

RESEARCH ARTICLE/ARAŞTIRMA MAKALESİ

Success or failure? Vancouver's response to the overdose crisis

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Abstract

Addiction is a significant public health issue in Canada, with far-reaching impacts on individuals, families, and communities. In Vancouver, fentanyl addiction stands out as one of the most common and pressing challenges. Fentanyl, an opioid notorious by its street name "down," presents grave risks to users. Motivational interviewing therapy emerges as a widely employed approach for addiction treatment, fostering a client-centered relationship conducive to addressing individualized needs effectively. However, the success of motivational therapy hinges on the readiness of clients for change. This study aims to delineate the scope of addiction issues in Vancouver, Canada, particularly concerning fentanyl addiction. The study aims to highlight the undeniable effects of the fentanyl crisis in Vancouver and the approaches frontline workers need to take by examining field studies in the literature and conducting an interview with a frontline worker in addiction services. By exploring the effects of motivational interviewing therapy, the study seeks to elucidate its benefits and limitations in mitigating the acute physical and emotional distress associated with fentanyl use. Drawing insights from frontline experiences, there is a need for practical guidance on further enhancing addiction treatment approaches, with a focus on improving therapeutic efficacy and responsiveness to the evolving needs of individuals affected by fentanyl addiction. The prevailing system often assesses individuals primarily through a productivity lens, neglecting their inherent humanity. Therefore, a shift towards a more holistic, long-term approach is imperative to address the root causes of addiction effectively.

Keywords: Addiction, Canada, Motivational Therapy, Community

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1. INTRODUCTION

1.1. Fentanyl

Fentanyl, a potent synthetic opioid, has emerged as a major public health concern in recent years. Originally developed for pain management in medical settings, fentanyl is around 50 to 100 times more toxic than morphine, which makes the risk of accidental overdose higher. Fentanyl has medical uses and can be prescribed by a physician to help control severe pain, but in recent years it is also being produced in illegal labs and sold on the streets, often mixed with other drugs (such as heroin, cocaine, and others). (Government of British Columbia, 2024). In the illicit drug market, fentanyl is frequently mixed with other substances, as mentioned above and without the user's knowledge this can significantly increase the risk of overdose. The rise of fentanyl has been particularly alarming due to its role in the ongoing opioid epidemic. One of the critical advantages for traffickers is fentanyl's potency. Because fentanyl is so much stronger than other opioids, a much smaller quantity is needed to achieve the desired effect. This allows traffickers to transport fentanyl in smaller, more concealable packages, reducing the risk of detection. For example, a lethal dose of fentanyl can be as small as two milligrams, which is equivalent to just a few grains of salt (Moloney & Chaber, 2024). This compactness facilitates easier smuggling across borders and within domestic markets. The consequences of fentanyl misuse are dire, with a significant spike in overdose deaths observed wherever the drug becomes prevalent. The combination of low production costs, high potency, and ease of concealment has made fentanyl a dominant force in the illegal drug market, posing significant challenges for law enforcement and public health officials (Evans-Brown & Sedefov, 2018).

1.2. Addiction To Fentanyl in Vancouver

Vancouver, particularly its downtown eastside (DTES), has become an epicenter of the fentanyl crisis in Canada. The DTES is one of the most economically deprived areas in the country, marked by high rates of homelessness, unemployment, and substance abuse. The community has long struggled with addiction

