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## STATEMENTS

For Immediate Release  
2026HLTH0037-000404  
April 13, 2026

Ministry of Health

### **Minister's, provincial health officer's statements on the 10th anniversary of the toxic-drug crisis**

VICTORIA – Josie Osborne, Minister of Health, and Dr. Bonnie Henry, provincial health officer, have issued the following statements marking the 10th anniversary of the toxic-drug crisis being declared a public-health emergency:

#### **Josie Osborne, Minister of Health, said:**

“Today marks a decade of the toxic-drug public-health emergency, and over a decade of lives lost to increasingly unpredictable and highly toxic street drugs. This crisis is impacting our entire province, as well as Canada and North America, and has been filled with heartbreak, fear and grief for families, friends and colleagues. Each person lost was once a child, someone with a story and a future, a life cut short and a loss that families and communities will carry forever.

“Substance use often begins with experiences such as trauma, mental- and physical-health challenges, poverty, stigma and barriers to safe and stable supports. No one sets out intending to become addicted. That is why we continue to fight stigma and break down barriers to keep people alive and ensure they can access the help they need.

“Over the past decade, we have taken important steps to save lives, expand care and keep communities safe, recognizing that the toxic-drug crisis is complex and has no single solution. Working across government and with partners, these actions reduce substance-related harms, increase prevention and education, and expand access to treatment, supportive housing and other supports like Foundry centres, the Road to Recovery model, overdose-prevention services, take-home naloxone, drug checking, prescribed alternatives, opioid agonist treatment and digital tools that enable rapid response to overdoses.

“Together, these efforts alongside other factors, such as changes to the drug supply, have contributed to the declining number of deaths caused by toxic drugs from 2,315 in 2024 to 1,826 in 2025. The BC Centre for Disease Control regularly models the estimated number of death events averted due to harm reduction and opioid agonist treatment interventions. From January 2019 to October 2025, 49,560 death events, or 78% of potential death events, were prevented with take-home naloxone (39,960), observed consumption sites (17,060) and opioid agonist treatment (23,520).

“But even one death is one too many, and as this emergency continues to evolve, people are still experiencing harms associated with toxic-drug poisoning. This means our work is nowhere near done. On this solemn anniversary, we honour all lives lost to the toxic-drug crisis, and we mourn them alongside their families, friends and communities. We express our deep gratitude to the advocates, peer-support workers, counsellors and health-care workers, clinicians,

researchers and many others whose tireless efforts continue to confront this crisis, both on the front lines and behind the scenes. And we reaffirm our commitment to reducing stigma, expanding treatment and recovery options, strengthening harm reduction and meeting people where they are. Together, we continue to improve access to care and help more people stay safe and get the help they need.”

**Dr. Bonnie Henry, provincial health officer, said:**

“It has been 10 years since the toxic-drug crisis was declared a public-health emergency in B.C., and its impacts continue to be felt across every community in the province. This crisis continues to take a profound toll, affecting individuals, families and communities, and placing an ongoing strain on those who provide care and support, including front-line and peer-support workers.

“Over the years, the increasingly toxic and unpredictable street-drug supply has turned an already serious situation into something far more dangerous, putting people at extreme and increased risk. The emergency has been exacerbated by various factors, including the COVID-19 pandemic, gaps in the health-care system, housing instability and homelessness, poverty, the impacts of colonialism and racism, criminalization and stigma, as well as other determinants of health. People working in the trades, men and Indigenous people continue to experience a disproportionate number of overdoses and deaths, and many of those we are losing do not have substance-use disorders, underscoring how unpredictable and dangerous the drug supply has become.

“Evidence shows that harm-reduction and overdose-prevention services, including overdose-prevention sites, drug checking and access to alternatives to unregulated drugs, are saving lives. Now more than ever, it is essential that we continue to enable access to these services. At the same time, recovery looks different for everybody and there is no single approach that will end this crisis. Prevention and early intervention, harm reduction, medication-assisted treatment and other evidence-based treatment and recovery services and social supports must be available when people need and are ready for them.

