



Cannabis Legalization: An Ethnography of the Global Movement and Market Forces

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Abstract

After decades of prohibition and advocacy for law reform, over 60 countries have legalized cannabis. Legal change has transformed cannabis as an almost wholly illicit substance into a licit one undergoing commodification. Regulations have enabled markets to emerge for an array of cannabis products, designed for medical, ‘wellness’, recreational and industrial use. But an ongoing movement for reform remains. There are campaigns for legalization, accessibility, and regulatory oversight, intertwined with demands for human rights. Meanwhile, aspects of the counterculture that surrounded illicit cannabis still linger. In this thesis, I examine the relationship between the cannabis market and movement, the people behind processes of change and commodification, and the implications of these activities.

I present an ethnographic portrait of both the market and the movement, as they move through different stages of change and development. This is based on multi-sited fieldwork in 11 countries, over 14 months, during which I attended different cannabis events and worked with different people and organizations, using participant observation and interviews. To analyze this data, I turn to Becker’s theory of deviance, Bourdieu’s discussion about ‘rules of the game’, and Abolafia’s concept of ‘markets as cultures’. I build upon, and contribute to, social movement theory, economic anthropology and organizational sociology.

The findings demonstrate parallel sets of ongoing processes – legalization, normalization and commercialization – and their complex effects, which result in processes of commodification. This reform is non-linear and dependent on people, activities, events and networks, but cannot be wholly attributable to legalization. I describe the extent to which the market has been supported by the moral norms of the ongoing advocacy movement and historical elements from the days of the

counterculture. I focus on local and global processes of change and commodification to demonstrate the importance of the relationship, and sustenance, between the movement and market.

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Table of Abbreviations

2-AG	2-Arachidonoylglycerol
API	Active Pharmaceutical Ingredient
CBC	Cannabichromene
CBD	Cannabidiol
CBDA	Cannabidiolic Acid
CBG	Cannabigerol
CBN	Cannabinol
CBV	Cannabivarin
CCIF	Colombia Cannabis Investor Forum
CEO	Chief Executive Office
CND	Commission on Narcotic Drugs
CSA	Controlled Substance Act
DEA	Drug Enforcement Agency
ECDD	Expert Committee of Drug Dependence
ECS	Endocannabinoid System
EU	European Union
FAAH	Fatty Acid Amide Hydrolase
FSA	Food and Safety Administration
FW	First Wednesdays
GACP	Good Agricultural and Collection Practice
GDP	Good Distribution Practice
GMP	Good Manufacturing Practices
GW	GW Pharmaceuticals
IIA	Israel Innovation Authority
INCB	International Narcotics Control Board
LP	Licensed Producer
LSD	Lysergic Acid Diethylamide
LSE	London Stock Exchange
M&A	Mergers and Acquisitions
MAGL	Monoacylglycerol Lipase
MDMA	3,4-Methylenedioxymethamphetamine
MHRA	Medicines and Healthcare products Regulatory Agency
MP	Member of Parliament
MSO	Multi-State Operator
NHS	National Health Services
NSM	New Social Movement Theory
PTSD	Post-Traumatic Stress Disorder
R&D	Research and Development
SAM	Smart Approaches to Marijuana
SSDP	Students for Sensible Drug Policy
THC	Delta-9 Tetrahydrocannabinol
THCA	Tetrahydrocannabinolic Acid
THCV	Tetrahydrocannabivarin
UK	United Kingdom
UN	United Nations
UNODC	United Nations Office on Drugs and Crime
US	United States of America
WHO	World Health Organization

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Chapter 1

Introduction

Introduction

My first visit to a legal cannabis retailer was in Portland, Oregon in May 2016. It was two years after the state legalized cannabis for all purposes. I participated in a ‘VIP Industry Tour’ with people involved in the business. We visited two dispensaries, a cultivation site and an extraction facility. Each dispensary gave us a ‘bag of goodies and swag’. This contained an array of cannabis products and merchandise, including pre-rolled joints, infused sweets and chocolates, T-shirts and stickers.

On the tour bus, some people engaged in business conversations, and, simultaneously, many others were excited to taste their ‘goodies’. It was the first time I had been around adults openly talking about their cannabis consumption and also consuming. The tour bus seemed to be a safe-haven for likeminded people to showcase their involvement with cannabis, professionally and personally.

The next day, we attended an ‘Investor Pitch Forum’. It brought together people involved in cultivation, science and technology, consumer products, advocacy and lobbying, policymaking and research. The forum was full of men in suits. They presented a stereotypical image of professionals discussing the ‘market opportunity of cannacurious consumers’, as Troy Dayton, one of the event organizers, said, by using ‘business experiences, data and advanced technology’.

Striking a different note, in between presentations, speakers enthused the crowd as if it was a political rally. Those that took the stage used words such as ‘bravery’, ‘courage’, and ‘strength’ when describing the decision to invest in or work for a cannabis company. They also used moral phrases such as, ‘fighting the good fight’ and suggested that working within the cannabis industry is ‘the right thing to do’. I naively thought the forum was all about capital, until I participated in

conversations about how capital investment influences the law and impacts the developing structure of the cannabis market. The level of determination amongst the investors and executives to develop the wider ‘cannabis industry’ surprised me.

‘We are here to be part of a larger movement and to have an impact’, Dayton said, addressing the audience. But what was this movement? The more I began to explore what some of my participants call ‘the cannabis industry’, the more complicated the ‘movement’ and its relation to the ‘market’ became. Dayton added, ‘if one person is punished for the plant, it’s not yet an industry, but it is a movement whilst it remains that way’. The relationship between the history of the movement for reform and the economic opportunity represented by the emerging market focused my observations as I began to investigate both the market and the movement.

Historical Context: Prohibition to Legalization

In the United States of America (US), national prohibitions on the cultivation, distribution and consumption of cannabis date back to the early 1900s (Becker 1963). A major legislative shift happened in 1937 when a federal ‘marijuana’ tax was imposed and cannabis distribution was regulated. Then, in 1970, President Nixon declared the War on Drugs, which had global ramifications for the criminalization, stigmatization and prohibition of illegal substances, particularly cannabis. A discriminatory justification for this policy was described in 1994 by Nixon’s Assistant for Domestic Affairs, John Ehrlichman, who said,

We knew we couldn’t make it illegal to be either against the [Vietnamese] war or black [people], but by getting the public to associate the hippies with marijuana and blacks with heroin, and then criminalizing both heavily, we could disrupt those communities...Did we know we were lying about the drugs? Of course we did (Baum 2016: 1).

Cannabis was classified as a Schedule 1 drug in the Controlled Substances Act,

which is the most restrictive of five categories. Nixon created the Drug Enforcement Agency in 1973 to enforce the criminalization of cannabis and other controlled substances. This allowed his administration to organize targeted house raids and to arrest and vilify individuals using cannabis, heroin or other illegal substances (Baum 2016). These policies changed attitudes towards cannabis, demonized its users and criminalized related activity. There was also ‘symbolic shaming’ of cannabis use (Cross 2007) and news channels generated stigma by explaining its ‘dangers’ and ‘immorality’ (Haines-Saah et al. 2014). International institutions supported the goals and methods of the War on Drugs: the United Nations implemented the 1961 Single Convention on Narcotic Drugs (as amended by the 1972 Protocol), the 1971 Single Convention on Psychotropic Substances and the 1988 Single Convention on Illicit Trafficking. According to the International Narcotics Control Board’s 2015 report, these three treaties were the ‘cornerstones’ of the international drugs policy regime, which has not significantly changed since.

During the period in which these international conventions were enacted, a grassroots, anti-prohibition movement to legalize cannabis emerged and led to a series of legal shifts. In the 1970s, Holland diverged from prohibitionist ideologies and permitted medical use of cannabis and implemented harm reduction policies on ecstasy, relying upon local enforcement and agency (Uitermark 2004). From 1973 to 1977, 11 US states decriminalized cannabis possession (Scott 2010). In 1996, California was the first US state to make the use of medical cannabis lawful (Cavedon 2014). Israel, a country that permitted cannabis use for research and scientific purposes from the 1960s, also permitted use of medical cannabis for particular conditions, such as cancer, post-traumatic stress disorder, multiple sclerosis, Parkinson’s, and Crohn’s disease, in the early 2000s (Mechoulam 2015).

Canada legalized the medical use of cannabis in 2001 (Spithoff, Emerson and Spithoff 2015), and became the first G7 country to legalize cannabis for all purposes in 2018 (Sapra 2018). Throughout this time, a counterculture, or subculture, emerged. Giraudo (2020) describes how groups associated with cannabis, such as Rastafaris, hippies, beatniks, jazz and hip hop musicians, and people who cultivated, produced, distributed or consumed cannabis identified as part of a cannabis subculture. There were also marginalized communities, such as Vietnam War veterans, AIDs patients and others who used cannabis for medical purposes. Together, they advocated to destigmatize, and, more recently, to legalize cannabis, despite such behavior being widely regarded as deviant.

Pursuing common interests, these different groups often joined forces to press for legal changes, speaking about cannabis and policy reform using common jargon, acknowledging the ‘medical benefit’ of cannabis, criticizing ‘the injustice of discriminatory policies’ and promoting cannabis as a ‘therapeutic alternative to pharmaceutical drugs’. Throughout the 2000s, these types of coordinated activities and communication led to more laws, which permitted medical use of cannabis in various jurisdictions in Europe and Latin America¹. In the last two decades, businesspeople, researchers, and policymakers have joined activists, marginalized communities, lobbying organizations, and medical patients in advocating measures for reform. At the ‘Investor Pitch Forum’, for instance, there were celebrities, professional athletes, regulators, lawyers, investors, and entrepreneurs, who were not previously involved in the subculture, and now shared a platform with longstanding cannabis advocates and users.

¹ Luxembourg, Belgium, Chile, Denmark, Switzerland, Colombia, Croatia, Brazil, Austria, Mexico, Czech Republic, and Argentina decriminalized cannabis, the UK reclassified cannabis and Portugal decriminalized all drugs.

Prior to 2014, supporters of medical access and social justice formed a core movement for reform. A turning point occurred in 2012 when two US states, Colorado and Washington, and, in 2014, Oregon and Alaska, legalized cannabis for all purposes (Barry and Glantz 2018). This watershed moment marked the emergence of a regulated commercial market. As more businesspeople and investors became involved in the market, new networks formed, along with commercial supply chains. But even people whose involvement was largely commercial were aware of the advocacy efforts still required to make their products available in a majority of the states in the US and in other jurisdictions around the world. My informants described a set of shared factors – a common social and moral cause, a regular series of international events, an illegal product, belief about the benefits of cannabis, the work of advocacy groups and commercial opportunities – all of which drew people in.

My informants also described widespread belief, whatever their commercial interest, that there was a ‘bigger elephant in the room’ – government, rules, regulations and prohibition. The fact of widespread prohibition, and the ongoing restrictions on cannabis products, drew people together behind a common cause for reform, seeking decriminalization and legalization, social justice, economic development and scientific and medical access. Over the last decade, groups have created new connections, supported efforts for reform and contributed to market emergence. This is what Troy Dayton meant by the ‘cannabis movement’, and it is the focus of this thesis.

Commercial activity now influences many elements of the movement’s momentum and market emergence. But, in contrast to rallies in the past,

conferences, such as the ‘Investor Pitch Forum’, bring people together to exchange ideas, learn about both medical and commercial developments, network and fundraise. The largest annual cannabis conference and exhibition, MJ Biz Con, states its aim is ‘to drive deals and forge valuable connections with cannabis professionals in business today’. In 2019, MJ Biz Con brought together over 35,000 people. This figure had septupled in four years. Such exponential growth reflects the rapid increase of interest in the cannabis market.

While I was conducting research, activities supporting legal reform were taking place throughout the world, and several jurisdictions legalized cannabis, and, thus, new markets emerged. More than 80% of the global reform of cannabis legislation has occurred within the last five years. As of December 2021, at least 64 countries² have implemented measures to permit cannabis for medical purposes, and four countries have legalized cannabis for non-medical use³. The rate at which cannabis policies are shifting is notable. This cannot be attributed to independent national agendas. It seems clear that different governments have been inspired by international advocacy, and economic factors, to consider legal reform. As different markets emerge and global supply chains form, there have been ongoing local initiatives, events and interactions influencing the transition of cannabis to a mainstream product. The people, networks and momentum behind this reform are the subject of this thesis.

² Canada, US (37 states), Mexico, Colombia, Peru, Chile, Argentina, Brazil, Paraguay, Uruguay, Ecuador, Panama, Australia, New Zealand, Morocco, Rwanda, Lesotho, Ghana, Zambia, Malawi, South Africa, Zimbabwe, UK, Ireland, Switzerland, Spain, Portugal, Italy, Malta, France, Croatia, Romania, Austria, Czech Republic, Netherlands, Finland, Sweden, Germany, Israel, Lebanon, Poland, Georgia, Estonia, Lithuania, Luxembourg, Denmark, Greece, Norway, Belgium, Estonia, Macedonia, Turkey, Ukraine, Cyprus, Barbados, Bermuda, Jamaica, Saint Vincent and the Grenadines, Vanuatu, San Marino, South Korea, Sri Lanka, Pakistan, and Thailand.

³ Uruguay, Canada, Luxembourg and Malta. There are also 25 states in the US that permit non-medical cannabis use.

I describe and analyze the cannabis movement as a collective of people, organizations and activities that are committed to advocate for and support cannabis legal reform and rights, and usually have personal motives for involvement. Regardless of background and motivation, most of the people involved have a general sense that the movement promotes legal reform, greater social acceptance of cannabis, and the development of the medical and social uses of the plant.

My informants also used the term ‘market’ or ‘industry’ to classify their engagement with cannabis, when they referred to the more obviously commercial activities involved in cultivating, producing, distributing, researching and marketing cannabis products. I approach the cannabis market as the people, businesses, organizations and activities, which have an indirect or direct impact on the legal cultivation, production, distribution, retail and sale, and regulation of cannabis, including industrial hemp, medical, ‘wellness’ and adult-use cannabis, for different purposes, which often are carried out for profit, but not always. When they were describing people, events and activities connected to the movement or market, my informants often also used the term, the ‘cannabis space’. But, terminology was not consistent. To analyze this ‘space’ more precisely, I distinguish between the terms ‘market’ and ‘movement’ in this thesis.

I explore both the movement and market and how they relate and change throughout this thesis. How do market-oriented people and processes join forces with what had essentially been an advocacy movement? How does a counterculture get drawn into the mainstream, and how does the ethos change? How do we understand these processes of change and commodification? In the next two sections, I address the nature of the movement and the market in turn and ask who

and what were involved in the ongoing changes.

A Shifting Subculture

In the case of ‘marijuana smokers’, as Becker (1963) describes, during the 1960s, a set of interactions, experiences and patterns around marijuana use constructed a counterculture. He demonstrates how marijuana smokers transgress norms of society and how they deviate from the mainstream through breaking and making rules. Transactions were discreet, deviant and sometimes dangerous. The pleasures of cannabis consumption, but also the stigma of deviance, were learned through experience and the jargon used to describe these encounters was also acquired. Becker outlines a process that created a collectivity among those who practiced deviance through shared knowledge, which shaped actions and interactions. There were three key elements: a common activity, a system of representations and a code of behavior.

Half a century after Becker’s study, cannabis interactions and activities have changed. The licit market is guided by standardized practices and regulatory requirements, including licensed retail sites, legalized reasons for use, and legitimate businesses. Although the plant has not changed, despite some genetic breeding, the sale, distribution and other transactions have dramatically shifted. Cannabis products have diversified into mainstream items: consuming cannabis is no longer assumed to mean smoking a joint. There are edibles that look like candy, topicals that feel like skincare and cartridges that work like cigarette vape pens. Consumers with an ID or prescription can purchase cannabis at a pharmacy, dispensary or licensed retailer, rather than on the street. People involved in the cannabis market have had to learn robust protocols, technical knowledge and navigate shifting legal

norms. Throughout this thesis, I ask, to what extent a common activity, a system of representation and codes of behaviors have shaped the cannabis movement. Are they still present in the contemporary market, and how have they changed?

Commercialization has generated significant change in the movement and its related counterculture. The contemporary movement is characterized less by disobedience and more by a campaigning culture that stands for medical and scientific access, environmental impact, economic development, and social justice. Rather than opposing the mainstream, there is an effort to collaborate with it. In the past, there was a rejection of socio-legal norms, those that defined cannabis as deviant, but, now, people and organizations aim to change norms and to normalize cannabis. How does the history of counterculture, and its ethos, impact market emergence?

Despite commercialization, not all aspects of the counterculture have disappeared, particularly among those who Becker terms as ‘moral crusaders’. ‘Crusaders’ utilize strong moral, and sometimes self-righteous, overtones to establish new rules and orders, which have the potential to become institutionalized among more conventional groups of society. People at the ‘Investor Pitch Forum’, for instance, suggested they were ‘fighting the good fight’ and that their involvement was ‘the right thing to do’. Throughout my fieldwork, I observed an overwhelming sense of this commitment to persuade others to support legal reform and belief in the benefits of cannabis. How do moral imperatives factor into the market and the movement? Why does it still feel like a movement, despite the fact that the cannabis market is predominately defined through regulation and business activities? What constitutes this movement? Who is involved and what unites them?

The Cannabis Movement

There is still a sense of a wider social movement, which is global in its scope and effects. One of the main objects of this thesis is to map out and describe the nature of this movement and the stages through which it has progressed, following different trajectories in different places, over the past couple of decades. In the following chapters, I explore the people, networks, events, ideas and language that characterize it, as well as its relation to the emerging market.

Emergence and transformation are two core elements that characterize this relation, and are emphasized in social movement theory. Scholars studying other social movements have highlighted some similar elements to this case. Aistara's (2011) ethnography of farmers' seed exchanges in Costa Rica and Latvia demonstrates how imposed intellectual property requirements and processes of commercialization impact food production, kinship, agricultural biodiversity and personal livelihoods. Throughout this thesis, I explore forces of homogenization and standardization, and I ask if global regulatory processes and commodification, as it relates to cannabis, has had similar effects on local practices. Lounsbury, Ventresca and Hirsch (2003) also explore economic effects of social movement activity. They describe how the recycling movement enabled the emergence of a mainstream, for-profit recycling industry. In this thesis, I also study how an emergent market is closely intertwined to social movement activities. But, I ask how advocacy efforts and market forces continue to relate and change. In each of these cases, there are different forms of symbolic production, or the creation and use of emotion, values, rhetoric, belief and frames, which Della Porta and Diani (1999) argue is important to establish the conditions for organization, mobilization and social action.

Since the 1960s, there have been theoretical developments in the study of social movements. There are two main theoretical frameworks: the European ‘new social movement’ theory (NSM) and the North American theory of ‘resource mobilization’. The latter explores how social change, at a societal level, depends on available assets and their capacity to be used. In contrast, NSM is identity-oriented, and adopts a macro-level analysis based on social interactions, structures and processes. Although it does not fully capture the nature of the cannabis market, NSM literature does help to illuminate the importance of emergence, change and connection related to the movement. It draws attention to the conditions that enable social change, as well as the socio-political consequences of mobilization. Della Porta and Diana (1999) and the work of other social movement scholars (see Calhoun 1994; Diani 1992; McAdam 1994; Melucci 1994), help to explain how connections are formed between disparate members of a movement, which enable them to mobilize for social change. They highlight four elements, which facilitate connection – identity, history, communication, and commitment. In this section, I explore the importance of these elements in turn.

Several social movements are formed around a particular identity. In some movements, such as women’s rights and lesbian, gay, bi-sexual, transgender, queer and intersex rights, identity is core. The strength of a single identity helps to generate a shared group image and mission, as Escobar and Alvarez (1992) and Wilson (1973) argue. But identity is not the main element that people coalesce around in the cannabis movement. They come from multiple backgrounds, classes, interests, races and political groups. Some people entered the market from the counterculture and others had no connection to earlier forms of advocacy. There is a large variance in how they identify, for instance, as doctors, investors, advocates,

patients, businesspeople, and farmers. Their incentives also differ, from access to medicine and support for social justice to opportunities for investment. So, what unites people with such different identities and motivations?

A common rejection of historical prohibitionist ideology and advocacy for access to medical cannabis seemed to allow forms of organization to emerge alongside market development. This creates a sense of solidarity, which brought individuals together, who might otherwise have remained unconnected (Johnston and Klandermans 1995). Some informants refer to the ‘ethos’ of the cannabis movement as something important, which brought them together and shaped their activities and institutions. This could be analyzed in terms of Bourdieu’s concept of dispositions (1984). Dispositions structure actors, practices and activities. They are ‘shaped by past events and structures; influenced by current practices and structures; and also – importantly – are conditioned by our very perceptions of these events and structures’ (Sutherland and Darnhofer 2012: 233). The enduring strength of these identifying beliefs is captured by Bourdieu’s term, ‘durable dispositions’ (Bourdieu 1984). Throughout this ethnography, I explore the durability of various dispositions, and the continuities in terms of people, products and policies between the rise of the counterculture and the era of the regulated market. I describe how these different dispositions continue to inform the style, performance and embodiment of the modern day market and movement.

But have disconnections subsequently occurred through these transformations? Did ideas and attitudes fragment when, for example, medical patients became advisors to businesses? And what happens when businesspeople take on public advocacy responsibilities, and investors fund lobbying efforts? I am interested in the impact of economic initiatives, ongoing advocacy and legal

uncertainty, and how they contribute to the transformation of subculture and a developing market. Bourdieu's concept of dispositions helps to distinguish the transformation of practices, whilst also highlighting the continuities, especially in terms of attitude, beliefs and commitments, or what my informants called the 'ethos'.

With regard to history, social movement literature has identified shared historical phenomena as an element that sometimes brings and holds people together. Hess (2007: 469) argues, 'social movements enact cultural repertoires that often draw on charged historical events and cultural traditions to provide templates for future action'. Activists use these shared histories and, as Susser (2016) argues, gain power through collective action and a common voice in order to 'make their own history'. Such transformations are tied to historical contexts and reflect elements of the movement.

The context of prohibition is fundamental to the cannabis movement because without that history, none of the contemporary initiatives for reform would exist. Over the last century, the process itself has been complex, complicated by the War on Drugs and internationalization of prohibitionist policies (Hahn et al. 2007), which gave rise to the grassroots movement and forms of legalization, and, ultimately, to market emergence. In terms of cultural positioning, cannabis has been used as a means of disobedience, associating the counterculture with the anti-war, anti-establishment movement. Cannabis use was deemed to be deviant behavior, as Becker (1963) argues. But, cannabis use has also historically been associated with a degree of 'coolness' at recreational venues, such as festivals, parties, concerts, and social gatherings (Bures 2019). Even though individual histories of the people in the movement are different, most of my informants were aware of the history of

prohibition, the ‘coolness’ of cannabis counterculture and its lingering effects. Throughout my fieldwork, I noted a sense of glamor at conferences and events, which contributed to the excitement and appeal of cannabis, as a product, movement and market. The historical elements of stigma and glamor also shape the dispositions of people within this movement. The ongoing relevance of these historical contexts to contemporary situations is what Bourdieu (1990: 56) describes as ‘embodied history’. My thesis explains the ways in which people involved in the market embody the legacy of the movement.

With regard to communication, Barnard (2011) and Melucci (1995) have talked of discourse, codes, frames, rhetoric and values that are commonly used ‘knowledge stock’. Participants in the cannabis movement use scientific jargon to refer to chemical compounds – flavonoids, terpenes and cannabinoids – market jargon, such as ‘LP’ for ‘licensed producer’ and ‘MSO’ for ‘multi-state operator’ to describe types of cannabis companies, and biological terminology about the body’s endogenous endocannabinoid system. Familiarity with the jargon creates a linguistic bridge amongst those inside the market and movement. Although the juxtaposition between formative, business language and more performative, emotional language, as demonstrated at the ‘Investor Pitch Forum’, seems unexpected, these common communicative practices may contribute to the connection between the movement and the market.

These linguistic tools are created, learned, practiced and shared at conferences and related networking events and meetings. Although there are other informational channels, such as e-mail newsletters, news articles, and reports, which also contribute to ‘knowledge stock’, in person events are ‘crucial to knowing what’s happening in the cannabis space, since things change so rapidly’, as Gregg, a

businessman working in the cannabis market and my main gatekeeper, put it. This thesis explores in detail the ways in which meetings, presentations, discussions and decisions facilitate communication and help to create a sense of commitment to a common cause, which is central to this case.

Commitment to a campaign can bind people into a movement, but, as Melucci (1994) and Mares (2019) note, participation in a movement is a personal choice, so commitment differs. There is a varying sense of commitment and responsibility within the cannabis movement. In some cases, different intents may result in contradictions between the overall message of a movement and individual commitment, as Barnard (2016) and Susser (2016) suggest. In my case, some people are primarily motivated by capital, whilst medical access, human rights and social justice drive others. Medical patients eager to access medicine are committed in different ways, and for different reasons, compared to recreational consumers. Scientists who believe in the medical and scientific applications of cannabis are committed to the movement in yet further ways, and for different reasons, to economically driven investors. Participation in cannabis activities is further differentiated by what one's involvement constitutes – a livelihood, a side project or a personal passion. Some groups have been historically committed to the movement, whereas people such as Gregg were recently drawn into it through business choices. He is an illustration of somebody who appears to support the movement, although commitment to the cause itself did not originally attract him to it.

Gregg is not the only person to combine these elements. At the 'Investor Pitch Forum', there were men in suits using emotional language as they discussed social justice, politics and medicine. The idea that working within the 'cannabis industry is the right thing to do', as Dayton said, is reflected in shared attitudes that

people should commit time and money to business purposes in order to support the movement. Does this sense of commitment arise out of the history of prohibition? The belief in alternative medicine? The call for social justice? Do personal and collective commitment change as the market develops and policies change? How does this case compare to other social movements? How do market-oriented interests and activities influence the movement?

The Cannabis Market

Behind the emerging market are more than processes of just legal and social reform: the result involves processes of commodification. So, how do we understand this economic change and its effects? The licit market has existed less than a couple of decades, which have increasingly involved regulatory reform and processes of commercialization. This has significantly altered cannabis supply chains, the type of cannabis produced, sites of sale and forms of consumption. The regulated cannabis supply chain alone includes genetics and seed banks, cultivation, testing lab and analysis, and organizations involved in production, extraction, formulation, manufacturing, packaging, distribution and retail. There are also cannabis specific ancillary businesses and services, such as security, technology providers, professional services (legal, marketing and branding, accounting, consultants, recruitment, media, real estate, banks and financial advisors), retail locations, and e-commerce websites.

The contemporary market is comprised of heterogeneous groups of people, such as patients, doctors, policymakers, advocates, scientists, researchers, investors and entrepreneurs, and consumers, with diverse relationships and backgrounds to cannabis and the movement. Many people joined the market in post-legal contexts

and brought their experience from other related sectors. There are also groups, such as commercial entities, non-governmental organizations, lobbying associations, private medical clinics, national agencies, and international institutions, which play a role in the market.

These different people and organizations produce a great variety of cannabis products – cosmetics or topicals (balms, skincare, creams, oils and serums), drinks and edibles (non-alcoholic beverages, energy drinks, chocolates, sweets, savory food, and other ‘free from’ foods), suppositories, women’s health lubricants, tampons and related pain relief, ingestibles (capsules, tablets and sublinguals), vapes, dried flower (pre-rolled or packaged) and extracts, which are highly concentrated cannabis oils. As the product variety illustrates, the cannabis market and its supply chain overlaps with related sectors: medicine and pharmaceuticals, alcohol, tobacco, consumer goods, health and wellness, farming and agriculture. Legalization has allowed these processes of commercialization to unfold, which are turning cannabis into a commodity.

Even though large numbers of cannabis products are produced and traded as commodities, many people in the market do not regard it simply as a commodity.

So, what sort of commodity is it? Economists define a commodity as,

Any object which is produced for consumption or for exchange in markets. The term is also used more narrowly to denote those raw foodstuffs and materials that are widely traded internationally in organized markets (Pearce 1986: 68).

Typical examples of commodities are wheat, sugar, corn, cotton and copper. But other economic exchanges involve less straightforward commodities. In this case, there was no consensus within the market whether cannabis could, or should, be classified as a commodity. Cannabis to some of my informants was personal, sacred and valuable in different ways. One long-term cannabis grower believed that cannabis was not just a traditional commodity: it is a ‘special plant that has co-

evolved with us humans as a “camp follower” over many thousands of years’. In contrast, some informants described cannabis as the ‘anti-commodity’ because of its classification as an illegal substance, or as a ‘microcommodity’ because of the belief that it does not fit traditional economic or regulatory models. Other people felt that cannabis was in the process of becoming a commodity. It was common for scientists, businesspeople and advocates, alike, to perceive cannabis as special, and different to other plants, compounds and products, even in contexts where it was regulated and legal.

Other unorthodox commodities with economic value raise socio-legal controversy. Sexual commerce, such as sex tourism, pornography, prostitution, escort agencies and erotic massage (Bernstein 2001), make a person into an object for exchange. This reduces the status of a sex worker to a commodity itself. ‘Economies of desire’ gives rise to debates over whether bodies can be, or should be, used for exchange, and some conflate them with ‘marriage markets’ where people search for desirable profiles on online sites (Hakim 2015). Emotional labor is another unconventional commodity – commercialized processes employees perform to regulate and display emotion (Grandey and Sayre 2019), which is ‘sold for a wage and therefore has exchange value’ (Hochschild 1983: 7). Nurses, administrators, teachers, social workers, journalists, amongst other professions, are emotionally taxed, which is difficult to measure, since economists often attribute value only to physical labor. There is ongoing debate about the process of commodification and marketability of these social forms and how to value and regulate them. Throughout this thesis, I aim to understand how cannabis changes as a commodity alongside the rise of market forces. I ask about the extent to which it has come to be regarded and treated as a commodity, or more than a commodity.

Fair trade goods offer another comparison in that the products are embedded in a movement and are not wholly seen as traditional commodities (Dolan 2007). Fair trade products reflect other crop labels, such as 'organic' and 'locally sourced', which also are in virtue of being treated as something special. Dolan demonstrates how fair trade products also involve moral commodity exchanges and corporatization, which legitimate and circumscribe products to ethical and quality standards. But cannabis and fair trade goods have entered supply chains in different ways – cannabis has transformed from an illicit substance into a legal product and fair trade products take existing economic goods with added moral traits. So, does cannabis retain distinctive qualities associated with its historical status, and what influences processes of commodification?

Studying commodities ethnographically highlights the importance of the social and cultural elements of exchange. For example, Sidney Mintz's (1986) exploration of the transnational commodity chain of sugar highlights the connection between economic interests and cultural processes in Britain and the Caribbean. Another way to understand commodities is through their historicity, which gives them a 'social life', as described by Appadurai (1986), or the 'biographies' of a commodity, as Kopytoff (1986) suggests. Appadurai (1986: 15) argues that 'commoditization lies at the complex intersection of temporal, cultural and social factors', and outlines the phases, contexts and moral and symbolic criteria that define it. There is a multiplicity of meanings a commodity adopts throughout the course of its existence and use, which might vary in different socio-legal contexts.

Despite discernible commodification, the cannabis market is still connected to something larger. Whilst entrepreneurs, for instance, raised capital for a cannabis company and ran daily operations, there was a parallel set of processes, by distinct

organizations and individuals who lobbied and advocated for medical and scientific access, social justice, and legal reform. Commercial and advocacy activities happened simultaneously, and these processes visibly came together at conferences, such as the ‘Investor Pitch Forum’, fundraising events, informal parties, and communication networks. These were some of the many ways for commercial actors to disseminate information and express their support for ongoing reform. Although there are two distinct sets of activities, economic factors impact those directly involved in the commercialization of cannabis, such as investors, entrepreneurs and other businesses, as well as those indirectly involved, such as people who benefit from generated tax revenue and consumers and patients. Similarly, advocacy developments benefit some patients and consumers, and also help some entrepreneurs enter other regulated markets. This thesis describes commodification as a process, one that is closely related to a social movement, yet is still distanced from commercial aims and activities.

Market and Movement Relation

How does the process of cannabis commodification relate to the movement and market? Ultimately, how do we understand the relationship between the movement and market? My fieldwork primarily focused on the licit market and the people involved in it, but in doing so, I observed the broader cannabis movement. Early on, I found that there was ongoing support for decriminalization and legalization, especially because cannabis remains illegal in a majority of the countries around the world. This, my informants believed, would simultaneously help to establish more markets to supply and access cannabis.

My main gatekeeper, Gregg said,

The only certainty in the cannabis industry is the uncertainty of the regulations. We're here because this started as a movement. I'm in the industry, yes, but I'm also part of something larger than that.

Gregg felt that although he was a business executive, he also played a part in the broader social movement. If people like Gregg, who work on the commercial side of the movement, also identify with the advocacy side of the movement, then what creates the sense, which he expressed, of a larger movement? How do I best account for the factors that constitute this relationship?

I approach the market and movement connection by capturing developing processes, using a series of snapshots from different parts of the world. There are different types of legislation, which follow similar processes but at different rates. My informants generally believe cannabis reform begins with decriminalization, or removing criminal penalties, which leads to the legalization of cannabis for medical purposes. The next step is 'full-scale', or recreational, legalization to permit cannabis for all purposes, which is the case in Colorado and Canada. Therefore, I look at four cases in detail – Colombia, the UK, Israel and parts of Africa, to demonstrate similar processes in markets at different stages of reform.

To help understand the processes I outline, I focus on the people and events that are part of a 'field', in Bourdieu's sense, with its own dispositions, rules and histories. A field is a 'spectrum of human experience' (McCormick 2006: 258), governed by its own rules and norms that create and reproduce mutual understandings and legitimacy (Bourdieu 1982). Being part of a field, as Bourdieu (1998: 25) discusses, underscores a 'practical sense for what is to be done in any given situation – what is called in sport "a feel for the game"'. In this case, people acquire and require technical knowledge about cannabis, regulatory particularities and industry jargon. The embodiment of these understandings and experiences,

which permit an actor to participate within a field, is what Bourdieu terms as 'habitus'. As preferences, rules, narratives and justifications of 'the game' are learned, a 'habitus' becomes embodied, and a process of internalization happens. Throughout this thesis, I aim to understand how people gain a 'feel for the game', or how they become active members and engineers of the transitioning market and movement, and how this impacts their interrelation. The 'feel for the game', and a 'habitus', is not simply about ways of being in the world, or the expressing of an ideology or ethos. Rather, I use the concepts as a way to explore taste, performance, style and practices, as demonstrated or played out in conferences, meetings, communication and parties. This differentiation permits an analytic frame that is grounded in the historicity of the movement and active elements of play, preference and performance. Whilst I demonstrate the importance of practices, jargon and vocabulary, I also describe the activities and exchanges during which people learn how to embody the dispositions of the movement. This is a means to account for more than just economic forces within the market and the movement.

In classic economics, markets are defined as 'a mechanism which buyers and sellers interact to determine prices and exchange goods, services, and assets' (Samuelson and Nordhaus 2010: 26). Under this lens, cannabis becomes a commodity through decisions made by related producers and consumers for the purpose of exchange. The economic definition limits an analysis of how capital forces combined with social, cultural and symbolic resources contribute to the creation of the cannabis market. Jane Guyer (2004: 4) emphasizes that an investigation of markets should include exchanges, norms and practices because economic models do not necessarily reflect an empirical interaction of people and their experiences. MacKenzie (2006) also highlights how financial models and

structures themselves contribute to the constitution of markets, and MacKenzie (2006) and Maurer (2006) demonstrate the need to examine performativity of markets, and involved actors, to understand how market practices are actively shaped.

To situate these frameworks ethnographically, Abolafia (1998) outlines a helpful approach to understand 'markets as cultures'. He emphasizes how markets are embedded in a series of socio-cultural and economic systems. Abolafia (1998) argues that norms, rules and beliefs coordinate activity and define commodities. It is a process of ongoing repeated interactions, which constitute such rules, roles and expectations within a market. He demonstrates that market culture is constantly made and remade. Abolafia's concept of 'markets as cultures' relates to Bourdieu's concept of 'habitus', which is useful to account for economic behavior in cultural change and to understand the identities, norms, practices and processes that create and maintain it. Significantly, it permits an analysis of the market's interconnection to the movement and vice-versa.

Karen Ho's (2009) ethnography of Wall Street reveals that even financial markets can be sites of human values, emotions, institutional norms and financial exchanges, which illustrates other examples of dispositions and 'habitus'. She examines the role of Wall Street, and its related historical construction and ethos, 'in the reshaping of corporate America and its corresponding effects on market formations', including boom and bust cycles, inequality and social life in the US (2009: 4). She demonstrates how financial actors produce and reconstitute global capitalist structures, despite its instability, through everyday experiences, transactions and decisions. Similarly, I ask how people, norms and processes are

involved in shaping the construction and reconstruction of cannabis, as a market, movement and product.

But, as Ho also explores, there is fragility between the power of global market forces and locality. Bankers, she describes, generate hype that they are not immune from, and this leads to disjuncture between local realities and global narratives. Despite the global influence of capital markets and ‘universalizing assumptions’, Ho highlights the vulnerability of opinions and practices. Ho (2009: 38) argues, that the global, ‘however homogenizing, is multiply situated, dynamic, local and productive of odd ethnographic juxtapositions’, or ‘polycentric’ as Fischer (2003) terms it. How do people involved in the cannabis market create narratives, and are they central to the cannabis market’s success? Do these generate tensions, and how does this impact the interconnectivity between the market and movement?

As commercial activity increased and support for the cannabis movement grew across jurisdictions and populations, more conflicts became visible. At the ‘Investor Pitch Forum’, for instance, different uses of emotional language in a professional, business setting were jarring at first. There was a distinct contrast between moral phrases to ‘fight the good fight’ and the economic incentive of a ‘multimillion dollar investment opportunity’. How does conflict emerge in this case? Do these types of tensions lead to opposition or fractures? These types of encounters are what anthropologist Anna Tsing refers to as ‘friction’. She defines friction as ‘the awkward, unequal, unstable and creative qualities of interconnection across difference’, which are ‘continually co-produced’ (2004: 4). She provides examples of how global, heterogeneous connections come together through ‘friction’. She argues that ‘friction’ is not a threat to movement or agency, and, in fact, is necessary to motion. Rather than being static, as the notion of a ‘field’ might

suggest, I explore the tensions, or ‘friction’, in Tsing’s sense, that emerge. I question how this affects the market and the movement, and unpack whether it wholly undermines connection.

From a socio-legal and economic perspective, I examine the ongoing construction of the market, the people behind processes of change and commodification, and the implications of this. In doing so, I also explore the broader social movement. I aim to understand how these different aspects relate, change and influence one another. Becker’s study seems to account well as a starting point to understand how a counterculture forms around cannabis, and to ask how cannabis and the people involved in related activities transform in the process of reform. How important is the historical context for the contemporary market? As commercial interest increases in later stages of reform, I explore an array of personal, economic and legal transformations. To do this, I build upon social movement theory, Bourdieu’s discussion about ‘rules of the game’, and Abolafia’s concept of ‘markets as cultures’. These frameworks help to highlight forms of engendered connection, such as shared commitments, communication and norms. Yet, how does a degree of heterogeneity and dynamism continue to characterize this case? In this way, I also explore fragility, as it risks fragmenting forces of cohesion. Throughout this thesis, I ask, under what conditions tensions emerge, and what are the implications? Do connections forged within the movement unravel with the emergence of the market and business interactions? Ultimately, what might this case tell us about how markets and movements operate more widely?

Methodology

In order to get a good understanding of the field and its various components, people, and activities, I conducted multi-sited ethnography at different events and with different people and organizations in 11 different countries. As Nailer, Stening and Zhang (2015) point out, studying emerging markets is complicated by fast paced evolution, diverse conditions and dynamic environments. But Law (2006: 3) argues that although ‘global flows are uncertain, unpredictable’, ethnography is one methodological tool to understand shifts and the ‘relative messiness of practice’. Accordingly, I set out to explore the cannabis market and the movement by focusing on commercial activity, conferences and international relations, and their emergent forms and fragments. Building on existing relations and establishing trust and credibility, I used the ethnographic methods of participant observation and long-term fieldwork to provide a glimpse into some of the people, patterns and processes that reveal the emergence, connection, and communication of the market and movement.

Research for my thesis date back to 2016, when my interest in the cannabis movement first started. The opening vignette describes the first cannabis conference I attended. This was part of my data collection for my undergraduate thesis. I subsequently attended 13 more conferences for other academic projects, prior to starting the fieldwork for my DPhil, which began in November 2018 and lasted until January 2020. It quickly became evident that conferences were sites that drew people together and the subsequent field access and research came out of these meetings and conferences. From 2016, I continued to see many of the same people at the same conferences, year after year. It was common to meet at one conference in Europe and then see the same people, exhibition booths and sponsors, at another

conference in North America or Latin America in the following months. People did not attend every cannabis event, as there were dozens per week, but there were a few key conferences that my informants assumed they and their colleagues would always attend. Over the course of more than two years, I used the knowledge gained and connections made there to decide what parts of the movement to explore.

The rapid pace of change of the market and movement required flexibility in fieldwork and multiplicity in geographical scope. I obviously needed to adopt a multi-sited approach (Burawoy 2000), but also needed to be flexible about the sites and events I explored. So I attended conferences in North America, Latin America and Europe. There, I got a sense of the different activities occurring in different parts of the world, which were engaged in different phases of reform. At this stage, I made a deliberate decision to travel to several different places and to spend time in those that provided me with most opportunity to explore different aspects of the market and movement, in order to build up as representative a picture as possible.

Similar to my informants, I found the experiences of meeting certain people, attending particular events, and engaging in specific exchanges as a matter of accessibility, interest and serendipity. Ultimately, my fieldwork happened organically from one site leading to another. I conducted participant observation in Canada, US (Colorado and California), Jamaica, Panama, Colombia, UK, Spain, Austria, France, Switzerland and Israel. It was common for my informants to travel often for meetings, events and conferences. To follow the pattern and pace of deals, reform, and interactions, especially in a transnational context, I found myself invited to, and, to an extent, expected to be at events. Not all of these sites are discussed in detail in this thesis, but each one was significant to me in understanding the market's dynamism and global scope. In each country, I attended one or more

cannabis conference, which were typically more oriented for businesses than a public audience. My fieldwork included 26 conferences between November 2018 to December 2019, at least 50 formal networking events related to the conference and dozens of informal dinners, meetings and other events. I took notes in my field journal at each event, which I later transcribed. In some cases, I was able to record panels and speakers during conferences, which I also transcribed. At each conference, I spoke with at least five people, but on most occasions, I spoke with three dozen or more. These informal interviews were not fully transcribed, since I spoke to people on a one-off basis, but I recorded key points and observations in my field journal.

At the beginning of my fieldwork in Colorado in January 2019, I conducted five formal interviews that lasted around 45 minutes to one hour. Most of the subsequent interviews varied in length, from around 30 minutes to two hours or more. These were informally structured because of the context of the conversation, which was often at a conference or a casual networking event, with the presence of food, alcohol and cannabis, and business meetings that were held at cafes, restaurants and sometimes offices. In contrast, interviews with informants that I met multiple times throughout fieldwork were more substantial and as well as transcribing interviews, I made detailed notes in my field journal about observations and follow-ups. In total, I transcribed 131 informal interviews.

In addition to these field sites, I worked as a paid consultant on European and North American projects for cannabis start-ups, institutional banks, investors and publicly traded cannabis companies. This was something Ho (2009) also did, as a management consultant, to gain access, make contacts and participate in related conferences, events and parties. She was able to analyze her position, later collect

extensive data and have privileged access. In my case, my consulting work allowed me to gain insight about daily tasks, experiences, and responsibilities of people involved in this part of the cannabis market. It also permitted a first hand understanding of the commercial activity that is integral to this case. Furthermore, working as a consultant provided a sense of credibility to my informants and established a common ground for exchange, which helped me to gain access in the field. Each project varied depending on the scope of the report and strategy document that I was hired to complete, and most projects contained one or more of the following: market research, strategy on market entry, business development, content creation for blogs and investment material, and investor relations. These projects were short-term, around two to eight weeks in total. However, I had an ongoing relationship with a UK based CBD skincare company, Ohana, which I use as the case example in Chapter 6. In this way I became an ‘insider’ to the market itself, which allowed me to observe ordinary moments, everyday practices, intangible elements and emergent processes. Due to the controversy that still surrounds cannabis, trust was an integral part of the methodological exercise, which I needed to form relationships with informants.

It is also necessary to disclose my relationship to one of my key gatekeepers, Gregg Steinberg, who is my father. At the beginning of my fieldwork, Gregg was the Chief Executive Officer of Growcentia, a company that produces biostimulants that focus on soil microbiology to enable growers that maximize plant growth, quality and health. Its first product, Mammoth P, is a consortium of beneficial microbes to maximize growth through phosphorous cycling and increasing yield. I became familiar with the Growcentia team, learned agricultural and microbial terminology and attended events that Gregg and his colleagues exhibited at and

attended. Gregg would introduce me as an academic researcher, rather than his daughter, in order to reduce bias.

Chua and Mathur (2018) question who ‘we’ are as anthropologists, and, in this case, the question draws attention, reflexively, to my background and the relational context that shaped my fieldwork and writing. In my case, an element of familiarity was part of the reason I easily gained access into a privileged, commercial context. Through shared experience and daily interaction with my gatekeeper, I assembled involvement into the cannabis market before I had even entered the field. Initially, having access to Gregg’s network was critical, especially since most of my key informants were in executive positions or politically and economically influential. I leveraged my experience and connections, and I relied on these relationships to secure access and engage with people involved in otherwise closed contexts. But these commercial networks were also closely connected to the broader cannabis movement. Through them, I met a very broad range of people involved in the movement, whose lives, activities and interests are also described in this thesis. Gregg was not only an informant, but also a window into a particular sector of the cannabis market that shaped my understanding of the cannabis movement, as a whole. As a result, much of my data relates to commercial activity and capital interest.

Although chance, opportunity, and serendipity often led me from one event or conversation to another, over the course of my fieldwork, I built up ethnographic insight into a number of key aspects of the movement and aspects of its complexity and fluidity. This gave me useful material with which to create an account of the market and movement, as I do in this thesis. I noted a pattern of progression in the movement, as it developed in different places through similar stages in the reform

process. This meant I could use observations in different countries to give a sense of the overall trajectory of the movement, which is how I have structured this thesis. To understand the market, I examine the ongoing development of the movement, and to understand where the movement is today requires studying the market. Different chapters, then, illustrate different phases of the movement and market and explore the dynamics involved.

Thesis Structure

I use the material gathered in different field sites to represent different aspects and stages in the wider movement, which I feel reflects key parts of the market. The process of reform has moved along similar lines at a different pace in different parts of the world. The presentation in Chapters 4-9, thus, aligns with the ongoing emergence and transformation of the market and movement. First, Chapter 2 provides historical and socio-legal context to the movement and Chapter 3 outlines the ethnographic context by tracing how cannabis is understood and used in different ways throughout the process of reform, including key beliefs and stakeholders and important events. In Chapter 4, medicalization and destigmatization in Colombia demonstrate the ways in which a local market and its active members relate, construct and connect to the global market at a very early stage of legalization. Chapter 4 reflects some of the processes and dynamics that characterize earlier periods in other countries. As I analyze throughout this thesis, cannabis medicalization involves the progress of research and science, support for medical professionals and systems, and patient access to standardized medical cannabis products. Chapter 5 examines the UK, where the process of medicalization is further advanced, and addresses how conflicts arise through varying commitments

and intentions. A ‘mainstream wellness’ market in the UK also emerged, which factors into processes of commercialization and normalization, as I discuss in Chapter 6. I dedicate Chapter 7 to normalization – a series of processes, strategies and activities that people undertake to try to dispel myths about cannabis and make it seem more ‘normal’ and accessible, in all its forms. Later stages of reform, as demonstrated by research and innovation and the process of commercialization in Israel, including the global effects of this, are examined in Chapter 8. Cannabis commercialization aids in the transition from illicit to licit, which involves economic strategies for businesses, as they bring new products to market through production, distribution, marketing and advertising, sales, and other promotional activities. Chapter 9 explores cannabis policy reform at the WHO and UN and how these international institutions, stakeholders and decisions relate to this case as a whole. Finally, Chapter 10 provides an analysis of this data and outlines the wider relevance of this case.

In each case study I present, I focus on key individuals and typical events for that site, which illustrate different aspects of the progress of the market and movement. In this way, I present an ethnography of a developing movement and emerging market through a series of case studies of what seem to me to be the most important and representative aspects. Of course, the issue of representation is largely a matter of informed impression and other researchers would have made different choices. My focus is also angled towards the commercial aspects, partly because of the possibilities of access and also because the context deserves sustained attention. The cannabis supply chain has always presented commercial potential, as the illicit and licit market exhibits. But the regulated and legal market has brought more people from mainstream and corporate backgrounds, for instance, into the

movement. In this way, I present an ethnographic portrait of the ongoing constitution of the cannabis market and movement for reform, including both tangible and intangible elements, and their relation.

Chapter 2

Legal Context of Cannabis Reform

Introduction

Cannabis policy reform has unfolded at different times and rates in various jurisdictions. In this chapter, I explore the history of legal reform and regulatory specificities of the countries in which I mainly focus, and begin with the international framework. I highlight elements of market emergence, and map this in more detail in Chapter 3. Due to the rapid pace of reform, cannabis policies frequently changed throughout my fieldwork and this chapter details the situation up to August 2021.

International Drug Conventions

The era of prohibition was intensified in the 1970s through the War on Drugs and institutionalization of controlling substances, sometimes used for medicine, recreation, research or ritual. Marginalized groups faced politically motivated discrimination, as John Ehrlichman, a member of President Nixon's cabinet, admitted about heroin and cannabis (Baum 2016). This resulted in stigmatization and 'symbolic shaming' (Cross 2007), and, ultimately, a counterculture formed that deviated from these prohibitionist perspectives. Illicit channels to distribute controlled substances have often been tied to violence, which factor into national approaches and international frameworks to combat drug trafficking.

International drug controls have, since 1997, been the responsibility of the United Nations Office on Drugs and Crime (UNODC), which is headquartered in Vienna, Austria. The governing body of the UNODC is the Commission on Narcotic Drugs (CND). The Economic and Social Council of the UN established the CND in 1946, but it has only operated as the policymaking body since 1991. The CND's mandate is normative and operational, to 'review and analyze the global drug

situation, considering supply and demand reduction'. The CND does this through 'resolutions and decisions', as described on its website. To do this, the CND is supposed to 'accelerate' political commitments, foster thematic discussions, conduct annual report questionnaires, and establish expert and working groups.

One of the primary tasks of the CND is to determine the scope of the international drug control regime. This regime is founded on three conventions: 1961 Single Convention on Narcotic Drugs (as amended by the 1972 Protocol), 1971 Single Convention on Psychotropic Substances, and 1988 Single Convention Against Illicit Traffic in Narcotic Drugs and Psychoactive Substances. The 1961 and 1971 Conventions codify control measures for narcotic drugs and psychotropic substances, respectively. These conventions permit use of controlled substances for medical and scientific purposes whilst aiming to prevent diversion into the illicit market. The 1971 Convention is less strict compared to the 1961 Convention, and the 1961 Convention has a special focus on plant-derived substances, such as opium, heroin, cocaine and cannabis. The 1988 Convention aims to reduce the increase in supply and demand of controlled substances and to provide enforcement measures to counter drug trafficking.

The 1961 Convention has 154 state parties and 61 signatories, the 1971 Convention has 184 state parties and 34 signatories, and the 1988 Convention has 191 state parties and 87 signatories. Although these treaties are non-binding agreements, state parties are expected to comply with the outlined policies, which means prohibiting use other than carefully defined exceptions for medicine and science. For the majority of the world, cannabis cultivation, production, distribution, use and sale are legally restricted, which reflects how the UN's classification of

cannabis in the 1961, 1971 and 1988 Conventions have informed many national restrictions.

In the 1961 Convention, the most prohibitive classification is Schedule IV, followed by Schedules I, II and III (Mead 2014; Van Kempen and Federova 2019). Cannabis resin and herbal cannabis are classified in Schedule IV, which includes dangerous substances that have little to no medical benefits, as well as in Schedule I. Cannabis extracts and tinctures are classified in Schedule I, based on the potential for high abuse and dependence.

Under the 1971 Convention, Schedule I is the most restrictive category, followed by Schedules II, III and IV. In the 1971 Convention, Delta-9 Tetrahydrocannabinol (THC), one of the most well-known and researched psychotropic compounds found in cannabis, is classified in Schedule II. This schedule permits the medical and scientific use of substances, including amphetamine stimulants, such as Benzedrine and Adderall, and methylphenidate substances, such as Ritalin, which are pharmaceutical medications prescribed for therapeutic benefit.

Although the cannabis plant, as a whole, is scheduled under the conventions, the treaties do not distinguish between different cannabis plant species. The legal definitions do not distinguish cannabis from hemp, which is often used for industrial purposes, foodstuff products or textiles. Cannabidiol (CBD), a predominant non-psychotropic compound found in cannabis and frequently sold over-the-counter for wellness products, is often extracted from hemp plants. But, CBD has never been scheduled in the conventions. So, CBD is technically permitted. But, legal ambiguity has allowed states to base their decisions on what many of my informants refer to as ‘good faith’. Countries interpret the conventions in the context of national

hemp or cannabis policies. Despite treaty obligations, the amount of cannabis products sold in regulated markets has been an increasing trend. As more countries relaxed their cannabis policies for varying purposes, the CND's classification of cannabis has been called into question, which I discuss in Chapter 9.

Cannabis and Related Policies in the European Union

In the European Union (EU), countries are responsible for implementing their own cannabis policies. EU agencies only become involved in interstate trafficking. Across Europe, there have been widespread approaches to cannabis and its compounds since the 1970s, but a regional domino effect of relaxing cannabis laws has taken place in the last couple of decades. Cannabis policies first relaxed in the Netherlands in 1976 when possession of small amounts of cannabis was decriminalized (MacCoun and Reuter 1997). During the early 2000s, Luxembourg and Belgium decriminalized personal possession of cannabis, and Portugal decriminalized all controlled substances. The Netherlands took further initiative to legalize medical cannabis in 2003 (De Hoop, Heedink and Hazekamp 2018), and the next country to do this was Austria in 2008 (AFP 2008), followed by Czech Republic, Italy, Romania and France in 2013 (EMCDD 2018). The number of countries with medical cannabis markets continues to increase, now including Malta, Croatia, North Macedonia, Poland, Norway, Germany, Cyprus, Luxembourg, Greece, the UK and Ireland. In 2017, the Netherlands announced a trial for adult-use cannabis production (Boffey 2017) and, in 2021, Luxembourg became the first European country to permit residents to grow and use cannabis (Rodriguez 2021).

Reforms unfolded in various ways in each jurisdiction. Some countries implemented medical cannabis pilot programs to provide the basis for an evidence-

based policy decision, whilst other countries used existing research to inform a regulatory decision. There is also variation in prescription availability, supply choice and accessibility, eligible medical conditions, and insurance coverage. As markets emerged, some of these issues were made visible, and further policy reform pursued.

Supply, particularly for medical cannabis, is one issue that is generally regarded as requiring robust regulations and oversight. In some cases, such as in Germany, the Netherlands, Italy, the UK, Denmark and Czech Republic, medical cannabis products can be cultivated, produced and distributed domestically. But all of these countries still import medical cannabis products to meet demand. In other countries, import is the only option. Similar to other pharmaceutical products, medical cannabis products require strict compliance with regulations before they can be exports of Europe, which has only been achieved by a limited number of companies in countries with regulated markets.

The EU has harmonized pharmaceutical regulations, some of which have been adopted for the production, distribution, sale, import and export of medical cannabis products, such as good manufacturing practice (GMP), good agricultural and collection practice (GACP) and good distribution practice (GDP). They have become some of the key principles that impact the global supply chain of medical cannabis. GMP sets out a minimum standard for quality, consistency, authorization and licensing, and product specification, which are controlled by regulatory agencies on the production and sale of some food and beverages, cosmetics, pharmaceuticals, dietary supplements and medical devices. GACP are standardized practices for quality, consistency and safety of herbal or medicinal plants. GDP relates to storage, transportation and handling of such products under consistent, suitable conditions.

These processes have contributed to homogenization between local supply and global demand.

These principles were established prior to the emergence of cannabis markets, yet have helped to standardize a particular sector of the market, medical cannabis. They helped to generate a sense of trust, quality assurance, and legitimacy. They also permitted local cannabis producers and distributors to access foreign markets with more legal certainty. Subsequently, they have, in part, influenced the way medical cannabis has been commercialized. Chapter 4 discusses how pharmaceutical grade cannabis produced in Colombia relates to demand in the European market and Chapter 8 discusses how production in Africa influences process of commercialization, locally and globally. Despite some harmonized standards, each EU country still has specific restrictions for cannabis products.

In Europe, there has been a growing market for CBD products, usually marketed for wellness purposes. CBD products comprise a distinctive sector of the cannabis market, and are produced and sold according to less robust standards than medical cannabis products. But, similar to the way in which medical cannabis is regulated on a national basis, CBD policies are implemented and enforced by national bodies. CBD is often legally defined as it relates to levels of detected THC, one of the psychotropic cannabinoids in cannabis. Most European countries permit up to 0.2% THC. According to many of my informants, this number has been unclearly defined. In Italy, a range of 0.2 to 0.8% THC is acceptable, and in other countries there is no effective enforcement of the potency in CBD products (EMCDD 2018). There is also vast disparity in market restrictions, such as marketing, product formulation, licensing, import, export and labeling.

But there have been rulings and recommendations in efforts to harmonize EU CBD policy. Judges of the European Court of Justice were asked to resolve a dispute to determine the legality of movement of goods that violated French law (Thompson 2020). Part of the debate related to a CBD vape, legally produced and extracted from hemp plants, in Czech Republic, but sold in France. In France, it is illegal to produce and distribute CBD products derived from any part of the plant, excluding the stem, seeds and stalk. After ongoing debate, in November 2020, the European Court of Justice ruled that CBD is not a narcotic, as it relates to the meaning of the 1961 Convention, and that EU industrial hemp regulations were not applicable to CBD extracts (EMCDD 2020). They also ruled that EU member states could not ban the marketing of CBD products, so that CBD products would benefit from free movement across the EU.

In 2019, the European Commission classified CBD as a ‘novel food’, which is a substance that has not been widely consumed in the EU prior to 1997. Chia seeds, UV-treated food and new sources of Vitamin K are examples of ‘novel foods’. These substances are subject to extensive testing and authorization for consumer safety. When the European Commission added CBD to the Novel Foods Catalogue, many CBD companies filed applications to authorize their CBD supply to comply with the new regulations. But in July 2020, the European Commission paused its reviews of applications to consider whether or not to classify CBD as a narcotic (Hardstaff and Binns 2020). Despite the uncertainty in the EU, companies continued to operate and grow (Hemp Industry Daily 2020). In December 2020, a month after the European Court of Justice ruling that CBD is not a narcotic, the European Commission resumed its review of CBD ‘novel foods’ applications and abandoned its preliminary stance that CBD is a narcotic. Although these decisions

were warmly welcomed by many of my informants, there was still ongoing confusion about ‘novel foods’ applications and the legality of different CBD products at the national level, due to varying policies. In Chapter 6, I discuss the complexity of this legal reform using the case of the UK CBD market.

United Kingdom

Prior to prohibition in the UK, records show Queen Victoria using cannabis for menstrual cramps, as prescribed by her doctor, in the 18th century (Alexander, Mackie and Ross 2010). By the 20th century propaganda about ‘reefer madness’ spread, which associated cannabis use with danger, violence and stigma (Hunt 2020). Cannabis was prohibited in 1928 in an addendum to the Dangerous Drugs Act of 1920. In line with the UN’s 1961, 1971 and 1988 Conventions, the UK later implemented the Misuse of Drugs Act of 1971, which classifies controlled substances into Class A, B, C or D with respective offences for possession, supply, import, export, and production. It also set up the Advisory Council on the Misuse of Drugs and introduced the term ‘controlled drug’ to replace the term ‘dangerous drugs’.

Cannabis was originally listed as a Class B drug. Class B includes amphetamines, barbiturates, ketamine, methylphenidate, synthetic cannabinoid and synthetic cathinones (UK Government 2021). Possession of one of these substances is subject to up to five years of prison, an unlimited fine, or both. Supply and production is up to 14 years in prison, an unlimited fine, or both. Cannabis is classified as less harmful than Class A drugs, such as crack, cocaine, ecstasy, heroin, LSD, and magic mushrooms. But, the classification of cannabis changed to a Class C Drug in 2004 (Shiner 2015). This classification includes anabolic steroids,

benzodiazepines and khat. After four years, the government reinstated the classification of cannabis as Class B, effective in 2009 (*ibid*). Despite these general restrictions, cannabis use for medical and scientific purposes was permitted with special authorization. In 2002, cannabis use in clinical trials was permitted, and, throughout the early 2000s, advisory and research groups examined cannabis to provide assessments on its classification.

Nonetheless, cannabis was not legal for patients to use as a treatment, even though companies with authorization and licenses from the Home Office were able to produce the plant for medical and scientific purposes. The first company to do this was GW Pharmaceuticals (GW) in 1999. GW focuses on therapy for epilepsy, autism spectrum disorders, glioma – a tumor in the brain or spinal cord – neonatal hypoxic-ischemic encephalopathy – a brain injury caused at birth – and schizophrenia. The Medicines and Healthcare products Regulatory Agency granted GW a clinical trial exemption certificate, which allowed research to be conducted to study how cannabinoids, particularly two of the major ones, CBD and THC, might be used in medicine for such conditions. Successful results led to the commercialization of two cannabis-medicines – Epidiolex and Sativex.

Epidiolex is a lab produced and prescribed CBD oil formulation that helps to treat seizures in patients aged 1 year or older. It is often prescribed to patients with rare cases of epilepsy, such as dravet syndrome, lennox-gastaut, and other rare genetic conditions, such as tuberous sclerosis. GW also produces Sativex, a prescribed oral spray containing an equal mix of THC and CBD that helps to manage symptoms of multiple sclerosis, spinal cord injuries, and post-traumatic stress disorder. GW produces these medicines following standard pharmaceutical practices. GW manufacturing facilities are inspected and compliant with current

GMP regulations and ‘adhere to strict specifications that ensure batch-to-batch consistency and a stable shelf life’. This is the type of process that other medical cannabis companies, including Canadian, Colombian, Australian and Israeli producers, are expected to follow. But, current measures to be compliant and the regulatory restrictions are extensive and have limited the number of available and approved finished cannabis-based medicines.

Other medical cannabis are produced and sold following similar practices, which have also been authorized, but in a different way. Tilray, a Canadian producer, for example, produces GMP-certified dried cannabis flower, standardized cannabis oil and purified pharmaceutical preparations and has licenses and certifications to export these products to legal jurisdictions. There are many other Canadian producers that have followed a similar path to market, including other producers in countries where export is also legal, such as in Australia, Colombia, Israel, and Holland. In most cases, cannabis and medical cannabis products are not authorized pharmaceuticals and require special approval from regulators, prescriptions from practitioners and ‘compassionate access’ programs, or legal exceptions.

Amongst a widespread community of parents, advocates and organizations, there have been two women who have been particularly visible in the public eye. In Chapter 3, I discuss, Charlotte Caldwell, the mother of Billy, who had treated his rare form of epilepsy with medical cannabis, and in Chapter 5, I discuss Hannah Deacon, mother of Alfie Dingle, who started having seizures at eight months old. Both boys received licenses for treatment, at different times and in different ways. But, their struggle to treat their conditions has continued alongside their family’s

efforts to gain access to their cannabis medicines. They are two of many patients and families involved in a complicated advocacy campaign for cannabis treatments.

