







# **CONTENT WARNING!**

This training guide discusses substance use, overdose, and emergency situations. These topics can be challenging to read about and/or discuss for many people. You are encouraged to take care of your own mental and physical well-being. Some resources to support you are listed on page 21.

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### **Welcome... A Bit About Us**

The Superior Points Harm Reduction Program is involved in a variety of free harm reduction services, including:

- Offering needle/syringe exchange and providing other harm reduction supplies
- Offering nasal spray naloxone kits and overdose awareness training
- Providing HIV/AIDS and Hepatitis C prevention education to clients
- Outreach and referral to other agencies
- Providing presentations to community agencies and the general public

#### **Outreach Services are Available**

Monday through Friday from 11am to 4pm and 5pm to 8pm.

This guide was developed in response to the high overdose rates in the Thunder Bay District Health Unit (TBDHU) area and the increasingly toxic drug supply.

The Ontario Naloxone Program (ONP) provides the naloxone kits for this training.

For more information on the ONP, visit https://www.health.gov.on.ca/en/pro/programs/drugs/naloxone/



### **CONTACT INFORMATION**



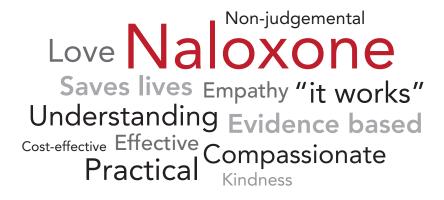
TBDHU Superior Points
Harm Reduction Program
807-621-7862 or 807-621-7861
harm.reduction@tbdhu.com
999 Balmoral St., Thunder Bay
Monday to Friday, 11am-8pm

# **Harm Reduction Approach**

Harm reduction is an approach that puts people first in a respectful, non-judgemental way. It helps people stay safer when participating in activities with risk, like using substances. We use a harm reduction approach in many areas of our lives to help lower risk.

#### **EXAMPLES OF HARM REDUCTION**





## **Key Values of Harm Reduction**

- Accepts that substance use is part of our world and works to reduce harms related to using substances
- Focuses on decreasing harms instead of forcing a drug-free society
- Understands that substance use is complex and includes a range of behaviours
- Recognizes that some activities and ways of using substances are safer than others
- Gives people choice and access to options that help to keep people safe, alive and healthy
- Recognizes that colonization, poverty, racism, social isolation, trauma, discrimination based on gender or sexual orientation, and mental health affect people's ability to access services and lessen harms
- Recognizes that people are doing the best they can within their life situations



To learn more about using a harm reduction approach, visit www.TBDHU.com/stopstigma

### Types of Substances



**STIMULANTS** are substances that stimulate the brain and central nervous system. They can increase alertness and energy levels. Some examples are:

- Crystal meth
- Cocaine
- Crack



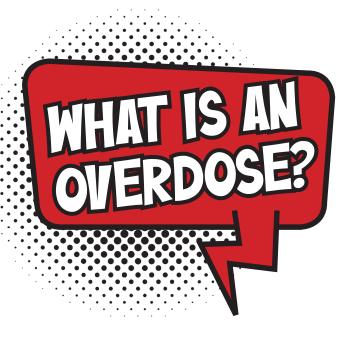
**DEPRESSANTS** slow down brain activity and the nervous system. They can provide a calming or relaxing effect. Some examples are:

- Alcohol
- Benzodiazepines
  - Diazepam (Valium®)
  - Alprazolam (Xanax®)
  - Clonazepam (Klonopin®)
  - Lorazepam (Ativan®)
- Opioids
  - Heroin
  - Methadone
  - Buprenorphine
  - Fentanyl
  - Morphine



**HALLUCINOGENS** interfere with the brain and central nervous system. They can alter a person's perception of reality and cause hallucinations. Some examples are:

- LSD
- Magic mushrooms
- Ketamine (special K)
- Weed



Overdose means there is more of a substance (or combination of substances) in the body than it can handle.

