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Cannabis in Colonial India: Patterns of Consumption, Regulation, Trafficking, and the Path to Prohibition (1770–1947)

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Abstract

This paper examines how cannabis became a subject of British Indian political concern that the colonialists had to contest. Initially the East India Company regarded it as another local practice, but by mid nineteenth century it was taxed and this provided income as well as some health, morals and civil concerns. Even missionaries and doctors attributed it to madness but the Indian Hemp Drugs Commission of 1893-94 asserted that moderate use was not harmful. Subsequently, some international drug legislation and some local reformers urged the British to switch to prohibition rather than control. During the 1930s and 1940s cannabis was silently criminalised as a new international drug regime. I find that the conflict of earning money and the push to ban resulted in a long-term effect on postcolonial India which culminated into The Narcotic Drugs and Psychotropic Substances Act, 1985.

Keywords: Cannabis, Colonial India, Drug Policy, Prohibition, NDPS Act

Introduction:

There are various varieties of cannabis, such as: bhang (a beverage consisting of leaves), ganja (flowering tops), and charas (resin), and this substance has been ingrained in the social, cultural, and medical life of South Asia since ancient times. It is included in the Hindu rituals, which are documented in Ayurvedic and Unani literature, and is used throughout the rituals to simple leisure time and recreation. At first cannabis first perceived by the British East India Company and then the colonial government, did not correspond to the European concept of intoxicants. In contrast to the alcohol which the British were fond of consuming as a civilised product, cannabis was considered to be a local tradition that was accepted, controlled and later criticised.

This article follows the path of cannabis in British India since the late 1700s to independence. The article demonstrates how the colonial government was in a contradictory position: they demanded tax money, but they admired and did not interfere in local traditions, whereas social and health issues were also their concern. This article also put India in the greater context of drug regulation, indicating how agreements at the early twentieth century pushed the colonial government towards the prohibition of cannabis use. Taking a dive into the usage patterns, the rule-making courses, the trafficking controversy,

and the eventual prohibition, this essay demonstrates how cannabis came to be a questionable issue at the empire, culture, law nexus.

Cannabis in Pre-Colonial and Early Colonial India (1770-1850):

The use of Cannabis in South Asia dates several centuries back even when the British arrived. Bhang in religious life was closely associated with Shaivite worship; Shiva frequently appears with hemp, and in the festival of Holi or Shivaratri was extensively used. Outside of religion, there were a number of Indians who were using cannabis on a daily basis. Ayurvedic authors recommended it in the treatment of digestion, sleeplessness and pain.

Bhang was used in recreation by everyone from aesthetics, fakirs and working class - as a drink or a smoke of ganja to relax. Such practices were observed by British observers in the late 1700s. East India Company termed cannabis as a native practice as they believed that it was not as damaging as alcohol or opium. Reports by the Indian Hemp Drugs Commission, which were based on extensive surveys, in 1893-1894 found that a number of individuals used cannabis and that moderate use was largely benign,ⁱ with the experiment of taxing sellers beginning as early as 1770s.

In the initial step that the British did not rush to treat cannabis as a disease. They instead regarded it as a way of life in India and it was not until later that they started to supervise it. The strengthening of the colonial administration led to cannabis emerging as a formal fiscal issue and an ethical issue in the middle of the nineteenth century.

In spite of the recognition that it does not cause insanity, missionaries and colonial officials were on the alert. They even associated cannabis with insanity, particularly in asylum, but subsequent research indicated that only a minor fraction of asylum cases resulted in cannabis-based products.ⁱⁱ The realisation however underlines how cannabis served as an outline through which British officials engaged in conversations regarding morality, jurisdiction, and regulation.

Colonial State and Institutionalization of Regulation (1850-1890):

By mid-nineteenth century, a complete excise system had been established in British India to make as much revenue as possible out of intoxicants. Cannabis, alcohol, and opium turned into a marketable product. There were provincial excise taxes of cultivation and sales and the growers and sellers were required to be licensed. The cannabis excise income was stable at such regions as Bengal, the United Provinces and Punjab. This monetary interest led to the fact that the Bengal Excise Administration Report of 1871 elaborated how the cultivation of ganja could be directed to the districts like Rajshahi, where it would be taxed and controlled more easily.ⁱⁱⁱ Cannabis excise income resulted in a major provincial revenue, competing with alcohol and opium.

