

Grand Rounds, June 8, 2021

The BC *Good Samaritan Drug Overdose Act* evaluation: Lack of awareness, limited protection, "But better than nothing"?

Presented by Jane Buxton and Jessica Xavier on behalf of GSDOA evaluation research team members. Funded by *BC Ministry of Health*







OUNDRY· HERE WELLNESS TAKES SHAPE



Presentation overview

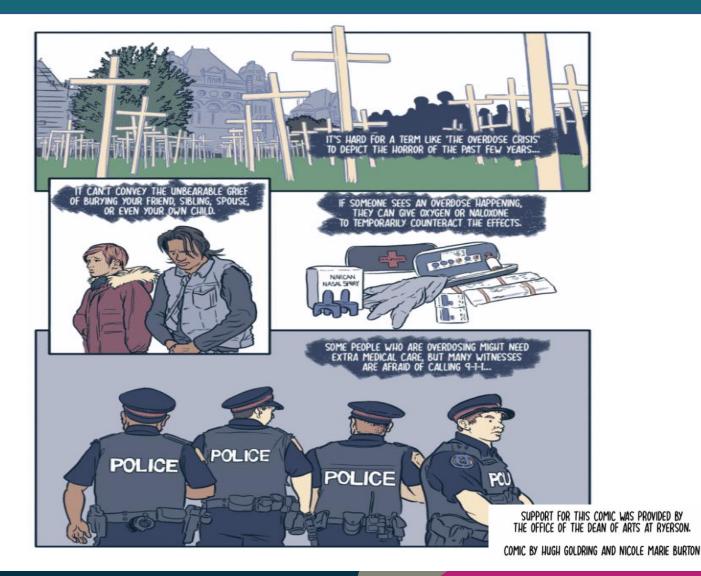
Background

Study Findings & Implications

- 1. Harm Reduction Client Survey (HRCS)
- 2. Good Samaritan Drug Overdose Act (GSDOA) survey
- 3. Interviews with adults at risk of experiencing or witnessing an overdose
- 4. Unlocking the Gates survey
- 5. Interviews with police officers

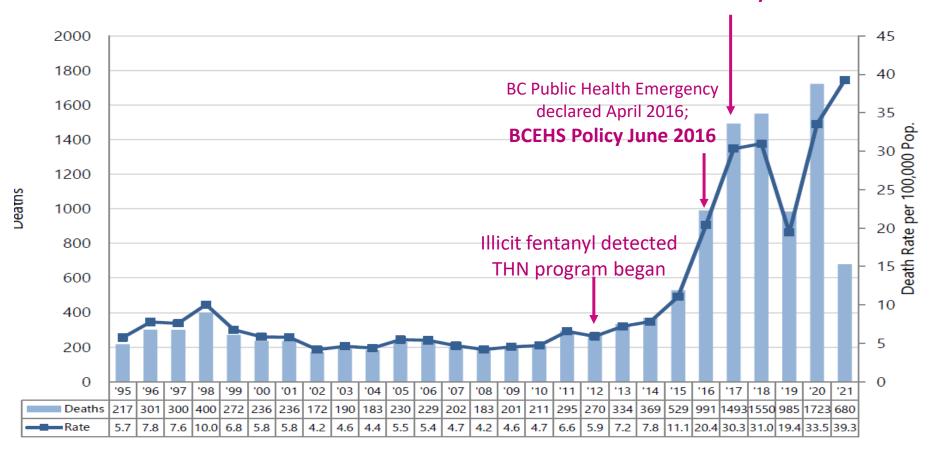
Knowledge Translation & Recommendations

Overdose reversal relies on timely bystander response



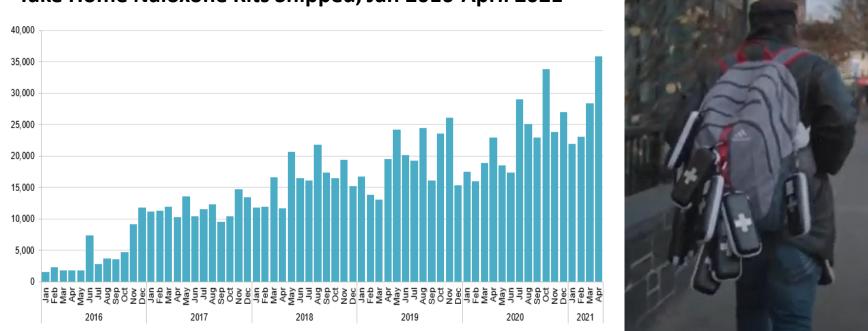
Preventable overdose deaths in BC, 1995-2021

