



Canadian Drug  
Policy Coalition

Coalition canadienne  
des politiques  
sur les drogues

# New Directions in Drug Policy

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New Directions in Community Safety

ACCPA Annual Conference

Edmonton, 2018

**SFU**

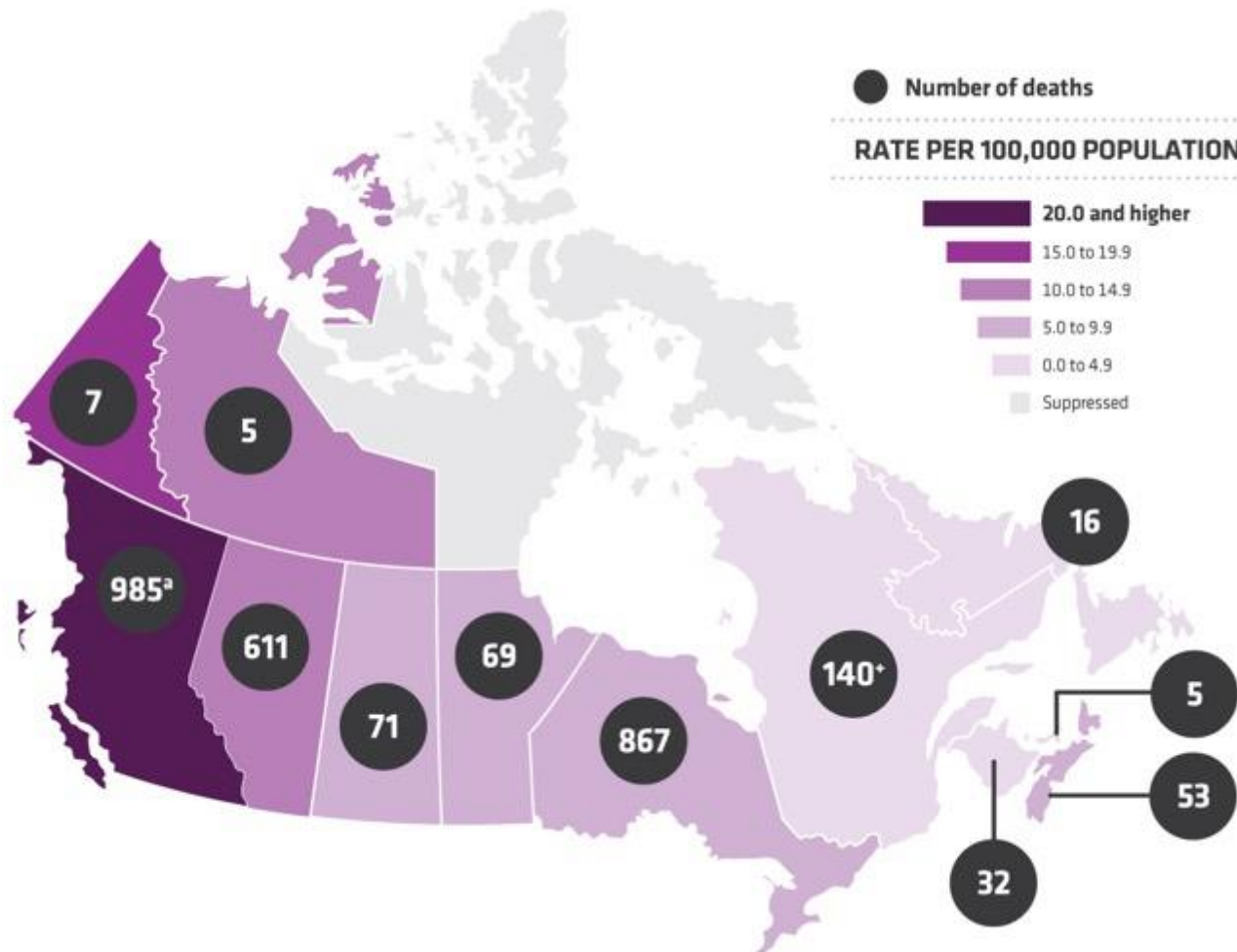
ENGAGING THE WORLD

Toronto, ON

May 1, 2018

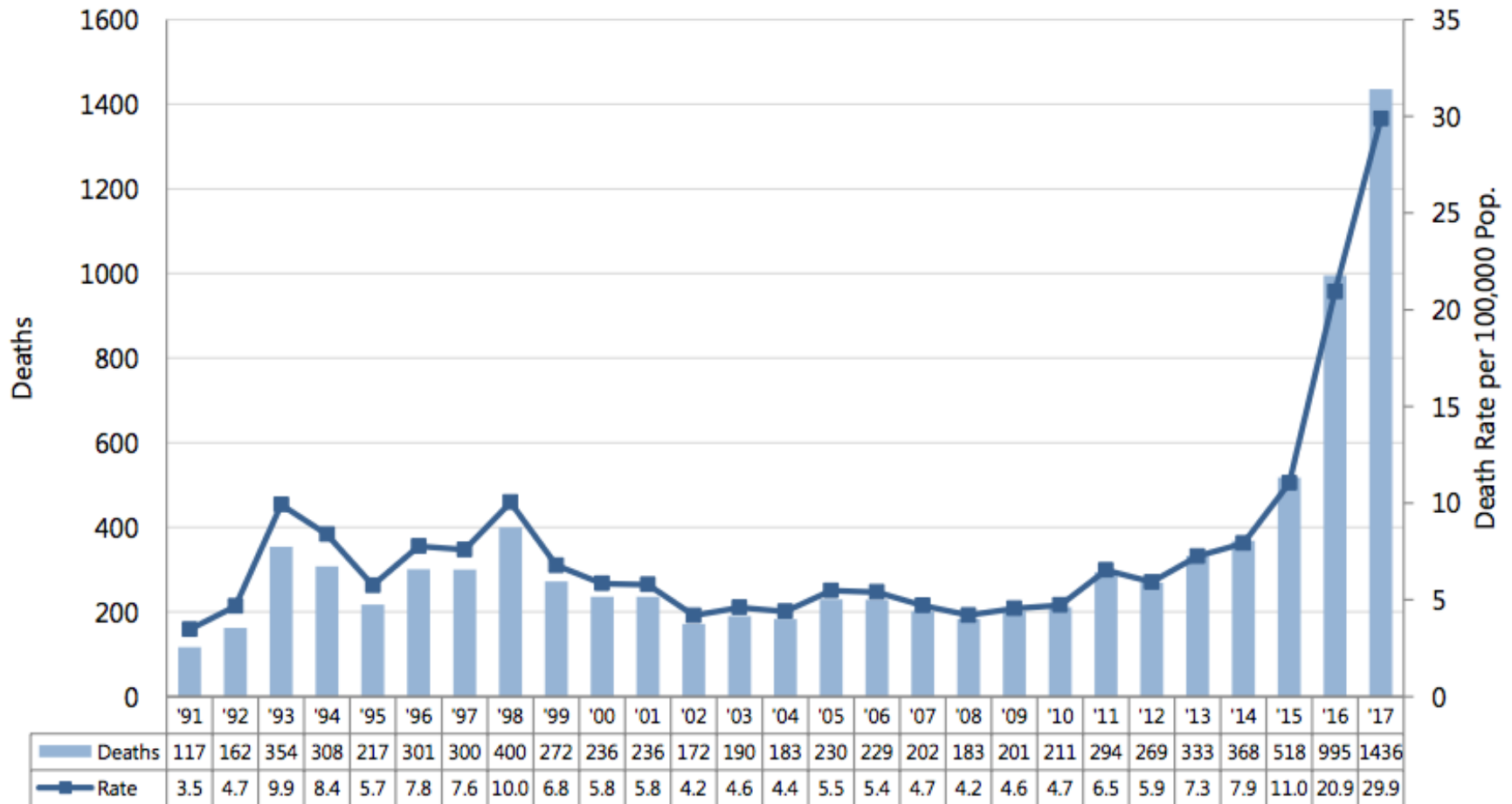
# Overdose Crisis 2016

## 2,861 Deaths



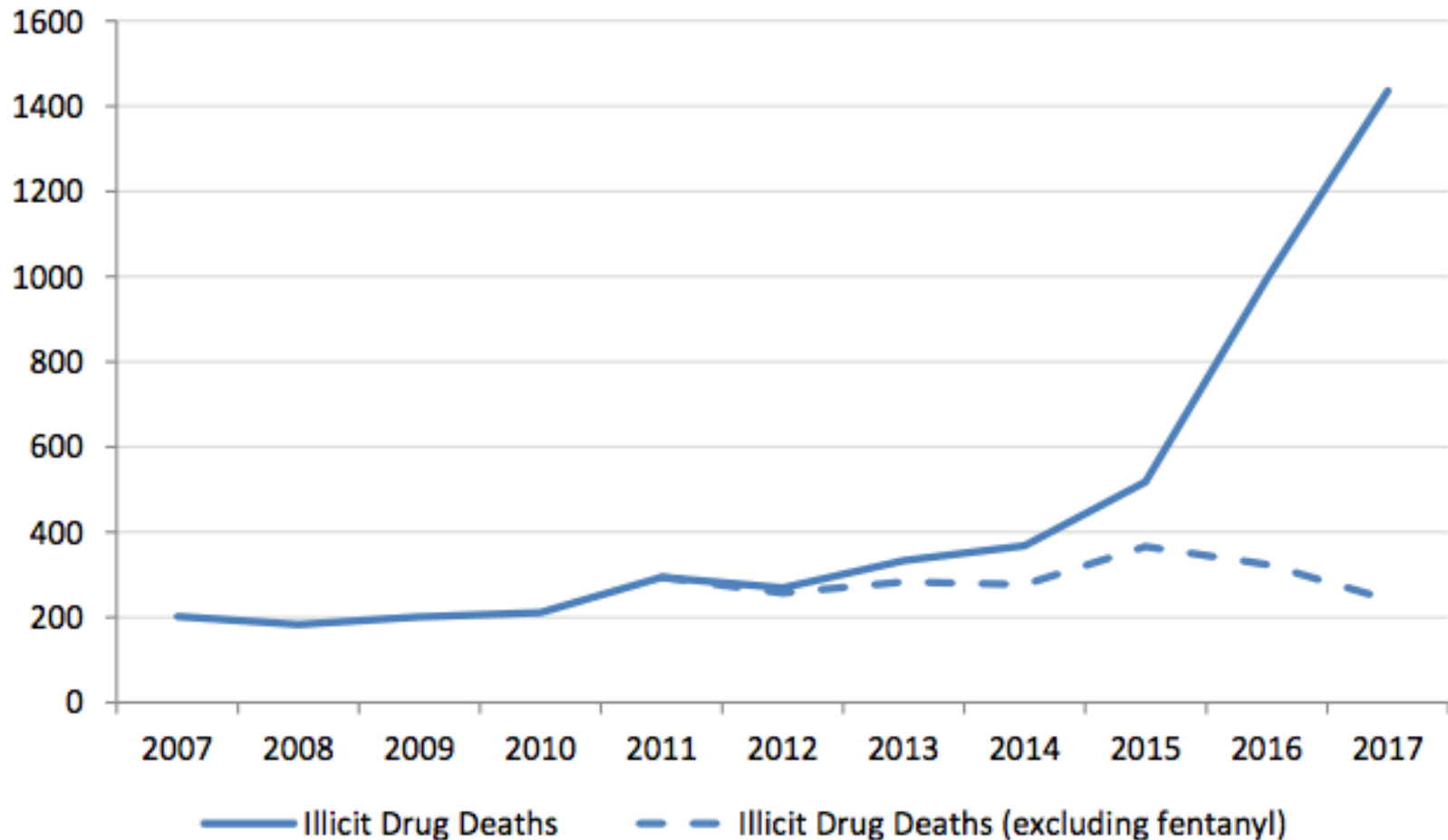
Source: Health Canada. National report: Apparent opioid-related deaths in Canada (released March 2018).

