



**Decriminalization
Report to Health Canada
February – October 2023**

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Ministry of
Mental Health
and Addictions

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1. Introduction

As part of the subsection 56(1) exemption granted under the *Controlled Drugs and Substances Act (CDSA)* by Health Canada (“decriminalization”), BC is required to produce quarterly reporting on implementation and early outcomes. This data report provides insight into select health service utilization and law enforcement indicators. Health service utilization indicators include data up to November 2023. Law enforcement indicators are from data from the first nine months of decriminalization (February 2023 to October 2023).

Harms of Criminalization

Substance use is criminalized in various ways that negatively impact PWUD. Forms of criminalization include formal police interactions (offences), police seizure of drugs, arrests, criminal charges, and convictions. A significant and growing body of research shows that these forms of criminalization do little to deter drug use and instead perpetuate harms to PWUD.^{i,ii,iii,iv,v} Interactions with police may deter PWUD from seeking emergency services or calling for help during overdose situations. Being arrested, charged, or convicted of simple possession negatively impacts an individual’s ability to seek and hold employment and housing. Drug seizures are well documented to have negative impacts on the health of PWUD.

Research demonstrates that drug seizures¹:

- Are associated with increased overdose risk. Studies from the US and Vancouver found an increase in overdose events following drug seizure.^{vi,vii,viii,ix}
- Prevent people from accessing life-saving services, from calling police in unsafe situations, and from calling emergency services during overdoses.^{ii,x}
- Increase harms experienced by PWUD by putting them in unsafe situations to replace their supply (e.g., drug debts, property theft, or sex work).^{i,ii,xi}
- Disproportionately impact equity seeking groups (i.e., Indigenous and other racialized groups, unhoused individuals, people engaged in sex work).^{i,ii,vi}

¹ See Appendix A: Synthesis of Key Evidence for a synthesis of harms associated with the criminalization of substance use.

National Policy Landscape

In recognition of this emerging evidence, governments and organizations across Canada and globally have pursued measures to reduce the harms of criminalization and recognize substance use as a health issue. Key examples of this include:

- In 2006, Vancouver Police Department adopted a policy that provides officers with a broad range of discretion when dealing with possession of illegal drugs. The policy directs police officers to consider an individual's behaviour and risks to public safety when deciding to recommend a criminal charge.
- In 2020, the Public Prosecution Service of Canada established Guideline 5.13 that recognizes drug possession as a health-related issue and requires prosecutors to consider alternatives to charges unless there are serious manifestations of harm (e.g., risk to the safety or wellbeing of children or young persons).
- In 2022, the Government of Canada introduced amendments to the CDSA. Under the new section 10.2, police officers must consider pre-diversion measures, including whether it would be preferable to take no further action, to warn the individual, or with consent of the individual, refer them to a program/service provider that could assist the individual when attending to an alleged possession offence.

Decriminalization in BC aligns with these broader national trends. It aims to shift people who use drugs away from the criminal justice system and towards health and social supports.

Current Trends in Toxic Drug Crisis in BC

MMHA, the BC Centre for Disease Control (BCCDC) and other partners continue to regularly monitor health outcomes and drug toxicology indicators as part of BC's overall surveillance of the toxic drug crisis. While these indicators are highly dependent on external factors (e.g., the increase in illegal drug toxicity), they provide additional context for understanding the early outcomes of decriminalization.

As of November 2023, health outcomes and drug toxicity indicators remain stable since decriminalization:

- 2023 marks a tragic record year in illegal drug toxicity deaths. According to BC Coroners Service, illegal drug toxicity is the driver of increased deaths. The rate of illegal drug toxicity deaths has been stable with some fluctuations since 2021. Since decriminalization, the trend has not changed substantially, compared to the months prior.²
- The number of paramedic-attended opioid overdose events remains high, with geographical variations and fluctuations year over year.³ There were 22,285 calls in 2023, 20,066 in 2022, and 23,724 in 2021.
- Average fentanyl concentration in street-level samples remains unchanged.⁴

² [BC Coroners Service Dashboard](#)

³ [BCCDC Unregulated Drug Poisoning Dashboard](#)

⁴ [BCCSU Drug Checking Project Dashboard](#) and [SUBSTANCE](#)

2. Health Pathways

Key Findings

- Majority of service utilization indicators are stable or continue to increase since decriminalization.

Decriminalization aims to encourage connections to health and social supports by reducing stigma and fear associated with criminalization. In addition to broader investments in MHSU services, BC has funded the creation of decriminalization health system navigators and proactive outreach positions in each RHA and the FNHA. The objective of these new positions is to facilitate connections to care. RHAs are currently finalizing hiring proactive outreach positions.

Intended early outcomes of decriminalization include increased awareness of and comfort with accessing health and social services for PWUD, and increased connections to health and social services. Data in the following sections suggests that core service utilization indicators are stable or increasing since decriminalization.⁵ BC will continue to monitor these indicators throughout the implementation of decriminalization.⁶

⁵ Service utilization is impacted by factors outside decriminalization and takes time to change after an intervention. Data needs to be interpreted carefully alongside other factors, including service availability. Evaluations of decriminalization will consider all lines of evidence and analyze decriminalization's contribution to the changes.

⁶ Information on additional health systems indicators may be found in Appendix C: Additional Health Systems [Indicators](#)

Health System Implementation Activities – Proactive Outreach Positions

BC has funded proactive outreach positions in each RHA as well as the FNHA. The purpose of these positions is to support connections to care for PWUD and liaison activities with law enforcement in communities.

RHAs have taken a range of approaches to ensure that these positions best meet community needs.

First Nations Health Authority 5 FTEs	Vancouver Coastal Health 4 FTEs	Fraser Health 4 FTE	Interior Health 4 FTE	Island Health 3 FTE	Northern Health 3 FTE
<ul style="list-style-type: none"> • 1 FTE per FNHA Region • Virtual peer coordinators and substance use navigators 	<ul style="list-style-type: none"> • Community outreach workers in local overdose outreach teams 	<ul style="list-style-type: none"> • 3 Regional outreach workers in interdisciplinary teams • 1 Coordinator supporting law enforcement liaison 	<ul style="list-style-type: none"> • RCMP liaison positions embedded in existing crisis teams 	<ul style="list-style-type: none"> • 4 part-time and 1 full-time (2 FTE) virtual addiction and recovery workers • 1 full-time proactive outreach nurse 	<ul style="list-style-type: none"> • Social work/peer outreach workers, embedded in existing harm reduction or specialized service teams

As part of their funding agreements, RHAs are required to provide quantitative reporting on connections to services facilitated by the proactive outreach positions. These metrics include:

- # of clients served
- % of clients connected to another service
- Qualitative reporting on successes/challenges with reaching new clients and connecting them to care.

- RHAs are in the process of hiring proactive outreach positions with most positions expected to be filled by March 2024. Data on the connections to care supported by these positions will be included in future reporting.

Health Service Utilization: Visits to Overdose Prevention Sites and Supervised Consumption Sites

Overdose Prevention Service and Supervised Consumption Site Service utilization continues to trend upward since the implementation of decriminalization. BC experienced a new high in number of visits in July 2023 with 74,070 visits. The number of OPS sites has increased from 1 site in 2016 to 49 as of November 2023, including 22 sites offering inhalation services.

