TOXIC DRUG POISONING DEATHS AND EVENTS VANCOUVER ISLAND REGION

JANUARY - JUNE 2023



TOXIC DRUG POISONING DEATHS

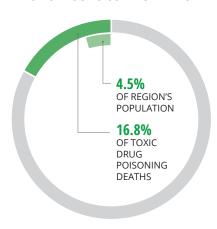
NUMBER OF PEOPLE WHO DIED OF TOXIC DRUG POISONING



EQUALS

41

FIRST NATIONS PEOPLE ARE DISPROPORTIONATELY REPRESENTED IN TOXIC DRUG POISONING DEATHS



TOXIC DRUG POISONING EVENTS

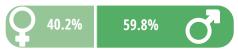
NUMBER OF TOXIC DRUG POISONING EVENTS ATTENDED BY PARAMEDICS

317

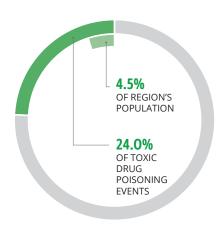
25.81

PERCENTAGE
INCREASE COMPARED
TO 2022 (JAN–JUNE)

PERCENTAGE OF EVENTS BY SEX



FIRST NATIONS PEOPLE ARE
DISPROPORTIONATELY REPRESENTED
IN TOXIC DRUG POISONING EVENTS



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.

Source: www.drugabuse.gov/drug-topics/health-consequences-drug-misuse/introduction

- 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.

RESPONDING TO AND HEALING FROM TOXIC DRUG SUPPLY POISONING

VANCOUVER ISLAND REGION JANUARY - JUNE 2023

ACTIONS TAKEN BY THE FNHA TO SAVE LIVES AND SUPPORT HEALING

Province-wide Initiatives:

- The FNHA is in a Level 2 Emergency response structure to the Toxic Drug Emergency.
- First Nations harm reduction grants funded 106 community-based events, harm reduction positions and projects.
 Email HRgrants@fnha.ca to learn more.
- Harm Reduction Hub provides community workers and health care providers with easy access to harm reduction services and supplies while building networks of support to help expand harm reduction options in First Nation communities (email harmreduction@fnha.ca for access).
- Opioid Agonist Therapy (OAT) is a medical harm reduction tool to help people through withdrawal from opioids (email harmreduction@fnha.ca to learn more).
- The FNHA dispenses injectable and nasal naloxone to individuals and communities.
 Not Just Naloxone training is provided in workshops to learn how to use naloxone within a wholistic, decolonizing context.
- Courageous Conversations webinar series and events to start conversations around substance use and harm reduction. The FNHA also launched the Courageous Conversations on Substance Use Toolkit and Healing Indigenous Hearts Facilitator Guidebook.
- The FNHA continues to offer the First Nations Virtual Substance Use and Psychiatry Service, connecting psychiatrists and addictions specialists with First Nations people and their family members for culturally safe care planning, treatment and healing.

Vancouver Island Region Initiatives:

- Community approaches included lunchand-learns for:: Culturally safe harm reduction; Opioid Agonist Therapy; Detox/Withdrawal management treatment pathways; Island Health Indigenous Mental Health and Substance Use Services; and Decriminalization.
- Not Just Naloxone and community Naloxone trainings, and Indigenous Harm Reduction workshops on Stigma and Lateral Kindness, Grief and Loss and Peer workers support. All based on community request.
- Collaborating with Vancouver Island CAT (Community Action Teams) to enhance quality of services and strengthen communication and partnerships with local Nations. Actively working with health care partners on continuum of care, and treatment planning with seamless transitions.
- Working in collaboration with the FNHA Decriminalization Team and providing communities with up-to-date BC decriminalization information.
- Developing and implementing toxic drug response strategic work plans.

REGIONAL WELLNESS AND CULTURAL SUPPORTS

Regional FNHA staff

Addictions Specialists

Sarah.Romphf@fnha.ca Roxy.Jones@fnha.ca

Indigenous Harm Reduction Educator

Marlene.Stevens@fnha.ca Edward.Joe@fnha.ca

Mental Health and Wellness Team Lead

Hannah.Watler@fnha.ca

Mental Health and Wellness Liaison Alexis.Stuart@fnha.ca

Harm Reduction Practice Consultant

Danielle.Kannegiesser@fnha.ca

Emotional and Cultural Support

Tsow Tun Le Lum Society – Call 1-888-403-3123 (toll-free) or visit www.tsowtunlelum.org

Indian Residential School Crisis

Line is a national service for anyone experiencing pain or distress as a result of their residential school experience. Call toll-free 1-866-925-4419.

KUU-US Crisis Service – Call

1-800-KUU-US17 (588-8717) for an immediate response. 24-hours a day, seven days a week.

Métis Crisis Line is a service of Métis Nation British Columbia. Call 1-833-MétisBC (1-833-638-4722)

Hope for Wellness Help Line offers immediate mental health counselling and crisis intervention by phone or online chat. Call toll-free 1-855-242-3310 or start a confidential chat with a counsellor at www.hopeforwellness.ca

