

International Harm Reduction Conference
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*Compassion Club: An Unsanctioned Model of Community-Based
Medical Cannabis Distribution
Presented by: Rielle Capler*

My presentation is going to focus on the present context of compassion clubs, the principles upon which they are based, how they self-regulate, and their future in providing access to cannabis to those in medical need.

Present Context of Compassion Clubs

I'd like to start with a story from the USA, in recognition that this panel is called "Medical Marijuana in North America".

Last week, the US *Food and Drug Administration* declared that cannabis has no medicinal value. This claim is contrary to the findings from the *National Institute of Science*, and was made without any new evidence to support it.

The *FDA* used their declaration to justify keeping cannabis as *Schedule 1 Controlled Drug*, a category reserved for substances that are dangerous and have no medicinal value. In effect, the US government is saying cannabis belongs in Schedule 1 because they say so. And being a Schedule 1 drug gives the go-ahead to the *US Drug Enforcement Agency* to persecute medical cannabis users and dispensaries, even in the 11 states where medical cannabis is legal under state law.

As an aside, next week, the *US DEA* will be holding its international drug enforcement conference in Montreal. For the first time ever it is being held in Canada, normally it is held in South America. A counter-

conference with incredible participants will also be taking place at the same time.

Regardless of the *DEA* and *FDA*, cannabis has been used as a medicine safely and effectively for thousands of years.

It is a medicine known to relieve pain and nausea, to increase appetite, and reduce inflammation and muscle spasms; it is a medicine that alleviates the debilitating side-effects of potentially harmful and addictive pharmaceutical drugs, or allows one to reduce or cease their use altogether; it helps people with withdrawal symptoms from alcohol, and from more harmful street and prescription drugs; it is a medicine that uplifts the spirits, gives energy, and increases overall sense of well-being.

If you, or somebody you know and love, has Cancer, HIV/AIDS, Hep C, MS, Arthritis, chronic pain, or a substance addiction, or any other critical or chronic illness, you would probably want then to have access to this medicine. You would probably also want them to have access to the highest quality medicine, with ease and safety, at a low cost, and without facing criminal sanctions.

This is a tall order in a climate of cannabis prohibition

And although we don't often think of cannabis in terms of harm reduction because of its low toxicity, like other substances that are deemed illegal, harms are created or exacerbated by the illegal context in which they are used. In turn, it is often these harms that are used as an excuse to continue the prohibition.

It is in this milieu, where politics take precedence over health and human rights, that compassion clubs were born and still exist.

Compassion Club Background and Principles

9 years ago, the *British Columbia Compassion Club Society* opened its doors in Vancouver as Canada's first non-profit community-based, medical cannabis dispensary. Today, it is Canada's largest compassion club, serving about 3500 clients with a broad range of illnesses, though about 60% are people living with HIV/AIDS. Members come from as far as Nunavut to Prince Edward Island, with local members from Shaughnessy (a more affluent neighbourhood) to the Downtown Eastside.

Itself modeled on compassion clubs in California, the *BC Compassion Club* has served as a model for other compassion clubs across Canada. Currently, there are about a dozen well-established compassion clubs in Canada, which together serve about 10,000 people living in this country.

Compassion clubs are based on a philosophy of compassion, social justice, human rights, harm reduction and improved public health

Compassion clubs are civilly disobedient organizations, run by people consciously risking arrest, because they believe it is more important that people have access to their medicine, than to obey an unjust law. In this case, they feel it serves people better to break the law than to obey it.

How Compassion Clubs Operate – The Model

In defiance of prohibition, Compassion Clubs have created a bubble where prohibition appears not to exist. This has been achieved through the careful development and meticulous implementation of operational practices that balance legal concerns around the criminal prohibition of cannabis with the respect for the autonomy of individuals in meeting their healthcare needs and with the concerns of all relevant stakeholders.

These practices are outlined in 2 documents

The first is the *BCCCS Operational Standards for the Distribution of Medical Cannabis*. This was prepared in 2003 when compassion clubs presented themselves to HC's *Medical Marijuana Stakeholder's Advisory Committee* as a viable option for legal medical cannabis distribution.

The second document, *Guidelines for the Community-Based Distribution of Medical Cannabis*, hot off the press, was prepared by Philippe Lucas and myself. There are some copies here, and it will be made available on-line as well.

This document provides base standards for the self-regulation of Compassion Clubs, and formalizes their good reputation. It does not mean to imply that organizations or individuals dispensing cannabis in another context or manner are not fulfilling legitimate purpose as well. It is a model that has, and will continue to evolve with the political and legal climate, new research findings, and stakeholder concerns.

I invite you to visit a compassion club in person if you have the chance. But for now, I'll now give you an overview of the Model, which includes:

- Eligibility Criteria
- Intake and Education
- Cannabis Strains and Products
- Quality Control
- Suppliers
- Natural Healthcare Services
- Community and Social Capital
- Research
- Community Relations

We'll begin at front door. Compassion Clubs have eligibility criteria to ensure medical necessity. Clubs require a confirmation of diagnosis and/or recommendation for the use of cannabis, depending on the medical condition, from a licensed health care practitioner (physician, naturopath or doctor of TCM).

The next step is the intake session where we collect information about our client's health so we can serve them better, and we impart knowledge about cannabis so they can use it more safely and effectively– e.g. about strain selection– which strains are most useful for which conditions and symptoms. And safe smoking techniques to reduce bronchial irritation. We cover much material in 1-on-1 hour and a half intake sessions.

