

# **Actions to Respond to the Drug Poisoning Crisis in Toronto**

**Presentation to the Board of Health**

December 6, 2021

Item HL32.3

- On June 14, 2021, the Board of Health directed Toronto Public Health staff to convene a working group to provide advice on developing an alternative approach to drug criminalization<sup>1</sup>
- Since 2018, the Board of Health has supported decriminalization of personal possession, alongside scale-up of prevention, harm reduction, and treatment services

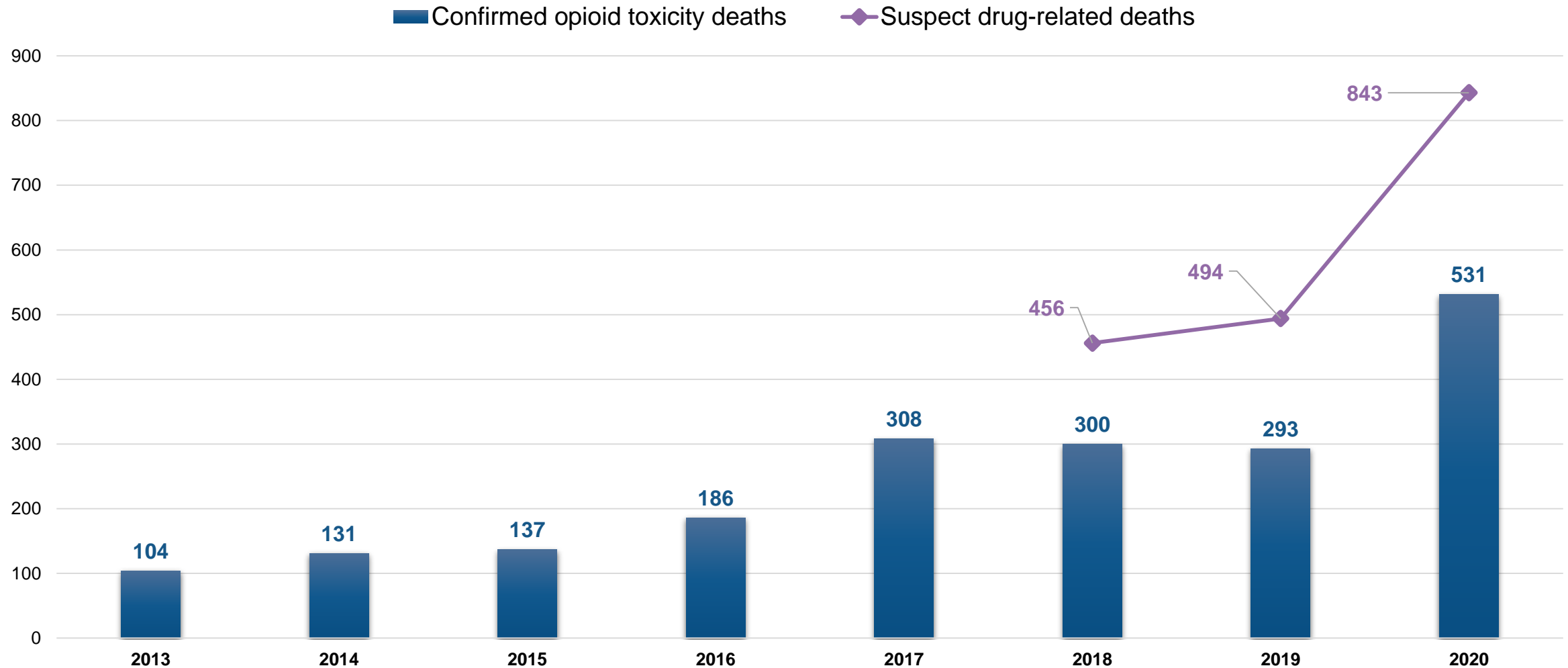
<sup>1</sup> Item HL29.2: Toronto Overdose Action Plan: Status Report 2021  
<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2021.HL29.2>

# The drug poisoning crisis has intensified

- Toronto continues to be in the midst of a drug poisoning crisis, exacerbated by the COVID-19 pandemic
- The drug supply has become increasingly toxic and unpredictable
- Fatal and non-fatal overdoses continue to increase
- Toronto Paramedic Services is responding to record-high and ever-increasing numbers of suspected opioid overdose calls

# 2020 had a record number of confirmed opioid toxicity deaths in Toronto

## Suspect drug-related and confirmed opioid toxicity deaths in Toronto



\*Preliminary data. Numbers are expected to change as coroners complete investigations.  
Sources: Public Health Ontario and Office of the Chief Coroner for Ontario.

