



Home Office

Knowledge and
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Mr Martin Crook
Via email to: [request-693163-
f9fb033b@whatdotheyknow.com](mailto:request-693163-f9fb033b@whatdotheyknow.com)

2 December 2020

Dear Mr Crook

Freedom of Information request (our ref: 60476): internal review

Thank you for your email of 10 November 2020 in which you asked for an internal review of our response to your Freedom of Information (FOI) request. Your request of 23 September 2020 asked for four pieces of evidence regarding cannabis. Your request can be viewed in full at **Annex A**.

I have now completed the review and have assessed the substance of the response provided to you. I can confirm that I was not involved in the initial handling of your request.

The FOI response answered your questions in full and provided links to published information. A full copy of the response can be found in **Annex B**.

The review is based on your internal review request which can be found in full at **Annex C**.

I have carefully considered your comments and consulted with the responding unit. I note from your internal review request that you have not stated which aspect(s) of your original response you were not content with. Instead, your internal review request appears to disagree with the policy position regarding cannabis. The remit of an internal review is to review the handling of the initial FOI request. I have reviewed the original response that was provided to you. I am satisfied that the original response provided a detailed explanation in answer to all of the questions raised in your initial request, and that your request was answered in full.

As the information you have requested is already in the public domain, the original response should have advised you that section 21 of the Act applied. Under section 21 of the Act, public authorities are not obliged to re-issue information where it is already reasonably accessible. I note that links were provided to you in your original response.

This completes the internal review by the Home Office.

Yours sincerely

S Hunter

Information Rights Team

Switchboard 020 7035 4848

Email FOIRequests@homeoffice.gov.uk

Annex A – Original request (dated 23 September 2020)

Dear Home Office,

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

1. FOUNDATION EVIDENCE for the claim that all genus of cannabis meet the currently accepted criteria for a schedule 1 substance in its raw form.
2. FOUNDATION EVIDENCE for the claim that cannabinoid preparations meet the currently accepted criteria for a schedule 1 substance.
3. FOUNDATION EVIDENCE for claim that cannabis is a 'controlled' substance in the UK and who is making that claim of control.
4. FOUNDATION EVIDENCE for what is considered misuse of raw cannabis and its various preparations.

Further Clarification:

What I mean by foundation evidence is the empirical evidence which demonstrates that cannabis meets the criteria for the schedule 1 status as legislated for (schedule 1 drugs, substances, or chemicals are defined as drugs with no currently accepted medical use and high potential for abuse), evidence that cannabis is more harmful than substances/chemicals of lower schedules (2-5) and the evidence you hold from the ACMD which justifies the class B penalty classification.

Yours faithfully,

Martin Crook

Annex B – Original response (dated 21 October 2020)

Serious & Organised
Crime Group,
2 Marsham Street
London
SW1P 4DF

Tel: 020 7035 4848
Fax: 020 7035 4745
www.homeoffice.gov.uk

Dear Mr Crook

21st October 2020
equest-693163-f9fb033b@whatdotheyknow.com

Thank you for your email of 23 September 2020 in which you ask a series of questions regarding cannabis. Your request has been handled as a request for information under the Freedom of Information Act 2000 (FOIA). This response will answer each of your questions in turn.

I confirm that the Home Office holds the information that you have requested. We believe that the information is already reasonably accessible to you, but we have also set out information which might be of use to you below.

1. FOUNDATION EVIDENCE for the claim that all genus of cannabis meet the currently accepted criteria for a schedule 1 substance in its raw form.

Cannabis is a Class B controlled drug under Part II, Schedule 2, of the Misuse of Drugs Act 1971 ("the 1971 Act"). It is also listed in Schedule 1 to the Misuse of Drugs Regulations 2001 ("the 2001 Regulations") and designated under the Misuse of Drugs (Designation) (England, Wales and Scotland) Order 2015 (2015 Order).

The 2001 Regulations provide access to controlled drugs for legitimate medicinal purposes (and exceptionally for industrial purposes) under the 1971 Act. Drugs are placed into one of five Schedules to the 2001 Regulations. The Schedule into which a drug is placed is based on an assessment of its medicinal or therapeutic usefulness, the need for legitimate access as well as its potential for harm when used. The Schedule primarily dictates the extent to which it is lawful to import, export, produce, possess, supply and administer. It imposes requirements around prescribing, record keeping, labelling, destruction, disposal and safe custody.