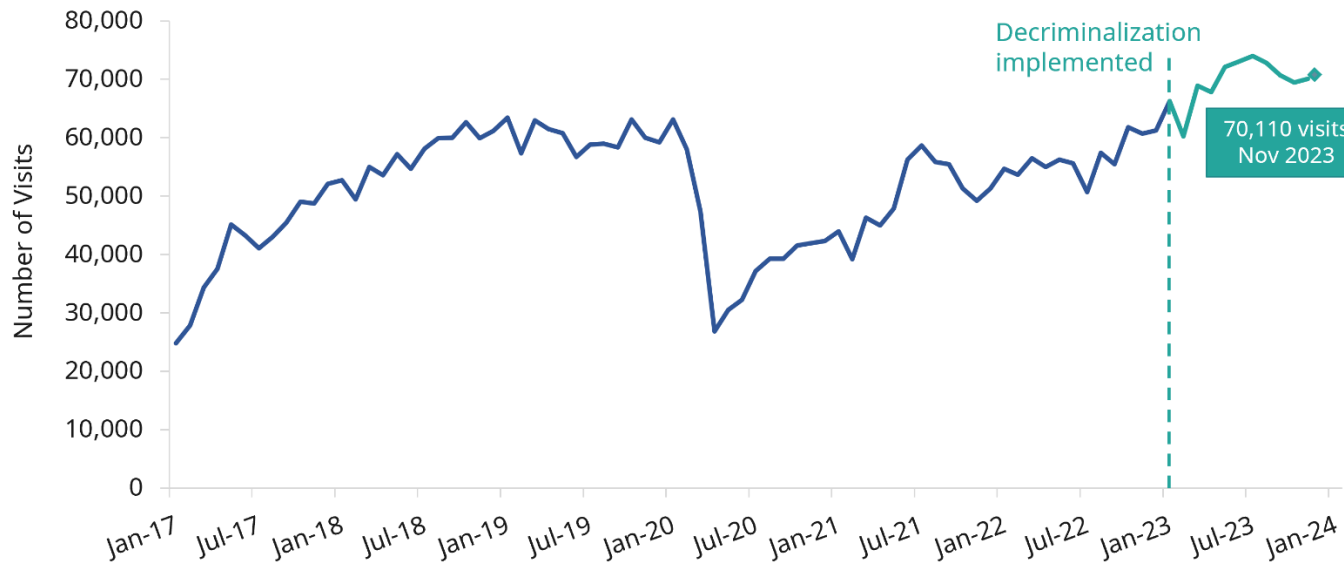


Figure 1. Visits to Overdose Prevention Sites (OPS) and Supervised Consumption Services (SCS) in BC (January 2017 – November 2023)⁷

- OPS and SCS provide life-saving services by preventing and responding to illegal drug poisonings.

Policy Implication: Utilization of OPS and SCS continue to grow since the implementation of decriminalization, following the trend starting in 2020.

⁷ OPS/SCS visits may be limited by service availability (e.g., number of sites and hours). Numbers include both injection and inhalation OPS/SCS. Source: <http://www.BCCDC.ca/health-professionals/data-reports/substance-use-harm-reduction-dashboard>

Health Service Utilization: Demand for Take Home Naloxone (THN)

The number of THN kits shipped to sites has increased since January 2019. BC shipped 46,040 kits in November 2023. There are now more than 2,247 active distribution locations for THN kits in BC.

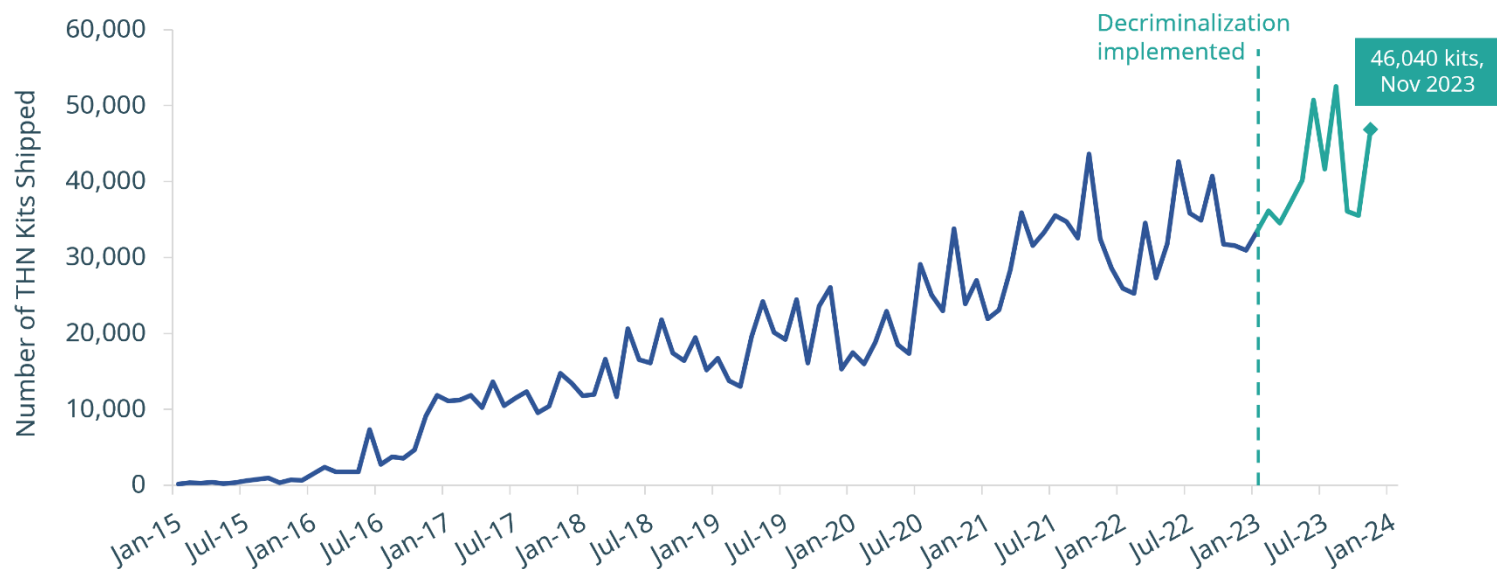


Figure 2. Number of THN kits shipped to sites (January 2015 – November 2023)⁸

- BC Centre for Disease Control (BCCDC) started the THN program in 2012 to provide training and kits to people at risk of an opioid overdose.
- There are over 1300 sites participating in the program across BC.

Policy Implication: The number of THN kits shipped has continued to increase after the implementation of decriminalization.

⁸ Month-to-month variation of demand is expected due to the different number of processing dates, certain sites ordering for more than one month's supply each time, drug alerts, and other factors. Source: <http://www.BCCDC.ca/health-professionals/data-reports/substance-use-harm-reduction-dashboard>

Health Service Utilization: Opioid Agonist Treatment (OAT) Uptake

The number of people receiving OAT has remained steady since the implementation of decriminalization.