Despite medical legalization in 2018, the number of patients with prescriptions for medical cannabis treatments is limited. In November 2019, there were around 100 patients with access to medical cannabis, primarily obtained through private clinics, instead of through the UK's National Health Service (NHS). This is in part because NHS cannabis treatments has cost around £2,000 per month (Scott 2021). Many medical cannabis patients, therefore, have opted to buy cannabis through illicit channels, at much cheaper prices and, sometimes, more consistent supply. Some informants have noted that particular UK dealers who supply patients are now providing certificates of analysis, in attempt to offer assurance about product quality, and to compete with the changing standards of the legal market. Compared to GW's compliance and standardization practices to produce pharmaceutical-grade cannabis, illicit market supply in general is not traceable, controlled or tested. Although the UK produced and distributed 69% of the global amount of reported medical grade cannabis and held 94.6% of cannabis in storage, according to an International Narcotics Control Board report from 2017, supply issues remain problematic for patients in the UK. Some of these ironies and issues became visible in the process of commercialization, which is discussed in Chapter 5.

Although prescriptions and pharmaceutical grade medical cannabis have been difficult to obtain for many patients, over-the-counter CBD products are widely available across the UK. Under the Misuse of Drugs Act 1971, pure CBD is not controlled. Therefore, CBD products can be sold without special authorization from the Medicines and Healthcare products Regulatory Agency, as long as no medical claims about the product are advertised on its label and packaging. Such

loopholes in the legislation have led to an increasing number of CBD products being marketed as health supplements or wellness products, primarily sold in boutique shops, cafes, health stores and online. Holland and Barrett, a mainstream health foods store, was the first high street store to carry CBD products in 2017 (Young 2018). Other mainstream outlets now sell hemp and CBD beauty products, tinctures, edibles, vape pens, e-liquids and other forms of the substance. A handful of restaurants also offer CBD cocktails or hot drinks, and a number of cannabis-based kitchens and chefs have popped up across the country. When I entered the field, CBD was not a widely known, or understood, acronym. This changed as CBD products became trendy and easily accessible to mainstream consumers, as I describe in Chapter 6.

United States

The US has played a significant role in shaping the momentum of the movement and development of markets. Cannabis is prohibited at the federal level and is scheduled under the Controlled Substances Act (CSA). The CSA classifies substances into five categories based on medical potential, abuse potential and safety or dependence liability. Cannabis is classified in Schedule 1, the most restrictive category. But, at the state level, the status of cannabis varies from partial to full legalization.

The first state to criminalize cannabis was Massachusetts in 1911 (Oliver 2016), followed by a number of other states. Other steps to institutionalize prohibition occurred in 1937 when a federal ‘marijuana tax’ was imposed and in 1970 when President Nixon declared the War on Drugs (Becker 1963). Throughout the 1960s and 1970s, there were ongoing protests against prohibition and rallies to relax cannabis policies.

A positive step for cannabis advocates occurred in 1972. President Nixon established the National Commission on Marihuana and Drug Abuse (also referred to as the Shafer Commission), under the leadership of Pennsylvanian Governor, Raymond Shafer. Following consultations of medical literature and expertise, the Shafer Commission issued a report, ‘The First Report of the National Commission on Marihuana (1972): Signal of Misunderstanding or Exercise in Ambiguity’, and recommended decriminalization of cannabis possession (Nahas and Greenwood 1974). The Nixon administration ignored these recommendations. Cannabis was still classified in Schedule 1. But, various state legislatures began to reconstruct the ‘myth of marihuana, the killer weed,’ with a socio-legal framework about ‘the harmless mind-expanding herb’ (*ibid*: 73). There has been legal juxtaposition of cannabis at the federal and state level ever since (Boyum and Reuter 2005).

State-based cannabis policy initiatives paved way for widespread reform in the US. The first state to legalize cannabis was California, in 1996, for medical purposes. Over the next 16 years, a number of state legislatures and voters decided to legalize cannabis for medical purposes – Alaska, DC, Oregon, Washington, Maine, Colorado, Hawaii, Nevada, Montana, Vermont, New Mexico, Rhode Island, Michigan, New Jersey and Delaware. In 2012, Colorado voters passed Amendment 64 to legalize cannabis for all purposes and voters in Washington approved Initiative 502 to do the same. In 2014, Alaska, District of Columbia and Oregon also legalized cannabis for adult-use purposes. The number of medical and adult-use states increased through voting cycles and legislative initiatives. As of December 2021, there were 37 states with medical cannabis markets, 7 states that only allow CBD oil and 25 states that have legalized cannabis for all purposes (Disa 2021). When I first

started my fieldwork, there were only four states with fully regulated markets and 25 states with medical cannabis markets.

At the federal level, reform was less forthright. The Obama administration issued the Ogden Memorandum in 2009. At the time, there were 14 states that permitted some use of cannabis, and this memorandum specified that those operating within state law would not be prosecuted with federal resources. However, in 2011, another memorandum was issued that reversed the 2009 policy (Cole 2011). It provided clarification that companies in compliance with state law were still in violation of federal law under the CSA. This subjected cannabis businesses to raids and prosecution, despite legally operating in a state with a regulated cannabis market. Another shift in federal policy occurred in 2013. The Cole Memorandum (2013) was issued, which outlined eight regulatory guidelines under which states could legally run regulated cannabis markets. It encouraged federal agencies to take a ‘hands off’ approach towards businesses and individuals who were legally operating with a state’s legal cannabis market. State legislators followed these guidelines to establish a framework to permit state-based cannabis markets, without risk of federal violation.

I interviewed former Attorney General, Eric Holder, who served during the Obama administration, and was the acting Attorney General when the Cole Memo was issued. He said,

What we were trying to do was put in place some interim measures that would make sense from an enforcement perspective, from a resource perspective, and allow the states to make determinations on how they want to proceed...

As long as you didn’t go against those [eight] factors in the Cole Memo, there was ability for states to experiment within those guidelines.

Further federal support for cannabis markets at the state level came in 2014 when Congress voted to pass the Rohrabacher-Farr Amendment (now known as the

Rohrabacher-Blumenauer Amendment). This prohibited the Justice Department from allocating funds to interfere with state medical cannabis legislation. However, it does not protect adult-use cannabis companies from federal prosecution. This bill needs to be renewed annually, and has been one of the most consistent cannabis policies, especially during administration shifts after President Trump took office in 2016.

By the time I arrived in the field, the new Attorney General under the Trump Administration, Jeff Sessions, had rescinded the Cole Memo. His decision generated a significant amount of uncertainty. Holder said,

I think in addition to it not being a good policy, he [Jeff Sessions] is also introducing uncertainty into this that didn't exist before...that is the most disturbing part about what Sessions did...not putting anything in place, actually injecting into the system a huge amount of uncertainty. I don't think you can predict with this degree of uncertainty how any of this will turn out.

Despite this, cannabis businesses continued to operate as normal. As Holder noted, there was no inherent value in trying to predict how the cannabis market might evolve because the process of legal reform was ongoing. There were frequent changes to cannabis policies, while cannabis markets emerged and developed. The momentum of the movement increased despite the grey legal environment.

Cannabis businesses could operate, but under very limited conditions and at risk of harsh penalties. Due to cannabis being classified in Schedule 1, cannabis businesses have not had access to federal resources, such as banks and tax incentives. Companies that directly touch the plant, such as cultivation or manufacturing facilities and dispensaries, have had to operate a mostly cash-run business, or find alternative means of payment through cryptocurrency or by offering gift cards. Cannabis businesses have also faced tax restrictions due to the Internal Revenue Service's 280e Tax Code, which relates to the controlled status of cannabis that violates federal law (Ball 2021). This means that plant-touching

cannabis companies, unlike most businesses, cannot deduct any sales, general and administrative expenses, such as utility costs, health insurance, repairs and maintenance, contractor payments, or salaries. This results in higher tax rates, sometimes reaching 70%. Some companies, or ancillary companies, are exempt from these restrictions, such as law firms, marketing agencies, security, lighting or plant nutrient companies. These companies operate a less risky business and can follow most other practices that structure traditional business.

However, some problems cannabis businesses have faced changed, following the growth of the CBD sector. In 2018, interstate commerce was permitted for CBD and hemp products when former President Trump signed the Farm Bill into effect (MJ Biz Daily 2020). This was a major advancement for federal cannabis policy reform. It permitted hemp to be cultivated, including CBD and other extractions, for any purpose, nationwide. For the first time, interstate commerce of a cannabis derivative – CBD – and hemp was legal. In the US, CBD or hemp products must contain less than 0.3% THC – a higher percentage would be considered ‘hot’, or an illegal form of hemp. The Farm Bill also lifted restrictions on marketing, advertising, intellectual property and financial services for CBD businesses. Although hemp and CBD are just one segment of the cannabis market, this reform created legal clarity that companies, investors and entrepreneurs were able to capitalize on.

The same year the Farm Bill was passed, various national authorities also relaxed their stance on CBD. The Food and Drug Administration (FDA) softened its positioning on CBD, the Drug Enforcement Agency (DEA) placed CBD in the least restrictive control category, and the US surgeon general, who oversees public health policy, also advocated to reschedule cannabis. In April 2019, the FDA

Commissioner announced further measures to ‘advance our consideration of a framework for the lawful marketing of appropriate cannabis and cannabis-derived products under our existing authorities’ (Food and Drug Administration 2019). Speculation about health and safety was a significant consideration. There was a public hearing inviting stakeholders to present experiences, research and safety concerns. An internal agency was created, website information was updated to answer frequently asked questions and warning letters to non-compliant CBD companies were issued. Cannabis companies also joined together to lobby to relax CBD rules and regulations. This remained important despite the Farm Bill’s removal of CBD from the CSA because the FDA retained its authority to regulate the compound (Abernethy 2019). Congress also increased its pressure on the FDA to provide clarity on CBD and its regulatory requirements.

The FDA opened the Federal Register for public comments on CBD, which usually is open for a limited time. In June 2019, this registry was reopened indefinitely. In a public statement, the FDA said, ‘this extension will allow stakeholders to continue to provide new and emerging information, in as close to real-time as possible, as research in this area evolves’ (Food and Drug Administration 2020). The rapid pace of change is something that stakeholders have had to recognize in daily interactions in the cannabis market. The commoditization of cannabis, scale of market growth, nationally and internationally, similarly requires policy reform. New research and scientific publications continue to inform policymaking, business decisions and exchanges. All of this challenges the legal framework, its aims and effectiveness.

Another segment of the market, medical cannabis, has been subject to some federal reforms. Recognition of the medical use of cannabis increased following the

first FDA approved cannabis-medicine, UK-based GW Pharmaceutical's product, Epidiolex, in 2018. A study to investigate cannabis for patients with post-traumatic stress disorder was also approved in 2018. But, medical cannabis in the US is not available in the same way that it is in Europe. Each state has different policies for medical cannabis, and in most cases medical products are sold through dispensaries, and tracked and sold separately from adult-use products. In most states, taxes for medical cannabis are lower and the maximum amount that can be purchased per product and per day is usually higher. Rather than a prescription for a particular product or treatment, medical cannabis patients usually obtain a medical cannabis license or ID card that gives them access to available cannabis products sold at any dispensary in the state. Compared to Europe, medical cannabis in the US is not necessarily synonymous with pharmaceutical-grade products. Producing cannabis to GMP standards is not usually required. In fact, many medical cannabis products resemble products marketed for adult-use consumers. Although differently regulated, medical cannabis and adult-use cannabis products could easily be mistaken by consumers, given the similar packaging, flavors, formulations and accessibility. It is generally the case that states that pass medical legalization ultimately pass adult-use legislation, too.

The movement in the US is fragmented at the state level due to the lack of change at the federal level. Reform in the US continues to unfold, and many advocates, businesspeople and investors are hopeful that a federal shift will take place in the short term. All of these risks and restrictions, however, have not stopped the rise of the US cannabis market. In the year after the first states legalized cannabis for adult-use purposes, sales for medical and adult-use cannabis increased from US\$4.6 billion to US\$5.4 billion (Wee 2016). Over the next five years, that

number reached US\$17.5 billion (Yakowicz 2021). Despite Covid-19 restrictions, the cannabis market experienced tremendous growth in 2020-2021, and there was debate whether this market might be ‘recession proof’ (Schroyer and Schaneman 2021). Many states classified dispensaries as ‘essential’ businesses because they were exempt from certain Covid-19 restrictions. At the same time, there have been significant mergers and acquisitions within the sector, which have consolidated the market and created larger conglomerates and ‘multi-state operators’. The cannabis market in the US is now represented by publicly traded companies, venture capital backed start-ups, reputable executives and familiar business practices, as I discuss in more detail in Chapter 3.

Canada

The US cannabis market has had significant influence worldwide because of its current and potential size following federal reform, but the Canadian market set the precedent for many other jurisdictions. Similar to the US counterculture movement, there were protests in favor of relaxing cannabis policies throughout the 1960s and 1970s (Erickson and Hyshka 2010). In the late 1990s, public opinion began to shift to support cannabis decriminalization. In 1996, an epileptic patient, Terrance Parker, was arrested multiple times for cannabis possession, which he used to treat his symptoms (Riley and Oscapeella 1997). In response, in 2000, Ontario Court of Appeal ruled that cannabis prohibition was unconstitutional. In 2001, the Marihuana Medical Access Regulations Act was passed to permit the use of dried flower for medical use (Fischer, Russell and Boyd 2020). To obtain medical cannabis, patients were required to obtain a government issued license that was signed off by a physician. Further efforts to decriminalize cannabis were later considered. The

medical cannabis market in Canada grew slowly as support for decriminalization increased. In 2014, the Marihuana Medical Access Regulations Act was replaced by the Marihuana for Medical Purposes Regulation, which eased access for patients. This regulation replaced government licenses with a physician's prescription. Medical cannabis was being reconstructed and more closely aligned with other pharmaceuticals instead of being a controlled substance (Lucas and Walsh 2017). At the beginning of 2014, there were around 8,000 registered patients. This number increased to over 200,000 by the middle of 2017 and grew to around 340,000 one year later (MJ Biz Daily 2017).

In 2015, Prime Minister Justin Trudeau campaigned to legalize cannabis for all purposes (Wesley 2019). National polls revealed 70% of Canadians supported this reform. In 2017, Bill C-45 was introduced, which came into effect October 17, 2018 to allow cannabis for all purposes for anyone 18 years and older. Canada became the first G7 country to legalize cannabis for all purposes. Although cannabis is legal nationwide, provincial regulatory frameworks impose local requirements and restrictions. Compared to the US, marketing and advertising is more restricted in Canada. Packaging and labeling is required to be generic and simple. Compared to the US, the market potential is considered to be limited because of population size as well as regulatory restrictions. In 2020, adult-use cannabis sales were US\$2.6 billion, which had increased from US\$1.2 billion in the previous year (Hasse 2021). But, Canadian businesspeople have taken advantage of their experience of operating in a legal market and have expanded business operations to foreign markets through investment and collaboration.

When cannabis was legalized in Canada, there was an influx of people from the gold and mining sector who moved into the cannabis sector, alongside a number

of investors and businesspeople. There is now a strong Canadian influence in the global cannabis supply chain, in terms of policymaking, investment, agricultural knowledge, research and education. Although I do not use Canada as a case study, I frequently encountered and engaged with Canadian businesses and businesspeople. Other countries and companies looked towards Canadians to provide insight about legalization, cultivation, compliance, business development, and other experiences of operating in a regulated space. Canadian cannabis reform and market emergence has left an important legacy for the cannabis movement and market at large, which will be discussed throughout this thesis.

Colombia

One country's cannabis reform that benefited from Canadian influence was Colombia. Colombia's drug history is intertwined with violence, danger and criminalization, related to its significant role in the War on Drugs. This began to change in 2012 when possession of less than 20 grams was decriminalized (Langlois 2012). Medical cannabis legalization followed in 2015 (Reuters Staff 2015). The government passed Law 1787 to permit cannabis for medical and scientific purposes. Since then, there has been a rapid influx of foreign interest in its local market, especially because of the 'low cost of labor and operations', as I discuss in Chapter 4.

With increased interest in Colombian cannabis, a regulatory framework, Decree 613, was implemented in 2017 for cultivation, production and distribution of medical cannabis (Rivera 2019). This established registration, licensing and authorization processes for its domestic cannabis supply chain. The country issues four types of licenses: 1. Cannabis Seeds (for scientific purposes) 2. Cultivation

(‘psychoactive’ cannabis) 3. Manufacturing (cannabis derivatives) 4. Cultivation (‘non-psychoactive’ cannabis). Another license is required to export. However, exports are restricted to cannabis extracts, and only small quantities of dried flower for scientific reasons can be exported. Extracts require further production compared to dried flower, which adds an element of traceability and helps to curb historical organization of drug trafficking, crime and money laundering. Although exports have been limited, trade has been possible with the UK, the US, Canada and Australia. To export, strict compliance with pharmaceutical standards, such as GMP, GACP and GDP, is necessary. Certifications for this are expensive and timely for companies to obtain. In February 2019, Clever Leaves, a Colombian producer, became the first Colombian company to export medical cannabis to Canada (Somerset 2019). Since then, many companies have filed relevant paperwork to certify their facilities and products. In Chapter 4, I discuss the Colombian cannabis market in detail, how it has evolved from illicit to licit and the implications of this. This is at a relatively early stage of development compared to elsewhere because of the more recent law reform.

Israel

Israel is at the opposite side of the spectrum in terms of market development and existing forms of legalization. Some of the most significant scientific contributions to the development of cannabis research have been made in Israel. In 1964, THC, a psychotropic compound found in cannabis, was first isolated by Dr. Raphael Mechoulam, an organic chemist (Pertwee 2006). He and his research group also isolated other major cannabinoids, such as cannabidiol and cannabigerol. Dr. Mechoulam’s research also led to the discovery of the endocannabinoid system, a

biological and nerve signaling system that helps to regulate homeostasis, and identified endogenous cannabinoids, anandamide and 2-Arachidonoylglycerol. This work founded Israel's renowned position leading cannabinoid research. Ongoing research in this field is being conducted across the country, at Hebrew University, Israel Institute of Technology, a government funded research organization, Volcani, and other private and public institutions.

However, it was not until the 1990s that medical cannabis was allowed in the country. In 1995, an expert committee examined the country's cannabis policies. Dr. Mechoulam and the former Chairman of the Committee on Drug and Alcohol Abuse, Rafael Eitan, led this process (Miller 2019). The committee recommended legalizing the substance for medical purposes. However, the Ministry of Health did not authorize the marketing of medical cannabis until 2018 (*ibid*). But, some patients had access to cannabis treatments before that. Members of the Israeli Defense Force with post-traumatic stress disorder have been allowed to use THC for medical purposes since 2004. In 2019, there were over 50,000 medical cannabis patients in Israel, which increased from around 15,000 patients in 2014 (Shumel 2020). In 2019, there were only eight licensed cannabis producers in the country, but because of the quality of agricultural, clinical and chemical research on cannabis in Israel, there has been ongoing interest in exporting Israeli products, according to many local informants. With a limited population and patient size, many companies have looked abroad to expand.

Discussions to permit medical cannabis exports have been contentious since 2017. The Interministerial Committee of the Finance and Health ministries recommended to allow exports for medical purposes because of 'the economic potential created by Israel's many advantages in advanced regulation, research and

development, clinical experience and unique climate that can be exploited by farmers, researchers and entrepreneurs to develop Israeli products for the international market' (Jerusalem Post 2020). In 2019, this was approved. Licenses from the Health Ministry were required. But, it was not until May 2020 that the government signed a 'free export order' for medical cannabis products (Reuters Staff 2020). By November 2020, the first commercial medical cannabis products, produced by Panaxia and Seach Medical Group, were exported to Australia (Zonshine 2021). The regulatory framework has, on the one hand, hindered the scale at which some companies could expand their operations, but, on the other hand, have permitted business and research that is prohibited in most of the world. I discuss the Israeli market in Chapter 8, with specific reference to the process and implications of commercialization.

Other Developments

In this thesis, I focus on the countries discussed above in detail, but throughout my fieldwork, developments in national cannabis policy reform affected activities in the sites I visited and by people I interviewed. Local initiatives also influenced the shape and structure of the global supply chain and how it developed. Similar to my informants, I kept updated with policy reforms through industry news sources and mainstream media. Many of these reform processes related to some form of existing legislation. This produced significant change at the micro-level, and influenced the movement and market at large. In this thesis, I mention a number of reforms that established new market opportunities and informed the environment I experienced.

In Latin America, in 2013, Uruguay became the first country to legalize cannabis for all purposes, and in 2020, it increased its cultivation capacity for the

first time since legalization (Pascual 2020). In 2017, Paraguay legalized medical cannabis, and by 2019 granted five domestic cultivation licenses (Zdinjak 2019). The same year, Ecuador legalized the production and consumption of medical cannabis and permitted up to 1% THC in products. There were also a number of mergers and acquisitions, investments, joint ventures and expanded business operations across the region, such as in Peru, Chile, Argentina, Jamaica, Mexico, Brazil, Puerto Rico, and Colombia (Corda, Cortés and Arriagada 2020).

In Africa, legalization has been limited mostly to medical cannabis in South Africa, Zimbabwe, Lesotho and Zambia. There have also been ongoing reform efforts to decriminalize cannabis and legalize it for medical purposes, including in Ghana, Nigeria, Malawi, Swaziland, and Morocco (Oduor 2021).

In Oceania, New Zealand has been operating a medical cannabis market since 2017 and planned a referendum for adult-use cannabis in 2020 (Hutton 2020), which did not pass. Australia also has had a medical cannabis market since 2016 (Herrington 2021).

Surprisingly, China is the largest producer of hemp in world, although its regulations only permit cultivation in two provinces (Zhao, Xiong and Chen 2021). In 2018, Thailand was the first Southeast Asian country to legalize cannabis for medical purposes. Since then, there have been hundreds of licenses, a majority were issued for distributors and around a dozen each were issued for cultivation and manufacturing (Lamers 2020). In 2019, the Thai government also permitted export of cannabis for medical and scientific purposes (MJ Biz Daily 2019). In 2020, the first pilot clinic specializing in cannabis and traditional medicines opened (Setboonsarng 2020). A former UN drug policy official – President of the International Narcotics Control Board – joined a cannabis company, Thai Cannabis

Corp in 2020, embodying the rise in acceptance in Thailand (Lamers 2020a). South Korea also legalized medical cannabis in 2018. By 2019, the country had approved over 300 imports of cannabis medicines (Lamers 2019). Although most Asian countries remain more conservative about drug policies, I met advocates working to reform drug policies in Malaysia, Indonesia, Cambodia and Laos.

Widespread national efforts to reform cannabis policy challenged the strength of the international drug control system, and led to redrafting the UN's approach towards cannabis. Prior to 2017, cannabis and its compounds had never been subject to a scientific review process (Riboulet-Zemouli, Krawitz and Ghehiouèche 2021). It is customary for the World Health Organization to annually conduct scientific reviews of substances in order to make recommendations for change to the CND. Unlike most other substances that are reviewed and scheduled within a year, it took three years to finalize a decision on the scheduling of cannabis. Whilst it is typical to review substances, the process to schedule cannabis was uncharacteristically met with heightened tension, exceptions and interest. To an extent, international policymakers no longer could ignore local and national legalization or commoditization of cannabis. This entire process, and how the international drug control system factors into the cannabis market and movement, is discussed in Chapter 9.

Throughout the entirety of this thesis, local cannabis markets have been emerging around the world. Some form of local legislation and regulations generally connect these markets to a global supply chain. Navigating the legality of cannabis in each jurisdiction was essential upon market entry, and understanding the social and cultural nuances of each place was also necessary to economic success. Economic activity led to market development in each jurisdiction that was met with

varying levels of local and foreign interest. Although markets were at different stages, there were a number of similarities in the ways reform unfolded and how cannabis shifted as a commodity. The transition from illicit to licit brought with it a range of commercial practices that contributed to the commoditization and legitimation of cannabis. In the next chapter, I outline key stakeholders in this process and map out how the market has developed out of the movement. As the status of cannabis shifted from illegal to legal, I also draw out factors that contributed to redefining it as an accessible, normalized commodity of choice.

Chapter 3
Ethnographic Context of the Cannabis
Movement and Market

Introduction

On June 18, 2018, cannabis made the UK's headline news. The story was about Charlotte Caldwell and her 12-year-old epileptic son, Billy. At the time, I was working on a consulting project for one of my North American clients interested in the European medical cannabis market. I reported on this case because it was vital to legal shifts in the UK that impacted the North American based business. The Caldwell's returned home from Canada after filling a prescription for Billy's six-month supply of medical cannabis treatment from a Canadian producer, Tilray (BBC 2018). Upon arrival in the UK, all of Billy's medicine was confiscated at Heathrow Airport. Charlotte told the press,

I will just go back to Canada and get more and I will bring it back again because my son has a right to have his anti-epileptic medication in his country, in his own home...

Let me tell you something now; we will not stop, we are not going to stop, we are not going to give up, we have love, hope, faith for our kids and we are going to continue (Marshall 2018).

A week after Caldwell made this public call to action, her son was rushed to the hospital (Beattie 2018). Billy's condition was deteriorating. He was admitted to the intensive care unit. When Billy woke up the next morning, the UK Home Office (@HomeOffice 2018) posted a statement by Home Secretary Sajid Javid on Twitter,

This morning, I've used an exceptional power as Home Secretary to urgently issue a license to allow Billy Caldwell to be treated with cannabis oil.

Once Billy's medicine was returned and administered, his condition began to stabilize, and he was released two days later (BBC 2018).

There was a sudden increase in media attention. Public interest shifted and political pressure increased to change cannabis policies. An expert consultation committee was organized to review the use of medical cannabis (Javid 2018), and videos of patients with epilepsy, who started to control their seizures with medical cannabis, were shared widely (Gayle 2018). Empathetic messages from mothers

triggered emotional responses and emphasized narratives about human rights.

Scientific claims and research helped to legitimate these stories, and added accepted forms of rationality to moral arguments.

But, this advocacy work cannot be reduced to one family. There were other efforts that contributed to the UK's cannabis movement and its momentum, such as the campaigner's group, 'End Our Pain', which started in February 2018. Hannah Deacon, another mother advocating for her son's cannabis medicine, told me the group met with Theresa May, then the Prime Minister. She said,

We were allowed to apply for a license in March 2018 for my son, Alfie. He was issued a license and prescription on 19th June 2018.

It was very much a joint effort. All the media before Charlotte even came on the scene meant that, eventually, the policies were looked at again, due to all the work we had done.

Advocates and businesspeople with a vested interest in legalizing cannabis for medical purposes became involved at different levels. The Caldwell's, Hannah and other families were the visible face of stories. But, organizations, such as UK-based United Patients Alliance and drug policy think-tank Volteface, were key in evoking the British public's support. These groups crafted press statements, lobbied policymakers and created a strategy for the pathway to legalization. Less visibly, there were investors and businesses that funded some of these initiatives, which made certain advocacy efforts possible.

Nearly a year after the case unfolded, I learned about some of the Caldwell's economic support that helped to pay for flights to Canada and Billy's medical cannabis treatment. There was never any public mention about this anonymous donation. I only found out about it when I was in Panama, when I was invited to a post-conference dinner party. Towards the end of the evening, I spoke to the host of the dinner, Lorne, about Charlotte and Billy and the reform in the UK.

Lorne is a Canadian investor and entrepreneur who is known in the media and amongst many of my informants as ‘the godfather of Canadian cannabis’. He has been involved in the cannabis market since the early 2000s. He founded Tokyo Smoke, in 2018, and later co-founded byMinistry, which are ‘lifestyle’ cannabis companies discussed in detail in Chapter 8. Lorne started investing in small start-ups, which owned licenses to cultivate cannabis in Canada. Since then, these companies have grown into some of the most well-known and largest publicly-traded cannabis companies, some of which are discussed later in this chapter.

Throughout my fieldwork, Lorne and I attended many of the same conferences, and I was invited to a number of the intimate, post-conference dinners he hosted. The attendee list usually included investors, business executives, key stakeholders and others who he felt would benefit from introduction or might facilitate business deals. ‘I can get a room full of people that will get things done for the same price of having a booth at a conference, and I almost always can guarantee that people will walk away collaborating with someone they meet at my dinners’, Lorne said. He was referring to the common practice of paying for an exhibition booth or sponsoring a conference to gain visibility and credibility and to facilitate better networking for business exchanges. Instead of doing this, he would hand pick individuals to come together in a more comfortable, casual setting. The dinners were elaborate, held at highly rated restaurants. He typically preordered food, shared family style, which was enough for guests to enjoy multiple courses and second helpings of each. Drinks were ordered individually, yet also included in the full bill he covered. For Lorne, this environment enabled people, who were known and trusted enough to attend, to connect in different ways because of the sense of familiarity, privilege and respect for being present.

Throughout the evening or after dinner, a number of attendees shared and exchanged cannabis products, whether joints, vape pens, or edibles. This was always a context in which meaningful conversations took place and strong relationships were established. Similar to the way in which sharing a glass of wine or a bottle of beer is common at networking events, the same idea was extended to joints or vape pens. I found it to be more intimate than alcohol, because joints and vapes are passed from hand to lip to hand. Consuming alcohol or cannabis are individual decisions, and even for those who chose not to partake, the presence of both lightened the mood and elevated connections. The experience of consuming cannabis together enabled and strengthened relationships and later exchanges.

It was in this context that I learned about the Caldwell's sponsor and some of the less advertised stakeholders involved in measures to support policy reform and market emergence. I was speaking to Lorne within a group of businesspeople and investors who were sharing a joint. Lorne casually explained that the reason Charlotte and Billy were able to come to Canada to obtain his medicine in the first place was because he had sponsored the family. He felt that doing this was 'the right thing to do', especially after having experienced the benefit of medical access in Canada years prior. Lorne did not know that in doing this that his actions would have any impact on the process of reform in the UK. Yet, he believed that patient advocacy would influence the pace of reform and that cannabis medicalization was a stepping-stone to full-scale legalization.

I was not surprised to find out that Lorne was the person to sponsor the Caldwell's because, at the time, he was involved in cannabis projects in Africa, Europe, Latin America and North America. Lorne seemed to become involved in a potential cannabis market before it developed. However, I had mostly known Lorne

as an investor rather than somebody involved in the activities of the movement. But the way he, and many other informants, described the ‘cannabis space’ reflected the interconnectedness of the market and movement. In this way, it was interesting to find out that Charlotte and Lorne were familiar with each other’s circumstances – Lorne’s investment portfolio and the Caldwell’s struggle to access medical cannabis in the UK. Despite their individual incentives for reform, both became significant stakeholders in the movement. Since legalization, they have both continued to play a part in ongoing reform and market development. It is difficult to discern what was the real catalyst for change for legal reform in the UK: the economic support, the moral argument for legal reform or the position of access to cannabis medicine. However, recognizing the complexity of the process is more important than establishing the chronology of it.

The UK’s cannabis reform was locally implemented, but globally connected and supported. While moral and emotional narratives captured and swayed public opinion, there were also distant economic exchanges that strengthened the momentum of the movement. Less visible involvement of investors and companies connected markets through interactions at events and conferences. Legal change impacted economic change, and economic change also impacted legal change. In addition to capital exchanges, personal relationships created foundational forces within local cannabis markets and a global supply chain. A diverse set of people became involved in economic, political and social activity relating to cannabis from early stages of law reform to marketization. All of this changed the way that cannabis was understood and exchanged as a commodity.

Legalization, its effects, and the people behind this process are at the heart of this thesis. A direct effect of legalization, although not automatic, is marketization

of cannabis. The market plays a significant role, which developed early, and although there was always an existing cannabis market, legalization influenced how it has transformed. One of the major changes I trace is the progressive transformation of cannabis, as an illegal substance, into a legal market commodity, and the wider implications of this. In doing this, I also trace through the broader movement that surrounds this process. In this way, the market and movement cannot be separated. Throughout this thesis, I examine how cannabis as it relates to the substance, or product, market and movement are connected. I also ask how this process of transformation, and the people behind it, takes place. In this chapter, I introduce the theme of marketization as it relates to consequences of legalization, the process of commodification and the emergence of the market.

Stages and Segments of Cannabis Markets

Since the 2000s, there has been considerable cannabis policy reform, locally and internationally, and each jurisdiction is at different stages of development. There is no distinct way to classify each phase because socio-legal and economic change has happened continuously and the processes become blurred. Lorne, however, often spoke at conferences and explained his personal categorization of different stages of reform and market development.

In the 2000s in Canada, the country was experiencing what Lorne referred to as ‘Cannabis 1.0 – the beginning of the story’, or early days of medical cannabis when patient numbers were low, regulations were unclear or experimental, and supply was inconsistent. Nearly two decades passed before Canada entered ‘Cannabis 2.0’, when cannabis was legalized for all purposes, in October 2018. This was the legal shift from partial to full legalization, but it does not fully account for

the social or economic shifts that happened as a result. During this phase, there was an increase in scientific evidence and research, growth of online communities and offline events, and investment in marketing and business development. There was more mainstream media and entertainment coverage, which reported on legal shifts, celebrity endorsements, economic figures or other newsworthy topics. All of this contributed to consumer education, another activity that cannabis companies invested in. Some of these elements legitimized cannabis use, others normalized it, and some did both.

Lorne believed that the current phase in Canada, as of August 2021, is ‘Cannabis 3.0’. In this stage, public perception shifts and acceptance grows, as legalization encourages forms of normalization. There also is a shift from private to public consumption of cannabis, which factors into the destigmatization of cannabis use. This stage involves participation from mainstream sectors and big corporations, such as ‘Big Pharma’, ‘Big Alcohol’ and ‘Big Tobacco’, which contribute to the legitimization of cannabis. The involvement of institutional banks, such as Cowen and Cannacord Genuity, large consultancies and law firms, such as Deloitte, Dentons, McKinsey & Co., and other mainstream companies, including Ben & Jerrys, Paypal, CVS, Walgreens, and Boots, help to mobilize the process of commercialization and normalization.

Associating each of these activities with a particular stage exemplifies increased frequency, but does not imply that these processes are mutually exclusive. Since different jurisdictions experience different rates of growth and social change, there is an ongoing movement to normalize, commercialize and legitimize cannabis markets and cannabis use. These processes happen simultaneously at the local level, and are connected to shifts happening globally.

It was not just Lorne who talked about stages of reform and market development in these terms. When I was in Colombia in its early stages of development, people suggested that the market was comparable to the Canadian cannabis market five to ten years prior. References to the UK addressed its market being ‘years behind’ the US and Canadian market, as my American informants put it. Some British informants even traveled to Canada or the US to see how the UK market might develop and to understand what type of commoditization was possible. In Israel, cannabis research was considered decades ahead of the American market, but the marketization of products was far more advanced in the US than Israel. Although markets were compared relative to time, they were also connected through the conceptualization of time. It was common to refer to the idea of ‘dog years’ because of how markets significantly changed in a short period of time. As rules and regulations, public opinion, product development, and research shifted, so did the type of daily experiences, thus creating many layers of market involvement.

Although it has never been as simple as my informants make out, nevertheless, categorizing stages of reform has been a helpful way to conceptualize legal change and market development. In this thesis, I will trace through this process with different case studies at different stages, from partial legalization and nascent markets to full legalization and advanced markets. Using this framework also helps to raise issues about the process of commoditization. In this process, an illegal substance transformed into a legal product, therefore becoming a commodity. In the remainder of the chapter, I trace different ways in which the substance itself has changed, as a medicine, wellness product, and investment opportunity.

Cannabis Medicine and Science

One of the primary changes part of legalization and commodification was how cannabis became regarded as a medical product, supported by science. But, the process of defining cannabis as a medicine was complicated by blurred distinctions between medical cannabis and its therapeutic uses and cannabis, or cannabis compounds, used for therapeutic, or wellness, reasons. There are a spectrum of purposes for which cannabis has been used, such as for arthritic pain, anxiety, insomnia, muscle aches, menstrual cramps, headaches, seizures, tumor growth, nausea and digestive conditions. In some cases, cannabis medicines holistically treat patients and in other cases it can help to cure particular conditions. The use varies from supplementary, on an occasional basis, to necessary, on a daily basis. Some informants claimed that belief in yet another way – that all cannabis is medical, even when not prescribed or licensed. These individuals also believed that cannabis has therapeutic benefits, whether or not that is the intended purpose of consumption. Part of this belief stems from an understanding of how cannabis compounds, or cannabinoids, interact with an endogenous system in the body, the endocannabinoid system (ECS).

As part of my consultancy work, I was hired to write a blog series, which included outlining the basics of the ECS, for a Canadian company, Irisa, which was launching a recreational cannabis brand. Although the ECS was widely understood by employees of that company, at the time in 2019, it was not public knowledge. The Irisa team felt that it was necessary to provide a simple way to understand the complexity of the ECS, and the science behind how and why consuming a cannabis product works. They believed that outlining the ECS in scientific terms would help legitimize cannabis use and explain its widespread applicability in the body. The

blog featured eight pieces, but I have selected three excerpts that cover the basic science I had to learn during fieldwork:

Part 1: The Endocannabinoid System

A key endogenous system that helps the body achieve biological balance is the endocannabinoid system. As the body's largest neurotransmitter network, the ECS helps regulate homeostasis, or remain stable and balanced despite external, or environmental, fluctuations.

Here are a few things the ECS regulates:

- Metabolism + Digestion
- Immunity + Inflammation
- Stress + Mood
- Pain + Pleasure
- Sleep + Circadian Rhythms

Think of the ECS as your internal support network. The ECS sends messages to check in and confirm that all is balanced.

Receptors

Your ECS has receptors throughout the entire body on the surface of cells, from head to toe. This is why your ECS is able to maintain balance from your brain to your nervous system, liver, immune system, gastrointestinal systems, and so on.

Throughout this system, and throughout the body, there are two widely known receptors: CB1 and CB2.

CB1

If we begin head to toe, think about one of the first stops being in the brain and the nervous system. This is where an abundance of CB1 receptors are found... There are other muscles, tissues and organs, such as the lungs, kidney and liver, where CB1 receptors are also located, just in lesser density.

CB2

When it comes to locating CB2 receptors, the immune system reaps the benefit of having more... There are other parts of the body (e.g. the liver, blood cells and nervous system) where CB2 is also found.⁴

Endocannabinoids – Anandamide and 2-AG

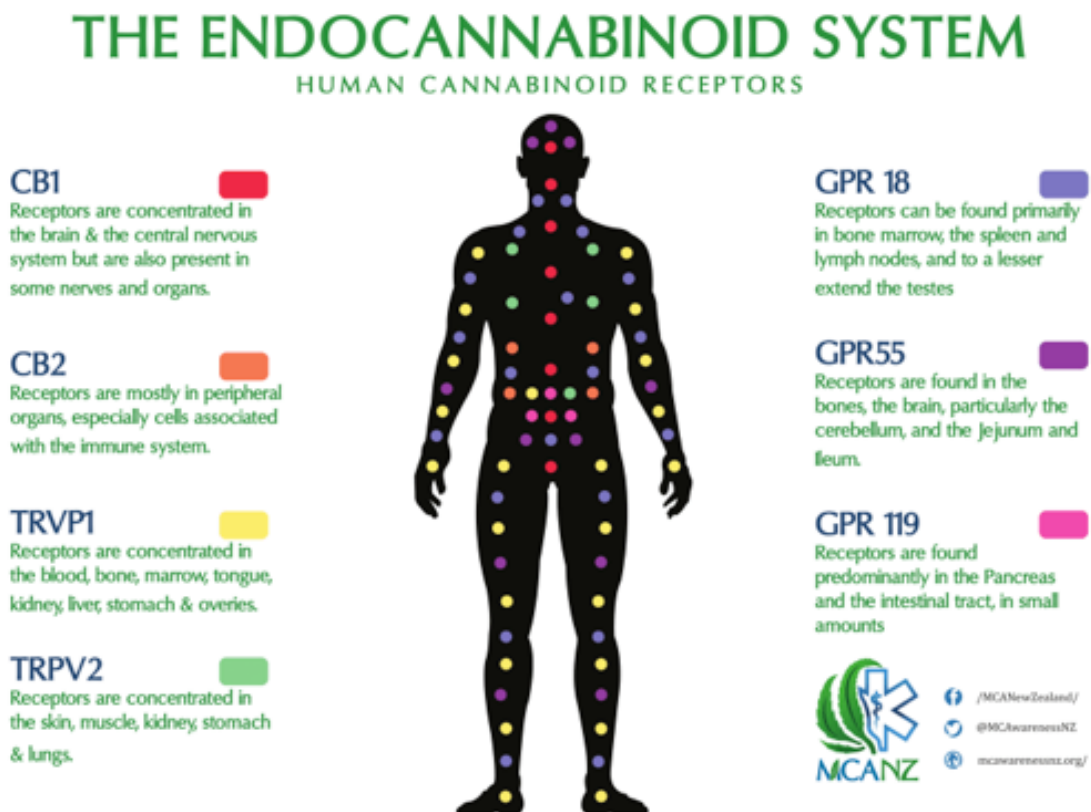
Endocannabinoids are chemical molecules produced in the body. They ‘unlock’, or activate, receptors, thus triggering messages and reactions in the body.

There are two well-known and researched endocannabinoids, Anandamide and 2-AG.

Anandamide is recognized for its blissful sensations and the following:

- Appetite
- Memory
- Movement
- Fertility
- Pain
- Motivation

⁴ There are many other cannabinoid receptors that I did not write about, but many informants suggested these were significant to outline. See image.



2-AG is another important endocannabinoid that signals:

- Immunity
- Appetite
- Emotions
- Pain
- Bone health
- Inflammation

Metabolic enzymes – FAAH and MAGL

Metabolic enzymes break down endocannabinoids. Two of the most understood enzymes are fatty acid amide hydrolase (FAAH) and monoacylglycerol lipase (MAGL).

FAAH breaks down the cannabinoid anandamide and MAGL breaks down another cannabinoid, 2-AG. Both enzymes are quick to respond making sure that the produced endocannabinoids get used at the right time and in the right place.

Cannabis Consumption & The ECS

Phytocannabinoids (cannabinoids found in the cannabis plant), such as CBD and THC, interact with the ECS. However, unlike endocannabinoids, they do not fit perfectly into CB1 or CB2 receptors.

The stereotypical euphoric ‘high’ associated with THC is due to the cannabinoid mimicking the activation of CB1 in a similar fashion to endocannabinoids.

CBD modifies how receptors are triggered, and thus alters relevant responses.

CBD can inhibit how THC binds to receptors. This is why CBD can help to relax one’s psychotropic experience from THC.

Part 2: Cannabis 101

Cannabinoids

Cannabis is composed of more than 100 compounds, referred to as cannabinoids. Each cannabinoid (e.g. CBG, CBN, THCV, THCA, CBDA, CBC, and the list of acronyms goes on and on) has its own distinctive effects. Some may enhance focus, sleep or appetite and others may reduce anxiety, pain or depression. When paired together, it is believed that cannabinoids maximize the plant’s potential effect. This is called the ‘entourage effect’.

Currently, there are two key cannabinoids: THC (Delta-9-Tetrahydrocannabinol) and CBD (Cannabidiol). THC is known for its psychotropic effects (commonly referred to as the psychoactive substance) that produce the stereotypical ‘high’ effect and CBD is non-psychoactive, recognized for its therapeutic benefits (e.g. anti-inflammation, anti-anxiety).

There are products with high THC and low CBD, high CBD and low THC, or other ratios of THC and CBD. The potency, or ratio, of the cannabinoid content will guide your experience.

Strains

Different cannabis strains provide different experiences. There are three cannabis strains you’re most likely to hear: indica, hybrid and sativa. I was taught to remember indica as ‘in-da-couch’ because that’s likely what it’ll do. Indicas are known for relaxing effects that take the edge off of the day. If you’re looking to boost a fab day, sativa is your go-to-gal, providing some giggles and upbeat energy along the way. A hybrid is the middle-man, a combo deal of some sativa and some indica.

Part 3: Terpenes

Terpenes are the naturally secreted oils that fill the air with aromatic scents. There are thousands of terps around us, including in the plant and insect world. At least 100 of those terps can be found in the cannabis plant.

Terps are the smells that would catch your nose as you walk through fields of lavender, hike through the pines or sneeze from an extra peppery kick. All the above scents can be found in cannabis, too.

Terpenes also serve a very distinct purpose in the plant world; they can either send predators away or bring in suitors (in plant talk those are the pollinators). Depending on the predator or pollinator, terps may have that ‘mic drop’ effect or it may be a bit more of a romantic greeting.

Here are two key takeaways:

1. Terpenes provide aromatic smells and certain scents have specific effects.
2. Most terpenes found in cannabis plants both reduce pain and inflammation.

Knowledge about the ECS, cannabinoids, terpenes and strains was common sense to a majority of my informants involved in the cannabis market. Although this information was never taught in health classes or medical school, understanding how cannabis interacts with the ECS was considered basic information. Even people without a technical or scientific background were well versed in the science of the ECS. Many informants suggested that being literate about the ECS and the chemistry of cannabis was similar to knowing the effects, taste, and alcohol percentage of a particular type of liquor. In the way that people understand how being drunk relates to variables, such as ingested food, mood, and other personal attributes, most people learned and accepted that cannabis use is an individualized experience because of biological, environmental and personal factors that relate to the ECS.

I had never learned about the ECS until my first cannabis conference in 2016 where businesspeople spoke about cannabinoids and biological processes with confidence. It quickly became clear that I would need to learn the complexities of the ECS to hold engaged, informed conversation with others. My informants had to learn how to ‘play the game’ because the market required its own set of cultural and

technical understandings. A biological framework helped to legitimize a person's involvement as a businessperson, researcher or advocate. These linguistic practices also were used to generate credibility for economic initiatives. In this way, shared knowledge also demonstrated a sense of belonging to the cannabis culture and commitment to the sector because education on this matter was usually a personal initiative. It created a bridge for people to connect, no matter their market involvement or incentive.

There also seemed to be an informal expectation that people involved in the cannabis market had a responsibility to educate those outside of it. Many businesspeople would informally teach their friends and families about the ECS, cannabis, reform, prohibition and other relevant topics. Likewise, many businesses, such as Irisa, did this to educate their customers. The history of selling cannabis products from unknown producers and suppliers was being replaced by consumers equipped with the language to question their supplier and engage in product diversification, which changed the nature of cannabis as a commodity.

Whilst those involved in cannabis activities had a basic understanding about cannabis science, there was still an ongoing need to continue to conduct research, attend webinars and learn about new findings. There is ongoing research about the medicinal effect of terpenes (Baron 2018; Ferber et al. 2020), which is one of the main goals for Israeli company, Ebyna. Studies about the 'entourage effect', as I outlined in the above blogs, have been conducted to investigate how cannabinoids might interact and enhance the overall efficacy of formulations and products (Blasco-Benito et al. 2018; Russo 2019). But, people still question whether or not the theory of the entourage effect is myth or fact. Meanwhile, studies show that particular ratios and doses of cannabinoids are helpful to some individuals with a

medical condition, whereas the same ratio does not benefit patients with a different medical condition (Millar et al. 2019; Dewey 1986; Lichtman and Martin 2005). For example, scientists suggest that breast cancer patients with hormone-driven tumors should have specific cannabinoid protocols – using a particular amount of THC or CBD – because each compound interacts by inhibiting and impairing tumor growth at different rates (Almada et al. 2020; Dobovišek, Krstanović, Borštnar, and Debeljak, 2020). My informants described research potential as immense and increasingly necessary. Some current research questions include: which strain, cannabinoid or terpene profile might be most effective to reduce addictive behavior? What is the most effective way to treat polycystic ovary syndrome, Crohn’s disease, AIDs or attention deficit disorder? How does cannabis influence childhood development and what is the right treatment and dosage for pediatrics? With more access to conduct research because of ongoing reform, the understanding of cannabis and its medical uses has continued to change.

Even with awareness about such research, there were general terms that contributed to miscommunication and conflict. The term ‘medical cannabis’ was used loosely, sometimes leading to slight confusion. As I outlined in Chapter 2, there are legal differences in the way medical cannabis is regulated in different countries. A major part of the confusion relates to the dissimilarities between cannabis medicines and other pharmaceutical products. Medical scientists still have difficulty determining appropriate dosage, administration, cannabinoid and terpene content for each individual patient.

An element that complicates this is the rise of a wellness sector, following the commoditization of hemp and CBD products sold over-the-counter as supplements, sometimes also referred to as ‘nutraceuticals’. These, compared to

prescribed or licensed medical cannabis, can be bought online and at retail stores, pharmacies, cafes, boutique shops and other outlets by any consumer. These CBD and hemp products are marketed for therapeutic, or wellness, purposes, which contributed to some consumer confusion about the distinction between medical and wellness cannabis products. Knowing what is used for medical reasons versus what is used for therapeutic purposes gets blurred, and is not always easy.

A Uruguayan doctor and self-proclaimed cannabis activist, Dr. Raquel, presented the most straightforward clarification I heard. She differentiated three categories: medicinal, medical and therapeutic cannabis. Dr. Raquel said,

Medicinal cannabis is a type of product and quality.

Medical cannabis is the purpose, and may or may not be pharmaceutical grade quality.

Therapeutic cannabis brings activities in the body, but it is not medical. It may be a feeling of good or relaxation. This could also be exercise. Therapeutic is anything that is ‘good for me’, but we’re not speaking about quality.

Dr. Raquel distinguished between scientific contexts and subjective effects. The former relates to the effect of a medical product that specifically addresses an ailment in a particular way. Whereas, the latter is about the marketed moods, such as pain relief, stress relief or relaxation for better sleep, moods or feelings. The difference is how a product and its purpose are defined. Yet, the categorization becomes blurred when physical effects are confused with emotional ones, especially as dictated by the subjectivity of marketing choices.



Go Drops for Energy
A powerful blend of cannabis, caffeine, and three plant medicines to promote energy.
Each Go Drop contains 5mg THC and 5mg CBD.



Love Drops for Arousal
An exquisite blend of five herbal aphrodisiacs and cannabis to boost arousal.
Each Love Drop contains 2.5mg THC and 2.5mg CBD.



Genius Drops for Brainpower
An optimal blend of five plant medicines, caffeine, and cannabis to promote cognitive performance.
Each Genius Drop contains 2.5mg THC and 2.5mg CBD.



Chill Drops for Relaxation
A unique blend of high-CBD cannabis and plant medicine to promote relaxation.
Each Chill Drop contains 5mg THC and 25mg CBD.



Bliss Drops for Happiness
A euphoric blend of three plant medicines and cannabis to promote extroverted happiness.
Each Bliss Drop contains 5mg THC and 5mg CBD.



Midnight Drops for Sleep
Midnight is a thoughtful blend of plant medicine and cannabis to promote sleep.
Each Midnight Drop contains 5mg THC and 5mg CBD.

Subjective effects and mood marketing was another deliberate strategy many cannabis brands adopted to attract consumers less familiar with cannabis use, as I discuss in Chapter 6. Products would be labeled with moods, emotions or feelings and paired with a particular time or event, such as in the morning, a night out, an outdoor adventure or relaxation for self care. It was one way of familiarizing consumers with cannabis through already existing frameworks of understanding. Some companies supplemented this marketing strategy by a foundation of cannabis science to promote an element of reliability, trust and efficacy. Such deliberate activity, whether indirectly or directly coordinated, contributed to varying levels and forms of knowledge about cannabis products, whether for medical, wellness, recreational or other purposes, which hindered unified terminology across the supply chain.

Dr. Raquel gave a similar presentation about the correct terminology at various conferences in different countries, including conferences I attended in Colombia, Israel and the UK. She felt that the lack of shared understanding about significant terminology, which was essential to many business operations and legal frameworks, was problematic for the stability and strength of the global market. The issue with perpetuating information or using the wrong language to describe medical, medicinal or therapeutic cannabis confused the process of commodification. When companies advertise or market products with different terminology or information, consumers gather conflicting understandings. This might contribute to further stigmatization or negatively affect normalization and commercialization. Consumers seek trustworthy information, but when companies rely on different sources, then there are concerns as to what information is trustworthy in the first place. Rather than universally adopting the same legal

terminology about cannabis, jurisdictional differences can contribute to a degree of transnational heterogeneity and complexity of market growth.

On the one hand, the complexity that results from the rise of this market is down to the fact that those involved were learning on the job, through experience and as new research and reports were released. It was an ongoing responsibility, usually self-imposed. Understanding the context of how and why some people might get involved in the market and movement is one step to explaining this. On the other hand, the issue with conflicting terminology is the pace at which reform happens and how rapidly markets develop. There were shifting meanings, interpretations and findings about cannabis, from an agricultural, biological, chemical, social and legal perspective.

Confusion of terminology is in part why the transformation of cannabis into a commodity has not been straightforward. It has required a lot of effort to increase comprehensibility. Deliberate choices and coordinated activity has been required to do this. The plant, and its parts, are complex, which, in part, has allowed it to be made into a variety of different products. The commoditization of this, therefore, has necessitated a process of involvement with technical knowledge, specialist information and scientific fact to make it right. Standardization and harmonized policies, to an extent, helped to clarify understandings, but also has complicated ongoing research and modern day understanding of the plant as more than simply a pharmaceutical substance or traditional commodity. Marketing and branding is part of the process to remove the hangover of old habits and establish a shifted consumer experience of cannabis. Scientific information was not only used to transform cannabis into a medicine, it was also utilized to normalize and destigmatize products for recreational and wellness purposes. Of course, this draws tensions between those

involved in the grassroots movement and those involved in the emerging market. Commodification has not been wholly positive and has not simply been about attractive, branded products. In the next section, I turn to how the categorization of cannabis commodities further diversified through marketization.

From Illegal Substance to Commodity

Through marketization, the legitimized and legalized uses for cannabis changed, which impacted the way in which the market segmented. The commoditization of cannabis has opened a number of market sectors. There has been a shift ‘moving into a global opportunity from beauty to food to lifestyle to wellness, all of which are looking to disrupt, whilst, of course, not breaking any federal law’, Lorne said. Many of these sectors developed from already existing sectors, by creating familiar products with an added ingredient of cannabis compounds, such as CBD skin serums or THC chocolates. Now, the licit market is not only emerging, but it also taps into sectors, such as alcohol, tobacco, food and drink, pharmaceuticals, wellness, beauty, banking and cryptocurrency, agriculture, textiles, fitness, and tourism, which it had never been involved in before.

The regulated market is now distinguishable from the illicit one, in part because cannabis products more closely reflect other consumer good products. There even have been conscious branding decisions by businesspeople to remove any language and images depicting cannabis to eliminate any association to its history, as I demonstrate in Chapter 7. Illicit market cannabis was slightly mysterious and associated with discreet interactions. People understood that consuming it would provide a high, but there was not much explanation, nor interest, about how and why it worked. It was not important information to

guarantee a sale. Often times, consumers also did not have much choice other than the supply street dealers carried. The dissemination of information from marketization played a part in expanding product choice and differentiating interested demographics.

As local markets matured, consumption rates and the type of consumers were influenced. In 2021, New Frontier Data reported on 10 essential cannabis consumer archetypes in the US. From very infrequent to very frequent, the report identified: 16% ‘infrequent partakers’ who only use cannabis flower, 5% ‘aching dabbers’ who mostly prefer cannabis flower, 9% ‘social nibblers’ who love edibles, 8% ‘holistic healers’ who consume non-flower products, 15% ‘classic smokers’ who frequently consume but do not live in a legal state, 10% ‘engaged explorers’ who consume different cannabis products frequently, 13% ‘modern medicinals’ who are frequent medical and recreational users, 7% ‘legacy lifestylers’ who consume very frequently for recreation, 9% ‘contemporary lifestyles’ who also consumer very frequently and enjoy flower and non-flower products, and 8% ‘savvy connoisseurs’ who spend the most on cannabis products. Cannabis no longer could be narrowly defined. In the legal market, as a commodity, cannabis products diversified just as the demographics of those consuming it were widening.

But, throughout the process of legalization, illicit market activity continued. In some legal markets, the price of cannabis was higher than illicit market product due to tax rates. It was also reported that some illicit market quality surpassed regulated cannabis (Armstrong 2018). When I was in Canada for fieldwork, I learned that this was because of scaled, or mass, production. Many producers automated processes in controlled facilities to increase efficiency. Whilst this helped to standardize production batches, it meant that less personal care was given to each

plant. As the market developed, the rise of mass-produced product created a gap in the market for small batch, or ‘craft’, cannabis. A number of cannabis companies were launched and branded as luxury products, which highlighted attributes, such as being grown outdoors, organically, handpicked or limited editions.



Some consumers who had not frequently consumed prior to legalization could not immediately recognize the difference between mass-produced and craft cannabis products, but other consumers with a history of cannabis consumption were deeply aware of the impact of legalization. These latter types of consumers were used to purchasing their cannabis from a dealer and later observing it with all of their senses – seeing the colors of the bud, smelling the terpenes, and feeling the stickiness of trichomes, sticky glands that look like hair or fur on cannabis buds, or flower, as some informants described.



Other elements are detectable by eye, such as the level of oxidation and curing or trimming techniques, which is identified by seeing the removal of seeds, stems and leaves. Cannabis connoisseurs could differentiate between small-batch, hand-picked cannabis and stale, oxidized bud that had not been properly manicured still showing off seeds and stems.

Some cannabis consumers, especially connoisseurs, could identify popular strains, such as ‘OG Kush’, ‘Bubba Kush’, ‘Sour Diesel’, ‘Purple Haze’, ‘Gelato’, ‘Pineapple Express’, or ‘AK-47’. People familiar with these terms knew that ‘OG Kush’, also known as ‘Premium OG Kush’, is a crossbreed of three other strains and is considered a sativa-dominant hybrid. ‘Purple Haze’, named after Jimi Hendrix’s 1967 song, is a sativa most known for its sweet tastes and energetic, creative effects. ‘Bubba Kush’, also known as ‘BK’, ‘Bubba’, and ‘Bubba OG Kush’, is a calming indica. Some people might be able to observe the difference between ‘Bubba Kush’s’ forest green colors that hints of coffee and chocolate, ‘Purple Haze’s’ lavender palette with a spicy berry scent and the potent skunk smell – a combination

of lemon pine fuel – of ‘OG Kush’. But, unless someone was well versed in street jargon, names of strains did not explicitly reflect the substance’s effect. Part of the process of cannabis becoming a commodity was a shift in knowledge about the substance and its effects. Many consumers, especially nowadays, are less informed with such jargon, and are more informed and interested in the effects of different strains, such as the uplifting giggles of a sativa and the sleepy, relaxing feeling of an indica. Businesspeople in the market believed this helped to differentiate between ‘woo-woo’ ideals, or illicit market unknowns, and reinstate trust through science and knowledge provided by companies and the cannabis market, more broadly. The transformation has not just been about the commodification of cannabis; knowledge has been a significant part of the process.

Marketization of products also supplemented dissemination of information. Prior to legalization, for instance, edibles were often wrapped in Ziploc bags, aluminum, or other packaging found in home pantries. It was widely known that edibles were more potent than a joint. In part because most sellers could not specify the amount of milligrams ingested, and, in part, because of the biological element of how cannabis compounds are metabolized. Edibles in the legal market are still known to be more potent because of biology, but dosage is more accurate and experiences are more replicable because quality is controlled. Through legalization and its effect of commercialization, cannabis product choice diversified, packaging improved and labeling requirements were introduced. Cannabis became a regulated object, sold as an array of products, associated with more information, research and understanding.

Cannabis has always been a complex plant, from what was sold in the illicit market to product sold today in the licit one. One difference is that complexity can now be better contextualized, packaged and sold to a demographic eager to understand what products contain. In a different way, consumer choice expanded because the type of available forms of cannabis diversified through legalization.



There is still a market for the type of products sold illicitly. But, this is not how most of my informants portray themselves or the market. Retailers stocked what illicit market suppliers sold – hash, dried flower, oil or concentrate – and also added ingestibles, capsules, drinks, chocolates, candies and other edible products, vape pens, creams and balms, transdermal patches, and other ways to consume cannabis.

Now, there are cannabis products with various compounds that induce different effects, as I highlight in Chapter 8. Through new technology and research, companies have been able to formulate specific proportions of cannabinoids, and other plant-based compounds, for replicable experiences and targeted effects. The shift from illegal to legal involved social and economic change, and the amount invested into the cannabis market, locally and globally, played a significant role in this. In the span of less than three years, unprecedented growth has occurred in cannabis markets around the world. In the next section, I provide an example of a

business start up, Growcentia. This case helps to raise questions about how the market emerges and the interactions that unfold. I also examine how people become involved in the market and the process of commoditization of cannabis.

Commodification and Investment Opportunities

The Case of Growcentia

The first time I realized that cannabis was becoming a commodity was when I returned home to the US for a summer holiday in 2016. Every other summer, I visited my parents in Chicago, but my Dad, Gregg, had recently accepted a job in Colorado. In the autumn of 2015, Gregg received a phone call from a colleague from his earlier career in management consultancy. A few minutes into their conversation, Gregg was presented an opportunity to move to Colorado to run a company operating in the agricultural sector and cannabis industry, which produced products for cannabis cultivation and other crops. This colleague was one of the founding investors of the company and believed Gregg would add value to the company as Chief Executive Officer (CEO). Gregg had experience in healthcare, technology and food sectors, but did not have a business or technical background in agriculture.

Complicating his decisions was the predominant stigma towards cannabis. The cannabis market in Colorado, and around the US, was nascent. There were less than half a dozen jurisdictions that permitted cannabis for all purposes around the world. A move to Colorado felt like a big step for Gregg and his wife, Stacy, after living in Chicago for 25 years. He said it was too risky a decision. Despite genuine consideration, he turned down the offer.

To his surprise, Stacy encouraged him to take the job. ‘I know this is a huge risk, but it’s the beginning of a new market’, she insisted. ‘It is a rare opportunity to create something from the ground floor. Cannabis is a gateway and you can do what you do best, grow a business’. Gregg’s career was built on growing and scaling up companies. Growcentia was just another company and the market was irrelevant to his background in her view. With her support, Gregg called his friend back and accepted the job. They moved in March 2016.

Gregg became CEO of Growcentia, a start-up launched as a tech-transfer out of Colorado State University. He described its main product, Mammoth P, as ‘a beneficial bacteria and natural organic microbial formulation that increases plant yield’. The ‘P’ stands for phosphorous, one of the essential three macro nutrients plants require, including nitrogen, ‘N’, and potassium, ‘K’. Most of the microbial research conducted at the university was tested on other ‘cash crops’, such as corn, cherries, berries and grapes. When Colorado legalized cannabis for adult-use purposes, the team decided to test Mammoth P on cannabis. The data revealed at least a 16% increase in yield for some cannabis strains, which was higher than some of the crops previously researched. To distinguish between the cannabis market and the agriculture sector, more broadly, the company decided to separately brand Mammoth P for cannabis. There were additional legal and social considerations for this product to be successful in a new, emerging market, such as educating cultivators and investors about cannabis and the product, registering the product with relevant local and national agencies, supporting the broader movement and dispelling stigmatization.

