## Control of Drug Abuse

offer has been most gratifying and, in fact, almost overwhelming. To date, nearly 500,000 requests for the booklet have been received by my department and more especially by the directorate on the non-medical use of drugs. Because of the large volume of requests, it is taking my staff longer than they had first anticipated to provide copies of the booklet to all who have requested it. I ask the public to be patient. Everyone who requests a copy of this useful publication will be sent one. This booklet is but the first in a continuing series of factual presentations on various aspects of drug abuse, aimed at providing the facts on this serious problem to Canadians as part of our over-all drug education program.

Mr. P. B. Rynard (Simcoe North): Mr. Speaker, we cannot help but welcome the statement by the Minister of National Health and Welfare (Mr. Munro) that his department is deeply concerned about the non-medical use of drugs and the effects on the individual and society.

One of the disturbing things to be noted is that the drug methadone at one time was the cure-all for heroin addicts; addicts were put on this drug so they could be weaned from heroin which was habit-forming. Today we find that methadone is also habit-forming. We wonder in so many cases whether drugs that are being used today which we feel are safe and not habit-forming will turn up tomorrow on the list of those that are habit-forming. The minister will realize that talwin is a drug which could be bought a short time ago without prescription and now is on the prescription list. It was supposed to be a non-habit forming drug. So the story goes.

I wonder whether on the whole we are providing laboratory and research facilities adequate to test the effect of these drugs on human beings. People I have spoken to in this field say that laboratory and research facilities are totally inadequate to test these drugs to determine whether they are or are not habit-forming. I believe the minister realizes this is the situation. He has stated on a number of occasions that more facilities should be provided. However, they are being provided very slowly. I believe this is a very important point.

In bringing these drugs under control I wonder how the minister intends to look after the situation in the Northwest Territories, the Yukon Territory or in other huge and sparsely settled areas which are served by one doctor or even paramedical personnel. I wonder how the people in these areas will be treated and what provisions have been made for treating them. Are they to be brought out to clinics and treated at the expense of the government? The minister did not make this clear.

I also want to dwell for a moment on the fact that the minister has not said very much about the situation of younger people in respect of the use of drugs. I think this is the key to the whole problem. They are growing up in an age in which drugs are thought to be the answer to almost everything and to all problems. I believe it is paramount today that we educate our younger generation in regard to the fact that any drug can be harmful to the human individual. I think this should be part and parcel of the work the minister should carry on in the field of food and drugs. People should be educated that drugs are not the answer to many social problems.

I congratulate the minister on this step and suggest to him that we should go further and provide facilities for people living in outlying territories. We should provide laboratory facilities for the treatment of people when they are referred to a lab by a doctor for testing in order to see what the results are, so that more research may be carried on in this field and so that we will have the answers more quickly and not after we find that people are addicts.

Mr. Frank Howard (Skeena): Mr. Speaker, I suppose one could start very easily by classifying this statement as a pretty insignificant response to a rather massive problem which has existed in this country for some years and is increasing in intensity as each month goes by. I rather regret the fact that the minister, after examination of the first report of the Le Dain Commission and the treatment report which came out a short while ago, was not able to do better than this in terms of attempting to cope with the non-medical or abusive use of drugs.

• (1120)

Part of the approach the minister has taken relates to methadone and the dispensing by prescription of methadone as a substitute drug particularly for heroin addicts. Under the proposal the minister will be limiting the opportunity of physicians to dispense and prescribe methadone to specialized clinics. The first thing wrong with that approach is that we will still be using a chemical that will create or help to create a euphoric or semieuphoric condition in the addict himself. We will not be coping whatever in any way with the internal emotional difficulties of addicts that make them addicts in the first place. This is just a stopgap measure. All that will happen, as the minister knows because there has been abuse in the use of methadone itself, is that we will create, in addition to a group of heroin addicts, a group of methadone addicts either in substitution or in addition thereto.

It has been a conscious policy of the Parole Board in issuing parole to addicts who are in penitentiaries to try to place them on parole away from the big, urban metropolitan centres, away from the street, away from the area where drugs are easily available, and parole them to out of the way or smaller communities. If we are going to follow that practice, and I think the Parole Board is, then the minister by this program is denying those heroin addicts who are paroled to out of the way or smaller communities what benefits may arise from a methadone treatment program. He is confining the prescribing of methadone to physicians who are associated with specialized clinics, and the prospects are that the specialized clinics will be in cities like Toronto, Vancouver and Montreal.

Mr. Munro: No, hospitals.

Mr. Howard (Skeena): The minister shakes his head negatively, but he made no effort to indicate in his statement where these specialized clinics will be and whether they will be extended. If the minister had thought that point through and included it in his statement, perhaps we would not have to make these comments. I still submit, however, that many heroin addicts are on parole to smaller communities and rural areas in the nation, and this is one of the conditions in granting them parole. Many of

[Mr. Munro.]