008	31;31C	<p><i>Corte di Cassazione, Sezioni Unite, 24 Aprile 2008, n. 28605 and 28606 [In English]</i> The Court held that, after the law of 2006, any unauthorized cultivation activity of plantation from which psychoactive substances can be extracted was punishable, without any distinction between 'agricultural' and 'domestic' one. The only argument that could be used to arrive to a penalty exemption, according to the Court, would be on the base of art. 49 of the criminal code, that is, when the conduct doesn't have an effective degree of offensiveness: it would only be configurable if "the substance</p>

Date	Type/ID	Event
		obtainable from cultivation was not capable of producing a narcotic effect in concrete detectable".
2009	4	<p>DECRETO LEGISLATIVO 25 settembre 2009, n. 151</p> <p>Disposizioni integrative e correttive del decreto legislativo 21 novembre 2007, n. 231, recante attuazione della direttiva 2005/60/CE concernente la prevenzione dell'utilizzo del sistema finanziario a scopo di riciclaggio dei proventi di attività criminose e di finanziamento del terrorismo, nonché della direttiva 2006/70/CE che reca misure di esecuzione.</p> <p>(Gazzetta Ufficiale n.256 del 3-11-2009)</p> <p>DECRETO LEGISLATIVO 25 settembre 2009, n. 151</p> <p>[In English] Supplementary and corrective provisions of the legislative decree 21 November 2007, n. 231, implementing Directive 2005/60 / EC concerning the prevention of the use of the financial system for the purpose of money laundering and terrorist financing, as well as of Directive 2006/70/EC laying down implementing measures.</p> <p>(Gazzetta Ufficiale n.256 del 3-11-2009)</p> <p>(Original text: http://www.gazzettaufficiale.it/eli/id/2009/11/03/009G0163/sg)</p> <p>NOTE: this decree contains the main amendments to DECRETO LEGISLATIVO 21 novembre 2007, n. 231.</p>
2010	4	<p>DECRETO-LEGGE 31 maggio 2010, n. 78</p> <p>Misure urgenti in materia di stabilizzazione finanziaria e di competitività economica.</p> <p>(Gazzetta Ufficiale n.125 del 31-5-2010 - Suppl. Ordinario n. 114)</p> <p>DECRETO-LEGGE 31 maggio 2010, n. 78</p> <p>[In English] Urgent measures on financial stabilization and economic competitiveness.</p> <p>(Gazzetta Ufficiale n.125 of 31-5-2010 - Supplemento Ordinario No. 114)</p> <p>(Original text: http://www.gazzettaufficiale.it/gunewsletter/dettaglio.jsp?service=1&dataqu=2010-05-31&task=dettaglio&numgu=125&redaz=010G0101&tmstp=1275551085053)</p> <p>NOTE: this decree contains, in art. 36, the main amendments to DECRETO LEGISLATIVO 21 novembre 2007, n. 231.</p>
2011	31;31C 1;1C	<p>Corte di Cassazione, sez. IV, sent 28 Giugno 2011, n. 351 [In English]</p> <p>Not followed the 'Corte di Cassazione, Sezioni Unite, 24 Aprile 2008'</p> <p>Corte di Cassazione, sez. III, sent 20 Aprile 2011, n. 35706 [In English]</p> <p>Group consumption - Followed the orientation of the law no. 49/2006, which changes the wording of art. 73, par. 1-bis. T.U. and introduced the term 'non exclusively personal use' to distinguish the conducts that lead to a criminal offence from the ones that lead to an administrative offence.</p>
2012	1;1C 4	<p>Corte di Cassazione, sez. IV, sent 9 Ottobre 2012, n. 4560 [In English]</p> <p>Followed the orientation of the law no. 49/2006</p> <p>DECRETO LEGISLATIVO 19 settembre 2012, n. 169</p>

Date	Type/ID	Event
		<p>Ulteriori modifiche ed integrazioni al decreto legislativo 13 agosto 2010, n. 141, recante attuazione della direttiva 2008/48/CE, relativa ai contratti di credito ai consumatori, nonché modifiche del titolo V del testo unico bancario in merito alla disciplina dei soggetti operanti nel settore finanziario, degli agenti in attività finanziaria e dei mediatori creditizi. (Gazzetta Ufficiale n.230 del 2-10-2012)</p> <p>DECRETO LEGISLATIVO 19 settembre 2012, n. 169</p> <p>[In English] Further modifications and additions to the legislative decree 13 August 2010, n. 141, implementing Directive 2008/48/EC on consumer credit agreements, as well as amendments to Title V of the Consolidated Law on the regulation of financial operators, agents in financial assets and credit brokers.</p> <p>(Gazzetta Ufficiale n.230 of 2-10-2012)</p> <p>(Original text: http://www.gazzettaufficiale.it/eli/id/2012/10/02/012G0190/sg;jsessionid=oR_Utgd17OvfmMms6MqoRyA__ntc-as1-guri2a)</p> <p>NOTE: this decree contains, in art. 18, the main amendments to DECRETO LEGISLATIVO 21 novembre 2007, n. 231.</p>
2013	33;33C 1;1C 33C EXPERT	<p><i>Corte di Cassazione sent 8 of Luglio 2013, n. 28919, [In English]</i></p> <p>It stated that if the person holds the drug for personal use and at the same time carries it with him, the transport is still absorbed in the conduct of detention for personal use.</p> <p><i>Corte di Cassazione Sezioni Unite 10 Giugno 2013, n. 25401 [In English]</i></p> <p>The Court held that the “group consumption” has to be assimilated to detention for personal use, so it has to be decriminalized. The Court also clarified the conditions that characterize “group consumption”: the buyer should be one of the users; the purchase has to be made from the beginning on behalf of the other members of the group.</p> <p>The DECRETO LEGISLATIVO of the 30 of April 2013 consented for the first time to put in commerce a medicine produced by the pharmaceutical industries called SativexR that is made by THC and CBD (the two active ingredients of the cannabis).</p>
2014	1;2;3 1;2;3;5;6;7	<p><i>Constitutional Court decision n. 32/2014 of 12 February 2014 [In English]</i></p> <p>The Constitutional Court declared unconstitutional the law n. 49/2006, so the previous legislation was once again applied. The difference between the offences related to soft and to hard drugs was reintroduced. After the decision of the Constitutional Court in 2014 the wording of the art. 73 T.U. has been changed, so that the term “exclusively” was removed.</p> <p><i>LEGGE 21 Febbraio 2014, n. 10</i></p> <p>Conversione in legge, con modificazioni, del decreto-legge 23 Dicembre 2013, n. 146, recante misure urgenti in tema di tutela dei diritti fondamentali dei detenuti e di riduzione controllata della popolazione carceraria</p> <p><i>LEGGE 21 Febbraio 2014, n. 10</i></p> <p>[In English] Law n. 10/2014 of 21 February</p> <p>Art. 73, par. 5, T.U. was modified: the penalty was reduced (detention from 1 to 5 years) and it was not anymore considered a mitigating</p>

Date	Type/ID	Event
	1;2;3;5;6;7	<p>circumstance (as it was considered from 1990) but an autonomous offence in which were included the conducts characterized for a less intense offence (fatto di lieve entità).</p> <p><i>DECRETO-LEGGE 20 Marzo 2014, n. 36</i></p> <p>Disposizioni urgenti in materia di disciplina degli stupefacenti e sostanze psicotrope, prevenzione, cura e riabilitazione dei relativi stati di tossicodipendenza, di cui al decreto del Presidente della Repubblica 9 ottobre 1990, n. 309, nonché di impiego di medicinali ((...)).</p>
	1;2;3;5;6;7	<p><i>LEGGE 16 Maggio 2014, n. 79</i></p> <p>Conversione in legge, con modificazioni, del decreto-legge 20 marzo 2014, n. 36, recante disposizioni urgenti in materia di disciplina degli stupefacenti e sostanze psicotrope, prevenzione, cura e riabilitazione dei relativi stati di tossicodipendenza, di cui al decreto del Presidente della Repubblica 9 ottobre 1990, n. 309, nonché di impiego di medicinali meno onerosi da parte del Servizio sanitario nazionale.</p> <p><i>LEGGE 16 Maggio 2014, n. 79 [In English] Law n. 79 of 16 May 2014</i></p> <p>A distinction is now made between less dangerous ('soft') drugs in Schedules II and IV and more dangerous ('hard') drugs in Schedules I and III. Administrative sanctions for personal possession offences may be one to three months' imprisonment for the former and 2-12 months imprisonment for the latter. If a person is found in possession of illicit drugs for the first time, administrative sanctions are not usually applied, but, instead, the offender receives a warning and a formal request to refrain from use. The offender may also voluntarily request treatment or rehabilitation, and proceedings will then be suspended while the user is referred for treatment. Failure to attend or complete a treatment programme may result in the application of the above sanctions.</p> <p>Art. 73 T.U. provides the same penalties of the law introduced in the 1990.</p> <p>Art. 73, par. 5, T.U. is still considered an autonomous offence, but the sanction is decreased (detention from 6 months to 4 years), thus now the pre-trial detention for this kind of offence is forbidden. It is worth noting that in this case the penalty is still one for soft and hard drugs.</p> <p>Art. 75 and 75bis T.U. the wording of those articles has been changed but the administrative sanctions remained the same.</p>
	31C EXPERT LAW?	<p>The cultivation in the pharmaceutical military center of Florence started in 2014</p>
2015	31;31C 4	<p><i>Corte di Cassazione, sez. VI, 15 Dicembre 2015, n. 49476 [In English]</i></p> <p>Not followed the 'Corte di Cassazione, Sezioni Unite, 24 April 2008, n. 28605 and 28606'</p> <p>Decreto Ministero dell'interno 25 settembre 2015</p> <p>Determinazione degli indicatori di anomalia al fine di agevolare l'individuazione delle operazioni sospette di riciclaggio e di finanziamento del terrorismo da parte degli uffici della Pubblica amministrazione</p> <p>(Gazzetta Ufficiale n 233 del 7-10-2015)</p> <p>Decreto Ministero dell'interno 25 settembre 2015</p>

Date	Type/ID	Event
	3C EXPERT	<p>[In English] Determination of anomaly indicators in order to facilitate the identification of suspected money laundering and terrorist financing operations by Public Administration offices (Gazzetta Ufficiale n. 233 of 7-10-2015)</p> <p>(Original text: http://www.gazzettaufficiale.it/eli/id/2015/10/07/15A07455/sg)</p> <p>The DECRETO Ministero of the 9.11.2015 specified which type of illness could be treated with medical cannabis.</p>
2016	31;31C 31;31C 31;31C 31;31C 31C EXPERT	<p><i>Corte di Cassazione, sez. IV, 21 Gennaio 2016, n. 2548 [In English]</i> Not followed the 'Corte di Cassazione, Sezioni Unite, 24 Aprile 2008 [In English]</p> <p><i>Corte di Cassazione, sez. VI, 22 Gennaio 2016, n. 3037 [In English]</i> Not followed the 'Corte di Cassazione, Sezioni Unite, 24 Aprile 2008</p> <p><i>Corte di Cassazione, sez. VI, 9 Febbraio 2016, n. 5254 [In English]</i> Not followed the 'Corte di Cassazione, Sezioni Unite, 24 Aprile 2008</p> <p><i>Constitutional Court, 20 May 2016, n. 109 [In English]</i> Held that the cultivation would be more dangerous than the others contemplated in the art. 75 because, even if it is logically compatible with the purpose of personal use, it would be able to increase the quantity of existing and circulating drugs, thus facilitating indirectly the diffusion.</p> <p>Law n. 242/2016 the farmers do not need to ask for any authorization to grow the legal/industrial cannabis, they just have to save the label of the seeds they use for one year in case of control by the police and they can sell it for technical use directly to the shops. With this law the percentage of THC of the plant to be considered for industrial use increased from 0,2% per gram, to 0,6% per gram and now there is a clear regulation of the hemp cultivation.</p>
2017	4 4 31C; 33C EXPERT	<p>DECRETO LEGISLATIVO 25 Maggio 2017, n. 90 Attuazione della direttiva (UE) 2015/849 relativa alla prevenzione dell'uso del sistema finanziario a scopo di riciclaggio dei proventi di attivita' criminose e di finanziamento del terrorismo e recante modifica delle direttive 2005/60/CE e 2006/70/CE e attuazione del regolamento (UE) n. 2015/847 riguardante i dati informativi che accompagnano i trasferimenti di fondi e che abroga il regolamento (CE) n. 1781/2006.</p> <p>DECRETO LEGISLATIVO 25 maggio 2017, n. 92 Disposizioni per l'esercizio dell'attivita' di compro oro, in attuazione dell'articolo 15, comma 2, lettera l), della legge 12 agosto 2016, n. 170 (Gazzetta Ufficiale n.141 del 20-6-2017)</p> <p>DECRETO LEGISLATIVO 25 May 2017, n. 92 [In English] Provisions for the business of buying gold, in implementation of Article 15, paragraph 2, letter l), of the law 12 August 2016, n. 170 (Gazzetta Ufficiale n.141 of 20-6-2017) (Original text: http://www.gazzettaufficiale.it/eli/id/2017/06/20/17G00109/sg)</p> <p>Law n. 172/2017 established that for the diseases indicated in the DECRETO Ministero. of the 9.11.2015 the cost of the medicine is born</p>

Date	Type/ID	Event
		by the SSN (national healthcare system). The only one who can produce medical cannabis in Italy is the pharmaceutical military center of Florence. Art. 3 established that in case the production made in Florence won't be enough to treat all the patients in need the Ministry of Health can authorize other entities (provision still not applied).

A.3. United Kingdom

Date	Type/ID	Event
1971	1;2;3;4;5;6;7	<p>Misuse of Drugs Act 1971, of 27th May</p> <p>This is the primary English drug law.</p> <p>The Misuse of Drugs Act 1971 (Her Majesty's Government, 1971) controls the possession, supply and production of psychoactive substances that are considered dangerous or otherwise harmful when misused, and sets maximum criminal penalties for each offence. Drug use is not a crime in the UK, but possession, production, supply and trafficking (including importation and exportation) are. The act divides such substances into three classes (A, B and C) and sets maximum criminal penalties for illegal production, possession and supply in relation to each class.</p> <p>Possession: In the UK it is unlawful to possess any quantity of a controlled drug, unless the individual is in possession of an authorisation in the form of a licence (for example a prescription), or the person can prove that they were unaware that the substance was a controlled drug.</p> <p>Supply and possession with the intent of supply: Supply defined as the simple act of passing a controlled drug from one person to another. According to the law, it is irrelevant if the act is done for profit or not. The financial gain has influences only on the sentence given.</p> <p>Production: In the UK it is illegal to produce any controlled drug, unless the individual is in possession of an authorisation in the form of a licence. Production is defined as 'manufacturing, cultivating or production by any other method'.</p> <p>Penalties range from a warning, fine, or community sentence through to a custodial sentence, depending on the severity of the offence. Both recorded crime and arrests for overall drug law offences have been falling for several years.</p>
1985	1;2;3; 1C;2C;3C	<p><u><i>Controlled Drugs (Penalties) Act 1985, of 16th July</i></u></p> <p>This act increases the penalties for certain offences relating to controlled drugs within the meaning of the Misuse of Drugs Act 1971. It changes the punishment imposed on persons convicted of offences related to production, supply and possession with intent to supply of class A drugs from 14 years to life imprisonment, or a penalty of any amount or both, while punishment for convictions where class B drugs are involved is for 14 years maximum or a penalty of any amount or both. This act does not refer to punishment of class C drugs, hence the Misuse of Drugs Act 1971 applies.</p>
1986	3	<p><u><i>Drug Trafficking Offences Act 1986, of 8th June</i></u></p> <p>This act makes provisions for the recovery of the proceeds of drug trafficking and other provision in connection with drug trafficking, and makes</p>

Date	Type/ID	Event
		provisions about the supply of articles which may be used or adapted for use in the administration of controlled drugs or used to prepare a controlled drug for administration and to increase the number of assistant commissioners of police for the metropolis.
1993	3;32	<u><i>The Controlled Drugs (Substances Useful for Manufacture) (Intra-Community Trade) Regulations 1993, of 4th September</i></u> These Regulations implement Council Directive 92/109/EEC (on the manufacture and the placing on the market of certain substances used in the illicit manufacture of narcotic drugs and psychotropic substances), listing some substances under control.
1994	3, 4	<u><i>Criminal justice and public order act 1994, of 3rd November</i></u> This act consolidates the Drug Trafficking Offences Act 1986 and certain provisions of the Criminal Justice (International Co-operation) Act 1990 relating to drug trafficking. It lists an increase in penalties for certain drug offences.
1996	1;2;3 1;2;3 3;4	<u><i>The Misuse of Drugs Act 1971 (Modification) Order 1996, of 15th May</i></u> This Order adds to Part III of Schedule 2 to the Misuse of Drugs Act 1971 (which specifies the Class C drugs which are subject to control under the Act) the anabolic and androgenic steroids and derivatives; an andrenoceptor stimulant; and polypeptide hormones specified in article 2(2)(b). <u><i>The Misuse of Drugs (Amendment) Regulations 1996, of 19th June</i></u> These Regulations amend the Misuse of Drugs Regulations 1985 by adding a new Part I to Schedule 4 comprising a list of anabolic and androgenic steroids and derivatives; an andrenoceptor stimulant; and polypeptide hormones. These drugs became subject to control under the Misuse of Drugs Act 1971 by virtue of the Misuse of Drugs Act 1971 (Modification) Order 1996. <u><i>The Drug Trafficking Act 1994 (Designated Countries and Territories) Order 1996, of 19th November</i></u> This Order provides that the Drug Trafficking Act 1994 applies to an order made by a court in a designated country or territory for the purpose of recovering payments or other rewards received in connection with drug trafficking or their value, and to proceedings. It also provides, in article 8, that the value of any property recovered in a designated country or territory in response to a request by the Government of the United Kingdom for assistance in the enforcement of an order is to be treated as reducing the amount payable in England and Wales under a confiscation order made by the Crown Court.
1997	1;2;3;5 1;2;3	<u><i>The Misuse of Drugs (Supply to Addicts) Regulations 1997, of 20th March</i></u> These Regulations made under the Misuse of Drugs Act 1971 revoke that part of the Misuse of Drugs (Notification of and Supply to Addicts) Regulations 1973 dealing with notification of addicts and re-enact that part of those regulations dealing with supply to addicts with drafting amendments only. The prohibition on doctors supplying or prescribing cocaine, diamorphine (commonly known as heroin) and dipipanone for such persons except under licence of the Secretary of State or in certain cases for medical treatment is re-enacted. <u><i>Crime (Sentences) Act 1997, of 21st March</i></u> Introduced a minimum sentence of 7 years' imprisonment following a third conviction for a drug trafficking offence involving a Class A drug.

Date	Type/ID	Event
	1;2;3;5	<u>Public Entertainments Licences (Drug Misuse) Act 1997, of 21st March</u> This act amends the law about public entertainments licences relating to places at or near which controlled drugs are supplied or used and for connected purposes.
	3;4	<u>The Extradition (Drug Trafficking) Order 1997, of 22nd July</u> This Order applies the Extradition Act 1989 so as to make extraditable offences within the meaning of the Drug Trafficking Offences Act 1994 (c. 37) and the Proceeds of Crime (Scotland) Act 1995 (c. 43), attempts to commit such offences and participation in the commission of such offences.
1998	1;2;3	<u>The Misuse of Drugs (Amendment) Regulations 1998, of 23rd March</u> These Regulations amend the Misuse of Drugs Regulations 1985 by adding Etryptamine and Methcathinone to Schedule 1; Zipeprol to Schedule 2; and Aminorex, Brotizolam and Mesocarb to Schedule 4 Part II. These Regulations also transfer Flunitrazepam from Schedule 4 Part II to Schedule 3 to the 1985 Regulations.
	5;6;7	<u>Crime and Disorder Act 1998, of 31st July</u> This act regulates drug treatment and testing orders (DTTOs) for offenders dependent on drugs. The Act makes it clear that a DTTO may only be imposed where the court is satisfied that the offender is dependent on or has propensity to misuse drugs, and that the dependency or propensity requires and may be susceptible to treatment. The offender is a suitable person to be subject to an order. There is no legal definition of a suitable person, but it is suggested that suitability is determined by such factors as motivation to address drug dependency and sufficient stability of location and circumstances, to enable both supervision and treatment to take effect.
	1;2;3	<u>The Misuse of Drugs Act 1971 (Modification) Order 1998, of 10th December</u> This Order adds six substances to Schedule 2 to the Misuse of Drugs Act 1971 which specifies drugs which are subject to control under the Act. Etryptamine is added as a Class A drug; Methcathinone and Zipeprol are added as Class B drugs; and Aminorex, Brotizolam and Mesocarb are added as Class C drugs.
	5;6;7	<u>Tackling Drugs to Build a Better Britain, of 27th April</u> 10-year drugs strategy with four elements: Young people; Communities; Treatment; Availability.
1999	5;6;7	<u>New-Adam Programme, of July 1999</u> English and Welsh Arrestee Drug Abuse Monitoring (NEW-ADAM) Programme was established to research the levels of drug misuse among arrestees relying on interviewing and voluntary drug testing.
	5;6;7	<u>The National Institute for Health and Care Excellence (NICE)</u> Created as the National Institute for Clinical Excellence, a special health authority, to reduce variation in the availability and quality of NHS treatments and care. It provides national guidance and advice to improve health and social care.
2000	5;6;7	<u>Criminal Justice and Court Services Act 2000, of 30th November</u> Includes drug abstinence orders and pre-sentence drug testing if the person concerned has attained the age of 18. Under Section 110 Powers of Criminal Courts (Sentencing) Act 2000, a minimum sentence of seven years was introduced for a third conviction for trafficking in Class A drugs. Amended the Police and Criminal Evidence (PACE) Act 1984 to allow for the taking of a sample of urine or a non-intimate sample from a person in police

Date	Type/ID	Event
	5;6	detention for the purpose of ascertaining whether s/he has any specified Class A drug in his/her body. <u>Criminal Courts (Sentencing) Act 2000, of 25th May 2000</u> <i>Drug Treatment and Testing Orders (DTTOs)</i> : Where a person aged 16 or over is convicted of an offence, the court by or before which he is convicted may (subject to sections 34 to 36 above) make an order which has effect for a period specified in the order of not less than six months nor more than three years ("the treatment and testing period"). A drug treatment and testing order shall include a requirement ("the treatment requirement") that the offender shall submit, during the whole of the treatment and testing period, to treatment by or under the direction of a specified person having the necessary qualifications or experience ("the treatment provider") with a view to the reduction or elimination of the offender's dependency on or propensity to misuse drugs. A court shall not make a drug treatment and testing order in respect of an offender unless it is satisfied that he is dependent on or has a propensity to misuse drugs; and that his dependency or propensity is such as requires and may be susceptible to treatment.
	4	<u>Financial Services and Markets Act 2000, of 14th June 2000</u> This act makes provision about the regulation of financial services and markets; provides for the transfer of certain statutory functions relating to building societies, friendly societies, industrial and provident societies and certain other mutual societies; and for connected purposes.
	5;6	'Wintercomfort case', a.k.a. 'The Cambridge Two'. <i>Brock & Anor, R v [2000] EWCA Crim 85 (21st December, 2000)</i> Two charity workers from Cambridge convicted of allowing premises to be used for the supply of heroin. Their convictions were upheld on appeal, however their appeals against sentence were allowed.
	5;7	<i>The National Intelligence Model (NIM)</i> , piloted in the early 1990s, was rolled out to law enforcement agencies across the UK.
2001	1;2;3	<u>The Misuse of Drugs Act 1971 (Modification) Order 2001, of 11 December 2001</u> This Order adds thirty-six substances to Schedule 2 to the Misuse of Drugs Act 1971 which specifies drugs which are subject to control under the Act. The thirty-six substances are phenethylamine derivatives which are not covered by the definition in paragraph 1(c) of Part I of Schedule 2 to the 1971 Act. Thirty-five of the substances are added as Class A drugs; and a-Methylphenethylhy droxylamine is added as a Class B drug.
	1;2;3	<u>The Misuse of Drugs (Designation) Order 2001, of 13th December</u> Section 7(3) of the Misuse of Drugs Act 1971 requires regulations to be made to allow the use for medical purposes of the drugs which are subject to control under the Act, except those designated by order under section 7(4). This Order designates for this purpose the drugs specified in Part I of the Schedule to the Order, adding thirty-five substances which are all phenethylamine derivatives which became subject to control under the Act by virtue of the Misuse of Drugs Act 1971 (Modification) Order 2001 (S.I. 2001/3932).
	1;2;3 31;32;33	<u>The Misuse of Drugs Regulations 2001, of 13th December</u> These Regulations revoke and re-enact, with amendments, the provisions of the Misuse of Drugs Regulations 1985, as amended. They provide certain exemptions from the provisions of the Misuse of Drugs Act 1971 which,

Date	Type/ID	Event
		<p>subject to such regulations, prohibit the production, importation, exportation, possession and supply of controlled drugs. Thirty-five phenethylamine derivatives are made subject to control under the Act of 1971 by virtue of the Misuse of Drugs Act 1971 (Modification) Order 2001 (S.I. 2001/3932), and 33 benzodiazepines and 8 other substances formerly in Schedule 4 Part II are now in Part I of that Schedule. They are no longer exempt from the prohibition on importation and exportation or from the prohibition on possession when in the form of a medicinal product. Finally, sections 12 and 13 maintain the legal basis for medical cannabis research from the 1985 Regulations. Most drugs controlled under the act are also placed in one of the five schedules of the Misuse of Drugs Regulations 2001 (Her Majesty’s Government, 2001b), based on an assessment of their medicinal or therapeutic usefulness, the need for legitimate access and their potential harms when misused. The schedules determine the circumstances in which controlled substances can be lawfully manufactured, possessed and distributed. Those drugs deemed to have no therapeutic value are placed on Schedule 1, meaning that they cannot be prescribed. Research can be conducted on these substances but this requires a licence to be obtained from the Home Office. Schedule 5 contains drugs that can be legally supplied and possessed without prescription.</p>
	<p>1;2;3 1C;2C;3C</p>	<p><u>Criminal Justice and Police Act 2001, of 11th May</u> This Act describes travel restriction orders for persons convicted of drug trafficking offences, and widens the offence of allowing opium or cannabis to be smoked on premises to all controlled drugs. First and second simple possession offences for cannabis and khat (for personal use) are dealt with using out-of-court disposals in England and Wales. In the case of first offences with no aggravating factors, this takes the form of a spoken ‘cannabis warning’ or ‘khat warning’. Second offences generally incur a penalty notice for disorder of £80 under the Criminal Justice and Police Act 2001 and the schedule to the Penalties for Disorderly Behaviour (Amount of Penalty) Order 2002 (Her Majesty’s Government, 2001a, 2009b).</p>
	<p>4</p>	<p><u>The Financial Services and Markets Act 2000 (Regulations Relating to Money Laundering) Regulations 2001, of 9th May</u> These Regulations prescribe the Money Laundering Regulations 1993 (S.I. 1993/1933), (“the 1993 Regulations”), as amended, for the purposes of section 168(4)(b) of the Financial Services and Markets Act 2000 (“the Act”). The effect of this is that the Financial Services Authority may, under section 168(5) of the Act, appoint a competent person to conduct an investigation on its behalf where it appears to it that a person may be guilty of an offence under the 1993 Regulations. The 1993 Regulations are also prescribed for the purposes of section 402(1)(b) of the Act. This will enable the Financial Services Authority (except in Scotland) to institute proceedings for any offence under the 1993 Regulations.</p>
	<p>4 1C;2C</p>	<p><u>The Money Laundering Regulations 2001, of 9th November</u> These Regulations give effect to articles 12 and 15 of the Council Directive No. 91/308/EEC on prevention of the use of the financial system for the purpose of money laundering. They supplement the provisions of the Money Laundering Regulations 1993 (“the 1993 Regulations”). <u>The Metropolitan Police Service (MPS) Lambeth Cannabis Warning Scheme (LCWS), of 4th July</u>, was introduced as a six month pilot project (ended on 31st</p>