issues, but the introduction of fentanyl has exacerbated the situation dramatically. The availability of fentanyl in the DTES has led to an increase in both the frequency and severity of overdoses, straining local healthcare and emergency response systems. In 2019, over 70,000 Americans succumbed to drug-related overdoses, with nearly 50,000 of these cases involving opioids, which translates to a rate of 15.5 per 100,000 people (Subramaniam et al., 2023). This statistic underscores the widespread impact of the opioid crisis, with fentanyl being a significant contributor to these alarming figures. While these numbers are specific to the United States, they reflect a broader trend that is also evident in Canada and particularly in British Columbia. In British Columbia, the key driver of the rise in overdose fatalities is fentanyl, a highly potent synthetic opioid that has contaminated the illicit drug supply. The province has seen a dramatic increase in overdose deaths due to fentanyl, as highlighted by government sources (Government of British Columbia, 2024). The contamination of the drug supply with fentanyl has made substance use increasingly hazardous, leading to a public health crisis of unprecedented proportions. Addiction to fentanyl is a complex issue influenced by various socio-economic factors. Many individuals in the DTES face significant barriers to accessing health care and social services, which complicates efforts to address addiction. The stigma associated with drug use, along with mental health issues and a lack of stable housing, further exacerbates the challenges faced by those attempting to recover from addiction. Fentanyl's high potential for addiction and overdose has turned the DTES into a critical battleground in the fight against the opioid crisis.

1.3. Overdose: A Leading Cause of Death

The rise in fentanyl use has contributed to drug overdose becoming a leading cause of death in many parts of Canada, including Vancouver. Unregulated drug toxicity is the leading cause of death in British Columbia for persons aged 10 to 59, accounting for more deaths than homicides, suicides, accidents, and natural diseases combined (Government of British Columbia, 2024). In British Columbia alone, thousands

of people have died from overdoses, with fentanyl being a major contributing factor. The province declared a public health emergency in 2016 in response to the escalating number of overdose deaths, highlighting the severity of the crisis (Government of British Columbia, 2024). The public health impact of the fentanyl crisis extends beyond mortality rates. Non-fatal overdoses can result in long-term health complications, including brain damage and other serious physical injuries (Ferguson et al., 2023). The widespread availability of naloxone, an opioid antagonist that can reverse the effects of an overdose, has been a crucial tool in reducing fatalities. However, the root causes of addiction and the pervasive presence of fentanyl in the drug supply continue to drive the high rates of overdose.

1.4. Government's Approach to Fentanyl Crisis in Vancouver

The Canadian government, along with provincial and local authorities in British Columbia, has implemented various strategies to combat the fentanyl crisis. These measures include harm reduction approaches, such as supervised injection sites and the distribution of naloxone kits. Supervised injection sites, like Vancouver's Insite, provide a safe environment for individuals to use drugs under medical supervision, which can prevent overdose deaths and connect users with health services. In addition to harm reduction, efforts have been made to increase access to treatment and support services. This includes expanding the availability of opioid agonist therapies (OAT) like methadone and buprenorphine, which help to reduce cravings and withdrawal symptoms in individuals with opioid use disorder (Mannaioni & Lugoboni, 2023). The government has also invested in public awareness campaigns to educate the public about the dangers of fentanyl and the importance of seeking help for addiction. Efforts to disrupt the supply chain of fentanyl involve collaboration with international partners to address the importation of the substance and its precursors. However, the approach to the fentanyl crisis remains multifaceted, requiring ongoing adaptation and cooperation between

healthcare providers, social services, and law enforcement agencies.

1.5. Effective Therapeutic Approach of Fentanyl Addiction Treatment: Motivational Interviewing

One promising approach to treating fentanyl addiction is motivational interviewing (MI), a client-centered, directive method designed to enhance an individual's motivation to change. Developed by William R. Miller and Stephen Rollnick in the 1980s, MI is based on principles of empathy, collaboration, and respect for the client's autonomy. It aims to resolve ambivalence about change by helping individuals explore and articulate their reasons for and against substance use (Noonan & Moyers, 1997). MI employs techniques such as open-ended questions, affirmations, reflective listening, and summarizing (OARS) to foster a supportive and non-judgmental dialogue (Interviewing, M., 2013). This approach helps clients to identify their own motivations for change, rather than imposing external reasons. By focusing on the individual's intrinsic motivations, MI can enhance engagement in treatment and support long-term recovery. Research has demonstrated the effectiveness of MI in various settings, including the treatment of substance use disorders (Noonan & Moyers, 1997). In the context of fentanyl addiction, MI's flexible and empathetic approach is particularly valuable, given the complex and often resistant nature of opioid use disorders.

