

NAHRPP COUNTRY REPORT

ITALY

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BRIEF NOTES ABOUT ITALY

In Italy, according to Presidential Decree nr. 309/90, which defines the legal framework for all types of drugs and psychoactive substances, cannabis is scheduled as an illegal but less hazardous drug. Drug use in itself is not mentioned as an offence. Possession for personal use is punishable by administrative sanctions (such as the suspension of a driving license). The threshold between personal possession and trafficking is determined by the circumstances of the specific case, and mostly based on quantity.

Cannabis is illegal for recreational use, as is the cultivation of cannabis, even in small amounts and for exclusive personal use. It is legal to buy light cannabis (THC < 0.6%) in tobacco shops since 2017. Therapeutic cannabis, for limited and prescribed medical reasons, is available since 2013.

Establishment of cannabis social clubs (CSC) is prohibited even though some forms of informal groups of individuals that cultivate and sometimes use cannabis together are possible though they remain unlawful and punishable.

SAMPLE RECRUITMENT

For individual users, given the small sample dimension, a snowball sampling procedure has been applied: People in contact with Forum Droghe in different ways, as members of a network association or individuals who expressed interest in Forum Droghe activities, were asked to select friends or people they knew who could be interested in being interviewed. A letter was then sent to each individual, explaining the issue and the methodology. The first people selected accepted and they were then asked to select other people via word of mouth.

The inclusion criteria was a history of at least 10 years use and at least one use during the previous year.

Since CSCs are not legal in Italy it was quite difficult to select members to be interviewed. In Rome and Turin there is a type of CSC that is active: their purpose is advocacy and promoting cultural change in order to legalize cannabis for personal use and cultivation. We contacted members of two organizations to select their members who could be interested in participating.

In one case, an active member of a Community Center, where in the past an attempt was made to become a CSC, was recruited.

SAMPLE DESCRIPTION

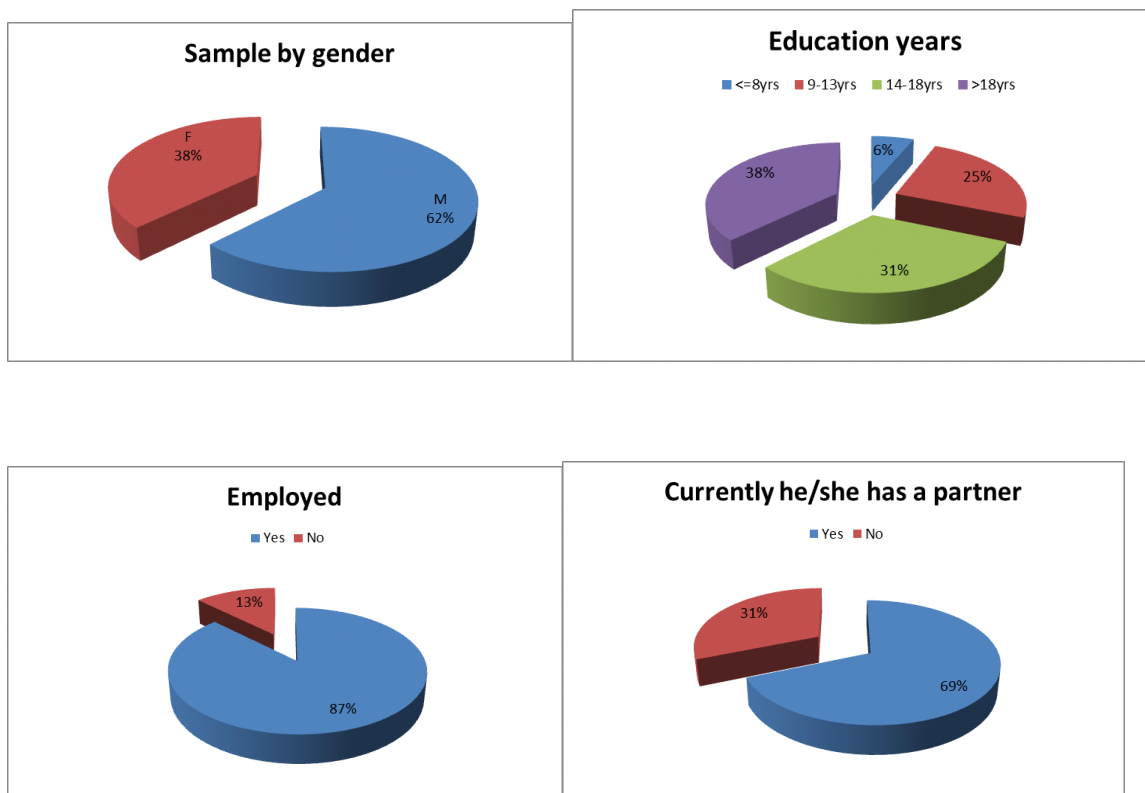
According to the protocol, sixteen people have been interviewed. As mentioned above, CSC



