NALOXONE IS NOT ENOUGH

LETTERS FROM THE HEART OF THE CRISIS
JUNE 2021
We remember the lives that have been tragically lost from a toxic drug supply. Overdose deaths are preventable and unacceptable. Naloxone alone is not enough.

BC’s take-home naloxone program was launched in 2012 following an increase in overdoses, and dramatically expanded in 2015 in response to an unprecedented increase in opioid overdoses. The requirement for a prescription was removed in 2016, and kits and training were provided across the province to individuals who were at risk of experiencing or witnessing an overdose.

In May 2021, the program reached a total of one million kits shipped to distribution sites.

The availability of naloxone as an emergency response intervention has been critical in saving lives. Modeling estimates that from January 2015 to March 2021 more than 3,000 deaths events were averted due to take-home naloxone. But this milestone is overshadowed by the high rate of fatal overdose that has persisted in British Columbia for more than five years, despite the heroic efforts of so many. We continue to lose people from a toxic and unregulated drug supply, and the rate of overdose deaths in B.C. continues to hover at more than five a day.

Overdose deaths are preventable and unacceptable. Naloxone is not enough.

Community members and partners have been paramount in providing training and getting naloxone into the hands of those who need it. People with lived and living experience of substance use (PWLE) and people who use drugs (PWUD) continue to carry the burden of being the first responders to overdoses, saving the lives of friends, family, and community members — which comes with overwhelming experiences of loss, burnout, and frustration. Some of these people with lived experience are members of the PEEP Consultation and Advisory Board and Peer2Peer teams with the BC Centre for Disease Control and are based across the province.

These are their letters to the people of British Columbia.

_Naloxone is Not Enough: Letters from the Heart of the Crisis._ June 2021. BC Centre for Disease Control.

Find out more at towardtheheart.com. Data at bccdc.ca.

Contact us at: harmreduction@bccdc.ca
To whom this may concern,

I lost my daughter in 2018 to fentanyl poisoning. If they’d had naloxone on hand and knew how to use it she may still have been here with us today. I’m grateful for us having it, yes it helps save lives. But it’s just a band aid. We have lost so many lives since 2016 already. How many more do we need to lose before we get off our asses and really do something about the issue? It really is about time our government stood up. I mean really stood up to the plate here. Don’t you agree? No parent should ever have to bury their child. It’s not supposed to be that way. So many needless deaths.

Thank you,

Tracy Scott

I am a member of the Peer2Peer project and a first responding street outreach worker with Rain City Housing, the co-chair of the Ridge Meadows Overdose Community Action Team, a member of the Community Action Initiatives Overdose Prevention and Education Network (OPEN) Project Project, and a Peer Outreach. I am also a co-founding board member of the Maple Ridge Street Outreach Society (MRSOS) as well as a member of MOM STOP THE HARM (MSTH) An avid singer, songwriter and poet in the Low Barrier Chorus which performs music written around lived/living experience with substance use. I am a proud advocate for people who are unhoused, and people who use substances.

“No parent should ever have to bury their child. It’s not supposed to be that way.”
If Naloxone Were Enough...

If naloxone were enough, we wouldn’t have an entire generation of kids who will grow up without one or both of their parents because they died from an overdose. If naloxone were enough, I wouldn’t have close friends tell me that their stomach drops & they get instant anxiety when they see my name on the call display, because they always think I am calling to give them bad news of another death, before they read about it on social media.

If naloxone were enough, we wouldn’t continue to have so many murdered and missing Indigenous people. As an Indigenous woman I am more likely to go missing or die from an overdose than I am to graduate from school. Drug policy and prohibition are rooted in racism & oppressive ideologies. The existing drug policies play a role in the on-going oppression, stigmatization, incarceration and violence that Indigenous people, and most drug users experience in Canada. A Band aid is defined as a “quick, superficial or temporary solution to a problem that does not address or resolve the underlying cause of said problem”. Yes, naloxone has saved many lives and reversed thousands of overdoses, but it doesn’t prevent the overdoses from happening, the PTSD or the burn out front-line workers are continuing to experience. It doesn’t create safety for drug users without the cost of trauma. For over 5 years we have managed to apply a band aid solution to a public health crisis and it’s time to rip the band aid off.