# The legal framework for drug policy in Canada is under federal jurisdiction

- Illicit drugs are regulated under the federal *Controlled Drugs and Substances Act*
- Under the *Act*, all activities are prohibited, including possession for use, import, export, production, and sale
- Decriminalizing the possession of drugs for personal use in Toronto requires an exemption request to Health Canada
- Some exemptions under the *Act* have been granted (for example, operating supervised consumption services)

# Current approaches to drug policy and regulation are not working



The current legal framework for drug policy has not reduced the supply of drugs



Indigenous and Black populations are more likely to be targeted for simple drug possession offences



Criminalization leads to stigma and discrimination against people who use drugs



In 2017, \$3.7B was spent on policing, courts, and correctional costs related to drug laws in Ontario<sup>1</sup>

<sup>1</sup> Source: Canadian Substance Use Costs and Harms Scientific Working Group. (2020). Canadian substance use costs and harms visualization tool, version 2.0.0 [Online tool]. Retrieved from <https://csuch.ca/explore-the-data/>

# There is growing support for decriminalization nationally

- Broad support from several Canadian jurisdictions, law enforcement, and civil society
- Health Canada's [Expert Task Force on Substance Use](#) recommended an end to criminal penalties related to simple possession



Canadian Association of Chiefs of Police



Centre for Addiction and Mental Health



Government of British Columbia (request to Health Canada)