members were only 4 out of the 16 interviewees, and two “CSCs” or, rather, a version of these, were investigated.

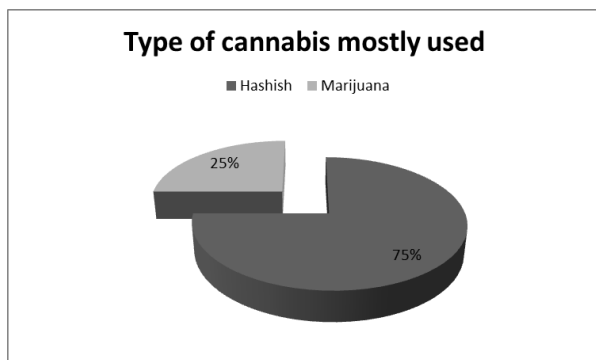
Of the 16 people, 6 were women, with a gender ratio 1:2. The sample is characterized by highly educated people (more than 60% attended university), employed, currently having a partner. The inclusion criteria affected the sample selection, and the mean age is 38.9 years (median: 37, minimum: 27, maximum: 56).

A more detailed description is given in the following figures:



As far as cannabis use is concerned, the mean age at first use (according to what interviewees recalled) is about 16 years, while the history of use has, so far, a mean duration of 22,2 years (median: 15; minimum: 10, maximum: 40). Four people reported a use in a range of 10-15 years, while the rest is over 15 years.

Hashish is the most common (and available) use of cannabis, smoking joints. Two people reported smoking chiloom or bong. Currently 14 people out of 16 are using cannabis daily, one only occasionally (mostly during the weekend) and one woman reported no use due to her pregnancy.



ANALYSIS REPORT

1. TRAJECTORIES AND MODELS OF USE

Initial cannabis use is characterized by occasional use with friends especially during the weekend or at parties during adolescence. All the interviewees, with only one exception, reported very low intensity of use in the beginning *“I started occasionally due to my curiosity, only with my friends, then I increased”* (2itfind), *“low intensity in the beginning with classmates, with friends, during the weekend... I increased when I was 20 [years old]”* (9itmind). Curiosity, mixed with the group dimension is a common factor. The use of the spotted line for drawing the beginning period is common to some timelines, as well as a rise at around 18-20 years old that coincides with university or work.

It is interesting to note that interviewees associate their trajectories with their entire life and usually the first high peak of intense use corresponds to chaotic late adolescence, where young people are prone and curious to experiment a wide range of things on many occasions with different people *“The line represents my life line. When you’re young you’re looking for fun and being stoned [4itmind]”* or *“it’s like me: I’m all or nothing [7itfind]..”* or *“looking at the line I see my squatter life [8itmind]”*.

The following paragraphs highlight common factors described by the sample when they were asked to describe their trajectories.

1.1 CANNABIS IS SOCIAL AND COLLECTIVE

Cannabis is considered a social drug and its use is strongly associated with social relationships. *I like talking to my mates when I’m stoned, you see things with a more open mind*[10itmcs] and *it makes no sense smoking alone* [10itmcs]. *Cannabis itself is social...Sharing with others is important. It increases the level of communication with others* [16find]. This aspect is more present if people belong to a social club or if they usually buy cannabis together-through a “purchase group” as it is called. The group dimension is important for sharing experiences, for the exchange of opinions about the drug itself and to buy cannabis by taking advantage of more affordable prices due to the larger amount.

The group itself is a regulatory agent in both directions: *I haven't been using for 2 years because my friends did not use [12itfind] and I generally followed what other people did [5itmind]*.

