

# FIRST NATIONS AND THE TOXIC DRUG POISONING CRISIS IN BC

JANUARY - DECEMBER 2022

Harm reduction efforts are saving lives but drug toxicity continues at record high levels affecting First Nation families and communities across BC



## TOXIC DRUG POISONING DEATHS

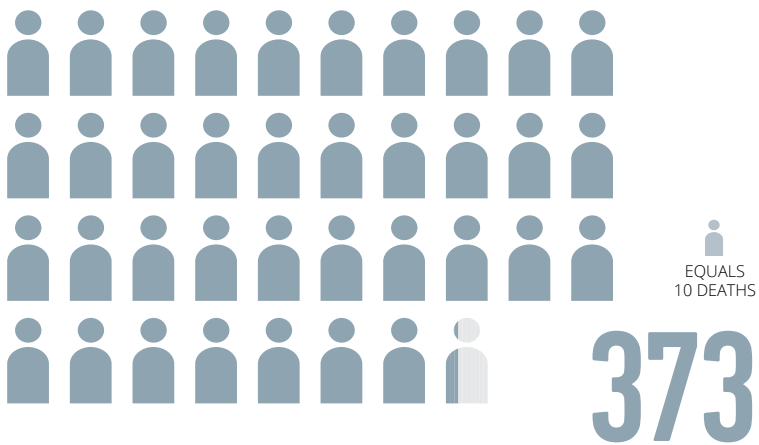
### NUMBER OF PEOPLE WHO DIED OF TOXIC DRUG POISONING

6.3%

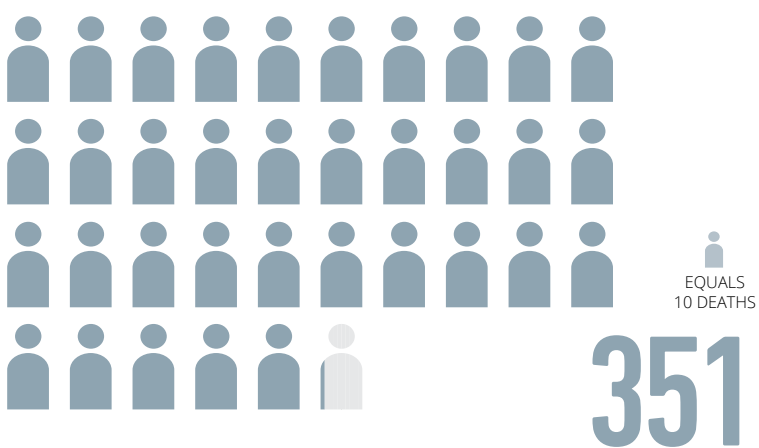


Increase in toxic drug poisoning deaths, compared to the same period in 2021.

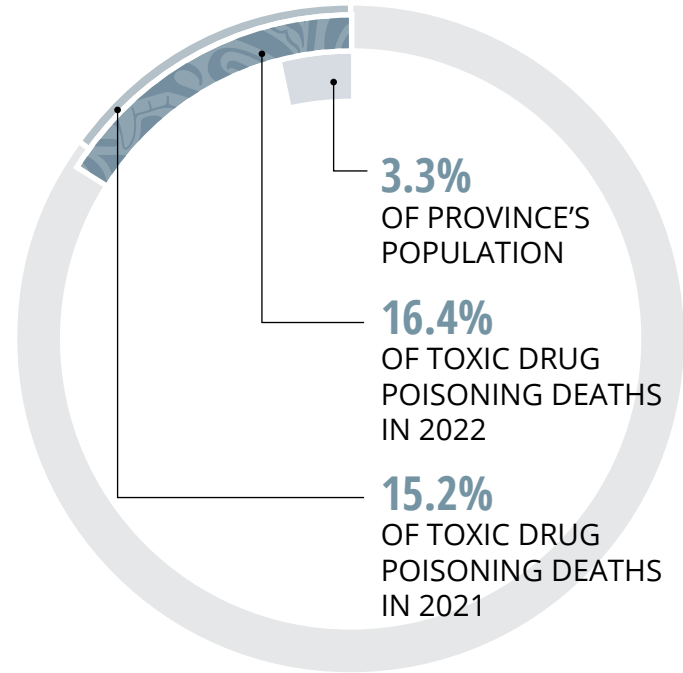
2022



2021



### FIRST NATIONS PEOPLE ARE DISPROPORTIONATELY REPRESENTED IN TOXIC DRUG POISONING DEATHS



### RATE OF TOXIC DRUG POISONING DEATH

5.9 x

First Nations people died at 5.9 times the rate of other BC residents in 2022. This number was 5.4 in 2021

11.2 x

First Nations women died at 11.2 times the rate of other female BC residents in 2022

