

To: The Department of Justice

Introduction

Families for Addiction Recovery (FAR) is a Canadian registered charity founded out of the lived experience of parents whose children have struggled with substance use disorder (SUD) from an early age. FAR's mission is to protect people, particularly teenagers and young adults, struggling with SUD and support their families. FAR aims to change the face of addiction by advocating for publicly-funded, timely, compassionate, evidence-based treatment, reducing harms, supporting research and working to end stigma.

Submission Regarding the Transformation of the Criminal Justice System

Recommendations

1. Adopt a public health approach to drugs and drug policy and decriminalize the possession of all drugs for personal use.

(a) An evidence based approach

The [2016 Canadian Community Health Survey](#) was recently released. Over 10% of Canadians aged 12 years or older reported using illicit substances in 2016. That's 3.2 million Canadians. Over 6% of youth aged 12-17 reported illicit substance use. Prohibition is not preventing Canadians from using illicit drugs. It is maximizing the harm to both recreational users and those struggling with addiction. We need a public health approach to drugs and drug use, not a criminal justice approach.

The organizations calling for an end to the war on drugs include the World Health Organization (WHO), the Global Commission on Drug Policy, the Lancet Commissions, the American College of Physicians, the Canadian Public Health Association (CPHA), the Canadian Society of Addiction Medicine (CSAM) and the Canadian Drug Policy Coalition (CDPC) among others. Portugal's experience of decriminalizing possession of all drugs for personal use in 2001, together with addressing social determinants of health (housing, jobs) has resulted in an **80% decrease in the overdose rate**.

Further, the majority of persons with addiction do not seek treatment. They often cite stigma as the reason they do not seek treatment. Once Portugal decriminalized drugs, **those seeking treatment for addiction rose 60%**.

We are in the midst of an opioid overdose epidemic. Over 3,000 Canadians died last year from an opioid overdose and this number will be exceeded in 2017. The measures taken to date are not stemming the tide.

(b) An ethical approach

Addiction is generally described as compulsive drug seeking despite negative consequences. It is a chronic, relapsing brain disorder. Those struggling with addiction can lose everything that matters to them, including their lives. It is clear that punishment, such as incarceration, will not deter use.

At its core, addiction is self-harm. The purpose of criminal law is to protect people from other people, not to protect them from themselves. Prior to 1972 it was illegal in Canada to attempt suicide. It is clear now that this was a ridiculous law. It is only a matter of time before society views addiction in the same way. The sooner we treat it as the health issue that it is, rather than the criminal justice issue that it is not, the more lives (and taxpayer dollars) will be saved. It is unethical, illogical and a double standard to criminalize those addicted to illicit substances, but not those addicted to alcohol or prescribed drugs.

Further, the majority of people can use legal, illegal and prescribed substances without developing an addiction to them. They are neither a danger to themselves or others. There is no justification for criminalizing them.

2. Control and regulate the distribution of currently illegal drugs according to their respective risks and harms as part of an evidence-based, public-health approach to drugs and drug policy.

Overdose deaths are not limited to those with SUD. Non-problematic recreational users are also dying because of the toxicity of the illegal drug market. These deaths could be prevented if the government controlled and regulated the illegal drug market so that recreational users knew what they were purchasing and the dosage, as is the case for alcohol.

References supporting the decriminalization, control and regulation of drugs can be found in Schedule A attached.

3. Repeal all mandatory minimum prison sentences in the Controlled Drugs and Substances Act.

4. Collaborate with the Ministries of Health at the federal and provincial/territorial levels to ensure those who commit crimes due to untreated SUD and/or other mental health conditions are not criminalized but receive the treatment that they need and deserve.

Decriminalizing the possession of drugs for personal use will not be sufficient to keep those with SUD and/or other mental health conditions out of prison or jail. Those struggling with addiction (the severe end of SUD) are often engaged in criminal activities to support their addiction. This is particularly true for youth and young adults. It is a result of their illness.

If those with SUD remain untreated, they are likely to end up in the criminal justice system, or worse. Untreated addiction and/or other mental health conditions have the worse outcomes at the greatest expense to society. We concur with the solutions recommended in a paper prepared for the Department of Justice Canada by the Honourable Mr. Justice Richard D. Schneider titled *The Mentally Ill: How they Became Enmeshed in the Criminal Justice System and How We Might Get Them Out*, March 2015.