Social and peer pressure for using (or not) is also quite common when use during adolescence is described, as teens are driven to be and to act like their peers *I started with my group of friends because they all smoked [4itmind], I generally followed what other people did [5itmind]; for 2 years I have not being using , because my group did not use [12itfind]*

1.2 CAN OTHER DRUG USE AFFECT CANNABIS USE?

Tobacco, alcohol, cocaine, LSD, heroine and metamphetamine can be other experimented drugs. Quitting tobacco smoking is associated with smoking cannabis cessation (no cannabis at all) or route changing (for instance vaping instead of smoking).

Alcohol affects cannabis to the extent that a person can have their driving license suspended: the fear of urine checks to regain the suspended license (suspended for a high blood alcohol rate) in many cases leads to a reduction of cannabis or even cessation.

An increase in cannabis use is related to an intensive cocaine use, to reduce its stimulating effect (*to calm down*) In other cases, money spent for other drugs implies less cannabis purchase for mere budgetary reasons. LSD and MDMA are also reported but only occasionally and generally in the explorative phase of life (early twenties).

Among those who used heroin, cannabis has become a substitute due to less harmful effects. *I started smoking (cannabis) after quitting heroin and other stuff and when I suffered from withdrawal symptoms [6itmcsc]*: an interesting aspect of our sample is that it strongly contradicts the false idea that cannabis is a gateway to heavier drugs. In fact, the opposite effect is underlined, with cannabis being used to overcome heroin withdrawal and as a substitute after heroin detoxification. *Once I quit heroin and all the drugs I use only marijuana to relax[14itfind]*.

1.3 TRAUMAS

As trajectories of drug use are similar to the phases of life, experiencing traumas or traumatic events is also strongly related to cannabis use. A traumatic event such as a car accident affects someone's life and consequently his/her cannabis use. A trauma could be a trigger for an intensive period of use. It can also be perceived as a warning to reduce use or quit.

Grief and distress caused by the death of a loved one is usually associated with intensive use, mainly due to not wanting to think about events, underlying a therapeutic effect. *Cannabis helps me a lot not to think about it, to be dull [12itfind]; I would rather use cannabis than benzodiazepines[14itfind]; the choice was a bit conditioned by the choice not to see the other suffering, even if it was my choice[7itfind]*

1.4 TRAVELLING AROUND THE WORLD



Travel abroad is in itself an experience that can be related to a period of intense or reduced use, depending on one's aims, desires, expectations and travel mates. The visiting country itself can influence the use, or not, of cannabis. Travelling in the 21st century is a common experience as is taking drugs and a journey to Amsterdam or Mexico for example can enhance this experience. On the other hand, travel due to work or other commitments can be an opportunity to reduce use or quit.

1.5 YOU GROW UP!

A common factor in all of the 16 interviews can be summarized by “everyone grows up”, meaning that everyone's life has natural rhythms and different tasks for each age. Thus, each trajectory is influenced by more or fewer “physiological changes” due to natural events occurring at different ages. Each milestone is different for each individual: to graduate, to settle down, to find a job or whatever is of value for an individual, implies a change in cannabis use habits. These events determine the abilities and control strategies that each individual can develop despite the use of psychoactive drugs. These abilities should be enhanced and supported. *One understands that a drug is a drug and then one begins to realize how to control its use ... you grow up, you're no longer a kid*[1itmCSC]; *It's normal because, growing up, your friends are no longer your school mates but people, like you, who have to go to work* [5itmind].

1.6 SOMETHING ABOUT MONEY...

Availability of money and personal budget are strictly related to provision, use and in some cases dealing of cannabis. *Being a desired asset when I had more money I bought more*[11itmCSC]; *(I smoked a lot because) I was very young and I had a very well paid job*[13itmind]. Nevertheless, having more money alone is not enough to determine use, but it could be considered a facilitating factor, subject to other more determinant issues, such as *I had a lot of leisure time*[11itmCSC] or *My work was really awful... I was consecutively on duty for 4 days, I did not have free weekends, it was terrible*[13itmind].

Having more money for some individual users could mean enlarging the provision in order to sell a part of it to be partially refunded for the money spent, as a sort of economic investment, alongside the advantages that a massive purchase can give, i.e. buy the best quality substance at a cheaper price. This is particularly true for CSC users, who collect money from members to be able to buy quite a large supply of good quality or as they call “purchase groups” (*gruppi di acquisto* in Italian)

1.7 NO USE

12 people out of 16 reported a period with zero use of cannabis. As a methodological question, people were asked to report relevant zero periods, regardless of the length, or the reason they stopped. It is necessary to underline that when respondents were drawing the time lines, only 7 talked spontaneously about a no use period, while the others recalled those periods only when the researcher directly asked the question.