Research and development (R&D) was a pillar for Growcentia’s team, but solving scientific problems was not the only incentive. Conducting trials also helped

to generate a sense of credibility and trust with farmers unfamiliar with growing cannabis and investors skeptical about the cannabis market. As the cannabis market developed and different consumer trends were reported, Growcentia's R&D team aligned trials with these findings. For example, in 2019, there was an increased interest in products with phytocannabinoids, such as cannabigerol and cannabinal, which are two naturally produced non-psychoactive cannabinoids that are harder to yield. Growcentia's team set out to explore how environmental, biological and other conditions might influence the yield of specific cannabinoids, terpenes or other strain profiles. As the market shifted and policies changed, so did the goals and interests of Growcentia, similar to other cannabis companies' strategies.

The use of biological, organic additives was becoming more popular in general agricultural practices. However, using consortia of microbes in the harvest cycle was more of a novel technique. Many cannabis growers were more receptive to adding microbial stimulants in their feed cycle. Others, who had been growing cannabis for years prior to legalization, were less enthusiastic about experimenting with their harvests. But, the burgeoning market welcomed innovative practices because of ongoing experimentation regarding the best way to cultivate, produce, and regulate cannabis. The hope, for many Growcentia employees, was the possibility to develop products for cannabis that could also benefit other crops.

Outside of Growcentia, there was a mix of common beliefs about how 'revolutionary', 'innovative', and 'disruptive' the cannabis market and cannabis products were becoming. In part, it was the idea that cannabis could be the solution to a number of problems – social, environmental, scientific, medical, and economic. I heard about the idea that hemp plants help to absorb pollutants and toxins from the soil; cannabis medicines help to treat many patients with no other options; taxes and

jobs created from cannabis legalization benefit local economies. Growcentia felt there was an opportunity to reshape agricultural norms through innovation that could be adopted to other general agricultural practices for increased sustainability. Among all those involved in the cannabis market, there was a widespread belief that their work contributed to the growth of the market, which ultimately, people hoped, would lead to positive disruption of other sectors.

Some of my informants explained this as the inversion of a common belief from the prohibition era – ‘cannabis is a gateway drug’. This was the idea that cannabis use leads to the use of other harsher substances. My informants suggested that, conversely, the plant is a gateway to wellness, research, policy reform, social change, health, spirituality, connection and other opportunities. From a scientific perspective, my informants would cite examples of studies that found how cannabis use could help to reduce opioid consumption (Hurd et al. 2015; Vyas, LeBaron and Gilson 2018), which contrasts with the idea that cannabis use triggers opioid use. Idealistic language was often used to construct a narrative about the potential for legalization and market emergence to generate positive impact in a multiplicity of ways.

Social change was rarely the result of romanticized ideals alone. In other cases and companies, innovation was a matter of replicating established practices and processes from other sectors. Companies could target demographics familiar with a particular concept or product and market it as a different commodity that included some form of cannabis. Already popular foods, such as gluten free granola bars, chocolate or gummies, could now be infused with cannabis. Instead of smoking tobacco, there is an alternative that looks just like a cigarette but is rolled with CBD. Vegan skincare products exist, but now there are vegan skincare

products formulated with CBD, THC and other cannabinoids. Marketing was a significant part in building brands, creating stories and shifting the narrative about cannabis. Executives from large corporations, such as Coca Cola, Johnson and Johnson and Pepsi, used their experience from other sectors to apply similar strategies to new product ranges. Over time, the producers of new brands learned how to capture consumer interest with packaging, advertising and branding. This also included an element of communication and education because of a general lack of technical understanding about cannabis and unfamiliarity with cannabis as a legal commodity.

The cannabis market was regarded as a ‘trial and error experimentation’ by mass media. Cannabis companies, investors, businesspeople, advocates and other stakeholders were part of an ongoing learning process. Some of my informants were longstanding cannabis consumers, and some even had experience growing their own cannabis plants. But, very few people had any sector experience because of the lasting effects of criminalization. With the emergence of a market hoping to be accepted by the mainstream, people involved believed they needed others with a range of skills, and many backgrounds and experiences were valuable. For example, at Growcentia, members of the R&D team brought their plant-based expertise from other crops and applied it to cannabis. Sales and marketing employees knew how to capture clients and customers to develop relationships and scale distribution; this skill was transferred into selling and advertising a new product in a niche market. The cannabis market entailed complicated regulatory environments, and many of my informants felt that this required flexibility, contingency plans, and capital resources.

Conferences and Investment in Rapid Change

Being involved in the cannabis sector seemed to require adaptability as regulations, consumer trends, research findings and market projections shifted rapidly. One way people stayed connected, locally and globally, was through specialist knowledge of the market itself and the ability to adapt to a market in transition. Gregg said,

People know about grow cycles because it is an essential part of the supply chain. We understand the regulatory environment of what you can and cannot do...not just in terms of cannabis, but also in terms of form factors, such as pre-rolls or edibles, going through a pharmacy or doctor in Europe or Australia...you have to understand the whole supply chain dynamic.

Here are some questions we need to ask and re-ask: where is medical really medical versus mass recreational? Can you import? Can you export but not cultivate for domestic use? How does social equity fit into your work? Are you working with single state operators? Are they plant-touching or non-plant touching? Are they vertically integrated?

There are also cannabis terms we assume as common sense: dog-walkers, spliffs, joints, caviar, shatter, sublinguals and tinctures. We ask about a products bioavailability, milligram count, dosing, and about the extraction – as an isolate or distillate, fast-acting and onset time.

Those that worked in the market had to learn cannabis related jargon, which might refer to cannabis seeds, genetics, strains, cannabinoids or terpenes. Many people also had to draw upon professional language, such as investment terminology about raising investment and the rounds – ‘Pre-Seed’, ‘Seed’, ‘Series A’ or ‘Series B’ – and be familiar with business jargon, such as ‘pitch decks’, ‘return on investment’, ‘target markets’, and ‘SWOT analysis’, which stands for strengths, weaknesses, opportunities and threats. The crossover between cannabis specialization and general business knowledge led to a process of professionalization in the market and added to its development. Being professional, just like any other traditional industry, was a constant in the context of ongoing shifts. The rise of the cannabis market, and cannabis as a commodity, was compared to the dot com era by my participants, a speculative opportunity seized by widespread interest to adopt and use the Internet,

or in this case, cannabis. As more jurisdictions implemented cannabis legislation, the demand for cannabis products and ancillary goods and services increased.

Growcentia, for example, saw quick growth. From spring of 2016 to the beginning of my DPhil fieldwork in the winter of 2018, the company grew from



three people to over 50. They moved offices to add an onsite greenhouse facility, increased their production space, and accommodated their growing sales team. Distribution grew across the US and globally into Europe, Asia, Oceania and Latin America. The company exhibited at both agricultural specific and cannabis specific events, and the ‘Mammoth’ logo became recognizable at industry trade shows,

conferences and in public places. Part of this was because Gregg and his team were heavily involved in conference attendance.

Gregg attended at least one conference a month, and as a company Growcentia attended nearly one conference per week. Depending on the event, and intentions for it, different representatives from the company were sent. For example, Gregg might participate in speaking engagements or raise capital at an investment focused conference, whereas people from his sales team would display products at exhibitions. Gregg said,

We see the same people at different conferences. It feels like we’re on a ‘conference circuit’ because we all know we’ll see each other at the next one – in Panama, Tel Aviv, Las Vegas, London, or wherever else in the world.

If you're not there, you don't exist. People forget about you or they wonder why you're not there. People ask, 'can they afford to be? Did something go wrong?'

I don't tend to listen to panels or presentations, but I am engaged in countless conversations around new technologies, collaboration opportunities, competitive landscape and new markets opening.

Conferences were sites to build brand awareness for different companies and its products, and by way of attending, it was an opportunity to build awareness about new research, market trends, policy updates or changes through panels and presentations. Development of common understandings happened in conversations amongst attendees, such as preferences for 'adult-use cannabis' instead of 'recreational cannabis' or personal opinions and recommendations about a brand or person. These exchanges, to some extent, also drew people into the movement and further into the market.

Given the era of digital communication, it is surprising that physical events were central to fostering connection in the cannabis movement, yet, as Gregg suggests, the physical presence implied importance and legitimized a business and its activity. Conferences also helped to confirm the importance of a common cause to support the movement and related market development. With that said, it is unsurprising that my informants participated in meetings, conferences and normal business activities. Conferences were an opportunity to showcase products, especially recently launched ones, as well as to meet potential investors and establish partnerships, such as the 'Investor Pitch Forum'.

Growcentia's early stage investors were mostly 'angel investors', or an individual who provides an amount of money in exchange for a percentage of ownership equity of the company or convertible debt, or 'family offices', a private firm that manages investments and wealth of families. It went from being valued at less than US\$2 million in 2015 to US\$34 million during their last round of

investment in 2017 with revenue expected to exceed US\$10 million by 2020. As the company grew, investments were raised from other sources, including cannabis investment organizations and other private investment funds and venture capital firms. Raising money from private firms and individuals was more common in the early days of market emergence because of the willingness to bet on a higher risk. Whereas, other established funds were less likely to deploy capital because of uncertainty about legality, in the US and other jurisdictions.

It became common to hear the phrase ‘cannabis investors’, which distinguished investors focused on technology, consumer brands, or other fast growing sectors and investors who primarily invested in cannabis-related ventures. Investing in cannabis start-ups also seemed to be an investment in the ongoing momentum of the movement. The status of cannabis shifted, but because of remaining illegality, cannabis and the market was not accessible to a number of existing organizations, companies or people. Those involved in the cannabis market were able to build and develop, inching towards the mainstream, until the momentum was too large to ignore.

Growcentia is one business behind the process of the commercialization, which provides a glimpse into how commodification and its implications unfolds. Throughout this thesis, I provide a portrait in a stage of market development, a sector of the movement, and the transition of cannabis becoming a commodity. However, in this chapter, I have focused on the changes of the commodity itself to highlight elements of market development and shifts in the movement. In the following section, I address how cannabis became an investment opportunity. Those involved in these types of cannabis exchanges were more removed from the substance itself and it began to represent numbers, statistics and projections.

The Rise of a Market

A regulated market was once non-existent, but recently has been estimated to reach US\$70.6 billion by 2028, according to Grand View Research (2021). Despite this, reports revealed that people once targeted in the War on Drugs are still negatively impacted despite legislative changes (Connley 2021). A number of jurisdictions started to implement social equity programs as part of the process of legalization, as demanded by some cannabis companies and advocates as a necessary step in legal change. According to Rob Hoban, a cannabis lawyer, social equity ‘deals with justice and fairness within social policies. These programs attempt to ensure that people of color, and with marijuana offenses prior to legalization, be afforded an opportunity to participate, meaningfully, in this burgeoning industry’ (2020). Nonetheless, individuals with existing capital and no former criminal record related to cannabis have found it easier to become involved in the legal market, as I reference throughout this thesis.

In 2019, New Frontier Data estimated that the global cannabis consumer market, including illicit and regulated channels, was worth US\$344 billion. According to this report, 263 million people consumed cannabis at least once per year. But, estimates differ according to market segmentation, predicted demand and other variables, such as ongoing policy reform, shifting public opinion, interests and incentives.

The number of cannabis companies also increased year by year. In 2014, in the US, there were around 400 businesses and in 2016 there were over 10,000, according to MJ Biz Daily (McVey 2018). In 2018, the company reported that there were 27,000 cannabis businesses in the US. There are tens of thousand more companies worldwide to add to this figure now. The visibility of the cannabis

market increased as well-known brands and individuals entered the sector. Celebrities, such as Snoop Dog, Martha Stewart, Justin Bieber, and Seth Rogan, have invested or launched cannabis businesses, and other celebrities, including Kim Kardashian and Lady Gaga, have publicly endorsed cannabis brands. Mainstream brands – Vitamin Shoppe, Carls Jr, Levis and Ben and Jerry’s – started to invest, produce or stock CBD products. This type of endorsement generated legitimacy and credibility for the existence of the emerging market. As the number of interested parties involved in cannabis increased, so did the scale of investment.

The market itself has been highly fragmented, and, over the last three years, consolidation has increased through mergers and acquisitions (M&A). Throughout 2019-2020, M&A have been a strategic tool for business development. Jefferies (2021), a US-based investment bank, reported that M&A in the cannabis market were strategic for four main reasons: market entry into new and key states; acquiring strong brands, research, intellectual property or other assets; large scale consolidation of ‘multi-state operators’; acquiring an existing company through a special purpose acquisition company, which is completed through an initial public offering on a stock exchange. In some cases, M&A have been a strategy to obtain licenses, which in some jurisdictions have been capped and usually require exhaustive resources. Many companies have competitively engaged in gaining market share, whether by way of scaling through brand recognition or reducing operating expenses. To an extent, there was increased pressure to do this because of the looming potential of further policy reform, nationally and globally.

As laws changed, so did the economic landscape and scope of how businesses could operate and raise funding. Beginning in 2016, cannabis companies listed on stock exchanges, primarily on the Toronto Stock Exchange. This was

unprecedented because the capital market prohibited any association to an illegal substance. The first company to change this was Canopy Growth Corporation (MJ Biz Daily 2016). It is now regarded as one of the largest cannabis companies in the world. In 2018, Canopy was also involved in one of the most significant deals, when Constellation Brands, a large beer, wine and spirits company, invested US\$4 billion (Sheetz 2018). This reflected a significant shift in mainstream acceptance, at least from the business sphere, and set precedence for a number of notable deals between existing large corporations and cannabis companies. Although it has been emerging, it has existed as a growing sector.

In addition to a number of growing cannabis companies investing in other cannabis companies, some established corporations made large bets on early-stage cannabis companies. A major deal happened in December 2018 when Altria, a large tobacco corporation, invested in a Canadian producer, Cronos, for US\$1.8 billion (Kumar 2018). Another alcohol conglomerate, AB InBev, invested in a Canadian producer, Tilray, to produce infused drinks (Taylor and Saminather 2018). In 2018, Tilray also became the first cannabis producer to be trade publicly on a US stock exchange, the NASDAQ (Aiello and Ell 2018). Canadian producers set a precedent for capital expansion into public markets. Early on, there was a Canadian dominance in the global supply chain.

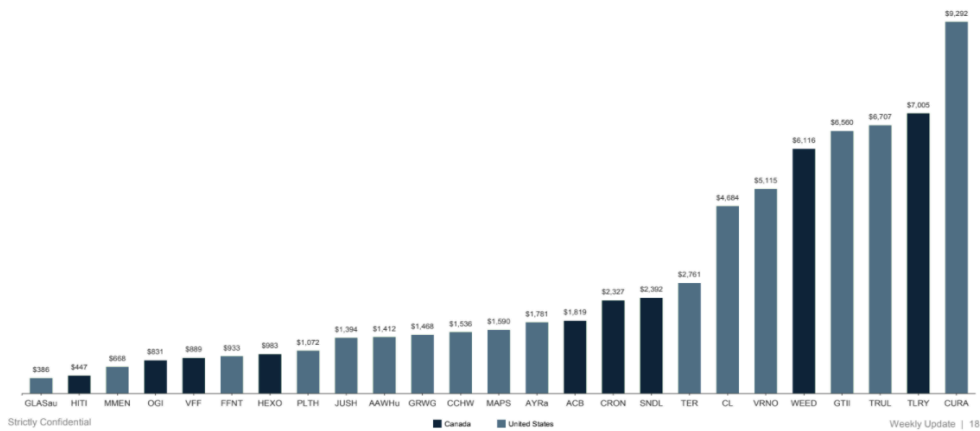
Throughout 2018 to 2020, there was a wave of initial public offerings in Canada, which created what many news outlets and informants referred to as a ‘bubble’. Stock prices hit all time highs, post-legalization excitement was widespread and market projections were optimistic. Many stocks later plummeted when earnings fell below quarterly projections, supply issues emerged and expansion slowed. Stocks have also fluctuated dependent on markets, politics,

investment deals and other internal issues. The cannabis stock market has continued to be turbulent and has often been compared to the dot com boom and bust. Yet, a key difference is the regulatory landscape and illegal status of cannabis, which challenged compliance, investment and scalability. The volatility of cannabis stocks was unsurprising to many informants because the market, they believed, was still in the process of maturing. Countless deals, worth billions of US dollars, over the past five years have contributed to its development. Each year, there has been an increase in the number of M&A.

In the US, a different type of expansion happened in 2019. The term ‘MSO’, multi-state operator, which is specific to the US cannabis market, became popular when an influx of state-based licensed producers and retailers expanded across state-borders. This was achieved through joint venture agreements, management or ownership investments, and M&A, which created conglomerates and large cannabis corporations and share branding, intellectual property and other resources for market expansion.

Curaleaf, a US-based cannabis producer, is now the largest cannabis company in the world, which surpassed Canopy Growth, according to stock prices as of July 2021. As of August 2021, Curaleaf was estimated to be worth US\$4 billion dollars with operations in 23 states, including 108 retail stores, 22 cultivation sites, and 30 processing facilities. The second largest cannabis company in the US is GTI, Green Thumb Industries. In 2019, GTI acquired 10 vertically integrated licenses in New York for US\$60 million (Sandy 2019). Another ‘top tier’ cannabis stock is Cresco Labs, a US MSO, which has increased over 145% from June 2020 (MJ Biz Daily 2021).

Market capitalizations (CSMM) as of November 19, 2021



Without knowing the legal context of the cannabis market, one might assume, based on only a few of these deals, that the cannabis market is a major sector with economic potential. Despite the fact that the US cannabis market has continued to operate with many federal restrictions, economic growth has advanced. In a short period of time, businesses that were not considered legal at the federal level were being reviewed by the Department of Justice to assess potential mergers against antitrust laws. Investment bankers began analyzing public market activity, which is a heavily regulated process. This interest, however, has extended across the globe, outside of North American cannabis markets.

The deals have not been limited by geography, but timing has been dependent on stages of reform and market development. It was not until 2021 that a cannabis company was listed on the London Stock Exchange (LSE). An Australian medical cannabis company, MGC Pharmaceuticals, was the first to list on the LSE, after raising £6.5 million. Following this, its shares increased by 60% (Cooper 2021). Similarly, in February 2021, an Israeli medical cannabis company, Kanabo, referred to as the ‘cannabis Nespresso’, was listed on the LSE, and its share rose 292% (The Guardian 2021). In 2021, an Irish firm called Jazz Pharmaceuticals,

acquired GW Pharmaceuticals for US\$7.2 billion (Banerjee, Khan and Spalding 2021). Over the last couple of years, the dynamics of ‘top performing’ companies have shifted away from Canadian dominance to US companies growing faster and operating larger businesses. Although there are notable European, Australian and Latin American companies, they have not been as sizable as their North American counterparts.

Similar to the complexity of rapid market growth, the process of normalization –active processes and activities people take to try to dispel myths about cannabis and make it seem more ‘normal’ and accessible, in all its forms – has not been linear. Whilst there has been social change, it has not been parallel with the economic change. There have been lingering remnants of stigma, discrimination and criminalization that those involved in cannabis activities face, personally or professionally. Yet, in 2020 when Covid-19 restrictions were implemented, in many US states, cannabis retailers were deemed essential, similar to hospitals, supermarkets and petrol stations. For the first time, university students could also study for a cannabis-related degree, for example on cultivation, production, legality or business. Investment bank, Cowen & Co., also noted a change in alcohol consumption, in favor of accessible cannabis (Financial Buzz 2019). In a study conducted by New Frontier Data, across all age groups, cannabis consumption was preferred to alcohol (Huddock 2020).

Similar shifts have been noted for pharmaceuticals: a 2016 report conducted by the University of Georgia found pharmaceutical companies lost US\$166 million in states that regulate medical cannabis because of cannabis alternatives to prescription medications (Schupska 2016). Cannabis businesses have recruited senior management and business leadership from other sectors: consumer packaged

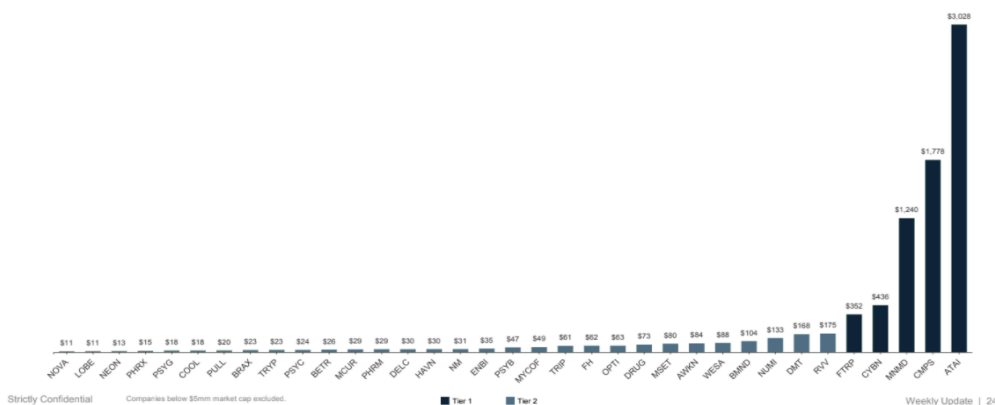
goods, biotech, food and beverage, retail, financial services and pharmaceuticals. In the last year, there has been a shift from cannabis investments to investments in a broader categorization of plant-based medicines.

Investment analysts have started to include reports on publicly traded psychedelics companies, such as Mind Medicine, Numinus Wellness, Compass Pathways, and Field Trip Health. Psychedelic substances alter states of consciousness, moods, thoughts and sensory and temporal perceptions, and some substances, at high doses, might induce hallucinogenic effects. Some psychedelics are produced in nature, such as psilocybin, a psychoactive compound found in a variety of fungi, mescaline, a compound found in the peyote cactus, and ayahuasca, an Amazonian plant. Other substances are lab produced, such as LSD, which is made in crystal form from a fungus grown on rye and grains – lysergic acid – ketamine, a prescription anesthetic, and ecstasy, which is chemically similar to other amphetamines. Each substance has different effects, from tranquilizing to mood enhancing, and a range of potential therapeutic benefits being studied, such as addiction, depression, post-traumatic stress disorder, attention deficit disorder, and anxiety. Psychedelic companies invest in psychotherapy, which investigates how particular psychedelic substances, under clinical settings, might improve patient’s conditions, mostly by rewiring neural pathways.

Psychedelic Comparables
Market Capitalization



Market capitalizations (CSMM) as of November 19, 2021



There have been a number of early cannabis investors who have transitioned into psychedelic companies because of the belief that the reform and market trajectory are comparable, which I return to in Chapter 8 and 10. For many investors, the economic opportunity of plant-medicines, rather than just cannabis, became exciting. Such a rapid shift in interest, however, reveals the significance of economic forces, and the people behind it, in the process of commoditization of cannabis, which has already begun to include other plant-based medicines.

Conclusion

Whilst this chapter is about commercialization, it is also about the process and effects of legalization. As an ongoing campaign for legalization happens, so does ongoing measures of marketization, which both contribute to the change that unfolds. The stages of transformation, as Lorne outlines, provide a useful framework to conceptualize how this happens. These relative timestamps helped my informants contextualize local markets within the global supply chain, such as the level of sophistication of product commoditization, complexity of regulatory guidelines, support for reform, and economic opportunity. In this thesis, tracing the progress of reform also traces the transformation of the commoditization of cannabis in its different forms.

Cultural and linguistic practices illustrate the fact that cannabis products are still not considered parallel to any other commodity; it retains distinctive elements that differentiate it. Common sense to those involved in the cannabis market, such as the endocannabinoid system, the ‘entourage effect’, and terpenes, and the use of jargon, including ‘multi-state operators’, ‘bioavailability’, and ‘spliffs’, are as

important as understanding the regulatory framework and market specificities in each jurisdiction. It is through these learned, and internalized, linguistic and common knowledge practices that allow people to participate in shaping ‘the game’, or the cannabis market. The use of science and medicine add a degree of legitimacy and credibility to cannabis, which contributes to the transformation of cannabis as a regulated product. Although knowledge was significant to distinguish illicit market substances from licit market products, mutual use of scientific context and subjective effects complicate the commoditization of cannabis.

A mix of science, marketing and branding, the use of established business practices, and other daily encounters influenced the movement, the market and their relation. This factored into how my informants secured investment, advocated for reform and educated consumers. Ultimately, legal, social and economic forces enabled transformations of cannabis as a commodity and shaped the licit market, as I discuss in the rest of this thesis.

In the remainder of the thesis, I explore the effects of legalization and diversified commodification as it unfolds on a global scale, at different paces and in different ways. In Chapters 4 to 9, I follow the trajectory of reform in different places by using separate case studies to illustrate the global movement and market transformation. In this way, I trace the evolution of cannabis as a commodity in different forms. This story also examines how there is an ongoing sense of a wider movement behind forces of marketization. I look at these processes in parallel and the people involved in this change throughout this thesis. In Chapter 10, I return to the question: what does this reveal about markets and social movements more broadly?

Chapter 4

The Colombian Medical Cannabis Market

Introduction

Colombia had been on my radar since 2015, when Gregg, the CEO of Growcentia told me about the significance of its cannabis market. The history of Colombia as the center of the War on Drugs ‘makes it ripe with opportunity to cultivate cannabis, legally’, Gregg explained, ‘and since our products help growers grow better, I knew we had to have a presence there’. Growcentia entered the Colombian market in 2015. Seth, the first international Growcentia employee, sold its product, Mammoth P, in a shop that supplied cannabis paraphernalia and growing products, and he later became the company’s representative for Latin America. Possession of cannabis, in small quantities, in Colombia had been decriminalized in 2012 (Langlois 2012). Home cultivation of up to 20 plants was also permitted in 2015 (Alsema 2015) and, according to my informants, this was a common hobby for locals. In 2016, the country legalized medical cannabis (Faiola 2018). By 2019, when I went for fieldwork, there were ongoing measures to support further reform and a sense of a developing market. Many investors and companies were also keen to optimize Colombia’s local market for the global supply chain.

Colombia’s process of reform represents a particular phase in the establishment and expansion of its cannabis market, as it unfolded in other places. Decriminalization usually is the first step in reform to relax cannabis laws, which removes criminal penalties for cannabis use and possession. It might be replaced by civil penalties, including fines, trainings or warnings for cannabis possession. Over time, it leads to limited legalization, which removes penalties and usually implements regulations. In most cases, the next phase of legalization is for medical purposes. This is followed by the emergence of a market for medical products, sold at pharmacies or dispensaries. Another market for over-the-counter products,

usually for wellness purposes, which are regulated and marketed differently, also emerges simultaneously if regulations permit. Each stage is accompanied by new regulation and an ongoing campaign for further reform, activities to encourage normalization and the development of a sense of professionalism. Ultimately, the goal of reform for many, but not all, is to legalize cannabis for all purposes, which had happened in Canada, some states in the US and Uruguay. But, no matter the stage of reform, there have still been advocacy efforts, such as amending tax policies, promoting social equity and pressing for access and affordability.

This chapter presents Colombia's cannabis market, which also gives a sense of the process of 'medicalization', a term often used by my informants and referred to by scholars exploring cannabis policy (see Reiman, Aggarwal, and Reinerman 2014; Taylor 2016; Zarhin, Negev, Vulfsons, and Szintman 2017). These scholars debate the complexity of the process, which involves turning a previously illegal plant, cannabis, into a medicine. Conrad (2007) suggests that medicalization shapes how substances, such as cannabis or psychedelics, become transformed into medicine and used to study, treat or prevent particular disorders. The case of cannabis medicalization involves the progress of research and science, support for medical professionals and systems, and patient access to standardized, usually pharmaceutical-grade, products. Noorani (2019) adds that regulators and researchers contribute to the production of scientific knowledge. Often, regulatory frameworks that permit scientific investigation of cannabis are modeled after other pharmaceutical policies and practices (Williams, Olfson, Kim, Martins and Kleber 2016). Lessons from other public health policies also factor into establishing cannabis regulations. Mallinson and Hannah (2020) describe how federal regulations on food and drugs, alcohol and tobacco were 'replicated' at the state

level in the US, in the interest of safety, familiarity, control and effectiveness. Existing European pharmaceutical standards were similarly adopted in Colombia, and extensive compliance was required to supply medical grade products. Adhering to such measures has helped to facilitate a sense of professionalization and legitimization of the cannabis market. All of this has been tactical for market growth and movement momentum, locally and globally. It has also factored into how cannabis changes as a commodity.

Yet, claims of ‘exceptionalism’ related to plant medicines, such as cannabis and psychedelics, challenge the extent to which medical cannabis can be regulated through existing legal frameworks, as Noorani (2019) demonstrates. Wilkinson and Sousa (2014) also problematize the medicalization of cannabis due to the complexity of ‘whole plant’ chemical structures and variable interaction of biological traits and other environmental and internal factors that pharmaceutical drugs, or isolated, synthetic compounds, often can control. They also discuss how cannabis medicines cannot all be administered in the same way as other traditional medicines. In a study conducted amongst medical cannabis patients in Norway, patients described cannabis as a ‘better treatment’ than traditional prescription drugs, and, in some cases, the only medicine that helped treat their condition (Pederson and Sandberg 2013). Pederson and Sandberg, however, address the blurred distinction between medicine and recreation, which means that some patients have to learn, and recognize, the medical benefit of cannabis, in a similar manner to the way Becker (1963) describes marijuana users learn the pleasure of consumption. Several of my informants believed that medical cannabis required experimentation because of the variance in cannabis products and previous personal experiences. This issue was so widespread that Gregg later became involved in a

business, Greenway DNA, which conducts genetic testing to match individuals with specific conditions to particular cannabis strains, based on the chemistry of the plant and the biology of the person.

As I discuss in Chapter 8, the complexity of cannabis has also challenged processes of commercialization. Businesses played a part in the process of medicalization, and it also involved an element of advocacy because of the need to destigmatize cannabis, campaign for insurance for medical treatments, and reform policies to enable consistent supply. Medicalization, as it relates to compliance, research and marketing, were widespread strategies to legitimize cannabis medicines, but there was variance in this process. For example, different jurisdictions permit varying administration methods – dried flower, vaporizers, edibles, tinctures, and capsules – for people with specific medical conditions. Despite regulatory heterogeneity of medical cannabis markets, there were a number of shared standards that permit a global supply chain, and extend to a country such as in Colombia.

Framing Colombia's Cannabis Market

The growing interest in Colombia and the process of medicalization became apparent to me on the 'conference circuit', as Gregg called it. A series of events in Latin America brought together investors, businesspeople, researchers, scientists and advocates from around the world. Gregg and his business partner, Colin, a co-founder of Growcentia, decided to attend a conference, CannaTech, in Panama, in February 2019. Gregg felt that this type of conference was a useful way to 'learn about the market, meet key players and establish potential partnerships'. As well as offering business opportunities for Gregg and Colin, the event in Panama was

interesting because the government was yet to implement any cannabis frameworks to legalize consumption, production and distribution. The Panamanian government had minor debates at the parliamentary level with consultations from industry experts, doctors and researchers (AP News 2019; EFE Servicios 2018). These debates had sparse support. Yet, mainstream media and publications dedicated to the cannabis market framed Panama as a potential export hub due to its Central American geography, infrastructure and status as a tax haven. Cannabis investors and businesspeople often subscribed to these sources, and based on coverage about Latin America, they were excited to capitalize on the opportunity, despite the restricted regulatory landscape in Panama. Gregg believed that ‘the organizers of CannaTech decided to host a conference to be at the forefront of the country’s policy reform and to showcase the industry itself’. The conference also hoped to highlight the professionalism of those in the industry, which the organizers believed would demonstrate how a regulated market would operate.

During CannaTech, different speakers repeatedly referred to the potential size of the Latin American market, with its combined population of 640 million people. Speakers suggested that the region had an ‘ideal’ equatorial climate for growing cannabis and cheap labor. They also addressed industry reports that claimed that cultivation was 80% cheaper than North America and parts of Europe. These economic factors encouraged companies to expand into Latin America, especially licensed producers, who cultivated indoors during harsh winters in Canada or dark and rainy winters in Europe. For these companies, Latin America presented the possibility of growing outdoors rather than indoors, which implied lower energy costs and more harvest cycles per year. These advantages persuaded more than 40 producers to expand operations to Latin America in 2018 (Bourque

2018; Marijuana Business Daily 2019). Some attended and exhibited at CannaTech. During the conference, I met several of their representatives at Growcentia's booth. Many were Colombian and shared a common story about converting other crops, such as coffee, cacao, blueberries and sugar cane, to cannabis. They felt that cannabis was the 'next cash crop' for Colombia. They agreed with the speakers that, as a low cost production country, Colombia could become a supply hub for the global cannabis market. To understand the significance of Colombia, I followed up with potential partners we had met at the conference with the guidance of Growcentia's Colombia team. This was one common example of how local connections created at a conference led to discussing global business deals, building transnational networks and sharing common beliefs.

In Colombia, I first went to Medellín, where Seth was based, and then to Bogotá, where a few cannabis company headquarters were based. I had meetings with cultivators, lawyers, grow shop owners, regulatory and compliance officers, investors and entrepreneurs. Initially, I went to establish relationships with individuals and companies that could benefit from adding Growcentia's product, Mammoth P, to their cultivation program and practices. Many people asked whether Growcentia or I would be attending upcoming conferences, CannaCiencia and Expocannabiz, in May. Although Gregg could not attend, he felt that having a representative attend the shows would, nonetheless, be beneficial for business development. So, after my first trip in February and March, I returned to Colombia in May.

When I arrived in Colombia again, the cannabis market was being increasingly covered in both mainstream media and industry news, especially foreign investment and business deals. It was a shift from negative coverage about

the state of Colombia, which had been shaped by an extensive history of an illicit drug trade. During my fieldwork, however, cannabis was taking on different meanings, and was changing through medicine, legality, economics and science. The historicity of cannabis in Colombia was also made visible through the ways in which cannabis was becoming constructed as an acceptable substance, or commodity, to cultivate, manufacture and distribute.

Illegal to Legal: War on Drugs to Medical Cannabis

War on Drugs in Colombia

My first stop in Colombia was Medellín, a city once operated by Pablo Escobar's cartel and termed 'the most dangerous city on Earth' in the 1990s (Vulliamy 2013). Two decades later, the city had transformed into a business hub, urban gateway and tourist destination. A popular tourist site is Comuna 13, a district scattered across Medellín's western hills near a main highway, which became a key transfer point for illegal substances, weapons and money. I participated in a walking tour to understand how the district had transformed into a safe haven for foreigners to visit. My tour guide, Lizeth, gave an oral history of her city's transformation, which was supported by the community's creative expression with art, music and dance. We walked by graffiti-filled walls that illustrated Comuna 13's story of struggle, violence, and danger. She shared another example of how Medellín was shifting Colombia's image. In February 2019, the government destroyed Pablo Escobar's mansion, which had been a tourist destination and museum since 1993 (Stubley 2019). Lizeth agreed that destroying the building undermined any celebration of Escobar's actions. She hoped that removing the glorification of Escobar would

reduce the stigma of drugs. Cannabis legalization, Lizeth added, had been a significant tool for the country to address the negative impact of the drug war.

Lizeth told our tour group about Colombia's recent cannabis policy reform. She applauded the government's decision to legalize cultivation, manufacturing, distribution, import and export of medical cannabis. Lizeth even shared the belief, widespread at CannaTech, that Colombia could become a supply hub within the global cannabis market. Part of changing the negative image of Colombia that had been generated during the War on Drugs era involved shifting it to one of a country that was acceptable, relatable and empathetic.

Cannabis Legalization and Medicalization in Latin America

Around the world, including in Latin America, it was common for a medical user of cannabis and their family members to pioneer a dialogue about medical cannabis and promote legalization, access and supply. In the UK, the Home Office expedited medical cannabis legalization after the Caldwell Case, when Billy, a young boy with severe epilepsy, was rushed to hospital, after customs officers confiscated his cannabis medicines, which had been legally obtained in Canada (North 2018). Similarly, medical cannabis legislation in Delaware is called 'Rylie's Law', in honor of Rylie, a pediatric patient who treated her facial tumors with medical cannabis (Scheps 2019). In Latin America, similar stories about patient access brought medical cannabis into focus as patients argued for human rights and social justice. The Chief Regulatory Officer at a Colombian producer and former officer at the Colombian Ministry of Justice, Michael, highlighted how personal stories were 'fundamental to driving that legal change'.

He said,

A similar story is heard around the world – in Argentina, Peru, Brazil and Mexico – there were cases of kids with epilepsy. Every country has their own story, their own character at the front of the magazine and the newspaper. It is appealing to emotional parts of the human population.

The similarities across cross-cultural differences are striking. These stories illustrate the ways in which individuals made the cannabis movement visible, helped to generate a sense of support for medical cannabis policy reform and establish regulated medical cannabis markets.

On the one hand, patient stories and personal advocacy drove policy reform, but, on the other hand, as Michael noted, Colombia's reform was also 'driven by the industry', which acted 'behind the scenes'. In Colombia, he emphasized, foreign cannabis companies, investors and entrepreneurs supported policy reform through different means, including lobbying, capital resources and job placement. 'The industry pushed for the transformation, for legality, and Canada, specifically, pushed for this here', Michael said. By 'Canada' he meant Canadian cannabis companies and Canadian investors, rather than Canadian government officials. The influx in interest was clear to Michael – he had interacted with more Canadians in the past year than ever before. These conversations reflected a shared idea that Colombia was a potential country for business opportunities connected to the global supply chain, and in this case, for Canadian companies to expand their operations. It was not only economically attractive to Canadian companies, as I found out at CannaTech, it was also beneficial for local companies, such as Michael's, because these kinds of collaborations helped to create partnerships, for investment, advisory, distribution, cultivation, and production. A global supply chain connected capital investment from North America with the 'supply hub' in Latin America, to meet European demand for medical cannabis. All of this activity, simultaneously,

Michael believed, supported efforts to reform cannabis policies locally and had ‘spillover effects’ regionally. Patient-led advocacy and industry-driven policy change might be distinctive elements in the process of legalization, but neither can be isolated from the other in the process of socio-economic change. There is an intimate connection between the patient side of the movement and the profit side of the market.

Although these sets of activities took place across Latin America, the implementation of regulatory frameworks differed. According to Michael, individual countries followed one of two distinct routes. Peru, Colombia, Chile and Uruguay permitted domestic cultivation and regulated the entire supply chain. In each country, requirements for licenses varied, such as the percentage that must be owned by a national, conditions for rural or urban areas, and the number of licenses issued. Other countries – Argentina, Brazil and Mexico – decided to prohibit domestic cultivation, but authorized medical cannabis products for import. Michael explained that these jurisdictions were concerned about the reputational risk of legalization. Furthermore, Michael thought there might be concern regarding the lack of capacity and resources to enforce the regulations. The lingering impact of prohibition continued to inform the emergence of local markets. Specific regulations were tools that ‘define our company’s strategy. They tell us what we can do and what we can’t do’, Michael said. Compliance was a priority. Lobbying efforts could later unfold through commercial activity. But, gaining legitimacy and credibility meant complying with necessitated standardized practices.

Michael’s goal was to build a pharmaceutical company, which required strict compliance with both local and international regulations. Most jurisdictions, excluding the US, regulated medical cannabis in a way that reflected standards in

the pharmaceutical sector, such as good manufacturing practices (GMP), which require traceability, consistency and quality control (Freeman, Hindocha, Green and Bloomfield 2019). Therefore, operating according to equivalent standards to any other pharmaceutical company was a daily consideration for Michael. He described this process as ‘the phase of medicalization’. ‘Being as objective, professional and technical as possible’ was a personal and professional choice for Michael. He believed that business activity contributed to the legitimization of cannabis, as a product and medicine, and supported related policy reform for the global market. This view was shared by other cannabis business owners who were exploring the global supply chain, due to the ‘high demand for medical cannabis in Europe’ and new regulations that permitted exportation. By complying with European pharmaceutical practices, Colombian cannabis companies set out to supply medical grade products to meet European demand. They also hoped that this commitment to standardized practices and processes would establish an image of Colombia and cannabis that was objective, professional and evidence-based.

Seth, Growcentia’s Latin American representative, was also concerned to be as scientific and professional as possible in order to access the European market. ‘EU countries follow the same level of standards and regulations, which makes it easy to export to multiple EU countries’, his business partner, Charlie explained. Charlie had spent most of his career working with pharmaceuticals. He believed that Colombia had the potential to ‘rise up as a hub for cultivation, extraction and export’, if the country implemented and enforced the standardization processes ‘required for the global market’, such as GMP certification for EU imports. He imposed responsibility on himself and his team to uphold these measures. Charlie was committed to actively educating the government and working alongside

regulators, whilst lobbying informally, to ensure that those standards were enforced.

Charlie said,

We're making sure that the regulators understand that [meeting high standards and quality] is how the industry needs to begin and where it needs to be. We have a lot to overcome with our history.

Who is going to trust a Colombian cannabis company with a perception of a drug war, which has made the danger of our country the front of the story?

Internal and external regulation provided a pathway for Colombian cannabis suppliers to access the global supply chain, but there was a sense of self-imposed responsibility that Charlie felt was required to reframe cannabis in its legal forms.

Michael and Charlie saw themselves as businesspeople rather than advocates, yet recognized how advocacy efforts supported their roles. Whilst they were drawn into the cannabis market for economic reasons, Seth had been involved with cannabis on a grassroots level, initially growing and consuming cannabis as a teenager and later owning a cannabis grow shop. His grandfather taught him how to water plants with ocean water to increase nutrient uptake, yet the rest of his family stigmatized his cannabis use. 'I knew that other people were also facing the same feelings and taboo from their friends and family', Seth said. He decided to start an online group to openly share information. 'This created a space for people that had similar experience to come together', he explained. Seth's business roles unfolded out of his passion, advocacy and education efforts.

Michael, Charlie and Seth had come into the cannabis market from very different backgrounds, yet their performance and adherence to standardization, objectivity, and professionalism were similar. All three demonstrated a sense of commitment to the movement to reconstruct cannabis as a medicine, or legal commodity, through business decisions, personal encounters and other interactions. They all regularly attended conferences regionally in Latin America and sometimes

aboard in Europe and North America. Conferences were sites in which commitment, knowledge and values were expressed to connect heterogeneous involvement. Each one's activities reinforced the ethos of the cannabis market. The convergence of economics, history and legality were important in the process of commercialization of cannabis in Colombia.

Conferences: The Cannabis Market's Echo Chamber

CannaCiencia

The first conference I attended in Colombia was CannaCiencia, which was organized by a Colombian-born woman, called Carol Ortega. Carol is an investor and also the founder of a venture capital fund, which primarily invests in Latino-founded cannabis companies. Her aim was to diversify her investments based on her experience of the 'dominance of white-owned businesses and investors in the cannabis market'. But, her childhood during the War on Drugs era cast a shadow over her business activities. She grew up in a time of what she described as distress and violence, 'we woke up to the sounds of gunshots, bombs and lived fearful for our lives'. This fear is something that she felt continued to impact the lives of modern day Colombians. The violence had also left what she felt was a lasting stigma on the country.

Carol remained hopeful that the situation could change, and she decided to play an active role in shifting the perception of cannabis. 'The only way to minimize fear is through science. Science overcomes the stigma. It's the only way to change perception', Carol said. In an effort to educate through science, Carol decided to organize a conference, CannaCiencia. The name is a combination of the word 'cannabis' and the Spanish word for science, 'ciencia'. She hoped to showcase the

complexity of cannabis as a plant, the policies around it and the people that use it or commercialize it. Carol planned to represent the market in its current state, and also demonstrate how the movement was transforming it in a way that required active involvement. This sort of shared experience, she believed, had the potential to alter perceptions. Ultimately, she hoped the conference could accomplish this by way of ‘replacing fear with facts’.

CannaCiencia was held in a small exhibition hall with fewer than 20 booths. This was small compared to other conferences, such as MJ Biz Con, which had hundreds of exhibitors. Most booths displayed machinery used for manufacturing facilities and other exhibitors were ancillary companies, such as consultants and media. Attendees walked through the exhibition hall to reach the main stage, where presentations took place. The majority of the attendees were Colombians and relatively new to the cannabis market. CannaCiencia was an opportunity for them to learn about the plant, scientifically, legally and economically. There were also some foreign attendees who were already involved in working with cannabis. Their intention was primarily to understand the Colombian cannabis context, culturally, politically and economically, in order to make informed business decisions. Presentations were given throughout the day on plant genetics, investment, global supply chains, regional updates, regulations, quality control practices and research. The speakers included scientists, business owners and subject matter experts.

The keynote speaker, Steve DeAngelo, was an American who represented the grassroots movement and the legal market. He is globally known as the ‘father of the legal cannabis industry,’ and regarded as one of the key ‘pioneers’ of the cannabis movement. DeAngelo had advocated for cannabis legalization since the 1970s and co-founded Harborside, one of the first six dispensaries selling cannabis

legally in the US. Having a self-proclaimed cannabis activist, ‘pioneer’ and business professional exemplifies the extent to which the process of market emergence is intimately connected to the movement’s history and development.



DeAngelo’s keynote, titled ‘The Cannabis Renaissance: Modern Science Meets Ancient Knowledge’, brought together the history of the cannabis movement, the development of the cannabis market and the importance of new scientific research and old cultural practices. He made the comparison between the ‘cannabis renaissance’ and the ‘original renaissance, which was the end of the dark ages and the lost knowledge of ancient civilization married up with new innovations and a new way of thinking and being’. He believed this was a consequence of repealing prohibition. The transition ‘revealed a rising tide of science and reason’, DeAngelo said. New legislation facilitated easier access to fund and conduct cannabis research. The more jurisdictions that reformed its cannabis policies in this way, DeAngelo believed, the more that policymakers and the public would understand cannabis through scientific fact and evidence. The utility of this extended to support initiatives to reform policies and provide justification to skeptical investors about

cannabis as a product and medicine. The strength of scientific notions, as Carol, DeAngelo and Charlie believed, helped to remove stigmatization and offer an understanding of the benefit of the plant itself.

In addition to scientific evidence, DeAngelo emphasized the plant's ability to cultivate change in 'our bodies, societies, and our souls and spirits'. He remained hopeful that society would positively change as the world entered the 'cannabis renaissance'. In other words, he hoped that mainstream groups would favor cannabis reform through the reconstruction, or normalization and medicalization, of cannabis. This 'new way of thinking', DeAngelo believed, would bring humanity into the 'light'. His terminology was morally charged. He rallied the audience to applause. Despite mutual optimism in the room, there was still an agreement about the need to support advocacy efforts. The cannabis movement would persist until 'every human lives in a place where cannabis is accessible and it is no longer deemed criminal', DeAngelo emphasized. Once more, DeAngelo received loud applause. It was indication of solidarity and support for the ongoing legal reform and market emergence.

Participants had spent hundreds of dollars on their tickets, which were expensive in Colombian terms, in order to learn more about recent research on the plant and insights about the market. The opportunity to network also factored into the price that people were willing to pay. Conferences were important spaces in which people could meet others in the sector, who could potentially support their work. A handful of them also attended another conference taking place in Cartagena, a coastal city in Colombia, the following week. They were spending multiple days away from their offices and spending hundreds of dollars to attend these conferences. The Cartagena conference and exhibition, ExpoCannabiz,

however, was more business-oriented and global. It attracted some of the major producers in Latin America and North America, whose participation signified the importance of the local market. Another one-day event, the ‘Colombia Cannabis Investors Forum’ (CCIF), contributed to supporting the economic interest and intention of those attending the conference, as it was curated for investors and entrepreneurs.

Colombia Cannabis Investors Forum

When I arrived at the CCIF, there was a long queue of men in business suits at the check-in desk. Networking began the moment people stepped out of the elevator, with questions like ‘how did you get involved in cannabis?’, ‘what do you do in the [cannabis] space?’, and ‘what brings you here?’. These conversations were the basis for potential collaborations. Networking took place and relationships were established throughout the day. Conversations often flowed effortlessly and there was a shared sense of common interest in investing and operating in Colombia.

Although it was an investment-focused event, the opening statement at CCIF was similar to statements made by DeAngelo at CannaCiencia. The opening speaker was the event organizer, Nick, a local Colombian businessman involved in the cannabis market. In contrast to DeAngelo, he had previously worked in insurance and investment. He, nonetheless, shared beliefs and jargon with DeAngelo. In his opening remarks, Nick addressed historical and medical claims about cannabis and described how policy shifts created a ‘market that unfolded out of a movement’. He said,

This is Cannabis 2.0. We are making history. We are poised at the forefront of an industry. We are disrupting. We are using the healing power of this miraculous plant. We [Colombia] are joining the league of legalized nations.

Nick spoke about the ‘power’ and legality of the plant, and brought these factors together by addressing the emergent market and policy reform process. Nick characterized this period as a ‘historic age’ and morally framed legalization as the ‘right’ decision for Colombia and its population. Nick’s message was not novel, nor controversial, to the audience. In fact, his statements were reflective of shared ideas amongst attendees, including the reasons cannabis should be legalized, how it could be commercialized, and the ways cannabis might be used therapeutically. Nick, and many of the speakers, provided personal insights and experiences, many of which affirmed the beliefs already held by most people there. This type of reiteration, from speakers with distinct backgrounds and jobs, contributed to the construction of common understandings, beliefs and language within the movement and market. These events also physically connected people and brought them together. It helped to unite people who might otherwise have never met, who came to share ideas and language. The fact that there was repetition amongst speakers from CannaCiencia, CannaTech and CCIF exemplified what many of my informants referred to as an ‘echo chamber effect’. On the one hand, shared ideas bound them to the movement and the ongoing process of policy reform, locally and globally. On the other hand, shared beliefs connected them to similarly perform processes of medicalization and normalization. The communication and connection facilitated by these events helped to establish a sense of market culture, involvement in the movement and shared understandings about cannabis in its legal forms.

Whilst networking at an after party, an American investment fund manager living in Chile, Fiona, told me she was intrigued by how connected people were to each other despite never having met before. She felt that shared knowledge, experiences and beliefs were ‘intuitive’ among the conference attendees.

Fiona said,

It's amazing how many people speak the same language here and are following their intuition. It's rare to come across that in a commercial industry, but there is something about cannabis, whether it's spiritual or not, that brings out some of the intuitive feelings.

Shared ideas, beliefs and jargon about the science of the cannabis plant and its therapeutic uses underscored conversations about business opportunities, legal frameworks and personal connections. Cannabis-related jargon and industry code felt 'intuitive' to Fiona because she heard similar arguments and ideologies about the science of cannabis and reasons for legalization at conferences, networking events and meetings around the world. She felt that people would always agree with her on key 'facts': the idea that cannabis should be legal, the need for more research and belief in the benefits of cannabis. These shared ideas amplified and reinforced ideologies and contributed to a sense of belonging to the 'cannabis space', which, to Fiona, made connections feel intuitive. These reflect some ethos that characterizes a sense of connection and bond in the market. The reiteration of some beliefs also reflects elements of the counterculture, such as reasons to legalize cannabis and the 'coolness' of consumption.

However, Fiona recognized that this 'echo chamber effect' was occurring amongst the wrong demographic – people already involved in the movement. She suggested that ideas about the positive effects of legalization and the negative effects of prohibition should be shared with policymakers, doctors and the public – people who seemed hesitant to accept and adopt beliefs common within the movement and market.

Fiona noticed during the early days of her cannabis involvement that personal sentiments were significant to fostering connections. At networking events and conferences, people always asked about one's relationship to cannabis, whether it was personal use, medical use or knowing a medical cannabis patient. Some

people described their relationship to cannabis as a ‘spiritual’ one, but many others said it was simply personal. These moral claims to cannabis are one part of the reason cannabis, as a commodity, has remained somewhat distinctive. People shared stories, such as having a parent who used cannabis for aches and pains, knowing someone with epilepsy, cancer or other illnesses cannabis helped to treat, or using cannabis in their youth or adulthood. These exchanges created a sense of belonging; disclosing one’s relationship to cannabis was important to help connect disparate people to the movement and market. These statements and stories generated a sense of solidarity behind a common cause and shared experiences. It was a shared moral vision.

Morally committed groups contribute to economic change, as Muehlebach (2012) describes in her ethnography of moral neoliberalism in Northern Italy. As the state withdrew its social welfare responsibilities, unwaged labor groups mobilized to support welfare needs. They were motivated by a sense of social responsibility, which reflects a degree of solidarity and compassion. Similarly, in this case, a legal shift led to economic change, which also involved the rise of morally influenced actions. Although economic interests motivated many people who transitioned into the cannabis market, they were still informed by elements of the movement. There was a sense of solidarity despite heterogeneous identities and involvement. They came to share a moral vision, linguistic practices and beliefs. These became instrumental in economic matters and also helped to sustain the movement and market relation.

In the next section, I introduce four people who help to illustrate a sense of acquired commitment to the movement and how it relates to the market. They present insight into how individuals become familiar with the ethos of the cannabis

market, and how they might contribute to creating and maintaining it. These cases also help to demonstrate how common interests and communication bring people together, even when friction emerges and heterogeneity exists. At the time of our meeting, all of them had moved from different jobs into new ones in cannabis companies. Each of them attended ExpoCannabiz. However, I did not meet each one there. We met through introduction and serendipity at other events and meetings.

Invisible Connections

DeAngelo: The Cannabis Advocate

DeAngelo, a 62-year-old American cannabis advocate and the keynote speaker from CannaCiencia, had participated in the grassroots anti-prohibition and anti-war movement in the US in the 1970s. At CCIF, DeAngelo addressed this historical context and emphasized what framed his beliefs. He argued that prohibition was discriminatory; in the US, the government targeted two main groups – Afro-Caribbeans and Mexicans. This factored into how people perceived Latino and Black communities, more generally. The policies ‘were not about the plant, but rather the people who used them’, DeAngelo said. Over time, key politicians – President Nixon, his Domestic Affairs Advisor John Ehrlichman and Harry Ainslinger, a Commissioner at the Federal Bureau of Narcotics – intensified the War on Drugs. Although many audience members were familiar with this history, reiterating this context reinforced its importance and ongoing relevance. Recognizing that the War on Drugs was met with a rise of activism led by advocates, including DeAngelo, factored into a collective sense of the need to reconstruct the narrative of cannabis.

As an activist, DeAngelo had first participated in anti-war rallies for the US' involvement in Vietnam and later began organizing demonstrations for cannabis and peace supporters during President Reagan and Bush's terms. He led initiatives to legalize and decriminalize cannabis policies at the federal and state level, especially in Washington D.C. and California. Advocates came together in support of the 'cannabis package', as DeAngelo referred to it, 'the fight for social justice, marginalized groups and alternative medicines'. This was the 'early days of the movement', prior to any capital flow or public market activity, from the late 1990s to the early 2000s. During that time, there were few businesses invested in the market or connected to the movement, as the market had not yet grown. Rather, the movement was a forum for civil disobedience to some and a way to gain medical access as an alternative to pharmaceuticals for others. Both aspects involved symbolic deviance, groups of people rejecting norms and creating their own rules, as Becker (1963) describes. Medical alternatives were seen as a way to gain control over one's health, but at that time the benefits of cannabis were primarily based on anecdotal evidence. 'We didn't know about the endocannabinoid system and that public markets would be open. We didn't know the science', DeAngelo noted. Over time, regulations and research in support of cannabis legitimized the market and led to the legalization, and, subsequently, the medicalization and commercialization, of cannabis.

As this shift happened, DeAngelo also transitioned from being a human rights and cannabis activist to someone with business interests in a legal market. In 2006, DeAngelo opened Harborside, one of the first licensed cannabis dispensaries in the US. In 2010, he co-founded ArcView, 'an accredited cannabis investment

network' with a mission 'to forge a principled and profitable industry from the ashes of cannabis prohibition'.

As markets emerged and regulatory frameworks were established, DeAngelo felt the ethos of the cannabis movement changed. Once legalization was more widespread, people from neighboring sectors entered the market. There was a shift from no dress code to one that reflected corporate culture. It reminded me of what another informant, a cannabis policy manager, Victoria told me in 2017, 'the biggest thing that differentiates the cannabis movement from its current ethos is the buy into the capitalist systems'. She felt that there had been a shift in focus from fighting against criminalization to supporting commercialization. There was an influx of corporate culture, who, stereotypically, are described as 'white middle class men'. At the same time, there were people who still had criminal records for cannabis and faced stigma. This group has not been privileged with the same legal and economic opportunity. Remain, however, believed that social equity was important because most of the people who directly benefit from the legal market is disproportionate to people who have historically been marginalized and criminalized for cannabis use. She described other people who were still 'entrenched in the cannabis culture and fear that any kind of formalization is going to remove any civil disobedience'. This has created a sense of conflict between people who support the formalization of the market and those who feel that legalization is 'Prohibition 2.0'. This is the belief that despite the current legality of cannabis, there are socio-legal and economic forces that continue to marginalize communities who have historically suffered from the War on Drugs. But, there is another group, people like DeAngelo and others from the early movement, who have maintained an activists' identity while also taking on a role in the licit market.

In DeAngelo's case, his involvement in the commercialization of cannabis increased. In February 2019, Harborside started trading publicly on the Canadian Securities Exchange. Throughout this period of commercialization, he continued to advocate for policy reform through national cannabis trade associations and personal activism. He maintained his reputation as a 'pioneer' as well as being labeled as a 'professional'. This decision set an example to other longstanding members of the movement of how they could accept its shifting shape. It exemplifies the external force of economic capital and the internal force of commitment, morality and history, which have influenced the contemporary ethos of the movement and market.

DeAngelo's personal transformation to respond to changing dynamics of the market marks a 'moral breakdown', what Zigon (2007: 140) defines as 'social and personal moments when persons or groups of persons are forced to step-away from their unreflective everydayness...and respond to certain ethical dilemmas'. Whilst DeAngelo remains morally committed to the movement and its ethos, economic forces led him to perform conscious tactics to adopt market-oriented activities. His moral disposition, as it relates to the movement, fractures, and simultaneously, expands, as it relates to the market. There is a sense of durability from the days of the counterculture, but this still changes as market forces increase. I show three other cases of 'moral breakdowns', which help to explain how dispositions are shaped and reshaped through personal transformations.

Cameron: The DEA Agent

Cameron was a US government official. In his 50s, he transitioned from suppressing the illicit market to working in the regulated cannabis market, beginning in 2018. As

a former Drug Enforcement Agency (DEA) agent, Cameron initially had a limited understanding about Colombia's drug context. After years of convicting Colombians for drug related crimes and 'seeing coke stuffed and smuggled, I only knew Colombians as drug dealers, criminals, and bad people', Cameron said. The DEA required a high level of discipline, which made him feel as if he was part of the paramilitary. Ideas of prohibition, a 'drug free world' and criminalized drug use were customary beliefs during Cameron's career at the DEA. The policies enforced by the DEA became part of Cameron's own belief system. Once Cameron left the DEA, his understanding of controlled substances transformed.

To his surprise, he later found himself accepting a position as the Chief Compliance Officer at a Colombian producer. 'Taking a leap of faith' felt like a 'rebirth', as he put it. 'When I stepped out of that position [at the DEA], I was allowed to see people in a different way and understand how a country [Colombia] operates', Cameron said. He no longer viewed the criminalization of cannabis in the same way. For the first time, Cameron felt comfortable enough to attend parties with friends where cannabis was used⁵. Although he did not partake nor approve, he was amazed at how his mentality and behaviors could dramatically shift. This was part of his 'moral breakdown'.

Traveling back and forth between Colombia and the US for work was also something Cameron never imagined would be part of his career. He found that positive perceptions of Colombia and its people have replaced negative ones. Cameron was particularly impressed by the kindness, openness and hospitality of the local Colombians he met. His notions about drugs from the DEA changed.

⁵ But, he remained critical of 'hard drugs', including cocaine, heroin, meth, crack and other highly addictive illicit substances. If these substances were at a party, he 'would have a huge problem and make a quick exit', as he put it.

Although Cameron knew his decision to accept a job in the cannabis market was counterintuitive, given his career path, he believed that most of his former DEA colleagues would soon be keen to get involved. Despite the criticism and stigmatization he received from some of them, he identified himself as a ‘pioneer’, albeit a very different one from DeAngelo, who also referred to himself as a ‘pioneer’.

Cameron viewed his involvement in the cannabis market as imposing ‘a responsibility to be vocal’, locally, nationally and internationally. He emphasized that if he could change his mind as a former DEA agent, then anyone could, and should, see cannabis differently to the way the US government portrayed it. Cameron was not a stereotypical activist lobbying politicians or participating in rallies. He spoke to his government colleagues informally and agreed to be interviewed by news outlets to spread his message. His professional transformation was an indication to his government colleagues that once the cannabis market was legitimate, perception change was possible. Although Cameron and DeAngelo advocated through different platforms, they both celebrated the idea of being a ‘pioneer’, or at least being at the forefront of a developing market. Both conveyed a sense of opportunity about responsibility for the process of reform and market development. As Cameron attended more cannabis market events, he found himself expressing views similar to those of Michael, Charlie, DeAngelo and Nick. The gulf that once separated them was replaced by common forms of advocacy, altered perspectives, physical interactions and shared experiences. He became acquainted with the ethos of the cannabis movement through market involvement. Although change occurred in individual ways, each of them acquired a sense of understanding through every day experiences, communication and connection. As the status of

cannabis changed legally, people, such as DeAngelo and Cameron, also had to shift their identity and beliefs in a way that supported the development of the market and movement in its contemporary form.

West: The Drug Dealer

In Colombia, the regulated market was emerging as its unregulated market faded. I visited a region where the paramilitary and cartels still controlled some territories. There, I met West, a middle-aged American man and former drug dealer, someone Cameron would have previously arrested. West is a big-boned man with tattoos that covered his entire body, except his face. He had fled from the US to Colombia around 20 years ago to escape the DEA and Federal Bureau of Investigation. In the US, West had had 30 women working for him selling sex and drugs, such as cocaine, heroin and meth. He described his multi-million dollar illegal business,

It was a psychological game that beat the legal system. I learned each woman's weakness and used that to make every one of them fall in love with me. I had them wrapped around me so they would do anything, break any law, and cover up anything.

Words are powerful, whatever you say. That's the energy you carry. The women would begin to believe whatever I said. It's the power of the mind to accept a label and then to bring that internally.

I created the diseases [the mindsets] they accepted.

In between anecdotes, West would light a bowl of dried cannabis flower in a handcrafted pipe, as if each exhalation relieved him of the regret he felt about his drug dealer days. Puff by puff, he relaxed into a state of intoxication and shared a story about 'finally getting busted'.

One day West received a call that the DEA were about to raid his house. Trucks were outside and there was a search warrant to enter the premises. He called three of his ladies who quickly cleaned his properties and left no traces of drugs or any other illegal activity. This allowed him to escape. West knew he would be fine,

but always felt that this day would come. He fled to Colombia leaving the 30 women behind. West checked into a rehabilitation center and found answers in alternatives to substance use. He took his own advice – ‘words are powerful’ – and discovered ways to control his mind and help others do so by changing addictive habits through alternative medicines. During this transformation, West fell in love with a Colombian woman, Diana. He decided to stay there, especially since the DEA’s ‘wanted list’ kept him away.

Diana and West transitioned into the regulated cannabis market. West now works as a freelance consultant on cannabis related projects. Although West’s personal background equipped him to understand the dynamics of the paramilitary in Colombia, he had to learn to adapt to new regulatory frameworks, norms and processes. Diana had to do the same. In 2017, she started working at a licensed cannabis cultivation facility running its operations. West said Diana’s ‘company was pioneering change in biopharmaceuticals’ through research and formulation innovation. He had not thought of cannabis in that way before. West had never used cannabis as an active pharmaceutical ingredient as his wife’s company did. He never sold cannabis as a ‘dermacosmetic ingredient’ or categorized it as a topical product. West was describing the process of medicalization, and some of the ways in which cannabis was being redefined as a commodity.

