

DEBATES OF THE SENATE

2nd SESSION • 43rd PARLIAMENT • VOLUME 152 • NUMBER 40

HEALTH-CENTRED APPROACH TO SUBSTANCE USE BILL

BILL TO AMEND—SECOND READING—DEBATE ADJOURNED

Speech by: The Honourable Bev Busson

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Hon. Bev Busson: Honourable senators, I rise to support Bill S-229, An Act respecting the development of a national strategy for the decriminalization of illegal substances, to amend the Controlled Drugs and Substances Act and to make consequential amendments to other Acts. In its simplified form, it is also known as the Health-Centred Approach to Substance Use Act. Despite being a mouthful to say, this is a critically important initiative.

I wish to thank Senator Boniface for taking the brave and historic decision to lead this chamber in confronting such a pressing social and economic problem. I'm proud to stand with her and support this bill.

Fellow senators, we discuss and debate many issues together, but I will argue that rarely do we take up such an important and immediate national problem. The country from coast to coast to coast continues to face a crisis in the use and abuse of illegal drugs and substances. People are dying every single day. Statistically, in the first half of 2020 alone, an average of 15 people died of an overdose in Canada each day. We are yet to tally the full impact of the COVID-19 pandemic on these horrific numbers for the remainder of last year and this year. Even in the time we will take to complete the session in the chamber, someone will die of an overdose.

It is a human tragedy that also leaves a trail of sorrow and anguish in too many Canadian families, and personal trauma for police, other first responders, hospital staff and many others.

British Columbia, which I am proud to represent, is in many ways at the epicentre of this other epidemic, but the crisis affects the entire country from Vancouver to Toronto to St. John's and in so many other cities and towns, large and small, targeting every culture.

In her thoughtful speech, Senator Boniface has already meticulously laid out the often frightening facts and shocking figures of substance abuse, especially in my province, and I will not repeat those here.

The specific drugs of choice shift and change over time. Fentanyl and carfentanil are in the headlines nowadays. In the past it was heroin, oxycodone, OxyContin and cocaine. The challenge remains the same regardless of the drug or the class of drugs. What can we do now to effectively address the tragedy, as the current approach is not working? It is now urgent to answer this pressing question.

Like Senator Boniface, this is an issue close to my heart. Before my Senate appointment, I spent a career in policing, in many instances seeing young lives wasted by addiction. For me, it is no accident that the Canadian Association of Chiefs of Police has joined company with the Canadian Public Health

Association, the Canadian Mental Health Association and the Canadian Nurses Association, to name but a few, in asking for a new approach to this crisis. Bill S-229 is a concrete and serious solution to address this unacceptable death toll.

The problem of substance use itself is a complex interplay between addiction, mental illness, homelessness, poverty, family stress and more — all intensified currently by the COVID-19 pandemic. Any solution must be integrated, backed by substantiated political will from the federal, provincial, territorial and municipal levels and provided with sufficient and sustained resources and public support.

But as complicated as this problem is, the core of this bill is almost radical in its simplicity. The key is to decriminalize the simple possession of illegal drugs. This problem is a health matter, not primarily one of law enforcement. The solution will only be found in a health-centred approach. Therefore, we need to focus on treatment and harm reduction in the immediate term, along with affordable housing and mental health supports that lie at the heart of the public health challenge. The police are equipped to do many things in meeting their mission to protect public safety, but they are not specifically equipped to solve public and mental health dilemmas.

This explains why Bill S-229 is structured as it is. The first part calls for the elaboration of a national strategy to decriminalize simple possession of illegal substances. The complexity of the challenge requires a truly national strategy that brings all voices, expert knowledge and experience to the table to design a solution.

Decriminalization cannot take place in a vacuum, but it needs a plan in place to provide programs for addiction treatment, harm reduction and homelessness. The bill then calls for decriminalization by repealing certain clauses of the Controlled Drugs and Substances Act, but only after the national strategy has been developed and adopted. This flexibility is both realistic and necessary.