GSDOA May 2017



Source: BC Coroners Service, Jun 1, 2021. Data to April 30, 2021

Take Home Naloxone is not enough



Take Home Naloxone Kits Shipped, Jan 2016-April 2021

Source: BC Take Home Naloxone Program, June 3, 2021; TTH

- Recently reached 1 million kits shipped, >3,000 deaths averted since Jan 1, 2015
- Overdose can recur after 30-90 minutes as naloxone effects wear off (Nguyen et al., 2012) risk of delayed health complications or other medical issues (CCENDU, 2017)
- Naloxone only reverses opioid overdoses (National Institute on Drug Abuse, 2019)
- Polysubstance use prevalent (uppers+ downers); benzodiazepines/etizolam in opioids

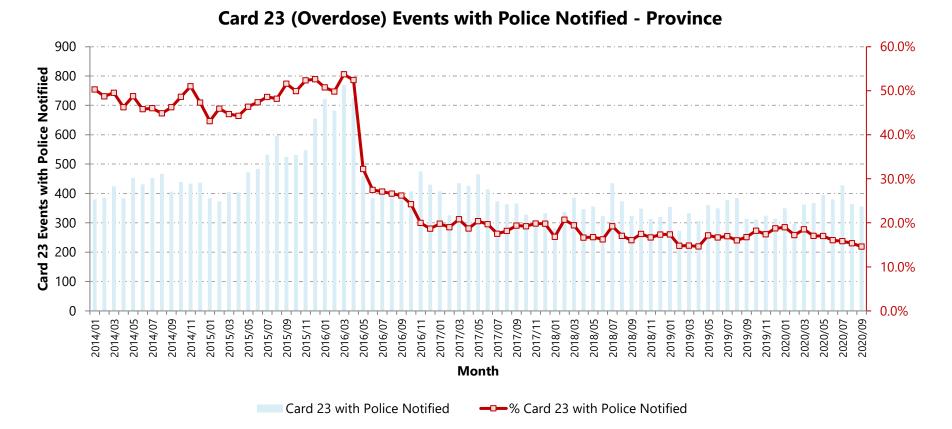
Source: Peer2Peer Project

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:
 - June 2016, BC Emergency Health Services policy introduced to not routinely inform police in the event of an overdose (Mehta et al., 2021)
 - May 2017, Federal Good Samaritan Drug Overdose Act (Government of Canada, 2019) enacted to provide some protection from arrest at the scene of an overdose

BC Emergency Health Service Policy



Monthly average overdose events where police notified: 48% Jan 2014-April 2016 (pre-policy) compared to 18% Aug 2016- Sep 2020 (post-policy)

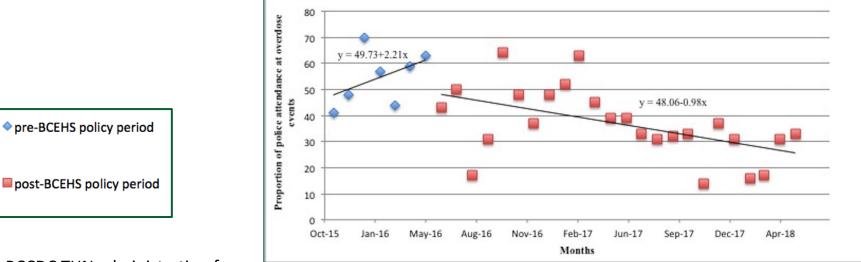
Source: BC Emergency Health Services

BC Emergency Health Service Policy

Reported police attendance at overdose events when 911 - called pre and post policy							
Health Authorities	Overdose events pre-policy		Overdose events in post-policy				
	(Nov 1, 2015-May 31, 2016)		(June 1, 2016 –May 31, 2018)				
	Total events	Police attend	Total events	Police attend			
	n, (%)	n, (%)	n, (%)	n <i>,</i> (%)			
Vancouver Coastal	63 (41.2%)	21 (33.3%)	110 (11.2%)	30 (27.3%)			
All other health authorities ^a	90 (58.8%)	64 (71.1%)	872 (88.8%)	342 (39.2%)			
Total	153 (100%)	85 (55.6%)	982 (100%)	372 (37.9%)			
^a Other health authorities include (Fraser, Interior, Island and Northern)							

