

A Framework for Drug Policy Reform in The City of Toronto

by Matti Charlton

Drug policy reform in Toronto should be grounded in principles of human rights, harm reduction, and evidence-based approaches to addiction treatment.

Criminalizing drug possession disproportionately harms marginalized communities, particularly Indigenous peoples and people of color. Alternative approaches that prioritize treatment and support for individuals struggling with addiction would be more effective in reducing drug-related harm.

The success of harm reduction programs such as safe injection sites, which have been shown to reduce overdose deaths and improve health outcomes for people who use drugs, is supported by extensive references throughout this document.

Drug policy reform is a public health issue rather than a criminal justice issue. With that frame of reference in mind, this document aims to build support for more progressive drug policies in Toronto.

About me:

Hi. I'm Matti Charlton. I'm a candidate for the upcoming 2023 Mayoral Election.

But who isn't?!

I have a different background than most mayoral hopefuls: I'm not a lawyer. I'm an artist, musician and writer.

I'm autistic, and I have experienced homelessness firsthand.

I have survived and thrived by adapting and innovating on few resources. I went to U of T for engineering science and I work with cutting edge tech like AI every day.

This document is meant to provide only a theoretical framework for constructing a legal argument for drug policy reform in Toronto. This framework is based on principles of human rights, harm reduction, and evidence-based approaches to addiction treatment, and could be adapted to specific legal contexts and precedents.

Sections:

1. **Introduction:** Introduce the issue of drug policy reform in Toronto, including the harms of criminalizing drug possession and the need for a more effective and humane approach.
2. **Historical and Legal Context:** Provide background on the history of drug policy in Canada and the current legal framework for drug possession and use, including any relevant precedents or legal challenges.
3. **Human Rights:** Argue that criminalizing drug possession violates the human rights of individuals who use drugs, particularly marginalized communities such as Indigenous peoples and people of color. References are provided which cite relevant human rights instruments and cases to support this argument.
4. **Public Health and Harm Reduction:** Argue that drug policy should be based on public health principles and harm reduction approaches, which prioritize the health and safety of individuals who use drugs. Evidence is cited on the effectiveness of harm reduction programs such as safe injection sites and opioid agonist therapy.
5. **Evidence-Based Treatment:** Argue that addiction is a health issue that requires evidence-based treatment and support, rather than punishment or criminalization. Evidence is cited on the effectiveness of treatment approaches such as medication-assisted treatment and cognitive-behavioral therapy.
6. **Alternatives to Criminalization:** The argument that alternative approaches to drug policy, such as decriminalization or legalization, would be more effective in reducing drug-related harm and supporting the health and well-being of individuals who use drugs. Evidence is cited from other jurisdictions that have implemented such approaches.
7. **Conclusion:** Summary which emphasizes the need for progressive drug policy reform in Toronto, based on principles of human

rights, harm reduction, and evidence-based treatment. Reach out to policymakers and stakeholders to support and implement such reforms.

8. **From the other side...**: Taking a look at solid references that come from traditional roles or organizations - such as Police services - that have come around to supporting the conclusions of this document.

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Introduction: Drug Policy Reform

Drug policy reform is a pressing issue for Toronto, as it is for many other cities around the world. The criminalization of drug possession has been shown to have significant harms, including the perpetuation of systemic racism, the erosion of public trust in law enforcement, and the stigmatization and marginalization of people who use drugs.

The War on Drugs has been a failure, leading to an increase in drug-related harm rather than a decrease. The current approach has failed to reduce drug use, while also resulting in a host of negative consequences, including high rates of incarceration, deaths from overdose, and the spread of infectious diseases.

Furthermore, there is increasing evidence that drug use and addiction are not simply moral failings or individual choices, but rather complex health issues that require a comprehensive and evidence-based approach.

The harms of drug criminalization are not felt equally across society, with marginalized communities such as Black, Indigenous, and People of Colour (BIPOC) and LGBTQ2S+ individuals bearing the brunt of these policies. This perpetuates systemic discrimination and social inequities.

Therefore, it is necessary to adopt a more effective and humane approach to drug policy in Toronto. This could include the implementation of harm reduction strategies, such as supervised consumption sites and overdose prevention programs, as well as the decriminalization of drug possession for personal use.

