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Illicit Toxicity Deaths in Northern BC

Data released December 9, 2021

Provincial Summary – October 2021

- August 2021 (N=181). This was the largest number of suspected deaths ever recorded in August
- September 2021 (N=152) this was the largest number of suspected deaths ever recorded in September
- October 2021 saw 201 illicit drug toxicity deaths which equates to approximately 6.5 deaths per day. This is the largest number of suspected deaths ever recorded in a month
- From January to October 2021, VCH (48 deaths per 100,000 individuals) and IH (45 deaths per 100,000 individuals) have the highest rate of illicit drug toxicity deaths in the province

Northern Health Summary – September 2021

- From January to October 2021 Northern Health has seen a rate of illicit drug toxicity deaths of 44.8 deaths per 100,000 which is the third highest rate in the province
 - There were 13 illicit drug toxicity deaths in October 2021 (~ 50 deaths per 100,000 individuals)
- **NW** has seen 34 illicit drug toxicity deaths in 2021 for a rate of 53.0 deaths per 100,000 individuals, which is the third highest rate in the province
 - There were 3 deaths in October
- **NI** has seen 56 illicit drug toxicity deaths in 2021 for a rate of 43.9 deaths per 100,000 individuals, which is the sixth highest rate in the province.
 - There were 7 deaths in October
- **NE** has seen 23 illicit drug toxicity deaths in 2021 for a rate of 38.1 deaths per 100,000 individuals, which is the eighth highest rate in the province.
 - There were 3 deaths in October

Updates

National data on the overdose crisis in Canada

The Public Health Agency of Canada (PHAC), on behalf of the federal, provincial and territorial Special Advisory Committee on the Epidemic of Opioid Overdoses, released the latest national data on opioid- and stimulant-related harms that continue to demonstrate the impact of the COVID-19 pandemic on the overdose crisis in Canada.

Key findings from the national data include:

- Pandemic factors (e.g., limited availability or accessibility of services, increased stress and isolation, increasingly toxic drug supply) contributed to worsening overdose crisis.
- Majority of overdose deaths were observed in BC, Alberta, and Ontario.
- Middle-aged men continue to be most impacted by the drug toxicity crisis.
- Fentanyl and its analogues continue to be major drivers of the crisis.
- Read the full report [here](#).

The data release is accompanied by:

- Brief [report](#) on neonatal abstinence syndrome in Canada
- Update to the [simulation model](#) that predicts the number of opioid-related deaths that may occur in future
- [Joint statement](#) from the Special Advisory Committee co-chairs
- [Statement](#) from the new Minister of Mental Health and Addictions

- Learn more about the actions taken by the Government of Canada to address the overdose crisis [here](#).

Northwest Community Action Team

Good things are coming to Terrace: The Community Action Team (CAT) is coming to fruition and will be the first CAT in the Northwest Health Service Delivery Area! Ksan Society hired a new Community Action Team Coordinator, Taylor Walbauer, who is working closely with people with lived and living experience, and various organizations within the Terrace area. The first CAT meeting will be on December 15, 2021. Taylor is eagerly looking forward to supporting this program until the end of 2022, with hopes of continued funding. Similar to other CATs in the Northern Health region, the focus will be to provide action-oriented strategies tailored to local community needs that align with the eight core interventions set out by the Emergency Response Centre (OERC).

Overdose and Prevention Response (OPR): Delivery barriers for take home naloxone and harm reduction

Due to recent emergency events across BC, BCCDC experienced delivery barriers to the northern region for Take Home Naloxone (THN) and harm reduction supplies. Delivery services have resumed, but due to potential future delivery barriers bulk supplies that do not expire will be shipped to Prince George, Terrace, and Fort St John for dissemination throughout the Northern Region as needed. We encourage sites to monitor stock and continue to place regular orders through BCCDC. In the event that your site is critically low on either THN or harm reduction supplies, please email [Harm Reduction](#) or reach out directly to [Reanne Sanford](#) or [Kristen](#)

[Jensen](#). Updates to delivery barriers will be communicated as they are received.

Biodegradable Single Use Straws

Biodegradable single use straws are now available to order for harm reduction sites.

Straws can be used for snorting crushed or powdered drugs or inhaling vapor from heating drugs on foil. These paper straws can replace rigid devices such as cracked or broken glass tubes, which have a higher risk of transmitting blood borne viruses from small cuts or tears in the nasal passage. Straws come in a variety of colors to reduce the risk of unintentionally using another person's straw. For more information please visit: [paper straws](#). [New Harm Reduction Order Form](#) is also available.

