



Harm Reduction  
Nurses Association

Association des  
infirmiers et infirmières  
en réduction des méfaits

## Responding to BC's appeal of the Bill 34 temporary injunction

*"It is apparent that public consumption and consuming drugs in the company of others is oftentimes the safest, healthiest, and/or only available option for an individual, given a dire lack of supervised consumption services, indoor locations to consume drugs, and housing." BC Supreme Court Chief Justice Hinkson*

There is no doubt that Bill 34, the [Restricting Public Consumption of Illegal Substances Act](#), posed immense potential to cause harm, even death. As nurses who work in harm reduction, community health centres, street outreach, treatment programs, and hospitals, we see the harms of displacement and criminalization daily. Using police and bylaw officers to push people into the margins and out of sight, forcing covert use, is cruel and violent. When there are no actual alternatives for people to go to, these acts of violence can lead to [death and irreparable harm](#).

*"Seeing someone using drugs in public is not comfortable, but is that a risk to me? Is that a risk to my safety because I see that? And if we're going to respond ... to our vulnerable community members who are at risk, then wouldn't it be better to have a public response that is going to help them?" BC Chief Coroner, Lisa Lapointe*

It's [already illegal](#) to use drugs around schools, splashpads, and playgrounds. So, to all of the politicians who are using this opportunity to stoke fear and hate in an effort to gain votes, we see you. We see the misinformation you are choosing to perpetuate. The only thing you have accomplished in this rage-farming is more stigma for BC's most vulnerable.

Yesterday, we learned that BC surpassed yet another [grim milestone](#) in the nearly eight-year public health emergency of unregulated drug poisonings deaths. 2,511 preventable deaths. 472 of those deaths were outside in an alleyway, parking lot, often in hiding. Homelessness is [up in BC](#), by 32%. When people use in public places, it's because they don't want to die. They know the drug supply is contaminated with deadly adulterants and their best chance of survival is to use where someone may find them.

*"profoundly concerning that we can regulate alcohol use, we can regulate tobacco use, but apparently the court has told us that we cannot regulate hard drug use in our province." BC Premier David Eby*

When former civil rights lawyer, Premier David Eby, says that he is concerned because he can't regulate "[hard drugs](#)" the way that he can regulate alcohol and tobacco use, we feel the need to offer clarification. He could regulate all drugs. He and his government could follow the recommendations of the [BC Death Review Panel](#) to regulate "hard drugs" which in turn would allow him to address the drivers of this prolonged public health emergency and prevent further deaths. If government did that, government could also pursue its stated policy goals, and start regulating the use of "hard drugs" in the same way that we currently regulate alcohol use, and tobacco use.

In fact, there are so many alternatives to criminalization. People in BC need housing. They need access to overdose prevention services and naloxone. They need drug checking services. They need groups like the [Drug User Liberation Front](#) (DULF) (who now face criminal charges for their life-saving work). Most importantly, they need a regulated drug supply. By upholding the iron law of prohibition, every level of government relinquishes control over the drug supply. It is tacitly approving the innumerable deaths of people who use drugs. We at the HRNA intend to continue fighting to bring evidence and common sense to drug policy, and we hope more of you will join us in the fight for justice. This is bigger than Bill 34.