

# COWICHAN TRIBES



# Opioid Crisis Response

***Opioid Crisis Community Survey Report***

***Prepared by Roundtable Consulting for Cowichan Tribes'***

***Opioid Crisis Response Working Group***

**June 2021**

## Contents

Executive Summary.....	3
Introduction .....	5
Methodology.....	5
Who Responded.....	6
Limitations .....	6
Findings .....	7
How The Crisis Of Drug Use And Overdoses Is Impacting The Community.....	7
The Causes Of The Crisis Of Addiction And Overdoses.....	8
What Is Currently Working Well .....	11
What Is Needed To Address The Crisis Of Addiction And Overdoses.....	13
Support For Cowichan Tribes Detox & Treatment Centres, Additional Resources .....	15
How Cultural Practices And Teachings Can Help Address the Crisis.....	17
Successful Models, Programs, and Wise Practices .....	18
Findings From People In Recovery.....	20
Findings From Quw’utsun Elders .....	21
Findings From Youth .....	22
Appendix A: Survey Questionnaire .....	23

## Acknowledgement and Thanks

Cowichan Tribes’ Opioid Crisis Response Working Group is grateful to all who shared their wisdom, knowledge, and experience by taking part in the Opioid Crisis Community Survey.

We give thanks to all Quw’utsun Elders, youth, community members and all people from other Indigenous and non-Indigenous communities and organizations who contributed.

Huy tseep q’u!

*Artwork provided by Quw’utsun artist Stuart Pagaduan*



## Executive Summary

This report presents the findings of the Cowichan Tribes Opioid Crisis Response community survey which was deployed online in Autumn 2020 by Cowichan Tribes' Opioid Crisis Response Task Force.

Analysis of quantitative survey data and a very high-level review of survey responses was undertaken in November, 2020, to inform the Task Force's report and interim recommendations.

In January, 2021, the term-limited Task Force was replaced with a standing Opioid Crisis Response Working Group, which is tasked with leading Cowichan Tribes' ongoing response to the overdose epidemic and continuing to engage with Quw'utsun Mustimuhw (community members) to develop solutions and long-term recommendations to address the crisis.

This report presents the findings of a comprehensive, in-depth analysis of all qualitative and quantitative data gathered through the survey. A total of 222 responses were received, with over 950 written comments. Of them, 154 respondents identified as Indigenous and 63 as non-Indigenous; 127 respondents identified as registered with Cowichan Tribes. Respondents included 24 substance users, 13 people in recovery, 9 youths (age 24 or under), and 7 Quw'utsun Elders (age 65 or older). While all responses were analysed, this report focuses primarily on findings from Cowichan-registered respondents, people who use substances, people in recovery, Quw'utsun Elders, and youth.

**How The Crisis Of Drug Use And Overdoses Is Impacting The Community.** Respondents stated that the crisis of drug use and overdoses is having a devastating impact on Cowichan Tribes. The overdose crisis is resulting in deaths, loss, and profound trauma. Many community members are living in fear and feeling unsafe. Many are afraid they will lose loved ones to overdoses, and many feel unsafe due to the increase in crime and visible housing insecurity and untreated mental health and substance use disorders. Families and youth are being negatively impacted, with relationships being fractured, families being separated, and children often prevented from staying with their parents. The crisis of addiction and overdoses is contributing to the loss of Quw'utsun culture, language, and teachings.

**The Causes Of The Crisis Of Addiction And Overdoses.** The most mentioned causes of the crisis of addiction and overdoses were: 1) toxic drug supply and lack of safe supply; 2) trauma, intergenerational trauma, and poor mental health; 3) lack of access to detox, treatment, and recovery services and supports, including culturally appropriate services, local services, and timely services without long waitlists; 4) easy access to drugs, including from dealers in the community, and sometimes from family members; 5) lack of connection to family, community, and culture; 6) poor social determinants of health including poverty, housing insecurity, poor education outcomes, and unemployment; 7) lack of education on addiction and substance use; 8) the COVID-19 pandemic, which has made the drug supply even more toxic and has increased social isolation, boredom, hopelessness, loneliness, and depression, causing many to turn to drugs to cope; 9) housing insecurity and the lack of safe, affordable housing options are major barriers for people who want to get well.

**What Is Currently Working Well.** The most-cited themes around what Cowichan Tribes and other service providers are currently doing well in areas of prevention, support, and treatment were: 1) Harm reduction initiatives, including providing naloxone and training; 2) providing support services, including counselling, mental health, treatment supports, and detox and treatment referrals; 3) education and

communications, including the Task Force’s communications campaign; 4) not enough – more action and resources are needed; 5) outreach, including outreach by staff to support at-risk members and youth; 6) the Overdose Prevention Site.

**What Is Needed To Address The Crisis Of Addiction And Overdoses.** The most-cited themes were:

1. **Improve access to detox, treatment, and recovery services and supports**, including local, culturally-appropriate services which can be accessed rapidly (no wait lists), a range of service options, and long-term supports for people in recovery.
2. **Increase mental health supports and staff**, including culturally appropriate services, proactive rather than reactive supports, and supports that are trustworthy and non-judgemental.
3. **Enhance education and awareness**, about addiction and substance use, the risks, overdose prevention, and the need to talk more openly about the causes of the crisis of addiction and mental health in order to end stigma.
4. **Enhance outreach services and supports**, for at-risk members and people who use substances.
5. **Enhance youth programs and supports**, including youth activities and programs grounded in Quw’utsun culture and teachings.
6. **Improve access to safe, affordable housing**. The lack of safe, affordable housing was cited as a major barrier to healing from addiction, particularly by those who use substances.
7. **Safe supply of substances**. The need for safe supply was emphasized by several respondents, particularly people who use substances.
8. **End the stigmatization of people struggling with addiction**. Stigma against addiction and substance use is a major barrier to healing.