It's clear to me that homelessness and substance abuse are linked together. My experience as a young officer is personal and anecdotal, but the academic evidence over the years has confirmed my conclusion of this tragedy. The Addiction Center in the United States has summed up the solution in different terms. They say:

Tragically, homelessness and addiction go hand in hand. The end result of homelessness is often substance abuse, and substance abuse often contributes to homelessness.

In Canada, in the Greater Vancouver Region, as early as 2005, 48% of homeless people reported that they were suffering from addiction. I mention this to point out the problem is not new.

This tangled connection between substance abuse and homelessness contributes to a social disaster that goes far beyond the tragic personal suffering. It creates social pressures as well. Conflict arises when people share their civic space in parks

et cetera with fellow citizens who are living on the street, and there are hard economic costs as well. The fallout is hard to estimate, but it has been suggested that the financial cost of homelessness to taxpayers in Metro Vancouver alone is \$55,000 annually per homeless person and over \$200 million a year. This does not include the overdose death analysis in these numbers.

One can reasonably wonder why a former commissioner of the Royal Canadian Mounted Police would be so supportive of a draft bill to decriminalize illegal drug possession, presented by a former commissioner of the Ontario Provincial Police. Presumably, every honourable senator in this chamber is witness to a world where the so-called "war on drugs" has been a steady feature, and has also come to realize and find the conclusion that this enforcement model simply has not worked.

But another reason lies in a core principle of policing in a modern democratic society. Ironically, one has to go back over 100 years when Sir Robert Peel, as Home Secretary, laid out his vision of professional policing when he established the Metropolitan Police in the United Kingdom. His philosophy of policing, in a nutshell, emphasized that the effectiveness of the police is not measured by the number of arrests, but by the lack of crime. To prevent crime, the police must work with the public to support community principles. In what is probably the most famous quote ascribed to Peel, he said, "The police are the public and the public are the police . . ."

Our fellow citizens who are dying every day of drug overdoses in alleyways, enduring homelessness or battling mental illness are the public. The effectiveness of the police in confronting this crisis cannot be measured in arrests in pursuit of the Controlled Drugs and Substances Act or other laws, but rather in the decrease in the number of people dying or forced to the street, often committing crimes to feed their drug addiction.

In this context, I'm delighted that Senator Boniface has purposely chosen to use the word "illegal" to avoid the demoralizing stigma attached to addiction. When the problem is framed as a public health issue rather than one of criminality, it will help to further focus community efforts to concentrate resources on reducing crime rather than increase arrest statistics.

Bill S-229 provides us a road map to a reimagining of the solution to the deadly crisis in Canada today. It calls on us to decriminalize simple possession of drugs and reinforce efforts and resources available for crime reduction and treatment of mental health and drug-addicted individuals.

The COVID-19 pandemic has affected the country and all of us in so many ways. But one of the most shocking numbers that Senator Boniface has placed before this chamber in her speech was that, according to a November 2019 report from Public Health Ontario, a majority of drug overdoses have happened in private residences. The pandemic has obviously magnified this situation. It has also laid bare a number of social issues and prompted calls for corrective action as soon as the COVID-19 pandemic comes under control. I submit that, with this other devastating epidemic, the drug-related homelessness and corresponding unnecessary deaths are also ravaging our country. Bill S-229 is a clarion call for corrective action on this front.

There are many times in the history of this country when transformational change has been sought and achieved. It demands new ways of thinking and total commitment at every level. The creation of our public health care system, for example, in the 1960s comes immediately to mind. Our Canadian national identity has come to include the widely held belief in universally accessible health care. Bill S-229 provides us with an opportunity to reach again for that transformational change, to abandon the failed "war on drugs" and to take a new, bold, health-centred approach to saving lives that will equally come to define the Canadian way. Thank you, meegwetch.