

## Ontario Declares War On The Poor



The Ontario government has officially declared war.

Not on crime.

Not on systemic failure.

Not on the conditions creating addiction, homelessness, desperation, untreated trauma, poisoned drug supply, collapsing housing access, or impossible survival costs.

No.

The target appears to be the most vulnerable people in the province.

The recent legislation forcing supervised consumption sites across Ontario to shut down is not healthcare reform.

It is political theatre performed on top of a mass casualty event.

You cannot remove one of the only remaining lifelines and pretend that counts as public safety.

Health Minister Sylvia Jones introduced legislation stating that all supervised consumption sites within 200 metres of schools or daycares must either close or transition into HART hubs. The government presents this as compassionate recovery-focused policy. But the entire proposal collapses the second reality enters the room. If HART hubs are expected to succeed, they would first require immediate housing access, immediate mental health support, immediate addiction treatment access, transportation, continuity of care, staffing, and systems capable of responding within hours instead of months or years. None of those systems currently exist in functional form. You cannot build "recovery" on top of a foundation that is already collapsing underneath people. The housing registry waitlist stretches beyond a decade. Shelters overflow nightly. People line sidewalks outside emergency shelters hoping someone fails to show up so they might get a bed. Treatment access is nowhere near immediate. Unless the province plans to transport people directly into treatment within 24 hours of request, with guaranteed placement and stable housing afterward, the promises surrounding HART hubs are fantasy. Political fantasy. Branding fantasy. Public-relations fantasy. The systems already failing people are now being asked to absorb even more collapse.

## **"Protecting Children"**

Then comes the language about "protecting children." Nobody is opposed to protecting children. That framing itself is dishonest because it implies anybody questioning these closures somehow wants children in danger. What is actually happening is far more cynical. The government is redirecting public frustration away from systemic failure and toward the visible existence of poor people. It is easier politically to remove visible suffering than to solve the conditions producing it. CTS clients are constantly portrayed as reckless threats to public safety despite these sites existing specifically to reduce harm, reduce public drug use, reduce overdose deaths, and connect people to healthcare. Many of the same people being discussed in policy language are parents themselves. Children themselves. Family members. Human beings. The province keeps talking about protecting children while actively making communities more

dangerous.

If the government truly cared about safety, it would invest in housing, healthcare, education, harm reduction, treatment access, and long-term support systems instead of dismantling the few things currently preventing deaths every single day.

And if proximity to schools was supposedly unacceptable from the beginning, why were these sites approved in those locations in the first place?

Suddenly enforcing these rules years later feels less like policy consistency and more like political opportunism.

## **The Manufactured Stereotype**

The HART model also quietly reinforces another harmful myth:  
that homelessness and addiction are interchangeable identities.

They are not.

Not all homeless people use drugs.

Not all drug users are homeless.

Yet public discourse constantly collapses these realities into one giant socially acceptable stereotype.

Headlines describe homeless encampments as “opioid encampments” as if people are pitching tents recreationally instead of surviving systemic collapse outdoors.

It reframes structural failure into personal dysfunction.

Once again:

the blame shifts downward.

Poverty keeps being treated like personal failure because admitting systemic failure would require systemic responsibility.

The implication becomes:

if people simply sought treatment, homelessness would disappear.

That idea is not only inaccurate.

It is insulting.

Addiction treatment cannot magically erase impossible rents, frozen incomes, untreated trauma, inaccessible healthcare, discrimination, lack of supportive housing, or public systems designed around scarcity.

## **The Experts Already Warned Them**

Medical experts, harm reduction workers, frontline staff, public health researchers, and people who actually understand overdose response have repeatedly warned that closing supervised consumption sites will increase deaths.

This is not controversial within harm reduction circles.

It is expected.

Consumption sites save lives every single day.

They reverse overdoses.

They provide healthcare access.

They reduce public consumption.

They connect isolated people to services they otherwise would never reach.

Yet these warnings continue being brushed aside politically.

Maybe the real experts are the people being handed a death sentence by the province they live in.

Albert Einstein once said:

"We cannot solve our problems with the same thinking we used when we created them."

Ontario created this crisis through years of neglect, underfunding, housing collapse, healthcare strain, impossible costs of living, and reactive policymaking.

Now it is escalating the damage by dismantling one of the few remaining emergency responses people still have access to.

Removing survival infrastructure during an overdose crisis is not reform. It is abandonment with a press conference.

Ontario leadership continues prioritizing optics, political pressure, and public discomfort over human survival.

Maybe policymakers would think differently if these were their own loved ones dying alone in alleyways, bathrooms, parks, shelters, and transit stations.

Because despite the language being used publicly, these decisions will not protect communities.

They will destabilize them further.

They will increase visible suffering.

They will increase public deaths.

They will increase desperation.

And the consequences will not stay hidden behind policy language forever.

**Reality:** you cannot criminalize, stigmatize, displace, and neglect people into recovery. You can only push them further toward death.

Lives are on the line. Ontario must do better.