**Strong Support For Cowichan Tribes-Run Detox & Treatment Centres, More Resources.** The survey found strong support among Cowichan-registered respondents for Cowichan Tribes-run detox and treatment centres, and for dedicating more resources to addressing the crisis of addiction and overdoses. Among Cowichan-registered respondents:

- **81%** either strongly agreed or agreed that, “Cowichan Tribes needs its own detox centre.”
- **84%** either strongly agreed or agreed that, “Cowichan Tribes needs its own addiction treatment and recovery centre”
- **81%** either strongly agreed or agreed that, “More resources are needed to address the overdose crisis.”
- **76%** either strongly agreed or agreed that, “Addressing the overdose crisis should be a top priority for Cowichan Tribes and other governments.”

**How Cultural Practices And Teachings Can Help Address The Crisis.** Respondents stated that cultural practices and teachings can help address the crisis of addiction and overdoses by: 1) providing cultural and ancestral teachings and traditional knowledge; 2) creating a sense of connection to the community, the land, and other people; 3) enabling Elders to share their knowledge and support community members; 4) promoting healing, wellness, and balance; 5) creating a sense of identity, purpose, meaning, belonging, and acceptance, so people know who they are and where they come from.

## Introduction

This report presents the findings of the Opioid Crisis Community Survey, which was deployed online by the Cowichan Tribes Opioid Crisis Response Task Force in the Autumn of 2020.

The Opioid Crisis Response Task Force was created by Cowichan Tribes Chief and Council in August, 2020, in response to the worsening opioid overdose epidemic, which has claimed the lives of at least 12 Cowichan members, including youth as young as 14.

The Task Force was mandated with preventing overdose deaths, coordinating Cowichan Tribes' response to the crisis, and engaging with Quw'utsun Mustimuhw (community members) to develop solutions and recommendations to address the crisis of addiction and overdoses.

Analysis of quantitative survey data and a very high-level review of survey responses was undertaken in November, 2020, to inform the Task Force's report and interim recommendations.

Following the end of the Task Force's term-limited mandate, Chief and Council mandated the formation of a standing Opioid Crisis Response Working Group. The Working Group is tasked with leading and coordinating Cowichan Tribes' ongoing response to the crisis of addiction and overdoses, improving service delivery, and continuing to engage with Quw'utsun Mustimuhw to develop solutions and long-term recommendations to address the crisis.

This report presents the findings of a comprehensive, in-depth analysis of all qualitative and quantitative data gathered through the survey, including over 950 written comments from 222 respondents.

## Methodology

The Opioid Crisis Response Survey was developed by the Cowichan Tribes Crisis Response Task Force in the autumn of 2020. The survey was created to better understand the needs and perspectives of the Cowichan Tribes community in response to an increase in opioid overdoses impacting members, including youth.

The survey was anonymous and open for three weeks from September 24, 2020 to October 15, 2020.

The survey was developed by members of the Task Force (which included community representatives) with the support of Roundtable Consulting researchers. It was designed using plain language.

While the survey was primarily aimed at gathering input from Cowichan Tribes members, it was also shared with non-Cowichan members and organizations in the Cowichan Valley who are involved in addictions and mental health services, as well as leaders and staff from other First Nations and Indigenous communities.

The survey questionnaire included a mix of qualitative, open-ended questions and Likert-scale agreement/ranking questions. It was available online only and hosted on the Survey Monkey platform. It was promoted to staff, health partners, and other First Nations via email, and to community members via the Cowichan Tribes Facebook page, website and newsletter. No incentives were provided for participation. The survey introduction and questions are attached to this report as Appendix A.

Analysis of the results was carried out by independent researchers from Roundtable Consulting using primarily thematic analysis of qualitative comments, ranked by order of frequency. Cross-tabulation analysis was also carried out to understand differences in results by respondent groups. Reporting focused primarily on Cowichan-registered respondents, with additional analysis focusing on age (youth and Elders), and self-described substance users and people in recovery.

## Who Responded

A total of 222 responses were received, with over 950 written comments. Of them, 154 respondents identified as Indigenous and 63 as non-Indigenous; 127 identified as registered with Cowichan Tribes (status and/or membership).

Among Cowichan-registered respondents, 91 indicated they live on Cowichan Tribes reserve lands and 35 live elsewhere. Respondents included 24 substance users, 13 people in recovery, 9 youths (age 24 or under), and 7 Cowichan Elders (age 65 or older). Among the 24 respondents who identified as substance users, 4 identified as “I am a frequent drug user or struggle with addiction” and 20 identified as “I use drugs recreationally or once in a while”.

Respondents also included 65 people who signalled that they work in health services (including mental health services or harm reduction), 21 people who identify as cultural leaders or knowledge keepers, and 110 people who work for First Nations bands/organizations.

## Limitations

The web-based nature of this survey allowed for low-cost and widespread engagement of community and partners and could be deployed rapidly to meet the Task Force’s mandated timeline. This nevertheless limited participation by community members and Elders who are not technology savvy and likely by substance users who are facing housing insecurity and other economic challenges. Youth are also not overly motivated to support studies without incentives and targeted recruitment strategies, which were not carried out given that a separate youth engagement strategy was being considered (as well as other community engagement opportunities such as an online forum). 127 Cowichan-registered respondents (status and/or membership) participated in the survey, which is a good response given the short timeframe and lack of incentives. However, this is out of a community of over 5000 members – the largest First Nation in BC – so the results represent a limited, non-randomized sample of Cowichan Tribes members.

It should be noted that among Cowichan-registered respondents:

- Female respondents outnumbered male respondents by three to one.
- Less than 5% of respondents were under 25 years old.
- Only 5% of respondents were 65 or older.
- Less than 5% of respondents are in recovery.
- Less than 7% of respondents use substances other than alcohol.
- Less than 3% identified as frequent drug users or struggling with addiction.