When I think of Naloxone, I think of it as a leg to a table, on its own the table will not stand on one leg. When supported with other pillars (legs) such as decriminalization, safe supply (options to meet the needs of all drug users) & safe consumption sites across Canada; There’s a much better chance that the table will stand. These are some of the things we need to start to see a light at the end of the tunnel again. There will be no long-term solution to this pandemic unless PWLLE & PWUD are at the center of the development, creation and roll out of overdose prevention. We’ve realized nobody is coming to save us, and it will be up to us to save ourselves, before we end up dead. I am emotionally tired, and not sure how much longer I can watch the people I love keep dying. I have never gotten to really grieve any of my friend’s deaths, for the last 5 years I have lost someone I care about almost weekly, sometimes more than that. I feel guilty for becoming desensitized.

To the thousands of families who have lost their parents, children, siblings, aunts, uncles, and friends because of a poisoned drug supply. I am sorry that Naloxone wasn’t enough to save your loved one. People don’t deserve to die for their choice to use drugs.

MS

“As an Indigenous woman I am more likely to go missing or die from an overdose than I am to graduate from school.”
A war on people who use drugs

The success of the distribution of the 1,000,000'th Naloxone kit and the importance of the dedication to ensure that Naloxone is broadly accessible without a prescription was pivotal to life saving measures. I am very grateful that we have had naloxone … I have used it many times on people dear to me… we PWLLE have all used it to save each other. But as I reflect on how many we have lost … on all the people I love that are now gone because no one was there to give naloxone, we need to keep this milestone of the 1,000,000'th Naloxone kit in perspective. And that is naloxone is not enough, and this occasion re-enforces my frustration that after so many years, after so much death, after all the burn-out… we are still relying on naloxone as our main intervention to address the toxic drug supply.

Naloxone is an effective tool to life saving measures; however, it is not the answer to failed drug policies that criminalize people based on ideology of moral failing. The lack of effective actions by Government has equated to a clear message that our lives are disposable and feels nothing short of supported genocide.

As a person with living experience of substance use, I want to highlight the importance of the need for systemic changes, including but not limited to policy change, decriminalize and access to safe regulated substances. Stimulants are often over looked in the discussions in reflection of the current crisis, we need to ensure that there is access to all substances.

We also need to implement varying models of access as well. Medicalized access is not the best solution to meet the needs of people who use substances, but rather a variety of access to meet peoples needs must be implemented. Such as, Compassion clubs, buyers' clubs etc. The harms associated with the current inadequate drug policies are a failed war on drugs which is equated to nothing less than a war on people who use drugs.

The exposure to a toxic supply is by far the catalyst to the unprecedented and preventable deaths to date. Canadians deserve the right to access safe supplies of substances, much like alcohol and cannabis is today.

Prohibition is rooted in racism and prohibition has proven to be an ineffective deterrent to substance use. Society often associates drug use as problematic. We can not deny that exists; however, many Canadians use substances that do not
contribute to health and social harms. But rather the current policies put them in harms way of criminalization and barriers to health care systems that are not without stigmatizing idolizations. It is also widely documented that alcohol consumption causes more social harms even while illegal substances exist as such. It is the criminalization and failed drug policies that are the greatest association to harmful social and health determinants.

Canadians deserve the right to access to essential needs and services without the cavate of abstinence or sobriety. The inherent harms of such a belief system have proven to be ineffective and deadly.

Charlene  
Director of PEEP
I’m writing this letter to say how I feel about 1 million naloxone kits being handed out in BC.

While I am so grateful to have naloxone kits in community (as people who use drugs are mostly saving each other from overdose death) it also feels like it’s the bare minimum that can be done in order to stop these deaths. Again it’s been left up to us who are dying, to save each other and ourselves. I am very happy to see all the amazing work and contributions from both PWLE, PWLLE, peers and allies, within health authority and outside of health authority. We have all put so much into harm reduction work itself as well as specifically reversing overdoses. Naloxone ISN’T NEAR ENOUGH! It is the bare minimum of what can and should be done. People are still overdosing over and over and over again.

There can be long term effects from these overdoses and there has been in many people. Brain damage is one thing that happens. It is exhausting, traumatic, and heartbreaking for peers to be responding on each other day in and day out. It is traumatic to watch those around you dying daily. The more trauma there is, the more drug use, mental health issues, and heartache there is. All of that leads to many more issues in community. Families are suffering, the community members are suffering and WE ARE SUFFERING. Do you know how hard it is to live with oneself after attempting to save another’s life with naloxone and failing? People have to find a way to live with that trauma as well.

