



# 2023 Opioid Crisis Submission

by the **Alma Mater Society of UBC Vancouver**





## The AMS of UBC

The Alma Mater Society (AMS) of the University of British Columbia (UBC) Vancouver represents over 60,000 undergraduate and graduate students and is incorporated under BC's Societies Act. In our efforts to improve the quality of students' educational, social, and personal lives, we advocate for harm reduction resources and services to ensure safer substance use across BC. The province can take several immediate steps to better address the drug toxicity and ongoing overdose crisis, and so the AMS is recommending the following.

### Government Response

- In consideration of the province's newly mandated program on drug decriminalization for simple possession, we urge the government to listen to the concerns of substance users, advocates, and harm reduction organizations regarding the 2.5g threshold. We also ask the province to shift their investments into community-based alternatives rather than relying on heavy police involvement.

### Improving Care

- Create a comprehensive, standardized educational plan and toolkits targeted towards post-secondary students with information on harm reduction resources, services, and safer substance use strategies. The creation of these tools would allow all British Columbian post-secondaries to easily access, facilitate, and distribute crucial information to their respective communities. This should be developed in partnership with local harm reduction organizations and student advocacy groups to adequately represent lived experiences and the perspectives of those who are most impacted.

### Addressing Toxic Drug Supplies

- Scale-up drug testing as an emergency intervention through continued support for drug checking initiatives, as well as provide fentanyl drug test strips to pharmacies across BC for distribution to increase accessibility and normalization of drug checking services.

## Government Response

In consideration of the province's newly mandated program on drug decriminalization for simple possession, we urge the government to listen to the concerns of substance users, advocates, and harm reduction organizations regarding the 2.5g threshold. We also ask the province to shift their investments into community-based alternatives rather than relying on heavy police involvement.

While we acknowledge that BC's decriminalization of simple possession of drugs is a historic step, given that we are 7-years into a provincially declared health crisis – which has taken over 10,000 lives with an average of 6 deaths per day – the 2.5g threshold is incredibly modest<sup>1</sup>. Those who use heavily are often those who are most structurally vulnerable, and the current possession limit still leaves many individuals vulnerable to criminalization. In addition, this limit does not adequately account for drug users in remote communities who buy much larger quantities on average for personal use due to limited availability within their regions<sup>2</sup>.

Studies show that students in particular value convenience and in doing so, often turn to more economic means to attain substances. This often includes buying in larger quantities to either share among their peers or decrease their risk of facing punitive punishments. Another factor to consider are the buying sizes of drugs, which typically start at 1g but jump to 3.5g, with no in-between quantities<sup>3</sup>. Considering that the threshold falls right in the middle of these sizes, this current unrealistic threshold of 2.5g could undermine the goals of decriminalization, especially given how low and non-inclusive the quantity is in terms of both amount and drug type. What seems to be a step in the right direction to decriminalization could actually generate more harm to substance users who are most vulnerable, including BIPOC and

LGBTQ+ users, students, and those experiencing poverty<sup>4</sup>. As stated by Caitlin Shane from the Pivot Legal Society, “drug possession is not one-size-fits-all”<sup>5</sup>.

We also urge the provincial government to consider how the threshold is enforced and the negative impacts of overwhelming police involvement. The International Journal of Drug Policy published a study discussing the harms that a low threshold can have, as it does not adequately represent actual use or possession by substance users. This inaccuracy can lead to “net-widening”, an increase, rather than decrease, in the amount of people subject to criminalization as a result of this new program<sup>6</sup>. While the BC government has committed to “work closely with partners to provide both compassionate and an evidence-based response to this crisis”<sup>7</sup>, in generating this pilot program, there was a lack of consultation with substance users, advocates, and harm reduction organizations. Instead, decisions were based on governance and policing structures which have historically criminalized substance users, demonstrating a very real gap between commitment and action.

Rather than further punishing BC's most marginalized substance users, decriminalization should be user-focused, taking into account both lived experiences and the many social and financial barriers that impact substance use and response. Furthermore, decriminalization efforts from the provincial government should be focused on taking care of those who are most directly affected by such policy changes. This begins by identifying and acknowledging the gaps and issues that are raised by inequitable policies, such as this one.

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Between 2020 and 2021, overdose-related deaths rose by 26% in BC, of which youth aged 19-29 were a worrisome and increasing percentage<sup>8</sup>. Post-secondary students are a unique demographic of substance users— as young people, they are often trying substances for the first time, with little knowledge of safe drug practice, as they are exposed to higher risk environments such as parties and are entering the high stress environment of higher education. Many student users often turn to the internet or social media to seek information on substance use, and while easily accessible educational tools exist for substances such as alcohol, cannabis, or nicotine, students often run into barriers regarding other drugs and opioids<sup>9</sup>. This demonstrates a need for a similar framework and availability of information for these specific substances.