Date	Type/ID	Event
	6;7 1;2;5;6;7	<p>July 2002). Those found in possession of small quantities of cannabis for their personal use: (i) had the drugs confiscated; (ii) were given a warning – a modification of existing MPS and Association of Chief Police Officers (ACPO) guidance.</p> <p>The National Treatment Agency for Substance Misuse (NTA) was established to improve the availability, capacity and effectiveness of drug treatment.</p> <p>Drug Strategy Updated. Included measures: A 'tougher focus on Class A drugs'; Further expansion of treatment services; A National Crack Action Plan.</p>
2002	4	<p><u>Proceeds of Crime Act 2002, of 24th July</u></p> <p>The Act provided confiscation or civil recovery of the proceeds from crime and contained the principal money laundering legislation in the UK.</p>
2003	1;2;3 1;2;3 1;2;3 1;2;3 1C;2C;3C	<p><u>The Misuse of Drugs Act 1971 (Modification) Order 2003, of 8th May 2003</u></p> <p>This Order adds eight substances to Schedule 2 to the Misuse of Drugs Act 1971 which specifies drugs which are subject to control under the Act. Two of the substances, Dihydroetorphine and Remifentanil, are added as Class A drugs; and the remaining six, 4-Androstene-3, 17-dione; 5-Androstene-3, 17-diol; 4-Hydroxy-n-butyric acid; 19-Nor-4-Androstene-3; 17-dione, 19-Nor-5-Androstene-3, 17-diol[a] and Zolpidem, are added as Class C drugs.</p> <p><u>The Misuse of Drugs (Amendment) Regulations 2003, of 5th June</u></p> <p>These Regulations amend the Misuse of Drugs Regulations 2001 by adding two substances to paragraph 1 of Schedule 2 (controlled drugs subject to the requirements of regulations 14, 15, 16, 18, 19, 20, 21, 23, 26 and 27) two substances to Part I of Schedule 4 (controlled drugs subject to the requirements of regulations 22, 23, 26 and 27) and four substances to Part II of Schedule 4 (controlled drugs excepted from the prohibition on possession when in the form of a medicinal product; excluded from the application of offences arising from the prohibition on importation and exportation when imported or exported in the form of a medicinal product by any person for administration to himself; and subject to the requirements of regulations 22, 23, 26 and 27).</p> <p>This regulation adds Dihydroetorphine, Remifentanil, GHB and Zolpidem to the Schedules of the Regulations.</p> <p><u>The Misuse of Drugs (Amendment) (No. 2) Regulations 2003, 26th June 2003</u></p> <p>These Regulations amend the Misuse of Drugs Regulations 2001. Regulation 2(2) inserts regulation 6A which provides that practitioners, pharmacists and persons employed or engaged in the lawful provision of drug treatment services may lawfully supply certain articles such as swabs and citric acid. The supply or offer of supply of any of the articles detailed in this regulation by persons other than practitioners, pharmacists and persons employed or engaged in the lawful provision of drug treatment services, remains an offence under sections 9A(1) and (3) of the Misuse of Drugs Act 1971. Made provision for lawful provision of a range of articles (e.g. citric acid, swabs and filters) to injecting drug users.</p> <p><u>The Misuse of Drugs Act 1971 (Modification) (No. 2) Order 2003, of 10th December 2003</u></p> <p>This Order reclassifies cannabinal and cannabinal derivatives (previously Class A drugs) and cannabis and cannabis resin (previously Class B drugs) as Class C drugs. In addition, any substance which is an ester or ether either of</p>

Date	Type/ID	Event
	1;2;3;5;6 1C;2C;3C	<p>cannabinol or of a cannabinol derivative (previously a Class A drug) is reclassified as a Class C drug.</p> <p><u>Criminal Justice Act 2003, of 20th November</u></p> <p>This law contains the provisions increasing penalties for Class C drugs and making their possession an arrestable offence.</p> <p>Section 3: Arrestable offences: the offence of possession of cannabis or cannabis resin (which are controlled drugs). In relation to drugs, this provision allows the police to continue to arrest without a warrant persons in possession of cannabis or cannabis resin following the drugs' reclassification from Class B to Class C under the Misuse of Drugs Act 1971. Schedule 28 amends Schedule 4 to the Misuse of Drugs Act 1971 and related legislation to increase the penalties for offences committed in relation to Class C drugs. The provisions include an increase to the maximum penalties for trafficking Class C drugs from 5 to 14 years' imprisonment.</p> <p>Section 5: Drug Testing for under eighteens –Amends the provisions of the Criminal Justice and Court Services Act 2000 by lowering the age of drug testing to the age of 14 for specified Class A drugs and for custody officers to detain a person after charge to enable a sample to be taken for that purpose. The Section also makes provision for an appropriate adult to be present during the testing procedure in the case of a person who is under 17 years old.</p> <p>Section 19: Drug users: restriction on bail - an alleged offender aged 18 or over who has been charged with an imprisonable offence associated with class A drugs, will not be granted bail, unless the court is satisfied that there is no significant risk of his committing an offence while on bail or the person agrees to undergo an assessment as to his dependency. The assessment will be carried out by a suitably qualified person, who will have received training in the assessment of drug problems. If an assessment or follow-up is proposed and agreed to, it will be a condition of bail that they be undertaken. The provision can only apply in areas where appropriate assessment and treatment facilities are in place.</p> <p>Section 209: Drug rehabilitation requirement (DRRs) - As part of a community sentence or suspended sentence the court may impose a drug rehabilitation requirement, which includes drug treatment and testing.</p>
4		<p><u>The Money Laundering Regulations 2003, of 28th November</u></p> <p>These Regulations replace the Money Laundering Regulations 1993 and 2001 with updated provisions which reflect Directive 2001/97/EC of the European Parliament and of the Council amending Council Directive 91/308/EEC on prevention of the use of the financial system for the purpose of money laundering.</p>
5		<p><u>Anti-Social Behaviour Act (ASBA) 2003, of 20th November</u></p> <p>The ASBA enabled the police and local authorities to deal with 'crack houses'. Premises where drugs used unlawfully: This act grants the police the power to close down premises being used for the supply, use or production of Class A drugs where there is associated serious nuisance or disorder.</p>
	1C;2C	<p><u>ACPO Cannabis Enforcement Guidance, of 12th September</u></p> <p>The Association of Chief Police Officers (ACPO) released a set of guidelines to assist police officers who were dealing with cannabis users, designed to be introduced in 2004 as cannabis is reclassified to class C of Schedule 2 of the</p>

Date	Type/ID	Event
	5;6	<p>Misuse of Drugs Act 1971 and the Criminal Justice Bill is changed to give heavier punishments for class C drugs.</p> <p>A consequence of transferring cannabis from Class B to Class C is that under current legislation cannabis possession would ordinarily not be an arrestable offence under Section 24 of PACE 1984. However, the Home Office has indicated that it will continue to be defined as an arrestable offence, but that this power should only be exercised in certain circumstances. This is very much left to the discretion of officers who will be expected to take into account the prevailing circumstances in deciding whether to arrest or not. The enforcement strategy is to seize the drug and issue a formal warning and the arrest will only be used if the formal warning is not appropriate. A police officer may arrest if: a person is smoking cannabis in public view or if a person is locally known to be repeatedly dealt with for possession of cannabis; if a person is in possession of cannabis under circumstances that are causing a locally identified policing problem; a person is in possession of cannabis inside or in the vicinity of premises frequented by young persons, e.g. schools, youth clubs, play areas.</p> <p><i>The Drug Interventions Programme for prisons and probation services</i> Launched in 2003 as a three-year initiative that forms part of the Government's commitment to reducing the effects of drug-related crime on the community. It aims to get offenders who misuse drugs out of crime and into treatment and other support.</p>
2005	1;2;3;4	<p><u><i>Drugs Act 2005, of 7th April 2005</i></u> This act makes provisions in connection with controlled drugs and for the making of orders to supplement anti-social behaviour orders in cases where behaviour is affected by drug misuse or other prescribed factors. It amended the Police and Criminal Evidence Act 1984, introducing mandatory drug testing of detainees following arrest in certain circumstances (Her Majesty's Government, 1984, 2005) and to intimate drug searches and enabled the police to take X-rays and ultrasound scans to detect the presence of Class A drugs. The act also introduced a new offence of failing to attend a required assessment with a drug worker for those testing positive. These amendments provided a legally enforceable lever through which to identify drug using offenders on arrest and to engage them with treatment. It also amended the Misuse of Drugs Act 1971 to include fungi containing psilocin as a Class A drug.</p> <p><u><i>The Misuse of Drugs Act 1971 (Amendment) Order 2006 of 15 November 2005</i></u> This Order inserts Ketamine into Part 3 of Schedule 2 to the Misuse of Drugs Act 1971, which specifies drugs which are subject to control under that Act as Class C drugs.</p> <p><u><i>Serious Organised Crime and Police Act (SOCPA) 2005, of 7th April</i></u> This act provides for the establishment and functions of the Serious Organised Crime Agency (SOCPA); makes provisions about investigations, prosecutions, offenders and witnesses in criminal proceedings and the protection of persons involved in investigations or proceedings; provides for the implementation of certain international obligations relating to criminal matters; amends the Proceeds of Crime Act 2002; makes further provision for combatting crime and disorder, including new provision about powers of arrest and search warrants and about parental compensation orders; makes</p>

Date	Type/ID	Event
	6 5;6;7	<p>further provision about the police and policing and persons supporting the police; makes provisions for protecting certain organisations from interference with their activities; makes provisions about criminal records; provides for the Private Security Industry Act 2001 to extend to Scotland; and for connected purposes. Chapter 6 amends the three principal money laundering offences of the Proceeds of Crime Act 2002</p> <p><i>British Randomised Injecting Opioid Treatment Trial (RIOTT)</i> The RIOTT study introduces the new modality of supervised injecting to the UK context, in which medical heroin is prescribed for addiction treatment purposes (supervision had been minimally utilized in recent years, with only about 300 patients currently provided with regular prescribed heroin).</p> <p><i>NICE merged with the Health Development Agency</i> It began developing public health guidance to help prevent ill health and promote healthier lifestyles. The name changed to the National Institute for Health and Clinical Excellence.</p>
2006	1;2;3	<p><u><i>The Misuse of Drugs Act 1971 (Amendment) Order 2006, of 14th December 2006</i></u> This Order reclassifies methylamphetamine, previously a Class B drug, as a Class A drug by moving it from Part 2 of Schedule 2 to the Misuse of Drugs Act 1971 to Part 1 of that Schedule.</p>
2007	4 1;2;3;5;6;7	<p><u><i>The Money Laundering Regulations 2003, of 24th July</i></u> These Regulations replace the Money Laundering Regulations 2003 (S.I. 2003/3075) with updated provisions which implement in part Directive 2005/60/EC (OJ No L 309, 25.11.2005, p.15) of the European Parliament and of the Council on the prevention of the use of the financial system for the purpose of money laundering and terrorist financing.</p> <p><i>The independent UK Drug Policy Commission (UKDPC) (until 2012)</i> Created to provide objective analysis of the evidence concerning drug policy and practice.</p>
2008	1;2;3 1C;2C;3C	<p><u><i>The Misuse of Drugs Act 1971 (Amendment) Order 2008, of 10th December 2008</i></u> This Order reclassifies cannabis, cannabis resin, cannabinol and cannabinol derivatives from Class C to Class B drugs for the purposes of control under the Misuse of Drugs Act 1971. In addition, any substance which is an ester or ether of cannabinol or of a cannabinol derivative is reclassified as a Class B drug.</p>
2009	1;2;3 1C;2C;3C 1;2;3	<p><u><i>The Misuse of Drugs Act 1971 (Amendment) Order 2009, of 9th December 2009</i></u> This Order adds synthetic cannabinoid receptor agonists to Part 2 of Schedule 2 to the Misuse of Drugs Act 1971 ("the Act") which specifies drugs which are subject to control as Class B drugs under the Act. In addition, the Order adds Gamma-butyrolactone (GBL), 1,4-butanediol (1,4-BD), 15 anabolic steroids, two non-steroidal agents, Oripavine, 1-benzylpiperazine (BZP) and a group of substituted piperazines to Part 3 of Schedule 2 to the Act which specifies drugs which are subject to control as Class C drugs under the Act. First NPS (Legal highs) controlled.</p> <p><i>ACPO (Association of Chief Police Officers) Guidance on Cannabis Possession for Personal Use, 2009</i> Police guidelines specify giving a warning for a first non-problematic personal possession of cannabis, increasing to a £80 penalty notice for disorder for a second offence and arrest for possession of a controlled class B drug for further possession offences.</p>

Date	Type/ID	Event
2010	1;2;3	<p><u><i>The Misuse of Drugs Act 1971 (Amendment) Order 2010, of 12th April 2010</i></u> This Order adds 4-methylmethcathinone (commonly known as mephedrone) and other cathinone derivatives to Part 2 of Schedule 2 to the Misuse of Drugs Act 1971, which specifies drugs which are subject to control as Class B drugs under the Act. It does not include cathinones and cathinone derivatives already controlled under the Act or bupropion.</p>
	1;2;3	<p><u><i>The Misuse of Drugs Act 1971 (Amendment No.2) Order 2010, of 21st July 2010</i></u> This Order adds a further group of cathinone derivatives (including naphthylpyrovalerone, commonly known as naphyrone) to Part 2 of Schedule 2 to the Misuse of Drugs Act 1971 which specifies drugs which are subject to control as Class B drugs under that Act.</p>
	1;2;3;5;6;7	<p><i>Drug Strategy 2010</i> The Drug Strategy 2010 - 'Reducing demand, restricting supply, building recovery: supporting people to live a drug-free life' (Her Majesty's Government, 2010) - emphasises supporting those who are drug dependent to achieve recovery and includes dependence to prescription and over the counter medicines as well as tackling new psychoactive substances (NPS). In addition to the drug strategy produced by the UK government, each of the devolved administrations has produced their own drug strategy, which reflects their ideology and the devolution of responsibilities to the national government. The Drug Strategy 2010 has two overarching aims: Reduce illicit and other harmful drug use; Increase the numbers recovering from their dependence. The ACMD (Advisory Council on the Misuse of Drugs) first recommended that treatment services should be allowed to legally distribute foil and the control of 15 additional anabolic steroids. Three years later, the government finally agreed. The ACMD published The Primary Prevention of Hepatitis C Among Injecting Drug Users.</p>
	5;6;7	<p><i>Liaison and Diversion (L&D) scheme</i> The L&D programme was created in 2010 in response to findings of the Bradley Report (Department of Health, 2009). L&D schemes are designed to identify, assess, screen and refer offenders who have mental health, learning disability, substance misuse or other vulnerabilities to an appropriate treatment or support service. The main things that L&D services do for the people they see are identification, screening, assessment and referral to other services: Identification: Criminal justice agencies working at the Police and Courts stages of the pathway are trained to recognise possible signs of vulnerability in people when they first meet them. They then alert their local L&D service about the person; Screening: Once someone is identified as having a potential vulnerability, the L&D practitioner can go through screening questions to identify the need, level of risk and urgency presented. It also helps determine whether further assessment is required; Assessment: Using approved screening and assessment tools an L&D practitioner will undertake a more detailed assessment of the person's vulnerability. This provides more information on a person's needs and also whether they should be referred on for treatment or further support; Referral: The L&D practitioner may refer someone to appropriate mainstream health and social care services or other relevant interventions and support services that can</p>

Date	Type/ID	Event
	1;2;3	<p>Add Khat (the leaves, stems or shoots of the plant of the species <i>Catha edulis</i>) to the list of class C drugs.</p> <p><u>The Misuse of Drugs Act 1971 (Amendment)(No.2) Order 2014, of 10th December</u></p> <p>This Order brings certain drugs under the control of the Misuse of Drugs Act 1971 ('the Act'). Articles 3 and 4 of this Order bring a synthetic opiate, known as AH-7921, various tryptamines and LSD related compounds, as listed in the Order, under permanent control as Class A drugs under the Act.</p>
2016	1;2;3	<p>The Psychoactive Substances Act (Her Majesty's Government, 2016), of 28th January</p> <p>Criminalised the production, supply or possession with intent to supply of any psychoactive substance knowing that it is to be used for its psychoactive effects. Introduced with the intention of preventing the trade of new psychoactive substances (NPS). It covers all substances capable of producing a psychoactive effect with the following exemptions: drugs already controlled under the Misuse of Drugs Act 1971; medicinal products listed under the Human Medicines Regulations 2012; alcohol; nicotine and tobacco products; caffeine; and food and drink. The term 'psychoactive substance' refers to any substance which, by stimulating or depressing the central nervous system, affects the user's mental functioning or emotional state upon consumption. The substances controlled by the Psychoactive Substances Act 2016 are not classified. The maximum penalties for each offence are the same for every substance covered by the legislation.</p> <p>While simple possession is not an offence under this legislation, possession of a psychoactive substance within a custodial institution is prohibited, and applies to prison staff and visitors as well as inmates. Police have special powers to stop, detain and search individuals on 'reasonable' suspicion that they have committed, or are likely to commit, an offence under the Psychoactive Substances Act 2016. They also have powers to seize and detain psychoactive substances found in the course of the search. Furthermore, the act gives law enforcement agencies powers to close down UK-based websites trading in these substances. It is worth noting that an individual purchasing a psychoactive substance from a non-UK-based website may commit the offence of importation, and could be subject to the penalties.</p> <p>A change to the Misuse of Drugs Act 1971: control of 'third generation' synthetic cannabinoid receptor agonists 'First' and 'second' generation synthetic cannabinoid receptor agonists (SCRAs) were controlled as Class B substances under the Misuse of Drugs Act 1971 in the UK in 2009 and 2013, following reports to the government from the ACMD (Advisory Council on the Misuse of Drugs) in 2009 and 2012 (Her Majesty's Government, 2009a, 2013a). In November 2014 the ACMD recommended a revised generic definition of SCRAs, to include the 'third generation' substances now available, which was revised over the course of 2015 and 2016 to include newly emerged SCRAs and exclude prescription medications with similar structures. In December 2016 third generation SCRAs became controlled as Class B substances under the Misuse of Drugs Act 1971 (Her Majesty's Government, 2016c). Therefore, while supply of these substances was already illegal under the Psychoactive Substances Act 2016, this change in legislation made possession an offence too.</p> <p><u>The Misuse of Drugs Act 1971 (Amendment) Order 2016, of 16th November</u></p>

Date	Type/ID	Event
	1C;2C;3C	This Order brings certain drugs under the control of the Misuse of Drugs Act 1971. Article 3 of this Order brings a further range of synthetic cannabinoids under permanent control as Class B drugs under the Act, excluding those synthetic cannabinoids which are already controlled under the Act as Class B drugs, two other compounds which are already controlled as Class A drugs (clonitazene and etonitazene), and several other compounds that have legitimate medical uses (acemetacin, atorvastatin, bazedoxifene, indometacin, losartan, olmesartan, proglumetacin, telmisartan, viminol and zafirlukast). Article 4 brings the anabolic steroid known as Dienedione (estra-4, 9-diene-3,17-dione) under permanent control as a Class C drug.

A.4. France

Date	Type/ID	Event
1970	1;2;3;4;6	<p>Loi n°70-1320 du 31 Décembre 1970</p> <p>Relative aux mesures sanitaires de lutte contre la toxicomanie, et à la repression du trafic et de l'usage illicite des substances vénéneuses.</p> <p><i>[In English] Law n° 70-1320</i></p> <p>This is the main legislative framework. It ensured compliance with the UN drug conventions ratified by France, amended the Code of Public Health and the Penal Code in order to create a legislative framework based on both the application of repressive measures and health-related dispositions. This law has three main objectives: 1) to severely repress trafficking; 2) to prohibit the use of illicit drugs with the possibility of avoiding prosecution through health care; and 3) to ensure free and anonymous care for users seeking treatment.</p> <p>Article L. 355-14. - Anyone who uses illicit substances or plants classified as narcotics is placed under the supervision of the health authority.</p> <p>Articles 355-15 to Article 355-20 - This law also regulates the 'Injonction thérapeutique': an obligation of treatment given to a drug user under a criminal procedure, following a decision of the prosecutor.</p> <p>Articles L.626 to L.630 regulate the penalties concerning the production, transportation, import, export, possession, offering, transfer, acquisition and use of substances or plants or the cultivation of plants classified as poisonous (illicit) by regulation, as well as any act relating to these operations.</p> <p>Regarding repressive measures, the law establishes:</p> <p>Article L. 626. - Will be punished by imprisonment of two months to two years and a fine of 2,000 F to 10,000 F, or only one of these two penalties, those who will have contravened the provisions of the regulations of public administration concerning the production, transportation, import, export,</p>

Date	Type/ID	Event
		<p>possession, offering, transfer, acquisition and use of substances or plants or the cultivation of plants classified as poisonous by regulation, as well as any act relating to these operations.</p> <p>Art. L. 627. - Will be punished by imprisonment from two years to ten years and a fine from 5,000 F to 50,000,000 F, or only one of these two penalties, those who will have contravened the provisions of the regulations of public administration provided for in the preceding article and concerning poisonous substances or plants classified as narcotics by regulation. When the offense involved the illegal importation, production, manufacture or export of such substances or plants, the term of imprisonment shall be ten to twenty years.</p> <p>Will also be punished with imprisonment of two to ten years and a fine of 5,000 F to 50,000,000 F, or only one of these two sentences: 1) Those who have facilitated the use of the aforesaid substances or plants, whether in return for payment or free of charge, either by providing for this purpose a room, or by any other means; 2) Those who, by means of fictitious orders or orders of convenience, have been delivered or have attempted to obtain the delivery of the said substances or plants.</p> <p>Where the use of the said substances or plants has been facilitated to one or more minors under twenty-one years of age, or when these substances or plants have been delivered to them under the conditions set out in paragraph 3 above, the imprisonment will be five to ten years.</p> <p>The courts may, in addition, in all cases provided for in the preceding paragraphs, pronounce the penalty of the prohibition of civil rights for a period of five to ten years. They may order the prohibition of residence, for a period of not less than two years and not more than five years, against any person convicted under this article. They may also withdraw the passport and, for a period of up to three years, suspend the driving license.</p> <p>Article L. 628. - Will be punished by imprisonment from two months to one year and a fine of 500 F to 5,000 F or one of these two penalties only, those who have unlawfully made use of one of the substances or plants classified as narcotics.</p> <p>Article L. 628-1. - The public prosecutor may order people who have used illegal drugs to undergo detoxification or to be under medical supervision, under the conditions provided for in Articles L. 355-15 to L. 355-17. Public action will not be exercised in respect of persons who have complied with the medical treatment prescribed to them and have followed it to completion. Likewise, public action shall not be brought against persons who have made unlawful use of narcotics, when it is established that they have been subjected, since the acts with which they are accused, to a course of treatment, detoxification or medical supervision, under the conditions set out in Articles L. 355-18 to L. 355-21. These provisions shall apply only at the first infringement found. In case of reiterations of the offense, the prosecutor will assess whether or not to exercise the public action.</p>

Date	Type/ID	Event
1987	5 1;2;3;5;6; 7	<p><u>Décret n°87-328 du 13 Mai</u></p> <p>Autorisation de vente libre de seringues en pharmacie aux personnes de plus de 18 ans.</p> <p>Loi n° 87-1157 du 31 décembre 1987 relative à la lutte contre le trafic des stupéfiants et modifiant certaines dispositions du code pénal</p> <p>Article 1</p> <p>I. - Il est créé un Institut national de l'enseignement, de la recherche, de l'information et de la prévention sur les toxicomanies.</p> <p>Cet institut est un établissement public à caractère administratif, doté de la personnalité morale et de l'autonomie financière.</p> <p>Placé sous la tutelle du Premier ministre, il est dirigé par un conseil d'administration assisté d'un conseil scientifique.</p> <p>L'institut a pour mission de coordonner toutes les actions relevant de l'Etat et de poursuivre toutes recherches utiles, tant fondamentales que cliniques, dans le domaine de la pharmacodépendance et de la toxicomanie.</p> <p>II. - La mission de coordination de l'Etat assurée par l'institut concernera:</p> <p>a) La formation des personnels mis en contact, selon des modalités diverses, avec les toxicomanes ;</p> <p>b) La recherche scientifique sur les différents éléments qui constituent les facteurs profonds en jeu dans les causes, la prévention ou le traitement des toxicomanies ;</p> <p>c) L'information, en exploitant tous les moyens nécessaires de réponse adéquate aux préoccupations des particuliers, des collectivités et des organismes publics ou privés portant sur tout ce qui se trouve impliqué au niveau théorique ou pratique dans le phénomène " toxicomanie ";</p> <p>d) L'étude des conditions d'application de la législation relative aux stupéfiants et la définition de toutes propositions à cet égard.</p> <p>III. - La mission de recherche assurée par l'institut a les objectifs suivants:</p> <p>a) Définir les mécanismes d'action des drogues entraînant une dépendance, c'est-à-dire un comportement orienté vers la recherche et la consommation d'une drogue en quantité nuisible à la santé du consommateur et à la société;</p> <p>b) Définir les antidotes aux effets nocifs des drogues entraînant la dépendance ainsi que les meilleures méthodes pour traiter et réhabiliter les toxicomanes et les pharmacodépendants;</p>

Date	Type/ID	Event
		<p>c) Définir à l'aide d'enquêtes épidémiologiques la distribution de la consommation des principales drogues entraînant la dépendance, suivant les modes statistiques de l'épidémiologie contemporaine;</p> <p>d) Définir sur les bases de ces données scientifiques un enseignement destiné à la formation des personnels chargés de la prévention, du traitement et de la réhabilitation des sujets pharmacodépendants et toxicomanes.</p> <p>IV. - L'institut établit chaque année un rapport sur:</p> <p>a) L'activité des institutions de prévention publiques ou subventionnées par des collectivités publiques;</p> <p>b) Le bilan d'application des articles L. 628-1 à L. 628-6 du code de la santé publique qui régissent la procédure d'injonction thérapeutique;</p> <p>c) Les enquêtes épidémiologiques de la consommation des principales drogues entraînant la dépendance, plus particulièrement dans les populations vulnérables;</p> <p>d) Les résultats des divers travaux scientifiques touchant aux objectifs de l'institut et publiés dans la presse scientifique médicale, tant en France qu'à l'étranger.</p> <p>Ce rapport sera déposé sur le bureau des assemblées parlementaires le premier jour de la seconde session ordinaire.</p>
1988	<p>6</p> <p>1C;2C; 31C;32C; 33C</p> <p>1;2;3</p>	<p><i>Circulaire DGS/PGE/1C n°85 du 20 Janvier</i></p> <p>Relative à la mise en place du dispositif de dépistage anonyme et gratuit (CDAG).</p> <p><u>Code de la Santé Publique, Article R5181 du 31 Décembre</u></p> <p>Sont interdits la production, la mise sur le marché, l'emploi et l'usage :</p> <p>1° Du cannabis, de sa plante et de sa résine, des préparations qui en contiennent ou de celles qui sont obtenues à partir du cannabis, de sa plante ou de sa résine ;</p> <p>2° Des tétrahydrocannabinols, de leurs esters, éthers, sels ainsi que des sels des dérivés précités et de leurs préparations.</p> <p>Des dérogations aux dispositions énoncées ci-dessus peuvent être accordées par le ministre de la santé [*autorité compétente*], aux fins de recherche, de contrôle ou de fabrication de dérivés autorisés. Cependant, le ministre chargé de la santé, le ministre chargé de l'agriculture et le ministre chargé de l'industrie peuvent, par arrêté conjoint, autoriser la culture, l'importation et l'exportation de variétés de cannabis dépourvues de propriétés stupéfiantes.</p> <p><u>Code de la Santé Publique, Article R5149 du 31 Décembre</u></p>

Date	Type/ID	Event
		<p>Sont comprises comme substances vénéneuses les substances dangereuses énumérées à l'article R. 5152, les substances stupéfiantes, les substances psychotropes et les substances inscrites sur la liste I et la liste II définies à l'article R. 5204.</p> <p>On entend par " substances " les éléments chimiques et leurs composés comme ils se présentent à l'état naturel ou tels qu'ils sont produits par l'industrie, contenant éventuellement tout additif nécessaire à leur mise sur le marché.</p> <p>On entend par " préparations " les mélanges ou solutions composés de deux substances ou plus.</p>
1990	1;2;3;5;6	<p><u>Arrêté du 22 Février</u></p> <p>Portant inscription sur les listes I et II des substances vénéneuses définies à l'article R.5204 du code de la santé publique.</p> <p>Art. 1er. - Sont classées sur la liste I des substances vénéneuses définie à l'article R.5204 du code de la santé publique les substances ou préparations inscrites à la section II du tableau A des substances vénéneuses antérieurement à la date de publication du présent arrêté.</p> <p><i>[In English]</i> Order of February 22</p> <p>On the lists I and II of poisonous substances defined in Article R.5204 of the Public Health Code</p> <p>Art. 1. - Substances or preparations listed in Section II of Table A of poisonous substances prior to the date of publication of this Order are listed on list I poisonous substances defined in Article R.5204 of the Public Health Code.</p>
	3C;31C;32C;33C	<p>Arrêté du 22 août 1990 portant application de l'article R.5181 pour le cannabis</p> <p>Art. 1er. - Sont autorisées au sens de l'article R.5181 du code susvisé [code de la santé publique], la culture, l'importation, l'exportation, l'utilisation industrielle et commerciale (fibres et graines) des variétés de Cannabis sativa L. répondant aux critères suivants:</p> <ul style="list-style-type: none"> - le poids de THC (tétrahydrocannabinols) de ces variétés par rapport au poids d'un échantillon porté à poids constant n'est pas supérieur à 0,30 p. 100 ; - la détermination du taux de tétrahydrocannabinols et la prise d'échantillons en vue de cette détermination sont effectuées selon la méthode unique prévue en annexe I. <p>Art. 2. - Les variétés autorisées sont les suivantes: Carmagnola; C.S.; Delta-Llosa; Delta-405; Fedora 19; Fedrina 74; Felina 34; Ferimon; Fibranova; Fibrimon 24; Fibrimon 56 and Futura.</p>