The relatively low representation of males, people who have substance use disorders, people in recovery, Elders, and youth is a limitation of this report.

## Findings

The following sections present a summary of findings from the analysis of qualitative and quantitative survey data gathered. While all qualitative and quantitative responses were analysed, this report focuses primarily on data received from Cowichan-registered respondents, since the Opioid Crisis Response Working Group mainly serves Quw'utsun people. Additional specific analyses were undertaken for responses received from people who use substances, people in recovery, youth, and Quw'utsun Elders, to ensure their voices are reflected in the findings. In most sections below, a subsection is included for findings from people who identified as substance users. Unique findings from responses from youth (under 25) and Quw'utsun Elders (Cowichan-registered and 65 or older) are included when appropriate, and separate sections for each group are included to highlight the unique findings from their responses. We also received valuable data from non-Cowichan respondents, which was analysed and included in this report's findings as appropriate.

### How The Crisis Of Drug Use And Overdoses Is Impacting The Community

There were 109 written comments from Cowichan-registered respondents to question 10, “**How is the crisis of drug use and overdoses impacting the community?**” The key findings are presented below.

- 1. Deaths, loss, and trauma.** The crisis of addiction and overdoses is having a devastating impact on Cowichan Tribes. Members, including youth, are dying from overdoses. Community members are continually devastated by the loss of family and friends. This is further traumatizing members already struggling with the impacts of trauma from colonization and residential schools, and the negative impacts of the COVID-19 pandemic. Many respondents indicated that the overdose crisis is causing immense pain, grief, and mental health problems. The loss of youth to overdoses – including some in their early teens – has been especially devastating for many community members, families, and youths.
- 2. Increase in fear and feeling unsafe.** The crisis of addiction and overdoses has increased fear and many community members are feeling unsafe. People who use substances are fearful they are going to die from toxic drugs. Many members including youth are afraid that their family and friends will die from drug overdoses. Many community members also feel unsafe going out in some areas or letting their kids go out in some areas because of the increase in property crime, disorder, an increase in open drug use and discarded drug paraphernalia, and visible street-involved people struggling with untreated mental health and substance use disorders.
- 3. Impacting families and youth.** The crisis of addiction is also having a devastating impact on families and youth. Addiction often fractures relationships, separates families, and frequently prevents children from staying with their parents. Also, more youth are being exposed to drug use at increasingly younger ages, sometimes by family members they live with.
- 4. Loss of culture, language, teachings.** The crisis of addiction and overdoses is also contributing to disconnection from and loss of culture, language, and teachings.

## The Causes Of The Crisis Of Addiction And Overdoses

There were 108 written comments from Cowichan-registered respondents to question 11, “**What do you think are the causes of the overdose crisis?**” The key findings are presented below.

- 1. Toxic drug supply and lack of safe supply.** The toxic drug supply and the lack of safe supply was the most-cited cause of the overdose crisis. A variety of illicit drugs are increasingly laced with fentanyl and other substances, and users often don’t know what they are consuming. Several respondents – particularly among people who use substances – emphasized that the lack of access to safe supply is contributing to the epidemic of overdose deaths.
- 2. Trauma and poor mental health.** The second most-cited cause of the crisis was untreated trauma and mental health disorders, including unresolved intergenerational trauma from colonization and Indian Residential Schools. The ongoing impacts of this trauma include untreated mental health disorders, addiction, domestic violence, sexualized violence, lack of life skills, and disconnection from culture. Many members use drugs and alcohol to cope with this multifaceted trauma and its ongoing impacts. Respondents also noted that widespread pain, depression, and hopelessness are fueling the crisis.
- 3. Lack of access to detox, treatment, and recovery supports.** The lack of access to detox, treatment, and recovery supports is also a main cause of the overdose crisis. People who use substances and people in recovery were more likely to mention the lack of access to detox, treatment, and recovery supports as a main cause of the crisis. There is a dire shortage of detox and treatment beds in the Cowichan valley, a lack of access to treatment services and mental health supports, waitlists for detox and treatment are too long, and ongoing supports for people in recovery are inadequate.
- 4. Easy access to drugs.** Respondents noted that easy access to drugs is also fuelling the crisis. Members are easily able to buy extremely strong, relatively cheap drugs, including from dealers in the community. It was noted that in some cases, family members will use substances together, including parents and their children. More youth are also experimenting with friends, not realizing how deadly the drug supply is.
- 5. Lack of connection to family, community, and culture.** Respondents noted that the lack of connection to family, community, and culture is fueling the crisis. This disconnection from culture and community also leads to a lack of identity, a lack purpose and belonging, and a lack of self-worth. People who use substances are often cut off from family and stigmatized by others, furthering the disconnection from their community and culture.

*“I have so many friends dying and I’m scared of dying myself.”*

- Quw’utsun Youth respondent

6. **Social determinants of health.** Relatively poor social determinants of health were noted as a key cause of the crisis, including poverty, poor education outcomes, unemployment, housing insecurity.
7. **Lack of education on addiction and substance use.** Respondents noted the need to improve education on prevention, addiction and substance use. This includes overdose prevention and harm reduction education, education on the risks of substance use, trauma-informed education on the root causes of the crisis of addiction and overdoses in the community, and the need to destigmatize addiction so members can address these root causes more openly and come together to heal.
8. **COVID-19 pandemic.** Respondents stated that the COVID-19 pandemic has worsened the crisis and amplified many of the other contributing factors. The drug supply has become even more toxic. Pandemic restrictions and social isolation have caused widespread deterioration of mental health, causing many to turn to drugs and alcohol to cope.
9. **Housing insecurity.** Housing insecurity was also noted as a key cause of the crisis of addiction and overdoses. The housing crisis, members living in unsafe housing situations, and the lack of access to safe, affordable housing options, is a major barrier for people who want to get well. People who use substances were more likely to cite housing insecurity as a main cause of the crisis of addiction and overdoses, noting that the lack of affordable housing options is a major barrier to healing and recovery.

