Statement on the decriminalization of substance use

Wednesday, September 29, 2021

Criminalization of substance use has been ineffective and counterproductive. It has caused social harms, with racialized communities disproportionately affected. As the ongoing opioid poisoning crisis shows, it causes severe health harms as well.

We welcome the recommendations of the federal government’s Expert Task Force on Substance Use. It is past time for Canada to implement a system in which people do not face criminal penalties for using psychoactive substances. The Centre for Addiction and Mental Health (CAMH) offers the following considerations to the federal government as it considers drug policy reform:

1. **Implement decriminalization of all drugs, nationwide.**
   a. Rather than a piecemeal approach relying on regional or substance-specific exemptions to the *Controlled Drugs and Substances Act*, ensure decriminalization applies across the country and to all currently illicit drugs.
   b. Criminal sanctions should not be replaced with administrative ones (fines, etc.), since those too are likely to be inequitably applied.

2. **Design personal possession thresholds carefully.**
   a. Establish thresholds at levels that will effectively prevent criminalization – without increasing prevalence.
   b. Once implemented, monitor the impacts of the thresholds and adjust if needed.

3. **Work with provinces to ramp up treatment and harm reduction services.**
   a. For people seeking treatment for opioid use disorder, medication-assisted therapies (e.g. opioid agonist treatment [OAT], including injectable [iOAT]), and psychosocial treatment should be readily available.
   b. Continue making harm reduction initiatives such as supervised consumption services and drug checking services more available, and scale up where needed.
   c. Ensure that supervised consumption and other harm reduction sites have the infrastructure and capacity to provide people, if desired, with access or referrals to primary care, addictions and mental health care, and broader social services like housing.
   d. There is a need to fund research on effective treatment interventions for substance use disorders related to stimulants – especially methamphetamine.
4. **Replace the unregulated, toxic drug supply.**
   a. iOAT with hydromorphone or diacetylmorphine are difficult to offer and access due to complex regulatory requirements as well as a lack of coverage on provincial formularies. We encourage Health Canada to work with the provinces to make these evidence-based interventions more accessible to people who would benefit from them.
   b. Ensure that Health Canada “safer supply” programs are accessible to people who are not engaged with the treatment system.
   c. Support research and evaluation of other models aiming to replace street drugs with pharmaceutical-grade alternatives.
   d. Establish a commission to study whether some illegal drugs should be legalized and regulated.

5. **Work to reduce criminalization generally.**
   a. Develop alternatives to incarceration for people charged with crimes that may be connected to their substance use.
   b. The historic and ongoing over-policing and over-incarceration of Black and Indigenous people and communities must be concretely addressed.
   c. Implement the recommendations of the Truth and Reconciliation Committee, including calls to action 30-32, which aim to eliminate the overrepresentation of Indigenous people in custody.
   d. Expunge criminal convictions for simple possession, and consider formal redress of the harms of prohibition and the policies associated with it.

6. **Invest in the social determinants of health.**
   a. Work towards establishing a basic income guarantee.
   b. Continue to support rapid development of evidence-informed solutions to homelessness.

7. **Ensure evaluation of decriminalization measures.**
   a. Establish metrics for evaluation in advance.
   b. Ensure ongoing monitoring and evaluation of the social and health impacts of decriminalization.

8. **Ensure that people who use drugs are meaningfully included and engaged in the development of all measures related to drug policy reform.**

For more information, please contact:

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