The AMS is privileged to have the capacity to provide education on substance use as well as offer free safer drug use supplies, however, not all student unions have the capacity to fund and develop comprehensive harm reduction strategies, which should be made standard across the province. An education tool, developed in conjunction with student voices and experiences,

would help post-secondaries continue or kick-start their own harm reduction initiatives. The Public Health Agency of Canada has recognized the positive impacts school-based harm reduction initiatives generate, whether it be increased knowledge or stigma reduction among attitudes and behaviors related to substance use<sup>10</sup>. The Government of Canada's research shows that youth perceive harm reduction education as practical and helpful and that harm reduction efforts do not encourage further experimentation with substance use<sup>11</sup>.

A comprehensive education plan would also serve to combat stigma, which in the midst of an opioid crisis, is of utmost importance. According to health experts and advocates, stigma reduction needs to be a core objective among substance harm prevention strategies, especially since it creates such harmful and divisive barriers within our society<sup>12</sup>. The Chief Public Health Officer's 2019 Report emphasizes concerns over stigma toward substance use as both a pressing public health and social justice concern<sup>13</sup>. This can be achieved by partnering with on-the-ground harm reduction organizations as well as student advocates to ensure that this resource is user-focused and includes the voices of those who adequately represent the student population.

UBC's current Housing Policy states that students who possess, offer, use, or even are around illegal substances can lead to eviction or police involvement<sup>14</sup>. This policy perpetuates stigma around substance use and it is a barrier for those looking to access drug-related services or resources. This leads to heightened risks for students who may be hesitant to report overdose risks due to a fear of eviction from student housing. Without a medical amnesty policy, UBC students risk punishments such as housing evictions, negative impacts on their academic standings, and more. It is critical that the government set an example for post-secondary institutions by prioritizing the creation of an educational tool for post-secondaries to combat stigma, create safe spaces for conversation, and humanize substance users.



## Addressing Toxic Drug Supplies

Scale-up drug testing as an emergency intervention through continued support for drug checking initiatives, as well as provide fentanyl drug test strips to pharmacies across BC for distribution to increase accessibility and normalization of drug checking services.

Since the start of the COVID-19 pandemic, overdose and illicit drug toxicity deaths have doubled, with a 96% increase during the first year of the pandemic<sup>15</sup>. These deaths have far surpassed combined deaths from motor vehicle, suicide, and homicide incidents in 2020. Fentanyl-related deaths specifically encompassed 80% of illicit drug toxicity deaths in 2020, and 85% in 2021<sup>16</sup>. High fentanyl concentrations in toxicology reports continue to increase and 96% of all opioid-related deaths are accidental, demonstrating considerable need for increased drug checking to minimize risk<sup>17</sup>.

2022 data on UBC students shows widespread support for drug checking services, with 78% of respondents supporting the availability of FTIR Spectrometer drug checking for students, and 37% of respondents indicating that they either personally would – or know someone who would – access drug checking services<sup>18</sup>. In 2021, a team of student advocates distributed free drug test strips on Vancouver’s UBC campus in anticipation of drug use over the Halloween weekend. Within a mere 2 hours, all 100 strips had been taken– exemplifying the desperate want and need for accessible testing. Similar patterns were seen when these distribution events were hosted again, and therefore we encourage the provincial government to scale-up drug testing as an emergency intervention.

Furthermore, drug testing needs to be wider spread and more accessible. While students have demonstrated a clear need and a desire for available drug checking services and

resources, barriers greatly increase the difficulty and inconvenience of accessing the limited existing services. For example, the closest FTIR Spectrometer drug checking site to UBC is located on East Hastings, which takes approximately 1 hour by transit to reach. Because of its inconvenience and 2 hour round trip time, students will likely opt to take the risk instead of checking their drugs before use. To help mitigate these accessibility barriers, the government can introduce more FITR Spectrometer drug checking sites and provide BC pharmacies with Rapid fentanyl drug strips.

As it stands, BC pharmacies currently only have the capacity to hand out naloxone based on perceived likelihood of overdose, which in itself is based on a discriminatory model. On the other hand, pharmacies currently have an accessible and comprehensive model to distribute free COVID-19 Rapid antigen tests upon request. This free distribution model should begin to encompass Rapid fentanyl drug test strips as well, which are conveniently manufactured by the same company as the COVID-19 tests. Due to the abundance and proximity of pharmacies around BC, providing easy-to-use drug tests will make safer use significantly more accessible for everyone and will promote the normalization of drug checking before use. Especially in the midst of an opioid crisis, increasing accessibility to safer drug use supplies is paramount to harm reduction and combating both public and systemic stigma.