4.7 x

First Nations men died at 4.7 times the rate of other male BC residents in 2022

### 2022 DEATHS OF FIRST NATIONS PEOPLE BY GENDER



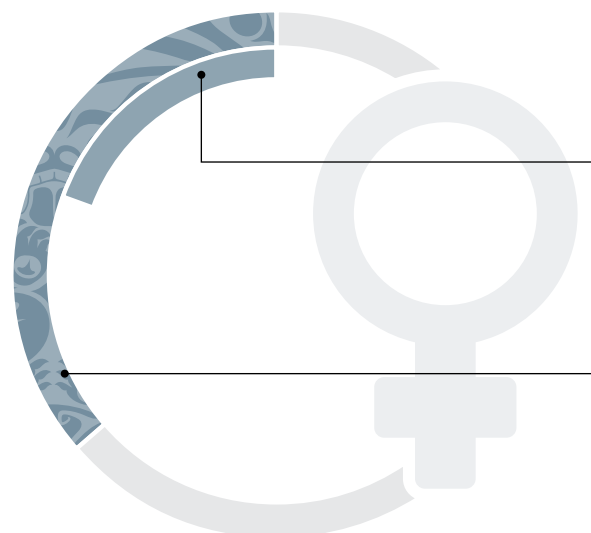
237 MALES



136 FEMALES

Indigenous people who are not recognized as having First Nations status under the Indian Act are not represented in our toxic drug data. Additionally, two-spirit, transgender, non-binary, intersex, and gender diverse people may be identified by the biological sex assigned at birth, and therefore misidentified in the toxic drug data. The FNHA is committed to working with provincial partners towards meaningful, systemic change that will make more inclusive data collection possible. Data are collected as of March 2023 and are subject to change.

### FIRST NATIONS WOMEN EXPERIENCE VERY HIGH RATES OF TOXIC DRUG POISONING DEATH



# ACTIONS TAKEN BY THE FNHA TO PREVENT DRUG POISONING DEATHS

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## PREVENT PEOPLE FROM DYING



- **Distribution of naloxone (nasal spray and injectable):** In 2022, the FNHA dispensed:
  - 3,311 doses of nasal naloxone spray to individuals through community pharmacies, and
  - 8,011 nasal naloxone kits (each kit contains two doses) to 70 First Nations communities and organizations through bulk ordering.
- The FNHA also collaborated with health system partners in their distribution of 8,498 injectable naloxone kits (each kit contains three doses) to 163 First Nations take-home naloxone sites.
- **Harm reduction-related grants:** The FNHA provided 87 harm reduction project grants of up to \$50,000 each to First Nations and Indigenous organizations and 10 “kickstarter” grants of \$2,500 to harm reduction champions.

## KEEP PEOPLE SAFE WHEN USING



- **Not Just Naloxone training:** 597 people completed training sessions in 2022. In these one- and two-day workshops, participants learn how to use naloxone within a wholistic context that also explores the root causes of addiction, racism and prohibition in Canada, decolonizing substance use, and community and individual resilience. There were 17 in-person sessions and 7 virtual sessions.
- **Regional staff:** Expanded toxic drug response capacity with 10 Harm Reduction Educators and 10 Peer Coordinators who are deployed across all five regions in urban hotspots, based on health surveillance data, and five Child and Youth Care Community Coordinators who work to build youth connections and networks in First Nations communities.
- **First Nations Harm Reduction Policy:** The FNHA has worked to implement the five key action areas of the Policy, including provision of First Nations harm reduction services, expansion of substitution therapies, support for safer supply of illicit drugs, and bringing First Nations concerns to BC’s proposed decriminalization of people who use illicit drugs.

## CREATE AN ACCESSIBLE RANGE OF TREATMENT OPTIONS



- **Opioid agonist therapy (OAT):** In 2022, FNHA supported 20 rural and remote First Nations communities to improve access to opioid use disorder OAT treatment, including supporting 26 nurses to undergo (9 completed) the BCCSU: Provincial Opioid Addiction Treatment Services Program (POATSP) Education Training Pathway. Planning is underway at seven other location towards achieving Chief Medical Officer site approval and enabling community nurse prescribing.
- **First Nations Virtual Substance Use and Psychiatry Service:** Psychiatrists and addictions specialists held 1,937 virtual sessions and care coordinators had 826 encounters with First Nations people and their family members to support access to culturally safe care planning, treatment and healing.
- **Indigenous and land-based healing:** Ongoing collaboration with partners and Indigenous service agencies to support and increase access to Indigenous treatment and land-based healing services that are grounded in cultural teachings.
- **First Nations treatment and healing centres:** Ongoing activities to revitalize six existing treatment centers across the province and construct two new healing centres in the Vancouver Coastal and Fraser Salish regions.
- **OAT clinic fees:** 295 people received subsidies to access OAT at medical clinics.

## SUPPORT PEOPLE ON THEIR HEALING JOURNEYS



- **Courageous Conversations Webinar Series and Megaphone Speakers Bureau:** Hosted 13 webinars in which 760 people participated in difficult conversations about substance use and harm reduction. The team has prepared and launched “Courageous Conversations on Substance Use Tool Kit” and “Healing Indigenous Hearts Facilitator Guidebook” as community resources.
- **Indigenous Harm Reduction Community Council:** Convened and consulted a province-wide network of Indigenous people working on Indigenous approaches to harm reduction and sharing knowledge across all regions.
- **Unlocking the Gates:** Supported 733 people during their release from incarceration to address the link between transitioning out of correctional facilities and subsequent toxic drug poisoning events and deaths.
- **Promoting culturally safe services:** Nurtured partnerships with Indigenous service providers and health system partners to address cultural safety and systemic anti-Indigenous racism in health services provided to Indigenous people.