Meanwhile, economic interests ended up conflicting with moral and medical claims. British psychiatry began to associate heavy cannabis consumption with insanity in the 1860s and 1870s. Medical practitioners in asylum claimed that a significant number of patients were hospitalized because of the madness caused by the use of ganja. These connections were frequently exaggerated, according to historians such as James Mills, though the panic of cannabis that had caused madness remained entrenched in the colonial policy. Indian Hemp Drugs Commission was partly established due to the temperance reformers in Britain

who were not comfortable with the rampant use of cannabis. But the cautious support of regulation by the Commission portrayed the financial realism of the colonial bureaucracy.^{iv} Missionaries were addressing the moral side of the discourse, saying that hemp was the final native vice that was evidence of the fall of India. They were in essence aping the Britain temperance spirit, where the anti-alcohol movements were swept in a wider battle against any form of booze. That put the colonial administration between the two camps: on the one hand, excise revenue presented a strong case of regulation, on the other hand missionaries and medical professionals were all in support of its prohibition.

Regulation also entered the domain of trafficking. Cannabis was not only a local pastime, it trespassed borders as far as Kashmir and Nepal going right across India and even to Burma and Afghanistan. The Himalayan charas did well in the north, and smuggling was heading eastwards to Burma and westwards to Afghanistan. Reports to the police at Bengal and the United Provinces were filled with the information of the apprehension of smugglers who were evading government shops and taxes, and there was garnering of charas along the Nepal-British Indian border and an outflow of ganja to Burma.^v Excise and customs made attempts to limit the area of its growing, but it continued, causing concern for administrative officials over the illegal trade. At the end of the 1800s, cannabis was transformed into a harmless cultural substance into a central point of unceasing debates predominant to colonial administration.

The black market was entangled with the local communities that did not desire state monopolies. Farmers simply planted it outside the designated areas to beat the regulations and customers opted to buy cheaper ones, which were not taxed. These networks demonstrate how the local economies responded and resisted the colonial rules. The very term illicit was a colonial invention as well, cannabis had been traded freely before excise bills were ever written.

Medical and Social Discourses:

In colonial India, cannabis was not only about money, but also a health and morality concern. Physicians then were arguing about its pharmacological benefits, some of them accepting that it was good in dysentery, insomnia and tension. The British medics in India were also considering the place of it within traditional medicine, even to the extent of incorporating it into pharma companies.^{vi}

But cannabis had clung in the degeneration and insanity stories too. David Arnold demonstrated that colonial medicine was used to portray Indian practices as primitive and that cannabis was a catalyst of laziness, crime, and insanity.^{vii} By the close of the 19th century, criticism became very vociferous, which fit the requirements as perceived by the empire: regarded cannabis as an adversary to productivity, discipline and social order.

The Indian Hemp Drugs Commission Report (1894-95):

The debate on cannabis in India was not an isolated discourse on Indians alone, but a global discourse. The push of temperance reformers in Britain strained the colonial government to consider the hemp drugs, which resulted in the Commission in 1893-1894. The members of the parliament discussed whether the use of cannabis reflected moral incompetence, which required prohibition.^{viii}

The climax was reached when the Indian Hemp Drugs Commission was established in 1894. Concerned with social and medical consequences of cannabis, missionaries and MPs

lobbied the British government to go to the deep. The investigation was massive: 7 books, 30,000 and more interviews, and testimonies of administrators, physicians, religious leaders, and ordinary users.

The report was a shock to the prohibitionists. The report established that moderate consumption, in particular, *bhanga*, was not socially detrimental. Excessive use may cause health or mental health issues though such instances were infrequent. More to the point, the commission refuted the idea of cannabis serving as a primary cause of crime or lunacy. Its principal suggestion was a plain simple recommendation that they should continue regulating through excise but that banning it was useless and unrealistic.

The result mattered a lot. This was a relief to colonial officials: they would continue to enjoy revenue at the expense of minimal missionary criticism. To the Indians, it legalized the traditional cultural applications of recreational and ritual cannabis. Nevertheless, the commission solidified a medical opinion that abuse may be risky, and cannabis remained in the spotlight despite an outright ban that was delayed.