He learned about the new standards and strict compliance that the regulated cannabis market in Colombia demanded. Cannabis legalization and standardization excited him because it provided justification for his wife’s job and his redirected profession. West condemned illicit market activity and felt a sense of responsibility to uphold the new standards in the regulated market. This all contributed to his ‘moral breakdown’, including a process to ‘pay it forward’ to the ‘women he

wronged' and the history he lived. He swore to himself, his wife and the women he once controlled that he would use his illicit trafficking experience only for good. He seemed to echo similar views to DeAngelo and Cameron about the positive effects of legalization and market emergence. West now felt responsible for his actions and that meant embracing particular ethos and standards of the regulated market, just as DeAngelo, Cameron, Michael and Charlie did.

West, DeAngelo and Cameron, who had very different views, identities and histories, were brought together through shared ideologies and a sense of responsibility towards the goals of the cannabis movement and the regulations and activities of the market. The implementation of standards and protocols in Colombia's market fostered a shared sense of moral commitment to uphold the new legal framework. Whilst each performed this in his own way, they shared the same space, internalized similar beliefs and met some of the same people at conferences and events.

Jamie: A Businesswoman

In contrast to the three men discussed, I met a Colombian woman, in her 30s, who had always been a businesswoman, Jamie. She had only recently become involved in the cannabis market. Her primary connection to the plant was commercial. Jamie was Head of Innovation at a Colombian producer that cultivates, manufactures and exports medical cannabis. Her role was to 'design and implement strategies, tools and methods for the company, and to experiment in solving critical problems and take advantage of emerging opportunities'. Part of her role was a self-mandated responsibility to 'push that knowledge barrier forward and break down the science of cannabis, the reasons it's regulated and the benefits of its use', as Jamie

explained. Although this was a personal prerogative, most of her colleagues believed the same. She felt that her job contributed to shifting perceptions around cannabis.

When Jamie went to house parties with friends, her work became a ‘party trick’. Party guests were, primarily, surprised by her job, because they did not realize that a career in the cannabis market was possible. They, secondly, were impressed by Jamie’s decision to join a cannabis company, and felt that it was ‘pretty cool to be in that space’. The ‘coolness’ associated to cannabis counterculture was still characterizing cannabis in its legal forms, albeit in a different way. Jamie explained to her friends that her company was as professional as any other business. When people challenged this, she emphasized that the company was growing rapidly. To demonstrate this, she showed off pictures of the company’s cultivation site. The images depicted rows of pots of cannabis plants growing under fluorescent lights, enclosed in a sterile looking environment. By illustrating the ‘size, scale and sophistication’ of the workspace and facility, Jamie hoped that her friends would begin to understand the legitimacy of her job and the cannabis market. Sharing her experiences about working on cannabis projects, she tried to explain ‘how things really are’, and felt that she could begin to educate others about the legal cannabis market, whilst dispelling stigma and taboo. Jamie said,

Colombia’s history has been stigmatized because of instability, war and violence. Now cannabis is bringing in an opportunity that facilitates that perception change.

We make an impact on our smaller circles by changing perceptions around the industry and cannabis. It is a form of advocacy, but not towards the government, and it’s not lobbying. It is in a private, small-scale level.

She highlighted that perceptions could also shift through stories shared by people within the market, and those reporting on it from the outside. Everyday, Jamie read

the local newspaper and found an article about a Colombian company working in cannabis. Even when the stories were not about her company, this sort of coverage excited her. The media's positive frame of cannabis news helped to support the narrative Jamie and the other three men believed and shared. Such news added to the perception of the market as legal and professional. These activities supported market legitimacy and contributed to the development of the movement at large.

Coming from four very different backgrounds in the US and Colombia, DeAngelo, Cameron, West and Jamie, might have never met or shared beliefs. Shifting cannabis policies in Colombia and market emergence connected and organized these individuals and their companies in new ways. All four of them spoke about prohibition and criminalization as a negative, immoral historical fact and legalization as a positive step in reform. They all believed, and undertook steps, to further promote reform. Yet, they used different tactics to justify these statements and persuade others, whether by reference to research and science, using anecdotal stories, picture illustrations or news articles. This work of persuasion was performed in a plethora of ways – through daily interactions within social circles as Jamie and Cameron demonstrated, lobbying and educating policymakers as DeAngelo did, and behaving as a pharmaceutical company as West described. They each had a breakdown of moral dispositions in different moments of dilemma and demand, nonetheless, each one felt obliged to shift the general perception of cannabis. They also shared a sense of personal duty to uphold a degree of professionalism, which helped to establish the credibility of the market and its economic activity.

These commitments transform cannabis as a legal substance and help to deconstruct a historically informed perception of illicit cannabis. Their professional and personal roles reflect elements of medicalization, market emergence and

movement momentum. The shift, in turn, depended on the work of certain key individuals, from very different backgrounds, who promoted moral messages, in several cases after a process of personal transformation. The development of the licit market also meant transforming a negative image of cannabis as a ‘drug’, connected to the country’s violent past, into a substance that could be highly beneficial, not least to medical patients, and a product of professional and scientific production processes. However, the market in Colombia was not without its tensions. As common narratives were challenged by local experiences, it became clear that commitments were fragile and global connections could fracture.

Disconnection: Effects of the Echo Chamber

As I visited cannabis facilities and spoke to Colombians about their business plans, I began to understand how the reality of the Colombian cannabis market differed to the optimistic statements made at conferences and reported in the news. This became obvious when I was on a mini tour around the Colombian coast with Maui and Mabel, two business partners I met at CannaCiencia and ExpoCannabiz through networking events. Maui, a businessman, who lived in Miami, Florida, met Mabel, a designer who lived in Bogotá, at a cannabis conference in Colombia in 2018. They decided to start a cannabis cultivation company in Colombia together. Their business was not yet operational, but after ExpoCannabiz, Maui and Mabel planned to visit potential land for cultivation facilities. They invited me to join them to explore these sites and participate in relevant meetings. We drove towards Santa Marta, a humid, tropical city off the Caribbean Sea, where the first facility was located.

During our car journey, we went over their ‘pitch deck’, a short presentation that is used to outline business plans and often sent to investors to raise money. The first page described the global cannabis market in terms of market value. Following pages compared the potential size of the European and Latin American cannabis market in terms of growth, patient size and industry size. It was similar to the messages I first heard at CannaTech and the language I continued to hear in Colombia. The aim was to showcase Colombia as an attractive investment opportunity. They included bold claims and striking statistics, ‘Colombia will supply 44% of the global demand for medical cannabis’, ‘Colombia has 12/12 [month] light cycle for 365 days a year’, ‘it has low labor costs’, and ‘it has ideal weather for cultivation’. Maui and Mabel cited reports produced by cannabis analytics companies, digital marketing agencies and consultancies. They proudly advertised these claims, and did not feel that these statements were controversial. They were two of many people who cited these same reports at conferences, meetings and interviews, in articles and others informational channels.

But they were still learning. The two attended conferences to understand shifting regulations, meet cannabis companies’ head growers to learn about seed genetics and visited cultivation facilities to see different environmental conditions. The more facilities they visited and the more business owners they spoke to, the more Maui and Mabel began to realize that there was a gap between optimistic media coverage and local realities.

While there was truth in some of the statements, the cultivators we met had different experiences. Although there were some environmental advantages in Colombia, cultivators explained that it is a vast country with numerous microclimates in temperate conditions. From high humidity in Cartagena on the

coast to mountainous air in Medellín, cannabis cultivators in Colombia had an abundance of environmental considerations to factor into their operations. In different environmental conditions, it was not practical, nor effective, to cultivate plants with different genetics and still use the same techniques and practices. Furthermore, there was a common presumption amongst foreigners that Colombia's agricultural landscape was advantageous for cannabis, which reflects the belief of the attendees at CannaTech who planned to switch from cash crops – coffee, cacao and sugar cane – to cannabis. Yet this proved to be a challenge. Cultivators explained how years of agricultural production had involved the use of pesticides, heavy metals and other biological inputs. All of this contaminated the land and when cannabis companies began planting, they found that the soil was less fertile than they expected. This was problematic for anticipated yields. Growing medical grade cannabis in contaminated soil was not a viable option; the plant would absorb any contaminants in the soil, and, ultimately, that product could not be sold to a patient under pharmaceutical standards. Furthermore, the process required supplementary expenditure and time to meet baseline requirements. The idea that Colombia could be a supply hub for Europe's medical cannabis demand was challenged by many local factors. Whilst Colombia's climate and land were promoted as advantages, once companies and investors came to Colombia, it was common for them to experience obstacles rather than easy opportunities for quick capitalization. Pitch decks and news did not mention that companies needed to invest in resources, infrastructure and training to have an effective labor pool and compliant cultivation site. Locals and foreigners both absorbed and believed, the narratives that were widespread at conferences, events, meetings and daily exchanges. It was only when

Maui, Mabel and I visited particular sites that the disconnection between global narratives and daily experience became visible.

There were only a few cannabis businesspeople I spoke to in Colombia who recognized these problems. Seth was skeptical about the capital growth of Colombia's market based on his own longstanding relationships with Colombian cultivators and personal experience growing cannabis. 'This entire industry is a story. It's about how it's told and what is sold. You read between the lines and in between the stories and the truth is under', he said. The allure of Colombia as a supply hub, for instance, was hyped up through investor evaluations and market projections. Seth felt that this 'sold a story', which was distorted from the reality he experienced as a local. This type of strategic performativity, or 'conjuring' as Tsing (2000) argues, was significant to building the market.

Seth's business partner, Charlie, also felt that the narrative about Colombia as a global supply hub had spread due to foreign interest and investment. 'There's so much money pouring in from Canada and other foreigners. It's a problem because they don't know the ways of the local land, and they come from other sectors and don't know how to cultivate the plant', Charlie said. Being a local, Charlie believed, provided a distinct advantage to his company because he recognized local factors. For example, Charlie explained, 'we pay attention to the environment, imported technology and Colombia's tax free zones. It's important to know this, rather than being oblivious to it. [Foreigners] don't know what they're doing or what they are expecting', Charlie said. He believed that foreigners would read one-sided news articles, which propagated claims about the 'Colombian cannabis opportunity as a global supply hub'. He felt that foreign interest and expectations conflicted with

local experiences, which presented elements of disconnection and this was a problem throughout the global supply chain.

This type of conflict was problematic to Charlie because it was perpetuated through shared beliefs and language about processes of reform. Charlie often saw the same figures used in different media channels, such as the source Maui and Mabel cited in their pitch deck. He felt that the regurgitation of statistics and projections about Colombia within the global market hindered the local supply chain and its development. Charlie said,

We are meant to have the best climate and sun for growing. They say our land is vast. This is what is on the paper.

There are certain elements of the sun that we do not receive down here, for example red UV light that allows the harvest of resin. This is why we don't have much resin out here. LPs [licensed producers] will need to figure out what to do with artificial light to get the results they have in other parts of the world, such as in the US.

Although Charlie hoped to welcome foreigners in a similar way to Michael who partnered with Canadians, he was cautious. He emphasized the importance of implementing localized practices and processes in order to establish global connections.

As stories were shared in mainstream media and industry reports, at conferences and other business events, the 'Colombian cannabis opportunity' began to exist in a frame abstracted from the local reality. There was a widespread spectrum of interactions and exchanges, including personal stories, keynote speeches and conference networking, through which ideas began to become understood as facts within the movement. Various statistics and perspectives became a form of common sense to those operating within the market.

But, the knowledge created and shared amongst people in the cannabis market is embedded in socio-legal and economic exchanges that contribute to reinforcing a particular representation of success, expansion, and opportunity. David

Mosse's (2005) work on international development work and policies similarly demonstrates how generated development knowledge reflects ideal representations, which are weakly related to the reality of local work, events, people and exchanges. These representations might be instrumental – to produce connections, encourage global business or frame beliefs. It also can be intentional and relational, which might produce unintentional effects. Mosse describes a similar phenomenon to this case, but with different outcomes.

Within the cannabis market, there were deeply embedded sets of ideas that generate positive reinforcement and hype, mobilization and momentum. Whilst performance accounts for part of this, reiterated representations were instrumental for entrepreneurs to secure investment, activists to reform policy and patients to justify medical cannabis. Businesspeople tended to drive enthusiasm and hype. Produced knowledge about 'Colombia as a global supply hub' fostered local and global connections, created foreign interest in the local market and encouraged exchanges that further constituted the emergence and growth of the cannabis market. Although there was lack of knowledge about cultivating cannabis in Colombia, it does not reflect intentionally deceitful behavior in attempt to construct a positive frame. It was only when people on the ground, such as Maui and Mabel, experienced disconnect between local realities and global narratives that a gap in knowledge was made visible. Even when particular knowledge was challenged, additional tensions surfaced. There were people more closely aligned with the early movement who contribute to an idealistic image construction, but were still troubled by the formalization of the cannabis market. One is a wider critique on the emergence of the global market, and the other critiques the development of a local market. Whilst these might be expected tensions, especially those born out of the

reality of the Colombian market, it generated a sense of momentum and reflects relational exchange in transformation.

In recognizing this disjuncture, however, Maui and Mabel did not negate either frame. Each one applied to particular set of activities, exchanges and relations. Initially, they were caught up in the excitement of the market, and they had internalized the rhetoric. This could be understood as a double standard between beliefs and behaviors. Rather, it reveals how deeply engrained these ideas have become in the market and the sense of momentum it generates. It highlights the sense of conformity, strength of commitment, and degree of connection in the movement. In the context of simultaneous deconstruction and reconstruction of cannabis, this exemplifies how the movement has changed, recognizes that the market still requires further transformation and that cannabis is subject to complex processes.

Conclusion

At the time of my fieldwork, cannabis in Colombia was being socially, legally and economically transformed. On the one hand, the historical context informed contemporary practices, beliefs and communication within the movement and market. On the other hand, the process of medicalization factored into how cannabis was produced, distributed, framed and consumed. The emergence of a licit market was a consequent on legalization and reform, but the process I describe is more complicated than that and cannot simply be understood in economic terms.

New economic activities were closely connected to the process of medicalization, at least initially, which involved transforming a plant substance into a medicine. To reconstruct perceptions of cannabis some people adopted

pharmaceutical standards, adhered to business norms or subscribed to scientific notions. This helped local businesses to standardize, professionalize and legitimize their activities in order to participate in the global market. But, reconstructing cannabis in line within existing legal and economic frameworks did not seem to capture the nuances of cannabis medicines or those shaping the market.

The physical spaces and events that connect people for economic purposes also drew them into an ongoing movement for reform, dominated by shared moral commitments and beliefs, with their own history. Regional conferences embodied the local form of the movement, but these also attracted international participants, such as Gregg, Fiona, and Cameron, which connect it to the wider movement and global market. These conferences were not only useful forms of education, networking and business development, but also helped to reaffirm and engender a sense of commitment to the cause.

Whilst capital exchanges were instrumental to many people, there were still elements of advocacy that captured individual responsibility and commitment, as the four case studies exemplify. In part, the lingering stigma of the War on Drugs combined with perceived economic opportunity brought moral and monetary interests together. It also contributed to reconstructing personal identities in order to acquire and adhere to the culture of the cannabis market more broadly.

However, there were also visible tensions. The process of commercialization produced hype and extravagant claims about the local growing conditions and market potential, which then led to disappointment when people realized that it was not the case. Although these sort of tensions might be inevitable in a commercial context and emerging market, the campaigning spirit and echo chamber effect heightened the disconnect between promises and reality. It is not surprising that this

type of bubble exists, and although it did later burst, it indicates the power of performance in constructing markets. In the years following my fieldwork, some businesses and investors turned away from the local and regional market after recognizing that the ‘opportunity’ was accompanied by understated challenges. This highlights the power and fragility of language, images and rhetoric in constructing the promise and hype of the market. There continues to be an overarching sense of solidarity and commitment to market development, which unites people through collective beliefs, behind a common cause. In the next chapter, I delve into rather different tensions and ironies that emerged in the UK, a further advanced market, which was also in the process of medicalization and commercialization.

Chapter 5

The UK's Medical Cannabis Market

Introduction

Having described early stages of reform and market development in Colombia, I turn to processes of medicalization and commercialization in the UK. The history of medical cannabis in the UK dates back to the 1990s, but it has only been accessible by the public after legal reform in 2018. Throughout this time, there has been grassroots activism for legalization. But, as Steve DeAngelo, the cannabis advocate, expressed in Chapter 4, the ethos of the movement changed through legalization.

For decades, DeAngelo and other activists did not abide by a dress code or attend formal conferences. People gathered at rallies to protest for social justice, freedom and patient access. Cannabis was a form of civil disobedience and a rejection of mainstream culture, some people held anti-corporate, anti-government, anti-commercial and anti-regulation beliefs. In the early days of movement, the people constituted a counterculture, and many deviated, as Becker (1963) would suggest, from mainstream businesses, governance and structures.

Victoria, who I mentioned in Chapter 4, was part of the ‘early days of the movement’ in California, when it was still a subculture. She described herself as a ‘social ethnobotanist’, a medical cannabis patient, and a ‘pioneer in the field of cannabis and social science’. Initially, her involvement was with other consumers and activists. Victoria said,

A lot of us got into the industry because we were consumers and we felt it was an important social justice issue...we felt that we needed to create formal structures to guarantee access to patients.

Once the industry became a little safer and the laws began to change, you saw an influx of people from neighboring industries come into this industry.

When this happened, a process of formalization unfolded as people from other sectors participated in market activity. Victoria explained,

They are saying, ‘well okay, this is a job’, and in a job you go to an office, have conferences, network this way and have business cards.

Then you have people like myself who were definitely early adopters to the industry, but were also from professional backgrounds. We kind of understood the [corporate] culture and we could play that role when needed, even though that is not the industry or culture we came from.

Once it became more of an industry, I would say the ethos and culture were similar to other industries: innovation, thinking outside box for financial gain, networking and cross-collaborations, startups and raising capital.

The ethos of the cannabis industry right now [in 2018] is probably exactly what it was during of the early tech industry.

I think that is what is scaring a lot of people – an absence of regulation. We've [people from the movement] come up with our own ethos and culture and now that whole thing is in jeopardy because, now, we would be just like any other industry.

A clear shift happened throughout the transition from illicit to licit. Those formerly involved, many from marginalized and patient groups, were more motivated by overall wellbeing, whereas people more recently involved saw incentives through profit and market forces.

In the past few years, there has also been an increased interest in the market potential of cannabis products, for both medical and wellness purposes. In contrast to the UK's restricted medical cannabis market of the 1990s, there are now cannabis products in different forms, which have been influenced by a diverse set of businesses, people and organizations. Initiatives to legitimize cannabis as a medicine have happened alongside parallel processes of commoditization of product supply. These processes contribute to the transformation of cannabis as a commodity. But, economic forces and corporate experiences have also brought attention to changing ethos of the movement. I provide a snapshot in the process of reform and development of financial endeavors, specifically on medicalization in the UK, and the people who become involved.

Personal and Patient Advocacy in the UK

In summer 2019, I attended an event at the House of Lords in the UK, hosted by an organization, called Drug Science. In 2010, Professor David Nutt, a neuropsychopharmacologist who specializes in drug research, founded the organization to ‘provide an evidence base free from political or commercial influence, creating the foundation for sensible and effective drug laws’. Basia, a patient advocate, educator and founder of a cannabis event called CANNTalks, invited me. Her projects were aligned with Drug Science’s work, such as lobbying for access to medical cannabis in the UK. Part of her work included supporting Charlotte and Billy Caldwell, whose case had helped to trigger a decision from the Home Office to reform cannabis policies in 2018. Such recent policy changes in the UK’s medical cannabis regulatory framework provided some of the reasons Drug Science organized the event, to ‘celebrate the achievements of Drug Science, since its inception ten years ago’. There were five speakers discussing psychedelic research developments, medical cannabis updates and drug testing programs.

The opening speaker, Mark, welcomed the audience on behalf of Drug Science. He said he was excited to be at Parliament having ‘progressive’ discussions about drug-related research. ‘The greater the conversation [about drug research and science], the less chance there will be to deny the truth about drugs’, Mark said. ‘We need you’, he declared, as an invitation to the audience to get involved in drug policy reform, especially for medical cannabis. Most people in the room – around 100 cannabis and psychedelic researchers, related businesspeople, drug policy advocates, and benefactors – knew that the UK had legalized cannabis for medical use. Nonetheless, ‘since the law changed, there has not been a single prescription made through the NHS’, Mark said. Slow governmental implementation was not

surprising to him because ‘we have been fighting the battle for so long’, he said. The ‘battle’ he referred to was the effort to persuade the government to create ‘sensible’ drug policies based on evidence, which would increase access to controlled substances for medical and scientific purposes. Although Mark felt that Drug Science was ‘influential in lobbying’ throughout the decade, including a report submitted to the WHO, ‘parents were the ones who really changed the law. The country watched children suffer to blind denial of evidence’. Mark was referring to two figures in the UK, Charlotte Caldwell and Hannah Deacon, whose stories I discussed in Chapter 3.

Drug Science invited Hannah to speak about her journey with her son, Alfie Dingle, who had intractable, or refractory epilepsy, a form of epilepsy in which antiepileptic drugs fail to treat the seizures. Hannah shared her story:

When my son was born, he was perfectly well. He became unwell at eight months old. One night, I was woken up by a scream. I ran into my son’s bedroom. He was having a huge tonic-clonic [grand mal] seizure. I had never seen a seizure in my life. It was the most frightening, traumatic thing I have ever seen, and it was the day that changed our lives.

He had every test known. All came back normal. He had all nine antiepileptic drugs, and he was still seizing. We tried steroids and they stopped his seizures, and we were sent home. It happened again every eight months until he was four. Then at four, it happened every three weeks. Then at five, it was every week. They pumped steroids, 25 doses per month, at that point.

We were told if the seizures didn’t kill him, the steroids would. That wasn’t a choice any parent wants to make, which is when I decided to research cannabis. I heard anecdotal stories about parents reducing their children’s seizure by 50-100%, and it was something I wanted to try.

My then, pediatric neuro doctor [who is no longer their doctor] told me if I spoke to him again about cannabis that he would refer me to social services. We decided to go to Holland because Alfie would be dead if we didn’t.

We found a doctor doing a trial and Alfie was one of 14 patients. He was given whole plant cannabis oil, Bedrolite [an authorized medicine containing THC, CBD and other cannabinoids] and for the first five weeks it did nothing. Then the sixth week, he had 150 mg of CBD [a much larger dose than Alfie received the first five weeks], and he went 17 days without a seizure. Then three months later, they added in more THC to his treatment. He went 41 days without seizures.

Cannabis changed Alfie’s life... He used to beat me up, punch and scratch me... Cannabis has given him the opportunity to be normal. He goes to school everyday when he is well. He learned to ride a bike, a horse, and swim.

When we came home [from Holland], that's when our battle with the UK government began. We were told there was no medicinal value to cannabis, and that you cannot have a license to be prescribed this drug. This was fight on.

We worked with the Home Office to persuade them of arguments for medical use. In June 2018, Alfie was issued with the first permanent cannabis license.

This campaign is not about me or my son, it is about a group of parents who decided to make a change, Members of Parliament, lobby groups [such as] Drug Science, and people that know that this is the right thing to do.

I think this is a patient led revolution. It is a medical revolution, and we will see great change as to how doctors treat their patients in the long run.

Most attendees were familiar with her story and, as she described, the 'battle' against the British government. But, her story still triggered an emotional response. She knew that it represented the experiences of other patients and parents around the country. Stories about Alfie, and other patients, might have been one factor that influenced policymakers to permit medical cannabis. Despite this, pharmacists, doctors and the general public did not immediately accept it. The process was more gradual; it needed more changes than legal shifts.

Personal experiences and exchanges often acted as triggers for transformative beliefs about cannabis. This was something that John, a middle-aged British pharmacist, described to me at the Drug Science event. For most of his career, he had worked in the pharmaceutical industry, when he had, as he put it, 'a mindset shift' when he accepted a new job in a medical cannabis company. Although John had years of experience with medical products, accepting the job required learning about a product that was quite different.

He had expected cannabis to be similar to any other pharmaceutical ingredient he worked with in the past, yet he was surprised to discover that cannabis was unique. 'Throughout my 20 years of working with pharmaceuticals, I found out that cannabis is more emotional than any other substance I've worked with', John said. Describing a pharmaceutical substance as emotional was unusual. But, it was a

deliberate choice of word, and one that other informants used, which attributed a degree of ‘exceptionalism’ to cannabis. John also felt that his new profession, and the market as large, was embedded in morally inflected processes, such as the patient stories that triggered and supported legal reform in the UK.

There were similar headlines in Colombia, as discussed in Chapter 4, and comparable patient advocacy cases featured in other local reforms. These narratives addressed human rights issues, the right to healthcare and medicine, and elicited instincts of care and compassion. It is no surprise that many cannabis laws in the US, such as in Texas, Illinois, California, New Jersey, Florida, were labeled as ‘compassionate use’. In part, patient stories were lived experiences of struggle, often in a liminal state between quality and quantity of life. These narratives captured the public’s hearts, and, ultimately, changed policymaker’s minds, as many informants believed. Of course it was not as linear as this. Moral frames were supported by science, invested capital and public relations strategy.

Historical residue from the era of prohibition also played a part. New regulatory frameworks permitted what had been prohibited for decades, which shed light on the people and places affected most by the War on Drugs. My informants shared stories about people being wrongly convicted for cannabis related crimes, cases of targeted discrimination, unfair access to market opportunities and lingering stigma. This stigma included remaining ideas about the potency, danger and unknowns about illicit market cannabis. All of this history informed advocacy efforts and business decisions.

John had noticed within his existing pharmaceutical network how these ramifications contributed to a two-part hesitation: some patients were reluctant to use cannabis for medical purposes and some doctors were not willing to prescribe it.

John felt that most British doctors lacked understanding of the methods of administration, dosage, quality, legality and efficacy of cannabis. Additionally, doctors had not all automatically shifted their perspectives under the new regulatory framework, as John himself did. Instead, they still perceived cannabis as an illegal, and often immoral, substance. Since medical professionals did not learn about the endocannabinoid system in medical school or the applications of medical cannabis for certain conditions, there was a disconnect between opinions inside and outside of the market.

This added a layer of complexity to the process of commoditization. According to John, medical cannabis was one of the only pharmaceutical examples in which patients had more expertise than their healthcare professionals. John knew patients with conditions, such as multiple sclerosis, epilepsy or cancer, who experimented with cannabis treatments, including dosage and administration method. Even though some of these patients were eligible for a prescription in the UK, they struggled to obtain one. This sometimes instilled feelings of hopelessness and shame. Patient advocacy groups formed to offer support, information and access. Through personal experimentation and coordinated activities, the use, understanding and commitment around medical cannabis shifted. Many patients went through an intensely emotional process sharing anecdotal stories, which in many cases were increasingly supported by scientific reasoning. However, when this failed, they relied on first hand experiences.

Belief in and acceptance of cannabis commodities sometimes depended on personal experiences. This was the case for John and his mother, Karen. He said, ‘everyone knows someone, or knows someone who knows someone, that uses cannabis for its therapeutic benefits. It may not be epilepsy, but it may be joint pain,

like my Mom’. When John told Karen about his new job with a medical cannabis company, she was skeptical and did not regard his new job as legitimate. Each time they spoke, she dismissed his professional transition. Meanwhile, she ‘always complained about her arthritis’. John decided to give her a CBD-balm for pain relief. ‘When she finally gave it a go, it obviously worked. Now when she calls, she asks me to get her cannabis from my “dealer”’. John was a pharmacist, not a dealer, and, in this case, the CBD balm used was not even prescribed. It was an over-the-counter product, marketed for wellness purposes. ‘My mom lived in a time of prohibition, but in her mind, dealers are no longer the only distributors for cannabis, and, in today’s world, they are not the key distributor for cannabis-based products such as balms, tinctures or capsules’, John said. When she began to use cannabis, she began to believe in the arguments her son had made countless times. She even began informally advocating for CBD in daily conversations with friends and family, which prompted a chain of similar interactions. Karen’s positive experience not only legitimized cannabis products for her, and her network, but it also helped her to legitimize John’s job.

Given the lingering historical stigmatization, development of the UK’s medical cannabis market required ongoing advocacy measures. Whilst patient activism, and their stories, supported movement momentum, the process of marketization involved a mix of personal, moral and economic forces. Victoria, the ‘social ethnobotanist’, said,

People don’t have a lot of feelings and emotions about taxes, but they have a lot of feelings and emotions about young people being locked up for decades for having a joint and having their lives ruined.

I think that the social justice is what gets people to agree with legalization, but it is the tax revenue that allows them to accept it into their lives and those are two areas of very different culture.

In the US, the backdrop of the War on Drugs made social justice issues obvious. But, in the UK, patient stories, more so than social justice issues, led to shifting public opinion.

Legitimizing market activity and cannabis as a commodity entailed transformative experiences, individually and collectively. The moral undertone of these shifts was intimately connected to the history of the movement and market emergence, and, to an extent, complicated later processes of commercialization. In the next section, I provide cases of people involved in the regulated market in the UK, with different ties to the ethos of the movement. Despite distinct backgrounds and varying levels of involvement in the movement, each one expressed ethos related to their business activities. Whilst their viewpoints at first might seem contradictory, their shared beliefs highlight how forces within the movement inform the emerging market, and vice-versa.

Tensions and Connections in the Movement and Market

Cannabis Europa

Conferences were a distinct feature of the licit market, but there was one particular panel at a conference, Cannabis Europa, in London in May 2018, in which the shifting ethos of movement became visible. The panel was titled, ‘Crossing Paths: Medical Cannabis Journeys’. Four medical cannabis patients were talking about being ‘advocacy champions for compassion and care’. However, they were sharing their stories to an almost empty room. At the same time, another panel, ‘Innovation Around a Bureaucracy’, was taking place down the corridor. This particular session filled the room because three Members of Parliament (MPs) were sharing their thoughts on cannabis reform. As the limited number of people in the medical

cannabis session trickled out of the room, many more from the reform talk started to race in to get a seat for the next panel, ‘Investment in the European Medical Cannabis Industry’. There was a visible difference in the level of audience participation for each session.

One of the speakers, Amelia, a mother of a medical cannabis patient who advocates for cannabis legislation in Greece, was quick to notice the dramatic change. Given her background as an activist, she asked the event organizers to make a statement. She gathered two other medical cannabis patient activists and addressed the crowd that was gathering for the next talk. Amelia said,

I was just in the room listening to the heartfelt stories of four brave and strong medical cannabis patients, a room that was basically empty. Next time you have the option to listen to MPs or investors, please, sincerely, remember that we [the patients and advocates] exist too. We are the reason you are here.

The only reason there is a cannabis industry is because of the patients. You cannot forget about us because we’re the reason you have this opportunity. It is not right to disrespect these patients who suffer and fight. It’s fine to take advantage of an economic opportunity, but please remember that our stories are our personal reality.

Amelia’s statement at first took the audience by surprise, but by the end, the crowd was nodding in agreement. There was an obvious tension between the female patient advocates and the male investors speaking on the next panel. In an attempt to ease this situation, each investor acknowledged the importance of patients and reiterated support for Amelia’s message. A few mentioned that their activities as investors were in support of patients, including deploying capital into medical cannabis companies, funding medical cannabis research or sponsoring patients and their treatments. Nonetheless, this encounter made inherent tensions between patients and profits visible. It also became clear that policy reform depended upon both. The process of legalization made marketization possible, but the market only existed because of the activities of the wider reform of the movement. Economic change, driven by investors and businesses, still relied on social change, led by doctors,

patients and the public, and simultaneously, social change required economic forces to make this happen. In the following subsections, I turn to three cases that exemplify how the movement's grassroots origins and patient advocacy relate to corporate practices and economic activities, and the implications of this for the commoditization of cannabis.

Callie: From Advocacy to Business

Among the attendees at Cannabis Europa watching the patient's panel was a British woman in her forties, Callie Seaman, who had been involved in cannabis cultivation and research within the movement. Callie had always been vocal about her political views on cannabis policy – in support of legalization, or at least regulating the supply chain – as well as her personal cannabis consumption. She later became involved in advocacy, education and business activities in the legal market.

I had known Callie since 2018, but it was only a year later that I discovered one of the reasons she was committed to the movement. Callie called herself an 'epilepsy warrior', as she used cannabis medicine to treat her seizures. She personified her epilepsy by referring to her condition as 'George', her way of addressing taboo about adult epilepsy and providing education and support. Her main sense of identity was as a 'cannabis scientist, campaigner and advocate, a PhD chemist, an educator and innovator, plant scientist and a mushroom lover'.

Prior to her involvement in the legal cannabis market, she spent much of her career working with hydroponics equipment in the UK, across a variety of crops, one of which was cannabis. Hydroponics is a method for growing plants without soil in sand, liquid or gravel. It allows nutrient additives, such as concentrated microbes, enzymes, minerals or vitamins, to support plant growth. As the licit cannabis market

emerged in the UK, Callie discovered that her background would be valuable to aid the transition. Callie continued to run the hydroponics company, and started another company that researched the ‘genetic potential of cannabis by manipulating stress levels’ to yield certain plant compounds, such as terpenes or cannabinoids. But, as marketization unfolded, she became frustrated by how the grassroots movement and culture were shifting, similar to what Victoria and DeAngelo described.

Part of Callie’s advocacy was about prioritizing cannabis patients, in a similar way to Amelia. But, she believed that some cannabis businesses were ‘taking advantage of medical cannabis patients by profiting from their conditions’. She said,

There is tension between financial struggles, or the need for capital, and the sincerity of patients who need help. Even though I am raising money for my business, I am brought back to the morals of the grassroots movement.

That movement has had a cultural shift, and the patients are at the core, [as those] who suffer. They suffer from their conditions, and now they suffer from the way they [patient illnesses] are used.

Callie felt that patients, who medical cannabis companies claimed to ‘serve’, were sometimes used as ‘puppets’. ‘I’ve been in the hydroponics business for more than 17 years. Now all of these people in suits are coming in and they are in it for the wrong reasons’, Callie said. Because she was a ‘veteran’, she felt that businesspeople ‘pushed her aside’ when they entered the licit market. Despite this, she felt that it was an unavoidable tension. Companies needed to produce medical cannabis products for patients and patients needed the companies to produce medical cannabis products for their treatments.

Although inevitable, Callie believed that the newcomers could do more to support the movement’s efforts to regulate cannabis and provide better access and supply. ‘Businesspeople are only here to use cannabis as a way to make money, and they are taking advantage of an opportunity. But, they don’t really understand the plant at all’, Callie said. Although many businesspeople shared a deep sense of

cannabis as a commodity, she believed that some did not acknowledge the history of the market and movement, and they lacked technical understandings about the plant. Understanding cannabis, molecularly, was not a prerequisite, but it did provide tools to make informed business, policy and advocacy decisions. Even more was an appreciation for the history of counterculture, measures of reform, and other coordinated activities that paved way for the legal market.

In her effort to educate, Callie used her Instagram account as one platform to share information about cannabis plant science and her advocacy efforts. On her Instagram page, she highlighted one cannabis compound a week using the tag #moleculeoftheweek. She featured cannabinoids, flavonoids and terpenes that are found in the cannabis plant. She personified each molecule because she believed it would help people understand how the compound worked. For example, Callie described cannabivarin (CBV), a naturally occurring cannabinoid ‘most often found in cured cannabis sativa and hashish’. Callie included facts about its chemical composition, such as having a melting point of 164.19 degrees Celsius and being insoluble in water, but she also characterized CBV as female. In one of her posts, she wrote,

CBV is a rather popular young lady, but she is also ignored a lot. Surprisingly, being the second most abundant cannabinoid found in cured cannabis, [she is] becoming more confident and prevalent with age.

She is a bit like the only female director on the board – important and powerful – but often ignored until she is not there. But she is not willing to give up. She will push forward and fight for what she believes in and strives to inspire.

Callie wrote that there is a lack of research and data about CBV, but suggested that ‘she could help with nausea and vomiting...she is integral to the team helping to form part of the entourage effect and improving lives everywhere’. The ‘entourage effect’ is the theory that each compound in the cannabis plant acts synergistically, or enhances overall efficacy, when combined. In Callie’s example, CBV’s potential

effect would be maximized in interaction with other cannabis compounds, such as THC or CBD. This was part of the complexity that Callie hoped the public, regulators and businesspeople would understand.

Although she found it helpful to isolate the compounds by molecules, she did not believe that regulators should control cannabis compounds one by one. This would ‘begin to destroy and remove the beauty of the plant’s entourage effect’, Callie said. But, regulators were familiar with regulating compounds individually because most pharmaceutical products contain isolated active compounds, such as ibuprofen or hydrocortisone. Callie felt that using standard pharmaceutical structures, would not ‘do justice to the plant’s hundreds of compounds that have a therapeutic effect, individually and collectively’. This was why, in part, Callie also believed that cannabis was ‘disrupting’ the pharmaceuticals sector and ‘the way we [scientists and clinicians] do research’. But, she believed more research was needed to support the process of commodification, especially since she saw the cannabis movement as a ‘patient-led revolution’ and cannabis as a complex pharmaceutical ingredient.

Callie maintained a sense of purity in what and how she was doing in the licit market. There was a sense of ownership of the movement and the development of cannabis products. But, these activities, to her, seemed to be slightly contaminated by the influx of business practices. Even though some clashed with her beliefs, still, she recognized that there were aspects of development, many inevitable, which were out of her control. She felt that the commercial development of the market undermined the ethos and values of the existing movement, in particular, the exchange of social benefits for commercial profit. Incentives changed to prioritize profit, which risked replacing the founding values of the counterculture.

Despite her varied, long-term involvement with cannabis, since its early days, she still favored scientific research and methods and pharmaceutical standards. But, she thought that some scientific approaches, such as isolating compounds, missed the value of cannabis and the complex ways it works. Echoing what Steve DeAngelo said in Chapter 4, who believed in learning lessons from the cannabis plant, Callie was insistent about the significance of having an intimate understanding about cannabis, its history, science and distinctiveness.

Daniel: 'Corporate Cannabis' and Counterculture

When I was in Colombia, at ExpoCannabiz, I met Daniel, a middle-aged Canadian, who had a medical cannabis business in the UK. He spoke passionately about cannabis and the market, despite reservations about some of the corporate activity. Daniel had grown up in Vancouver, Canada, a place where cannabis consumption had been 'normal for years', as Daniel described, mostly related to relaxed drug policies, harm reduction organizations, social acceptance and access to 'high quality, craft cannabis'. Part of the normality was the fact that cannabis had been legal for medical use since 2001, but remained illegal for adult-use until 2018. Despite this, cannabis consumption had been part of his lifestyle for over 30 years. He still identified with the ethos of the grassroots movement, especially regarding access to alternative medicine, patient rights, social justice, and civil disobedience to symbolically fight the government and its policies. Yet, Daniel had grown to accept some elements that characterized the licit cannabis market, especially in his business activities.

Despite his market involvement, he felt that elements of the counterculture were being replaced by what he described as 'corporate cannabis', through

legalization and the resulting effects of commercialization. He defined ‘corporate cannabis’ as an overarching category that reflects the influence of established business practices, such as access to public markets, large investments, mergers and acquisitions, which were led by traditional bankers or investors, and former executives from large, global companies, such as Coca-Cola, Proctor and Gamble and Johnson and Johnson. The difference was visible between men in suits with business cards who work in private offices and attend conferences and men in jeans or street wear at home or public spaces who attend rallies. He felt that this professionalization also factored into other business goals, such as reducing operating costs and increasing revenue. In this case, it might lead to standardizing processes for higher yields, outsourcing production to reduce expenses or acquiring a company to increase assets and access in a market. All of this exerts economic force that prioritizes profit for business development and the emerging market.

Whilst Daniel accepted that commercialization was inevitable, he was disappointed that reform led to ‘an ecosystem of people who profit from those that benefit from the plant. Making money off of sick patients is wrong’, he said. ‘It’s not capitalism, but it is criminal’. His statements were aimed at companies that took greater interest in their stock prices than in ‘the patients they claimed to serve’. In his opinion, patients should be a company’s first priority and profit should be secondary. Daniel did not wish capitalist forces away, but he felt that economic interests and motives must be rooted in a patient-first approach. Rather than allowing corporate culture, adopted from other sectors, to rule the way the market unfolds, he hoped that elements of the subculture would carry over into the licit market.

Daniel ran a for-profit business, Company C, a vertically integrated medical cannabis company focused on ‘solving some of the most pressing supply and prescribing issues in the UK’. Although he emphasized that morality was more important to him than profitability, the two were not mutually exclusive in his case. Daniel’s business required investment to grow and develop, and other financial resources were necessary to conduct research, secure partnerships and hire staff. Nonetheless, his decisions were not only motivated by financial returns. As Daniel and Callie believed, there were inevitable tensions between capitalist forces, movement history and patient needs. But, the grassroots movement had changed, as the market developed, and, likewise, as the market evolved elements of the movement shaped it.

Martin: A Medical Cannabis Business

A few years ago, Martin, a white British man now in his 30s, was an investment banker and a former university rugby player. During his rugby career, he ‘popped ibuprofen during tournaments and took pain killers after surgery’. This took a toll on his physical health, and he looked for alternatives. Martin knew two people who used cannabis for medical purposes: one with Parkinson’s who developed psychosis from prescribed narcotics and another who replaced narcotics with cannabis. CBD products were also a rising trend, which made his experimentation accessible and affordable. He believed that ‘there was a difference between quality and quantity of life, but did not believe that cannabis was a miracle medication that cures all’. This was his first step to believing in the purpose of the cannabis movement, which later became a predominantly economic endeavor. ‘When you begin to enter the cannabis

space and meet families who have been helped, it really makes you question the plant, understand it, and then push for safe access to it', Martin said.

Martin found a passion for the sector, and believed that his investment expertise and regulatory experience enabled his transition into the market. He felt this decision was 'quite risky'. 'Around two to four years ago, people looked at me thinking I was crazy', he said. Early on, he also agreed that it was a crazy decision. Ultimately, it 'came down to seeing worthwhile market potential. People saw that you can make money in it [the cannabis market]', Martin said.

He became the Chief Executive Officer (CEO) of a UK-based medical cannabis company, Company M, which describes itself as 'a life science group that brings together cutting-edge scientific research with the latest innovations in medical cannabis cultivation, extraction and production'. Martin explained that the company maintains a cross-sector interest in pharmaceuticals and wellness, or over-the-counter products sold similarly to supplements and vitamins. 'In the short term', Martin believed that, 'wellness is what is going to yield revenues'. In part, this was because there was a rising trend of CBD wellness products. The CBD market was worth £300 million in 2019, according to the Center for Medicinal Cannabis (Gibbs, Yates and Liebling 2019). It is predicted to reach £1 billion by 2025. Although Martin believed that there 'will always be a [CBD wellness] market', he preferred to describe Company M as a 'medical cannabis' business.

Yet, this distinction required explanation. 'The company leans to pharmaceutical', he said, but 'it is the good kind of pharma. We are capitalists, yes. And, we want good things to happen'. Martin, similarly to Callie and Daniel, spoke morally about their goal of profitability. So, although Martin admitted that market values drive his decisions, he actively distanced the company from the scrutiny

other pharmaceutical companies were facing for capitalizing off of patient conditions and their prescriptions.

Martin described a pharmaceutical scandal involving the Sackler family and the opioid crisis in the US. As the *Financial Times* described the situation, ‘the billionaire Sackler family and its company, Purdue Pharma, were named in lawsuits alleging their marketing tactics helped get a nation [the US] hooked on painkillers’ (2019). The Sacklers ‘took a chunk from people’s paycheck every month for medications they [patients] may be using for life. But, in our market, we know that the people using medical cannabis may not be using it for life, and that’s good...that’s okay’, Martin said. He wanted Company M, like other cannabis companies, to be perceived as legitimate businesses by overcoming the historical sense of immorality associated with cannabis, but he was also determined to conduct his business morally.

Despite his later involvement with cannabis, Martin described cannabis as an alternative to pharmaceutical medicines, which brought the values of movement to the forefront. But, even this was complicated because some companies, with similar values and structures to Company M, have been criticized by grassroots cannabis advocates for being part of ‘corporate culture’ and siding with Big Pharma values. In contrast, people like Martin distinguished between Big Pharma as bad and medical cannabis ‘good pharma’. There was a sense of moral activity and belief in the market, shared by people with distinct histories, identities and interests. To an extent, Callie, Daniel, Martin, and many others, embodied the history and ethos of the movement in exchanges and beliefs.

Part of the responsiveness required in medicalization of cannabis involved processes of commoditization. By adopting familiar medical terminology and

pharmaceutical practices, medical cannabis businesses hoped that doctors and patients would better understand cannabis as a medicine. The process of standardization was happening simultaneously as processes of corporatization unfolded. Martin said,

We have made acquisitions across Europe. This includes a facility to cultivate cannabis and GMP [good manufacturing practices] and API [active pharmaceutical ingredient] certified labs.

He expressed clear economic incentives: acquiring European facilities was part of the business strategy to expand operations. Facilities with GMP and API certifications were also strategic decisions to gain access to a global supply chain monitored by standardized protocols. Consequentially, ‘these deals made them [doctors, pharmacists, policymakers and investors] know that we are serious’, Martin said. Martin’s self-transformation included a personal experience, which later became reinforced by capital gains, historical narratives and moral imperatives. He focused on market development, which also had to address movement goals related to patient access and rights. In this way, the commoditization of cannabis was an exercise in perception as well as protocol and profit.

Concluding Remarks

John, Callie, Daniel, and Martin each had different dispositions and relations with the grassroots movement and market forces, but they all had a sense of moral purpose that reflect elements of the market’s history. Callie and Daniel had been involved in the grassroots movement, and were able to bring this background and detailed knowledge into their modern day work by guiding strategy decisions and stressing the importance of the subculture. They remained committed to the movement for legalization, but felt the tensions keenly. Callie’s antipathy of

commercialization was the strongest, but they were both strongly critical of the business ethos.

Whereas John and Martin, who came in post-legalization, were able to learn through personal experience, daily exchanges and events. They soon internalized the idea that this was not just another commercial market and described cannabis as something different. In their own ways, they came to appreciate this and built an understanding of the history and ethos of the movement. John and Daniel started to sympathize with the viewpoints of people, like Callie and Daniel. They felt that any participation in legal market required an acknowledgment of the movement. Even Martin, who was motivated by profit, had to find ways to also prioritize people and patients.

All of them still drew distinctions of cannabis with other pharmaceutical products, the theme of commoditization and its move into that. Yet, everyone felt that cannabis was different. They all recognized the importance of pharmaceutical standards, but they were all aware of the history, the distinct ethos of the movement, the plant, and its uses. The tensions that had arisen were most visible at the events I describe. It was there that people were brought together, physically and symbolically. The investors and patient advocates created an environment of connection amidst tensions, which reiterated a sense of commitment to the cause and belonging to the movement. It was not a daily issue people had to address, as business was still conducted and advocacy was still performed. But, it does illustrate that cannabis, in this way, was still far from being a commodity. In the next section, I turn to an event that exemplifies how other sets of tensions arise through marketization, personal transformations and movement involvement.

UK Medical Cannabis Conferences and Reform Processes

CANNTalks

In the summer of 2019, an event called CANNTalks took place at the University of Cambridge at the Old Divinity School. ‘CANN’ stands for ‘curating a new normal’. Basia, one of the founders of CANNTalks, who invited me to the Drug Science event, said, ‘CANNTalks is an expansive forum for a new kind of connection and community’. Presentations covered the science, research, regulations and business of cannabis, and speakers shared personal experiences and insights. She said,

The goal is to initiate increased cross-cultural awareness and consciousness of the many trans-global impacts of this complex plant [cannabis]; of an equally complicated industry; and of the social dynamics born of these interwoven aspects.

The CANNTalks team hoped to highlight current, and ongoing, debates around cannabis. I attended and spoke at the August event. There were around 40 to 50 attendees. The event was modeled on TED Talks. TED is a non-profit that believes in the ‘power of ideas’, which are ‘usually in the form of short, powerful talks (18 minutes or less)’. This format allowed a lineup of speakers to share their personal and professional experience with cannabis and provide context to cannabis in its various forms.

Leah, one of CANNTalks’ creative directors, hoped that attendees would leave the event as ‘a transformed collective’. This type of transformation was less personal than the one John, Martin or Callie experienced, and more informational and interactional. ‘CANNTalks creates connectivity in a space through stories and experiences that can be used to help navigate the world. It is as if the patterns of all minds come together in one place, at one time’, Leah said. Speakers, their stories and the audience’s experience, Leah believed, would be the means to share common beliefs and overcome conflicting views.

The first speaker was a neuroscientist and cinematographer who spoke about policy reform and medical cannabis patients as captured in her documentary and research. A businesswoman, the CEO of a licensed cannabis cultivator in Jamaica, then discussed her involvement in commercial activity and perspective about market emergence. Both speakers used before and after videos to showcase patients experiencing benefits from medical cannabis. Visual depictions enhanced their stories and triggered emotional responses. Although they were engaged in distinct market activities, their viewpoints created an echo chamber of beliefs in support of reform and marketization.

Then, the program announcer, Matthew, introduced Dr. Allan, a consultant psychiatrist and clinical director, who was connected to the movement but maintained unique viewpoints to the first speakers. Dr. Allan was also part of the Oxleas NHS Foundation Trust and a member of the UK's Advisory Committee on the Misuse of Drugs. Matthew said,

The Advisory Committee is meant, at least in theory, to guide Home Office policy as it is created, and to let politicians and civil servants know about how these drugs actually work.

Dr. Allan was also part of the subcommittee that made the recommendations that were accepted by the Home Office to reschedule cannabis for medicinal use. From his lips, to the Home Office's ear, please welcome Dr. Allan.

Dr. Allan did not identify with the cannabis movement or market, despite his involvement in cannabis policy reform. In part, this was because he voiced some of the lesser-advertised concerns about cannabis, such as harmful effects, risk potential and other negative narratives. Theoretically, his ideas disrupted the echo chamber effect that I experienced in Colombia, at CANNTalks, and every other conference I attended. Dr. Allan was aware of his unpopular views amongst the CANNTalks audience.

In this way, Dr. Allan walked on stage and joked, ‘I am “that guy” in the suit and I am “the doctor” that doesn’t really belong here’. He took ownership in the fact that his beliefs might make him an outlier, but still believed that, ‘we have a lot in common. Cannabis comes into my life in many ways’. He provided a doctor’s perspective about his medical experience with cannabis. Similar to other informants, Dr. Allan also highlighted the importance of individual patient stories. He said, ‘I have a good idea about why it [the process of legalizing cannabis for medical use in the UK] moved so fast’. He indirectly referenced the notion about the cannabis movement being described as a ‘patient-led revolution’. Although he also admitted that the dialogues with the Advisory Committee on the Misuse of Drugs were complicated and multi-layered, he said, ‘people were standing up [for reform]’, and this ‘really matters’. He meant that the patient narratives, such as the Caldwell case and Hannah Deacon’s story, mattered because they generated a sense of urgency for policy reform. Although his recommendation to the Advisory Committee was in support of legalizing cannabis for medical purposes, he remained cautious of the wider commoditization of cannabis.

Dr. Allan had grown up in the 1990s in Dublin, where cannabis was the primary substance used amongst his friends. One of his best friends used cannabis from the age of 15 to 25. Although he suffered no physical harm or effects, Dr. Allan felt that his friend experienced some harm from cannabis, ‘my friend lost a decade off of his life’. Based on personal and patient experiences, Dr. Allan made three claims about cannabis. He said,

One, most people that consume cannabis recreationally are not in any way harmed by it. Two, some people that consume cannabis are harmed by it. Three, cannabis has medicinal properties.

He recognized that the three statements may ‘feel contradictory’ and noted that the audience listening might respond differently to his typical audience, or the general

public, because CANNTalks brought together what he called a ‘skewed cohort’.

Most people in the audience, he felt, would support the first and third statement.

Unsurprisingly, Dr. Allan picked up on the audiences’ lack of agreement with the second statement. He said,

You can tell me cannabis does not cause you or your friends harm, but do not tell me it doesn’t cause any harm. Sure, we can argue about the type of harm and causality, but it is about how we manage the harm.

There have been a group of patients who had not been mentioned today, and have been absent from the room.

Dr. Allan was referring to patients who experienced harm, not benefits, from cannabis use. ‘I do not use before and after video clips of people who have been harmed by cannabis. I see them everyday, and have seen them everyday for more than 20 years’, he said. Within this audience, Dr. Allan expressed a minority opinion. Despite this and the fact that he might be ‘villainized’, as Matthew the program announcer later said, Dr. Allan provided reliable perspectives often prevalent outside of the cannabis market.

One contributing factor to Dr. Allan’s view was the lack of supporting evidence from clinical trials, as the Advisory Committee also suggested. Research, or lack thereof, for evidence-based policies and commoditization, was an element that people, both inside and outside of the movement, commonly agreed upon.

‘Let’s get rid of the blocks and get that science up to speed’, Dr. Allan said.

Increased research was a significant element to understand cannabis scientifically, especially for medical professionals and policy-influencers. But research was also useful for the process of commercialization.

Despite widespread agreement on the need for increased cannabis research, there were a number of bottlenecks, which were discussed in the following presentation. Dr. Allan chaired a conversation between Callie, the chemist who used

Instagram to present the #moleculeoftheweek, and Sarah, a researcher at a London university who studied the endocannabinoid system in relation to genetics, mental health and addictive behaviors. Prior speakers had repeated the fact that policymakers, patients and companies valued the importance of science and research. Callie, however, felt there were challenges. She said,

Licensing is prohibitively expensive. Hundreds of thousands of pounds, if not millions, are required for application and legal fees, processing time, and other compliance checks.

There also is a lack of independent funding due to stigma.

All of the funding available seems to be coming from licensed producers, which makes it non-independent.

During 2019, cannabis companies invested in cannabis-based research projects in various jurisdictions, including the UK. For example, in January 2019, Canopy, one of the largest publicly traded cannabis producers based in Canada, invested in trials and acquired Beckley Foundation, a think tank and not-for-profit conducting research on psychoactive substances, including LSD, psilocybin, cannabis and MDMA (O'Hara 2019). In July 2019, Aurora, another Canadian-based publicly traded cannabis company, entered a multi-million dollar deal with the Ultimate Fighting Championship, 'the world's premier mixed martial arts organization', to conduct research about cannabis use in pain, recovery, inflammation and wound healing (Booth 2019). In most countries, access to conduct research on a controlled substance, such as cannabis, was a legal and financial challenge, and 'industry support' was typical from 'big players', such as Canopy and Aurora. Different stakeholders involved in the market appreciated that funding research was influential in market development and movement momentum. Callie believed that it was a 'win-win' situation for companies that had available funding for research; research would help boost stock prices, generate evidence for policymakers, and provide justification for their products for its customers. Whilst this type of funding

was helpful, she felt, that ‘it is harder to conduct research that is as credible because the funding bodies are still tied to the market’.

In addition to financial burdens, other non-economic factors added to the difficulty of conducting research. ‘We need to make cannabis research normal. Universities should be willing to work with us on cannabis related projects. We need to stop using “cannabis” as a dirty word. It’s not the devil’s lettuce’, Callie said. The audience agreed loudly with cheers. Despite recognition of the lingering influence of prohibition propaganda, this stigma hindered access to some of the ways in which Sarah, Callie and other scientists, hoped to reframe cannabis. They wanted to conduct research to remove some of the barriers to conduct it.

The concern about the lack of cannabis related academic literature and research was shared by Dr. Allan, Callie and Sarah, even if for different reasons. Dr. Allan said,

I have come out with a huge amount of information from the speakers here today. The richness of the content comes from it being led by people. Medicine does need to be shifted. It needs to be led by people. There is no stronger advocacy than people who use services.

Sarah and Callie’s experiences and obstacles put the importance of legalizing cannabis for medical and scientific purposes into perspective for Dr. Allan, and allowed him to contextualize his insights further.

One of the event organizers, Basia, said this was the highlight of the event. As someone involved in patient advocacy, Basia was hopeful that Dr. Allan would report back and share his experiences with other government officials, policymakers and doctors. To change people’s perspectives, or at least, open their minds to new ways of conceptualizing cannabis was something that the CANNTalks organizers hoped to achieve. Moments such as these were an example of how CANNTalks hoped to create a ‘transformed collective’, as Leah said.

Although it may have been ambitious to believe that conflicting relationships would disappear and that perspectives would change immediately, the CANNTalks team made a decision to showcase a spectrum of ideologies that complicate the market and movement. In closing this session, Matthew, the program announcer, said, ‘part of the purpose of CANNTalks is to raise the level of conversation around all complexities involved in cannabis’. He referred to a multiplicity of factors – chemical, medical, legal and social – that are involved in the transition of cannabis from an illicit context into a regulated one. ‘This complexity may be a metaphor for how we deal with this in society and the complexity around that, too. As one set of laws are left behind, how do we embrace a new regulatory apparatus that needs to balance this complexity?’, Matthew concluded.

Dr. Allan highlighted the serious fault lines between policymakers and national policies on drugs and pharmaceutical standards and the values and goals of the people of the movement. This reveals concerns between regulations and the movement, rather than the market against the movement. The question of legal change and how it would best be achieved was open-ended. There were no clear answers as the process was still unfolding. But, as Dr. Allan suggested, patient advocacy, or those affected by particular policies more broadly, might have a path forward in social and economic change. The cannabis market is still far from mainstream, but this kind of event illustrates the possibility of the dialogue with people working within it. The organizers realized the importance of bringing people with somewhat oppositional views together to cultivate mutual understanding. It helps to break down the echo chamber and generate a sense of chance to reform through dialogue, even if just to consider a regulator’s perspective. Conferences were significant events, where such idea exchange can take place or tensions can

play out. People were prepared to say unpopular opinions, which break down the echo chamber, in yet a different way to how Maui and Mabel from Chapter 4 experienced. The last two case studies reinforce how far there still is to go.

The Case of Company H

The final panel of CANNTalks was about the UK's regulatory framework as it relates to hemp and legal issues faced by one supplier, Company H. Company H is a co-operative that cultivates, manufactures and distributes hemp-based products.

Rather than products with direct medical uses, these products involved hemp seeds, hemp seed oil, hemp tea, hemp-derived topicals and CBD tinctures, marketed as natural remedies and goods. Its mission is 'for hemp to be accessible and in line for people, the planet and the community'. There were two speakers, Jordyn and

George, who spoke on behalf of Company H. George said,

Hemp and cannabis have not already been colonized by traditional capitalism. We can use it as a different way of doing business and economics. We have an opportunity to have a completely new business model that other sectors may adopt. We are using the power of hemp and cannabis to present that model to the world.

Jordyn and George were hopeful that their 'holistic' business culture, one that they believed incorporated people, the planet and the community, could emerge in the mainstream. They compared this to the dot com era and technology boom in Silicon Valley, which they said resulted in a 'new business culture'. George felt that the market was being 'colonized' by established corporate structures. But, similar to Daniel, the Canadian businessman, and Martin, the CEO of the UK pharmaceutical cannabis company, George also hoped that the cannabis market could establish new standards for business. Jordyn and George said they were not motivated by financial means, but they were about concerned about the future of the industry and their

livelihood, following a decision by the Home Office to revoke Company H's license.

Company H had received licenses by the Home Office in 2015 to cultivate, manufacture and distribute hemp. These licenses had to be renewed every three years. The law at the time prohibited companies from extracting CBD from the flowers and leaves of the hemp plant, although it was permitted to use and extract seeds and stalks if production was licensed. A few weeks before CANNTalks in 2019, the Home Office revoked Company H's renewal application. At the time, there was no explanation given to the company, despite the application containing similar information to when it was first approved.

Company H had to destroy its crops (McDonald 2019). Jordyn and George felt that this decision was 'unjust and devastating'. News reports estimated that the loss would be around £200,000 (Lyons 2019). However, Company H stated on its website, 'the 40 acres lost to us this week could have been transformed into £2.4 million as CBD at retail price, for a not-for-profit farming co-operative. Of this, £480,000 would have been tax for the UK government'. Company H had also harvested crops, and prepared required licensing, to participate in university-based research. Those projects were suspended due to crop destruction.

Although the Home Office's decision took them by surprise, 'we had always been somewhat prepared for something like this to happen. There has been uncertainty around cannabis and hemp for years', Jordyn said. Prior to the Home Office's decision, Company H diversified its goods and services through consultancy, extraction technology and research to prepare for an unexpected situation, such as these licensing complications. They hoped earlier diversification would allow them to 'survive the loss of their expected harvest'. 'Rather than

mourning the loss we know we had to face, we decided to use it as a way to launch a campaign, #saveUKCBD’, Jordyn said. Jordyn and George spoke passionately about the campaign – one tangible factor they could still hold onto.

To depict the scale of loss, Jordyn and George shared the campaign launch video for #saveUKCBD, which showed Company H’s hemp fields being destroyed by tractors. The footage cut to a clip of the co-operative and its members huddling together around hemp plants. A slow, sad instrumental soundtrack accompanied the 30 second video, which ended with a call to action to get involved in Company H’s campaign #saveUKCBD. This campaign aimed to trigger an empathetic response, similar to the patient videos shown earlier, to help the company’s legal appeal and wider initiative to advocate for policy reform.

Following the video, Jordyn said, ‘I was very emotional before going on stage because the video looks like how it feels – devastating death’. Jordyn’s response sounded as if she was speaking about the loss of a person who passed away suddenly and unexpectedly. The hemp plants were ‘perfectly healthy crops that were destroyed for no other reason than arbitrary legal decisions’, she added. The grey area between hemp and cannabis law and enforcement contributed to Jordyn and George’s built up anger, confusion and tears. They hoped this campaign would not only help Company H secure its license, but also be a means to reform hemp and cannabis policies to provide clarity around the current regulatory framework.

There was a history of legal uncertainty at the farm. Jordyn told a story about a compliance check at their cultivation site. She said,

When the police came to inspect the farm, they didn’t know what they were looking for. The police looked lost because they were looking at farmers. They didn’t see criminals because we are a collective made up of members.

Adding to the complexity of the Home Office’s decision was the fact that Company H had a history of compliance, even when the government amended its cannabis and

hemp policies. ‘We never received a warning. We were never notified of a problem’, George said. Company H said they had disclosed how the hemp flowers would be used in their license application. During the three-year license, the Home Office never raised concerns about Company H’s plant processing practices.

Part of their confusion was an ongoing prohibition on harvesting the flowers of hemp plants, for extracted oil or other purposes, while it was permitted to grow hemp plants. However, although domestic extraction was not allowed, it was permissible to import CBD and hemp extracts into the UK. Jordyn and George felt that this law was a ‘disservice’ to local hemp farmers and the British hemp and CBD market.

Alongside the #saveUKCBD campaign, they put together a petition called, ‘Change the Hemp License Hypocrisy’. As of July 2020, the petition had received 10,977 signatures. In addition to disappointed reactions about Company H’s license, some of the signatories posted about their shared frustration about the ‘hypocrisy’.

One person commented,

The benefits of CBD are so evident that the pharmaceutical companies are pressuring the politicians to eliminate all [of] the independent manufacturers so as they can have the market to themselves. Everyone knows this. Yet, the powers that be, carry out their orders from their corporate controllers.

This comment highlighted the tension between pharmaceuticals, policies and cannabis companies, a view some people shared within the market, including people like Callie and Daniel. Another comment said, ‘of course the revocation of license has nothing to do with pharma backhanders or the fact that a prominent MP has a business interest in growing cannabis’. This comment, read in a sarcastic tone, received 28 likes. This person was referring to the fact that the former UK Prime Minister Theresa May’s husband and the UK’s Drug Minister Victoria Atkin’s husband were involved in cannabis-related companies.