2. METHOD

2.1. Purpose

This paper explores the application of motivational interviewing techniques in supporting individuals with fentanyl addiction in Vancouver, specifically focusing on the experiences of an outreach worker in the downtown eastside. Through an in-depth interview, we aim to gain insights into the practical challenges and successes of implementing MI in this context. The findings from this study seek to provide actionable recommendations for enhancing addiction treatment programs and

supporting recovery in communities affected by the fentanyl crisis.

This is a qualitative study. Information was collected using purposeful sampling and through semi-structured, in-depth interviews.

2.2. Subject

The interview was conducted with an outreach worker who has been working in the Downtown Eastside for more than three years. He has been working as a part of an overdose outreach team that uses opioid antagonist treatment and has managed more than 20 cases. The inclusion criteria for participants were professionals who work directly, both one-on-one and in groups, with individuals dealing with fentanyl addiction in Vancouver's Downtown Eastside of Vancouver. The selection was voluntarily based.

2.3. Data Collection Method -Interview

The data was collected through semi-structured, in-depth interviews. Interview lasted approximately 120 minutes, allowing sufficient time for the interviewee to elaborate on his experience and perspective. The interview was conducted in a quiet space where the privacy of the interview was assured. Before the interview, the interviewee was briefed on the study's objectives and provided informed consent. The interview was audio-recorded with the participant's permission to ensure accurate data capture. Interviews were audiotaped, transcribed, and analyzed according to the methods of framework analysis (Ritchie & Spencer, 1994).

The main issues covered in the interview are fentanyl addiction in Vancouver, the government's approach/organization's approach to the fentanyl crisis in Vancouver, the impact of motivational interviewing therapy on clients, its long-term and short-term impact, and future steps. The interview questions were compiled using main and general questions from various studies as well as a review of related texts. The interviewee was asked about his experiences, feelings, and perceptions of the fentanyl crisis in DTES, Vancouver, and the impact of motivational interviewing as a therapeutic

approach to heal addicted individuals. Both the interviewer and note taker were professionals who work with individuals with addiction problems in Vancouver. After the interview, the written transcript was reread several times by the interviewer.

2.4. Interview Questions

Questions Structured As Follows :

1. Demographic Info of The Participant
2. Role (responsibilities)
3. Working Location
4. Interaction with Clients
 - a. Technique that is used (motivational interviewing)
5. Advantages
6. Disadvantages
7. Different effects of motivational interviewing on different clients (clients who use fentanyl)
8. Fentanyl addiction in Vancouver
9. Approaches to the addiction crisis in Vancouver
10. Solutions for the Fentanyl Crisis In Vancouver
11. Future steps that need to be taken in order to prevent the ongoing crisis in Vancouver

The interview questions were open-ended, allowing the interviewee to express their opinions freely and without any filters.

2.5. Data Analysis

The data analysis involved several systematic steps. First, the interview was transcribed verbatim to ensure accuracy. Researchers read through the transcripts multiple times to identify recurring themes. These themes were then organized into broader categories to capture the nuanced experiences and perspectives of the interviewee.

3. FINDINGS

The recurring themes in the interview surrounded person-centered and trauma-informed approaches, isolation and lack of support for basic needs.