<sup>1</sup>Bramham, Daphne. “B.C.’s drug decriminalization bar set so low, it can’t help but succeed”. Vancouver Sun. June 8, 2022. Retrieved from: <https://vancouversun.com/opinion/daphne-bramham-b-c-s-drug-decriminalization-bar-set-so-low-it-cant-help-but-succeed>.

<sup>2</sup>BCCSU, personal communication, August 3, 2022.

<sup>3</sup>GYDT, personal communication, July 28, 2022.

<sup>4</sup>Shane, Caitlin. “Inadequate threshold quantities will put people who use drugs in harm’s way”. Pivot Legal Society. March 17, 2022. Retrieved from: [https://www.pivotlegal.org/inadequate\\_threshold\\_quantity](https://www.pivotlegal.org/inadequate_threshold_quantity).

<sup>5</sup>Shane, Caitlin. “Inadequate threshold quantities will put people who use drugs in harm’s way”. Pivot Legal Society. March 17, 2022. Retrieved from: [https://www.pivotlegal.org/inadequate\\_threshold\\_quantity](https://www.pivotlegal.org/inadequate_threshold_quantity).

<sup>6</sup>Shane, Caitlin. “Inadequate threshold quantities will put people who use drugs in harm’s way”. Pivot Legal Society. March 17, 2022. Retrieved from: [https://www.pivotlegal.org/inadequate\\_threshold\\_quantity](https://www.pivotlegal.org/inadequate_threshold_quantity).

<sup>7</sup>Government of Canada. “Budget 2022: Strong Public Health Care”. April 7, 2022. Retrieved from: <https://budget.gc.ca/2022/report-rapport/chap6-en.html>.

<sup>8</sup>Ministry of Public Safety & Solicitor General. “Illicit Drug Toxicity Deaths in BC”. July 14, 2020. Retrieved from: <https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/illicit-drug.pdf>.

<sup>9</sup>Government of Canada. “Blueprint for Action: Preventing substance-related harms among youth through a Comprehensive School Health approach”. August 2021. Retrieved from: <https://www.canada.ca/en/public-health/services/publications/healthy-living/blueprint-for-action-preventing-substance-related-harms-youth-comprehensive-school-health/guide.html#s2-3-3>.

<sup>10</sup>Government of Canada. “Blueprint for Action: Preventing substance-related harms among youth through a Comprehensive School Health approach”. August 2021. Retrieved from: <https://www.canada.ca/en/public-health/services/publications/healthy-living/blueprint-for-action-preventing-substance-related-harms-youth-comprehensive-school-health/guide.html#s2-3-3>.

<sup>11</sup>Government of Canada. “Blueprint for Action: Preventing substance-related harms among youth through a Comprehensive School Health approach”. August 2021. Retrieved from: <https://www.canada.ca/en/public-health/services/publications/healthy-living/blueprint-for-action-preventing-substance-related-harms-youth-comprehensive-school-health/guide.html#s2-3-3>.

<sup>12</sup>Government of Canada. “Blueprint for Action: Preventing substance-related harms among youth through a Comprehensive School Health approach”. August 2021. Retrieved from: <https://www.canada.ca/en/public-health/services/publications/healthy-living/blueprint-for-action-preventing-substance-related-harms-youth-comprehensive-school-health/guide.html#s2-3-3>.

<sup>13</sup>Government of Canada. “Blueprint for Action: Preventing substance-related harms among youth through a Comprehensive School Health approach”. August 2021. Retrieved from: <https://www.canada.ca/en/public-health/services/publications/healthy-living/blueprint-for-action-preventing-substance-related-harms-youth-comprehensive-school-health/guide.html#s2-3-3>.

<sup>14</sup>UBC SHCS. “Residence Contract: Student Housing and Community Services”. 2021-2022. Retrieved from: <https://vancouver.housing.ubc.ca/wp-content/uploads/2021/03/2021-2022-Thunderbird-Contract.pdf>.

<sup>15</sup>Ministry of Public Safety & Solicitor General. “Illicit Drug Toxicity Deaths in BC”. July 14, 2020. Retrieved from: <https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/illicit-drug.pdf>.

<sup>16</sup>Ministry of Public Safety & Solicitor General. “Illicit Drug Toxicity Deaths in BC”. July 14, 2020. Retrieved from: <https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/illicit-drug.pdf>.

<sup>17</sup>Canadian Centre on Substance Use and Addiction. “Canada’s Opioid Crisis: What You Should Know”. 2021. Retrieved from: <https://www.ccsa.ca/sites/default/files/2021-06/CCSA-Canada-Opioid-Crisis-What-You-Should-Know-Poster-2021-en.pdf>.

<sup>18</sup>UBC Vancouver Alma Mater Society. “2022 AMS Academic Experience Survey Report”.