Since 2006 VPD had policy of not attending ODs

Separate regression to model police attendance pre & post BCEHS policy



Source: BCCDC THN administration forms

What is the *Good Samaritan Drug Overdose Act*? Enacted May 2017, exemption from charges for simple possession

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.



IF YOU SUSPECT AN OVERDOSE, CALL 911

STAY WITH THE PERSON UNTIL HELP ARRIVES

THE LAW DOES PROVIDE PROTECTION FROM CHARGES FOR:	THE LAW DOES NOT PROVIDE PROTECTION FROM CHARGES FOR:		
Simple possession (personal use)	Selling illegal drugs (trafficking)		
Simple possession (personal use)	Offences other than drug possession		
Violation of pre-trial release, probation	Any outstanding arrest warrants		
order, conditional sentence, or parole related to simple possession	Violation of pre-trial release, probation order, conditional sentence, or parole for an offence other than simple possession		

Source: BCCDC Wallet cards and poster

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.pivotlegal.org/good_samaritan_drug_overdose_act_rights_card

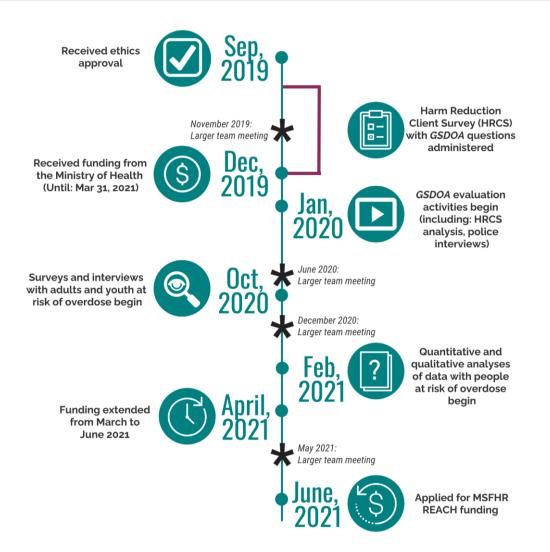


http://canada.ca/opioids September 14, 2017



GSDOA EVALUATION PROJECT

GSDOA multi-methods evaluation

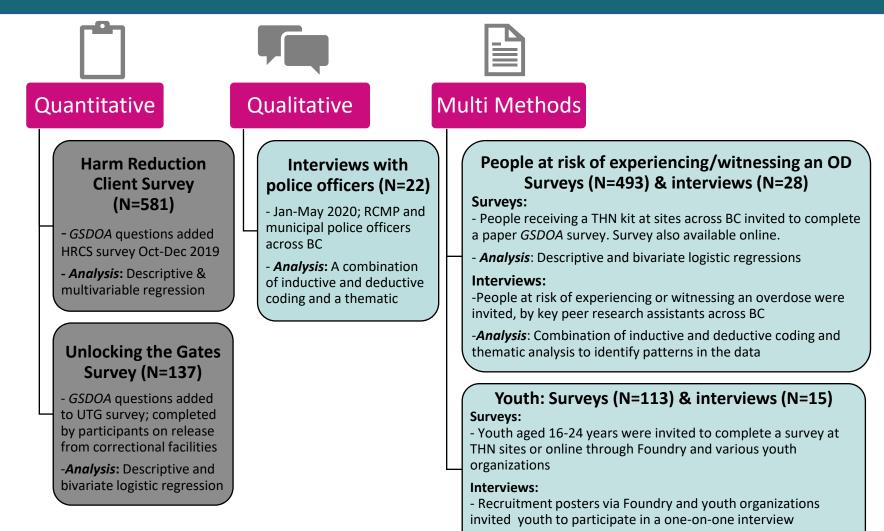


