



[This Photo](#) by Unknown Author is licensed under [CC BY-SA-NC](#)

**Harm Reduction Team Substance Use Dialogues  
at UBC Okanagan Campus  
2020 - 2021 Academic Year**

**ABSTRACT**

Three dialogues focusing on substance use were held over Zoom with the UBCO community and relevant partners. The major themes that arose from this series of dialogues were: stigma, resources and support, responses from people in power, and COVID-19. Recommendations were made to guide future efforts.

**REPORT PREPARED BY:**

Thomas Pool, Rebekah Underhill, Lucas Standing, Jon Kirsch, Lauren Airth & Casey Hamilton

on behalf of the Campus Health Voice Project,  
University of British Columbia Okanagan Campus



**We would like to acknowledge that our work occurs on the ancestral, unceded territory of the Okanagan/Syilx nation.**

June 11, 2021

## **Harm Reduction Team Substance Use Dialogues: 2020 - 2021 Academic Year**

In 2016, BC declared the substantial increase in opioid fatalities a public health emergency and an epidemic, which triggered a province-wide response to improve resources.<sup>1</sup> There was a slight decline in fatalities until March 2020, when BC began experiencing a record-breaking number of overdose deaths alongside the COVID-19 pandemic.<sup>1</sup> Of these fatalities, males accounted for 81% of epidemic deaths in 2020 and, as a result, their life expectancy has been stagnant for three years in a row, the longest stagnation of life expectancy on record.<sup>1,2</sup> Additionally, First Nations people are six times more likely to die from this epidemic, and significantly, First Nations women are nine times more likely to die from the toxic drug supply.<sup>1</sup> Since these demographics are represented at UBCO, Campus Health's Harm Reduction Team (HaRT) planned dialogues regarding the toxic drug epidemic to understand how the epidemic has impacted all population groups on campus, whether they use substances or not, especially during the COVID-19 pandemic.

### **November 2020 & February 2021 Dialogues**

Campus Health has been holding dialogues on the toxic drug epidemic since 2018.<sup>3</sup> The purpose of these dialogues is to engage the campus community in conversations about substance use, to foster shared understanding, and identify needs and solutions to address the impact of the epidemic at UBCO. The last series of substance use dialogues occurred in July 2020, and the main themes were: 1) stigma; 2) a lack of awareness and poor access to resources; 3) a desire for drug-checking services; 4) the need for substance use education; and 5) the impacts of COVID-19 on substance use.

As part of this ongoing initiative, four HaRT work-study students conducted three substance use dialogues in the 2020-21 academic year over Zoom with the UBCO community and relevant partners. One dialogue occurred in November 2020 (n = 5), and two dialogues occurred in February 2021 (n = 24). Each dialogue began with a short presentation on the toxic drug epidemic. Then, participants were asked: “In regards to the information shown, what does this mean for our campus?” The major themes that arose from this series of dialogues were: stigma, resources and support, responses from people in power, and COVID-19.

## **Stigma**

There was general agreement that substance use stigma, particularly related to substance misuse, continues to prevent students from seeking support on campus. Participant comments indicated that students often hold optimistic biases related to problematic substance use, believing that addiction is behavioural problem that they are unlikely to experience. The language used for support, such as “mental health and substance use,” was also viewed as contributing to these beliefs. Participants speculated that because of siloed healthcare delivery models, students often think that mental health is unrelated to substance use. This along with stigma related to mental health issues were viewed as barriers to seeking mental health support for substance use concerns, even though the two issues are inherently related. Additionally, participants suggested that toxic masculinity within party culture promoted problematic substance use as a way of establishing social connections; this behaviour prevented people, especially men, from recognizing problematic substance use and seeking support. Participants also suggested that substance use has disproportionately impacted the LGBTQIA2S+ communities. For example, it was noted that in queer communities pre-COVID-19, substances were used in tandem with sexual encounters and this remains prominent but is happening more

in isolation. The double stigma of homophobia and substance use was discussed as a significant barrier for this community in accessing support, in addition the lack of intersectional resources. Reflecting on the influence of stigma and these related factors on student access to substance use resources and services prompted a conversation in one dialogue regarding UBCO's Problematic Substance Use clinic and how it was largely attended by people who are not part of UBCO.