Reasons for a break can vary, but 2 common dimensions can be traced: the first is that no use is due to an external control. In general this is due to an adverse event that made



cannabis use no longer viable for the user, for example after a driving license suspension. The fear of a positive urine analysis inhibits cannabis use (fear of worse consequences). The second dimension is due to an internal control: the user decides independently to have a break or because he/she realizes things can get out of hand or because cannabis is not enjoyable anymore.

1.8 I'M GREEDY!

Cannabis use is related to one's sense of pleasure: people like cannabis and its flavor and its effects, so that its use, as with most things people like, can be more intensive when there is ample availability. In almost all of the trajectories a period of major availability corresponds to intensive use. Availability can depend on different factors: as reported before, a journey to a supplying country (Mexico) or a large quantity bought because it was a good deal, or a particularly good harvest.

1.9 IT'S A NATURAL HERB

Another relevant issue that was illustrated is that cannabis is a natural compound, which makes it safer than synthetic drugs and much safer if cannabis is organic. This is why people would like to cultivate themselves in order to make sure no additional chemical products can pollute the plant. Interviewees are also afraid of bad cuts. Marijuana, with its variant "ganjia" is the preferred form of cannabis, and appears much safer than hashish.

2. TURNING POINTS

Each trajectory is not linear and presents turning points, such as high or low peaks. The following paragraphs illustrate the reasons for these turning points and whether they correspond to high or low cannabis use.

2.1 USE ON MY OWN

A quite common turning point is starting to smoke cannabis alone: the social aspect of sharing a joint with friends or significant others at some point loses its relevance and the substance itself and its effects replace the pleasure of staying with others. This usually implies a more intensive use, less dependent on others and the chance to stay with others, and a loss of control. From an external control, given by friends and social occasions, individuals have to define new personal control strategies and this could take time.

2.2 LIVING ALONE

Similarly, leaving the family home and settling down on one's own means a loss of external control given by family members (mostly by a mother). *Since I have been living alone I did not have to go downstairs to smoke a joint and therefore I smoked more*[5itmind] *or I do not work I stay at home alone all day and since my mum died I smoke a lot* [6itmcs]

2.3 LOVE, LOVE, LOVE

Talking about their cannabis use and consequently their life, interviewees talk about their love affairs and heartbreaks when they were teenagers and young adults. After the end of a



romance, a higher peak is reported to tackle the heartbreak and to not think about the lost love. This feature is reported only by men. Their fiancés acted as a regulating agent: during a relationship boys are prone to use less, also because their girlfriends seem to be annoyed by cannabis use and complain about it.

On the contrary women reported an intensive use when they have a partner as young adult. *I had been using a lot with my boyfriend: he always had it [15itfind] or not use if the boyfriend was not: I did not use when my boyfriend was in rehab centre [14itfind] or I used much less when I broke with my pusher boyfriend [12itfind]*

2.4 QUALITY V/S QUANTITY

An important turning point is the realization that quality is more important than quantity: this generally occurs after a period of intensive use and when people are adults and have more life experience. *The knowledge of this substance and its quality is important to discover as is one's own balance, and usually one discovers it after excess, unfortunately[9itmind].* Quality means either the more intensive psychotropic effect with less quantity or to use more pure substance (with less additives or “garbage” as many interviewees called a drug cut). This is one the main reasons why many users resort to self-cultivation and CSCs are established. To avoid the risk of tampered drugs together with a desire not to enrich the mafia (see below) some users start cultivating. *I only use what I produce .. when the crop ends I do not use anything [16itfind].*

2.5 NEGATIVE SIDE EFFECTS

At some point people notice the side effects of cannabis: short term memory loss is mentioned as the most frequent. This works like a “red alert” that leads people to use less or to have more break periods.

Symptoms of mild depression are reported as well as a tendency to isolation and to not see other people after binge periods.

When drug pleasure is overwhelmed by negative unwanted emotions, cannabis loses its appeal, and this represents a turning point during which people reassess their cannabis use.

