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**OFFICIAL REPORT (HANSARD)**

Monday, May 15, 2017

Speaker: The Honourable Geoff Regan

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**Controlled Drugs and Substances Act**

**Ms. Dianne L. Watts (South Surrey—White Rock, CPC):**

Madam Speaker, I will be splitting my time with the member for Foothills.

I am pleased to rise again to speak to Bill C-37, an act to amend the Controlled Drugs and Substances Act and to make related amendments to other acts.

As a member of Parliament from the Lower Mainland of British Columbia, I certainly can say that we have seen this crisis for a very long time. I am glad that the **health minister** has come forward to look at this issue. I would say that the community does want more to be done. This is an epidemic and I feel very strongly that we as legislators must do something. We must do anything we can to protect our kids, to protect our communities, and to protect the life of these individuals who are affected by this public health emergency. When there are close to 1,000 people dying from opioid overdoses in a single province in a single year, we need everyone involved to assist in mitigating that crisis.

When Bill C-37 came before the House in December 2016, it was tabled two days before the House rose for Christmas. I remember thinking that this piece of legislation should have been tabled months earlier, because there were some extremely important tools and changes in the bill that needed to be implemented immediately. Those had to do with the banning of the importation of unregistered pill presses, providing CBSA officers with more powers to open suspicious packages to stop the flow of fentanyl and carfentanil into Canada from China, and broadening the penalties to apply to the production, sale, importation, or transportation of anything intended to be used in the production of a controlled substance, including fentanyl.

There were other parts of this legislation that were more problematic and needed to be given more time for debate and more time for the opportunity for some amendments to come forward. I am talking about the legislative changes included in Bill C-37 that facilitated easier access to opening the injection and consumption sites in communities. In particular, there was the lack of community, police, and municipal consultation or notice in the legislation. That is why we as the Conservative opposition put forward a motion to separate the bill into two bills. One bill would have addressed all of the urgently needed measures and had unanimous support of the House and the other bill would allow parliamentarians and Canadians to have a bit more time to gather data and have a look at our communities to determine what we need to do and to look at the legislation and amendments.

It was absolutely astonishing that unfortunately, politics came into play and that motion was voted down. We could have had all of those measures in place right now.

We also wanted to hear from some expert witnesses on this issue at committee. Again, the Liberals opted not to hear from any witnesses whatsoever on the legislation and proceeded straight through to clause-by-clause study. Again, the Conservative opposition put forward amendments to the bill. They were common sense amendments, such as, obtaining letters indicating support or opposition from a municipality or a local police force, that all households within a two kilometre radius of a proposed site be notified and given the ability to offer up opinions whether they are in support or opposition, and information to be provided regarding schools, hospitals, day care centres, recreation facilities within that two kilometre radius. A defined period of time for public input and consultation, a minimum of 40 days and maximum of 90 days, would be given. Again, all of those amendments were voted down by the Liberal-dominated health committee.

The bill passed and went to the upper chamber, where amendments were made and the legislation was sent back to this House. It is now May 2017. It has been six months since the Liberals tabled this legislation and here we are debating the legislation that could have been passed through the Senate.

What part of the bill did the Senate take issue with? It was the lack of community consultation regarding injection site rule changes. That means none of the measures that had received unanimous consent from all sides of this House and the Senate have been passed.

I want to highlight the fact that had the Liberals put politics aside earlier and voted in favour of splitting the bill, those proposed pieces of legislation would be in place now, and CBSA would have the additional powers to stop fentanyl and carfentanil from coming into Canada. As well the ban on the importation of unregulated pill presses would be in place. However, these measures are still not in place and because of the importation of pills and powders, dozens of Canadian lives are being taken each and every day.

Today we are talking about three amendments made by the Senate to Bill C-37, after the Senate held five committee meetings and heard from 22 expert witnesses on this legislation.

The first amendment would ensure that there is a minimum community consultation period of 45 days prior to the approval of an injection site.

The second one would set up a citizens advisory committee of five to 10 volunteers who would be responsible for advising the approved injection site of any public concerns, including public health and safety. This is something that every community would want to support. The committee would also provide the minister with yearly updates on these matters.

The third amendment would direct those working at the site to offer users alternative pharmaceutical therapy rather than their consuming street drugs.

I was very pleased to see these amendments come from the Senate. Clearly it showed the upper chamber listened to the concerns around the issues and the lack of community consultation regarding the injection site and attempted to address some of these concerns yet again.

