



# Summary

## Synthesis and Analysis of the Literature and Findings from an Evaluation of Canada's *Good Samaritan Drug Overdose Act* in British Columbia

Maretzki, M., Xavier, J., & Buxton, JA.

### BACKGROUND

The Good Samaritan Drug Overdose Act (GSDOA) is a Canadian law. It protects people who witness or experience an overdose from charges related to simple possession of illicit substances for personal use if they call 9-1-1.

#### It was created to:

- Encourage someone witnessing an overdose event to call for help
- Reduce concerns about police involvement at the scene of an overdose.

#### It protects from:

Charges related to simple possession of illicit substances for personal use and violation of pre-trial release, probation order, conditional sentence, or parole related to simple possession of illicit substances.

#### It does not protect from charges like:

- Drug trafficking
- Outstanding warrants
- Violation of pre-trial release
- Probation order
- Conditional sentence, or parole from an offence other than simple possession of illicit substances.



BC Centre for Disease Control  
Provincial Health Services Authority



## LAW ENFORCEMENT

*Data collected from interviews*

### **Many officers had limited awareness and knowledge about the GSDOA:**

- Confusing GSDOA with general Good Samaritan Laws
- Believing it does not protect bystanders
- Lacking proper training about the GSDOA.

### **Responders' behaviours leading to people not calling 9-1-1:**

- Taking away drugs, running names, checking for weapons
- Tracking down people after an overdose
- Pursuing charges for warrants and drug trafficking
- Police using their discretion, leading to inconsistent behaviours at the scene of an overdose
- Discrimination and stigma
- Delayed paramedic response
- Paramedics requesting police presence.

## PEOPLE WHO USE DRUGS (PWUD)

*Data from the harm reduction client survey*

- Almost half of adults who use drugs are not aware of the GSDOA
- Adults who are aware of the GSDOA do not always fully understand when and to whom it applies.

### **People who use drugs were more aware of the GSDOA if they:**

- Accessed harm reduction sites/ services in the past six months
- Preferred injecting opioids (rather than smoking)
- Witnessed an opioid overdose in the past six months
- Identified as men (more aware than women and gender diverse participants).

“I don’t think that they should be there running people’s names at all. I think that the ambulance should be dealing with this. I don’t think police should be asking questions and running names. I don’t think they should. Not at that time.”



## PEOPLE AT RISK OF EXPERIENCING OR WITNESSING AN OVERDOSE

*Data collected from the GSDOA survey and interviews*

- Less than half of respondents were aware of the GSDOA
- Half of respondents correctly identified who the GSDOA applies to
- Adult respondents slightly more aware of the GSDOA than youth
- Adults and youth commonly heard of the GSDOA via harm reduction workers
- Some respondents believed they could not be arrested for:
  - An outstanding warrant unrelated to simple possession of illicit substances
  - Possession of a large amount of drugs or drug trafficking paraphernalia
  - Being in a 'red zone' in which they had previously received charges unrelated to simple possession of illicit substances.

People who use drugs were more aware of the GSDOA if they accessed harm reduction sites/services in the past six months.

**Close to 70% of respondents did not call because they felt able to manage an overdose event without help. Other reasons for not calling were connected to concerns due to:**

- Discrimination based on ethnicity
- Anti-Indigenous racism
- Police attending overdose events
- Parents/guardian becoming aware of substance use (for youth)
- Encountering threats of violence while trying to call 9-1-1 (for women)
- Negative interactions with first responders and law enforcement:
  - Uncompassionate
  - Stigmatizing
  - Discriminatory ways
- Police behaviour including:
  - Checking IDs
  - Red zone restrictions
  - Searches
  - Charges for warrants.

## PEOPLE ON RELEASE FROM CORRECTIONAL FACILITIES

*Data collected from surveys*

- Most people are aware of the GSDOA
- People aware of the GSDOA were willing to call 9-1-1.

**People were more aware of the GSDOA if they:**

- Perceived themselves at risk of an overdose
- Had received naloxone training
- Had been offered a Take Home Naloxone kit
- Owned a Take Home Naloxone kit.

## RECOMMENDATIONS

1. Increase awareness and understanding of the GSODA for PWUD in BC, with an emphasis on PWUD that do not routinely access harm reduction services. This could include a media campaign, posters and other knowledge translation materials with the input of PWLLE, and educational sessions for relevant stakeholders using jargon-free language that is accessible to this audience.
2. Address stigmatizing and discriminatory practices among police officers through reform to BC's Police Act.
3. Include additional training on harm reduction, trauma-informed practices and de-escalation for police officers and prioritize these trainings through BC's Police Act.
4. Expand legal protections offered by the GSODA federally and clearly define them. For example, consider extending legal protection for warrants and/or non-violent offenses for bystanders at the scene of an overdose.
5. Expand legislation similar to the BCEHS federally to reduce concerns around calling for medical aid during an overdose event across Canada.
6. Implement decriminalization federally, and expand safe supply programs, to further reduce overdose deaths by reducing stigma and providing an alternative to the toxic drug supply. In the absence of federal decriminalization, seek provincial exemptions.
7. Approach all policy change in collaboration with PWLLE, including PWUD who experience intersecting forms of marginalization (e.g. Indigenous, Black, People of Color, PWUD experiencing poverty and/or homelessness, LGBTQ2S+ PWUD). PWLLE should be given equitable opportunities for input and shared decision-making power.



March 2022

Download the full report at [towardtheheart.com/resource/gsdoa-policy-brief-report/open](https://towardtheheart.com/resource/gsdoa-policy-brief-report/open)

We would like to thank the individuals and groups who participated in informing this project through consultations, including: Professionals for Ethical Engagement of Peers and Peer-2-Peer members, Vancouver Area Network of Drug Users, and policy specialists from the BCCDC.

Funding for this project was received from the BC Ministry of Health; however funders had no involvement in the methods, analysis, and resulting publications.

Contact: Dr. Jane Buxton: [jane.buxton@bccdc.ca](mailto:jane.buxton@bccdc.ca)  
Jessica Xavier: [jessica.xavier@bccdc.ca](mailto:jessica.xavier@bccdc.ca)