GSDOA evaluation - Study sites & partners

- Concerns were identified around youths' knowledge of the GSDOA
- Foundry and youth working group were identified as integral partners; we will continue to work together to ensure initiatives and knowledge translation products are youth appropriate.
- Identified 7 centers, in different health authorities, where Foundry sites existed as study sites
- Engaged enforcement colleagues (members of DOAP); additional contacts through public health & DOAP
- Previous relationships with Unlocking The Gates
- Surveys
 - HRCS HR supply distribution sites across the province (n=22) and HA coordinators
 - GSDOA Survey BCCDC THN sites (n= 19) and youth through Foundry
- Interviews: adults recruited through THN sites and peers ; youth through Foundry



GSDOA Evaluation Methods



Analysis: as above for adults

Harm Reduction Client and GSDOA Surveys

Our research questions were:

Are people at risk of experiencing or witnessing an overdose:

- Aware of the GSDOA?
- Know when and to whom GSDOA applies?

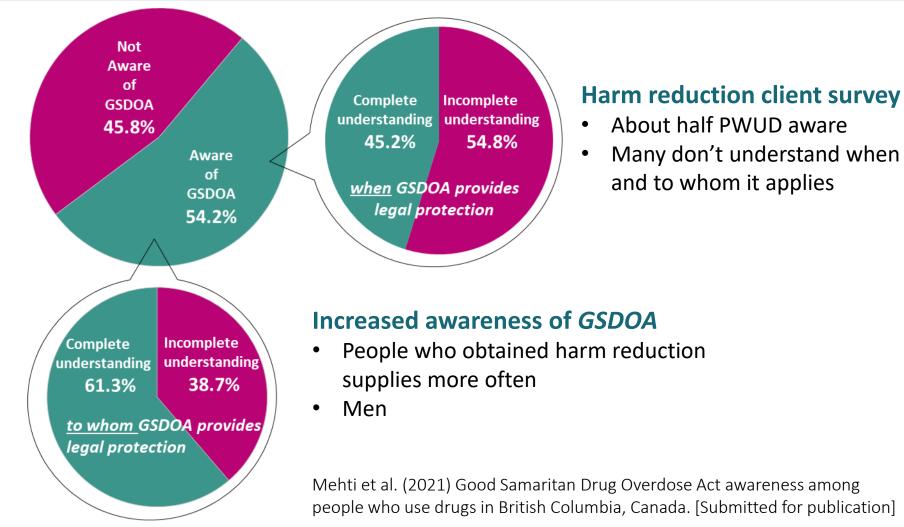
What factors are associated with *GSDOA* awareness and/or knowledge?



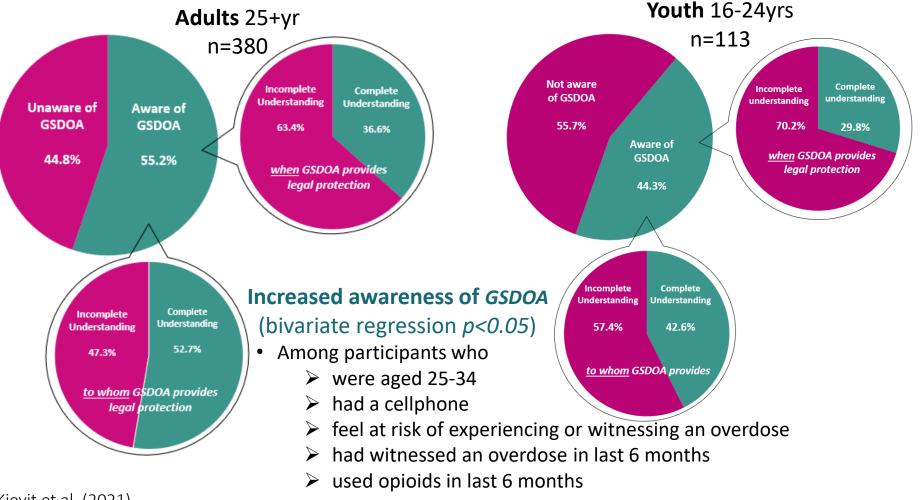
Illustration by Sophie McKenzie



Awareness and Understanding of *GSDOA*: Harm Reduction Client Survey (n=581)