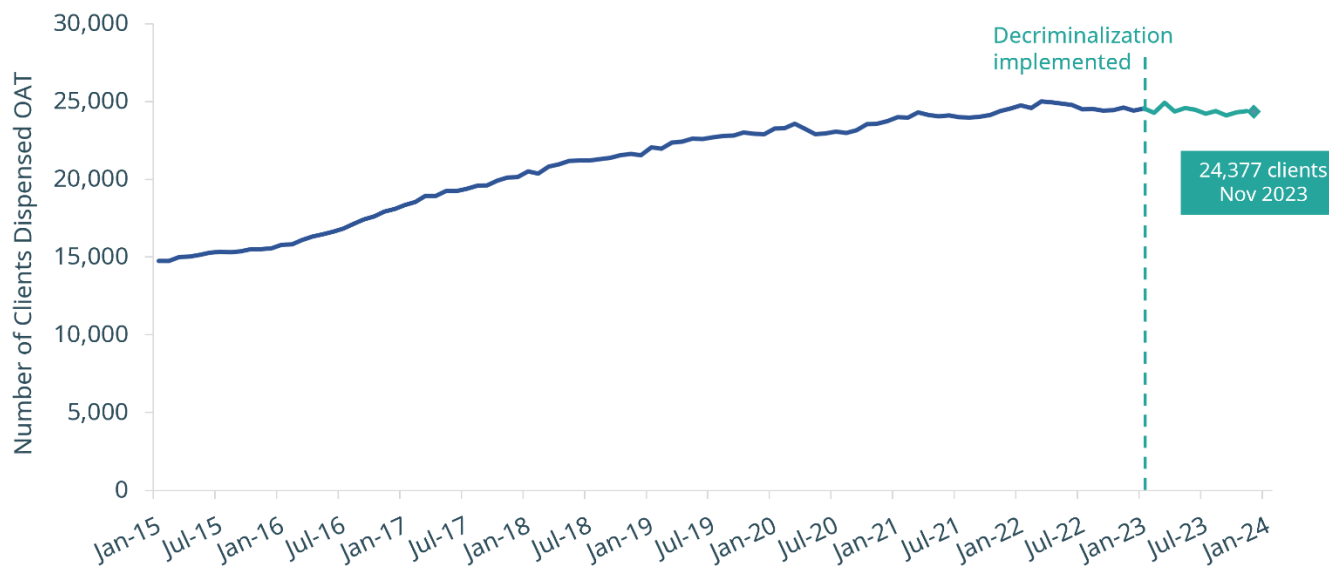


Figure 3. Number of people receiving OAT by month (January 2015 – November 2023)⁹

- Opioid Agonist Treatment (OAT) is a medication-based treatment for people with opioid use disorder.
- In November 2023, there were 24,377 OAT clients in BC.

Policy Implication: The number of OAT clients remain stable since the implementation of decriminalization.

⁹ BC PharmaNet data are provided by Health Sector Information, Analysis, and Reporting Division, BC Ministry of Health. Data represent clients who filled prescriptions at community pharmacies within BC, not all clients who received prescriptions. Recent data may change slightly due to prescription reversals/data quality improvements. Source: <http://www.BCCDC.ca/health-professionals/data-reports/substance-use-harm-reduction-dashboard>

Health Service Utilization: Drug Checking Utilization

The number of drug samples tested in BC has increased since 2019. In November 2023, BC tested 3,032 samples.

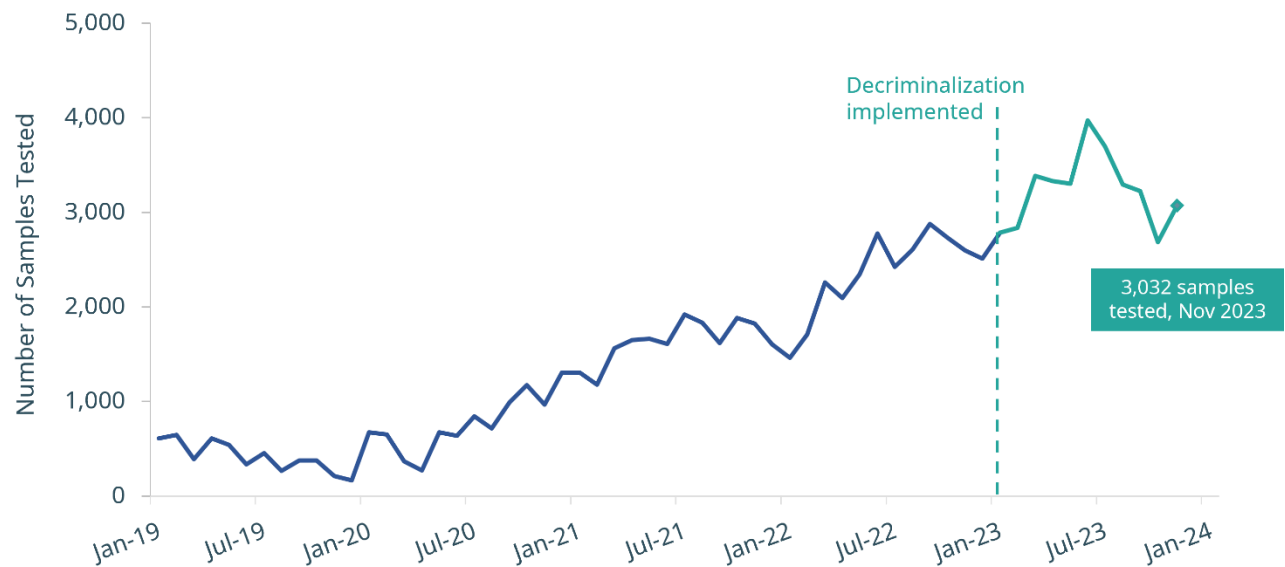


Figure 4. Number of samples tested using FTIR spectroscopy at drug checking locations in BC (January 2019 – November 2023)

- Drug checking using Fourier-transform infrared (FTIR) spectroscopy is a harm reduction service that allows people to check what is in their drugs; there are currently 25 FTIRs available in BC.
- There are 90 locations around the province where one can drop off a drug sample for analysis, 41 of which offer immediate point-of care testing.
- The number of drug samples tested in BC vary according to service capacity (e.g., number of access points, staffing and hours).¹⁰

¹⁰ In October 2023, technician shortage in certain high-volume sites disrupted service availability. Service capacity has since returned. Source: [BC Centre on Substance Use \(BCCSU\) drug checking reports](#) and [Vancouver Island Drug Checking project reports \(SUBSTANCE\)](#). Vancouver Island Drug Checking Project reporting does not start until September 2020.

3. Law Enforcement

Key Findings

- Data from the first nine months of decriminalization suggest that police implementation of decriminalization has been occurring as intended.
- In the first nine months of decriminalization, there has been a 77% decrease in possession offences compared with the previous four-year average of the same February to October period.
- In the first nine months of decriminalization, there has been a 96% decrease of possession related drug seizures under the 2.5g threshold compared with the previous four-year average of the same February to October period.
- The 2.5g threshold has been effective at significantly reducing seizures for personal use.

Decriminalization aims to shift PWUD away from the criminal justice system and towards health and social supports. Given this goal, decriminalization intends to reduce:

- Police interactions with PWUD related to simple possession of certain illegal drugs
- Drug seizures for simple possession of certain illegal drugs

The following section provides an overview of key law enforcement metrics that capture progress towards decriminalization's objectives. Data from this section are derived from the provincial police record management system.

Methodology

BC is monitoring key law enforcement metrics that indicate progress towards decriminalization's objectives:

- **Offences**

Offences are formal police interactions and/or investigations that occur when police suspect there is a crime being committed. An offence may or may not involve an arrest and does not mean that there is a charge or a conviction. In BC, once the police complete their investigation, they decide if there is enough evidence to recommend to Crown counsel that a charge be laid. Their recommendation informs a report to Crown counsel (RCC).