Date	Type/ID	Event
	4	<p>Art. 3. - Le directeur de la pharmacie et du médicament au ministère de la solidarité, de la santé et de la protection sociale, le directeur général de l'alimentation au ministère de l'agriculture et de la forêt et le directeur général de l'industrie au ministère de l'industrie et de l'aménagement du territoire sont chargés, chacun en ce qui le concerne, de l'exécution du présent arrêté, qui sera publié au Journal officiel de la République française.</p> <p><u>Décret n° 90-382 du 9 Mai</u></p> <p>Portant la création d'une cellule de coordination chargée du traitement du renseignement et de l'action contre les circuits financiers clandestins au ministère des finances (TRACFIN) complété par décret n°91-160 du 13 février 1991 qui prévoit le rattachement du service recevant les déclarations de soupçon des organismes financiers prévu par la loi du 12 juillet 1990 au chef de la cellule TRACFIN.</p>
	4	<p><u>Loi n°90-614 du 12 Juillet</u></p> <p>Relative à la participation des organismes financiers à la lutte contre le blanchiment des capitaux provenant du trafic de stupéfiants.</p> <p>Obligation pour les organismes financiers de dénoncer à TRACFIN les opérations financières qu'ils suspectent être le produit du trafic de stupéfiants.</p>
	3	<p><u>Loi n°90-1010 du 14 Novembre</u></p> <p>Portant adaptation de la législation française aux dispositions de l'article 5 de la convention des Nations Unies contre le trafic illicite de stupéfiants et de substances psychotropes, faite à Vienne 1988.</p> <p>Ce texte permet la mise en oeuvre en France des demandes des pays signataires de la convention pour: - la recherche et l'identification de l'objet d'une infraction de trafic de stupéfiants, des produits provenant de cette infraction et des moyens ayant permis sa commission; - la confiscation de ces objets, produits ou moyens - les mesures conservatoires permettant cette confiscation.</p>
1992	1;2;3	<p><u>Code de la Santé Publique, Article L627 du 7 Janvier</u></p> <p>Seront punis d'un emprisonnement de deux ans à dix ans et d'une amende de 5.000 F à 50.000.000 F, ou de l'une de ces deux peines seulement, ceux qui auront contrevenu aux dispositions des règlements d'administration publique prévus à l'article L. 626 et concernant les substances ou plantes vénéneuses classées comme stupéfiants par voie réglementaire. Lorsque le délit aura consisté dans l'importation, la fabrication, ou l'exportation illicite desdites substances ou plantes, la peine d'emprisonnement sera de dix à vingt ans.</p>

Date	Type/ID	Event
		<p>La tentative d'une des infractions réprimées par l'alinéa précédent sera punie comme le délit consommé. Il en sera de même de l'association ou de l'entente en vue de commettre ces infractions. Seront punis d'un emprisonnement de deux à dix ans et d'une amende de 5 000 F à 500 000 F ou de l'une de ces deux peines seulement ceux qui, par tout moyen frauduleux, auront facilité ou tenté de faciliter la justification mensongère de l'origine des ressources ou des biens de l'auteur de l'une des infractions mentionnées au premier alinéa du présent article ou ceux qui auront sciemment apporté leur concours à toute opération de placement, de dissimulation ou de conversion du produit d'une telle infraction.</p> <p>Les peines prévues aux trois alinéas précédents pourront être prononcées alors même que les divers actes qui constituent les éléments de l'infraction auront été accomplis dans des pays différents [*à l'étranger*].</p> <p>Seront également punis d'un emprisonnement de deux à dix ans et d'une amende de 5.000 F à 50.000.000 F, ou de l'une de ces deux peines seulement :</p> <p>1° Ceux qui auront facilité à autrui l'usage desdites substances ou plantes, à titre onéreux ou à titre gratuit, soit en procurant dans ce but un local, soit par tout autre moyen ;</p> <p>2° Ceux qui, au moyen d'ordonnances fictives ou d'ordonnances de complaisance, se seront fait délivrer ou auront tenté de se faire délivrer lesdites substances ou plantes ;</p> <p>3° Ceux qui, connaissant le caractère fictif ou de complaisance de ces ordonnances, auront, sur la présentation qui leur en aura été faite, délivré lesdites substances ou plantes.</p> <p>Lorsque l'usage desdites substances ou plantes aura été facilité à un ou des mineurs de moins de vingt et un ans [*dix-huit ans*] ou lorsque ces substances ou plantes leur auront été délivrées dans les conditions prévues au 3° ci-dessus, la peine d'emprisonnement sera de cinq à dix ans.</p> <p>Les tribunaux pourront, en outre, dans tous les cas prévus aux alinéas précédents, prononcer la peine de l'interdiction des droits civiques pendant une durée de cinq à dix ans.</p> <p>Ils pourront prononcer l'interdiction de séjour, pendant une durée de deux ans au moins et de cinq ans au plus, contre tout individu condamné en vertu du présent article. Ils pourront également prononcer le retrait du passeport ainsi que, pour une durée de trois ans au plus, la suspension du permis de conduire.</p> <p>Les dispositions de l'article 59 (alinéa 2) du Code de procédure pénale sont applicables aux locaux où l'on usera en société de stupéfiants et à ceux où seront fabriquées, transformées ou entreposées illicitement lesdites substances ou plantes.</p> <p>Les visites, perquisitions et saisies ne pourront se faire que pour la recherche et la constatation des délits prévus au présent article. Elles devront être précédées d'une autorisation écrite [*condition de forme*] du procureur de la République lorsqu'il s'agira de les effectuer dans une maison d'habitation ou un appartement, à moins qu'elles ne soient</p>

Date	Type/ID	Event
	6;7	<p>ordonnées par le juge d'instruction. Tout procès-verbal dressé pour un autre objet sera frappé de nullité.</p> <p><u>Décret de n° 92-590 du 29 Juin</u></p> <p>Relatif aux centres spécialisés de soins pour toxicomanes.</p> <p>Missions, fonctionnement et gestion administrative et financière des centres conventionnés spécialisés de soins aux toxicomanes.</p>
1993	6;7	<p><u>Circulaire interministérielle du 14 Janvier</u></p> <p>Relative à la mise en oeuvre des conventions départementales d'objectifs pour la prise en charge locale des toxicomanes placés sous main de justice, complétée par la note MILDT du 13 février 1999.</p> <p>Les conventions d'objectifs « Justice-Santé" sur les toxicomanies sont passées dans les départements entre les procureurs de la République et les autorités sanitaires et sociales représentées par les préfets. Elles organisent et financent l'orientation et la prise en charge sanitaire et sociale des justiciables consommateurs de drogues (alcool, médicaments détournés, drogues illicites). Les opérateurs financés sont essentiellement des centres de soins et de prévention, mais aussi des structures d'hébergement, d'insertion sociale ou d'action socio-éducative. Les justiciables peuvent être pris en charge à tous les stades du processus pénal: interpellations et alternatives aux poursuites; en cas de poursuites: mesures avant jugement, sanctions en milieu ouvert assorties d'une mesure de soin, interventions en prison ou à la sortie de prison, mesures éducatives pour mineurs. Ces conventions existent aujourd'hui dans 95 départements sur les 100 qui composent le territoire national.</p>
	3	<p><u>Arrête du 11 Mars</u></p> <p>Portant la création d'une mission nationale de contrôle des précurseurs chimiques (de drogues) au ministère chargé de l'industrie.</p> <p>La mission nationale de contrôle des précurseurs chimiques (MNCPC) est placée auprès du ministre chargé de l'industrie. Ses missions sont de contrôler le commerce licite, de sensibiliser les industries concernés, d'observer le développement du marché, de repérer les fraudes et de saisir les autorités compétentes.</p>
	1C;2C; 3C	<p><u>Code de la Santé Publique. Article R5181 du 7 Août 1993 au 5 Mars 1999</u></p> <p>Sont interdits la production, la mise sur le marché, l'emploi et l'usage :</p> <p>1° Du cannabis, de sa plante et de sa résine, des préparations qui en contiennent ou de celles qui sont obtenues à partir du cannabis, de sa plante ou de sa résine ;</p> <p>2° Des tétrahydrocannabinols, de leurs esters, éthers, sels ainsi que des sels des dérivés précités et de leurs préparations.</p>

Date	Type/ID	Event
		<p>Des dérogations aux dispositions énoncées ci-dessus peuvent être accordées par le directeur général de l'Agence du médicament aux fins de recherche et de contrôle ainsi que de fabrication de dérivés autorisés.</p> <p>Cependant, sur proposition du directeur général de l'Agence du médicament, les ministres chargés de la santé, de l'agriculture, de l'industrie et des douanes peuvent, par arrêté conjoint, autoriser la culture, l'importation, l'exportation et l'utilisation industrielle et commerciale de variétés de cannabis dépourvues de propriétés stupéfiantes.</p>
1994	4	<p><u>Arrêté du 20 Juillet</u></p> <p>Fixant l'organisation en sous-directions de la direction des affaires criminelles et des grâces et modifiant l'arrêté du 9 octobre 1964 relatif à l'organisation des directions et services du ministère de la justice.</p> <p>Création d'une sous direction des affaires économiques et financières et de lutte contre la criminalité organisée au sein de la Direction des affaires criminelles et des grâces (DACG) du Ministère de la Justice.</p>
1995	5	<p><u>Décret n°95-255 du 7 Mars</u></p> <p>Modifiant le décret n°72-200 du 13 mars 1972 réglementant le commerce et l'importation des seringues et des aiguilles destinées aux injections parentérales en vue de lutter contre l'extension de la toxicomanie.</p> <p>Réglemente le commerce et l'importation par les officines des seringues et des aiguilles destinées aux injections parentérales (pérenise l'autorisation provisoire de vente libre donnée par le décret du 13 mai 1987 modifié par le décret du 11 août 1989). Autorise la délivrance de seringues à titre gratuit par les associations de réduction des risques.</p>
	5	<p><u>Arrêté du 7 Mars</u></p> <p>Relatif aux conditions de mise en oeuvre des actions de prévention facilitant la mise en circulation, hors circuit officinal, des seringues stériles.</p>
	6	<p><u>Circulaire DGS/SP3/95 n°29 du 31 Mars</u></p> <p>Relative au traitement de substitution de la toxicomanie pour les toxicomanes dépendants aux opiacés: détermination du cadre de mise en oeuvre des traitements de substitution (méthadone et buprénorphine-haut-dosage). Mise en place d'un comité de suivi départemental pour les traitements de substitution.</p>
	5	<p><u>Circulaire DGS/DS n°37 du 12 Avril</u></p> <p>Relative aux mesures de prévention des risques infectieux chez les usagers de drogues par voie intraveineuse et à l'accessibilité au matériel d'injection stérile.</p>

Date	Type/ID	Event
	1;2;3;5;6; 7	<p><u>Arrêté du 9 Mai</u></p> <p>Portant la création de la mission de lutte anti-drogue au ministère de l'intérieur.</p> <p>Mission de lutte anti-drogue (MiLAD) au sein du ministère de l'intérieur. Cette mission coordonne la politique des directions et services du ministère de l'intérieur dans le domaine de la drogue et participe à la définition et à l'adaptation de cette politique.</p>
1996	1;2;3;5;6; 7	<p><u>Article 1 du Loi n° 87-1157 du 31 décembre 1987 relative à la lutte contre le trafic de stupéfiants et modifiant certaines dispositions du code pénal – version du 30 Janvier</u></p> <p>I. - Il est créé un Institut national de l'enseignement, de la recherche, de l'information et de la prévention sur les toxicomanies. Cet institut est un établissement public à caractère administratif, doté de la personnalité morale et de l'autonomie financière. Placé sous la tutelle du Premier ministre, il est dirigé par un conseil d'administration assisté d'un conseil scientifique. L'institut a pour mission de coordonner toutes les actions relevant de l'Etat et de poursuivre toutes recherches utiles, tant fondamentales que cliniques, dans le domaine de la pharmacodépendance et de la toxicomanie.</p> <p>II. - La mission de coordination de l'Etat assurée par l'institut concernera :</p> <ol style="list-style-type: none"> La formation des personnels mis en contact, selon des modalités diverses, avec les toxicomanes ; La recherche scientifique sur les différents éléments qui constituent les facteurs profonds en jeu dans les causes, la prévention ou le traitement des toxicomanies ; L'information, en exploitant tous les moyens nécessaires de réponse adéquate aux préoccupations des particuliers, des collectivités et des organismes publics ou privés portant sur tout ce qui se trouve impliqué au niveau théorique ou pratique dans le phénomène toxicomanie ; L'étude des conditions d'application de la législation relative aux stupéfiants et la définition de toutes propositions à cet égard. <p>III. - La mission de recherche assurée par l'institut a les objectifs suivants :</p> <ol style="list-style-type: none"> Définir les mécanismes d'action des drogues entraînant une dépendance, c'est-à-dire un comportement orienté vers la recherche et la consommation d'une drogue en quantité nuisible à la santé du consommateur et à la société ; Définir les antidotes aux effets nocifs des drogues entraînant la dépendance ainsi que les meilleures méthodes pour traiter et réhabiliter les toxicomanes et les pharmacodépendants ; Définir à l'aide d'enquêtes épidémiologiques la distribution de la consommation des principales drogues entraînant la dépendance, suivant les modes statistiques de l'épidémiologie contemporaine ; Définir sur les bases de ces données scientifiques un enseignement destiné à la formation des personnels chargés de la prévention, du

Date	Type/ID	Event
		<p>traitement et de la réhabilitation des sujets pharmacodépendants et toxicomanes.</p> <p>IV. - L'institut établit chaque année un rapport sur :</p> <p>a) L'activité des institutions de prévention publiques ou subventionnées par des collectivités publiques ;</p> <p>b) Le bilan d'application des articles L. 628-1 à L. 628-6 du code de la santé publique qui régissent la procédure d'injonction thérapeutique ;</p> <p>c) Les enquêtes épidémiologiques de la consommation des principales drogues entraînant la dépendance, plus particulièrement dans les populations vulnérables</p> <p>d) Les résultats des divers travaux scientifiques touchant aux objectifs de l'institut et publiés dans la presse scientifique médicale, tant en France qu'à l'étranger.</p> <p>Ce rapport sera déposé sur le bureau des assemblées parlementaires avant la fin du premier trimestre.</p>
3		<p><u>Loi n°96-359 du 29 Avril</u></p> <p>Relative au trafic de stupéfiants en haute mer et portant adaptation de la législation française à l'article 17 de la convention des Nations Unies [1988]</p> <p>Dispositions relatives à la recherche, à la poursuite et au jugement des infractions de trafic de stupéfiants en haute-mer: en cas de motif raisonnable de soupçonner un trafic de stupéfiants sur un navire hors des eaux territoriales françaises, possibilité donnée aux autorités françaises de procéder à certaines mesures de contrôle et de coercition, conformément aux termes de la convention de Vienne du 20 décembre 1988.</p>
4		<p><u>Loi n°96-392 du 13 Mai</u></p> <p>Relative à la lutte contre le blanchiment et le trafic de stupéfiants et à la coopération internationale en matière de saisie et de confiscation des profits du crime.</p> <p>Outre l'introduction de nouvelles dispositions pénales dans le nouveau Code pénal relative au blanchiment et au trafic de stupéfiants (cf articles 222-38 : blanchiment des produits du trafic de stupéfiants, articles 324-1 à 324-9 : infraction générale de blanchiment, article 222-39-1 : "proxénétisme de la drogue"), ce texte permet la mise en œuvre en France des demandes des pays signataires de la convention du Conseil de l'Europe relative au blanchiment, au dépistage, à la saisie et à la confiscation des produits du crime, faite à Strasbourg le 8 novembre 1990.</p>
32		<p><u>Loi n° 96-542 du 19 Juin</u></p> <p>Relative au contrôle de la fabrication et du commerce de certaines substances susceptibles d'être utilisées pour la fabrication illicite de stupéfiants ou de substances psychotropes.</p>

Date	Type/ID	Event
		<p>Instauration d'un système de marquage, obligation de déclarer au ministère de l'industrie toute transaction suspecte, possibilités et modalités de contrôle.</p> <p><i>[In English]</i></p> <p>The production and sale of "precursor" products that may end up being used to produce narcotics has been controlled since the introduction of this law.</p>
	32	<p><u>Décret n°96-1060 du 05 Décembre</u></p> <p>Fixant la liste des précurseurs chimiques de stupéfiants et de substances psychotropes soumis à contrôle.</p> <p>Ce décret fixe la liste des précurseurs chimiques de stupéfiants et psychotropes soumis au contrôle, répartis en 3 catégories selon le degré de contrôle.</p>
	32	<p><u>Décret n° 96-1061 du 5 Décembre</u></p> <p>Relatif au contrôle de la fabrication et du commerce de certaines substances susceptibles d'être utilisées pour la fabrication illicite de stupéfiants ou de substances psychotropes.</p> <p>(Procédures de contrôle spécifiques à chaque catégorie)</p>
1998	1;2;3;5;6; 7	<p>Creation of a new national anti-drug coordination body – Mission for the fight against drug addiction (Mission Interministerielle de lutte contre la drogue et la toxicomanie. – MILDT) to assess the current situation and propose new measures.</p>
1999	32;33	<p><u>Code de la Santé Publique, articles R. 5150 à R. 5188 du 1 Avril</u></p> <p>Réglementation concernant la production, la mise sur le marché et l'emploi des substances notamment stupéfiantes et psychotropes (dans les deux cas, il s'agit d'un régime juridique de prohibition, sauf autorisation expresse) et des médicaments en contenant.</p>
	33	<p><u>Code de la Santé Publique, Articles R. 5190 à R. 5219 du 1 Avril</u></p> <p>Réglementation concernant la prescription et la délivrance des médicaments contenant des substances stupéfiantes ou psychotropes. Trois classements sont possibles: médicaments stupéfiants, en liste I et en liste II. Des exonérations à ces classements sont possibles.</p>
	1	<p><u>Code de la Santé Publique, Articles R. 5219-1 à R. 5219-15 du 1 Avril</u></p> <p>Cette partie du Code de la santé publique définit le terme de "pharmacodépendance" et décrit l'organisation générale permettant l'évaluation et le contrôle de la pharmacodépendance. Cette organisation comprend: - l'Agence française de sécurité sanitaire des produits de santé</p>

Date	Type/ID	Event
	1C;2C; 31C;32C; 33C	<p>(AFSSAPS), - la Commission nationale de contrôle des stupéfiants, - les Centres d'évaluation et d'information sur la pharmacodépendance (CEIP), - les professionnels de santé.</p> <p><u>Code de la Santé Publique, Article R5181 du 5 Mars</u></p> <p>Sont interdits la production, la mise sur le marché, l'emploi et l'usage :</p> <p>1° Du cannabis, de sa plante et de sa résine, des préparations qui en contiennent ou de celles qui sont obtenues à partir du cannabis, de sa plante ou de sa résine ;</p> <p>2° Des tétrahydrocannabinols, de leurs esters, éthers, sels ainsi que des sels des dérivés précités et de leurs préparations.</p> <p>Des dérogations aux dispositions énoncées ci-dessus peuvent être accordées par le directeur général de l'Agence française de sécurité sanitaire des produits de santé aux fins de recherche et de contrôle ainsi que de fabrication de dérivés autorisés.</p> <p>Cependant, sur proposition du directeur général de l'Agence française de sécurité sanitaire des produits de santé, les ministres chargés de la santé, de l'agriculture, de l'industrie et des douanes peuvent, par arrêté conjoint, autoriser la culture, l'importation, l'exportation et l'utilisation industrielle et commerciale de variétés de cannabis dépourvues de propriétés stupéifiantes.</p>
6		<p><u>Circulaire du ministère de la justice du 17 Juin</u></p> <p>Relative aux réponses judiciaires aux toxicomanies.</p> <p>Orientations du ministre de la justice relatives aux réponses judiciaires aux toxicomanies. Les objectifs de santé publique sont désormais prioritaires. Les parquets sont invités à apporter des réponses sanitaires et/ou sociales dans tous les cas où les justiciables consomment des produits psychoactifs (stupéfiants, alcool, médicaments détournés). En particulier, les alternatives sanitaires ou sociales aux poursuites judiciaires doivent être mises en oeuvre à l'égard des usagers de stupéfiants interpellés. L'incarcération doit être évitée. Si une condamnation pénale est prononcée, elle doit, chaque fois que nécessaire, être accompagnée d'une obligation de soins. Les mineurs sont également concernés par ces instructions. En prison enfin, une prise en charge sanitaire et sociale doit être assurée et des mesures d'aménagement de peine doivent être favorisées afin d'assurer un accompagnement efficace à la libération (libération conditionnelle notamment).</p> <p><i>[In English]</i></p> <p>The circular of June 17, 1999 called upon French public prosecutors to "develop more diverse legal responses" to deal with arrested drug users at all stages of the criminal proceedings, with prison sentences being reserved for extreme cases and used as a last resort. Subsequently, health alternatives to prosecution were strongly encouraged and better executed:</p>

Date	Type/ID	Event
		<p>court-ordered treatments for dependent drug users, a caution for occasional users (particularly users of cannabis), or dismissal of the case with referral to an addictology health/social care centre for other types of drug-related behaviours.</p>
6;7		<p><u>Loi n°99-505 du 18 Juin</u></p> <p>Portant diverses mesures relatives à la sécurité routière</p> <p>Cette loi dont les dispositions sont codifiées à l'article L 235-1 du Code de la route, rend obligatoire le dépistage de stupéfiants chez tous les conducteurs impliqués dans un accident mortel de la circulation. Si le conducteur refuse le dépistage, il encourt une sanction pénale. Transmis au procureur de la République, puis à un laboratoire de recherche scientifique, l'objectif de cette loi est de permettre une étude épidémiologique et des recherches sur les effets des stupéfiants dans la survenance des accidents. En revanche, cette loi ne sanctionne pas spécifiquement la conduite sous l'empire de stupéfiants qui demeure punissable sur le fondement de la interdiction générale de l'usage de stupéfiants prévue dans la loi du 31 décembre 1970.</p>
3		<p><u>Code de Procédure Pénale, articles 706-26 à 706-33 du 23 Juin</u></p> <p>"de la poursuite, de l'instruction et du jugement des infractions en matière de trafic de stupéfiants" Règles de procédure pénale dérogatoires au droit commun (plus sévères) pour la conduite d'enquêtes (garde à vue, perquisitions, saisies, mesures conservatoires sur les biens etc...) et le jugement des infractions de trafic de stupéfiants et d'association de malfaiteurs.</p>
5;6;7		<p><u>Décret n°99-808 du 15 Septembre</u></p> <p>Relatif au comité interministériel de lutte contre la drogue et la toxicomanie et de prévention des dépendances et à la mission interministérielle de lutte contre la drogue et la toxicomanie.</p> <p>Définit les missions et la composition du comité interministériel de lutte contre la drogue et la toxicomanie et de prévention des dépendances (Premier ministre, 17 ministres). Définit les missions de la mission interministérielle de lutte contre la drogue et la toxicomanie (MILDT.)</p>

Date	Type/ID	Event
	5;6	<p><u>Arrêté du 20 Septembre</u></p> <p>Relatif à l'application de la réglementation des stupéfiants à certains médicaments à base de buprénorphine.</p> <p>Ce texte prévoit l'application de la réglementation des stupéfiants (prescription et délivrance) à certains médicaments à base de buprénorphine (Subutex) non classés dans la liste des stupéfiants. Délais maximum de délivrance: 28 jours, ordonnances sécurisées.</p>
	5;6	<p><u>Arrêté du 20 Septembre</u></p> <p>Relatif au fractionnement de la délivrance de certains médicaments à base de buprénorphine.</p> <p>Modalités de délivrance des médicaments à base de buprénorphine: ces médicaments ne peuvent être délivrés que par fraction de 7 jours de traitement.</p>
2000	5;6	<p><u>Arrêté du 8 Février</u></p> <p>Relatif au fractionnement de la délivrance des médicaments à base de méthadone.</p> <p>Cadre de délivrance des médicaments à base de méthadone: ils ne peuvent être délivrés que par fraction de 7 jours de traitement.</p>
	5;6	<p><u>Arrêté du 8 Février</u></p> <p>Modifiant l'arrêté du 20 septembre 1999 fixant la liste des médicaments classés comme stupéfiants dont la durée maximale de prescription est réduite à 14 jours ou à 7 jours.</p> <p>Ce texte prévoit que, pour la prescription de la méthadone, on passe d'un délai maximum de 7 jours à un délai de 14 jours.</p>
	5	<p><u>Circulaire DGS-DS n°2000-158 du 13 Mars</u></p> <p>Relative aux orientations de la politique de réduction des risques chez les usagers de drogues pour 2000.</p> <p>Cadre de renforcement et d'implantation de programmes d'échanges de seringues et de boutiques d'accueil.</p>
	6	<p><u>Code de la Santé Publique, Articles L.3411-1 à L.3414-1 du 15 Juin</u></p> <p>Dispositions sanitaires décrivant les modalités de surveillance et de prise en charge des usagers de drogues illicites. Notamment, principe de l'anonymat et de la gratuité des soins.</p>
	1;2;3	<p>Code de la Santé Publique, Articles L.3421-1 à L. 3424-5 du 15 Juin</p>

Date	Type/ID	Event
		<p>Dispositions pénales et injonction thérapeutique en matière d'usage illicite de stupéfiants. Ces textes traitent notamment des infractions d'usage, de provocation à l'usage ou au trafic, de présentation de ces infractions sous un jour favorable. Ils traitent également des cas de fermeture administrative d'établissements où l'infraction d'usage ou de trafic a été commise.</p> <p>Article L3421-1</p> <p>L'usage illicite de l'une des substances ou plantes classées comme stupéfiants est puni d'un an d'emprisonnement et de 25 000 F d'amende.</p> <p>Version en vigueur du 1 janvier 2002 au 7 mars 2007</p> <p>L'usage illicite de l'une des substances ou plantes classées comme stupéfiants est puni d'un an d'emprisonnement et de 3750 euros d'amende. Les personnes coupables de ce délit encourent également, à titre de peine complémentaire, l'obligation d'accomplir un stage de sensibilisation aux dangers de l'usage de produits stupéfiants, selon les modalités fixées à l'article 131-35-1 du code pénal.</p> <p>Si l'infraction est commise dans l'exercice ou à l'occasion de l'exercice de ses fonctions par une personne dépositaire de l'autorité publique ou chargée d'une mission de service public, ou par le personnel d'une entreprise de transport terrestre, maritime ou aérien, de marchandises ou de voyageurs exerçant des fonctions mettant en cause la sécurité du transport dont la liste est fixée par décret en Conseil d'Etat, les peines sont portées à cinq ans d'emprisonnement et à 75 000 euros d'amende. Pour l'application du présent alinéa, sont assimilés au personnel d'une entreprise de transport les travailleurs mis à la disposition de l'entreprise de transport par une entreprise extérieure.</p> <p><i>[In English]</i></p> <p>The illegal use of any substance or plant classified as a narcotic is an offence punishable by sentences of up to one year in prison and a fine of €3,750 (Article L.3421-1 of the French Public Health Code - CSP). The sentences incurred may be up to five years in prison and a fine of €75,000 when the offence is committed by a public authority, a person responsible for public services or personnel in a company carrying out duties calling into question transport safety. Persons prosecuted for these offences also face additional penalties such as a compulsory awareness course on the dangers of drug and alcohol use, in accordance with the provisions set forth in Article 131-35-1 of the French Penal Code.</p> <p>Aside from the sentences issued by the courts in compliance with Article L.3421-1 of the CSP, an awareness course may also be proposed by the public prosecutors as an alternative to prosecution or simplified procedure (fixed penalty notice, criminal order). In this context, this measure is particularly intended for occasional narcotics users who do not appear to present health or social integration problems. The course applies to all individuals aged over 13 years. When circumstances show that the</p>