May's husband worked for Capital Group, a fund that is the largest investor in GW Pharmaceuticals (GW), one of the world's largest medical cannabis products (Ellson 2018; Sommerlad, Beattie, and Bagot 2018). GW's medical cannabis was one of the few products supported by clinical data and approved by the European Medicines Agency. Atkin's husband was the Managing Director of British Sugar, a licensed cannabis cultivation company. In 2018, Atkins 'voluntarily recused herself from policy or decisions relating to cannabis, including licensing' (Khan 2018). Jordyn and George did not understand how politicians could profit from cannabis, when patients still could not access medicine. For them, the regulatory framework remained both prohibitive and paradoxical.

The way reform unfolded was complex. Market forces and profit incentives created tensions, but there were still serious legal problems. Regulations contributed to legitimacy of legal cannabis and credibility of the market, but regulating cannabis proved difficult to do well, especially with the lack of transparency as Company H experienced. Company H is more illustrative than just a moment, company or the market. This case highlights legal challenges that any business might have faced because of a series of unclear sets of laws and regulations throughout the process of reform. But, it also highlights the need for ongoing reform, which all of the participants at CANNTalks, and nearly all of my informants, would accept. It symbolizes the sort of concerns that continue to connect the movement to the market, which I address in more detail in Chapter 6. The legal uncertainty and its challenges are one of the elements that hold people together and bind them to the movement. Although legalization was a matter of history, it informed the way the market and movement collided on a regular basis.

The Case of the NICE Guidelines

In early August 2019, there was a policy update in the UK. The National Institute for Health and Care Excellence (NICE) issued draft recommendations for ‘cannabis-based medicinal products following a comprehensive evaluation of their clinical and cost-effectiveness’. NICE is an agency that makes recommendations about pharmaceutical use based on clinical evidence, efficacy, harm levels and cost-effectiveness (Bodkin 2019). Their initial review included eight recommendations, which all called for more clinical research to be conducted. The NICE Director of the Centre for Guidelines, Paul Chrisp, said in an interview with the *BBC*, ‘we recognize that some people will be disappointed that we have not been able to recommend the wider use of cannabis-based medicinal products’ (Walsh 2019). It was the lack of evidence and cost-effectiveness of cannabis-based medicines that led NICE to their decision. At the time the draft NICE guidelines were released, only two patients had obtained an NHS prescription for medical cannabis, one of which was Alfie Dingley, Hannah Deacon’s son with refractory epilepsy. She spoke to *The Telegraph*, ‘there are hundreds of thousands of people using cannabis-based medicines across the world and it’s having an enormously positive impact on their health...the UK is insisting on reinventing the wheel for no reason and the people who are suffering are patients’ (Bodkin 2019). Alongside the draft guidelines, NICE also opened a public consultation to review reports and research, submitted by organizations, institutes and individuals in an effort to collate information and consider external sources; it stayed open for nearly one month in August to September 2019.

Most patient advocates were disappointed by the draft guidelines, as I found out via a Whatsapp group, ‘NICE Guidelines’, which included researchers,

advocates and businesspeople. Basia, one of the CANNTalks organizers, was an active group member and added me. Members responded with their opinions on how to interpret the guidelines and suggested next steps to move forward. The consensus was that ‘NICE are not going to budge’.

One member, Kurt, went through the guidelines and highlighted reasons NICE flagged cannabis medicines as problematic. ‘Some of the concern is the use of public funds for expensive treatments with poor evidence base. Other protocols, such as cancer treatments, are very expensive and attract controversy because public bodies don’t want to use tax payers’ money on controversial stuff’, Kurt said. Despite a general rationalization, each person was disappointed with the outcome and expressed interest in advocating and campaigning against the NICE guidelines.

Basia took the lead to launch a campaign using patient-led stories. She worked with her team to compile a formal response. They worked with economists to assess the economic models used by NICE and partnered with clinicians, patients and doctors to support their considerations. Basia’s team responded to the guidelines on behalf of a few different patient advocacy organizations with 22 pages of comments for each outcome of the eight NICE guidelines.

The draft guidelines were a popular topic for the following months, and one that was debated on panels at conferences and conversations at events. A month after the draft guidelines were released, in September, I attended a medical conference, GIANT Health, where Basia presented about her patient advocacy efforts, including the response to the NICE guidelines. GIANT Health is an annual medical conference about healthcare, technology, research, and related business innovation. It attracts around 200,000 people. The founder is a health-tech entrepreneur interested in the commercialization of medical innovations. Having a

platform that brought general medical professionals together with an array of people involved in cannabis activities provided an opportunity for Basia and her counterparts to gain support for the movement through education, information and interaction.

Basia was excited to be included in the event's first ever cannabis track, "Technology and Innovation for Medical Cannabis". There were five presentations: 1. Introduction to Medical Cannabis, 2. Medical Cannabis in North America, 3. A Patient's Perspective, 4. A Clinicians Perspective, and 5. Panel with Leading Entrepreneurs: Cannabis in the Age of Online Medicine and e-health. Basia was enthused that medical professionals saw the importance in cannabis and approached the topic curiously. She believed that GIANT Health could be a useful platform to educate and advocate for medical cannabis and its required reform, including NICE guidelines, prescribing patterns and patient access. The fact that cannabis was included in the programming signified the importance, and legitimacy, of cannabis medicine to this wider community.

The keynote speaker was Professor Dedi Meiri, a famous Israeli cannabinoid-researcher, who provided updates on his work, 'from plant to pharma, the unique situation of medical cannabis'. The contrast between this evidence from an Israeli cannabinoid researcher and the opinion of the UK's regulatory agency, which cited lack of evidence of medical cannabis, was striking. Many informants believed that the NICE committee had neglected hundreds of published papers on how cannabis medicines have been used to treat various conditions.

In a later panel, a doctor, called Bill, referred to this as 'ignorance'. Dr. Bill had been involved in cannabis research and medicine dating back to 2000, when he

worked with GW Pharmaceuticals, a British company that produces medical cannabis products. He said,

Are they nice or not? It's not worth the paper, it was written with ignorance. They haven't looked at literature properly. They said there is not enough evidence, but their guidelines fly over all international evidence.

There are 19,777 studies on epilepsy and they only looked at four. It's been a waste of time to guide the NHS... Whether it is medicalized or legalized, as a doctor, I will not provide any guidance that is cowardly and undermines expert opinions.

As a consultant neurologist and 'medical cannabis expert', Dr. Bill emphasized that his beliefs were based on the facts and relevant evidence and differed from NICE's interpretation, one that he saw as unsatisfactory. Although he believed in a robust regulatory framework for medical cannabis, he felt that NICE's guidelines did not amount for such.

Other panelists agreed that NICE's review of literature was inadequate. One panelist, a Canadian doctor, Paul, said, 'the guidelines must have been written by the people that wrote our cannabis guidelines originally, it still doesn't make sense'. The panelists questioned the biases of NICE, based on their perception of the availability of research by doctors, universities and companies around the world who had conducted studies on cannabis and various medical conditions. One of the biases Dr. Paul addressed was the way NICE reinforced historic attitudes of immorality and stigmatization and continuing policies through a lens of prohibition. Dr. Bill shared this belief, and said, 'this is a fight for medicalization. But, we are the pawns in steps for legalization. Medical is here to stay'. The 'fight for medicalization' was part of the process of legalization and commercialization of cannabis. Being a 'pawn' in that process, as Dr. Bill suggested, referred to doctors, patient stories, clinicians, researchers and others in the medical sector being used by legislators or policymakers to support cannabis for medical and scientific purposes.

In November 2019, NICE released its final guidelines for cannabis-based medicine product, and issued a clarification on the use of unlicensed cannabis-based medicines for treatment-resistant epilepsy in March 2021. Unsurprisingly, the recommendations were not much different to the draft ones in August 2019. At GIANT Health, the audience, mostly medical professionals, recognized the paradox, yet did not fully comprehend why this was the case. Cannabis medicine, even to them, seemed to be distinct to other pharmaceuticals.

Conclusion

Legalization was a necessary step for regulatory oversight, yet legal reform did not create rapid change for patient access, destigmatization, or scientific and policymaker's opinion. Financial support has supported research and led to product innovation. Legal restrictions, and businesses, continued to need patient stories and first hand accounts. Business activities also relied upon the value of benefiting the wider community and the commitment of activists. Mutual dependency went back and forth between the need for reform and the need to fund, or legitimize, legal reform and market development.

People involved, either from earlier phases of reform or entering from other sectors, transitioned into the emergent phase of the market. Additional forms of business structures and commercial activity, in part, shaped the licit market. But as market forces increased, their varied experiences and incentives exposed tensions between the ethos of the movement and the market. Not only were there internal conflicts between profit-oriented and patient-oriented people, there were also tensions between groups within the market and those outside it, such as Dr. Allan and the policymakers who drafted the NICE guidelines.

With complex regulatory concerns affecting the market, such as the case of Company H and the NICE guidelines, people still had reason to campaign. Whether addressing tensions created by motivations or policies, there were constant forces drawing people back into the values and activities of the movement, whilst itching towards mainstream acceptance. The history of the movement not only impacted cannabis market culture in positive ways, such as fostering connections and reinstating commitments, but simultaneously, it also hindered the market in other ways, as Dr. Paul and Dr. Bill believed. An ongoing movement that connected moral visions commitments and economic interests to the commitment to reform was still required. In the next chapter, I discuss the ways in which cannabis took on another form, as a wellness product, and how companies dealt with a changing legal environment in transition.

Chapter 6

The UK's CBD Market

Introduction

In Chapters 4 and 5, I focused on processes of medicalization and commercialization, but in this chapter, I turn to a different set of cannabis policies and products. This chapter deals with the CBD market in the UK, which in a way was a product of legalization, related to elements of commoditization. CBD was not widely sold in the illicit market, yet became a rising trend in the legal one.

Businesspeople, such as Martin in Chapter 5, believed CBD offered a quicker pathway to profit than medical cannabis, and consumers were more willing to try a non-psychoactive cannabis commodity, marketed as wellness products and sold at mainstream retailers. During my research, legal reform was still unfolding, yet the market was growing.

Although there were similarly adopted strategies to legitimize CBD products through scientific frameworks and research, over-the-counter goods were considered a distinct category to medical cannabis products. CBD products were also not standardized in the same way medical cannabis required. As a result, there was a lack of legal clarity and consumer confidence about CBD products.

People involved in cannabis activities felt the effects of legal uncertainty widely and distinctly. Those involved were concerned about policies that they believed were unduly restricting their activities. Similar to the way people described patient expertise about medical cannabis, people involved in the CBD sector felt more knowledgeable about related products than regulators themselves. Thus, many informants believed that policies were, to an extent, still informed by outdated beliefs and facts.

Restrictions were particularly acute in the areas of market growth and moral imperatives of legal reform. There were also issues with sufficient regulations and

standards. This connected to a shared sense of involvement and commitment to these forces as people undertook activities to maintain, and even create, standards. In this chapter, I explore these parallel concerns as it impacts the development of the CBD market in the UK. I provide a case study of a CBD skincare company, Ohana, which exemplifies an environment of legal transition throughout market emergence.

CBD Market Overview

The CBD Market in Europe

Medical and wellness markets emerged in several jurisdictions around the world, and became a topic of interest to investment analysts. In January 2020, Cannacord Genuity, an investment bank that specializes in wealth management and brokering deals in capital markets, published an ‘equity report’ on the cannabis market. In the report, titled, ‘going global: an international cannabis primer’, analysts explored regional research on ‘the three key international cannabis markets’, Latin America, Europe, and Asia. It divided each market into three categories – recreational, medical and CBD—and outlined ‘key potential catalysts’, ‘market opportunity’, ‘key players’, ‘licensing’ and ‘commercial pathways’.

The overview of Europe focused on medical cannabis, due to its ‘massive market potential’, which the report estimated would be valued at CAD\$25 billion in the seven countries outlined: Germany, UK, Denmark, Netherlands, France, Italy and Spain. In addition to portraying a clear economic opportunity for medical cannabis, there were other commercial pathways for fast revenue: the CBD market. These two markets, although distinct, have been intertwined. In the ‘CBD space’, products are sold over-the-counter, and usually marketed for particular ‘needs’, such

as sleep, stress, sex and intimacy, pain, relief and recovery, beauty and skin, energy and focus, gut health and immunity and fitness. The report said,

Given that most countries in Europe permit hemp-derived products, we believe there is a significant near-term revenue and branding opportunity in the CBD space; in Germany alone (a top-three CBD market in Europe), we estimate the 2018 CBD market was already around €250 million.

As much as medical cannabis captured people's attention in the market and movement, the CBD market, presented its own type of 'promise' and hype.

The Cannacord report addressed the variety of legal frameworks for European CBD markets. As outlined in Chapter 2, there were overarching policies that attempted to harmonize CBD policies in Europe. But, national policies still created different regulations and also market opportunities. Heterogeneity characterized a fragmented European CBD market, one still connected to other areas of the 'cannabis space'. The UK was considered to have a more advanced CBD market than other European nations. Business activities grew, despite uncertainty around decisions on how to regulate the market. Brexit deals were being negotiated and the UK had yet to announce a definitive policy on CBD. Similar to other local CBD markets, enforcement was weak and public opinion was shifting in favor of CBD.

The UK's Medical and CBD Market

In June 2020, First Wednesdays (FW), a subsidiary of a British cannabis advisory firm, The Hanway Company, produced a report titled 'UK cannabis ecosystem' that provided a detailed account of the UK market. FW staff created this map to 'take a closer look at current activity in the UK cannabis ecosystem and how much it has grown since FW started two years ago'. The report did not provide an exhaustive list

of involved stakeholders, but it identified core groups and businesses involved in the cannabis market:

- Cultivation (hemp, pharmaceutical and research and development)
- Manufacturing (bulk)
- Testing
- Pharmaceuticals and R&D
- Technology and devices
- Distribution (wellness and specials manufacturing)
- Medical access and clinics
- Retailers (brick and mortar and e-commerce),
- CBD consumer products (cosmetics, drinks, women's health, ingestibles and vapes)
- Professional services (legal and specialist)
- Investor – operators (integrated groups and operational holdings)
- Finance and advisory
- Media and events
- Civil society and advocacy groups

Each category included two to ten companies. Listed companies were described as 'major cannabis market players in Europe', and could be recognized by most of my informants. Categories that were not mentioned included 'generalist or mainstream retailers', such as Holland and Barrett or Boots, 'businesses that don't specialize in cannabis or CBD', 'seeds, ancillary products or paraphernalia companies', and 'regulatory bodies and enforcement agencies'.

These categories formed distinct sectors of the market in the UK: medical cannabis and CBD. The medical insights in the report provided an overview of the UK market, in terms of policies, agencies, number of patients and medical products.

Here were the key points:

The regulatory landscape

The UK medical cannabis market is still limited by restrictive prescribing guidelines due, in part, to the comparatively high cost of products and a lack of robust clinical evidence.

The regulatory agencies

The Medicines and Health products Regulatory Agency (MHRA) licenses medicines, medical devices and pharmaceutical operators. MHRA permits unlicensed cannabis-based products through the 'specials' route.

Licensed and unlicensed medicines

All cultivation licenses in the UK have been issued either for research or for the production of licensed cannabis medicines for GW Pharmaceuticals. As a result, all unlicensed cannabis medicines available in the UK are imported. International producers with product on the UK market include Bedrocan, Aurora, Tilray and Little Green Pharma.

Legal reform established the UK medical market, but it was not fixed nor fully implemented due to legislative, regulatory, and cultural factors. It was changing through advocacy efforts, ongoing research and processes of marketization and normalization.

Sarah, the cannabinoid research scientist from Chapter 5 who spoke at CANN Talks, published a comment in the report about expected market changes.

She said,

The medical cannabis industry in the UK, whilst still in its infancy, has matured recently in regard to its understanding of the value of clinical research and evidence. The academic and industry research on cannabinoids ranges from cellular studies to real-world trials. I am hopeful this will continue to grow, because it is the only way to realize the full potential of cannabinoid-based medicines.

Many informants expected that as more scientists conduct research, legislative frameworks would relax, licensing more research, easing patient access and integrating cannabis medicines into national healthcare services. All of this would factor into a growing market for supply of medical cannabis. Martin, the CEO of a pharmaceutical company from Chapter 5, commented on this, and said,

In the UK medical cannabis is increasingly viable with prescription numbers growing month on month. We are seeing the price of prescription cannabis based medicines continuing to become more affordable for patients.

The ongoing development of the UK's medical cannabis market has been indirectly connected to the rise of the CBD market. Generating revenue quickly was possible in the CBD market, and many people felt that this might also help to support the goal of patient access and an affordable supply of high quality medicine. But, both sectors of the market still required reform, legally, economically and socially. The FW report provided a CBD sector update:

The UK in numbers

Alphagreen recently conducted the largest ever survey on CBD use in the UK covering 5000 respondents. The results revealed that 15% of UK adults reported using CBD products in the first four months of 2020, at a total cost of £155 million.

CBD has entered the mainstream

CBD consumer products are commonplace within specialist health and wellbeing stores such as Planet Organic, Whole Foods Market and Holland & Barrett. Recently, CBD products have seen a growing presence in popular high street chains including Boots, Lloyds and Tesco.

UK brands are making a splash with new product lines

Materia, a medical cannabis and wellness company, launched their new premium CBD vape ‘Hiatus’ in the UK in April 2020.

Daye, a female care start-up, launched its CBD-infused tampon subscription model in the UK earlier this year.

FourFive CBD, founded by England rugby stars Dominic Day and George Kruis, launched their specialist athletic CBD supplement line in Boots earlier this year.

White labeling⁶ in commonplace in the UK CBD market

There is a proliferation of CBD brands in the UK market, with hundreds of companies competing for market share. A large proportion of these brands are not vertically integrated and use white labeling services.

CBD products were not quite a household staple, despite claims that ‘CBD entered the mainstream’. Relative to the medical cannabis market, CBD was more prevalent and accessible, but there still was confusion about it. Despite market growth and consumer interest, the legislative framework was still being established.

Kim Smith, the co-founder of a CBD wellness company, Kloris, provided a statement in the report. Kloris sold CBD products, including CBD oils with different potency strengths (5% and 10%), bath bombs, shower and massage oil, hand sanitizer, bath melts, face oil and balm. Kim and her business partners had ‘discovered CBD’s use for different health reasons, everything from anxiety and

⁶ White label products are products manufactured by a third party and sold by retailers who customize branding, logo and other marketing material. This process saves costs because production is allocated out to another company.

insomnia to menstrual cramps and back aches’, and decided to launch Kloris. She said,

UK consumer demand for cannabis wellness products is growing at a fantastic pace and we’re seeing rapid education of the market and an understanding of the importance of quality. This will inevitably lead to some consolidation in the near future, down to a smaller number of differentiated brands that clearly serve customer needs.

When Kim and her business partners founded Kloris in 2019, they felt that there was a lack of ‘quality’ CBD products. By ‘quality’, she meant products that were ethical, reliable and science-backed. As demand increased, the type of CBD products diversified and the number of CBD brands grew. Kloris was stocked in Boots, the major pharmacy chain and health and food retailer, in 2020. It was one of the few brands to secure a partnership with Boots, which had robust compliance requirements. But there were many other brands that produced similar products to Kloris. In this emerging and already crowded market, Kim felt that quality was one way to differentiate products.

Kim, like most of my informants, could recognize poor quality brands, but consumers still were not equipped with the information or skill to do so. At the very least, some consumers understood the acronym ‘CBD’. Yet most, Kim believed, did not understand the technicalities. Unlike people involved in the market, consumers were still unfamiliar with cannabis terminology, such as the endocannabinoid system, terpenes and cannabinoids. As CBD products were a new kind of commodity, learning how to read labels, safely store products and make informed purchases required time and effort.

Educational measures and ongoing legal changes added complexity to processes of marketization. In this way, the CBD market, in 2019, was still perceived as being in ‘very early stages’. Jasmin Thomas, who founded Ohana, a CBD skincare company, shared this opinion in the report.

She said,

The UK market is still in the very early stages where we will see continued growth and exciting innovation with influence from developed markets like North America and Israel. The remainder of 2020 will most likely disrupt international brands launching within the UK, which gives the exciting opportunity for UK brands to launch and own market share.

The UK market, she believed, was situated within a global supply chain, but local development was subject to foreign influence. Brands such as Ohana and Kloris had to compete with the increase of other foreign cannabis companies. Better-funded companies, especially those that had access to legal personnel, had particular advantages for business development and UK market entry. Understanding the nuances of local market regulations and requirements was a tricky task because policies were shifting, alongside a lack of harmonization and lingering stigma. Compared to the US, the UK CBD market was less developed, but because of foreign influence, legal reform, movement momentum and market forces, it was growing quickly. In the rest of this chapter, I explore how Jasmin, at Ohana, navigated the emerging CBD market.

Case study: Jasmin and Ohana CBD

MS Diagnosis and Launching Ohana

Growing up, cannabis was a commonplace in Jasmin's home because her grandfather, a Rastafari, consumed cannabis openly. But, her involvement with cannabis only took place later, as a result of her personal experience with multiple sclerosis (MS), which is an autoimmune disease that attacks the central nervous system, including the optic nerves, spinal cord and brain. Her own patient narrative subsequently influenced her professional transition into the cannabis market.

In 2015, Jasmin was diagnosed with MS. She found out after losing her hearing in Marrakech, Morocco that year. This symptom was triggered by days of

extreme heat, over 40 degrees Celsius. Only upon her return to the UK, after brain scans, did she find out that MS was the cause. Jasmin said,

My first prominent thought, which, I can assure you, was not blasé, was that there's no point crying over spilt milk. I've always been an 'everything-happens-for-a-reason' kind of person and thought that I would find a natural way to manage my symptoms and get on with it.

One of the first ways she did this was nutritional; she stopped consuming alcohol and followed a vegan and gluten-free diet. This was an effort to prevent further 'lesions'. MS lesions consist of sclerosis, or damage, scarring, plaque or inflammation, caused by the immune system mistakenly attacking the central nervous system. This can be detected in an MRI scan. She also changed her lifestyle to reduce the likelihood of 'flare ups', which are symptomatic responses as a result of increased inflammation. These might be caused by internal factors – stress, lack of sleep or dietary changes – or external ones, such as the environment. A flare up might cause blurred vision, dizziness, numbness, pain, pins-and-needles, tiredness and weakness. Since Jasmin experienced 'flare ups' at different times during the year, she looked for other natural, alternative remedies to alleviate her MS symptoms. She said,

I wasn't able to accept any of the 'disease modifying' pharmaceutical drugs I had been offered. Through extensive research and reading, I discovered cannabidiol, or CBD. CBD oil has changed my life – easing a lot of the painful and frustrating symptoms of MS.

The more I researched the diversities of the cannabis plant and its medicinal extracts, the more excited I felt. This knowledge is invaluable and has changed my life.

Although she was vocal about her MS, her symptoms were not often visible. As she put it, she did not hide behind her diagnosis, but nor did she let her diagnosis dictate her ability to work or live her life. She felt grateful that it had led her to discover cannabis and become involved in the market, as a byproduct. Jasmin said,

Through having MS, I have discovered something that I am truly passionate about and have found, in CBD, an industry where I really feel I can be my authentic self and help others.

Her personal commitment to the movement overlapped with her professional one to the market. In a significant way, her story became a core part of Ohana. She hoped to inspire others by sharing her MS journey, but she also had to consider how business development, and other external factors, contributed to managing flare-ups.

Although MS was one of the few conditions that cannabis-medicines could be prescribed for in the UK, Jasmin did not obtain a prescription for medical cannabis. She saw a neurologist who did not believe that cannabis, or other alternative options, were a suitable treatment. She said,

The doctor had no time of day to chat about alternative medicine or what dietary requirements may help. Ever since I changed my lifestyle and daily choices, I haven't had any new lesions.

They wanted to put me on medicines that are as strong as chemotherapy. These meds would be strong pharmaceuticals that would make getting pregnant very difficult. But, I haven't had kids yet and I would like to.

I live a very natural lifestyle, and, of course, I still get flare ups. But it's usually triggered by heat, lack of sleep and stress.

Jasmin knew she had to continue to see the neurologist. However, she said the experience was difficult. When she discussed the products she used, including cannabis, the doctor flagged her patient file as 'problematic'. Jasmin said that CBD was one of the few natural treatments that worked for her. Nonetheless, the doctor, she explained, was concerned about 'abusive behaviors' with cannabis, her mental state as a cannabis consumer, and the potential for addiction. Jasmin used CBD, a non-psychoactive compound, rather than THC, a psychoactive one. Although the World Health Organization recommended that CBD be removed from the list of restricted substances in international conventions because of the lack of potential for abuse, Jasmin believed that the National Health Service (NHS) was conservative in its support for cannabis medicines. Therefore, she opted to withhold information about her CBD use from her doctor, despite the fact that it helped her with MS symptoms.

Jasmin said,

That was the last time I spoke about CBD to my doctor, which is such a shame because there are studies that show how cannabis can help MS patients. Just because this doctor is part of the NHS, he does not consider any plant medicines as a plausible option for a treatment. He legitimately thought I was crazy and going mad.

Despite being called ‘crazy’, she decided to make her own CBD balm, in her kitchen. She relied on it most days, ‘initially to manage the aches and pains that come with my autoimmune disease and then the awful monthly pain that came with my period’. At first, she made the balm for herself only, but as she told friends and family about it, they expressed interest in trying it as well. The balm, ‘Prasanta Lavender Soothing Balm’ was her first product. This was the beginning of Jasmin’s CBD skincare start-up, called Ohana CBD.

Jasmin conducted market research whilst she was still working in recruitment in London because she discovered the complexity of CBD and other cannabinoids. She said,

I reached out to lots of topical specialist in America and one who I spoke to in particular inspired me. Her name is Maya Elisabeth, the co-owner of Whoopi and Maya [a cannabis company]. She taught me how topicals could bring relief for my menstrual cramps. I now use this every month to get me through and not having to rely on paracetamol or ibuprofen.

I also use Foria lube [a cannabis-infused lubricant] a couple of days before my period and it really has made a massive difference. There is so much magic in using CBD, I’m forever grateful.

She also attended educational events, such as trade shows, lectures hosted by drug policy think-tanks and cannabis conferences in Europe and the US. Jasmin said that Ohana started as an idea that led to ‘12 months of hard work, a lot of experimenting, research, collaborations, traveling, searches for inspiration, discussions, interviews, networking, time, money, favors and everything in between’. The more Jasmin learned about cannabis, the keener she was to pursue a career in the market. In early 2018, Jasmin left her full-time position, despite being on track for a promotion, and began to run Ohana full-time.

She began to sell the CBD balm and subsequently Jasmin made other CBD skincare products that would later be included in Ohana’s product range. Each product had a Sanskrit name. The ‘revitalizing body oil’ was called ‘Ahimsa’. She produced a lip balm called, ‘Ananda Ylang Ylang Lip Balm’, and later introduced two new products into her range: ‘Saucha Purity Face Oil’ and ‘Sukha Vanilla and Lavender Candle’.



In summer 2018, a year after she launched products, she launched a website. Jasmin began to gain publicity from local magazines, national newspapers and other media outlets. Feature articles led to speaking positions at wellness events and cannabis conferences. Subsequently, her retail distribution expanded. Ohana products were sold online and in specialty health shops and CBD boutiques across London, such as LDN CBD, Hello Love, Lollipop London and Earth Natural Foods.

As consumers tested the products, they shared testimonials on Instagram. Many customers reported stories of both relief and excitement about a natural alternative.

One testimonial said,

The balm is working wonders on my dermatitis and don't even get me started on how well it works for my period pains. I hate taking pills for anything so I just bear it out. But with the balm, the pain is gone within seconds!

Individuals who used Ohana products to reduce inflammation shared similar experiences. A testimonial said,

The balms are working miracles! My psoriasis has calmed right now to the point where there is almost zero inflammation on any of the psoriatic patches. I can't stress how thankful I am again and I'll definitely be recommending you to others.

As more consumers tried Ohana products, Jasmin expanded the business and focused more time on branding and marketing to sell products.

In 2019, Jasmin decided to reformulate the products. She felt there was a new level of 'sophistication' in the UK CBD market, which required an adapted strategy to compete. She described CBD products similar to many other well-known consumer goods, rather than being a distinct category in boutique shops or sold exclusively through illicit channels. Jasmin worked with skincare formulation scientists to create 'unique plant-based, toxin free and natural formulations' that she believed worked as well, if not better, than chemically made ingredients. She gave the example of retinol, a common skincare ingredient for anti-aging. Jasmin said,

Retinol is a rather harsh ingredient that causes dryness, sensitivity to UV [ultraviolet light] and other undesirable effects. Bakuchiol is a plant-based alternative that is derived from the psoralea corylifolia plant, or 'babchi' plant. It has similar effects on fine lines and wrinkles. Ohana uses a few active ingredients, such as bakuchiol, in addition to CBD isolate.

Jasmin believed that the combination of CBD and the selected active ingredients contributed to each product's efficacy. She did not attribute the effect of the product solely to CBD. 'Of course it is a CBD skincare product, but CBD is one added ingredient. It's everything from selected essential oils, plant-based extracts and derivatives that make it innovative and efficacious', Jasmin said.

CBD was one way Jasmin decided to differentiate Ohana, but there was still uncertainty and consumer confusion. Aligning Ohana with a 'wellness' component

helped to connect the CBD market to the mainstream. In this way Jasmin felt that Ohana was as much part of the beauty and wellness sector as it was of the ‘CBD space’. She said,

Our strap line is to build the leading CBD wellness brand in Europe to empower a collective [of women].

To do this, she set out a goal to build a ‘community of women, skincare enthusiasts, and wellness seekers’. The main target market for Ohana was women around the ages of 30 to 50, who earn £50,000 or more with relatively high disposable income.

She said,

These women are discount driven and enjoy a great shopper’s experience. They are interested in health, self care and wellbeing, sustainability, skincare, travel, lifestyle, fashion and dining out. They enjoy creating habits, following daily routines and rituals, and they are keen to incorporate clean skincare into that.

This demographic was similar to that for sustainable and vegan skincare products, including trending ingredients, such as bakuchiol. But Jasmin believed that CBD, as a skincare ingredient, required introduction and education. A survey with 68 responses from the UK that Jasmin conducted found 57.35% of her potential customers had not yet tried CBD skincare. In the same survey, 94.12% responded that they would like to learn more about the potential benefits of CBD. This survey reaffirmed what Jasmin said she already knew: education was core to her business because of ‘the lack of reliable information about CBD and general misunderstandings about cannabis’.

But Jasmin felt that customer knowledge about CBD was a business concern, similar to Kim. Despite more exposure to cannabis related information and research through events and exchanges, even people involved in the market still found simple questions about CBD complicated. For skincare, Jasmin had to educate consumers, and others, about how CBD interacts with skin receptors and the endocannabinoid system. Consumers also had to learn how to differentiate potency, quality, legality

and milligram content. Just as Jasmin learned about CBD through personal research, part of her work entailed educating consumers, investors, friends, family and colleagues. This meant understanding cannabis from a scientific perspective.

Jasmin also realized she had to understand legal and commercial shifts, which happened frequently in the UK cannabis market and globally in the supply chain. She was predominantly involved in the CBD market and indirectly participated in advocacy activities, not so much for legal reform, but to shape its effects through the process of commercialization of CBD products. But, running a business governed by unclear policies and enforcement required adaptability and awareness. She felt a self-imposed responsibility to educate others, attend events to stay informed and exchange of information with other business owners so that they would all remain accountable to their consumers, investors and other people in the market for the quality and safety of their products. Jasmin joined many others at conferences and events, which served as a forum to learn about legal complexity and establish, or reinforce, a sense of standards and expectations. In the next three sections, I trace how different regulations impacted processes of commodification and how this relates to a shared sense of commitment and moral vision.

Proceeds of Crime Act

At nearly every Europe-based conference I attended, discussing local ‘investment opportunities’ was a recurring topic, despite ongoing confusion around the legality. This was the case in London at a conference curated for UK based investors, ‘The Cannabis Investor Forum’, held in October 2019. One panel discussed regulatory confusion about the UK’s 2002 ‘Proceeds of Crime Act’ (POCA). Under the POCA, if conduct, property or acquisitions are obtained from an activity that is constituted

as illegal in the UK, it is deemed to be criminal, even if it is considered legal in another jurisdiction. According to the law firm Linklaters (2019), ‘under POCA, cannabis-derived revenues are “criminal property” if they constitute a person’s benefit from criminal conduct or they represent such a benefit (in whole or part and whether directly or indirectly)’. The risk for UK businesses and businesspeople is committing a money laundering offence. Despite this risk, there have been a number of investments made by UK nationals into British owned cannabis businesses and other cannabis entities registered outside the UK. Macfarlanes, a London-based law firm, published an article about POCA and cannabis investments. It concluded, ‘this area of law and its application in the specific context of investing in cannabis companies has yet to be tested in the courts or commented on by the UK authorities’ (Blundell, Emson, Hobbs and Bond 2019). This uncertainty brought legal professionals monitoring the UK guidance and investors willing to take potential risks together.

The panel that addressed the POCA consisted of four men, an advisor from a strategic advisory firm, an equity trader at a stockbrokerage firm, an advisor at an investment fund and the president of a cannabis investment fund. Their titles alone revealed active involvement in cannabis investments, and it became clear that they had found ways to operate in the market, despite the POCA.

A confused London-based audience member asked, ‘can you invest in Canopy and Tilray [publicly traded licensed cannabis producers in Canada]?’ The advisor from the investment fund, Richard, said,

The practice [of investment in cannabis businesses] is overblown in reality. Yes, we have to be aware of it. But, there are no prosecutions [in the UK] against anyone’s investment [in British or foreign cannabis businesses]. Many have been filed and have been replied to. There’s no litigation and a lot of uncertainty. Meanwhile, there are many British investors deploying capital in cannabis companies abroad.

Although it was a direct response to a question, the answer was not definitive. Despite this, he hoped to offer a sense of comfort to the audience. Richard's answer was the type of response that was often provided at cannabis conferences when people tried to describe grey legal areas and requirements for compliance with rules and regulations. Even amongst the panelists and some lawyers, there was still a lack of clarity, and, likewise, there was widespread hesitation in the audience about how to legally make cannabis investments under UK law. Due to legal uncertainty, there was an element of inherent risk that investors had to be willing to make.

The potential risk of violating British law by investing in a CBD brand, such as Ohana, generated a sense of motivation and responsibility on the part of people involved in the market to educate others about the legality of the cannabis market. In most cases, founders of cannabis start-ups did not have a legal background and were navigating the legal environment as their business grew. For Jasmin, her confidence to address these issues stemmed from her experience raising capital for Ohana, attending cannabis conferences and working with a law firm to guarantee compliance.

Investors from other sectors who were interested in cannabis, but had yet to make an investment in a cannabis company were the ones Jasmin spent most time educating. 'Investment requires due diligence, regardless of the sector. But with cannabis companies, part of the due diligence is actually understanding what due diligence needs to be conducted in order to make an investment', Gregg, the CEO of Growcentia, said to me once. An initial part of due diligence for cannabis companies and investors was assessing the regulatory framework that permitted legal market activity. Since there was not a harmonized regulatory framework, an imperative step was to understand the nuances of the law throughout local and global supply chains,

including licensing, packaging, labeling and security requirements. This included consideration of the UN's international drug control conventions, regional policies, and national specificities about cultivation, manufacturing, distribution and consumption. Part of the challenge was keeping up with changing rules and regulations. The liminal space between illicit and licit was constantly changing.

Legal frameworks set a foundation for cannabis businesses, but they still had flexibility to navigate legal areas that were not yet regulated. Some risk tolerant investors and business owners set a precedent for market activity, and some created patterns and standards for the market. Cannabis businesses and advocates, themselves, were often responsible for creating quality and education standards, but they also made use and reference to other products and business practices, outside of cannabis. The market shaped its own growth through business decisions, lobbying, consumer education, and the development of standards, as policymakers worked towards regulating it more clearly.

Novel Foods Regulations

Lack of legal clarity in the UK CBD market extended beyond national policies, and the European Union (EU) also contributed to an environment of legal transition. The 'EU Novel Food Regulations' became an important topic of debate. 'Novel foods' are defined as products that were not widely consumed by people in the UK or EU before May 1997, meaning foods that do not have a 'history of consumption'. Examples of 'novel foods' include: new sources of Vitamin K; baobab, a fruit tree native to Madagascar, Australia and mainland Africa; UV treated mushrooms; phytosterols used in cholesterol reducing spreads. These 'novel foods' might be food produced by innovation, technology or production processes, they might be

foods eaten outside of the EU, or extracts from widely consumed foods. In January 2019, there was an amendment made to the EU's Novel Foods Catalogue that affected the use of CBD, hemp-derivatives, and other cannabinoids in the use of ingested products. The change meant that CBD and hemp were considered 'novel'.

The 'novel foods' debate had been ongoing for over a year. Businesses were considering how to best prepare production, in case, for example, product formulations and packaging requirements changed. But, there was no way to predict how the UK government would regulate CBD amidst looming Brexit decisions, whilst also awaiting the European Commission's 'novel foods' decision. Even if the UK government established its own set of CBD policies, many UK based CBD businesses still needed to comply with EU policies because of local operations there. Furthermore, many people expected the UK to adopt a similar regulatory framework to the EU.

In February 2020, Jasmin and I organized an event to provide an update about 'novel foods'. Derek, a consultant at Hanway Company, the UK-based cannabis consultancy linked to the FW report, gave a presentation. Derek explained that since the Novel Foods Catalogue had been updated to include CBD and hemp products, any product that contains CBD, and can be consumed, must be authorized for safety and assessment prior to being legally sold in the EU.

But, Derek explained, that enforcement of 'novel foods' violations varied country by country. EU member states regulated the policy nationally and, sometimes, locally. Derek said,

Such agencies are frequently under-resourced. Therefore, enforcement of EU novel food rules - particularly in the case of CBD, where products are increasingly popular and online and cross-border sales make it hard to police - may not be a priority.

You can see from the news article on the right that Rossman and DM, two big German retailers, pulled CBD oils in spring last year because of concerns about 'novel foods' enforcement.

It depends on where you're based

- While EU Novel Food regulations apply in all member states, it's the responsibility of each country to enforce them.
- Germany, Sweden and Spain have been particularly active in taking action against CBD products.



Some entrepreneurs have been using unusual workarounds to evade novel food regulations.

The guy in the picture is Peter Hart, CEO of Nutree who got Nutree products into Rossmann, a leading German retailer, a couple of years ago.

Peter Hart of Nutree has been using unusual tactics to keep his products on German shelves



But, it was pulled from the shelves in spring 2019 because of concern about its status as an unauthorised novel food. Nutree got its product back into Rossmann in August 2019.

How? By relabeling it as an 'aroma oil' to be dripped on a pillow.

CBD companies had to remain flexible, and somewhat creative, as regulations changed. This required ongoing forms of due diligence to ensure compliance, but as Gregg frequently said, 'in the cannabis market, due diligence is a tricky task'. Many people set precedent through their business practices, as Peter Hart did. At the same time, their commitment to do so reflected a degree of risk, especially as EU CBD policy and enforcement remained fragmented.

There were other forms of scientific evidence complicating the 'novel foods' debate and decisions. Derek emphasized that safety was the determining factor for how CBD might be used in food products across the EU. He said that studies from

GW Pharmaceuticals, the pharmaceutical company that produces a CBD medicine for epileptic patients, found ‘evidence of doses equivalent to 350 milligrams (mg) per day sometimes lead to adverse effects, such as liver toxicity and drug to drug interactions. It’s important that there are reasons to be cautious’. However, 350 mg was not a common dose for daily consumption. CBD drinks, at that time, for example, contained a range, from 5 to 20 mg. To consume a dose that leads to liver toxicity would require anywhere from 17 to 70 drinks. CBD producers were less worried about the daily dose of CBD and more concerned with uncertainty about compliance.

Even after the classification changed in January 2019, there was ongoing debate about whether or not CBD should be classified as ‘novel’. Derek said,

The first camp argues that people have consumed hemp extracts - which contain CBD - for centuries. They argue that it’s a traditional food - and therefore doesn’t need any special regulation. My favorite example of this comes from the European Industrial Hemp Association, a trade body.

They’ve dug up all sorts of wacky evidence of people consuming hemp through the ages. There is a presentation of this evidence to European regulators. In this example, they’ve found a recipe for hemp soup, from the chef to Pope Martin V in the Vatican in the 15th Century.

It may be true that Europeans including the Pope have consumed various hemp products well before 1997. But hemp soup and the like is very different to the concentrated CBD or hemp extracts that have boomed in the past 5 years.

Regulators don’t
care that Pope
Martin V ate
hemp soup



Ironically, the day we held the event in February 2020, the UK’s Food Standards Agency (FSA) made an announcement that all CBD products must have a valid

novel food authorization application submitted by March 31, 2021. Prior to this, the FSA had not ‘taken any enforcement action to remove CBD products from sale’, Derek said. ‘As a consequence of the FSA’s decision, there is a danger that CBD products will be pulled from the shelves next year... but there is also good reason to expect that CBD will be approved as a novel food’, he added.

In order to comply with the new measures announced in February 2020, suppliers, cultivators and producers had to apply to receive ‘novel foods’ authorization for CBD supply or products. According to other speakers at the event, this process was expensive and time-consuming. Derek said that there were only three companies that had submitted an application for CBD to become authorized as a novel food. He felt that this set the precedent for CBD companies to be ‘fully compliant’. But not every CBD company would need to obtain authorization. If a company’s CBD supplier was authorized, then any products manufactured using that material would be covered under the supplier’s authorization. In this case, there might only need to be a handful of authorized suppliers.

There was consensus at the event that this application process would lead to ‘white-labeled brands’, that is, products that use the same supplier but differentiate through branding, and a process of consolidation would subsequently unfold. The other, less likely option, due to high costs and compliance requirements, was that CBD brands could obtain separate authorization for their products to enter the market.

Not all CBD products were subject to this regulation, however. It applied to CBD edibles, drinks, capsules and sublinguals, but not to skincare, topicals and vape pens. Companies needed to know what regulatory frameworks applied to their specific form of CBD products, and how this differed across the EU and other

jurisdictions. But, the context of ongoing reform only complicated this more.

Similar to the discussion about POCA at ‘The Cannabis Investor Forum’ and the ‘novel foods’ debates, CBD brands faced ongoing challenges to interpret the law and operate within a legal grey space whilst guidance was yet to be issued.

EU Cosmetics Regulations

As CBD products became more accessible through mainstream retailers, other non-CBD specific regulations became relevant. In Jasmin’s case, she had to familiarize herself, and her investors, with the EU Cosmetics Regulations. Enforced by the European Commission, the EU Cosmetics Regulations establish a set of requirements for cosmetic products – skincare, oral care, hair care, hygiene and beauty products. Since cannabis is a controlled substance at the international level, under the 1961 Single Convention on Narcotic Substances and the 1971 Single Convention on Psychotropic Substances, there were already restrictions on using cannabinoids in cosmetic products in the EU. Despite this, there were exceptions for synthetic cannabis and pure CBD isolate in cosmetics products in the EU Cosmetics Regulations. The European Commission database for permitted substances and ingredients in cosmetics, associated to the Cosmetic Regulations, called the CosIng, also lists 23 cannabis-related ingredients. The European Commission identifies 12 nomenclatures for cannabis ingredients, such as ‘CANNABIDIOL (CBD)’, ‘CANNABIS SATIVA FLOWER EXTRACT’, and ‘CANNABIS SATIVA SEED OIL’. Although the EU Cosmetic Regulations were clearer than the ‘novel foods’ framework, there were disagreements over their application to CBD skincare products.

Even in cases in which marketed products were fully compliant, many of my informants believed there was widespread consumer confusion. There was a general lack of understanding about CBD as a cosmetics ingredient. Consumers had to decipher the meaning of different branding terms, such as ‘hemp seed oil’ and ‘CBD oil’. Jasmin explained,

Hemp seed oil is extracted from the seeds of hemp plants. It is full of nutrients, including omega 3 and omega 6, which are ultra-hydrating. Hemp seed oil does not contain CBD.

Whereas CBD, like the CBD isolate we use, is extracted from stalks, stems and flowers of hemp plants. This is the part of the plant where CBD is found in higher concentrations. Taking CBD oil from seeds is possible, yes, but financially speaking, it makes no sense. The amount you need to extract the same amount of CBD from seeds compared to the stalks, stems or flowers isn’t worth the time or money. There’s no reason to do that.

The legal requirement in the UK is less than 1 mg of THC per product and less than 0.2% THC overall.

This factored into confusion about a product, ‘Kiehl’s Cannabis Sativa Seed Oil Herbal Concentrate’, which launched in February 2019. Kiehl’s, founded in 1851, is a well known, international beauty brand that sells hair and skincare products. When Kiehl’s ‘cold-pressed’ hemp-derived product was launched, it was one of the first mainstream skincare brands to enter the ‘CBD space’. The product contained a negligible amount of CBD. But, it still received a lot of press, and was featured in articles about the ‘best CBD oil beauty products’, as covered by *Mirror* (Lovelace 2020), and ‘best CBD beauty products’, as covered by *Allure* (Hoshikawa 2021). The article’s title alone suggests that the Kiehl’s product contains CBD.



It is unsurprising that many British consumers, as Jasmin believed, were inclined to interpret ‘hemp’ or ‘cannabis sativa’ as meaning CBD. The nomenclature on the product, ‘cannabis sativa seed oil’, was compliant, but Jasmin felt there was a profound gap in consumer knowledge. The media’s coverage of CBD, on the one hand, contributed to normalizing the commoditization of CBD wellness products. On the other hand, the jargon and technical terms people used inside the cannabis market were not always aligned with media coverage. Confused consumers, who were unfamiliar with cannabis as a wellness product, had to determine which sources were reliable and which products were effective. There was a large disconnect among people involved in the cannabis market, those who reported on it, companies that existed prior to the market’s emergence and the consumers purchasing CBD products.

Khiehl’s was not the only brand complicating the process of commoditization of CBD products. Aussie Hair, a popular Australian based hair care company with international distribution, launched a product range, ‘calm the frizz’, made with ‘Australian hemp extract’. I noticed an advertisement for this product in the tube station, which is often an expensive site to promote on, on my way to a meet Jasmin in London. Leaving the station, I was also handed a *Time Out Magazine*, produced by a global media and entertainment company. The cover page was a large, full-page advertisement of Aussie Hair’s recently launched hemp seed extract shampoo. There was a large green cannabis leaf with the phrase, ‘turn over a new leaf’.



Jasmin had also noticed the advertisements whilst taking a different line on the underground. She was surprised to see the explicit use of a cannabis leaf, since there was an informal initiative, within the market, to remove stereotypical cannabis imagery from brand products, advertisement and websites. This was an effort to distance CBD from negative, historical stigmatizations of cannabis.

Many of Jasmin's friends and colleagues noticed Aussie Hair's advertisement, and were surprised that a mainstream brand had entered the CBD market. But, once more, she found herself educating them about the difference

between hemp and CBD. She felt that this confusion was common, and it was easy to understand. On Aussie Hair's website, it said,

From chocolate bars and beverages, to gyms, spas and fashion labels – hemp and CBD are going mainstream... why is beauty hot on this new trend? CBD and hemp are both known for their repairing properties. They're packed with essential oils, fatty acids, and antioxidants and rich in omega, they hydrate and are easily absorbed by skin and hair.

In this case, the Aussie Hair product only contained hemp seed oil, not any CBD oil. But the visual association of cannabis leaves, which could depict cannabis, hemp, or any of the cannabinoids extracted from either plant, misled consumers to assume that the product contains CBD, in part because CBD products were trending. Similar to the way in which the wording on Khie's packaging led consumers to believe 'cannabis sativa seed oil' meant CBD, not hemp, the Aussie Hair products generated consumer confusion with a visual tool and product description.

Jasmin described other forms of misinformation that was instigated by CBD brand choices, rather than consumers themselves. She said that there were CBD topical brands whose packaging, labeling or formulations were non-compliant with EU Cosmetics Regulations. However, national agencies rarely cracked down on non-compliant CBD products. This, she believed, damaged the marketing of CBD products, as it resulted in varying qualities and senses of legality.

When Jasmin went to health foods store, Holland and Barrett, for example, she could quickly identify which products were non-compliant. She said,

There are products that are full-spectrum or broad-spectrum [extracts that contain multiple cannabinoids], which is not technically legal. CBD as an isolated compound is legal, but extractions that simply remove THC, instead of any other cannabinoid, then there are potential legal issues.

There are also products that do not use the correct nomenclature to describe ingredients. But, there aren't any agencies actively removing these products from the shelves.

The retailers and their employees, Jasmin explained, also played a part because most were not well-informed about CBD products. She said,

When you go to high street shops, the store clerks aren't knowledgeable about the products at all. I walked into a Holland and Barrett and I had to tell a customer there what not to buy.

He was looking at a brand with poor quality, but he was going to buy it because the price was low. A low price isn't what should convince you to buy the product, but they know no different.

I'm shameless. I just tell them straight up. But that's the issue with big retail outlets that can't explain the product and can't sell it.

There were forums at conferences to discuss what constituted high quality, since many people other than Jasmin were critical of this. But, of course, there were brands that disregarded these dialogues and sold low quality products that were non-compliant. Many of my informants felt that this tarnished the reputation of the market and the commoditization of cannabis as a whole. There was even an unspoken code of the hierarchy of goods – those that were compliant, transparent and produced high quality, compared to products that were thought to be non-compliant, misleading and low quality.

Average consumers assumed that stores like Boots or Holland and Barrett were trustworthy and the CBD products sold there were safe and good quality. However, people within the market felt that they had to warn others about 'snake oil', or products advertised to contain CBD that had negligible amounts, but were sold at high prices. There were some products that simply added CBD into ingredients list and increased the price dramatically to match market trends. Low quality products that were not appropriately lab-tested, but retailed in the same stores and sold at similar prices, also were problematic to people within the market who shared a sense of moral ground.

In a couple of years, the number of CBD brands had proliferated, at a rate that meant regulators, consumers and retailers could not keep up with regulation and information. Given the lack of enforcement by government agencies and retailers selling CBD products, consumers were left to believe that all available products were legal, compliant and safe. Many people involved in the market felt that they,

themselves, had to guide efforts to navigate legal uncertainty, economic opportunity and misinformation. In Chapter 5, I demonstrated growing tensions between the ethos of the grassroots movement and the ethos of the legal market, and the tension between the market and policymakers. The CBD market exemplifies a different set of conflicts between consumers and businesses internally and externally involved in the market. Established people in the market felt that the result of consumer confusion could threaten the market and growth, even though the increase of media coverage and brand recognition would help normalize cannabis and CBD products, more generally.

Marketing CBD Products

Other branding decisions also influenced the way cannabis was understood. There were CBD brands that used other ‘marketing jargon’ in their promotional material, but the way certain phrases were used, Jasmin said, was ‘meaningless’ and incorrect. Claims that Jasmin felt misled consumers included: ‘activated hemp extract’, ‘100% bioavailability’ and ‘non-psychoactive’. Jasmin explained that a hemp extract may or may not contain CBD, depending on what plant material was used, but no type of extract needs to be ‘activated’ for cannabinoids to release their effects. She said,

The 100% bioavailability claim is simply false. Nothing is 100% absorbed into the skin or by the body if ingested or applied. It’s a branding strategy because ‘bioavailability’ is part of the buzzwords and trends at the moment. Bioavailable means how much of the product used or consumed would be absorbed, fully, into the body or skin.

The level of bioavailability does vary amongst administration methods, from capsules to tinctures and topicals to joints. There is a lot of tech coming out now to increase bioavailability using nanotechnology, but even with technology like that, there is not 100% bioavailable anything.

Brands love to throw out words like this because they think it will help the product sell. But, ultimately, its confusing the consumer. We end up having to clean up the mess of misinformation.

Another word that Jasmin was concerned about was the term ‘non-psychoactive’. She believed that it was also used speciously by many CBD brands. Throughout my fieldwork, informants reminded me that CBD is non-psychoactive, but it is psychoactive. The key distinction is that psychotropic products alter the mind, but psychoactive substances do not. For example, coffee and cacao are psychoactive substances, and interact with endogenous systems in the body, but do not distort perception. When someone thinks of ‘being high’, stereotypically, it is the psychotropic effects of THC that have most likely caused this. CBD does not produce the ‘stereotypical high’ experience. Although CBD is ‘non-psychoactive’, it is still psychoactive because it has active compounds that interact with the endocannabinoid system and produce changes, externally and internally, depending on use. The reason that some brands used the phrase ‘non-psychoactive’ was to distinguish CBD from THC, and accentuate the distinction in the effects on the mind and body. Jasmin, like many other informants, were actively ‘debunking myths’ and correcting information.

Yet, even in her own efforts to educate consumers about CBD, Jasmin faced challenges. Ohana, similar to any other CBD brand, could not make any medical claims about its products. This would require market authorization from relevant agencies in the UK and EU and supporting information, such as clinical tests or documents that provide substantial evidence for the ‘nature of the claim’. Claiming any benefit, hence, was a tricky task. In her case, Jasmin received customer feedback about benefits, such as treating eczema, dermatitis, reducing scarring or helping to reduce acne. There had been external studies conducted to support some of these claims, but advertising this on Ohana’s website raised flags.

One of Ohana's blogs discussed CBD and skin conditions. The article, '5 ways CBD skincare can work wonders on psoriasis and dermatitis', provided five reasons why CBD is an effective ingredient to help with inflamed, itchy, dry and patchy skin conditions:

1. CBD interacts with endocannabinoid receptors in our skin.
2. CBD can calm inflammation.
3. CBD can slow down skin cell growth.
4. CBD reduces itching.
5. CBD can decrease flare-ups.

Studies were hyperlinked throughout the blog post to link claims to evidence.

The Medicines and Healthcare products Regulatory Agency discovered this blog, and e-mailed Jasmin. The MHRA wrote that the blog post violated their policies, and demanded that the article be removed immediately from all social platforms. On the one hand, Jasmin was surprised that the MHRA even found the post, given the relatively small size of Ohana. On the other hand, she was surprised that the MHRA had been monitoring posts like this because she had not heard about other CBD skincare brands that had had this experience. Jasmin knew that CBD brands had to be cautious about medical claims for their products. Nonetheless, she felt that the enforcement by the MHRA and other agencies that regulate the CBD market was inconsistent and weak. Jasmin complied and removed the post from all platforms. She wondered, however, how other CBD brands managed to get away with bending the law.

As she learned at conferences, strategic branding was key. One way to get around CBD specific restrictions was to use other, better-researched ingredients. For instance, Jasmin explained that Vitamin C was a commonly used skincare ingredient known for 'antioxidant properties and its brightening effects, as well as hyaluronic acid, an ultra-hydrating ingredient'. CBD, Jasmin explained, is also known to have antioxidant properties and hydrating effects. Promoting the effects of Vitamin C or

hyaluronic acid, in a product that also contained CBD, indirectly addressed some of effects of CBD. This was a short-term strategy to overcome the lack of supporting evidence, or at least lack of accepted evidence, for CBD in skincare.

Marketing and branding choices were also tactical. Jasmin gave the example of Pollen, a CBD company that ‘creates high quality CBD products you can trust, designed to fit into your lifestyle, effortlessly’. Its website listed three categories of products: focus, relief and balance. Pollen produced ‘CBD drink drops’ with three options: ‘powerbank’, ‘no pressure’, and ‘soothe you’. Each one coincided with the feeling, or emotive response, and intended results for its use. These ‘needs’, Jasmin explained, helped to categorize and market products, by simplifying the message to consumers. Descriptive labeling was an approach many CBD brands adopted, but it was not wholly beneficial.

Strategic use of marketing jargon helped businesses to navigate the legal grey space, yet it also could foster a lack of clarity in the understanding of medical cannabis and cannabis for wellness purposes. Although there was benefit in the process of destigmatizing cannabis through science, policy reform and commoditization, there was a simultaneous need to address the negative effects of commercialization. Misleading information created issues for consumers, retailers and regulators. It complicated the legitimacy of some of the products in the market. Without substantial legal or business precedents, there was ongoing uncertainty about how to sensibly operate. Businesspeople I spoke to at conferences felt they needed adaptability and flexibility as the market developed and regulations changed.

Ohana CBD: Raising Investment

In 2019, Jasmin opened a ‘pre-seed round’ to fund the ‘re-launch’ of Ohana with three new products: a night oil, face serum and body balm. She set out to raise £170,000. Jasmin put together a ‘pitch deck’, a presentation that companies use to showcase an idea, usually to investors, for a round of financing. She sent this ‘deck’ to many investors and used it as a starting point for conversations about Ohana, which she presented as an ‘investment opportunity’. Although she knew that many investors who scheduled meetings with her would not end up investing in Ohana, she believed that she could also offer them valuable insights into the cannabis market as a whole. ‘I will provide context for my colleagues and counterparts to build the industry together’, Jasmin said.

Most investors Jasmin sent the ‘deck’ to were unfamiliar with CBD, especially in skincare products. Jasmin had to inform investors about CBD in the context of the cannabis market and related sectors, such as beauty and wellness. She also had to present a convincing case to secure investment. Due to the risk and legal uncertainty, it was a difficult exercise. Jasmin said,

Half my time with investors isn’t spent raising, it’s spent educating. When I have meetings, I start with the basics of CBD and cannabis. I know that they are unfamiliar with the market and the uses of CBD, especially in skincare.

It takes up a lot of time, but this understanding is necessary for them, and I know it will be beneficial for me for when we are ready to raise more capital.

I want to be seen and known as a source of reliable information about cannabis and the market because, honestly, there is just so much misinformation out there.

Jasmin felt that the more investors understood about cannabis and the legal CBD market in the UK and Europe, the more comfortable they would be about deploying capital into it.

She leveraged her own story, as a MS patient using CBD, to present the ‘science of CBD skincare’, as well as market statistics to frame the opportunity as a

strong one. ‘CBD is the most innovative skincare ingredient ever’, Jasmin told potential investors, because of ‘CBD’s anti-inflammatory and anti-ageing effects, its richness in antioxidants and omegas and its ability to regulate the sebaceous gland. CBD is more powerful than both Vitamin C and E’, two commonly used ingredients in skincare.

Knowing that there was a proliferation of CBD products, she positioned Ohana within the ‘European cannabis opportunity’. ‘The number of legal markets has doubled every year for the past four years’, Jasmin wrote in the ‘deck’. At that time, mergers and acquisitions in the cannabis market frequently made headline news. It was predominantly happening in the US and Canada, but the UK, she believed, was just a few years behind. She wrote,

Ohana operates in an acquisition target market with Canadian listed cannabis companies actively acquiring European skincare brands. There have been two acquisitions in the past six months [in 2019] (Lord Jones US\$300 million and This Works: US\$43 million).

She hoped that this would exemplify the value of the global cannabis market and the pace of growth. She cited a *Forbes* article from 2017, ‘this [CBD] industry growth is larger and faster than even the dot-com era, at 25% compound annual growth rate, dot-com was 22%’. Beyond just CBD, the overlap of ‘organic’, ‘natural’ and ‘clean beauty’ products and the ‘CBD space’, Jasmin believed, represented ‘an US\$800 billion market opportunity’. This context also offered potential ‘exit strategies’ for Jasmin and her investors, to sell her business to a cannabis company or beauty companies, outside of the cannabis market. All of this was hype and excitement aimed at repositioning CBD skincare as a new form of a cannabis commodity, and to underscore its potential economic value.

Jasmin used the original five products she made as a ‘proof of concept’, a way to show investors that there was a need in the market for her product range and to ‘understand the market, consumer demographic, product efficacy, and the

positioning of a CBD skincare company'. She continued to raise funds to transfer the business from a kitchen producer to a supplier of 'luxury' skincare products. Part of the money would be used toward hiring a formulation team and securing a manufacturer for production.

The 'deck' described the three newly formulated products: 'daily defense serum', 'night repair face oil' and 'all-in-one wonder balm'. The day serum and the night oil contained 132 mg of CBD.



The 'night repair face oil' was described as 'replenishing' and 'anti-oxidant rich'.



The third product was what Jasmin described as Ohana's 'hero product', a body balm, called the 'all-in-one wonder balm'. A 'hero product', she said, 'defines the brand and it creates brand loyalty. Our hero product embodies what Ohana believes and creates. It is why consumers are keen to try the rest of our range'. The 'all-in-one wonder balm' was a reformulation of the first product Jasmin created and contained 250 mg of CBD. It was the most expensive of the range, at £75 per product, whereas the night oil was £68 and the day serum was £62. This product is used for 'dry, flaky skin or patches, cracked heels and calluses, sunburns and burns, bruised skin and painful aches'.



Rebranding was significant because she felt it would help to secure funding to build the company. The new branding was selected to resemble a 'luxury skincare brand, rather than a pharmaceutical or dermatological product', Jasmin explained. During our conversations about packaging, branding and style, she used three words – simplicity, boldness, and femininity. She used four key colors: white, light pink, orange and black. The logo, 'OHANA', was bolded in black with a simple and angular font and 'CBD skincare' was written in smaller lettering below.

OHANA

CBD SKINCARE

Jasmin wanted Ohana to be seen as a ‘skincare brand that would be competitive with leading skincare brands’ in department stores, such as Selfridges, Harrods, Harvey Nichols, and in skincare specialty shops, such as Space NK, Cult Beauty, Feel Unique or Look Fantastic. The reference to mainstream shops and luxury skincare boutiques helped Jasmin explain to investors how Ohana products would be placed in the market and how the company would compete for market share. For Jasmin, it was also a tool to showcase familiar consumer experiences, such as shopping at mainstream retailers or ordering online from reputable brands, whilst introducing CBD skincare into that space.

The process of rebranding was important to investors because it ‘normalized’ the product range, as Jasmin described it. In other words, the products resembled mainstream skincare brands that were accessible in pharmacies, beauty boutiques, health stores and popular skincare sites. Without reading the label closely, the products could have been mistaken for other ‘luxury’ skincare products, not necessarily CBD-infused ones. In this way, her brand strategy and marketing choices ‘normalized’ CBD in skincare products, within a broader category of ‘clean beauty’ and ‘vegan skincare’.

Jasmin secured her initial funding, first from friends and family, and then from investment firms and angel investors. Despite ongoing lack of enforcement and legal certainty, the case of Ohana reflects the prominence of market forces and the

complex processes involved in commercializing CBD products. She was deeply committed to her brand, which not only required efforts to normalize CBD skincare through business decisions and compliance, but also involved advocacy efforts through forms of education. In this way, even people who were somewhat distanced from the historical context of legalization were still drawn into elements of the movement.

Conclusion

Despite legal uncertainty, people and businesses found ways to successfully operate within the market and set precedent through practice, as their products and business activities became more mainstream, or at least associated with existing sectors.

Daily business experiences and market forces were supplemented by events and conferences, which were helpful sites to discuss standards, disseminate information, voice moral concerns and establish a sense of quality and safety protocols.

Understanding how to navigate legal confusion and legitimately deploy capital simultaneously reinforced a commitment to reform and development. Market forces became more dominant, such as advertising, branding and investment, and competition inevitably increased too.

With the rising demand of market forces, people also needed to secure investment, advertise and compete with other businesses. Commoditization captures the market aspect, but CBD products were not simply considered a market commodity. It became intertwined with moral concerns of standards. Because enforcement lacked, there were people, like Jasmin, who happily called out brands that violated policies and made recommendations, informally or formally, about how quality, safety and standards should be achieved.