Offences are recorded in BC's Police Records Information Management Environment (PRIME-BC). When police respond to, or initiate, a call for service, a file is generated in PRIME-BC and assigned a code from the Uniform Crime Reporting Survey (UCR) to describe the specific crimes associated with the call for service.¹¹

There are two groups of UCR codes relating to the CDSA relevant to the monitoring and evaluation of decriminalization:



- Possession
 - CDSA incidents involving personal possession (section 4(1))



- Trafficking
 - CDSA incidents involving possession for the purpose of trafficking (section 5(2))
 - CDSA incidents involving trafficking of illegal drugs (section 5(1))

BC is monitoring relevant files in PRIME-BC to determine the number of CDSA offences. For incidents associated with possession, BC monitors both incidents where possession is the most serious offence (MSO) and incidents where

¹¹ The Uniform Crime Reporting Survey (UCR) was designed by Statistics Canada to measure the incidence of crime and its characteristics. An offence is used as a unit of count for the purposes of the statistical reporting.

possession is not the MSO but a secondary offence.¹² This report focuses on incidents where possession is MSO as it most accurately captures interactions/investigations initiated by a simple possession offence.

The report refers to incidents where possession is MSO as “possession offences” and incidents where trafficking is MSO as “trafficking offences.” Information on whether drugs are seized during a call for service are also recorded in PRIME-BC. Other recorded details include (if available) drug type and amount for each type of drug seized.

- **Drug Seizures**

Some offences may involve the confiscation of drugs (“drug seizures”) from an individual. Drug seizures can cause harm to PWUD.¹³ Under decriminalization, possession of certain illegal drugs under a cumulative weight of 2.5g is now exempted from the CDSA. Some exceptions apply including, but not limited to, possession of any amount of illegal drugs on school grounds or airports. Possession over this threshold, as well as trafficking, regardless of the amount of drugs involved, remains illegal.

To effectively monitor the implementation of decriminalization, it is essential to calculate the *cumulative total amount* of exempted substances in each seizure incident due to the cumulative nature of the threshold policy. In a CDSA offence, multiple seizure records can be associated with the same offence file because each type of drugs seized and each packaged item seized are recorded as separate seizure records (e.g., as property items). MMHA collaborated with policing partners to develop a novel methodology of offence-based drug seizure analysis where all seizure records related to a certain offence are linked to calculate the cumulative weight of exempted substances seized in an offence. This methodology more accurately represents the cumulative total of exempted drugs held by individual(s) in each offence and enables quality monitoring on the implementation and outcomes of decriminalization.¹⁴

¹² When there are two or more violations of the law in a single incident, the Uniform Crime Reporting Survey specifies that “the most serious offence” is published for the purposes of statistical reporting. For example, violent offences (e.g. assault) are more serious than non-violent offense (e.g. CDSA violations).

¹³ See Appendix A: Synthesis of Key Evidence for a synthesis of key evidence on the harms associated with the criminalization of substance use.

¹⁴ Previous seizure datasets relied on seizure records as a unit of analysis and therefore, did not provide detailed information on the cumulative total quantity held by the individual(s) involved.

BC is monitoring this dataset to determine the number of drug seizure incidents made due to a CDSA offence. For this report, drug seizure incidents where possession is MSO are called “possession seizures” while drug seizure incidents where trafficking is MSO are called “trafficking seizures.”

- **Recommended Charges**

After an investigation and review of available evidence, police in BC may recommend to the Crown Counsel to charge an individual for a specific crime. Crown counsel may choose to accept or decline police recommendations based upon their review of evidence and prosecution guidelines.

Policing partners have recommended assessing charge data on an annual basis. Monitoring recommended charges on a quarterly basis is unreliable as investigations take time to result in charges.¹⁵

PRIME-BC is a live case management environment with constant update as cases evolve. Specific to the data elements that concern the methodology, coding could change between possession and trafficking as investigation progresses and privatized files could become available or vice versa. Police reported crime statistics are released by Statistics Canada on a routine and scheduled basis. Furthermore, metrics in this report are only intended to satisfy the requirement under BC’s section 56(1) CDSA exemption. The offence data presented in this report, however, is not considered completed and may be subject to changes in UCR classification. As such, changes to numbers are expected, especially for recent reporting periods.

Limitations

In practice, formal police interactions/investigations involving possession for trafficking are sometimes coded as possession until further investigations are completed. This means that the number of possession offences could overestimate the number of actual possession incidents. As investigations are completed, minor updates to the data will be reflected in future reporting.

¹⁵ See Table 6. Number of Offences, Drug Seizures, and Recommended Charges, where possession is the most serious offence, by all police in BC (2019 – 2023) for data on recommended charges.

Possession Offences over time

The number of possession offences decreased by 77% compared to the previous four-year average.

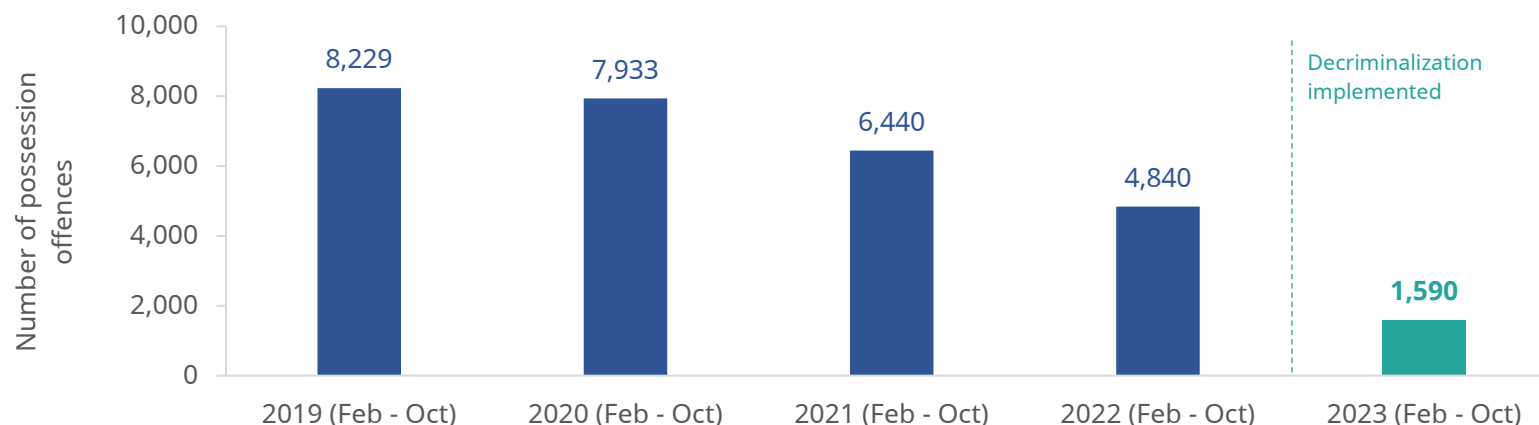


Figure 5. Number of possession offences, where possession is the most serious offence, by all police in BC (2019 – 2023, February - October)¹⁶



- In the first nine months of decriminalization, there was a 77% decrease in the number of possession offences from the past four-year (2019-2022) average of the same February to October period.
- Remaining offences could be due to possession above 2.5g, possession of non-exempted substances, encounters where the exemption does not apply, and operational complexities (e.g. trafficking offences coded as possession until investigations are complete).

Policy Implication: Possession offences have decreased as intended since decriminalization.

¹⁶ An offence represents a formal police interaction or investigation based on a particular type of suspected crime. An offence may or may not involve an arrest. It is not a charge nor a conviction.

Nine-Month Rate of Possession Offence over time, by Region

Since decriminalization, nine-month rates of possession offence have decreased in all regions of BC.