Evidence and advice received by the government on the harms associated with cannabis as well as its potential for therapeutic use are available in the public domain on gov.uk. In particular, we would like to draw your attention to the following sources.

The government received advice on cannabis in 2018 as part of work commissioned by the then Home Secretary, Rt Hon Sajid Javid MP, which led to changing the law to enable prescription of cannabis-based products for

medicinal use in humans ('CBPMs'). The commission from the then Home Secretary is available at: <https://www.gov.uk/government/speeches/home-secretary-statement-on-medical-use-of-cannabis>.

The first part of the review commissioned the then Chief Medical Officer ('CMO') for England and Chief Medical Adviser to the UK Government, Professor Dame Sally Davies, to carry out a review of the therapeutic and medical benefits of cannabis-based products. In her review, Dame Sally stated that:

"Cannabis has many active chemicals and only cannabis or derivatives produced for medical use can be assumed to have the correct concentrations and ratios. Using other forms, such as grown or street cannabis, as medicine for therapeutic benefit is potentially dangerous. The evidence that cannabis and some of its derivatives can be addictive and harmful has been known for some time and is not disputed by recent science, so I believe the reasons it is a controlled drug in the UK stand."

Her report goes on to highlight that:

"Grown cannabis has over 100 active drugs, which can have a wide variety of concentrations and ratios creating different and often severe side effects. Most important are two drugs: tetrahydrocannabinol usually shorted to THC, and cannabidiol. THC has the great majority of the effect including harmful effects on the brain; cannabidiol to some extent counteracts this. Because different forms of grown cannabis have different concentrations and ratios of these drugs, grown or street cannabis cannot safely be substituted for medicinal cannabis."

Dame Sally's review is available at: <https://www.gov.uk/government/publications/cannabis-scheduling-review-part-1>

In accordance with the second part of the then Home Secretary's 2018 commission, the Advisory Council on the Misuse of Drugs (ACMD) provided advice to the government on the scheduling of cannabis-derived medicinal products, in which it also discussed the use of raw cannabis and cannabis-based preparations for therapeutic use. The ACMD referenced the CMO's report, stating:

"The CMO's report states that "using other forms, such as grown or street Cannabis, as a medicine for therapeutic benefit is potentially dangerous". The ACMD agrees that raw Cannabis (including Cannabis-based preparations) of unknown composition should not be given the status of medication. Prescribers, patients, regulators and policy-makers must have confidence in the effectiveness, composition and consistency of Cannabis-derived medicinal products to ensure patient safety. Cannabis-derived medicinal products should meet defined safety and quality assurance standards to ensure that they do not put

patients at risk of harm. Risks to patients may arise from impurities and adulterants, and variability in the composition of active constituents.”

Following receipt of advice from the ACMD, the government legislated to introduce a definition of CBPMs in the 2001 Regulations and placed substances meeting this definition in Schedule 2 to the 2001 Regulations on 1 November 2018. This legislation is available at legislation.gov.uk.

In reference to the harms associated with cannabis, the CMO noted in her 2018 review that:

Evidence of harm has been extensively covered by the Advisory Committee [sic] on Misuse of Drugs (ACMD). I see no reason to revisit this; cannabis is an addictive and harmful drug.

Previous publications from the ACMD detailing the harms associated with cannabis are in the public domain. These include “The classification of cannabis under the Misuse of Drugs Act 1971”, published in 2003 and available at:

<https://www.gov.uk/government/publications/the-classification-of-cannabis-under-the-misuse-of-drugs-act-1971-2002>

and “Cannabis classification and public health”, published in 2008 and available at:

<https://www.gov.uk/government/publications/acmd-cannabis-classification-and-public-health-2008>

Most recently, the harms associated with cannabis were commented on by Dame Carol Black in part 1 of her Independent Review of Drugs, commissioned by the Home Office and published in February 2020. Dame Carol stated that:

After heroin and crack cocaine, cannabis is the most common drug that results in people seeking treatment (around 25,000 people in 2017/18). Cannabis poses a large number of health risks, including psychological and respiratory disorders, particularly given recent increases in potency.

Dame Carol’s review is available at:

<https://www.gov.uk/government/publications/review-of-drugs-phase-one-report>.