**A youth respondent** noted that COVID-19 restrictions on gatherings and activities are causing many youth in the community to turn to drugs and alcohol. A youth respondent noted that even youth who have safe homes are going out into the street to experiment with drugs, and becoming entrenched in addiction and at risk of overdosing.

**Other findings.** Other noted factors contributing to the crisis of addiction and overdoses, including comments from non-Cowichan respondents, included: lack of mental health supports; stigma around addiction and substance use; dealers and gangs in the community; permissive attitudes toward drug use; lack of harm reduction supports; over-prescription of opioid pain medications; lack of role models; lack of opportunities; systemic racism; peer pressure; youth seeing their parents use substances; and, people using substances alone. A small number of respondents were opposed to harm reduction and safe supply, and some also called for tougher enforcement of drug laws.

*Address the stigma around both mental health and substance use. This includes learning and teaching language that does not promote stigmatization.*

*- Quw'utsun respondent*

## Findings from Respondents Who Use Substances

There were 19 written comments from people who use substances to question 11, “**What do you think are the causes of the overdose crisis?**” The top five themes mentioned by people who use substances were:

1. **Trauma**, including inter-generational trauma from residential schools and trauma-induced addiction.
2. **Lack of access to services and supports**, including lack of treatment options, lack of mental health supports, and lack of recovery supports.
3. **Housing insecurity**, including the housing crisis and the lack of housing options.
4. **The toxic drug supply and the lack of safe supply.**
5. **The criminalization and stigmatization of addiction and substance use**, which includes using a law enforcement approach to the crisis of addiction instead of a healthcare approach. It was also noted that a “not in my backyard” response from some community members is further stigmatizing people struggling with addiction, and frames addiction as an individual rather than a community problem.

Other factors mentioned by respondents who use substances included: they suffer from a lack of sense of belonging, a lack of sense of community, and a lack of identity; the lack of prevention education; unemployment; and a lack of life skills.

Respondents who use substances also noted several issues with current services including: waits for detox and treatment are too long; the lack of low-barrier, managed-consumption options; the lack of consistent harm reduction approach across services; getting help is too complicated and cumbersome (“too many hoops to jump through”); the lack of funding for different treatment options; and, the lack of supports for youth.

**Youth Respondents.** Youth respondents noted that the lack of activities for youth and COVID-19 restrictions are causing boredom, isolation, loneliness, anxiety, and depression, causing many youth to turn to drugs.

*“Kids are gonna experiment - we need to make sure they do so safely.”*

*- Respondent who uses substances*

## What Is Currently Working Well

There were 105 written comments from Cowichan-registered respondents to question 12, “**What is Cowichan Tribes (or other service providers) currently doing well in the areas of drug use prevention, support and treatment?**” The key findings are presented below. The top five themes noted were:

1. **Harm reduction initiatives**, including providing naloxone and training.
2. **Providing support services**, including counselling, mental health, treatment supports, and detox and treatment referrals.
3. **Education and communications**, including the Opioid Crisis Response Task Force’s communications campaign.
4. **Not enough** – more resources and actions are needed to address the crisis.
5. **Outreach**, including outreach by staff to support at-risk members and youth.

**Other findings.** Other key themes related to what is working, including comments from non-Cowichan respondents, included: the creation and work of the Opioid Crisis Response Task Force; the establishment of emergency shelters and tenting sites; the Overdose Prevention Site; distribution of food, clothing, and essentials; partnerships with community agencies and organizations including Friendship Centres; dialogue and community engagement.

## Findings From People Who Use Substances

There were 18 responses from people who use substances to the question 12, “**What is Cowichan Tribes (or other service providers) currently doing well in the areas of drug use prevention, support and treatment?**” The top five themes mentioned by people who use substances were:

1. **Outreach**, including connecting with and supporting at-risk members.
2. **Harm reduction and overdose prevention**, including distributing safer use supplies and naloxone, and providing naloxone training.
3. **The Overdose Prevention Site**
4. **Counselling services**
5. **Decreasing stigma**

**Other findings.** People who use substances also noted several other things that are working well including: safer supply; treatment referrals; low-barrier options and tent sites have helped people

towards recovery; raising awareness; communications including Facebook, social media, and public signage; housing-first initiatives; peer workers working with healthcare providers; collaboration with community partners and City of Duncan.

**Gaps.** Comments from people who uses substances in response to question 12 also noted a number of gaps including: current treatment options are not sufficient; more supports are needed including housing, supports for unhoused people, and family supports; lack of safe supply; inadequate mental health supports; the need for supports during nights and weekends; OPS hours are not great; need for a “call an auntie/call an Elder program” that youth can call to talk about drugs in non-judgemental way.

*“Keeping people alive until they are ready for treatment.”*

- Respondent who uses substances

## What Is Needed To Address The Crisis Of Addiction And Overdoses

There were 105 written comments from Cowichan-registered respondents to the question 13, “**In your opinion, what is most needed in the areas of prevention, supports and treatment to address the overdose crisis?**” The key findings are presented below.

- 1. Improve access to detox, treatment, and recovery services and supports.** The need to improve access to detox, treatment, and recovery services and supports was by far the most-mentioned theme (over 40 comments). Respondents repeatedly stated that more detox and treatment centres and services are needed. Respondents also noted the need for culturally appropriate services, long-term recovery supports, a range of service options, services located in the community or close by, and spaces and services available when needed (no long wait lists). Respondents also noted the need for family treatment centres and youth treatment centres, and for more timely access to all services and supports.