# Illicit Drug Overdose Deaths and Death Rate per 100,000 (BC)



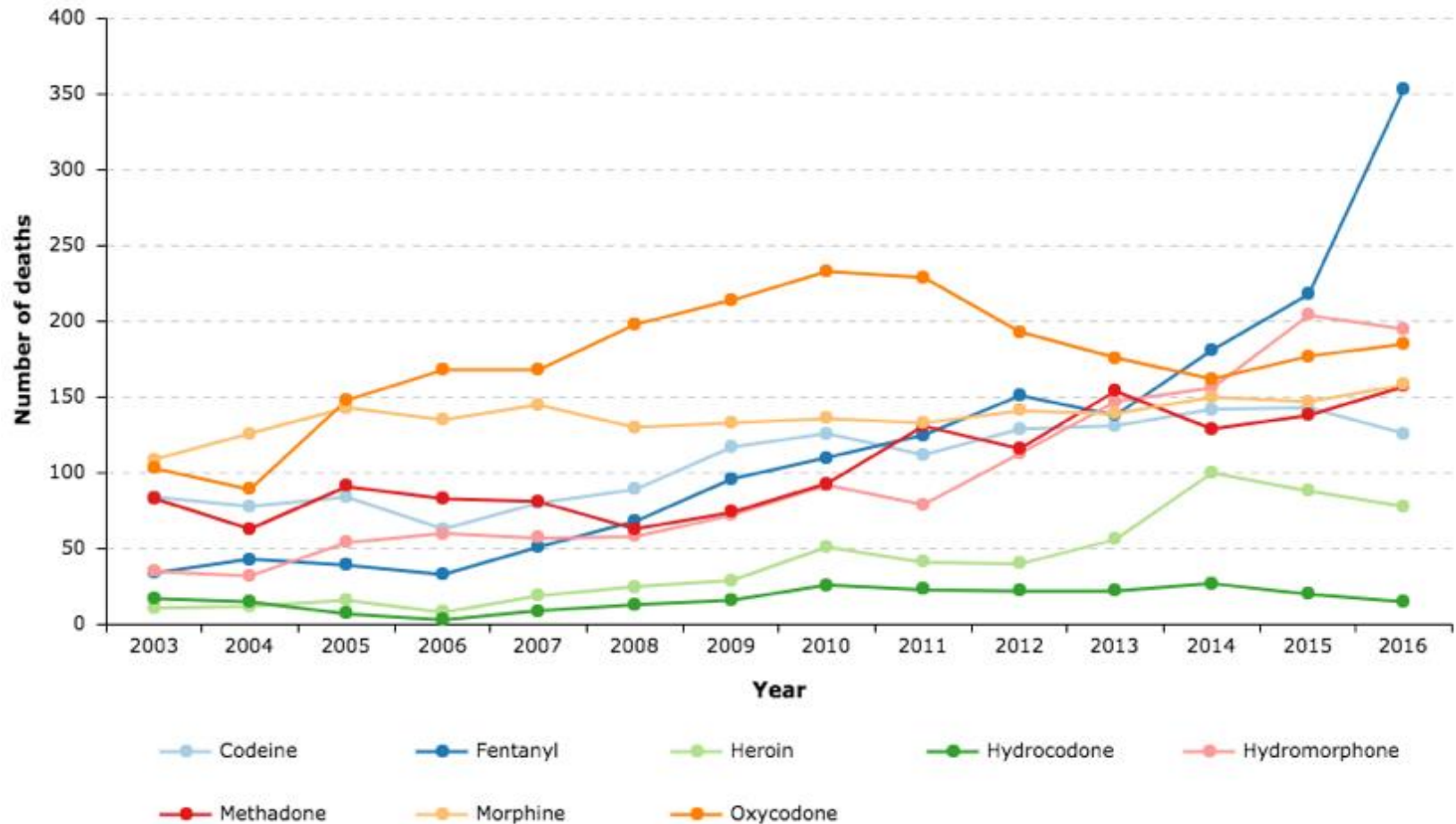
January 1, 2008 – January 31, 2018. BC Coroners Office, March 2018.

# Illicit Drug Overdose Deaths incl. and excl. Fentanyl (BC)



January 1, 2008 – January 31, 2018. BC Coroners Office, March 2018.

# Type of opioid present at death Ontario, 2003 – 2016



Source: Public Health Ontario. Opioid-related morbidity and mortality in Ontario (March 7, 2018). Retrieved from: <https://www.publichealthontario.ca/en/dataandanalytics/pages/opioid.aspx#/drug>

**UNDCP**

United Nations International  
Drug Control Programme



**A Drug-Free  
World  
We Can Do It**

United Nations General Assembly Special Session  
on the World Drug Problem New York 8-10 June 1998

# The Gentlemen's Club, 1975

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*“...The Commission has done truly constructive work.*

*By now, the problems have been clearly defined and some of them have been solved, or the instruments of their solution have been created: non-medical consumption of opium, coca leaf, cannabis, and of the drugs manufactured from them is **outlawed in principle and is bound to disappear** after transitional periods of adaptation...”*

—“Twenty Years of Narcotic Control Under the United Nations— Review of the Work of the Commission on Narcotic Drugs,” *Bulletin on Narcotics* (1966)



Photo: Bruce Taylor, New Hampshire State Police Forensic Lab



# The Iron Law of Prohibition

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*"The iron law of prohibition is a term coined by Richard Cowan in 1986 which posits that as law enforcement becomes more intense, the potency of prohibited substances increases.[1]*

*Cowan put it this way: "the harder the enforcement, the harder the drugs." [2]*



The Bacon Brothers members or Red Scorpions gang



The United Nations Gang  
Photo: The Vancouver Sun (January 17, 2012)

# RCMP's Bob Paulson sounds alarm on organized crime in exit interview



RCMP Commissioner Bob Paulson poses for a portrait in a 1956 RCMP Ford highway patrol car June 28, 2017 in Ottawa.

DAVE CHAN/THE GLOBE AND MAIL

**LAURA STONE** > PARLIAMENTARY REPORTER  
OTTAWA  
PUBLISHED JUNE 29, 2017  
UPDATED JUNE 30, 2017

Canada's top cop – a police commander known for his hard stand on terrorism investigations – is heading for the exit gates saying that organized crime is the biggest threat facing Canadians.

While Bob Paulson, the exiting RCMP Commissioner, acknowledged the possibility of Islamic State-inspired attacks is now an ever-present reality in Canada, he said such national security risks are "significantly less" of a threat than organized crime.

## TRENDING

- 1 Morning Update: More veterans using cannabis; Alberta's UCP passes controversial motion
- 2 Young Canadians are building wealth and growing nest eggs – while renting
- 3 Monday's TSX breakouts: This company has increased its dividend by 50% and forecasts record performance in 2018
- 4 Illegal border-crossers could erode confidence in Canada's immigration system – and in the Trudeau Liberals
- 5 Study calls for closer evaluation of pregnant women who have had previous C-sections

RED  
MOUTH

STOP  
TOYS

FIX AT

LABEL

DOWN  
RISK







**Insite (Interior)  
Vancouver Supervised Injection Site**





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**1000 Crosses, Oppenheimer Park**  
**Photo: Elaine Brière**

# Mayor Nenshi “Nails It”

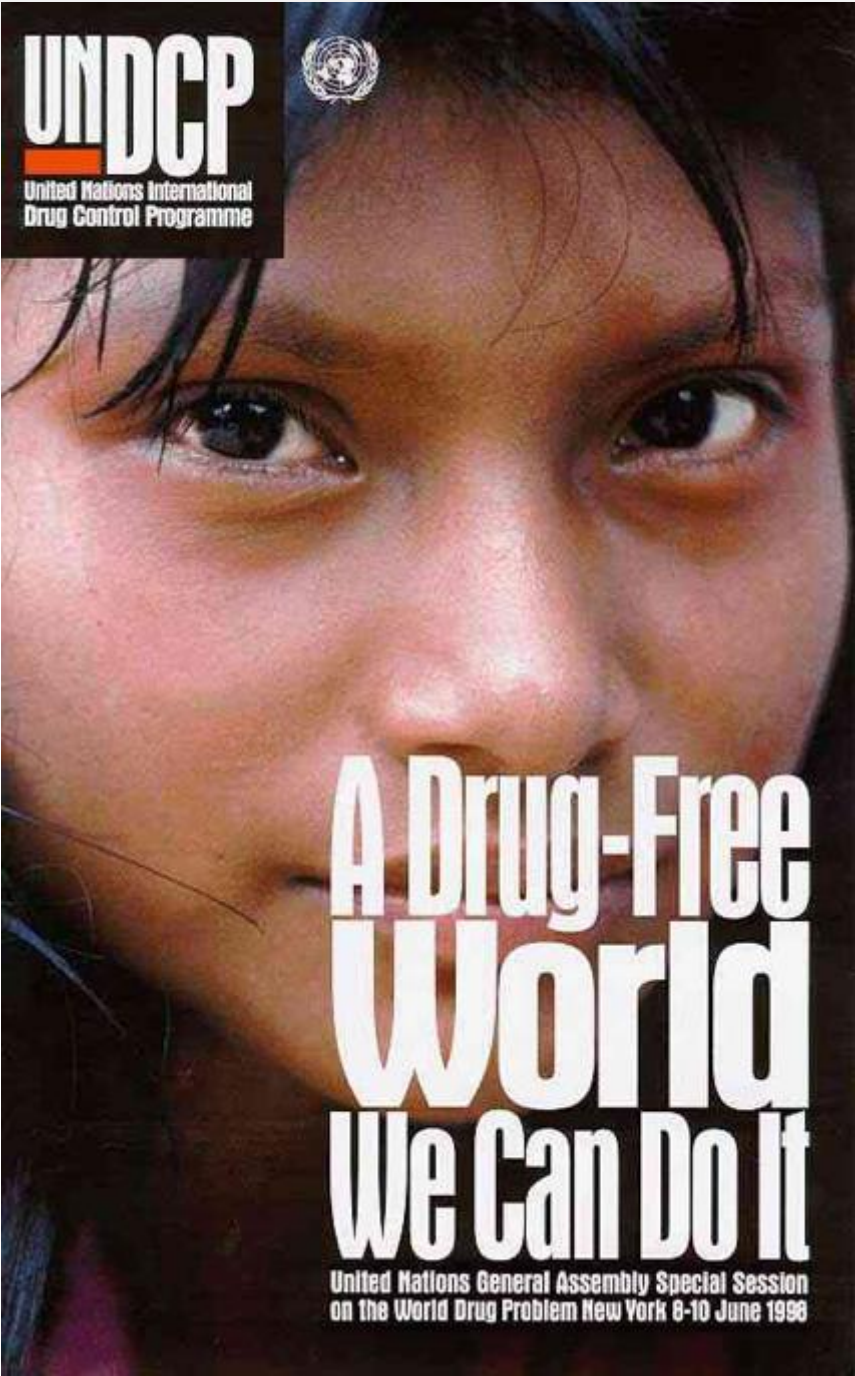
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“No fan of supervised injection sites, Calgary’s Mayor Naheed Nenshi, describes SCS:”

*“I find that they almost feel like an admission that we’re not able to solve the problem, but that said, my personal feelings aside, the evidence is absolutely clear. Absolutely clear. They save people’s lives, and our job today has to be to save people’s lives.”*

**UNDCP**

United Nations International  
Drug Control Programme

A close-up, high-contrast photograph of a young girl's face, looking directly at the camera with a serious expression. Her dark hair is slightly messy, and her eyes are prominent. The lighting is dramatic, highlighting her features against a dark background.

# A Drug-Free World We Can Do It

United Nations General Assembly Special Session  
on the World Drug Problem New York 8-10 June 1998

## Mr. Kofi Annan, Secretary General, United Nations

Dear Secretary General,

On the occasion of the United Nations General Assembly Special Session on Drugs in New York on June 8-10, 1998, we seek your leadership in stimulating a frank and honest evaluation of global drug control efforts.