Naloxone is a tool, this should be a tool that we end up using if all else fails! And by all else I mean prescribing safe substances so one doesn’t have the risk of overdosing. I also mean by having evidence-based low barrier services that people need! iOAT CLINICS. HOUSING, Life skill classes (if someone wants them), and again I will state the obvious...

SAFE SUBSTANCES WILL STOP OVERDOSE DEATHS! This is the only way to stop this epidemic! Legalization, regulation, and non discriminatory policies within the health authorities (regional, provincial, and national!) Prohibition is what is killing people! Toxic drugs are the result of prohibition. Naloxone is one tool that we SHOULDN’T HAVE TO USE! And we wouldn’t have to if our province and country really wanted this overdose crisis to end. We (PWLLE) are working tirelessly, with very little if any pay. We are the ones doing mental health care on each other, we are supporting each other as far as managing government or health agencies, we are the ones advocating for each other and we are now saving each other’s lives. Multiple times a day. We need more than naloxone. We need much, much more.
So while I’m very grateful we are finally allowed to save each other’s lives (after many people died because we weren’t allowed at first), it can’t be all there is. What happens after life has been saved? What supports are offered? To both the person overdosing and the responder? I wonder what supports paramedics are offered? I don’t mean treatment or detox either. Well that can be an option but not the only one. What happens if the person who overdosed goes to hospital? And leaves? What supports are offered? Saving a life is only the first step. It shouldn’t even have to come to that point. We are missing the opportunity to add to naloxone. We need actual safe supply or we will die!

Sent from my iPhone

Jenny

PEEP member
Naloxone is great....BUT!

I am an outreach worker in the Fraser region and I am very concerned for “ALL PEOPLE.” Addiction and mental health problems were a problem way before COVID and yet you still continue to do NOTHING!

I am blessed in the way that I have only had to use naloxone on the street or in someone’s home a few times, but my ‘skid row’ is in my own bedroom. My husband is addicted to opioids, and he is the main provider. In a week period I brought him back to life four times! That not being all of it, as I had to use naloxone many times before that, that week the drug supply was extremely toxic, and when I joined in, I too was saved… by my husband! The heroin laced with fentanyl, and now EVERYTHING is toxic. My experience is that there is so much benzos in the drugs that it makes a hard road to get the hell off. Cocaine laced with fent and benzos, with no cocaine even in it.

I'M TIRED OF THE BANDAID WAYS. I'VE SEEN HOW TOXIC AND TAMPERED WITH THE SUPPLY IS! PLEASE MAKE ME UNDERSTAND WHY YOU AREN'T DOING ANYTHING. WE'VE BEEN DOWN THIS ROAD WITH THE ALCOHOL SUPPLY MANY YEARS AGO...YOU HAVE A SOLUTION.

NOW USE IT!

— Cheri, PEEP member
Over 5 years later and 1 million Naloxone kits distributed and it feels like we’re in the exact same spot, or even worse off then when the pandemic started.

More funerals than weddings

“A Front Line Worker

I remember in the beginning, I believed Naloxone was going to save everybody’s life. I thought that Naloxone was a superpower to reverse death, slowly I realized that we needed to be doing so much more than just reversing overdoses. When I think of the countless overdoses I have responded to witnessed & experienced, I am grateful I had access to naloxone more times than not. I think of how helpless I felt on the times that I didn’t, and the person’s life depended on me staying calm, quick breaths, chest compressions, calling 911 & yelling for help. Something happened during the crisis, I became detached, I went from living life, back into Survival Mode. I haven’t recovered from the state of being. I put the needs of the people I was supporting ahead of mine & continued to go to work daily & often stayed for double shifts because nobody else would. Many of my coworkers were falling apart, and so was I. In 2016 co’s were happening non-stop during a shift & sometimes 2 or more at once. The pain I felt was unbearable most days. I wanted so badly to not feel the things that were happening, I started to self medicate to try to escape the trauma. I have responded to so many co’s that I can’t even separate most of them anymore.