Clubs ensure clients have access to variety of strains and products necessary to treat their diverse symptoms, and that there are knowledgeable staff on hand to advise them.

The price of medicine is kept as low as possible in recognition that poverty often goes hand in hand with many critical and chronic illnesses. We donate cannabis when possible. We believe the costs should be covered as are pharmaceutical drugs used for same purposes

Quality control mechanisms ensure products are safe and clean. This includes standards for cultivation with a preference for organically grown cannabis, and lab testing for biological impurities, heavy metals and pesticides (if one can find a civilly disobedient lab).

We work with as many suppliers as necessary to ensure we have adequate supply of a variety of strains. We have protocols for cultivator interviews, inspections and contracts.

Compassion Clubs act in compliance with all applicable regulations and laws (e.g. zoning, health and safety codes, labour standards, privacy regulations). Our motto is “only break one law at a time”. We also ensure transparency, financial accountability, and client feedback. Our other motto is “to live outside the law, one must be honest.”

There are some special features of clubs.

Some clubs use the sale of cannabis to subsidize natural healthcare services that would otherwise be unavailable to clients. For example, clients at the BCCCS can see doctors of TCM , Herbalist, Nutritionists, counselors, and receive acupuncture and reiki treatments and take yoga classes.

Compassion clubs offer community and social support. For many, Compassion clubs are a haven where people can leave the fear and stigma of being a lawbreaker at the door. Many club members lived in isolation before becoming a part of our community. Some clubs provide a smoking room, social activities, parties, and workshops. Free food and clothes and advocacy around health and disability issues are also available at some clubs.

Some Compassion clubs initiate and participate in research that will add to our knowledge base about how to use cannabis safely and effectively, and will lead to reduced stigma and informed policy decisions. e.g.

- VICS/BCCCS pregnancy and nausea study with researchers at UBC and UVIC.
- Currently 4 clubs are participating in an ethnographic study with Andrew Hathaway at the CAMH – amongst other things looking at social capital provided by clubs.
- Clubs are also working with the CAS on a study looking at legal, ethical and human rights issues relating to access and regulation of cannabis for people living with HIV/AIDS.

Many clubs have established excellent relationships with their communities. They give presentations at health care centers, and at colleges and universities, and host practicum placements for nursing students.

Some have also attained a high enough level of credibility to establish supportive relationships with progressive and courageous businesses and organizations.

Relations with law enforcement and the justice system are an interesting aspect for Compassion Clubs in the context of prohibition.

Though membership at clubs does not confer legal status, police officers often choose to respect club ID cards from well run compassion clubs. In Vancouver, the police have treated the BC Compassion Club with an incredible amount tolerance and discretion.

However, in some areas of the country it would be almost impossible to open up a Club. Contrast police guarding the BC Compassion Club safe after an attempted robbery with a Toronto club being raided at gunpoint by police officers. In Victoria, the Vancouver Island Club was robbed, and instead of going after robbers when the police were called, they raided the club. In New Brunswick, police conducted sting operation on club providing them with falsified documentation.

Charges were dropped on the Toronto club, and the court gave an absolute discharge to the Vancouver Island Club with the judge acknowledging the important work they are doing. The NB club operator was sentenced to one year in jail.

In a case with a BCCCS cultivator, a Provincial court Judge showed great understanding of the situation when he said “The compassion club is akin to a neighbourhood pharmacy, supported by the community and tolerated by the police. The medicine is not going to fall from the sky like manna from heaven.”

It is vital for compassion clubs to have the full protection of the law. But this can only be assured with legal status

The Future of Compassion Clubs in Providing Access to Cannabis to those in Medical Need

The Compassion Club model was built to withstand prohibition, but it would be even better in a regulated environment.

Prohibition presents roadblocks that prevent people from accessing cannabis as a medicine, even at compassion clubs.

Until cannabis is legal, many doctors and their patients will not be open to cannabis, even if it could safely and effectively alleviate their symptoms. Many people simply do not want to break the law.

Until cannabis is legal, we will hear members' stories of having to hide their cannabis from their family and friends, of their fear of having their children taken away or of losing their jobs or homes because of their use of a medicine that relieves their suffering.

Until cannabis is legal, our members, staff and growers will face discrimination, persecution and attack from both law and black market forces. Each and every day the people providing cannabis to those in need are risking arrest and criminal sanctions.

We have asked Health Canada to license compassion clubs, and we will continue to do so. Though they have refused to license us thus far, they have used our existence as an excuse to justify their own.

In court, Health Canada stated that compassion clubs "historically provided a safe source of marijuana to those with medical need" and that "the 'unlicensed suppliers' should continue to serve as the source of supply for those with a medical exemption". We feel it is inappropriate that Health Canada takes our liberty for granted.

Compassion clubs fulfill the role of providing high quality cannabis to those in need. They have done such a good job that they have been

upheld by courts, endorsed by the Senate of Canada, and are supported by their communities.

In fact, most people think they are legal. In that regard, compassion clubs serve as a vision of what medical cannabis dispensaries could look like in a legal environment.

When cannabis is regulated, people will be able to access high quality medicine, with ease, at a low cost and without facing stigma and criminal persecution.

When Cannabis is regulated, people could access the specialized services of compassion clubs and they could also choose to access their medicine through cafes, friends, or personal cultivation.

Currently, the circumstances in which it is legal to access medical cannabis are so severely restricted that it appears a revisit of the Parker decision is in order. And while justice grinds its way through the courts, and the politicians bow to the US war on drugs, the compassion clubs will continue to serve those in need.