Date	Type/ID	Event
	1;2;3;6	<p>respondent requires health care, the legal authorities may require them to undergo court-ordered treatment (Article L.3413- 1 of the CSP). Public action is not taken once it has been established that the individual has undergone court-ordered treatment, following the events of which s/he was accused (Article L.3423-1 of the CSP).</p> <p><u>Code de la Santé Publique-Article L3413-1 (injonction thérapeutique)</u></p> <p>Chaque fois que le procureur de la République, par application de l'article L. 3423-1, enjoint à une personne ayant fait un usage illicite de stupéfiants, de suivre une cure de désintoxication ou de se placer sous surveillance médicale, il en informe l'autorité sanitaire compétente. Celle-ci fait procéder à un examen médical et à une enquête sur la vie familiale, professionnelle et sociale de l'intéressé.</p>
	1;2;3;5;6	<p><u>Code de la Santé Publique, Articles L.5132-1 à L 5132-9 du 15 Juin</u></p> <p>Ensemble des dispositions législatives déterminant les procédures de classement et de contrôle des substances et préparations vénéneuses (4 catégories, dont les substances stupéfiantes et psychotropes).</p>
	1;2;3;6;7	<p><u>Code de la Santé Publique, Article L.5432-1 du 15 Juin</u></p> <p>Infraction pénale sanctionnant le non-respect des dispositions relatives au contrôle des substances vénéneuses. Rappel: les substances vénéneuses sont composées de 4 catégories, dont notamment les substances stupéfiantes et les substances psychotropes.</p>
	1	<p><u>Code de la Santé Publique, Article L3411-1 du 22 Juin</u></p> <p>Une personne usant d'une façon illicite de substances ou plantes classées comme stupéfiants, est placée sous la surveillance de l'autorité sanitaire.</p>
	1	<p><u>Code de la Santé Publique, Article L3421-1 du 22 Juin</u></p> <p>L'usage illicite de l'une des substances ou plantes classées comme stupéfiants est puni d'un an d'emprisonnement et de 25 000 F d'amende.</p>
	6;7	<p><u>Arrêté du 21 Juillet</u></p> <p>Relatif à l'organisation de la direction générale de la santé en bureaux. La sous-direction de la santé et de la société est composée de 4 bureaux, parmi eux le bureau des pratiques addictives.</p>
2001	6;7	<p><u>Décret n°2001-751 du 27 Août</u></p> <p>Relatif à la recherche de stupéfiants pratiquée sur les conducteurs impliqués dans un accident mortel de la circulation routière.</p> <p>Ce texte organise la procédure de dépistage des principales familles de stupéfiants (opiacées, amphétamines, cocaïne, cannabis) chez les conducteurs impliqués dans un accident mortel de la circulation et</p>

Date	Type/ID	Event
	4	<p>l'analyse épidémiologique des données ainsi recueillies (type de stupéfiants, dosage, médicaments associés, rôle dans la survenue de l'accident). Dans un délai de 2 ans, le gouvernement sera en possession de connaissances scientifiques sérieuses lui permettant d'apprécier la nécessité de créer une infraction spécifique de conduite sous l'empire de stupéfiants.</p> <p><u>Loi n°2001-1062 du 15 Novembre</u></p> <p>Relative à la sécurité quotidienne - lutte contre le terrorisme.</p> <p>Ce texte est pris pour une période limitée: jusqu'au 31 décembre 2003. Il accroît les pouvoirs de contrainte des autorités judiciaires et policières afin de mieux lutter contre certaines infractions (dont le terrorisme et le trafic de stupéfiants). Ainsi, sous le contrôle du parquet, dans des lieux et sur des périodes de temps limitées par celui-ci, les services de police pourront procéder à des fouilles de véhicule sur la voie publique. En outre, sur autorisation d'un juge, les services de police pourront procéder à des perquisitions domiciliaires et à des saisies sans l'assentiment de la personne concernée, en dehors des cas de flagrant délit ou de commission rogatoire d'un juge d'instruction.</p>
2002	6;7	<p><u>Loi n°2002-2 du 2 Janvier</u></p> <p>Rénovant l'action sociale et médico-sociale.</p> <p>La loi du 2 janvier 2002 crée un nouveau type de structure sur le plan administratif et financier: "les centres de soins, d'accompagnement et de prévention en addictologie". Cette réforme donne une base légale administrative et financière à la politique publique qui encourage la disparition des cloisonnements entre les différentes structures de soins selon le produits (drogues illicites, tabac, alcool, médicaments détournés). Désormais, ces structures seront financées par le budget médico-social de la sécurité sociale (et non plus par le budget de l'Etat, comme le prévoyait la loi du 31 décembre 1970 relative à la toxicomanie).</p>
	1	<p><u>Code de la Santé Publique, Article L3421-1 du 1 Janvier</u></p> <p>L'usage illicite de l'une des substances ou plantes classées comme stupéfiants est puni d'un an d'emprisonnement et de 3750 euros d'amende.</p>
	3	<p><u>Code Penal, Article 222-34 du 1 Janvier</u></p> <p>Le fait de diriger ou d'organiser un groupement ayant pour objet la production, la fabrication, l'importation, l'exportation, le transport, la détention, l'offre, la cession, l'acquisition ou l'emploi illicites de stupéfiants est puni de la réclusion criminelle à perpétuité et de 7 500 000 euros d'amende.</p> <p>Les deux premiers alinéas de l'article 132-23 relatif à la période de sûreté sont applicables à l'infraction prévue par le présent article.</p>

Date	Type/ID	Event
2003	7	<p><u>Loi n° 2003-87 du 3 Février</u></p> <p>Relative à la conduite sous l'influence de substances ou plantes classées comme stupéfiants</p> <p>Art. L. 235-1. - I. - Toute personne qui conduit un véhicule ou qui accompagne un élève conducteur alors qu'il résulte d'une analyse sanguine qu'elle a fait usage de substances ou plantes classées comme stupéfiants est punie de deux ans d'emprisonnement et de 4 500 EUR d'amende</p> <p>II. - Toute personne coupable des délits prévus par le présent article encourt également les peines complémentaires suivantes:</p> <p>1° La suspension pour une durée de trois ans au plus du permis de conduire ; cette suspension peut être limitée à la conduite en dehors de l'activité professionnelle; elle ne peut être assortie du sursis, même partiellement;</p> <p>2° L'annulation du permis de conduire avec interdiction de solliciter la délivrance d'un nouveau permis pendant trois ans au plus;</p> <p>3° La peine de travail d'intérêt général selon les modalités prévues à l'article 131-8 du code pénal et selon les conditions prévues aux articles 131-22 à 131-24 du même code et à l'article 20-5 de l'ordonnance n° 45-174 du 2 février 1945 relative à l'enfance délinquante;</p> <p>4° La peine de jours-amende dans les conditions fixées aux articles 131-5 et 131-25 du code pénal.</p> <p>III. - L'immobilisation du véhicule peut être prescrite dans les conditions prévues aux articles L. 325-1 à L. 325-3.</p> <p>IV. - Les délits prévus par le présent article donnent lieu de plein droit à la réduction de la moitié du nombre de points initial du permis de conduire.</p> <p><u>Décret n° 2003-293 du 31 Mars</u></p> <p>Relatif à la sécurité routière et modifiant le code de procédure pénale et le code de la route</p>
2004	3	<p><u>Code de la Santé Publique, Article R5132-74 du 8 Août 2004</u></p> <p>Sont interdits, à moins d'autorisation expresse, la production, la mise sur le marché, l'emploi et, d'une manière générale, les opérations agricoles, artisanales, commerciales et industrielles relatifs aux substances ou préparations classées comme stupéfiantes, sur proposition du directeur général de l'Agence française de sécurité sanitaire des produits de santé, après avis de la Commission nationale des stupéfiants et des psychotropes, par arrêté du ministre chargé de la santé.</p> <p>Lorsque ces substances ou préparations sont utilisées en médecine vétérinaire, le directeur général de l'Agence française de sécurité sanitaire</p>

Date	Type/ID	Event
	31C;32C; 33C	<p>des produits de santé sollicite, préalablement à sa proposition, l'avis du directeur général de l'Agence française de sécurité sanitaire des aliments.</p> <p><u>Code de la Santé Publique, Article R5132-86 du 8 Août</u></p> <p>Sont interdits la production, la mise sur le marché, l'emploi et l'usage:</p> <p>1° Du cannabis, de sa plante et de sa résine, des préparations qui en contiennent ou de celles qui sont obtenues à partir du cannabis, de sa plante ou de sa résine;</p> <p>2° Des tétrahydrocannabinols, à l'exception du delta 9-tétrahydrocannabinol de synthèse, de leurs esters, éthers, sels ainsi que des sels des dérivés précités et de leurs préparations.</p> <p>Des dérogations aux dispositions énoncées ci-dessus peuvent être accordées aux fins de recherche et de contrôle ainsi que de fabrication de dérivés autorisés par le directeur général de l'Agence française de sécurité sanitaire des produits de santé.</p> <p>La culture, l'importation, l'exportation et l'utilisation industrielle et commerciale de variétés de cannabis dépourvues de propriétés stupéfiantes peuvent être autorisées, sur proposition du directeur général de l'agence, par arrêté des ministres chargés de l'agriculture, des douanes, de l'industrie et de la santé.</p>
	31C;32C; 33C	<p>Arrêté du 22 août 1990 portant application de l'article R. 5132-86 du code de la santé publique pour le cannabis [Version consolidée au 08 août 2004]</p> <p>Au sens de l'article R. 5181 du code susvisé [code de la santé publique], sont autorisées la culture, l'importation, l'exportation et l'utilisation industrielle et commerciale (fibres et graines) des variétés de Cannabis sativa L. répondant aux critères suivants :</p> <ul style="list-style-type: none"> -la teneur en delta-9-tétrahydrocannabinol de ces variétés n'est pas supérieure à 0,20 % ; -la détermination de la teneur en delta-9-tétrahydrocannabinol et la prise d'échantillons en vue de cette détermination sont effectuées selon la méthode communautaire prévue en annexe. <p>Les demandes d'inclusion d'une variété de chanvre dans la liste des variétés de Cannabis sativa L. figurant à l'article 2 doivent être accompagnées d'un rapport indiquant les résultats des analyses effectuées conformément à la procédure B de la méthode décrite à l'annexe du présent arrêté ainsi que d'une fiche descriptive de la variété en question.</p> <p>Les variétés autorisées sont les suivantes: Carmagnola; C.S. ; Delta-Llosa ; Delta-405 ; Dioïca 88 ; Fedora 17 ; Fedora 19 ; Fedrina 74 ; Felina 32 ; Felina 34 ; Ferimon ; Fibranova ; Fibrimon 24 ; Fibrimon 56 ; Futura ; Futura 75 ; Epsilon 68 ; Santhica 23 ; Santhica 27.</p> <p>Article 3</p>

Date	Type/ID	Event
		<p>Le directeur de la pharmacie et du médicament au ministère de la solidarité, de la santé et de la protection sociale, le directeur général de l'alimentation au ministère de l'agriculture et de la forêt et le directeur général de l'industrie au ministère de l'industrie et de l'aménagement du territoire sont chargés, chacun en ce qui le concerne, de l'exécution du présent arrêté, qui sera publié au Journal officiel de la République française.</p>
7		<p><u>Code de l'éducation, Article L312-18 du 11 Août</u></p> <p>Une information est délivrée sur les conséquences de la consommation de drogues sur la santé, notamment concernant les effets neuropsychiques et comportementaux du cannabis, dans les collèges et les lycées, à raison d'au moins une séance annuelle, par groupes d'âge homogène. Ces séances pourront associer les personnels contribuant à la mission de santé scolaire ainsi que d'autres intervenants extérieurs.</p>
5		<p>Loi n° 2004-809 du 13 août 2004 relative aux libertés et responsabilités locales – Art. 71. – Modifié article L3121-3; L3121-4 et L 3121-5.</p> <p>Code de la Santé Publique, Article L3121-3 du 11 août La définition de la politique de réduction des risques en direction des usagers de drogue relève de l'Etat.</p> <p>Code de la Santé Publique, Article L3121-4 du 11 août La politique de réduction des risques en direction des usagers de drogue vise à prévenir la transmission des infections, la mortalité par surdose par injection de drogue intraveineuse et les dommages sociaux et psychologiques liés à la toxicomanie par des substances classées comme stupéfiants.</p> <p>Code de la Santé Publique, Article L3121-5 du 11 août Les centres d'accueil et d'accompagnement à la réduction des risques pour usagers de drogue relèvent du 9° du I de l'article L. 312-1 du code de l'action sociale et des familles et concourent, avec les autres dispositifs, à la politique de réduction des risques. Leurs missions sont définies par décret en Conseil d'Etat.</p> <p>Les dépenses afférentes aux missions des centres visés par le présent article sont prises en charge par l'Etat, sans préjudice d'autres participations, notamment des collectivités territoriales.</p> <p>Les actions de réduction des risques sont conduites selon les orientations définies par un document national de référence approuvé par décret.</p>

Date	Type/ID	Event
	5	<p>Les personnes accueillies dans les centres d'accueil et d'accompagnement à la réduction des risques pour usagers de drogue bénéficient d'une prise en charge anonyme et gratuite.</p> <p><i>[In English]</i></p> <p>The harm reduction policy for drug users is the responsibility of the state (article L3121-3 of the French Public Health Code modified by law n°2004-809 of August 13, 2004 - art. 71). This harm reduction policy seeks to prevent the spread of infectious diseases and death by overdose because of intravenous injection and the social and psychological damage caused by the use of drugs classified as narcotics (article L3121-4 of the French Public Health Code modified by law n°2004-809 of August 13, 2004 - art. 71). The law of August 9, 2004 which set up the "Harm reduction support centres for drug users" (CAARUDs) states that along with the numerous other schemes and measures, CAARUDs should be used to further improve the harm reduction policy (article L3121-5 of the Public Health Code). Thus, the "Harm reduction and support centres for drug users" receive both individuals and groups, in addition to providing tailored advice and information for drug users. They also provide support for drug users in obtaining access to treatment, which includes hygiene systems and access to basic emergency care, referral to specialised or general treatment systems, encouragement to undergo screening for transmissible infections, support for users in exercising their rights and gaining access to housing and professional reintegration, the availability of infection prevention equipment, and localised intervention outside the centre with a view to establishing contact with users. CAARUDs provide social mediation to ensure good integration in their neighbourhood and prevent the public disturbances related to drug use.</p> <p><u>Code de la Santé Publique, Article R3121-33-1 du 19 Décembre</u></p> <p>Les centres d'accueil et d'accompagnement à la réduction des risques pour usagers de drogues assurent :</p> <p>1° L'accueil collectif et individuel, l'information et le conseil personnalisé pour usagers de drogues ;</p> <p>2° Le soutien aux usagers dans l'accès aux soins qui comprend :</p> <p>a) L'aide à l'hygiène et l'accès aux soins de première nécessité, proposés de préférence sur place ;</p> <p>b) L'orientation vers le système de soins spécialisés ou de droit commun ;</p> <p>c) L'incitation au dépistage des infections transmissibles ;</p> <p>3° Le soutien aux usagers dans l'accès aux droits, l'accès au logement et à l'insertion ou la réinsertion professionnelle ;</p> <p>4° La mise à disposition de matériel de prévention des infections ;</p>

Date	Type/ID	Event
		<p>5° L'intervention de proximité à l'extérieur du centre, en vue d'établir un contact avec les usagers.</p> <p>Ils développent des actions de médiation sociale en vue de s'assurer une bonne intégration dans le quartier et de prévenir les nuisances liées à l'usage de drogues.</p>
2005	7	<p><i>Guide on preventing addictive behaviour in schools.</i></p> <p>It introduces the principle of a prevention programme lasting from the last year of primary school to the last year of secondary school. This guide was published under the auspices of the French Department of National Education and the MILDT.</p>
2007	3	<p><u>Code de la Santé Publique, Article R5132-74 du 7 Février</u></p> <p>Sont interdits, à moins d'autorisation expresse, la production, la fabrication, le transport, l'importation, l'exportation, la détention, l'offre, la cession, l'acquisition ou l'emploi et, d'une manière générale, les opérations agricoles, artisanales, commerciales et industrielles relatifs aux substances ou préparations et plantes ou parties de plantes classées comme stupéfiants, sur proposition du directeur général de l'Agence française de sécurité sanitaire des produits de santé, après avis de la Commission nationale des stupéfiants et des psychotropes, par arrêté du ministre chargé de la santé.</p> <p>Lorsque ces substances ou préparations et ces plantes ou parties de plantes sont utilisées en médecine vétérinaire, le directeur général de l'Agence française de sécurité sanitaire des produits de santé sollicite, préalablement à sa proposition, l'avis du directeur général de l'Agence française de sécurité sanitaire des aliments.</p> <p>1C;2C; 31C;32C; 33C</p> <p><u>Code de la Santé Publique, Article R5132-86 du 7 Février</u></p> <p>Sont interdits la production, la fabrication, le transport, l'importation, l'exportation, la détention, l'offre, la cession, l'acquisition ou l'emploi :</p> <p>1° Du cannabis, de sa plante et de sa résine, des produits qui en contiennent ou de ceux qui sont obtenus à partir du cannabis, de sa plante ou de sa résine;</p> <p>2° Des tétrahydrocannabinols, à l'exception du delta 9-tétrahydrocannabinol, de leurs esters, éthers, sels ainsi que des sels des dérivés précités et de produits qui en contiennent.</p> <p>Des dérogations aux dispositions énoncées ci-dessus peuvent être accordées aux fins de recherche et de contrôle ainsi que de fabrication de dérivés autorisés par le directeur général de l'Agence française de sécurité sanitaire des produits de santé.</p> <p>La culture, l'importation, l'exportation et l'utilisation industrielle et commerciale de variétés de cannabis dépourvues de propriétés stupéfiantes ou de produits contenant de telles variétés peuvent être autorisées, sur proposition du directeur général de l'agence, par arrêté des ministres chargés de l'agriculture, des douanes, de l'industrie et de la santé.</p>

Date	Type/ID	Event
	1	<p><u>Code de la Santé Publique, Article L3421-1 du 7 Mars</u></p> <p>L'usage illicite de l'une des substances ou plantes classées comme stupéfiants est puni d'un an d'emprisonnement et de 3750 euros d'amende.</p> <p>Les personnes coupables de ce délit encourent également, à titre de peine complémentaire, l'obligation d'accomplir un stage de sensibilisation aux dangers de l'usage de produits stupéfiants, selon les modalités fixées à l'article 131-35-1 du code pénal.</p> <p>Si l'infraction est commise dans l'exercice ou à l'occasion de l'exercice de ses fonctions par une personne dépositaire de l'autorité publique ou chargée d'une mission de service public, ou par le personnel d'une entreprise de transport terrestre, maritime ou aérien, de marchandises ou de voyageurs exerçant des fonctions mettant en cause la sécurité du transport dont la liste est fixée par décret en Conseil d'Etat, les peines sont portées à cinq ans d'emprisonnement et à 75 000 euros d'amende. Pour l'application du présent alinéa, sont assimilés au personnel d'une entreprise de transport les travailleurs mis à la disposition de l'entreprise de transport par une entreprise extérieure.</p> <p><i>[In English]</i></p> <p>The "delinquency prevention law" of March 5, 2007 further reinforced the range of law enforcement measures available for use against drug users. Firstly, this law enabled judges to deal with narcotics offences using a simplified, "fast-track" procedure in order to provide a systematic penal response to narcotics use. It introduced a new, <i>ad hoc</i> sanction: a drug awareness-building training session focusing on the dangers of the use of narcotics products (up to a maximum of €450, equivalent to the cost of a class 3 fine).</p> <p>The law of March 5, 2007 also extends the scope for the application of court-ordered treatments, which can now be ordered at any stage of the legal proceedings. Originally conceived as an alternative to legal proceedings (resulting in a suspension of the legal process), court-ordered treatments can now be ordered as a sentence enforcement measure, including for those persons having committed an offence related to alcohol consumption.</p> <p>The law of 2007 reinforces the available measures concerning the monitoring of the application of court-ordered treatments. It introduced the notion of "intermediate doctor" whose task it is to assess the medical appropriateness of the measure, inform the doctor chosen by the user of the legal framework in which it is being applied, verify the enforcement of the court-ordered treatment and inform the legal authorities of changes in the offender's medical situation.</p> <p><u>Décret n° 2007-1388 du 26 septembre 2007 pris pour l'application de la loi n° 2007-297 du 5 mars 2007 relative à la prévention de la délinquance et modifiant le code pénal et le code de procédure pénale</u></p>

1;2;5;7

Date	Type/ID	Event
	5	<p><i>[In English]</i></p> <p>Provided for in articles L 131-35- 1, R131-46 and R131-47 of the French Penal Code in application of decree n °2007-1388 of September 26, 2007, the aim of this measure is to make offenders fully aware of the danger and harm generated by the use of narcotics as well as the social impact of such behaviour. The training session may be proposed by the authorities as an alternative to legal proceedings and penal agreements. An obligation to complete the course may also be included in the ruling as an additional measure. It applies to all adults and to minors over the age of 13.</p> <p><u>Code de la Santé Publique, Article L3411-4 du 22 Décembre au 8 Mai 2010</u></p> <p>Le dépistage des hépatites virales et la vaccination contre ces virus sont gratuits et anonymes lorsqu'ils sont effectués dans un centre de soins, d'accompagnement et de prévention en addictologie.</p> <p>Les dépenses afférentes à ces activités sont prises en charge par l'assurance maladie, sans qu'il soit fait application des dispositions du code de la sécurité sociale et du code rural relatives à l'ouverture du droit aux prestations couvertes par les régimes de base, au remboursement de la part garantie par l'assurance maladie, à la participation de l'assuré aux tarifs servant de base aux remboursements ainsi qu'au forfait mentionné à l'article L. 174-4 du code de la sécurité sociale.</p>
2008	1;6 5;7 1;2;3;5;7	<p><u>Circulaire relative à la lutte contre la toxicomanie et les dépendances du 9 Mai</u></p> <p>The directive of 9 May 2008 defined a new 'rapid and graduated' policy. In simple cases, drug users may receive a caution, but this should usually be accompanied by a request to attend a compulsory drug awareness course, introduced in March 2007, for which a non-drug-dependent offender may have to pay up to EUR 450. Drug-dependent individuals would continue to receive the therapeutic injunction directing them to treatment. If there are aggravating circumstances, such as in the case of recurring offenders, a term of imprisonment may be imposed.</p> <p><i>A circular published at the start of 2008 described the missions of the Health Care, assistance and addictology prevention centres (CSAPA).</i></p> <p>From 2009, this name was used to describe the centres which previously received illegal drug users (CSST) and the centres which only received people with alcohol difficulties (CCAA). The missions of the CSAPA are much the same as those of the CSST and CCAA. The CSAPA, however, are required to receive all people with an addiction problem, regardless of the problem substance.</p> <p><i>Creation of the 2008-2011 'Fighting Drugs and Drug Addiction' Government Action Plan</i></p>

Date	Type/ID	Event
2009	5	<i>Creation of the 2009-2012 "hepatitis" plan and the 2009-2013 "cancer" plan</i>
	7	<p><u>Loi n°2009-879 du 21 juillet</u></p> <p>Portant réforme de l'hôpital et relative aux patients, à la santé et aux territoires.</p> <p><i>[In English]</i></p> <p>Since the adoption of the HPST law (art. 108), CDAG or CIDDIST physicians can lift anonymity provided that the patient provides explicit, express and informed consent. This provision aims to improve treatment support in certain clinical situations (art. L3121-1 of the French Public Health Code).</p> <p>Furthermore, if they expressly request it, drug users who spontaneously go to a dispensary or health establishment can request anonymity at admission (art. L3414-1 of the French Public Health Code).</p>
2010	6	<p><u>Code de la Santé Publique. Article L3411-1 du 26 Février</u></p> <p>Modifié par Ordonnance n°2010-177 du 23 février 2010 - art. 7</p> <p>Une personne usant d'une façon illicite de substances ou plantes classées comme stupéfiants bénéficie d'une prise en charge sanitaire organisée par l'agence régionale de santé.</p>
	4	<p><u>Loi n° 2010-768 du 9 juillet 2010</u></p> <p>Visant à faciliter la saisie et la confiscation en matière pénale.</p> <p><i>[In English]</i></p> <p>The law n°2010-768 (the so-called "loi Warsmann") established a new criminal procedure for seizing and confiscating the assets of narcotics traffickers under investigation.</p> <p>This law transposed the European Framework Decision of 2006 on the application of the principle of mutual recognition of confiscation orders (Décision-cadre 2006/783/JAI du 6 octobre 2006 relative à l'application du principe de reconnaissance mutuelle aux décisions de confiscation). It enabled a recast of the preceding applicable provisions beyond the EU to extend their reach to all international conventions endowed with recognition mechanisms for confiscation orders. Finally, the July 2010 law provided a precise legal framework for performing cross-border confiscations on the basis of the principle of international reciprocity, when no applicable international agreement exists.</p>
	5	<p><u>Arrêté du 8 juillet 2010</u></p> <p>Fixant les conditions de la levée de l'anonymat dans les consultations de dépistage anonyme et gratuit et dans les centres d'information, de dépistage et de diagnostic des infections sexuellement transmissibles</p>

Date	Type/ID	Event
2011	4	<u>Domestic security (act of 14 March 2011) – drug trafficking profit</u>
	3	<p><u>Code de la Santé Publique, Article R5132-74 du 14 Avril</u></p> <p>Sont interdits, à moins d'autorisation expresse, la production, la fabrication, le transport, l'importation, l'exportation, la détention, l'offre, la cession, l'acquisition ou l'emploi et, d'une manière générale, les opérations agricoles, artisanales, commerciales et industrielles relatifs aux substances ou préparations et plantes ou parties de plantes classées comme stupéfiants, sur proposition du directeur général de l'Agence française de sécurité sanitaire des produits de santé, après avis de la Commission nationale des stupéfiants et des psychotropes, par arrêté du ministre chargé de la santé.</p> <p>Lorsque ces substances ou préparations et ces plantes ou parties de plantes sont utilisées en médecine vétérinaire, le directeur général de l'Agence française de sécurité sanitaire des produits de santé sollicite, préalablement à sa proposition, l'avis du directeur général de l'Agence nationale de sécurité sanitaire de l'alimentation, de l'environnement et du travail.</p>
2012	6,7	<p><u>Circular of 16 February</u></p> <p>Emphasises the need to make penal response systematic and to reinforce the effectiveness of legal measures. Jurisdictions are primarily encouraged to resort to educational measures, such as awareness-building training courses, for a first offence involving simple use, and to social-health measures for addicted users (court-ordered treatment).</p> <p>The directive establishing a criminal policy strategy for drug-related crimes reiterated that, when sentencing, courts should take account of factors that suggest a simple drug use or drug dependence. The principle of proportionality calls for systematic penal responses and increasingly effective judicial measures in the case of more severe offences. The application of educational and health measures is prioritised for simple drug law crimes and for minors, in line with a general trend in the EU to reduce the severity of punishments for such offences.</p> <p>Drug supply is punishable with imprisonment of up to 10 years, or up to life in prison if offences are particularly serious, and a fine of up to EUR 7.5 million.</p>
	3	<p><u>Code de la Santé Publique, Article R5132-74 du 1 Mai 2012</u></p> <p>Sont interdits, à moins d'autorisation expresse, la production, la fabrication, le transport, l'importation, l'exportation, la détention, l'offre, la cession, l'acquisition ou l'emploi et, d'une manière générale, les opérations agricoles, artisanales, commerciales et industrielles relatifs aux substances ou préparations et plantes ou parties de plantes classées comme stupéfiants, sur proposition du directeur général de l'Agence nationale de sécurité du médicament et des produits de santé, après avis de la</p>