### **Resources/Support**

Participants also discussed how universities are resource rich institutions and that such organizations should use their resources to address and develop substance use supports. Participants identified supports provided by campus clubs or offices but noted the important work of substance use specific groups (e.g., Student Recovery Community) were often overlooked. Relatedly, participants discussed the importance of connection for people struggling with substance use and the benefits of accessible, online meetings throughout COVID-19.

Additionally, participants thought education related to factors that influence substance use and indicators of problematic substance use would be helpful in raising student awareness and addressing perceptions of problematic substance use, especially as it relates to party culture, where misuse is often normalized. In addition, participants agreed that substance use should be addressed during regular healthcare appointments, similar to sexual health. Participants suggested that if a healthcare provider initiated the conversation about substance use in a non-judgmental way, preventive strategies could be implemented. For example, participants recommended that at the start of the school year a healthcare provider could help students identify personalized signs that may indicated their substance use is becoming problematic, and how to engage in behaviours that might prevent that from happening.

## **Responses from People in Power**

Some participants shared that professors were less inclined to grant extensions for students experiencing substance use related challenges compared to other mental health challenges. This generated discussion about the value of institutional support and clear statements from people in leadership roles as powerful ways to reduce stigma and increase access to support. For example, with formal policies and procedural support in place for students disclosing substance misuse concerns, professors would have appropriate tools for responding to substance use issues and provide students with access to appropriate resources. Additionally, participants identified the syllabus as an area where these statements could be shared.

## **COVID-19 and Substance Use**

The intersection between the toxic drug supply epidemic and COVID-19 were also discussed. One participant noted that in recent reports, although a significant number of people under the age of 30 had died of the epidemic, government officials prioritized the pandemic over the pre-existing epidemic. Participants discussed how the disruption of schedules and lack of in-person commitments were factors known to contribute to increased substance use. Additionally, because of the boredom related to the pandemic, participants shared anecdotal observations that people had expanded the types of substances they were using. Relatedly, some participants suggested that the use of stimulants to function throughout the day and sedatives to sleep at night, was contributing to sleep dysregulation. Finally, participants raised concerns about the dangers related to increasing substance use and related experimentation due to isolation imposed by pandemic restrictions.

## Recommendations

Through these dialogues numerous opportunities to better serve the UBCO community in relation to substance use, the opioid crisis and COVID-19 were discussed. There was consensus that community consultations continue alongside stakeholder presentations to build on this work and identify community-minded solutions that align with the Okanagan Charter.<sup>4</sup>

Recommendations generated during these dialogues included:

- Targeted interventions to reduce stigma, such as:
  - Public statements from university leaders and professors
  - Support for marginalized communities experiencing double stigma
  - Reporting on HaRT's work in main UBC webpages and newsletters
- Education on the factors influencing substance use, indications of problematic use, and how to cope in different ways
- Fostering opportunities for community-building that do not center on substance use
- Normalizing individualized substance use safety plans and check-ins

## References

1. Government of British Columbia (2020). *Responding to British Columbia's public health emergency, progress update, August to December 2020*. Retrieved from <https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/overdose-response-progress-update-aug-dec-2020.pdf>
2. Statistics Canada (2020). *Live Tables, 2016/2018*. <https://www150.statcan.gc.ca/n1/daily-quotidien/200128/dq200128a-eng.htm>
3. Pool, T., Kowch, K., Airth, L., Hamilton, C., & Bottorff, J. (2019). *Opioid dialogue: Listening for direction*. Retrieved from <https://campushealth.ok.ubc.ca/opioid-dialogue-listening-for-direction/>
4. University of British Columbia (n.d.). *The Okanagan Charter: An International Charter for Health Promoting Universities and Colleges*. Retrieved from <https://wellbeing.ubc.ca/okanagan-charter>