But, internal concern with standards was quite striking. Jasmin demonstrated this with her criticism of non-compliant brands. But, she is representative of how many others thought and felt about this issue. On the one hand, regulations were supposed to ensure standards – what is dangerous, what needs to be authorized like ‘novel foods’, general regulations for beauty products, and how medical products should be produced. All of these were designed to create a framework for standards, but, in this case, they did not work terribly well. People within this space, nonetheless, did not believe that standards are inherently bad. Nor did they insist that businesses find ways around compliance. Instead, they believed that existing standards were not good enough and different standards were required. There was a sense of responsibility to develop the market itself.

There was also an emphasis on education, not just standards. It connects to consumers being educated about a product and how it works. There also was a need for education within the market about regulations and compliance. But, it was not just about legal frameworks, it was significant to not misrepresent the market or make false claims on products. In this way, it was important to know what others were doing, how they were doing it, and what was considered ‘right’, according to market and movement beliefs. This chapter explored the interface between these socio-legal and economic processes of change and commodification and other imperatives noted in earlier chapters, in different environments and phases of reform. In the next chapter, I turn to the process of normalization and the various tactics used that changed the way cannabis was framed and used as a commodity.

Chapter 7

Cannabis Normalization

Introduction

Even after aspects of cannabis consumption, cultivation, distribution and production were legalized, there were ongoing measures to encourage the acceptance of cannabis in its legal forms, as illustrated throughout this thesis thus far. But these promotional activities were also required by cannabis companies, in effort to be treated similar to any other traditional business. Many people within the cannabis market faced commercial challenges, not least in banking, advertising, e-commerce and trade. Payment processing services were difficult to secure. Therefore, in the US, many plant-touching⁷ businesses were cash-run. In the UK, Ohana, the CBD skincare brand that Jasmin founded, was rejected by e-commerce sites, and she had to limit what products could be sold and where.

Finding a bank for a cannabis business was another vexing task. The CEO of Growcentia, Gregg, successfully banked in Colorado for a few years, but, unexpectedly, in 2020, his personal and business accounts were frozen. These accounts were subsequently closed, allegedly because of an association with cannabis business. In the UK, Jasmin discovered the only bank that would open a business account for Ohana was the one she banked at for years, primarily because of their long-term relationship. When she suggested that bank to other cannabis colleagues, they were turned away.

Common forms of advertising, such as purchasing Google Ads, sponsoring posts on social media platforms, or buying airtime on TV, were also met with immense challenges. Usually, any mention of the words, ‘CBD’, ‘hemp’, or ‘cannabis’, would violate policies, and company pages and campaigns would be

⁷ Cannabis businesses that directly worked with the cannabis plant, such as cultivators, manufacturers, processors, distributors and retailers. This did not include ancillary service providers.

taken down. So people in the market felt that they had to exercise a degree of creativity to operate as normal businesses do. Some businesses successfully navigated the legal complexity, which helped to legitimize market activity and contribute to normalization.

Although cannabis itself had been legalized in some jurisdictions, it had not yet been normalized. The concept of ‘normal’ took on different meanings in various jurisdictions because reform and development unfolded at different paces. The moment I left a jurisdiction with a legal market, or even left a cannabis event, it became clear that any sense of cannabis as ‘normal’ was distinct to people inside the market. People within the industry deliberately tried to expand other people’s sense of ‘normal’, and, often, this meant that people external to the market would more closely reflect how people involved with cannabis activities understood and experienced cannabis.

To achieve normalization, people within the market undertook a series of processes and adopted a number of strategies to make cannabis seem more ‘normal’ and accessible, in all its forms. For those involved in the market, this took place through daily experiences, which often echoed the language commonly used at events and conferences. In this chapter, I discuss people actively involved in the process of bringing about normalization in wider society, in different places and different stages of legalization. I focus on individuals, their experiences and journeys and the roles they played to illustrate processes of normalization.

Celebrities and Cannabis: Jim Belushi

Chapter 4 described very early stages of reform in Colombia that involved reframing cannabis as a legal product, but at cannabis events and meetings I attended, most

participants did not need to be convinced. This was the case in the Colombian city of Cartagena, in May 2019, at ExpoCannabiz. In the evenings, many attendees and speakers joined a ‘VIP Yacht Party’. Dozens of people sailed down the Colombian coast on a yacht. An unsurprising distant breeze captured the scent of joints and vape pens. Business conversations, networking and dancing took place over inhalations and sips of alcohol.



In 2017, possession of less than 20 grams of cannabis was decriminalized in Colombia. But, consumption was illegal⁸ and deemed unconstitutional, under the 2017 Police Code. As many of my informants would joke, ‘it would not have been a cannabis event without cannabis’. The smell of cannabis smoke was appreciated rather than condemned. No one would bat an eye at the sight of someone rolling a

⁸ Public consumption of cannabis was later approved in June 2019, only a few weeks after Expo Cannabiz (Hasse 2019).

joint, an action that could encourage a disturbed gaze outside of this environment. Trying out a new type of product – a dissolvable tab infused with cannabis, a vape pen with uncommon cannabinoids, such as delta-8 THC, an isomer of delta-9 THC, or cannabigerol, a non-psychoactive compound, or handing out samples of infused sex lubricant – was also common. How attendees brought these products across state borders was not a matter of concern, despite awareness of the legal risk. Exchanges involving cannabis happened almost ritualistically at informal and formal events I attended, including in places I least expected it, such as the United Nations and in countries with very strict cannabis policies, like Panama or Thailand. Yet, it was very different outside these contexts, for many people who did not have frequent exposure to cannabis in this way, where the shadow of prohibition was still strong.

Celebrities, in contrast, had an advantage. They could use their platform of fame and power to inform their following about cannabis in its legal forms. This was the case of Jim Belushi, an American actor, musician and comedian who is best known for features in *Saturday Night Live*, including movies, *About Last Night* and *Trading Places*, and starring in and executive producing TV sitcom, *According to Jim*. He spoke at ExpoCannabiz and performed at after parties, including the VIP Yacht Party.

In 2015, he founded Belushi's Farm, an Oregon based company that cultivates cannabis for the adult-use market. Belushi's Farm sold four different brands that were specific strains of cannabis genetics: 'Blues Brothers', 'Captain Jack' and 'Chasing Magic' (Jim's Secret Stash) and 'Good Ugly Weed'. These names leveraged brand or celebrity awareness related to the Belushi family and their involvement in entertainment, and were sold in the form of pre-rolled joints, dried flower, vape pen cartridges and various forms of edibles.

In 2015, in the early stages of post-legalization for all purposes in Oregon, Belushi felt that most people in the market were motivated by economic incentives. Belushi said his spiritual connection and medical understanding outweighed the financial prospect of cannabis. In an interview with *Benzinga* (Benzinga Cannabis 2019), he said,

I believe in the spirit and medicine cannabis offers in healing our families, communities, and world. I decided to let the Spirit of Land and the Water Spirit of the Rogue River [where his farm is located in Oregon] irrigate and grow this powerful cannabis medicine.

He spoke about his love for the business of cannabis, the people it brought together and the therapeutic value it offered.

When he visited dispensaries and spoke to people who used his products, such as veterans with post-traumatic stress disorder (PTSD), elderly with joint pain and individuals with opiate addictions, he was further motivated. These stories led him ‘down this medicine path...it’s opened me up...it’s just leading my heart’. These exchanges shifted his ‘paradigm’ because ‘it [cannabis] was no longer a business’.

His commitment to cannabis legalization was also in honor of his brother, John, who died in 1982 due to an overdose from cocaine and heroin. ‘I believe my brother would still be alive today if we knew what we know now about cannabis back then [in the late 1970s to early 1980s]’, Belushi said. Cannabis has recently been studied as a means to reduce cocaine and methamphetamine ‘use disorders’ (Calpe-López, García-Pardo and Aguilar 2019), which was the type of research Belushi believed could have helped John. John’s legacy combined with Jim Belushi’s newfound passion for cannabis, as a medicine and business, led to a new project in his acting career, a reality TV show, *Growing Belushi*.

The comedic show was a combination of music, education and exploration into cannabis legalization, cultivation and consumption.

Belushi said,

The educational pieces are what I call science pods. We talk about consumption methods: about edibles, bud and vape pens. We talk about the difference between THC and CBD and the therapeutic benefit of terpenes.

We're filming scenes about the harvest cycle, and I go into the field with the ladies [cannabis plants]. We take it to the science lab. We test it...it's going to be a showcase for what all of us [people in the cannabis market] are really trying to do.

It also told a story about prohibition, the drug war and the distinction between cannabis and other controlled substances. In the series' first season, Belushi visits cannabis cultivation facilities and cocaine plantations in Colombia and meets local farmers. A frame captures him lying in a field of coca, saying, 'this is what killed my brother'. The historical context, tied to deviant behavior, criminal activity and his brother's death, is contrasted to scenes in the legal market at dispensaries that sell Belushi's Farm product.

It was as much educational entertainment as it was marketing for product discovery and brand awareness. At the yacht party, I saw this in action as Belushi's film crew recorded his performance and interactions. I was later introduced to Danny, an editor for a cannabis publication. Danny had interviewed Belushi many times before. Whilst Belushi performed, Danny said that a TV show on a major channel or streaming service could be a successful platform for brand awareness, given advertising challenges that cannabis companies faced. 'Finding opportunities and openings in the system, thinking outside of the box and getting really creative', Danny said, were essential for companies who need to 'build brand awareness and loyalty'.

In Belushi's case, his fame provided access to a large audience within the general public. Across all social media channels, he reached over one million accounts. Compared to television commercials or social media video advertisements, which were restricted to a minute or less, Belushi captured an

audience for almost 60 minutes with three episodes of *Growing Belushi*. The series was picked up by *Discovery Channel*, and aired in 2020 on Wednesday evenings. Season one became the number two show for the 10 PM timeslot on the network, since summer 2019. It also ranked above the average for Wednesday night original programs on *Discovery*, for ages 25-54. Season one was then made available on *Discovery Go*, *Discovery's* streaming service. This success led to a second season, which aired in 2022. Season two followed the growing demand of cannabis, as the market expanded in the US, and how Belushi experienced consumer and product shifts.

Belushi's connection to cannabis was personal because of the loss of his brother, which became integrated, professionally, through his acting career as a cannabis cultivator and business owner. He used an accepted, familiar form of entertainment to address a broader group of people whose understanding of cannabis most likely differed to his. On the one hand, he used his fame as a way to overcome common bottlenecks other cannabis brands face. This created a window of opportunity to use his talent and Hollywood access for market purposes. Yet, this commitment was deeper than just financial. The show and his brand embodied his personal connection and commitment to the cannabis movement. His efforts to educate and normalize cannabis in its legal forms supported other activities in the licit market. However, accepting cannabis the way people in the market did at the yacht party was still far off.

Branding and Creative Strategy: Marwan

Egyptian-born, thirty year old, British resident, Marwan, identified himself as a 'magician'. He was not a magician in the stereotypical sense. However, in his own

way, he created illusions and entertained people through his work in public relations. He directed videos that were used to create promotional material, montage footage and social media assets. Marwan also created marketing campaigns, curated events and advised brands on creative strategy.

But Marwan preferred the title, ‘magician’, because he felt it captured the essence of his work. ‘I like to think that whatever I do is a kind of magic trick. I thought it [videos, campaigns, events or other ideas] into existence. People have enjoyed what has come out of my mind and it feels like a brand new experience’, he said. Marwan initially worked with non-cannabis brands, but when I met him, he focused more on cannabis-related projects. He felt that ‘creatives’, a category that includes designers, copywriters, marketers, videographers and photographers, were an important element of the cannabis market because of their role in depicting and framing it.

I first met Marwan at a cannabis-networking event, First Wednesdays (FW), in London in September 2018. FW is the organization mentioned in Chapter 6, which published the ‘the UK cannabis ecosystem’ report. FW also organized events on the first Wednesday of each month, usually informal gatherings to meet other people locally involved in the cannabis market. There were around 60 people at the first event I attended, which I was told was the largest crowd at FW, since it launched in early 2018 with 10 attendees. Once FW gained popularity, its structure began to shift to meet the expectation of its membership, which was now composed of entrepreneurs, investors, and people familiar with ‘corporate culture’, as Daniel, the Canadian medical cannabis business owner from Chapter 5, described. In 2019, monthly events were sponsored and networking time was reduced because of presentations, panels and formal agendas. The growth of FW events happened

alongside ongoing momentum for policy reform, such as advocacy and legal reform addressed in Chapter 5 and increased investment in UK cannabis businesses, as illustrated in Chapter 6. Yet, cannabis use was still far from accepted in the UK.

When the September FW event ended, Marwan and I left the bar to go to the street to ‘have a smoke’ and speak about changes in the regulated market that he had experienced and expected. Leah, the creative director for CANNTalks from Chapter 5, joined us. Marwan rolled a joint with pure cannabis. After taking a ‘hit’, or an inhalation, he passed it around to Leah and then to me. This was common etiquette, known as ‘puff, puff, pass’, to pass around a joint to anyone interested in participating. We were standing on the corner of a dark side street where few pedestrians passed. An adult man dressed in a business suit walked by silently. When smoke filled the air, he turned his head back, nodded and smiled. ‘This is how it should be...normal,’ Marwan said. ‘Normal’ to Marwan meant that consuming cannabis should feel safe and even uneventful.

Smoking cannabis had been decriminalized in the UK in 2009, so the ‘worst case scenario’, as Marwan said, might be a fine from the police for dealing or possessing a quantity with intent to distribute. But ‘normal’ to Marwan also meant no perception of shame, without the risk of arrest, and that smoking a joint would be considered just as acceptable as it was to have a drink, as we had earlier that evening. He also believed that normalized cannabis use meant that people like Jasmin and Kim, from Chapter 6, no longer had to focus on consumer or investor education. Consumers would easily be able to distinguish between different consumption methods, such as a bong hit – consuming cannabis through a water pipe – and eating an edible. The former has a faster onset effect, whereas the latter’s effect lasts longer, but takes much longer to feel. Marwan believed that this kind of

understanding was analogous with the way many adults can identify a glass of wine, even differentiate between types of red, white port or rosé, and a shot of hard liquor, whether it is tequila, rum or Sambuca. Similar to the way in which alcohol beverages are regulated for consumer safety, the idea of ‘normal’, to Marwan, also involved regulation, so that cannabis products would comply with guidelines on quality, standardization and consistency.

Marwan aimed to integrate cannabis imagery into a ‘normal, accepted part of daily living’ through events, campaigns and branding. He felt that his experience working with mainstream consumer goods brands, such as Adidas and Footlocker, informed his design, creativity and strategy for cannabis-related projects. ‘Cannabis deserves the same level of work’, he said. His approach was the converse to the Aussie Hair advertisement with green cannabis leaves, as illustrated in Chapter 6. Marwan often chose not to depict cannabis in its stereotypical forms, as dried flower buds, a cannabis leaf in Rastafari colors or other ‘stoner’ imagery. Instead, for instance, he used footage of an abstract picture of a cannabis leaf and a cloud of smoke from a lit joint, but not the joint itself. Viewers rarely noticed that cannabis ‘actually shows up throughout the entire video. They don’t register the significance of its subtle presence’. He said,

There needs to be a complete re-contextualization of cannabis through evolved design practices. This does not necessarily even need rolled joints or any ‘traditional’ ways of consuming cannabis.

Instead, focus on normalizing cannabis through other forms of ingestion, and how our bodies can restore our homeostatic state using our ECS [endocannabinoid system]. This would open up the market to place cannabis in its proper, intended position.

My goal is to normalize cannabis into the lifestyle of the everyday.

He hoped to create an aesthetic that would allow viewers to see cannabis in relation to something they already perceived as normal, such as attending a party, listening to music, dancing at a concert or walking around London neighborhoods. Rather

than building the video around cannabis, he found ways to frame cannabis within it. His creative work mirrored the idea that ‘cannabis has always been a part of many cultures and never needed to even be spoken about’.

These decisions were also an effort to navigate existing legal uncertainty around advertising. He was careful to follow clearly defined rules, but he also found ways to ‘break away from the system’. This form of ‘disruption is what some call anarchy, but I call it the cannabis way’, Marwan said. His reference to anarchy did not imply overt acts of civil disobedience, rebellion or protests, which had characterized some elements of the cannabis movement. Nonetheless, the ‘cannabis way’ meant disrupting the status quo. Many other informants broadly believed in this notion in some way. For instance, people suggested that cannabis medicine disrupts pharmaceutical practices, cannabis use impacts alcohol and tobacco use, and hemp could be used as biofuel, a sustainable alternative to fossil fuels.

The ‘cannabis way’, in the modern context, Marwan argued, brought an alternative, yet not an inherently new, way of thinking and interacting. He said,

We find our own way to navigate routes and ways of life. There are rules and we know them, but some of the rules are not what we follow. Instead, our actions may intend to influence the rules in order to generate that alternative way of life, like a pirate.

They are not your stereotypical idea of *Pirates of the Caribbean*, but they have your standard pirate mentality. Being a pirate does not mean that they are bad people and it does not mean they intend to bring criminality or violence to the world, but they are deeply tied to alternative ways of living, exploring and behaving.

People know that what they’re doing sometimes is crossing the legal boundary, but they are unafraid of the consequences. They are committed to their way of life.

Marwan felt that navigating the grey area of the law required a level of fearlessness. Not only did he and others commit to performing unconventional behavior, they also found ways to invite others into this mindset. Whether it was consuming cannabis in a non-legal jurisdiction or using existing platforms, such as TV, people in the cannabis market exerted varying degrees of influence to normalize their

behavior and beliefs. Although normalization was a common goal, people still embodied ‘alternative’ lifestyles to the mainstream, just as the movement had done too. A clear example of this was at a dinner party Marwan hosted in October 2019.

A Cannabis Dinner Party: Marwan and Brandon

At the dinner party Marwan helped to organize in London, guests had the option to choose meals infused with THC and CBD, just CBD or without cannabinoids. Each course had a set dose, or number of milligrams of CBD and THC, which helped people to keep track of the potency of their meals. In London, a dinner like this was crossing the legal boundary, due to the use of THC, a Class B controlled substance. However, infusing food with CBD was permitted, and thus, advertising a dinner as ‘infused’ without specifying how the food was infused avoided legal issues. Marwan never expressed concern or fear about the legal risk of the event, especially with the discretion of a private venue. He was more concerned with the overall experience and how people would speak about it.

Brandon, who worked with Marwan to plan the dinner, was a Martinique-born Rastafari who was articulate and spoke slowly with a French accent. As a chef, he had organized many ‘secret dinners’ for others involved in the cannabis market. He was over six foot tall; his dreadlocks were as long as his entire torso, and his eyes were hidden behind dark shaded glasses, even indoors. Brandon described himself as a ‘plant based patisserie pioneer and culinary designer’, but refrained from calling himself a chef. He told me that cooking was ‘just a tool’ to express a message. Since 2013, when he launched an online bakery and catering company, Brandon was dedicated to ‘share our [Rastafari] indigenous knowledge’, through his understanding of food as a medicine to support ‘quality of life’.

Brandon's cooking was inspired by his childhood in the Caribbean. 'It's really like a ghetto. A ghetto means like you have to hustle 'cause we do not have any way out', he said. Brandon described his youth as 'simple living' in the countryside 'I did not have [a] superfluous [life]: no water, no electricity, no toilet, no money. [It] was actually a blessing', he said. Brandon felt that his upbringing taught him 'common sense and fundamental values through the ups and downs [of] our daily struggles, based on the universe laws'. By 'universe laws' he meant the natural processes, which he believed govern agricultural and environmental cycles. He found culinary inspiration in these laws, which was one of the ways his cooking became a medium to express a belief and share a message. He said,

We are not using any wheat, soy, chemical or coloring. Our food is purely from nature and it is deep research. Without nature, we got nothing now. It is from the gods. It is from the universe. I call that electric food...to allow us to be on the right frequency.

The type of food he bought, where he chose to buy it from, and how he prepared his dishes were symbolic of Brandon's belief system. On his website, he wrote,

We only supported small and independent businesses. We never buy from or support multi-national corporations or destructive, exploitative industry...the small group of multi-national conglomerates that currently dominate farming, production and trade in the food industry – are driven purely by capital, at the expense of the wellbeing of our communities, our environment, our species and our planet.

He opposed the hegemonic power of corporations, in terms of capital deployment, environmental destruction and agricultural manipulations, such as crop monoculture, when a single piece of land is dedicated to grow one crop repeatedly, and farming with genetically modified organisms. Brandon's personal and professional values echoed the ethos of the early days of the cannabis movement and touched upon some tensions experienced by the hemp company, Company H, described in Chapter 5.

Cannabis was a medicine to Brandon, but his description differed from the one that might be given by medical patients. As it relates to his Rastafari practices, the plant was a source of ritual, ingredient and remedy. He said,

Cannabis as an ingredient is just pure magic. Cannabis is the key. Cannabis has the full answer...By combining plant-based ingredients and cannabis, if you realize and do the research, the food [can be used to] fight sickness, [for] healing, to stay focused, [and] to understand our purpose. Nobody can touch that. It's not comparable. You can't fake that energy.

According to Brandon, cannabis was a special plant. It provided a supply of 'wellbeing' for communities, the environment, agriculture, humanity and the planet.

Marwan, by contrast, spoke about cannabis in a different way, mostly in relation to its role in the licit market. He found ways to indirectly introduce it at the dinner party, and said,

We wanted the messaging with the whole evening to be more of a platform to allow people to *feel* informed, not just about cannabis, but as well as opening people's eyes to a way of life, and harmony with a room, for people to take that away and hopefully it echoes in other rooms that they go to.

Cannabis added comfort to an organic feeling that created...hmm I don't know because it was a new experience for me. I think it facilitated and enhanced a collective mood and frequency, let's call it, to think up on a frequency scale together.

Similarly, Brandon's expectation for the evening was for it to be 'just like another world, I like to call it like that. "Alice au O'Pays de Mereveilles" [*Alice In Wonderland*]. It is just a pure magic', Brandon said. The aesthetic of 'another world' promoted an alternate way of experiencing something familiar, such as a dinner party and networking event or concert. Marwan said,

That evening for me was to give people the experience of walking through a door and stepping into another place, another universe, rather than being in London. Our geographical location became irrelevant while we were all experiencing something.

A 'secret' location was sent out via text to confirmed guests. I arrived at the same time as Jasmin, the founder of Ohana. Jasmin and I walked up to a black door. There was no signage to welcome guests or to direct them upstairs. Once the bell was answered, we walked up a flight of stairs. We did not notice, at that time, that signs

were posted about THC consumption and filming. Marwan later told me he put those around the venue discretely to not draw too much attention to the wording, but rather to have multiple signs spaced out around the venue to subtly invite a gazer's attention.

Once we arrived at the top of the stairs, we entered a room lit by fairy lights. There was a long, rectangular dining table set with flowers and nametags. Large, green plants were scattered around, surrounded by an indoor-swing, a piano and sofas. The location was once someone's flat, which had turned into a high-end venue that made guests feel like they were in the comfort of their own home. Throughout the evening, guests mentioned 'how nice it was to be in a venue that "takes" you out of London'. Marwan said,

The idea was to get together a room that had multiple levels of magic and culture all in the same space. Not one element was meant to be the star of the show.

There were 20 dinner party guests. Around 60 people arrived after dinner for drinks, entertainment and canapés. Marwan had personally selected the guests with a strict invite-only list. About half of the guests were people I had previously met during fieldwork, at events such as CANNTalks, Cannabis Europa and FW, and through other business activities. The guest list, Marwan told me, included 'some of the brightest talent in the cannabis industry, as well as a mix of key London influencers'. The influencers were a group of authors, actors, radio DJ's, musicians and models. Their combined 'social reach', I was informed, was around 2.9 million people. Marwan brought people together who, he believed, would use this experience to engage in a conversation about their own lifestyle choices and how they might integrate cannabis, for wellness, medical, recreational or other purposes.

They were ‘for the culture’, Marwan said. He explained,

If you draw two circles that overlap [a venn diagram], one would be labeled ‘cannabis’ and one would be labeled ‘other culture’. Some examples would be music, gaming, arts, food, growing vegetables, or anything else where this is a community of people around it.

There is an overlap between the two where people exist in that space. That is where communication and authenticity meet. It’s the crossover point. That’s where true culture sits [in the center of the venn diagram].

Cannabis is in every culture. You don’t need to highlight that cannabis is in music culture. For musicians, it’s just part of the room and there is no need to say anything more. Take cannabis and music, and cannabis have always been there.

‘For the culture’ is not just about cannabis, but relates to any other culture that we touch.

But, ‘for the culture’ is about respecting people first, respecting everything. What really matters to me is how good it can be; it’s for people who always had the power of the plant.

It is not only to purely entertain you. It’s to make you aware about what’s happening and what life is about.

To make sure guests had a first hand understanding of this, Marwan partnered with cannabis retail shops and companies that made edibles, topicals and sublinguals that gifted products. Companies that donated product also hoped to create relationships with influencers who might be interested in joining an affiliate program, becoming a brand ambassador or participating in a focus group. Marwan said,

We also designed in the ‘high’ that people were meant to experience. It was designed in the food that Brandon paired up with drinks to carry you through the evening so that cannabis wasn’t something you always thought about throughout the experience. It appeared in a subtle way to create a nice wave.

There were joints and dried flower around the venue. When people passed a joint around, rolled a joint or played with their food, they touched cannabis in its various forms, as a commodity, recreation and a ‘culture’. Even for guests who did not consume cannabis, there were non-overt presences throughout the evening, including references to cannabis in music, cannabis-related names in meal descriptions on the menu, decorations throughout the venue that were plant-based, and an emphasis on cannabis as a natural, alternative medicine. Some dishes had earthy flavors with cannabis scents and clothing carried the smell from those who had smoked outside.

The first course was a hibiscus salad made with ‘terps tempeh naturally smoked with indica, hibiscus broth, garlic meringue, caviar marinated in champagne’, and watermelon shaped as balls that were smaller than a golf ball. The second course was ‘cheesy pie, ratatouille, creole mash, handpicked French truffle and roasted sea mushroom’. For dessert, Brandon made ‘CBD latte cakes, crafted cannabis chocolate truffles and tropical super fruit’. Guests, primarily those who worked within the market, understood how to ‘pace themselves’, since ingesting cannabis might take around 45-60 minutes before individuals feel psychotropic effects or psychoactive effects. Dialogue about this encouraged people with prior cannabis experience to inform those less familiar with consuming cannabis in this way.

Over the three course-meal, guests had casual conversations about cannabis legality, business activity and measures of reform. Later in the evening, conversations diverged into non-cannabis related topics, such as writing music, life as an Arab woman in London, near-death experiences and the ‘magic’ of Brandon’s food, as multiple guests described it. When the dinner ended, there was an intimate concert. Musicians performed on the piano, including singers and rappers. One rapper lost track of his verse, laughed, and said, ‘I’m really high’. This was one of the few moments when guests acknowledged the presence of cannabis. The remainder of the time, Marwan hoped to evoke a multi-sensory experience that encouraged positive interactions and ideologies around cannabis.

Brandon continued his online culinary business, hosted dinner parties like this, and later catered for events hosted by investors and cannabis companies that resembled corporate ones. Marwan, too, was involved in projects with similar companies. But their messaging still echoed the history and values they held about cannabis – respecting people and the planet. Cannabis was a tool, an ingredient,

visual, and experience, to inform others about the plant's properties, related policies and potential uses. In this way, they used their own mediums to convey their beliefs and invite others, insiders and outsiders and novices and veterans, to integrate, in any capacity. They did not force their opinions on others, but were equally suggestive. Their hope was that their respective platforms would showcase cannabis as acceptable and normal by creating experiences worth replicating and sharing.

Advocacy and Professional Work: Jeff

Jeff, an Israeli man in his thirties, dressed casually in jeans or khaki pants with a plain colored shirt that he accessorized with a baseball cap, dark sunglasses and his camera. He was a videographer for the cannabis events brand that organized CannaTech, which was the conference I attended in Panama, described in Chapter 4. CannaTech holds an annual event in Tel Aviv, as well as two to three additional conferences events in various cities, such as Hong Kong, Sydney, Cape Town and Davos. The organization describes itself as, 'the only event of its kind with a truly global focus that offers senior industry leaders, medical and scientific experts, and new ventures the platform to come together, drive innovation, form partnerships and promote knowledge exchange'. I met Jeff at CannaTech in Tel Aviv in March 2018, and I saw him again at later CannaTech events and other cannabis conferences in Europe.

Jeff's involvement with cannabis began as an activist, in the early days of the cannabis movement in Israel, which he described as the 'grassroots era'. But, the Israeli cannabis grassroots movement was different to the ones in the UK and US. He told me a story about Amos Dov Silver, the founder of Telegrass, an online marketplace for cannabis. The platform used Telegram, an encrypted messaging

app, to connect cannabis consumers to cannabis suppliers and retailers in the illicit market. Jeff said the founder was ‘one of the most wanted tech guys in the country [Israel] because he’s the virtual [embodiment of] Pablo [Escobar]’. Jeff described how the platform began,

It started off as an online community, on Facebook. People were looking for medicine and asking questions. We turned it into something with tech, and now they have operations in Oakland with call centers, and even in Eastern Europe. It’s a very legitimate site.

Shortly after its launch in 2017, there were over 100,000 users, compared to 25,000 registered medical cannabis patients in Israel that year. *JPost*, an Israeli news publication, reported that Silver planned to run for election even though he served time in jail for his activities with Telegrass (HaCohen 2020). The article read,

Telegrass is an example of how new technologies can frog-leap legal norms. Silver has denied being a drug dealer. Rather, he argues, he merely provided an online platform for others to use as they wish (*ibid*).

For Silver, the conflict between prohibitive laws and the need for cannabis-based medicines was personal. His father was diagnosed with cancer and used medical cannabis to treat his symptoms. When Silver was released from prison, he was placed on house arrest, and stayed with his father. A court order ruled that Silver should not be around cannabis, and thus revoked his father’s license to obtain his medication. Two months later, his father passed away due to a morphine overdose (Herb 2019). In an interview about the court order, Silver said,

Everyday I hear so many stories like my father’s and I see the government and this law killing people. Every place in the world this is happening, but nobody does anything about it because nobody wants to be against the government (*ibid*).

Silver did not subscribe to the idea that he was breaking the law. Rather, he felt that the law prohibited people from living healthy lives, which included obtaining medications required to do so. Jeff shared Silver’s belief that the law was prohibiting people from obtaining medicine.

This belief partially related to his personal motivations to access medical cannabis. After mandatory military service more than ten years ago, Jeff was diagnosed with post-traumatic stress disorder. Although it was illegal, he started to grow cannabis at home to manage his symptoms. He had no prior experience, ‘I watched YouTube videos and spoke to people. I started to yield a lot [of cannabis], handed it out to friends and made oil’, Jeff said. He supplied patients with cannabis who were not registered or could not obtain authorization. When he accepted a job with CannaTech, in 2014, he continued to do this. ‘Yes, I work in the legal, regulated, global market, but at home [Israel], there are patients that need the oil still’, he said. The transition from illicit to licit was not sufficient to Jeff, and he felt that he still had a role to play in cannabis advocacy initiatives.

Jeff was also concerned about the influx of profit-motivated people and businesses, and how other social movement issues, such as climate change, anti-corporate control, anti-corruption, freedom and human rights based issues, were lacking in the market. His personal newsfeed on Facebook was filled with posts that addressed political, social, environmental and economic issues. Jeff recorded and posted live videos on his Facebook, he hosted discussions with his followers, shared links to news articles, and provided resources for further engagement and education on these topics. On a personal level, Jeff was articulate about his opinions, many of which clashed with the rise of ‘corporate culture’ in the cannabis market. Unlike Brandon’s explicit culinary messaging, Jeff did not do the same professionally.

CannaTech commissioned Jeff to film events and informal events that happened before, during and after the conference, which included dinners, cocktail receptions, press briefings and specific meetings between high-level executives and high-profile individuals. He believed his access allowed him to ‘see all and know

all'. Jeff thought his camera lens acted as a filter for people and places he encountered throughout his work. He said,

I see the cannabis space through a lens. My camera shows me what the eye cannot see everywhere. I am told to take photos or videos of certain people in certain places at certain times. My lens tell me what is important, and it shows me who is not important.

Whoever and whatever he captured could be used in promotional videos or other digital assets for CannaTech. He made highlight reels after conferences, which were less than 90 seconds and aimed to capture two to three days of interaction. The videos were a snapshot of exchanges and experiences at CannaTech and other events. He was asked to create a video that highlights a select group of people, rather than provide a full representation of the cannabis market. He knew his task was to provide a positive frame, especially relating to business exchanges – one of the key reasons people gathered at conferences. For example, throughout conferences, Jeff was directed to record specific presentations, interviews and interactions in order to highlight 'influential thought leaders', he said. Although this was a job for Jeff, one he said he enjoyed, it did not entirely reflect how he felt the licit market was unfolding.

He described people involved in the transition of the cannabis market as 'pirates'. It was not a common term; the only other time I heard it used was when I spoke to Marwan. But it was common to embody 'alternative' beliefs or behaviors, in a way that reflected dispositions from the counterculture. Jeff and Marwan had never met, but they both experienced much of the cannabis market through a camera lens. Jeff said, 'as pirates [people in the cannabis market], [we] choose our own lifestyle, while the rest are just breathing all the way to the grave'. The 'rest', he described, as people who only followed mainstream norms and were not actively 'challenging the system' or living an 'alternative lifestyle'. Jeff felt that those who accepted rules, norms and structures would succumb to the 'system's authority that

fails and manipulates society'. Although following a lifestyle different to the mainstream might include breaking the law, Jeff did not mean that this choice was inherently violent or immoral, even if it was de facto criminal.

This became clear at a dinner party hosted after CannaTech in Panama. Jeff and I, alongside a handful of other investors, business owners and others who helped to organize the conference, were invited to a local investor's family house. They lived in a skyscraper that overlooked Panama Bay. The panoramic view from the balcony was dark with glistening light reflected off the high-rise skyline and the water. Many guests stood on the balcony discussing the view as cannabis was passed around, alcoholic beverages were consumed and informal conversations took place.

We could all anticipate the appearance of cannabis, and many people were eager to try cannabis from other markets. Guests smoked pre-rolled joints, vape pens and edibles that they brought with them from their home country. This meant crossing international borders with cannabis, an illegal activity. Despite the fact that laws were broken, none of them were subject to search or arrest. That idea, to them, was almost laughable, although it was still a serious threat to many less privileged groups. This was part of the reason, however, that other activists felt they still had to advocate for social justice and other human rights. Meanwhile, consumption in Panama was strictly prohibited too. Of course, the crime of personal consumption was lesser than intent to distribute an illegal substance. Despite the inherent risk, it was common for people involved in cannabis business activities to openly consume cannabis together at events and meetings and to transport product to and from these places, as I saw in Cartagena and London. Outside, this would be widely stigmatized and criminalized activity, but it was usually accepted, and somewhat normalized

behavior amongst people involved. Although traveling with controlled substances was not considered ‘cool’, there was still a degree of ‘coolness’ in being able to try unavailable products and to openly consume with colleagues.

The group on the balcony could be labeled as businesspeople and leaders. But, they were also deviants as Becker (1963) would describe, and some lawyers would frame them as criminal. Marwan and Jeff categorized themselves as ‘pirates’. Although many informants at the dinner party would not phrase it as such, the act of consuming cannabis constituted an act of civil disobedience, similar to the way it was used in the early days of the movement. Symbolically, it protested against a set of rules and regulations that they felt were wrong. Especially to them, cannabis consumption was wholly acceptable and normal. Their willingness to break certain rules illuminated the ones they felt needed to change – prohibition – and their determination to normalize it as a legal activity, product and business.

Although Jeff was aligned with some of these choices, he told me that he felt uncomfortable throughout the evening. The setting of a ‘fancy’ house with ‘expensive views’ made him feel out of place. ‘The place looks like a restaurant and they have more money than I know. They are good people, of course, I know. But I’ll never be that business guy having dinners like this’, Jeff said. He felt that one of the key aspects that separated him from the others at the dinner was business orientation and amount of wealth, which he contrasted to his ongoing association with patient advocacy and the ethos of the counterculture. Although he recognized his own privilege in capturing ‘influential leaders’ in conversation, he did not feel as if he belonged there, whereas being in ‘influential spaces’ for some of the businesspeople and investors was where they expected to be.

Jeff was the most active in a grassroots movement, compared to Marwan, Brandon and Belushi. He openly criticized the government, especially about cannabis, corruption, the environment and human rights issues, and the rise of corporate behavior in the market made him uncomfortable. Despite feeling isolated from people tied to profits and the business of cannabis, Jeff still found ways to contribute to market activity, and encourage normalization, through his job and video footage. For Jeff and most others, it was necessary to follow the law, for legitimacy. But, Jeff pushed this legal boundary in different ways, to challenge some areas of the law and disrupt norms and policies. His willingness to break the law also reflects his support for legal change. Although legal frameworks existed, ongoing reform was still needed to normalize cannabis in the wider society.

‘Lifestyle’ Cannabis: Lorne

The four cases explored thus far are different exemplifications of the phase, ‘Cannabis 2.0’, as Lorne, the ‘Canadian godfather of cannabis’, described it in Chapter 3. Lorne, too, was involved in processes of normalization. His reputation in Canada began in the early 2000s, when cannabis in Canada was only legal for medical purposes. Over the course of the decade, his focus as a businessman shifted from pharmaceuticals, to a broader interest in the wellness sector, or what he described as ‘lifestyle brands’.

Lorne and his son, Alan, started a ‘lifestyle brand’, Tokyo Smoke, in 2015. Tokyo Smoke was a cannabis accessory retailer, which sold consumption devices such as bongs, pipes, infusers or vaporizers and tools – grinders, lighters, cleaning and storage. Once cannabis was legalized for adult-use purposes in Canada, in 2018, Tokyo Smoke expanded its offered goods to sell cannabis in the form of a capsule,

pre-roll, dried flower, vaporizer, edible, beverage, topical, extract, oil and spray, which it sold online and to retailers across the country. The head of operations at Tokyo Smoke said in an interview with *Sprudge* magazine, ‘we’re totally above board. We’re waiting for legislation ‘till we actually sell recreational pot in Canada’ (Hof 2016).

Prior to full-scale legalization, Lorne and Alan opened a ‘neighborhood coffee shop’. Cafes were legal entities, which became a platform to support their goal to normalize cannabis. ‘We were going to create a cannabis brand that was going to use coffee as a “Trojan horse”’, Lorne told *Civilized* magazine (Margolin 2019). Lorne and Alan believed that coffee, a commodity with widespread acceptance, together with strategic design, would be their ‘Trojan horse’. This would appeal ‘to the cannabis curious, those who never had smoked before or who otherwise could not fathom integrating the plant into a busy family or professional lifestyle’, Lorne said. For example, mothers with teenage children who used a natural alternative to their medications for sleeping, pain or anxiety. A cannabis ‘lifestyle brand’ would more closely reflect other consumer goods in the mainstream than any product purchased in the illicit market, which could serve to ease people in who generally did not associate with cannabis. One day, perhaps in a phase after ‘Cannabis 3.0’, Lorne believed people would be able to drizzle infused THC or CBD olive oil onto their dinner with comfort and ease. Cannabis, he thought, would be as ‘normal’ as it was to have a glass of wine with dinner, which echoed what Marwan said to me at the FW event.

To do this, Tokyo Smoke ‘repositioned cannabis as a sophisticated lifestyle product that would command just as sophisticated accessories and home décor goods’, Lorne told *Civilized* magazine (Margolin 2019). Alan hoped that Tokyo

Smoke would be ‘a home to the creative class’, a group of people who would incorporate cannabis into their normal habits through ‘high end design aesthetic’, rather than illicit market encounters (Wood 2019). Tokyo Smoke distinguished itself from the illicit cannabis market and associated stereotypes of ‘stoners’ and ‘reefer madness’, just as Marwan did in his productions and Jasmin did for Ohana. For example, Tokyo Smoke separated its brand identity from well-known icons associated with cannabis subculture, musicians such as Bob Marley, Peter Tosh, Willie Nelson and Snoop Dog⁹. In 2015, these distinctions were important for Lorne and Alan, explaining the difference between illegal dispensaries and legal retailers in Toronto and between stigmatized substances – cannabis – and non-stigmatized ones, like coffee.

In 2019, Lorne co-founded another company, byMinistry, which used matcha, instead of coffee, as its entry point. Matcha is a powder made from green tea, traditionally consumed in East Asian countries. However, in places like Canada, the US and UK, matcha was marketed as a healthy alternative to coffee containing less caffeine but with more antioxidants. Allied Market Research (2021) estimated that the ‘matcha tea industry’ was US\$2.45 billion in 2019, and expected to reach US\$4.48 billion by 2027. The type of people, ‘health-conscious consumers’ who opted to drink matcha, or even knew it existed, fit the category of the type of people that Lorne felt would be open to other ingestible alternatives, such as cannabis. ByMinistry, however, was not centered on cannabis or matcha, it was about ‘a plant-forward lifestyle’, which used experiences to inform others about these substances.

⁹ Each of these celebrities later had brands tied to their names, signifying a further shift of acceptance and legitimacy as the market developed.

One of the curated events that byMinistry organized was a ‘green tea speakeasy where matcha meets wellness’, Lorne said. In order to find the speakeasy, street-dwellers needed to find the green door down the back-alley of a well-known street in Toronto. ByMinistry brought ‘experiential dining’ together with wellness beliefs. The website described how diners would ‘take a micro-dose of wellness, with an adaptogen and superfood infused food and drink menu...designed specifically to rebalance, unlock, enlighten, and elevate your state of mind’.



Lorne said this flagship location would be the ‘first high-end premium cannabis culture lounge’. ByMinistry also offered what Lorne called ‘elevated experiences’, infused dining, a ‘secret moveable feast for forward-thinkers’, cannabis cooking and private dinners using ‘high-class food and drink’, similar to Brandon’s food preparation at Marwan’s dinner party. Lorne hoped to demonstrate how cannabis might play a part in normal, daily habits and routines. Tokyo Smoke and byMinistry took widely accepted products, coffee and matcha, to broaden the idea of normality by introducing cannabis-based lifestyle products.

Both companies distinguished themselves from black market interactions, to integrate into the legal cannabis market. These companies relied on established

norms to enhance the process of normalization. Whereas Jeff embraced the historical context of cannabis, Lorne made a conscious decision to distinguish legal cannabis from the consumption practices and images of pre-legal times. Lorne made a positive attempt to associate cannabis products with more mainstream goods, sold to wider consumer audiences. Leaving the past behind, in the contemporary market, was a deliberate choice to normalize cannabis. Albeit, the consumer products he launched were high end and luxurious, and the experiences were somewhat exclusive. Lorne promoted normalization starting from the top, including groups who enjoyed luxury, elite access and trendy lifestyle choices.

Conclusion

A degree of normalization factored into the phase of legalization, but normalizing cannabis was still an essential process throughout market emergence. Efforts to do this, in different settings, were laborious. People involved in the market shared a sense of normalcy, in part, because of frequent interaction, shared ideas and exchange of information. But, outside of the market there was still hesitancy about using cannabis products and lingering stigma. Individual experiences led to different starting points to actively promote one's sense of 'normal' to wider society.

Belushi is a unique case because he used his fame and media appearances to normalize cannabis, but he represents a whole set of other celebrities who have done the same. American actor, Seth Rogan, has a brand called 'Houseplant', and the site crashed during its launch because of an influx of interest (Gibson 2021). Jay-Z, an American rapper, launched a luxury line of cannabis flower, Monogram, in 2020. Another American rapper, Snoop Dogg, has been involved in the legal market since 2015, when he launched 'Leaf by Snoop'. He later started a cannabis investment

fund, Casa Verde Capital (*ibid*). In 2020, Martha Stewart, an American retail businesswoman, launched ‘Martha Stewart CBD’ and, in late 2021, Justin Bieber, a Canadian singer, launched a line of pre-rolled joints, called ‘Peaches’, named after one of his songs (Fitzmaurice 2021). A number of other celebrities have ‘come out of the cannabis closet’ (Geddes 2019) and publicly recognized their cannabis use. These sorts of activities promote the accessibility of legal cannabis and encourage wider society to adopt it.

Belushi, Marwan and Lorne also had a sense of which channels to utilize to spread a message widely. Marwan leveraged social media platforms through his relationships with influencers. Lorne also had the capital to finance dinner parties and fund businesses that brought people together to expand people’s sense of ‘normal’. Their backgrounds and experiences facilitated access to larger audiences, and, in some cases, to people involved in policymaking or those who influence it, socially or financially. Whereas, Jeff’s encouragement of normalization was more low key and personal. All these individuals, in different ways, found strategies and mediums to change people’s ideas about legal cannabis.

Although they were all trying to work on normalization, they performed it in different ways. Belushi, Lorne and Marwan consciously distanced themselves from the past and a sense of a subculture, and closely aligned themselves and cannabis with legality. Lorne and Marwan promoted cannabis as a lifestyle product, which attracted consumers willing to pay high-end prices for luxurious products and experiences. To an extent, Jeff and Brandon were critical of this, as they both identified more closely with grassroots origins of cannabis. And, although, these two believed in broadening access to cannabis, they were less motivated by financial means.

Different sets of intentions also factored into how they approached questions of legality. Jeff, Brandon and Marwan pushed legal boundaries by consciously partaking in illegal activities as a tactic to normalize cannabis and challenge the system. Even at the parties in Panama and London, there were people with very established businesses and jobs within the market – people who spend a lot of time ensuring that their businesses are legal – nevertheless, they were happy to break some laws that restrict cannabis use. In some cases, this behavior showcases their sense of cannabis normality. In most cases, these individuals also believed that they could get away with it. Even though their activities and interests were somewhat opposed, they all shared a common goal through the ongoing movement and need to normalize cannabis. As much as people hoped that cannabis would be wholly accepted, free from legal uncertainty or social concern, it was not quite treated as a regular commodity. In the next chapter, I address processes of commercialization, looking at cannabis as an investment opportunity, and how this factors into reform as a whole.

Chapter 8
Cannabis Commercialization
and its Effects

Introduction

Thus far, I have explored elements of legalization, medicalization and normalization, and have referred to how cannabis has been commercialized. All of these processes are interconnected, and do not unfold linearly. Cannabis products used for medical purposes and products sold over-the-counter for wellness purposes – skincare, vape pens, capsules, pet products, sublinguals, ingestibles or dried flower – need to be manufactured, distributed and advertised differently, according to local regulations and market trends. Ultimately, products need to be marketed. Inevitably, there are opportunities to profit and develop an industry, and these, in turn, depend on entrepreneurs, business activities and commercialization.

Commercialization demands economic strategies for businesses, as they bring new products to market through production, distribution, marketing and advertising, sales, and other promotional activities. In all these cases, the same processes of taking a product, technology or process, and applying it within a business framework, has been significant in the transition from the illicit market to the licit one. This is what Maui and Mabel hoped to do in Colombia with cannabis cultivation, what Jasmin did with CBD skincare in the UK, and what Lorne hoped to achieve in Canada with cannabis ‘lifestyle brands’.

In this chapter, I focus on cannabis as an investment opportunity in Israel, and how people have thought about pathways to commercialize it and implications of doing so. The type of business deals I saw there were enriched by research and innovative practices. Israeli cannabinoid research is renowned, in part because it had been permitted since the mid 1900s. One of the earliest scientific studies conducted about cannabis took place in Israel in the 1960s, by Dr. Raphael Mechoulam, as outlined in Chapter 2. His discoveries became foundational to understanding the

endocannabinoid system, and led to further cannabinoid research (Pertwee 2006). Dr. Mechoulam has been regarded as the ‘father of cannabis research’ (Tovar 2016). People believe he ‘jumpstarted the medical revolution’, a reporter wrote after attending Dr. Mechoulam’s keynote presentation at a cannabis conference in Berlin in April 2019 (Health Europa 2019).

The reference to the ‘revolution’ has continued throughout the emergence of the global cannabis market, even after the notable ‘revolutionary’ events, such as the discovery of THC and CBD. For example, *The Economist* (2019) published an article entitled, ‘a global revolution in attitudes towards cannabis is under way’, and *CNN* (Gupta 2019) published an article entitled, ‘it’s time for a medical marijuana revolution’. A documentary called ‘Grassroots: The Cannabis Revolution’ was shown on YouTube (Real Stories 2020). Whilst various informants used the word ‘revolution’, in connection with the market’s ‘disruption’, others challenged the notion.

Despite Israel’s reputation for advanced research, initiatives for reform continued during my fieldwork. As Jeff, the videographer at CannaTech explained, in Chapter 6, a grassroots movement still exists to support patient access, including illicit channels, such as Telegrass. The Israeli medical market has been slowly developing, according to my Israeli informants. They also described the CBD market as ‘close to non-existent’. Although the Israeli market was not the most advanced commercial market, especially compared to markets in the US, such as California and Colorado, it provides insight into an essential part of the process of commercialization – discovering investment opportunities. In this chapter, I explore the interface between the opportunity of commercialization, market forces, an ongoing movement, and the consequences of this.

Defining Commercialization

In April 2018 and 2019, I attended the annual CannaTech cannabis conference, in Tel Aviv, Israel. I had also attended CannaTech in Panama in February 2019, where I saw Jeff, the event's videographer. Each conference included presentations about science, research, finance, medicine, technology, agriculture and government policy, as it relates to cannabis. There was also a small exhibition hall at each event for companies to showcase their products and services and network with others.

At CannaTech in Tel Aviv, in April 2019, the conference organizer, Saul, welcomed the attendees,

Some of you are here because of the medicine, some of you are here because of the plant, some of you are here because of the economic opportunity, but we are all here. We are in the midst of a global revolution.

Regardless of one's commitment and background to cannabis, Saul believed, any level of participation in the market supported a 'global revolution'.

The concept of the cannabis market as a 'revolution' was revisited in a number of presentations throughout the two-day conference and in conversations during networking. Some of the panels and presentations that addressed the 'revolution' included: 'Innovation and Tech Panel: Novel Medical Cannabis Cultivation, Processing and Delivery'; 'Pioneering White Space for Brands'; 'Develop, Diversity, Deliver: Disrupting Traditional Industries with Cannabis'. All these presentations were based on a common assumption that cannabis had the potential to 'disrupt' established sectors, such as tobacco, non-alcoholic and alcoholic beverages, skincare, and pharmaceuticals through 'novel' methods, techniques and other innovative processes.

One such presentation included the word 'revolution' in its title: 'The Evolution of the Revolution: Next Generation Cannabis Products'. This was

presented by Marcus, a ‘serial entrepreneur’ who founded a ‘specialty pharma company specializing in botanical medicine’, based between New York and Israel. Marcus was known for ‘pioneering’ a company that ‘designed a revolutionary cannabis extraction system’, Saul said, as he introduced Marcus. During the presentation, Marcus spoke about how cannabis ‘revolutionized [the world] in every aspect of the vertical in less than 10 years’. ‘The vertical’ referred to the cannabis supply chain, including cultivation, production, distribution and consumption. He was also referring to its connection to other sectors, such as law, research, pharmaceuticals and consumer good products. He believed that these existing legal, business and scientific structures could be ‘revolutionized’ through cannabis reform and related market activity.

As more countries ‘came online’, as he said, or legalized cannabis for various purposes, the market had evolved. Part of the ‘evolution’ he described was the transition from an illicit market with non-traceable, inconsistent sources and supplies of cannabis to a licit market with ‘high tech grow operations’. These facilities produced quality controlled and lab tested products, which were sold in ‘sophisticated stores that included a shopping experience’. Compared to unregulated cannabis, regulated products were scientifically based, technologically enhanced and ‘consistent, dosable therapies’. He was describing processes of medicalization, as explored in Chapters 4 and 5, elements of commercialization in the wellness sector, as discussed in Chapter 6, and the overall transformation from illicit market operations to regulated business activity. These changes were the result of new regulatory frameworks for cannabis, which led to the professionalization, legitimization and normalization of cannabis in its legal forms.

Gregg, the CEO of Growcentia, also traced the transformation of the legal market in a similar fashion. He said,

The industry in North America has gone from a grassroots, mom and pop shop, predominantly illicit market activity, to a legal market. The legal market has institutional oversight, money, executives transitioning from mainstream businesses, consolidation, branding, education and community activism.

It has grown up into a mainstream CPG [consumer packaged goods] product producing industry with Fortune 100 companies engaged in many of the major players in the industry. For the most part, those people were not involved in the industry six years ago.

Many mainstream businesses and human capital are throughout the entire ecosystem now.

It's also about the consumer side. If you take a look at the demographic of who buys and consumes now, the utilization of products has changed across the board, from age to economic strata, in many places around the world.

The contemporary context of cannabis was contrasted to cannabis activities in the prohibition era and compared to other mainstream goods and the businesses behind them. Yet, transformations were still underway, especially through processes of commercialization.

Two representatives, Helen and Tom, from the international consulting firm, Deloitte, also presented at CannaTech and spoke about the transition of cannabis in its legal forms in different markets. 'Cannabis is an early stage market that is just getting up. It is a commodity exercise, in some parts of the supply chain', Helen said. But, the process of commercialization was not straight-forward, despite being seen as another 'commodity exercise'. Throughout the presentation, they asked, 'how [do we] commercialize cannabis? How does the world access it?'. The use of the word 'access' was two-fold.

On the one hand, access relates to the public, patients and consumers. The law in a particular jurisdiction is a necessary prerequisite for people to access legal cannabis for certain uses, such as cultivation, production, distribution or consumption. Mainstream accessibility also relates to social norms; perceiving cannabis as acceptable, as addressed in Chapter 7, rather than a stigmatized,

dangerous, or immoral substance was significant. But access still requires consumers to have the financial means to afford products. Entrepreneurs must also have sufficient finances to meet the costs of required authorizations and the associated legal fees, as well as to establish a business and start operating. All of this complicates the process of commercialization and commoditization, and although these were recurrent topics discussed, there were mixed beliefs about how to best commercialize cannabis. In this chapter, I first explore how cannabis becomes an investment opportunity, using a case study of Gregg's business activity in Israel, and then return to the significance of commercialization in the market's overall growth and impact.

Exploring Israeli Commercialization of Cannabis

In August 2019, Gregg and I went to Israel to embark on a week-long 'discovery' trip. Gregg left his position at Growcentia in July 2019 and decided to explore new opportunities in cannabis. Since he was no longer bound to Colorado for his job, he began considering other companies and markets outside of the US. Israel was interesting to him professionally, as he had previously conducted business there in other sectors, such as technology, medicine, agricultural technology, and education. Furthermore, Gregg was excited by the amount of 'cannabis research and innovation' taking place in Israel. He said,

At the time [2019], and still [2020-2021], Israel is the number one leader in research in the industry. There was no research going on pretty much anywhere else, at least none of consequence. Sure, there were a few places here and there, but nowhere at the caliber of Israel.

In order to understand what's going on with the plant, learn about new technologies, discover delivery mechanisms, health related utilization and product innovation, the only place to go to find those things was in Israel. But, there is a small consumer market there.

Gregg felt that the size of the market compared to the scale of research conducted was disproportional, not only for cannabis, but for other sectors he had worked in. Therefore, he was keen to ‘find a pathway from Israel to commercialize technology, research and products’. Although he said the purpose of the trip was mainly exploration, he also described his aim to ‘create strategic partnerships for commercialization’. Gregg said,

The discovery trip to Israel is to understand the ecosystem and figure out gaps in the market. We don’t want to create what already exists. There’s a lot of talk. So, we need to go there to understand what is real and not, what has market potential, and who the players are.

He thought that many start-ups had a ‘good idea’, but felt a ‘good idea’ was only a ‘good starting point’. Additionally, he believed that such ideas should have a bigger impact on a global scale, which could be supported by companies that had the ‘right resources, capital, strategy and network to bring an idea, technology or product to market’.

The weeklong ‘discovery trip’ included over 25 meetings with entrepreneurs, investors and researchers at institutes and universities. Each day began around 7:30 AM and finished after 8 PM. We drove to different parts of the country to visit cultivation facilities, office headquarters and research institutes. The research related to seed genetics, intellectual property, pharmaceuticals, life sciences and commercialization, including tech transfers from universities and research institutes and start-ups. Gregg was particularly interested in the medical market during our trip. ‘It’s about being in the market early’, which he believed was key ‘because medical cannabis legalization leads to full-scale legalization, and once you’re in a market you have access’. The type of medical cannabis research conducted in Israel also excited him because of the country’s advantageous policies.

Tony, an Israeli investor we had a meeting with, shared this belief. ‘Be excited by what begins here, but think about the potential for this research,

innovation and creation to be commercialized elsewhere’, he said. Gregg, Tony and many other businesspeople I met, valued Israeli start-ups to mobilize commercialize activity in the ‘cannabis space’. In the next section, I provide three case examples from Gregg’s ‘discovery’ trip. These demonstrate the scope of research and development in Israel and how and why Gregg believed there was potential to commercialize it, especially outside of Israel.

Cannabis Commercialization Case Studies

Plant-based Pharmaceuticals

We met a professor and researcher, Natalie, who worked at a governmental agricultural research institute. The institute’s six research areas include: plant sciences, animal sciences, plant protection, soil, water and environmental sciences, agricultural engineering and postharvest and food sciences. Natalie was part of the plant sciences division. Her research focused on plant-derived medical cannabis and other ‘medicinal plants’ that could be used to treat particular types of cancer and inflammatory issues.

Natalie felt that cannabis was ‘one of the most effective medicinal plants in use for millennia by various civilizations, finding its way in and out of official pharmacopoeias’. Despite her belief in its efficacy, she said that the complexity of the plant challenged her lab. Yet it also provided opportunities for their research. On her profile on the institute’s website it says that the cannabis plant species has ‘more than 600 different secondary metabolites, including phytocannabinoids and terpenoids, present in different ratios and compositions in multiple diverse strains grown around the world’. In order to explore the plant’s complexity, her lab studied medical cannabis on a molecular level, to first identify active compounds that could

be used to create ‘optimal compositions’ to formulate active pharmaceutical ingredients (API) for particular medical indications. Once an API formulation was tested, she explained, other tests might have to be conducted, such as toxicity tests, drug-to-drug interactions, drug delivery and clinical studies. The final stage she described in the drug development process would lead to a ‘new generation of cannabis-based products’, which she said was defined by ‘medical-grade, cannabis products, based on defined content of the API’.

Her lab used plant-derived extractions for product development, rather than synthetic ones, which Natalie explained was a less restricted process. The current regulatory environment was structured around rules for new medications produced from synthetic compounds, whereas regulations around plant-derived medications were not as established. Natalie explained that the typical process for pharmaceutical companies to produce and market products was cumbersome because of highly regulated systems and compliance requirements. Plant-based medicines, in contrast, were considered ‘uncharted territory’, according to Gregg, because it was less common for pharmaceutical companies to use plant-derived material. This is why Natalie’s lab prioritized phytocannabinoids, instead of chemically produced cannabinoids. Consequently, she believed that this ‘grey space’ would help the speed at which her lab could bring a cannabis product to market.

Her belief in the pharmacology of cannabis was important because her lab worked to create products that could be used for medical conditions that affect the general public. Natalie felt that her work contributed to the process of cannabis medicalization through the development of standardized medical-grade cannabis products for medical conditions. But, to her lab, cannabis medicines were unique

because ‘cannabis is a robust plant. There is no replacement for agriculture’, Natalie said. By this, she meant that agricultural diversity, such as the variety of chemical compounds that make up plants, could not easily be replicated in a laboratory. Although chemicals can mimic what agriculture naturally produces, she thought it was difficult to reproduce a crop’s full chemical composition, especially one as ‘robust’ as cannabis. Natalie thought it might take around 20 years to produce a synthetic equivalent drug therapy to match natural plant compounds from cannabis.

Her lab had multiple ongoing projects related to inflammatory diseases. The focus of our discussion was about inflammatory bowel disease and colon cancer. Although Natalie preferred to work in the lab, she was eager to share her lab’s work with patients, at large, by developing drugs that could be widely used, which required funding. One of the projects she mentioned required more than US\$1.5 million. That amount would last between two to three years for the process of drug development. She said the funding would allow her and her team to complete necessary phases to provide evidence of the efficacy and safety of the drug. This funding, she expected, would be best if obtained from private sources and commercial partners, rather than from additional governmental loans or grants. Gregg explained why he thought private capital was valuable to support government-funded projects. He said,

The Israeli government has already funded her lab and projects. Most likely this is because her lab is producing products that contribute to agriculture in the country. The Israeli government would have the ability to learn from research and utilize it to potentially export and provide a body of knowledge for other economic opportunities.

Private money likes public money, from the government, because it reduces the cost of research.

The benefit of private money is that it is usually strategic capital. Private money at the table [in a deal] creates a distribution outlet and a commercialization opportunity. A company [that invests in her research] would likely have first rights on the technology produced so that the private company can bring it to market.

Essentially, collaboration allows private companies to get access, first rights of refusal at a dramatically cheaper cost.

My interest is to bridge the gap between governmental organizations and markets so that they can act as one throughout the commercialization process.

Natalie and Gregg emphasized the importance of a ‘good ally’. They felt that the right partner would be advantageous to bring a product to market, following clinical trials and other compulsory assessments. A ‘good ally’ might be a company or a group of individuals or investors who would not only support financially, but also would have strategic relationships for production, distribution and operational requirements. In addition, one of the advantages to Gregg was an opportunity to conduct research that might not be permitted in the US, due to cannabis’s classification as a Schedule 1 drug. ‘Perhaps we could bring some of the tech off and out of the institution. Ideally, we’d couple it with things that were going on in the US to fill gaps for product development and research that cannot be done there’, he said.

The meeting lasted around one hour concluding with multiple ‘action points to move the conversation forward and to understand the opportunity’, as Gregg put it. He was fascinated and impressed by her research, and appreciated her approach towards commercialization, which encouraged navigating existing and grey regulatory frameworks to increase the accessibility of plant-derived medicines. As a scientist, she understood the botanical uniqueness of cannabis, which challenged traditional pharmaceutical practices and the commoditization of cannabis medicines. Yet she relied on traditional forms of business and capital to fund a tech transfer. Just like any business deal, establishing a strong relationship and finding a valuable partner was crucial.

Seed Genetics Company

On the way to a morning meeting, Gregg said, ‘we are going to one of the leading genetic companies’ for floriculture, called Company F. Company F is a family-owned business that researches, breeds, develops, propagates, produces, sells and markets flower cuttings, seedlings and floral assortments of annuals and perennials. Two members of the company’s executive team, Alice and David, greeted us. They offered coffee, tea, water and fresh fruit. The meeting began with introductions about Company F, which Alice said had ‘more than 500 million cuttings [flower buds, not seedlings, cut from a mother plant] planted in over 60 countries per year’. She added, the company ‘invests in innovation’ by operating ‘one of the industry’s largest R&D departments’ to create ‘superior genetics and traits’ that are protected by plant patents and registrations.

Following their presentation of the company background, Alice and David explained why Company F was interested in cannabis. David explained that over the past decade, investors and businesspeople approached him to partner on cannabis genetics programs. However, after internal conversations with the board, executive team and family, David said, Company F had rejected the offers. Gregg assumed that the reasons were associated bureaucracy, need for legal compliance, stigmatization, market potential, and ‘lack of interest in the [cannabis] space’. A few months prior to our meeting, however, the board of directors had decided that it would be ‘a good time, and the right time’ to get involved in the cannabis market. He said that the board recognized the combination of market development and regulatory shifts, such as new export policies and increased access to research and medical cannabis products for patients. Moreover, David believed that Company F’s own ‘expertise’ in seed genetics could ‘build on years of breeding and genomic

testing’ and apply it to cannabis, which, he felt, as a plant species lacked the same level of expertise.