Between Regulation and Suppression (1900-1930s):

By the 20th century, India had to confront the emerging international narcotics regulation. The initial international drive on drug control, mainly opium, though cannabis culminated into the 1909 Shanghai Opium Commission. Although it primarily concentrated on opium, the conversation surrounding drug regulation increasingly included cannabis.^{ix}

In India, local governments became more restrictive. Growing licenses were reduced, particularly of *charas* in Punjab and the North Western Frontier. The Nepal border was continuing to be used for smuggling, as seen in excise reports, and yearly seizures were registered. Changing cannabis laws from a revenue issue to became a law-and-order issue. Meanwhile reform movements in India started criticizing themselves. The idea of intoxicants was framed as obstacles to moral and social development through rhetoric of nationalism which was deeply influenced by the concepts of Gandhian temperance. Alcohol was the primary target of Gandhi, yet hemp was part of more generalized sobriety and self-control. Social reformers also connected intoxication and poverty with colonialism, making cannabis the image of the decline of society.

These two dialogues demonstrate the dual problem of the colonial government: foreign demands of stricter drug control and domestic radicalization rhetoric that drove India towards the sober, discipline-cantered future. The equilibrium was beginning to shift away from just regulation to a newer level of suppression.

The Path to Prohibition (1930s-1947):

The important transformation happened in the interwar years. Cannabis was officially placed in the international narcotics control system at the League of Nations Geneva Conventions of 1925, and once more at 1931. William McAllister notes that British officials in India tended to resist extreme controls of the cannabis trade, fearing to lose revenue and spur the masses to action; however, global diplomatic pressure finally forced policies into prohibitionist lines of thought.^x

In the case of British India, it was to conform domestic rules with that of international obligations. Laws on excise became stricter, imports of *charas* from Nepal and Kashmir became limited and smuggling became more strictly punishable criminal offence. As can be seen in police and court reports of the 1930s and 1940s, there was a distinct change of

language: cannabis dealers were no longer merely tax evaders, but a part of an international illicit drugs distribution business. James Mills asserts that the history of cannabis as a harmless drug became established, partly because Britain was signatory to international treaties which required tougher restrictions.^{xi}

These changes became more enhanced by World War 2. The state of wartime security brought certain attention to the aspect of smuggling and black-market operations, and the colonial state was even more conscious of it. By the 1940s, cannabis had been mostly relegated to the outskirts of the mainstream economy of British India, and had only survived in black markets or localized ritual consumption.

This prohibitionist pattern was continued with independence in India in 1947. Although the new government did not prohibit cannabis at once, the foundation to prohibit cannabis in the future was already laid. India was bound by the treaties of the UN, and the general global tendency of regulation of drugs, so the country finally developed the hard line of attitude, which ended in the Narcotic Drugs and Psychotropic Substances Act of 1985.

Conclusion:

The British Indian history of cannabis demonstrates how the colonial government struck the right balance between cultural, economic, and international politics. Originally regarded as an ingrained social and religious tradition, cannabis got entangled with the fiscal policy, medical discussion, and moral reformation. The Indian Hemp Drugs Commission of 1894-95 was a turning point, as it showed the strength of the native traditions as well as the limits of the colonial prohibitionist spirit.

Nevertheless, the widespread change in the twentieth century was unavoidable. International arrangements targeting the narcotics reduction made the colonial government sharpen its tactics gradually transforming cannabis as a taxable commodity to an outlawed product. This transition was pushed further by domestic advocates who were driven by nationalist and Gandhian concepts by describing intoxicants as barriers to moral renewal. By the independence of India, cannabis had already been put at the legal fringes. Colonial tax and law-enforcement systems were passed on to the new Indian state--and a prohibitionist mentality informed by international agreements. This tradition was later reintroduced in strict guidelines that criminalized the production and consumption of cannabis.

Therefore, by examining cannabis in British India, one can see that it is a question that involves more than a simple glance at a plant, but it also means how the empire managed to balance culture, medicine, and morality amid local customs and global demands. It reveals the complex manoeuvres of colonial rule and how global systems had a long-lasting influence on the postcolonial cultures.

Endnotes

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