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mumsDU

moms united and mandated to saving the lives of Drug Users

because a substance user could be anyone's child

Deputation to Toronto Public Health re Supervised Injection Services in Toronto March 21, 2016

Good afternoon.

Today, marks the 43rd month since my daughter, Jac, died. She was an opioid addict, lived on the streets for a number years and did what she had to do in order to survive. As an addict she was ostracized by her partner, her children, her siblings, her community and by me, her mother.

Most people would think that the hardest thing I've ever had to face was her death; the death of a child; the death of my only girl. However, that's not it at all.

The hardest thing I've had to face in my life is realizing how my ignorance towards my daughter's addiction cost me years with her that I will never get back. There are no 'do-overs' when your child is dead! Now I can only share my experience and what I've learned since, so that other parents can take something from it.

I define my ignorance this way: I lacked awareness, experience with, and knowledge about the behaviour of addiction and those in it. Worse than that though, I wouldn't allow myself to be informed. Like many others, my opinion was set in stone and my mind was closed to learning anything that told me otherwise.

I was fortunate though, I was one of the lucky parents, who near the end, got to be by the side of my daughter before she died. I sat with her while she fought off deadly infections, withdrawal from opioids and the shame and stigma thrown at her by those, who like me, thought they knew everything they needed to know about addiction.

I was the lucky parent who was blessed with a daughter who was brave enough to stand up to her mother and teach her the realities of what it was like to be an addict in an active addiction. Most parents simply get the call that their child has died from an overdose or disease related to their injection drug use. I do understand how fortunate I am and for that reason, I continue to advocate in my daughter's name in order to ensure that other's in addiction and their families and loved ones are educated in those realities. I do it so that lives are not needlessly lost and so that other mother's and father's do not endure the same fate as my daughter and I have.

In the 43 months since my daughter left me I have learned:

- that no one wakes up one morning and decides that that day will be the day they become an addict, but they do wake up wanting to self medicate for emotional and/or physical pain. I've learned that psychiatric diagnosis and treatment for those of us who can afford it and for those of us who can maneuver in our healthcare system in order to obtain it is difficult at best for even a sober person. I don't know how we can expect someone in active use to be able to find their way to it without someone to advocate for them. The opportunity to connect to mental healthcare can be addressed through Supervised Injection Services.
- I have learned that effective withdrawal treatment specific to injection drug use, is largely misunderstood, yet we continue to wonder why those who use these substances don't just detox their way out of it. How can we ask that of someone when we have no understanding of what withdrawal from opioid use does to someone's mind and body? Supervised Injection Services can provide substance users with the opportunity to connect with opioid specific withdrawal treatment.
- I've learned that there is generally little trust between someone in active addiction and the society that they live in. How can there be when we have treated this condition by demoralizing, criminalizing and believing addiction is a willful behaviour. We know that this model we have used for decades to treat problematic substance use has been a colossal failure. Isn't it time for a new approach? If I were to turn the wheel of my car and ended up hitting a tree would I not see the problem and turn it another way the next time around? A public health and safety model is simply good common sense and we are in desperate need for a new approach to an old issue.
- I've learned that you don't have to be a problematic substance user in order to die from injecting drugs. Illicitly manufactured Fentanyl and a relatively new substance called W-18 (which is 10,000 times more powerful than morphine) is now commonly showing up as the cause of overdose and overdose death in its victims. Substance users are no longer aware of what is

in the drugs they are using. There is only a narrow window of time between an overdose and irreversible brain injury or death. Supervised Injection Service providers can be prepared to administer the opioid overdose reversal drug, naloxone, and seek further medical assistance in this situation.

- HIV and AIDS can be contracted from sharing needles. Veins collapse, injection sites abscess, or like in my daughter's case - flesh eating disease occurs - due to shooting up in unsanitary conditions. Supervised Injection Facilities can screen for disease, teach proper vein care and direct the user to appropriate medical care as needed.
- I've learned that the people who stand strong on the "Not In My Back Yard" slogan are the very people who are seeing it in their back yard. They fear a rise in crime rates, lower property values, health risks due to improperly discarded needles and the innocence of childhood being affected. Supervised Injection Services is not about promoting or condoning drug use. It is simply about keeping both the community and the substance user safe during substance use. For the communities that these facilities are in it means a reduction of users who will use in public places; clean facilities and sterile instruments that can be properly discarded afterwards; connection to health and welfare services and timely response to overdoses rather than lifeless bodies in the alleyway. The communities' fear is simply a lack of knowledge or allowing themselves a true education and awareness about the services which Supervised Injection facilities will provide for the benefit of both the community and the substance user.
- I have learned that it can be anyone's child who miss-uses a substance. Addiction does not discriminate between the rich and the poor; the unknown and the famous; the colour of your skin or the amount of education you receive. It is however, apparent that it happens in those who feel that they have nothing left to live for. Could it be that they feel that way because we have taken away their self worth. How can we expect anything different from them if we are so unwilling to see anything different in them. There is always hope for recovery from problematic substance use, unless - like my daughter - they are dead, but just how much is saving the life of a substance user worth to us? For 43 months to the day I can tell you that there hasn't been a morning that I haven't woken up answering that very question. My daughter's life was worth more than we afforded her.

In closing, let me say that I know Supervised Injection Services will not only provide safe and sanitary conditions to inject drugs in and promote safety within the community, but it will provide a humane and human connection that is all too often lacking in a substance user's life.

Respectfully,

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