*“We need to love our addicts and welcome them home, instead of pushing them out. These are our most vulnerable people.*

*- Quw’utsun respondent*

- 2. Increase mental health supports and staff.** The second most-cited theme was the need to improve access to mental health supports and services. Respondents noted the need for culturally appropriate services, better access to mental health supports, more mental health staff, and supports that are confidential, trustworthy, and non-judgemental.
- 3. Enhance education and awareness.** Respondents mentioned the need to enhance education and raise awareness about addiction and substance use, including the risks of substance use, overdose prevention and harm reduction, and the need to talk more openly about the causes of the crisis of addiction and mental health.
- 4. Enhance outreach services.** Respondents mentioned the need to enhance outreach supports for at-risk members and people who use substances. Several respondents noted that outreach supports need to be accessible at all hours, seven days a week.
- 5. Enhance youth programs and supports.** Respondents noted the need to enhance programs, supports, and activities for youth, including support programs grounded in Quw’utsun culture and teachings.
- 6. Improve access to safe, affordable housing.** The lack of safe, affordable housing was cited by respondents – particularly people who use substances – as a major barrier to healing from addiction. There is a need to enhance access to safe, affordable housing options, including supportive housing for people in treatment and long-term recovery.
- 7. Safe supply of substances.** The need for safe supply of substances was emphasized by several respondents, particularly people who use substances.

**Other findings.** Other main themes related to what is needed to address the crisis of addiction and overdoses, including responses from non-Cowichan respondents, included: prevention; Elder and cultural supports and programs; addressing the problem of drug dealers and drugs in the community; promoting zero tolerance; more activities to participate in and community events; family supports and services; more timely access to all supports and services; Naloxone kits and training; improving connection and relationships; addressing the social determinants of health (employment, poverty, childcare, food); addressing stigma; more evidence-based research; more action from leadership, including Chief and Council.

### **Findings From People Who Use Substances**

There were 18 responses from people who use substances to the question 13, **“In your opinion, what is most needed in the areas of prevention, supports and treatment to address the overdose crisis?”** The top five themes mentioned by people who use substances were:

1. **Improve access to detox, treatment, and recovery services and supports.** The need to improve access Improve access to detox, treatment, and recovery services and supports. Respondents also noted the need for: faster access to detox and treatment; culturally appropriate treatment; more local services and supports; a local or close-to-home detox and treatment centre and recovery centre; more options, not just abstinence-based; programs for different demographics; youth treatment programs; low-barrier, long-term options; community recovery support groups.
2. **Education,** including: about risks of substance use; there are alternatives to using substances; education for children and families; improve education about mental health and addiction in schools, which will help end stigma.
3. **Housing,** including safe, affordable housing and supportive housing for the most vulnerable.
4. **Safe supply.** Improved access to safe supply is needed.
5. **Ending stigma against people who use substances,** including working together as a community to end stigma.

**Other findings.** Other main themes mentioned by people who use substances related to what is needed to address the overdose crisis included: enhanced outreach, including youth & family outreach teams that can actively respond when a family is in crisis; interventions, including stronger interventions for youth; more youth supports, including more support for youth with learning issues, and supports that empower youth; more supports for families and healthy parenting supports, counselling, and respite; improve mental health supports; mental health facilities for rehab; prioritize prevention; food security; end racism including in the education system and in the healthcare system.

*“Lift our people up, make them feel heard, show them that we care.”*

*- Quw’utsun respondent who uses substances*

Additional comments related to what is needed included: more overall supports for people who use substances; improve access to the Overdose Prevention Site, open more hours; support at more locations, mobile services; community collaboration; equal access to healthcare; stop traumatizing practices, including racism in healthcare; address social determinants of health including employment; highlight success stories; more advocacy; encourage treatment; Councillors to have open conversations with people who use substances.

## Support For Cowichan Tribes Detox & Treatment Centres, Additional Resources

Respondents were asked to state their level of agreement with four statements in question 14 using a 5-point scale. Responses show **strong support for increasing resources to address the crisis** of addiction and overdoses, **and strong support for Cowichan Tribes establishing its own detox and addiction treatment centres.**

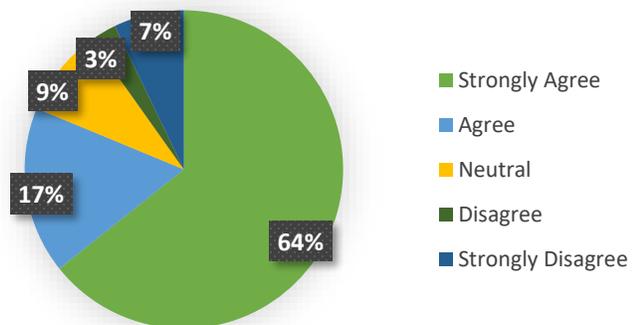
Question 14 was: “How much do you agree or disagree with the following statements (on a scale of 1 to 5, with 1 being strongly disagree to 5 being strongly agree)?”

- More resources are needed to address the overdose crisis.
- Addressing the overdose crisis should be a top priority for Cowichan Tribes and other governments.
- Cowichan Tribes needs its own detox centre.
- Cowichan Tribes needs its own addiction treatment and recovery centre.”

For each statement, a strong majority of Cowichan-registered respondents strongly agreed or agreed. The quantitative findings from question 14 are summarized below.