Company F’s interest in cannabis did not emerge without internal conflict. Alice explained that Company F would prefer to create a cannabis program from its external funding, instead of allocating funding from the company or the family. Furthermore, she hoped to partner with someone who would also help to build a team to run the cannabis division. Although Gregg believed that Company F had the capacity to fund this work internally and build a team themselves, he recognized that there were concerns about perception, liability and other risks that Company F might mitigate by establishing an external partnership.

Alice felt that Company F recognized its own lack of insight into the cannabis market and its global supply chains. This was one of the reasons, she said, they had scheduled a meeting with Gregg. Alice and David felt that Gregg could bring market insight, which would help to organize cannabis research and a breeding program appropriate for a commercial market. For example, Gregg spoke about trends in markets for adult-use cannabis: selling low potency THC products, high CBD ratios, and ‘microdosed’ THC. A ‘microdose’ was less than 5 mg of THC per serving. He also mentioned other cannabinoids that he believed were gaining popularity, such as cannabigerol (CBG), cannabitol (CBN) and tetrahydrocannabivarin (THCV). CBG, Gregg explained, was popular because it is a non-psychoactive, anti-inflammatory cannabinoid, believed to elevate focus and mood. It also mimics the body’s endocannabinoid, anandamide, known as the ‘bliss molecule’, which Dr. Mechoulam first identified in 1992 (Pertwee 2006). Many US-based companies, Gregg said, were introducing products with another non-psychoactive cannabinoid, CBN, which is known for its sedative effects. THCV, in

comparison, is an appetite suppressant, which he thought might be useful for patients on chemotherapy or on HIV treatments. He explained that these cannabinoids were produced at much lower concentrations than THC and CBD, yet with the right genetics and breeding practices, there was an opportunity to breed a seed that yields a higher concentration of one or more of the above.

Although Gregg mentioned other established cannabis breeding and genetics companies in countries with a legal regulatory framework for cannabis, he believed that Company F's advantage was its infrastructure, resources and scientific knowledge, which could be applied to the cannabis plant. He said,

The next evolution of what we're doing in the industry is creating consistent strains and crops. Company F creates consistent crops for flowers.

For example, a purple flower is purple every year. But they come up with different variations and hybrids of that purple flower.

Having consistent crops grow, like any other type of agriculture, which have the same profile, like cannabinoids, terpenes or flavonoids, crop after crop, is valuable. With their tech, other plants should be able to have that consistency, especially once the seeds and genetics are known.

Gregg was excited by the opportunity for research to be used to complement market trends and produce certain cannabinoids that may help treat specific medical conditions. For example, if Natalie's lab required a particular composition of cannabinoids to treat a medical condition, Company F could breed a strain that would yield those compounds in higher, more consistent harvest cycles. For non-medical purposes, Company F could breed genetics that would be most profitable for suppliers in particular jurisdictions with legal wellness or adult-use markets. Alice, David and Gregg felt that Company F could replicate similar processes, using Gregg's insight into the ways in which the cannabis market was evolving and developing, in order to tailor the research and maximize profit for all parties involved.

Overcoming stigma and advanced market development impacted Company F's decision to reach out to Gregg for expertise. As cannabis became seen as a legitimate investment opportunity, and viable form of business development, the market itself experienced growth. Conducting business with existing infrastructure and expertise was seen as advantageous, in part because it could generate quicker technology, research and product innovation. In this way, as external players became involved with internal ones, the market matured and cannabis product variations were enhanced. These types of interactions and potential business deals brought cannabis closer to mainstream business, but there was still more for Company F to learn and navigate.

Cannabis Business Incubator

A last minute meeting was scheduled with Tal Ohana, the Mayor of Yeruham, a small city in the south of Israel. Tal set the tone by explaining that two factories were recently closed in Yeruham, and, for a town of less than 10,000 people, those closures were significant to the employment. Within days, Tal received a call from someone who wanted permission to open a medical cannabis factory. Her initial reaction was to not approve the facility because of the stigmatization of cannabis. 'This is a drug of the past, not of the future', Tal said. However, Tal began to read about medical cannabis, the Israeli market, local regulations and research. Her perception of the cannabis market changed by the time we had our meeting, which was clear when she explained her goal for Yeruham, 'the city will be the international medical cannabis capital'. With two factory closures, the opportunity to establish multiple facilities that would employ hundreds of people was inspiring to her.

Tal heard about a town in Canada, called Smiths Falls, which reminded her of Yeruham. A Hershey Company factory closed in Smith Falls and left many local residents unemployed. The factory relocated to Mexico to reduce operating expenses. Many Smiths Falls residents remained unemployed, until a Canadian medical cannabis company purchased that factory. After hearing the success story of Smiths Falls, Tal continued to learn about new technology developments and research in agriculture, pharmaceuticals and other sectors that overlapped with cannabis.

Another city, Be'er Sheva, sparked Tal's idea to transform Yeruham through medical cannabis and innovation. Also located in the desert, in the south of Israel, Be'er Sheva, underwent a transformation to become a 'global innovation hub'.

When Gregg previously worked in Israel, he learnt about this transition. He said,

Be'er Sheva used to be a remote place that was difficult to reach via public transport. They had an aggressive, young mayor with a similar vision to Tal.

Together with his leadership, the government, JNF [Jewish National Fund] and private industry, they made an effort to spend a lot of money on technology, infrastructure, housing and incentives. The highways connected to there. The train lines were extended. Transportation was made easy.

Now it is a booming center with incredible technological research and innovation. People migrate there for opportunities.

Tal was trying to do something similar with this private-public partnership to build industry through an incubator for cannabis research and development. Cannabis is a leading new industry and Israel is at the forefront of its research.

A technology park in Be'er Sheva was built in 2013 that brought together business and academics (Tsur 2013). Now, Be'er Sheva is known as an urban center for engineering, technological innovation and cyber intelligence, and has been referred to as 'the Silicon Valley of Israel' (Karie 2017). Similar to Be'er Sheva, Tal's vision for Yeruham was to attract people to the city through research, technology and production of medical cannabis.

In summer 2019, the Israel Innovation Authority (IIA) announced a tender for ‘high-tech incubators’, such as agricultural, security and technology sectors. This tender included the sector of medical cannabis for the first time. The goal of the ‘technological incubator program’ was to ‘transform innovative technological ideas from the initial stage of research and development into viable startup companies and help them reach a significant fundable milestone’ (Israel Innovation Authority 2019). The incubator was defined as ‘an organization engaged in the business of fostering early-stage companies through the developmental’ process (Health Europa 2020). It would be created to accelerate the growth of early-stage start-ups by supporting companies with human and capital resources, necessary equipment, office or lab space, government support, access to advisory opinions from industry experts and other strategic aid. Tal saw this an opportunity to receive funding to help stimulate Yeruham’s local economy, create jobs and transform the city, similar to Be’er Sheva and Smith Falls. During our meeting, she explained how the tender worked: a consortium of companies and the IIA, together, would invest around 150 million shekels, around US\$47.8 million. This funding would support the operation of the incubator, which intended to welcome 30 companies over five years. Applications from ‘periphery towns’, those outside the urban hubs of Tel Aviv and Jerusalem, such as Yeruham, were preferred to contribute to the economic growth of smaller towns.

The tender application included strategic partners, companies that could add experience, expertise and cannabis-related value to the incubator, and equity partners, companies or individuals who could add financial support. Tal explained that strategic partners would bring market experience that would be used to lead, guide and direct the development of the incubated cannabis companies. Equity

partners, in comparison, Tal said, would add ‘capital to invest’ in research and development. Medical cannabis was a sector that, she felt, provided an opportunity to create jobs and research. Even more, it was a platform that she ‘could build a story around’. Nonetheless, there was competition from other cities, other sectors, and other consortiums of medical cannabis partnerships eager to win the tender.

Prior to meeting Tal, we met with some of the companies that were part of the Tal’s consortium. Cannabis cultivators, investment funds, consultancies, event organizers, distributors and pharmaceutical companies offered different forms of expertise. Gregg was keen to join one of the consortiums that Tal had organized. He said,

The goal was to join the application with other companies as a value add partner. We were interested in participating in the process. The idea was to bring a North American piece to the collaboration. But, it turns out, they already had it in place with some of the big players. So, they didn’t need that component.

A few months after our trip to Israel, the tender closed and was announced in December 2019. One of the three tenders was awarded to one of Tal’s consortiums, which included OurCrowd, an investment fund, BoL Pharma, a cannabis cultivator, and RX Pharmaceuticals at Perrigo, a pharmaceutical company (Greenberg and Pick 2019; Halon 2019). Prior to the tender, Perrigo operated a manufacturing plant in Yeruham that employed over 650 people. ‘Its familiarity with the city and region will also contribute to the success of the project’, OurCrowd founder, Jon Medved, said (Yaari 2019). Jon said that OurCrowd’s main contribution would be ‘to find startups with breakthrough technologies, make seed and follow on investments and equip them with all the necessary tools for success in the international market’ (*ibid*). This type of financial support is what Jon believed start-up companies needed in order to bring their technology and research to market.

Jon emphasized the significance of capital in the development of commercialization, not only within Israel and locally in Yeruham, but internationally, in the global cannabis market. ‘The government and consortium intend to transform the town of Yeruham into the cutting edge of the global medical cannabis market, which is projected to expand to US\$59 billion in 2025’, Jon said (Yaari 2019). Once the tender was announced, Tal said, ‘the incubator will serve as an anchor for innovators from around the world and will upgrade the activities of entrepreneurs, who are already in the process of allocation of land for the establishment of cannabis extraction plants in Yeruham (Health Europa 2020). The intention for the incubator was to create ‘breakthrough technology in the medical cannabis field’ by each cohort of six start-ups admitted annually for five years (Solomon 2019).

The incubator might become a hub for medical research similar to Natalie’s, plant science and research similar to Company F’s, or other relevant research and development that would be valuable to cannabis product forms. Ultimately, their goal was to generate economic value for Yeruham and Israel’s cannabis market to contribute to foreign opportunities within the global cannabis market, such as commercializing products in North America or Europe.

In these three cases, there was an acknowledgement of the potential value of cannabis, whether as a medicine, an agricultural product, a scientific topic and an investment opportunity. In different ways, investing in cannabis research was a form of economic and business development. As Company F and the Israeli cannabis tender demonstrate, the investment opportunity in cannabis seemed to be too great to pass up. Although there were economic motivations embedded within each case, at the core, patients and consumers were driving the type of research and product

innovation conducted. Various activities supporting innovative cannabis products required involvement from people within the market, to provide expertise, capital support, and other strategic value. Some of these activities even had potential to ‘disrupt’ existing regulatory frameworks and scientific methods, but there was still a long way to go. Regardless of the outcome, these initiatives would contribute to an element of market evolution. The commercialization of cannabis connected local businesses and people to global interests and supply chains, which, ultimately, advanced the market as a whole and the strength of the campaign for legalization and normalization.

Commercialization and its Impact

Commercialization: Pragmatic Optimism

Throughout my fieldwork, I heard about potential ‘disruption’ caused by cannabis legalization and marketization and ongoing transformations involved. But there were unfulfilled optimistic frames, such as the ones I discovered in Colombia, as well as challenges, such as the need for strategies to normalize cannabis, as demonstrated in Chapter 7, and the regulatory difficulties faced by the CBD wellness market, as described in Jasmin’s deck for Ohana. Some people hoped for a ‘revolution’, whilst others were more pragmatic about it just being an ‘evolution’.

In the US, Gregg explained, ‘there is around 60% support for medical cannabis legalization. To me, I’d call that an evolution now. We’re over the 50% mark. Getting to 20-40% was when the revolution occurred’. This transition, from revolution to evolution in the US, in Gregg’s opinion, had occurred recently.

He said,

In North America, in 2019, it's an evolution, not a revolution. But, if you asked me in 2012, 2014, maybe even 2016, in Colorado, it was a revolution [Colorado was one of the first states in the US to legalize cannabis for adult-use purposes in 2012].

That type of change is not about regulatory influence; it's about citizenry movement and the power of people on the street. It was an aspect of realization and acceptance of the idea that cannabis, like many plants, has medicinal value.

When you combine economic impact, tax benefit to national and local economies, the healing properties of the plant and the amount of research dollars funded, it all swings in favor [of cannabis legalization].

The type of changes Gregg described happening after 2016 were incremental, in comparison to the prior revolutionary shifts. He felt that the government and the public's level of acceptance, or normalization, of cannabis, revealed local campaigns for more specific cannabis policy reform. He explained,

In other parts of the world, it is either a revolution or evolution, which depends on how people are banding together to move their government, based on popular desire and wellbeing. If it's overwhelming in one direction to support legalization, but the government is on the other side, you end up with a revolution.

We are still straddling the fence of revolution or evolution in various markets. But, if you look at the global market, it is an evolution. Once the US goes federal [when the US legalizes cannabis at the federal level], that'll be part of the acceleration of the evolution.

Within the market itself, however, Gregg felt that cannabis use and activities were accepted and existed in a frame of normality. He said that the 'conversation' around cannabis, as an investment opportunity, a plant to research, or a sector to join, was less controversial than when he entered the market, in 2015. To him, and many of my informants, cannabis was part of normal daily conversations at work and home. In this way, the market was 'less of a revolution' to Gregg. Nonetheless, he believed that the people involved in the market had a responsibility to support the evolution of its growth and the overall impact of the movement. He said,

The industry plays a significant role to educate all stakeholders throughout the entire ecosystem, from government regulators and researchers to various parts of sales channels to end consumers.

Gregg, similarly to almost all people involved in the commercial side of the market expressed a sense of commitment to educate others, not only for business purposes

but also to support the overall movement. This inevitably factored into the way the market, products, and policies evolved.

During Gregg's discovery trip, there was a sense of optimism about most meetings and businesses. There were positive research and opportunities he felt could capture market share. Gregg was prepared to take advantage of this, but others were more skeptical about the market, as a whole. Even so, Gregg did not consider the market to be as revolutionary as some people framed it. There was a different side to commercialization, one that was more critical and negative.

Commercialization: Negative Implications

When I was at CannaTech, in Tel Aviv, in 2019, I met Leo, a creative director from Canada who was more critical about commercialization and the effects of capital forces. Leo, at that time, worked with Lorne, the Canadian investor and entrepreneur who launched cannabis 'lifestyle brands'. They had only been working together for a few months before attending CannaTech. Nonetheless, he was as committed as others described in this thesis to 'bring cannabis into the mainstream'. Prior to entering the cannabis market, Leo worked on strategy for mainstream consumer brands. He described himself as someone new to the 'cannabis space', especially compared to some of his colleagues who had included cannabis in their lives for many years and decades.

I met many entrepreneurs, investors and others who perceived time as 'dog years' in the cannabis market, as I described in Chapter 3, since days and months felt like a 'lifetime', due to perceived rapid growth and change. But, Leo did not feel that the market itself, nor the base of cannabis consumers, was shifting as quickly.

He explained,

Part of the problem is that you still have this very strong faction of closeted users who still want it to be a revolution, and that's not how you are going to get to commercialization.

Normalization was our big premise: how do you get it to a place of where people know how to use it, know what to use it for, know the experience will be consistent so that they can count on it.

Then it's about the idea, 'how do I use it for doing good?', as a medicine for good that is accessible and doesn't require a prescription.

Those things still haven't happened, and it's so surprising that it still feels like a subculture and it still hasn't broken through, and that's part of the strangeness to it.

Whereas Leo still viewed the cannabis market as constituting a subculture, many others described ways it had transformed. Nonetheless, Leo described disconnect between the optimism of rapid change and the reality of disruption. Leo said,

For some people, it really is about a revolution. For people like Lorne or Saul, cannabis has been part of their life forever. For them, they see that cannabis is finally getting the acceptance and the open dialogue that they always wanted to happen.

Referring to the 'global cannabis revolution', as Saul did throughout CannaTech, was meaningful because the phrase represented the current success he saw and the trajectory that he hoped the market would achieve. However, Leo had a contrasting view. He said,

The industry is growing, but its not growing exponentially, like everyone thought. It is growing with committed users, more so than new users, which still remains a challenge.

Everything is just much slower and taking more time, and that's just not going to unlock the potential of the industry yet.

There was slowness about the process of reform that he thought tested the market to maximize its ability to normalize and commercialize cannabis.

Despite these challenges, Leo strategized about how to 'move cannabis from a subculture into a mainstream one'. His starting point was recognition that the regulated market developed out of an illicit market. He saw the market's emergence as an ongoing, historically embedded evolution. Leo explained,

We're talking about an industry that is in shift. It is constantly changing. It is not creating.

It is a rebirth, recreation or evolution, for example. It's not a revolution because the pieces have all been here.

Leo gave the example of digitalization and globalization, two existing processes, which he thought could have better supported the development of the cannabis market. For instance, he was surprised that systematic processes were not automated at cultivation facilities, new software was not used at retailers and digitalization was not universally applied within businesses. 'Why are we creating an industry that is coming into a platform that lacks advancement? We ought to ask ourselves, "why is that?"', Leo said. He gave an example about tissue culture, and said,

A client we're working with in British Columbia is in the plant tissue culture space.

When you go buy strawberries and blueberries and raspberries, those are created by plant tissue culture, which is why they are all of a certain size, color and taste.

Plant tissue culture is pathogen free, disease resistant and the purest form. You could actually sample it and say, 'this is OG Kush [a cannabis strain]' and know that this *really* is OG Kush.

Plant tissue culture is really the way forward. It has been proven in other agricultural, even flower growing. But, [the] cannabis [market] still believes in a 30-year-old guy who has grown up, in the last two decades, growing cannabis and cuts by hand. That is how we grow our plants.

That is not the way the future should be for the business, yet for whatever reason, people are stuck in their ways. That's why things aren't moving fast.

The benefit, and opportunity, of a new market established in the 21st century, was something that Leo felt could build upon the availability of 21st century technology and knowledge. It could be used as an advantage to differentiate the cannabis market from all sectors that preceded it, which was part of the hope echoed at many events I attended. In this case, emerging forms of business, agriculture, and law reflected existing systems, structures and behaviors they were built upon. The promised degree of innovation, or disruption, was somewhat absent, according to Leo. Leo said,

Yes, the industry continues to change. But, it continues to keep doing the same thing. Observationally, there are always things I see.

I just write behaviors on a sticky note, so I can say, 'what's going to happen with that?'

Right now, I probably have a lot of seeds of new behaviors, but nothing that turned into anything that is traceable.

Through the next two generations, what will change? Because over the last four to five years, very little has changed.

He felt that capital markets and economic incentives also drove static norms and behavior. ‘New capital’, Leo explained, was not created to fund cannabis-related projects and initiatives, but rather, investors, with preexisting capital to deploy, were driven by commercial opportunities. Many investors in the cannabis market, Leo said, expected short-term ‘exits’, a strategic plan to liquidate one’s ownership, or stake, in a company by selling the business. He said that it was common to participate in cannabis businesses for about five years and ‘leave the industry or the company behind’. Five years within an industry, which was emerging and constantly changing, was not a significant period of time to Leo, and the constant turnover, he felt, did not allow the advancement of the market and movement.

He asked, ‘how do you unlock the potential of this market if people are leaving because all they want is an exit strategy?...Capitalism is driving this’. In other words, he thought incentives for quick profit contributed to fragmentation of the ‘ecosystem’ of stakeholders, which, consequently, influenced the growth of the market. Leo said,

Everyone thought the industry would be massive and it would be worth billions of dollars and legitimized. All of those revolutionaries thought they could make real, legitimate money.

But in reality, the illicit market continues to exist. The legal market is not growing to a point that people can get to what they want out of it.

The loser in all of this is the ability to do good.

Marketization led to hopeful investors and businesses eager to receive high returns on their investments. These individuals, he said, spoke about ‘fighting the good fight’, and this mindset has already been adopted in another legal reform.

Leo explained,

Interestingly, a lot of early stage cannabis people have shifted over to psychedelics and the rinse and repeat method is happening there now. A lot of people who said, ‘I did this in cannabis’, are now saying, ‘I’m going to fight the fight for psychedelics’.

Ultimately, most of those people are motivated by money; they think they’ll make a big wack of cash by being early stage investors.

Cannabis, he believed, was used as a means to an end – to receive a high return on investment in a short time – and psychedelics could be at risk of the same. These substances became a vehicle that investors and entrepreneurs had used for business purposes, but in many ways had already existed. Cannabis has not ‘revolutionized the way business is done’, Leo said.

Leo observed splinters that grew between moral and monetary factions within the movement and market. Even as commercialization increased, the subculture and its ethos also did not disappear. He did not deny that change happened, however he was skeptical about the market and media’s hype of radical change. The use of the word ‘revolution’ was significant to frame its potential growth and mobilize people. But the reality of the rise of market forces, especially in early stage markets, such as in Africa and Latin America, did not necessarily experience remarkable revolutions.

Case Example: The African Cannabis Market

Leo and I went to a session at CannaTech called ‘Cannabis in the Cradle of Civilization: The African Landscape’. This presentation was about regulatory frameworks in African countries that permitted the use of cannabis for various purposes and the development of commercial opportunities. Although there was one main speaker, the session unfolded as a dialogue amongst the audience. One of the attendees, James, was from South Africa, a country that legalized cannabis for medical purposes in 2018. James said, ‘the African narrative is used as a branding tool’. The awareness of the ‘opportunity of economic development, to generate

revenue and to create jobs’, James added, was part of the reason he thought certain countries implemented a regulatory framework for cannabis.

However, he felt that the historical context of ‘foreign, white investment had exploited and extracted’ crops in the past and will do that again throughout the global cannabis supply chain. He was worried that cheap production of cannabis in African countries would follow the same path as other historical exploitative markets, such as coffee, tobacco and sugar cane. The main issues with these crops was that extensive work was required to farm the crops, yet the raw material was sold inexpensively and then retailed for high prices. He felt that the work of local farmers and their crops was not valued for what it was worth in later stages of the supply chain, once finished products were sold outside Africa. Another entrepreneur who attended the session from South Africa, Monica, also did not want a replication of the past. ‘This needs to be Africans for Africans. We need to have new conversations and to have jobs and brands for our people. Contextualize what is already being demanded. We’re not doing exploitation again’, Monica said.

James and Monica hoped that the growth of the South African market would take a distinctive form in South Africa as a country and Africa as a region. The opportunity to distinguish the value of cannabis from other cash crops, such as coffee, tobacco and cacao, and its supply chain, was encouraging to them, but the resemblance to other historical developments of other crops, which had been exploited as raw material, seemed to reflect the current development of cannabis cultivation in Africa. Rather than the rise of cannabis as a profitable crop challenging old systems and structures, it appeared to them that there was potential to repeat the mistakes of the past. The issues that James and Monica addressed were concerned with how businesses used the global supply chain to ‘exploit’ local costs,

such as resources, labor and operational costs, in Africa in order to maximize profit margins.

Contrasted to Monica and James' opinion was a businessman from the US, Tyler, who felt that various regions should be hubs for specific stages of the supply chain. For the most competitive price of costs of goods, Tyler felt that the responsibility fell on Africa, and Latin America, as I outlined in Chapter 4, to produce cannabis. He thought those two regions, from a global perspective, were the right places to encourage production in order to produce competitively priced goods. 'It makes sense to compare the two because the cost of production, labor and the advantages of the climate are all of the reasons people said Latam [Latin America] was an attractive market', Leo said. Tyler added that the price of cannabis per kilogram and pound had continued to decrease and the amount it cost to produce was increasing. Outsourcing production to cut operating expenses made sense to a business minded person, such as Tyler and investors I met in Colombia.

Another place with low cost of production was China, which Tyler believed would produce the largest biomass of hemp, containing less than 0.3% of THC, to meet US demand. Tyler explained that the US drove 'consumerism of the market' and Europe drove demand for medical, or pharmaceutical-grade, cannabis. To cultivate low cost cannabis for medical or wellness products abroad and distribute accordingly was part of the process of commercialization of the global supply chain. Tyler said, 'as an industry, we need to come together collectively', and this 'collectivity' was needed to maximize a revenue model through profit and margins. On the one hand, Tyler, Monica and James agreed on the opportunity in emerging foreign cannabis markets. On the other hand, Tyler disagreed with Monica and

James about how globalization and commercialization should utilize social systems and economies.

The concern that exploitation was reoccurring in a ‘neocolonial’ fashion was something Leo also mentioned. He shared a story about a group of investors who, in 2019, identified projects in African countries that had implemented regulatory frameworks for cannabis cultivation for medical purposes. Months after they had signed the paperwork to close a deal with an African company, Leo said they expected that the project would be operational. After a few months passed, however, they found that the land had been abandoned, jobs were not secured and opportunities were not fulfilled because the company did not execute its commitments. Its focus was on operational management in other locations. Political leaders of the country then asked the investors, ‘where was the impact you once promised?’.

He thought Lesotho and South Africa were exemplary of this issue. Lesotho legalized the cultivation of cannabis for medical purposes in 2017 and South Africa decriminalized cannabis for all purposes in 2018. He said,

Entire countries have a whole issue around land races [buying licenses to cultivate cannabis]. They really thought that it would be the panacea, and it would save and cure so many ills, and it stalled. It was stuck in limbo. That’s really unfortunate.

As legalization unfolded in jurisdictions around the globe, the commercial opportunities, for businesses, their operations and expenses became increasingly attractive. However, the impact of commercialization, as Leo described, fragmented the market’s growth. To understand this perspective from someone in Africa, I interviewed Claire, a social activist and venture capitalist within the medical cannabis market. Originally, my interview with Claire was for a guest blog post for CannaTech’s website, which was used in promotional material to lead up to its conference in South Africa in Fall 2019.

Claire's Case: Cannabis Commercialization in Africa

Claire was born in Zimbabwe, came to the UK to complete her university education, and moved back to Zimbabwe to start an investment advisory fund. She said,

The fund is committed to setting the standard for sustainable production practices and high-quality medical cannabis, by utilizing state of the art cultivation methods that leverage the region's agricultural ecosystems and ecological advantages.

Claire was excited by the opportunity in Africa for cannabis. 'There is no better chance than with African cannabis to right the wrongs we have experienced and avoid the creation of yet another exploitative crop built on neo-colonial value-chains and structures', Claire said.

She felt that 'the biggest part of the Africa story is the incredible opportunity'. Thus, prior to publishing the article, she asked to reorder the structure, which originally discussed investors' inactivity in the region. Claire said,

I'm keen to not demonize the few investors who have been brave enough to jump in and swim in the water. By starting with them [in the article], and say that they're not doing "shit", would take away from the story of Africa. There is so much money flowing around [the cannabis market] and so little of it is into Africa.

She wanted readers to takeaway the 'promise' of Africa and consider how it is an 'opportune' time to invest in cannabis projects in Africa. Given the degree of risk for cannabis investments, with the added layer of the uncertainty of Africa, Claire wanted to depict the opportunity as a positive one.

Claire's hope was to create a 'non-exploitative agriculture industry', which she believed 'would be the first, in human history'. By 'non-exploitative', Claire meant that local farmers, producers and distributors would be valued for their work and not seen as 'cheap labor'. She explained,

There is an opportunity to do that...Make sure Africa is not just producing the raw material commodity item that is getting shipped up to Europe, or wherever.

This is what we did for tobacco, which is why Zimbabwe is the fourth largest producer in the world and we get pennies in terms of the value of that industry.

Common crops, she said, which were grown for a low price and marketed at a high price were tobacco for cigarettes, cacao for chocolate and coffee beans for coffee. Claire identified a similar trend with cannabis for medicine and wellness products. The ‘wealth creation’, Claire said, was outside the places of where the raw materials were produced. She did not limit the exploitation of such crops to Africa. ‘Where impoverished farmers around the world, in Latin America, Asia and Africa, can grow this incredible plant [cannabis], they should access some of the wealth creation that is happening around the world’, Claire said.

But Claire still had concerns about the development of the cannabis market in Africa. For example, she spoke about ‘parking licenses’, which meant obtaining a license to cultivate in a particular country, usually in reference to Latin America or Africa, with ‘no intention to be operational...until the price of production where they are currently producing drops enough to incentivize them to move to a place of cheaper production’. She also felt that companies who ‘parked licenses’ were speculative and focused on short-term gain, similar to Leo’s story of investors in Lesotho. She provided an example about Lesotho. Claire said,

In Lesotho, licenses for six funded companies range from 15 to 100 million dollars and these are companies that are almost all not producing. How do you get a 100 million dollar evaluation [of a license] when it is not producing?

Claire’s comments shed light on the post-legalization implications of commercialization. The licensed land she referred to in Lesotho was not valued according to the plants harvested or products manufactured, but rather based on external factors, such as capacity, stock prices, assets and supply chain agreements, which contributed to the ‘estimated value proposition’ of the land. Claire felt that these evaluations were tied to the marketing and branding undertaken by companies and said that people need to ‘stop buying into the hype’. The ‘hype’, she believed, added monetary figures to a piece of land that was connected to current and

historical socio-economics of Lesotho. Claire implied that ‘parking licenses’ went against the main reason – economic purposes – African countries, such as Lesotho and Zimbabwe, had legalized cannabis. Although she believed it might take a few years for companies to profit and governments to reap the benefit of actual production, she felt that non-operational facilities ‘defeated the purpose’ of legalization.

In places like South Africa, Lesotho and Zimbabwe, legal reform for cannabis itself could be considered ‘revolutionary’, and the opportunity to be the ‘first non-exploitative’ industry could also be classed as ‘revolutionary’. Some people hoped that a different crop could transform historic exploitative practices. But history also indicated the risk of introducing market forces. The aspect of ‘doing good’, as Leo described it, in this and other post-legalization processes, come into conflict with capital interests and commercial activity. Although my informants experienced a common hope of instilling change through policy and business activity, there were differences about the purpose of reform and how moral and economic imperatives should play a role. Leo believed, ‘the movement is fragmented and it will make it much harder to get to normalization’, but fragmentation does not mean that reform inevitably stalls.

Leo was critical about process of commercialization and its effects. Similar to Gregg, Leo believed that the market was more evolutionary than revolutionary. Even so, there was a spectrum of beliefs, ranging from optimistic to realistic ideas, and varying degrees of criticism about the market’s transformation. Some people slightly regretted the move away from the movement’s grassroots values. Leo was skeptical about the reality of market activity. Importantly, he also acknowledged that there were disadvantages of capital markets. In Africa, processes were fairly

fragmented and more vulnerable to exploitation, due to the context of general economic trends and experiences there. Leo highlighted some negative elements of the market, tied to effects of commercialization.

Conclusion

In each phase of reform, there was a strong sense of hope and optimism that the effect of legal reform can generate significant impact and disrupt social, legal, economic, environmental and scientific structures. People hold onto the idea that cannabis, in part due to its complexity, can impact the world in a diverse set of ways, whether by challenging traditional pharmaceutical practices, generating economic development in small towns or setting a precedent by being non-exploitative.

Although some people were attracted by the idea of disruption, the market has relied upon existing systems and structures, such as technology, regulations and science, to aid the evolution from illicit to licit. Natalie's lab used existing pharmaceutical standards but depended on less robust regulations for plant-based medicines to expedite her research and its commercialization. Company F's existing infrastructure and expertise with seed genetics became valuable when it entered the cannabis market, but it relied upon external insight to market products and knowledge. Cannabis also offered Tal an opportunity to transform Yeruham, which required capital support from economic players, political support from the government and other strategic partnerships. The process of commercialization meant something different to each one. Nonetheless, that connected legalization to its evolution, and brought the industry closer to market forces and their effects.

Even within these very commercial processes, there were also moral imperatives the need to educate, as Gregg expressed, to promote the movement. He was not purely involved in a commercial context, there were other processes tied to campaigning for reform. This connected to the roles and strategies people involved in the market undertook to normalize and commercialize cannabis, whether strictly for business purposes or not.

In this chapter, I have explored different examples of commercialization and how some of these processes unfold. Capital forces became involved, which was necessary, as I have shown, to develop the market. I also illustrated how the promises of revolutionary language impacted this. At conferences, people expressed the ideals and hope of the market, emphasized concepts of revolution and disruption, promoted the sense of social reform, and highlighted the benefit of medical cannabis to patients and decriminalization. But, there were related tensions between optimistic ideals and the commercial reality.

Some of these tensions were most evident in Africa, where enthusiasm was somewhat tempered by cynicism about business practices. There was also the fear of the repeat of historical exploitation. Some cannabis businesses, nowadays, operating in Africa were very positive and live up to their promises. Yet, in 2019 and 2020, there was still criticism tied to companies that engaged in a land race strategy, which were ultimately abandoned or non-operational. Although these tensions are obvious in Africa, there are similar conflicts present in Asia and Latin America. The case of Africa highlights larger concerns about negative effects of commercialization.

Whilst capital forces were important and inevitable, understandably, people were weary of this within the market. At the same time, there was also a danger about economic forces entering a new emerging market. Even though business

incentives became important in the market, people kept circling back to moral imperatives. In the next chapter, I turn to the impact local reforms and a global supply chain had on the international framework of cannabis policy, at the United Nations and World Health Organization.

Chapter 9
Cannabis Policy: Reform at the
UN and WHO

Introduction

The rise of cannabis research, business activity, investment, ongoing advocacy and changing national policies became so widespread that by 2016 international policymakers could not ignore pressure to reform cannabis policies. As outlined in Chapter 2, the three key international drug policy treaties are the 1961 Single Convention on Narcotic Drugs (as amended by the 1972 Protocol), the 1971 Single Convention on Psychotropic Substances, and the 1988 Single Convention Against Illicit Traffic in Narcotic Drugs and Psychoactive Substances. These codify measures to control substances, such as cannabis, cocaine and heroin, permit use for medical and scientific purposes, and aim to prevent diversion and drug trafficking.

Under the 1961 Convention, substances are scheduled according to their potential for addictiveness and dependence, abuse liability and medicinal and therapeutic use. Schedule IV is the strictest classification, followed by Schedules I, II and III (UNODC 2020). In the 1961 Convention, cannabis and cannabis resin, respectively, are described as,

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 and as the separated resin, whether crude or purified, obtained from the cannabis plant (WHO 2019).

Prior to 2020, cannabis and cannabis resin were classified in Schedules I and IV in the 1961 Convention, and cannabis extracts and tinctures were categorized in Schedule I.

Under the 1971 Convention, Schedules I to IV are listed in order from most to least restrictive, according to potential risk of abuse, threat to public health and therapeutic value. When the 1961 Convention was drafted, THC (Delta-9 Tetrahydrocannabinol) had not been identified as one of the main compounds in cannabis. Israeli professor, Dr. Mechoulam, and his lab, had only identified THC as

an active compound by 1964 (Pertwee 2006). By 1971, THC was recognized as a key active principle of cannabis, and it was classified in Schedule I. In 1991, THC was descheduled from Schedule I to Schedule II, but THC isomers – compounds that contain the same number of atoms as THC, or formula, but are arranged differently – remained in Schedule I (Riboulet-Zemouli, Krawitz and Ghehiouèche 2021).

CBD has never been scheduled in the international conventions. But, there was debate about this, in part because of increased supply of over-the-counter CBD products around the world. In 2017, CBD became the first cannabis compound to be subjected to a scientific review processes for possible scheduling in the international treaties. However, the process for cannabis products was uncharacteristically complicated, politicized and delayed. There were many agencies and stakeholders involved, including the World Health Organization (WHO), Commission on Narcotic Drugs (CND) and Member states, International Narcotics Control Board (INCB), United Nations Office on Drugs and Crime (UNODC), civil society and other researchers, officials and activists.

The CND is the governing body of the UNODC, headquartered in Vienna, Austria. It is also the body acting as a ‘conference of Parties’ to the treaties. Each year, the CND convenes for one week, which is usually held in the first quarter of the year. Later in the year, the CND also holds two-day sessions to discuss budgetary and administrative issues, intersessional meetings for drug policy guidance, informal consultations and special events relating to projects and resolutions. There are 53 elected member states that comprise the CND, including 11 African states, 11 Asian states, 10 Latin American and Caribbean states, 6 Eastern European states, 14 Western European and other states, 1 rotating seat

between the Asian and Latin American and Caribbean states. In addition, there are five subsidiary bodies – Heads of National Drug Law Enforcement Agencies in Europe, Latin America and the Caribbean, Asia and the Pacific and Africa, and the Subcommission in the Near and Middle East. Only the 53 member states possess voting rights, but other countries participate without voting rights. There are also other represented stakeholders – civil society and UN officials from field offices and UNODC offices – who can participate in dialogues and make formal statements. Civil society is composed of non-governmental organizations, community groups, labor unions, indigenous groups, charitable organizations, faith-based organizations, professional associations and other foundations related to drug policies. These groups must have authorized status to attend UNODC meetings. Over the past few years, engagement between UN agencies, member states and civil society has been strengthened, allowing for the exchange of perspectives from people, themselves, impacted by drug policies.

The WHO is a UN agency dedicated to international public health. As it relates to controlled substances, medicines and other drugs or treatments, the WHO monitors, provides scientific expertise and guidance, publishes reports, disseminates information and tools, and makes recommendations to the UN about drug controls. The WHO's Expert Committee on Drug Dependence (ECDD), a scientific advisory body, convenes annually to review the potential for abuse or dependence on psychoactive substances. The meetings are closed, but open sessions are accessible to civil society stakeholders and researchers. I attended two ECDD open sessions in Geneva, Switzerland that reviewed cannabis and its derivatives.

The INCB, an independent and quasi-judicial expert body of the UN, was established by the 1961 Convention. Its role is to monitor drug controls as it relates

to the three international conventions and centralize information related to international trade in controlled drugs for medical and scientific uses. The INCB's mandate is to oversee treaty implementation through data collection, monitoring illicit activity, government dialogue, annual reports, and training programs, but INCB has no judicial role. For example, the INCB might identify misreported information and statistics on the legal trade in controlled drugs or ensure states have adequate supply of controlled medicines. There are 13 elected members that serve for a four-year term, 10 are nominated by governments and three are nominated by the WHO. But, each member is supposed to be impartial and independent of their government.

These agencies and processes were unfamiliar to me until 2018, when I attended my first CND. Throughout my fieldwork, I had little interaction with government officials and representatives from international institutions. However, international drug policies were frequently discussed at conferences, events and meetings. The 1961, 1971 and 1988 Conventions have been perceived as restricting particular jurisdictions from relaxing their cannabis policies, due to potentially violating treaty obligations (Van Kempen and Fedorova 2019). Jurisdictions that regulated cannabis for all purposes, including Uruguay, Canada and some states in the US, were scrutinized because of tensions with these obligations. Yet, cannabis businesses were continuously being founded, markets were developing and investment was increasing. In this chapter, I explore the complexity of the internal processes at the UN and WHO as they relate to the shifting classification, research and commoditization of cannabis.

History of Cannabis Scheduling

In 1925, cannabis was first subjected to international controls, the ‘International Convention relating to Dangerous Drugs’, only after ‘brief consideration’ (Riboulet-Zemouli et al. 2021). There was ongoing debate about the need for medical standardization, due to potency, and the risk of illicit supply chains. By the 1950s, the WHO recommended that ‘there should be efforts toward the abolition of cannabis from all legitimate medical practice’, and the 1951 UN Secretary General Trygve Lie upheld similar beliefs. Dialogue about medical uses of cannabis was restricted when the 1961 Convention was enacted. Riboulet-Zemouli et al. (2021: 3, 8) argue that ‘the placement of “cannabis and cannabis resin” in Schedule IV of the 1961 Convention...was inconsistent with the history of uses of the plant in indigenous and Western therapeutics, and ignored the science’ and had not been ‘substantiated in any sort of scientific assessment’. The therapeutic value of cannabis ‘dwindled to practically nothing’ (Mikuriya 1969: 38), and, subsequently, access to cannabis medicine and research was restricted.

The 1961 and 1971 Conventions outline a formal process for reviewing and recommending substances before CND member states vote on its schedule in the international conventions. The procedures to schedule substances begin with a notification, by a member state, the CND, WHO, INCB or an organization in ‘consultative status with the WHO’, which is then given to the CND and the Secretary General (Riboulet-Zemouli et al. 2021). Subsequently, state parties are asked to comment. Depending on the nature of the substance and its review requirements, either the INCB or WHO becomes involved. The INCB is tasked with the assessment of substances relevant to the 1988 Convention. The WHO is ‘tasked

with the medical and scientific assessment of the substance in question' for the 1961 and 1971 Conventions (UNODC 2020). Usually, this process takes about one year.

The WHO's ECDD convenes annually to conduct such reviews. There are typically less than a dozen substances to be reviewed. Each substance undergoes a pre-review, usually followed by a critical review at the same meeting or the following year if more information is needed. The reviews and recommendations are based on scientific evidence, potential harms, toxicity reports, fatalities, epidemiology and therapeutic use. The WHO can make five potential recommendations: to 'schedule' a substance for international control, change a schedule ('reschedule'), remove from the schedules ('deschedule'), require further evaluation and monitoring due to lack of evidence, or reject scheduling. These recommendations are then presented at the CND.

The voting process begins with introductory remarks by a representative of the WHO or INCB. This person provides information about the substance, its review and recommendation. CND members are then called to raise their country signs to vote. The Secretary counts 'votes in favor', 'votes against', and 'abstentions'. A simple majority is required for substances in the 1961 Convention. Two-thirds majority is required for substances in the 1971 and 1988 Conventions. Once all votes are counted, the CND Chair declares the decision. Subsequently, CND members are invited to make a statement about their vote or other concerns. The vote is officially confirmed when the Secretary communicates the decision to the member states, WHO and INCB. The 1961 schedules are effective immediately, with an open period to file objections, and the 1971 and 1988 schedules come into effect after 180 days.

Cannabis was not subject to such processes until 2016. In 2007, the CND requested regular updates on THC and then, in 2009, the CND requested updates for cannabis, as a whole. In 2016, the WHO began a formal process of review. In 2017, at the 39th ECDD meeting, CBD was one of three substances being pre-reviewed, including two medicines called Tramadol and Pregabalin, and 13 other substances were under critical review. As reported by the WHO (2018),

It was the first time the WHO ECDD reviewed cannabis and cannabis-related substances to consider the appropriateness of their current scheduling within the 1961 and 1971 international drug control conventions.

Cannabis and cannabis resin are current placed under the strictest level of international control alongside substances like fentanyl analogues and heroin.

The 40th ECDD was held in June 2018 and the 41st ECDD was held in November 2018. Pre-reviews and critical reviews were conducted on CBD, cannabis and resin, extracts and tinctures, THC and isomers of THC, and other substances¹⁰. It was unusual for the ECDD to hold two meetings in the same year. But this decision was made so that the WHO could present recommendations at the CND's upcoming meeting, in March 2019, when member states would vote on scheduling these substances.

ECDD 40th Session

In June 2018, I participated in the 40th ECDD open session meeting in Geneva, Switzerland, entirely dedicated to the review of cannabis substances. This meeting was considered pertinent due to rising demand of medical cannabis, broader access to non-medical cannabis products, the spread of legalization, increasing evidence and changing perceptions in wider society. The open session was held for one day, before a week of closed meetings among the committee members. Civil society and

¹⁰ The 41st session also reviewed 'new psychoactive substances', such as synthetic cannabinoids, fentanyl analogues, and the medicines, Tramadol and Pregabalin.

members of private organizations, independent researchers, non-governmental institutions, and think tanks gathered. It was an opportunity for these groups to make strong recommendations for descheduling by playing recorded videos, sharing anecdotal stories and making presentations about field work, scientific evidence, reports and research. Each speaker prepared carefully and gathered their most persuasive arguments, based on decades of working with individuals and communities who were impacted by drug policies and substance use. There was a sense of drama as the WHO and CND moved closer to a critical point in cannabis policy reform.

The session started with the Secretary of the ECDD, Dr. Gilles Forte, who represented the WHO's position, and said, 'we want to move forward and we know we need do it fast [provide a recommendation to the CND] – the international community is watching. We know the recommendation has weight, even if it won't be endorsed by the CND'. Dr. Forte acknowledged the WHO's role, as an authoritative agency, in conducting a comprehensive assessment of cannabis. The recommendations would inevitably signal a degree of support or opposition for cannabis, outside of the UN. Dr. Forte said,

We understand that there needs to be something done and changed, and it is important to approach it with rigor through science-based evidence and seriously move forward. We have that responsibility, and that is why we are holding the ECDD 40th meeting now.

The role of the ECDD, as Dr. Forte put it, was to make evidence-based assessments, based on similarities to other scheduled substances, drug dependence, abuse potential, physical and mental adverse effects, and therapeutic use. He emphasized that 'life saving medications' are substances that require attention. Dr. Forte also believed that the increased use of cannabis medicines required more scientific evaluation.

Civil society members and WHO representatives, alike, agreed upon the significance of reviewing cannabis and its compounds. A pioneering American cannabis advocate and Air Force veteran, Michael Krawitz, attended the open sessions. Krawitz is also a drug policy advisor and has been involved in UNODC meetings for many years. He said,

We do not know what to expect from the review, but we do know this is a historic moment in time. We are at the forefront and experiencing a tipping point – it's a big shift in the way we conceptualize cannabis and drug policies.

It's interesting because people aren't necessarily suggesting what they think or how it should be scheduled. Rather, they are sharing their opinions and knowledge about the problems of cannabis prohibitions and what needs to be done to change it.

Although there was no clear agreement about how to schedule cannabis and its derivatives, there was a shared sense of urgency. Civil society members also held different views about cannabis. Many of these researchers and advocates believed in the therapeutic value of cannabis, the failure of the War on Drugs and that there was already a sense of normalcy surrounding some cannabis use.

Two civil society speakers, Jennifer and Chris, performed these beliefs. They directly addressed the ECDD and pointed to a green, leafy plant placed in front of the committee. It was the only plant in the room, and, despite the potency of its skunk smell, it did not raise major concerns or questions. I noticed its distinctive seven pronged leaves, and realized, in fact, that the table décor was a cannabis plant. It was surprising that an internationally classified plant had easily made its way into the WHO. Although cannabis policies were more relaxed in Switzerland – up to 1% THC was permitted, medical cannabis was legal and other evidence-based policies were being trialed – it was a bold gesture to bring a cannabis plant to the meeting.

When Jennifer spoke, she picked up the cannabis plant and faced the ECDD members. 'This is cannabis and it's been placed here without the stigma because it's exactly what it looks like... a plant', she said. Then Jennifer and Chris held out a

medical syringe. ‘This is one type of medical cannabis – it is an extraction from this’, Chris said, whilst pointing to the cannabis plant. He continued,

This syringe is recognized as a form of medicine. It helps children with epilepsy, patients with cancer, MS, Parkinson’s, and helps to treat many other illnesses. It contains similar chemical compounds as this [pointing to the plant].

This is a cannabis plant, and just like any other plant, it has the capacity to be used for various resources, such as medicines, recreation, textiles, and food.

When the ECDD conducts its review on cannabis this week, consider that you are discussing medicine that is extracted from a plant. Remove the stigma.

Presentations were given the rest of the day that echoed shared beliefs. Cannabis, most of the presenters argued, is a substance that was not scheduled based on scientific reasoning, either internationally or nationally. They felt that the current scheduling was unreasonable and unjustified. Many speakers also described the discriminatory, economic and political motivations that had established cannabis policies. Ultimately, they hoped that the ECDD would submit an unbiased, evidence-based and objective recommendation that would permit patients to access cannabis medicine, legally and legitimately. ‘At the bare minimum’, Krawitz said, ‘cannabis should not be a Schedule IV substance because it’s ridiculous that it is classified as the same as heroin, without any medical recognition of its therapeutic value’.

The ECDD then held closed meetings. Following this, the ECDD decided that cannabis and its derivatives required a critical review, which would take place at the 41st ECDD. As for CBD, the WHO recommended that ‘pure CBD’ preparations should not be scheduled in the international drug conventions at all. This was based on the fact that ‘there have been no case reports of abuse or dependence...no public health problems...CBD has been found to be generally well tolerated and to have a good safety profile’. A WHO (2019) statement was made six months later to clarify the meaning of ‘pure CBD’. It concluded that ‘preparations

containing predominantly cannabidiol and not more than 0.2% THC', should not be scheduled.

ECDD 41st Session

A few months later, in November 2018, the WHO held the 41st ECDD meeting. At this session, Dr. Forte, again, emphasized that this was the first time a formal review of cannabis and cannabis components had been conducted. He clarified that the WHO was not mandated to recommend legislation nor take a position on the issue. The same process from the 40th session open session ensued.

Civil society members presented their cases. A British representative from a drug policy organization said, 'the review of cannabis is long over due and it is a welcome decision of the ECDD to not recommend CBD to be scheduled...the signing of Schedule I and IV was not based on the WHO's scientific assessment and inclusion in Schedule IV is inappropriate at the time, given the widespread medical use of the substance'. A young, male French-Algerian cannabis advocate and independent drug policy researcher, Kenzi, demanded reform for similar reasons. Kenzi had been 'involved in studying alternative pathways for cannabis policy reform, linking international law with local grassroots initiatives'. He had monitored international cannabis policies since 2011.

Tanya, a Brazilian representative from a drug policy organization, used an audio recording that illustrated what Kenzi and other advocates meant. For two minutes, Tanya played war sounds of gunshots, bombs, screams, squeals and distress. This represented the daily impact the War on Drugs currently had on Brazil. The room remained silenced with heads bowed down. When the recording finished she addressed a room – discomfort was visibly widespread. 'This was only

two minutes of your time. Imagine a lifetime of this’, Tanya said. She hoped to demonstrate the risk of endorsing prohibitionist ideologies and the contemporary implications of doing so.

Although people seemed to acknowledge issues with the historical scheduling of cannabis, the chemical complexity of cannabis still challenged regulatory decisions. Noah, an American from a medical cannabis advocacy group, argued that cannabis medicines do not fit into traditional pharmaceutical practices or regulatory frameworks. His beliefs echoed Callie, the British advocate and hydroponics business owner, John, the former pharmacist, and Natalie, the Israeli cannabinoid researcher. ‘Considering cannabis as a medicine means considering the plant as a whole. Separating the various strains and components is not the way to go’, Noah said. He emphasized that separating the compounds, ‘doesn’t let the entourage effect occur [the theory that each compound in the cannabis plant acts synergistically, or enhances overall efficacy]. It is when compounds are combined that lets it work as a medicine’. Noah also called on people to ‘stop demonizing the plant’ and raised concern about ‘large corporates, who are already involved’. Similar to most people described in this thesis, he believed regulations and robust practices were necessary to ensure patient and consumer safety.

Civil society groups were clearly in favor of reform, but there was still confusion around the ECDD’s position. Part of the issue, civil society members believed, was that the policymakers were far removed from lived experiences of people who use drugs. Although Dr. Forte acknowledged the importance of ‘engagement with civil society and patients...because sometimes there is a disconnect’. Nonetheless, there was doubt that the WHO would make a ‘holistic’ recommendation.

Following the 41st session, the WHO announced its recommendations: delete cannabis and cannabis resin from Schedule IV of the 1961 Convention; delete cannabis extracts and tinctures from Schedule I of the 1961 Convention; remove THC from the 1971 Convention and place it under Schedule I of the 1961 Convention; do not schedule pure CBD and CBD preparations with no more than 0.2% THC in the international drug conventions; pharmaceutical preparations of cannabis and THC would be added to Schedule III of the 1961 Convention. These recommendations were initially supposed to be voted on at the 62nd CND meeting in March 2019.

CND 61

I attended the 61st, 62nd and 63rd CND, including the weeklong events, intersessionals and reconvened sessions, at the UN in Vienna, Austria. The first CND I attended was in March 2018. I secured a delegation seat through a harm reduction organization, Penal Reform International, and because of my university affiliation and young age, I also had an informal affiliation with another harm reduction organization, Students for Sensible Drug Policy (SSDP). As a result, I spent a lot of time around many drug policy advocates, most of whom identified as ‘harm reductionists’. ‘Harm reduction’, in relation to drug policy, is a public health approach to reduce the social, cultural and physical effects of the use of drugs, rather than prohibiting them outright. It aims to minimize any associated harms and to promote optimal health and social inclusion. For example, harm reduction organizations set up safe injection facilities where sterile needles are given to people who inject substances to prevent HIV and hepatitis C, operate sites to safely test the

quality of drugs to minimize potential unknown risks, and run campaigns to reduce stigma associated with drug use.

Unlike other cannabis conferences, where I conducted the majority of my research, there were no investors or cannabis business owners. Rather, there were government officials, diplomats, ambassadors, UN employees, and civil society members – researchers, advocates, educators, and field workers. My first year at the CND, I did not know any of these stakeholders but, by my third year there in 2020, I was familiar with many people. I quickly realized that the cannabis ‘market opportunity’ was not the reason that individuals and groups convened at the UN, despite the fact that cannabis was frequently mentioned. Moreover, cannabis was not the sole reason these people came together; it was one of many substances discussed. The UN was one of the few field sites where disparate opinions were held about cannabis legalization, medical benefits and economic opportunity.

I was overwhelmed with choice because there were multiple places to be at the same time: the plenary, the Committee of the Whole, which is referred to as the ‘CoW’, side sessions, informal dialogues and meetings. Many informal, non-confidential conversations took place at the main café. There was a never shrinking queue of participants, delegates and officials who fueled their body with energy for five long days of non-stop interaction.

The plenary was the largest room. Each country delegation had a few seats, and there were also allocated seats for civil society members, press, other officials and regional organizations. There are two types of ‘segments’ held in the plenary – operational and normative. ‘Operational segments’ discuss strategic management, budget and administrative issues and ‘normative segments’ discuss the implementation of the international drug control treaties, including INCB, WHO and

subsidiary commissions' recommendations, draft resolutions, inter-agency cooperation and international cooperation. This is where decisions are declared and statements are formalized. However, this is not the core site for informal debate.

By the time a resolution or statement reaches the plenary, 'it has already been decided and that's where it goes to get adopted and finalized. But that's not the preparatory work. There are a lot of long hours involved in debate and dialogue that entails frustration and flexibility', a harm reduction advocate, Valerie, said. Valerie led local SSDP chapters and had a special role to coordinate interaction between civil society, UN bodies and member states. She explained that the plenary embodies the idea of a 'Vienna consensus', which is a phrase used to represent the spirit of negotiation in the effort to reach agreement. It might require compromise from national delegates, which ultimately allows the CND to reach a unified decision.

The CoW is a technical committee of the CND. This is where resolutions and decisions are discussed and approved, before being 'sent' to the plenary. Resolutions are 'formal expression of the opinion or will of the UN organs' and include a preamble with an operative part. Each year, there are around five to twelve resolutions are proposed. For example, at the 61st CND, the Russian Federation sponsored a resolution entitled, 'protecting children from the illicit drug threat', and another, sponsored by Belarus, Japan, UK, and the US, was 'enhancing international cooperation to combat the synthetic opioid crisis'. Sponsors are member states or groups of states, such as the European Union, and UN regional groups, such as Group of Latin American and Caribbean Countries, which propose draft resolutions and decisions. Decisions are 'used to designate formal actions, other than resolutions, dealing with procedural matters, including but not limited to elections,

appointments, the time and place of meetings, the taking note of reports and provisional agendas' (UNODC 2021). During the CoW, amendments aim to achieve a consensus amongst participating states and additional sponsors might be added. These drafts are discussed line by line. Language is an important part of the amendments, so that the contributing parties can agree that each resolution appropriately reflects national beliefs and upholds 'Vienna consensus'. To start this process, sponsors introduce the proposal in the CoW and dialogue begins, formally and informally. There is no set time for each resolution. Delegates ultimately stay as long as required to reach consensus. Sometimes this means states schedule informal dialogues with particular delegations to negotiate terms. These processes must take place prior to submitting a resolution to the plenary for adoption for consensus.

There are also side sessions, held in the morning before the plenary begins and during the lunch break before the afternoon plenary starts. Each day, around 20 to 30 side sessions are held, organized by different countries, civil society organizations and UN offices. There is a wide range of topics, such as 'the world drug perception problem', 'youth, drugs and the 2030 sustainable development goals', 'scenarios for innovation: regulating the coca/cocaine market', 'law enforcement capacity-building to counter narcotic drugs in West and Central Asia', and 'adverse social and health consequences of new psychoactive substances and prevention and treatment responses'. There are also multiple exhibitions throughout the week where organizations and country delegates can promote particular beliefs, such as support for prohibition, prevention, harm reduction, alternative development and human rights.

In the plenary, CoW, side sessions and informals, political agendas became clear. A sense of state division also became obvious in statements, discussions and

negotiations. I had to master a new vocabulary each time I attended UNODC events in order to follow the flow of conversation. Although there were people who shared the beliefs of many informants I had met in the cannabis market, there were a handful of people who did not approve of the progress of cannabis policy reform and cannabis commodification. In the next section, I provide two cases of individuals who held opposing views about drugs, especially cannabis. They represent broader groups of people who shared their beliefs, inside and outside of the UN.

Case 1: Casey

One of the harm reduction advocates I met at the CND was Casey, a Latin American man in his 20s. Casey is very tall, thin and has long, wavy hair that reached beyond his shoulders. He dressed casually, usually in a band or artist's T-Shirt and dark skinny jeans. Casey had worked with multiple drug policy organizations, such as International Network of People who Use Drugs and Youth Rise, and he had founded a couple of organizations that conducted work in Mexico and produced reports in Spanish.

Casey called himself a CND 'veteran', someone who had participated in the CND for more than two years, similar to Kenzi and Valerie. Throughout the CND, Casey and I attended a number of the same sessions and informal events. But Casey was also involved in a number of high-level meetings with country delegations, diplomats and organizations. He spoke and presented at a couple of side sessions. Casey was one of the few speakers who shared first hand experience with delegates about his daily encounters with substance use.

I found out that many of the harm reduction advocates I met, similar to people involved in the cannabis market, had experimented with cannabis and, often, other substances. I was shocked to find out that a number of delegates accidentally, as they said, had brought illegal substances into the UN, which made it past airport style security checks. Inside the UN, I was even more surprised to observe people rolling joints, suggesting they would ‘smoke up’ later. At a cannabis conference or event, that was the norm, despite its illegality. But, at the UN, I did not expect the same type of behavior to be somewhat normalized, at least amongst harm reduction advocates.

I also had no idea until the day before Casey and I left Vienna that he had formerly misused heroin. Prior to meeting him, I would have ignorantly termed this sort of person as an ‘addict’. But, he believed that linguistic tools were used to perpetuate harm. Casey labeled himself as a former ‘substance user’ rather than a former ‘addict’ to reduce stigma.

Casey first became involved in substance use at work when his colleagues, whom he had been working with for years, offered him crack. ‘Crack is the same thing as coke [cocaine] but fired up’, Casey said. Initially, he was hesitant to consume it, but, ultimately, he had his first crack experience. Subsequently, smoking crack was an activity Casey and his colleagues regularly did after a long day of work, until one day when also tried heroin. This transition did not feel extreme to Casey.

Heroin, he said, is perceived as one of the worst substances on the streets. But he felt, at the time, that this perception was misconstrued.

Casey said,

Heroin is basically the same thing as morphine. The core difference is how it is used and produced.

One is considered pharmaceutical, which means it is 'safe'. It is produced under scientific processes in a lab, which entails rigorous procedures for quality assurance, consistency and reliability, similar to medical cannabis these days. Patients receive morphine, or medical grade heroin, by medical professionals who administer the substance in appropriate doses.

Take the same chemical compound – an opioid – to the street and that's where heroin lives. Instead of a hospital, it might be a back alley, someone's home, or the street corner. The quality differs because street substances might be laced with something, and so it becomes dangerous. On the street, we don't have a dosing mechanism, no sterile environment, and no interest that either.

As Casey shared his experiences, he rolled a joint of cannabis. I knew that Casey no longer misused crack, heroin or any other substances; nonetheless, he still enjoyed getting high on cannabis because it felt safe and liberating to him. As the joint faded with each puff, he explained that being high allowed him to hear and see the world in different sounds, colors and dimensions. 'Sometimes you need to see the dark, explore the thoughts that come to you, and then come back to another reality', Casey said. These were the type of consumer insights Casey brought to CND sessions and meetings.

Casey did not fit any stereotypical ideas about someone who uses substances. He defied these through his policy work at the UN and his harm reduction fieldwork. Casey believed that education, rather than stigmatization, and harm reduction resources and tools can help people who face similar issues to those he once experienced. The current drug conventions, he believed, required reform because they were still embedded in problematic language and history, and, he was one of many advocates who showed up annually to present their cases and persuade others at the UN. Although he had some 'breakthrough' conversations, he said, there was a lot of political jargon, informal lobbying and other bureaucratic processes that, he felt, hindered reform.

Case 2: Kevin

I met another CND ‘veteran’, Kevin, who was well known amongst harm reduction activists because of his vocal opinions on the harms of cannabis policies. Kevin is a middle-aged American man, affiliated with Yale’s Institute on Social and Policy Studies, who has also advised three presidential administrations on drug policy. Kevin ran ‘Smart Approaches to Marijuana’ (SAM), which has a mission to ‘educate citizens on the science of marijuana and to promote health-first, smart policies and attitudes that decrease marijuana use and its consequences’. SAM brings together doctors, lawmakers, preventionists, educators, law enforcement offices and others ‘who seek a middle road between incarceration and legalization’. SAM opposes market development of cannabis. In fact, SAM hopes to see a ‘society where marijuana policies are aligned with the scientific understanding of marijuana’s harms, and the commercialization and normalization of marijuana are no more’.

All of this contrasted starkly with the views that predominated throughout the rest of my fieldwork, and, specifically, the harm reduction organization I was associated with at the UN, Students for Sensible Drug Policies. SSDP is ‘concerned about the impact of drug misuse on our community, but also know that the “War on Drugs” is failing our generation and society...we respect the right of individuals to make decisions about their own health and wellbeing’. In regards to cannabis, SSDP ‘recognizes that policies supporting the prohibition of cannabis were created with intentions of criminalizing cannabis users and targeting communities of color for incarceration’. The organization believes that prohibition was ‘destructive’ and needs to be replaced with ‘common-sense regulatory policies’. Both SAM and

SSDP discuss the rationale of policymaking, but SAM aims to decrease the use of cannabis, whereas SSDP aims to reduce the associated harms.

Each year at the CND, Kevin held a side session and made statements about cannabis that were fact, to him, but were controversial and false to many of my harm reduction informants. He believed that the ‘environment of legalization’ required speaking the ‘truth’. ‘Cannabis is no longer “Cheech & Chong” [1970s characters who used cannabis]. It’s about big money and big business. There is a major lobbying class getting paid to spin [the narrative] and pass laws for the industry. Lets call it Big Marijuana, just as there is “Big Tobacco”, “Big Alcohol” and “Big Pharma”’, Kevin said. Investors, he believed, were attracted by economic figures, and they became involved in promoting dangerous forms of cannabis, such as oils, candy and soda. He also felt that business activity led to cannabis product diversification and high potency products. There are products, he said, with ‘up to 99%’ THC, [which] led to increased mental illness, discrimination towards minorities and low income communities’ and public health and safety risks. Kevin said,

We have seen pharmaceutical CEOs and big tobacco companies moving into the rapid commercialization and commodification of the industry. The [opioid] crisis seems to be worsening since marijuana was legalized.

Legalization has created more social injustices. It is making a few very rich and not many are owned by minority communities. If it were to end the war, it’d be different, but it’s not the case.

Other informants within the market similarly believed that more social equity programs were required in the legal market. Although Kevin and these individuals advocated for social justice, he felt that commercialization should have never had happened.

Kevin framed the process of commercialization as dangerous and immoral. It echoed how many people I met in the market and movement framed prohibition.