“For these reasons, this crisis remains a public-health emergency that demands a continued response rooted in compassion, respect and evidence. Maintaining this declaration allows us to respond to the highly toxic and unpredictable, unregulated drug supply and strengthen a comprehensive approach to preventing drug poisonings.

“We must continue to take new and innovative approaches that meet people where they are, expanding access to safer alternatives to the unregulated drug supply alongside existing treatments. This work must be done in partnership with people with lived and living experience and through meaningful partnerships with Indigenous people, ensuring solutions are shaped by those most affected and grounded in respect, rights and self-determination.”

**Quotes:**

**Dr. Nel Wieman, chief medical officer, First Nations Health Authority –**

“Since 2016, the toxic-drug public-health emergency has changed the lives of many and continues to disproportionately affect First Nations communities across British Columbia. I must acknowledge the positive impact of First Nations-led harm-reduction efforts. The data shows that lives are saved through connection and culture and when programs and services are

community led. The FNHA will continue to provide culturally safe harm-reduction supports, as we walk hand in hand with First Nations people through this crisis.”

**Dr. Bernie Pauly, scientist, Canadian Institute for Substance Use Research, and community engaged scholar, University of Victoria –**

“We must continue to name this crisis and mourn the preventable deaths of community members, neighbours, friends and family. It is imperative we move from criminalized approaches to public-health approaches, to scale up evidence-based interventions that prevent toxic-drug deaths and move toward a regulated supply.”

A backgrounder follows.

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## BACKGROUND

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Ministry of Health

### **What to know about the actions taken to address the toxic-drug crisis since 2016**

The toxic-drug crisis continues to take a devastating toll in B.C., driven by a toxic, unpredictable and unregulated drug supply, and compounded by factors such as the COVID-19 pandemic, housing instability, poverty, stigma and barriers to care. Despite progress such as declining deaths in 2025, the crisis persists, with data showing at least 1,826 people lost to unregulated-drug toxicity in 2025.

Since the public-health emergency was first declared in 2016, more than 18,000 people in British Columbia have died from toxic drugs. Deaths continue to disproportionately affect Indigenous people, men and people working in the trades. Between January and June 2025, First Nations people died at 5.4 times the rate of other B.C. residents, with First Nations females dying at 8.5 times the rate of other females. Similarly, the BC Coroners Service found that 21-23% of people who died between 2022 and 2025 were currently or previously employed in trades, transport or as equipment operators.

Over the last decade, government has worked urgently to expand and strengthen mental-health and substance-use services throughout the continuum of care, including prevention, education, early intervention, harm reduction, treatment and recovery, supportive and complex-care housing, and aftercare.

A timeline of key actions taken since 2016 includes:

#### **2016:**

- Dr. Perry Kendall, B.C.'s public health officer, declared a public-health emergency as overdose deaths surged due to a toxic-drug supply.
- B.C. implemented supervised consumption services (SCS) and overdose prevention sites (OPS).
  - From January 2017 until the end of January 2026, there have been more than 6.6 million visits to OPS/SCS in B.C., 32,997 overdoses responded to and survived, and two deaths.
- Ten new additional Foundry centres were announced in British Columbia, including Abbotsford, Prince George, Kelowna, Campbell River and North Shore. (Phase 1 and Phase 2 of the Foundry expansion announced in 2015).

#### **2017:**

- The Ministry of Mental Health and Addictions launched a new overdose emergency response centre.
- The Province committed \$322 million over three years for overdose prevention, treatment and recovery, and public awareness.

- The Province invested \$10 million in surge funding, implementing 65 treatment beds and 50 outpatient spaces, including 20 youth live-in treatment beds and intensive outpatient treatment services at Traverse (Chilliwack).
- The BC Centre for Disease Control (BCCDC) take-home naloxone (THN) program expanded into community pharmacies.