We are deeply concerned about the threat that drugs pose to our children, our fellow citizens and our societies. There is no choice but to work together, both within our countries and across borders, to reduce the harms associated with drugs. The United Nations has a legitimate and important role to play in this regard – but only if it is willing to ask and address tough questions about the success or failure of its efforts.

We believe that the global war on drugs is now causing more harm than drug abuse itself.

Every decade the United Nations adopts new international conventions, focused largely on criminalization and punishment, that restrict the ability of individual nations to devise effective solutions to local drug problems. Every year governments enact more punitive and costly drug control measures. Every day politicians endorse harsher new drug war strategies.

What is the result? UN agencies estimate the annual revenue generated by the illegal drug industry at \$400 billion, or the equivalent of roughly eight percent of total international trade. This industry has empowered organized criminals, corrupted governments at all levels, eroded internal security, stimulated violence and distorted both economic markets and moral values. These are the consequences

WE BELIEVE  
THE GLOBAL WAR  
ON DRUGS IS NOW  
CAUSING MORE  
HARM  
THAN DRUG ABUSE  
ITSELF.

An open letter was published in the New York Times to Kofi Annan, Secretary General, United Nations about the harms associated with the global war on drugs.

# Historical Context

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- BC historically a leader in responses to problematic substance use:
  - *CCF MLA Ernie Winch – 1950's advocated for maintenance doses (the British system) for people who use drugs – health issue vs. criminal issue*
  - *The Community Chest and Council of Greater Vancouver's Special Committee on Narcotics was established. Dr. Lawrence Ranta released Ranta Report (1952) calling for narcotic clinics to dispense maintenance doses of legal drugs like heroin and morphine*
  - *Robert Halliday, early 60's – 1<sup>st</sup> Methadone prescribing in Canada for opioid dependency*
  - *1990's Harm Reduction movement, Four Pillars Drug Strategy, heroin assisted treatment and SCS*
  - *April 12<sup>th</sup>, 2018 – City of Vancouver calls for a Federal Task Force to explore decriminalization of drugs for personal use*

# Consumers Union Report 1972

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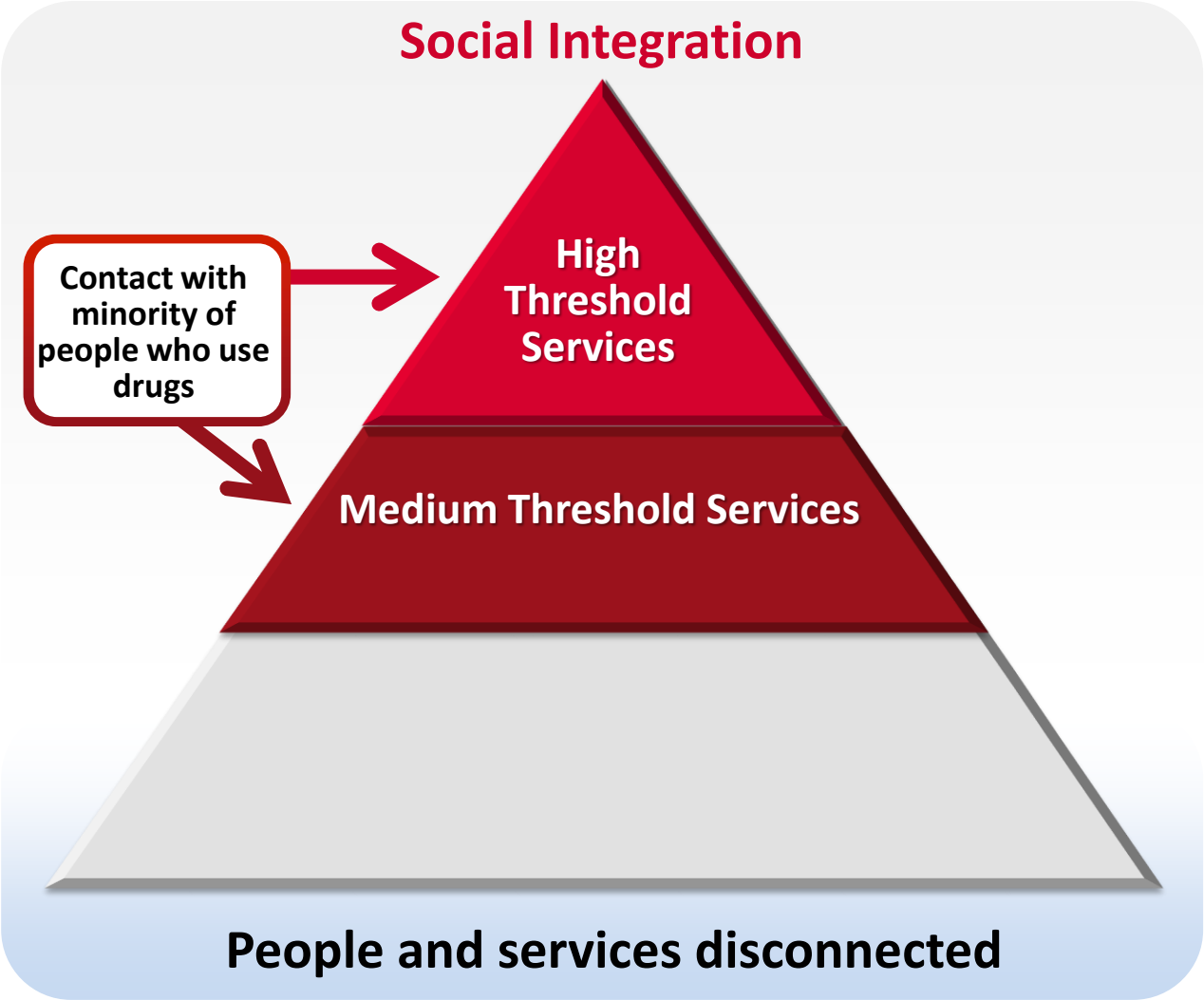
*“On the central issue of narcotics addiction, accordingly, Consumers Union recommends (1) that United States drug policies and practices be promptly revised to insure that no narcotics addict need get his drug from the black market; [...]; (3) that other forms of narcotics maintenance, including opium, morphine, and heroin maintenance, be made available along with methadone maintenance under medical auspices on a carefully planned, experimental basis.”*

# The Swiss Innovation in Drug Policy

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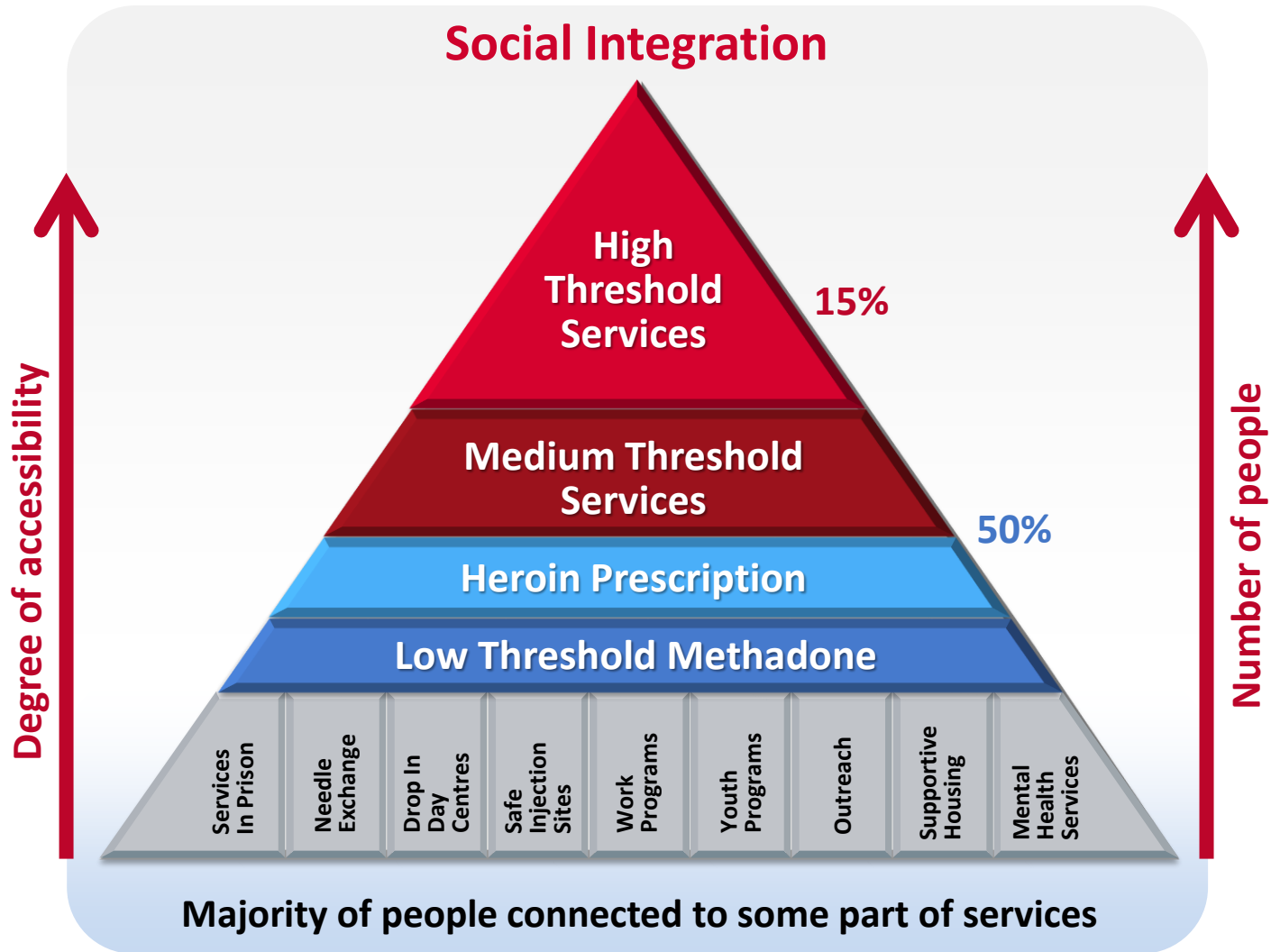
- **Catalyst:** Response to an overdose and HIV crisis among people who use drugs. (Swiss population: 8.3 million)
- Development of a coherent national drug strategy (Four Pillars: treatment, harm reduction, prevention and control).
- Police support for a shift towards health responses
- **Innovations:**
  - *Low threshold services, maximize contact with people who use drugs and intervene earlier in the peoples' drug use trajectory. Inverted the traditional paradigm*
  - *Supervised injection sites (1986)*
  - *Low threshold methadone (1990)*
  - *Heroin assisted treatment (1994) - 15 clinics (2 in prisons, 1600 ppl)*