Date	Type/ID	Event
		<p>Commission nationale des stupéfiants et des psychotropes, par arrêté du ministre chargé de la santé.</p> <p>Lorsque ces substances ou préparations et ces plantes ou parties de plantes sont utilisées en médecine vétérinaire, le directeur général de l'Agence nationale de sécurité du médicament et des produits de santé sollicite, préalablement à sa proposition, l'avis du directeur général de l'Agence nationale de sécurité sanitaire de l'alimentation, de l'environnement et du travail.</p>
2013	<p>1;2;3;5;6; 7</p> <p>1C;2C; 31C;32C; 33C</p>	<p><i>Plan Gouvernemental de lutte contre les drogues et les conduites addictives 2013-2017</i></p> <p><u>Code de la Santé Publique, Article R5132-86 du 8 Juin</u></p> <p>I. - Sont interdits la production, la fabrication, le transport, l'importation, l'exportation, la détention, l'offre, la cession, l'acquisition ou l'emploi :</p> <p>1° Du cannabis, de sa plante et de sa résine, des produits qui en contiennent ou de ceux qui sont obtenus à partir du cannabis, de sa plante ou de sa résine ;</p> <p>2° Des tétrahydrocannabinols, à l'exception du delta 9-tétrahydrocannabinol, de leurs esters, éthers, sels ainsi que des sels des dérivés précités et de produits qui en contiennent.</p> <p>II. - Des dérogations aux dispositions énoncées ci-dessus peuvent être accordées aux fins de recherche et de contrôle ainsi que de fabrication de dérivés autorisés par le directeur général de l'Agence nationale de sécurité du médicament et des produits de santé.</p> <p>La culture, l'importation, l'exportation et l'utilisation industrielle et commerciale de variétés de cannabis dépourvues de propriétés stupéfiantes ou de produits contenant de telles variétés peuvent être autorisées, sur proposition du directeur général de l'agence, par arrêté des ministres chargés de l'agriculture, des douanes, de l'industrie et de la santé.</p> <p>III. - Ne sont pas interdites les opérations de fabrication, de transport, d'importation, d'exportation, de détention, d'offre, de cession, d'acquisition ou d'emploi, lorsqu'elles portent sur des spécialités pharmaceutiques contenant l'une des substances mentionnées aux 1° et 2° du présent article et faisant l'objet d'une autorisation de mise sur le marché délivrée en France conformément aux dispositions du chapitre Ier du titre II du présent livre ou par l'Union européenne en application du règlement (CE) n° 726/2004 du Parlement européen et du Conseil du 31 mars 2004 établissant des procédures communautaires pour l'autorisation et la surveillance en ce qui concerne les médicaments à usage humain et à usage vétérinaire, et instituant une Agence européenne des médicaments.</p>

Date	Type/ID	Event
2015	1C;2C; 3C	As of 2015, placement of cathinones, synthetic cannabinoids and 25x-NBOMe (phenethylamine) derivatives into the market has been prohibited.
2016	3	<p><u>Code de la Santé Publique, Article R5132-74 du 26 Fevrier</u></p> <p>Sont interdits, à moins d'autorisation expresse, la production, la fabrication, le transport, l'importation, l'exportation, la détention, l'offre, la cession, l'acquisition ou l'emploi et, d'une manière générale, les opérations agricoles, artisanales, commerciales et industrielles relatifs aux substances ou préparations et plantes ou parties de plantes classées comme stupéfiants, sur proposition du directeur général de l'Agence nationale de sécurité du médicament et des produits de santé, par arrêté du ministre chargé de la santé.</p> <p>Lorsque ces substances ou préparations et ces plantes ou parties de plantes sont utilisées en médecine vétérinaire, le directeur général de l'Agence nationale de sécurité du médicament et des produits de santé sollicite, préalablement à sa proposition, l'avis du directeur général de l'Agence nationale de sécurité sanitaire de l'alimentation, de l'environnement et du travail.</p> <p>L'autorisation mentionnée au premier alinéa est donnée ou retirée dans les conditions prévues aux articles R. 5132-75 à R. 5132-77. L'autorisation est également subordonnée à la transcription par le titulaire de l'autorisation des opérations sur un registre affecté à cet usage qui comporte notamment les quantités reçues et cédées. Ce registre est tenu à la disposition de l'agence et lui est transmis lorsqu'elle en fait la demande.</p>

A.5. Netherlands

Date	Type	Event
1976	1;2;3;4; 5;6;7	<p>The 1976 revision of the Opium Act (Opiumwet) – version in force</p> <p>The Netherlands Opium Act, which came into force in 1919 and rectified in 1928 to introduce cannabis legislation, was fundamentally amended in 1976. It forms the basis for the current drug legislation. It defines drug possession, trafficking, cultivation, production and importing or exporting as criminal acts.</p> <p>The revision brought all substances classified in the United Nations' 1961 Single Convention on Narcotic Drugs (United Nations, 1961) under the new Opium Act, but introduced two lists of substances: List I - commonly referred to as 'hard drugs', include substances with an unacceptable risk, such as, heroin, cocaine, amphetamines, and LSD, ; and List II - commonly referred to as 'soft drugs', include cannabis products. Possession of 30 grams of cannabis or less could either be dismissed or charged as a petty offence or</p>

Date	Type	Event
		<p>misdemeanour (comparable to a traffic ticket) and, importantly, would not result in a criminal record. In addition, another distinction was made between possession for personal consumption and possession with intent to distribute, formalising the 1969 Public Prosecutor's office enforcement guidelines. This legal distinction was made to prevent the marginalization and stigmatisation of cannabis consumers.</p> <p>In this revision, the government began to treat drug problems as being primarily health-related. Users of soft drugs were no longer seen as a threat to society. At the heart of the national drug policy is the partial decriminalisation of cannabis.</p> <p>The 1976 Opium Act includes also provisions against drug trafficking. In the Penal Code measures can be taken regarding the confiscation of illegal assets and the prevention and prosecution of money laundering activities.</p> <p>Regarding the legal regime for drug possession, use and traffic, main rules are as follows:</p> <ul style="list-style-type: none"> • Laws prohibiting the possession of drugs and associated penalties: Less than 30g cannabis for personal use: up to 1 month's imprisonment and/or fine. Cannabis - other than above - and other class II drugs: up to 2 years' imprisonment and/or fine. Class I drugs (unacceptable risk), small quantities for personal use: up to 1 year's imprisonment and/or fine. Class I drugs, not for personal use: up to 4 years' imprisonment and/or fine. • Laws on drug use: restrictions and penalties: Indirectly prevented by prohibiting possession. Not an offence. • Penalties for trafficking in drugs: Within the country: class I, up to 8 years; other drugs, up to 2 years. International: class I, up to 12 years; other drugs, up to 4 years. Penalties may be increased for members of organised crime groups. • Legally specified alternatives to prosecution and imprisonment: Prosecutors may drop proceedings if addicts volunteer for treatment. Courts can give a provisional judgement if a drug user attends a treatment centre or order a drug addict to be treated in a psychiatric institution (very rarely used). • In 1978 'Guidelines for the Investigation and Prosecution of Drug Offences' were drawn up. These included the guideline to not prosecute so-called 'house dealers' in youth centers that were tolerated by local authorities. First national criteria were defined for tolerating such house dealers, e.g. no hard drugs. Later coffeeshops replaced these house dealers. Over time similar and step-by-step more detailed criteria were implemented for coffeeshops.
1984	5	<i>Introduction of Needle and syringe exchange programmes</i> to curb the spread of HIV among drug users.
1992	5; 33C	<u>Gemeentewet art. 174^a of 14th February</u>

Date	Type	Event
		<p>This is a municipal law / City Council Act (Gemeentewet). It attributes power to the mayor to close certain premises in case of public nuisance.</p> <p>The mayor may decide to close a house, a room that is not open to the public or a yard belonging to that dwelling or that room if, due to behaviour in the dwelling or the room or the yard, the public order surrounding the dwelling, the locally or the yard is disturbed.</p>
1993	4	<p><u>Wet van 16 December - Betreffende melding ongebruikelijke transacties bij financiële dienstverlening</u></p> <p>[In English] <u>Act of 16th December</u></p> <p>Contain regulations on the disclosure of unusual transactions relating to financial services [Disclosure of Unusual Transactions (Financial Services Act)]</p> <p>The act implements the European Council Directive of 10 June 1991 on prevention of the use of the financial system for the purpose of money laundering (91/308/EEC), and certain recommendations of the Financial Action Task Force.</p> <p>4 <i>The Confiscation Legislation (Wet Ontneming wederrechtelijk verkregen voordeel) came into force</i></p> <p>It introduced laws to meet the EU directive on money laundering, making it more difficult for criminal organisations to retain the proceeds of their illegal activities.</p> <p>4 <i>The Act on Transaction of Execution of Penalties (Wet Overdracht tenuitvoerlegging strafonniszen)</i></p> <p>Expanded to make it easier to confiscate illegally gained profits by criminals.</p> <p>4 <i>The Act on Reporting Unusual Financial Transactions (Wet Melding Ongebruikelijke Transacties) and the Act on Personal Identification at Financial Transactions (Wet identificatie bij financiële dienstverlening) come into force to prevent money laundering.</i></p>
1994	1C;2C; 33C	<p><u>AHOJ-G criteria (Staatscourant, 1994) – Dutch coffee shop criteria</u></p> <p>These were based on the informal house rules pioneered in Amsterdam and adopted by coffee shops around the country. These broadly formulated AHOJ-G criteria were enacted officially only in 1994 and left room for development of local policies by the ‘local triangle’.</p> <p>A - No Advertising: no more than (very) low profile signposting of the facility</p> <p>H - No Hard drugs: these may not be sold or held on the premises</p>

Date	Type	Event
	5	<p>O -No Nuisance (Overlast in Dutch): including traffic and parking, loitering, littering and noise</p> <p>J - No sales to under-aged customers (Jeugdigen) and no admittance of under-aged customers to coffee-shops.</p> <p>G - Transaction size is limited to 'personal use,' defined as 30 Grams per person per coffee shop per day</p> <p><i>The Road Traffic Act</i></p> <p>It states that "it is forbidden for anyone to drive a vehicle under the influence of any substance which the user knows or may be expected to know that it - alone or in combination with another substance - may reduce driving performance".</p>
1995	3	<p><i>The first drug consumption room was established</i></p> <hr/> <p><i>The Preventing Abuse of Chemicals Act (Wet Voorkoming Misbruik Chemicaliën) came into force.</i></p> <p>Dealing with the trafficking in chemical substances that may be used in the production of drugs. This law addresses international regulations. For the manufacture and the trafficking of substances registered in category 1 of Appendix I of the Act, a licence issued by the Minister of Health, Welfare and Sport is required. The Economic Surveillance Department of the Ministry of Economic Affairs oversees the implementation of the Act. A breach of this law constitutes an economic offence. Profits thus acquired may be confiscated.</p>
1996	1;2;3;4 1;2;3; 32; 33; 31C; 32C; 33C	<p><u>The Netherlands ratified the 1971 Convention of the United Nations on Psychotropic Substances.</u></p> <p>As a result, many other substances were added to the two Schedules of the Opium Act. This included MDMA, better known as ecstasy, included in List I.</p> <p><i>The National Public Prosecution Department issue comprehensive guidelines for enforcing the Opium Act.</i></p> <p>Penal law in the Netherlands is strongly influenced by discretionary prosecution. The public prosecutor decides in individual cases if prosecution is necessary or whether the case should be settled out of court. This is not to say that prosecutors are completely free in their decisions. The National Public Prosecution Department, for instance, may issue guidelines.</p> <p>The maximum penalties suggested in guidelines are usually lower than those laid down in law. Penal law in the Netherlands distinguishes two kinds of criminal acts: major offences (crimes) and minor offences (misdemeanours, infractions). Major offences include the processing and manufacture, the sale, the possession and - except for scientific or medicinal</p>

Date	Type	Event
		<p>purposes - the import and export of all soft and hard drugs. The severity of the penalty depends on whether the person is a trafficker or a user, whether the substance is traded nationally or internationally, and whether the substance is a soft or a hard drug. The only minor offence with regard to drugs is the possession of small quantities of cannabis.</p> <p>The maximum penalty in the Opium Act for the import or export of a hard drug is twelve years of imprisonment; for manufacture, transportation or sale, eight years; and for possession or storage four years. In each case, the imprisonment may be supplemented with a fine of up to 100 000 guilders (45 000 ECU). The 1996 Guidelines stipulate when the maximum and minimum penalty is required. Criteria are the amount of drug, the kind of drug, the place where the drug was sold, and occasional versus long-term dealing.</p> <p>The maximum penalties for cannabis in the Opium Act are four years of imprisonment or a fine of up to 100 000 guilders (45 000 ECU) for import or export, and four years or 100 000 guilders (45 000 ECU) for manufacture (including cultivation of hemp) and for transportation, sale or storage. All commercial cultivation of cannabis in glasshouses or domestically is forbidden unless a license has been granted. Open-air cultivation is permitted only for cannabis fibre varieties with clear-cut agricultural applicability as defined by national or European Union regulations. The maximum penalty for the possession of a maximum 30 grams of cannabis amounts to one month imprisonment (or 2 270 ECU).</p> <p>Habitual offenders against the Opium Act are likely to be sentenced to higher penalties than are people without a criminal track record. The maximum penalty for repeated violation of the Opium Act with regard to hard drugs is sixteen years of imprisonment and a fine of 1 million guilders (450 000 ECU). The offender may be subject to confiscation of any assets gained from the offence.</p> <p>6 <i>Introduced the Heroin Assisted Treatment as a trial</i></p>
1997	1C; 2C; 33C; 5	<p><i>The Closing Drug Premises Act, or Victoria Act (Wet sluiting drugspanden)</i>, went into force.</p> <p>This law added an article to the Municipality Act (Gemeentewet). It allows mayors of municipalities to close down premises where drug use or trafficking causes public nuisance. Initial experience with the Victoria Act has been favourable but also illustrative of the legal difficulties local government may face when it tries to deprive citizens of access to their property. Municipalities can create additional means of intervention by formulating a coffee shop policy and by introducing bylaws. The policy can close down those coffee shops which cause public nuisance or fail to adhere to the guidelines of the National Public Prosecution Department.</p> <p>National legislation is implemented at the regional and local level by courts, the police and municipalities. To this end, these authorities may receive</p>

Date	Type	Event
	1;2;3	<p>guidelines from the government or other national organisations.</p> <p>Municipalities have some leeway in defining their own policies, subject to the limitations imposed by national legislation.</p> <p>Among these are the AHOJ-G criteria to which coffee shops must adhere. Main changes to the criteria:</p> <p>'J' - No selling cannabis to young persons (Minimum age was set to 18).</p> <p>'G' - No large quantities (no more than 5 grams cannabis) per transaction. Transaction size was lowered from 30 grams to 5 grams. Introduction of a limited trade stock of coffee shops - The maximum stock allowed is 500 grams per coffee shop.</p> <p>Measures to regulate the establishment and management of coffee shops can be taken, for example, under the terms of the nuisance ordinances, the Catering Establishments Decree, the local non-licensed hotel and catering ordinances, or local bylaws and ordinances on the living and working environment. Planning regulations can be used to combat the establishment of coffee shops in unacceptable locations, for instance opposite schools, clubs and community centres. A number of municipalities have concluded voluntary agreements with coffee shop proprietors. The freedom granted to municipalities is reflected in the varying positions they adopt, which can be categorised in one of two ways: (a) coffee shops not permitted (the zero option), and (b) coffee shops permitted but subject to restrictions on supply and to other strict municipal regulations.</p> <p>Another example is the regulation of Drug use, which does not constitute a crime in legal terms, However, there are situations when the use of drugs is prohibited at the local level for reasons of public order or to protect the health of young people, such as at schools and on public transport. It is up to the responsible authorities – not the national government – to regulate this.</p> <p><i>The Synthetic Drugs Unit (USD) is operational.</i></p> <p>Its main objectives are to: improve the national collation of information on synthetic drugs and their precursors and to improve the use of this information for criminal justice purposes; give support to local public prosecutors, to police teams and to special investigation teams in their investigations into synthetic drugs and their precursors; make national and international inquiries into synthetic drugs.</p>
1998	5; 6	<p><u>Penitenciaire beginselenwet of 18th June</u></p> <p>[In English] <u>Penitentiary principles act of 18th June</u></p> <p>Establishing a Penitentiary Principles Act to facilitate the enforcement of a custodial sentence and the reception of addicts in a criminal institution. The Director shall ensure that a reception plan is established as soon as possible</p>

Date	Type	Event
		and in any event within one month of the detainee's arrival in an institution for the reception of addicts, in consultation with him as much as possible.
1999	3;6;7	<p><u>Besluit van 1 juni 1999, houdende bepalingen voor het voorschrijven en het bestellen van opiumwetmiddelen (Besluit voorschrijven en bestellen opiumwetmiddelen)</u></p> <p>[In English] <u>Decree on Prescription and Ordering of Opium Act Resources of 1 June</u></p> <p>Contains provisions for the prescription and ordering of Opium Act drugs (Decree on ordering and ordering Opium Act products). Only the Opium Act drugs listed in the appendix to this Decree may be prescribed.</p>
	3;6;7	<p><u>Besluit van 25 november 1999, houdende wijziging van het Besluit voorschrijven en bestellen opiumwetmiddelen</u></p> <p>[In English] <u>Decree of 25 November</u></p> <p>Amends the Decree on Prescription and Ordering of Opium Act Resources.</p> <p>With the Prescription and ordering of Opium Act Decree (Bulletin of Acts and Decrees 1999, 256), a distinction has been made between substances generally accepted for use in medicine and veterinary medicine and substances for which this is not the case. The criterion for inclusion of the substances in the appendix of the Opium Act is whether it has an accepted therapeutical application. The Prescription and Ordering Act on Opium Act aims to create an obstacle only for substances with no accepted application in medicine.</p>
	5;	<u>The "Damocles article" of April</u>
	1C;2C;	Amended the Opium Act by expanding municipal powers regarding coffee shops and permitting local mayors to close such places if they contravene local coffee shop rules, even if no nuisance is being caused.
	33C	This article allows mayors to act against coffee shops, pubs, shops and other public places if these create drug-related nuisance or trespass against the Opium Act or the Guidelines. Coffee shops are alcohol free outlets resembling bars where adults - eighteen years or older - may purchase soft drugs up to five grams per customer. Measures to be taken under this article include closure of the premises and seizure of any drug stock.

Date	Type	Event
2000	1;2;3; 1C;2C; 3C; 31C;32; 33C	<p><u>Aanwijzing opiumwet of 2nd November</u></p> <p>[In English] <u>Opium Act Directive of 2nd November</u></p> <p>This directive contains a set of comprehensive guidelines for enforcing the Opium Act. It relates to investigating and prosecuting the offences contained in the Opium Act and the persons who perpetrate these offences. Especial attention is given to the administrative and penal aspects of the policy of tolerance as far as coffee shops are concerned. Attention is also given to inspecting waste generated by laboratories producing synthetic drugs as well as the policy of giving citations if the offence violates both the Opium Act and environmental legislation.</p> <p>The Opium Act Directive stipulates when the maximum penalty or a lesser sanction is required. Decision criteria are the amount of drug, the kind of drug, the place where the drug was sold, and occasional versus long-term dealing. The sale of cannabis is illegal, yet coffee shops are allowed to maintain a stock of 500 grams and to sell it, if they adhere to the AHOJ-G criteria.</p> <p>Cultivation of cannabis is forbidden, but growth of five or less plants for personal use has a low prosecution priority.</p> <p>High prosecution priority is given to professional and commercial cannabis cultivation. The indicators for professional dealing with regard to cannabis cultivation are listed in great detail.</p> <p>The starting point of the policy is the distinction drawn in the Opium Act between drugs that constitute a demonstrable risk to public health (hard drugs) and drugs carrying a minor risk (soft drugs). In the directive, punishable offences are tolerated in connection with 'coffee shop policy.'</p> <p>Transactions involving List II section b substances (cannabis products) in excess of 30 grams are prohibited. The punishable offences are: taking the substances into or outside Netherlands territory; producing and possessing for the purposes of a profession or business: cultivation, preparation, processing, selling, supplying, providing and transporting.</p> <p>Non-commercial cultivation: if the crop contains less than 5 plants, it is assumed it is not intended for commercial purposes. Discovery of the crop involves police dismissal and surrender.</p> <p>Non-commercial cultivation of a limited amount for personal use is not given priority if the suspect is over the age of majority. Cultivation by minors is still liable to a criminal measure.</p> <p>The limit of what is tolerated is set at 5 grams for the sale of cannabis products by coffee shops. It stands to reason that the same limit should in principle be deployed as regards possession of cannabis products. Amounts up to and including 5 grams, the quantity for personal use, hence incur a</p>

Date	Type	Event
	6	<p>police dismissal. Penal action will be taken if quantities of cannabis between 5 and 30 grams are discovered.</p> <p>The possession of small quantities of drugs for personal use is legally punishable by imprisonment, but is not subject to targeted investigation by the police. Anyone found in possession of a small amount of drugs for personal use will generally not be prosecuted, though the police will confiscate the drugs and refer the individual to a care agency.</p> <p><u>Wet Strafrechtelijke Opvang Verslaafden of 21st December</u> [In English] <u>Act Of 21 December 2000</u></p> <p>Amending The Penal Code (<i>Wetboek Van Strafrecht</i>), The Code Of Criminal Procedure (<i>Wetboek Van Strafoordering</i>), The Judiciary Organization Act (<i>Wet Op DeRechterlijke Organisatie</i>) And The Prisons Act (<i>Penitentiaire Beginselenwet</i>) (Compulsory Incarceration Of Criminal Addicts By Order Of The Court Under Criminal Law).</p> <p>It allows the courts to commit offenders who are suffering from drug addiction and who have failed to respond to other forms of treatment to a special institution for up to two years. Compulsory incarceration of criminal addicts by order of the judge.</p>
	1;2;3	<p><u>4-MTA was added to list I of the Opium Act.</u></p> <p>Psilocine and psilocybine – the active components of hallucinogenic mushrooms – are on Schedule I of the Opium Act. The High Court ruled that the Opium Act extends to mushrooms, which have psychedelic properties and have been dried or processed in any way, but not to fresh mushrooms.</p>
2001	1C;2C; 3C	<p>Since 2001, the <u>Office for Medicinal Cannabis (OMC)</u> is the Dutch government office responsible for the production of cannabis for medical and scientific purposes and only delivers the raw material (http://www.cannabisbureau.nl/en/). Four types of medicinal cannabis are available through pharmacies: Bedrocan, Bedrobinol, Bediol and Bedica. There is still no official “cannabis medication” produced and registered by a pharmaceutical company.</p>
	6	<p><u>Penal Care Facility for Addicts of 1st April - Strafrechtelijke Opvang Verslaafden – (SOV)</u></p> <p>Implementation of Act of 21 December 2000. Enables the courts to commit offenders who are addicted to drugs and who have failed to respond to other forms of treatment to a special institution for up to two years. The alternative is a prison sentence.</p>
	3	<p><u>The Medicines Act and the Economic Offences Act changed.</u></p>

Date	Type	Event
		<p>Illegal trafficking in all kinds of medicines or drugs was characterised as an economic offence and can be punished as such (maximum 6 years of imprisonment). The purpose of this amendment was to create more judicial possibilities to combat dope in sports and the abuse of GHB.</p>
2002	1;2;3	<p><u>Besluit van 9 december 2002, houdende uitvoeringsvoorschriften krachtens de Opiumwet (Opiumwetbesluit)</u></p> <p>[In English] <u>Opium Act Decision - Decree of 9 December 2002</u></p> <p>Contains implementation rules pursuant to the Opium Act, such as prescription of Opium Act drugs; Supply of Opium Act drugs by prescription and Registration of administration of Opium Act drugs.</p> <p>Chapter 2 Prescribing of Opium Act drugs</p> <p>Article 2</p> <p>1. It shall be illegal to issue a prescription for other Opium Act drugs besides those referred to in the Annex to this Decree, unless these are prescribed for experimental subjects in connection with research within the meaning of the Medical Research Human Subjects Act or for animals in connection with research within the meaning of the Animal Experiments Act.</p> <p>2. Other Opium Act drugs besides those referred to in the Annex to this Decree shall only be used or administered in an institution as referred to in Article 16, or in the practice of a person prescribing such a drug in connection with research as referred to in the first paragraph, on the understanding that such drugs shall only be administered or used in connection with research within the meaning of the Animal Experiments Act by the licence holder within the meaning of that Act.</p>
	31C	<p><u>In 2002, the Opium Act was amended in relation to the medical use of cannabis</u> (Staatsblad 2002, 520).</p> <p>In the amendment the cultivation of cannabis for medical and scientific purposes is regulated. A governmental agency, the Bureau for Medical Cannabis (BMC), can grant permission to qualified growers to cultivate cannabis. It has to check the integrity of applicant cannabis growers. The BMC also sees to the quality and the standardisation of medicines produced from cannabis. The cannabis products used in practice for medical reasons are of uncertain composition and are not subject to rigid quality control. In October 2002, the Dutch government decided that physicians may prescribe cannabis to patients and that pharmacies are allowed to supply this drug.</p>
	3	<p><i>Sentence of the Supreme Court of the Netherlands of 5th November</i></p>

Date	Type	Event
	1;2;3; 5	<p>Only fresh psychedelic mushrooms fall outside the scope of the Opium Act and can still legally be sold by smart shops. In the about 165 "smart shops" in the Netherlands mushrooms with psychedelic properties can be bought. The active ingredients psilocybine and psilocyne are listed in Schedule I of the Opium Act, but it was not clear if the Opium Act also applies to the fresh or dried mushrooms themselves. Besides psychedelic mushrooms, other ecodrugs - like psychotropic herbals - and smart products like herbal ecstasy, energy drinks and smart nutrients are sold in Dutch smart shops. The local governments in Amsterdam and Maastricht have detected signs of the involvement of organised crime with the smart shop business. An inventarisation of all the legal instruments that can be used to close down smart shops was written by the national Support and Information Point Drugs and Safety (SIDV).</p> <p><u>Victor Law (Wet Victor) of 28th May</u></p> <p>Amending the Housing Act and any other laws relating to measures after closure of dwellings, residential housing, caravans and other buildings, as well as the premises belonging to these areas as a result of disruption of public order or violation of article 2 or 3 of the Opium Act (Victor Law).</p>
2003	3	<p><u>Beleidsregels opiumwetontheffingen</u></p> <p>[In English] <u>Policy guidelines Opium Act exemptions of 7th January 2003</u></p> <p>The Minister of Health, Welfare and Sport adopts the following policy guidelines:</p> <p>1. The Opium Act and Opium Act exemptions</p> <p>The Opium Act makes it illegal to bring into and outside the territory of the Netherlands, grow, prepare, treat, process, sell, supply, provide, transport, possess and manufacture substances falling under the regime of List I or List II of the Act (Opium Act drugs). Only pharmacists, doctors, dentists and veterinary surgeons may perform certain acts with Opium Act drugs without an exemption within the normal practice of their professions.</p> <p>2. Applying for Opium Act exemptions</p> <p>A distinction is made between, on the one hand, applications for an Opium Act exemption regarding cannabis, cannabis resin or the preparations thereof and, on the other hand, other applications.</p> <p>Applications for an Opium Act exemption regarding cannabis, cannabis resin or the preparations thereof will be handled by the <i>Bureau voor Medicinale Cannabis (BMC)</i> [Office of Medicinal Cannabis], which, since 1 January 2001, has been acting with the authority of a government agency within the meaning of Article 28 in conjunction with Article 23 of the Single Convention on Narcotic Drugs (1961).</p>

Date	Type	Event
		<p>To apply for an Opium Act exemption regarding cannabis, cannabis resin or the preparations thereof, a fully completed application form with the requested annexes needs to be sent in. An application form may be obtained from the Ministry of Health, Welfare and Sport, Office of Medicinal Cannabis of the <i>directie Geneesmiddelen en Medische Technologie (GMT)</i> [Department of Pharmaceutical Affairs and Medical Technology].</p> <p>To apply for an Opium Act exemption regarding other Opium Act drugs besides cannabis, cannabis resin or the preparations thereof, an application form may be obtained from the <i>CIBG</i> [Central Health Professions Information Centre], Pharmacy Technology Department.</p> <p>If applications are made both regarding cannabis, cannabis resin or the preparations thereof as well as regarding other Opium Act drugs, these will be considered two separate applications, to be handled separately. If granted in such a case, separate Opium Act exemptions will be issued.</p>
3		<p><u>Uitvoeringsregeling Opiumwet of 7th January 2003</u></p> <p>[In English] <u>The Opium Act Implementation Regulations</u></p> <p>Regulation of the Minister of Health, Welfare and Sport, containing provisions regarding fees for Opium Act exemptions and ordering Opium Act .</p>
31C		<p><u>Voorschriften voor de verbouw van cannabis voor medicinale doeleinden</u></p> <p>[In English] <u>Guidelines for cultivating cannabis for medicinal purposes of 17th March 2003</u></p> <p>Annex to the Regulation of the Minister of Health, Welfare and Sport of 9 January 2003, GMT/BMC 2340685, containing policy guidelines for the decision on applications for Opium Act exemptions (Policy guidelines Opium Act exemptions).</p> <p>Under certain conditions, the Dutch government permits the cultivation of cannabis for medicinal purposes. In the case of herbal drugs, the cultivation method and primary processing of the plant determines the ultimate properties of the active pharmaceutical ingredient. Starting materials of herbal origin have a complex composition and can only be characterised to a limited extent through chemical or biological analysis. Therefore, an effective quality assurance system in the steps leading up to the production of the active pharmaceutical ingredient is needed in order to guarantee reproducible quality. These steps are cultivation, harvesting and primary processing.</p> <p>These guidelines have been derived from the general rules for Good Agricultural Practice of the Working Group on Herbal Medicinal Products of the European Medicines Evaluation Agency (EMA).</p>

