

Is Canada on the Verge of Decriminalizing Drugs?

By [Vember](#)

Global Research, July 18, 2018

Region: [Canada](#)

Theme: [Law and Justice](#), [Science and Medicine](#)

Note to readers: please click the share buttons above

This week in Toronto the largest health board in Canada which consists of local city councilors and public health officials voted ten to zero to decriminalize all drugs. They're fed up. They've had enough. The war on drugs is a failure and one of the biggest scams of our time. So what are the alternatives, and why could this be more significant and deserve more attention than Trump meeting with Putin?

People who have been deceived by the medical system they sought help from are dying of opiate overdoses at an unprecedented rate. The numbers grow larger every year. 3,987 died in 2017 in Canada while 92% of them were unintentional.[6] The USA in 2016 saw about 42,000 die from overdosing on prescription opiates, heroin, fentanyl and its related chemical analogs collectively. 66% of all of the 64,070 overdose deaths in the USA came from opiates in 2017 which have killed ~350,000 people here since the early '90's. [1]

Not long after the turn of the century the streets were flooded with cheap heroin from the flourishing poppy fields of Afghanistan as a curious byproduct of the "war". The place I used to hike was dubbed 'heroin hill' and I was once stopped on my way up there by a pissed cop looking for a bust. The cost and availability of prescription opiates became out of reach for the users with their tolerances rising higher. Switching to the cheaper and stronger street heroin without the fillers was a no brainer for many addicts who never wanted to be addicted at all. The pills were initially given to them by their doctors who found the kickbacks from Big Pharma to be a nice addition to their ever-so-stressed work schedule. After all, doctors nowadays have some of the highest suicide rates among all of the professions in America. Clocking in around the rate of suicides of veterans of the Vietnam, Gulf, Iraq and Afghanistan wars who take their lives on average of 120 times a year. [3] [4]

The pharmaceutical companies are actively being sued by states and counties in the US over their deliberate role in marketing this scheme to doctors. [2] Purdue Pharma lobbied for Oxycontin to be prescribed for even minor pains and injuries citing a botched study that claimed it had little to no addictive potential at all. [5] They claimed a dose every 12 hours would be enough to alleviate a patient's pain.

The reality the patients who took the drug found was the dose prescribed for every 12 hours wasn't effectively managing the pain. Or if it did it no longer was because of tolerance that develops when someone takes some types of drugs or medications daily. It not only makes their effects weaker but it can also exacerbate a person's pain levels higher than they were before they had taken the drug. Their response was to up the dosage, which didn't do anything for prolonging pain relief, it just doped people up more, setting them up for a higher probability of becoming addicted to the drug. This is how, in stripped-down terms,

the flood gates of profits and deaths were opened by the greedy sociopaths propping up the corporations who have no ethics or sense of value in us and the lives of our friends, families, neighbors, and passersby except how much money we can give them while we're still alive.

Around 2014 fentanyl started getting popular. An opiate 100x more powerful than Oxy. You could get it shipped in from China before it was banned but a lot of it is coming in from Mexico now and will continue to regardless of the fence. Once it was banned, chemists started making very similar analogs to the compound that were technically still legal. Think of it like a drug that's similar enough in psychoactivity to another drug but structurally different enough to not be legally classified as one thus forfeiting any liability in its production or transportation across the border. This game of chemical cat and mouse with law enforcement and laboratories continues to this day.

If say an adversarial government wanted to use a drug to decimate a nations population all they really had to do was rent out their labs over night to anyone who would pay and the buyers would line up like sheep to the ankle bites of the mangy dog. Cutting, or mixing, heroin with fentanyl became a dangerous game. Inhaling the dust could be a death sentence due to the sheer power of the substance at such a small dosage. Mishandling the powder could turn one cold and blue in a matter of hours. And this is exactly what happened and is happening to everyone trying to get their fix on cheap heroin that is now laced with fentanyl analogs for profit and for warfare. What Big Pharma started, the underground labs took over, and the addicts and dealers who are sometimes coerced into the trade by their addictions or other nefarious means and economic oppressions have paid the price with their lives. 72% of the opiate overdose deaths in Canada in 2017 were from a mixture of fentanyl or its related analogs. [6] Up from 55% in 2016.