#### **2018:**

- The Province funded community action teams in 18 communities most affected by the toxic-drug crisis.
- The Province and the Government of Canada funded approximately \$34 million from the Emergency Treatment Fund to improve treatment and care, and to contribute to improved health and social outcomes for people living with opioid-use disorder.
- The Province invested \$4.7 million for Our Place Therapeutic Recovery Community, which served more than 200 people in the Greater Victoria region in 2024-25.
- The Province signed a tripartite memorandum of understanding with Canada and First Nations Health Authority, committing \$20 million each in capital funding to renovate six First Nations treatment centres and build two new ones.
- The BC Coroners Service Death Review Panel report: A Review of Illicit Drug Toxicity Deaths, was released. To view the report, visit: [https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/death-review-panel/bccs\\_illicit\\_drug\\_overdose\\_drp\\_report.pdf](https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/death-review-panel/bccs_illicit_drug_overdose_drp_report.pdf)

#### **2019:**

- The Province created A Pathway to Hope, a road map for building a system of care for mental-health and substance-use in B.C.
- The Province implemented a distributed-drug sample collection model and health authorities gradually expanded their support of drug checking.
  - From Jan. 1, 2018, until Dec. 31, 2025, a total of 213,479 drug samples have been checked in B.C.
  - This includes 176,203 samples checked at BCCSU-partnered community drug-checking services, and 37,276 samples checked at Substance drug checking (University of Victoria).
- The Perinatal and Postpartum Substance Use Project was launched as a three-year initiative (2019-21), led by BC Women's Hospital and Health.
- The Province allocated approximately \$14 million for opioid agonist treatment (OAT) prescribers and integrated care teams to provide clinical outreach in communities.
- The Province began implementing Integrated Child and Youth (ICY) teams, which provide wraparound supports for youth struggling with mental health and substance use.
- Dr. Bonnie Henry, B.C.'s provincial health officer (PHO), released her report titled Stopping the Harm: Decriminalization of People Who Use Drugs in BC. To view the report, visit: <https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/reports-publications/special-reports/stopping-the-harm-report.pdf>

#### **2020:**

- The Province declared COVID-19 a public-health emergency, marking a significant

moment during the ongoing toxic-drug crisis in B.C.

- The Province rolled out prescribed safer-supply programs, providing regulated alternatives to unregulated drugs for people at high risk of overdose.
  - Since 2020, more than 17,000 people have accessed the program.
- A new, made-in-B.C. resource called LifeguardConnect (formerly Lifeguard App), launched to directly link people to emergency responders if an overdose occurs.
  - As of December 2025, LifeguardConnect has registered approximately 44,591 unique users in 170,753 all-time sessions.
  - Collectively, Lifeguard applications, including LifeguardLite, LifeguardConnect, and LifeguardConnect trials, are credited with saving 316 lives.
- The Province introduced new, strengthened regulations for supportive recovery homes under the Community Care and Assisted Living Act and the Assisted Living Regulation (B.C. Reg. 189/2019) and provided funding to help these homes remain operational during the pandemic.
- BCCSU created the Risk Mitigation Guidance, allowing prescribers to prescribe drugs to people with diagnosed substance-use disorders.
- Foundry expanded from 11 centres to 19, including Burns Lake, Comox Valley, Cranbrook, Langley, Squamish, Surrey, Port Hardy and Williams Lake.
  - Funding also supported Foundry Central Office operations, increased operating budgets for the 11 existing centres and the expansion of Foundry's capacity to deliver culturally safe and relevant services.

## **2021:**

- The Province provided more than \$50 million over three years to support 123 new youth substance-use (YSU) beds and enhance provincially accessible specialized beds.
  - As of January 2026, there were 210 community-based YSU beds in British Columbia. One hundred and fifteen YSU beds have opened since 2017, including 48 new beds since March 2024.
- In response to COVID-19, the Foundry BC mobile app was launched to enable access to services from anywhere in the province, particularly for youth who face barriers to accessing in-person care.
- Following on the Risk Mitigation Guidance, government released Access to Prescribed Safer Supply in British Columbia: Policy Direction aimed at separating people from the toxic-drug supply.
- The Province invested \$97 million in youth mental health, including funding for four additional Foundry centres, bringing the total to 23 centres implemented or in development provincewide.
- The Province expanded youth concurrent disorder clinicians, hiring an additional 19 full-time-equivalent (FTE) staff throughout regional health authorities.
- The Province provided Canadian Mental Health Association (CMHA) \$13.5 million to fund 105 treatment and recovery beds in the province.
- The Province invested \$132 million to enhance treatment and recovery services, including the addition of 195 net-new substance-use beds.
- The Red Fish Healing Centre opened in Coquitlam, adding 105 concurrent-disorder beds.
- The Province invested \$53 million for early psychosis intervention expansion to enable approximately 100 new FTEs and increase staff capacity at all sites, preventing youth struggling with severe mental illness from self-medicating and falling into addiction.

