

## Health minister says forced addictions treatment lacks evidence, feds won't intervene

OTTAWA — Federal Health Minister Marjorie Michel says there's no evidence that forcing people into addictions treatment works — but she won't weigh in on whether provinces should pursue involuntary treatment.



*Health Minister Marjorie Michel poses for a portrait on Parliament Hill in Ottawa on Thursday, May 29, 2025.  
THE CANADIAN PRESS/Sean Kilpatrick*

OTTAWA — Federal Health Minister Marjorie Michel says there's no evidence that forcing people into addictions treatment works — but she won't weigh in on whether provinces should pursue involuntary treatment.

"I will tell you that I think every single Canadian has the right to get treated," she said.

"I won't tell you that to force them to be treated is a way to solve the problem. I don't think for now we would have any kind of scientific evidence on this practice."

Alberta has introduced sweeping legislation to allow family members, health care workers or police to apply to have someone ordered into treatment for addiction.

Under that legislation, people using substances who are thought to pose a risk to themselves or others could be forced into a secure treatment facility for up to three months.

In British Columbia, where the opioid crisis has been particularly deadly, the provincial government recently opened a 10-unit facility at a pretrial centre to treat people at the jail who have both serious brain injuries and addiction issues. The government also wants to add more facilities at jails across the province.

B.C. officials said they are trying to provide help for people who are unable to ask for help, and prevent them from spending time in segregation as they wait for a bed to open up.

Ontario announced last month that it plans to study how it can introduce involuntary treatment to the correctional system and plans to hear from people with lived experience and experts. The Ontario government has said it's looking to B.C. as a potential model.

The proposed changes have been opposed by advocates who say governments should focus instead on expanding access to voluntary treatment.

Michel said she won't comment on the provinces' plans for now.

"I will sit down and see results, because I think we need to work closely together, but mostly we need scientific evidence," she said in an interview outside the House of Commons.

A 2023 review published in the Canadian Journal of Addiction found there was "a lack of high-quality evidence to support or refute involuntary treatment" for substance use disorder. The study concluded that more research is needed.

The Centre for Addiction and Mental Health in British Columbia said evidence shows that forcing people into treatment actually increases the risk that they will die of drug poisoning after being released.

Kora Debeck, a professor of substance use and drug policy at Simon Fraser University's school of public policy, said that's one of the reasons involuntary treatment is considered high-risk.

"I think there really is magical thinking about addiction treatment, and this thinking that if we can just get people into treatment, the suffering will go away and people will get better," she said.

Debeck said that addiction is a "chronic relapsing condition" and people need supports around them to get better.

"I am really disappointed that so many governments seem to be moving away from a public health oriented approach to substance use and drug policy," she said, arguing that harm reduction policies have not failed.

She said the combined effects of the opioid crisis and the housing crisis have created a horrible situation that has people calling on their governments to do something different. More than 50,000 people died of opioid toxicity in Canada between 2016 and 2024.

"The supply of drugs is so toxic, it's so contaminated ... and so what we're seeing very viscerally on the street is a level of suffering that we just haven't seen before," Debeck said.

In a statement, the president and CEO of the Centre for Addiction and Mental Health said that before they introduce involuntary treatment policies, governments should do a comprehensive review of the voluntary system.

"Many people want help but are unable to access timely, high-quality, voluntary care," said Sarah Downey.

The statement also said long-standing gaps in mental health and addictions care must be addressed and called for "bold, collaborative leadership" from the federal government.

In their federal election platform, the Liberals promised to add \$500 million to the emergency treatment fund to address the overdose crisis, and to "invest in deeply affordable housing, supportive housing and shelters" as a means of improving health care.

Michel was elected on April 28 in Papineau, the riding that had been represented by former prime minister Justin Trudeau for 17 years. She is a first-time cabinet minister.

But she is no stranger to Parliament Hill. She served as Trudeau's deputy chief of staff since 2021 and before that served as chief of staff to two cabinet ministers.

She said she understands the criticism of Prime Minister Mark Carney's decision not to name a minister of mental health and addictions, a role that existed in Trudeau's government.

"But you have a mental health minister, because I can tell you, I am the health minister and the mental health minister," she said, adding that mental health will be one of her "top priorities."

She pointed out that Carney has talked about his desire to boost Canada's productivity rate and said making improvements to mental health care is part of the solution.

"If you are not taking care of health and mental health, you won't get it, because people will get sick," she said.

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