

# INFORMATION REPORT

<b>TO:</b>	Mayor and Members Board of Health
<b>COMMITTEE DATE:</b>	August 10, 2022
<b>SUBJECT/REPORT NO:</b>	Decriminalization of Personal Possession of Illicit Drugs (BOH22016) (City Wide) <b>(Outstanding Business List Item)</b>
<b>WARD(S) AFFECTED:</b>	City Wide
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<b>SIGNATURE:</b>	

## COUNCIL DIRECTION

This report is in response to three separate directions approved by Council in 2020 and 2022:

- On September 21, 2020; “That the Correspondence from Chatham-Kent Public Health Unit respecting the Decriminalization of Personal Possession of Illicit Drugs be received and referred to staff for a review of the decriminalization of personal possession of illicit drugs as part of the public health framework, with a report back to the Board of Health”;
- On March 21, 2022; “That the Medical Officer of Health be directed to review and prepare a report for the Board of Health on the Canadian Drug Coalition Policy respecting the Decriminalization of Simple Possession of Drugs and consider local treatment centre use and success metrics”; and,
- On April 4, 2022; “That the Correspondence from Anita Dubeau, Board of Health Chair, Simcoe Muskoka District Health Unit, respecting a Response to the Opioid Crisis in Simcoe Muskoka and Ontario-wide, be endorsed and referred to staff for a review and a report back to the Board of Health”.

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OUR Vision: To be the best place to raise a child and age successfully.

OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

## **INFORMATION**

Problematic substance use continues to be an area of significant public health concern in Canada. Locally, Hamilton continues to experience annual increases in substance use as demonstrated by related emergency department visits, hospital admissions, poisonings and deaths. In 2019, there were 189 deaths attributed to illegal substances (opioids, cocaine, and methamphetamine). Emergency department visits for overdoses have increased for these three illegal substances between 2012-2021. Notably, the most significant increase has been that opioid overdoses have increased by 494% during this time period. Males, aged 25-44 years old, continue to be predominately impacted, and the gap is widening. For example, in 2021 men aged 25-44 years old accounted for 46% of the overdoses compared to 24% in 2012. As the trend continues to increase year over year, there have been calls to all levels of government to support initiatives to decrease the harms associated with substance use.

### **Decriminalization**

One strategy of controlling the use of illegal substances in Canada is through criminalization. From a health policy approach, criminalization of these substances has shown to compound health and social harms for people who use substances<sup>1,2,3</sup>. Decriminalization refers to the removal of criminal penalties for personal possession of illegal substances. With decriminalization of personal possession, the production and distribution of substances remains illegal. Evidence demonstrates that decreasing criminal penalties for illegal substance use, along with referrals to health, social service and harm reduction supports, reduces health and social harms. It also helps to address health inequities of marginalized populations and decreases financial burdens on health and criminal justice systems.<sup>4</sup>

Portugal has been a leader in decriminalization since they decriminalized personal possession in 2001. Portugal reported that adopting a decriminalization approach led to

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<sup>1</sup> Health Canada Expert Task Force on Substance Use. (2021). Report #2 Recommendations on the Federal Government's Drug Policy as Articulated in a Draft Canadian Drugs and Substances Strategy (CDSS). Retrieved from <https://www.canada.ca/en/health-canada/corporate/about-health-canada/public-engagement/external-advisory-bodies/expert-task-force-substance-use/reports/report-2-2021.html>

<sup>2</sup> Organization of American States. (2014). The OAS Drug Report: 16 Months of Debates and Consensus. Retrieved from: <https://www.oas.org/docs/publications/layoutpubgagdrogas-eng-29-9.pdf>

<sup>3</sup> United Nations and World Health Organization. (2017). Joint United Nations statement on ending discrimination in health care settings. Retrieved from: <https://www.who.int/news/item/27-06-2017-joint-united-nations-statement-on-ending-discrimination-in-health-care-settings>

<sup>4</sup> Health Canada Expert Task Force on Substance Use. (2021a, May 6). *Report #1: Recommendations on alternatives to criminal penalties for simple possession of control substances*. <https://www.canada.ca/content/dam/hc-sc/documents/corporate/about-health-canada/public-engagement/external-advisory-bodies/reports/report-1-2021/report-1-HC-expert-task-force-on-substance-use-final-en.pdf>

reductions in morbidity and mortality, prevalence of drug use, stigma, and increases in individuals accessing treatment.<sup>5</sup> Other countries who have pursued decriminalization include Czech Republic, Switzerland, the Netherlands, Norway, Germany, Australia, and Uruguay.<sup>6</sup>

In Canada, there has been significant advocacy for decriminalization, and subsequently some movement towards this approach. Health Canada has granted British Columbia a three year exemption, beginning in January 2023, under subsection 56(1) of the *Controlled Drugs and Substance Use Act* to remove criminal penalties for people who possess a small amount of certain illegal substances for personal use. Toronto has also submitted the same request, and it is still pending response.