**“More resources are needed to address the overdose crisis.”** Among 112 Cowichan-registered respondents:

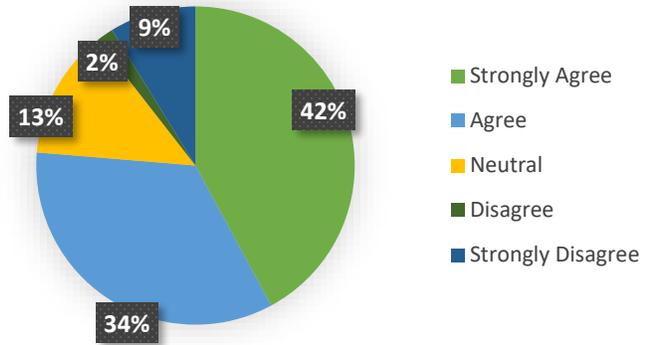
- Strongly agree: 72 (64%)
- Agree: 19 (17%)
- Neutral: 10 (9%)
- Disagree: 3 (3%)
- Strongly disagree: 8 (7%)



*“Need for education on decolonizing our thinking and way of being. This includes examining our beliefs and reclaiming what was taken away, and living it in all aspects of our lives, not just for a season.” - Quw’utsun respondent*

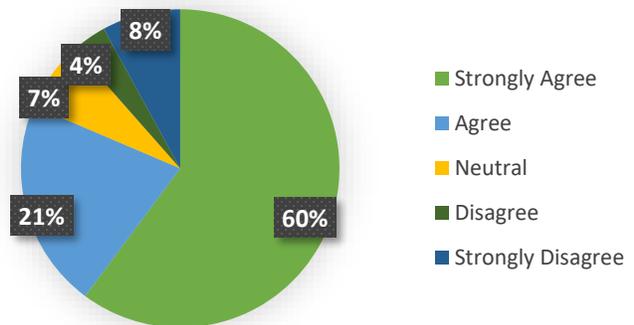
**“Addressing the overdose crisis should be a top priority for Cowichan Tribes and other governments.”** Among 114 Cowichan-registered respondents:

- Strongly agree: 48 (42%)
- Agree: 39 (34%)
- Neutral: 15 (13%)
- Disagree: 2 (2%)
- Strongly disagree: 10 (9%)



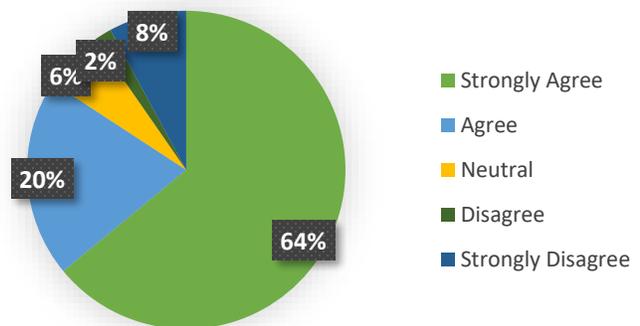
**“Cowichan Tribes needs its own detox centre.”** Among 113 Cowichan-registered respondents:

- Strongly agree: 68 (60%)
- Agree: 24 (21%)
- Neutral: 8 (7%)
- Disagree: 4 (4%)
- Strongly disagree: 9 (8%)



**Cowichan Tribes needs its own addiction treatment and recovery centre.”** Among 114 Cowichan-registered respondents:

- Strongly agree: 73 (64%)
- Agree: 23 (20%)
- Neutral: 7 (6%)
- Disagree: 2 (2%)
- Strongly disagree: 9 (8%)



## How Cultural Practices And Teachings Can Help Address the Crisis

There were 99 written comments from Cowichan-registered respondents to question 15, **“How could cultural practices and teachings help address the overdose crisis?”**

The top five themes mentioned by Cowichan-registered respondents on how cultural practices and teachings could help address the overdose crisis were:

- 1. Providing cultural and ancestral teachings and traditional knowledge.**
- 2. Creating a sense of connection to the community, the land, and other people including family, friends and other community members.**
- 3. Enabling Elders to share their knowledge and support community members.**
- 4. Promoting healing, wellness, and balance.**
- 5. Creating a sense of identity, purpose, meaning, belonging, and acceptance, so people know who they are and where they come from.**

*“They will help give our youth a sense of belonging, as well as confidence and pride in who they are and what they are part of.” - Quw’utsun respondent*

Other main themes mentioned, including by non-Cowichan respondents, on how cultural practices and teachings could help address the overdose crisis include: culture promotes respect; culture creates discipline; culture can teach skills; creates activities and things to do; creates a sense of safety and safe spaces; promotes a sense of grounding; create pride, dignity, confidence, and self-esteem; helps the community work together; culture teaches us that we are not separate from nature and we can use nature to help our own sense of wellbeing; rights of passage.

*“Teachings are so powerful. It's teachings that have kept Cowichan Tribes people strong through everything they have lived through. Teachings are about family, love, kindness, helping each other. Every single member of Cowichan Tribes is here for a reason. Sometimes that reason gets lost but it can be found again!!!” - Quw’utsun respondent*

## Findings From People Who Use Substances

There were 15 responses from people who use substances to question 15, **“How could cultural practices and teachings help address the overdose crisis?”** The top five themes mentioned were:

1. **Culture is essential for healing.**
2. **Creates sense of community, belonging, inclusiveness, acceptance.**
3. **Involving Elders helps healing.**
4. **Creates sense of identity, meaning, purpose, dignity.**
5. **Creates a sense of connection,** including connection to something bigger.

Respondents who use substances also stated that: culture should be the starting point of the healing process; set up culture programs that reconnect people to the land, sea, and plants; culture and teachings improve self-esteem.

*“Culture should be the starting point of the healing process.”*

*- Quw’utsun respondent who uses substances*

## Successful Models, Programs, and Wise Practices

There were 89 written comments from all respondents to question 16, **“Are you aware of any successful models, programs or wise practices that you would like to share with us?”** Responses from Cowichan-registered and non-Cowichan respondents were included in the analytical summary for question 16. The lists below show the programs, models, and wise practices mentioned by respondents.