People can overdose on lots of things, including alcohol, over the counter medications, prescription medications, opioids, or a mix of substances.

Opioids are a pain reliever. When too much of an opioid is in the body or a combination of substances, they can slow down the body's normal functions such as breathing and heart rate. When someone is having an opioid overdose, they can stop breathing and may die if they don't get help.

### **Common Reasons for Overdose**

Everyone who uses substances is at risk of overdose regardless of their substance use history. Overdose happens when a person has more substances in their body than they can cope with. Common causes for overdose are:



**MIXING SUBSTANCES** – Substance interactions are difficult to predict, and one can mask the effect of the other.



**CHANGES IN TOLERANCE** – Even people who have used for a long time can have their tolerance reduced after a break from use. This could happen to people coming out of detox, prison, or treatment. Because of this break from using, they are at a higher risk of an overdose.



**USING ALONE** – Using with someone else can keep you out of trouble or get you help if something happens. Letting someone know you are using can save your life.



NOT KNOWING WHICH SUBSTANCE **YOU ARE USING** – Sometimes drugs are sold as one thing but are actually something else. A high percentage of drugs are found to be contaminated with other substances. The strength of this toxic drug supply can change depending on what is added. This could impact the effectiveness of naloxone.



**SWITCHING SUBSTANCES** – Not all substances are equal (e.g., 1 oxy "80" is not equal to 1 morphine "80"). Make sure you know what you are using.

PEOPLE USE SUBSTANCES FOR MANY DIFFERENT REASONS. EVERYONE'S LIVES, EXPERIENCES, CHALLENGES, AND THOUGHT PROCESSES ARE DIFFERENT. WE CANNOT ALWAYS UNDERSTAND WHY SOMEONE MAY USE SUBSTANCES, BUT WE CAN CHOOSE NOT TO JUDGE SOMEONE. USING SUBSTANCES DOES NOT MAKE YOU A BAD PERSON.

### **People at Risk of Overdose**

- Youth
- Seniors
- Parents
- Someone with a job
- Someone without a job
- Neighbours
- Someone using substances for the first time

- Someone who uses substances often
- People from big cities
- People from small communities
- Strangers
- Someone you love
- Anyone!





### Stigma

Stigma is a negative, judgemental attitude toward people who use substances (PWUS), particularly those whose substance use is considered excessive or problematic.

Stigma is everywhere. PWUS experience stigma and discrimination trying to access health care, education, housing, and employment. The structures in our society that determine who receives what services or social rewards often exclude PWUS. Stigma makes it hard for people to live healthy, connected lives. To prevent the spread of stigma, pay attention to how you talk about people who use substances.



### **What is Naloxone?**

Naloxone (Narcan®) is a medicine that can quickly reverse an opioid overdose. If someone is given naloxone when they are overdosing, naloxone can temporarily (i.e. for a short time) reverse the effects of the opioids.

Naloxone begins working 1 to 5 minutes after it is given and lasts for about 45 minutes. After the naloxone has worn off, it is possible for someone to continue to overdose from the opioids still in their system.

#### **REMEMBER:**

- Naloxone reverses the effects of opioids for a short time and is TEMPORARY.
- Naloxone **ONLY** works on opioids.
- Naloxone starts working within 1 to 5 minutes and lasts about 45 minutes.
- You can keep overdosing after the naloxone wears off.



### **Naloxone Kits**



### They include:



### **CARE AND REFILL**

- Always keep your naloxone kit in a place you can easily grab it. Tell other people where it is.
- Contact Superior Points if the naloxone is used or expired (remember: expired naloxone is still better than no naloxone).
- Naloxone is also available at most pharmacies if you are uncomfortable asking at a pharmacy, ask Superior Points for a refill.

# **Recognizing Signs of an Overdose**

#### **OPIOID OVERDOSE**

Use naloxone. Overdose can take 0-3 hours.



