

NATIONAL POST

Alberta's 'compassionate' drug-policy fix shifts into overdrive

After 25 years of failed addictions policy, a tougher approach: 'The compassionate thing to do is to intervene,' Alberta minister says

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Mental Health and Addiction Minister Dan Williams on Aug. 16. Photo by TBA /Greg Southam

People don't want to see drug addicts on the street fencing against the wind with a syringe, says Dan Williams, Alberta's 37-year-old mental health and addiction minister.

"The compassionate thing to do is to intervene. There's nothing more un-Canadian than leaving that individual to die in the street."

The minister knows what communities and civic leaders across Canada are up against. Overwhelming supplies of potent synthetic opioids, including fentanyl. Surging homelessness and dangerous encampments. And citizens who want to see public order restored.

This week's announcement by Sylvia Jones, Ontario's health minister, of big plans to constrain where drug consumption sites can be located, reject the federal government's so-called "safer" supply initiatives, and invest \$378-million in homelessness and addiction recovery treatment hubs, echo Alberta's emphasis on addiction treatment and recovery.

Make no mistake: These are massive policy shifts.

Dan says that for the past 25 years, Canada has only been offered one policy option when it comes to addiction, and that policy has failed, demonstrably. What we thought was "respect" for choices and modern "treatment" only made things worse. "I think the last 25 years was an anomaly," is his retort to critics. The idea of caring for your family members, of intervening when they're in this incredibly self-destructive state, that's not new, he argues.

Dan's mandate from Alberta Premier Danielle Smith is to lead implementation of the United Conservative Party government's ambitious drug-recovery strategy. The aim is to not just reduce the harm caused by drugs but to create the conditions for addicts to recover. In doing so, he and others are helping to redefine what it means to be compassionate.

"There's nothing compassionate about leaving somebody intermittently homeless in minus-40 weather, speedballing methamphetamine with fentanyl, and saying that we're just going to let that person sort this out because it's about free choice," he says.

The government's addiction recovery roadmap includes mandated treatment for addicts — an uncomfortable idea, with lots of niggling questions about civil liberties. The minister is working on compassionate intervention legislation he hopes to introduce into the Alberta legislature in 2025.

To be clear, the minister emphasizes, voluntary treatment of addicts is obviously preferred. But we're not comparing voluntary treatment to involuntary treatment; we're comparing involuntary treatment to doing nothing.

Every day, judges across Canada order people with severe mental health and addiction to treatment — as part of their conditional sentence orders, as part of their release conditions, as part of probation. What Alberta is pioneering is the idea of equipping the healthcare system to intervene, and even mandate treatment, in very serious cases where an addict is in reasonably imminent danger to themselves or others. And because it's a healthcare process, the individual isn't left with a criminal record. "It's a thoughtful, compassionate health response to heal that individual," Dan submits.

When I sit down with Dan early on a Saturday morning — at Cafe Gravity, a funky coffeeshop tucked within the scaffolding of a massive building renovation — he reminds me that we've met before. He was Jason Kenney's executive assistant.

"You were driving the truck, right?" I recall, Kenney's iconic blue Dodge 1500 pickup truck he toured around Alberta in 2016. "Yeah, I was driving the truck," Dan laughs. "I was the truck driver. I was the advance tour planner. I was the outreach coordinator." And today, with his neatly cropped beard and navy blue suit jacket, he's a second-term MLA representing Peace River country in northern Alberta

and the fourth minister of mental health and addictions appointed to the role since the UCP government was elected in 2019.

Early in her premiership, Danielle Smith made it clear she wouldn't be stopped in her quest to up-end the way healthcare is delivered in the province. Alberta Health Services is slated to be dismantled, and replaced with four provincial agencies — for primary care, acute care, continuing care and mental health and addiction.