BCCDC Mortality Context Application

This new application (app) visualizes mortality data using interactive charts across regions in BC. The main purpose of this tool is to provide context to provincial mortality statistics as well as to enable users to download visualizations. To read more about the new Mortality Context App visit [BCCDC](#).

To access the app directly visit [BCCDC Shiny Apps](#).

Overdose Prevention Sites

There are a variety of overdose prevention sites across northern BC. Please see below for a list of sites along with their physical address and schedule.

Northern Interior

Needle Exchange

- Address: 1108 3rd Ave Prince George
- Schedule: Mon – Sat; 1pm – 6pm

Two Doors Down

- Address: 1126 3rd Ave., Prince George
- Schedule: Tues – Sun; 6am – 11am & 6pm – 11pm

Coalition of Substance Users of the North (CSUN)

- Address: #3 – 445 Anderson Drive, Quesnel
- Schedule: Fri – Sun, Mon & Wed; 4 – 10pm

Northwest

Terrace Intensive Case Management Team

- Address: 101 – 4450 Grieg Ave., Terrace
- Schedule: Mon – Fri; 12pm – 4pm (excluding holidays)

Northeast

Society for Narcotic and Opioid Wellness (SNOW) House

- Address: 833 – 103rd Ave., Dawson Creek
- Schedule: Wed – Sat; 5pm – 10pm

Peer Work

Peers, or those with lived/living experience of substance use hold unique expertise regarding the overdose prevention response. Below are some peer work highlights.

Indigenous Voices on the Toxic Drug Crisis in BC

Indigenous people are [dying at a disproportionate rate from overdose](#) compared to other populations in British Columbia; the large gap in death rates between First Nations

individuals and other B.C. residents is now wider than it has ever been. Having conversations about substance use, addiction, and overdose have never been more important than they are right now. Sharing openly about experiences and encouraging people to seek support can save lives.

The First Nation's Health Authority is amplifying Indigenous voices through a [harm reduction campaign](#) about the toxic drug crisis in B.C. – focusing on preventing overdose, safer drug use, accessible treatment, and support on the journey of healing. Experiences are shared along with the current reality of overdose for Indigenous people in the province and how to get support. To learn more visit stopoverdose.gov.bc.ca.

Reducing Stigma

Treating people who use substances with respect improves health outcomes and helps save lives.

– *Towards the Heart*

Stigma has been identified as a significant barrier for those accessing health care and this has detrimental consequences for people who use drugs. Treating people who use substances with respect improves health outcomes and helps save lives.

Several resources have been developed to support the reduction of both community and institutional level stigma toward people who use substances.

Stop the Stigma BC

People living with addiction deserve compassion and support. So do their families.

Make the connection.

Have the conversation.

Stop the stigma.

Learn more at StopOverdoseBC.ca and [watch the campaign video](#).

The following is a list of educational resources intended to support recognizing and reducing stigma.

- [Language matters](#)
- [Respectful language](#)
- [Northern Health stigma resources](#)
- [Toward the Heart stigma resources](#)

The following videos were created by the Peer2Peer project. They're designed to highlight the damage that stigma and discrimination can have on people how use drugs.

- [People Who Use Drugs' Interactions with Primary Care](#)
- [Peer Workers' Interactions with Other Professionals](#)
- [People Who Use Substances and Employment](#)

Community Corner

Highlighting Community Champions

Each month we interview someone in our communities who is championing overdose prevention response work. This month's community champion is Jenn Haas.

Tell us a bit about yourself! What is your role within the overdose prevention response work?

My name is Jen Haas. I am a RN and the manager for NW Specialized Services. I support the specialized Mental Health and Substance Use Outreach and Intensive Case Management Teams and

nurses across the NW as well as the NW regional Inpatient Psychiatric Unit, Tertiary Rehabilitation and recovery facilities Seven Sisters and Birchwood Place.

My role in overdose prevention work is to support the strategic direction of the organization with regards to implementing and operationalizing evidence based approaches to support teams to care for people who use drugs. I have had the honour of working with a variety of people both within NH and our community partners to help build policy, procedures, create programs and space to provide overdose prevention services. This has included increased access to harm reduction supplies, developing outreach teams across the NW, implementing the mobile unit, supporting implementation of episodic overdose prevention services, and further developing community partnerships through continued collaboration. I continue to work with teams and community members to further develop and refine services.

