

Experiences implementing and receiving prescribed safer supply in Northern BC



WHAT WE FOUND: STRENGTHS



Northern innovation, relationality, and community champions supported people to get and stay on their prescribed safer supply.

Peer groups played a key role in building awareness and supporting access to prescribed safer supply.

One Indigenous participant said that outreach staff pick up shelter clients every day to take them to the pharmacy: *"They even pick up their medication for them when they're not able to..."*



Relationality was important for knowledge sharing, as many participants learned about prescribed safer supply from their friends and family.

Some community champions went beyond their normal duties to help people get and stay on their prescribed safer supply.

"One day, I forgot to pick up my weekend supply, and [the pharmacist] opened up the pharmacy for me on a Sunday. Just so that I could take that dose so I wouldn't have to start all the way back over."



The [First Nations Virtual Substance Use and Psychiatry Service](#) supported access to prescribed safer supply and felt culturally safe.

WHAT IS PRESCRIBED SAFER SUPPLY?

- In March 2020, the BC government approved prescribed safer supply for doctors and nurse practitioners to prescribe medications to replace toxic street drugs.
- The goal of prescribed safer supply was to reduce risk of overdose and prevent COVID-19 spread.

ABOUT THIS RESEARCH

- This study responds to calls from people with lived/living experience and Indigenous partners in the Northern Region to see if PSS is working in Northern BC
- Interviewed 20 Indigenous people who use drugs living in the Northern region and 4 health planners (managers or people working in policy).
- Partnered with people with lived/living experience of drug use throughout the research process.

Experiences implementing and receiving prescribed safer supply in Northern BC



WHAT WE FOUND: CHALLENGES



BC's prescribed safer supply was not designed for or with Northern residents or health planners, resulting in limited prescribing.

There are few doctors or nurse practitioners willing to prescribe safer supply in Northern BC.

"I think we need more doctors to do it... there's so many people that want on it [safe supply]... And I'm like, 'Sorry, they're not taking anybody.'"



Prescribed safer supply was largely limited to two of the largest communities in Northern BC, creating gaps in safer supply access and care.

People experienced racism, stigma, and criminalization when trying to access prescribed safer supply.

"They seem to think that when we're using safe supply, we're actually using street drugs."

FNHA SERVICES TO SUPPORT SUBSTANCE USE

[Virtual Doctor of the Day](#) – visit our webpage or call 1-855-344-3800 to learn more and book an appointment

[Virtual Substance Use and Psychiatry Service](#) – visit our webpage to learn more

[Available mental health and cultural supports](#)

LEARN MORE

[FNHA Northern region webpage](#) – learn about their work and the communities they serve

[FNHA's Indigenous harm reduction webpage](#) - videos and resources on First Nations perspectives on harm reduction and connecting back to culture

[Toxic drug response research webpage](#)