Recovery Alberta, the newly created mental health and addiction agency, is now a legal entity and is “going live Sept. 1st,” Dan reports. The Canadian Centre of Recovery Excellence (CORE) has also been announced, to research best practices, analyze data and make evidence-based recommendations for “recovery-oriented systems of care.” Already, you can go online to track EMS responses, emergency room visits, overdose reversals — and deaths.

“You can't build a system out of thin air,” explains Dan. “It is a huge culture shift. Even the creation of Recovery Alberta — it's in the name, ‘recovery’ — we're changing the way we're thinking about mental health and addiction from its fundamental assumptions for the past 25 years.”

“I think we've had five years of building out the Alberta Recovery model,” Dan continues. “Five years?” I find that surprising. “Yeah, since 2019,” Dan says with a smile, crediting Kenney with the policy innovation. Kenney also picked Marshall Smith, a recovered addict himself (now promoted to Premier Smith's chief of staff), to design the new recovery approach.

Breathlessly, Dan reels off a long list of actions to get ready for the launch of Recovery Alberta: “We removed the over \$1,200 a month for recovery that the NDP left in place. We more than doubled our capacity for treatment beds, including detox, over 10,000 beds system-wide, right? We started funding new treatment centres. We built a continuum of care for recovery from start to finish. We built a roadmap for expanding the recovery centres themselves. We partnered with Indigenous communities, whether it be the Metis Recovery Centre I just announced (yesterday), or talking to Enoch (Cree) and their outreach team and shelter in the City of Edmonton.”

The UCP government also decided to make illegal the so-called “safe supply” of high-powered pharmaceutical opioids to addicts. “Here are the so-called experts in the (federal) government telling us the best thing for us to do is to hand out high-powered pharmaceutical opioids to the drug addicts, that are two to five times more powerful than the drugs they get on the street,” Dan says with a scowl. “Make it pure pharmaceutical grade and somehow this is better?”

The Ford government's recent addiction policy announcements seem to reflect similar thinking.

Ontario's decision to ban supervised drug consumption sites within 200 metres of schools or child care centres addresses an issue well-understood in Alberta. Drug consumption sites haven't been banned in Alberta, Dan reports (he refuses to call them “safe injection sites”), but the government works closely with municipal leaders to address citizen concerns. In Lethbridge, for example, the permanent site was replaced with a mobile trailer and his ministry is presently working with Red Deer's city council on their request to remove a site in that community.

Premier Smith took the baton from Kenney, Dan explains, and she's racing full-steam ahead. And Dan finds himself, once again, in the driver's seat, travelling from one end of the province to the other,

opening the doors on brand-new addiction treatment centres. “We are investing \$350 million, that’s a third of a billion dollars, up to now on infrastructure for 11 recovery communities,” Dan reports, with obvious pride. “And let me tell you,” he continues, “I’m planning on more coming down the line.”

Funds will also be required to build compassionate intervention facilities, I add. Dan’s not as forthcoming about those budgets — he says he’s talking to Treasury Board — but assures me, they are big numbers, very big numbers.

Healthcare costs Albertans nearly 50 cents of every dollar the government spends; the percentages were the same a decade ago when I was a member of Alberta’s Treasury Board. “Will this scale of cash infusion into addiction recovery compromise other healthcare services?” I ask. It’s no secret Albertans are agitated by the growing wait times for cancer care and other essential treatments.

Dan doesn’t rush to answer; rejigging healthcare priorities is a mug’s game for politicians. “Our entire system, every single aspect of it,” Dan reflects, “is massively burdened by people looking for care in emergency rooms and emergency response ambulances, when they should be looking for mental health or addiction care instead.” Create the care, suited to dealing with the addiction itself, Dan reasons, so it’s not a catch and release or a turnstile just moving addicts through the system over and over again.

Albertans have a choice, Dan concludes: “We can keep doing what we’ve been doing for 25 years and put more money into harm reduction and Trudeau’s harm production of unsafe supply. Or we could take a common sense approach and say those with addiction need recovery and treatment and those who are endangering themselves or others will have mandated treatment.”