

## Chapter 12

# History and Legislative Changes Governing Medical Cannabis in Indonesia

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### ABSTRACT

*This chapter presents the historical context of medical cannabis in Indonesia. First, the author sets out the history of legislative change—how cannabis law has changed over time and Indonesia’s cannabis policy-making over the past 200 years. Cannabis that previously was not legal then was legal, and then not legal. Second, the author discusses recent studies regarding the benefits of natural and pharmaceutical-medical cannabis to patients with different conditions in Indonesia. These benefits include cannabis-based medicines for cancer pain, anxiety, and depression. This chapter illustrates the major changes that will be unfolding in countries worldwide regarding cannabis legislation and medical cannabis legalization in healthcare and medicine. This chapter gives an important perspective on the issues regarding the use of medical cannabis from a public health viewpoint. It gives a realistic discussion of the work that lies ahead for government and law enforcement agencies as cannabinoids become more widely accepted by the medical profession.*

### INTRODUCTION

The narrative reviews in this chapter are based on the book’s idea, “Medical cannabis and the Effects of Cannabinoids on Fighting Cancer, Multiple Sclerosis, Epilepsy, Parkinson’s and Other Neurodegenerative Diseases.” Given that it is the least rigorous and “costly” in terms of time and money, the narrative review is perhaps the most prevalent kind of descriptive review in planning. In the author’s opinion, these evaluations are less concerned with evaluating the quality of the evidence and more focused on obtaining pertinent material that offers both context and substance to the author’s overall argument. Both academics and the public will benefit significantly from this chapter—for example, a government

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official dealing with medical cannabis policy. The chapters begin a more extensive inquiry into the history and legislative changes governing medical cannabis in Indonesia. This chapter aims to (i) present the history of legislative changes governing the use of medical cannabis in Indonesia over the past two hundred years, (ii) chronicle changes in cannabis legislation and its enforcement in Indonesia over the past twenty years, and (iii) review the main clinical benefits of medical cannabis that are currently under investigation.

## **BACKGROUND**

### **The History of Legislative Changes**

Colonization, brought about by the Dutch Empire, changed Indonesian living conditions. The Dutch brought the cannabis plant to Indonesia for the first time in India in the 19th century. No data were found on whether native Indonesians were already consuming cannabis before the Dutch. Cannabis use in Indonesia evolved from being eaten, primarily as a food ingredient, to being smoked for pleasure (Stahl et al., 2001). The drug has increased its availability and reached broader coverage, going from previously being used by middle-class citizens to also becoming used by lower-class citizens (Mustafa 2021).

Babor (2010) notes that the temperance movement brought opposition to drugs in the USA and U.K. The drug resistance also reflected the indigenous movement among colonized peoples (i.e., Indonesia). The first prohibition of drugs was the Brussels General Act of 1889 and the international alcohol control treaties (1919), but this prohibition fell gradually into disuse. In the 19th century, temperance workers attempted to limit the drug exploitation of the indigenous population, with the USA taking an active role in combating the opium trade (Babor, 2010).

The first convention on international drug control took place in Shanghai in 1909 and was sponsored by the USA. This convention was followed by setting up control of exports and imports and an International Narcotics Control Board (INCB). The INCB then extended this control to limit drugs to scientific and medical needs. They held the second convention on international drug control in 1961; distribution and sale were made illegal, and they subjected the users to punishment and treatment (Carstairs 2005). They held the third convention on international drug control in 1988, focusing on the perceived negative impact of drugs on economic development, national security, widespread corruption, and money laundering. This convention extends to “possession or purchase,” which is punishable. The USA’s international effort is pursued through policy statements asking other lower-income countries to update and ratify the convention on global drug control (Csete et al., 2016). They sought compliance with a promise: if a lower-income government ratifies the convention, it may receive more foreign assistance. This affected lower-income countries, such as Indonesia, that needed economic opportunities and international support (Gordon, 1994). Indonesia adopted the convention on international drug control.

### **Chronicle Changes in Cannabis Legislation and Its Enforcement in Indonesia**

From 1961 onwards, Indonesia ratified the United Nations (U.N.) International Drug Control Conventions. They aim these conventions at controlling supply and demand. They have followed the preminent role played by the United States in the so-called “war on drugs” (Nadelmann 2004) and adopted a bifurcated approach by imposing harsh sentencing on the most serious drug offenses. The second part of

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