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**The Opioid Crisis in Canada**

***Iron Workers International Workplace Safety Series***

For many years talking about mental health wellness at work was generally considered off-limits. Today, the stigma of discussing mental health, suicide prevention and addictions is changing and the Iron Workers International is working to be a leader in this area of safety and health.

In recent years, Canada has been faced with an opioid crisis. ¹The COVID-19 outbreak is worsening the already deadly and ongoing public health crisis of opioid overdoses and death. It is having a tragic impact on people who use substances, their families, and communities across Canada. People who use substances, such as opioids, cocaine, and methamphetamine, are experiencing a number of increased risks, with several jurisdictions reporting higher rates of fatal overdoses and other harms.

Pain is one of the most common reasons for Canadians to seek health care, with 1 out of every 5 adults in Canada experiencing chronic pain. Opioids such as codeine, oxycodone, and hydromorphone, are commonly prescribed for pain treatment. Canada is the second-largest per capita consumer of opioids in the world, although a [Canadian Institute for Health Information (CIHI)](https://www.cihi.ca/en) report released in June 2018 showed decreases in opioid prescribing.

**19,355 apparent opioid toxicity deaths between January 2016 and September 2020**\*

• 1,705 apparent opioid toxicity deaths occurred between July and September 2020, similar to April to June 2020 (1,646). This number represents the highest quarterly count since national surveillance began in 2016. This number also represents a 120% increase from the same time frame in 2019 (776 deaths).

• In the six months following the implementation of the COVID-19 prevention measures (April to September 2020) there were 3,351 apparent opioid toxicity deaths, representing a 74% increase from the six months prior (October 2019 to March 2020 – 1,923 deaths).

• A number of factors have likely contributed to a worsening of the overdose crisis, including the increasingly toxic drug supply, increased feelings of isolation, stress and anxiety and limited availability or accessibility of services for people who use drugs.

• 96% of deaths from January to September 2020 were accidental (unintentional).

Other opioid-related harms, such as hospitalizations for opioid use disorders and neonatal withdrawal symptoms, have also been increasing across the country.

While many of these harms may be due to the use of illicit opioids, such as heroin or fentanyl, prescription opioids are also contributing to the public health issue. Harms can occur not only to people prescribed opioids but also to people without prescriptions, through diversion by family or friends, improper disposal, illegal purchases, and theft.

**Fentanyl and fentanyl analogues continue to be major drivers of the crisis**

* 82% of accidental apparent opioid toxicity deaths involved fentanyl in 2020 (January to September).
* The majority of fentanyl detected in opioid toxicity deaths was non-pharmaceutical (99%).
* 86% of accidental apparent opioid toxicity deaths from January to September 2020 involved a non-pharmaceutical opioid.

**Why are construction workers at risk?**

* The construction industry has one of the highest injury rates compared to other industries
* Opioids are often prescribed to treat the pain caused by these injuries
* Long-term opioid use can make people more sensitive to pain and decrease the opioid’s pain-reducing effects

**How do we reduce risk of injury?**

* Follow safe work procedure/practice for tasks performed
* Complete risk hazard assessments
* Bring unsafe work concerns to the attention of your supervisor

If you are injured, speak with your doctor about non-addictive medications or physical therapy options.

Opioids should be the last option for treatment.

**If you know someone who needs help, lend your support, listen, and show you care.**

**Contact your Iron Workers Local Union for**

***Employee and Family Assistance Program* information**

References:

¹Government of Canada-Opioid-and-Stimulant-related Harms in Canada. Ottawa: Public Health Agency of Canada; (March 2021)

<https://health-infobase.canada.ca/substance-related-harms/opioids-stimulants/#fn2>

\*Manitoba data from October 2019 to September 2020 were not available

<https://health-infobase.canada.ca/src/doc/SRHD/UpdateDeathsMarch2021.pdf>

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