- 5. Those who are incarcerated or temporarily detained and have SUD and/or other mental health conditions must have timely access to evidence based treatment, including medication assisted treatment (MAT), for these conditions while incarcerated or detained.**
- 6. Relapse (alcohol or other drug use) should not be grounds for the revocation of bail or probation.**

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SCHEDULE A

A PUBLIC HEALTH APPROACH TO DRUG POLICY REFERENCE LIST

1. [Canada's Drug Futures Forum: Summary of Proceedings and Final Recommendations](#)
July 2017
2. [Model Drug Law to 2020](#)
New Zealand Drug Foundation, 2017
3. [Advancing Drug Policy Reform: A New Approach to Decriminalization](#)
Global Commission on Drug Policy, 2016
4. [A Public Health Approach to Drug Use in Asia: Principles and practices for decriminalization](#)
International Drug Policy Consortium, 2016
5. [Taking a New Line on Drugs](#)
Royal Society for Public Health, 2016
6. [The War on Drugs: Threatening Public Health, Spreading Death and Disease](#)
Count the Costs: 50 Years of the War on Drugs
7. [The War on Drugs: Promoting Stigma and Discrimination](#)
Count the Costs: 50 Years of the War on Drugs
8. [A Public Health and Rights Approach to Drugs](#)
UNAIDS, 2015
9. [Drug Decriminalization in Portugal: A Health-Centred Approach](#)
Drug Policy Alliance, 2015
10. [A Quiet Revolution: Decriminalization across the Globe](#)
Release U.K., 2015
11. [Taking Control: Pathways to Drug Policies that Work](#)
Global Commission on Drug Policy, 2014
12. [Drug Decriminalization in Portugal: Setting the Record Straight](#)
Transform Drug Policy Foundation, 2014
13. [A New Approach to Managing Illegal Psychoactive Substances in Canada](#)
Canadian Public Health Association Discussion Paper, 2014

14. [Policy Brief: Consolidated guidelines on HIV prevention, diagnosis, treatment and care for key populations](#)
World Health Organization, 2014
15. [Getting to tomorrow: A report on Canadian drug policy](#)
Canadian Drug Policy Coalition, 2013
16. [Defining and Implementing a Public Health Approach to Drug Use and Misuse](#)
American Public Health Association, 2013
17. [Changing the Frame: A New Approach to Drug Policy in Canada](#)
Canadian Drug Policy Coalition, 2012
18. [Public Health Perspectives for Regulating Psychoactive Substances: What We Can Do About Alcohol, Tobacco, and Other Drugs](#)
Health Officers Council of BC Discussion Paper, 2011
19. [Final Report of the Commission of Inquiry into the Non-Medical Use of Drugs](#)
(i.e. the Le Dain Commission), 1973
20. [The Vienna Declaration: Leading the way to evidence based drug policy](#)
2011
21. [Decriminalization of Narcotics](#)
The Law Library of Congress, Global Legal Research Center, 2016
22. [B.C. Overdose Action Exchange II](#)
BC Centre for Disease Control Harm Reduction Program, 2017
23. [Cannabis Law Reform in Canada: Pretense & Perils](#)
DeVillaeer Michael. University, The Peter Boris Centre for Addictions, 2017
24. [HIV and the criminalisation of drug use among people who inject drugs: a systematic review](#)
Debeck, The Lancet HIV, 4(8), e357–e374.
25. [From the Mountaintops: What the World Can Learn from Drug Policy Change in Switzerland](#)
Open Society Foundations, Global Drug Policy Program
26. [Every door is the right door: a British Columbia planning framework to address problematic substance use and addiction.](#) (2004) British Columbia Ministry of Health Services.

27. After the War on Drugs: Blueprint for Regulation [Transform Drug Policy Foundation](#)
28. Hughes, C., & Stevens, A., [What can we learn from the Portuguese decriminalization of illicit drugs?](#) *British Journal of Criminology* 2010; 50. Pp. 999–1022.
29. Ottawa Charter for Health Promotion. First International Conference on Health Promotion, Ottawa, 21 November 1986. Accessed at: <http://www.who.int/healthpromotion/conferences/previous/ottawa/en/index3.html>
30. The 8th Global Conference on Health Promotion, Helsinki, Finland, 10-14 June 2013. [The Helsinki Statement on Health in All Policies World Health Organization and Finland](#). Ministry of Social Affairs and Health.