

Minister's Statements and Speeches

PUBLIC BILLS

THE DANGEROUS DRUGS (AMENDMENT) BILL

(NO. XV OF 2022)

(15.11.2022)

The Vice-Prime Minister, Minister of Education, Tertiary Education, Science and Technology (Mrs L. D. Dookun-Luchoomun): Mr Speaker, Sir, allow me at the very start to congratulate my colleague, the hon. Minister of Health and Wellness, hon. Dr. Jagutpal for taking this major step forward for the modernising of the healthcare through the proposed amendments to the Dangerous Drugs Act. We all agree, Mr Speaker, Sir, that such amendments are more than timely. For the past few days, this Dangerous Drugs (Amendment) Bill has been at the centre of debates, and rightly so.

Mr Speaker, Sir, there are, in fact, two very important aspects of the Bill on which I will intervene –

- (1) the non-prosecution of drug users having been found in possession of drugs for their personal consumption,
- (2) and the other the legalisation of medicinal cannabis.

The subject being what it is, Mr Speaker, Sir, I am glad to note that it carries no major controversies and there is consensus on both sides of the House on these issues. A quick survey reaction in the Press and the social media also clearly reflects this consensual response.

Mr Speaker, Sir, if we are not totally speaking at cross purposes, if we are not really on opposite sides of the barricades, this is probably because the time has come for these changes to happen and we need to rise up to the new reality that this Bill responds to.

Mr Speaker, Sir, one must concede that the global picture on the drug issue is alarming. Across the world, it is a matter that raises huge concerns with global figures indicating that in 2020, 284 million people aged between 15 to 64 use drugs. To understand the enormity of the situation, Mr Speaker, Sir, let me add that this represents a 26% increase over the previous decade. Further evidence from UNODC shows that young people are using drugs with use level today in many countries being higher than that of the previous generation.

On the other hand, in Africa, people under 35 represent a majority of those being treated for drug use disorders. In our own country, Mr Speaker, Sir, in Mauritius, in 2021, there were 927 persons in the age group of 15 to 39 who were admitted to hospitals with severe drug related conditions. Mr Speaker, Sir, in such an environment, we cannot sit back and watch impassively.

M. le président, le Premier ministre a démontré sa détermination de combattre le fléau de la drogue à Maurice. Il a donné à la force policière les moyens, les outils, même des outils technologiques, afin qu'elle puisse mieux contrer le trafic de drogue. Les chiffres, M. le président, sont éloquentes. La quantité de drogues saisie et la valeur marchande de plusieurs milliards démontrent l'ampleur du trafic de drogues chez nous et il faut le savoir, M. le président, notre combat sera sans relâche.

M. le président, je ferai référence qu'à la période de janvier à novembre 2022 : 138 kilos de cannabis saisis ; 47 kilos d'héroïne ; 15.7 kilos de *synthetic cannabinoids* ; 46 kilos de hachisch, 307 777 tablettes de sédatifs. M. le président, la police agit avec fermeté. Les saisies de drogues sont la preuve. Mais ce qui nous étonne, M. le président, c'est que ces saisies de drogues ne semblent point décourager ces trafiquants ; ces trafiquants qui ont probablement opéré avec impunité pendant très longtemps. Et ce qui effraie le plus, M. le président, c'est d'imaginer ce qui serait passé si jamais cette drogue aurait atterri sur le marché. Combien de vies auraient été ruinées par cette drogue ? Combien de souffrances cela aurait engendré ?

M. le président, un jeune qui tombe dans le fléau de la drogue à un avenir brisé, met sa vie en péril et fait souffrir ses proches et sa famille. Il est de notre devoir de les protéger. Et là, je salue le courage et la détermination du Premier ministre qui a déclaré guerre aux trafiquants mais qui n'a pas lésiné sur les moyens à être adoptés. Il a aussi démontré son courage et rien ne lui fera fléchir dans sa mission.

M. le président, un jeune drogué souvent subi des effets de ce qu'on appelle les *withdrawal symptoms*, les complexes, les problèmes liés au sevrage, et cela peut être extrêmement dur.

