

“Seeing this much devastation so frequently really permeates your whole being”

A Canadian firefighter speaks out on the opioid crisis

A British Columbia firefighter
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The World Socialist Web Site received the following letter from a firefighter in British Columbia detailing the horrendous conditions produced by the ongoing opioid crisis.

This year, British Columbia is seeing more deaths due to fatal drug overdoses than ever before in its history.

As a firefighter, my crew are usually first to arrive at these emergencies. Paramedics are not considered an essential service in B.C., and as a result they receive less funding, are understaffed, and have few ambulances able to attend calls. This is especially true in more rural regions, and the municipality I work in certainly encompasses areas that fall within this category. Fire departments like mine are first on the scene at about half of all the medical calls we are dispatched to, and sometimes it takes a long time for paramedics and critical care paramedics to get to the location.

I've been in this line of work for a long time. When I started my career almost three decades ago, my job as a firefighter saw me putting out structure fires, attending vehicle accidents and performing technical rescues. Now, the majority of calls I attend are overdoses—usually fatal ones—or suicides.

Since the beginning of the year, our province has lost 728 people to drug overdoses. These people are usually young, with the majority of overdoses I've attended being suffered by people in their thirties. Right now, they are usually alone in their homes when they die.

May 2020 saw record-breaking numbers of deaths, and then June topped that with 175 deaths in just one month, the worst in B.C.'s history. The majority of these fatalities occurred in Vancouver, Surrey, and Victoria. On June 26, paramedics responded to a daily record of 131 calls reporting suspected overdoses.

The pandemic has worsened all of the already bleak

circumstances. Many supports for people that use drugs have been eliminated as a result of COVID-19. The borders are closed and the incoming drug supply has been disrupted, so local suppliers are making their own batches and this “basement concoction” product is highly toxic, containing lethal amounts of fentanyl and carfentanil.

Fentanyl is a synthetic opioid that can be one hundred times more potent than morphine. It provides a very powerful high and is incredibly addictive. A cheap solution, drug producers mix it with cocaine, heroin, MDMA and methamphetamine in order to provide a stronger high with less product.

Carfentanil is a white powdery substance, similar in appearance to cocaine or heroin that is used to tranquilize elephants and other large mammals. It is one hundred times more potent than fentanyl, and ten thousand times more potent than morphine. Drug manufacturers mix it with heroin to make the product stronger. It is so potent that even multiple doses of naloxone (an opioid overdose reversal nasal spray used by first responders and first aid administrators) can sometimes not reverse its effects. First responders who touch carfentanil by accident can also be very adversely affected.

Even users with a higher tolerance than average are succumbing to these deadly synthetic opioids, not to speak of relapsing addicts who have begun using again in the wake of the stressors of the pandemic—isolation, fear, anxiety, grief, loss of employment, income and food insecurity, and disruption of routine, to name just a few.

Despite the call by B.C. chief medical officer Dr. Bonnie Henry and many other health officials, the provincial government won't decriminalise personal possession of drugs. So people are afraid they'll face legal consequences if they call us, and there's little hope for those who overdose while using alone in pandemic-imposed self-isolation.

There was a glimmer of hope for those of us who have been in the midst of this crisis in B.C. for the past half a decade: the government recently said that it would be addressing the huge gaps in the system that leave those who need help without access to care and at the mercy of their own illnesses.

Yet that glimmer has been quashed, as Bill 22—the proposed solution, an amendment to our Mental Health Act—simply serves to allow authorities to involuntarily detain youth in treatment facilities for up to seven days, an utterly reckless and ill-informed proposition that they're calling a form of "secure care." The bill was recently introduced by the provincial New Democratic Party government without public consultation or engagement with affected families. Second and third readings of the bill begin next week, meaning it could soon be passed into law.

B.C. does not guarantee access to legal advice to those involuntarily detained as other provinces do, despite Attorney General David Eby promising to implement that right last year. Those at the mercy of the authorities granted additional powers by Bill 22 will be subject to an astonishing violation of human rights that, I believe, will only further erode the already crumbling trust of youth in the healthcare system. Putting youth in facilities where they are forced to abstain from substance usage for seven days and then releasing them without continued support is a sure-fire way to see hundreds more die.

The province recently put \$900,000 into funding the Lifeguard app—a phone or computer application that allows users to start a timer which, when left without deactivation, calls 911. But so far I haven't personally responded to anyone utilising it. Many people in this demographic do not have access to technology or an Internet connection.

There are two crises happening simultaneously right now. Here in Canada we have consistently been told by the media that the country has done well in flattening our COVID-19 curve. But what happens when you factor in the deaths that have occurred as a by-product of the pandemic, like these overdoses? In June there were fifteen fatal overdoses in B.C. for every one COVID-19 death.

The emotional and mental toll of seeing these deaths day after day is wearing on the firefighters in my department, like so many first responders and frontline health workers across the world right now. Seeing this much devastation so frequently really permeates your whole being.

The opioid crisis is just one of many signs of severe social distress here in British Columbia. Others include drug addiction, car wrecks due to alcohol abuse, domestic violence and regular suicides. Homeless encampments are expanding in number and moving from cities to less heavily urbanized townships, cropping up along highways and in

patches of forest.

The working poor are often to be found struggling in the face of the astronomically high living costs of cities like Vancouver and Victoria, with B.C. touting the lowest unemployment rate in Canada yet also the country's highest poverty rates. One doesn't need to go further than Vancouver's Downtown Eastside to see this.

In smaller communities the poverty and distress may not be showcased on the streets in the same way, but believe me when I say, it is there. It is hidden within the walls of people's homes, or inside a smattering of tents nestled by the highway. Climb aboard my firetruck on any given shift and I will show you the stuff of nightmares, right here in one of the richest countries in the world.

No doubt, when the ERB (Canada Emergency Response Benefit) payments are stopped, the existing social crisis and all of its side effects will be intensified to the maximum. The Liberal government has already threatened to impose jail time and fines on anybody it deems to have obtained the CERB "fraudulently," yet so many people who fall into that criteria are in poverty or homeless to begin with.

With the huge push of our government for a return to work and school, those of us who are already seeing the direct and horrific outcomes of our country's response to the pandemic dread to think of what awaits us in the near future. It is clear that corporate profits are being put before human lives. I have to ask: if the rich were ravaged with this death toll, would the same blind eye be turned? Is it because these deaths are taking place in a part of society that is so easily and comfortably ignored that this catastrophe rages on?

I extend my gratitude to everybody who makes the WSWS possible, for continuing to defend and document the plight of the working class and those most deeply affected by this global crisis. Thank you for continuing to expose the actions that are enabling the social injustices I see every time I pick up my pager.

Firefighter SG, British Columbia



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