Awareness and Understanding of GSDOA: GSDOA Survey (n= 493)



Kievit et al. (2021) [Unpublished data]

Lower GSDOA awareness among youth GSDOA Survey

Lower awareness of GSDOA in youth

16-24 years: 44% aware (25+ = 54%)
Of aware youth, complete understanding:
 43% to whom
 30% when



Support for this comic was provided by The office of the dean of Arts at Ryerson. Comic by hugh goldring and Nicole Marie Burton

Interviews with adults at risk of experiencing or witnessing an overdose (n=28)

Demographics of participants

- 60% identified as women
- Age range: 30-59 years old
- 32% self-identified as Indigenous
- 84% currently using drugs

What we heard



- Many participants who were aware of the *Act* thought *GSDOA* offered 'blanket' protection beyond simple possession, thus when arrests and investigations are made at overdose events, their trust in the *GSDOA* decreased
- Many participants perceived the *Act* was too limited in the protection it provides. Concerns emerged around warrants, low-level drug trafficking, confidentiality, housing evictions, and child apprehension
- Participants recommended:
 - that police stop attending all overdoses
 - the Act be expanded to offer legal protection at the scene of an overdose for criminal issues other than simple possession
- Analysis of youth interviews (n=15) in progress; to be continued [Unput

Xavier et al (2021) [Unpublished data]



Unlocking the Gates - Peer Health Mentoring Program - Survey

Our research questions were:

Among people being released from BC correctional facilities:

- 1) Are people aware of the GSDOA?
- 2) Do people have a Take Home Naloxone kit?
- 3) Do people have a cell phone?





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.











Overall 71% of UTG clients were aware of GSDOA on release (n=137)

Higher proportion of those who had heard of GSDOA:	Unadjusted Odds Ratio
Would call 911 if saw an overdose	27.87 (4.95, 524.29)
Had received Naloxone Training	3.51 (1.64, 7.67)
Had a Naloxone Kit*	5.17 (2.33, 12.15)
Were at risk of overdose	5.24 (2.28, 13.29)

**complete case; removed 4 with missing exposure responses (n=133).*

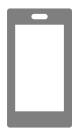
McLeod et al (2021). Knowledge of the Good Samaritan Drug Overdose Act and possession of a Take Home Naloxone kit among people recently released. [Accepted for publication]



THN kit & cell phone ownership on release

57% of UTG clients reported having a THN kit on release

72% of those at-risk of overdose had a THN kit on release



53% of UTG clients reported having a cell phone on release Participants were more likely to report they would call 9-1-1 if they owned a phone.



Implications & Recommendations

Summary UTG findings:

- 71% of UTG survey participants were aware of the GSDOA (higher than the HRCS (54%) and GSDOA (55%) survey findings)
- 28% of UTG participants who perceived themselves to be at risk of experiencing an overdose were released *without* a THN kit.
- $\,\circ\,$ 47% do not have phones on release
- On discussion with BC corrections healthcare correctional facility staff have an important role in education, but their awareness of GSDOA may be lacking and may need refresher re THN

Next steps:

- ✓ UTG mentors now have GSDOA wallet cards & THN kits to distribute to clients
- Explore ways of providing cell phones on release
- o GSDOA presentation is being created for training corrections staff
- Staff in correctional facilities to be offered refresher THN training

Interviews with police officers (n=22)



Our research question was:

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



Police officer's knowledge of the GSDOA?



 The extent of police officers' knowledge of the GSDOA varied. Of those who were generally aware 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 beforewhen 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



 Discretion with GSDOA (ability to choose how, when & to what extent to enforce laws) was seen as important and favored by many

"The law tends to like to be grey 'cause that's how it works the best ... it leaves enough wiggle room on both sides. So I think that's the way these sorts of laws should be developed, 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 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)

 Police officers commonly reported that arrests for simple possession were rarely made, even before the GSDOA was implemented

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



 Police shared other law enforcement activities 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

Xavier, J., Greer, A., Crabtree, A., Ferencz, S., Buxton, J. (2021). Knowledge of the Good Samaritan Drug Overdose Act Among Police Officers in BC: Findings From a Study Led by the BC Centre for Disease Control. Vancouver: BC Centre for Disease Control.

