



Police Officer's Attitudes, Knowledge and Implementation around the *Good Samaritan Drug Overdose Act*

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What is the *Good Samaritan Drug Overdose Act*?

THE GOOD SAMARITAN DRUG OVERDOSE ACT IS NOW LAW

THE LAW SAYS:

If you are at the scene of an overdose and you or someone else calls 911 to get medical assistance, **you are not to be charged with simple possession** (possession for your own personal use) of an illegal substance.

You are also **not to be charged for breach of probation or parole** relating to simple drug possession.



IF YOU SUSPECT AN OVERDOSE,

CALL 911

CALLING 911 SAVES LIVES

After calling 911, give **breaths** and **naloxone** if you have it.
Stay with the person until help arrives.



For more information, visit:

http://www.pivotallegal.org/good_samaritan_drug_overdose_act_rights_card

or:

<http://canada.ca/opioids>

September 14, 2017



BC Centre for Disease Control



THE GOOD SAMARITAN DRUG OVERDOSE ACT

RECEIVED ROYAL ASSENT ON MAY 4TH, 2017

This enactment amends the Controlled Drugs and Substances Act to exempt persons seeking emergency medical or law enforcement assistance for themselves or for others at an overdose from being charged for **simple possession** or for **violation of pre-trial release, probation order, conditional sentence, or parole related to simple possession**, if the evidence in support of that offence was obtained or discovered as a result of seeking assistance or remaining at the scene. This applies to any person at the scene upon the arrival of assistance, including the person who overdosed.



Please refer to Bill C-224 for details.



BC Centre for Disease Control

IF YOU SUSPECT AN OVERDOSE, CALL 911

STAY WITH THE PERSON UNTIL HELP ARRIVES

THE LAW **DOES** PROVIDE PROTECTION FROM CHARGES FOR:

Simple possession (personal use)

Violation of pre-trial release, probation order, conditional sentence, or parole related to simple possession

THE LAW **DOES NOT** PROVIDE PROTECTION FROM CHARGES FOR:

Selling illegal drugs (trafficking)

Offences other than drug possession

Any outstanding arrest warrants

Violation of pre-trial release, probation order, conditional sentence, or parole for an offence other than simple possession

Why did we need the *GSDOA*?



- Public health emergency declared in BC April 2016 due to an increase in opioid overdoses (BC Ministry of Health, 2016)
- Previous evidence suggests most overdoses occur in presence of bystanders (Martins et al 2015; Karamouzian et al., 2019)
- By-standers delay/don't call 911 at overdose events for fear of police involvement (Canadian Centre on Substance Abuse, 2017)
- To overcome this concern, the Federal *Good Samaritan Drug Overdose Act* was implemented in May 2017 (Government of Canada, 2019)

GSDOA evaluation project

Unlocking the Gates Program survey

- The Unlocking the Gates Peer Health Mentoring Program aims to support people in the first 3 days after release from prison. As part of this program, a survey is administered before release.
- Questions were added to assess knowledge of the GSDOA and access to naloxone.

Interviews with youth

- Youth between the ages of 16-24 years old will also be invited to participate in a more in-depth one-on-one interview over the phone

Online survey with youth

- To determine whether there are differences in youths' knowledge, and attitudes around the GSDOA, youth between the ages of 16-24 will be invited to complete a survey online.
- Foundry is a network of health & social service centres for young people, and will be supporting province-wide recruitment

Interviews with people who are at-risk of experiencing or witnessing an overdose

- People with living/lived experience of overdose and/or witnessing overdoses will be invited to participate in a one-on-one interview over the phone to share their experiences of overdose and calling 9-1-1 as well as their knowledge, understanding and attitudes around the GSDOA.



Take home naloxone (THN) administration form

- THN program provides overdose response training and kits containing naloxone. Administration forms are submitted after naloxone has been used. Data is entered and analysed to explore if 9-1-1 was called and, if not, why.
- Changes in trends before & after GSDOA implementation were examined.

Harm reduction client survey (HRCS)

- The HRCS is an annual survey assessing substance use trends, and the use of harm reduction supplies among clients accessing harm reduction supply distribution sites in B.C. Questions were added to assess clients' knowledge of the GSDOA

Key informant interviews with police officers

- 22 interviews have been conducted with municipal police officers in: West Vancouver, Vancouver, Victoria, Abbotsford and RCMP officers in: Prince George, Kelowna, Vernon, Campbell River
- Preliminary findings will be shared soon.
- Based on findings, educational materials will be developed and piloted with participating police departments

Surveys with people who are at-risk of experiencing or witnessing an overdose

- People picking up a Take Home Naloxone kit at THN sites were identified as being at risk of experiencing or witnessing an overdose.
- Clients will be invited to complete a survey about their experiences of overdose and calling 9-1-1 as well as their knowledge and attitudes towards the GSDOA. The survey will also be available online.