Cannot be woken up or not moving



**Discoloration** of lips and nails



**Breathing** slow or absent



Choking or coughing, gurgling, or snoring sounds



**Dizziness** and disorientation



Cold or clammy skin



**Pupils** extremely small

#### STIMULANT OR HALLUCINOGEN OVERDOSE

Naloxone does not work for stimulant or hallucinogen overdoses. If the following symptoms are occurring, it's likely not opioids and naloxone won't help:

- Very fast breathing
- Fast heartbeat
- Heavy sweating
- Chest pains
- Very large pupils
- Muscle cramps
- Dizziness or headache
- Difficulty peeing
- Longer more intense trip
- Muscle spasms/shaking
- Seizures
- Catatonic syndrome (person sitting in a trance-like state)
- Foaming at the mouth

IF THE PERSON IS NOT BREATHING. CALL **C.** 9-1-1 **AND GIVE** NALOXONE

### OVERDOSE RESPONSE PLAN

Make a plan to help prevent or reverse an overdose. Your plan could include:

- Have someone check in on you when you are using.
- Leave your door unlocked (if it is safe to).
- Have a naloxone kit nearby.
- Let friends/family know where to find your naloxone kit.
- Use your local drug checking service know exactly what you are using.

One of the most important tools in preventing an overdose death is your social network: your friends and family. Being open and honest about using substances (where and when), as well as sharing what you know about overdose, can save your life or the life of someone you love.



The **ONLY** way to reverse an opioid overdose is with Naloxone. Doing anything else will either do nothing or cause more harm.

### CONNECT BY LIFEGUARD DIGITAL HEALTH

The Connect app is designed to prevent opioid overdoses. This app can directly link people in Thunder Bay, Rainy River, Kenora, Fort Frances, and Sioux Lookout to emergency responders if an overdose does occur. Connect is a life-saving app that also links users to mental health and substance use resources.



### NATIONAL OVERDOSE RESPONSE **SERVICE**

NORS is an overdose prevention hotline for Canadians providing caring, confidential. nonjudgmental support for you, whenever and wherever you use substances.

Call NORS before you use substances to connect with people who want to help you stay safe.

NATIONAL OVERDOSE RESPONSE SERVICE



NO JUDGEMENT. JUST LOVE. 888-688-NORS(6677)

### **Overdose Response**



### SHOUT AND SHAKE

- SHOUT the person's name.
- SHAKE their shoulders.
- Do not bang their head.
- NOTE: If after 15-30 seconds. they are not responding, they may be overdosing.



### **CALL 911**

- Call 911, even if you aren't sure.
- Say exactly where the person is.
- Tell the paramedics what steps you have taken and what substances are involved.



### STEPS TO GIVE NALOXONE

- 1. Take out naloxone nasal spray.
- 2. Peel open package where it says "Peel Here".
- 3. Make sure the person is on their back.
- Tilt head back.
- 5. Hold nasal spray between two fingers with thumb on bottom of the nasal spray.
- 6. Gently insert nasal spray in nose until fingers touch the nostrils.
- 7. Press plunger to release the naloxone.
- 8. If the first dose of Naloxone doesn't work; give a second dose, if you have one.



### **GIVE RESCUE BREATHS** AND/OR CHEST COMPRESSIONS

If 2 doses of naloxone do not work, give rescue breaths and/or chest compressions.

#### **RESCUE BREATHS:**

- Tilt their head back.
- Place barrier over mouth (if available).
- Plug their nose and give 2 breaths through their mouth. Breath should be big enough to make the person's chest rise.
- Continue to breathe for the person at a rate of 1 breath every 5 seconds.

\*NOTE: You cannot get HIV from mouth-to-mouth.

#### **CHEST COMPRESSIONS:**

- Place your hands on top of one another in the middle of the person's chest, keeping your arms straight.
- Push fast, push hard, with no interruptions.