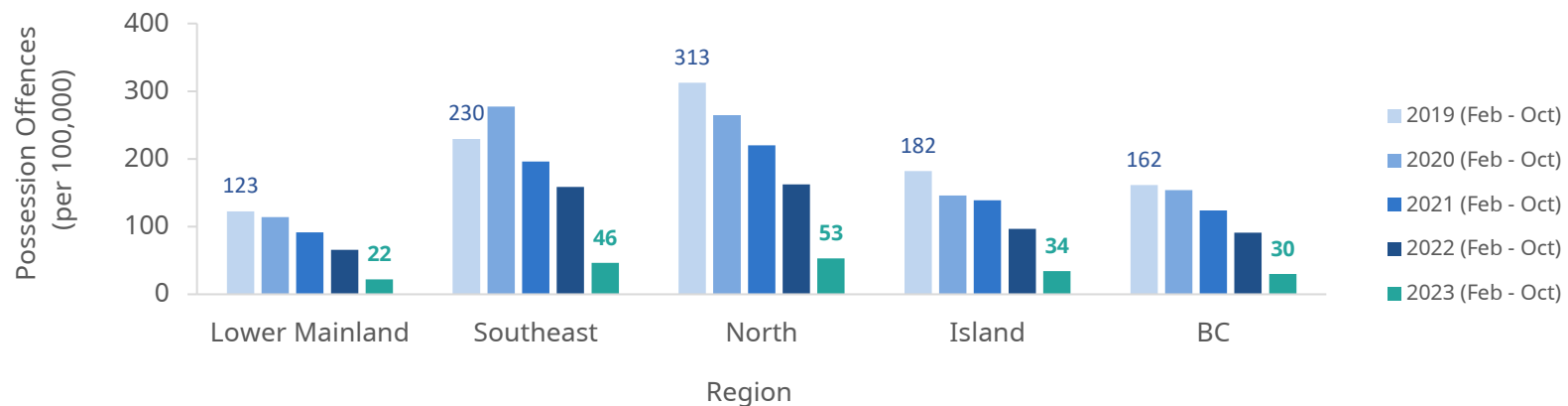


Figure 6. Nine-month rate of possession offence (per 100,000 BC residents), where possession is the most serious offence, by region (2019 – 2023; February – October)^{17,18}



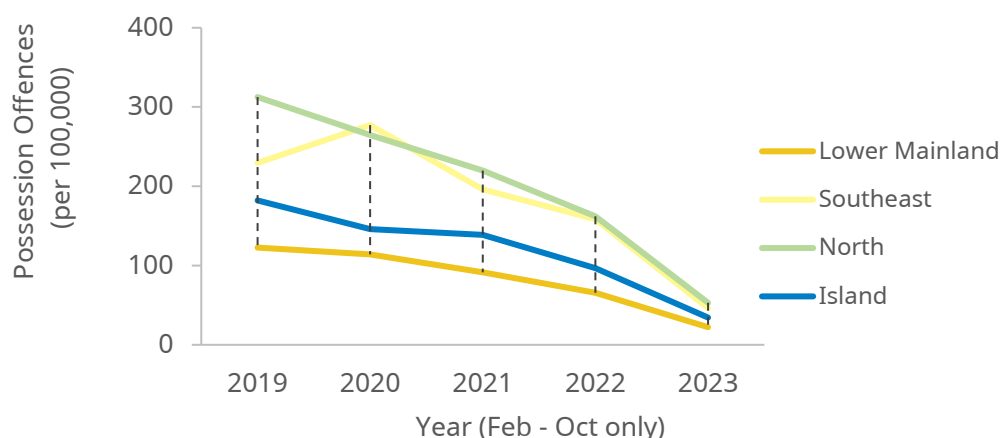
- In 2022 (Feb – Oct), there were 91 possession offences per 100,000 residents in BC. The rate decreased by 67% to 30 per 100,000 residents since decriminalization (2023, February - October)
- The North and Southeast regions have had the highest nine-month rates of possession offence (per 100,000 residents) before and after decriminalization.
- Table 2 presents rates of possession offence for all regions (2019 – 2023, February – October).

Policy Implication: Nine-month rates of possession offences have decreased in all regions of BC, as intended, since decriminalization.

¹⁷ Rates were calculated using population estimates from BC Stats: <https://www2.gov.bc.ca/gov/content/data/statistics/people-population-community/population/population-estimates>. Rate for 2023 calculated using 2022 Population Estimate.

¹⁸ Stl’atl’imx Tribal Police is grouped with Southeast region. This analysis includes all police in BC (RCMP, Municipal police, and others). The current regional analysis mirrors RCMP Districts boundaries.

Before decriminalization, the population adjusted nine-month rate of possession offence varied across regions. Since decriminalization, the difference between regions has been substantially reduced.



	High-Low Line/Range (difference between highest and lowest regions)
2019 (Feb - Oct)	190
2020 (Feb - Oct)	163
2021 (Feb - Oct)	128
2022 (Feb - Oct)	97
2023 (Feb - Oct)	31

Figure 7. Nine-month rate of possession offence (per 100,000 BC residents), where possession is the most serious offence, by region (2019 – 2023, February – October)^{19,20}



- The high-low lines reflect the *range* between the region with the highest and the lowest rates of possession offence due to possession per year. This shows the greatest discrepancy across regions.
- The North and Southeast have seen the biggest decrease in nine-month rates of possession offence (per 100,000 residents) after decriminalization.
- The difference between the rates of possession offence in the Lower Mainland and the North regions decreased 83% between 2019 and 2023.

¹⁹ Rates were calculated using population estimates from BC Stats: <https://www2.gov.bc.ca/gov/content/data/statistics/people-population-community/population/population-estimates>. Rate for 2023 calculated using 2022 Population Estimate.

²⁰ Stl'at'imx Tribal Police is grouped with Southeast region. This analysis includes all police in BC (RCMP, Municipal police, and others). The current regional analysis mirrors RCMP Districts boundaries.

Drug Seizures below the Threshold (2.5g) due to Possession of Exempted Substances

The number of possession drug seizures below the threshold of 2.5g decreased by 96% compared to the previous four years' average.²¹

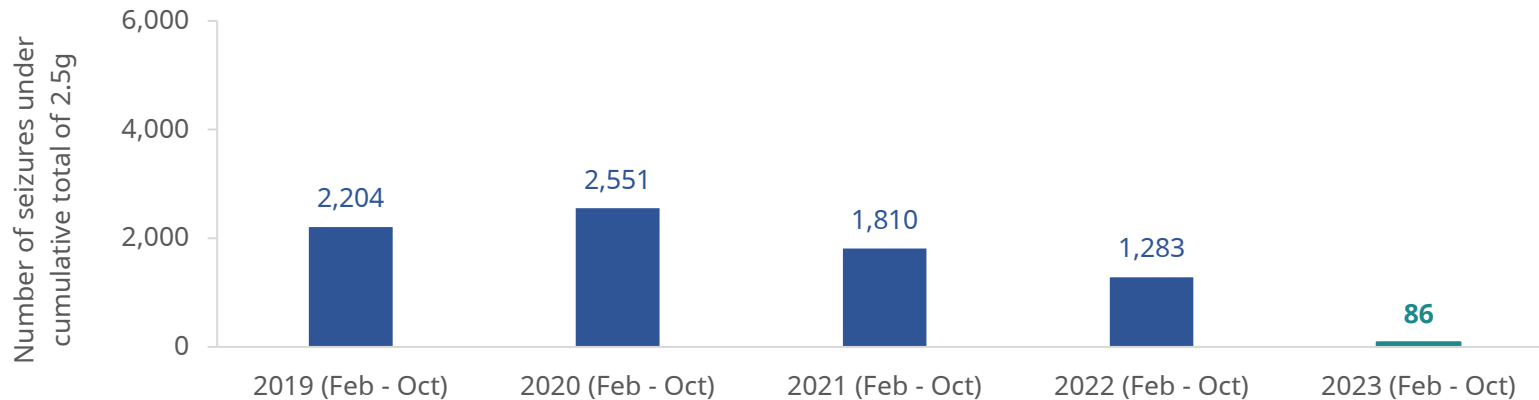


Figure 8. Number of seizures of exempted drugs under the exemption threshold (2.5g), where possession is the most serious offence (2019 – 2023, February - October)²²



- In the first nine months of decriminalization, there has been a 96% decrease in possession drug seizures under 2.5g compared to the previous four-year average of the same February to October period.
- Remaining seizures could be due to seizures in instances when the exemption does not apply. According to policing partners, most remaining incidents are related to access to substances by operators of motor vehicles (which is outside the scope and criteria of the exemption).

