## **The LeDain Report**

## Drugs and the law

For the past year and a half, a national commission has been studying the drug problem in Canada. Established because of mounting public concern over the increased use of drugs, particularly marijuana, by young people, it is to recommend ways and means by which the Federal Government can act, alone or with other levels of government "in the reduction of the dimensions of the problems involved in such use."

Known to the public as the LeDain Commission (for its chairman), the "Commission of Inquiry into the Non-Medical Use of Drugs" has already produced an interim report.

Among other things, it recommends that simple possession of restricted drugs—cannabis, LSD, heroin and others—continue to be considered an offence but that the penalty be only a fine, not a jail term. (This is now the practice for first offenders before Canadian courts.)

Health Minister John Munro said that the Government intends to consider this recommendation, at least for cannabis (marijuana and hashish). On other recommendations, however, the Minister said: "This Government believes that current medical and sociological information does not justify all encompassing changes and will await the completion of the Commission's first report with interest."

The Commission had noted the lack of information on the subject and recommended increasing "reliable information to make sound social policy decisions and wise personal choices in relation to non-medical drug use."

The final report is due in 1971, two years after the Commission was created. Gerald LeDain, Dean of Law at Osgoode Hall, Toronto, is Chairman. The membership of the Commission is broad-based and also includes a criminologist, a sociologist, a psychiatrist, a social worker, and an economist (serving as the executive secretary).

In exercise of the mandate to research the extent of non-medical usage, the motivation and effects of use, and the current state of medical knowledge about drugs, the Commission has already travelled coast to coast twice for hearings and is about to set off again.

Among its terms of reference are directives to report on the current state of medical knowledge and on the effect of drugs and the social, economic, educational, and philosophical factors involved in their use.

The terms make specific mention of the sedative, stimulant, tranquilizing and hallucinogenic drugs. The commissioners decided that their inquiry should not be restricted only to those drugs. They reported their understanding of "drug" as: "any substance that by its chemical nature alters structure of function in the living organism."

This gives them sufficient latitude in covering the subject to bring in even alcohol and tobacco for examination as "psychotropic" drugs. For the interim report, however, the commissioners decided that "in terms of short-term public policy decisions, the drugs which call for special comment at this time are cannabis, and other hallucinogens (particularly LSD), and the amphetamines."

Their purpose with the present volume is to set out the issues and applicable principles and to stimulate public discussion; the final report is to be concerned with the detailed application of these principles to the development of a satisfactory system of social response.

Noting "it would be idle to seek recommendations for governmental action if a consideration of law were to be excluded," the commissioners include international, constitutional, and criminal law in the establishment of issues and principles.

The Report has drawn heavily on the literature and experience of other countries, particularly the United States. In recent months members of the Commission have visited the United States, France, Sweden, Switzerland, England, the Netherlands, Morocco and other countries.

In the United States, the majority of persons studied who had been dependent on opiate narcotics, had previous experience with cannabis (and were usually heavy users of alcohol). In Canada this has less often been the pattern, and it appears that heavy use of sedatives (alcohol and barbiturates) rather than cannabis has most frequently preceded heroin use. It has been suggested that the Canadian pattern is becoming more similar to the United States experience.

Overall, the most potent factor in the rapid spread of cannabis use is probably the direct influence of one individual or another reporting first-hand the experience as interesting, pleasant and harmless. There is no doubt as well that cannabis experimentation has been encouraged by the amount of

public attention paid to the drug controversy and by the increasing volume of literature praising the drug effects and minimizing its hazards. The popular music industry has played a major role in encouraging drug use in general and cannabis use in particular through the lyrics and other aspects of the records it has marketed. (It is reasonable to assert that this industry has, in fact, provided an extensive advertising campaign on behalf of drugs). The underground press has also guite openly advocated and encouraged drug use and provided information on the characteristics of specific drugs. The overall message was, of course, reinforced by the presence of a culture that accepts and indeed encourages the use of drugs to influence mood and provide pleasure. In some circles,

marijuana seems to have had a particular appropriateness to the general mood of students and young people. In our conversations with them they have frequently contrasted marijuana and alcohol effects to describe the former as a drug of peace, a drug that reduces tendencies to aggression, while suggesting that the latter drug produces hostile, aggressive behavior. Thus marijuana is seen as particularly appropriate to a generation that emphasizes peace and is, in many ways, anti-competitive.

From the Interim Report of the Commission of Inquiry into the Non-Medical Use of Drugs, available at Can. \$2.00 from the Queen's Printer for Canada, Ottawa.