

THE LIMITATIONS OF DECRIMINALIZATION AT OVERDOSE EVENTS: LESSONS FROM CANADA'S GOOD SAMARITAN DRUG OVERDOSE ACT (GSDOA) LX ADDICTIONS 2022



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We respectfully acknowledge that this work was conducted across the unceded, ancestral and traditional territories of more than 200 First Nations across what we call British Columbia; and that BCCDC is situated on the territories of the x^wməθk^wəy'əm (Musqueam), skwxwú7mesh (Squamish), and sel̓il'witulh (Tsleil-waututh) nations

CONFLICT OF INTEREST & FUNDING

- The authors declare no conflict of interest.
- Many authors were employed by BC Centre for Disease Control when the study occurred.
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BC Centre for Disease Control



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Health

BACKGROUND

In May 2017, Canada enacted the [Good Samaritan Drug Overdose Act \(GSDOA\)](#)

→ Removes penalties (decriminalizes) personal possession of a controlled substance at overdose events

Aim of the GSDOA: the Government of Canada states: *“to help to reduce fear of police attending overdose events and encourage people to help save a life.”* [call emergency medical services] ([Government of Canada, 2021](#))

Model details of the GSDOA:

- No threshold/amount to define personal possession vs. trafficking
- Protects everyone at the scene (no age defined)
- Does not apply to drug trafficking
- Does not apply to warrants
- Does not prohibit police from seizing illegal substances
- No diversion/alternative actions required

THE GOOD SAMARITAN DRUG OVERDOSE ACT EVALUATION

Objective: To assess the **awareness, understanding, attitudes, and experiences** of the GSDOA among (1) people at risk of having or witnessing an overdose

Context: British Columbia (B.C.), Canada, October 2019-March 2020

Data sources:

Quantitative/surveys

- Cross-sectional surveys with people (aged >16 years) at risk of experiencing or witnessing an overdose e.g. people who use drugs, youth, peer workers, family/friends of PWUD **(n=493)**^B

Qualitative interviews across BC

- Interviews with people (aged >16 years) at risk of experiencing or witnessing an overdose **(n=43)**^{A, D}
- Interviews with police officers **(n=22)**^C

FINDINGS FROM THE GSDOA EVALUATION

A

Journal of COMMUNITY SAFETY & WELL-BEING ORIGINAL RESEARCH

Good Samaritan Drug Overdose Act awareness among people who use drugs in British Columbia, Canada

Amiti Mehta,* Amina Moustaqim-Barrette,* Kristi Papamihali,* Jessica Xavier,* Brittany Graham,* Sierra Williams,* and Jane A. Buxton*[†]

B

Ackermann *et al.* Substance Abuse Treatment, Prevention, and Policy (2022) 17:42
<https://doi.org/10.1186/s13011-022-00472-4>

Substance Abuse Treatment, Prevention, and Policy

RESEARCH Open Access

Awareness and knowledge of the Good Samaritan Drug Overdose Act among people at risk of witnessing an overdose in British Columbia, Canada: a multi-methods cross sectional study

Emma Ackermann^{1†}, Bradley Kievit^{1†}, Jessica Xavier², Skye Barbic^{3,4,5}, Max Ferguson², Alissa Greer⁶, Jackson Loyal^{2,7}, Zahra Mamdani², Heather Palis^{2,8}, Bernie Pauly⁹, Amanda Slaunwhite^{1,2} and Jane A. Buxton^{1,2*}

E

Drugs education, prevention and policy

'We are the first responders': overdose response experiences and perspectives among peers in British Columbia

Zahra Mamdani, Jackson P. Loyal, Jessica Xavier, Bernadette Pauly, Emma Ackermann, Skye Barbic, Jane A. Buxton & Alissa Greer

C

Contents lists available at ScienceDirect

International Journal of Drug Policy

journal homepage: www.elsevier.com/locate/drugpo

Research paper

Police officers' knowledge, understanding and implementation of the Good Samaritan Drug Overdose Act in BC, Canada

Jessica Xavier^a, Alissa Greer^b, Alexis Crabtree^c, Sarah Ferencz^d, Jane A. Buxton^{a,c,*}

Contents lists available at ScienceDirect

International Journal of Drug Policy

journal homepage: www.elsevier.com/locate/drugpo

Research Paper

"There are solutions and I think we're still working in the problem": The limitations of decriminalization under the good Samaritan drug overdose act and lessons from an evaluation in British Columbia, Canada

Jessica Xavier^a, Alissa Greer^b, Bernadette Pauly^c, Jackson Loyal^a, Zahra Mamdani^a, Emma Ackermann^a, Skye Barbic^d, Jane A. Buxton^{e,a,*}

D

**FOCUS OF
TODAY'S
PRESENTATION**

What can we learn about decriminalization from the evaluation of the Good Samaritan Drug Overdose Act (GSDOA) in B.C.?