Policy Implication: Possession seizures below 2.5g have decreased as intended since decriminalization.

²¹ Possession drug seizures are drug seizures made by police where the most serious offence on record is simple possession. Number of drug seizures do not include amounts that were unquantifiable (i.e., no weight on record).

²² The seizure amount in this dataset represents the cumulative total amount of drugs seized.

Possession Seizures by Weight Range

Possession seizures overall have decreased since decriminalization compared to the baseline years average.²³

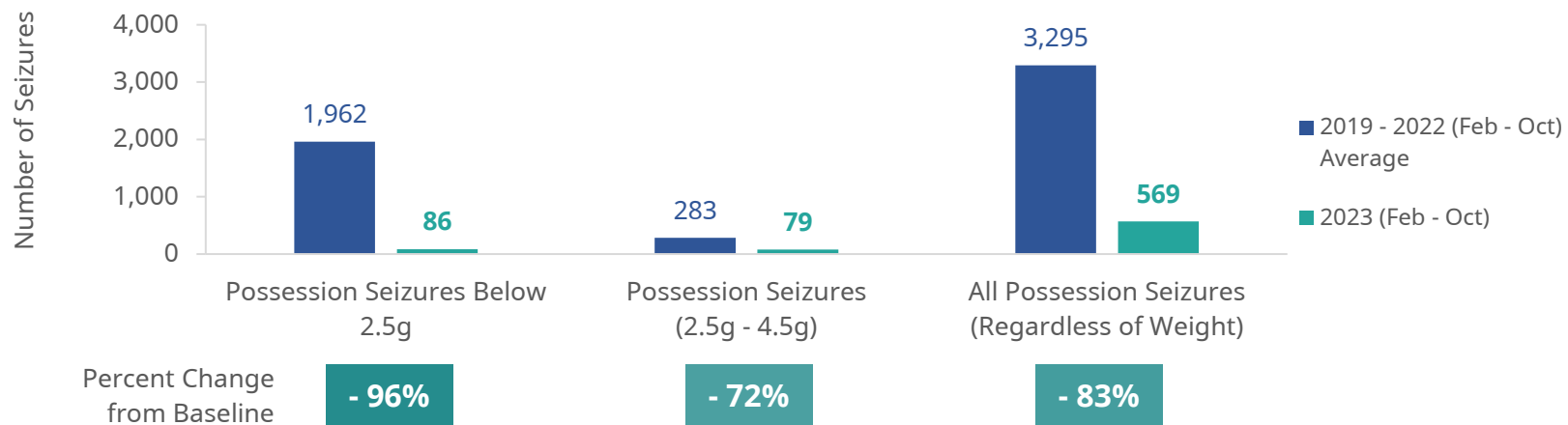


Figure 9. Number of seizures of exempted drugs overall, where possession is the most serious offence (2019 – 2023, February - October)²⁴



- Prior to decriminalization, one BC study concluded that a 75% reduction in possession seizures should be used as a benchmark for policy success.²³
- Since decriminalization, overall possession drug seizures have decreased by 83% from the baseline years average of the same time period (Feb – Oct).²⁵

Policy Implication: Decriminalization is reducing possession-related small amount seizures as intended.

²³ Possession drug seizures are drug seizures made by police where the most serious offence on record is simple possession. Number of drug seizures do not include amounts that were unquantifiable (i.e., no weight on record).

²⁴ The seizure amount in this dataset represents the cumulative total amount of drugs seized.

²⁵ In situations of simple possession above 2.5g, the CDSA encourages officers to exercise discretion and consider alternative measures (e.g., no further actions, warnings, or referrals to service).

Nine-Month Rate of Possession Seizure, Regardless of Amount, Over Time, by Region

Since decriminalization, the nine-month rates of possession seizures have decreased in all regions of BC.

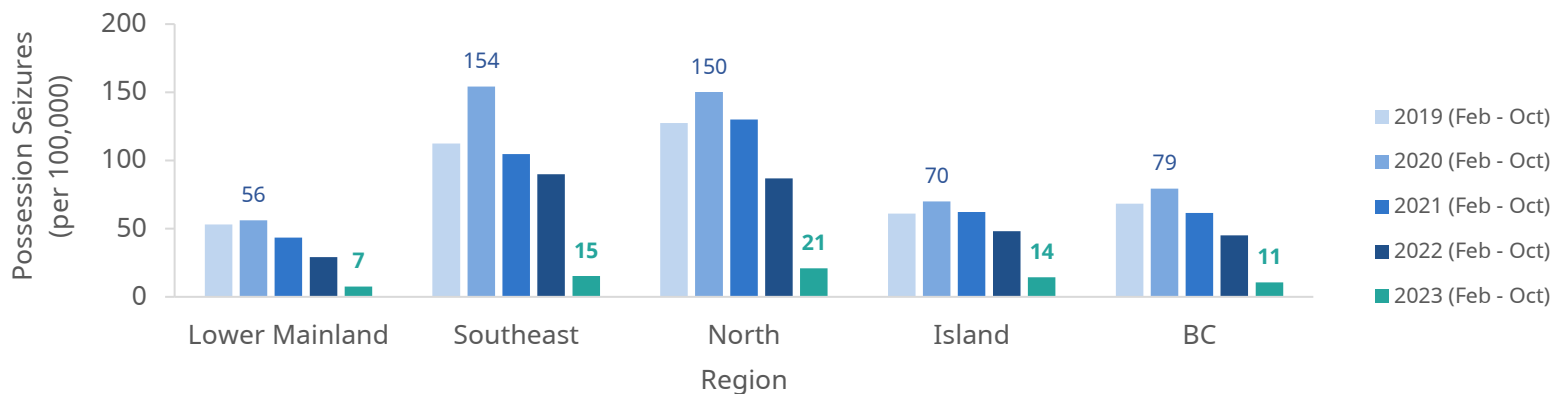


Figure 10. Nine-month rate of possession seizures, regardless of amount, (per 100,000 BC residents), where possession is the most serious offence, by region (2019 – 2023; February - October)^{26,27}