2.6 NEED TO BE MORE FOCUSED

It has been reported that cannabis effects vary between individuals and in each individual effects can vary according to one's current state of mind. This explains why one person stated they used cannabis intensively when it was needed to enhance focusing skills such as during a university period. *Use made my concentration easier, maybe I studied less pages a day but more deeply [13mind].* This insight effect is reported as a wanted and sought effect when it is necessary to understand more about what is going on. *Cannabis makes me thoughtful and able to feel more and to see me inside and see me from a different perspective[10itmcs]; I like it because you do not always experiment the same effect, from dullness to making you focus on things or make you see something you never seen before*



[9itmind]

Nevertheless, a low peak is coincidental for others. It occurs when they needed to stay more focused in order to carry out an important task or a project: the need to be more effective for working or studying in order to achieve better outcomes. *The rhythms of my life and work require me to have a clear mind and not be stoned* [15itfind]; *If I have to do important things, I do not smoke at all*[13mind].

2.7 I HAVE A FAMILY, NOW

All interviewees that are parents, or parents to be, reported a lower peak or no use at all after their children were born and during the early childhood years. We can't say whether children are a regulating agent or whether more controlled use favored the decision to become a parent. In fact, users are aware that children are one of the major changes in everyone's life and cannabis use reflects this.

Two women reported their own decision not to use at all during pregnancy and while breast feeding, while another woman reported less use.

3. PERCEPTION AND MEANINGS OF CONTROLLED/UNCONTROLLED USE

After a long period of use, users are able to self-regulate their cannabis use: all the self-control perception lines drawn during the interview are ascending. The most common reason can be summarized by the following sentence, stated by many interviewees: *"when you know the drug [after having use for long, Ed] you can self-regulate because you know its effects and how to get the effect you like"*.

Nevertheless, some interviewees act in a self-controlled manner but in certain cases they are not completely aware of using control strategies to manage their cannabis use in order to reduce the quantity or to limit risk.

When directly asked, the most common strategies reported concerned risk reduction primarily, such as not using in public places or before driving, or when driving, driving at a slow speed. The word control recalls police control and law enforcement.

When further investigated, some control strategies are reported in order to continue to use and enjoy the positive and wanted cannabis effects, without affecting daily activities. Generally, smoking cannabis during work time is banned by the users themselves and their strategy is to anticipate a joint when the work shift is over, in order to appreciate it better and in a more relaxing setting.

Another form of controlled use is to smoke a joint before going to sleep, to relax and to sleep better.

Uncontrolled use is generally reported, as mentioned above, at the first stage of use, when using alone is more frequent than a social and exclusive use with others and when there is a great availability or provision. As reported, the most difficult challenge is to tackle the initial overwhelming desire to taste and to experiment different kind of cannabis.



4. PERSONAL STRATEGY TO MAINTAIN CONTROLLED USE

In order to maintain controlled use, cannabis users have developed personal strategies according to their skills and competences, developed over time by trial and error. Users come to know their personal craving impulses and their coping skills for managing their distress. These can be different for each individual, but effective nonetheless.

One positive strategy is to set a priority order according to individual contingent needs. For example when a task or a goal is to be achieved, using cannabis is less important and does not interfere with that personal task. As strategies people try to avoid staying at home for a long time, or they would rather spend their free time doing sport, or cooking or whatever they enjoy. Goal setting is definitely a winner strategy.

Another strategy is given by the quality of the drug. As mentioned above, when users are more experienced they look for better quality rather than quantity and a better quality leads to less quantity used, as the effect is maximized with smaller quantities.

4.1 INFORMAL RULES APPLIED BY USERS TO SELF-REGULATE CANNABIS USE WITH ATTENTION TO THE INDIVIDUAL OR group / organized settings (CSC)

Although in Italy no CSC members have been interviewed, but only people belonging to a more or less formal group, some differences in self-regulation among individuals and group setting can be emphasized. Firstly the propensity never to use alone, but only with others in order to share opinions and exchange experiences. Then, as mentioned by all members, the “culture of cannabis” shared and enhanced with and by other members helps in increasing awareness and safety thanks to better quality of the drug. This is an added value given by sharing together.

Individual users are more prone to use personal rules. The following list summarizes our sample suggestions:

- To have small quantities and to avoid friends who smoke a lot
- To self-determine the quantity and the time of day to use, as people do when drinking coffee: 3 coffees a day, 2 in the morning and one after lunch is a common rule to not exceed with caffeine. In the same way one rule is smoking a joint once at home after a working day, one after dinner and one before bed.
- In the case of a large quantity or a big harvest, the amount is divided into smaller parts according to how many days it should last
- Do not have papers on hand, to facilitate smoking less or not smoking at all
- CBD as a substitute



- Using only what has been self-cultivated
- Using only at nighttime
- Using mostly during weekends

It is interesting to note what was reported about possessing larger quantities. In some cases it can lead to less use because people need to be less stoned and vigilant in order to not arouse suspicion and to avoid behaviors that could draw police attention.