Our research question was:

What are police officer's views, knowledge and implementation around the *GSDOA* and responding to 9-1-1 calls?



Qualitative interviews with police officers across BC

Who did we hear from...

- 22 police officers
*n=13 municipal officers, n=9 Royal Canadian Mounted Police
n=6 metropolitan, n=9 large urban, n=7 medium urban*
- 19 male, 3 female
- Ages 30-51 years old
- Experience levels 1.5 - 28 years in policing



When did we conduct interviews?

- Between January-May 2020

What methods were used to analyze interviews?

- Thematic analysis
- Open-coding to build a coding framework



What were police officer's views of the GSDOA?

- There was no consensus among officers about whether the GSDOA has had the intended impact
- Officers understood the GSDOA as encouraging a medical vs. a law-enforcement approach to overdose

"It's a drug overdose. It's a medical issue only, and let the hospitals deal with it. There's no crime here. Police are not needed." (Metropolitan, Participant 03)

- Some police officers did not believe the GSDOA did enough to address the opioid crisis

"The petulant person in me says that sounds like that's something that's really good for a politician who's looking for a way to solve a problem that they don't actually have anything-- they don't have any concrete solutions." (Metropolitan, Participant 06)

What were police officer's knowledge of the GSDOA?

- The extent of police officers' knowledge of the GSDOA varied. Of those who were aware generally of the GSDOA, many officers could not clearly articulate its tenets or when and for whom it applies

“I know actually very little about this Good Samaritan thing. Like, I actually was just told kind of what it was all about by a few co-workers around here before-- when I got the email originally this morning.” (Large Urban, Participant 04)

- Several police officers reported hearing about the GSDOA via email and expressed concerns with the likelihood of overlooking an email.

“Probably this Act went out in some sort of email saying the law has now changed, make sure you know this. Which probably didn't have a whole lot of impact.” (Metropolitan, Participant 04)

Interpretation and use of discretion with the GSDOA

- Discretion (the ability to choose how, when, to what extent they enforce laws) was important in the implementation of the GSDOA. Many officers were in favor of police using a discretionary approach.

“The law tends to like to be grey ‘cause that’s how it works the best around interpretation... it leaves enough wiggle room on both sides. So I think that’s the way these sorts of laws should be developed, so I think that way it works well. It’s more up to the individual officer how they kind of see themselves applying those sorts of things.”
(Metropolitan, Participant 04)

- Police officers commonly reported that arrests for simple possession were rarely made, even before the GSDOA was implemented
- Police officers also questioned when the limits of what is considered an ‘overdose setting’ and when regular law enforcement applies.

“Yeah, I have a lot of discretion. And I know them all and I’m not concerned about finding them again.” (Large Urban, Participant 08)

Interpretation and use of discretion with the GSDOA: Drug trafficking

- Discretion was relevant in the context of drug trafficking arrests at overdose events in two ways: 1) the GSDOA does not extend legal protection to drug trafficking and thus police reported using their discretion to determine whether to investigate drug trafficking 2) determining threshold amounts for intent to traffic

“I mean, you know, we know who’s dealing down there and we catch them all the time anyway. And that’s not the time to talk to somebody about that.” (Large Urban, Participant 08)

“You know, so you look at what a serious offense is, like, you know, possession for the purpose of trafficking...how much drugs do you need to support that charge...you know, like, there’s lots of ways to work with that definition if you’re the kind of cop that wants to do that” (Metropolitan, Participant 04)

Other law enforcement activities at overdose events outside the scope of the *GSDOA*

- Police shared other law enforcement activities, other than arrests, that occur at overdose events (e.g. seizing all drugs, running names and checking identification, searching people...)

“We need to essentially identify those at scene, whether it’s in a public place, on the road, or in a house, confirm everybody’s identity, talk to, you know, the people that were present during the time, the witnesses, and get their accounts of the incident.” (Large Urban, Participant 07)

- A few police officers recognized that these activities potentially discourage people from calling 911 – undermining the *GSDOA*

Implications & Recommendations

- More *GSDOA* education is needed, through mediums other than email communication
- More research is needed to determine rates of arrests at overdose events before and after *GSDOA* implementation
- Discretion results in inconsistent applications of the *GSDOA* which could give rise to skepticism around the *GSDOA*'s ability to provide legal protection

Additional information & Study contacts

Findings are incorporated into an anti-stigma module:

https://towardtheheart.com/assets/wysiwyg/Module%205%20-%20experiential%20workers%20and%20other%20professionals_final.pdf

For more information about the study, visit:

<https://towardtheheart.com/research-projects>

Allied GSDOA presentations at LE & PH :

March 23, 2021 –

Factors associated with the awareness of the GSDOA among people who use drugs in BC, Canada

March 23, 2021 –

Take Home Naloxone Kits, Phone Ownership and Knowledge of the Good Samaritan Drug Overdose Act Among People Being Released from Correctional Facilities in British Columbia, Canada

Next steps:

Two manuscripts are underway

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