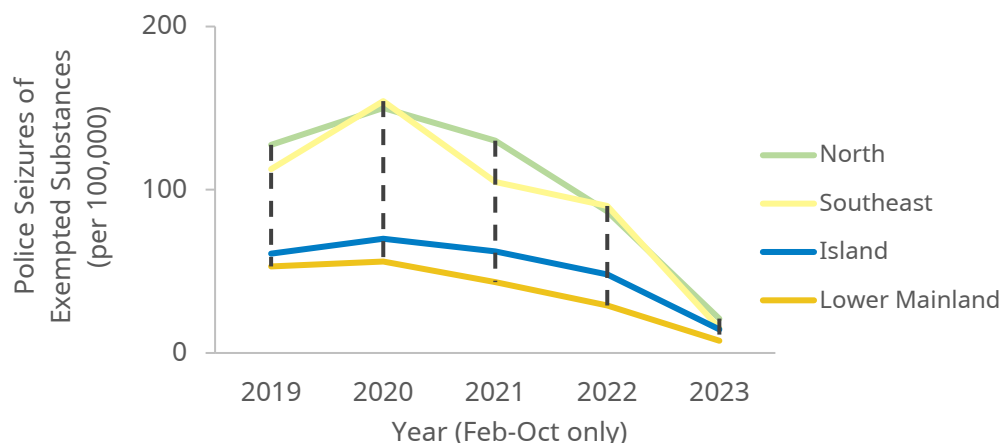
- In 2019 (Feb – Oct), there were 68 possession seizures per 100,000 residents in BC. The rate decreased to 11 per 100,000 residents since decriminalization (2023, February - October).
- The North and Southeast regions have had the highest nine-month rates of possession offence (per 100,000 residents) before and after decriminalization.
- Table 5 presents rates of possession seizures for all regions (2019 – 2023, February - October).

Policy Implication: Nine-month rates of possession seizures have decreased as intended since decriminalization in all regions of BC.

²⁶ Rates were calculated using population estimates from BC Stats: <https://www2.gov.bc.ca/gov/content/data/statistics/people-population-community/population/population-estimates>. Rate for 2023 calculated using 2022 Population Estimates.

²⁷ Stl’at’imx Tribal Police is grouped with Southeast region. This analysis includes all police in BC (RCMP, Municipal police, and others). The current regional analysis mirrors RCMP Districts boundaries.

Before decriminalization, the population adjusted rates of possession seizure of exempted substances varied across regions. Since decriminalization, the difference in these rates between regions has been substantially reduced.



	High-Low Line/Range (difference between highest and lowest regions)
2019 (Feb - Oct)	74
2020 (Feb - Oct)	98
2021 (Feb - Oct)	87
2022 (Feb - Oct)	61
2023 (Feb - Oct)	13

Figure 11. Nine-month rate of possession seizures (per 100,000 BC residents), where possession is the most serious offence, by region (2019 – 2023, February – October)^{28,29}



- The high-low lines reflect the *range* between the region with the highest and the lowest rates of possession seizures due to possession per year. This shows the greatest discrepancy across regions.
- The North and Southeast have seen the biggest decrease in nine-month rates of possession seizure (per 100,000 residents) after decriminalization.
- The difference between the nine-month rates of possession seizure in the Lower Mainland and the North regions decreased 82% between 2019 and 2023.

²⁸ Rates were calculated using population estimates from BC Stats: <https://www2.gov.bc.ca/gov/content/data/statistics/people-population-community/population/population-estimates>. Rate for 2023 calculated using 2022 Population Estimates.

²⁹ Stl'atl'imx Tribal Police is grouped with Southeast region. This analysis includes all police in BC (RCMP, Municipal police, and others). The current regional analysis mirrors RCMP Districts boundaries.

4. Next Steps

MMHA will continue to monitor the implementation and early outcomes of decriminalization through the approach outlined in this report. A third-party evaluation firm has begun collecting primary qualitative data to provide further findings relating to health system, youth, Indigenous communities, local government, and law enforcement outcomes. BC is committed to continuing to work with Health Canada to understand the impacts of decriminalization to improve ongoing policy and programs and inform the future of drug policy in Canada.

Appendix A: Synthesis of Key Evidence

Police seizures are associated with increased overdose risk.^{vi,vii,viii,ix}

- A 2024 literature review paper found that the vast majority of research found an association between police seizure and fatal overdose.^{ix}
- In the United States, a 2023 study found an increase in both fatal and non-fatal overdose events in the immediate geographic area of a police seizure of opioids or stimulants.^{viii}
- In Vancouver, researchers found that PWUD who experienced a police seizure were more likely to report a non-fatal overdose.ⁱⁱ
- With the prevalence of strong synthetic opioids in the illegal drug supply, turning to unfamiliar sources or suppliers to replace the seized drugs increases the risk of overdose.
- Stimulant or psychedelic users who are opioid naïve might obtain replacement drugs that are contaminated with opioids like fentanyl, increasing their overdose risk.
- Opioids users' tolerance could be reduced by the unexpected disruption from police seizures. Therefore, their overdose risk is elevated when they consume their normal amount of drugs.

Police seizures increase harms experienced by PWUD by putting them in unsafe situations to replace their supply (e.g., drug debts, property theft, or sex work).^{i,ii,vi}

- Withdrawal symptoms including vomiting, depression, tremors, hallucinations, and seizures are debilitating and can be life-threatening.^{xiii} Therefore, people with physical dependencies often must quickly replace the drugs that were seized.
- People struggling with addictions and poverty are likely to turn to risky behaviours to obtain replacement drugs. In a Vancouver-based study, 12% of participants engaged in illegal or dangerous activities such as theft, selling drugs, and sex work following police interaction.ⁱ
- Police drug seizures created additional need for PWUD to interact with the illicit drug market where violence and predatory behaviour is common.ⁱⁱ

Fear of drug seizure prevents people from accessing life-saving services, from calling police in unsafe situations, and from calling emergency services during overdoses.^{ii,x}

- In Vancouver, research found that drug seizure was associated with having administered naloxone to reverse an overdose.ⁱⁱ
- PWUD in BC perceived drug seizure as commonly occurring at overdoses, preventing some participants from calling 9-1-1 during an overdose event.^x
- 12% of respondents to the 2022 Harm Reduction Clinic Survey reported fear of their drugs being taken away as a barrier to seeking healthcare and treatment services.^{xiv}

Appendix B: Additional Tables and Figures

Possession Offences and Seizures

Table 1. Number of offences and drug seizures by all police in BC, where the most serious offence is possession (2019 – 2023)³⁰

		2019	2020	2021	2022	2023
Possession Offences	Full Year	10,432	9,931	8,216	6,157	-
	Feb – Oct:	8,229	7,933	6,440	4,840	1,590
Possession Seizures	Full Year	4,473	5,138	4,100	3,087	-
	Feb – Oct:	3,479	4,092	3,206	2,403	569

- In the first nine months of decriminalization, possession offences decreased by 77% compared to the previous four-year average over the same period.
- In the first nine months of decriminalization, possession seizures decreased by 83% compared to the previous four-year average over the same time period.

³⁰ An offence represents a formal police interaction and investigation based on a particular type of suspected crime. An offence is not a charge nor a conviction.

Possession Offences Over Time, by Region

Table 2. Count and nine-month rate of possession offences, where possession is the most serious offence, by region (2019 – 2023; February – October)^{31,32}

	2019 (Feb – Oct)		2020 (Feb – Oct)		2021 (Feb – Oct)		2022 (Feb – Oct)		2023 (Feb – Oct)	
	Count	Rate (per 100,000 residents)	Count	Rate (per 100,000 residents)	Count	Rate (per 100,000 residents)	Count	Rate (per 100,000 residents)	Count	Rate (per 100,000 residents)
Lower Mainland	3,827	123	3,599	114	2,914	91	2,142	65	731	22
Southeast	1,753	230	2,143	277	1,536	196	1,264	158	369	46
North	1,062	313	903	265	752	220	557	162	182	53
Island	1,587	182	1,288	146	1,238	139	877	97	312	34

³¹ An offence represents a formal police interaction and investigation based on a particular type of suspected crime. An offence is not a charge nor a conviction.