Date	Type	Event
	31C;32; 33C	<p><u>Amend the Opium Act in order to legalise the medical use of cannabis of 17th March (Stb 2003/154).</u></p> <p>This amend regulates the cultivation of cannabis for medical and scientific purposes. A governmental agency, the Bureau for Medical Cannabis (BMC), can grant permission to qualified growers to cultivate cannabis. It has to check the integrity of potential "permitted" cannabis growers. The BMC also takes care for quality control and the standardisation of medicines produced from cannabis.</p> <p>Besides the medical cannabis regulation, the Opium Act was also changed on the following items:</p> <ul style="list-style-type: none"> • Explicit mention of the requirements of article 28 of the Single Convention for the licensing procedures. In this way the BMC is guaranteed by international law (Article 8a). • The licence to produce or trade in substances mentioned in the Opium Act is connected with the new possibility of checking persons for criminal antecedents through the Public Administration Probity in Decision-making Act (article 8e). • The substances in Schedule I and Schedule II have now been alphabetically ordered according to system of the International Non-proprietary Names (Schedule I and Schedule II). • Equal procedures for amending both substances lists. The maximum penalties in the Opium Act remained unchanged. <p>Since September 2003, physicians can prescribe cannabis for medical reasons, and pharmacies are allowed to supply this drug. A government agency, the Office of Medicinal Cannabis (OMC), regulates the entire process of production, delivery and quality control of medicinal cannabis. Also, some official requests from patients of other countries for medical cannabis were approved. This medical cannabis is delivered only via their local pharmacies</p>
	31C	<p><i>New general Directives for Investigation of cultivation of cannabis (of March)</i></p> <p>Ordered by the Minister of Justice for the Police Departments and the Public Prosecution Service. The Directives indicate when the authorities will come or not come into action when a criminal offence is reported to the police. In the Directives large scale cultivation of cannabis is described as a major crime which justifies prosecution, because it affects the quality of life in neighbourhoods (Stc 2003/41).</p>
	4	<p><u>Public Administration Probity in Decision-making Act (Wet Bevordering integriteitsbeoordelingen door het openbaar bestuur or Wet Bibob) of 1st June.</u></p> <p>Creation of an Investigation Agency, that checks background data of organisations that apply for subsidies and permits. The Dutch government attempts to prevent criminal organisations from taking advantage of public</p>

Date	Type	Event
		<p>money or from laundering money with the unintentional assistance of the Public Administration. The Agency can only investigate when asked to do so by governmental bodies.</p> <p>The Netherlands has introduced or changed laws to meet the EU directive on money laundering, making it more difficult for criminal organisations to retain the proceeds of their illegal activities.</p>
2004	5;6	<p><u>Placement in an Institution for Prolific Offenders Act (ISD: Plaatsing in een inrichting voor stelselmatige daders)</u></p> <p>Treatment of persistent offenders, of which problematic drug users constitute a major proportion. The measure consists of a combination of imprisonment and behavioural interventions and treatment, which are mostly carried out in care institutions outside prison. This act refers to all prolific offenders, not only addicts.</p>
2005	1;2;3	<p><i>Revision of the 1996 guidelines for enforcing the Opium Act issued by the National Public Prosecution Department.</i></p>
2006	6	<p><i>Heroin Assisted Treatment</i> was registered as a legal medication for the treatment of chronic, treatment-resistant heroin-dependent patients.</p>
2007	3C	<p><u>Amendment to the Opium Act - Article 13b of November (Stb 2007-392)</u></p> <p>Only the sale of illegal drugs has to be proved. The scope of this amendment includes the sale of hard drugs as well as the illegal sale of cannabis. The tolerated sale of cannabis in coffee shops falls outside the scope of this amendment. In practice, in these cases law enforcement will be used in proportionality. That means that the closing of premises will be the ultimate sanction in a chain of sanctions (T.K.30515-3). It falls within the jurisdiction of the local authorities to use this new instrument of administrative coercion (E.K.30515-C).</p> <p>Previously, article 13b of the Opium Act combined with article 174a of the Local Government Act could only be used to close premises used for the sale of illegal drugs, if disturbance of the public order could be proved.</p> <p>3C <i>In 19 January 2007, the first official Dutch cannabis pharmacy opened in Groningen. At that pharmacy, patients can obtain cannabis on prescription at the coffee shop price.</i></p> <p>3C <i>In February 2007, the OMC introduced a new variety of medical cannabis, Bediol granulate, which contains less THC and more cannabidiol than the other varieties (www.cannabisbureau.nl).</i></p> <p>3C <i>In November 2007, the Minister of Health decided to continue the existing medical cannabis policy for another five years.</i></p> <p>3 <u>Medicine Act of 8th February</u></p>

Date	Type	Event
	3	<p>Contains legal rules and terminology with regard medicines. E.g. definition of 'medicine', 'homeopathic', 'blood product', 'prescription', what may be provided with or without prescription, et cetera.</p> <p><u>Medical Act Decree of 19th March containing implementing regulations under the Medicine Act.</u></p>
2008	1;2;3	<p><u>Amendment to the Opium Act of 1st December</u></p> <p>All hallucinogenic mushrooms were put on Schedule II of the Opium Act.</p> <p>Oripavine - an opiate and the major metabolite of thebain - was placed on Schedule I of the Dutch Opium Act, following the decision of the Commission on Narcotic Drugs of the United Nations to add this substance to Schedule I of the Single Convention (Stb 2008- 486).</p> <p>On the same date all hallucinogenic mushrooms, which contain the substances psilocin or psilocybin by nature, as well as mushrooms containing muscimol or ibotenic acid by nature were put on Schedule II of the Opium Act (Stb 2008-486). This means that 186 different kinds of mushrooms now have the same judicial status as cannabis. This applies to the fresh as well as to dried hallucinogenic mushrooms, meaning that the dried mushrooms, which were already placed on Schedule I, moved from Schedule I to Schedule II.</p>
	6	<p><i>The new Conditional Release Act of 1st July</i></p> <p>This Act gives authorities the possibility to impose judicial supervision on detainees with a sentence longer than one year after release from detention, for instance while they are in quasi-compulsory treatment after they served their sentence.</p>
2009	6	<p><i>Opium Act Decision Appendix 2 added in 15 October (Stb 2009-348).</i></p> <p>Heroin (diamorphine) can be prescribed by physicians working at municipal treatment units for treating resistant heroin addicts who are registered at that units.</p>
	1;2;3	<p><u>Amendment to the Opium Act of 23rd September</u></p> <p>1-benzylpiperazine (BZP) is placed on list II of the Opium Act (Stb. 2009 - 380).</p>
2011	31C	<p><u>Amendment to the Opium Act of July</u></p> <p>A new article 11a of the Opium Act concerning the penalization of acts to prepare or to facilitate illegal large-scale cultivation of cannabis plants was published in the Government Gazette (Stc. 2011-13125; T.K. 32842-3). This new article was necessary to be able to penalize persons and companies preparing and promoting illegal cannabis cultivation. The so-called grow shops are an example of facilitators of illegal cannabis cultivation. Grow</p>

Date	Type	Event
	5	<p>shops may function as centres for large-scale and professional cannabis production and are often linked with organized crime. Before that it was difficult to prosecute preparatory acts aiming at illegal cannabis cultivation if a connection with criminal organization could not be proved. The municipalities are obliged to withdraw the licenses of the grow shops.</p> <p><u>Amendment to the Road Traffic Act</u></p> <p>The use of GHB is only detectable with a blood test. Just as certain blood concentrations of alcohol are forbidden when driving a vehicle, the Road Traffic Act will be adjusted to prohibit driving if blood concentrations exceed certain limits (e.g. 50 microgram per litre for amphetamine and cocaine and 3 microgram per litre for THC).</p>
2012	1;2;3; 1C;2C; 3C; 31C;33C 33C; 5	<p>Opium Act Directive revised:</p> <p>Instead of saying ‘a police dismissal should follow if a cannabis user is caught with less than 5 grams of cannabis’, it now states that ‘in principle a police dismissal will follow if a person is carrying less than 5 grams of cannabis’. This leaves open the possibility of arresting and prosecuting individuals in possession of less than 5 g of cannabis in certain circumstances.</p> <p>The Opium Act sets out that supplying drugs (possession, cultivation or manufacture, import or export) is punishable, depending on the quantity and type of drug involved, by up to 12 years’ imprisonment. However, the Opium Act Directive sets out strict conditions under which cannabis sales and consumption outlets, known as ‘coffee shops’, may be tolerated by local authorities</p> <p><u>Coffee shops criteria added in 2012 (Aanwijzing Opiumwet, 2012)</u></p> <p>Two new criteria to which coffee shops must adhere were added to the Opium Act Directive: the private club [B] criterion and the residence [I] criterion:</p> <p>B - Coffee shops need to be small and membership-only (Besloten)</p> <p>I - Coffee shops are only open to residents of the Netherlands (Ingezetenen).</p> <p>The Directive stipulated that the enforcement of these criteria should start in May 2012 in the southern provinces of Limburg, North-Brabant and Zeeland. The enforcement of these criteria in the rest of the country should start on 1 January 2013. In November 2012 the new government cancelled the private club criterion. The Opium Act Directive was changed. On 1 January 2013 the residence criterion is in force for the whole country. The enforcement of this criterion at local level may be implemented in phases. The number of drug tourists strongly decreased in the southern provinces of the Netherlands where the criterion was enforced as of 1 May 2012.</p>
2013	1;2;3	<u>Opium act revised in 4th January</u>

Date	Type	Event
	1;2;3	<p>Khat is placed on schedule II of the Opium Act. The sale of khat is not tolerated.</p> <p><u>Amendment to the Opium Act of 31st May</u></p> <p>4-methylamphetamine (4-MA) was placed on Schedule I of the Opium Act by way of a governmental decree (Stb 2013-207).</p>
2014	6	<p><i>Since the start of 2014, drug treatment has been provided in a three-step approach: frontline support from a general practitioner or a general practice mental health worker, followed by primary mental healthcare and secondary mental healthcare. Some treatment providers may have inpatient treatment programmes.</i></p> <p>The options for drug treatment interventions in the Netherlands are diverse. OST, complemented by psychosocial treatment, is the treatment of choice for opioid dependence. Available psychosocial treatments in drug treatment centres include motivational interviewing, relapse prevention techniques, cognitive-behavioural therapies, and family, community and home-based therapies. New treatment options have been introduced for young cannabis users, people with multiple (dependencies and mental health) problems and crack cocaine and GHB users. In addition, new treatment settings for homeless drug users in several municipalities have been opened.</p>
	1;2;3	<p><u>Changes in the Opium Act Directive of January</u> (Stc 2014-2267).</p> <p>A new guideline of the Public Prosecutor concerning the criminal procedure of khat, which was placed on Schedule II of the Opium Act in 2013, came into effect. Only large scale traders will be punished with prison sentences.</p>
	5	<p><u>Road Traffic Act</u></p> <p>The bill to change article 8 of the Road Traffic Act passed both Houses of Parliament (T.K. 32859-9,16; E.K. 32859-A). By the amendment the arrest and the prosecution of driving under the influence of drugs and under the influence of a combination of drugs and/or alcohol is facilitated. After two expert reports, it was decided to differentiate between single drug use, multiple drug use and combined drug and alcohol use. For each specific type of drug (amphetamine, methamphetamine, MDMA, MDEA, MDA, THC, cocaine, morphine and GHB) one limiting value is determined. For single drug use so-called behaviour related limits are determined. For combined drug use and for the use of one or more drugs in combination with alcohol, so-called analytic or zero limits are tolerated. These limits cannot be absolutely zero, because measurement errors have to be ruled out, very low limits of most of these substances are naturally produced by the body or can be metabolites of a drug used days before. Preselection of cases will take place by the police on the basis of a saliva test. Only blood test values can be used to report an offence (T.K. 32859-16; Adviescommissie Analytische</p>

Date	Type	Event
		Grenswarden, 2014; T.K. Handelingen 2014-94-28)
2015	5 33C	<p><i>HCV treatment availability</i> expanded and the new oral interferon-free direct-acting antiretroviral treatments became reimbursable.</p> <p><u>Opium act revised on 1st March</u></p> <p>New article in the Opium Act to criminalize preparative and facilitating activities for the illegal cultivation of cannabis. 'Illegal cultivation' is defined as the professional and largescale production of cannabis and is meant to cover the whole production process of cannabis, including the trafficking and export. The change aims largely at grow shops, who sell equipment for cultivation and are facilitators of cultivation. Everybody who can suspect that the service he provides or the product he sells to a person is facilitating professional and large scale cannabis cultivation or trafficking, can be prosecuted. According to the Minister of Security and Justice, this measure has impact on the organised crime behind the cannabis cultivation, and in particular on the 56 grow shops and other professional facilitators.</p>
2016	5 33C	<p><i>A comprehensive hepatitis plan was launched in 2016</i>, and the Health Council advised that drug users should actively be offered HBV and HCV testing.</p> <p><u>Revision of the Opium Act Directive</u> – New criteria defining the 'professional cultivation of cannabis' for prosecution purposes.</p> <p>The criteria include size of cultivation site, number of plants, professional level and type of equipment such as lamps and, hydration systems for indoor cannabis cultivation.</p>
2017	1;2;3	<p><u>Opium act revised in May</u></p> <p>4-fluoroamphetamine was listed as a List I drug.</p>

A.6. Canada

Date	Type	Event
1996	1;2;3;4 5;6;7	<p>Controlled Drugs and Substances Act (CDSA) of 20 of June [In force in May 14, 1997]</p> <p>An Act respecting the control of certain drugs, their precursors and other substances and to amend certain other Acts and repeal the Narcotic Control Act in consequence thereof and Parts III and IV of the Food and Drug Act (parts dealing with the advertisement of controlled substances). The CDSA fulfills Canada's international obligations under international protocols on drugs, such as the Single Convention on Narcotic Drugs, 1961; the Convention on Psychotropic Substances, 1971 and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1988.</p> <p>This Act classified drugs into eight schedules, I to VIII. There are six common offences under it: possession, trafficking, cultivation, importing or exporting and</p>

Date	Type	Event
		<p>"prescription shopping" (obtaining multiple prescriptions by visiting several doctors).</p> <p>The punishment for possession of a substance included in Schedules I (such as Opium and Cocaine) is: (a) guilty of an indictable offence and liable to imprisonment for a term not exceeding seven years; or (b) is guilty of an offence punishable on summary conviction and liable for a first offence, to a fine not exceeding one thousand dollars or to imprisonment for a term not exceeding six months, or to both, and for a subsequent offence, to a fine not exceeding two thousand dollars or to imprisonment for a term not exceeding one year, or to both.</p> <p>If the subject-matter of the offence is a substance included in Schedules II (such as cannabis and its derivatives), the maximum imprisonment time is reduced to five years. If the offence is regarding a substance included in Schedule II in an amount that does not exceed the amount set out for that substance in Schedule VIII (30g of cannabis and 1g of cannabis resin) is guilty of an offence punishable on summary conviction and liable to a fine not exceeding one thousand dollars or to imprisonment for a term not exceeding six months, or to both.</p> <p>If the subject-matter of the offence is a substance included in Schedule III (such as amphetamine), the maximum imprisonment is reduced to three years.</p> <p>The punishment for seek or obtain a substance is imprisonment and the maximum penalties are similar to the possession of such substance.</p> <p>The punishment for trafficking illicit drugs in Schedules I and II is life imprisonment; the penalties for the possession of drugs in Schedule III imprisonment for a term not exceeding ten years if guilty of an indictable offence or imprisonment for a term not exceeding eighteen months if guilty of an offence punishable on summary conviction. If the subject-matter of the offence is a substance included in Schedule IV the maximum penalties are reduced to three years and 1 year respectively.</p> <p>The maximum penalty for importing, exporting and producing is life imprisonment. There is a reduction for the production of cannabis, where the imprisonment should not exceed seven years.</p> <p>The Act states that "a reference to a controlled substance includes a reference to ... anything that contains or has on it a controlled substance and that is used or intended or designed for use ... in introducing the substance into the human body" (section 2(2) b). This interpretation suggests that syringes containing drugs controlled by the Act themselves become controlled.</p> <p>1;2;3; 5;6;7</p> <p><i>The Policy and Research Unit of the Canadian Centre on Substance Abuse, which had begun to research and document alternatives to drug prohibition, was closed in 1996 as part of the demise of the Drug Strategy.</i></p>
1997	1;2;3;4	<p><u>Regulations amending the Narcotic Control Regulations, SOR/ 97-227 of 22nd April</u> Regulations Respecting the Control of Narcotics according to the CDSA.</p>

Date	Type	Event
	1;2;3;4	<p><u>Controlled Drugs and Substances Act (Police Enforcement) Regulations, SOR/ 97-234 of 22nd April</u> Regulates the police enforcement of the Controlled Drugs and Substances Act</p>
	1;2;3	<p><u>Regulations Exempting Certain Precursors and Controlled Substances from the Application of the Controlled Drugs and Substances Act, SOR/97-229 of 22nd April</u> A licensed dealer is authorized to have a narcotic in his possession for the purpose of exporting the narcotic from Canada if he has obtained the narcotic pursuant to these Regulations.</p>
	1;2;3	<p><u>Regulations Amending the Food and Drug Regulations (994), SOR/97-228 of 22nd April</u></p>
1998	31C; 32C; 33C	<p><u>Industrial Hemp Regulations, SOR/98-156 of 12th March</u> Regulates industrial hems, referring to the plants and plant parts of the genera Cannabis, the leaves and flowering heads of which do not contain more than 0.3% THC w/w, and includes the derivatives of such plants and plant parts. It also includes the derivatives of non-viable cannabis seed. It does not include plant parts of the genera Cannabis that consist of non-viable cannabis seed, other than its derivatives, or of mature cannabis stalks that do not include leaves, flowers, seeds or branches, or of fibre derived from those stalks. (chanvre industriel). These Regulations apply to: (a) the importation, exportation and possession of industrial hemp; (b) the production, sale, provision, transport, sending or delivering of industrial hemp. These Regulations do not apply to: (a) the importation, exportation, sale or provision of whole industrial hemp plants, including sprouts, or the leaves, flowers or bracts of those plants; (b) the importation, exportation, sale, provision or production of any derivative or product made from whole industrial hemp plants, including sprouts, or the leaves, flowers or bracts of those plants; or (c) the importation, exportation, sale or provision of any derivative of seed, viable grain or non-viable cannabis seed, or product made from that derivative, if the derivative or product contains more than 10 µg/g THC.</p>
	1C; 2C; 3C	<p><u>Regulations Amending the Narcotic Control Regulations SOR/98-158 of 12 March</u> Sub-item 1(8) of Schedule II of the Controlled Drugs and Substances Act is replaced by the following: (8) Non-viable Cannabis seed, with the exception of its derivatives</p>
	1;2;3	<p><u>Order Amending Schedules III and IV to the Controlled Drugs and Substances Act (1109), SOR/98-173 of 19th March.</u> This amendment adds the following substances to Schedule III to the Controlled Drugs and Substances Act (CDSA): Flunitrazepam (5-(o-fluorophenyl)- 1,3-dihydro-1-methyl-7-nitro-2H-1,4-benzodiazepin-2-one); 4-hydroxybutanoic acid (GHB) and any salt thereof. The addition of these two substances to Schedule III of the CDSA prohibits the possession, possession for trafficking, trafficking, importation, exportation, possession for exporting and production of these substances. It also provides enforcement measures to the police including search, seizure and detention.</p>

Date	Type	Event
	1;2;3	<p><u>Order Amending Schedules I and IV to the Controlled Drugs and Substances Act (1075), SOR/99-371 of 29th September.</u> Health Canada adds Remifentanyl to Schedule I and Olanzapine to Schedule IV, and excludes Nalmefene and Naltrexone from Schedule I of the CDSA.</p>
	1;2;3	<p><u>Order Amending Schedules I and IV to the Controlled Drugs and Substances Act (1209), SOR/99-421 of 21st October</u> Health Canada corrects errors introduced by SOR/97-230 and identified by the Standing Joint Committee for the Scrutiny of Regulations, in the CDSA entries for Levargorphan and Clotiazepam.</p>
2000	1C; 2C	<p><u>Benzodiazepines and Other Targeted Substances Regulations SOR/2000-217 of 1st June</u> The following persons may possess a targeted substance (a controlled substance included in Schedule 1, or a product or compound that contains the controlled substance): (a) a person who requires the targeted substance for their business or profession and is: (i) a licensed dealer acting in accordance with their licence, (ii) a pharmacist, or (iii) a practitioner who is registered and entitled to practise in the province in which the practitioner has such possession; (b) a practitioner who is registered and entitled to practise in a province other than the province in which the practitioner has such possession and such possession is for emergency medical purposes only; (c) a hospital employee or a practitioner in a hospital and such possession is for the purposes of and in connection with such employment; (d) a person who has obtained the targeted substance for their own use or for the benefit of another person or an animal under their care; (e) a person who has imported the targeted substance in accordance with section 68 for the person's own use or for the benefit of another person or an animal under their care; (f) a person who is employed as an inspector, an analyst, a peace officer, a member of the Royal Canadian Mounted Police or a member of the technical or scientific staff of a department of the government of Canada or of a province and such possession is for the purposes of and in connection with such employment; or (g) a person who, pursuant to a permit issued under Part 7, is responsible for the targeted substance while it is in transit or in transshipment in Canada. For the purpose of these Regulations, a targeted substance is destroyed when it is altered or denatured to such an extent that its consumption is rendered impossible or improbable.</p> <p><i>R. v. Parker</i> (Ontario Court of Appeal) <i>R. v. Parker</i> was the landmark decision that first invalidated the cannabis prohibition. However the declaration of invalidity was suspended for one year. It concerned the case of an epileptic who could only alleviate his suffering by recourse to cannabis. The Court found that the prohibition on cannabis was unconstitutional as it did not contain any exemption for medical use.</p>
2001	1C; 2C; 31C; 32C; 33C	<p><u>Marihuana Medical Access Regulations, SOR/2001-227 of 14th June</u> These Regulations contain two main components: authorizations to possess and licences to produce dried marihuana for a medical purpose. An authorization to possess marihuana for medical purposes will be issued by Health Canada. The application requirements to obtain an authorization to possess</p>

Date	Type	Event
		<p>will depend on the category under which the request is made. The requirements will range from minimal, in the case of terminal illness situations, to more substantive for non-terminal illness cases where little or no conclusive scientific evidence exists.</p> <p>A licence to produce marihuana will be issued to either the patient or a representative that the patient designates in the application. A representative cannot be designated by more than one patient. One site may, however, be used for the production of marihuana under a maximum of three separate licences. The licence will authorize and specify the production of a maximum number of plants, and whether they will be grown outdoors or indoors. This will allow flexibility when choosing a growing location and will accommodate the different yields produced by indoor and outdoor growing methods. The number of plants will be dependent upon the patient's daily dosage identified by the physician.</p> <p>The licence will also allow for storage and, in the case of a designated person, transportation of marihuana to the patient if the production is conducted at a site other than the patient's residence.</p> <p>Within the full set of approved pharmaceutical treatments available to patients there are two commercially available drugs related to marihuana: MARINOL®, which contains chemically synthesized THC; and CESAMET®, a synthetic cannabinoid. In Canada, both drugs are approved for the treatment or management of severe nausea and vomiting associated with cancer chemotherapy and may be prescribed by physicians. MARINOL® has also been approved for the treatment of anorexia associated with weight loss in patients with AIDS. Both drugs are taken orally and must be prescribed by a physician.</p> <p><i>Marihuana for Medical Purposes: Therapeutic Claims and Uses</i></p> <p>Claims of potential therapeutic benefit of marihuana are usually for symptomatic relief rather than for curative relief. The main claimed therapeutic uses are:</p> <p>Nausea and vomiting: For the relief of nausea and vomiting associated with cancer and AIDS therapies; Wasting syndrome: To stimulate appetite and produce weight gain in AIDS and cancer patients; Multiple sclerosis: For the relief of muscle pain and spasms; Epilepsy: To help reduce the frequency of epileptic seizures.</p> <p>Much of the evidence of the potential therapeutic effects of smoked marihuana is heavily anecdotal. Scientific studies supporting the safety and efficacy of marihuana for therapeutic use are often inconclusive.</p>
5;6;7		<p>City Council approved the <i>Four Pillar Approach of prevention, treatment, harm reduction</i> and enforcement to Drug Problems in Vancouver.</p>
4		<p><u>An act to amend the criminal code (organized crime and law enforcement) and to make consequential amendments to other acts of 18th December</u></p> <p>Providing broader measures for investigation and prosecution in connection with organized crime by expanding the concepts of criminal organization and criminal organization offence and by creating three new offences relating to participation in the activities—legal and illegal—of criminal organizations, and to the actions of their leaders.</p>

Date	Type	Event
		The enactment also amends the Mutual Legal Assistance in Criminal Matters Act to allow the enforcement in Canada of search warrants, restraint orders and orders of forfeiture from foreign jurisdictions.
2002	1;2;3 1;2;3 5	<p><u>Youth Criminal Justice Act</u></p> <p>An Act in respect of criminal justice for young persons and to amend and repeal other Acts.</p> <p><u>Order Amending Schedules V and VI to the Controlled Drugs and Substances Act, SOR/2002-361 of 24th September</u></p> <p><i>Needle distribution</i> replaced needle Exchange started in 1989 in British Columbia</p>
2003	1;2;3 1;2;3 1;2;3 1;2;3 1C; 2C;	<p><u>Regulations Amending the Food and Drug Regulations (Zolpidem) SOR/ 2003-36 of 30th January</u></p> <p>The reference to Zolpidem and its salts in Part I of Schedule F to the Food and Drug Regulations is repealed.</p> <p>The main purpose of these amendments is to add the drug zolpidem to the list of substances controlled under the Controlled Drugs and Substances Act (CDSA) and the Benzodiazepines and Other Targeted Substances Regulations (Targeted Substances Regulations). This regulatory initiative will bring the scheduling of zolpidem in Canada in line with the requirements of the United Nations Convention on Psychotropic Substances, 1971 (1971 Convention).</p> <p><u>Order Amending Schedules II and V to the Controlled Drugs and Substances Act, SOR/2003-32 of 30th January</u></p> <p><u>Order Amending Schedules IV to the Controlled Drugs and Substances Act, SOR/2003-37 of 30th January</u></p> <p><u>Order Amending Schedules III to the Controlled Drugs and Substances Act, SOR/2003-412 of 11th December</u></p> <p>Amineptine is added to Schedule III of CDSA.</p> <p><i>R. v. J.P.</i> (Ontario Court of Appeal)</p> <p>On May 16, 2003, the Ontario Superior Court found the accused party, "J.P.", not guilty. The appellate court ruled that the Medical Marijuana program's rules do not form a basis for the prosecution of J.P., as they do not themselves contain any effective prohibitions.</p> <p>The Crown appealed the decision of the Ontario Superior Court to the Ontario Court of Appeal. But in October 2003, the Court of Appeal upheld the invalidity of</p>

Date	Type	Event
		<p>represent a concerted effort to break the cycle of drug use and criminal recidivism. They focus on facilitating treatment for drug-involved offenders who meet specified criteria and provide an alternative to incarceration by offering an opportunity to complete a drug treatment program. These special courts take a comprehensive approach intended to reduce the number of crimes committed to support drug dependency through judicial supervision, comprehensive substance abuse treatment, random and frequent drug testing, incentives and sanctions, clinical case management, and social services support.</p>
2005	1;2;3	<p><u>Order Amending Schedules I and III to the Controlled Drugs and Substances Act (Methamphetamine), SOR/2005-235 of 10th August</u></p> <p>Methamphetamine moves to Schedule I from Schedule III.</p>
	1;2;3	<p><u>Order Amending Schedules I to the Controlled Drugs and Substances Act (Methamphetamine), SOR/2005-271 of 31st August</u></p> <p>Ketamine is removed from the Food and Drug Regulations and added to Schedule I of the CDSA.</p>
	5	<p>Vancouver approved <i>Preventing Harm From Psychoactive Substance Use</i>, a plan identifying stigma as a key driver of socialization. The city also called for the government of Canada consider regulatory alternatives to drug prohibition for currently illegal drugs.</p>
2007	1C; 2C;	<p><i>R. v. Long</i> (Ontario Court of Justice)</p> <p>The Ontario Court of Justice held in <i>R. v. Long</i> that the prohibition in the <i>Controlled Drugs and Substance Act</i> against the possession of cannabis were unconstitutional in the absence of an accompanying constitutionally acceptable exemption for medical cannabis. The current exemption depended on the government supplying cannabis, which it was only doing as a result of the policy. However, the policy did not impose a legal obligation upon the government to supply cannabis to those who needed it for medical purposes. The court held that without such an obligation, the exemption was constitutionally unacceptable, as access to marijuana depended on the implementation of a policy rather than the application of a law. If the government wanted to control the supply of cannabis, it had to impose an obligation upon itself to supply marijuana to eligible persons. The court held that if the government was obliged by law to supply cannabis in accordance with the policy, the exemption would be constitutionally acceptable.</p> <p>A notice of appeal was filed by the Crown on 23 August 2007 and the verdict was overturned by Superior Court judge in 2008. The case was sent back to Ontario Court of Justice for retrial.</p>
	1C; 2C;	<p><i>R. v. Bodnar/Hall/Spasic</i> (Ontario Court of Justice)</p> <p>In <i>R. v. Bodnar/Hall/Spasic</i>, the Ontario Court of Justice followed the <i>Long</i> decision, holding that the prohibition against possession of cannabis in the <i>Controlled Drugs</i></p>