Numerous reports and studies have demonstrated the efficacy of harm reduction strategies, which prioritize the health and safety of people who use drugs, as well as the wider community. Similarly, jurisdictions that

have decriminalized drug possession have seen significant improvements in public health outcomes, reduced rates of incarceration, and improved access to treatment and support.

In light of this evidence, it is imperative that Toronto takes a bold and evidence-based approach to drug policy reform that prioritizes the health and well-being of all residents, particularly those who are most marginalized.

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Historical and Legal Context

Drug policy in Canada has a complex and varied history, with laws and regulations governing drug use and possession evolving over time. Historically, drug use has been seen as a criminal issue, and the criminalization of drug use and possession has been a cornerstone of Canadian drug policy. However, in recent years, there has been a growing recognition of the failures of this approach and a call for reform.

The current legal framework for drug possession and use in Canada is set out in the Controlled Drugs and Substances Act (CDSA), which is a federal law that regulates the production, distribution, and possession of drugs deemed to be controlled substances. The CDSA classifies drugs into different schedules based on their potential for harm, with Schedule I drugs being the most harmful and tightly controlled.

Under the CDSA, drug possession is generally a criminal offense, and the penalties for drug possession can be severe. However, there are some exceptions to this general rule. For example, there are provisions in the CDSA that allow for the possession and use of medical marijuana and other controlled substances for medical purposes. Additionally, there are some harm reduction measures in place that seek to mitigate the harms of drug use, such as the provision of safe injection sites and opioid replacement therapy.

There have been several legal challenges to the CDSA and its provisions related to drug possession and use. In 2011, the Supreme Court of Canada ruled that the federal government's approach to medical marijuana was unconstitutional because it did not provide reasonable access to the drug for medical purposes. This led to changes in the regulations governing medical marijuana use and possession in Canada.

More recently, in 2020, the British Columbia Supreme Court struck down provisions of the CDSA related to mandatory minimum sentences for drug offenses, ruling that these provisions were unconstitutional because they violated the rights of drug users and perpetuated systemic discrimination against Indigenous people and people of color.

Overall, the history of drug policy in Canada is complex and evolving, with a growing recognition of the need for reform and a more effective and humane approach to drug use and possession.

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Human Rights

The criminalization of drug possession is not only ineffective in addressing drug-related issues but also a violation of human rights. Criminalizing drug possession disproportionately affects marginalized communities, including Indigenous peoples and people of color. This section will explore how the current drug policy in Toronto infringes upon human rights and why decriminalization of all drugs is necessary to respect and protect these rights.

The United Nations has recognized drug addiction as a health issue, and drug use as a human right, protected under the right to health and privacy. The Universal Declaration of Human Rights (UDHR), the International Covenant on Civil and Political Rights (ICCPR), and the International Covenant on Economic, Social and Cultural Rights (ICESCR) all recognize the right to health and privacy as fundamental human rights. The UN General Assembly Special Session on Drugs in 2016 reaffirmed the need to respect, protect, and promote human rights in drug policies.

However, criminalizing drug possession violates these human rights. In particular, Indigenous peoples and people of color are disproportionately affected by current drug policies, which are rooted in systemic racism and perpetuate social and economic disparities. Indigenous peoples in Canada are overrepresented in the criminal justice system, and face significant barriers in accessing healthcare and harm reduction services. Similarly, Black and other racialized communities in Toronto are more likely to be stopped and searched by police, leading to higher rates of arrest and incarceration for drug-related offenses.

The criminalization of drug possession also violates the right to privacy. The Supreme Court of Canada has recognized that individuals have a reasonable expectation of privacy in the contents of their personal be-

longings, including their body. This right is enshrined in section 8 of the Canadian Charter of Rights and Freedoms. Criminalizing drug possession violates this right by allowing the state to search and seize an individual's drugs, even if they are for personal use.

Therefore, decriminalizing drug possession is necessary to respect and protect human rights. Decriminalization would recognize drug use as a health issue and not a criminal justice issue, ensuring that individuals are not subject to arrest, criminal charges, or incarceration for drug possession. It would also eliminate the disproportionate impact of current drug policies on marginalized communities, particularly Indigenous peoples and people of color.