³² Stl'at'imx Tribal Police is grouped with Southeast region. This analysis includes all police in BC (RCMP, Municipal police, and others). The current regional analysis mirrors RCMP Districts boundaries.

Trafficking Offences and Seizures of Exempted Substances, Regardless of Amount

Table 3. Number of offences and drug seizures (regardless of amount) involving exempted drugs by all police in BC, where the most serious offence is trafficking (2019 – 2023)³³

		2019	2020	2021	2022	2023
Trafficking Offences	Full Year:	4,626	4,299	3,071	2,440	-
	Feb – Oct:	3,678	3,418	2,396	1,887	1,908
Trafficking Seizures	Full Year:	1,590	1,692	1,452	1,190	-
	Feb – Oct:	1,247	1,320	1,117	925	740

- Trafficking offences have been decreasing before decriminalization from 2019 to 2022; in the first nine months of decriminalization, trafficking offences have been consistent with 2022 levels and the trend over the past 4 years.
- Trafficking seizures have been decreasing before decriminalization from 2019 to 2022; in the first nine months of decriminalization, the number of trafficking seizures is consistent with the trend over the past 4 years.
- According to police, the downward trend of seizure counts reflects a shift of focus from low-level subsistence trafficking to a small number of high-level large trafficking investigations. The scale and significance of the large trafficking investigations and seizures are not properly reflected in seizure counts.

³³ Number of seizures, regardless of amount, include both incidents with quantifiable amount and incidents with unquantifiable (e.g., “bag”) amount.

Distribution of Quantifiable Possession Drug Seizures by Cumulative Weight Seized, Exempted Substances Only, Over Time

Table 4. Distribution of drug seizures of exempted drugs by all police agencies in BC, where the amount is quantifiable, and the most serious offence is possession (2019 - 2023; February - October)³⁴

	<2.5g		2.5 - 4.5g		4.5-10g		>10g	
	n	%	n	%	n	%	n	%
2019 (Feb - Oct)	2,204	69%	307	10%	325	10%	372	12%
2020 (Feb - Oct)	2,551	67%	364	10%	396	10%	506	13%
2021 (Feb - Oct)	1,810	61%	259	9%	359	12%	534	18%
2022 (Feb - Oct)	1,283	58%	203	9%	286	13%	458	21%
2023 (Feb - Oct)	86	16%	79	15%	106	20%	263	49%

- Before decriminalization, possession seizures below 2.5g represented 64% of possession seizures in baseline years; in the first nine months of decriminalization, they only represent 16% of possession seizures.
- The decrease in possession drug seizures of small amounts (less than 2.5g) of drugs means that most possession drug seizures are now seizures of larger amounts (more than 10.0g).

³⁴ Table 4 includes only possession seizure incidents with quantifiable amount. Therefore, the totals are different from Table 1.

Possession Drug Seizures, Regardless of Amount, Over Time, by Region

Table 5. Count and nine-month rate of drug seizures, where possession is the most serious offence, by region (2019 – 2023; February – October)³⁵

	2019 (Feb – Oct)		2020 (Feb – Oct)		2021 (Feb – Oct)		2022 (Feb – Oct)		2023 (Feb – Oct)	
	Count	Rate (per 100,000 residents)	Count	Rate (per 100,000 residents)	Count	Rate (per 100,000 residents)	Count	Rate (per 100,000 residents)	Count	Rate (per 100,000 residents)
Lower Mainland	1,656	53	1,770	56	1,386	44	950	29	245	7
Southeast	859	113	1,193	154	821	105	718	90	121	15
North	433	127	512	150	445	130	298	87	72	21
Island	531	61	617	70	554	62	437	48	131	14

³⁵ Stl'at'imx Tribal Police is grouped with Southeast region. This analysis includes all police in BC (RCMP, Municipal police, and others). The current regional analysis mirrors RCMP Districts boundaries.

Simple Possession Offences, Seizures, and Charges Recommended by Police Over Time

Table 6. Number of Offences, Drug Seizures, and Recommended Charges, where possession is the most serious offence, by all police in BC (2019 – 2023)

	Offences		Seizures (Regardless of Amount)		Recommended Charges ³⁶	
	Count	% Change (From previous year)	Count	% Change (From previous year)	Count	% Change (From previous year)
2019 (Full Year)	10,432	-	4,473	-	1,693	-
2020 (Full Year)	9,931	-5%	5,138	15%	1,292	-24%
2021 (Full Year)	8,216	-17%	4,100	-20%	485	-62%
2022 (Full Year)	6,157	-25%	3,087	-25%	222	-54%

- Before decriminalization, recommended charges for simple possession decreased substantially by 87%, from 2019 to 2022. Possession related offences and seizures also decreased, but not at the same rate as recommended charges. Possession offences decreased by 41% while possession seizures decreased by 31%.
- In 2022, there were 222 recommended charges compared to 6,157 possession offences and 3,087 possession seizures.

³⁶ Counts do not include recommended charges from St'at'imx Tribal Police.

BC Population Estimates (2019 – 2023)

Regional analyses completed in this report are based on RCMP District boundaries.³⁷ Population estimates for each region are derived from the “BC Development Region and Regional District Population Estimates” dataset from BCStats.³⁸

Table 7. Regions

Regions	BC Development/Regional Districts
Lower Mainland	Mainland/Southwest
Southeast	Thompson/Okanagan Kootenay
North	Cariboo North Coast Nechako Northeast
Island	Vancouver Island / Coast



Table 8. BC Population Estimates (2019 - 2023)

	LMD	SE	NORTH	ISLAND	BC
2019	3,120,373	763,286	339,774	871,363	5,094,796
2020	3,159,622	773,057	341,091	881,725	5,155,495
2021	3,185,697	783,330	341,984	891,367	5,202,378
2022	3,270,920	797,668	343,256	907,480	5,319,324
2023 (using 2022)	3,270,920	797,668	343,256	907,480	5,319,324

³⁷ Stl’atlimx Tribal Police is grouped with Southeast region. This analysis includes all police in BC (RCMP, Municipal police, and others).

³⁸ The dataset may be found in the broader [Municipal and sub-provincial areas population, 2011 to 2022](#) dataset.

Appendix C: Additional Health Systems Indicators

Indicator	Source
<ul style="list-style-type: none"> Number of clients accessing prescribed safer supply 	Escalated Drug-Poisoning Response Actions Factsheet (January 2024)
<ul style="list-style-type: none"> Number of paramedic-attended overdose events 	BCCDC Unregulated Drug Poisoning Emergency Dashboard
<ul style="list-style-type: none"> Number of paramedic-attended overdose events: First Nations people 	FNHA – Toxic Drug Crisis Data
<ul style="list-style-type: none"> Number of illicit drug toxicity deaths 	BC Coroners Service – Unregulated Drug Deaths Dashboard (Updated December 2023)
<ul style="list-style-type: none"> Number of illicit drug toxicity deaths: First Nations people 	FNHA – Toxic Drug Crisis Data
<ul style="list-style-type: none"> Changes in drugs implicated in fatal overdoses 	BC Coroners Service – Unregulated Drug Deaths Dashboard (Updated December 2023)

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