2. FOUNDATION EVIDENCE for the claim that cannabinoid preparations meet the currently accepted criteria for a schedule 1 substance.

The answer to question 1 details advice received by the government, which outlines the harms associated with cannabis and concerns around the use of raw, street and grown cannabis (and cannabis based preparations). As detailed in the answer to question 1, following receipt of the ACMD's advice, the government decided to place products meeting the definition of a CBPM in Schedule 2 to the 2001 Regulations.

3. FOUNDATION EVIDENCE for claim that cannabis is a 'controlled' substance in the UK and who is making that claim of control.

Whether a drug is a controlled substance in the UK, and the class or schedule in which it is placed is determined by legislation and in particular the 1971 Act and the 2001 Regulations.

Details of the class and schedule of cannabis under the 1971 Act and 2001 Regulations respectively are in the public domain, available at [legislation.gov.uk](https://www.gov.uk/legislation). There are also publications that will assist you in this regard and they include those at:

<https://www.gov.uk/government/publications/controlled-drugs-list--2> and

<https://www.gov.uk/government/publications/cannabis-cbd-and-other-cannabinoids-drug-licensing-factsheet>.

4. FOUNDATION EVIDENCE for what is considered misuse of raw cannabis and its various preparations.

Cannabis is a controlled drug under the 1971 Act and what is considered misuse of raw cannabis and its various preparations is therefore a question of law. Details of what constitutes unlawful activity in relation to cannabis is in the public domain and the relevant legislation is accessible at [legislation.gov.uk](https://www.gov.uk/legislation). In addition, the following publication should assist you: <https://www.gov.uk/government/publications/cannabis-cbd-and-other-cannabinoids-drug-licensing-factsheet>. This states that:

Cannabis is a Class B controlled drug under Part II, Schedule 2, of the Misuse of Drugs Act 1971 (MDA 1971). It is also listed in Schedule 1 to the Misuse of Drugs Regulations 2001 (MDR 2001) and designated under the Misuse of Drugs (Designation) (England, Wales and Scotland) Order 2015 (2015 Order). As such, it is unlawful to possess, supply, produce, import or export this drug except under a Home Office licence. It is also an offence to cultivate any plant of the genus Cannabis except under a Home Office licence.

"Cannabis-based products for medicinal use in humans" ("CBPM") - a defined category of cannabis, cannabis resin, cannabiol and cannabiol derivatives - are listed in Schedule 2 to the MDR 2001 and removed from designation under the 2015 Order.

If you are dissatisfied with this response you may request an independent internal review of our handling of your request by submitting a complaint within two months to foirequests@homeoffice.gov.uk, quoting reference

60476. If you ask for an internal review, it would be helpful if you could say why you are dissatisfied with the response.

As part of any internal review the Department's handling of your information request would be reassessed by staff who were not involved in providing you with this response. If you were to remain dissatisfied after an internal review, you would have a right of complaint to the Information Commissioner as established by section 50 of the FOIA.

Yours sincerely

Annex C – Internal Review request (dated 10 November 2020)

Dear Home Office,

Please pass this on to the person who conducts Freedom of Information reviews.

I am writing to request an internal review of Home Office's handling of my FOI request 'Evidence Pertaining To Charges Under MODA 1971'.

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

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

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

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

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

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

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

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

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

The Advisory Council on the Misuse of Drugs (ACMD) review of the classification of cannabis concluded that 'the high use of cannabis is not associated with major health problems for the individual or society', the criteria required by the MoDA. However, the ACMD report continued, 'cannabis is not a harmless substance' which would imply that any substance with a degree of possible harm could be prohibited. Putting aside the

evident harms caused by substances such as alcohol, tobacco and caffeine, this would also surely include substances such as sugar?

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

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

A full history of my FOI request and all correspondence is available on the Internet at this address: https://www.whatdotheyknow.com/request/evidence_pertaining_to_charges_u_9

Yours faithfully,

Martin Crook

Annex D - Complaints procedure

This completes the internal review process by the Home Office. If you remain dissatisfied with the response to your FOI request, you have the right of complaint to the Information Commissioner at the following address:

The Information Commissioner
Wycliffe House
Water Lane
Wilmslow
Cheshire SK9 5AF

<https://ico.org.uk/make-a-complaint/>