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	1,2,3 5,6,7	<p><i>and Substances Act</i> is invalid and of no force or effect. Hon. Justice Edmonson stated in his ruling that "there is no offence known to law that the accused have committed."</p> <p><u>Anti-drug strategy (2007), of October</u></p> <p>The federal government released the <i>National Anti-Drug Strategy</i>, which removed harm reduction and increased the focus on enforcement. Mandatory minimum sentencing, even for minor drug crimes, and a fear-based public education campaign for youth, were part of the new strategy.</p> <p>The proposed legislation would have dealers facing one-year mandatory prison sentences if they are operating for organized crime purposes, or if violence is involved. Dealers would also face a two-year mandatory jail sentence if they are selling to youth, or dealing drugs near a school or an area normally frequented by youth. Additionally, people in Canada who run a large cannabis grow operation of at least 500 plants would risk facing a mandatory two-year jail term. Maximum penalties for producing cannabis would increase from 7 to 14 years</p>
2008	33C	<p><i>Sftekopoulos v. Canada</i> (Federal Court of Canada)</p> <p>As of 10 January 2008, Justice Barry Strayer of the Federal Court of Canada struck down the federal regulations concerning the growing of medical cannabis by licensed producers. Prior to the case, a producer was prohibited from growing for more than one person. The Marijuana Medical Access Regulations require all medical cannabis users to obtain their prescription from a limited number of sources: Personally grown; Produced by a designated individual for that person; From a licensed dealer.</p> <p>At the time, there was only a single licensed dealer in Canada, which grew in Manitoba and processed in Saskatchewan, making it difficult to access. A multitude of users requested a single designate, of which all applications were denied except for one. This regulatory structure was, they argued, a violation of the Section 7 of the <i>Canadian Charter of Rights and Freedoms</i>, because it forced sufferers to go through illicit channels to obtain medical cannabis, to which they were legally entitled. Thus, they were being forced to break the law in order to ensure their constitutionally-protected right to "security of the person."</p> <p>The court agreed with this reasoning and struck down subsection 41(b.1) as being of no force or effect.</p>
2009	1C; 2C 31C; 32C	<p><u>Regulations Amending the Marihuana Medical Access Regulations, SOR/2009-192 of 14th May</u></p> <p>Paragraph 41(b.1) of the Marihuana Medical Access Regulation is replaced by the following: (b) if the designated person would become the holder of more than two licences to produce; or</p>

Date	Type	Event
		set out for that sub- stance in Schedule VII; (c) importing or exporting any substance included in Schedule IV or V; and (d) producing any substance included in Schedule IV.
2011	1C; 2C; 31C;32C ;33C	<p data-bbox="357 577 715 604"><i>R. v. Mernagh</i> (Ontario Superior Court)</p> <p data-bbox="357 622 1112 817">On April 12, 2011, Justice Donald Taliano found that Canada's Marijuana Medical Access Regulations (MMAR) and "the prohibitions against the possession and production of cannabis contained in sections 4 and 7 respectively of the <i>Controlled Drugs and Substances Act</i>" are "constitutionally invalid and of no force and effect." The government was given 90 days (until 11 July) to fill the void in those sections, or the possession and cultivation of cannabis would become legal in all of Ontario. This includes the non-medical use of the drug.</p> <p data-bbox="357 835 1112 1346">The mid-July deadline was extended when federal government lawyers argued that current cannabis laws and regulations should stay in place until Ontario's highest court could hear the appeal, which took place over the 7th and 8 May 2012. In granting the deadline extension, the Court of Appeal noted that "The practical effect of the decision if the suspension were permitted to expire on 14 July would be to legalize cannabis production in Ontario, if not across Canada. The decision released February 1, 2013 states that the Ontario's Appeals Court has upheld current cannabis laws in Canada, overturning the decision made by the lower court judge in 2011. In the decision, the appeals court ruled that the lower court judge had made several errors in striking down Canada's cannabis laws, citing an absence of a constitutional right to use medical cannabis. The court also stated that Mernagh failed to provide evidence from a doctor that he met the criteria for the use of medical marijuana. The decision was met with criticism and disappointment from many in Canada, including the Canadian HIV/AIDS Legal Network. After the ruling, they restated Mernagh's (and many other medical marijuana users in Canada) issue with the current cannabis rules: "Allowing the current regulations to stand unchanged will leave many people with serious health conditions without effective access to legal authorization to use cannabis as medicine."</p>
5		<p data-bbox="357 1406 1112 1458"><i>Supreme Court Judgement: Canada (Attorney General) v. PHS Community Services Society</i> SCC 44 of 30th September</p> <p data-bbox="357 1509 1112 1561">The judgement of the Supreme Court of Canada ordering the federal Health Minister to keep 'Insite', a safe site for injection drug users in Vancouver, BC, alive.</p> <p data-bbox="357 1583 1112 1722">The Court concluded that since 'Insite' had irrefutably saved lives and improved the health of drug users, to close it was a violation of the Charter of Rights and Freedoms, Canada's highest law. It found Health minister decision to shutter the facilities to be "...arbitrary, undermining the very purposes of the CDSA, which include public health and safety. It is also grossly disproportionate."</p>

Date	Type	Event
		<p>The MMPR will authorize three key activities: the possession of dried marihuana for medical purposes by individuals who have the support of an authorized health care practitioner; the production of dried marihuana by licensed producers; and the sale and distribution of dried marihuana by licensed producers and hospitals to individuals who can possess it. Licensed producers will be subject to regulatory requirements related to security; good production practices; packaging, labelling and shipping; record keeping and reporting; and distribution. They will also be subject to Health Canada inspections.</p> <p>Upon coming into force, the MMPR will allow the holder of an authorization to possess or an individual who had obtained a medical declaration from their medical practitioner under the MMAR to obtain their supply of marihuana from a licensed producer by registering as a client with that producer. The MMAR will be repealed on March 31, 2014. All authorizations and licences issued under the MMAR will no longer be valid after this date. However, individuals will be able to use their expired authorizations to possess to register as a client with a licensed producer for up to one year after their date of issue, unless a period of usage of less than 12 months had been indicated in the medical declaration. No new Personal Use Production Licences (PUPs) and Designated-Person Production Licences (DPPLs) will be issued if the application is submitted after September 30, 2013. Similarly, existing PUP and DPPL holders will not be able to apply to change the location of their production site or to increase the daily amount as of this date.</p> <p>Issues: In 2001, the Marihuana Medical Access Regulations (MMAR) were promulgated. The MMAR set out a scheme for Canadians to access marihuana for medical purposes, if they have the support of a medical practitioner.</p> <p>Over the years, stakeholders expressed various concerns about the Marihuana Medical Access Program (the Program or MMAP). Program participants generally disliked the application process, and the fact that only a single strain of marihuana was available for purchase from Health Canada. Other stakeholders expressed health, safety, and security concerns relating to the production of marihuana by individuals in homes and communities. Their specific concerns related to the potential for diversion of marihuana to the illicit market due to limited security requirements, the risk of violent home invasion by criminals attempting to steal marihuana, fire hazards due to faulty or overloaded electricity installation to accommodate high intensity lighting for its cultivation, and humidity and poor air quality. Individual producers who were ill may have been more vulnerable to health risks associated with mould. As more individuals received licences to produce marihuana for medical purposes, the overall risk to Canadians increased.</p> <p>Rapid growth in the number of authorized users also had significant implications for the administration of the Program, leading sometimes to long application processing times and higher Program administration costs for Health Canada.</p>

Date	Type	Event
	<p>1C;2C 31C;32; 33C</p> <p>1C;2C 31C;32;</p> <p>5;6;7</p>	<p>Finally, over the years, Canadian courts found various parts of the MMAR to be invalid, resulting in changes that affected program delivery.</p> <p><u>Regulations Amending Certain Regulations Relating to Marihuana for Medical Purposes, SOR/2014-51 of 7th March</u></p> <p>The main objectives of the Regulations Amending Certain Regulations Relating to Marihuana for Medical Purposes are to: enhance Health Canada's ability to monitor compliance and support the enforcement of obligations arising from the repeal of the MMAR; allow for licensed producers who do not wish to state their site address on their product labels to be able to do so; and better align the wording in the MMPR in respect of pest control products that will be permitted for use on marihuana for medical purposes with the provisions of the PCPA.</p> <p><i>Federal Court Decision: Allard v. Canada 2014 FC 280 of 31st March on Medical Cannabis consumption and production.</i></p> <p>"The Applicants who, as of the date of this Order, hold a valid Authorization to Possess pursuant to section 11 of the Marihuana Medical Access Regulations, are exempt from the repeal of the Marihuana Medical Access Regulations and any other operation of the Marihuana for Medical Purposes Regulations which are inconsistent with the operation of the Marihuana Medical Access Regulations, to the extent that such an Authorization to Possess shall remain valid until such time as a decision in this case is rendered and subject to the terms in paragraph 2 of this Order."</p> <p>"those individuals who are authorized to possess or produce marihuana, as of the relevant dates, may continue to do after March 31, 2014, until their constitutional rights with respect to the MMPR are decided at trial."</p> <p>Vancouver established the <i>Mayor's Task Force on Mental Health and Addictions</i></p>
2015	<p>1C; 2C;</p> <p>1;2;3</p> <p>1;2;3</p>	<p><i>R v. Smith</i> (Supreme Court of Canada)</p> <p>The Supreme Court ruled in this case that the restrictions limiting authorized patients to dried marijuana under the Marijuana Medical Access Regulations (MMAR) and the MMPR were unconstitutional</p> <p><u>Order Amending Schedules I to the Controlled Drugs and Substances Act (Tapendol), SOR/2015-190 of 16th July</u></p> <p><u>Order Amending Schedules I to the Controlled Drugs and Substances Act (Synthetic Cannabinoids), SOR/2015-192 of 16th July</u></p>
2016	1C; 2C;	<i>Allard et al v. Regina</i>

Date	Type	Event
	<p>1C; 2C; 3C</p>	<p>Injunctive relief granted by Judge Manson to those previously licensed under Marijuana Medical Access Regulations (MMAR) within certain dates. Medical Marijuana program's rules declared unconstitutional by BC Superior Court, declaration suspended for 6 months to allow government time to respond to ruling and reincorporate personal production.</p> <p><u>Access to Cannabis for Medical Purposes Regulations (SOR/2016-230)</u></p> <p>Whereas a provision of the annexed Regulations provides for the communication of information obtained under the Regulations to certain classes of persons referred to in paragraph 55(1)(s) of the <i>Controlled Drugs and Substances Act</i> and, in the opinion of the Governor in Council, it is necessary to communicate that information to those classes of persons for the proper administration or enforcement of the Act and the Regulations.</p> <p>Subject to the other provisions of these Regulations the following persons may possess fresh or dried marijuana or cannabis oil: (a) a person who has obtained the substance for their own medical purposes or for those of another individual for whom they are responsible (i) from a licensed producer, (ii) from a health care practitioner in the course of treatment for a medical condition, or (iii) from a hospital, under subsection 65(2.1) of the <i>Narcotic Control Regulations</i>; (b) a person who requires the substance for the practice of their profession as a health care practitioner in the province in which they have that possession; or (c) a hospital employee, if they possess the substance for the purposes of and in connection with their employment.</p> <p>The following persons may possess cannabis: (a) a person who has obtained cannabis for their own medical purposes by producing it as a registered person; (b) a person who has obtained cannabis — for their own medical purposes or for those of another individual for whom they are responsible — from a designated person; (c) a person who requires cannabis for their business as a licensed producer and who possesses it in accordance with section 22; (d) a person who requires cannabis for their business as a licensed dealer; (e) a person who is employed as an inspector, an analyst, a peace officer, a member of the Royal Canadian Mounted Police or a member of the technical or scientific staff of a department of the Government of Canada or of the government of a province and who possesses the cannabis for the purposes of and in connection with their employment; or (f) a person who is acting as the agent or mandatary of a person whom they have reasonable grounds to believe is a person referred to in paragraph (e) and who possesses the cannabis for the purpose of assisting that person in the administration or enforcement of any Act or its regulations.</p>
	5,6,7	<p><i>Canadian Drugs & Substances Strategy</i> returns to the evidence-based “four-pillar” approach of prevention, treatment, harm reduction and enforcement.</p>

A.7. Australia

Date	Type	Event
1967	3	<p>Narcotic Drugs Act 1967 (No. 53, 1967) of 30 May</p> <p>Implements, in Australia, the Single Convention on Narcotic Drugs 1961. The Narcotic Drugs Act defines 'drug' by reference to the Convention, which is reproduced in the First Schedule to the Act. It establishes a system of licensing and permits for the manufacture and distribution of drugs covered by the Single Convention in order to monitor domestic drug movements. These licences and permits are additional to any required under State law.</p>
	2;3	<p>Customs Act 1901 (No. 54 of 1967) of 30 May</p> <p>The Commonwealth also revised offences and penalties relating to narcotic drugs under the Customs Act 1901. In 1967, the penalty for the unlawful importation of narcotics was increased from a maximum of \$1,000 or two years imprisonment to \$4,000 or 10 years imprisonment. As well, a new offence of being in possession of a narcotic without reasonable excuse on a ship or plane was created, with the onus of proof being reversed and placed on the defendant. Other offences introduced were importing or attempting to import narcotics or being in possession of unlawfully imported narcotics.</p>
1976	3	<p>Psychotropic Substances Act 1976</p> <p>The Psychotropic Substances Act 1976 was enacted in response to the United Nations Convention on Psychotropic Substances 1971 and provides for controls over certain psychotropic substances entering Australian ports or airports in the course of consignment from one country outside Australia to another country outside Australia.</p>
1985	1;2;3	<p><i>National Drug Strategy Committee (NDSC)</i></p>
	5;6;7	<p>Established to lead policy development in conjunction with the Ministerial Council on Drug Strategy (MCDS). Included a mixture of prohibition and a stated objective of harm reduction.</p>
1986	6	<p><i>Methadone endorsed as an appropriate treatment intervention</i> and first guidelines approved by the Australian Health Ministers' Conference.</p>
	7	<p><i>Two research centres established:</i> National Drug and Alcohol Research Centre (NDARC) in Sydney and National Drug Research Institute (NDRI) (then called the National Centre for Research into Prevention of Drug Abuse) in Perth.</p>
1989	5	<p><i>First Needle Syringe Program (NSP) opened - Darlinghurst (Nov).</i></p>
	3	<p>Therapeutic Goods Act 1989 (No. 21 of 1990) of 17 January 1990</p> <p>The object of this Act is to provide, so far as the Constitution permits, for the establishment and maintenance of a national system of controls relating to the quality, safety and efficacy of therapeutic goods that:</p>

Date	Type	Event
	5	(a) are used in Australia, whether those goods are produced in Australia or elsewhere; or (b) are exported from Australia. National HIV/AIDS Strategy launched – emphasis on prevention and harm reduction. Commonwealth Government funded first injecting drug user organisations.
1990	3	Crimes (Traffic in Narcotic Drugs and Psychotropic Substances) Act 1990 Commonwealth Government ratified the United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (1988).
1993	1;2;3 5;6;7 5 7 6	Re-launch of NCADA as the National Drug Strategy (NDS). The final Australian jurisdiction implemented Needle Syringe Programs making it a national policy. National drug education campaign on amphetamines: “Speed catches up with you.” First National Policy on Methadone adopted.
1994	1C;2C;3C 31C; 33C; 5	<i>National Cannabis Task Force</i> Recommended that possession, unsanctioned cultivation, sale and non-therapeutic use of cannabis in any quantity should remain illegal but that all Australian jurisdictions consider removing criminal penalties for personal use/possession of cannabis. <i>First National Hepatitis C Action Plan</i> developed and endorsed by the Australian Health Ministers’ Advisory Council. Strategy aimed to minimise transmission and the social and personal impact of Hepatitis C (Oct).
1995	3	<u>Criminal Code Act 1995</u> It codifies the general principles of criminal responsibility under laws of the Commonwealth. It contains all the general principles of criminal responsibility that apply to any offence, irrespective of how the offence is created.
1996	5	<i>Australian National Council on AIDS and Related Diseases (ANCARD)</i> replaced the Australian National Council on AIDS and was established as the top advisory body to the federal government on HIV and AIDS.
1997	1;2;3 5;6;7	<i>The National Illicit Drug Strategy Tough on drugs</i> Launched in November 1997 by the Prime Minister, Mr Howard, as part of the <i>National Drug Strategy (NDS)</i> . The Strategy is based on a harm minimisation approach which refers to policies and programs aimed at

Date	Type	Event
	<p data-bbox="252 1160 284 1187">5;6</p> <p data-bbox="252 1384 268 1411">5</p>	<p data-bbox="359 488 1061 573">reducing drug-related harm. This approach recognises the need to seek a balance between supply reduction, demand reduction and harm reduction strategies.</p> <p data-bbox="359 591 1061 734">Supply reduction measures aim at intercepting illicit drugs at borders and within Australia, and are implemented by the Commonwealth law enforcement agencies. The Australian Federal Police maintains a webpage with information about its drug operations as well as drug awareness generally.</p> <p data-bbox="359 752 1061 779">Demand reduction measures cover the following five priority areas:</p> <ol data-bbox="395 788 1061 976" style="list-style-type: none"> 1. Treatment of users of illicit drugs, including identification of best practice. 2. Prevention of illicit drug use. 3. Training and skills development for front line workers who come into contact with drug users or at risk groups. 4. Monitoring and evaluation, including data collection. 5. Research. <p data-bbox="359 994 1061 1137">Harm reduction includes a range of targeted strategies designed to reduce drug-related harm for particular individuals and communities. It aims to reduce the harmful consequences of drugs when consumption cannot be further reduced. Examples of harm reduction activities are methadone treatment and needle syringe programs.</p> <p data-bbox="359 1155 1061 1361"><i>Non-Government Organisation Treatment Grants Program (NGOTGP)</i> commenced as part of the Tough on Drugs strategy. NGOTGP aimed to fund the establishment, expansion, upgrading and operation of non-government alcohol and other drug treatment services. A community Partnerships Initiative (CPI) aimed to prevent and reduce drug related harm through projects that promoted and supported the establishment of community driven drug illicit prevention and early intervention initiatives (Nov).</p> <p data-bbox="359 1379 1061 1464"><i>National Heroin Signature Program</i> commenced to physically and chemically profile border seizures of heroin and their packing materials to generate strategic and tactical forensic drug intelligence.</p>
1998	<p data-bbox="252 1487 268 1514">5</p> <p data-bbox="252 1630 300 1657">1;2;3</p> <p data-bbox="252 1675 300 1702">5;6;7</p> <p data-bbox="252 1720 268 1747">3</p>	<p data-bbox="359 1487 1061 1603"><i>MCDS approved National Heroin Supply Reduction Strategy and National Supply Reduction Strategy for Drugs Other than Heroin</i> which aimed to enhance interdiction at the international border, improve coordination, technology and best practice.</p> <p data-bbox="359 1621 1061 1648"><i>Launch of the Australian National Council on Drugs (ANCD)</i></p> <p data-bbox="359 1720 1061 1805"><i>Rohypnol</i> - more commonly known as the "date rape pill" – was reclassified as a Schedule 8 drug on the National Drugs and Poisons Schedule. This placed it in the same category as heroin, LSD and marijuana. Scheduling decisions</p>

Date	Type	Event
		were made by the National Drugs and Poisons Schedule Committee (NDPSC), an independent expert committee established under provisions of the Therapeutic Goods Act 1989. (Jun).
	6	<i>National Evaluation of Pharmacotherapies for Opioid Dependence (NEPOD)</i> commenced as a three year project. Evaluation aimed to develop and implement a range of effective, evidence-based, best practice pharmacotherapy treatment options for people who were opioid dependent (Jul).
	1;2;3; 5;6;7	<i>National Drug Strategic Framework 1998-99 to 2002-03</i> released (Nov).
	1;2;3; 5;6;7	<i>National Heroin Supply Reduction Strategy</i> and the <i>National Supply Reduction Strategy for Illicit Drugs other than Heroin</i> merged and replaced with <i>National Supply Reduction Strategy for Heroin and other Illicit Drugs</i> (Nov).
1999	6	<i>Naltrexone</i> registered by the <i>Therapeutic Goods Administration</i> for use as part of a comprehensive treatment program for alcohol dependence (Jan).
	7	<i>National School Drug Education Strategy</i> adopted (May).
	5	<i>Australian National Council on AIDS and Related Diseases (ANCARD)</i> replaced by the <i>Australian National Council on AIDS, Hepatitis C and Related Diseases (ANCAHRD)</i> (Sep).
	1;2;3	<i>Council of Australian Government-Illicit Drug Diversion Initiative</i> signed off including an agreement for a nationally consistent approach to the diversion of minor drug offenders to drug education and treatment. (Nov).
	7	<i>The Australian Drug Foundation</i> established Somazone a website designed for and run by youth aged 12-25 (Nov).
	6	<i>Australian Treatment Outcome Study (ATOS)</i> funded to conduct first large-scale prospective study of treatment outcome for heroin dependence to be conducted in Australia. Compared treatments of detoxification, methadone, and residential treatment (including TCs).
	1;7	<i>Drug Use Monitoring in Australia (DUMA)</i> 3 year pilot study commenced to provide measures of drug consumption amongst police detainees and information on current and prior criminal behaviour and treatment utilisation. Pilot sites included Bankstown and Parramatta in NSW, Southport in Qld and East Perth in WA.
2000	5	<i>Launch of first Australian Hepatitis C strategy: National Hepatitis C Strategy 1999-2000 to 2003-2004</i> (Jun).
	3	Buprenorphine (as Subutex®) was registered by the <i>Therapeutic Goods Administration</i> (Oct).

Date	Type	Event
2001	7	<i>National Drugs Campaign 2001 – “Lost Dreams” and “Ad within an Ad”</i> (Mar).
	5	<i>Australia’s first Medically Supervised Injecting Centre</i> commenced as a pilot in Kings Cross, NSW (Mar).
	1;2;3; 5;6;7	<i>National Action Plan on Illicit Drugs 2001 – 2002-03</i> endorsed by the MCDS (Jul).
	6;7	<i>Alcohol Education and Rehabilitation Foundation</i> established to address prevention, treatment, rehabilitation and research into the misuse of alcohol and petrol, paint and glue (Oct).
	3	<i>First National Drug and Poisons Scheduling Committee (NDPSC) conditions placed upon pharmacy Pseudoephedrine.</i> The regulations applied to single active products (i.e. pseudo only) and meant pseudo packs of 60s & 90s were restricted to schedule 4 and pack sizes of 30s were restricted to Schedule 3 or S3R.
2002	3	Proceeds of Crime Act 2002 Adopted with the aim of confiscating the proceeds of crime including current and future benefits that could be derived such as through commercial exploitation of offending (Oct).
	3	<i>A National Working Group on the Diversion of Precursor Chemicals</i> was established to stop over-the-counter medicines being diverted into illicit drug manufacture (Dec).
	1;2;3 7	<i>Australian Illicit Drug Intelligence Program</i> replaced <i>National Heroin Signature Program</i> , which physically and chemically profiled border seizures of heroin, plus cocaine and amphetamine type substances such as MDMA and methylamphetamine.
	1;2;7	<i>The Drug Use Monitoring in Australia (DUMA)</i> pilot program extended, enabling continued monitoring of drug use amongst police detainees at the pilot sites, plus the introduction of three new sites in Brisbane Qld and Adelaide and Elizabeth in SA.
2004	1;2;3; 5;6;7	<i>The National Drug Strategy: Australia’s integrated framework 2004-2009</i> adopted (Jun).
	1C;2C;3C	MCDS endorsed development of a <i>National Cannabis Strategy</i> (Nov).
	1;2;3; 5;6;7	<i>National Indigenous Drug and Alcohol Committee (NIDAC)</i> established as the principal advisory group to the Commonwealth government on Indigenous drug and alcohol issues (Dec).

Date	Type	Event
	5;7	<i>ANEX – Association for the Prevention and Harm Reduction Programs</i> Australia was endorsed by the Australian Needle Syringe Program sector as the national voice and advocate for Needle Syringe Programs and harm reduction.
	1;2; 5;6;7	<i>New national guidelines produced by the Commonwealth Department of Health and Ageing “Psychostimulants - management of acute behavioural disturbances”</i> to assist Australian police services to effectively and safely manage individuals who present with psychostimulant toxicity, and pose a significant risk to themselves or others.
2005	1;2;3; 5;6;7	<p>Law and Justice Legislation Amendment (Serious Drug Offences and Other Measures) Act 2005 of 9th November</p> <p>The SDO Act introduced the model serious drug offences (developed by the then Model Criminal Code Officers' Committee) in Part 9.1 of the Commonwealth Criminal Code Act 1995 (the Criminal Code). The SDO Act also moved existing offences under the Customs Act 1901 for the import/export of controlled substances and placed them in the Criminal Code. This ensured all serious drug offences were in a central statute, keeping the Customs Act as primarily a regulatory statute (Dec).</p>
	7	<i>National Drugs Campaign 2005 – “Speed”, “Ecstasy”, “Marijuana”</i> (Apr).
	1;2;3	<u>The Therapeutic Goods Administration</u> rescheduled Ketamine on the National Drugs and Poisons Schedule from a Schedule 4 to Schedule 8 drug (May). Buprenorphine-naloxone (Suboxone®) registered (Jul).
	5	<i>The second National Hepatitis C Strategy 2005-2008</i> was adopted (Jul).
	3	<i>Project STOP</i> pilot developed in partnership between QLD Police and the Pharmacy Guild of Australia to track sales of pseudoephedrine and prevent their illicit diversion (Oct).
	3	<i>Australian Customs implement Stridor Strike Teams</i> to target illicit drug precursor imports. The teams, comprised of officers from intelligence, investigations and enforcement operations, sought to devise innovative approaches to 'target' development and to provide a more flexible and agile response to illicit drug precursor importations (2005-2007).
2006	3	<i>The Substance Abuse Intelligence Desk</i> was established between the Commonwealth, Northern Territory, South Australian and Western Australian governments in a joint operation designed to reduce cross-border supply of licit and illicit substances (Jan).
	7	<i>National Clinical Guidelines for the Management of Drug Use During Pregnancy, Birth and the Early Development Years of the Newborn</i> released (Mar).