Kingston



Montreal



OACP Ontario Association of Chiefs of Police



Ontario's Big City Mayors



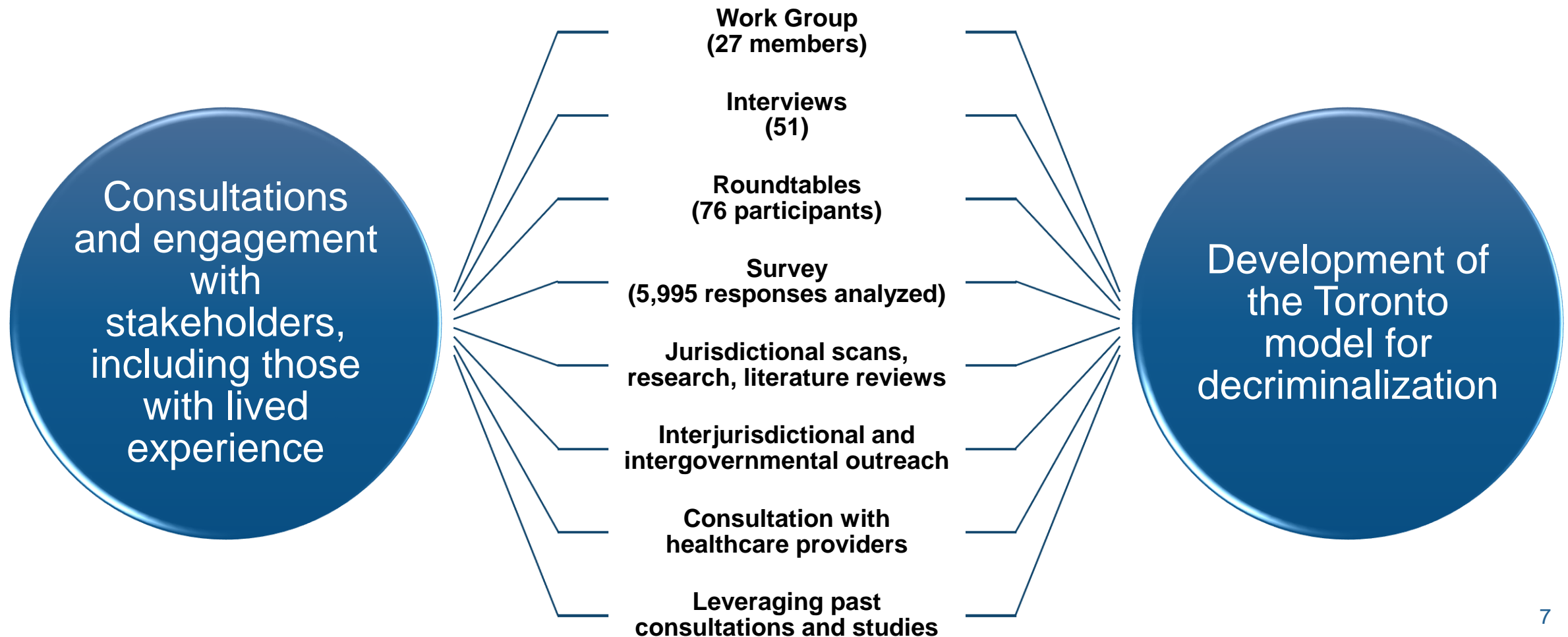
Ottawa



Vancouver (request to Health Canada)

# Toronto Public Health hosted an extensive consultation process in summer and fall 2021

**Centred on people who use drugs, the consultations sought to determine how drug decriminalization could be successfully implemented in Toronto**





# Responding to the drug poisoning crisis requires a comprehensive set of actions

## We heard from the consultations that:

- Decriminalization of personal possession and an enhanced network of services are needed.
- The Toronto model needs to be grounded in a human rights-based approach
- Services must be culturally-safe and trauma-informed
- New investments are urgently needed to respond to the demand

## Examples of actions to respond to drug poisoning crisis

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Data and information

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### **Decriminalization**

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Drug checking

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Grief and trauma supports

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Naloxone and overdose training

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Outreach

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Public education

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Safer supply

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Supervised consumption services

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Treatment

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# Toronto Public Health recommends a public health and human rights based approach

- Human rights and social determinants of health as cornerstones in reducing the harms associated with drug use and criminalization
- People who use drugs able to connect with the supports they need without fear of criminal charges, stigma, or discrimination
- Access to culturally-safe and trauma-informed services by health workers and peers
- New investments from all levels of government, as well as improved access and linkages to existing health services and social supports

# The evolving Toronto community anchor model

The Toronto Community Anchor Model is a public health response to the drug poisoning crisis that recognizes the importance of human rights, as well as the social determinants of health, in reducing the harms associated with drug use and criminalization.

The model recognizes that racialized and Indigenous individuals are disproportionately impacted by the harms associated with drug use and criminalization, and works to ensure access to culturally safe, trauma-informed services by health workers and peers.

## THE MODEL IS INTENDED TO:

Operate city-wide

Determine limits based on community use

Reduce demand on police and court services

Apply to all drugs

Ensure timely access to voluntary services

Eliminate fines or other penalties

## THE MODEL FEATURES:

Open access to people who use drugs as well as referral by first responders and a dedicated outreach team to the Toronto Community Anchor Drug Use Network.

New investments, as well as improved access and linkages to existing health services and social supports, that meet the needs of people who use drugs, particularly African, Caribbean, Black, women, 2SLGBTQ+ residents, and includes a dedicated Indigenous-developed and Indigenous-led pathway.