3.1. Fentanyl Addiction in Vancouver

One of the primary study findings is that fentanyl-detected illicit drug toxicity deaths has been increasing in Vancouver year by year (BC Coroners Service, 2022). As a recurring theme, significantly increasing isolation was highlighted by the interviewee as one of the major reasons for the fentanyl crisis in Vancouver. For countless years having this type of isolation made it difficult for people to seek help and look for solutions to their problems associated with drug use. Many people don't have healthy coping methods and can't deal with the distress of being lonely. Intergenerational trauma was the second reason that was highlighted as a cause of significant fentanyl use in Vancouver. Many individuals, especially indigenous people have had significant past and current trauma that has impacted generations of families. The stigma Indigenous people endure by some groups in society, who cast them as "outsiders" of British Columbia continues to affect this population negatively. There are a number of negative stereotypes associated with Indigenous people, including assumptions about the pervasiveness and causes of alcohol and drug addiction, unemployment, and violence (Backhouse, 1999; de Leeuw, Kobayashi, & Cameron, 2011). Colonialism and significant socio-economic gaps are the other two reasons mentioned, as many individuals use fentanyl as a temporary escape route from their problems, offering a brief sense of relief and pleasure.

3.2. Motivational Interviewing

"There is care because of the circumstances people are living in. Harsh conditions and stigmatization bring people together."

Lots of people die every single day in the Downtown East Side of Vancouver, the interviewee said. According to the interviewee, most of the residents of the area spend their

time in this area referred to as 100 Block or the Downtown East Side which they call "home" and have "street families including street moms". Street mothers are primarily women affected by addiction who take on the role of a mother for many youth who have left their homes or have been rejected by their families because of their addiction problems. In other words, the Downtown Eastside has become a community, rather than just a street where people try to survive, despite all the political and social challenges they are facing. Motivational interviewing (MI) provides a more open non-judgemental positive attitude towards individuals who are using drugs actively. The main purpose of MI is to support individuals in finding their motivations for seeking treatment and that way, they can become productive members of society again. An interesting observation shared was that many DTES community members were able to make intuitive observations to distinguish who displays genuine and heart-centered support instead of having a disingenuous and forced positive attitude towards them. That's why a person-centered and trauma-informed approach combined with motivational interviewing would be the most effective way to connect with clients.

The challenges of this approach surround professionals having to acknowledge and accept the baby steps of clients throughout the healing process. Some clients are in active psychosis due to drug use and mental health challenges and with the lack of services offered, professionals may feel that they have to start all over again, even after there has been significant progress. Even though motivational interviewing therapy is an effective approach, it requires patience, compassion, and a non-judgmental understanding from all professionals.

The short-term effect of MI can be summarized as clients feeling like they have someone who cares about them, listens to them, backs them up when needed, and advocates for them. For individuals going through intergenerational trauma and abandonment, in addition to isolation and stigmatization, it is a milestone to feel cared for whereas the long-term effect of MI is the component of positive reinforcement that comes with a trust-based connection between

professional and client. Positive reinforcement supports clients to take the necessary steps to complete the required tasks in the healing process.

3.3. Approaches

3.3.1. Government's Approach

The interviewee summarized the government's approach to the ongoing crisis with one sentence: "The government doesn't know what to do." The government decriminalized drugs on Jan 31, 2023 and then re-criminalized on May 7, 2024 (Government BC,2024). Ottawa Approved B.C.'s Request to Recriminalize Hard Drugs (CPAC,2024). One of the predictions is that the government might be too scared to lose power to do what is right. If they decriminalize, there is a potential that they will lose the upcoming elections. On the other hand, the government is pouring funding into quite a few overdose prevention organizations, harm reduction supplies and safer consumption sites. However, many individuals continue to struggle with psycho-social problems, moving from one unstable housing situation on the DTES to another. This inconsistency in policy and the lack of tangible improvements highlight the complexity and severity of the ongoing crisis, leaving the government at a crossroads on how to effectively manage it.

3.3.2. Organization's Approach

According to interviewee, when working with organizations on the DTES, employees have to adhere to certain standards and values. Historically, there have been a lot of organizations and community activism. However, the drug crisis along with the Vancouver housing crisis has been steadily increasing over the years. An example from the interview that is able to explain this situation with more clarity, is that there are many people who have nowhere to go and organizations offer them housing to stay for a period of time. After certain changes in the board of organizations' directors, it becomes more about the profit and image than prioritizing the basic needs of individuals who are barely surviving on the streets.