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Public Health and Harm Reduction

Drug policy should prioritize public health and harm reduction principles. Criminalizing drug possession and use has been shown to be ineffective and harmful, leading to increased rates of HIV and Hepatitis C transmission, overdose deaths, and incarceration. By contrast, harm reduction approaches, such as safe injection sites and opioid agonist therapy, have been shown to reduce harm and improve health outcomes for people who use drugs.

Evidence supports the effectiveness of harm reduction programs. Safe injection sites have been shown to reduce overdose deaths, decrease public drug use, and increase the use of addiction treatment services. Opioid agonist therapy, which includes medications such as methadone and buprenorphine, has been shown to reduce opioid use, improve health outcomes, and decrease criminal activity among people who use drugs.

Furthermore, access to clean supplies of drugs for people who use drugs has been shown to be an effective harm reduction strategy. This can include providing access to clean needles, pipes, and other supplies, as well as access to clean, regulated supplies of drugs such as heroin and cocaine.

In addition, harm reduction approaches prioritize the dignity and autonomy of people who use drugs, recognizing their right to health and safety. Criminalizing drug use and possession violates this right, and has a disproportionate impact on marginalized communities such as Indigenous peoples and people of color.

Therefore, drug policy should be based on public health principles and harm reduction approaches, which prioritize the health and safety of individuals who use drugs. This includes decriminalizing drug possession and

use, and eventually providing access to clean supplies of drugs for all users.

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Evidence-Based Treatment

The current criminalization of drug possession and use does not effectively address the underlying issues of substance use disorders. Instead, drug policy should be based on evidence-based treatment approaches that prioritize harm reduction and recovery. Evidence-based treatment includes a range of interventions such as cognitive-behavioral therapy, motivational interviewing, and medication-assisted treatment.

Cognitive-behavioral therapy (CBT) is a form of talk therapy that focuses on changing patterns of thinking and behavior related to drug use. CBT has been shown to be effective in reducing substance use and improving overall mental health outcomes (National Institute on Drug Abuse, 2018). Motivational interviewing (MI) is another form of talk therapy that helps individuals identify their reasons for change and develop a plan for making positive changes in their lives. MI has been shown to be effective in helping individuals reduce substance use and engage in treatment (Miller & Rollnick, 2013).

Medication-assisted treatment (MAT) is another evidence-based treatment approach that combines medications with counseling and behavioral therapies. MAT has been shown to be effective in treating opioid use disorders and reducing opioid-related overdose deaths (National Institute on Drug Abuse, 2021). Methadone, buprenorphine, and naltrexone are three medications commonly used in MAT. These medications help individuals reduce withdrawal symptoms and cravings, making it easier to maintain sobriety and engage in treatment.

Research has also shown that providing access to clean supplies of drugs can reduce the spread of infectious diseases such as HIV and hepatitis C,

as well as reduce the number of overdose deaths (Canadian Public Health Association, 2017). Providing access to clean supplies of drugs, such as through supervised consumption sites, can also increase the likelihood that individuals will engage in treatment and reduce their overall drug use (National Institute on Drug Abuse, 2021).

Research has consistently shown that these approaches are effective in treating substance use disorders and reducing harm associated with drug use. For example, a study published in the *Journal of Substance Abuse Treatment* found that medication-assisted treatment with methadone or buprenorphine reduced the risk of overdose deaths among opioid-dependent individuals by over 50%. Another study published in the *Journal of Consulting and Clinical Psychology* found that cognitive-behavioral therapy was effective in reducing drug use and improving mental health outcomes among individuals with substance use disorders.

In addition, evidence-based treatment should be accessible to all individuals who need it, regardless of their socioeconomic status. This includes providing affordable and accessible mental health and substance use disorder treatment services, as well as investing in harm reduction strategies such as safe injection sites and outreach programs.

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Alternatives to Criminalization

Drug policy reform in Toronto requires an alternative approach to the current criminalization of drug possession and use. Alternative approaches such as decriminalization or legalization could be more effective in reducing drug-related harm and supporting the health and well-being of individuals who use drugs. Decriminalization is a process of removing criminal penalties for drug possession and use, while legalization is the process of allowing drug use and possession for personal use. Research shows that these approaches can lead to reductions in drug-related harm and can enhance public health outcomes.