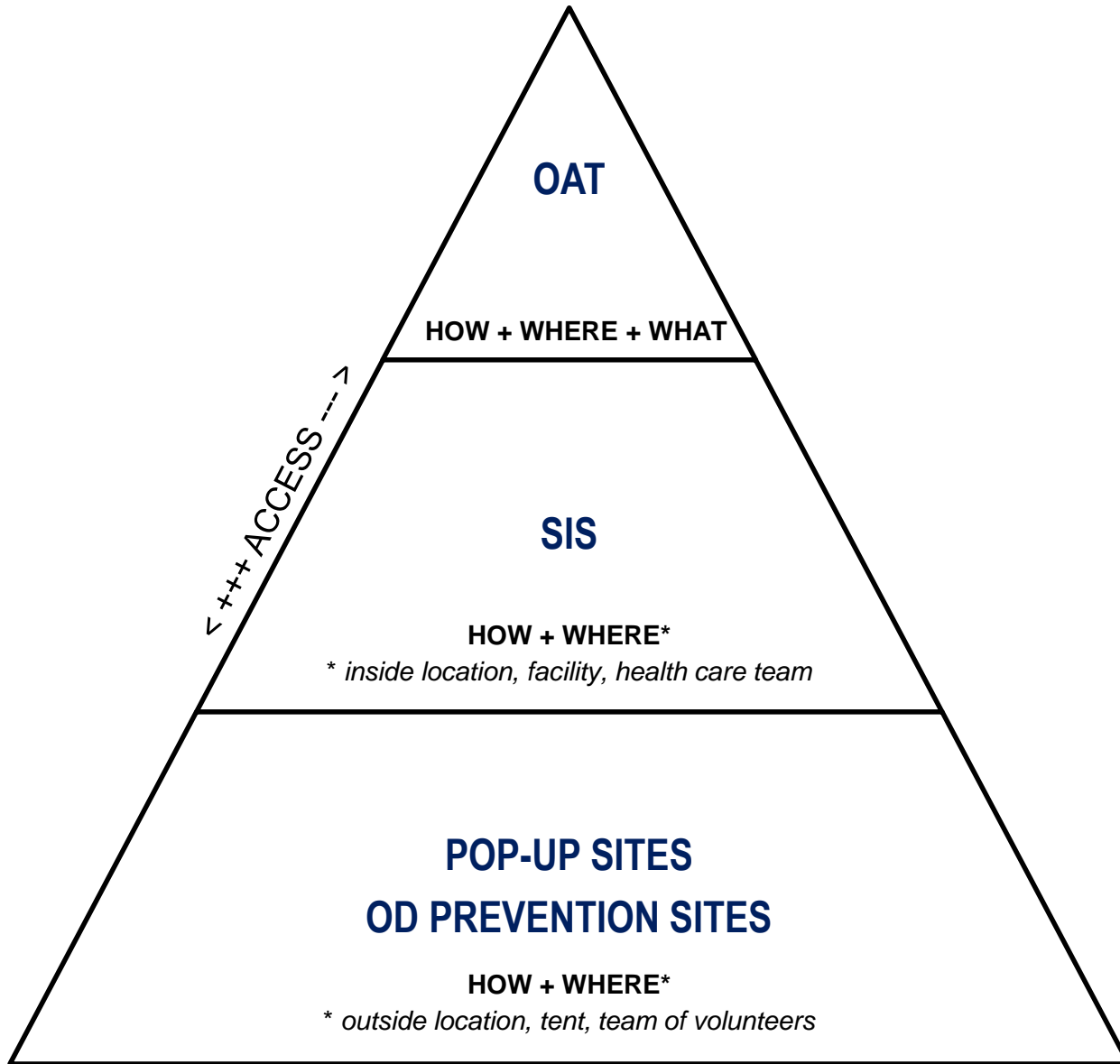
# Thresholds of Access to Services





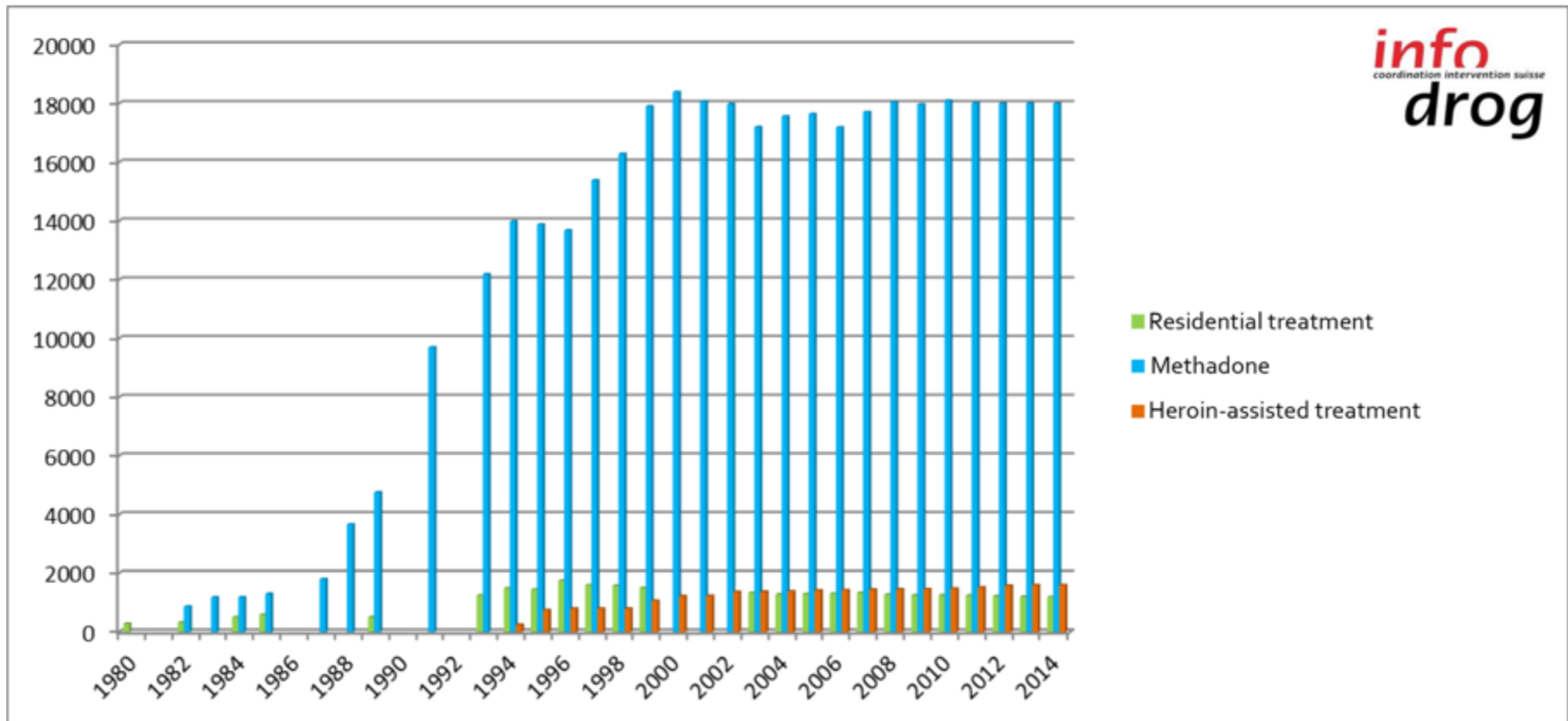
# Increased Access to Services





# Development of place numbers in the “treatment” pillar 1979–2014

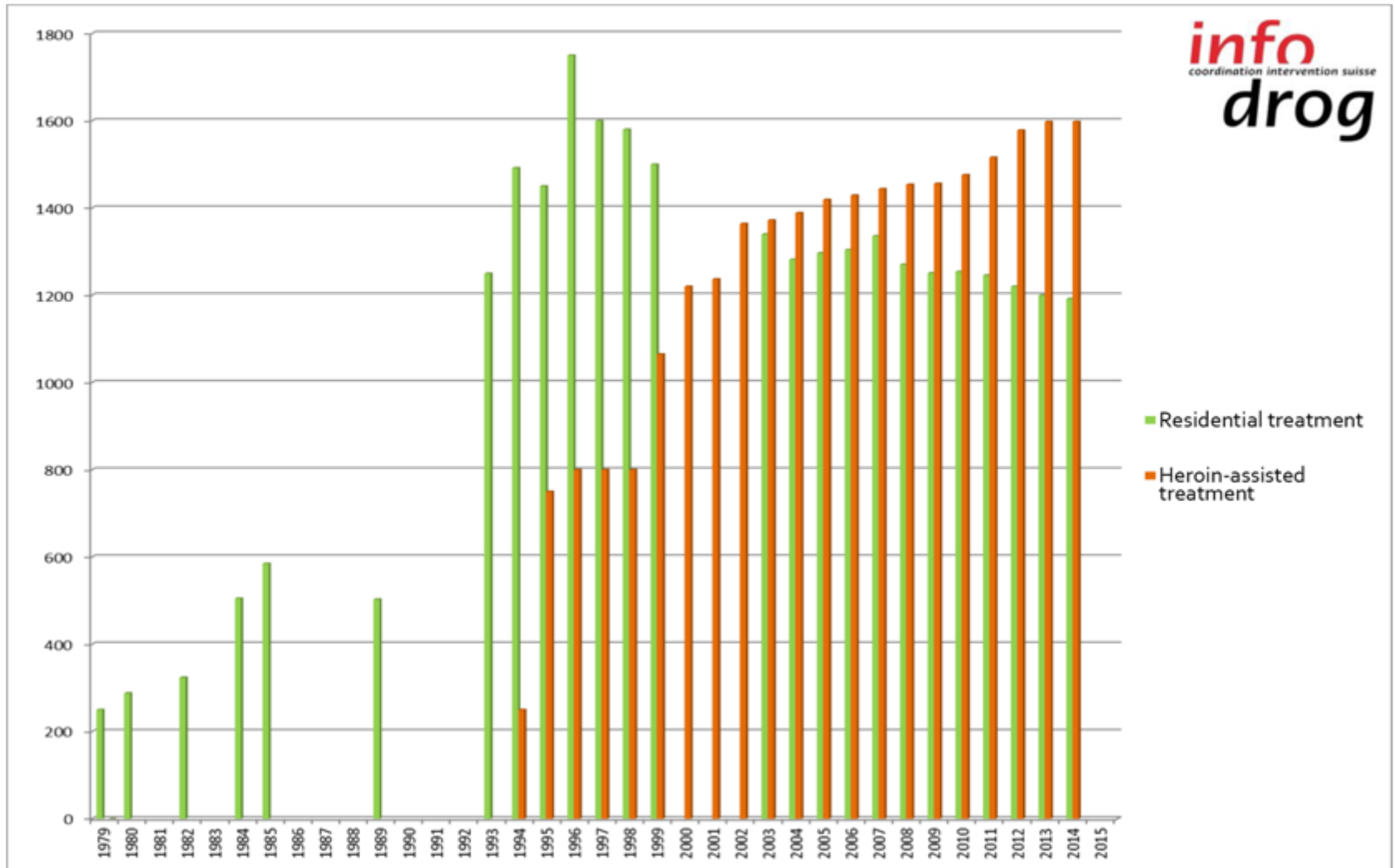
Residential treatment, Methadone, Heroin-assisted treatment



**info**  
coordination intervention suisse  
**drog**

Sources: Federal Office of Public Health FOPH (methadone and heroin-assisted treatment) & Infodrug (residential treatment); 2016