- The Province launched Crisis Response, Community Led teams to respond to people experiencing a mental-health or substance-use crisis.
  - The first team launched on the North Shore (November 2021), followed by Victoria and New Westminster (January 2023), Prince George (July 2024), Comox Valley (December 2024) and Kamloops (July 2025). The teams have responded to 15,530 calls to date.

## 2022:

- The Province announced a first-of-its-kind complex-care housing program, with the program's first sites in Surrey, Abbotsford and Vancouver.
- The Ministry of Mental Health and Addictions released the Adult Substance Use System of Care Framework, a technical policy document that articulates an overarching vision for a substance-use system of care.
- The Province launched a free, real-time text messaging drug-alert service for anyone in B.C. to receive notifications about substances of concern in their community.
  - As of February 2026, there are 10,687 subscribers. To sign up, text the word JOIN to 253787 (ALERTS).
  - Between June 1, 2022, and Dec. 31, 2025, there were 383 total alerts.
- The BC Coroners Service Death Review Panel report: A Review of Illicit Drug Toxicity Deaths, was released. To view the report, visit: [https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/death-review-panel/review\\_of\\_illicit\\_drug\\_toxicity\\_deaths\\_2022.pdf](https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/death-review-panel/review_of_illicit_drug_toxicity_deaths_2022.pdf)

## 2023:

- Ministry of Health supported the BC College of Nurses and Midwives to establish a new designation of certified practice for opioid-use disorder for registered nurses and registered psychiatric nurses.
- B.C. launched a three-year decriminalization pilot, removing criminal penalties for possession of small amounts of certain illicit drugs.
- The Province started fully covering OAT medications under Plan Z for B.C. residents with active Medical Services Plan coverage.
- The Province launched the Road to Recovery (R2R) model in Vancouver, including Access Central, a clinical phone line service that makes it easier for adults to get support for addictions.
- The Province provided more than \$88 million to CMHA-BC to open 202 treatment and recovery beds and extend funding for 105 beds that were implemented in 2021 (for a total of 307 CMHA beds in the province).
- The Province invested more than \$161 million over three years to increase substance-use services for young people, including crisis supports, culturally safe wraparound services, improved emergency room hospital-based care, and enhanced discharge planning and transition between acute care and community-based services.
  - It includes more than \$56 million over three years for 33 new and expanded non-bed-based substance-use services for youth throughout the continuum of care in all regions of the province.
    - 11,924 young people accessed the new and expanded services in fiscal year 2024-25
- The Province established the Indigenous Treatment, Recovery and Aftercare Services

program, allocating a portion of \$117 million to implement Indigenous-led treatment, recovery and aftercare services.