This can take very severe forms, Mr Speaker, Sir, ranging from loss of appetite, severe abdominal pain, hallucinations, emotional disorders, headache, insomnia, shivering, severe pain, and drug users often desperate, must at all cost have recourse to more drugs to get some relief. This often leads them to steal, to rob and even to attack people so as to get the money

for the drug, even their parents are not spared. There are several cases where parents have themselves been subjected to violence and physical assaults. *Je pense, M. le président, à ces mères de famille et à leur désarroi face à la souffrance de leur enfant.*

It is thus clear, Mr Speaker, Sir, that the addict is himself a victim who needs support and compassion and this is why the National Survey Among People Who Use Drugs carried out in Mauritius in December 2021 by the National Drug Secretariat recommended, and I quote –

“Education and policy should be enhanced to ensure an effective human rights based criminal justice response”

Human rights based criminal justice, Mr Speaker, Sir, to drug problems and focus more on harm reduction rather than on punishment.

Je voudrais bien, ici, M. le président, me référer à la clause IIIA, section 59A de ce projet de loi, *the Non-Prosecution and Rehabilitation of Drug Users*, la partie ayant trait à la mise sur pied du *Drug Users Administrative Panel*, and *this is indeed highly relevant and of paramount importance, Mr Speaker, Sir*. Sujet, non seulement, intéressant et à propos mais également primordial. Le *DUAP*, *as we have stated it earlier, may direct the user to undergo rehabilitation, education, counselling, treatment, aftercare, social reintegration, and any other therapy. His progress will be monitored and all necessary measures will be taken to assist the drug user to overcome his addiction.*

M. le président, ces jeunes ont besoin de soutien, d'aide et d'encadrement. Très souvent ils n'arrivent pas à trouver de l'emploi et ainsi ils s'engouffrent davantage dans le désespoir et dans le monde obscur de la drogue. C'est une situation vraiment navrante et non salvatrice pour certains surtout qui ont reconnu avoir fait des erreurs de jeunesse. L'amendement est donc très bien accueilli car il apporte deux possibilités aux jeunes. Premièrement, le traitement du jeune drogué lui permettant de se faire soigner et lui donnant la possibilité de surmonter sa dépendance avec l'aide des professionnels de la santé. Et deuxièmement, la chose intéressante, c'est que le jeune ne sera pas obligé de mettre fin soit à sa vie scolaire ou professionnelle car si on arrive à le récupérer, la réinsertion sera possible et il pourra mener une vie normale.

M. le président, très souvent les jeunes qui se font attraper disent qu'ils ont commencé à prendre de la drogue par curiosité *or for fun* ou encore pour le *showboating* auprès de leurs camarades. L'amendement apporté leur évitera dans leur cas la prosécution ou encore la

prison et permettra leur réhabilitation et réinsertion. M. le président, c'est pour cela que je pense que ce projet de loi est rempli de compassion.

M. le président, je ne saurais compléter ce volet de mon intervention sans que je m'attarde brièvement sur l'aspect éducatif de la chose. In effect, such an important issue demands that we focus also on preventive means. Our attention should accordingly not be deflected from devoting resources to sustain our prevention efforts.

Mr Speaker, Sir, the House will recall that the National Drug Control Master Plan 2019-2023 has as strategic objective 2.2 the following –

“To enhance, in line with national and international standards, the quality, availability and accessibility of drug use prevention programmes in all educational (primary, secondary and tertiary) and vocational institutions with a view to empowering students with drug resilience skills”

It is in accordance with this principle that in the education sector we have adopted a drug prevention policy and a vision of zero tolerance so as to have learners imbued with drug resilience skills and accordingly drug-free schools, Mr Speaker, Sir, as strategy focuses on a three-pronged action pertaining to prevention, education and sensitisation.

My Ministry, as a member of the National Drug Observatory, set up with a view to monitoring and assessing the drug situation, is devising the appropriate strategies to deal effectively with the problem of drug abuse. We are doing precisely that in a number of ways –

- Inclusion of a range of concepts related to drug use prevention in subjects taught at school.
- The mounting of an avant-gardist educational programme, known as the get connected for grade 8 students that aim to delay.
- Tobacco and alcohol initiation among adolescents, itself an entry route into the world of drugs.
- We also have now the rebound programme, a drug use prevention programme for Grade 10 students. It supports young people in reflective decision-making. This includes developing critical attitudes towards peer beliefs, media models as well as risk competent regarding alcohol and other drugs.

Mr Speaker, Sir, let me just mention that from 2015 to 2022, a total of 2,253 sensitisation sessions have been carried out in active collaboration with a number of local and international agencies, especially the Ministry of Health and the Police Department.

On the other hand, Mr Speaker, Sir, the National Education Counselling Service of my Ministry has set up Student Care and Counselling Desks in our schools. And we all know that a well-balanced mind is always well-armed to tackle drug cravings. Mr Speaker, Sir, we are helping our children.