### Wise Practices

- Cultural programs, ceremonies, and cultural activities (potlatches, sweat lodges, smudging)
- Land-based activities
- Addressing the underlying cause of the addiction
- Elder supports and teachings
- Examples of other countries (Sweden, Portugal)
- Counselling
- Banishment
- Public Speakers (Gabor Mate, Paul KASP Swan, Rod Jeffries, Dr. Evan Wood)

## Successful Programs and Models

- Youth-specific programs
- Therapeutic community model
- Land-based programs (e.g. Fred Roland)
- Day Programs
- Peer-led Programs
- 12-step programs
- Opioid Agonist Therapy (OAT)
- Housing First model
- Smart Recovery resource
- Managed Alcohol Program
- Wet housing
- Peer Outreach (CMHA)
- Embracing Life girls program
- [Roundlake Treatment Centre](#)
- [Nenqayni Wellness Center](#) (Williams Lake)
- [White Crow Village](#)
- [Cedars Treatment Program](#) (Cobble Hill)
- [Peak House program](#) (Vancouver)
- [180 Program](#) (John Howard North Island)
- [Tsow-Tun Le Lum](#) (Vancouver Island)
- Land-based Treatment in Klemtu, Yukon
- Portland Hotel Society “Drinking Lounge”
- Puyallup Tribe Mobile drug testing
- [Ravenswood](#)
- [Kackaamin Family Development Centre](#) (Port Alberni)
- Kunsoot Wellness Project
- Salvation Army
- [Teen Challenge Treatment Centre](#)
- [Mental Health Commission of Canada: Stigma & the Opioid Crisis - final report 2019](#)
- [Nanaimo and Area Resource Services for Families](#)
- [Culture Saves Lives](#) (Vancouver)
- Harm reduction program in Port Alberni
- Ta'tul'ut Shqwaluwun Program
- Time to Heal
- Work Orientation Workshop (W.O.W.) program at Friendship Centre
- Employment program (led by Chief Clarence Louie, Osoyoos)
- All Nations Outreach Program
- Not Just Naloxone training (FNHA)
- [Right to Play](#)
- [Bridges For Women](#) (Victoria)
- Ahousaht Family Healing program and Addictions program

*“Being on the land, having Elders talk to you, being cleansed by branches, going for baths in the water. Praying, sitting under a cedar tree. Walking out in the bushes. We have our own ways of healing. We have to believe in our ways. Much of our ways have been left behind. Much of our youth have been influenced otherwise. We need our youth back out on our lands, learning the language, learning how to survive on the land, without a phone, without take out food, without drugs and alcohol. We need to instill the value of our ways back into our youth.”*

- Quw'utsun respondent

## Findings From People In Recovery

A total of 13 responses were received from people who identified as being in recovery; 6 were Cowichan-registered and 7 were non-Cowichan. These responses were analysed separately to look for unique trends and themes. The main themes mentioned by people in recovery aligned with the main themes mentioned by Cowichan-registered respondents overall. However, some of the unique or more prominent themes in responses from people in recovery included the following:

- 1. What is needed to address the crisis of addiction and overdoses:**
  - Several comments noted that access to detox and treatment must be rapid and immediate.
  - Several comments emphasized the need for housing, including affordable housing, transitional housing (pre- and post-treatment), and supportive housing.
  - Long-term post-treatment and recovery supports are needed.
  - Culturally appropriate treatment is needed.
- 2. How cultural practices and teachings could help address the overdose crisis:**
  - Several comments noted that cultural practices create a sense of belonging, connection, and community. Several comments also noted that culture creates identity, pride, dignity, and self-esteem.
  - “Access to cultural practices and teachings should be available in safe use sites, detox facilities and recovery facilities.”
  - “Culture is key to building strong people.”
- 3. Successful Models and Wise Practices:**
  - Several comments emphasized the Housing First approach.

## What Helps People In Recovery

There were 13 written comments from respondents who identified as living in recovery to question 8, **“(Optional) If you are in recovery, what has helped you in recovery?”**

The top five themes mentioned were:

- 1. Support from and connection to family, friends, Elders, and children.**
- 2. Detox and treatment.**
- 3. Culture.**
- 4. Counselling and healing.**
- 5. 12-step programs**, including Narcotics Anonymous and Alcoholics Anonymous.

Other factors mentioned were: distance and/or time away from the people and places which enabled substance use; the land; food; *A Time To Heal* workshops; surrounding oneself with people who don't use substances.

## Findings From Quw'utsun Elders

Seven responses were received from people who identified as Cowichan-registered and age 65 or older. These responses were analysed separately to look for unique trends and differences in main themes. It should be noted that the sample size was very small, with just seven responses from Quw'utsun Elders.

The main themes mentioned by Quw'utsun Elder respondents aligned with the main themes mentioned by Cowichan-registered respondents overall. However, some of the unique or more prominent themes in responses from Quw'utsun Elders included the following:

1. **Causes of the overdose crisis** include trauma from residential schools being passed on, a lack of role models to follow, kids witnessing their parents use substances, and boredom.
2. **What is needed to address the crisis of addiction and overdoses:**
  - Address impacts of residential schools and genocide, including lack of parenting skills.
  - Language and culture workshops.
  - Drug and alcohol counselling for Quw'utsun people by Quw'utsun people.
  - Life skills centre and programs.
  - Respect people struggling with addiction and “allow addicts to gain their power back.”
  - “Need for education on decolonizing our thinking and way of being. This includes examining our beliefs and reclaiming what was taken away, and living it in all aspects of our lives, not just for a season.”
3. **How cultural practices and teachings could help address the overdose crisis:**
  - Culture helps us work together as a community.
  - Culture teaches discipline.
  - *“Culture enables self-identity and self-empowerment.”*
  - *“Culture teaches us that we are not separate from nature and we can use nature to help our own sense of wellbeing.”*
  - *“Culture should not just be practiced during a season but be a way of life and the walk should be year round.”*
  - *“Cultural practices that includes rights of passage, teaching disciplines that start early for every child not just those belonging to society.”*
  - *“Accepting and acknowledging self and gain understanding of the purpose of the rituals and cultural practices.”*
4. **Wise practices** mentioned by Elders included:
  - Culture-based treatment program.
  - Family values, cultural base.
  - Tools for life skills, life after treatment, return to family and community.
  - Abstinence.