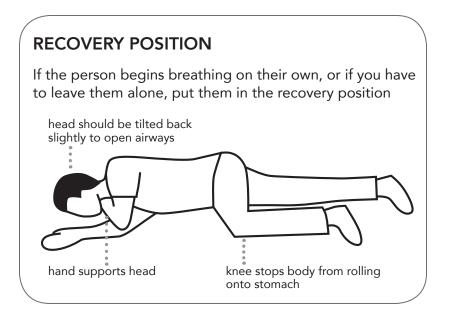
### **EVALUATE THE SITUATION**

If you have more than 2 on hand, give another dose of naloxone if the person is still not breathing after 2 minutes.

Stay with the person until an ambulance or medical help arrives.

### **Do Not Leave the Person Alone**

If you have no other choice but to leave them, put them in the recovery position:



### WHEN THE NALOXONE STARTS WORKING, THE PERSON MAY:

- Wake up.
- Be upset or want to use again.
- Be confused or disoriented.
- Need to be told that they were overdosing.
- Experience mild to severe withdrawal.

The person could go back into an overdose as the naloxone wears off. It is important that the person does not use more substances when they wake up.

#### THE DO'S AND DON'TS FOR OVERDOSES



- Shout & Shake.
- √ Call 9-1-1.
- √ Give Naloxone.
- √ If needed, give another dose.
- √ Leave your door unlocked (if safe to do so).
- √ Use the Connect app by Lifeguard Digital Health or the National Overdose Response Service if you have to use alone.



- X Let them sleep it off.
- X Put them in a shower or bath.
- X Walk them around.
- X Make assumptions about tolerance.
- X Make them vomit.
- Slap/kick them hard or burn the bottom of their feet.
- X Blow crack smoke in their face.
- X Use alone or out of sight.



Under Canada's Good Samaritan Drug Overdose Act, if you seek medical help for yourself or for someone else who has overdosed, neither of you will be charged for possessing or using drugs nor will anyone else at the scene.

#### The law DOES provide protection against charges for:

- Possessing drugs for your own use
- Violating conditions of your parole, bail, probation or conditional sentence for a simple drug possession charge

### The law does NOT provide protection against charges for:

- Selling illegal drugs (trafficking):
   Police may suspect this if you have a large amount of drugs, cash or items like scales, baggies, and debt lists.
- Offences other than drug possession
- Any outstanding arrest warrants
- Violating conditions of your parole, bail, probation, or conditional sentence for an offence that is not simple possession

#### Police may not always know about the law's protections.

If you need legal help, call:

1 (800) 668-8258 (toll-free) for Legal Aid Ontario or

1 (855) 947-5255 (toll-free) for Law Society Referral Service.

Also online at www.lsrs.lso.ca

### **After an Overdose**

Living through or responding to an overdose can be a difficult and traumatic experience. It is important to talk to someone you are comfortable with about it. Reach out to a friend or loved one, someone who is a part of your personal support system. An Employee Assistance Program can offer support as well, if you have access.

# **Support Services**

#### **Crisis Response**

24 hours/day – 7 days/week Thunder Bay: (807) 346-8282

Thunder Bay District: 1-888-269-3100



St. Joseph's Care Group 24 hours/day – 7 days/week (807) 623-6515

### Walk-in/Talk-in Counselling Service **Thunder Bay Counselling**

(807) 700-0090

For information on more Thunder Bay & District Walk-in/Talk-in Counselling Clinics:

www.tbaycounselling.com/walk-in-counselling/

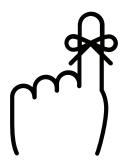
### **Connect App by Lifeguard Digital Health**

Download the app to find services near you and access NWO Resources.

www.lifeguarddh.com



Visit www.tbdhu.com/mentalhealthsupport to find more resources to support you and your loved ones.



# REMEMBER!

- Act fast
- **2** Call 9-1-1
- Give **Naloxone**



