

them are now undergoing a methadone treatment program through private physicians. If those physicians are to be denied the opportunity to continue to prescribe methadone except in specialized clinics, many of those on parole who are using methadone as a substitute drug for heroin will get into difficulties.

The minister talks in terms of wanting to confine the prescription of amphetamines and other drugs that fall within that class to certain medical uses. I think that is a good move. We have known for a long time that probably the people who have contributed most in a total sense to the thinking of society that you can cure anything with a pill have been those in the medical profession who have dispensed pills, potions and lotions without full knowledge of their effects. The attempt now to confine this is a good measure. I hope doctors will pay heed to it. I hope also that drug manufacturers will be required to provide more information on the side effects of drugs that are developed and used for such purposes.

It seems to me that the minister's statement does not really cope with the underlying reason why people want to drop out of society, why they want to use drugs, why they want to create a false feeling within themselves, why they want to escape from the realities of the world. This action is simply a small patchwork program in light of the over-all problem. It is necessary to engage in an educational program, to try to explain and to get people to understand what the realities of life are all about, and not just approach the problem by using one drug as a substitute for the other.

I wish that the minister had taken the course in this statement—it is long overdue—of rejecting the proposal in the LeDain Commission report which suggests that we give a semi-legal status to heroin so that as a last resort, whether it be in specialized clinics or elsewhere, a heroin addict who fails to agree with the methadone treatment program can get heroin itself. That recommendation should have been rejected by the minister as soon as it was made. The absence of any comment in this document on this matter means two things. The moment the LeDain Commission recommendation was made with respect to classifying or giving heroin some sort of semi-legal status, it was applauded by every heroin addict in the country because they foresaw the prospect of being able, in time of short supply of heroin, to proceed to treatment centres and get free fixes to carry them over a period of time until the supply increases.

I know that you are getting apprehensive about the time I am taking, Mr. Speaker, but to me this is an extremely important matter which was left out of the statement and should have been in it. I will only be a moment more, if I may.

The other point is that a number of young people in our society are on the borderline; they are unsure whether they should try heroin, having used other drugs. When the LeDain commission report on treatment came out and gave some sanction in its recommendations to the use of heroin, a number of young people in this nation in the drug scene said: This is fine, heroin is O.K., it has the endorsement of the LeDain commission.

Some addicts in the city of Vancouver whom I know, people in the addict world and people trying to do some-

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thing about it, know that a number of youngsters applauded that recommendation. They were unable to draw the distinction between the commission report and government policy and began trying heroin themselves because it had some sort of semi-legal sanction. Every day the minister delays in rejecting that concept he is contributing to the growing population of youngsters who are trying heroin. I wish the minister would abandon this insignificant patchwork program and out of his conscience do something worth while for a change instead of announcing such piddling measures.

• (1130)

[*Translation*]

**Mr. André Fortin (Lotbinière):** Mr. Speaker, I would like first of all to thank the Minister of National Health and Welfare (Mr. Munro) for the measures announced today to control the abuse of methadone and amphetamines.

We are particularly happy about the valuable and essential co-operation of medical associations. Without their powerful participation, the announcement made today by the minister would only be empty words.

That measure announced today will have the effect of restraining the "official" availability of those particular drugs, but as the minister himself recognized it, that does not affect at all use of those drugs by addicts who get them from illicit sources. There lies the main weakness of governmental action with regard to the control of the distribution and illegal consumption of various drugs in Canada, specially among the young.

Today's statement, Mr. Speaker, should not make us forget what the federal government did in that field.

Indeed, an official OPTAT inquiry revealed the following:

A comparison of results obtained in 1969 and 1971 shows that:

Consumption of barbiturates has tripled and that of hallucinogens other than LSD almost tripled:

Consumption of marijuana and LSD had more than doubled;

It has increased by a third in the case of stimulants and tranquilizers;

It has increased by almost one tenth in the case of alcohol and tobacco;

the proportion of a glue consumers was the same in 1971 as in 1969.

Consequently, government action in that sphere is still pending, and statements in fact merely constitute a control of official prescriptions but in no way—which is more serious—do they affect illegal consumption.

In closing, I quote an excerpt taken from an article published in *La Boussole*, of Nicolet, on December 11, 1968:

Here is what Dr. Homes had to say during a panel discussion at which the medical profession was recognized as a leader in the fight against toxicomania:

"Although we usually speak of toxicomania as a disease, it is more specifically the symptom of a disease rooted in social and economic conditions that tend to create dissatisfaction, sadness, conflicts and tensions in the very soul and spirit of human beings.

This means that one of the greatest experts in this field states that the source of that insecurity is ascribable to the social insecurity from which young Canadians are suffering at the present time. Neither the family nor other voluntary organizations dealing with drugs can do any-