

Alberta drug deaths soar to highest level ever recorded

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Alberta is expected to break another annual record for toxic drug crisis deaths, with nearly 1,700 recorded in the first 10 months of last year.

The provincial government has been reporting these deaths since 2016. The latest figures it has released are from last October. According to those numbers, there had been 1,692 fatalities in the province from drug poisonings in the first 10 months of 2023, the majority linked to opioids.

If the figures from the last two months of the year continue at this pace, 2023 will surpass the previous deadliest year of the province's toxic drug crisis, 2021, when 1,869 fatal drug poisonings were recorded. (There were only about 1,500 drug fatalities in the first 10 months of 2021.)

Nearly 200 Albertans died last April, marking another bleak milestone: the highest number of deaths recorded in a single month.

Angie Staines, who runs 4B Harm Reduction Society, a street outreach organization in Edmonton, said the shock has worn off as the deaths continue to mount. She said there is a sense of desperation among people who use drugs. "It's really dark," she said. "It's just so apparent how everything is failing."

Some experts expected that fatal overdoses would decrease as pandemic restrictions were lifted, because people would be less likely to use drugs in isolation and reopened borders would influence the illegal market. Data from the first half of 2022 suggested this was happening.

But the drug supply is far from predictable, and has only become more toxic. More than 2,500 people died of illicit drug poisonings last year in British Columbia, the highest yearly death toll ever recorded in the province.

Across Canada, cities big and small are grappling with an unprecedented surge in overdoses. At the same time, the drug supply has become more complicated, with substances such as the animal tranquillizer xylazine becoming more prevalent. While naloxone can reverse opioid overdoses, it is not effective against non-opioids, such as xylazine and benzodiazepines.

In [Calgary](#) this week, the fire department announced it was launching a second medical response unit – a vehicle staffed by two firefighters – to help with increasing calls for medical emergencies, many of which are overdoses, and to free up fire engines. There were 6,889 opioid-related calls in 2023, a 45-per-cent increase compared to 2022.

Fire Chief Steve Dongworth said what he finds troubling is that there is no indication these type of calls will abate. Instead, he said, the curve is steepening. He added that most overdose calls are coming from downtown, among the unhoused population, but he said drug poisonings are becoming more visible in suburban areas.

In [Edmonton](#), Ms. Staines and members of her 4B team carry backpacks with sterile drug use and medical supplies. She said it used to take one to two doses of naloxone to reverse an overdose, but that now at least half of the people they encounter are being transported to hospitals unconscious. Seizures have also become more common.

“People aren’t getting up and walking away,” she said. “When they’re out for long periods of time, they’re being victimized. They’re having stuff stolen. They’re being sexually assaulted. So there is this new level of trauma being put on already traumatized people.”

She said the only way to address this complex problem immediately is through safer supply programs, which offer prescription alternatives to street drugs. But Alberta’s United Conservative Party government has repeatedly said that it will not implement such a program. Premier Danielle Smith has called British Columbia’s safer supply efforts ineffective.

Earlier this month, a report from B.C.’s health ethics team concluded that the province’s safer supply program is [ethically justified](#) as a means of reducing the risk of death, despite potential harm to the public.

The ethics team’s report was part of a broader review of safer supply led by B.C. Provincial Health Officer Bonnie Henry. Ms. Henry said in her own report that hydromorphone, an opioid distributed as part of safer supply, is commonly diverted beyond the intended group of users, because it doesn’t meet the needs of people who have developed high tolerances to opioids.

Hunter Baril, press secretary to Alberta Addictions Minister Dan Williams, said in a statement that Dr. Henry had “admitted what Alberta has been warning of for years” – that diverted drugs are “making their way into the street market and into the hands of youth,” and that the program is “clearly serving no benefit.”

The B.C. review did not include evidence of diversion to youth.

Alberta’s drug policy is focused on recovery, with large investments in addiction treatment spaces. Last April, The Globe and Mail reported that Alberta plans to introduce legislation for involuntary treatment of some drug users. The province has yet to do so. Meanwhile, the provincial government has reduced access to some harm reduction services, such as [supervised consumption sites](#).

Mr. Baril said the province has added 10,000 addiction treatment spaces, bringing the total to more than 29,000. He noted the government has opened two of its 11 planned recovery communities.

Nicole Luongo, a co-ordinator with the Canadian Drug Policy Coalition, said not all people who use drugs have substance use disorders, and that addiction treatment is not sufficient to reduce deaths overall. She added that treatment is not accessible in Alberta, because of lengthy waitlists and barriers to entry, such as requirements that patients be sober.