TOXIC DRUG POISONING DEATHS AND EVENTS
NORTHERN REGION
JANUARY - JUNE 2021

TOXIC DRUG POISONING DEATHS

NUMBER OF PEOPLE WHO DIED OF TOXIC DRUG POISONING

25

EQUALS 10 DEATHS

FIRST NATIONS PEOPLE ARE DISPROPORTIONATELY REPRESENTED IN TOXIC DRUG POISONING DEATHS

14.8% OF REGION'S POPULATION
38.5% OF TOXIC DRUG POISONING DEATHS

TOXIC DRUG POISONING EVENTS

NUMBER OF TOXIC DRUG POISONING EVENTS ATTENDED BY PARAMEDICS

258

PERCENTAGE CHANGE COMPARED TO 2020 (JAN-JUNE)

59.3%↑

FIRST NATIONS PEOPLE ARE DISPROPORTIONATELY REPRESENTED IN TOXIC DRUG POISONING EVENTS

14.8% OF REGION'S POPULATION
54% OF TOXIC DRUG POISONING EVENTS

PERCENTAGE OF EVENTS BY SEX

34.9% (♀)
65.1% (♂)

NOTES ABOUT TOXIC DRUG POISONING EVENTS:

• Most toxic drug poisoning events are non-fatal and represent instances where paramedics were called and responded to an overdose, whereas toxic drug poisoning deaths represent people who overdosed and died.

• The negative impacts of single or repeated toxic drug poisoning events on an individual can include: heart conditions, liver and kidney problems, brain damage, decrease in mental health, disconnection from support networks, and loss of spiritual and/or cultural connections.


• The data used to calculate the percentage of toxic drug poisoning events experienced by First Nations people is based only on health records where a Personal Health Number (PHN) was available. The number of First Nations toxic drug poisoning events attended by paramedics and the percentage increase in First Nations people experiencing events are likely underestimated due to the limited availability of PHNs in the data. Unfortunately, not all toxic drug poisoning events have a PHN associated with them.

• Toxic drug poisoning events that were treated successfully in community and events where 9-1-1 was not called are not captured in this data.

The FNHA gratefully acknowledges the health partners that make this data available:
BC Centre for Disease Control, BC Coroners Service, BC Emergency Health Services, and the BC Ministry of Health.
Are you a frontline worker in Northern BC supporting Indigenous people who use drugs?

You can join a weekly Community of Practice meeting to share resources, concerns and frustrations. You’ll also learn about best practices and what other communities are doing to support people during this challenging time.

HARM REDUCTION EDUCATORS

BRYN HANKS  BSW (They/Him)
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“Drug use is often a trauma response, a response to the toxic legacy of colonialism. I work in harm reduction because decolonizing drug use reduces the ongoing stigma and violence experienced by Indigenous peoples. Stigma is what keeps people from speaking up, and people are getting lost and dying in that silence.”

JODY YOUB  LPN (She/Her)
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“Healing doesn’t mean the damage never existed. It means the damage no longer controls our lives.” ~ Akshay Dubey

Need a fast response? Not sure who to contact?
EMAIL: northern.naloxone@fnha.ca