



## RESPONSE TO PETITION

Prepare in English and French marking 'Original Text' or 'Translation'

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PETITION No.: **421-03032**

BY: **MR. JOHNS (COURTENAY-ALBERNI)**

DATE: **DECEMBER 3, 2018**

PRINT NAME OF SIGNATORY: **MR. JOHN OLIVER**

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Response by the Minister of Health

SIGNATURE

Minister or Parliamentary Secretary

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SUBJECT

**Regulation of food and drugs**

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**ORIGINAL TEXT**

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**REPLY**

The Government of Canada is deeply concerned with the ongoing opioid crisis. Tragically, the lives of over 9,000 Canadians were lost to this crisis between January 2016 and June 2018.

The Government of Canada is using the broad range of powers at its disposal to urgently and aggressively address this complex public health crisis. Declaring a national public health emergency at this time would not provide the Government with any additional powers beyond what we have already used.

The Government of Canada is taking a public health approach to the crisis, with a particular focus on:

- ensuring that life-saving harm reduction measures are available to Canadians who need it;
- working with stakeholders to reduce stigma directed at people who use drugs, which acts as a barrier to accessing critical health and social services and often leads to social isolation;
- working with provinces and territories to improve access to evidence-based treatment options; and
- implementing additional surveillance and research activities that will further build the evidence base and allows us to pursue innovative solutions to this public health crisis.

The Government of Canada has made substantial investments to address the crisis. Recent examples of key federal investments in this area include:

- providing \$231.4 million over five years through Budget 2018 for additional measures to help address the opioid overdose crisis, including a one-time \$150 million emergency treatment fund for provinces and territories to improve access to evidence-based treatment services;
- providing emergency funding to British Columbia (\$10 million) and Alberta (\$6 million) to address the ongoing crisis in these two jurisdictions, plus \$5 million in targeted health care funding for Manitoba to assist with priority needs, including their opioid response;
- providing an additional \$200 million, with \$40 million per year ongoing, to enhance the delivery of culturally appropriate addictions treatment and prevention services in First Nations communities; and,
- allocating \$13 million over five years to launch a new national, multi-year public education campaign to help reshape Canadians' attitudes and perceptions about people who use drugs.

The Government has also undertaken a broad range of policy, legislative and regulatory actions, including:

- Approving supervised consumption sites with 28 currently in operation across Canada, and providing class exemptions to support the establishment of overdose-prevention sites;
- removing federal regulatory barriers to effective, evidence-based treatment options, including making it easier for health practitioners to prescribe diacetylmorphine and methadone to patients with opioid use disorder, and facilitating community delivery models for opioid agonist treatment;
- allowing the importation of drugs approved in other countries (but not yet in Canada) to address urgent public health needs, including for the treatment of opioid use disorder;
- supporting the passage of the *Good Samaritan Drug Overdose Act*, which encourages people to call for emergency help at the scene of an overdose by providing protection against simple drug possession charges;
- establishing effective Federal, Provincial and Territorial public health emergency governance, including the Special Advisory Committee on the Epidemic of Opioid Overdoses and the Federal/Provincial/Territorial Assistant Deputy Minister Committee on Problematic Substance Use & Harms;
- collaborating with provinces and territories to better understand the evolving crisis, undertake timely monitoring and reporting of opioid-related deaths and harms in Canada;
- deploying public health officers from the Public Health Agency of Canada to support public health surveillance systems in 11 provinces and territories;
- supporting the development and dissemination of national clinical practice guidelines to treat opioid use disorder, which include a recommendation for medication-assisted treatment as a front-line option for patients, through the Canadian Research Initiative in Substance Misuse; and,
- supporting a pilot project to provide pharmaceutical hydromorphone to eligible patients with opioid use disorder in British Columbia.

The Government of Canada is not currently considering the decriminalization of personal possession of drugs, other than the legalization and strict regulation of cannabis.

We recognize that in places where decriminalization has had a benefit, such as Portugal, there has also been significant concurrent investment in domestic treatment, social services, and harm reduction services. Canada's recent investments to address the crisis are in line with these actions.

The Government of Canada remains firmly committed to addressing this crisis using a public health approach that is comprehensive, compassionate, and evidence based. We will continue to work closely with provincial and territorial governments, municipalities, health practitioners, law enforcement, and a wide range of stakeholders including people with lived and living experience, in order to address this crisis and reduce opioid-related deaths and harms in Canada.