Everyday I tell myself that this would be over soon, this is only temporary, there has to be a light at the end of the tunnel. I believed that my friends family would stop dying. I was wrong. Over 5 years later, 1.1 million Naloxone kits distributed & feels like were in the exact same spot, or even worse off than when the pandemic started. I have found several of my friends dead, I have had people die in my arms, I have overdosed myself & found someone dead at work during a Wellness check. I have mental images that will never go away. The overdose crisis has taken a piece of me, and I don’t think I will ever be the same again. I am always afraid of people I love dying. I say this because I am not the only one with this experience. My trauma isn’t unique & my generation has been to way more funerals than weddings.

- M.S.
It’s not enough

My name is Beth. I am able to write this letter today thanks to Naloxone. It saved my life. I’m so grateful to the BCCDC for all they have done to make Naloxone available to all. But it’s not enough. My grandson is growing up without a father today due to toxic supply. People who use drugs have families, people who love them more than anything. I believe our government needs to do more. I’m TIRED of losing family and friends when it’s so preventable!!! I’m asking anyone who reads this letter to PLEASE USE YOUR VOICE, yell, scream and stomp your feet. We can make a difference together.

EVERYONE MATTERS

Beth

“I’m asking everyone who reads this letter, to please use your voice, yell, scream and stomp your feet. We can make a difference together.”
We need a regulated safe supply of substances, and to decriminalize us. This would be a good start.”
On Christmas & Boxing Day 2020, my partner overdosed both days. The second overdose was much worse than the first. Their lips were turning blue & their skin was grey & I had already administered four doses of Naloxone. I did not know if they were going to survive. It was the scariest moment of my life. After two more doses of Naloxone & breathing for him, I was able to revive him. Naloxone saved their life, and for that I am thankful. Naloxone is a harm reduction tool that has saved many lives. We are fortunate that in BC it is free & readily accessible (in most places). However... NALOXONE IS NOT ENOUGH! If it were enough, five people would not be dying by overdose each day in BC. We are five years into the Overdose Crisis & things are not getting any better, only worse. The illicit drug supply is becoming more & more toxic by the day. The drugs my partner overdosed on had high concentrations of fentanyl & benzodiazepines. This has become the new normal in BC. The benzos in the drug supply is a different type of ball game... & Naloxone does not work on a benzo overdose. Our community members are responding to multiple overdoses daily. In the past week, we lost two community members, under the age of 25 to fatal overdoses. It breaks my heart because each & every overdose death is preventable. Advocates & People Who Use Drugs (the experts) have been calling on the government for quite some time for a safe supply of substances. It’s not the drugs that are killing people, it’s stigma.
“We have also seen safe supply work... Why do only 4 per cent have access? Why are people still dying? I am one of the 4 per cent of people who have access to a safer supply and I would not be writing this letter today if it wasn’t for my prescription.”

"Failed government policies... what is infuriating is the slow response & inaction from the government while our loved ones are dying. It is only because of COVID the Risk Mitigation Guidelines were released so people who use drugs could self-isolate. That document was pretty much released overnight which proves the government could do something about our death rates... if they wanted to... which is why I believe the government does not care about people who use drugs & we are in the middle of a genocide. Even with the RMG, only 4% of people with opioid use disorder in BC have been given access to a safer supply of substances. From my experience doctors don’t want to prescribe because they don’t have proof it works, & do not want to be liable if their patient overdoses. I think doctors should be liable if a patient asks for a safer supply & they are denied & the patient has an overdose from the illicit supply. There is research that is being done that proves when someone is using a safer supply of substances their risk of a fatal overdose decreases drastically. We have also seen safe supply work in countries such as Switzerland & the Netherlands. So why can’t we get a safe supply? Why do only 4% have access? Why are people still dying? I am one of the 4% of people who have access to a safer supply & I would not be writing this letter today if it wasn’t for my prescription... I started using opioids after four years without under the stress of COVID. My safer supply prescription has kept me away from the illicit supply... it has kept me alive."
“When I look at their response to COVID, and how in basically a little over a year they developed multiple vaccines and over 40% of the population has received their first dose, it’s mind boggling we have been in the overdose crisis for five years.”

I believe everyone should have access to a safe supply of substances, regardless of your drug of choice, because no one deserves to die because they use drugs.