Why is this work important to you?

This work is important to me because we are now in the 5th year of an overdose public health emergency and despite the continued ODP efforts of many people, community members continue to die from of overdose related death on a daily basis across the province.

My passion for this work comes from a professional, as well as personal lens of supporting and losing friends and family members who were experiencing difficulty with mental wellness and substance use, while trying to navigate the health system.

I think it is extremely important that we acknowledge and recognize that people use substances for a variety of reasons and deserve the same access to health services as someone who may not use substances. I believe and hope the work we do helps to improve health outcomes, but we still have a long way to go in addressing stigma and judgment in our communities and systems. I think it is so important that we involve community member/peer voices so that we are truly developing and improving services that are client centred and directed.

What brings you joy in this work? What keeps you coming back each day?

What keeps me coming back each day are the great people I work with. It is encouraging to see teams and peers working alongside one another supporting and developing collaboratively. When I hear stories from community members who have lived and living experience around how they feel accepted and supported by the teams, regardless of their circumstances, it reinforces what keeps me coming back each day. On a daily basis I see how teams walk with individuals through their health and wellness journeys, whatever the journeys may be, with care and compassion.

I am always humbled by what community members/peers are willing to share with staff in order to help improve services because ultimately the people we work with are the experts of their own experience. We still have so much learn to be able to continue to include the voices of community members with lived and living experience and evolve what we do and how we support.

Ultimately, seeing that the teams and programs develop and put in place are helping people and making a difference in the lives of people is what gives me hope and inspiration.

We recognize that people who use substances have a variety of different backgrounds and we want to hear from all of you. If you're a person who uses substances and would like to share your story, email peer.network@northernhealth.ca. Stories can be shared anonymously

Overdose Prevention 101

What do we mean by overdose prevention? This section offers an opportunity to learn more about key terms and principles of overdose prevention work.

Opioid Agonist Therapy

What is it opioid agonist therapy (OAT)?

OAT is part of a continuum of harm reduction services. It is a safe and effective treatment for people who are dependent on various types of opioids such as oxycodone, heroin, fentanyl, Percocet, and hydromorphone (Dilaudid). The therapy involves taking opioid agonist medication, usually either methadone (Methadose) or buprenorphine (Suboxone). These medications work to prevent withdrawal and reduce cravings for opioid drugs.

For more information on OAT see [Opioid Agonist Therapy](#); to access OAT resources in your community see [Northern Health Overdose Prevention](#).

Resources & Courses

BC Centre on Substance Use - Webinar series: Opioid Use Disorder Care in ED Settings

A six-part, interactive and case-based webinar series, led by emergency care providers for emergency care providers, has been launched to support the initiative aimed to improve the experience of opioid use disorder care for people and providers. Register for upcoming webinars or view previous sessions by visiting the [BC Centre for Substance Use webpage](#).

New Harm Reduction Resources Available

Sterifilt FAST

- [Towardtheheart Sterifilt FAST](#)

Cotton Filter

- [Towardtheheart Cotton Filter](#)

Safer Tablet Injection

- [Towardtheheart Safer Tablet Injection](#)

The Canadian Centre on Substance Use and Addiction (CCSA): *Issues of Substance* Conference and Resource Links

The CCSA hosted their *Issues of Substance* conference recently. The Conference highlights new research and best practices related to substance use, addiction, harm reduction, and treatment. BCCDC's harm reduction team presented 10 abstracts and posters, including:

- [Substances as Social Lubricants: Understand 'Party and Play'](#)
- [Exploring the Communication of Drug Alerts in BC](#)
- [Safety Beliefs and Behaviours](#)

- [Motivations for Concurrent Use of Uppers and Downers](#)

See full conference program [here](#).

Calls to Action

Take Action

- [Get training on overdose recognition and response.](#)
- [Carry a naloxone kit.](#)
- Always use drugs in the presence of others.

Avoid Stigma

- Replace personal beliefs around substance use with evidence-based facts.
- Challenge negative assumptions around substance use and overdose
- Avoid using labels.
- Use [people-first language](#).
- Treat every human being with dignity and respect.

Learn More

- [Stop Stigma, Save Lives](#)
- NH staff: [Creating Supportive Environments for People Who Use Drugs](#)
- [Stop Overdose](#)

Feedback

We'd love to know what you think of this regional update newsletter. To provide feedback, please fill out our [brief survey](#).