## Findings From Youth

9 responses were received from people aged 24 or under, including six Cowichan-registered and three non-Cowichan. These responses were analysed separately to look for unique trends and differences in themes. It should be noted that the sample size of youth respondents was very small, particularly given Cowichan Tribes' relatively young population, which is a significant limitation of the survey data.

*"It's killing my friends, my relatives, and crushing the spirit of my ancestors."  
- Quw'utsun Youth respondent on the impacts of the overdose crisis.*

The main themes mentioned by youth respondents aligned with the main themes mentioned by Cowichan-registered respondents overall. However, some of the unique or more prominent themes and comments in responses from youths included the following:

**1. Impacts of the overdose crisis:**

- Losing connection to family and culture.
- Some youth are fearful of dying from overdose and of losing friends.

**2. Causes of the overdose crisis:**

- COVID restrictions and the cancellation of activities are causing boredom, isolation, loneliness, anxiety, and depression – some youth are using drugs to cope.
- There is a lack of activities and programs for youth.

**3. What Cowichan Tribes is doing well:**

- Cowichan Tribes team who walk in "high risk" areas between 7 pm and 11 pm.
- Communications on Facebook page.

**4. What is needed to address the crisis of addiction and overdoses:**

- A youth treatment centre.
- Increased support to engage with community and culture, especially upon return from treatment.
- More accessible safe places.
- Encouraging safer drug use (not using alone, not mixing, having naloxone.)
- Outreach workers continuing to check in on the people who are street entrenched.
- Preventative and transitional support.
- Advertise where people can test drugs.
- Education for youth.

**5. How cultural practices and teachings could help address the overdose crisis:**

- "Ground people within culture and community."
- "Utilizing oral teachings and story telling of Elders, creating space for people to engage in safe cultural practices during the pandemic."
- "It is really up to the individual on their interest of area for cultural practices, whether it be learning our language to learning how to strip cedar to weaving, hunt, fish, canoe."

**6. Wise practices**

- "Land based treatment centres. Klemtu and Yukon have treatment and recovery centres such as these. Allows opportunity to connect to land and be removed from external and modern distractions."

# Appendix A: Survey Questionnaire

## Cowichan Tribes Opioid Crisis Response Survey

[Survey Introduction]

**Uy' skweyul!** (Good day!) Thank you for taking part in this important survey. We'd like to hear from you about how to address the crisis of drug use and overdoses in our community.

Cowichan Tribes has formed an Opioid Crisis Response Task Force to develop a plan with recommendations to address the crisis. The information we gather in this survey will help inform the Task Force's plan and recommendations, and improve services.

This survey is voluntary and *anonymous*. We don't ask for your name, and you don't need to answer any questions that you don't want to.

This survey should take 10 to 20 minutes to complete. You can provide short answers or as much detail as you'd like. The survey will be open until October 14th.

If you have any questions about this survey, please email Jen Charlie, Task Force Coordinator: [opiod.taskforce@cowichantribes.com](mailto:opiod.taskforce@cowichantribes.com)

We are grateful for your participation. **Huy ch q'u** (Thank you).

Let's get started...

### Part 1: Please tell us a bit about yourself, if you are comfortable doing so

#### 1. Age:

- 14 years or under
- 15 to 19 years
- 20 to 24 years
- 25 to 44 years
- 45 to 64 years
- 65 years and over

#### 2. Your Gender

- Female
- Male
- Trans female
- Trans male
- Non-binary/non-conforming
- Prefer not to say

**3. Identity**

- I am Indigenous (First Nations, Métis, Inuit, other Indigenous identity)
- I am not Indigenous

**4. Membership**

- I am registered with Cowichan Tribes (status and/or membership)
- I am non-Cowichan

**5. Residence / Location**

- I live on Cowichan Tribes reserve lands
- I live elsewhere

**6. Drug use (not including alcohol)**

- I am a frequent drug user or struggle with addiction
- I am in recovery
- I do not use drugs
- I use drugs recreationally or once in a while
- I use drugs recreationally or once in a while
- Prefer not to say

**7. (Optional) If you use drugs, what drugs do you use?**

**8. (Optional) If you are in recovery, what has helped you in recovery?**

**9. Experience**

- I work in health services (including mental health services or harm reduction)
- I am a cultural leader or knowledge keeper
- I am a researcher/academic
- I work in law enforcement or the justice sector
- I work in a government or policy/program administration
- I work in the education sector
- I work for a First Nations Band / Organization
- Other organization
- None of the above/Prefer not to say

**Part 2 Survey Questions**

**10. How is the crisis of drug use and overdoses impacting the community?**

**11. What do you think are the causes of the overdose crisis?**

**12. What is Cowichan Tribes (or other service providers) currently doing well in the areas of drug use prevention, support and treatment?**

**13. In your opinion, what is most needed in the areas of prevention, supports and treatment to address the overdose crisis?**

**14. How much do you agree or disagree with the following statements (on a scale of 1 to 5, with 1 being strongly disagree to 5 being strongly agree) [Likert-Scale quantitative question]**

- More resources are needed to address the overdose crisis
- Addressing the overdose crisis should be a top priority for Cowichan Tribes and other governments
- Cowichan Tribes needs its own detox centre
- Cowichan Tribes needs its own addiction treatment and recovery centre

[Answer choices: 1) Strongly disagree 2) Disagree 3) Neutral 4) Agree 5) Strongly agree]

**15. How could cultural practices and teachings help address the overdose crisis?**

**16. Are you aware of any successful models, programs or wise practices that you would like to share with us?**

**17. Is there anything else you would like to share?**