While decriminalization has shown to be an effective evidence-based approach, it is only one component of a comprehensive population health approach to problematic substance use. The Canadian Drug Coalition, an advocacy-based coalition of civil service organizations and people with lived experiences of substance use, has advocated for comprehensive drug policy reform in Canada. This reform would include decriminalization and the redistribution of resources from the enforcement of drug laws to services that promote health and human rights. This includes access to harm reduction services, safe supply, treatment and other social programs including housing and income protection to address the social determinants of health.

In addition to this coalition, numerous other agencies are advocating for immediate action in an integrated comprehensive approach, including decriminalization and increased access to health and social supports. Some of the organizations advocating include: the Ontario Big City Mayors, Ontario Association of Police Chiefs, Registered Nurses of Ontario and the Canadian Centre on Substance Use and Addiction. Recently, the Association of Local Public Health Agencies (aLPHa) passed a comprehensive resolution outlining nine areas for action that includes decriminalization and increased access to health and social supports, while also outlining the strong role local public health has in the coordination of interventions to reduce harms associated with substance use. Amongst the general public, a 2021 Angus Reid poll found 60% of Ontarians to be strongly or moderately in favour of decriminalizing all illegal drugs.<sup>7</sup> Locally, 75% of the Hamilton Drug Strategy participant respondents, when surveyed in 2018, supported the decriminalization and legal regulation of substances.

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<sup>5</sup> Hughes C.E., & Stevens A. (2010). What can we learn from the Portuguese decriminalization of illicit drugs? *British Journal of Criminology*, 50, 999–1022.

<sup>6</sup> Heidt J. Alternatives to the Criminalization of Simple Possession of Illicit Drugs Review and Analysis of the Literature. (2021). *International Centre for Criminal Law Reform*. Retrieved from [https://icclr.org/wp-content/uploads/2021/12/Heidt\\_Alternatives-to-criminalization-of-simple-possession.pdf?x56541&x96127](https://icclr.org/wp-content/uploads/2021/12/Heidt_Alternatives-to-criminalization-of-simple-possession.pdf?x56541&x96127)

<sup>7</sup> Angus Reid Institute. (2021). Canada's other epidemic: As overdose deaths escalate, majority favour decriminalization of drugs. Retrieved from [https://angusreid.org/wp-content/uploads/2021/03/2021.02.24\\_Opioid\\_Dependence.pdf](https://angusreid.org/wp-content/uploads/2021/03/2021.02.24_Opioid_Dependence.pdf)

### **Moving Forward**

The above evidence highlights that decriminalization can be one approach to address the harms associated with substance use, but that to manage the significant public health burden, a comprehensive approach is required. This will require further coordinated action at all levels of government. At a federal level, actions and investments could include: further expansion of decriminalization of personal possession of drugs; regulation of illegal substances; increased funding and capacity building for treatment, harm reduction services and supports for people experiencing homelessness. Provincial supports could entail additional investment for consumption and treatment sites and safer opioid supply programs; expanding access to treatment for opioid use disorder including opioid agonist therapy; investments in social services including housing, substance use prevention and addressing structural stigma.

At the municipal level, in Hamilton, the Board of Health endorsed recommendations in April 2022 that supported an integrated comprehensive approach to substance use, including decriminalization. As Public Health Services programs and services restart, the Hamilton Drug Strategy has been engaged in a conversation with the Greater Hamilton Health Network about how to coordinate and ensure best use of resources to meet the needs of the community. A comprehensive approach and coordinated action will continue to be required to reduce the harms associated with substance use. This includes coordinating services via an integrated care pathway; addressing stigma; enhancing and advocating for access to treatment; implementation of prevention initiatives; and responding to emerging evidence. Local public health can support the planning, implementation and coordination of local interventions including harm reduction, mental health promotion and substance use prevention initiatives.

### **APPENDICES AND SCHEDULES ATTACHED**

Not Applicable.