- It includes Orca Lelum treatment centre for youth, and a 32-bed treatment centre on Quadra Island delivered by We Wai Kai Nation.
- The Province invested nearly \$75 million in the expansion of Foundry, including the addition of 12 new centres, five satellite locations, increased operating support to deliver services at existing centres, enhancements to the Foundry BC app and support for the Foundry Learning Centre.
- The Province began implementing ICY teams in seven additional communities.
- The Province added 43 new aftercare clinicians over 2023-24 who are providing one-to-one long-term recovery support and relapse prevention.
- B.C.'s PHO released A Review of Prescribed Safer Supply Programs Across British Columbia: Recommendations for Future Action, reviewing the Prescribed Safer Supply (PSS) policy and recommending improvements to access, prescribing supports and risk mitigation. To learn more, visit: [https://www2.gov.bc.ca/assets/gov/health/managing-your-health/mental-health-substance-use/information-sharing/prescribed\\_alternatives\\_policy.pdf](https://www2.gov.bc.ca/assets/gov/health/managing-your-health/mental-health-substance-use/information-sharing/prescribed_alternatives_policy.pdf)
- The Province invested in eight new Mobile Integrated Crisis Response teams, which pair a police officer and a health-care professional to respond to mental-health and substance-use calls made to police.
  - The teams have dispatched responders to more than 14,000 calls to date.
- Over the years, the Ministry of Health has run ongoing public awareness campaigns about the toxic-drug crisis and where to get mental-health and substance-use support.
- The Province launched the HelpStartsHere campaign, using TV, radio, outdoor advertising, digital channels and partnerships (including the BC Lions and Vancouver Canucks) to bring awareness to supports for substance use and addiction, and hopeful messages of recovery.

## 2024:

- The Province helped establish seven Recovery Community Centres “junctions” in Vancouver Coastal region, Fraser, Interior and Northern Health.
- The Province provided \$49 million over three years to further support existing harm-reduction initiatives at OPS throughout the province, drug checking and naloxone kit distribution.
  - From January 2019 until October 2025, 17,060 potential death events were prevented with observed consumption sites.
- The PHO released Alternatives to Unregulated Drugs: Another Step in Saving Lives, building on the 2023 PSS review. To learn more, visit: [https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/reports-publications/special-reports/alternatives\\_to\\_unregulated\\_drugs.pdf](https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/reports-publications/special-reports/alternatives_to_unregulated_drugs.pdf)
- The Province announced a short-term pilot project to distribute nasal naloxone kits through the BCCDC THN program.
- The Province invested \$117 million to sustain mental-health and addictions treatment and recovery beds.
- The Province launched the Provincial Virtual Opioid Agonist Treatment Line.
- The Province began implementing ICY teams in eight additional school districts.

**2025:**

- The Province implemented provincewide new minimum service standards for overdose-prevention services.
  - These support quality, consistency and accessibility for fixed and mobile community-based OPS in B.C., as well as all hospital-based OPS.
- A new Prescribed Alternatives (PA) policy (Access to Prescribed Alternatives in BC) was published requiring that PA-medication consumption occurs in the presence of a health professional, except in specific exceptional circumstances. To learn more, visit: [https://www2.gov.bc.ca/assets/gov/health/managing-your-health/mental-health-substance-use/information-sharing/prescribed\\_alternatives\\_policy.pdf](https://www2.gov.bc.ca/assets/gov/health/managing-your-health/mental-health-substance-use/information-sharing/prescribed_alternatives_policy.pdf)
- The Province provided more than \$500 million to support and sustain addictions treatment and recovery programs established through previous budgets.
  - It includes R2R, Foundry, supports for children and youth, and Indigenous-led treatment, recovery and aftercare services.
- The Province invested \$2 million in annual funding for the expansion of the PreVenture program in schools throughout the province.
- Access Central, a key part of B.C.'s R2R model, launched in Fraser and Interior Health.

**2026:**

- Access Central, a key part of B.C.'s R2R model, launched in Island Health with the service coming to northwestern B.C. later year.
- The Ministry of Health announced five new Foundry satellite locations will be opening, which are extensions of Foundry centres in an adjacent town or neighbourhood, within the same health authority and operated by the same lead agency.
  - As of April 2026, 35 Foundry centres are open or in development in B.C.
- B.C.'s three-year decriminalization pilot concluded after the Province announced it will not be renewed.
- The Province announced a \$50-million investment to expand access to nasal naloxone through the BCCDC naloxone program.
- As of April 2026, the Province added more than 829 publicly funded substance-use treatment and recovery beds in the province, for a total of 3,875.
- To date, complex care housing services are in place for more than 600 people, with government and BC Housing working to build new housing for people living with addictions issues.

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