

July 18, 2016

The Honourable Jane Philpott  
Minister of Health  
Government of Canada  
70 Colombine Driveway  
Tunney's Pasture  
Postal Location: 0906C  
Ottawa, Ontario K1A 0K9

Dear Minister Philpott,

Health Accord  
Addiction and Mental Illness in Youth and Adults

Our organizations, Families for Addiction Recovery and Faces and Voices of Recovery Canada, represent youth, adults and families affected by addiction and mental illness. We need your help and that of your government to keep our loved ones alive by breaking down the main barrier to recovery; the lack of funds for timely treatment.

We are pleased that Prime Minister Trudeau's mandate letter to you, as the Minister of Health, directs you to engage the provinces and territories in the development of a new multi-year Health Accord to include, as top priorities:

- making high quality mental health services more available to Canadians who need them; and
- supporting the Ministers of Justice and Public Safety and Emergency Preparedness on efforts that will lead to the legalization and regulation of marijuana.

**The treatment imperative**

A new Health Accord affords the federal government an excellent opportunity to begin to redress the chronic underfunding of the treatment of addiction and mental illness that has existed and adversely affected our families for too long.

Just as it is imperative to have laws that deal with drug impaired driving prior to the legalization of cannabis, it is imperative to have treatment available for youth and adults with cannabis use disorder and other substance use disorders prior to the legalization of cannabis.

As our members have personally experienced, the outcomes of untreated mental illness and addiction in our youth, at every socio-economic level, include:

- chaotic living arrangements: homelessness, group homes (even where the child is from a functional home), psychiatric wards, juvenile detention and revolving door visits to hospital emergency departments;
- illegal activities: prostitution, drug dealing, and stealing to fund the addiction, and driving impaired;
- serious health problems: sexual abuse, physical abuse, HIV, Hepatitis C, substance use induced psychosis, suicide, overdose leading to permanent brain damage, heart attack or death; and
- dropping out of school.

Treatment is the most effective and cheapest alternative. However, the vast majority of our youth do not receive any treatment. The wait time at Ontario's Pine River Institute, for example, the only long term treatment center in Ontario for youth with concurrent mental illness and addiction was 14 months in 2012 and 16 months in 2014. There are currently 204 youth on the waiting list. Most of these youth have problematic use of alcohol and/or cannabis. In BC the only long term treatment center actually closed, but is now scheduled to reopen. Bad things happen when youth wait for treatment. It has been estimated that 70% of juvenile offenders have mental illness and/or addiction.

Canada spends just over 7% of its public health budget on mental illness and addiction but the burden of these diseases in Canada in 2013 was between 10% and 11%<sup>1</sup>. By comparison, countries like New Zealand and the UK spend 10%-11% of their public health budget on mental illness and addiction. In 2012, the Mental Health Commission of Canada in *Changing Directions, Changing Lives, The Mental Health Strategy for Canada*, called for Canada to increase the amount it spends on mental illness and addiction from 7% to 9% over 10 years. This recommendation pre-dates the federal government's commitment to legalize cannabis, which will generate income for the federal and provincial governments, and the current opioid overdose epidemic which is killing thousands of Canadians annually, many of them our youth and young adults with addiction and mental health problems.

### **Necessary Health Accord commitments to fund treatment**

Prime Minister Trudeau has stated that the net cash flows to public coffers from the taxation and regulation of cannabis should go towards addiction treatment, mental

---

<sup>1</sup> Institute for Health Metrics and Evaluation (2015). *Global Burden of Diseases, Injuries, and Risk Factors Study, 2013*. Data retrieved from <http://www.healthdata.org/data-visualization/gbd-compare>

health support and education programs and not general revenues. We applaud these directions and announcements. In negotiating a new Health Accord with the provincial and territorial governments, we therefore call upon you, the Prime Minister and the federal government to ensure that a commitment is made by all signatories to:

- use the net profits from the taxation and regulation of cannabis to fund the treatment of mental illness and addiction in each province/territory until such spending is equal to the burden of those diseases in such province/territory; and
- increase the spending on mental illness and addiction in each province/territory until it is equal to the burden of those diseases in such province/territory.

We believe that the major barrier to treatment and recovery to date has been the lack of political will to dedicate the funds necessary to provide for the timely and comprehensive treatment of mental illness and addiction. In fact, there are many studies and research papers that show there is a positive return on investment in treating mental illness and addiction (versus not treating it) such as a reduction in hospital and emergency room costs, correctional services costs, policing costs, judicial system costs and overall societal costs.

Persons and families affected by addiction have primarily been the ones to bear the burden of the criminalization of drugs. We are hopeful that in fulfilling your mandate the harms to our families will be reduced by the legalization of cannabis. That will be the case if, as Prime Minister Trudeau has committed, the net profits from the sales of cannabis are dedicated to funding treatment and the government delivers on its commitments.