I am glad to hear that the Liberal government is supporting the first amendment from the Senate. I was a mayor for almost a decade, and I can say that if we do not consult with the community and do not have community buy-in on these very difficult issues, then it is doomed to fail. There must be a minimum amount of time for consultation, the gathering of information, and for input.

I am, however, very disappointed that the Liberals oppose the second amendment from the Senate. We have to look at the community as a whole and support those in need, as well as ensure that the community has a voice. Establishing an advisory committee, such as the one proposed by the Senate, would ensure that the community is engaged in an ongoing way, that it has a mechanism to voice its concerns, its support, any developing issues, and whether the site is actually working in that particular area of the community or not. It is not clear why the Liberals are so against giving communities a voice that would no doubt be very significant in any community, whether it is a large community or a small community.

On the third amendment, I find the Liberals' position somewhat baffling, because any injection or consumption site absolutely must offer an alternative to those who are using its services. Again, it is helping the individual. However, the Liberal government has changed the wording in this amendment. This has to be about saving lives.

These amendments would save lives. They would help the communities come together. This is an issue affecting all of us.

The motion put forward by the member for Oshawa to accept these amendments would provide legislation that really could have assisted, but again, the Liberals continue to refuse to allow communities a voice.

Thousands of Canadians have died from opioid overdoses. The families are affected, as are the schools, the friends, the children, the first responders, and the community at large. I look at this list. There is a mother who lost her two children within 20 minutes of each other. They were both in their twenties. Jordan was 21. Ryan was 23. Kelsey was 24. David was 21. Danny was 25. Scott was 21. Tyler was 23. These are young kids. There have to be alternatives. There has to be a community coming together and looking at this in a very holistic way. On this side of the House, that is all we want.

**Mr. Sukh Dhaliwal (Surrey—Newton, Lib.):**

Madam Speaker, I would like to commend the member for South Surrey—White Rock's work as a councillor and as a mayor of Surrey, and for helping the Whalley area in Surrey where this type of establishment, a safe consumption site, is a necessity. I am sure that the hon. member is aware of all the facilities, whether it is the KEYS, The Front Room, and the work that those organizations are doing. The hon. member is well aware, because of her background as a mayor and as a councillor, that when they put in a supervised injection site or consumption site, the consultation will take place. On the other hand, as a health issue, in any other health organization, there is no advisory committee as the Senate is asking for. I would like to ask the

member to listen to the hon. minister and support the bill's amendments, to get Surrey on the right track.

**Ms. Dianne L. Watts:**

Madam Speaker, with all due respect to my colleague from Surrey—Newton, it is not just a Surrey—Whalley issue. There are many of these young kids who have died in South Surrey. In terms of setting up the precinct, where we have detox, the sobering centre, adjacent to the hospital we have transitional housing, all of those things were purposely done around the addictions precinct for assistance. If the consumption site is located there, if that is what the community wants, then it has the supports.

However, I would say again that the homeless shelter does have an advisory group. It has had an advisory group since its inception, and the members of the group work together resolving the issues of the community. Every single homeless shelter has one, and that was put in place to alleviate the issues of the community.

**Mr. Kevin Waugh (Saskatoon—Grasswood, CPC):**

Madam Speaker, being that my colleague was a former mayor of Surrey for almost a decade, I want to ask her about consultations. Every community in this country knows the dangers with opiates and fentanyl, but they do not know how long the consultations are, or how to go about the consultations. Being that she is a former mayor of Surrey, I want to know her experience on the consultation process, how long it should take, and what some of the topics are that need to be discussed in every community in this country.

**Ms. Dianne L. Watts:**

Madam Speaker, I appreciate that question, because as I stated earlier, as I read a whole list of names, there are strategies around the supports for those individuals who will use a consumption site and who are street-entrenched. We have young kids, like those whose names I read off the list, going to a party, not knowing what they are taking, and they end up dead. I cannot imagine that mother losing her two children in their early twenties, within 20 minutes of each other. That is a totally different strategy, and the community has to come together. There are mothers and fathers and children. We have to deal with this as a community. We have to look at a multi-faceted approach, a holistic approach. It is not just about a consumption site. It is also about treatment, about education. The Conservatives called for a national strategy to educate parents and young kids as to what exactly is going on. We have to have those conversations. If they ram stuff into a community, they will not get the buy-in; they will not get the support. We all have to be part of the solution, because it is multi-faceted.