The second amendment I wish to comment upon relates to the legalisation of medical cannabis. Without going into the technicalities of the subject, it is understood that medical cannabis is extremely effective in pain management, in the treatment of multiple sclerosis, epilepsy, terminal cases of diseases that cannot be treated, and for people undergoing chemotherapy. And I am glad to note that provision has also been made to include other therapeutic conditions as may be authorised by the technical committee.

Mr Speaker, Sir, the bottom line is that the medicinal use of cannabis applies specifically to patients whose clinical needs cannot be met by conventional medicine, where recourse is resorted to it only when established treatment options have all failed. It is used, as I have said earlier, for terminally ill patients who have exhausted all other medical options.

Most countries in the world, Mr Speaker, Sir, that have shown results that have legalised medicinal use of cannabis, have shown that the results are highly progressive and positive. This explains why the use of medical cannabis is evolving and global demand for medicinal cannabis continues to increase as proved by more than 50 countries that have legalised it.

Mr Speaker, Sir, as stated before by others, the closer to us in time, there has been the landmark decision of the World Health Organisation to remove cannabis and resin from the Schedule IV of the 1961 UN Single Convention on Narcotic Drugs. It is ceased to be regarded as having particularly dangerous properties. But, side by side, it was also agreed that cannabis does have therapeutic value; but it is still regarded as highly addictive and liable to abuse. Just by word, Mr Speaker, Sir, we are speaking exclusively here of medicinal cannabis and not recreational cannabis.

In the wake of the recommendations of the United Nations Commission on Narcotic Drugs as well as those formulated by the local Commission of Inquiry on Drug Trafficking set up in 2015, Government, through the Ministry of Health and Wellness, had set up the Technical

Committee on Medicinal Cannabis under the Chairpersonship of the Executive Director of the MRIC. What is important to highlight is that the Technical Committee has examined all the aspects related to the use of cannabis for medical purposes, including the therapeutic and legal implications.

Interestingly, Mr Speaker, Sir, but not surprisingly, a significant number of positive responses came from both the health professionals and patients who had prior treatment with cannabis-based medicinal products overseas. I believe, Mr Speaker, Sir, that enough ground has been covered for us to now converge towards accepting the mainstreaming of medicinal cannabis but we still need safeguards. Certainly this Bill is not opening doors for large scale utilisation or even abuse of medicinal cannabis. The Bill accordingly makes adequate provisions for the setting up of relevant safeguards. I refer to some of these, Mr Speaker, Sir. Clause 28C of part 2 (a), the Bill makes provision for the setting up in every regional hospital of the Medicinal Cannabis Therapeutic Committee chaired by –

“(a) a Regional Health Director,

(b) 2 Government authorised specialists; and

(c) an authorised pharmacist.” as member and they also include

social workers whenever required.

It is this committee that shall exclusively determine at the specific request of authorised specialist whether a patient should be provided treatment with medicinal cannabis or not.

Clause 28D specifies –

“No person, other than an authorised specialist, shall make a request...”

Another safeguard, Mr Speaker, Sir, is at Clause 28B. that makes it unlawful for any person to use or import medical cannabis unless he is so authorized and also, Mr Speaker, Sir, the prescription will be time-bound with a renewable period, not exceeding three months as indicated by Clause 28F.

Mr Speaker, Sir, there is another dimension to this Bill that I view as well-deserving of consideration of my colleague and his team and they have given consideration to it. At Clause 28A, sub-section (a), both the authorised pharmacist and the authorised specialist are expected to have successfully completed a training course as approved by the Ministry on the handling and dispensing of the therapeutic use of medicinal cannabis respectively. It is quite proper and vital. Internationally, those regimes that have legalised medicinal cannabis have

had to provide such training to develop the right attitudes, stoke up dispensers self-confidence, boast at their knowledge and ensure patient's safety with respect to medical-cannabis use.

As we can see, Mr Speaker, Sir, this whole process has been well thought through, including the holding of a register of medicinal cannabis and where it can be dispensed and the conditionality through its importance. *Qu'on se rassure, le tout sera fait sous les conditions strictes au niveau de l'importation tout comme la distribution.* There is nothing aleatory about it but there is need to tread cautiously. Although we know that few countries like Malta, Canada, Uruguay and many others have legalised the commercialisation of creative cannabis, since according to them a repressive policy has yielded no results, we also know that certain governments have agreed to come with new legislation to decriminalise recreative cannabis. Among other reasons of the patrol, word is that the Police Department and legal services should concentrate on other important matters but I believe, Mr Speaker, Sir, that we cannot, at this stage, take any further risk.