4. SOLUTIONS AND FUTURE STEPS

"You are working with individuals, fully aware that they may not survive beyond four years. Despite our efforts to improve their daily lives, we lack the necessary tools to make a significant impact. Our ultimate goal is to keep them alive."

It is crucial to prioritize meeting people's basic needs. As the interviewee described, "Housing people in clean, nice spaces offers a way out of this lifestyle." Implementing rent freezes prevents rents from increasing to unpredictable levels that could force people onto the streets, drastically altering their lives in a negative way. Most importantly, providing sufficient support, compassion, and understanding helps individuals feel as "human" as the rest of society. Another highlight of the interview was the interviewee's belief that, despite all the challenges, they can make a positive impact on an individual's life. Lastly, the interviewee adds that despite the exhaustion he feels, he and the rest of the outreach workers who care about the DTES community will continue to fight against stigmatization and work tirelessly to keep the community safe and alive.

5. RESULTS

The results of the semi-structured in-depth interview revealed several key themes and insights. Participants consistently highlighted the multifaceted challenges faced in combating the fentanyl crisis, including the pervasive stigma associated with fentanyl addiction and the systemic barriers to accessing effective treatment. The interviewee emphasized the critical role of community support and the need for comprehensive, empathetic approaches to intervention, such as motivational interviewing therapy. The interview also underscored the need and importance of funding and policy support from government officials to sustain outreach efforts and improve outcomes. Overall, the qualitative data provided a nuanced understanding of the personal and societal impacts of the fentanyl epidemic, revealing both areas of progress and persistent gaps in the current response strategies.

6. DISCUSSION

The primary results of the study indicate that the fentanyl crisis is not only negatively affecting the lives of addicted individuals but also impacting society as a whole.

As an outreach worker spending most of his time in the DTES, the anticipated disaster of a collapsing society due to drugs is starkly evident. However, to a Vancouver resident preoccupied with daily responsibilities, this disaster may seem like nothing more than a dystopian scenario. The stark contrast between these perspectives highlights the urgent need for broader awareness and understanding. Bridging this gap is essential for mobilizing collective action and fostering empathy, ultimately leading to more effective solutions and support for the affected community. Without this awareness, the crisis will continue to worsen, silently affecting countless lives.

Another important outcome of this study is that despite all the funding provided for the DTES, there is still a significant increase in fentanyl use. These results have led us to question the impact of the current work in the DTES, the approach to the community, and the stigmatization surrounding it. According to the literature and the results of this study, motivational interviewing therapy is one of the most effective ways of connecting with clients due to its non-judgmental, empathetic approach. Although it requires dedication, resilience, and persistence from professionals, it remains one of the most effective methods for achieving both short- and long-term healing for clients.

7. LIMITATIONS OF THE STUDY

The study acknowledges potential limitations, including the small sample size and the reliance on the self-reported data, which may be subject to recall bias or social desirability bias. These limitations were mitigated by creating a non-judgmental interview environment.

8. CONCLUSION

Our findings indicate that despite a high level of fentanyl risk knowledge, many users are not aware of the high risk of having a fentanyl overdose. According to the interviewee's response, there is a need to improve overdose prevention efforts and ensure a safe drug supply supported by the government.

Future studies can include the perspectives of government officials who provide grants and funding to fight fentanyl drug addiction. Discussing the fentanyl crisis in Vancouver and the impact of motivational interviewing therapy from different angles, by providing safe spaces for various voices, would offer an in-depth understanding of the ongoing fentanyl crisis. Additionally, it would be beneficial to examine the effectiveness of current government policies and their implementation, as well as the role of community-based organizations in mitigating this crisis. This comprehensive approach can help identify gaps and develop more targeted strategies to address the issue effectively.

Declaration of Conflicting Interests

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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