## Toronto community anchor drug use network (in development)



Designated Community Health Centres & Family Health Teams



24/7 Recovery and Treatment Services



Community Resource Sites



Overdose Outreach Team

# Evolving Toronto model

**Individual is not charged**



**Offer culturally-safe, non-stigmatizing, trauma informed health and social services**

- Overdose outreach team
- First responders

★ Heard a range of perspectives, which will be explored in workgroups

## Examples of health and social services in network

**Health maximization**  
Social and health supports to stabilize and foster health and well-being

Improved, equitable access to health care

Food and nutrition

Housing

Income support enrollment

**Harm Reduction**  
Supports to reduce harms associated with drug use

Overdose prevention

Collaborative health referral

Drug checking

**Substance Use Treatment**  
Expanded access to low barrier evidence-based options

Day and residential treatment

Rapid Access Addiction Medicine (RAAM) in hospital & select CHC + FHT

**Mental Health Services**  
Access to voluntary services

Trauma counselling

Substance use counselling

Mental health treatment

**Safer supply**  
Low barrier expanded prescription access

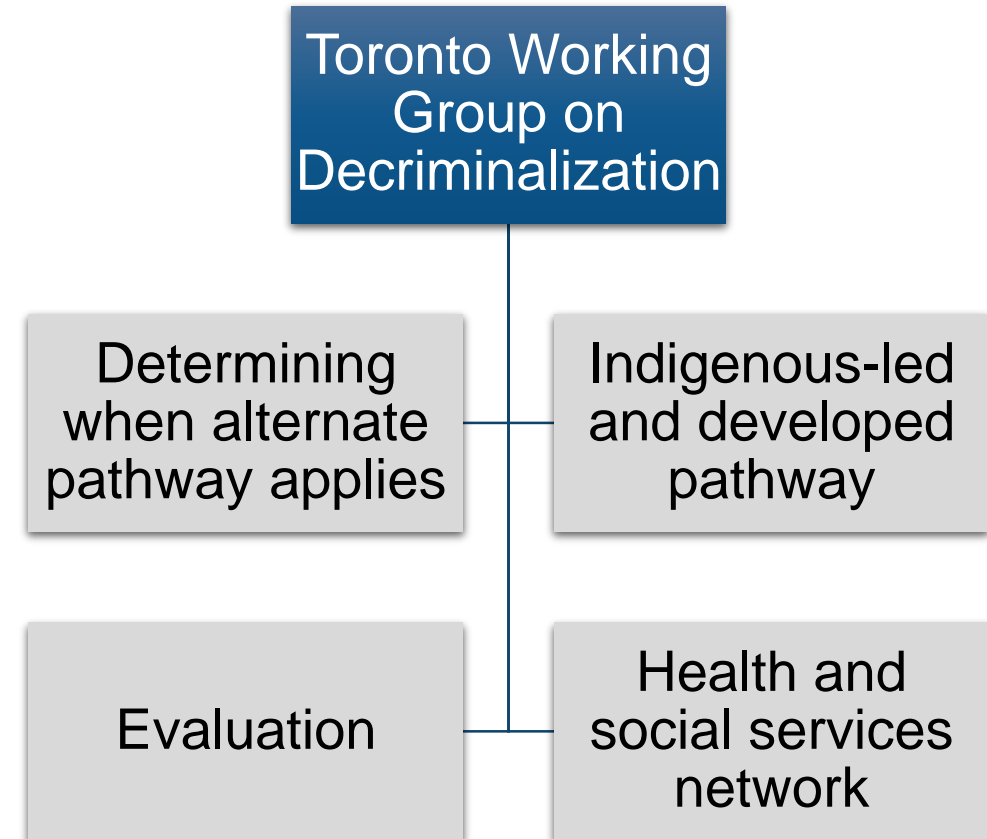
Injectable Opioid Agonist Treatment (iOAT)

Expanded formulary alternatives

# Continued and expanded consultations are expected as the model is refined

- Wide range of perspectives and feedback from stakeholders (detailed in [Attachment 1](#))
- Anticipate future working groups and consultations to inform further development of the Toronto model

