

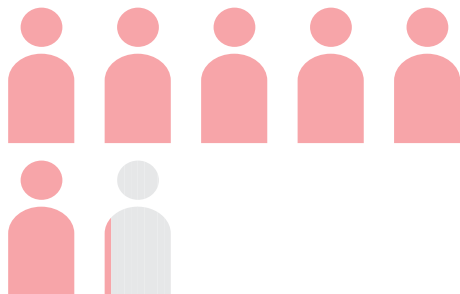
TOXIC DRUG POISONING DEATHS AND EVENTS INTERIOR REGION

JANUARY - DECEMBER 2022



TOXIC DRUG POISONING DEATHS

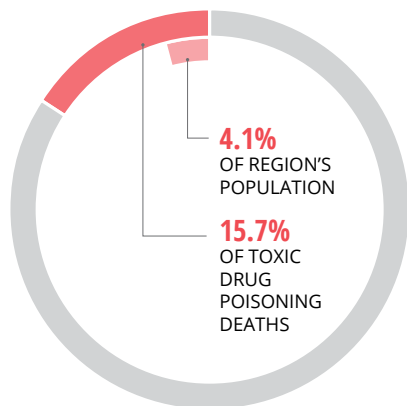
NUMBER OF PEOPLE WHO DIED
OF TOXIC DRUG POISONING



61

 EQUALS
10 DEATHS

FIRST NATIONS PEOPLE ARE
DISPROPORTIONATELY REPRESENTED
IN TOXIC DRUG POISONING DEATHS



TOXIC DRUG POISONING EVENTS

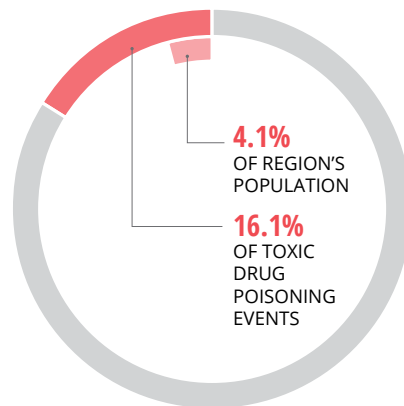
NUMBER OF
TOXIC DRUG
POISONING
EVENTS ATTENDED
BY PARAMEDICS

441

8.3↓

PERCENTAGE
CHANGE COMPARED
TO 2021

FIRST NATIONS PEOPLE ARE
DISPROPORTIONATELY REPRESENTED
IN TOXIC DRUG POISONING EVENTS



PERCENTAGE OF EVENTS BY SEX



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.



First Nations Health Authority
Health through wellness

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.

You may find this information distressing. Cultural support is available at Tsow Tun Le Lum Society.
Call 1-888-403-3123 (toll-free) or visit www.tsowtunlelum.org

RESPONDING TO AND HEALING FROM TOXIC DRUG SUPPLY POISONING

INTERIOR REGION JANUARY - DECEMBER 2022

ACTIONS TAKEN BY THE FNHA TO SAVE LIVES AND SUPPORT HEALING

Province-wide Initiatives:

- FNHA has prioritized the Toxic Drug Emergency by moving into a Level 2 Emergency response structure.
- **Harm Reduction Hub** provides community workers and healthcare 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.
- **Opioid Agonist Therapy (OAT)** is a medical harm reduction tool to help people through withdrawal from opioids. Email harmreduction@fnha.ca to learn more.
- FNHA worked with First Nations communities in preparation for the decriminalization of possession of small amounts of illicit substances, including the **production of FAQs**.
- Community events funded through the Indigenous harm reduction grants. Email HRgrants@fnha.ca to learn more.
- Honouring Our Loved Ones is a **digital space** to honour and share stories (video, photos, artwork or audio recording) to remember the loved ones we've lost to the toxic drug supply crisis.
- The **Courageous Conversations** tool kit is being developed to support ongoing community conversations about harm reduction, substance use and stigma.

Interior Region Initiatives:

- Advocating for emergency withdrawal management and recovery beds for First Nation youth and adults.
- Providing education and awareness of Opioid Agonist Therapy (OAT), withdrawal management programs, and recovery opportunities.
- Provided First Nations Youth Applied Suicide Intervention Skills Training (ASIST) to communities.
- Ongoing Information sessions for referral workers and community partners to assist in the Treatment Centre Application processes.
- Researching new recovery opportunities to implement in First Nations communities.
- Ongoing harm reduction education and awareness planning and community education sessions.
- Monthly Harm Reduction Education Newsletters for Communities.
- Promoting nurse prescribing through "Not Just Naloxone" training and at community events.
- Planning and collaborating with Interior Health to host a community event that promotes community connection and knowledge sharing on the effects of the Toxic Drug Crisis and how to access supports.
- Mental Health and Wellness Planning with the Interior Region Nations.

REGIONAL WELLNESS AND CULTURAL SUPPORTS

Regional FNHA staff

Regional Addictions Specialist

Shae-Lynn.Boyko@fnha.ca

Indigenous Harm Reduction Educator

Sadie.Bedard@fnha.ca

Mental Health and Wellness Liaison

Destiny.Dendewicz@fnha.ca

Emotional and Cultural Support

Mental Health Indigenous Clinicians

in Interior Region – email Interior Region Crisis Response team, Storme.Sandy@fnha.ca

Interior Region Crisis Support Line –

Call 1833-751-2525 (M-F 8am-4pm) or visit IRSupport@fnha.ca

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