

Challenge & Change

A Public Health Response to Our Perplexing Relationship with Psychoactive Substances

Report of the Island Health Chief Medical Health Officer, 2024

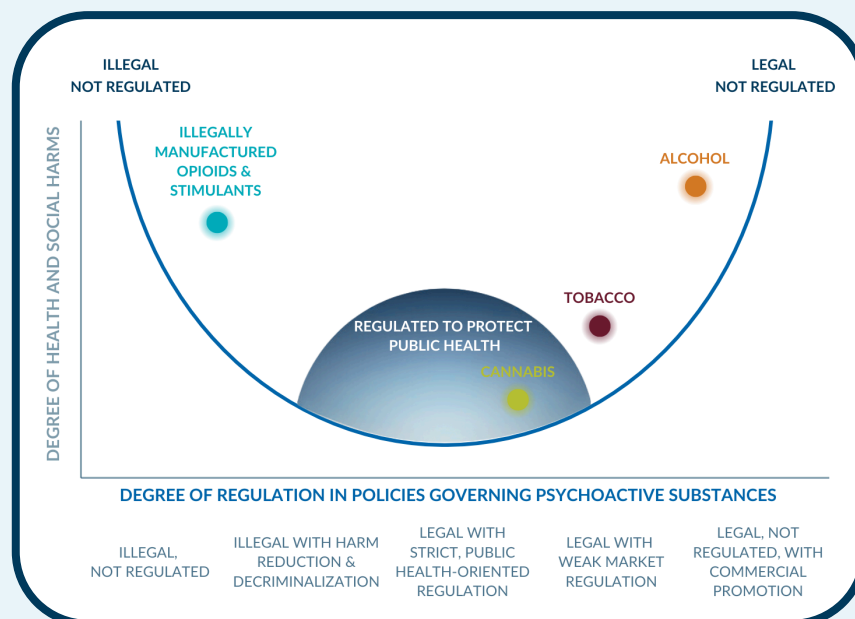
The public narrative around psychoactive substance use has been polarized, oversimplified, and often rooted in perception, opinion and history, rather than facts and evidence. This report invites you to have meaningful conversations about psychoactive substances - alcohol, tobacco, cannabis, and unregulated substances - using our collective experience and evidence as a foundation.

The Policy Continuum

Drug policies exist on a spectrum, and they influence the health and social well-being of populations. For substances that are harmful to health, policies at either end of the spectrum —both illegal not regulated and legal not regulated—cause the most harm. The middle of the continuum, shown below, is where effective regulations minimize harms.

Currently:

Illegally manufactured substances are not legal, so it is not possible to regulate their manufacturing and distribution. Opioids in the unregulated market have become increasingly potent and contaminated over the past decade.



Alcohol is legal with few restrictions. There is no international or national alcohol control strategy, and provincial policies over the past decade have largely promoted greater access to alcohol and encouraged consumption.

Cannabis is a legal substance, regulated at the federal level via the Cannabis Act and in some provincial provisions. Protecting public health is a stated goal of the Cannabis Act.

Tobacco is a legal substance that is regulated at the international, federal, provincial, and local levels. Ongoing reviews of regulations are important to keep up with new nicotine delivery products and new promotional strategies.

How Are We Doing?

Alcohol, tobacco, and unregulated substances (such as illegally manufactured fentanyl and stimulants) are having devastating effects on thousands of people's lives in our communities.

Deaths attributed to tobacco have been declining but are still higher than alcohol and opioids.

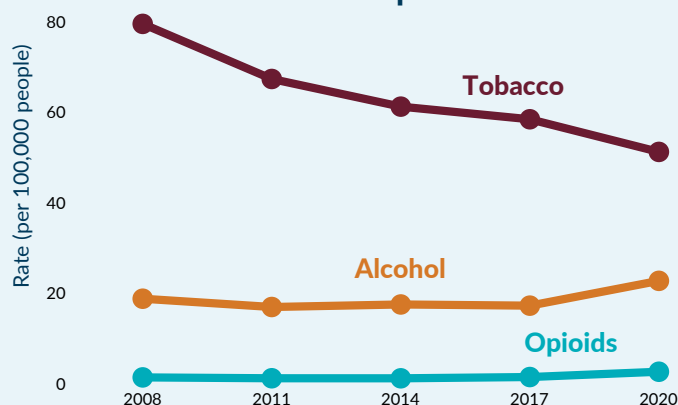


Fig. 2: Substance use-attributable deaths, by substance, B.C. (2008-2020)

Opioids and alcohol account for the highest number of years of life lost due to substance use.

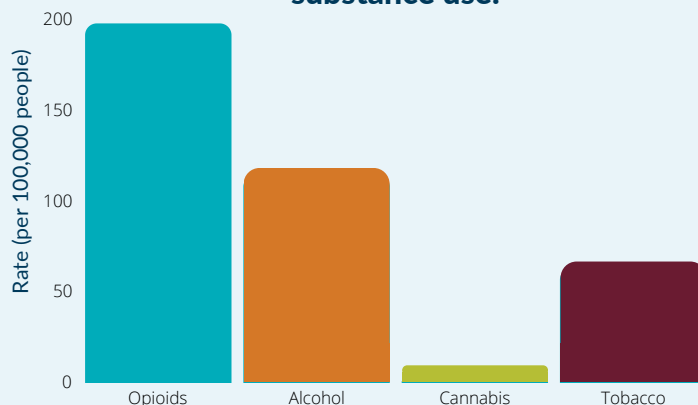


Fig. 4: Substance use-attributable potential years of productive life lost, by substance, B.C. (2020)

How Did We Get Here?

How we are currently doing with substances is the consequence of decisions made over many decades. Many of these policy decisions were considered separately for each substance, resulting in a patchwork of inconsistent policies that not only fail to minimize but increase harm. When we look at the history, we can see how policies, laws, industry influence, and widely accepted stories and norms have shaped the current landscape of substance use. **Check out the interactive website and report for historical timelines.**

Where Do We Go From Here?

We need to close the gap between what we know and what we do.

In the short- and medium-term:

- Invest in prevention
- Generate high quality evidence
- Meaningfully engage with Indigenous Peoples and people with lived and living experience
- Create an adequate, effective and compassionate system of care

An important step for long-term change:

Start conversations

- Raise awareness of the disconnect between how we think about & address substance use, and what the evidence shows us.

Let's start talking differently about substances, and bring our local leaders into these conversations, so that we can move towards policies that prioritize health.

Together we can reshape the narrative, prioritize health in our policies and drive change to improve health in our communities.

Learn more at:

<https://cmho-report-2024.islandhealth.ca>

For data sources and references, see full report.