## Preliminary Work Groups (pending feedback from Health Canada)

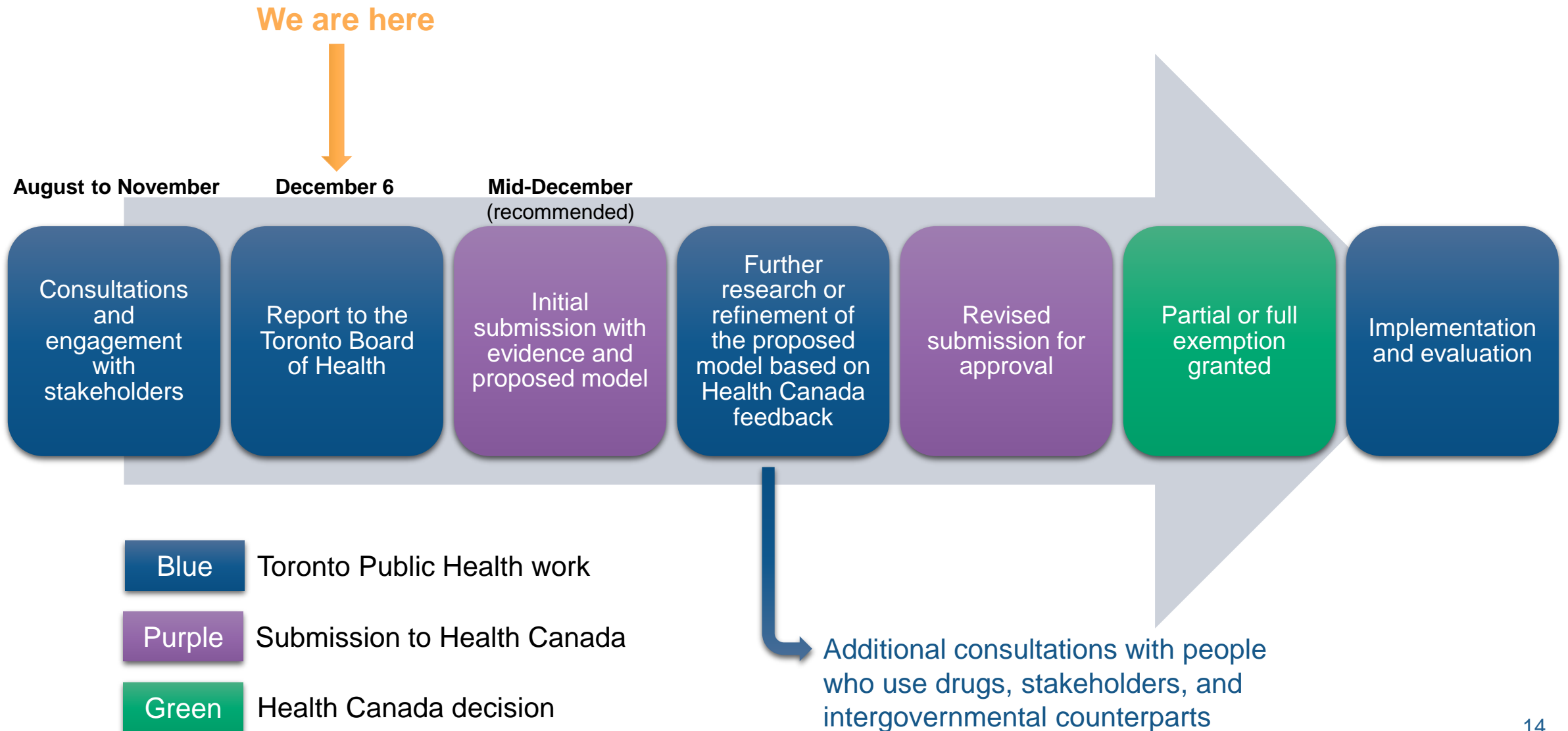


Future consultation processes will ensure that the voices of people who use drugs, as well as those groups most disproportionately impacted by criminalization are heard. This includes racialized, Indigenous, 2SLGBTQ+ people, sex workers, people who are parenting/pregnant, and people experiencing homelessness

# Change is needed and requires action from all levels of government

- The current approach to the crisis is not working and we continue to see tragic outcomes that are preventable
- We need a new approach to improve the health and well-being of people who use drugs and the wellness of our entire communities
- There is an urgent need for new provincial and federal investments, as well as improved access and linkages to existing health services and social supports, to meet the needs of all people who use drugs

# Drug decriminalization in Toronto requires the approval of Health Canada



# Report recommendations to meaningfully respond to the drug poisoning crisis

## Decriminalization

- Reiterate call for a national framework for the simple possession of all drugs
- Reiterate call to scale-up prevention, harm reduction, and treatment services
- Direct the Medical Officer of Health to submit Health Canada request by end of 2021

## Improving access

- Enhanced funding support for Toronto Drug Strategy Secretariat
- Fund life-saving overdose alert app
- Request the federal Minister of Health to fund iOAT treatment expansion
- Request provincial Minister of Health to fund proposals to address drug poisoning crisis
- Reiterate calls to provincial and federal governments to enhance a range of services