Findings:

1. Awareness and understanding of the GSDOA
2. Law vs. Practice
3. Limitations of the model

(I) AWARENESS AND UNDERSTANDING

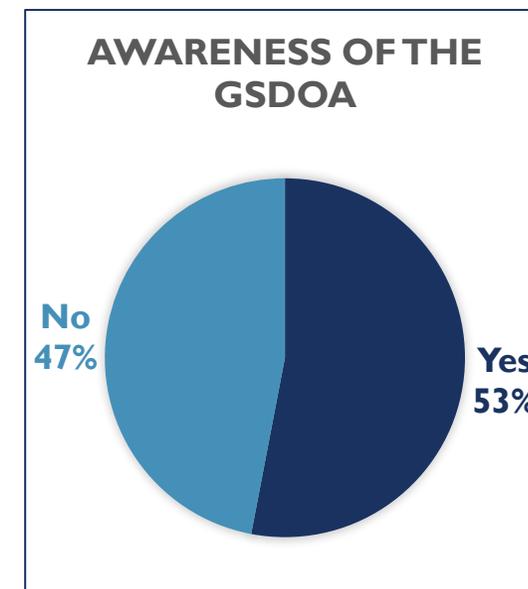
Poor awareness and understanding of the GSDOA among those it was intended for.

Awareness of the GSDOA^{A, B}

- Among the entire sample of 493, just over 50% reported being aware of the Act at all.
 - Among adults (19+ yrs): significantly greater awareness among males and those who frequently accessed services
 - Among young people (16-24 yrs): significantly greater awareness among youth with cell phones and recently witnessed overdose

Understanding of the GSDOA^{A, B}

- Of those aware (n=239):
 - 45% understood *the circumstances that it applied*
 - 61% understood *to whom it applied*



(I) AWARENESS AND UNDERSTANDING

Understanding of the GSDOA ^{C, D}

Adults and youth believed the GSDOA provided **greater protections** than it offered

*“The Good Samaritan Drug [Overdose] Act... **They’ll never charge you for anything** if you’re trying to save a life. You won’t be searched. You won’t be charged. You won’t be taken away.” (Adult, large metropolitan)*

Police officers believed it provided **less protections** than it offered

*“I knew that it would protect the user. **I didn’t know about, like, callers** and things like that.” (Police officer)*

(2) LAW VS. PRACTICE

Police officer interpretation of the GSODA and **police discretion** led to **inconsistent application** of the GSODA and unpredictable practices at overdose events. ^C

*“The law tends to be grey [...]. **It’s more up to the individual officer how they kind of see themselves applying those sorts of things.**” [referring to the GSODA] (Police officer)*

*“Every situation's going to be a little bit different, right. And some of this is– **it seems very clear in theory but then in practice is harder to define**” (Police officer)*

(2) LAW VS. PRACTICE

People who use drugs and those at risk of witnessing an overdose **distrusted** the protections offered by the Act and the police, based on history and uncertainties, impacting decision to call 9-1-1.^D

*“You know what that Act means? It’s something on paper to appease the public and appease parliament and whatnot. Because when it comes down to it, **it don’t mean jackshit** when a cop pulls up on you. [...] Overdose, **you got dope on you, you’re going to fucking jail.**” (Adult, Large Metropolitan)*

*“Over time it [the GSDOA] kind of like— **this novelty kind of wore off** because people were **still getting problems** because of it. Even though they stopped to help somebody... **they still got rolled [by police].**” (Adult, medium town)*

(3) LIMITATIONS OF THE GSDOA

The GSDOA provided limited protections in terms of *what* and *who* it applied to^D

No clear line between personal possession and trafficking left some vulnerable:

- (1) Low-level drug traffickers
- (2) Those needing to buy larger amounts for personal use
- (3) When using together to be safe

*“If I have a half ball on me, **I can probably get charged for something other than just personal use.** But that’s how I buy it usually.” (Adult, medium city)*

(3) LIMITATIONS OF THE GSDOA

Benefits of the GSDOA were inequitable ^D

*“The one girl was a working girl and the guy overdosed when they were doing it. And so she just left the guy to his own devices and took off. **Didn't call [9-1-1] because she didn't want the attention.**” (Adult, medium city).*

*“Cause being [a Person of Color] myself... When it comes down to, like, okay, we have to contact the cops...that's like last resort. That's not something you want to do. **Even given the Good Samaritan Act...you get treated differently.**” (youth, large city)*

Differences based on social marginalization and intersecting structural vulnerabilities

SUMMARY AND IMPLICATIONS

The GSODA was limited in terms of when and how it is applied, the extent to which it's been implemented and, therefore, the degree to which it meets its aim, or decriminalizes drugs.

What are the policy lessons learned and implications for B.C. (and other jurisdiction's) decriminalization?

Soon after doing this research, in June 2022, Health Canada granted the province of BC a 3-year exemption from the CDSA, decriminalizing personal possession of certain drugs (cumulative <2.5g threshold) for adults. No diversion or other penalties.

3-year exemption: January 31, 2023 - 2026



Canada to decriminalize some drugs in British Columbia for three years

Policy aims to stem record number of overdose deaths by easing a fear of arrest by those who need help



5 LESSONS LEARNED FROM THE GSDOA

What are the policy lessons learned and implications for B.C. (and other jurisdiction's) decriminalization?

1. Implementation matters:

Drug laws and policies, including decriminalization, are only as good as knowledge/awareness of them.

2. Day-to-day policing practices shapes the 'success' of drug policies:

The application of the law is not always applied or put into practice as it was intended.

3. The application of the law is not applied or experienced equally:

PWUD and the way they use them are diverse; laws are not inherently designed to be applied equitably

4. The details of decriminalization matter:

The model features of decriminalization can undermine the aim of the policy, e.g. the threshold amount

5. Decriminalization is not enough to address the OD crisis:

If the aim is to reduce overdose deaths, alternative reforms are needed.

THANK YOU

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