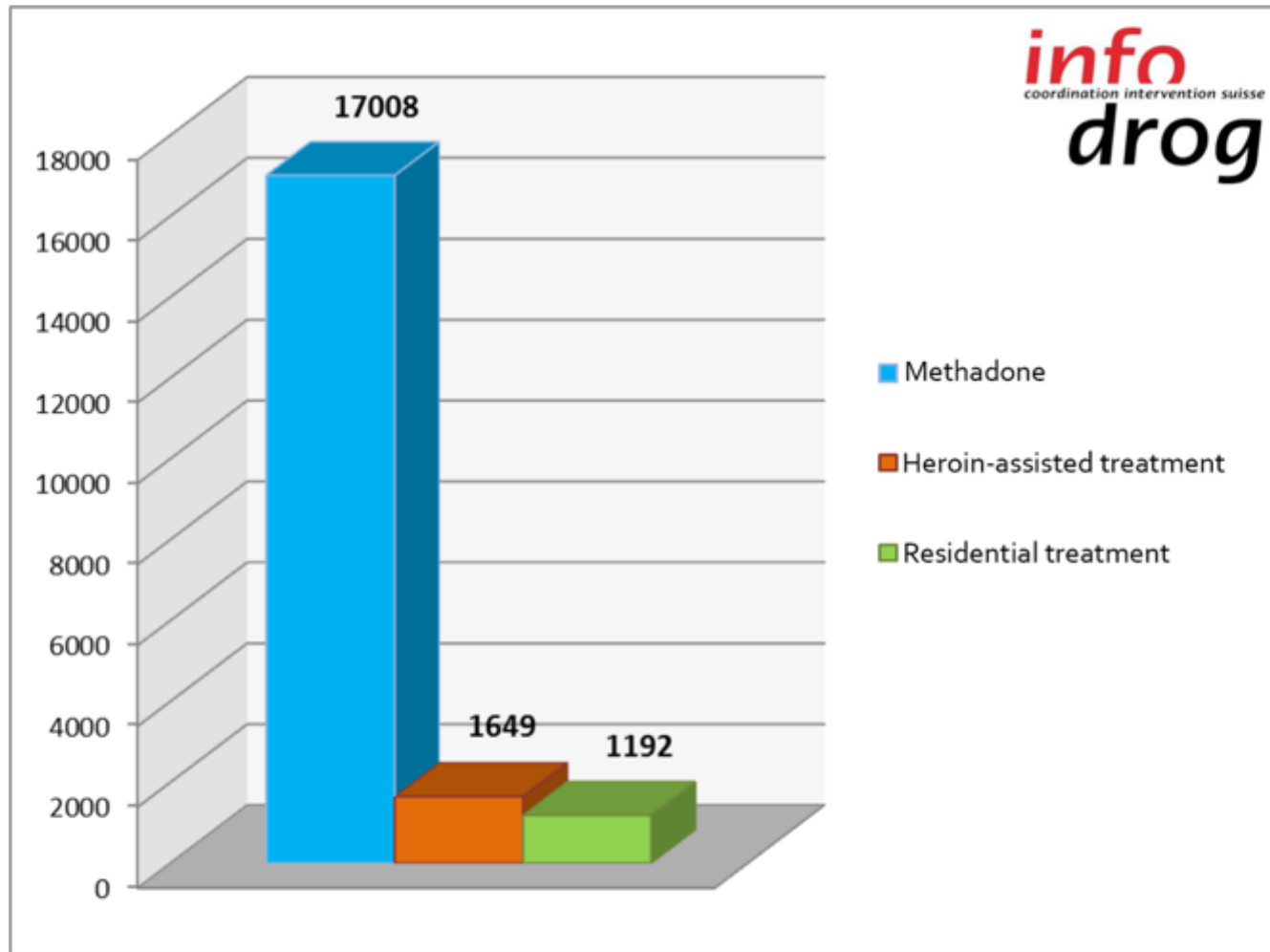
# Number of places “residential treatment and heroin-assisted treatment” 1979–2014



**info**  
coordination intervention suisse  
**drog**

Sources: Federal Office of Public Health FOPH (methadone and heroin-assisted treatment) & Infodrug (residential treatment); 2016

# Number of places in the “treatment” pillar

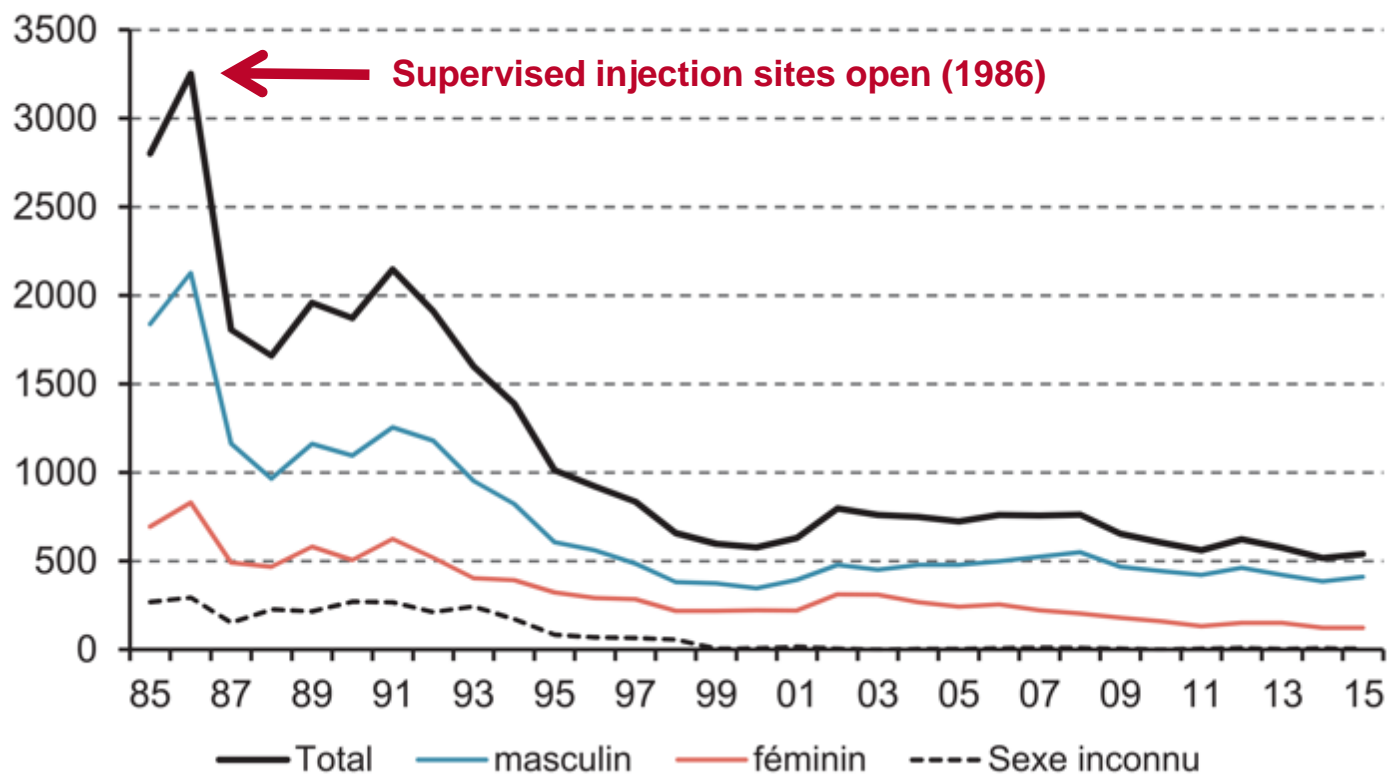


Sources: Federal Office of Public Health FOPH (methadone and heroin-assisted treatment) & Infodrug (residential treatment); 2016

# HIV Infections, by Sex and Year, since start of tests 1985–2015

Figure 1

Déclarations VIH de laboratoire, par sexe et année du test, depuis le début des tests 1985 – 2015



Source: VIH, syphilis, gonorrhée et chlamydie en Suisse en 2015: survol épidémiologique (BAG-Bulletin 46 du 14 novembre 2016)

# Number of Drug-Related Deaths, by Age (1995–2015)

OFS - Nombre de décès liés à la drogue, par âge (1995-2015)

	Âge														Total
	0-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+	
<b>1995</b>	.	19	84	102	100	35	12	7	5	3	3	4	.	2	<b>376</b>
<b>1996</b>	.	12	69	80	76	46	14	12	.	2	6	1	.	2	<b>320</b>
<b>1997</b>	.	13	38	62	63	36	23	7	4	2	1	2	2	2	<b>255</b>
<b>1998</b>	1	9	41	47	50	35	21	11	6	2	3	1	.	.	<b>227</b>
<b>1999</b>	.	8	33	44	44	39	25	8	2	3	2	.	2	3	<b>213</b>
<b>2000</b>	1	6	30	47	46	33	30	12	4	6	.	1	2	4	<b>222</b>
<b>2001</b>	.	6	23	40	56	43	28	12	5	3	1	3	1	.	<b>221</b>
<b>2002</b>	.	3	19	38	52	36	24	17	7	5	3	3	3	4	<b>214</b>
<b>2003</b>	.	6	14	30	42	46	31	17	2	3	1	3	2	5	<b>202</b>
<b>2004</b>	.	8	13	32	33	46	28	21	12	2	4	2	1	8	<b>210</b>
<b>2005</b>	.	8	25	28	41	53	42	26	5	2	5	2	1	3	<b>241</b>
<b>2006</b>	.	9	11	17	33	40	30	18	11	5	1	2	.	3	<b>180</b>
<b>2007</b>	.	2	16	18	31	38	41	15	9	6	5	1	.	1	<b>183</b>
<b>2008</b>	1	7	13	27	26	43	30	21	9	9	3	3	3	3	<b>198</b>
<b>2009</b>	1	3	15	17	16	36	37	16	20	4	1	3	1	1	<b>171</b>
<b>2010</b>	.	4	8	15	18	22	17	21	16	7	3	.	3	3	<b>137</b>
<b>2011</b>	.	2	5	10	15	20	21	24	12	4	3	2	4	3	<b>125</b>
<b>2012</b>	.	3	9	6	17	15	21	16	10	8	5	2	4	5	<b>121</b>
<b>2013</b>	.	4	8	8	10	12	25	19	17	11	3	4	1	4	<b>126</b>
<b>2014</b>	.	1	3	9	9	16	26	24	26	8	1	4	2	5	<b>134</b>
<b>2015</b>	.	1	6	6	12	17	21	26	16	10	5	7	2	3	<b>132</b>



2015 Total shows 64.9% reduction from 1995 Total

# The Portuguese Innovation

## (Decriminalization Plus)

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- **Catalyst:** Response to a crisis in substance use, overdose and HIV among people who use drugs since 1974
- **Innovation:** Decriminalization law reflected a shift in philosophy
  - *People will continue to use drugs for a variety of reasons*
  - *A drug free world is impossible*
  - *Criminalization/punishment is not a proportionate response to substance use*
  - *Criminalization stigmatized users and made it more difficult to seek services*
- Offenders appear before regional panels – Commissions for the Dissuasion of Drug Addiction (CDTs)
- Five Pillar model: prevention, drug use dissuasion, harm reduction, treatment and reintegration

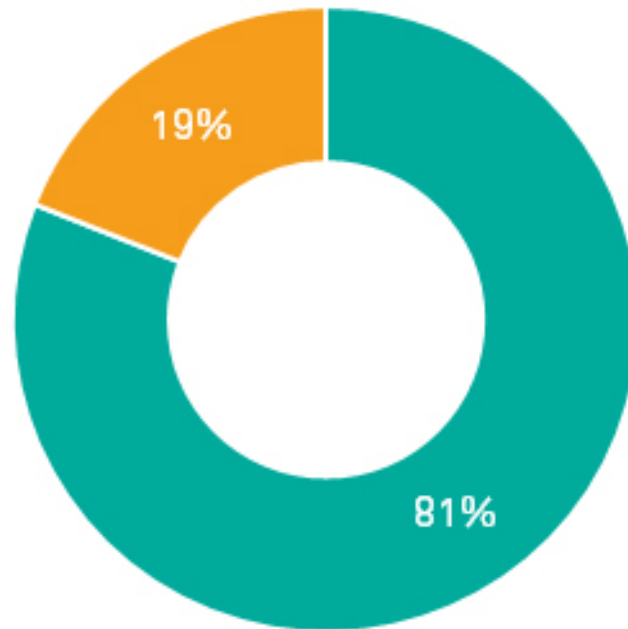


# The Portuguese Innovation (CDTs)

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- The CDT panels:
  - *Comprise three people: a medical professional (1), a social worker (2) and a lawyer (3).*
  - *Evaluate the individual's personal situation:*
    - *If dependent, they are encouraged into treatment.*
    - *If a recreational user, advice is given about physical, social and psychological health to discourage use.*
  - *Assess whether the offender has any broader health or social issues, such as mental health, school, employment or housing, and can refer to support agencies.*
  - *Can also impose a wide range of sanctions like community service or fines – but for non-dependent first-time offenders, almost always suspend proceedings and impose no sanction.*