Xavier et al (2021) Police Officers' Knowledge, Understanding and Implementation of the Good Samaritan Drug Overdose Act in BC, Canada [Submitted for publication]

Implications & Recommendations



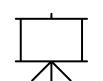
- GSDOA education is needed, other than email communication to ensure police officers are aware and knowledgeable
 - ✓ A plain-language report was created
 - ✓ A self-assessment Q and A
 - ✓ RCMP has created a GSDOA presentation to conduct training at roll call with access for refresher as needed
- Discretion results in inconsistent applications of the GSDOA which could give rise to skepticism around the GSDOA's ability to provide legal protection
- Law enforcement activities, outside the scope of the GSDOA, continue to be practiced by police officers at overdose events which may dissuade people from calling 9-1-1
 - □ There appear to be implementation challenges and limitations associated with the *GSDOA*. A policy analysis is underway and for further discussion

Knowledge translation completed & in progress

• Manuscripts: 1 accepted; 3 in peer review; 1 in progress

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- **Report** of police interview findings on Towards the Heart website. Report has been shared broadly with police, PWUD and advocacy groups.
- Stigma reduction training module was developed informed by Police interviews
- Summary of UTG survey findings is on Towards the Heart website
- A policy brief is being developed



- Findings have been presented at multi-disciplinary conferences:
 - BCCDC Research Week,
 - Canadian Public Health Association
 - Law Enforcement & Public Health Conferences

- THN sites (including BC corrections) reminded can order **GSDOA wallet cards**
- UTG mentors have GSDOA wallet cards to distribute to clients
- RCMP has created a GSDOA training presentation
- GSDOA presentation is being created for corrections staff
- Information about the GSDOA is being added to our THN training materials

Knowledge translation to be conducted

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- **Report and Manuscripts** of quantitative and qualitative analysis of GSDOA surveys and interviews with PWLLE /youth will be developed
 - Students: quant analysis (*Brad*); youth interviews (*Emma*)
- Effects of COVID on OD response from survey and interviews in review (Annie)



• **Policy analysis** (*Maxine*) will be shared with Ministry policy analysts and presented at decision-making tables



 Forums with peers, youth, police officers, research team members, health authority members, etc. will be held across the province to encourage dialogue and inform knowledge translation materials



 Informed by study findings and input from forums/convergences and supported by MMHA Partnerships & Engagement Branch - develop various engaging knowledge translation materials suitable for different audiences and affected groups, such as youth, people who use drugs, family members/public people on release from prison.

Summary study Findings & Recommendations

Recommendations

Lack of awareness of the GSDOA; many of those who are aware have incorrect understandings about when it applies

Ongoing concerns about police attending overdoses, despite BC EHS policy & *GSDOA*

> quarter of people at risk of
 experiencing an overdose are being
 released from corrections without a
 THN kit. THN training is associated
 with increased GSDOA awareness

Police implementation of GSDOA is affected by police knowledge of the *Act* and police discretion Develop engaging GSDOA knowledge translation initiatives to reach various audiences: people who use drugs, their family & friends, youth, people released from prison, general public and police officers

A critical policy analysis of the Act will highlight limitations and opportunities to improve it. Consider implications of GSDOA for decriminalization initiatives

Prioritize police non-attendance policies and address barriers to effective implementation

We would like to thank:

- The GSDOA evaluation advisory team/co-investigators
- Foundry and the youth working group
- Police officers who participated in and contributed to the study
- BC Emergency Health Services
- Peers who have been integral to data collection, advisory groups and reviewing findings
- All participants for their time and insights
- Qualitative analysis team members:

Alissa Greer, Alexis Crabtree, Sarah Ferencz, Bernie Pauly, Skye Barbic, Zahra Mamdani, Jackson Loyal, Emma Ackerman

• Quantitative analysis team members:

Kristi Papamihali, Amiti Mehta, Heather Palis, Amanda Slaunwhite, Max Ferguson, Brad Kievit