Evidence from other jurisdictions that have implemented decriminalization or legalization supports this argument. Portugal decriminalized all drugs in 2001 and has since seen a decrease in drug-related deaths, HIV infections, and drug-related crime. The country has also seen an increase in the number of individuals seeking treatment for substance use disorders. Similarly, Canada's own experience with cannabis legalization provides evidence that this approach can be effective. Legalization has resulted in a reduction in black market activity, increased consumer safety, and generated revenue for the government.

Moreover, a growing body of research indicates that criminalizing drug use and possession is ineffective in reducing drug use, and often leads to more harm, such as overdose deaths and an increased risk of infectious diseases. Decriminalization or legalization provides a better framework for addressing the underlying causes of substance use disorders, such as poverty, homelessness, and mental health challenges.

Furthermore, the criminalization of drug use and possession disproportionately affects marginalized communities, particularly Indigenous peoples and people of color. This can lead to systemic discrimination and

human rights abuses. Decriminalization or legalization can help address these issues by reducing the impact of drug policy on marginalized communities and promoting social justice.

In addition, alternative approaches to drug policy can lead to significant cost savings for the criminal justice system. Criminalizing drug possession and use places a burden on the justice system, leading to increased incarceration rates and high costs associated with criminal proceedings. Decriminalization or legalization can reduce these costs and allow resources to be redirected towards evidence-based treatment and harm reduction programs.

Finally, decriminalization or legalization provides an opportunity to regulate drug use and possession, ensuring that individuals have access to clean and safe supplies of drugs. This can help reduce the risks associated with drug use, such as overdose and infectious disease transmission. Regulated drug markets can also generate revenue for the government, which can be invested in evidence-based treatment and harm reduction programs.

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Conclusion

In conclusion, the current criminalization of drug possession and use in Toronto is an ineffective and harmful approach that fails to address the underlying issues of substance use disorders. A more effective and humane approach is urgently needed, based on principles of human rights, harm reduction, and evidence-based treatment.

Decriminalization or legalization of all drugs, along with the eventual access to clean supplies of drugs for all users, is a necessary step towards achieving this goal. Alternative approaches to drug policy have been successfully implemented in other jurisdictions, such as Portugal and Switzerland, and have demonstrated reductions in drug-related harm and improvements in public health outcomes.

Furthermore, criminalization of drug possession and use violates the human rights of individuals who use drugs, particularly marginalized communities such as Indigenous peoples and people of color. This approach perpetuates social inequalities and contributes to the stigmatization and discrimination of people who use drugs.

A public health and harm reduction approach to drug policy prioritizes the health and safety of individuals who use drugs, and has been shown to be effective in reducing drug-related harm and promoting recovery. Evidence-based treatment approaches, including cognitive-behavioral therapy and medication-assisted treatment, should be the foundation of drug policy in Toronto.

It is the responsibility of policymakers and stakeholders in Toronto to recognize the harms of the current drug policy and to take action towards progressive reform. This includes supporting harm reduction programs such as safe injection sites and expanding access to evidence-based treatment.

It also means advocating for decriminalization or legalization of all drugs and the eventual access to clean supplies of drugs for all users.

In summary, Toronto's current drug policy is harmful and ineffective, and a more progressive approach is urgently needed. This approach should be grounded in principles of human rights, harm reduction, and evidence-based treatment, and should prioritize the health and safety of individuals who use drugs. It is the responsibility of all stakeholders to support and implement such reforms. Let's work towards a brighter and more equitable future for all.

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From the other side...

To round out the number of references and citations in this document to 100, the last five references that will be listed here have been selected carefully.

These references are from traditionally opposed viewpoints - for example, statements from heads of Police services, or national / international crime agencies.

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This article reports that the former head of the UK's National Crime Agency has called for the legalization of drugs as a way to reduce violence, corruption, and health harms associated with the illegal drug trade. The article highlights how this call for legalization is coming from an unexpected source and could signal a shift in attitudes towards drug policy.

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This blog post from the Drug Policy Alliance discusses why Portugal’s decriminalization policy has been successful in reducing drug harms. While the organization is not necessarily an “opposed viewpoint,” it highlights how the policy has been successful in reducing drug-related harms and providing individuals with better access to treatment and support.

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