4.2 *USERS' EXPECTANCIES ABOUT SELF-REGULATION CAPACITIES AND USERS' BELIEFS ABOUT WHAT KIND OF SUPPORT THEY MAY NEED IN THE CASE OF DIMINISHED CONTROL*

As stated above, users generally report effective self-regulation skills, although this could be a bias due to the face to face interview with a researcher. It is known that people are more prone to respond according to social acceptance, depicting a self- image more acceptable and corresponding to social norms.

No one reported difficulties in self-controlling, highlighting their self-decision making process *I finish what I have and I do not buy it anymore. And even if they offer me I do not smoke, no way. If I'm in a craving phase, I'm smoking all I have if not I do not buy it anymore* [7itfind].

Another strategy to be more aware of whether cannabis use can be impairing or harmful is to set a 15 day break. This is a strategy to determine how and if cannabis is addictive and to experiment how the user feels and acts without the drug.

OBSERVATIONS

Conducting interviews allows the researcher to get into people lives, who then inevitably talk about themselves, even if the focus is their cannabis use. What is evident is that using drugs is strongly related to a user's characteristics, events and lifestyle, including friends and relevant others. It is a further confirmation of the theory that only by taking into account the drug, set and setting we can better understand why and how people use drugs.

A common factor is the overlapping between drug use and life trajectories: higher peaks correspond to chaotic late adolescence, while once people become adults, with adult responsibilities, the peaks are lower. Everyone's life has natural rhythms and different tasks for each age and this affects cannabis use. Thus, each trajectory is influenced by more or fewer "physiological changes" due to natural events (a job, becoming a parent etc) which occur at different ages.

As trajectories of drug use are similar to the phases of life, experiences of trauma, or events perceived as traumatic (including a heartbreak), also affect cannabis use- either increasing or diminishing its use.



Cannabis is generally conceived of as a social drug. Its use starts together with others, and it facilitates social relationships, friendships and empathy with others.

Using alone is perceived as a turning point. After the initiation period, there is usually more intensive use, less dependency on others and the chance to stay with others, and an initial loss of control. Without controls given by friends and social occasions, individuals have to define new personal control strategies and this can take time. On the contrary, however, some report peer pressure to use and therefore, as a form of control, they decided to change friends.

Reasons for a break can vary, but two common dimensions can be traced: the first is that not using is due to an external control. An adverse event can make cannabis use no longer legitimate for the user, for example following the suspension of a driving license and the fear of a positive urine analysis can inhibit cannabis use (fear of worse consequences). The latter is an internal control, with the users him/herself deciding independently to have a break or because he/she realizes things can get out of hand or even because cannabis is no longer enjoyable.

Users show awareness and knowledge, mediated by personal experience and exchange with others.

The control strategies reported in order to enjoy the positive and wanted cannabis effects, without affecting daily activities, include never smoking cannabis during work time and to delay smoking a joint until the evening at home, in order to appreciate it better in a more relaxed setting.

Quality is considered more important than quantity. Quality implies either more intensive psychotropic effects with less quantity or to use a purer substance (with less additives or “garbage” as many interviewees called a drug cut). This is one of the main reasons why many users resort to self-cultivation and CSCs are established.

An ethical perspective to contrast the illegal market, and above all the mafia, encourages the idea of self-cultivation of marijuana, regardless of whether users belong to an organized group or not. Almost everyone has had an experience in self-production, also because they are afraid of potential bad additives. Self-cultivation ensures people have an organic product.

It was quite difficult to talk about control and self-control: only people with a solid cannabis cultural background felt comfortable talking about their control strategies. The others misunderstood control with external /formal control (police control and punishment). A self-regulation perspective probably needs to be discussed in more natural settings.

All the interviewees showed interest in drawing both, the trajectory of use line and the control line, as it provided an opportunity to think and to reflect about themselves and their entire lives and to further understand their use.

Many were surprised to realize their skills and competences in terms of control. They exercise control without being aware of doing so and focusing on this was found to be helpful.

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