## Outcome of cases dealt with by Commissions for the Dissuasion of Drug Addiction (2011)



■ Suspended    ■ Penalty / treatment

**Source:** <https://www.tdpf.org.uk/blog/success-portugal%E2%80%99s-decriminalisation-policy-%E2%80%93-seven-charts>

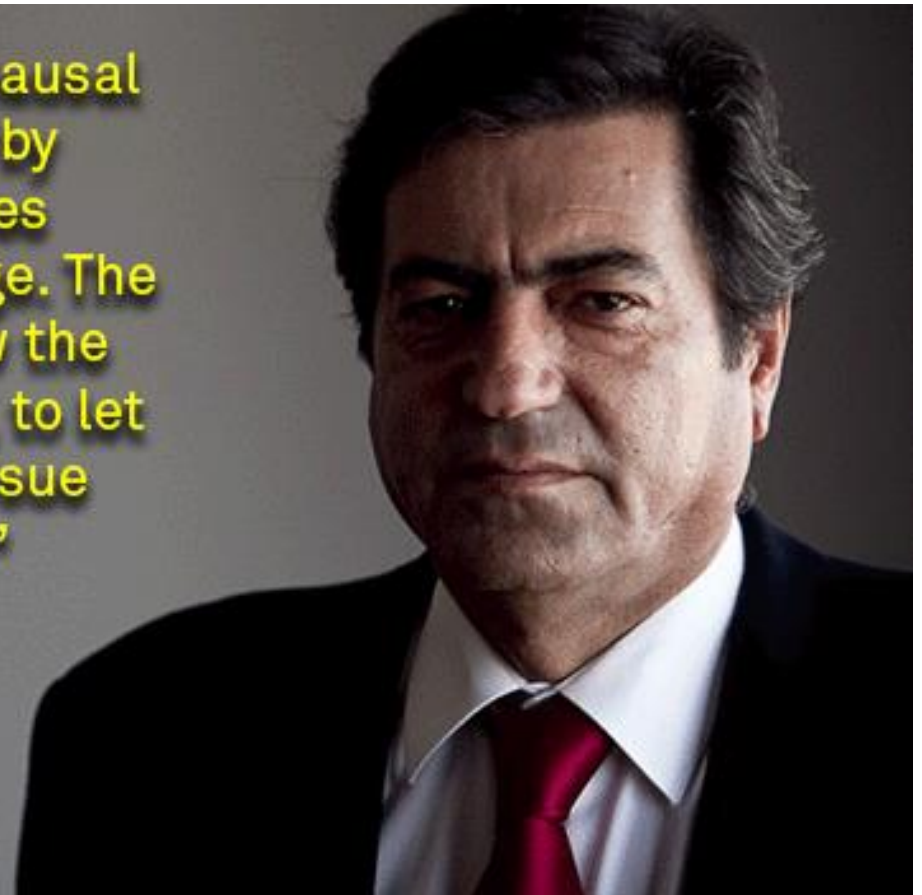
# Public Health and Social Support In Portugal

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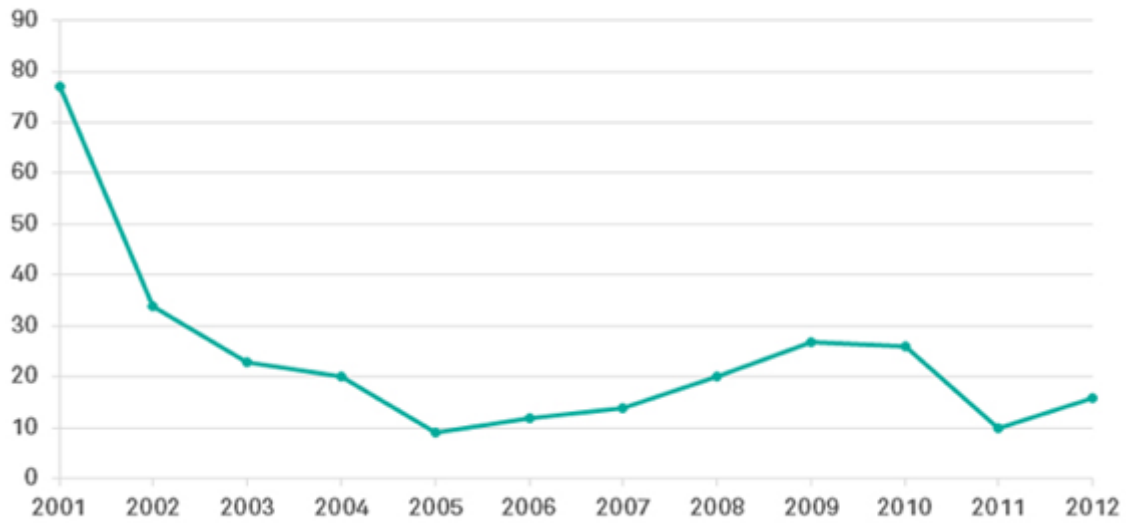
- Drug policies were refocused on a public health model with significant state financial investment (75 million euros) in harm reduction, treatment and other activities:
  - *Expansion of needle and syringe exchange programs and low-threshold opiate substitution treatment*
  - *Better co-ordinated and bolstered drop-in centres/shelters*
  - *Mobile health and outpatient treatment units*
  - *Provision of drug outreach workers*
  - *Housing and subsidised employment initiatives*
  - *Drug checking programs*
  - *Enlisting of therapeutic communities in the program*

“It’s very difficult to identify a causal link between decriminalisation by itself and the positive tendencies we’ve seen ... It’s a total package. The biggest effect has been to allow the stigma of drug addiction to fall, to let people speak clearly and to pursue professional help without fear.”

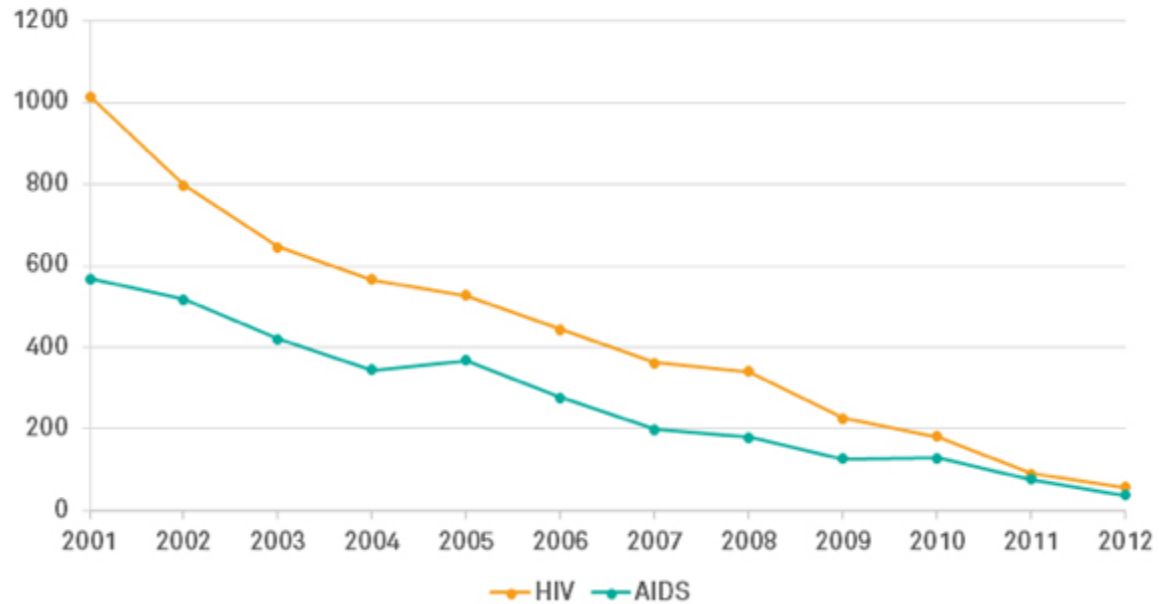
Dr João Goulão  
Architect of Portugal’s  
decriminalisation policy



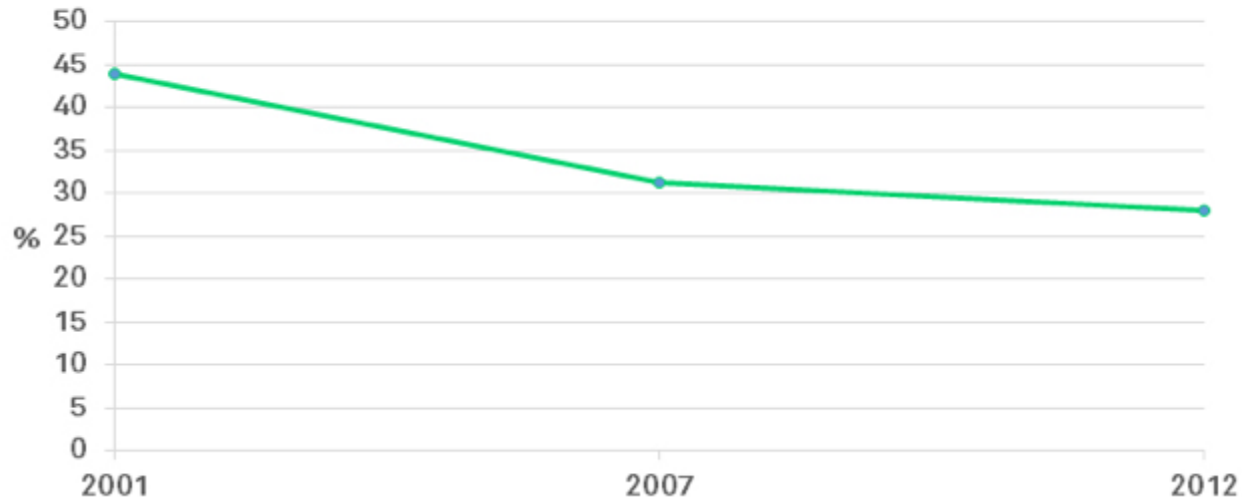
### Drug-induced deaths



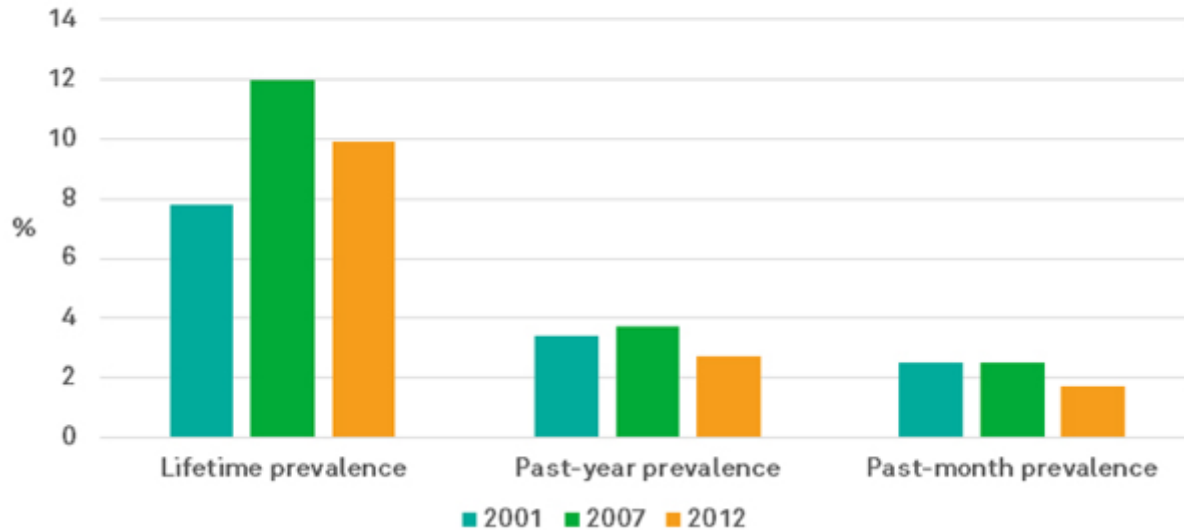
### Newly diagnosed cases of HIV and AIDS among people who use drugs



