

**From:** "Mochrie, Paul" <Paul.Mochrie@vancouver.ca>  
**To:** "Direct to Mayor and Council - DL"  
**Date:** 1/16/2023 10:40:59 AM  
**Subject:** Update re: Province's Implementation of BC's CDSA s56 Exemption (in effect January 31, 2023)

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Dear Mayor and Council;

The decriminalization of possession of illicit drugs for personal use comes into effect in BC on January 31st. Below is some information on this topic as well as the City's application to Health Canada, and the recommended ongoing role for the City.

## **BACKGROUND**

In May 2021 the City applied to Health Canada for an exemption from Section 56(1) of the Controlled Drugs and Substances Act, based on a Council motion to decriminalize personal possession (November 2020, <https://council.vancouver.ca/20201125/documents/cfsc6.pdf>). Vancouver was the first City in Canada to put forward an application. The City's application and other information can be found on the City's website: <https://vancouver.ca/people-programs/decriminalizing-simple-possession-of-illicit-drugs-in-vancouver.aspx>.

Goals for decriminalizing drug possession for personal consumption include: reinforcement of illicit drug use as a health issue and not a criminal one; reduction in stigma, thereby increasing the comfort of individuals to access resources like safe consumption sites, or have others present as they consume drugs; and reduced confiscation of small amounts of drugs that will avoid having to purchase from unfamiliar sources and/or resort to petty theft or sex work to pay for drugs.

To date, over 14,000 people have died in BC since the crisis was declared in 2016. Vancouver continues to be the epicentre of the crisis with over 2,700 deaths. While the numbers of people dying of overdose decreased prior to Covid (March 2020), the past two years have shown a worsening trend due to unintended impacts of Covid such as increased toxicity and restrictions resulting in more people using alone. The highest volume of people dying from overdoses are younger men. Indigenous communities are being disproportionately impacted, comprising roughly 16% of overdose deaths and only 2% of the population. From a gender perspective, Indigenous women are 8.7 x more likely to die of an overdose than non Indigenous women (source: First Nations Health Authority), and women engaged in sex work are also at higher risk.

## **DISCUSSION/UPDATE**

### Anticipated Impact

Decriminalization itself is not the solution to the overdose crisis but it is an important step towards the regulation of illicit substances in the future. In Vancouver, the rates of arrest for possession of small amounts of illicit substances are low. However, decriminalization could result in reduced confiscation. As noted by Vancouver's Chief Medical Health Officer in your briefing with her last week, safe supply, along with regulation of illicit substances for personal use are key solutions to the OD crisis, along with preventative measures that include a focus on early childhood development and youth and parent engagement efforts, such as the VSB's SACY program. (<https://vsb.bc.ca/page/5152/sacy-substance-use-health-promotion-initiative>)

### BC's Application and Recommendation for City

- The Province (Ministry of Mental Health and Addictions/MHA) put forward an application in May 2022 and

was granted an exemption that comes into effect January 31, 2023 and until January 31, 2026. Further information can be found on the BC government website: <https://www2.gov.bc.ca/gov/content/overdose/decriminalization>

- The City's application continues to be in play. Given the election timing, finalizing a decision to proceed with the application was delayed until a new Council was established. Health Canada is requesting that the City confirm whether it wishes to proceed.
- Staff plan to recommend in an upcoming report to Council that the City withdraw its application. BC's application was created using the City's as a basis. This is a significant project that will require added resources for staff and/or contractors for coordination, monitoring and evaluation. Further this approach avoids potential confusion created from a lack of a common approach across BC. .

#### Differences between Vancouver and BC Application

- The City's application identified different threshold amounts that people could carry for different drugs, ranging from 1 to 3 grams, for crack cocaine (1.0), powder cocaine (3.0), opioids 2.0, and amphetamines (1.5). BC decided on a 2.5 gram cumulative amount of the same drugs, meaning that a person can have a mix of drugs on their person provided the amount does not exceed 2.5 grams. In essence individuals could carry a higher cumulative amount in Vancouver's application (up to 7.5 grams).
- There is disagreement between drug policy researcher and organizations with people with lived and living experience of drug use (PWUD) as to the threshold limits. Along with BC's, Vancouver's thresholds were seen as too low to benefit PWUD, in particular people with chronic substance use, and more beneficial to recreational users. Generally the threshold amounts are a starting point to this important process and could be adjusted over time.

#### What the exemption means for people who use illicit drugs

- As of January 31, adults in BC in personal possession of up to 2.5 grams cumulative total of opioids, cocaine, methamphetamine, and MDMA will not be criminalized.
- As part of the exemption, BC is required to ensure that police officer provide referral cards that include resources to people with illicit substances, provide expanded harm reduction, addiction treatment services, conduct engagement with stakeholders, deliver public education, and provide training for frontline law enforcement. VPD has made training mandatory for all officers.

#### What the exemption means for the general public

- The exemption does not apply to youth under the age of 18; the Ministry of Mental Health and Addictions (MMHA) has communicated separately to school districts and parent advisories on the implementation.
- The exemption does not apply in schools or child care centres, or locations that are federal jurisdiction such as airports. Use of drugs cannot take place on private property without the owner's consent.

#### **NEXT STEPS**

- *Role of the City:* It is important that the City continue to be represented on provincial working group led by

MMHA as well as a group convened by Metro Vancouver for municipalities. The City is considered a key partner in this work given our history in drug policy, current projects, and relationships with VCH, community groups, and researchers.

- *Monitoring and reporting:* The Province is contracting with a federally approved external research body to conduct regular monitoring, evaluation, and oversight of implementation, including monthly monitoring and reporting of disaggregated data. Information including communications materials provided to staff will be shared with Mayor and Council intermittently. Additionally, Mayor and Council can invite MMHA representatives to speak to this initiative directly.
- *Communications:* The Province is preparing a communications campaign and is involving City communications staff in this. Information will be shared with Mayor and Council once this becomes available.

If you have any questions, please email Sandra Singh at [sandra.singh@vancouver.ca](mailto:sandra.singh@vancouver.ca) and she will work with staff to ensure a response through the weekly Q&A.

Best,  
Paul

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The City of Vancouver acknowledges that it is situated on the unceded traditional territories of the xʷməθkʷəy̍əm (Musqueam), Snw̓x̓w̓ (Squamish), and səliwətaʔ (Tsleil-Waututh) Nations.