Gabor Maté, an author and physician from Vancouver, CA made a name for himself writing about and educating others on the complexity of addiction from a psychological, physiological, and spiritual perspective. He has illustrated in books like In 'The Realm of Hungry Ghosts' that addiction is not something a person chooses and it is not just something that lies dormant in their genetics.

He estimated there's a 5% genetic & 95% environmental impact on what causes a person to become an addict. Numerous factors from before they were born, after they were born, and their place in our dysfunctional society all play a pivotal part in creating the criminals we see on the streets of America who get locked up for whims largely outside of their control. They make up the millions of non-violent offenders in the private prison industrial complex that is so profitable today while our education system lies disgracefully in shambles. He also successfully treated many addicts with sessions of ayahuasca, a psychedelic tea brewed from two types of plants found in the Amazon, with variations popping up in other areas of the world throughout history, like the Sufi with their Syrian Rue. He had an unprecedented success rate that was never done before in the eyes of mainstream medicine. So of course the Canadian government forced him to stop doing it in their jurisdiction.

If seeking help for drug addiction in America doesn't land you in the big house where guards become your new dealers, or you don't lose your healthcare in the process, the best thing they have to offer you is daily doses of methadone or suboxone. These drugs are largely a fallacy to every person who has been coerced into addiction or finds themselves stuck and wants to get out but doesn't know how. There is no suggested viable long term plan for the methadone or suboxone user except to try to ween off eventually somehow. They give them

a half-assed version of an opiate that still binds to the same receptors in the central nervous system and keeps them hooked in some cases indefinitely. The upsides to this program are eliminating the potentially deadly and toxic hazard that comes with consuming street drugs and also some of the health care costs in terms of overdosing and the diseases from used needles, ulcers, and other ailments that result from the constant stress and poison—But this isn't nearly good enough. Somewhere down the line they gave up and gave into the stigma and pressure of the federal government—Or is this what was deemed the most profitable solution for the homeland?

Decriminalizing all drugs, like Portugal successfully did in 2004, has been proven to be a highly effective way to implement a harm reduction policy that treats addiction like the disease that it is and puts addicts into the care they need and out of the prisons and street culture that are devastating their lives. [7] Three people out of a million die of drug overdoses there giving it the second lowest figures in all of Europe. [8] Some would argue that it creates bad precedent for the children. I say nay. Teach your children the truth. The statistics show a clear correlation between decriminalization and reduction of both teen and adult drug use and abuse. Decriminalizing drugs takes them out of the hands of dealers and shady laboratories and puts them into the hands of certified chemists with quality control measures and precise dosages to eliminate overdose deaths and the physical and mental diseases that come with their addictions.

It can create a new and better paradigm where addicts no longer have to participate in illegal activity or be subjected to detrimental stigma that comes with it and allows them to be open to seek the help they really need. If the health board succeeds in lobbying for this to Ottawa now that things have finally reached epidemic proportions they may successfully and profoundly decrease the amount of overdose deaths in their country and improve the lives of their entire population as a whole for generations to come.

*

Vember is a pen name.

Notes

[1] <https://www.cdc.gov/drugoverdose/epidemic/index.html>

[2] <https://www.bbc.co.uk/news/business-44705658>

[3] <https://blogs.scientificamerican.com/observations/suicide-is-much-too-common-among-u-s-physicians/>

[4] <https://www.centeronaddiction.org/the-buzz-blog/revealing-bad-science-behind-oxycontin>

[5] <https://mentalhealthdaily.com/2015/01/06/top-11-professions-with-highest-suicide-rates/>

[6] <https://www.canada.ca/en/health-canada/services/substance-abuse/prescription-drug-abuse/opioids/apparent-opioid-related-deaths.html>

[7] <https://www.washingtonpost.com/news/wonk/wp/2015/06/05/why-hardly-anyone-dies-from-a-drug-overdose-in-portugal/>

[8]

<https://m.mic.com/articles/120403/14-years-after-decriminalizing-drugs-one-chart-shows-why-portugal-s-experiment-has-worked>

The original source of this article is Global Research
Copyright © [Vember](#), Global Research, 2018

[Comment on Global Research Articles on our Facebook page](#)

[Become a Member of Global Research](#)

Articles by: [Vember](#)

Disclaimer: The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: publications@globalresearch.ca

www.globalresearch.ca contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.

For media inquiries: publications@globalresearch.ca