### **The opioid overdose epidemic: A national public health emergency**

Our second request relates to the opioid overdose epidemic. We call upon the federal government to take a leadership role in the face of what is clearly a national public health emergency, by coordinating an urgent response by the federal, provincial and territorial governments that includes the development of best practices and measures to support and ensure adherence to those best practices. Such a role is squarely within the federal government's responsibility. We waste precious time and money, and more importantly, the lives of our children, if each province and territory has to reinvent the wheel in determining how to proceed.

## **A seat at the table**

Our final request is to have a seat at the table with respect to the regulation of cannabis, the summit to address the opioid overdose epidemic, and other matters relevant to persons or families affected by addiction.

We would very much appreciate the opportunity to meet with you, and those of your public officials with responsibility for these matters, at your earliest opportunity.

Please read the Schedule attached to this letter (written by the son of one of our members) which illustrates the suffering, devastation and loss of life experienced by our youth with untreated addiction and mental illness, as well as the hope for recovery.

Yours truly,

“Angie Hamilton”

Angie Hamilton, Executive Director  
Families for Addiction Recovery

“Lisa Simone”

Lisa Simone  
Faces and Voices of Recovery Canada

cc: Hilary Geller,  
Assistant Deputy Minister, Health Canada

Dr. Gregory Taylor  
Chief Public Health Officer

## SCHEDULE

Dear Minister Philpott,

I know the odds of you actually reading this letter are slim but it's worth a try. Not for me, but for the countless teenagers and families of adults across the province of Ontario. As a general practitioner, I'm quite certain you have been exposed to many youths and adults who struggle or have struggled with mental health and addictions issues. I'm one of those who have struggled.

The funding for services in Ontario are lacking substantially. The treatment centers have immense waiting lists and young people are dying. At fifteen years old I was stripped from my school and home and was sent to Utah because there were no quality facilities for me to attend in Ontario. I felt abandoned, alone and hopeless. Those feelings continued for a long time. After returning home at the age of seventeen the struggle continued. My mental health reached a low. After eating an entire prescription bottle of Seroquel and clonazepam in the hopes I wouldn't wake up, I woke up in Sunnybrook, fortunately. Once again, alone. I left the hospital with no new ideas, supports or approaches to my addiction and depression. Needless to say, a lifestyle surrounding drugs, alcohol and crime continued to plague my life and nothing changed.

People in Ontario who are seeking help have to wait for an eternity in order to get the help they need. Getting to a point where someone is ready for help is an incredibly powerful and timely process. Unfortunately, when someone in Ontario reaches this point, they feel abandoned and their opinions on needing help often change when they're told that they must wait for months to get help. People go to jail, people overdose, people commit suicide and a small percentage are lucky enough to seek help outside of Ontario like myself.

I have over 10 months clean off drugs and alcohol and I go to university with a 4.0 GPA (straight A's). I'm off of all of my depression medications and have found things I love to do. We do recover when provided with the chance. That's why this letter has been written. I'm begging for you to provide these teenagers and adults with a chance. As a citizen of Canada we pride ourselves with the notion of free healthcare. The reality is that it's free after waiting for months. That is sad knowing how many people will lose their loved ones in this time frame without them ever having a chance at life. Knowing they were plagued by the disease of addiction which lead to their death. Narcotics Anonymous literature states "Although we are not responsible for our disease, we are responsible for our recovery". I plead, that the government of Ontario begins to provide the necessary support and tools to allow addicts and alcoholics to become responsible for their recovery. It's blatantly obvious that more funding is needed to provide quality care for the sick, tired and suffering individuals.

"Ontario Health Minister Tony Clement estimated that, as of June 27, 2003, SARS had cost that province's health-care system \$945 million" (CBC News, 2003). "SARS claimed 44 lives in Canada" (Branswell, 2013). "47,000 Canadian deaths are

linked to substance abuse annually.” -Health Officer's Council of British Columbia. In one year in Canada, 1068 times more people die of substance abuse than the SARS “epidemic”. I would like to see the priorities amongst healthcare spending change as the effect from drugs and alcohol on our society is almost unfathomable.

I’m only 21. Countless friends of mine have overdosed and lived, some have died. I can’t count how many have overdosed and have survived but I can count some. My friend Adam\* overdosed twice at 17 and lived but he had two heart attacks, his girlfriend also 17 lived but has lasting brain damage. My other friend Jenna overdosed at 18 and lived. Years later at 21 she jumped off a bridge and broke her spine. Those were examples of the lucky ones. My friend John committed suicide at 17. Brandon overdosed at 23 and died with his friend on a logging road in British Columbia. Tammy died at 32 of an overdose on Fentanyl. Kendal was 38 when he died of an overdose (his daughter was about 4 years old at that time). Hopefully their deaths aren’t in vain; solutions can be made with the support of our government. Whether acknowledged or not, the epidemic is evident and I urge you to spend some time to empathize with me and the countless others who have been in my shoes. As the saying goes, “By changing nothing, nothing changes.” -Tony Robbins. Please, show care and concern for our struggling friends and families.

A concerned Canadian citizen and Ontarian  
-Dave

\*Pseudonyms have been used for the names of all of my friends.