Date	Type	Event
	3 1C;2C;3C 31C;32C; 33C 6;7	<p><i>Pharmaceutical Benefits Scheme</i> introduced restrictions increased on sale of medications containing pseudoephedrine: Products with higher concentrations of pseudoephedrine required a doctor's prescription (Apr). Buprenorphine-naloxone (Suboxone®) made available on the (Apr).</p> <p><i>National Cannabis Strategy 2006-2009</i> endorsed (May).</p> <p>Launch of Headspace, a national program designed to provide information, support and services to young people and their families across Australia for mental health and related substance use problems (Jul).</p>
2007	7 5;6;7 7 7 1;2;3;5	<p>National Drugs Campaign 2007 – “Where’s your head at”? & “Talking with your kids about drugs.”</p> <p>From “GO to WHOA” a new training package on psycho-stimulants was commissioned by the Commonwealth Department of Health and Ageing to increase skills and educate health professionals e.g. GPs and nurses on dealing with psycho-stimulants. The training package devised by Turning Point Drug and Alcohol Centre included face to face sessions and an online portal on psycho-stimulants, pharmacological effects, risks associated with use and ways of responding to psycho-stimulant use (Feb).</p> <p><i>National Cannabis Prevention and Information Centre (NCPIC)</i> set up to educate and train health professionals with the aim of increasing early intervention and reducing cannabis use (Jun).</p> <p><i>Counselling Online service</i> rolled out as a national program, endorsed by the Commonwealth Department of Health and Ageing. The service was operated by Turning Point Alcohol and Drug Centre and provided free drug and alcohol counseling for drug users, family or friends, 24 hours a day, 7 days a week, through an online service (Jul).</p> <p>Coalition Government released “Tough on Drugs” election policy involving compulsory welfare quarantining for people who have been convicted of criminal drug offences involving hard drugs, assistance for jobseekers and uniform national illicit drug offences (Nov).</p>
2008	1;2;3; 5;6;7	<p>First National Corrections Drug Strategy 2006-2009 endorsed (May).</p> <p>MCDS endorsed the First National Amphetamine-Type Stimulants Strategy 2008-2011</p>

Date	Type	Event
	1	<i>The Australian Industrial Relations Commissions</i> made a landmark ruling on “Implementation of random drug testing: use of oral fluids or urine as specimen for testing.” The AIRC was asked to rule on whether it was just to use urine testing instead of oral testing, given the formers wide window of detection and increased potential to detect actions undertaken by employees that may have no consequential impact on employees’ actions at work. The AIRC concluded that given no Australian laboratory has been accredited for urine testing “...the implementation of a urine based random drug testing regime would be unjust and unreasonable” But once accreditation is obtained urine testing could be introduced instead of oral testing (Aug).
	3	<i>The High Court</i> made a landmark ruling when all six judges ruled that the NSW Crime Commission acted improperly when it allowed 6kg of cocaine to be sold on the streets in an undercover drugs operation. The High Court said that such conduct risked endangering the lives of drug users and hence was irreconcilable with state and federal prohibitions on supply (Sep).
	3	<u>TGA</u> ordered that Naltrexone implant pioneer George O’Neil cease production of Naltrexone implants because despite eight years of use he had failed to meet the regulatory standards (Oct).
	5	<i>The ANCD</i> launched a new website to support homelessness services help clients with drug and alcohol problems and called for a much bigger investment and focus on the levels of drug and alcohol issues amongst homeless populations and the identification of optimum service responses (Oct).
2009	5;6	<i>National Amphetamine Type Stimulant Training Program</i> , funded by the Australian Government Department of Health and Ageing, commenced. The training is provided by ANEX in the aim of increasing the capacity of service providers to meet the needs of people who use ATS, providing earlier intervention and increasing referrals to support services (Mar).
	5	New Ministerial Advisory Committee formed on Blood Borne Viruses and Sexually Transmitted Infections (Mar).
	7	“Meth website” launched in the aim of helping methamphetamine users self-manage some of the most common meth-related issues. Run by Turning Point Alcohol and Drug Centre the site provides a self-assessment tool, and research-based, practical advice on self-management for methamphetamine users and options for specialist treatment (Mar).
	7	Illicit Drugs in Sport – National Education and Action Plan adopted. The plan uses sports role models (for community education), targeted education programs (for elite athletes, coaches and sports administrators), and funding to help national sporting agencies conduct out of competition illicit drug testing (Jun).

Date	Type	Event
	6	<i>Therapeutic Goods Authority</i> closed a loop hole in a ruling that naltrexone implants could only be used in clinical trials and in cases where it is proven the naltrexone implants meet appropriate quality. This decision blocked all future administration of Western Australia's "naltrexone implant pioneer" Dr George O'Neil unless he obtained regulatory approval for his implants (Jul).
	3	Amendments to the Customs (Prohibited Imports) Regulations 1956 were passed. This prohibited the importation of tablet presses without the permission of the Minister for Home Affairs or an authorised person (Dec).
	6	<i>Addiction medicine</i> recognised as a medical specialty for the purpose of inclusion in the AMC List of Australian Recognised Medical Specialties (Dec).
2010	6	Updated "Guidelines on the management of co-occurring alcohol and other drug and mental health conditions in alcohol and other drug treatment settings" produced for the Commonwealth Government. The guidelines were accompanied by a training package to facilitate their implementation into the workplace (Jan).
	3	Two Serious and Organised Crimes Acts adopted: Crimes Legislation Amendment (Serious and Organised Crime) Acts (No. 1 and No. 2) . Acts strengthened criminal asset confiscation and anti-money laundering regimes, and required individuals suspected of unexplained wealth to demonstrate that it was legally acquired. Acts also strengthened law enforcement powers to investigate organised crime by providing protection for undercover law enforcement officers who infiltrate criminal organizations, implementing model laws for controlled operations, assumed identities and witness identity protection, enhancing search and seizure powers including access to electronic data, and facilitating greater access to telecommunications interception for criminal organisation offences (Feb).
	3	Regulation 4G of the Customs (Prohibited Imports) Regulations 1956 came into effect , prohibiting the importation of tablet presses without the approval from the Minister for Home Affairs or an authorised person (1 Mar).
	5	<i>6th National HIV Strategy 2010-2013, 3rd National Hepatitis C Virus (HCV) Strategy and 3rd National Aboriginal and Torres Strait Islander Blood Borne Viruses and Sexually Transmissible Infections Strategy</i> released. All identified people who inject drugs and people in custodial settings were priority groups in the next period. They recommended that needle and syringe programs be trialed in Australian prisons (28 Mar).
	7	<i>The National Cannabis Prevention and Information Centre</i> launched an Indigenous community project "Cannabis: It's not our culture." The project utilised stories and artwork depicting how cannabis impacts on their communities and potential solutions to cannabis-related issues (Mar).

Date	Type	Event
	3	High Court decision: State of South Australia v Totani & Anor [2010] HCA 39. The High Court, by 6-1 majority, held s 14(1) of the Serious and Organised Crime (Control) Act 2008 (SA) to be constitutionally invalid. By requiring courts to place control orders on members of 'criminal enterprises' without rights to review whether they had ever engaged in criminal conduct or were likely to do so, executive powers were deemed to impinge upon normal judicial procedures (Nov).
	7	<i>Australian National Preventive Health Agency</i> lead Australia's fight against preventable diseases through campaigns targeting obesity, along with alcohol, tobacco and other substance abuse (Nov).
	3	14 new substances added to Schedule 4 of the Customs (Prohibited Imports) Regulations 1956: Acetylcodeine; Acetylmorphine; Alkoxyamphetamine; Alkoxyphenylethylamine; Alkylthioamphetamine1; Amineptine; 5-(2-aminopropyl)-2,3-dihydro-1H-indene; Benzylpiperazine (BZP); 1-(8-Bromobenzo[1,2-b:4,5-b]difuran-4-yl)-2-aminopropane (Bromo-Dragonfly); Codeine-N-oxide; Dimethylamphetamine; Oripavine; 4-methylmethcathinone (4-MMC); and Trifluoromethylphenylpiperazine (TFMPP). Their inclusion increased alignment with existing legislation (e.g. the Poisons Standard or the Criminal Code Act 1995) and addressed an increased market demand for alternative synthetic drugs and drugs marketed as party pills (14 Dec).
	3	<u>Ketamine moved from Schedule 8 to Schedule 4 of the Customs (Prohibited Imports) Regulations 1956 (14 Dec).</u>
	5	<i>First national framework for NSPs released:</i> National Needle and Syringe Programs Strategic Framework 2010-2014. Framework was designed to strengthen the links between services and across states and territories. Seven priorities were identified including: national minimum standards; nationally accredited core training for staff; improved data collection and reporting; and increased availability of injecting equipment (Dec).
2011	1;2;3; 5;6;7	National Drug Strategy 2010-2015 adopted. Strategy maintained the balanced approach between demand reduction, supply reduction and harm reduction, increased acknowledgement of the roles of sectors beyond health and law enforcement, and included for the first time performance measures for assessing progress (Mar).
	3	<u>The Commonwealth Attorney-General's Department listed five additional substances to be subject to the serious drug offences contained in Part 9.1 of the Commonwealth Criminal Code Act 1995</u> (the Code), via interim regulations [Criminal Code Amendment Regulations 2011 (No 1)]: Benzylpiperazine (BZP); 4 - Methylmethcathinone (4-MMC, mephedrone, 'Meow- Meow'); Methcathinone; Ketamine; and Phenylpropanolamine. This is the first time the interim regulations have been utilised (Apr).

Date	Type	Event
	7	<i>First National Drugs Campaign iPhone app developed.</i> App contained facts on drugs and consequences of use and referral numbers for youth and families (Jun).
	3 3C	The Therapeutic Goods Authority scheduled eight synthetic cannabinoids: JWH-018, JWH-073, JWH-122, JWH-200, JWH-250, CP47,497, AM-694 & cannabicyclohexanol. The synthetic cannabinoids, commonly referred to as 'Kronic', 'Spice' and 'Voodoo' etc, were placed on schedule 9 (prohibited substances), thereby banning from 8 July their use for therapeutic purposes (6 Jul).
	1;2;3	<i>High Court ruling: MOMCILOVIC v THE QUEEN & ORS [2011] HCA 34.</i> High court, by majority, upheld the right of the Victorian Court of Appeal to rule that s 5 of the Victorian Drugs Act, which stated that an occupier of premises in which drugs were found was deemed to be in possession of those drugs unless he/she 'satisfies the court to the contrary', was inconsistent with the Victorian Human Rights Charter. The ruling pertained to the case of an alleged trafficker, Ms Vera Momcilovic, section 5 of the Drugs Act and the Victorian Court of Appeal ruling that by reversing the onus of proof (placing a legal burden on the defendant to prove the absence of possession), section 5 could not be interpreted consistently with the presumption of innocence under s 25(1)" of the Charter. The High Court noted "declarations of Inconsistent Interpretation under the Charter play an important role in calling the attention of parliament and the people to laws that may be inconsistent with human rights". It further noted that while such declarations do not affect the validity of legislation, they act as a trigger for parliament to consider whether a particular law should be amended to better protect human rights. The High Court also concluded that the jury had been mis-directed about the interpretation of s 5 and quashed the conviction of Momcilovic and ordered a re-trial (Sep).
	5	<i>Australian Injecting & Illicit Drug Users League (AIVL) launched an Online Vein Care Guide.</i> It seeks to reduce the risk of Blood Borne Viruses (BBV) particularly Hepatitis C that comes from poor vein care: abscesses, scaring etc. It outlines the risks, addresses popular myths, and contains animations on safer injecting practices (Oct).
	3	Regulation 4H of the Customs (Prohibited Imports) Regulations 1956 (the Regulations) came into effect. This prohibited the importation of ice pipes unless permission from the Minister for Home Affairs or his authorised officer has been granted. Under new Regulation 4H, an ice pipe is defined as 'a device capable of being used for administering methylamphetamine, or any other drug mentioned in Schedule 4' and 'that is used to draw or inhale smoke or fumes resulting from heating the drug in the device, in a crystal, powder, oil or base form' (Dec 10).

Date	Type	Event
2012	7	The National Drugs Campaign partnered with the Big Day Out to encourage attendees to 'face facts' about ecstasy. Free branded water was provided and a National Drugs Campaign chill out van. The National Drugs Campaign subsequently partnered with urban music festival Supafest in April/May (Jan).
	3	<u>TGA ruling added methylenedioxypropylvalerone (MDPV), a synthetic stimulant to Schedule 9 (prohibited substances).</u> Ruling came into force 1 May 2012 (Feb).
	3C	<u>TGA ruling added a new group entry to Schedule 9 (prohibited substances) for 'synthetic cannabinomimetics'.</u> The intent was to 'limit the promotion of "new legal mixes" of synthetic cannabinoids that were not already listed' and to provide a safety net "without the need for ongoing urgent scheduling action" (Feb).
	6	The Australian Greens called for dispensing fees for methadone and buprenorphine to be covered by the Pharmaceutical Benefits Scheme, noting that the dispensing fees limit access to many drug users who could benefit from pharmacotherapy treatment (Apr).
	3	The Crimes Legislation Amendment (Powers and Offences) Act 2012 amended the Criminal Code to ensure that substances and quantities that were temporarily prescribed in the Criminal Code Regulations 2002 (interim regulations) now remain subject to the Commonwealth serious drug offences. This included the four drugs Benzylpiperazine (BZP), Ketamine, Methcathinone, 4-Methylmethcathinone (4-MMC) and the precursor Phenylpropanolamine. In accordance with Part 9.1 of the Code the Interim Regulations [Criminal Code Amendment Regulations 2011 (No 1)] expired on 9 April 2012. The Act also amended the Customs Act to ensure powers available to Customs officers to seize illicit drugs at the border are consistent and efficient (Apr 4).
	3	Regulation 4H of the Customs (Prohibited Imports) Regulations 1956 (the Regulations), Prohibiting the importation of ice pipes, republished as Regulation 4I (Aug).
	5	<i>New set of recovery principles launched:</i> 'Principles of Recovery Academy Australia.' This outlined that 'recovery embraces and transcends both harm reduction and abstinence-based approaches' and that 'recovery does not necessarily require abstinence.' It also notes that ', that 'there are multiple paths to recovery including peer support, mutual aid groups and professional treatments' and self-recovery, but that not all substance use is problematic or harmful (Sep).

Date	Type	Event
	7	<i>The Australian Drug Foundation launched a “get the effects by txt!” drug SMS information service, to which people can text a drug name and receive a health and safety message (Nov).</i>
	3	Crimes Legislation Amendment (serious drugs, identity crime and other measures) Bill 2012 adopted. Amended the Criminal Code Act 1998 to transfer the lists of illicit substances from the Criminal Code to the regulations and allow for future listing of drugs, plants and precursors as prohibited substances to be done by regulation. It also repealed existing mechanisms for listing additional prohibited substances: providing a single emergency determination mechanism and increasing the length of the determination from 56 days to 12-18 months. The stated goal was to ensure the Commonwealth drug laws were up to date and allowed for flexible, quick responses to new and emerging drug threats (Nov).
	6	Naloxone was listed on the Pharmaceutical Benefits Scheme (PBS) (Nov).
	3;4	<u>The Crimes Legislation Amendment (Organised Crime and Other Measures) Bill</u> introduced to strengthen the Commonwealth’s unexplained wealth regime (Dec).
	7	Australian Injecting and Illicit Drug Users League (AIVL) launched a new section on its website which aims to raise awareness of Blood Borne Viruses (BBVs), such as hepatitis C, hepatitis B and HIV, Sexually Transmitted Infections (STIs) and Safe Sex practices among young people.
2013	3	<p>The Criminal Code Amendment Regulation 2013 (No. 1) and the Crimes Legislation Amendment (Serious Drugs, Identity Crime and Other Measures) Act 2012 made the following amendments to Part 9.1 of the Criminal Code and the Criminal Code Regulations:</p> <ul style="list-style-type: none"> • the lists of drugs, plants and precursors were transferred to the Criminal Code Regulations 2002 to provide for quicker listing of substances. The controlled drug list and border controlled drug list were also updated to reflect current substances of concern in Australia, including new substances and analogues; • conditions and criteria for listing controlled and border controlled substance in regulations were established; • the emergency determination mechanism was improved by extending the listing period to allow for appropriate analysis and testing of substances; & • the criteria that must be satisfied before an emergency determination can be made were refined (May).

Date	Type	Event
	3	<u>The Commonwealth Assistant Treasurer introduced an interim consumer protection ban under the Competition and Consumer Act 2010 (Cth)</u> prohibiting the retail sale of 19 psychoactive products and substances nationally for a period of 120 days. This ban was introduced to fill a gap in coverage in some states and territories where Schedule 9 of the Poisons Standard had not been fully implemented. It followed the introduction of an interim ban that was put in place by the New South Wales Minister for Fair Trading. Interim ban was extended for another 30 days but then lapsed on 13 October 2013, when the Assistant Treasurer determined that a permanent ban was not required (Jun 19).
2014	4	<i>Joint Task Force (Task Force Eligio), established to focus on high-threat money laundering.</i> The taskforce was led by the Australian Crime Commission and involved the Australian Federal Police and the Australian Transaction and Reporting Centre (AUSTRAC), in partnership with State and Territory police, Australian Customs and Border Protection Service, Commonwealth regulatory and law enforcement partners and international agencies including the United States Drug Enforcement Administration (Jan).
	3	Criminal Code Regulations amend to add four NBOMe substances, also known as “synthetic LSD”, to the. This will increase the penalties for importation of these products from a fine to between two years prison and life imprisonment (Mar).
	5	New strategies adopted: Seventh National HIV Strategy; Fourth National Hepatitis C Strategy; and Second National Hepatitis B Strategy (Jul).
	3C; 31C; 32C,33C	Commonwealth Government states that it would not oppose state or territory moves to decriminalise cannabis for medicinal purposes (Aug).
	3C; 31C; 32C,33C	Prime Minister Tony Abbot backs legalisation of medical cannabis and states that “no further testing should be needed on the drug if it is legal in similar jurisdictions” (Sep).
	5;6	<i>New Alcohol and Other Drugs (AOD) Peaks Networks formed.</i> The network comprised all state and territory AOD peaks and provided a conduit for immediate access to AOD services in all Australian jurisdictions (including treatment & harm reduction services) and means to support information exchange, collaboration, sector development, and quality improvement (Sep).
	3C; 31C; 32C,33C	COAG meeting led to a national agreement to support a trial of medical cannabis in NSW (Oct).

Date	Type	Event
	5	The National Indigenous Drug and Alcohol Committee (NIDAC) abolished (Dec).
2015	3	<p>The Crimes Legislation Amendment (Psychoactive Substances and Other Measures) Bill 2014 adopted.</p> <p>The bill amends the Criminal Code Act 1995 (the Code) to ban the importation of all substances that have a psychoactive effect that are not otherwise regulated or banned. It was intended to fill the regulatory gap before new psychoactive substances are controlled under other parts of the Criminal Code or the Customs (Prohibited Imports) Regulations. The maximum penalty for an offence will be imprisonment for five years, 300 penalty units (currently equivalent to \$51,000) or both. The measures will enter into force when it is proclaimed or six months after Royal Assent (Feb 23).</p>
	7	The Centre of Research Excellence in Mental Health and Substance released the first interactive drug education game for teenagers: "Pure Rush." The program aims to inform adolescents about the potential harms of cannabis, methamphetamine, hallucinogens and pills through a game format (Feb).
	5	A range of new hepatitis C treatments were added to the pharmaceutical benefits scheme (PBS), including Viekira Pak® with a cure rate of more than 90%. Treatments became available May 1 2016 (Mar).
	3;6	<u>The Therapeutic Goods Administration (TGA)</u> announced its decision to place "naloxone when used for the treatment of opioid overdose" on Schedule 3, commencing 1 Feb 2016, thereby allowing over-the-counter (OTC) purchase. This made Australia the second country, after Italy (in 1995), to have naloxone formally available OTC. Key reasons for the decision were: 1) that naloxone is a well-tolerated life-saving medicine with minimal side effects; 2) international experience and the outcomes of a trial conducted in the Australian Capital Territory support the view that easier availability of naloxone is likely to decrease the proportion of opioid overdoses which result in death in Australia; and 3) that there are few inherent risks with use of naloxone (Nov 4).
	7	<i>National Ice Action Strategy released:</i> with objective to prevent people from using ice in the first place, help those who are using to stop, and to reduce the harms the drug is causing to users and the community. Strategy had five key areas: support for families and communities; targeted prevention; investment in treatment and workforce; focused law enforcement; and better evidence and research. A new Ministerial Drug and Alcohol Forum would be developed in 2016 to oversee the National Ice Strategy and National Drug Strategy: consisting of health and justice Ministers with responsibility for alcohol and drug policy who would report directly to COAG (Dec 11).

Date	Type	Event
	7	<i>A one stop portal for evidence-based drug prevention resources and information – Positive Choices</i> – was launched. The site was developed at the National Drug and Alcohol Research Centre in collaboration with the National Drug Research Institute to provide a central access point for school communities: teachers, students and parents. It includes drug education resources, fact sheets, webinars and games (Dec).
2016	3C 31C; 32C;33C	<p>Narcotic Drugs Amendment Act 2016 of 29th February</p> <p>The Federal Parliament of Australia passed this landmark legislation to allow the controlled cultivation of cannabis in Australia for medicinal and related scientific purposes via a national licensing scheme. The act come into effect on 30 Oct 2016, with a detailed regulatory framework enabling applications for licenses and permits for the cultivation, production and manufacture of medicinal cannabis products. Key rules included that first set of cultivation or manufacture licenses would be issued for one year only and that licensees must be judged as 'fit and proper person' including having previous business experience, no convictions for a serious offence in the last 5 years against Federal and State/Territory law and being a person of good repute.</p> <p>Prior to the amendment, cannabis cultivation for medicinal and related scientific purposes was prohibited.</p>
	3C 31C; 32C;33C	<p>Narcotic Drugs Regulation 2016</p> <p>The Narcotic Drugs Regulation 2016 carries out, and gives effect to, the regulatory framework for licensing the cultivation of cannabis and the production of cannabis and cannabis resins for medicinal and scientific purposes, as well as in relation to the manufacture of drugs as provided for under the Narcotic Drugs Act 1967.</p>
	3C 31C; 32C;33C	<p>Narcotic Drugs Legislation Amendment Act 2016</p> <p>Allows for the protection of sensitive law enforcement information that ODC is required to consider when assessing cannabis licence applications. This means law enforcement agencies can be confident that information provided by them to help assess applications will not be released, which would potentially compromise police operations.</p>
	3C 31C; 32C;33C	<p>Narcotic Drugs (Licence Charges) Act 2016</p> <p>Enables ODC to accept payments for the annual charge applicable to cannabis licence holders. Annual charges are used by ODC to fund unannounced inspections and other compliance functions.</p>
	3C 31C; 32C;33C	<p>Narcotic Drugs (Licence Charges) Regulation 2016</p> <p>Puts into place the regulatory licence charges for licences relating to medicinal cannabis, commercial cannabis research and non-commercial cannabis</p>

Date	Type	Event
	3C 31C; 32C;33C 3 3 5;6;7	<p>research as provided for under the Narcotic Drugs (Licence Charges) Act 2016.</p> <p><i>The Office of Drug Control (ODC)</i> established in the Commonwealth Department of Health to regulate and provide advice on the import, export and manufacture of controlled drugs as well as the domestic cultivation of medicinal cannabis. Key roles: to administer the Narcotic Drugs Act 1967 and parts of the Customs (Prohibited Imports) Regulations 1956 and the Customs (Prohibited Exports) Regulations 1958 that relate to drugs (Feb 15).</p> <p><u>Therapeutic Goods Administration (TGA) rescheduling</u> of naloxone commenced enabling purchase of naloxone over-the-counter in pharmacies (S3) (Feb 1).</p> <p><i>Australian Criminal Intelligence Commission</i> was established following the merge of the Australian Crime Commission (ACC) and CrimTrac (Jul 1).</p> <p>The Senate passed a <i>motion</i> led by Greens Leader Richard Di Natale calling on the Federal Government to address the rising rates of harm associated with drug use by implementing and appropriately resourcing evidence-based harm reduction policies, including:(i) greater access to needle and syringe programs across the country with an urgent roll-out of trials inside prisons, (iii) promoting awareness of the life-saving opioid reversal drug Naloxone, and highlighting its availability over the counter in pharmacies, and(iv) working with state and territory governments to cease the use of drug sniffer dogs at festivals and urgently introduce trials of pill testing for the upcoming festivals season. The motion passed the Senate without objection from Labor or Liberal Senators (Aug).</p>
2017	3C	<p>Therapeutic Goods Order No. 93 (Standard for Medicinal Cannabis) of 21 March</p> <p>This order establishes a standard for medicinal cannabis products. The order is necessary in the absence of any international quality standard applying to medicinal cannabis products at the time of making the order.</p> <p>The Australian Government is responsible for regulating the quality of therapeutic goods, including medicinal cannabis products. This is principally achieved by specifying ministerial standards for the manufacture of those products, and otherwise applying default standards specified in international pharmacopoeias.</p> <p>The order contributes to the safety and efficacy of medicinal cannabis products by ensuring that these products are manufactured uniformly according to a quality standard. Standardisation is necessary to assure medical practitioners and patients that medicinal cannabis products will be manufactured to a consistent and reproducible quality. This will enable</p>

Date	Type	Event
		reliable interpretations to be made by medical practitioners as to the efficacy of medicinal cannabis products in clinical settings.
2018	3C	<p><u>Narcotic Drugs (Licence Charges) Amendment (Cannabis) Regulations 2018 of 15 March</u></p> <p>These regulations amend the Narcotic Drugs (Licence Charges) Regulation 2016 to provide for a small increase in the licence charges imposed on cannabis licences to reflect the 2016 agreed cost recovery arrangement.</p>

B. Coding template

This template is the base for the Católica Illicit Drug Policy Index (CATÓLICA-IDPI) and was used for the leximetrics coding. All the sub-categories were coded with values belonging to the interval [0 – 1]. The score of each category is the simple average of the scores of each sub-category; the score for each dimension is the simple average of the scores of each category.

Cannabis

1- Consumption

1.1 - Maximum consequence
 Non-addict, 1st time
 Non-addict, *n* time
 Addict, 1st time
 Addict, *n* time
 Occupations/professions
 Place
 1.2 - Exemption of sanction
 Treatment
 Exemption of sanction
 1.3. Allowance for therapeutic/medicinal cannabis

2 - Possession

2.1. Detention Threshold
 Quantities
 Place restrictions
 Place allowances
 Recidivism
 Therapeutic/medicinal cannabis
 2.2. Type of Procedure Threshold
 Quantities

Place
 Recidivism
 2.3. Maximum Consequence - Small Quantities
 Non-addict, 1st time
 Non-addict, *n* time
 Addict, 1st time
 Addict, *n* time
 2.4. Exemption of sanction
 Treatment
 Exemption of sanction
 2.4. Maximum Consequence - Large Quantities
 Maximum Penalty - Large Quantities

3- Traffic

31- Cultivation

31.1. Detention Threshold
 Quantities
 Place allowances
 Club allowances
 Recidivism
 Therapeutic/medicinal cannabis
 31.2. Non-individual Cultivation
 Public Cultivation
 Private Corporate Cultivation
 Export Cannabis Plant
 31.3. Consequence for Individual Cultivation
 Maximum Penalty - Small Quantities

32- Production

32.1. Consequence for Production
 Inindividual Production
 Non-Inividual Production

33- Distribution

33.1. Detention Threshold
 THC level
 Place allowances
 Therapeutic/medicinal cannabis
 33.2. Consequence for Supply
 Maximum Penalty
 Recidivism
 Addiction
 Aggravation Penalties
 Alliviation Penalties
 33. 3. Consequence for supply for consumption
 Maximum Penalty - Small Quantities

4 - Money laundering

This variable was disregarded, given that laws coded for money laundering within national legislative timelines are not issued to address the illicit drugs problem, but to safeguard against terrorism and threats to national security.

5 - Harm Reduction

5.1. Needle and Syringe Program

Availability

Price

Prescription Need

5.2. Additional harm reduction programs

Vaccination

Routine Testing

Drug Consumption Rooms

Street Level

Driving

6-Treatment

6.1. Substitution Treatment

Availability

Price

Prescription Need

6.2. Psychosocial Treatment

Availability

Price

Restriction

6.3. Detoxification (or other) Treatment

Availability

Price

Restriction

7- Prevention

7.1. Systematic Interventions

Schools

Recreational Settings

Prisons

Specific Groups

Hard Drugs**1- Consumption**

1.1 - Maximum consequence
 Non-addict, 1st time
 Non-addict, *n* time
 Addict, 1st time
 Addict, *n* time
 Occupations/professions
 Place
 1. 2 - Exemption of sanction
 Treatment
 Exemption of sanction

2 - Possession

2.1. Detention Threshold
 Quantities
 Place restrictions
 Place allowances
 Recidivism
 2.2. Type of Procedure Threshold
 Quantities
 Place
 Recidivism
 2.3. Maximum Consequence - Small Quantities
 Non-addict, 1st time
 Non-addict, *n* time
 Addict, 1st time
 Addict, *n* time
 2.4. Exemption of sanction
 Treatment
 Exemption of sanction
 2.4. Maximum Consequence - Large Quantities
 Maximum Penalty - Large Quantities

3- Traffic**31- Cultivation**

31.1. Detention Threshold
Quantities
Place allowances
Club allowances
Recidivism
31.2. Non-individual Cultivation
Public Cultivation
Private Corporate Cultivation
Export
31.3. Consequence for Individual Cultivation
Maximum Penalty - Small Quantities

32- Production

32.1. Consequence for Production
Individual Production
Non-Individual Production

33- Distribution

33.1. Detention Threshold
Place allowances
33.2. Consequence for Supply
Maximum Penalty
Recidivism
Addiction
Aggravation Penalties
Alliviation Penalties
33. 3. Consequence for supply for consumption
Maximum Penalty - Small Quantities