



Alberta moving ahead with forced addiction treatment bill, critics warn it could do more harm than good

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Published: April 05, 2025 at 6:24PM EDT

UCP set to reveal details on controversial election promise

The UCP will reveal details on promised legislation that critics are calling potentially dangerous. CTV News Edmonton's Chelan Skulski reports.

The province is preparing to reveal details of a controversial election platform promise.

The United Conservative Party (UCP) is expected to table the Compassionate Intervention Act this year.

It would give doctors, family members or police the power to petition the courts to force an adult into involuntary treatment if they are believed to be a danger to themselves or others.

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“Every single day, someone’s overdosing from opioids,” said Dan Williams, Minister of Mental Health and Addiction.

“We need to care for them, and a caring, compassionate society intervenes when they don’t have family members or community or workplace friends that can help them get out of addiction and into recovery.”

However, while the UCP have called the policy compassionate, critics say it poses risks.

‘I came out of there a better drug user’

Brandon Shaw is a recovering addict. He said he spent more than a decade of his young adult life on the streets fighting addiction after getting hooked on prescription opiates as a teen.

“With the whole crackdown with Purdue ... I was 17 doing Oxy and then I was pushed on heroin,” Shaw said.

During those teen years, Shaw was forced into treatment twice under Alberta's Protection of Children Abusing Drugs program (PChAD), which allows legal guardians to order youth into detox for up to 15 days.

He said that mandated treatment only made things worse.

"I was a child who needed love and support, not to be roughed up or treated like a criminal," he said. "When I went to this PChAD place, there was no extensive counseling ... I was thrown in a room with a bunch of people who were just like me.

"I came out of there a better drug user. I came out of there more equipped, more prepared and with a chip on my shoulder."

- ['It's not going to work': Health-care professional critical of province's involuntary treatment plans](#)

His experience with involuntary treatment destroyed his relationship with his family, he said, and started him on a 15-year path of destructive drug use.

It wasn't until he was ready himself that he was able to turn things around.

"The way I got off the streets was just compassion, having my own autonomy and making the choices that were right for me," Shaw said.

"It wasn't until I actually had that opportunity to make those choices and not being told what to do, that's when my life changed."

'Making sure that we're not causing problems'

Data from the Alberta government shows [2023](#) was a record-breaking year for drug-poisoning deaths in the province, with 2,051 people dying of an overdose.

That April, Premier [Danielle Smith spoke](#) about the proposed involuntary treatment act, calling it a "last resort."

"We just want to stop the deaths. That's what this is about," Smith said.

"We've had a number of different things that have been tried over the years and it's not working. So we've got to try something else."

Under the proposed policy, a health-care professional, family member or peace officer could refer a personal for involuntary treatment.

The decision whether or not to admit them would then be made by an independent commission and reviewed by the courts, and individuals would have the power to appeal an order to enter care.

The province has said treatment would be tailored to each patient's needs and take place in a secure facility as well as in the community.

"It's robust legislation that holds us to the highest standard and makes sure that we both protect individual civil liberties, while at the same time protecting that individual who suffers from addictions," Williams said.



According to the Alberta Substance Use Surveillance System, the province saw 733 EMS opioid related calls in the month of April, which is a nearly 40 per cent increase compared to the 528 EMS calls for the same month last year.

Addiction physician Monty Ghosh called the evidence supporting mandatory treatment "questionable" and said the province needs to be careful it doesn't cause more harm.

"We have to make sure that we're evaluating these outcomes closely and making sure that we're not causing problems for these individuals," he added.

Bruce Holstead, executive director of Fresh Start Recovery Centre, an abstinence-based treatment centre in Calgary, supports the idea of compassionate intervention.

"This is a drug that takes over someone's life, they can't make a decision for themselves," he said.

"If we can create that moment of clarity and change somebody's pathway, why wouldn't we want to try to do it?"

'Harm to self or others'

Keith Humphreys is a professor of psychiatry at Stanford University and he consulted with the province on compassionate intervention.

He said the panel looked at different models of having a person committed used for mental health and what types of situations warrant government stepping in to mandate treatment.

“There are pretty well developed indicators for harm to self or to others, because this has been something that has been with serious psychotic illnesses for a long time,” said Humphreys.

The idea, Humphreys said, is to give people a secure place where they can get away from drugs and alcohol – even if they don’t want to.

“The hope is that, particularly once people have detoxed from the acute effects of substances, and start to get some recovery of mental health, some appreciation, both from themselves and perhaps from their family and loved ones, that their life is improving, they will want to continue on this journey,” he added.

The province has promised \$180 million over three years to build two 150-bed [intervention treatment centres](#), which will differ from voluntary recovery centres. They are expected to open in 2029.

- [Alberta to move ahead with mandatory addiction treatment facilities this year](#)

Harm-reduction advocate Petra Schulz, a founder of Moms Stop the Harm, is critical of the plan, fearing it would result in dangerous outcomes for those struggling.

“It could cause more people to hide their use,” she said. “Hide it from the people who could potentially help them, hide it from their health care providers. So it will be harder to get people help.”

“It is also more likely that people don’t call help in case of an overdose,” she added. “The other risk, of course, is once they are released, that people go back to what they did before.”

Schulz points to a 2018 U.S. study published in the *National Library of Medicine*, which found, on average, involuntary patients relapsed within 72 days of release – with one third relapsing the day they were discharged.

“I personally have a friend whose child died within a few months of leaving PChAD. That’s a huge and tragic loss, and their relationship in bond was really severed, and the trust was severed,” she said.

The province said the new legislation could come in spring or fall of this year. If passed, it would be the first legislation of its kind in Canada.

In a statement, the press secretary for Minister Williams said: “A treatment model such as the one being developed through compassionate intervention does not exist anywhere else, which means there is no apples-to-apples comparison.” He added that critics have yet to see the details of the legislation.

With files from CTV News Edmonton’s Chelan Skulski and CTV News Calgary’s Tyson Fedor