The government’s response to the overdose crisis says loud and clear they do not care about people who use drugs. When I look at their response to COVID, it’s how in basically a little over a year, they developed multiple vaccines and over 40% of the population has received their first dose. It’s mind boggling we have been in the overdose crisis for five years. Naloxone is great, but it really isn’t enough. 2020 has been the most fatal year to date & the BCCDC shipped the most Naloxone kits yet... so there is a disconnect somewhere. Maybe John Horgan & the other decision makers need to come spend some time with us on the front lines & experience the pain, trauma & loss we face day in & day out. Because I don’t know what else it is going to take to get the governments attention & see some real change in BC. Until then we will just wait to find out which one of our friends & loved ones has died.

I wrote this letter in memory & honour of every person who has died by overdose, & our friend who was found dead in his grandmother’s garage last week. He was a beautiful soul & will truly be missed. Rest easy my friend...

with love, Jessica Lamb
Meet people where they are at

“The only solution, I feel, is safer supply. Offer folks many options, in order to meet people where they are at. If we decriminalize all substances and make substance misuse a medical issue, not a criminal one, more people would get the care they need, instead of avoidable death sentences.”
To Whom it May Concern:

My name is Michael Knott & I live in Victoria, B.C. I have worked through the overdose crisis in many areas including parks & supportive housing outreach services, and have helped to distribute countless Naloxone kits since 2016.

I have witnessed firsthand the staggering and devastating effects of the overdose crisis throughout our communities and have also witnessed countless lives saved through the Naloxone distribution program. I have many friends, peers and family members where Naloxone saved them from immeasurable loss and heartache and want to congratulate the CDC as they hit their 1 million kits shipped milestone.

Although 1 million kits distributed is a massive achievement, the number of fatal and life-changing overdoses show no signs of slowing down in B.C., and are still continuing to rise. The fact that we are still seeing these numbers is abhorrent and simply unacceptable. We need radical changes and we need them now.

We have had many years to study and learn from other countries that have stepped up and saved lives through decriminalization and other health-led approaches addressing addiction and substance use. How many more years and how many more lives need to be lost before we begin creating permanent and viable solutions to our seemingly never-ending crisis here in Canada?

Safe supply is a start to addressing some of these issues but both are merely band-aids to a much larger problem. I personally don’t believe that we will ever start to see a significant decrease in overdose statistics until we start to look at safe supply realistically. Substance users need medical grade substances available NOW, in the manner that they use their substances. Offering low dose oral opiates and stimulants to a massive population that uses their substances largely via inhalation and I.V. is simply ridiculous and set up to fail. We need to cut through as much bureaucracy and red tape as quickly as we can to improve this and make medical grade substances available to all who use before we have multiple generations of lives lost throughout B.C.
“Substance use disorder isn’t a life someone chooses. And it’s not only the seriously addicted and homeless that are being affected. These are our family members, close friends, business associates that are dying.”

We can do better and we must. Substance use disorder isn’t a life someone chooses. And it’s not only the seriously addicted and homeless that are being affected. These are our family members, close friends, business associates, and fellow citizens that are dying.

I will forever be grateful to the CDC Naloxone distribution program and the lives it has saved. I count myself as very lucky and blessed to be one of them. But we can and must do more.

Wishing everyone strength and hope as we move forward,

Mike Knott
Solid Outreach Society
Victoria, B.C.
TO WHOM IT MAY CONCERN, MAY 14/21

FIVE YEARS LATER & WE ARE STILL WRITING THE SAME LETTERS ABOUT THE SAME PROBLEM. I HAVE LIVED & WORK IN THE DTES FOR 15 YRS, FIVE YEARS AGO MY JOB CHANGED DRastically WHEN FENTANYL HIT THE STREETS. I HAVE RESPONDED TO HUNDREDS OF OVERDOSES. ALTHOUGH I FEEL THANKFUL TO HAVE A SMALL TOOL LIKE NALOXONE TO HELP REVERSE AN OPIOID POISONING, THIS IS NOT SOMETHING TO CELEBRATE. NALOXONE IS LIKE PUTTING A ITTY BITTY BAND AID ON A CATAstrophic Wound. IF YOU LIVE IN THE DTES, NALOXONE IS LIKE A BARNACLE THAT GOES EVERYWHERE WITH YOU, JUST A CONSTANT REMINDER THAT AT ANY TURN YOU MAY FIND SOMEONE UNCONSCIOUS.

NALOXONE IS NOT A SOLUTION; WE NEED RADICAL CHANGE NOW. GIVE ALL SUBSTANCE USERS A SAFE SUPPLY OF THEIR CHOICE.

RAYNE VOYER.
END THE WAR ON DRUGS USERS!