Despite opposing views, they used similar jargon to outline their opinions. Some people involved in the cannabis market also voiced similar concerns, yet Kevin disproved of the legalization of cannabis. Whereas people involved in the market recognized that tensions resulted because of commercialization, they also believed that market forces were necessary. Even those who were critical of the effects of commercialization still played a part in the market. But, Kevin encouraged member states to adhere to the international conventions and prevent reform, rather than normalizing cannabis use.

Although he made valid points about the effects of commercialization, he believed there was more risk in legalizing cannabis than the potential benefits many others outlined. There was no element of marketization, to him, that was positive. Many harm reduction advocates criticized Kevin because, as they believed, he used outdated data that framed cannabis legalization as one-sided. Nonetheless, he represented the view of many conservative delegations and some people outside of the market. Although these are oppositional beliefs, they still reflect a degree of ‘interest’ in investing in ‘the game’, in Bourdieu’s (1992) sense, as it relates to cannabis. People, in contrast, who were indifferent to the transition from unregulated to regulated and dealer to entrepreneur were nonparticipants in ‘the game’. But, people such as Casey and Kevin, who both engaged in high-level policymaking processes and promoted legal reform at the international level, albeit in different ways, were interested and invested participants in the case of cannabis. These individuals, and the goals and beliefs of their respective organizations, more broadly reflect some of the larger internal cannabis policy challenges at the UN.

CND 62

Cannabis in the Plenary

The following year, at the 62nd CND, in March 2019, official member state statements again illustrated the dichotomy between beliefs, represented by Casey and Kevin. At this session, member states were expected to vote on the recommendations put forward by the WHO. But, before this could happen, many country delegations voiced hesitations.

A Chinese representative said, ‘legalization of cannabis undermines the violation of international order and makes it more difficult for countries that comply with the treaties’. Japan shared similar sentiments. Their representative said,

The situation surrounding cannabis is rapidly changing...Japan supports concerns expressed by the INCB.

But, poor regulation on programs may contribute to the legalization of non-medical cannabis use because of associated perception of the use of cannabis...all member states should cooperate strongly and fulfill the duty.

The Russian Federation made another strong statement opposing the vote. Their Ambassador said,

We can see signs of gradual degradation of drug cooperation and the international legal basis it stand on.

Legalization of cannabis opened a Pandora’s box and cases of violation of legally binding provision of UN conventions are beginning to multiply. The violators insist that this is a normal event, which they claim doesn’t merit special attention.

Selective implementation of the law is unacceptable.

We cannot turn a blind eye. This could unleash a chain reaction...and maybe the collapse of the international drug control system.

The issue of cannabis legalization raised ‘major concerns’ for many delegations.

Some delegations argued that the WHO recommendation had come too late, although the 40th ECDD was held in June 2018 an additional meeting held before the 41st ECDD was held in November 2018. Member states felt that this timeline did not allow ample time for review.

A Russian representative said,

The cannabis recommendations are embedded in a situation that is so different. It is debated in great circles, the mass media are involved, and it's not surprising. We have circumstances of whole series of countries who grossly violated international law, and have, fully or partially, implemented legalization of cannabis.

Why is it that 58 years after it was put on Schedule IV all of a sudden we have an ECDD of the WHO to recommend that it be taken out of Schedule IV? We need to think and ask why: what happened in 2019 to possibly justify this recommendation?

The ECDD has forced this process through, and its their recommendation, not the WHO as a whole. It's the expert groups.

Valerie, who had attended the CND for more than five years, as a representative of civil society, took offense at this. She had never heard a country questioning the authority or expertise of the ECDD over any substance, in any other session. To her, the amount of cannabis reform and research unfolding, globally, was reason enough to consider the recommendation. Officials and other stakeholders all seemed to attribute a somewhat exceptional status to cannabis.

In contrast, there were a number of statements from countries that already had more relaxed cannabis policies, such as Switzerland, Denmark, and Holland. In their statements, representatives said that health, welfare, transparency, multi-dimensional and evidence-based approaches were significant. A Danish representative said,

Reports on the medical use of cannabis reveal how it has helped patients who haven't benefited from other medications, which cannot be ignored. Medical use differs from recreational use and the use of cannabis for medical purposes is aligned with drug control treaties.

A Mexican representative made also made a statement, in support of the vote. She said,

It is not solely about the mandates of the treaties, but rather looking at socio-economic, public health, and evolutions under ground because many people depend on decisions made in this room...the role of the WHO is key because the organization requires support to undertake its analysis and coordinate based on scientific evidence and present it to the CND.

Decisions on cannabis have never been subject to critical review before, and we have an opportunity for an objective assessment of different effects.

Before the vote was taken, further debates took place.

Cannabis in the CoW

The Russian Federation sponsored a contentious resolution, 62/8, ‘supporting the INCB in fulfilling its treaty-mandated functions in cooperation with member states and in collaboration with the CND and WHO’. This resolution hoped to enhance the role of the INCB to monitor treaty compliance. The debate at the CoW was complicated because many delegations were convinced that the INCB’s mandate was already covered in the international treaties, and there was also disagreement about the INCB’s actual mandate and responsibility.

The Russian Federation emphasized that member states had an obligation to comply with the drug conventions and wanted to ‘invite’ the INCB to facilitate ‘effective national action to implement the three international drug control conventions’. But, other delegations, such as Belgium, Spain, France and Colombia believed that the word ‘encourage’ was better suited to the INCB’s mandate, instead of ‘invite’, since the agency already supports member states and oversees treaty implementation. These states were also cautious not to criticize the INCB. Linguistic debates continued for hours throughout the week.

Although not officially stated, my informants believed that the resolution was a preemptive tactic to hinder cannabis policy reform at the UN and respond to relaxed national cannabis policies. Valerie said,

It seems that Russia is seriously scared of cannabis. It’s becoming evidently clear in their statements and actions. It seems like some delegations tried to slip things in there, whether that was about cannabis legislation or the WHO providing recommendations and how the INCB and WHO are independent bodies.

What Russia did in sponsoring this resolution seems like it is in preparation for something in the coming years to frame the cannabis situation. The delegate in the CoW has been here for a while. She really knows what she’s doing. She is a diplomat, yeah, but she is a *Russian* diplomat.

In informals, Russia was prepared to do unprecedented things for this resolution. Essentially, if the resolution did not come to a Vienna consensus in the CoW, they were ready to bring it to the plenary.

That never happens. It would mean that all of the delegations would be required to vote individually. That really stands against the norm of the Vienna consensus that controls much of the processes and practices that go on here.

It was difficult to trace the course of the debate because there were many informal dialogues in private settings. I found out that civil society representatives had limited access to some of these processes. Valerie said,

There are plans and schemes happening behind closed doors. That's really what the CND is. Everything happens here, yet it still is all happening with informals, as conversations go back and forth between national offices and delegations and then with other delegations.

The most honest conversations happen 'behind closed doors', Valerie said, which makes it 'hard to follow what is going on or what the points of contention are holding the process back'. What happens at the CND, she believed, creates a veil of partnerships, statements, resolutions and other political agenda, which are indicative of domestic politics and other national issues. 'We're starting to trace the connections that are fueling the rise of some of the conversations that are really topical at the CND. We see into who has funded it, justified it and why', Valerie said. Ultimately, Valerie felt that the resolution was a tactical strategy, politically motivated, to set up provisions to block the cannabis vote and other measures of reform.

Cannabis Side Session

The controversy surrounding cannabis also played out at side sessions. Two side sessions happened simultaneously entitled, 'threat of cannabis legalization to the UN's sustainable development goals' and 'fair(er) trade options for the cannabis market'. I went between sessions to understand how two events, both focused on cannabis, obtained support from opposite sides of the spectrum.

In one room, people had conversations about prevention, which used data from organizations that support the dangers of cannabis legalization, such as SAM.

Many participants represented conservative governments with strict approaches to cannabis, such as the Philippines, Singapore, Nigeria and Russia. Other people who supported ideas about the harms and risks of legalization filled the room, and everybody there nodded in agreement about the danger of cannabis.

Simultaneously, the other side event discussed countries with more liberal governments, which were prepared, or in the process of, implementing regulations for cannabis. Justifications to defend and support legalization, including medical access, cultural or sacramental purposes, and economic opportunities with ‘alternative development’, differed, yet there was overwhelming consensus that legalization was positive. Representatives from think tanks and institutes presented guidelines and principles to implement fair trade practices within legal cannabis markets, to create a more equitable sector. There was then a discussion about how fair trade cannabis would drive benefit throughout the supply chain.

At the end of the session, I saw Krawitz, who also went between the two sessions. ‘There would be a perfect caricature to illustrate the two rooms. Imagine both pictures with men and women in suits. But the thought bubble would be distinctly different. Both are about legalization, but neither side agree and it demonstrates the two sides of the spectrum’, he said. The growth of the cannabis market was acknowledged in each session. But one group wanted to embrace the opportunity, while in the other, stigma from the prohibition era was strongly reinforced by presentations given by conservative governments. It would have been productive to swap members of the audience in each room to broaden their understandings about the other side’s opinions about cannabis. At the very least, people in the fair trade event wanted the medical element of cannabis to be fully recognized. They did not necessarily expect countries without regulated markets to

consider how to optimize a non-existent supply chain, but they did believe that the cannabis market could generate alternative forms of economic development and justice. But, none of these ideas achieved consensus.

Decision 62/14: Delayed Cannabis Vote

Voting on the WHO recommendations was scheduled to take place during the 62nd CND in March 2019. There was some discussion about the CND partially voting on some recommendations and delaying the rest, or, alternatively, delaying the vote entirely. The vote remained contentious. Ultimately, the vote was delayed a year, until March 2020, at the 63rd CND. Before then, civil society members expected informal lobbying to take place, in addition to further research and scrutiny by member states, so that delegates had ‘more time to consider the recommendations’ (CND 2019).

CND 63

The last CND I attended took place days before Covid-19 lockdown restrictions spanned across Europe, in March 2020. A number of country delegations did not fly into Vienna, which made the CND feel empty compared to the two years prior. It was expected to be an ‘exciting’ CND because of the scheduled cannabis vote. Early in the week, as scheduled, CND members voted on substance recommendations, as informed by the WHO and INCB. However, when the vote on cannabis was raised, the CND Chair, Ambassador Mansoor Ahmad Khan, said,

During formal consultations held over many weeks, some delegations said they don’t have a clear understanding of the implications and consequences of the [cannabis] recommendations and some other delegations said they are prepared to vote.

It was repeated that the CND must ‘bear in mind the complexity’ of cannabis, its complications and the rationality of its schedule. Ambassador Khan said,

The wording and voting does not preclude consensus...It is important to note that scientific and medical substances are under the mandate of the WHO and can be other administrative, social, political and legal factors in an assessment of member states’ vote.

It was then declared that the vote would, yet again, be delayed until the reconvened session in December 2020, the final meeting of the 63nd session. Following this announcement, member states made a series of statements.

Some countries, such as Brazil, China, Singapore and Russia, were keen to take extra time to consider socio-legal, economic and administrative aspects that impacted their vote. The Russian Ambassador explained that his country ‘is pleased with the outcome to postpone the vote. All members of the commission show commitment to the Vienna spirit of consensus on such a delicate and sensitive issue’. The Ambassador underscored the importance of other ‘serious problems’ related to cannabis and believed that ‘we have yet to see any convincing or exhaustive arguments to support the proposals of international experts from the WHO’. He questioned why the controls on cannabis required ‘weakening’, because, as he said, the substance is ‘the most abused narcotic in the world’.

Other countries were disappointed by the decision to delay the vote. A EU representative said, ‘we were ready to vote today and regret that many countries were not ready’. The Mexican representative ‘joined the statement made by the EU’ and believed that the postponed date ‘should compel us to ramp up the efforts and understand technical implications in order to fully carry out our role in the system’. Chile raised concern about national policy considerations that might be impacted by the vote on cannabis. ‘We will not support legalization and recreational use of cannabis, but there is a proposal at the level of the parliament for medical cannabis. It will raise concern about how incompatible it is with the international drug control

treaties’, the Chilean representative said. There were a number of delegations, such as Jamaica, Mexico, the EU and Canada, which also emphasized that this extra time should be used to reason with scientific data and evidence. Canada’s statement shared the importance of honoring the ‘spirit of compromise to postpone the date’, hoping that ‘legal and technical concerns would be addressed’, and encouraged engagement, dialogue, and questions based on scientific evidence and fact.

A harm reduction advocate, Peter, believed that ‘the cannabis vote is a controversial decision’, but, he said, ‘ultimately, it’s a way to buy more time as ongoing discussions and lobbying continues behind closed doors’. Although the vote was delayed, not everyone perceived this decision as negative. ‘It still might be a good move because we’re in the same position as before, it is just taking longer than expected’, Peter said. Many delegations felt that the ‘preservation’, ‘protection’, and ‘integrity’ of the scheduling process itself was significant, which is why they emphasized that the vote needed to be decided by the last meeting of the 63rd session, in December.

CND 63: Reconvened Session

On December 2, 2020, the 63rd reconvened session took place. Due to Covid-19 restrictions, civil society members attended the meeting virtually. Anticipation built up to the event. More than 250 NGOs, representing over 60 countries, released statements about the vote on cannabis scheduling. There were 193 NGOs from 52 countries in support of patient access to cannabis medicines and 55 NGOs from 33 countries that believed in a science-based scheduling of cannabis and other controlled herbal medicines.

Kenzi and Krawitz had been monitoring the cannabis vote and put together an online resource to simplify the process for people unfamiliar with UN procedures and the history of cannabis scheduling. They published an outline of the WHO recommendations from the 40th and 41st ECDD, which the CND were due to vote at this reconvened session. There were eight different recommendations. Some of these would only require a vote if previous ones were approved (see table below).

June 2018 (ECDD40)	5.0	Preparations considered to be pure cannabidiol should not be scheduled within the Conventions	← <i>This recommendation is not subject to vote (but still exists, and helps in understanding 5.5)</i>
November 2018 (ECDD41)	5.1	Delete cannabis and cannabis resin from Schedule IV of the 1961 Convention	5.4 Delete extracts and tinctures of cannabis from Schedule I of the 1961 Convention
	5.2.1	Add dronabinol and its stereoisomers (delta-9-THC) to Schedule I of the 1961 Convention	5.5 Add a footnote on cannabidiol preparations to Schedule I of the 1961 Convention to read: "Preparations containing predominantly cannabidiol and not more than 0.2 per cent of <i>delta-9-tetrahydrocannabinol</i> are not under international control"
	5.2.2	If 5.2.1 is adopted: Delete dronabinol and its stereoisomers (delta-9-THC) from Schedule II of the 1971 Convention	
	5.3.1	If 5.2.1 is adopted: Add tetrahydrocannabinol to Schedule I of the 1961 Convention	5.6 Add preparations containing dronabinol , produced either by chemical synthesis or as preparations of cannabis that are compounded as pharmaceutical preparations with one or more other ingredients and in such a way that dronabinol cannot be recovered by readily available means or in a yield which would constitute a risk to public health, to Schedule III of the 1961 Convention
	5.3.2	If 5.3.1 is adopted: Delete tetrahydrocannabinol from Schedule I of the 1971 Convention	

The first vote, on recommendation 5.1, was significant because it would remove cannabis as a Schedule IV substance, the most restrictive category under the 1961 Convention. But, it would still maintain its Schedule I status. This was the most suspenseful vote to take place. The vote passed with 27 votes counted for ‘yes’, 25 for ‘no’, and 1 abstention. The CND Chair, Ambassador Khan, said, ‘the recommendation is accepted. I declare the commission has decided to delete cannabis and cannabis resin from Schedule IV of the 1961 Convention’. Kenzi and Krawitz had been tracking expected votes and had a rough idea about the outcome. But, Kenzi was surprised that India voted ‘yes’, Hungary voted ‘no’, and Ukraine

abstained. He believed that Peru changed its expected vote at the last minute and Ukraine changed from a ‘no’ to abstention, which, according to him, ‘saved us’.

The next vote was recommendation 5.2.1, which dealt with Dronabinol, the international nonproprietary name for THC, whether natural or synthetic. At the time, Dronabinol was classified in Schedule II of the 1971 Convention. But, if approved, Dronabinol would be added to Schedule I, which would be as restricted as cannabis and cannabis resin. There were 23 ‘yes’ votes, 28 ‘no’ votes, and 2 abstentions. Since recommendation 5.2.1 was rejected, recommendations 5.2.2, 5.3.1 and 5.3.2 were deemed rejected, and recommendation 5.6 was not submitted to a vote. Due to this outcome, ‘plant-derived delta-9 THC preparations [Schedule I of the 1961 Convention]’, Kenzi explained, would continue to be ‘subject to stricter measures than synthetic preparations [Schedule II of the 1971 Convention]. Marinol and synthetic THC products continue at an advantage’.

The next recommendation was 5.4, which would delete cannabis extracts and tinctures from Schedule I of the 1961 Convention. It was not approved; there were only 24 ‘yes’ votes, 27 ‘no’ votes, and 2 abstentions, which was not enough. Recommendation 5.5, which would have added a footnote to the 1961 Convention about CBD preparations, was also rejected. There were only 6 ‘yes’ votes, 43 ‘no’ votes, and 4 abstentions.

The final outcome was that cannabis, cannabis resin and extracts and tinctures were to be classified in Schedule I of the 1961 Convention. Other classifications stayed the same: THC isomers remain in Schedule I of the 1971 Convention and Delta-9 THC in Schedule II of the 1971 Convention. CBD is still not scheduled in the international conventions. Overall, the vote itself was considered a ‘huge, historic’ decision.

Post CND 63

Following the 63rd reconvened session, Kenzi shared his concerns surrounding a UN press release that outlined these decisions. The Russian Ambassador, according to Kenzi, pressured the news center to change the headline. Originally, it read, ‘UN commission reclassifies cannabis, no longer considered risky narcotic’, this was changed to, ‘UN commission reclassifies cannabis, yet still considered harmful’.

However, only the English version was changed. The French and Spanish versions ‘continued to be Uruguay-biased, rather than Russia-biased’, Kenzi said, or supported more liberal frameworks. The English version also had full sentences removed, such as ‘the plant’s long-heralded medicinal properties’ and ‘[CND] took a number of decisions on Wednesday, leading to changes in the way cannabis is internationally regulated, including its reclassification out of the most dangerous category of drugs’. The Russian Ambassador tweeted, ‘even “#UN News” misinterpreted the decision of #CND and claimed that #cannabis is no longer considered to be a risky drug. This assertion doesn’t correspond to reality. Regretful that UN Secretariat disseminated incompetence and misleading assessment’.

There was speculation around why this had happened. But, a number of harm reduction advocates were unsurprised by it. Valerie said that a large proportion of UNODC’s budget had been funded by Russia. They had political influence because of their financial contribution, which allows the UNODC to conduct some of its work. Even at the UN, market forces, internally and externally, factored into the reform process. The delayed vote reflects wider sets of issues involving capital incentives, national and individual interests, bureaucratic processes, and politicized histories.

Although the long-term impact has yet to be assessed, informants felt that this decision was a significant step in the recognition of the medical and therapeutic uses of cannabis. Ongoing contention among delegates would not disappear, but the vote sent a distinct message to the world, especially to those involved in the cannabis movement and market activity. People hoped that it would empower governments to take action to relax cannabis policies, at least, for medical use.

Conclusion

This chapter provided a snapshot of the UN's drug policy reform process, but there had been years of work that led to the shifts I describe. In a short period, multiple jurisdictions relaxed cannabis policies, scientists conducted more cannabinoid research and market activity increased. All of this escalated pressure to reconsider international controls on cannabis. Nonetheless, negative attitudes were still prevalent. Even the idea of normalizing and commercializing cannabis threatened some groups and people. There was lingering concern that regulating and permitting use of cannabis would encourage illicit diversion and overall consumption. Throughout the scheduling procedure, cannabis was subject to an exceptionally unique experience of drama, as civil society members described at the WHO and CND, political lobbying, such as the Russian resolution, delays in voting times and other unconventional debates.

Nonetheless, reform has continued to unfold at different paces in different places around the world, and drug policy advocates have continued to campaign for further legislative change internationally and nationally. Some countries have been authorizing use of cannabis for all purposes. In January 2021, a French consultation on cannabis legalization passed with 200,354 responses (Pascual 2021). Mexico

passed a bill to legalize adult-use cannabis in March 2021 (Lopez 2021). Around the same time, in the US, New Jersey legalized cannabis for all purposes (NJLM 2021) and Hawaii approved a legalization bill to do the same (Jaeger 2021). In October 2021, Luxembourg became the first European country to permit home-grown cannabis, up to four plants for personal use (Boffey 2021). Following a new coalition government in Germany, Chancellor Olaf Scholz has suggested that the country could legalize cannabis for all purposes (Kingsely 2021). Estimates believe that this could boost Germany's tax revenue and economy by €3 billion a year, by 2025.

Other countries are still in earlier stages of reform, in the process of legalization and medicalization. Morocco's government announced its support for the legalization of cannabis for medical and industrial purposes in March 2021 (Eljehtimi 2021). In November 2021, a Sri Lankan lawmaker advocated legalizing cannabis cultivation (UCA News Reporter 2021). According to newspaper *Q24N* (2021), 'Panama is on the verge of regulating the law on the legal use of cannabis', which is a major development since I was there in 2019.

Other national reform efforts have been incremental and slowly developing for both cannabis and other controlled substances, including in the US, Canada and the UK. In the US, in November 2021, Representative Nancy Mace introduced a bill that would deschedule cannabis from the Controlled Substances Act, expunge cannabis convictions, and impose a 3% federal excise tax outright. This would be one of the most significant federal cannabis reforms in the US (Cohen, Hartman, Chainey and Gelbman 2021). In December 2020, Health Canada permitted some health professionals to administer psilocybin, a psychoactive substance found in over 200 species of fungi, for end-of-life pain and treatment (Dubinski 2020). In the

UK, in October 2021, Prime Minister Boris Johnson made a statement that he would consider legislation to permit psilocybin (McSorley 2021).

Some people involved in the market believe that this type of change is inevitable, but others are less convinced. With ongoing hesitation about reform, cannabis still requires strategies for normalization and commercialization. The need to persuade others fuels momentum for the movement and, once opinions shift, there is also potential for market growth. Regardless of formal legislative shifts, people have remained committed to movement and market activity.

Chapter 10

Conclusion

Introduction

Five years after my first experience at a cannabis retailer, I attended my first psychedelics conference, PsyTech, in July 2021. Joanne, someone I met at a cannabis conference in Canada, who has moved into a position with a Canadian psychedelics company, defined psychedelics as,

Compounds that are highly psychoactive that alter perception and mood and affect numerous cognitive processes, specifically by interacting with 5-HT_{2A} serotonergic brain receptors. The substances under this category include psilocybin, DMT (N,N-Dimethyltryptamine), LSD, MDMA, mescaline, ibogaine, and ayahuasca.

Most people in this space also include ketamine, although its effects are more dissociative, but engender similar neuroplasticity.

The psychedelics market is expected to be worth US\$10.75 billion by 2027, according to Research and Markets (2021). However, in most jurisdictions these substances are still criminalized, except in some countries, such as Portugal, the UK, and Canada, and cities, such as Denver, Colorado and Portland, Oregon, where psychedelics are approved for research purposes¹¹.

This context generated a sense of urgency for the organizers of CannaTech, the cannabis conference I discussed in Chapters 4, 7 and 8, who started PsyTech. They hoped this event would accelerate psychedelic research, education, business, and access to health alternatives and combat stigma. It was one of many events of its kind in 2021, which brought together investors, researchers, advocates, entrepreneurs, journalists, athletes, and celebrities to explore ‘the potential of psychedelics’. Many of my informants from the cannabis market also attended PsyTech, whilst many others I met throughout my fieldwork had already begun moving into the psychedelics sector.

¹¹ One exception is ketamine, which is a Schedule III substance in the US and has been marketed there since the 1970s.

This was the case for Gregg, who also attended one of the ‘largest psychedelic medicine business events’, Wonderland, held in Miami, Florida, in November 2021. Much of the agenda’s rhetoric at Wonderland reminded me of issues between cannabis movement goals and market motives:

Finance and psychedelics: can consciousness and capitalism co-exist?

Investing the shamanic way.

Addressing the need for psychedelic equity, access and affordability.

Other panels addressed familiar processes of change, describing the transition of a subculture into a mainstream one:

Welcome to the renaissance: moving from the fringes of research and shaking off years of baggage from illicit recreational circles, scientists are making startling progress in legitimizing the medical potential of psychedelics.

Patent wars: Is the corporate domination of the industry a significant threat or an opportunity to decrease the stigma and take psychedelic medicine into mainstream healthcare?

The conference agenda highlights an interesting parallel between the case of cannabis and psychedelics. Even Gregg felt that there was an uncanny resemblance.

He said,

In the early days of cannabis, when it was folks in the illicit market, on the periphery, there was a substantial movement to maintain the legacy of ‘OG’ [original] growers and the cultural, historical and community components of honoring the plant.

Back in the day, [Steve] DeAngelo and other advocates were talking about this. It was not the guys from large multi-state, licensed producers pushing this on stage.

At Wonderland, people speak about ‘freeing the plant for everyone’ and ‘democratizing it’. There is a strong belief to honor the plant, or the movement. This means keeping it out of ‘big, bad business’, or Big Pharma.

But businesses need to patent intellectual property. Meanwhile, there is a movement to ‘let the mushrooms be free’. It gets heated and I’ve not seen it like that at a cannabis event before.

Implications of commercialization are gaining media attention. As *The Guardian* reported, ‘psychedelics business takes off amid culture clash’ (Hesse 2021). This is echoed in optimistic frames in media articles that describe the potential and promise of these substances, ‘psychedelics can change humanity for the better’ (Doblin

2021). The author, Rick Doblin – an American drug activist who founded one of the leading psychedelic organizations, Multidisciplinary Association for Psychedelic Studies – describes the change as medical, spiritual, and social. In his book, *Manifesting Minds*, Doblin writes, psychedelics ‘are a door to authentic faith, born of encountering directly the sacred dimension of everyday experience’ (Doblin and Burge 2014: 86). Belief in the sacredness of psychedelics is more visible at events, such as Wonderland and PsyTech, and there are stronger undertones of this than at cannabis events, as Gregg describes. These tensions are playing out in the process of commoditizing psychedelics, which is already happening – psychedelic companies began trading on major stock exchanges in 2020.

Even if psychedelic reform unfolds in a slightly different way, it is already apparent that it will involve several of the features and tensions of cannabis reform.

Reflecting on this, Gregg said,

The movement component takes these substances into mainstream. It is driven by the idea that the plant, or product, is medicine. But, psychedelics will stay more medicinal than used for adult-use [recreational] purposes, like cannabis.

In both, people from the movement realize they have to stay relevant to enter the mainstream, but they don’t forget old ways. They learn to incorporate realities of today and tomorrow.

These processes of change and commodification seem to be repeating themselves, to a large extent, with psychedelics, which raises similar questions. How and why does market activity still feel part of a social movement? How does counterculture transform into the mainstream? Are there historical residues? How do the plant, or controlled substances, change into a commodity? How do moral imperatives impact this? Do they result in shared and fragmented visions? How do the movement and market relate and change? What do these cases mean, more broadly, for other social movements?

Processes of Change

This thesis tells a story about legal, social and economic change. Legal change, the process of legalization, transforms an illicit substance into a licit one. But during the process of reform, cannabis has also progressively changed, socially and economically as a product for medical, wellness, industrial and recreational purposes and as an object for investment. The value of cannabis has been converted into a matter of lifestyle and medicine that people can use in their daily lives. This takes place through the process of commercialization. All of this relates to social change, as public opinion and personal beliefs shift. Taboos around cannabis change as acceptance and the market grow. I have explored how a set of complex processes – legalization, commercialization and normalization – happen in parallel and generate change.

The way I structured this thesis illustrates different processes happening simultaneously in different ways and in different parts of the world. In each chapter, I concentrated on a particular stage of reform, from early to later phases. In Chapter 4, I used Colombia as an illustration of early stages post-legalization and processes of medicalization. Chapter 5 also demonstrated processes of medicalization in a more advanced market, the UK. At the same time, as I have shown in Chapter 6, non-medical forms of cannabis, such as CBD products marketed for wellness purposes, became more popular through processes of commercialization. In each of these chapters, I turned to various ways individuals become actively involved in processes to normalize cannabis. I exemplified specific activities people conduct and business decisions they made to do this in Chapter 7. Processes of commercialization were considered throughout this thesis, as cannabis becomes a regulated commodity, and in Chapter 8, I focused on different pathways people took

to commercialize cannabis and the effects of this. As these parallel processes took place, pressure grew to reform cannabis policy at the international level, as I illustrated in Chapter 9, at the WHO and UN.

These global processes were dependent on local people, activities and networks, and also, to an extent, chance and contingency. In this thesis, I described some of the people, their backgrounds and motivations, such as Steve DeAngelo, the counterculture campaigner, Hannah Deacon, the medical cannabis patient advocate, Lorne, the early stage investor, Gregg, the cannabis business executive, and Jasmin, the CBD skincare founder, who have been at the center of reform and change. I also followed personal transformations, such as John, the former pharmacist, Cameron, the former Drug Agency Enforcement officer, Callie, the cannabis scientist and ‘epilepsy warrior’, and Belushi, the celebrity and current day cannabis cultivator. Although there was no single identity that tied people to the movement or the market, these people remain connected and committed. Belamghari (2020: 10) argues the ‘construction of identities is born out of crises’ and through the interplay of ‘the global and the local, the homogenous and the heterogeneous, or the individual and the collective’. I demonstrated how people, who were locally situated yet globally connected, redefined themselves, and their roles, in a relational responsibility to the movement and the market. In this way, I examined an array of social transformations and how these took place.

In their study of revolutions, Cherstich, Holbraad and Tassi (2020) highlight the importance of personal transformations. They exemplify different ‘projects’ of self-making, especially as they relate to religiously imbued movements, such as the Iranian revolution and Islamic beliefs and Russian Orthodox devotion in the Bolshevik revolution. ‘Revolutions emerge as processes of wholesale societal

transformation that penetrate deeply into the fabric of people's lives, albeit in complex, often uneven, and invariably contested ways' (Cherstich et al. 2020: 4). In this case, I focused on ongoing processes of reform, rather than specific revolutionary events. This movement was also not characterized by religion, although some people have referred to the sacredness and ritual of cannabis. Nonetheless, at the heart of these processes, there were significant projects of self-transformation in which people, themselves, became active agents of change.

I have also demonstrated the importance of events, such as the news event of Charlotte Caldwell and her son, Billy, which contributed to legalizing medical cannabis in the UK. I have described significant conferences, such as CannaTech, Cannabis Europa, MJ Biz Con, and ExpoCannabiz, and recurrent events, such as FW's monthly networking events and Lorne's dinner parties. These were significant in connecting a collectivity of people, and processes, which affected how reform unfolds and refolds. They were also contexts in which people expand and reinforce a key set of ideas, which demand commitment, such as beliefs about the medical benefit of cannabis, the complexity of the plant and the need for reform.

Part of the challenges in studying a rapidly changing case was navigating how to trace continuous processes of socio-legal and economic reform. As I described in Chapter 9, member states at the CND demonstrate how legalization was happening in uncoordinated and disparate ways, as countries regulated cannabis in varying ways according to the international treaties and, in some cases, violating their obligations. Underneath this, there is a history of social movements, illicit supply chains, propagated narratives, and ongoing research. All of this is influenced by changes in law and, itself, influences changes in law.

As I found, even when laws changed, the movement remained active. Although people who entered the market post-legalization were not primarily committed or motivated by the ethos of the movement, their market participation led to the acknowledgement that supporting education and advocacy efforts were essential. Some people were drawn into a ‘fight’ for social justice, whilst others discovered personal benefits of legalization and uses of cannabis, just as Martin discovered pain relief and Jasmin experienced with her MS. For some people, such as Jamie in Colombia and Kim from Kloris, educating others and supporting legal reform was a strategic business decision. In a different way, Gregg identified gaps in the market and found pathways to commercialize cannabis. These activities simultaneously supported access to cannabis medicine and research and contributed to legalization and normalization. But, even after the development of regulatory frameworks for legal markets, there was a continuing parallel process to press for more appropriate regulations.

Cannabis was not simply decriminalized or legalized, but subject to continuing regulation, and people in the market have been active in shaping these regulations. Legalization permits cannabis use for different purposes, and, has evolved to allow broader product offerings and accessibility. Regulations, meanwhile, monitor the supply chain from cultivation to consumption, and have been subject to reform as the market develops. Often, regulation is something that is imposed from the outside. When the government identifies a problem, a solution is required, and regulations are implemented to bring it about. But in the case of cannabis, regulations often come from the bottom-up, through people involved in the market and movement. This was the case when European ‘novel foods’ regulations were yet to be published and CBD businesses, informally, decided to

self-regulate the quality and standard of product in the meantime. Associations and businesses also banded together to lobby and provide resources for regulators to consider in their policymaking process. At the same time, national CBD policies varied across Europe. Local cannabis markets have developed at different rates and called for distinct regulation, which have been shaped by the people, policies and practices involved locally, despite still being connected to global processes of reform.

The fact of legal change illustrates the movement's impact and success. Although reform can be traced in a somewhat linear fashion, as I do in this thesis, the reality is not so straightforward. Reform cannot be solely attributable to legalization. Global processes and reform depend on, and are shaped by, the activities of individuals and organizations, economic growth and wider processes of normalization. I found shifts at the individual level, such as Cameron's perception of cannabis that was altered after leaving the Drug Enforcement Agency, Gregg taking a risk to move Colorado, and Dr. Allan's perceptions that were broadened at CANNTalks. As exemplified in Chapter 8, widespread economic growth also impacted public policy decisions – the cannabis sector was included in the Israeli tender for technology and innovation. As a result of legalization, the cannabis supply chain and its byproducts have changed, but there has also been economic and social change, which have had an impact on these other processes.

The effects of this are complex, and the outcome of this change is a process of commodification. As new types of products, opportunities and emergent markets form, people turn from social campaigns to business activities, and they press for further legal change and regulation. But, the history remains important. The ethos and residues of the past still characterize the ongoing movement, which carries

significance in the emerging market. In this way, the cannabis market cannot be characterized simply as a conventional market or even understood as an extension of other sectors. Economic activity, social forces and legal change are intertwined in a web of historical influence. All of these elements complicate the processes of commodification, which are at the heart of this thesis.

Cannabis Commodification and its Consequences

Legal reform permitted different cannabis activities and led to emergent markets. As regulations permitted new activities and exchanges, people, simultaneously, shaped the norms and codes of the market. Abolafia (1998: 77) argues, ‘existing market culture reflects the efforts of powerful market actors to shape and control their environment even as it is shaping and controlling them’. In Chapters 4 to 8, I described the influence of market forces. A number of legal and bureaucratic systems, procedures and structures supported the transition of the market into the mainstream, such as pharmaceutical practices, the stock market, and the US Food and Drug Administration. Yet people still needed to implement, support and commit to them, which ultimately allowed for the interface between the market and the movement.

Both internal and external forces encouraged homogenization within the market. The theory of isomorphism explains processes of homogenization, in terms of the imitation or modeling of existing systems, structures and behaviors (DiMaggio and Powell 2000). There are examples of the three types of isomorphism DiMaggio and Powell outline – coercive, mimetic and normative. Adopting standards and practices from existing sectors, such as the ‘novel foods’ regulations for ingestible cannabis products, the European Cosmetics Regulations for topical

cannabis products, and good manufacturing practices for medical cannabis, exemplify coercive isomorphism. These regulations force harmonization and standardization among cannabis producers and the supply chain, which also help to generate legitimacy around the market. By contrast, self-generated standards, such as modeling cannabis businesses on other long-established businesses, illustrates mimetic isomorphism. This was demonstrated by people using accustomed business standards to navigate legal uncertainty and set precedents through practice, as Jasmin and CBD businesses did in Chapter 6. This also relates to a third pressure, normative isomorphism, but, as DiMaggio and Powell (2000: 150) argue, the three categories ‘are not always empirically distinct’. Normative isomorphism is tied to professionalization, which, in this case, occurred as elements from ‘corporate culture’ were adopted. People dressed in business suits, handed out business cards and believed in ‘acting like a real business, to be considered one’, as my informants often said. DiMaggio and Powell help to draw attention to conformity in the cannabis market, especially in regards to processes of medicalization, normalization, professionalization and commercialization.

Throughout this thesis, I have also shown how internal forces of homogenization occur through an echo chamber of uncontested opinions. There were commonly generated narratives that have shown up in different jurisdictions at similar stages of reform. People promoted hype about a market in similar ways, such as the ‘promise’ of the European CBD market and Colombia’s potential to become a global cannabis supplier. Across the world, there were very similar headlines about mothers with children benefitting from medical cannabis. These shared narratives generated a sense of urgency and excitement and connect local markets to global processes of reform. The people I described became active forces in engineering the

narrative and exchange of cannabis, which, subsequently, begets synchronization within and between the market and the movement.

In Chapters 3 to 8, I demonstrated how repeated interaction at conferences, events and meetings also encouraged homogeneity, including the creation and reinforcement of mutual understandings about cannabis science, policies, culture and business. In Colombia, Fiona described this as a shared sense of ‘intuition’ about cannabis. These frames and beliefs are internalized into what Abolafia (1998: 68) describes as ‘markets as cultures’, or, similarly, how people gained a ‘feel for the game’, or developed a ‘habitus’, as described by Bourdieu (1998). I found that this process of internalization was most visible at conferences and events, demonstrating the utility of repeated interactions to create a degree of stability and connectivity. People were physically brought together, which, symbolically, engendered a sense of belonging and reinforced shared knowledge. In some contexts, it felt like a cohesive movement with a common set of goals and purpose, when there were charismatic speakers, such as DeAngelo, who attract people from around the world.

Conferences were environments where learning preferences and play happened outside official domains, such as at after parties, networking events, and informal gatherings, and through consumption practices. Participation in these types of exchanges provided a means to understand how to relate to and engage with cannabis in its legal and illegal forms, as a businessperson, advocate and consumer. People learned how to play within a grey area, and to develop a ‘habitus’, through elements of sociality. Businesspeople and investors, especially those who became involved in cannabis primarily through market means, had to learn elements of the movement, or the rules of the ‘social game’.

At the same time, sociability reinforced movement practices related to dispositions, such as belonging to a cause, the need to fight for rights, social justice, and ethics, attitudes from the counterculture, distance from authority and government, a sense of marginalization and stigmatization, and the narrative of ‘coolness’. Even as the movement shifted through market emergence, these dispositions remained significant in understanding and participating in the movement, and also shaped the ‘habitus’ of the modern day market. These did not facilitate business transactions, but helped people to connect and commit to cannabis, the movement, market activities and each other.

One of the durable dispositions was a sense of being marginalized, sustained from earlier days of the counterculture. This does not mean that there was a rejection of capitalist goals. In many ways, individuals with privileged positions were able to take a risk on the legal uncertainty of cannabis because of the cushion of their own wealth. But, the process of cannabis commodification also entailed a story of conversion, from an illegal to legal substance, which became embedded in commercial ‘rules of the game’.

To an extent, the rules of ‘the game’, as it relates to raising capital, conducting business and other commercial activities, also represents a sense of familiarity amongst investors and businesspeople. There was a degree of consciousness in people’s agenda for market growth. Businesspeople and investors were accustomed to and relied on practices around fundraising, building businesses, marketing, and dealing with regulation. In a different way to the ‘social game’, market rules had to be adopted by activists, patients, doctors, and many others initially involved from a grassroots level. Convergence and connection happened

within the market and movement as rules of the ‘social game’ and ‘rules of the market’ were acquired and adopted.

But, I also observed contention amidst connection. During Cannabis Europa, medical cannabis advocate, Amelia, highlighted her disappointment in attendees’ preference to hear investors and policymakers rather than to support patient narratives. In this way, the market and movement were involved in ongoing processes of production and reproduction through both conflicting and harmonious relations. Although forces of homogenization were happening, there were rising internal tensions and parallel forces of heterogeneity, such as local forces, personal differences, and historical residues. These factors established and maintained heterogeneity, or as Fischer (2003) terms it, a global ‘polycentric’.

Aihwa Ong (2006) presents a similar case that demonstrates how heterogeneity continues to exist despite initiatives to homogenize local practices in global economic structures. Her study explores Shanghai, its professionals and corporate settings that bridge global business with cultural imperatives. In her ethnography, she describes a rise of multi-national corporations that were tasked to ‘engineer corporate players’ to global economic standards and management practices, which was complicated by local Chinese norms and customs. Ong (2006:188) argues, ‘diverse subjects become part of the economic project itself’, but she challenges the ‘structural approach to the global economy that homogenizes corporate rational and social forms across transnational contexts’ (2006: 165-6). In the cannabis case, homogenization happened as local markets were globally connected, through regulations, events, and supply chains. However, these connections were complicated by diverse contexts and dynamic shifts.

The global supply chain, itself, remained fragmented due to local jurisdictional rule and the lack of harmonized policies. Heterogeneity was also experienced when identities fragmented, such as when businesspeople became involved in advocacy and when advocates became involved in businesses. Relatedly, the counterculture splintered as cannabis, people and organizations transitioned into mainstream products, activities and structures. Not only did people resist some processes of homogenization, but cannabis, in its legal forms, also faced an unusual process of commercialization.

Cannabis had not been considered a regular commodity and the market included a heterogeneous array of products for wellness, medical, agricultural, industrial and other purposes. Jasmin marketed Ohana products alongside other vegan, wellness and natural skincare brands, yet she still could not advertise and bank through traditional channels. Lorne had to open a café in Canada, without selling any specific cannabis products, as a means to introduce his 'lifestyle cannabis' brand because commercialization was complex to navigate. Patient advocates, researchers and businesses argued that cannabis medicines do not fit traditional pharmaceutical paradigms. Although people were keen for cannabis, as a commodity, to be accepted and accessible by the mainstream, there still was resistance to the idea that cannabis was just like any other product.

Although there were means to access cannabis in high street retailers, pharmacies, supermarkets, cafes and other specialty shops, this accounted for a small portion of the commodification of cannabis. For most people in the market, cannabis was not treated as a commodity. Changing rules and regulations, legal uncertainty, mythology that surrounds the plant, personification, and personal sentiments were an indication that people attribute a degree of distinctiveness to

cannabis. This was linked to the legal environment, history and other social and cultural processes. Although cannabis might come to reflect other aspects of traditional commodities, in this thesis, the story of cannabis commodification has been integral to the story about the social movement and market forces.

Processes of commercialization, normalization and legalization have relied upon global systems and structures to support the acceptance of cannabis in the mainstream, but daily encounters within local spheres, such as business activities and personal goals and beliefs, added layers of contingency and complexity. By focusing on the local, as Ong (2006) does, processes of homogenization, as DiMaggio and Powell (2000) outline, are disrupted. By exploring local elements of processes of change and commodification, I also uncovered how heterogeneity engenders friction.

All of this became more visible as market forces increase. I discovered internal conflicts between market-oriented people and people who prioritize patient rights and movement goals, and external tensions between policymakers and people involved in the market, as the speakers at CANNTalks share. It is unsurprising that I found fragmentation in this movement. As Thompson (2002: 712) argues, in the ‘post-modern turn’, social movements ‘are characterized by fragmentation rather than unity and cohesion’. In economic studies, there is ongoing debate around the harms and benefits of fragmentation, but widespread recognition that fragmentation features in markets, exchange trading and financial activity (Chen and Duffie 2021). The fact that the cannabis market fragments and consolidates through mergers and acquisitions, and that post-legalization development leads to criticisms of commercialization is somewhat to be expected.

Fligstein and McAdam's (2015: 1) theory of 'strategic action fields' is useful in understanding conflicts as dynamics of change. They suggest that fields involve a continuum of reproduction, which responds to opportunities and contention that are grounded in mutual beliefs and stable actions. Their theory helps to explain continuity despite, or throughout, processes of change and fragmentation. The tensions and antipathy towards processes of marketization seem to strengthen the parallel commitment to the reaffirmation of the social norms of the movement. There is fragmentation, homogenization and some resistance to it, but the movement provides a degree of continuity, sustenance and homogeneity. The movement, its history and ethos hold the market together in some ways. This is one of the reasons why the movement remains important, even in post-legal contexts. If this connection weakened and totally fractured, then the market might lose some of its dynamism, force for social change and legal reform. Throughout this thesis, I demonstrated the complex interactions between the two, how conflict and change can be productive, and that there was an ongoing thread between the movement and the market.

Although Fligstein and McAdam help to explain how a degree of continuity exists through conflict and change, they trace patterns hierarchically, 'in a system that resembles Russian dolls' (2015). Whilst there are social, economic and legal layers embedded within the cannabis market, the transitory nature of this case is not inherently linear or tiered. The analogy of a rhizome illustrates this more aptly. Rhizomes are non-hierarchical roots and offshoots, which grow organically in an underground system. Even when broken, this plant stem proliferates and creates new connections for survival and propagation (Peters 2014). The rhizome analogy highlights how, even in the context of change and rising tensions, the market, the movement, people and activities that constitute it, remain connected and committed.

Rather than viewing connection and fragmentation as dichotomous, I demonstrate how these processes create layers and lead to a proliferation of emergent personal, economic, legal and social transformations. Company H's hemp license revocation exemplifies a disruption in the UK cannabis market, which also brought attention to related issues of legal uncertainty. This created a reason for people to rally, petition and lobby, and created a new source for connection. Although Amelia's statement at Cannabis Europa demonstrated conflict, it resonated with investors. Market-oriented interests and people were still driven by economics, yet simultaneously shifted to align with movement goals. Fragility and fragmentation illuminates how collaborative forces are possible.

People were involved in a global game that exploited discrepancies whilst creating standardization to establish a global market. It contained a socially differentiated set of transactions and disparities that formed a connected global assemblage of different elements. Homogenization, heterogeneity, fragmentation and fusion all characterize processes of commodification. Rising economic forces encourage and enable existing systems and structures to shape the market. But, homogenization is not a simple one-way process. There are complex issues that influence how people, activities and structures connect and fragment. On the one hand, there is an accepted need for people to encourage activities to legalize, commercialize and normalize cannabis, and those understandings transcend the market itself. On the other hand, the rise of market forces create forms of friction between the movement, market and the people that constitute it. Tensions have an inherently negative connotation, but I show ways in which fragmentation can serve to strengthen connection, foster collaboration and build momentum within the movement. This case illustrates how fragmentation does not completely unravel

overall connection. Even in parallel processes of complex change and commodification, this highlights the importance of the relationship between the movement and the market within the cannabis ‘space’.

Market and Movement Connection

The question of how an advocacy movement joined forces with a network of market-oriented professionals has been a key focus in this thesis. How this relationship was created is more straightforward – the story about processes of change and commodification highlights how a subculture gets drawn into the mainstream. Despite examples of fragmentation and friction, I have demonstrated how an overall sense of unity remains. However, unpacking how the relationship between the market and movement is maintained and reproduced is complex, and I build upon the previous two sections to do this.

None of my informants referred to the cannabis market as a ‘moral market’, but it became evident that moral imperatives were a common thread. Organizational theorists Georgallis and Lee (2020: 51) argue, ‘moral markets exist to create social value...[and] are typically supported by organized actors (usually social movements) motivated by moral or normative considerations rather than only by the pursuit of economic interest’. It is evident that the campaign for legal reform catalyzed the formation of an emergent cannabis market. Although, in principle, involvement in the market reflects impersonal economic activity, there were underlying forces that draw together a pool of moral judgment. In the cannabis market, a push for social justice was more prominent in some jurisdictions, whereas other jurisdictions were more concerned with human rights issues. Even market-oriented people, who were primarily motivated by money, advocated for legal

reform, and recognized the significance of other motivations for legalization. Each of these arguments for reform is intertwined. In a similar way, the cannabis market is what Georgallis and Lee describe as a moral market.

Moral exchanges and ideas factored into how people contribute to the ongoing relation between the movement and market. Gregg, who was primarily involved in the market, took time to educate others and promote the movement. Marwan hoped to educate others through a ‘re-contextualization of cannabis’ using science, design and experience. Yet, he was also guided by moral principles to distinguish cannabis in its modern day form, from illicit market products and narratives. Even West, the drug dealer who fled the US, condemned the illicit market and had a newfound moral project to uphold medical standards and ‘pay it forward’ to the ‘women he wronged’. These three men have very distinct backgrounds, motives and jobs, and had never met in person, however, their paths crossed at conferences and they shared a similar sense of moral responsibility. They represent the relation and roles that many other of my informants assume.

People, in different local markets, also felt responsible to establish internal agreements on standards, especially in cases where regulations and precedent were lacking. Despite a degree of hype, the ‘land race’ involving licensed producers in Africa was encapsulated within moral debate around exploitation and historical narratives. Normative interests also played out in more advanced markets, especially where there was a rising demand for investment, advertisement and competition. Jasmin, like many other informants, voiced moral concern about widespread variance in compliance, quality and safety, amidst lacking enforcement. Both early and advanced markets were morally inflected through social relations, economic exchanges and legal reform.

Traditionally, a distinction is drawn between morality and markets, but as Muehlebach (2012) demonstrates in her study of Catholic groups in Italy's neoliberal transition, morality and markets are not only interconnected, but may also be indispensable. As privatization unfolded there, unwaged labor groups mobilized in unexpected ways to support welfare needs, functions formerly carried out by the state. These groups become morally committed, and, to an extent, complicit in economic transformation. In the cannabis case, as business-minded people entered the market, and, thus participated in the broader movement, they were expected to act morally. When entrepreneurs raised capital and invested in foreign markets, there were moral debates about how these people and companies would support legal reform, patient rights and social equity for marginalized populations. At the same time, people from the early days of the movement, such as DeAngelo, Jeff and Callie, who voiced stronger moral commitments, had to transition into the market and, to an extent, adapt to developing 'corporate culture' ethos. Whilst movement dynamics shift, morality acts as a common force that brings grassroots advocates and businesspeople and the movement and market forces together. Moral imperatives have shown up in an array of social transformations in different ways in different stages of reform, especially as market forces became more predominant.

Moral forces in this case address the fact that the market is not simply a moral market, but one connected to a social movement. People are frequently reminded of the history that paved way for legalization, and are not completely detached from the broader movement. There is historical residue, or an 'embodied history' (Bourdieu 1990), and a degree of durability from the movement and its counterculture, which has continued to inform the ways in which people, products and policies transform.

Durable dispositions, historicity and morality were vehicles of ongoing connection, but required ongoing reinforcement and repeated activity to uphold this relationship. There were also elements of the counterculture that informed exchanges, activities and norms through moral frames. Although new policies brought businesses together in local and global supply chains, there were ways people commonly deviated. I observed common practice of businesspeople knowingly breaking the law in pursuit of cannabis consumption, and in some ways representing an active means to protest illegality.

As people consumed cannabis, sometimes in illegal or legally grey spaces, they had to adopt and perform different sets of informal rules. The act of cannabis consumption also provided a physical means to internalize dispositions, especially related to the ‘coolness’ of cannabis. Whilst some people actively avoided activities that still stigmatized, these attitudes about stigma cannot be wholly understood as negative. There was an alternative side to stigma that retained elements of dark glamor of cannabis, which added to its appeal for many, including people in the commercial and medical world. As the market developed, the movement transformed and dispositions from the early days of the movement converged with other existing market-oriented ‘rules of the game’. All of this came together in developing the market and movement’s contemporary ‘habitus’.

Other internal norms were developed, informed by moral frameworks. Almost every conference I attended, there were visual depictions of patients ‘before’ cannabis medicines and ‘after’ cannabis medicine. Although there were no formal rules about this, it was a common practice, and, became common sense after repeated experiences. Sometimes, however, there were more direct approaches to learning the principles of the market. At Cannabis Europa, when I was preparing to

moderate a panel, one of the panelists, a PhD and development scientist, Talia, asked to clarify some terms.

Talia said,

On stage, can each of us please make a conscious effort to only refer to cannabis as 'cannabis', rather than weed, pot, or other slang and stigmatized words? I think it is important that we set this tone to refer to the plant with scientific terminology, and to lead by example for the audience.

Talia's comment was self-motivated, yet embedded in a moral web. Attendees at Cannabis Europa, and other cannabis conferences, learned about terminology, technology and trends in these ways, implicitly and explicitly. The cannabis market was not just about commercial concerns; there were other moral elements within it.

But the market and movement connection cannot simply be reduced to a matter between morality and markets. There is a complex web, including the development of internal norms specific to the market, historical residues of the counterculture and prohibition and other socio-economic considerations. All of this became part of the internalized rules and roles that people performed, upheld and reinforced. Moral imperatives were pervasive, but following a moral compass was not a one-ticket item; it was a process that involved repeated, deliberate attention and activity performed by individuals, companies, policymakers and activities. Even though there have been many other studies of social movements and their effects, this thesis has traced out the details of the complexity of local and global processes by which social movements have their effects.

Scholars have studied how corporate activity, organization and policies change in relation to the efficacy of advocacy and campaigns (see Arajaliès 2010; Carberry, Bharati, Levy and Chaudhury 2019; Edelman, Leachman, and McAdam 2010; King and Pearce 2010). Protests, riots, and even virtual activism, can also influence stock price returns (Gomez-Carrasco and Michelon 2017; King and Soule

2007; Shiller, Fischer and Friedman 1984). Some actions, such as divestment (Soule, Swaminathan and Tihanya 2014) and conceding to boycotter demands (King 2008), indicate reputational concerns in response to activism. There are also studies that explore the reverse role and impact of businesses on social movements. Davis and Thompson (1994) explore shareholder activism, Vogus and Davis (2005) study elite mobilization in the US's antitakeover legislation from 1982 to 1990, and Soule and King (2014) discuss how firms and markets influence social movements. There is a clear connection between social movements and economics.

But, the strength of this relation and influence can vary. Some sporadic market activity responds to trends and advocacy efforts. But, these actions may primarily be embedded in economic incentives, which do not truly integrate the values of a social movement into business activity or corporate culture. None of my informants would have considered Aussie Hair or Khie's as part of the cannabis market, despite the fact that these brands market cannabis products. These products helped to normalize cannabis, but that was an unintentional consequence. This was not an active process to encourage normalization or press for legal reform.

In contrast, Ben and Jerry's, an ice cream company, has launched direct campaigns that support cannabis social equity and legal reform. They 'use traditional and contemporary business tools to drive systemic progressive social change by advancing the strategies of the larger movements that deal with those issues, such as climate justice and social equity'. They have used their platform to directly try to benefit from legalization and encourage legal reform, which embeds consumption within moral issues.



Although Ben & Jerry's advocate for social justice and cannabis reform, their main activities and exchanges still reside outside of the cannabis market. Companies that consider themselves part of the cannabis market, and even those that do not, can steward change. But, this alone does not commit external businesses to the cannabis movement. This relationship is created and maintained through deliberate, regular, and repeated sources of connection among people, their activities, and beliefs.

In other markets, too, elements of activism have become integral to some businesses, such as Patagonia, an outdoor clothing company that donates 1% of its profit to protect and restore the environment (Stanley 2020). Patagonia was ‘formerly a company that supported activists, we have become an activist company. We have sued the Trump Administration when it reversed protections for Bears Ears Monument. We have called out climate deniers in Congress’ (Stanley 2020: 394). Patagonia was founded as a for-profit business, but commitments to particular campaigns have become core to their decision-making process, external to economic priorities.



Even though cannabis is distinct because of prohibition, nevertheless, there are other social movements that have effects on markets, such as animal rights or environmentalism. Businesses might copy, or adopt, the ideas of a movement. It is relatively easy to trace the effects of social movements on markets, and vice-versa, especially when it is at the sort of stage as Ben & Jerry's or Patagonia. But, what is less easy to understand are the local processes through which this influence occurs and through which a social movement is sustained.

In this thesis, I have provided an in depth picture of one of these movements and the associated market connections, at a stage in which there are strong and ongoing relations between the direct impact on market forces and movement activity. The processes through which connections between market forces, economic opportunities, committed people, moral language, and international networks take place, as I have shown, are intertwined and multifaceted. This might be relevant to other sectors, industries and movements, which are influenced by moral markets and related concerns. Every instance is likely to be different, but what I have seen in cannabis is likely to be replicated elsewhere.

What I have found, and the processes I have been able to trace, is about the complex development of a market and a movement, and their relationship. I have built on the previous two sections to show that this connection relies on ongoing, local and global processes of change, which demonstrate the movement's success and impact on emergent markets. The reform that unfolds is dependent on people, activities and networks, which also undergo transformations. At the same time, there are parallel processes of homogenization and heterogeneity, related to commoditization. These sets of processes, which enable, maintain and disrupt reform, are integral to the movement and market connection. Although the market

movement interrelation fragments and disrupts, these forces simultaneously create and maintain connection. The dynamic of change is embedded in historical residue and the movement, which engenders shared moral visions and commitment.

Through frequent interactions and exchanges, a set of common knowledge and beliefs are created, maintained and reproduced. Because of this, there has been an ongoing, shifting, yet enduring relationship between the movement and market.

Conclusion

Throughout this ethnography, I captured developing processes of change and commodification through the lens of the cannabis market and movement. There was not one prerequisite for change, but rather an array of social transformations that were in motion and interconnected, and unfold in non-linear and non-hierarchical ways. People were core to embedding and upholding this, which required ongoing layers of interactions, activities, behaviors and commitment. All of this was intertwined in a complex web that reflects the past, mirrors goals to refigure the present and influences the future. At the same time, this prism of processes, places and people was made up of connections and fragmentations.

To unpack such complex, heterogeneous global activities, an exploration of the local, including people, their activities, values, events, ideas and institutions, was crucial. Despite diverse backgrounds and histories, which generated varied transitions into the market, I discovered shared forms of communication and commitment. This enabled the emergence, transition and sustenance of the movement and market, and its interrelation.

This degree of complexity results in fragility, and, yet, I found that fragmentation was not necessarily an enemy of reform. It can aid transformation by

highlighting which conflicting ideas, activities and language require reform or dialogue. Likewise, the fact that connection can lead to fragmentation is representative of growth and development, yet another set of social transformations. These happen in parallel, and whilst I am not questioning the integrity of the connection or fragmentation, interest or incentives, I show that these forces are intertwined, and become seemingly harder to separate.

As I wrote this, unpredictability and uncertainty characterized the rapidly unfolding situation of the Covid-19 pandemic. The ‘conference circuit’ moved online and cannabis became deemed essential in some jurisdictions. *The Guardian* reported ‘people “microdosing” on psychedelics to improve wellbeing during pandemic’ (Batty 2021). This is far from where I thought this thesis would go – the licit market being viewed almost in the same way as pharmacies or even supermarkets, and that psychedelics would be applauded rather than ridiculed. But, from 2016 on, I have observed how people utilize strategies to traverse rapid reform and create tools to remain connected in processes that threaten stability.

Uncertainty created conditions in which people responded and innovated. Yet, these processes teetered between rapid changes and reforms and slow development and stability. Uncertainty produced layers of fragmentation and fusion, deepening connection and rising conflict, and replication and innovation. Throughout, a sense of moral imperatives brought the market closer to the movement, especially when economic and social interests were at odds. Whilst disruptions were a setback to some, they also proved to be a dynamic for change. Rather than simply discovering how to solve for the problem of prohibition, I found that people, locally situated and globally connected, were actively constructing what post-prohibition means. With ambitious mindsets tied to passionate purposes, as my

informants embodied, the next phase of global transformation is bound to be a trip, just one yet to be defined.

Epilogue

In 2022 the context of the cannabis market is already different to the one I present in this thesis. Gregg is the CEO of Belushi Farms and is involved in other cannabis and psychedelics ventures. Ohana is shifting from a wellness and skincare brand into a technology platform for chronic illnesses. Cannabis conferences are slowly returning to in person events. There have been some recent legislative developments, but the pace of rapid reform has not characterized the past couple of years. It seems that, over time, the emergent market will become more established and less characterized by uncertainty and rapid change.

Although most of this thesis portrays the success of the market and the movement, the conclusion is not as entirely optimistic. There still is a distinct set of ideas, approaches and language opposing socio-legal and economic cannabis reform. There was a stark contrast between the way policymakers, UN and WHO delegates and representatives, and my informants spoke about cannabis products and policies. The Russian Ambassador was the most articulate about his opposition to cannabis, similar to Kevin, who ran ‘Smart Approaches to Marijuana’. At these events, even representatives from countries with regulated markets were more reserved than most of my informants. There was a microcosm of wider beliefs shared around the world, not just the echo chamber that exists in places where legalization has already occurred. But, in general, there was a lack of cohesion around how to regulate cannabis, disagreement over medical benefits and concern about commercial interests. I found that the UN and WHO had a separate set of

norms and beliefs, such as how to reach a ‘Vienna consensus’ and the practice of voting to schedule substances. The current situation is a context in which cannabis is still criminalized in a majority of the world. Given this wider perspective and recognizing that there are strong negative opinions is one reason the movement is likely to remain significant.

At some point, my informants hope that the movement’s goal will no longer be termed as a ‘fight’ for legalization, access and rights. There is still a long way to go. But even if this is achieved, there was widespread belief amongst my informants that some level of advocacy will always be required. If legalization were really key to the relationship between the movement and market, then people would expect the movement to disappear. But, people don’t envision this happening.

So, in a distant reality when legal reform is no longer a problem, how will the movement relate to the market? DeAngelo believes that legalization is simply a tool, not a destination. ‘The real mission is not to legalize cannabis or build a new industry – it is to build a world that lives by the lessons cannabis teaches us’, he said. DeAngelo felt that several generational shifts are required for cannabis to become more widespread, accepted and normalized. When legal change happens, it does not necessarily remove demands for reform, as Callie similarly believed. ‘Legalization will always have its limitations and the movement will always be needed’, she said. As it relates to patients, Hannah Deacon said, ‘there will always be patient advocacy. I hope that there is much less need for advocacy, but governments and businesses get it wrong sometimes’. DeAngelo, Callie and Hannah cannot imagine a time when advocacy work would ever be finished, which is a sign of their commitment. But, for market-oriented individuals, how will ongoing processes of commercialization impact their commitment to the movement?

As market forces become more predominant, the movement element might be less prevalent, but, as Gregg believes, there will still be a movement presence. He said,

There will always be people on the periphery. For psychedelics, there might be holistic centers, spiritually guided communities and experiential journeys – this is what is leading the industry. For cannabis, the plant relationship and cultural legacy still plays a part, it's not just business. But, both are becoming more institutionalized.

He also felt that the consequences of legalization could be similar to the way alcohol bootleggers eventually disappeared once prohibition was repealed. Further homogenization might unfold through institutionalization, but even as processes standardize and economic forces increase, there will still be ongoing change through scientific, health, and technological innovation. As new research is published and product and software are created, the nature of cannabis is bound to continue to change.

In this way, the heterogeneity and dynamism that characterize this snapshot in time, might further propagate. I already describe how fragmentation happens, and identities, markets and groups could fragment further. Distinctions among patients, cultivators, investors, and other groups might be drawn between people more medically, agriculturally, or commercially minded. Yet, the connection between the market and movement seems to be situated in a shared sense of historical recognition, present moral commitment and future flexibility to the transformations that unfold.

Cannabis was once predominately defined through criminality and today it is a matter of controversy. Even still, when I speak about the topic of my thesis, there are people who glare and others who cheer. Perhaps there will be a time when cannabis is a deeper source of connection, rather than conflict. As for the movement and market, there will be many paths to follow, some of which have been carved out

before: how countries opt to legalize cannabis, how businesses decide to commercialize cannabis and even how other ethnographers choose to research this field. How it transpires will tell yet another story of change.

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