UTG – Sierra Williams, Kate McLeod, Mo Korchinski, Pam Young, Ruth Elwood, Provincial Correctional Health Services

Additional information & Study contacts jane.buxton@bccdc.ca & jessica.xavier@bccdc.ca

Resources

GSOA printable poster:

https://towardtheheart.com/resource/good-samaritan-act-poster/open

GSDOA printable wallet cards:

https://towardtheheart.com/resource/good-samaritan-cards/open

GSDOA test your knowledge quiz:

https://towardtheheart.com/resource/gsdoa-quiz-test-your-knowledge/open

GSDOA project overview:

https://towardtheheart.com/assets/wysiwyg/GSDOA%20Project%20Overview.pdf

Report: Findings from interviews with police:

<u>https://towardtheheart.com/resource/knowledge-of-the-good-samaritan-drug-overdose-act-among-police-officers-in-bc/open</u>

Report: Change in police attendance at overdoses following the BC EHS policy:

<u>https://towardtheheart.com/resource/police-attendance-at-an-overdose-event-bcehs-policy/open</u>

Summary of UTG survey findings:

https://towardtheheart.com/resource/gsdoa-and-utg-study-findings/open

References

- 1. BC Coroners Service (June 1, 2021). Illicit Drug Toxicity Deaths in BC, January 1, 2011 April, 30, 2021. <u>https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/illicit-drug.pdf</u>
- 2. Hugh Goldring & Nicole Marie Burton (2020). The Good Samaritan Drug Overdose Act: The good, the bad, and the ineffective. <u>https://johnhoward.ca/blog/saving-lives-but-facing-charges-the-good-samaritan-drug-overdose-act/</u>
- 3. BC Ministry of Health. (2016, April 14). *Provincial health officer declares public health emergency*. <u>https://news.gov.bc.ca/releases/2016hlth0026-000568</u>
- 4. Martins, S. S., Sampson, L., Cerdá, M., & Galea, S. (2015). Worldwide prevalence and trends in unintentional drug overdose: A systematic review of the literature. American Journal of Public Health, 105(11), e29–e49. https://doi.org/10.2105/AJPH.2015.302843.
- 5. Karamouzian, M., Kuo, M., Crabtree, A., & Buxton, J.A. Correlates of seeking emergency medical help in the event of an overdose in British Columbia, Canada: Findings from the Take Home Naloxone program. *International Journal of Drug Policy*, 71, 157-163. <u>https://doi.org/10.1016/j.drugpo.2019.01.006</u>
- 6. Canadian Centre on Substance Abuse. (2017, March). *CCEDNDU Bulletin Calling 911 in Drug Poisoning Situations*. <u>https://www.ccsa.ca/sites/default/files/2019-04/CCSA-CCENDU-Calling-911-Drug-Poisoning-2017-en.pdf</u>
- Mehta, A., Palis, H., Jennesen, S., Lilley, N., Slemko, R., Buxton, J. (March 2021). Change in police notification and police attendance after the BC Emergency Health Services introduced a policy to not routinely notify police of all overdose events. Vancouver, BC. BC Centre for Disease Control (BCCDC). <u>https://towardtheheart.com/resource/police-attendance-at-an-overdose-event-bcehs-policy/open</u>
- 8. Government of Canada. (2019). About the Good Samaritan Drug Overdose Act. <u>https://www.canada.ca/en/health-</u> canada/services/substance-use/problematic-prescription-drug-use/opioids/about-good-samaritan-drug-overdose-act.html
- 9. BC Take Home Naloxone Program (June, 2021). THN Kits shipped to sites per month through the BC Take Home Naloxone Program, Jan 2016-Apr 2021. <u>https://towardtheheart.com/resource/thn-kits-shipped-per-month/open</u>
- 10. Nguyen, T., Englin, E., Palecek, W., Wombwell, E. (2012). Use of naloxone for the management of opioid overdose. IOSR Journal of Pharmacy. 2(5), 8–11.
- 11. National Institute on Drug Abuse. Naloxone (2019) Naloxone Drug Facts. <u>https://www.drugabuse.gov/publications/drugfacts/naloxone</u>