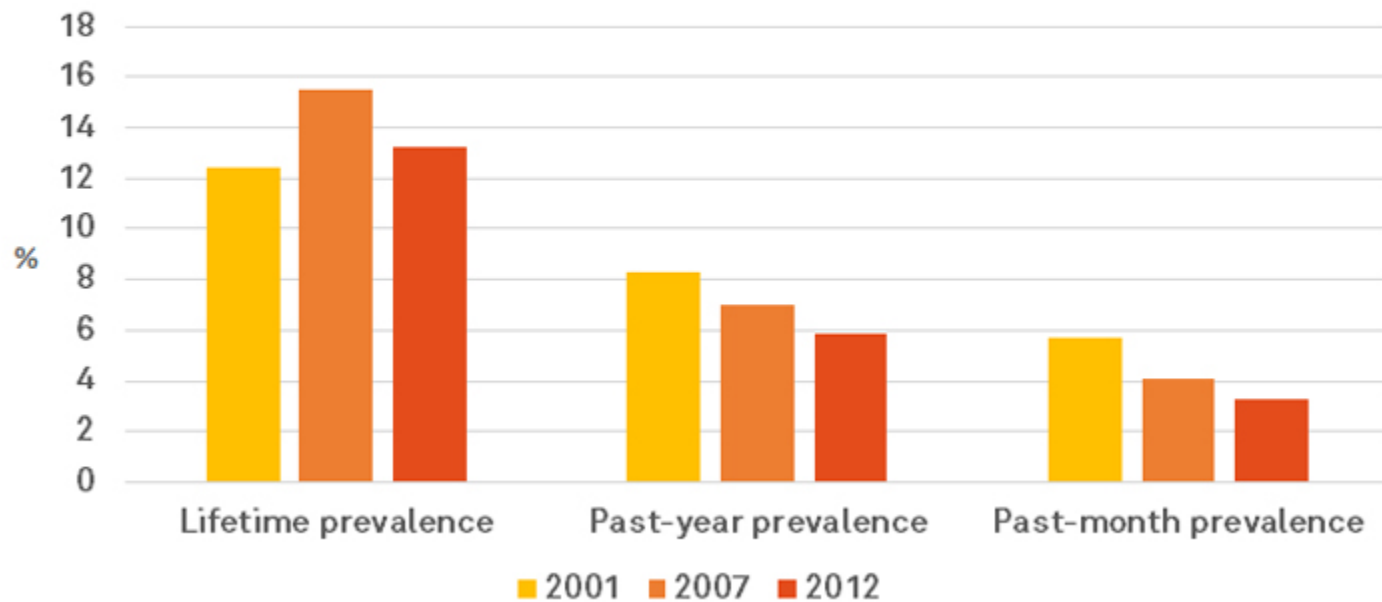
Rates of continuation of drug use among all adults (aged 15-64)



Lifetime prevalence, past-year prevalence and past-month prevalence of drug use among all adults (aged 15-64)



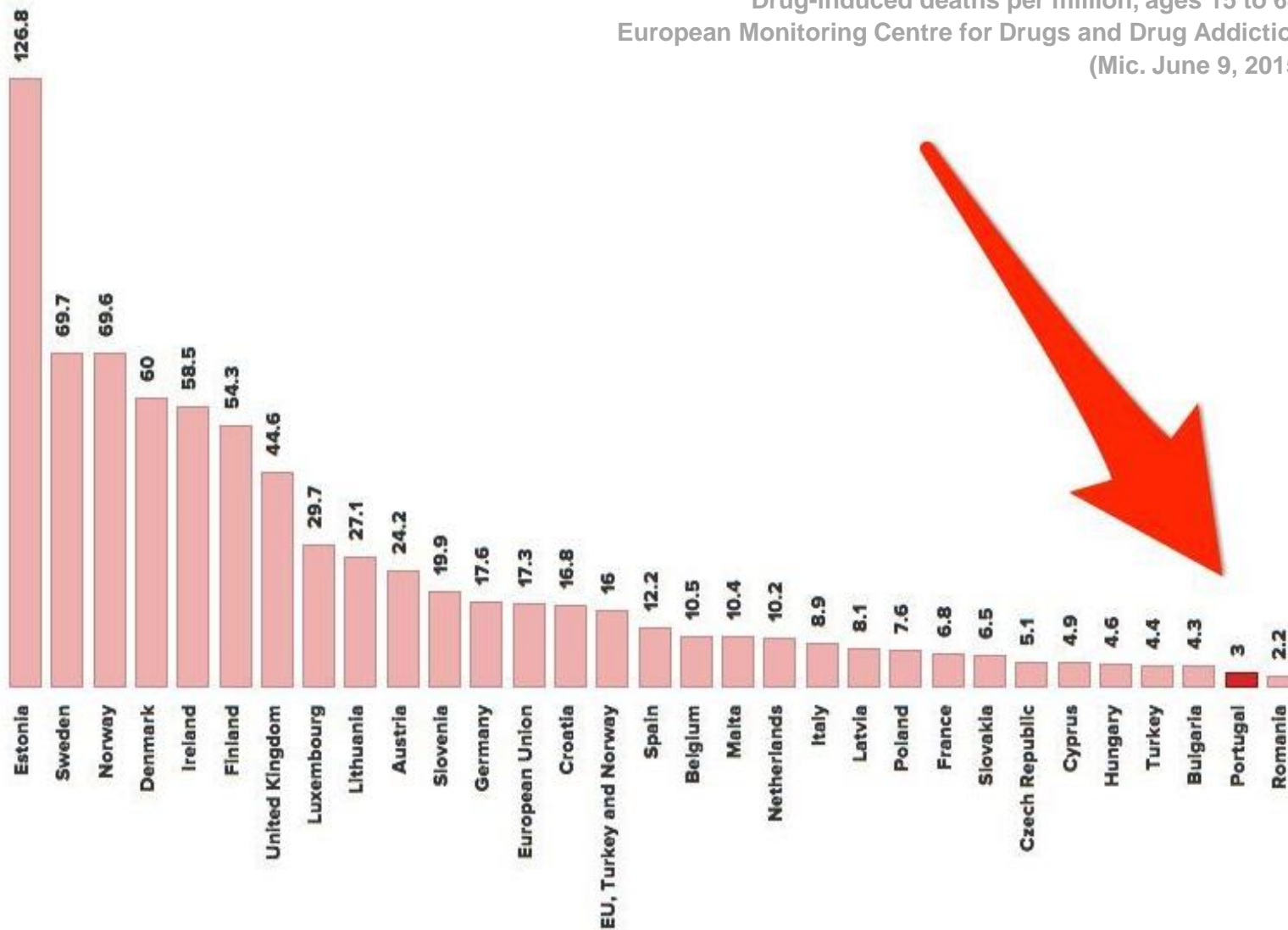
## Lifetime, past-year and past-month prevalence of drug use among 15-24-year-olds



**Source:** <https://www.tdpf.org.uk/blog/success-portugal%E2%80%99s-decriminalisation-policy-%E2%80%93-seven-charts>

“Fourteen years after decriminalizing drugs, Portugal has one of the lowest overdose rates in Europe.”

Drug-induced deaths per million, ages 15 to 64.  
European Monitoring Centre for Drugs and Drug Addiction  
(Mic. June 9, 2015)





# Impact of Criminalization

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“Criminalization of substance-using behaviors exacerbates stigma and produces exclusionary processes that deepen the marginalization of people who use illegal substances.”

Livingston, J. D. et al. (2012)

“However, the association of stigma and discrimination with the poor health among drug users is a cause for concern in a population that suffers from myriad health problems and has limited access to health care.”

Ahern, Jennifer et al. (2006)

“This evidence base provides clear support for moving away from the use of criminalisation as a strategy to try to limit the harms of drug use.”

DeBeck, Kora et al. (2017)

“Criminalization of drug use also increases exposure to violence and fosters stigma, discrimination, and social exclusion.”

Maher, Lisa et al. (2017)

“The evidence presented here indicates that, in the absence of reforms to current legal and policy frameworks, attempts to end both the HIV and HCV epidemics, and to reduce the harms associated with injection drug use, will continue to fail.”

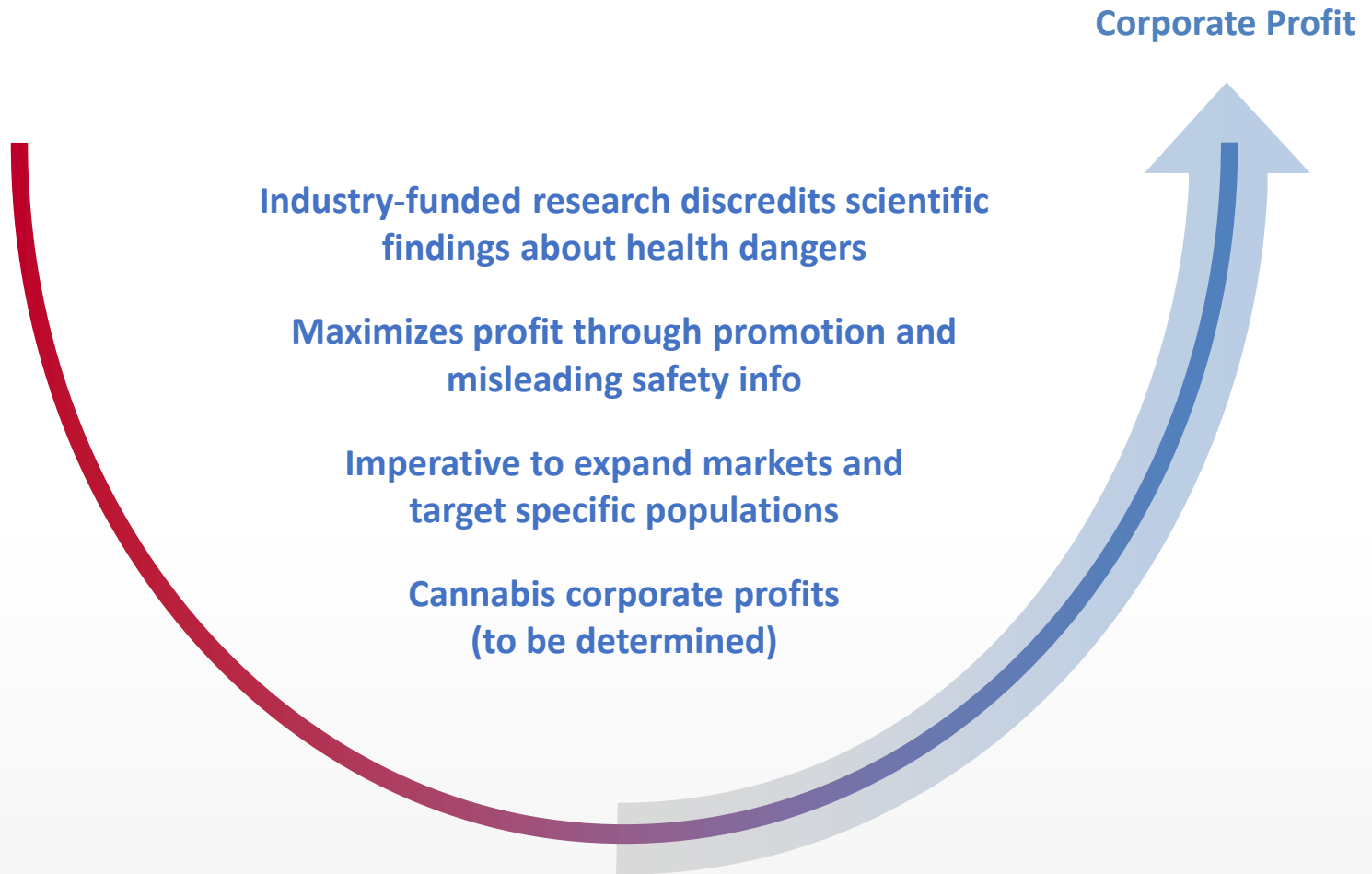
DeBeck, Kora et al. (2017)

