MYTH 1: "DO A DRUG ONCE AND YOU'RE ADDICTED."

Many, many people who try a drug once do not become addicted. Patients are given opioids in hospital during surgery or childbirth and do not become addicted. Some people use substances recreationally and don't become addicted. It is true, however, that the more often a substance is used, the higher the risk of addiction – but even then it may not result in addiction.

FACT: PEOPLE WHO STRUGGLE WITH ADDICTION USE SUBSTANCES TO CURB PAIN.

People who struggle with addiction may be trying to ease physical, emotional, spiritual and mental pain – to numb difficult feelings. To create meaningful change we need to address the underlying and ongoing trauma, grief and loss that contribute to this pain.

MYTH 2: "WE JUST NEED TO GET ALL THE DRUGS AND DRUG DEALERS OUT OF THE COMMUNITY TO END THE DRUG PROBLEM."

This approach has failed time and again. America's 'War on Drugs', which began in the 1970's, is a well-documented example of how this approach has failed to stop substance use.

FACT: OSTRACIZING PEOPLE WHO SELL AND USE DRUGS SIMPLY PUSHES SUBSTANCE USE UNDERGROUND.

Attempting to push substance use out of the community leads to additional problems:

- Increased use of substances alone and indoors, which is riskier. Eightynine percent of overdose deaths caused by illicit drugs occur indoors in BC.
- Increased potency of illicit substances to evade law enforcement.
- Decreased opportunity for connection and support for people who use substances.
- People who use substances may feel they have no alternative but to travel away from loving, supportive families and communities in order to access the substances they need.



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MYTH 3: "YOU HAVE TO HIT ROCK BOTTOM BEFORE I CAN HELP YOU."

Hitting rock bottom does not help most people change their ways. Harshness does not jolt people into changing.

FACT: HITTING ROCK BOTTOM CAN BE MORE DESTRUCTIVE THAN HELPFUL.

When we are supporting people who are using substances, it is important to focus on building relationships based on safety and trust. If people do not find connection in their lives with other people, they will find something to connect to – including substances. If we leave people on their own in order for them to 'hit rock bottom', we lose these opportunities to connect and provide support.

MYTH 4: "IF YOU REALLY LOVED ME, YOU WOULD STOP USING."

People experiencing addiction do care for their loved ones and deeply understand that their substance use causes their family, friends and community pain and guilt.

FACT: ADDICTION IS NOT A CHOICE.

Ending addiction is much more complicated than "just saying no". One of the most important things we can do is support the people we care about along their healing journey.

- Have open conversations and talk about substance use.
- Learn more about addiction and harm reduction.
- Recognize that abstinence may not always be the end goal and that there are many ways that a person can heal that doesn't always end in treatment.

MYTH 5: "HARM REDUCTION ENABLES SUBSTANCE USE."

Without harm reduction, people would still use substances but in unsafe and unsupported ways – often leading to poorer health outcomes and possibly overdose death.

FACT: HARM REDUCTION SAVES LIVES AND PROVIDES SAFE OPTIONS TO PEOPLE STRUGGLING WITH ADDICTION.

Harm reduction enables safety, reduces illness and injury, and maintains or improves the health status of people using substances. Harm reduction is a public health approach that minimizes harm and recognizes that every life is valuable, including the lives of people who use substances.

Harm reduction also embodies compassion. Small actions, such as offering some of the basic necessities of life, help people who use substances to keep themselves safe.