Mr Speaker, Sir, unless I am mistaken, at one point in his intervention, the hon. Leader of the Opposition, suggested that we should consider the decriminalising and depenalising of cannabis for recreative purposes. What he stated is that we should give a thought to it. I, for one, would prefer to err on the side of caution. Yes, there are a few countries that have decided to take that route for several reasons and it appears that they have done so in the belief that repression has not been of much help in the country but I still feel that we should tread cautiously. The jury is still out where the potential benefits are concerned.

On the other hand, the arguments against recreative cannabis are potent. Dr. Husnoo highlighted many potential health risks. It is so easy, Mr Speaker, Sir, for the youth to get tempted to try, just through curiosity and then they get trapped in this *cycle infernal* and I am deeply worried about the havoc it can cause to our adolescents. Cannabis is potentially a risk and the threat of addiction looms very large on the horizon and we all know the impact addiction can have on family, social and personal life as well. It is the health and well-being of the future generations that we will be putting in jeopardy and I am sure that this will not rest easy with anyone of us here.

Mr Speaker, Sir, I would rather say, let's take things one at a time. Let's not rush in where angels fear to tread. Mr Speaker, Sir, I am a bit surprised by the queer scenario that is being played here in this country. Day in day out, we have raids undertaken; huge amount of

drugs being seized and people being detained but what do we see and hear, Mr Speaker, Sir? Instead of congratulating institutions like the police force for the massive scale of drugs seizures, instead of recognising the laudable efforts carried out to stem the drug tide, instead of commending the police force for their courage, some people think of nothing better than to say that the police force is out planting, incriminating evidence to frame people. *M. le président, c'est vraiment incroyable, irresponsable. Incroyable, M. le président ! C'est comme si tout ce qui se fait n'est pas bon et qu'on donne même l'impression que nous sommes en train de pointer du doigt les institutions et on ne réalise même pas le risque, le dégât que cela peut causer.*

Mr Speaker, Sir, can we for all our efforts, wake people who pretend to sleep or make people listen; those who pretend to be deaf? I genuinely believe, Mr Speaker, Sir, that this whole issue about drugs is one that we need to combat together. It has to be a collective, collaborative endeavour above party politics. The fate of our children and youth is at stake here and we should be alive to this fact. Mr Speaker, Sir, the Prime Minister has clearly shown what is the direction that he is taking and how much he cares for our children, for our youth and how the actions that he has been taking are meant for us, to get rid of this scourge.

Mr Speaker, Sir, let me now, once again congratulate my colleague, *le ministre qui a, à travers ce projet de loi, fait preuve de beaucoup de cœur, de compassion envers les jeunes victimes de ce fléau et qui auront maintenant à travers ce projet de loi, le soutien et l'encadrement voulu qui permettra leur réhabilitation et leur réinsertion dans la société. Aujourd'hui, avec l'amendement de ce projet de loi, c'est une étape très importante pour le pays. Je suis soulagé que ces jeunes ne seront pas poursuivis mais encadrés par les professionnels pour traiter ceux et celles qui sont victimes de la drogue.*

This Bill before the House, Mr Speaker, Sir, demonstrates clearly how Government in general and the Ministry of Health and Wellness in particular intend to take the bull by the horns. The good thing about this Bill is that it has not been a holding statement with blanks filled in for quick issue. Rather, it has been a well-thought through and seriously lays down the blueprint for a set of highly innovative action.

Le cannabis médical a effectivement fait des *success stories* dans le monde. On peut lire sur le site internet de l'Organisation mondiale de la Santé que plusieurs études ont démontré les effets thérapeutiques du cannabis médical dans les stades avancés du maladie et je dois ajouter que la presse locale qualifie cet amendement de très grande avancée pour le

pays ; une avancée majeure et importante dans le développement scientifique mais aussi évolutif de la race humaine.

Je me permets, M. le président, de faire un constat; je suis consciente que la majorité des membres de la Chambre ne dira pas le contraire vu le nombre de patients qui quittent le pays pour l'étranger pour les opérations et les traitements poussés. J'espère qu'avec l'avènement de ces amendements au *Dangerous Drugs Act*, les patients qui se font soigner ailleurs et qui ont trouvé là-bas la possibilité d'utiliser le cannabis médical pourront une fois de retour au pays, avoir le même service.

M. le président, encore une fois je félicite le ministre, et je vous remercie.