# The Harms of Prohibition

**Criminal Profit**

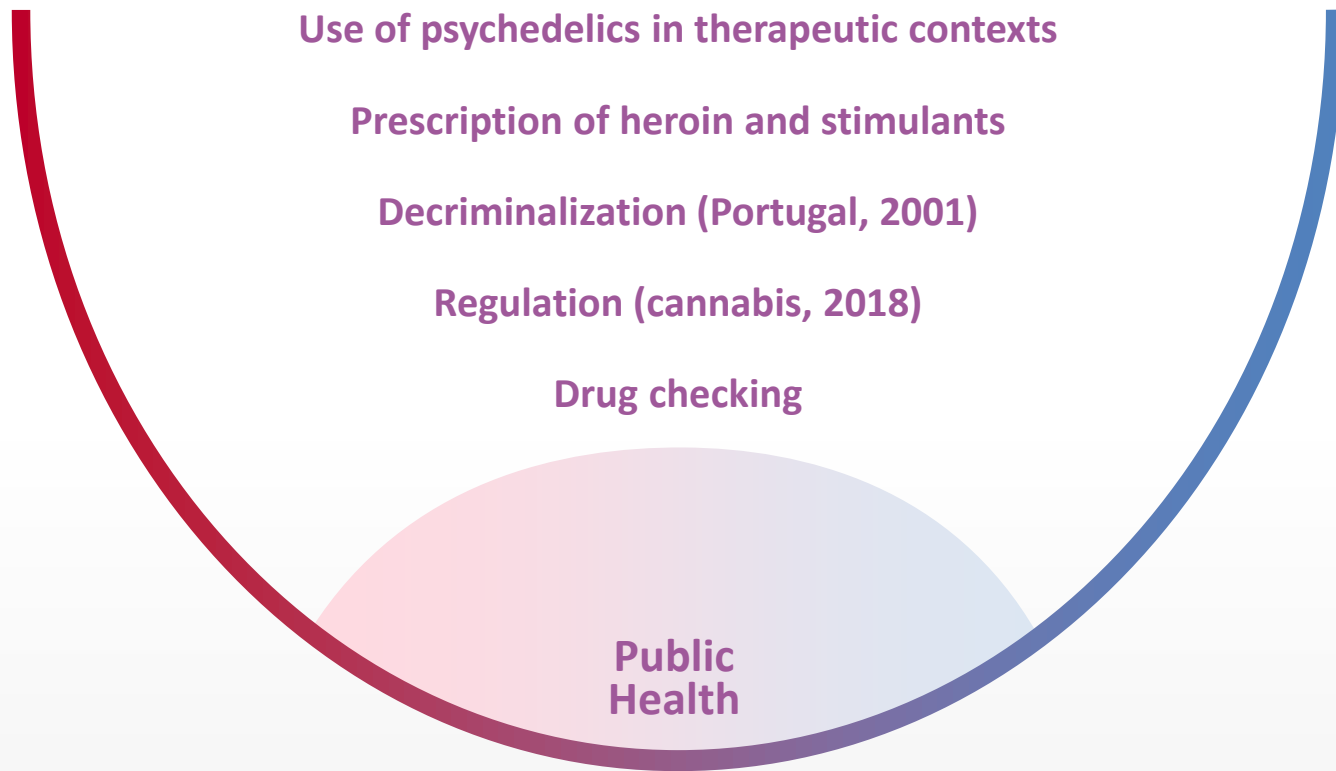


# The Harms of Corporate Promotion

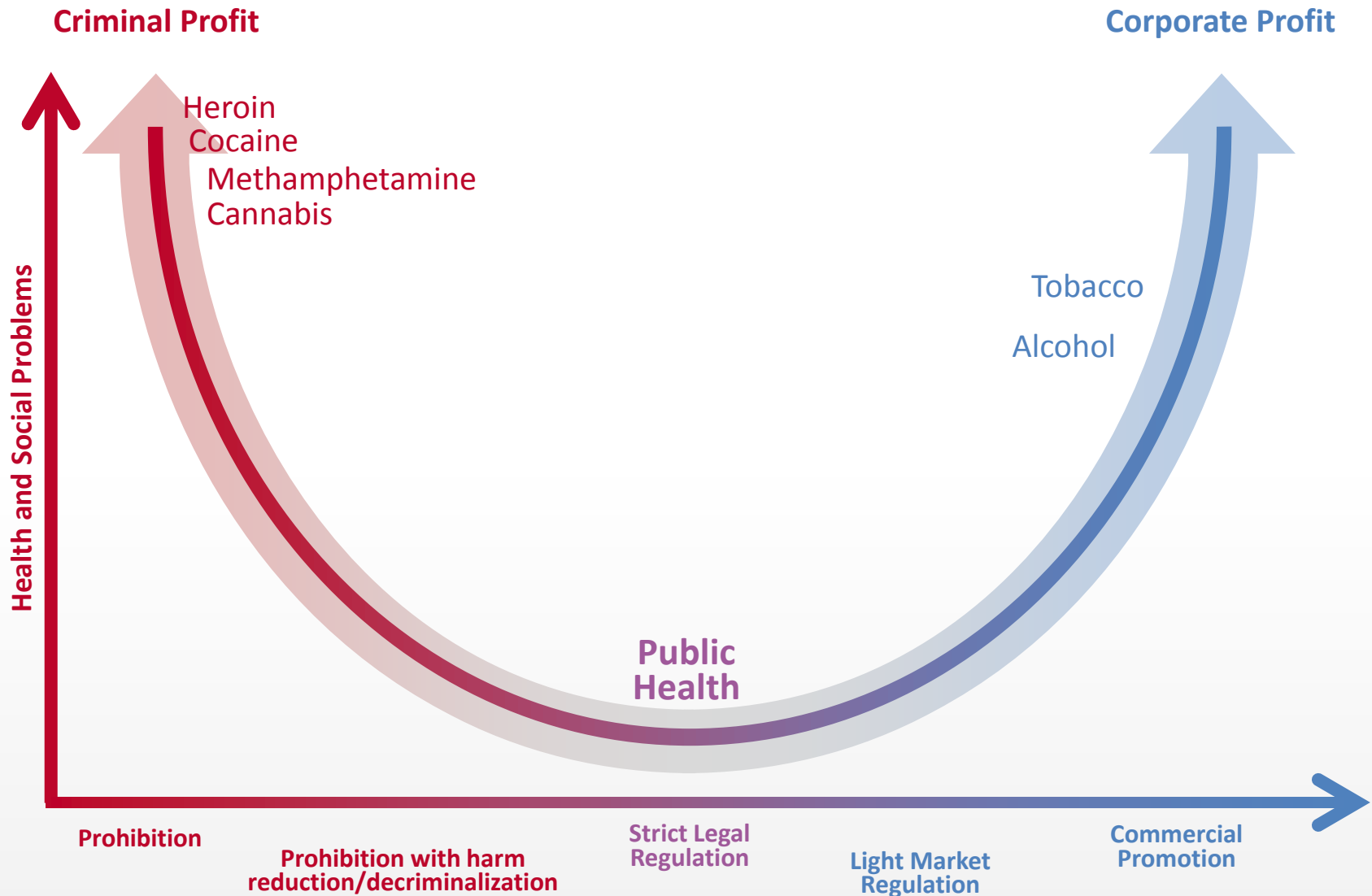


# A Public Health Approach

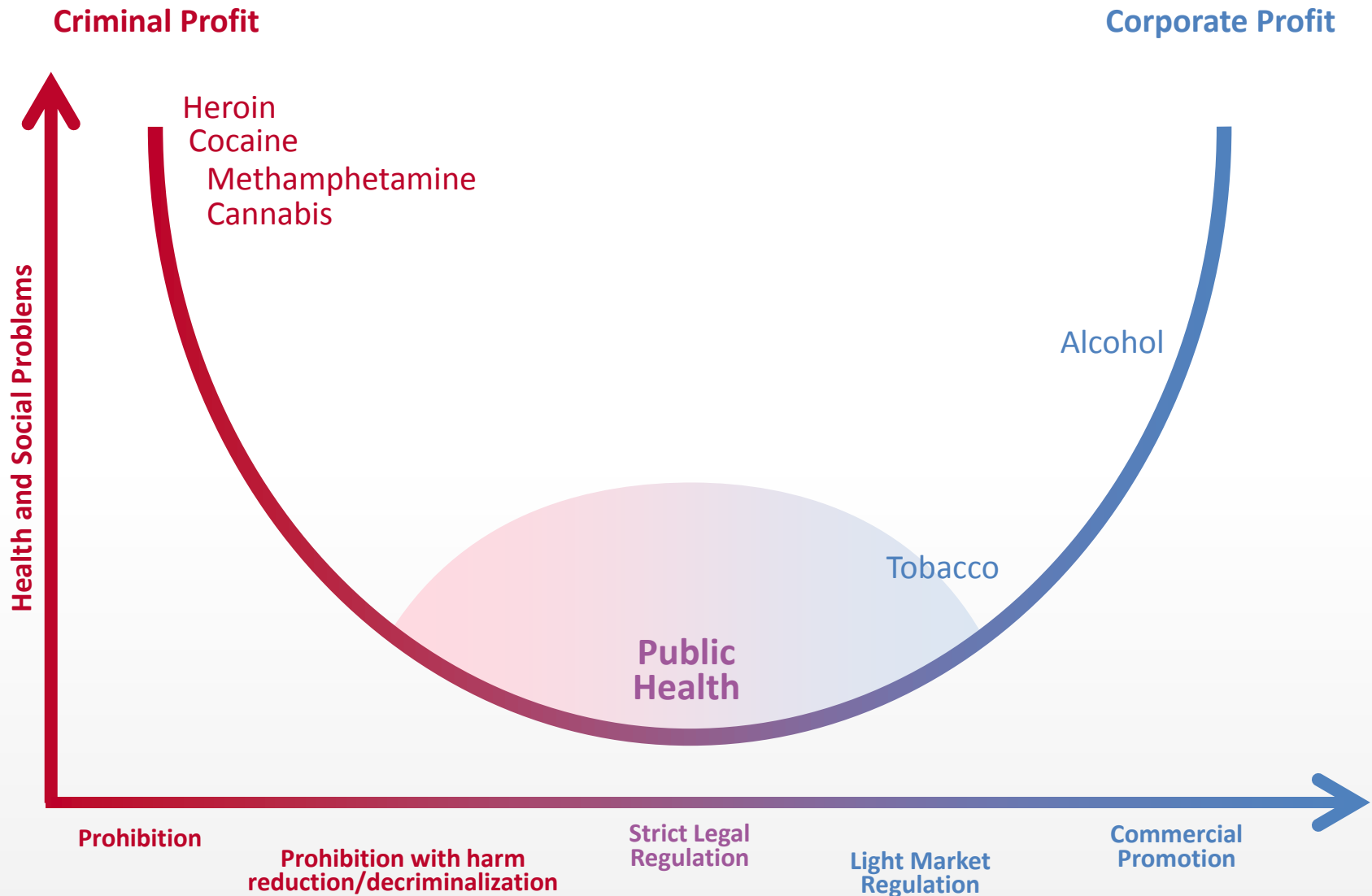
Reduces the Harms of Prohibition and Corporate Promotion



# A Public Health Approach



# A Public Health Approach



# Moms Stop The Harm

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Join with **Moms Stop The Harm**

**Rally** to #DecriminalizeNow



Victoria, BC  
Legislature Steps  
Saturday June 23,  
2018

noon to 1 PM

**#EndStigma**  
of substance use

# RETHINK DRUG POLICY

*[drugpolicy.ca](http://drugpolicy.ca)*

 Canadian Drug  
Policy Coalition  
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Coalition canadienne  
des politiques  
sur les drogues





Canadian Drug  
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# Thank you!

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**SFU**

ENGAGING THE WORLD

[drugpolicy.ca](http://drugpolicy.ca)